



IJPPR

INTERNATIONAL JOURNAL OF PHARMACY & PHARMACEUTICAL RESEARCH
An official Publication of Human Journals

ISSN 2349-7203



Human Journals

Research Article

July 2023 Vol.:27, Issue:4

© All rights are reserved by Kiran Kumar et al.

Development and Assessment of Mouth-Dissolving Tablets of Nutritive Complements

	
Kiran Kumar*¹, Adkar Prafulla Prakash²	
<i>1Research scholar Sunrise University, Alwar, Rajasthan, India</i>	
<i>2Research Guide Sunrise University, Alwar, Rajasthan, India</i>	
Submitted: 30 June 2023	
Accepted: 20 July 2023	
Published: 30 July 2023	

Keywords: Sodium Bicarbonate; Tartaric acid; Dietary Supplements; Mouth dissolving tablets.

ABSTRACT

Mouth dissolving tablets of Dietary Supplements were designed with a view to enhance patient compliance by direct compression method. The prepared batches of tablets were evaluated for hardness, friability, drug content uniformity, water absorption ratio and *in vitro* dispersion time. Short-term stability (25°C/ 60% RH and 40°C/ 75% RH for 3 months) and drug-excipient interaction study (IR spectroscopy).

Among all the formulations, the formulation prepared by using 80 mg Sodium bicarbonate and 40 mg Tartaric acid was found to have minimum dispersion time (52 - 58 s). Short-term stability studies on the promising formulations indicated that there were no significant changes in drug content and *in vitro* dispersion time. In the direct compression method, Sodium Bicarbonate and Tartaric acid as an Effervescent mixture were used along with directly compressible Mannitol and Maltodextrin to enhance mouth feel.



HUMAN JOURNALS

ijppr.humanjournals.com

INTRODUCTION: -

Recent advances in novel drug delivery systems (NDDS) aim to enhance the safety and efficacy of drug molecules by formulating a convenient dosage form for administration and to achieve better patient compliance¹⁻⁴.

Nearly 35-50% of the general population, especially the elderly and children suffer from dysphagia or difficulty in swallowing, which results in high incidence of non-compliance and ineffective therapy. Swallowing problems also are very common in young individuals because of their poorly developed muscular and nervous systems. Other groups who may experience problems in swallowing conventional oral dosage forms are the patients with tremors of extremities, mentally ill, developmentally disabled, non-cooperative and patients with reduced liquid intake or patients suffering from nausea, as well as patients traveling or who do not have easy access to water. Swallowing problems are also common in some cases such as patients with motion sickness, sudden episodes of allergic attack or coughing and due to lack of water.

To overcome this problem, scientists have developed innovative drug delivery system known as “fast dissolving tablets”, are the novel solid oral dosage form which disintegrates and dissolves rapidly in saliva without need for drinking water. This tablet disintegrates instantaneously or disperses in saliva⁵. These tablets usually dissolve within 15 s to 2 min. Some drugs are absorbed from the mouth, pharynx and esophagus as the saliva passes down into the stomach and produce rapid onset of action. In such cases bioavailability of drug is significantly greater than those observed from conventional tablet dosage forms^{1,6}.

The advantages of rapidly disintegrating tablets are increasingly being recognized in both industry and academia. Their growing importance was underlined recently when European Pharmacopoeia⁷ adopted the term “orodispersible tablet” as a tablet to be placed in the mouth where it disperses rapidly before swallowing.

Method: ¹¹

The selected formulation was packed in flip-top polypropylene container with desiccant integrated inside the wall of the container; polypropylene spiral spring designs inside the lid

with tamper evident seal. They were then stored at 25⁰C / 60 % RH and 40⁰C and 75% RH for 3 months and evaluated for their physical appearance, drug content and *in vitro* dispersion time at specified intervals of time.

Formulation of Mouth Dissolving Tablets of Dietary Supplements:¹²

Mouth-dissolving tablets of Dietary Supplements were prepared by direct compression according to the formulae given in table 2.

All the ingredients except magnesium stearate were passed through # 60 mesh sieve separately and Magnesium Stearate was passed through # 80 sieve. All the ingredients were mixed properly in order to get uniform mixture and kept aside.

The tablets were compressed using a hydraulic press. The compression force of the machine was adjusted to obtain the hardness in the range of 40-60 Newtons for all batches. The weight of the tablets was kept constant for all formulations F₀ to F₇ (400 mg).

Processing Environment:

The manufacturing of effervescent tablets requires careful control of environmental factors. It is essential to maintain Relative humidity (RH) throughout the plant of no more than 20%. In addition, a uniform temperature of 21⁰C also was desirable.

A maximum of 25% RH at a controlled room temperature of 25⁰C or less is usually sufficient to avoid problems caused by atmospheric moisture.

Sources of Acid materials:

Citric acid
Tartaric acid
Fumaric acid
Malic acid
Adipic acid

Sources of Carbon dioxide:

Sodium bicarbonate
Sodium carbonate
Potassium carbonate
Potassium bicarbonate
Calcium carbonate
Sodium glycine carbonate

Table no.1: composition of different batches of mouth-dissolving tablets of dietary supplements

Ingredients(mg/tab)	Formulation Code							
	F ₀	F ₁	F ₂	F ₃	F ₄	F ₅	F ₆	F ₇
Zinc Gluconate USP	76	76	76	76	76	76	76	76
Ascorbic acid	78	78	78	78	78	78	78	78
Tartaric acid	20	30	30	30	40	40	40	25
Sodium bicarbonate	40	40	60	70	70	80	40	50
Mannitol DC	170	158	90	84.5	79.5	74.5	100.5	110.5
Maltodextrin	-	-	35	30	25	20	44	39
Sucralose	5	7	10	10	10	10	10	10
Strawberry Flavor	7	7	7	7	7	7	7	7
Colloidal Silicon dioxide	-	-	-	0.5	0.5	0.5	0.5	0.5
Magnesium Stearate	4	4	4	4	4	4	4	4
Total Weight	400	400	400	400	400	400	400	400

Evaluation of Mouth Dissolving Tablets:-

The evaluation was performed to assess the physicochemical properties and release characteristics of the developed formulations.

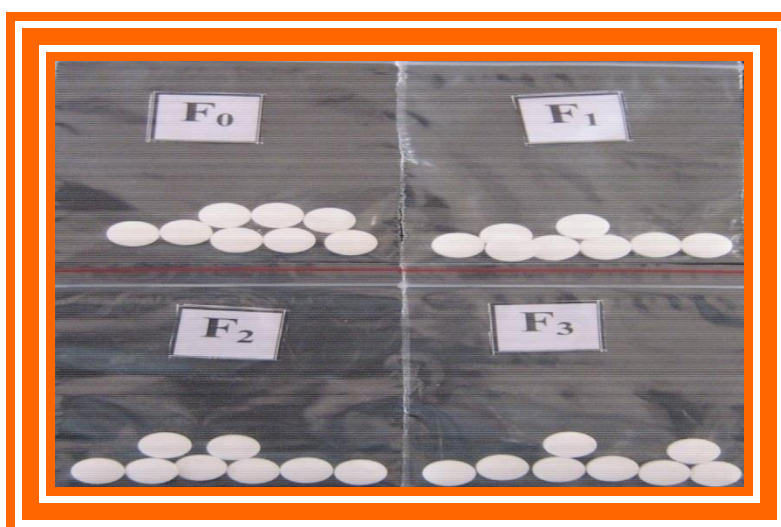
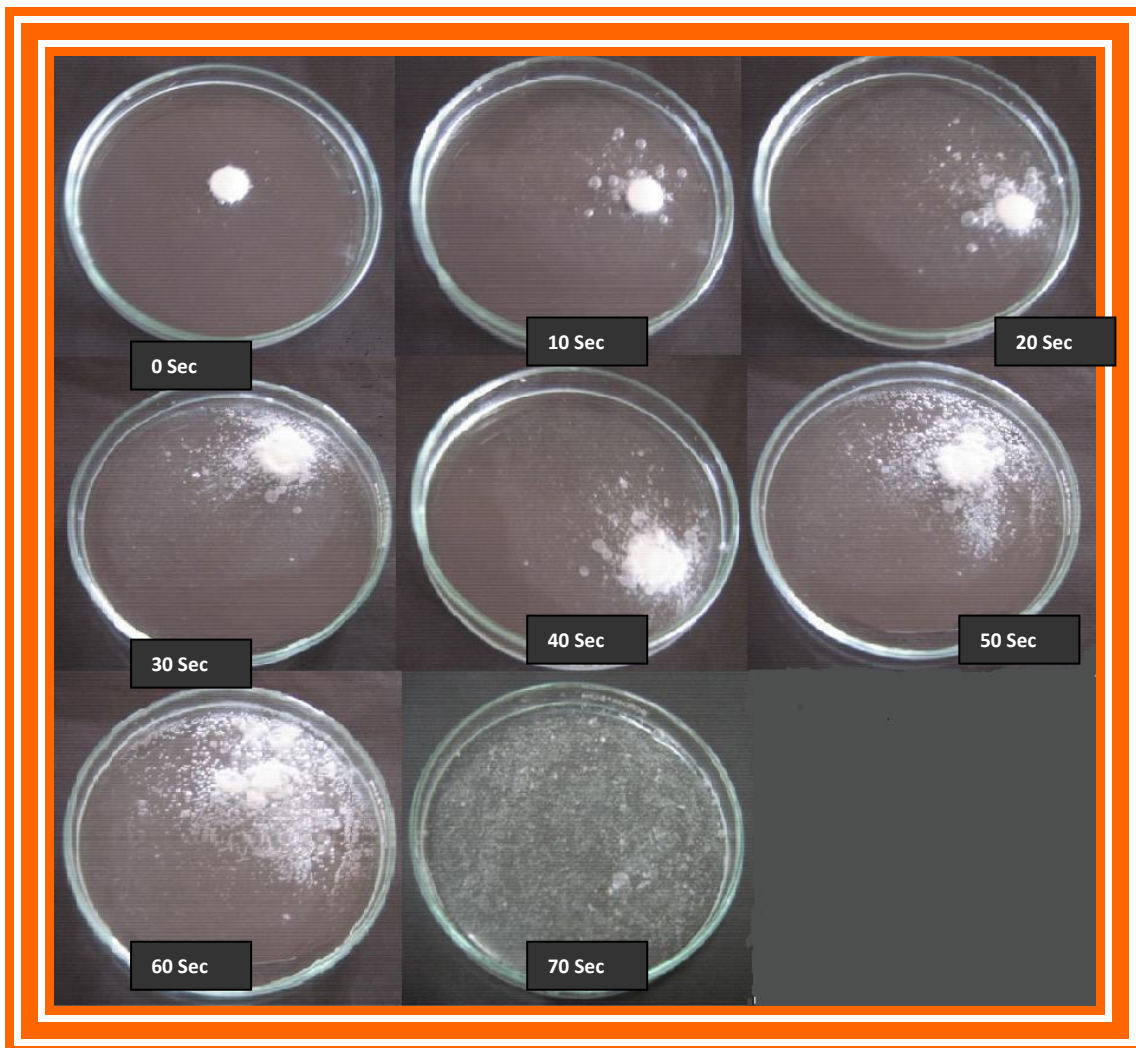


Fig. 1: Picture depicting the formulations F₀-F₄



Fig. 2: Picture depicting the formulations F4-F7



II) COMPATIBILITY STUDY:

Compatibility studies were performed using an FT-IR spectrophotometer. The IR spectrum of pure drug and physical mixture of drug and polymer were studied by making a KBr disc. The characteristic absorption peaks of montelukast sodium were obtained at different wave numbers in different samples.

The peaks obtained in the spectra of each formulation correlate with the peaks of the drug spectrum. This indicates that the drug is compatible with the formulation components. The spectra for all formulations are shown below.

The spectral details for all types of formulations are shown as follows:

A. Table 2: Pure drug Zinc Gluconate.

IR Spectrum	S.No	(KBr Disc) peaks at	Indications
	1.	3291 cm^{-1}	OH Stretching
	2.	1589 cm^{-1}	C=C stretching
	3.	1369 cm^{-1}	C=C stretching
	4.	1037 cm^{-1}	C-O stretching

B. Pure drug Ascorbic acid.

IR Spectrum	S.No	(KBr Disc) peaks at	Indications
	1.	3527, 3409 cm^{-1}	OH Stretching
	2.	3027 cm^{-1}	C-H str of Furan group
	3.	1675 cm^{-1}	C=O stretching
	4.	1321 cm^{-1}	C=C stretching
	5.	1027 cm^{-1}	C-O stretching

C. Mixture of Zinc Gluconate + Ascorbic acid.

IR Spectrum	S.No	(KBr Disc) peaks at	Indications
	1.	3527 cm^{-1}	OH Stretching
	2.	2050 cm^{-1}	C-H str of methyl group
	3.	1752 cm^{-1}	C=O stretching
	4.	1027 cm^{-1}	C-O stretching

D. Mixture of Zinc Gluconate + Ascorbic acid + Excipients.

IR Spectrum	S.No	(KBr Disc) peaks at	Indications
	1.	3284 cm ⁻¹	OH Stretching
	2.	2938 cm ⁻¹	C-H str of methyl group
	3.	1388 cm ⁻¹	C=C stretching
	4.	1020 cm ⁻¹	C-O stretching

Table no. 3: Pre-precision parameters of all formulations

Formulations	Bulk density* (g/cc)	Tapped density* (g/cc)	The angle of repose* (θ)	Compressibility Index (%)	Hausner's ratio
F ₀	0.8698	0.9454	25 ⁰ .84'	7.996	1.086
F ₁	0.528	0.586	26 ⁰ .15'	9.890	1.109
F ₂	0.8052	0.892	26 ⁰ .82'	9.730	1.107
F ₃	0.6419	0.7241	25 ⁰ .14'	11.35	1.128
F ₄	0.4832	0.5371	27 ⁰ .35'	10.03	1.111
F ₅	0.5198	0.5803	25 ⁰ .96'	10.42	1.116
F ₆	0.6392	0.7015	27 ⁰ .63'	8.880	1.097
F ₇	0.4926	0.5428	28 ⁰ .05'	9.248	1.101

*mean±SD, n=3

Table No. 4: Physical Properties of Tablets of All Formulations

Formulations	Diameter* (mm)	Thickness*(mm)	Weight variation* (mg)	Hardness* (Newton)	Friability (%)
F ₁	10.98±0.052	3.59±0.007	398.2±3.58	46.0±1.2	0.526
F ₂	11.02±0.049	3.59±0.013	401.0±4.37	50.2±1.5	0.492
F ₃	10.96±0.053	3.57±0.042	398.8±4.13	48.6±1.1	0.391
F ₄	10.98±0.043	3.55±0.048	400.6±3.83	45.4±1.2	0.428
F ₅	11.00±0.026	3.57±0.021	399.1±4.06	45.2±1.3	0.502
F ₆	11.00±0.023	3.60±0.004	397.8±4.22	46.5±1.0	0.465
F ₇	10.97±0.024	3.58±0.008	398.0±4.05	48.3±1.3	0.621

mean±SD, n=3

Table No. 5: Post-Compression Parameters of Tablets of All Formulations

Formulations	<i>In vitro</i> dispersion time* (in sec)	Drug content* (%)	
		Zinc Gluconate	Vitamin C
F0	134 – 139	99.97	100.08
F1	112 – 117	99.98	100.05
F2	89 – 95	100.02	100.12
F3	73 – 78	100.01	100
F4	64 – 67	99.98	100.14
F5	52 - 58	100.01	100.15
F6	108 -114	99.96	100.1
F7	90 - 96	99.99	100.22

*mean±SD, n=3

Table no. 6: moisture uptake studies at 25°c & 75% RH

Sl.No	Initial Wt (gm)	2 nd Hour	4 th Hour	6 th Hour	8 th Hour	12 th Hour	24 th Hour	32 nd Hour	48 th Hour
Petriplate-1	21.2863	21.291	21.3031	21.3388	21.3815	21.5062	21.5832	21.7419	21.9602
Petriplate-2	24.2763	24.3015	24.3287	24.5173	24.5418	24.5836	24.6137	24.6425	24.8539
Petriplate-3	17.21	17.2385	17.2481	17.2568	17.2631	17.2792	17.2885	17.2954	17.3172
Petriplate-4	16.024	16.0492	16.0608	16.0794	16.0933	16.1107	16.1318	16.1496	16.1672

Table No. 7: Moisture Uptake Studies at 25°C & 40% RH

Sl.No	Initial Wt (gm)	2 nd Hour	4 th Hour	6 th Hour	8 th Hour	12 th Hour	24 th Hour	32 nd Hour	48 th Hour
Petriplate-1	12.7523	12.7542	12.7638	12.7692	12.7713	12.7795	12.7814	12.7903	12.8014
Petriplate-2	16.2689	16.2705	16.2748	16.2792	16.2824	16.2873	16.2917	16.2958	16.2983
Petriplate-3	12.8845	12.8931	12.8974	12.9036	12.9104	12.9186	12.9253	12.9289	12.9374
Petriplate-4	16.7659	16.7752	16.783	16.7905	16.7982	16.7852	16.7921	16.8042	16.8175

Table No. 8. Stability Studies at 25°C & 60% RH

Product:	Dietary Supplement	Batch Size:	50 tablets	Stability Condition	25°C±2°C/6 0%±5%RH	
Pack Details:	Flip top Polypropylene container with desiccant integrated inside the wall of the container; polypropylene spiral spring designed inside the lid with tamper-evident seal.	Mfg. Location :	Strides Arcolab Ltd, Bangalore	Batch No:	655047	
Period ↓ Test →	Description	Identification By Titrimetric Method Must comply	Disintegration Time	Hardness	Loss on Drying	Assay Each Mouth Dissolving Tab Contains Zinc Gluconate (76mg) Ascorbic Acid (78mg)
Initial	White-colored, circular, biconvex tablets, plain on both sides.	Complies	37 – 42 sec	44 – 60 N	2.75%	76.01 mg (100.01%) 78.12 mg (100.15%)
1 Month	White-colored, circular, biconvex tablets, plain on both sides.	Complies	38 – 44 sec	47 – 61 N	2.81%	75.99 mg (99.98%) 78.08 mg (100.10%)
2 Month	- DO -	Complies	41 – 46 sec	51 – 64 N	2.86%	75.98 mg (99.97%) 78.08 mg (100.10%)
3 Month	- DO -	Complies	42 – 49 sec	54 – 68 N	2.89%	75.98 mg (99.97%) 78.08 mg (100.10%)

Table.No.11. Stability Studies at 40°C & 75% RH

Product:	Dietary Supplement	Batch Size:	50 tablets	Stability Condition	40°C±2° C/75%±5 %RH
Pack Details:	Flip top Polypropylene container with desiccant integrated inside the wall of the container; polypropylene spiral spring designed inside the lid with tamper-evident seal.	Mfg. Location :	Strides Arcolab Ltd, Bangalore	Batch No:	655047

Evaluation of Mouth Dissolving Tablet Formulations:

1. Pre-compression Parameters:

a) Bulk Density:- The values obtained for bulk density for all (F₀-F₇) formulations are tabulated in Table 3. The values were found to be in the range of 0.4832 to 0.8698 gm/cm³.

b) Tapped Density:- The values obtained for bulk density for all (F₀-F₇) formulations are tabulated in Table 3. Tapped density ranges from 0.5371 to 0.9454 gm/cm³.

c) Angle of Repose (θ): - The values were found to be in the range of 25⁰ - 28⁰, tabulated in Table 3. This indicates the good flow property of the powder blend.

d) Compressibility Index: - Compressibility index value ranges between 7.99% - 11.35%, tabulated in Table 3, indicating that the powder blends have the required flow property for direct compression.

e) Hausner's Ratio:- The values were found to be in the range from 1.086 – 1.128, tabulated in Table 3.

2. Post-compression Parameters:

a) Shape of the tablet: - Microscopic examination of tablets from each formulation batch showed a circular shape with no cracks.

b) Tablet dimensions: - The dimensions determined for formulated tablets are tabulated in Table 4.

Tablets' mean thicknesses were almost uniform in all the formulations and were found to be in the range of 3.55 mm to 3.60 mm. The diameter of the tablet ranges between 10.96 mm to 11.60 mm.

c) Hardness test: - The measured hardness of tablets of each batch ranged between 40 to 60 Newtons and was tabulated in Table 4. Tablet hardness was increased as increasing the compression force. This ensures good handling characteristics of all batches.

d) Friability Test: - The values of the friability test are tabulated in Table 4. The % friability was less than 1% in all the formulations ensuring that the tablets were mechanically stable.

e) Weight Variation Test: - The percentage weight variation for all formulations was shown in Table 4. All the tablets passed the weight variation test as the % weight variation was within the pharmacopoeial limits. The weights of all the tablets were found to be uniform with low standard deviation values.

f) Drug Content Uniformity: - The percentage of drug content was found to be between 95.54 and 100.5 of montelukast sodium, which was within acceptable limits. Table 5 showed the results of drug content uniformity in each batch.

g) In vitro Dispersion Time: - The most important parameter that needs to be optimized in the development of fast dispersible tablets is the dispersion time in tablets. In the present study, all the tablets dispersion in ≤ 1.2 min fulfilling the official requirement (<3 min) for dispersible tablets.

The *in vitro* dispersion times for all formulations are shown in Table 5. The tablets are prepared by using Sodium bicarbonate and Tartaric acid as an effervescent mixture, all the formulations have different dispersion times. With F0 formulation the dispersion time is more (134 – 137 sec) as it contains Sodium bicarbonate and Tartaric acid in lesser concentration. F5 had showed least dispersion time 52 – 58 sec as it contains a higher concentration of Sodium bicarbonate and Tartaric acid.

The dispersion time of all formulations depends on the concentration of effervescent mixture, dispersion time decreases as the concentration of the effervescent mixture increases.

1) Stability Studies: - The selected formulations was evaluated for stability studies which were stored at 25°C & 60% RH and 40°C & 75% RH tested for 3 month and were analyzed for their physical parameters, *In vitro* dispersion time and drug content at 1-month interval. The residual drug contents of formulations were found to be within the permissible limits and the results were shown in the Table which was estimated by seeing drug content uniformity.

Summary and Conclusion

In the present work, mouth-dissolving tablets of Dietary Supplements (Zinc Gluconate and Ascorbic acid) were prepared by direct compression method using effervescent disintegrants such as sodium bicarbonate and Tartaric acid. Zinc Gluconate and Ascorbic acid is soluble in water but its bioavailability is limited and hence this method is useful for improving the bioavailability of the drug. The dispersibility of tablets was increased by increasing the concentration of effervescent disintegrants like sodium bicarbonate and tartaric acid, use of Maltodextrin and mannitol improves the binding property cooling effect of the tablets respectively.

Colloidal silicon dioxide (Aerosil) prevents capping problem of the tablets, the use of Sucralose is helpful for diabetic patients as it is sugar-free and contains zero calories.

From the findings obtained, it can be concluded that:-

- The flow properties of excipients and drugs were good.
- FT-IR studies revealed that there is no chemical interaction between Dietary Supplements and the excipients used in the study.
- The tablets prepared were found to be good without any chipping, capping and sticking.
- Formulated tablets give satisfactory result for various physicochemical evaluations of tablets like tablet dimension, hardness, friability, weight variation, *in vitro* dispersion time, water absorption ratio and drug content.
- The low values of standard deviation for average weight and drug content of the prepared tablets indicate weight and drug content uniformity within the batches prepared.
- Based on *in vitro* dispersion time, formulations F₄ and F₅ were found to be promising and displayed a dispersion time of approximately 52-67 s.

- Short-term stability studies of promising formulations indicated that there is no significant change in drug content and *in vitro* dispersion time.
- From the present study, it may be concluded that the mouth-dissolving tablets of Dietary Supplements can be prepared by direct compression method using effervescent mixtures (sodium bicarbonate & tartaric acid).

REFERENCES:

1. Seager H. Drug delivery products and the zydys fast dissolving dosage forms. J. Pharm. Pharmacol. 1998; 50: 375-382.
2. Chang RK, Guo X, Burnside BA, Couch RA. Fast-dissolving tablets. Pharm. Tech. 2000; 24(6): 52-58.
3. Dobetti L. Fast melting tablets: Developments & Technologies. Pharm. Tech. 2001 (Suppl): 44.
4. Kuchekar BS, Aruagam V. Fast dissolving tablets. Indian J. Pharm. Edu. 2001; 35: 150-152.
5. Kuchekar BS, Badhan AC, Mahajan HS. Mouth dissolving tablets: A novel drug delivery system. Pharma. Times, 2003; 35: 7-9.
6. Bradoo R, Shahani S, Poojary S, Deewan B, Sudarshan S. An observer blind, randomized controlled clinical trial to compare the onset of action, efficacy and safety of cetirizine flash tablets with oral Loratidine and cetirizine conventional tablets in allergic rhinitis. JAMA India, 2001; 4(10): 27-31.
7. European Directorate for quality of Medicines (www.pheur.org) Pharmeuropa, 1998; 10(4): 547.
8. Udupa N, Venkatesh, Srinivas M, Venugopal K. Nimesulide dispersible tablets from 'Direct compression' method. 2001; 38(4): 208-10.
9. Luca Dobetti. Fast melting tablets: Developments & Technologies. Pharmaceutical Technology, 2001: 11
10. Reddy LH, Ghosh B, Rajneesh. Fast dissolving drug delivery systems: A review of the literature. Indian J. Pharm. Sci, 2002; 7: 331-336.
11. Swamy PV, Areefulla SH, Shirsand SB, Smitha G, Prashanth B. Orodispersible tablets of meloxicam using disintegrants blends for improved efficacy. Indian J Pharm Sci., 2007; 69(6): 836-40.
12. Adamo F, Valentina B, Gian CC, Celestino R, Carlos AFM. Fast dispersible/slow-releasing ibuprofen tablets. Eur J Pharm and Biophar., 2007; 69: 335-41.