

1 Development and Validation of a Stability-Indicating RP-HPLC
2 Method for the Simultaneous Determination of Sofosbuvir,
3 Velpatasvir, and Voxilaprevir in Tablet Formulation

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6

7 **Abstract**

8 Objective: The present study aimed to develop a stability-indicating reverse-phase high
9 performance-liquid chromatography (RP-HPLC) method for the estimation of Sofosbuvir,
10 Velpatasvir, and Voxilaprevir in tablet dosage form and validated in accordance with ICH
11 guidelines. Methods: The optimized conditions for the developed RP-HPLC method are
12 Agilent C18 (250 mm×4.6mm, 5 μ) column maintained at 30°C with a mobile phase consisting
13 of Buffer(0.1

14

15 **Index terms**— stabilityindicating, method development, validation, RP-HPLC, sofosbuvir.

16 **1 Introduction**

17 Hepatitis C [1] is a liver infection which is caused by the Hepatitis C virus. The hepatitis C virus is a blood-
18 borne virus and the most common modes of infection are through exposure to small quantities of infected blood.
19 Globally, around 70 million people were suffering from Hepatitis C infection. Antiviral medicines like sofosbuvir,
20 velpatasvir, and voxilaprevir, etc; can cure more than 95% of persons having Hepatitis C infection and reduce the
21 causes of death. As per the literature survey [5][6][7][8][9][10][11], it is learned that very few HPLC methods have
22 been reported for the determination of Sofosbuvir, Velpatasvir, and Voxilaprevir individually and in combination
23 by HPLC but there is no method for stability-indicating and simultaneous estimation of all the three drugs.(2S)-1-
24 [(2S,5S)-2-(9-{2-[(2S,4S)-1-{(2R)-2-[(methoxy carbonyl) amino]-2-phenylacetyl}-4-(methoxy methyl) pyrrolidin-
25 2-yl]-1H-imidazol-4-yl}-1,11-dihydro[2] benzo- pyrano[4',3':6,7]naphtho[1,2-d]imidazol-2-yl)-5-methyl- pyrrolidin-
26 1-yl]-3-methyl-1-oxobutan-2-yl}carbamate.

27 Therefore, there is a need to develop a rapid and reliable Stability-indicating HPLC method for the
28 simultaneous determination of Sofosbuvir, Velpatasvir, and Voxilaprevir in bulk and pharmaceutical dosage
29 form.

30 **2 II.**

31 **3 Materials And Methods**

32 **4 a) Reagents and chemicals**

33 Sofosbuvir, Velpatasvir and Voxilaprevir working standards were procured from spectrum pharma research
34 solutions, Hyderabad, as a gift sample. The VOSEVI tablets were supplied by the Medindia Pharma network.
35 All the chemicals used were of AR grade purchased from Merck, Mumbai. All the solvents used were of HPLC
36 grade purchased from Sigma-Aldrich, Mumbai.

37 **5 b) Chromatographic conditions and Instruments**

38 WATERS HPLC 2695 SYSTEM equipped with quaternary pumps, Photo Diode Array detector, and an
39 auto sampler integrated with Empower 2 software and Agilent C18 (250mm × 4.6mm, 5 μ) column was used
40 for the determination of Sofosbuvir, Velpatasvir, and Voxilaprevir. The optimized conditions included 0.1%

16 M) LOD AND LOQ

41 Orthophosphoric acid (OPA) and acetonitrile (55:45%v/v) as mobile phase run on an isocratic mode at flow rate
42 1.0ml/min. The column was maintained at 300C and detection was done at 220nm. Other equipment used in
43 the method was Ultrasonic bath sonicator (BVK Enterprises) and weighing balance (Denver).

44 6 c) Preparation of Diluent

45 A mixture of water and acetonitrile in the ratio of 50:50%v/v was used as diluents.

46 7 d) Preparation of Mobile phase

47 A mixture of 0.1% orthophosphoric acid and Acetonitrile in the ratio (55:45%v/v) was used as the mobile phase.

48 8 e) Preparation of Standard and Sample solutions

49 20mg, 5mg & 5mg of Sofosbuvir, Velpatasvir and Voxilaprevir working Standards were transferred to 50ml of
50 volumetric flasks separately, 3/4th of diluents (as mentioned) was added to all the three flasks and subjected
51 for sonication for 10 minutes. The final volume was made up with diluents to obtain a final concentration of
52 400 μ g/ml of Sofosbuvir, 100 μ g/ml of Velpatasvir, & 100 μ g/ml of Voxilaprevir respectively.

53 From the above stock solution, 1 ml was pipetted out into a 10ml volumetric flask and then the final volume
54 was made with the same diluent. (40 μ g/ml of Sofosbuvir, 10 μ g/ml of Velpatasvir and 10 μ g/ml of Voxilaprevir
55 respectively) 10 Tablets (Vosevi) were weighed accurately and the average weight was calculated. An amount
56 equivalent of 1 tablet was collected into a 50ml volumetric flask; 15ml of diluents was mixed and sonicated for
57 around 30 minutes. It was then subjected to making the volume with diluents.

58 Filtered the solution and diluted 1ml of the above solution to 10ml with diluents. (40 μ g/ml of Sofosbuvir &
59 10 μ g/ml of Velpatasvir & 10 μ g/ml of Voxilaprevir).

60 9 f) Method Validation

61 The developed method was validated in compliance with International Conference on Harmonization (ICH)
62 guidelines [12,13].

63 10 g) Specificity

64 The specificity of the method was determined by comparing the drug solution with the placebo solution and
65 observed for the interference of placebo peak with drug peak.

66 11 h) Accuracy

67 The accuracy of the present method was determined by %recovery. The drug solution along with the sample was
68 prepared in three concentration levels 50%, 100%, and 150%. Then the % recovery was calculated.

69 12 i) Precision

70 The precision of the method was estimated by injecting the six solutions of the standard into the HPLC system
71 and the % relative standard deviation (%RSD) was calculated.

72 13 j) Linearity

73 The linearity of the method was developed by preparing series of dilutions ranging from 12.5 μ g/ml -75 μ g/ml for
74 Bictegravir, 50 μ g/ml-300 μ g/ml for Emtricitabine and 6.25 μ g/ml-37.5 μ g/ml for Tenofovir alafenamide respectively
75 and injecting them into HPLC system.

76 14 k) Ruggedness

77 Ruggedness was determined by injecting the six solutions of the standard into HPLC for different days. The %
78 RSD was calculated.

79 15 l) Robustness

80 Robustness of the method was determined by varying the optimized analytical conditions such as mobile phase
81 composition by $\pm 5\%$, flow rate by $\pm 0.1\text{ml}/\text{min}$ and column temperature by $\pm 5^\circ\text{C}$.

82 16 m) LOD and LOQ

83 Calculation of limit of detection as well as Limit of quantification had been done by using standard Equations.
84 LOD= $3.3 \times ?/S$, LOQ = $10 \times ?/S$. Here ? denotes for the standard deviation of intercepts of regression lines, S
85 denotes for slope.

86 **17 n) Solution stability**

87 Solution stability was estimated by analyzing the standard drug solution after storage for 24hrs under laboratory
88 conditions.

89 **18 o) Forced degradation studies**

90 Forced degradation studies [14] were carried out for drug by exposing the drug solution to the various stress
91 conditions such as acidic (2N Hydrochloric acid for 30min at 60°C), basic (2N Sodium hydroxide for 30min at
92 60°C), Oxidation (refluxing the drug solution with 20%H₂O₂), neutral (refluxing the drug in water for 6h at
93 60°C), photolytic (exposing the drug solution to UV light by keeping the solution in UV chamber for 7 days
94 or 200-watt hrs/m² in photostability chamber), thermal (drug solution was placed in oven at 105°C for 6hrs)
95 conditions.

96 **19 III.**

97 **20 Results**

98 **21 DISCUSSION**

99 For the development of a new method for the simultaneous estimation of Sofosbuvir, Velpatasvir, and Voxilaprevir
100 in bulk and pharmaceutical dosage form initially many mobile phases and many columns were tried to elute the
101 drug peak with less tailing factor, more plate count and more resolution.

102 Waters HPLC Agilent C18 (250mm × 4.6mm, 5 μ) column and Buffer: Acetonitrile (55:45%v/v) as mobile
103 phase were selected based on peak parameters. The detection wavelength was found to be 220nm.

104 Prepared standard solution, sample solution, and blank solution were injected into the HPLC system and
105 system suitability parameters were noted as summarized in Table 1 along with chromatograms as shown in fig.
106 4, 5, 6 and 7 respectively.

107 The developed method was found to obey Beer's law in the concentration range of 10-60 μ g/ml for Sofosbuvir,
108 2.5-15 μ g/ml for velpatasvir and 2.5-15 μ g/ml for Voxilaprevir with a correlation coefficient of 0.999 each
109 respectively. A linear graph was plotted between concentration and peak area as shown in fig. ??,10 and
110 11 respectively and results are summarized in Table 1.

111 The method was found to be accurate as the % recovery was 98.50%-101.50% for all the three drugs and was
112 within the limits. The %RSD was found to be less than 1 for all the three drugs indicates that the method was
113 precise. The method was found to be specific, as there is no interference of retention time of placebo peak with
114 that of drug peak. The placebo chromatogram was shown as fig. ??.

115 Forced degradation studies results indicate that the drug was found to be stable in various stress conditions
116 as net degradation was found to be within the limits. The chromatograms were shown in fig. 12-17 and results
117 were summarized in Table 2.

118 V.

119 **22 CONCLUSION**

120 A specific, precise, stability-indicating method was developed for the determination of Sofosbuvir, Velpatasvir,
121 and Voxilaprevir in pure and tablet dosage form using RP-HPLC. The method was validated by using various
122 validation parameters and the method was found to be linear, precise, accurate, specific and robust. From the
123 degradation, studies conducted it is concluded that Sofosbuvir, Velpatasvir, and Voxilaprevir were stable at high
124 concentrations of Acid, Base, Peroxide, Thermal, UV and Water stress study conditions. The run time was 5min
125 which enables rapid quantitation of many samples in routine and quality control analysis of tablet formulations.

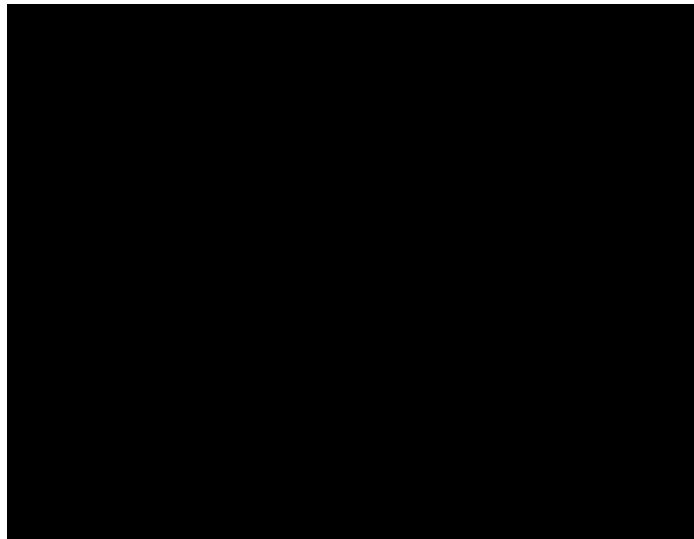


Figure 1:

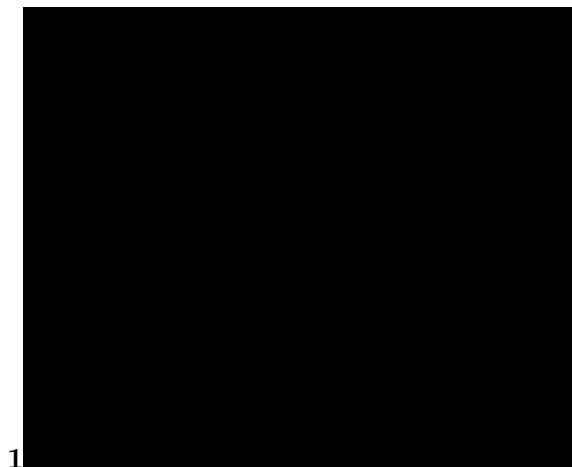


Figure 2: Figure 1 :

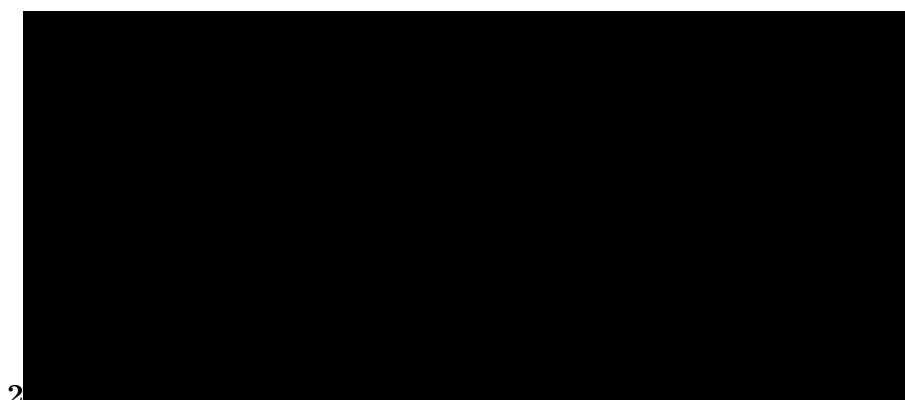
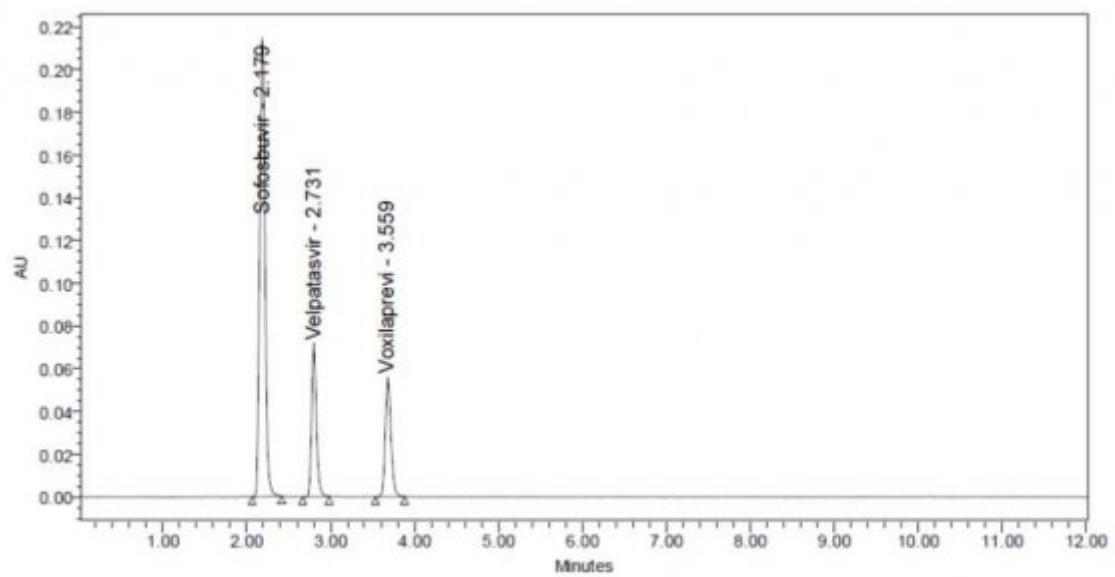
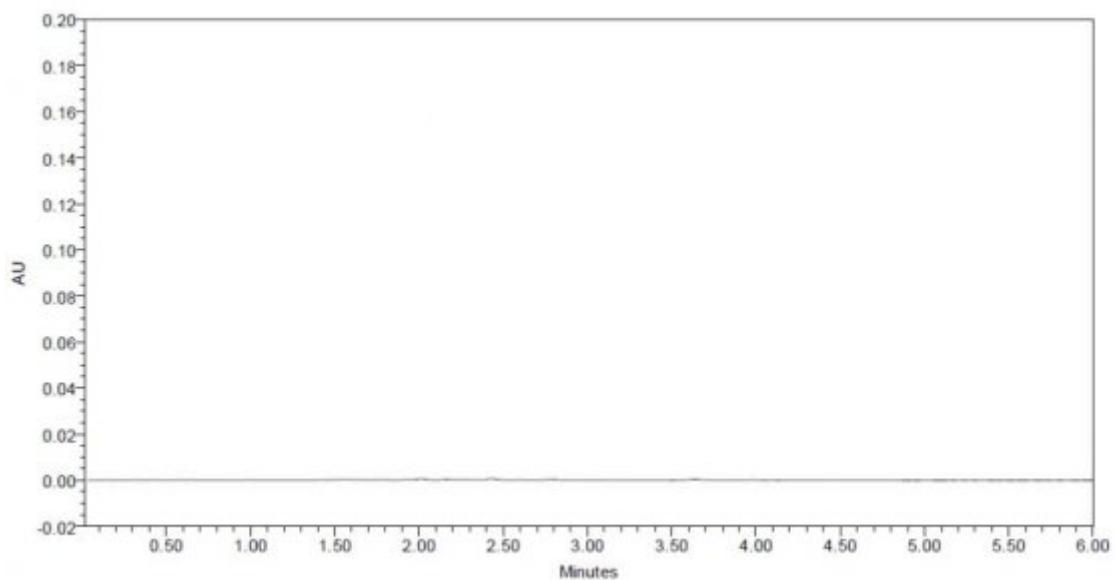


Figure 3: Figure 2 :



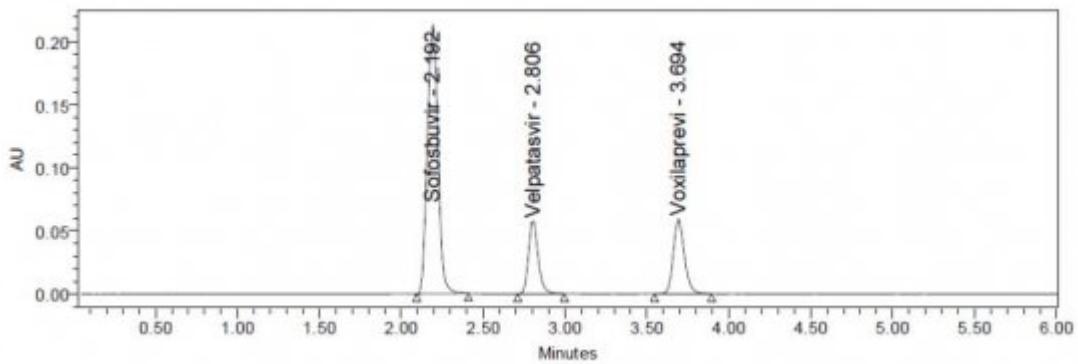
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Figure 4: Figure 3 :



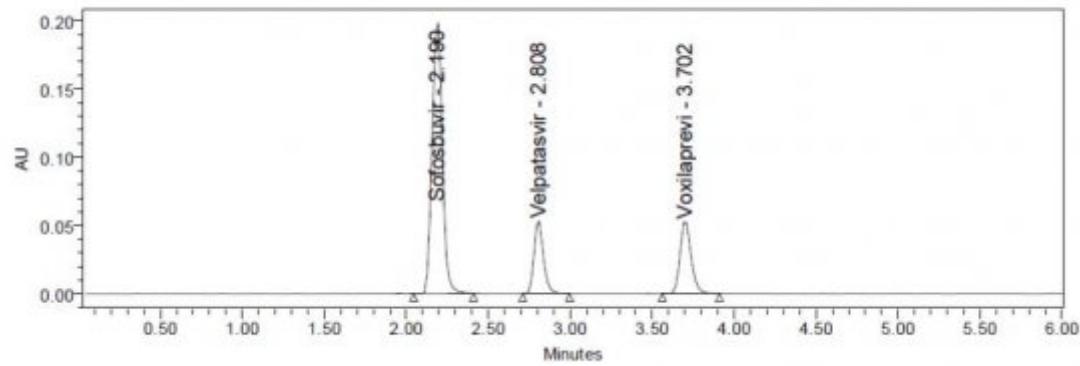
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Figure 5: Figure 4 :



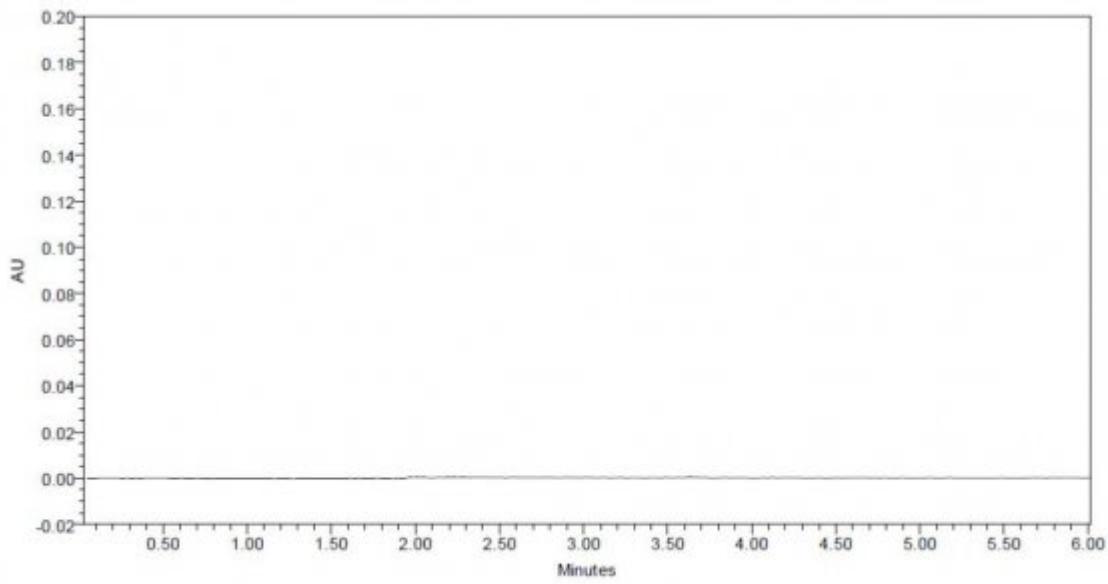
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Figure 6: Figure 5 :Figure 6



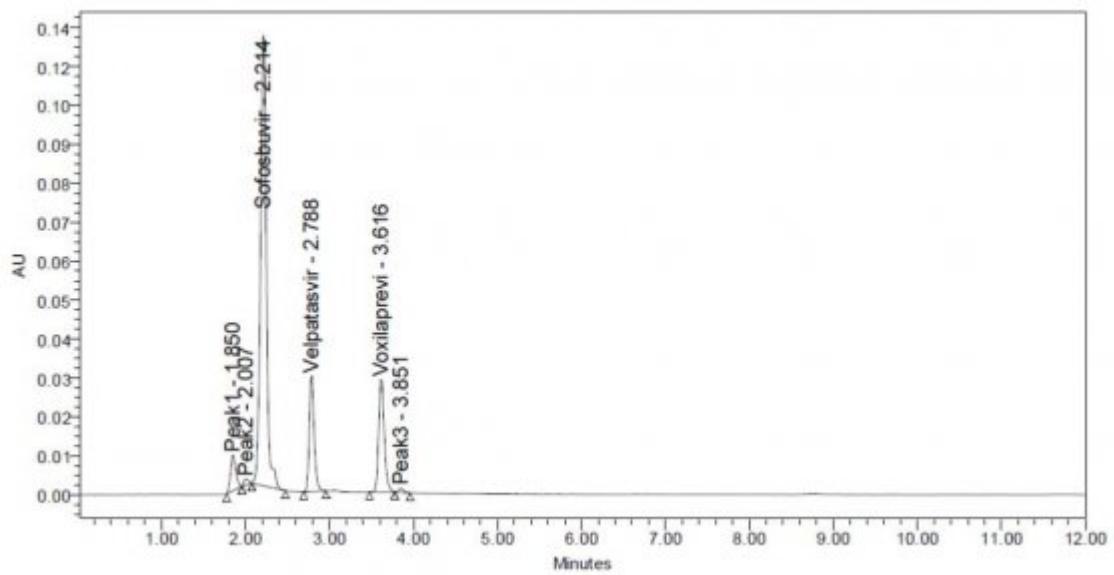
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Figure 7: Figure 7 :Figure 8 :Figure 9 :Figure 10 :



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Figure 8: Figure 11 :Figure 12 :



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Figure 9: Figure 13 :Figure 14 :Figure 15 :

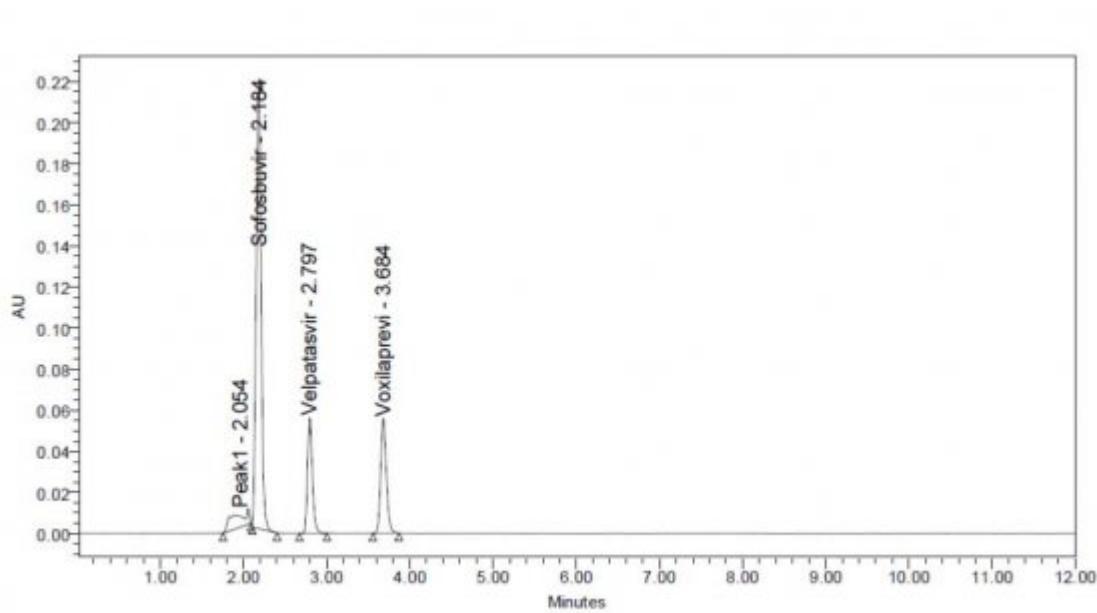


Figure 10:

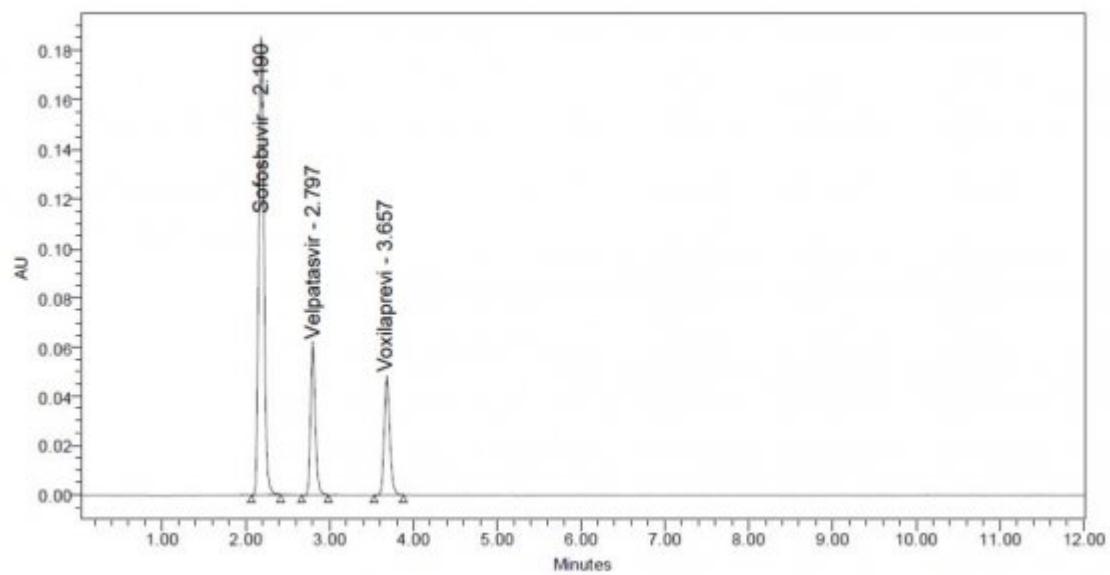


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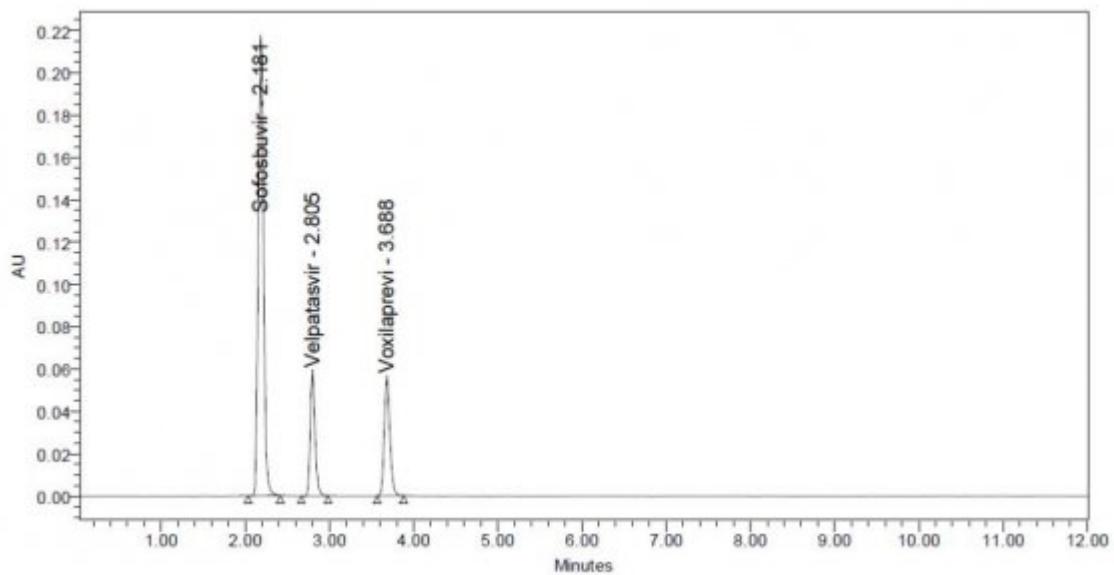


Figure 12:

1

Parameter	Result		
USP Plate count	4088	10175	126558
USP Tailing factor	1.0	1.2	1.2
USP Resolution	4.5	-	7.2
Precision (%RSD)	0.9	0.8	0.4
Accuracy	98.50	98.50	98.50-
	101.50	101.50	101.50
Specificity	Specific, No in- ter- fer- ence		
Linearity range (µg/ml)	10-	2.5-	2.5-
	60	15	15
Correlation coefficient, r	0.999	0.999	0.999
LOD (µg/ml)	0.11	0.10	0.06
LOQ (µg/ml)	0.34	0.29	0.17
Ruggedness (%RSD)			
Day1	0.9	0.8	0.4
Day2	0.9	1.9	0.6
Robustness (%RSD)			
Flow rate -	1.2	1.1	1.0

Figure 13: Table 1 :

2

Stress condition	Sofosbuvir	Velpatasvir	Voxilaprevir
Acid	% Assay	% Assay	% Assay
	94.235	7794.045	94.145
Base	95.354	6595.104	94.495
Neutral	99.370	6399.510	99.670
Peroxide	95.954	0595.584	96.613
Photolytic	97.732	2797.582	99.080
Thermal	98.221	7596.433	98.711
%D-Percentage Degradation	57	57	29

Figure 14: Table 2 :

3.4	3.7	3.7
2.8	2.7	2.9
2.2	2.4	2.2
3.8	3.4	3.2
2.4	2.7	2.4
1.0	0.6	1.0
0.9	1.0	0.6

Figure 15:

127 .1 Acknowledgment

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129 and Voxilaprevir as the gift samples and also for providing required facilities to carry out this research work.

130 .2 Conflict of Interests

131 The authors claim that they have no conflict of interest. It has not meant to publish elsewhere. Moreover, it has
132 not meant simultaneously presented for publication elsewhere.

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