Meds Alliance Journal of Medicine and Medical Sciences



Original Investigation

Article history:

Formulation Optimization and in-vitro Evaluation of Diclofenac Fast Disintegrating Tablets

Sumit Shrestha^{1*} | Sujata Bhandari¹

1 Department of Pharmacy, Charak Institute of Health Science, Pokhara-11, Kaski, Nepal

ARTICLE INFO

ABSTRACT

Received: 5 May 2023 Revised: 15 June 2023 Accepted: 26 June 2023 *Correspondence: Mr. Sumit Shrestha. Department of Pharmacy, Charak Institute of Health Science, Pokhara-11, Kaski, Nepal. E-mail: summit.stha13@gmail.com 0009-0002-8645-5964 Citation: Shrestha S, Bhandari S. Formulation Optimization and in-vitro Evaluation of Diclofenac Fast Disintegrating Tablets. MedS. J. Med. Sci. 2023;3(5):30-34.

INTRODUCTION: Fast disintegrating tablets (FDTs) are solid dosage forms that disintegrate and dissolve in the mouth without the need for water within a matter of seconds. In the present study, a fast-disintegrating tablet of diclofenac sodium was prepared using WOWTAB (without water) technology, and its in-vitro characters were analyzed to prepare an optimum formulation. MATERIALS AND METHODS: Diclofenac sodium and its reference standard along with other excipients were collected. Softer tablets with hardness ranging from 1.493 to 1.522 kg/cm2 were prepared using Plackett-Burman (PB) design and central composite design (CCD). Various physicochemical parameters and in-vitro quality parameters of formulations were evaluated using standard methods. RESULTS: The disintegration time of the formulations ranged from 76 to 126 seconds. The in-vitro drug release was found to be from 96.31 to 99.94%. The study of contour plot and surface plot indicated that formulation with maltose concentration of 5 mg and mannitol concentration of 90 mg would produce an optimized formulation of diclofenac fast disintegration tablet with a rapid disintegration time of 1.2 to 1.4 minutes and dissolution percent at 30 minutes of 99.5 to 100%. CONCLUSIONS: Diclofenac FDT was prepared based on WOWTAB technology. Formulation containing maltose 5 mg and mannitol 90 mg would be an optimized formulation of diclofenac FDT, with a rapid disintegration time of 1.2 to 1.4 minutes and dissolution percent at 30 minutes of 99.5 to 100 %.

Keywords: Diclofenac sodium, fast disintegrating tablet, WOWTAB, optimized formulation



This is an open access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. **DOI**: https://doi.org/10.3126/mjmms.v3i5.60041

INTRODUCTION

Fast disintegrating tablets (FDTs), also called mouth dissolving tablets (MDTs) are defined as solid dosage forms designed to dissolve in the mouth without water within seconds [1]. These dosage forms disintegrate instantly in the mouth and thus results in quick absorption and fast onset of clinical effect [2]. They are ideal for pediatric, geriatric, bedridden, and developmentally disabled patients and patients with persistent nausea, traveling, or little or no water access [3]. Various manufacturing techniques used for preparing MDTs are lyophilization, moulding, direct compression, spray drying, sublimation, and mass extrusion [4]. The direct compression method is the simplest and most cost-effective technique. The disintegration and dissolution of directly compressed tablets depend on the disintegrants used or any watersoluble excipients [5,6]. In the current study, WOWTAB technology was used for preparing diclofenac FDTs using mannitol as a low mouldability

6

saccharide and maltose as a high mouldability saccharide. WOWTAB technology involves coating low mouldability saccharides with high mouldability saccharides to give tablets adequate hardness and quick disintegration in the mouth [3,7]. Diclofenac traditional sodium is а non-steroidal antiinflammatory (NSAID), most extensively employed in rheumatoid arthritis and osteoarthritis, bursitis, ankylosing spondylitis, toothache, dysmenorrhoea, post-traumatic and post-operative inflammatory conditions [8]. It belongs to the BCS class II category and is an ideal candidate for FDTs [9]. Diclofenac is only 50% absorbed systemically and its peak plasma concentration is achieved approximately 1 hour after oral administration, which suggests the need for fast disintegrating tablet dosage form of diclofenac [3,10,11]. So, the present study is undertaken to prepare a fast-disintegrating formulation that will give rapid and more effective pain-relieving action.

MATERIALS AND METHODS

Active ingredient and excipients::

Diclofenac sodium and its reference standard (Potency: 99.45% and loss on drying: 0.22%), mannitol, maltose, lactose, saccharin, menthol flavor, and magnesium stearate were obtained from Chemidrug Industries Pvt. Ltd., Thankot, Kathmandu.

Chemical and reagents:

Phosphate Buffer pH 6.8

250 ml 0.20 M potassium dihydrogen phosphate was taken in a 1000 ml volumetric flask and added 100 ml 0.20 M sodium hydroxide. Volume was made up to 1000 ml with distilled water to prepare phosphate buffer pH 6.8 [12].

Simulated Salivary Fluid

2.38 g Disodium hydrogen phosphate (Na₂HPo₄), 0.19 g Potassium dihydrogen phosphate (KH₂PO₄), and 8.00 g Sodium chloride (NaCl) were dissolved in 1 liter of distilled water to prepare simulated salivary fluid, pH adjusted to 6.76 with phosphoric acid [13].

Standard Calibration Curve

A 100 mg reference standard of diclofenac sodium was taken and dissolved in 100 ml of pH 6.8 phosphate buffer to prepare a stock solution. 10 ml was pipetted out and diluted up to 100 ml. Again, 1.0, 2.0, 3.0, 4.0, and 5.0 ml were pipetted out and diluted up to 10 ml. The absorbance was measured using an ultraviolet (UV) spectrophotometer at 283 nm [8].

Formulation of diclofenac FDT

Diclofenac fast disintegration tablets were prepared by the wet granulation method. Twelve formulations based on the Plackett-Burman (PB) design and thirteen formulations based on the central composite design (CCD) were prepared using Minitab version 16 software. All the ingredients were weighed accurately, sieved through sieve number 40, and mixed together geometrically. The granules formed were dried at 500°C for 20 minutes and then compressed using a Labpress 10-station tablet compression machine to prepare a fast disintegrating diclofenac tablet. The preparation and in-vitro evaluation of diclofenac FDTs were carried out at Chemidrug Industries Pvt. Ltd., Thankot and Lomus Pharmaceuticals Pvt. Ltd., Kathmandu.

Pre-compressional analysis of powder mixture:

Carr's Index: An amount of powder equivalent to 5.0 ml was weighed, taken in a glass tube, and bulk volume determined. After tapping the tube 100 times, the tapped volume was measured, and Carr's index (I) was determined. Values of "I" below 15 % usually give

rise to good flow characteristics and above 25 % indicates poor flowability [14].

Hausner's Ratio: The Hausner's ratio is an indirect index of ease of powder flow. A lower Hausner ratio (<1.25) indicates better flow properties than higher ones (>1.25) [15,16].

Wetting Time: A piece of tissue paper was folded double and was placed in a Petri plate containing 6 ml of simulated salivary fluid. The tablet was placed on the paper and the time for complete wetting was measured [17].

In-vitro Analysis

Weight Variation: Twenty tablets were selected at random and the average weight was determined. Then, individual tablets were weighed and compared with average weight [18].

Friability: Pre-weighed samples of twenty tablets were placed in the Roche friabilator and were subjected to 100 revolutions, the final weight was measured, and friability was determined [18].

Hardness: Hardness was measured using a Monsanto tablet hardness tester (Electrolab). Six tablets were selected randomly from each batch and the hardness of each was measured [16].

In-vitro Disintegration test: Electrolab disintegration tester was used to determine the disintegration time of the formulations. Six randomly selected tablets were selected at random and disintegration time was determined using phosphate buffer pH 6.8 as the medium [19]. Minitab software was used to determine the effect of excipients on the disintegration time.

Drug Assay: Assay was carried out to determine the actual drug content in the tablet. A 20 µg solution of standard and test sample of diclofenac were prepared and the absorbance of both solutions was measured at 283 nm [19].

In-vitro Drug Release: In-vitro drug release studies were carried out for all the formulations using a tablet dissolution test apparatus (USP XXII paddle type) at 50 rpm and phosphate buffer pH 6.8 was used as the dissolution medium. 1 ml sample was withdrawn at 5, 10, 15, 20, 25, and 30 minutes and diluted to prepare a 20 µg solution. The final solution was filtered and analyzed for drug release using UV а spectrophotometer (Shimadzu) at 283 nm [19]. Statistical analysis:

The data was analyzed using SPSS software, and descriptive statistics (mean, SD, frequency and percentage) were applied.

RESULTS Standard Calibration Curve

©2022 The Authors. MJMMS: An International Publication of Centre for Clinical Research and Community Health (CC-REACH) by MedSpirit Alliance Ltd.

Shrestha et. al.

The absorbance measured for the serial strength of diclofenac sodium reference standard by UV/Visible spectrophotometer at 283 nm is shown in figure 1.

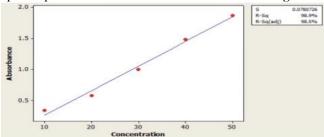
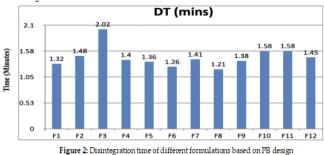


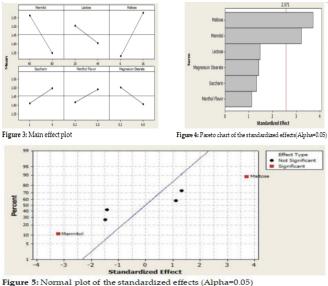
Figure 1: Standard calibration curve of diclofenac sodium (y = -0.1370 + 0.03970x) Figure 1 shows a fairly linear relationship between the concentration (μ g/ml) and absorbance with the R² value of 98.90%. This indicates that the absorbance increases linearly with the increase in concentration. This validates the assay procedure used to determine the drug content of each formulation.

In-vitro disintegration test



All formulations except F3 disintegrated within the limit of two minutes. The disintegration time for F3 was 2.02 minutes, which may be due to the low amount of low mouldability saccharide, mannitol (40 mg), and high amount of high mouldability saccharide, maltose (16 mg).

Determination of factors influencing disintegration time



The main effect plot, Pareto chart, and normal chart show that mannitol and maltose influence the disintegration time significantly while the other ingredients have an insignificant role in the disintegration time of the formulation at a 95% confidence interval. The disintegration time of tablet increases with an increase in maltose concentration and a decrease in mannitol concentration. **In-vitro Analysis**

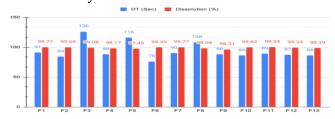


Figure 6: Disintegration time and dissolution of formulations based on CCD design

Table 1 Physico-chemical properties of CCD formulations													
Formula tion Code	Average Weight (mg) n = 20	±SD	Average Thickness (mm) n = 6	±SD	Average Diameter (mm) n = 6	±SD	Average Hard ness (Kg/cm ²) n = 6	±SD	Friability (%)	Assay n = 2	±SD	DT (Sec)	Dissol tion (%)
F1	198.9	5.820	1.904	0.021	6.39	0.022	1.495	0.080	0.85	99.55	0.375	91	99.77
F2	199.8	3.795	1.909	0.02	6.4	0.014	1.498	0.048	0.92	99.41	0.700	84	99.69
F3	199	2.749	1.907	0.018	6.4	0.014	1.498	0.047	0.7	100.77	0.269	126	99.08
F4	199	1.826	1.913	0.022	6.4	0.014	1.522	0.037	0.4	98.64	0.396	88	98.17
F5	200	4.595	1.902	0.021	6.4	0.025	1.505	0.034	0.55	96.31	1.379	116	97.45
F6	198.3	4.448	1.914	0.023	6.4	0.008	1.478	0.038	1.1	100.8	2.588	76	99.39
F7	200	2.211	1.900	0.030	6.4	0.014	1.507	0.037	0.65	97.92	1.739	90	99.77
F8	200.4	2.503	1.898	0.040	6.4	0.014	1.498	0.021	0.25	101.86	1.994	108	98.04
F9	200.1	1.197	1.916	0.017	6.4	0.021	1.493	0.027	0.19	102.59	2.008	88	96.31
F10	199.2	1.874	1.903	0.015	6.4	0.008	1.503	0.033	0.1	101.47	1.676	86	99.62
F11	199.2	2.781	1.904	0.010	6.4	0.014	1.507	0.033	0.1	99.81	0.792	89	99.94
F12	199.9	1.912	1.885	0.054	6.4	0.028	1.500	0.046	0.35	99.49	0.629	87	99.24
F13	199.7	1.703	1.906	0.032	6.4	0.025	1.498	0.021	0.25	98.00	1.400	86	98.39

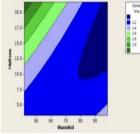
©2022 The Authors. MJMMS: An International Publication of Centre for Clinical Research and Community Health (CC-REACH) by MedSpirit Alliance Ltd.

Shrestha et al.

Table 1 shows various physicochemical properties of the CCD formulations such as weight variation, thickness, diameter, hardness, friability, assay, disintegration time, and dissolution. Softer tablets with hardness ranging from 1.493 to 1.522 kg/cm2 were prepared. The result is similar to the one obtained by Dor JN et al [7]. The study found that low mouldable sugar-coated with high mouldable sugar gave rise to tablets with a hardness of 1.0 - 2.0 kg/cm2.

All the formulations disintegrated within the specified limit of two minutes except for formulation (F3) whose disintegration time was found to be 2.06 minutes, which may be due to the lower amount of low mouldability saccharide, mannitol (50 mg), and a higher amount of high mouldability saccharide, maltose (19 mg). The in-vitro drug release after 30 minutes was found to range from 96.31 % to 99.94%. Dissolution was within the pharmacopoeial limit. The disintegration time was slightly higher than the one found by Dor JM et al [7].

Optimization of formulations Contour and surface plot for disintegration time



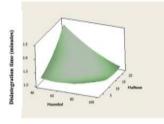


Figure 7: Contour plot for disintegration time of CCD formulations

Figure 8: Surface plot for disintegration time of CCD formulations

The contour and surface plot of disintegration shows that as the concentration of maltose increases, disintegration time increases rapidly with an increase

DISCUSSION

The study was carried out to prepare an optimized formulation of diclofenac FDT. The disintegration time obtained from the twelve PB formulations was found slightly higher than that obtained in the study by Dor JM et al. The study showed that low mouldable sugarcoated with high mouldable sugar gave a fast disintegration time of 1-40 seconds [7]. The disintegration time obtained in the present study was in the range of 1.21 to 2.02 minutes. The effect of formulation excipients on disintegration time was determined using the main effect plot, Pareto plot, and in maltose concentration and a decrease in mannitol concentration. Analysing the plots suggests that a formulation containing a mannitol concentration of 80 mg or more and a maltose concentration of 5.0 mg or less has an optimum disintegration of 1.5 or fewer minutes.

Contour and surface plot for dissolution

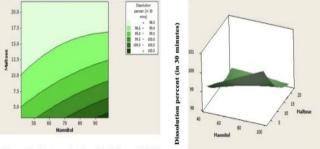


Figure 9: Contour plot for dissolution of CCD formulations

Figure 10: Surface plot of dissolution of CCD formulations

The contour and surface plot for dissolution show that the drug release from the tablet increases with the increase in the concentration of mannitol and the decrease in the concentration of maltose. The best drug release of 99.5% to 100% is shown by the dark green area in the plot that is obtained when the concentration of maltose is 5 mg or below and that of mannitol is 60% to 90%.

Thus, from the surface plot and contour plot of disintegration and dissolution, a formulation with a maltose concentration of 5 mg and mannitol concentration of 90 mg would produce an optimized formulation of diclofenac fast disintegration tablet with a rapid disintegration time of 1.2 to 1.4 minutes and dissolution percent at 30 minutes of 99.5 to 100%.

normal plot. All the plots indicate that disintegration time decreases with an increase in mannitol concentration and a decrease in maltose concentration, which is similar to the study carried out by Mizumoto et al. [20]. Similarly, with the use of mannitol and maltose, softer tablets with hardness ranging from 1.493 to 1.522 kg/cm2 were prepared, which is similar to the results obtained by Dor JN et al. The study found that low mouldable sugar-coated with high mouldable sugar gave rise to tablets with a hardness of 1.0 - 2.0 kg/cm2 [7].

CONCLUSIONS

Diclofenac fast disintegrating tablets were prepared based on WOWTAB technology, using mannitol as a low-mouldability saccharide and maltose as a highmouldability saccharide. The evaluation of the effect of formulation excipients on disintegration time shows that the main factors influencing the disintegration time at a 95% confidence interval was mannitol and maltose. Evaluation of CCD formulation indicated that the disintegration time of the formulations ranged from 76 to 126 seconds and in-vitro drug release was found to be from 96.31 to 99.94%. From the contour plot and surface plot, formulation with maltose concentration of 5 mg and mannitol concentration of 90 mg was found to produce an optimized formulation of diclofenac fast disintegration tablet with a rapid disintegration time of 1.2 to 1.4 minutes and dissolution percent at 30 minutes of 99.5 to 100 %.

contributed equally for the concept and design, statistical analysis,

writing of the manuscript, data collection, revision and editing. All authors have read and agreed with the contents of the final

Data Availability: Data will be available upon request to

manuscript towards publication.

corresponding authors after valid reason.

ADDITIONAL INFORMATION AND DECLARATIONS

Acknowledgements: Authors I am very grateful to all the people who helped me dearly during this research work

Competing Interests: The authors declare no competing interests. **Funding:** No funding was received for this research.

Author Contributions: Conceptualization, writing - original draft, writing - review and editing, supervision: SS.; writing - review and editing, data collection and analysis: SB. All authors have

REFERENCES

- 1.Chauhan VK, Sharma RK, Umalkar DG, Singh LP, Shah K, Pagi K. Mouth Dissolving Tablets: An Overview. *Journal of Pharmaceutical and Biomedical Sciences*. 2011;5(8):1-6.
- 2.Bhowmik D, Krishnakanth CB, Chandira RM. Fast Dissolving Tablet: An Overview. *Journal of Chemical and Pharmaceutical Research*. 2009;1(1):163-177.
- **3.**Chang RK, Xiaodi B, Beth A, Couch RA. Fast-dissolving tablets. *Pharm Technol*. 2000;24(6):52-58.
- **4.**Shukla D, Chakraborty S, Singh S, Mishra B. Mouth Dissolving Tablets I: An Overview of Formulation Technology. *Scientia Pharmaceutica*. 2009;77:309-26.
- **5.**Gajare GG, Bakliwal SR, Rane BR, Gajrathi NA, Pawar SP. Mouth Dissolving Tablets: A Review. *International Journal of Pharmaceutical Research and Development*. 2011;3(6):280-96.
- **6.**Watanbe Y, Koizumi K, Zama Y, Kiriyama M, Mastumoto Y, Mastumoto M. New compressed tablet rapidly disintegrating in saliva in the mouth using crystalline cellulose and a disintegrant. *Bio Pharm Bull.* 1995;18(9):1308.
- 7.Dor JM, Fix JA, Johnson MI. A new in vitro method to measure the disintegration time of a fast disintegration tablet. *Proc Int Symp Control Rel Bioact Mater.* 1999;26:939-40.
- 8.Kayastha RR, Bhatt NM, Pathak NL, Chudasama ARH, Darediya AA. Formulation and Evaluation of Fast Disintegrating Tablet of Diclofenac Sodium. International Journal of Pharmaceutical Research and Development. 2011;3(6):17-22.

- **9.**Karthikeyan M, Umarul MAK, Megha M, Shadeer HP. Formulation of diclofenac tablets for rapid pain relief. *Asian Pacific Journal of Tropical Disease*. 2011:1-4.
- **10**.Dobetti L. Fast melting tablets: Developments and technologies. *Pharm Tech*. 2001;56:44.
- **11.**Diclofenac: Description and Clinical Pharmacology
- http://www.druglib.com/druginfo/diclo fenac/description_pharmacology/ (assessed on 9th September 2023).
- **12.**BP 2007, Vol II, London: British Pharmacopeia office.
- **13.**Sameer GL, Yu YY, Banga AK. Effects of disintegration-promoting agent, lubricants and moisture treatment on optimized fast disintegrating tablets. *International Journal of Pharmaceutics*. 2009;365:4-11.
- 14.Eugene FF, Timothy HA. Preformulation. In: Lachman L, Liberman HA, Kanig JL. The Theory and Practice of Industrial Pharmacy (3rd ed) Varghese publishing house, Mumbai 1987;pp.171-196.
- **15.**Lindberg N, Palsson M, Phil A, Freeman R, Freeman T, Zetzener H, Enstad G. Flowability measurements of pharmaceutical powder mixtures with poor flow using five different techniques. *Drug Dev Ind Pharm.* 2004;30(7):785-91.
- **16.**Modasiya MK, Lala II, Prajapati BG, Patel VM, Shah DA. Design and Characterization of Fast Disintegrating Tablets of Piroxicam. *International Journal of Pharm Tech Research*. 2009;1(2):353-57.
- **17.**Dandag P, Halakatti P, Mastiholimath V, Patil M, Manvi F. Rapidly disintegrating domperidone tablets.

Indian drugs. 2006;43(7):594-97.

- **18.**Chandira MR, Sharma VB, Kumudhavalli MV, Benerjee J. Formulation and evaluation of mouth dissolving tablets of the etoricoxib. *Pak J Pharm Sci.* 2010;23(2):178-81.
- **19.**Gudas GK, Manasa B, Rajesham VV, Kumar SK, Kumari JP. Formulation and evaluation of fast dissolving tablets of Chlorpromazine HCl. *Journal of Pharmaceutical Science and Technology*. 2010;2(1):99-102.
- **20.**Mizumoto T, Masuda Y, Yamamoto T. Formulation design of a novel fastdisintegrating tablet. International Journal of Pharmaceutics 2005;306:83-90.Morley, D.; Till, K.; Ogilvie, P.; Turner, G. Influences of gender and socioeconomic status on the motor proficiency of children in the UK. *Hum. Mov. Sci.* 2015; 44:150–56.

Publisher's Note

MJMMS remains neutral with regard to jurisdictional claims in published materials and institutional affiliations.

MC .

CCREACH will help you at every step for the manuscript submitted to MJMMS.

- We accept pre-submission inquiries.
- We provide round the clock customer support
- Convenient online submission
- Plagiarism check
- Rigorous peer review
- Indexed in NepJOL and other indexing services
- Maximum visibility for your research
- Open access

Submit your manuscript at: Website: <u>www.medspirit.org</u> e-mail: <u>editormjmms@gmail.com</u>

è