**IJCRT.ORG** 

ISSN: 2320-2882



# INTERNATIONAL JOURNAL OF CREATIVE RESEARCH THOUGHTS (IJCRT)

An International Open Access, Peer-reviewed, Refereed Journal

# FORMULATION AND EVALUATION OF FLOATING TABLET OF TAPENTADOL HYDROCLORIDE

Anand Chauhan (1), Dr. Maulik Mehta (2)

A.P.M.C. College of Pharmaceutical Education and Research, Motipura, Himatnagar-383001

#### **Abstract**

The study aimed to develop sustained-release floating tablets of Tapentadol HCl utilizing a direct compression method with an effervescent approach. Poly ethylene Oxide (Polyox WSR 301, Polyox WSR 303, Polyox WSR 308) was chosen as the sustained-release polymer, while sodium bicarbonate served as the gas-generating agent. Preformulation study of API was performed using FTIR Spectroscopy. Drug excipient compatibility shows no interaction between drug and excipients. Trial batches initiated for screening of polymer. Prepared tablets were analyzed for various parameters like weight variation, hardness, thickness, friability, swelling and drug content, In-vitro drug release extended to 12 hours, with formulation T9 demonstrating 99% drug release, hence choosen for optimization using factorial design was done using DOE software. Factorial batches (F1-F9) with Polyox WSR 303, Sodium bicarbonate as Indipendent Variables showed significant outcomes. Factorial batch achieved desired drug release. Batch O1 was fine-tuned for drug release 99% over 12 hours and Floating Lag time 37 seconds. Higuchi's model fit best. The optimized batch O1 was subjected for Stability study and found stable for 1 month. Hence, O1 batch was the optimized batch.

**Key Words:** Tapentadol HCl, Polyox WSR 301, Polyox WSR 303, Polyox WSR 308, Sodium bicarbonate, Floating Tablets

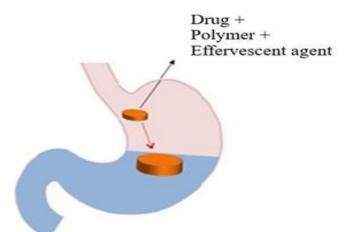
#### Introduction

The oral route of drug administration stands out as the most significant and convenient method for delivering medications. However, the potential for sustained drug release over extended periods hasn't been fully tapped due to variations in absorption across different sections of the gastrointestinal tract (GIT). Consequently, only a handful of drug delivery systems have been developed to target specific regions of the GIT, such as the stomach, upper small intestine, or colon.

The primary challenge in designing controlled-release oral dosage forms isn't just about extending drug delivery beyond 12 hours; It also entails keeping the dosage forms inside the upper small intestine or stomach for longer. The creation of dosage forms with extended gastric residence times (GRT), sometimes referred by the terms gastroretentive or gastroremaining dosage forms (GRDF), creates important new therapeutic opportunities.

#### **Effervescent system**

A One way to guarantee that a medication delivery system stays float in the stomach is to incorporate a floating chamber that can be occupied by inert gas, air, or vacuum. An organic solvent can volatilize or an effervescent reaction between organic acids and bicarbonate salts can introduce gas into the floating chamber



#### Materials and methods

Tapentadol HCl was obtained from Ami Lifescience, Vadodara, Poly Ethylene oxide from JRS Pharma, Mumbai. SMCC (Silicified Microcrystalline cellulose) from JRS Pharma, Mumbai Ethyl Cellulose, Magnesium Stearate, Talc, Lactose, All other ingredients from Chemdyes Corporation, Rajkot-360001. (Gujarat). Sodium Bicarbonate, Citric Acid from SD fine chemical, Ahmedabad.

## **Method of Preparation of Buccal Tablets**

The preliminary trials for polymer selection involved preparing tablets using different matrix-forming agents via direct compression technique. Blends comprising the drug, matrix-forming agent, gas-generating agent, and diluents were thoroughly mixed after passing through a 40# sieve. Talc and magnesium stearate were then added as glidant and lubricant, respectively. The blend was compressed using a tablet press machine.

 Table 1 Formulation Table of Trial Batches of Buccal tablets

 Ingredients (mg)
 T1
 T2
 T3
 T4
 T5
 T6
 T7
 T8
 T9

 Tapentadol HCl
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 50.0
 <td

ingreatents (ing)		1-			10	10	/	10	• /
Tapentadol HCl	50.0	50.0	50.0	50.0	50.0	50.0	50.0	50.0	50.0
Polyox WSR 301	25.0	-	-	75.0	-	-	-	-	-
Polyox WSR 303	-	25.0	-	-	75.0	-	50.0	50.0	50.0
Polyox WSR 308	_	-	25.0	-		75.0	-	-	-
Sod. Bicarbonate	20.0	20.0	20.0	20.0	20.0	20.0	20.0	10.0	30.0
Citric Acid	5.0	5.0	5.0	5.0	5.0	5.0	5.0	5.0	5.0
PVP K30	5.0	5.0	5.0	5.0	5.0	5.0	5.0	5.0	5.0
SMCC 90	50.0	50.0	50.0	50.0	50.0	50.0	50.0	50.0	50.0
Starlac	89.0	89.0	89.0	39.0	39.0	39.0	114.0	114.0	114.0
Talc	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0
Mg. stearate	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0
Total weight	250.0	250.0	250.0	250.0	250.0	250.0	250.0	250.0	250.0

**Table 2 Layout of Factorial Design** 

3 <sup>2</sup> Full Factorial Designs						
Batch No.	X1 x WSR 303	X Sodium Bi	2 icarbonate			
F1		-1	-	1		
F2		-1	(	)		
F3		-1	+	1		
F4		0	-1			
F5		0	0			
F6		0	+1			
F7		+1	-1			
F8		+1	0			
F9		+1	+1			
Trans	slation of co	ded level in actu	al limit			
Indonondont vonic	hlog		Real Value			
Independent variables		Low(-1)	Medium(0)	High(+1)		
Polyox WSR 303 (mg) X1		40.0	50.0	60.0		
Sodium Bicarbonate (m	25.0	30.0	35.0			

# Independent variables

- ✓ X<sub>1</sub>-Amount of Polyox WSR 303 (mg)
- ✓ X<sub>2</sub>-Amount of Sodium Bicarbonate (mg)

# Dependent variables

- ✓ Y1- % Drug release at 1 hour
- ✓ Y2- Floating Lag time (sec)

Ingredients (mg)	F1	F2	F3	F4	F5	F6	<b>F7</b>	F8	<b>F9</b>
Tapentadol HCl	50.0	50.0	50.0	50.0	50.0	50.0	50.0	50.0	50.0
Polyox WSR 303	40.0	40.0	40.0	50.0	50.0	50.0	60.0	60.0	60.0
Sod. Bicarbonate	25.0	30.0	35.0	25.0	30.0	35.0	25.0	30.0	35.0
SMCC 90	50.0	50.0	50.0	50.0	50.0	50.0	50.0	50.0	50.0
PVP K30	5.0	5.0	5.0	5.0	5.0	5.0	5.0	5.0	5.0
Citric Acid	15.0	15.0	15.0	15.0	15.0	15.0	15.0	15.0	15.0
Starlac	59.0	54.0	49.0	49.0	44.0	39.0	39.0	34.0	29.0
Talc	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0	2.0
Mg. stearate	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0
Total weight	250.0	250.0	250.0	250.0	250.0	250.0	250.0	250.0	250.0

**Table 3 Formulation Table of Factorial Batches of Buccal tablets** 

## Methodology

#### **Preformulation**

#### **Characterization of API: -**

#### **Organoleptic property:**

This involves documenting the drug's hue and scent using precise language. and record the same in results and discussion chapter.

#### Flow Property:

The study examined the flow characteristics of API/powder blends. To determine bulk density, 10 grams of powder were carefully poured into a 50-milliliter measuring cylinder without compaction, and the volume of the powder was recorded. After tapping the powder 100 times, the volume was measured to obtain the desired tapped density. The powder mixtures' Carr's index (CI) & Hausner ratio (HR) were calculated using the measurements of powder densities.

#### **Melting point:**

The Melting Point Testing Apparatus: technique was incorporated into the device to determine the drug's (API) melting point.

Using a modern melting point apparatus, the following steps are needed to measure melting point:

- make sure the sample is completely dry and powdered
- put the sample in a capillary tube
- insert the capillary tube to the melting point apparatus
- quickly heat the sample to a predetermined temperature
- slow down the rate of temperature increase to see when the sample melts
- view the melting point through a viewing eyepiece
- digitally record the melting point.

#### **Drug Excipient Compatibility Study**

FTIR investigations were conducted to evaluate the compatibility between excipients and the drug. Samples of the pure drug and physical mixtures of excipients with the drug were analyzed using FTIR to assess their compatibility. The distinctive peaks corresponding to various functional groups were compared with established standard peaks to determine any discrepancies.

#### **Calibration Curve**

#### Preparation of Standard Calibration Curve of Tapentadol HCl

**Principle:** The Tapentadol HCl exhibits peak absorbance at 275 nm in 0.1 N HCl (1.2 pH).

**Instrument used**: UV - Vis 1700 Spectroscopy by Shimadzu, UV Spectrophotometer, Japan.

#### **Procedure:**

- Preparation of standard solution : 10 mg of Tapentadol HCl was precisely measured and dissolved in a small volume of 0.1 N HCl (pH 1.2) in a 100 ml volumetric flask. The solution was then diluted with 0.1 N HCl (pH 1.2) to achieve a concentration of 100  $\mu$ g/ml (SS-I). From this solution, 10 ml was withdrawn and further diluted to 100 ml to obtain a concentration of 10  $\mu$ g/ml (SS-II).
- Preparation of working standard solutions: Aliquots of 2 ml, 4 ml, 6 ml, 8 ml and 10ml from SS-II were pipetted into 10 ml volumetric flasks. The volume was adjusted with 0.1 N HCl (pH 1.2) to achieve final concentrations of 2, 4, 6, 8, and 10 µg/ml, respectively. The absorbance of each concentration was measured at 275 nm.

- A solution containing Tapentadol hydrochloride (10 µg/mL) from SS-II was scanned in the UV region to identify the wavelength.
- λmax: 275 nm
- Beer's range: 2-10µg/ml.

#### **Evaluation Parameters of Tablets**

#### (A) Pre compression Parameters: -

**Bulk Density**:

Computed using the formula that follows.

**Bulk density = Weight of powder / Bulk volume** 

**Tapped Density** 

**Tapped density = Weight of powder / Tapped volume** 

**Compressibility Index (CI):** 

Carr's Compressibility index  $(\%) = \{(TD-BD) / TD\} \times 100$ .

Table 4 Scale of flow ability by Compressibility index

C.I.	Category	Hausner's Ratio		
<10	Excellent	1.00–1.110		
11 – 15	Good	1.12–1.180		
16 – 20	Fair	1.19–1.250		
21 – 25	Passable	1.26–1.340		
26 – 31	Poor	1.35–1.450		
32 – 37	Very poor	1.46–1.590		
>38	Very very poor	>1.600		

#### Hausner's Ratio:

#### Hausner's ratio = Tapped density / Bulk density

#### (B) Post Compression Parameters

#### Weight Variation

An electric digital balance was used to weigh twenty tablets of each formulation, and the average weight was determined.

Table 5 IP/BP/USP limit of weight variation test.

IP/BP Average weight of tablet (mg)	% Deviation	USP Average weight of tablet (mg)
130 or less	10.0	80 or less
From 130 to 324	7.5	From 80 to 250
More than 324	5.0	More than 250

#### **Hardness**

Hardness was assessed by diametrically compressing six tablets from each batch using a Monsanto hardness tester, and average values were subsequently computed.

#### **Friability**

Friability, which indicates tablet strength, was assessed using a Roche-type friabilator following this procedure: After twenty tablets were weighed precisely, they were put into the tumbling device, which turned at a speed of twenty-five revolutions per minute, lowering the tablets every six inches. The tablets were tumbling for four minutes, and a percentage of weight loss was computed by reweighing the tablets.

$$\%$$
 loss = Initial wt. - Final wt. / Initial wt.  $\times$  100

#### **Thickness**

Using vernier callipers, the thickness of the buccal tablets was measured. A random selection of ten tablets was made from each batch, and their thickness was individually assessed. The average thickness was then calculated from the recorded measurements.

#### **Assay**

Ten tablets were individually weighed and then pulverized. Next, an amount of powder equivalent to one tablet was weighed, and the drug was extracted in 0.1 N HCl. The resulting solution was filtered through a 0.45 µm membrane. After appropriate dilution, the absorbance was measured using a Shimadzu UV-1700 UV/Vis double-beam spectrophotometer.

#### Floating Lag Time and Total Floating Time

In vitro buoyancy was assessed using a beaker method. Tablets were placed in a 900 ml beaker containing 0.1 N HCl solution at 37±0.5°C. The duration for tablets to rise to the surface of the medium and the time it took for the tablet to remain buoyant on the surface were recorded as floating lag time and total floating time, respectively.

#### **Swelling index**

Tablets' swelling index was measured in 0.1 N HCl. Tablets were weighed individually and given the W0 label. They were then individually put into glass beakers with 100 ml of 0.1 N HCl at  $37\pm0.5^{\circ}$ C. The tablets were taken out of the beaker on a regular basis, and any extra surface water was wiped off with blotting paper before the pills were weighed again and recorded as Wt. Next, the swelling index was computed using the following formula.

Swelling index = 
$$(W_t - W_0 / W_0) \times 100$$

Where,  $W_t$  = weight after swelling

 $W_0$  = weight before swelling

#### In Vitro Dissolution Studies

Using USP apparatus II, the dissolution profile was investigated while the dissolution medium (900 ml of 0.1N HCl) was kept at  $37^{\circ}C \pm 0.5^{\circ}C$  at 50 rpm. Each batch of pills had six that were put into separate baskets with the HCl solution within. Over the course of 12 hours, 10 ml samples were taken out every hour. A filter was applied to these samples. These solutions' absorbance was determined using a UV spectrophotometer.

#### **Drug Release Kinetic Study**

The zero order, first order, Korshmeyer and Papps, and Higuchi equation models were among them. Plotting the obtained data using the following models allowed us to study the release kinetics: Higuchi's model (Equation 3), which shows the cumulative percentage of drug released against the square root of time; zero order, which represents cumulative drug release over time (Equation 1); and first order, which shows the log cumulative percentage of remaining drug versus time (Equation 2). Drugs dissolved from pharmaceutical formulations that release the drug gradually without disaggregation are described by zero order kinetics.

 $Q_0$  is the starting concentration of drug in solution,  $Q_1$  is the amount of drug dissolved at time t, and  $K_0$  is the zero-order rate constant, given in concentration units over time. Hours of time are represented by the variable t. A concentration versus time plot graphed would connect the axes' origin and produce a straight line with a slope equal to  $K_0$ . First order model has been used to describe absorption and elimination of drugs. The following equation express this model.

where  $Q_0$  is the starting drug concentration in the solution,  $K_1$  is the first order release constant, and  $Q_1$  is the amount of drug released in time t. This will result in a linear graph showing the decimal logarithm of the amount of dug that has been released over time.

In order to investigate the release of pharmaceuticals that are water soluble and low solubility when incorporated into semi-solid or solid matrices, Higuchi created a number of models. Giving rise to the following expression.

where t is the time in hours, Q is the amount of drug released at time t, and KH is the Higuchi dissolution constant reflecting the system's design characteristics. Therefore, the reciprocal of the square root of time and the medication release rate are proportionate. According to Higuchi, drug release is a diffusion mechanism that is time-dependent and based on Fick's law, square root.

Mechanism of Drug Release: Data from the dissolution research were plotted in Korsmeyer Peppa's equation as log cumulative percentage of drug released vs. log time in order to assess the mechanism of drug release from tablets. The exponent n was then determined by calculating the slope of the straight line.

$$F = (M_t / M) = K_m t^n \dots 4$$

where  $K_m$  is a constant dependent on the geometry of the dosage form, 'n' is the slope of the linear plot, Mt is the drug release at time t, F is the fraction of drug release at time t, and M is the total amount of medication in the dosage form. The releasing mechanism is indicated by the value of n.

When the exponent value n is equal to 0.5 in Fickian diffusion, and when it is between 0.5 and 1.0 in non-Fickian diffusion, it is considered abnormal. When the exponent value is n=1, it denotes a standard zero-order release or Case-II Transport.

#### **Stability Study**

For a month, the optimised batch of floating tablets was subjected to accelerated stability testing in a humidity chamber with a temperature of 40°C and a relative humidity of 75%. The best batch of tablets were evaluated for appearance, drug content, floating qualities, and in vitro drug release characteristics before being wrapped in aluminium foil pouches.

# **Results & discussion**

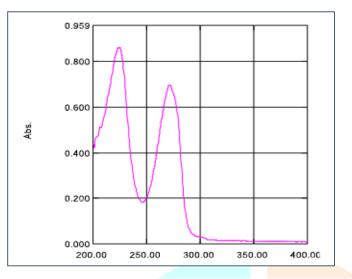
#### **Preformulation Study**

**Table 6 API properties** 

Sr. No.	Characte	ristic Properties	Observation/Result			
1	Organoleptic					
	Characteristics	Odour of API	It is Odourless powder			
		Taste of API	It is Tasteless powder			
		Bulk density of API (g/ml)	$0.58 \pm 0.01$			
		Tapped density of API (g /ml)	$0.70 \pm 0.01$			
2	Flow Properties	Carr's index (%) of API	$17.1 \pm 0.02$			
130		Hausner's ratio of API	1.21 ± 0.01			
		Angle of repose (θ°) of API	38.6 ± 0.2			
3	Solubility	It was observed that API was freely soluble in water and 0.1 N HCL at room temperature.				
4	Melting Point	206-209 °C				

#### **Standard Calibration Curve of Tapentadol HCl**

The standard calibration curve was prepared in 0.1 N HCl (pH 1.2). The  $\lambda_{max}$  found 275 nm. Please refer below figure for  $\lambda_{max}$ .



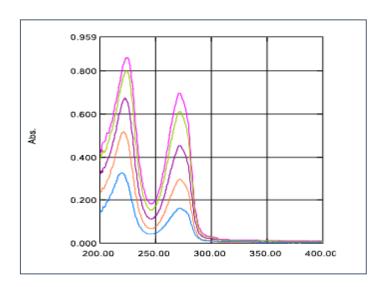


Figure 1  $\lambda_{max}$  of Tapentadol HCl in 0.1 N H

Figure 2 Overlay plot of Tapentadol HCl in 0.1 N HCl

Table 7 Standard calibration curve Tapentadol HCl in 0.1 N HCl

Concentration (μg/ml)	Absorbance (Average) ± SD			
0.0	0.0 ±0.000			
2	$0.154 \pm 0.001$			
4	$0.281 \pm 0.001$			
6	$0.428 \pm 0.002$			
8	$0.560 \pm 0.003$			
10	$0.703 \pm 0.002$			

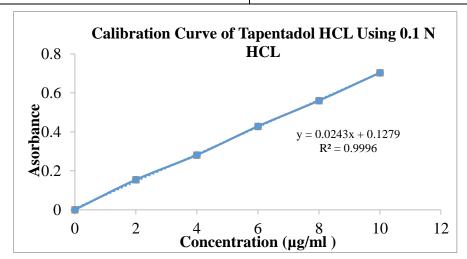


Figure 3 Calibration curve of Tapentadol HCl in 0.1 N HCl

#### **Drug- excipient compatibility studies**

The FTIR spectra of both the pure drug and the optimized formulation are depicted in figures below. Upon examination of these figures, it was determined that no interactions between the drug and excipients were observed. All characteristic peaks of the pure drug remained unchanged in the final formulation.

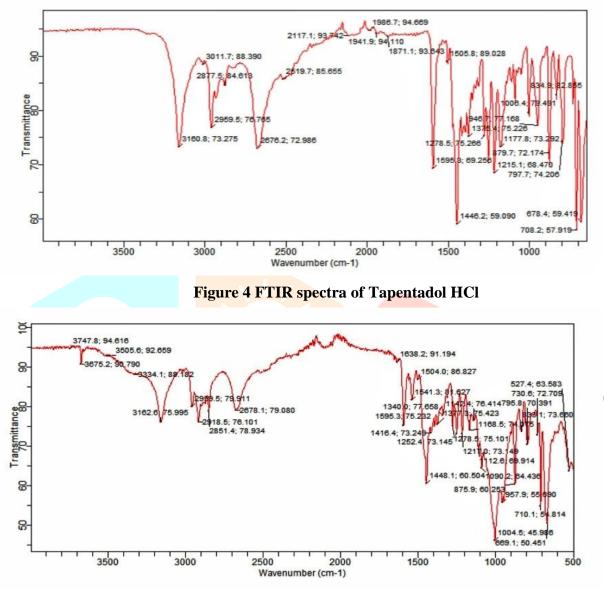


Figure 5 FTIK of Physical Mixture of Optimized Formulation

Table 8 Interaction studies through IR spectroscopy

Stuatakina	Tapentadol HCl	Formulation
Stretching	Peak cm <sup>-1</sup>	Peak cm <sup>-1</sup>
C-N Stretching	1006.4	1004.5
C–O Stretching	1278.5	1278.5
C=C Stretching	1595.8	1595.3
N–H Stretching	2676.2	2678.1
C–H Stretching	2959.5	2959.5
O-H Stretching	3160.8	3162.6

**Conclusion:** Based on the FTIR study findings presented above, it was concluded that there were no notable interactions observed between the drug and excipients. Therefore, the drug and other excipients are deemed compatible with each other.

#### **Pre compression Parameters of Trial Batches**

**Table 8 Result of Pre compression parameters of Trial Batches** 

Batch	Bulk density (g/ml)(n=3)	Tapped density (g/ml)(n=3)	Carr's index (%) (n=3)	Hausner's ratio (n=3)	Angle of repose (θ°) (n=3)
<b>T1</b>	$0.54 \pm 0.02$	$0.61 \pm 0.03$	$11.48 \pm 0.01$	$1.13 \pm 0.02$	$32.25 \pm 0.05$
T2	$0.48 \pm 0.03$	$0.52 \pm 0.05$	$7.69 \pm 0.02$	$1.08 \pm 0.01$	$35.22 \pm 0.08$
Т3	$0.47 \pm 0.05$	$0.55 \pm 0.03$	$14.55 \pm 0.04$	$1.17 \pm 0.02$	$31.12 \pm 0.07$
<b>T4</b>	$0.57 \pm 0.07$	$0.60 \pm 0.04$	$5.00 \pm 0.07$	$1.05 \pm 0.01$	$34.26 \pm 0.08$
Т5	$0.47 \pm 0.04$	$0.54 \pm 0.04$	$12.96 \pm 0.05$	$1.15 \pm 0.02$	$34.15 \pm 0.07$
Т6	$0.42 \pm 0.05$	$0.54 \pm 0.02$	$16.00 \pm 0.06$	$1.19 \pm 0.02$	$31.19 \pm 0.05$
<b>T7</b>	$0.51 \pm 0.08$	$0.56 \pm 0.05$	$8.93 \pm 0.04$	$1.10 \pm 0.01$	$34.56 \pm 0.04$
Т8	$0.52 \pm 0.02$	$0.58 \pm 0.04$	$10.34 \pm 0.05$	$1.12 \pm 0.01$	$33.75 \pm 0.03$
Т9	$0.47 \pm 0.04$	$0.54 \pm 0.02$	$12.96 \pm 0.05$	$1.15 \pm 0.01$	$32.84 \pm 0.03$

It can be concluded from the flow property data above that the blended flow is of a good nature and handles compression smoothly.

#### **Evaluation of post compression parameters Trial Batches**

Post-compression parameters of trial batches T1-T9 were evaluated, including weight variation, thickness, hardness, and friability. All batches successfully passed the weight variation test, demonstrating uniformity in tablet weight. Additionally, the tablets exhibited adequate hardness to withstand mechanical stress. Friability tests revealed that all batches had a friability below 1%, meeting the formulation's requirements. Furthermore, the tablets demonstrated uniform thickness across all batches. In conclusion, the physical parameters of the tablets were deemed satisfactory for all trial batches.

Table 9 Results of post compression parameters of Trial Batches

Batch	Weight variation test (mg) (n=3)	Thickness (mm) (n=3)	Hardness (kg/cm²) (n=3)	Friability (%) (n=3)
<b>T1</b>	$250 \pm 2.3$	$4.52 \pm 0.13$	$4.9 \pm 0.5$	$0.61 \pm 0.22$
<b>T2</b>	$255 \pm 2.1$	$4.51 \pm 0.11$	$4.8 \pm 0.3$	$0.63 \pm 0.19$
Т3	$250 \pm 2.6$	$4.48 \pm 0.15$	$4.9 \pm 0.4$	$0.47 \pm 0.13$
<b>T4</b>	$255 \pm 2.2$	$4.51 \pm 0.08$	$5.1 \pm 0.6$	$0.84 \pm 0.17$
<b>T5</b>	$250 \pm 2.7$	$4.49 \pm 0.10$	$5.7 \pm 0.2$	$0.50 \pm 0.26$
<b>T6</b>	$250 \pm 1.8$	$4.50 \pm 0.12$	$5.5 \pm 0.3$	$0.81 \pm 0.11$
<b>T7</b>	$250 \pm 2.5$	$4.52 \pm 0.11$	$4.9 \pm 0.7$	$0.62 \pm 0.16$
T8	$255 \pm 2.5$	$4.51 \pm 0.16$	$5.3 \pm 0.3$	$0.64 \pm 0.12$
Т9	$250\pm2.0$	$4.51 \pm 0.13$	$5.1 \pm 0.6$	$0.66 \pm 0.23$

Table 10 Results of post compression parameters of Trial Batches

Batch	Drug Content (%) (n=3)	Swelling Index (%) (n=3)	Floating Lag Time (sec) (n=3)	Total Floating Time (hr.) (n=3)
T1	$97.9 \pm 2.1$	$51.6 \pm 2.1$	$65 \pm 2$	$4 \pm 0.2$
<b>T2</b>	99.1 ± 1.5	$62.4 \pm 2.4$	$62 \pm 2$	$5 \pm 0.3$
Т3	$99.5 \pm 2.4$	$68.5 \pm 3.3$	$72 \pm 3$	$4 \pm 0.6$
<b>T4</b>	$99.0 \pm 2.6$	$58.2 \pm 2.5$	68 ± 3	$12 \pm 0.2$
T5	$98.8 \pm 1.4$	$62.5 \pm 2.8$	$75 \pm 4$	$>12 \pm 0.5$
<b>T6</b>	$98.7 \pm 2.9$	$54.6 \pm 3.4$	$78 \pm 4$	>12 ± 0.5
<b>T7</b>	$97.5 \pm 1.8$	$68.9 \pm 2.1$	$75 \pm 2$	$12 \pm 0.7$
Т8	$99.6 \pm 2.8$	$68.6 \pm 3.1$	85 ± 5	$12 \pm 0.4$
Т9	$98.2 \pm 2.1$	$69.4 \pm 2.6$	48 ± 1	$12 \pm 0.2$

# In Vitro Drug Release Study

**Table 11 Drug release of Trial Batches** 

Time in hr.	T1	<b>T2</b>	Т3	<b>T4</b>	Т5	Т6	Т7	Т8	Т9
1	40.3±	37.9±	35.8±	22.9±	20.8±	19.2±	26.7±	25.9±	32.5±
1	2.4	2.9	2.9	2.5	2.4	2.3	2.6	2.4	2.8
2	59.7±	51.8±	48.8±	31.8±	31.5±	28.9±	37.8±	30.9±	40.5±
2	1.8	2.7	2.5	2.3	2.9	2.1	2.4	1.9	2.5
2	79.8±	66.0±	60.5±2.	39.5±2.	37.9±	34.8±	43.5±	35.9±	48.9±
3	1.1	2.1	4	1	2.7	2.9	2.9	1.4	2.1
4	99.0±1.	84.2±	79.8±2.	45.5±2.	42.5±2.	39.8±	50.7±	43.7±	56.8±
4	9	2.3	4	0	9	2.7	2.1	1.9	2.9
5		99.2±2.	87.3±2.	50.3±1.	45.9±2.	42.3±	58.6±	51.9±2.	64.8±
3	(a)	4	1	8	7	2.4	1.9	5	2.8
6	3	~	99.9±1.	55.6±	48.7±2.	46.4±	65.2±2.	58.4±2.	71.8±
O	المحم	٠)٠	7	2.1	6	2.1	7	4	2.5
7				62.8±2.	52.4±2.	49.2±2.	73.4±2.	66.1±1.	76.4±2.
/	_	-	- T	8	5	8	4	9	9
8				70.4±2.	56.8±2.	52.9±2.	79.9±2.	71.3±1.	80.9±2.
0	-		-	4	3	4	1	7	5
9				$75.9\pm2.$	60.2±2.	54.8±2.	84.5±2.	$77.2\pm1.$	84.5±2.
9	_	-	-	1	1	1	0	5	1
10				81.8±1.	62.5±1.	56.6±2.	88.6±1.	81.3±1.	88.6±1.
10	_	_	_	7	9	0	8	3	6
11				85.3±1.	64.9±1.	59.9±1.	93.7±1.	85.6±1.	93.7±1.
11	_	-	_	6	7	8	4	1	4
12				88.1±1.	68.4±1.	62.5±1.	96.4±1.	93.5±0.	99.8±1.
12	_	_	_	2	2	5	1	8	1

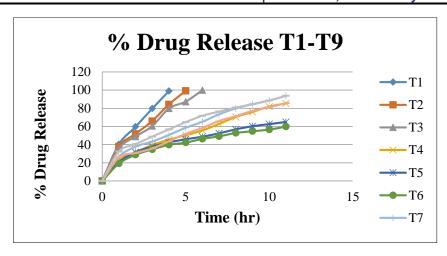


Figure 6 Drug release of Batch T1-T9 of Trial Batches

#### **Evaluation of factorial batches**

Powder blend of factorial batches F1-F9 checked for pre-compression parameters. Observed results are mentioned in following table. From the below table it concluded that the all batches have a good flow properties.

Table 12 Results of Pre compression parameters of factorial batches

Batch	Bulk density (g/ml) (n=3)	Tapped density (g/ml)(n=3)	Carr's index (%) (n=3)	Hausner's ratio (n=3)	Angle of repose (θ°) (n=3)
F1	$0.49 \pm 0.04$	$0.58 \pm 0.08$	$15.52 \pm 0.03$	$1.18 \pm 0.02$	$32.14 \pm 0.08$
F2	$0.47 \pm 0.05$	$0.54 \pm 0.08$	$12.96 \pm 0.04$	$1.15 \pm 0.02$	$31.04 \pm 0.07$
F3	$0.48 \pm 0.06$	$0.59 \pm 0.07$	$18.64 \pm 0.02$	$1.23 \pm 0.01$	$33.56 \pm 0.05$
F4	$0.58 \pm 0.05$	$0.64 \pm 0.05$	$9.38 \pm 0.03$	$1.10 \pm 0.01$	$31.45 \pm 0.06$
F5	$0.47 \pm 0.08$	$0.55 \pm 0.05$	$12.96 \pm 0.04$	1.15 ± 0.01	$32.56 \pm 0.04$
F6	$0.43 \pm 0.03$	$0.49 \pm 0.04$	$12.24 \pm 0.06$	$1.14 \pm 0.01$	$32.84 \pm 0.06$
F7	$0.46 \pm 0.07$	$0.52 \pm 0.07$	$11.54 \pm 0.02$	$1.13 \pm 0.01$	$31.54 \pm 0.04$
F8	$0.51 \pm 0.03$	$0.57 \pm 0.05$	$10.53 \pm 0.04$	$1.12 \pm 0.02$	$33.45 \pm 0.05$
F9	$0.52 \pm 0.02$	$0.59 \pm 0.07$	$15.25 \pm 0.08$	$1.18 \pm 0.01$	$31.15 \pm 0.02$

Table 13 Results of post compression parameters of factorial batches

Batch	Weight variation test (mg) (n=3)	Thickness (mm) (n=3)	Hardness (kg/cm²) (n=3)	Friability (%) (n=3)
F1	$252 \pm 2.2$	$4.53 \pm 0.10$	$4.9 \pm 0.3$	$0.82 \pm 0.12$
F2	$251 \pm 2.8$	$4.53 \pm 0.14$	$5.0 \pm 0.2$	$0.65 \pm 0.08$
F3	$250 \pm 2.9$	$4.52 \pm 0.19$	$4.8 \pm 0.4$	$0.87 \pm 0.13$
F4	$253 \pm 2.8$	$4.51 \pm 0.09$	$5.1 \pm 0.2$	$0.67 \pm 0.11$
F5	251 ± 2.5	$4.50 \pm 0.12$	$5.0 \pm 0.5$	$0.61 \pm 0.18$
F6	250 ± 3.1	$4.48 \pm 0.18$	$5.2 \pm 0.2$	$0.62 \pm 0.17$
<b>F7</b>	$252 \pm 2.8$	4.47 ±0 .17	$5.4 \pm 0.3$	$0.52 \pm 0.12$
F8	254 ± 1.9	$4.45 \pm 0.12$	$5.6 \pm 0.1$	$0.47 \pm 0.15$
F9	252 ± 2.4	$4.46 \pm 0.16$	$5.4 \pm 0.4$	$0.51 \pm 0.14$

Table 15 Results of post compression parameters of factorial batches

Batch	Drug Content (%) (n=3)	(%)		Total Floating Time (hr.)
F1	$96.8 \pm 3.1$	$62.5 \pm 1.9$	64 ± 2	9.0
F2	$98.7 \pm 2.9$	$63.7 \pm 2.5$	38 ± 3	9.0
F3	98.6 ± 2.7	64.1 ± 2.1	25 ± 2	9.0
F4	99.8 ± 2.2	$67.6 \pm 2.6$	70 ± 3	12.0
F5	97.5 ± 1.8	69.9 ± 2.1	45 ± 2	12.0
F6	99.1 ± 2.7	$68.2 \pm 2.9$	40 ± 2	12.0
F7	$98.3 \pm 2.9$	$70.3 \pm 3.4$	75 ± 3	>12.0
F8	99.4 ± 1.4	$72.5 \pm 2.7$	60 ± 2	>12.0
F9	$98.6 \pm 1.8$	$71.8 \pm 3.2$	48 ± 2	>12.0

#### **Drug release**

Drug release of factorial batches was performed to check the impact of the amount of polymer and efferent agent. Based on results it found that the amount of polymer change the release profile of the tablets. The actual impact was checked by using factorial design. The comparative plot was shown in below figure.

Table 14 Drug release study of factorial batches

Time in hr.	F1	<b>F2</b>	F3	F4	<b>F</b> 5	<b>F</b> 6	<b>F7</b>	F8	<b>F9</b>
1	27.1±2. 9	30.4±2.1	34.5±2.	24.3±2.	28.5±2.1	29.2 ± 2.4	19.2±2.9	22.4±2.5	24.3±2. 1
2	40.3±2. 2	43.2±2.8	46.3±2.	35.8±2. 8	39.5±2.7	41.5±2.1	27.9±2.7	29.5±2.4	32.8±2.
3	52.3±2. 0	55.9±2.4	58.9±2.	42.8±2. 7	44.1±2.5	47.3±2.9	35.8±2.6	37.1±2.1	38.9±2. 5
4	61.9±2. 8	64.4±2.9	69.2±2.	49.6±2.	51.5±2.9	53.9±2.5	43.2±2.4	45.9±2.9	47.2±2.
5	71.6±2. 5	74.9±2.5	78.5±2.	57.1±2.	59.4±2.7	61.4±2.1	50.1±2.2	52.2±2.7	54.9±2.
6	80.9±2.	82.5±2.4	85.1±2. 0	63.5±2. 5	65.7±2.4	67.9±2.9	57.3±2.0	59.7±2.4	61.7±2.
7	88.7±2.	90.9±2.1	92.5±2. 8	70.8±2.	73.9±2.1	75.3±2.5	64.2±2.7	66.3±2.1	68.9±2.
8	95.8±2. 5	97.3±2.9	98.6±1.	77.9±2. 9	80.5±2.8	83.1±2.2	69.8±2.5	71.2±1.9	73.2±2.
9	99.9±2.	99.2±2.5	99.7±1. 5	82.6±2.	84.8±2.5	86.9±2.1	75.9±2.4	77.9±1.8	78.6±1.
10	-	-	-	88.7±2. 5	90.5±2.1	93.4±1.9	79.6±2.1	82.2±1.5	83.9±1. 5
11	-	-	-	95.6±2. 4	96.7±1.9	97.9±1.5	83.1±2.0	84.9±1.1	86.5±1.
12	-	1	-	9 <mark>8.2±2.</mark>	99.3±1.5	99.5±1.1	86.3±1.7	87.3±1.0	89.2±1.

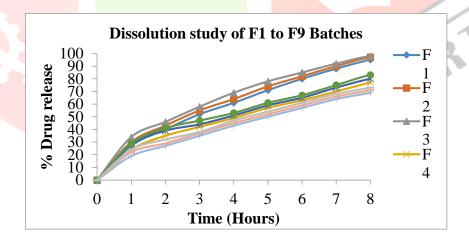


Figure 7 % Drug release of factorial batch F1-F2

#### **Drug Release Kinetic Study**

In vitro drug release study data was fitted in kinetic models and results obtained were shown in below table 17. Formulation was best fitted with Korsmeyer Peppas model and mechanism of drug release was found to be Non-Fickian type of diffusion.

Table 17 Drug Release Kinetic Study of factorial batches F1-F9

Formulation	Zero Order	First Order	Higuchi	Korsmeyer Peppas model	
code	$\mathbb{R}^2$	$\mathbb{R}^2$	$\mathbb{R}^2$	$\mathbb{R}^2$	N
F1	0.9923	0.9575	0.9986	0.9992	0.597
F2	0.9877	0.9537	0.9979	0.9987	0.553
F3	0.9826	0.9500	0.9970	0.9979	0.508
F4	0.9975	0.9712	0.9961	0.9975	0.546
F5	0.9975	0.9787	0.9970	0.9927	0.500
F6	0.9971	0.9761	0.9944	0.9947	0.485
F7	0.9983	0.9691	0.9960	0.9983	0.634
F8	0.9981	0.9756	0.9947	0.9945	0.585
F9	0.9972	0.9772	0.9945	0.9936	0.544

#### Analysis of factorial design

The obtained results were compiled for analysis using factorial design. The factors and responses tabulated in software than analysis was done using below table.

Table 18 Factorial design analysis table

	Independe	Independent variable		Variables
Batch	A (Polyox WSR 303) mg	B (Sodium Bicarbonate) Mg	Y <sub>1</sub> (% Drug release at 1 hour)	Y <sub>3</sub> Floating Lag time(sec)
F1	40.0	25.0	27.0	64.0
F2	40.0	30.0	30.0	38.0
F3	40.0	35.0	34.0	25.0
F4	50.0	25.0	24.0	70.0
F5	50.0	30.0	28.0	45.0
F6	50.0	35.0	29.0	40.0
F7	60.0	25.0	19.0	75.0
F8	60.0	30.0	22.0	60.0
F9	60.0	35.0	24.0	48.0

#### ANOVA for Quadratic model

**Response 1: (% Drug release at 1 hour)** 

Source	Sum of Squares	df	Mean Square	F-value	p-value	
Model	164.33	5	32.87	59.16	0.0034	Significant
A-Polyox WSR 303	112.67	1	112.67	202.80	0.0008	
B-Sodium Bicarbonate	48.17	1	48.17	86.70	0.0026	
AB	1.0000	1	1.0000	1.80	0.2722	
$A^2$	2.00	1	2.00	3.60	0.1540	
B <sup>2</sup>	0.5000	1	0.5000	0.9000	0.4128	
Residual	1.67	3	0.5556			
Cor Total	166.00	8				

Factor coding is **Coded**.

Sum of squares is Type III - Partial

The **Model F-value** of 59.16 implies the model is significant. There is only a 0.34% chance that an F-value this large could occur due to noise.

P-values less than 0.0500 indicate model terms are significant. In this case A, B are significant model terms. Values greater than 0.1000 indicate the model terms are not significant. If there are many insignificant model terms (not counting those required to support hierarchy), model reduction may improve your model.

#### **Final Equation in Terms of Actual Factors**

(% ]	Drug release at 1 hour	=
	-26.00000	
	+0.866667	Polyox WSR 303
	+2.26667	Sodium Bicarbonate
	-0.010000	Polyox WSR 303 * Sodium Bicarbonate
	-0.010000	Polyox WSR 303 <sup>2</sup>
	-0.020000	Sodium Bicarbonate <sup>2</sup>

Y = -26.00000 + 0.866667 + 2.26667 - 0.010000 - 0.010000 - 0.020000

The equation in terms of actual factors can be used to make predictions about the response for given levels of each factor. Here, the levels should be specified in the original units for each factor. This equation should not be used to determine the relative impact of each factor because the coefficients are scaled to accommodate the units of each factor and the intercept is not at the center of the design space.

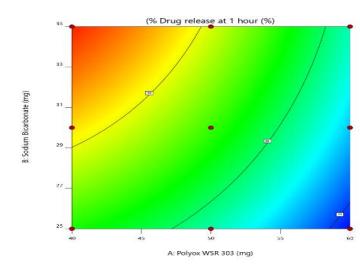


Figure 8 Contour Plot for drug release

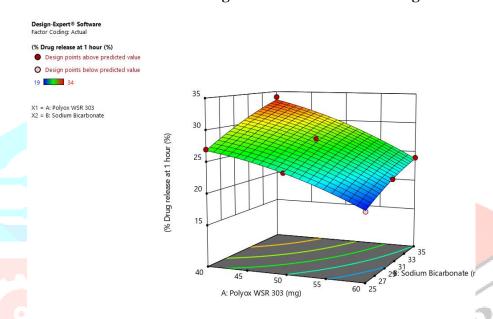


Figure 9 Surface Plot for drug release

# ANOVA for Quadratic model

**Response 2: Floating Lag time** 

Source	Sum of Squares	df	Mean Square	F- value	p- value	
Model	2166.67	5	433.33	47.56	0.0047	Significant
A-Polyox WSR 303	522.67	1	522.67	57.37	0.0048	
B-Sodium Bicarbonate	1536.00	1	1536.00	168.59	0.0010	
AB	36.00	1	36.00	3.95	0.1410	
A <sup>2</sup>	0.0000	1	0.0000	0.0000	1.0000	
B <sup>2</sup>	72.00	1	72.00	7.90	0.0672	
Residual	27.33	3	9.11			
Cor Total	2194.00	8				

Factor coding is **Coded**. Sum of squares is **Type III - Partial** 

The **Model F-value** of 47.56 implies the model is significant. There is only a 0.47% chance that an F-value this large could occur due to noise.

**P-values** less than 0.0500 indicate model terms are significant. In this case A, B are significant model terms. Values greater than 0.1000 indicate the model terms are not significant. If there are many insignificant model terms (not counting those required to support hierarchy), model reduction may improve your model.

#### **Final Equation in Terms of Actual Factors**

A: Polyox WSR 303

Floating Lag time	=
+403.0000	
-0.86666	Polyox WSR 303
-20.6000	Sodium Bicarbonate
+0.06000	Polyox WSR 303 * Sodium Bicarbonate
+7.71246E-1	Polyox WSR 303 <sup>2</sup>
+0.24000	Sodium Bicarbonate <sup>2</sup>

Y = 403.00000-0.86666-20.6000+0.060001+7.71246E-1+0.24000

The equation in terms of actual factors can be used to make predictions about the response for given levels of each factor. Here, the levels should be specified in the original units for each factor. This equation should not be used to determine the relative impact of each factor because the coefficients are scaled to accommodate the units of each factor and the intercent is not at the center of the design space.

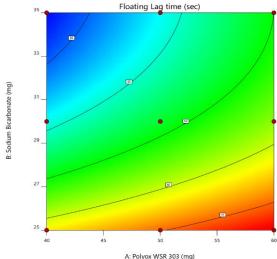
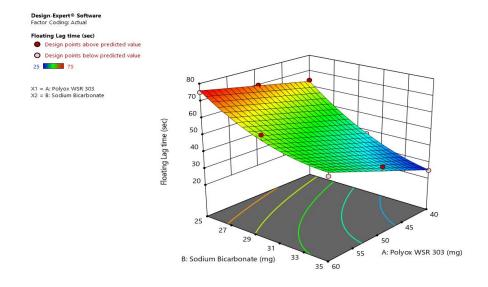
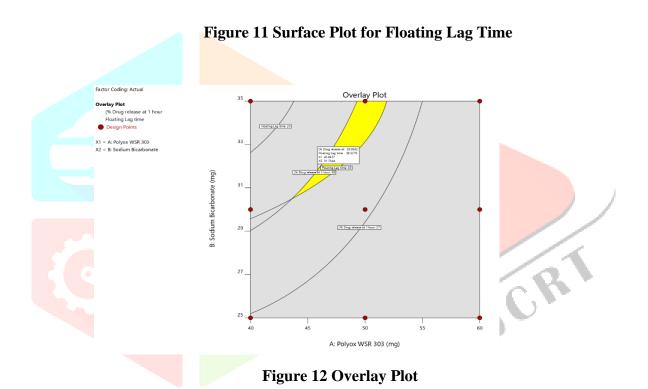


Figure 10 Contour Plot for Floating Lag Time





#### Check point batch analysis (Validation of design)

#### Validation of model

As seen in Table 6.15, a checkpoint batch was created using the desirability function. In order to verify the accuracy of the prediction, a checkpoint batch including C1 and C2 was generated and subjected to the same evaluation guidelines as the other batches. Data from the response and the necessary data were compared. The target response parameters and the obtained response variables of the check point batch were compared. It was allowed to have bias for observed vs projected responses.

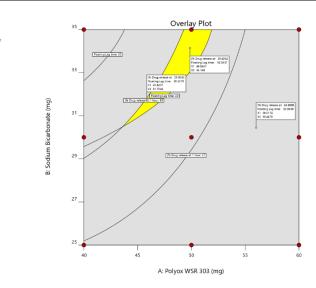


Figure 13 Overlay Plot for check point batch

**Table 19 Check point batch** 

Batch	Amount of Polyethylene	Amount of Sodium	% Drug release at 1 hour			
Datcii	Oxide (mg)	Bicarbonate (mg)	Predicted	Observed	% Bias	
C1	49.80	34.10	29.40	29.10	1.010	
C2	56.00	30.40	24.50	24.90	0.980	
Batch	Amount of	Amount of Sodium	Floating Lag time (sec)			
Datcii	Polyethylene Oxide (mg)	Bicarbonate (mg)	Predicted	Observed	% Bias	
C1	49.80	34.10	38.0	37.0	1.020	
C2	56.00	30.40	52.0	53.0	0.980	

# Selection of optimized batch

Finally, optimized batch was taken from the overlay plot and complete analysis was done and finally loaded for stability study.

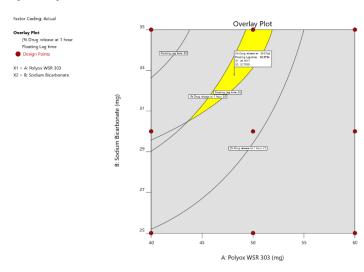


Figure 14 Overlay Plot for optimized batch

**Table 20 Composition of Optimized batch O1** 

Ingredients (mg)	01
Tapentadol HCl	50.0
Polyox WSR 303	48.10
Sod. Bicarbonate	32.70
Citric Acid	15.0
PVP K30	5.0
SMCC 90	50.0
Starlac	43.20
Talc	2.0
Mg. stearate	4.0
Total weight	250.0

Table 21 Results of optimized batch O1

<b>Evaluation Parameters</b>	Results	
Weight variation (mg)	251 ± 1.6	
Thickness(mm)	$4.6 \pm 0.3$	
Hardness(kg/cm <sup>2</sup> )	$5.4 \pm 0.2$	
Friability (%)	$0.42 \pm 0.02$	
Drug Content (%)	99.6 ± 1.3	
Swelling Index(%)	67.3 ± 1.1	
Floating Lag Time (sec)	$37 \pm 3$	
Total Floating Time (hr.)	12.00 hours	
	Time (hour)	% Dr <mark>ug Releas</mark> e
a fine	0.0	0
	1.0	29.6±3.9
	2.0	37.9±3.2
% Drug Release	4.0	53.8±2.8
	6.0	67.5±2.6
	8.0	80.4±1.7
	10.0	91.7±1.4
	12.0	99.5±0.9
Drug Release Kinetic Study	Kinetic Model	R <sup>2</sup> value
	Zero Order	0.9946
	First Order	0.9677
	Higuchi	0.9976
	Peppas	0.9964

The optimized batch O1 was prepared and evaluated. The prepared tablets were found satisfactory in physical as well as chemical evaluation. The tablets have uniform drug distribution hence drug content was found satisfactory. Weight variation also found well within acceptable range. Thickness was found uniform. Floating properties also found satisfactory. Drug release profile of 12 hrs. Found 99.2%. Finally optimized batch O1 was loaded for stability for 1 month.

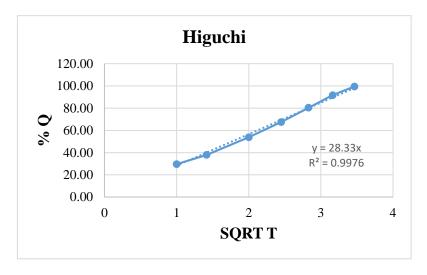


Figure 15 Higuchi graph

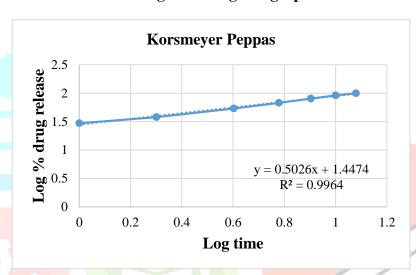


Figure 16 Korsmeyer Peppas graph

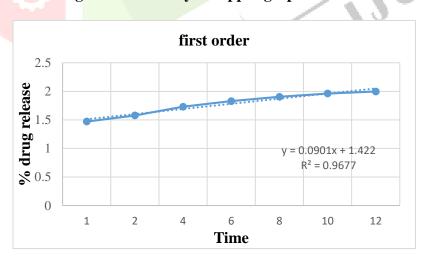


Figure 17 Fist order graph

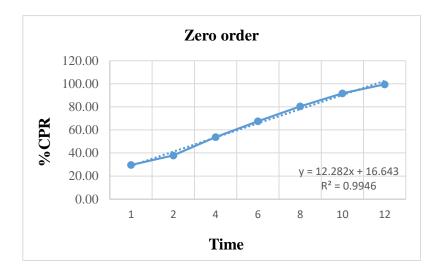


Figure 18 Zero order graph

#### **Stability Study**

The optimized batch, O1, which exhibited superior results compared to other batches, was chosen for stability assessment. The stability study was conducted for one month under conditions of 40°C temperature and 75% relative humidity in a stability chamber. After the one-month duration, samples were withdrawn for analysis. The results indicated no alteration in the in-vitro drug release profile after 12 hours. Furthermore, the stability study demonstrated that the percentage drug content remained within the acceptable range. Additionally, there were no observable changes in the outer appearance of the tablets.

In-vitro drug Drug **Floating Lag Time** Content release at 12 **Appearance Batch** Time (sec) **Period** (%)hrs. (n=3)(n=3)(n=3)Initial White tablet  $37 \pm 3$  $99.5 \pm 0.9$  $99.6 \pm 1.3$ 01 After 30 White tablet  $99.2 \pm 1.8$  $39 \pm 4$  $99.3 \pm 1.6$ days

Table 22 Results of stability study of batch O1

#### Conclusion

**Preparation Method:** Floating tablets of Tapentadol HCl were prepared via direct compression using an effervescent approach.

**Ingredients:** Poly ethylene Oxide (Polyox WSR 303) served as the sustained release polymer. Sodium bicarbonate functioned as the gas-generating agent.

**Effects of Polymer Concentration:** Increasing polymer concentration decreased the drug release profile. Effects of Sodium Bicarbonate Amount: Increasing sodium bicarbonate amount decreased floating lag time.

Conclusion: Polyox WSR 303 and sodium bicarbonate, in appropriate concentrations, effectively developed sustained-release floating tablets of Tapentadol HCl. Preformulation study of API was performed using FTIR Spectroscopy. Drug excipient compatibility shows no interaction between drug and excipients. Trial batches initiated for screening of polymer, prepared tablets were analyzed for various parameters like weight variation, hardness, thickness, friability, swelling and drug content, In-vitro drug release extended to 12 hours, with formulation T9 demonstrating 99% drug release, hence choosen for optimization using factorial design was done using DOE software. Factorial batches (F1-F9) with Polyox WSR 303, Sodium bicarbonate as Indipendent Variables showed significant outcomes. Factorial batch achieved desired drug release. Batch O1 was further refined for drug release 99% over 12 hours and Floating Lag time 37 seconds. Higuchi's model fit best. The optimized batch O1 was subjected for Stability study and found stable for 1 month. Hence, O1 batch was the optimized batch.

#### References

- 1. Devendiran B, Mothilal M, Damodharan N, "Floating Drug Delivery an Emerging Technology with Promising Market value." *Research Journal of Pharmacy and Technology*, **2020**, *13*(6), 3014-3020.
- 2. Haridwar L, Sheeba F, Prabhat C, HarshithaA, Pallavi N, "Floating Drug Delivery System: A Brief Review." *Asian Journal of Pharmacy and Technology*, **2020**, *10*(4), 255-264.
- 3. Sapavatu S, Jadi R,"Development of floating drug delivery system for loratadine: *in-vitro* and *in-vivo* evaluation." *International Journal Of Pharmaceutical Science & Research*, **2020**, 11(6), 3021-32.
- 4. Bharadhwaj R, DamodharanR, "Floating Osmotic Drug Delivery System: A Review." *Research Journal Of Pharmacy and Technology*, **2019**, *12*(2), 959-971.
- 5. Alai M, Shinkar D. Saudagar R. "A Review on Floating Mucoadhesive Drug Delivery System." *Research Journal of Pharmacy and Technology*, **2017**, *10*(10), 3567-3572.
- 6. Rita D, Vicky S, Savej M, Alok S, Kundan B, Vikram S, Tanuja J, Pooja P, Mukta A, Tripathi D, AjazuddinA, "Emphasizing the pharmaceutical consideration behind the development of gastro-retentive dosage form." *Research Journal of Pharmacy and Technology*, **2017**, *10*(4), 1209-1214.
- 7. Gidwani B, Vyas A, Ahirwar K, Shukla S, Pandey R, "Factorial design and a practical approach for gastroretentive drug delivery system." *Research Journal of Pharmacy and Technology*, **2016**, *9*, 641-9.
- 8. Mayur U, Niranjan D, "Floating Drug Delivery Systems, An effective tool for Control Release- A Complete Review." *Research Journal of Pharmacy and Technology*, **2015**,8 (9), 1320-1324.
- 9. Ish G, Meenakshi M, Manish D, "Floating Drug Delivery Systems: A Novel Approach." Research Journal of Pharmacy and Technology, 2015,(4), 490-495
- 10. Kute C, Dev A, Rathod S, Qureshi A, "Floating Drug Delivery System- A Review." *Research Journal of Pharmacy and Technology*. **2014**,7(3), 354-361.
- 11. Anupama S, Ratnaparkhi M, Shilpa C, "An Overview Floating Drug Delivery System", *International Journal of Research and Development in Pharmacy and Life Sciences*, **2014**, *3*(5), 1106-1115.
- 12. Mohan P, Doshi S, Khinchi M, Sharma N, Agrawal D,"A review on natural polymers approaches to floating drug delivery system." *Asian Journal of Pharmaceutical Research and Development*, **2013**, *1*, 145-59.
- 13. Drug Information, December 2023, https://go.drugbank.com/drugs/DB06204
- 14. Drug Information, December 2023, <a href="https://go.drugbank.com/salts/DBSALT000169">https://go.drugbank.com/salts/DBSALT000169</a>
- 15. Drug Information, December 2023, https://www.rxlist.com/nucynta-drug.htm#indications
- 16. Drug Information, December 2023, <a href="https://www.drugs.com/tapentadol.html">https://www.drugs.com/tapentadol.html</a>

- 17. Drug Information, December 2023, https://www.1mg.com/generics/tapentadol-210776
- 18. Rajeswari, Saripilli, ,"Formulation and evaluation of bilayer gastric floating tablets of clarithromycin and ranitidine infection." HCL for treating Η pylori https://shodhganga.inflibnet.ac.in/bitstream/10603/383746/17/17. 2015, 50-96
- 19. USP 32-NF27: Polyethylene oxide, United States Pharmacopeial Convention, Rock-Ville, Maryland, USA. 2009; 2(1) 3398-3399.
- 20. Shiva K, Rasagna M, MangilalT, "Preparation and Evaluation of Tapentadol Hydrochloride Solid Lipid Nanoparticles." Journal of Drug Delivery and Therapeutics, 2019,9(4-A), 618-24.
- 21. Pati N, "Formulation and Evaluation of Chronomodulated Press-coated Tablets of Tapentadol HCl." Asian Journal of Pharmaceutics, 2018, 12, 1-8.
- 22. Hetal P, Pancholi N, Patel V, "Development and Evaluation of a Once-Daily Controlled Porosity Osmotic Pump of Tapentadol Hydrochloride." American Association of Pharmaceutical Scientists (AAPS) Pharmaceutical Science Technology 2016, 17, 1248–1260.
- 23. Srikanth A, Narendra K, KanchanamalaK, "Formulation and evaluation of floating tablets of Tapentadol HCl by direct compression method by using different swellable polymers and effervescent agents," Indian Journal of Research in Pharmacy and Biotechnology, 2017, 5(2), 145-148.
- 24. Swati C, Somnath P, Bhanudas S, "Application of Design of Experiment for Floating Drug Delivery of Tapentadol Hydrochloride", *Hindawi*, **2013**, 1-7.
- 25. Swati C, Somnath P, Bhanudas S, "Design, Development And Evaluation Of Floating Tablets Of Tapentadol Hydrochloride Using Chitosan", Asian Journal of Pharmaceutical and Clinical Research, **2012,** (5) 163-168.
- 26. Viral Kanzariya, Falguni Sharma, Hitesh Jain, Umesh Upadhyay "Formulation development and evaluation of floating tablet of Cinnarizine for an effective management of motion sickness" The Pharma Innovation Journal. 2014, 3(8): 20-28.
- 27. K. Ravi Shankar, Shaik Aminabee, G. Ramana Reddy, et al "Effect Of Various Sustained Release Polymers on Floating Tablets Of Carvedilol Phosphate-A Comparative Study" International Journal Of *Applied Pharmaceutics.* **2023,** 15(6): 20-28, 125-131.
- 28. Ramakrishna Vydana, Chandra Sekhar Kothapalli Bonnoth, Vidyadhara Suryadevara and Sandeep Doppalapudi "Preparation and Evaluation of Captopril Oral Floating Controlled Release Formulations" Journal of Pharmaceutical Research International. 2021, 33(44B): 442-452.
- 29. K. Chaitanya Sellappan Velmurugan, "Formulation And Evaluation Of Levodopa Effervescent Floating Tablets" International Journal Of Pharmacy and Pharmaceutical Sciences 2015, 7 (5), 189-193.
- 30. Rajesh Pawar, Swati Jagdale, Dheeraj Randive "Evelopment Of Floating Gastroretentive Drug Delivery System based on A Novel Excipient For Metformin Hydrochloride Using Mixture Design" International Journal Of Pharmacy And Pharmaceutical Sciences 2020, 12 (10), 62-71.
- 31. Indian Pharmacopoeia, 2018, Volume I, 676.

- 32. V. Arjunan a, R. Santhanam b, M.K. Marchewka c, S. Mohan d, Haifeng Yang "Structure activity studies of an analgesic drug tapentadol hydrochloride by spectroscopic and quantum chemical methods" Journal of Molecular Structure, · August **2015**,1100 (2015) 188 202.
- 33. Omkar D. Sherikar and Priti J. Mehta "Development and Validation of RP- HPLC, UV-Spectrometric and Spectrophotometric Method for Estimation of Tapentadol Hydrochloride in Bulk and in Laboratory Sample of Tablet Dosage Form" Journal of Chemical and Pharmaceutical Research, 2012, 4(9): 4134-4140
- 34. G. Krishnamoorthy, N. Gayathri, A. M. Ismail, R. Senthamarai, S. Shakila Banu "Determination of Tapentadol Hydrochloride in Bulk and Its Solid Dosage Form by UV – Spectrophotometry" International Journal of Pharmaceutical Sciences Review and Research, 2014; 25 (2) 139-141
- 35. Mokhtar M. Mobrouk, Hamed M. El-Fatatry, Sherin F. "Spectrophotometric Methods for Determination of Tapentadol Hydrochloride" Journal of Applied Pharmaceutical Science, 2013, 3(03), 122-125
- 36. Subhash V. Deshmane, Aijaz A. Sheikh, Om. S. Kharde, Ravindra H. Kale, Kailash R. Biyani "Development and Evaluation of Floating Tablet Containing Nevirapine Using A 3<sup>2</sup> Full Factorial Design Optimization Method" *International Research Journal of Pharmacy*, **2019**, 10 (6) 37-42.
- 37. M. Padmaa Paarakh, Preethy Ani Jose, Cm Setty, G.V. Peterchristoper "Release Kinetics Concepts and Applications" International Journal of Pharmacy Research & Technology, 2018 (8) 12-20.

