



Review On Formulation Of Suspension

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Abstract- A coarse dispersion of insoluble solid particles in a liquid medium is a pharmaceutical suspension. In a suspension, the particle diameter is often higher than 0.5 μm . However, imposing a clear distinction between suspensions and dispersions with finer particles is challenging and problematic. An essential group of medicinal dose forms includes suspensions. The benefits of suspension dosage forms include efficient intramuscular depot therapy, effective hydrophobic drug dispensing, avoiding the use of solvents, masking the taste of some ingredients, providing resistance to drug degradation due to hydrolysis, oxidation, or microbial activity, and easy swallowing for young or elderly patients. Additionally, suspension formulations allow for the incorporation of substantially larger drug concentrations than solution dosage forms. The current study provides an overview of a number of suspension-related topics, including classification, theories, types of suspending agents, formulation, packaging, assessment, stability, and contemporary research on suspensions. It also discusses certain formulation-related topics.

Keywords- Suspension, agent suspension, evaluation, and stability.

1. Introduction

As with other disperse systems, pharmaceutical suspensions are thermodynamically unstable, necessitating the use of stabilisers or suspending agents in the composition. These agents slow the rate of settlement and make it simple to dissipate any settled particulates through protective colloidal action as well as by growing the stability of the suspending medium[1,2]. Gatifloxacin is an oral or intravenous synthetic broad spectrum 8-methyl fluoroquinolone antibacterial drug. It is antibacterial, and the way it works is by preventing bacterial DNA replication by attaching to the DNA gyrase enzyme, which enables the unwinding necessary to replicate

one DNA double helix into two. Significantly, the

drug's affinity for bacterial DNA gyrase is 100 times greater than its affinity for mammalian DNA. A versatile antibiotic called as gatifloxacin is effective against to Gram positive and Gram negative bacteria. Only infections that are verified or firmly believed to be brought on by bacteria should be treated or prevented with it. As a consequence, it has received approval from the Food and Drug Administration for the treatment of urinary tract infections, sinusitis, and acute bacterial exacerbations of chronic bronchitis. Because of its harsh taste and instability in liquids, gatifloxacin is only available on the market as tablets. The composition of a suspension will be most ideal for patients who have trouble ingesting solid dose forms, notably elderly and paediatric patients, however the product may not be physically and chemically stable[3,4]. The composition of thermodynamically unstable oral suspensions presents a significant challenge, necessitating the use of a stabiliser or suspending agent in the dosage form to slow the rate of settling and facilitate easy dispersion of any settled particulate matter through protective colloidal action as well as by increasing the consistency of the suspending medium. Suspending agents can be polysaccharides, synthetic chemicals, or inorganic substances. As tablet binders, emollients, and thickeners in cosmetics and suspensions as film forming agents and transitional colloids, natural gums and synthetic polymers have been widely employed. [5,6]. Gatifloxacin was used for this inquiry because it is a typical example of a nearly insoluble antibiotic that would need to be manufactured as a liquid dosage form with a suspending agent.

2. Definition

An internal phase that is evenly distributed throughout the dispersed phase makes up a medicinal suspension, which is a wide dispersion. a single or a mixture of suspending agents can maintain the internal phase, which is made up of inflexible solid particles with a particular size range, consistently through out suspending vehicle. For non-oral use, the Outer phase

(suspending media), which is often watery, may also be a natural or oily liquid.

Types of suspension

Suspensions can be categorised in a number of ways, including.

1. Considering the administration method (general classes).
2. Depending on the preparation procedure and the type of the dispersed phase.
3. Depending on the type of sediments.

1. Classification of suspension based on administration method (general classes)

a. Oral suspension

One or a photo of Oral suspensions are liquid formulations that are meant for oral administration and comprise more active components contained in a preferred, occasionally coloured, and typically viscous medium. For instance, 5 mL of the Macron solution includes 750 mg of the active ingredient (Atovaquone) distributed. Some of the active components in oral solutions with several active ingredients might be dissolved. When gently shaken, suspensions intended for perioral administration may contain sediment that easily disperses into a uniform suspension that is sufficiently stable to allow administration of the proper dose. The concentration of the drug component suspended is proportionately higher when the medication is manufactured for use as paediatric drops, allowing for a smaller administration volume for paediatric dosing. High amounts of scattered materials are typically found in antacids and radiopaque solutions.

b. Externally applied suspension/ Topical suspensions

Illustration of a topical suspension Topical suspensions are those that are made for protective, cosmetic, and dermatological uses. These suspensions are usually coloured and may contain some aroma, but they are devoid of the usual oral administration sweets and amours. Dispersed phase concentrations may be more than 20%. Topical suspensions can be fluid solutions, like calamine lotion, that are intended to quickly evaporate off the skin after leaving a light deposit of the active ingredient. Pastes are a type of suspension that has a semisolid consistency and contains concentrated granules that are often disseminated in a paraffin foundation. A powdered medication may also be suspended in an emulsion base, as in zinc cream.

c. Parenteral suspension/ injectable suspensions

Systems that, before being given to a patient, suspend or discard insoluble drug particles in either aqueous or vegetable oil carriers. The majority of parenteral solutions are intended to be administered intramuscularly or subcutaneously. For instance, the subcutaneous and intramuscular injection of triamcinolone actinide injectable suspension and insulin zinc suspension, respectively. Solid particles in parenteral suspension may make up 0.5 to 30% of the total weight. Since they have an impact on the

simplicity of injection (syringability) and the drug in depot treatment, viscosity and particle size are important variables. Sterility is another crucial factor to take into account for parenteral suspensions. Since they are a suspension dose form, terminal filtration cannot be used to sterilise them. Aseptic processing and the use of sterile active pharmaceutical ingredients (API) are thus necessary for their production. Additionally, it is not advised to use antimicrobial preservatives in intravenous (IV) solutions.

d. Rectal Suspensions

Picture of rectal suspension rectal suspensions are liquid preparations intended for rectal use. These suspensions are used for the treatment or management of local disorders of the colon e.g., Melamine (5-aminosalicylic acid) suspension used for the treatment of Crohn disease, distal ulcerative colitis, proctosigmoiditis, and prostates. Formulation and quality considerations for rectal suspensions are similar to that of oral suspensions.

e. Optic suspensions

These liquid preparations with micronized particle content, known as picture of optic suspension, are meant to be injected into the outer ear. For the treatment of ear infections, inflammation, and discomfort, many ocular suspensions are antibiotics, corticosteroids, or analgesics. Due to their contact with the mucosal surface, otic suspensions are often created as sterile suspensions.

2. Depending on the preparation procedure and the type of the dispersed phase

The many types of suspensions include those that contain diffusible solids, in diffusible solids, weakly wet table solids, precipitate-forming liquids, and chemical reaction byproducts.

3. According to nature of sediment

a. Flocculated Suspensions

This kind of solid dispersion results in a network-like structure of solid particles in the dispersion medium. No firm cake is formed by the aggregates. Due to the high rate of sedimentation and the loose, readily dispersible nature of the sediment generated, these aggregates settle quickly. Because the dispersed phase frequently separates from the dispersion medium, the suspension lacks elegance.

b. Non flocculated Suspensions

In this form, the solid particles reside in the dispersion medium as distinct entities. The sediments create a dense cake. When sediments are created, it is difficult to disperse the solid medication particles because of the slow pace of sedimentation. The dispersed phase is suspended for a longer period of time, giving the suspension a more exquisite aspect

. Literature review of Suspension (Aluminum Hydroxide Gel)

Gibbsite (also called as hydrargillite), a mineral containing aluminium hydroxide, $Al(OH)_3$, and its three considerably rarer polymorphs, barite, dolerite, and

nordstrandite, are all found in nature. Amphoteric means that aluminium hydroxide possesses either basic and acidic characteristics. Aluminum oxide hydroxide, commonly known as Aloe (OH), and aluminium oxide, also known as alumina (Al₂O₃), are closely related substances. The majority of the bauxite in the aluminium ore is made up of these compounds. [9] Aluminum hydroxide, often known as "algedrate," is utilized as an antacid in both animals and humans (mainly cats and dogs). It is recommended above other options like sodium bicarbonate since Al (OH) ₃, as insoluble, prevents the stomach's pH from rising over 7, which prevents the stomach from secreting too much acid. Alum-Cap, Aludrox, Favicon, or Peps Amar are examples of brand names. It combines with extra stomach acid to reduce its acidity of the stomach's contents [10,11] which may ease ulcer, heartburn, or dyspepsia symptoms. Because the aluminium ions in these products prevent cells of smooth muscle in the digestive tract from contracting, peristalsis is slowed and it takes longer for faeces to transit through the colon, which can result in constipation[12]. By include equivalent quantities of magnesium hydroxide and magnesium carbonate, that have counter balance laxative properties, some of these products are intended to minimise such effects [13].

In addition, this substance is used to manage hypophosphatemia, which is characterised by increased blood levels of phosphate or phosphorus in both humans and animals with kidney failure. Normally, the kidneys remove extra phosphate from the blood through filtering, but renal failure can lead to phosphate buildup. The quantity of phosphorus that may be absorbed is decreased when the aluminium salt is consumed because it attaches to phosphate inside the intestines [14, 15].

4.Principle

Gelized aluminium hydroxide acts as an antacid. It is sometimes referred to as aluminium hydroxide suspension or combination. Due to the strong affinity between both the dispersed phase of aluminium hydroxide and water, the colloidal suspension does not require the addition of a suspending agent. As a result, the viscosity increases and the gel of aluminium hydroxide dissolves quickly in water.

During the course of its shelf life, aqueous aluminium hydroxide antacid solution tends to gel up. This gelling intensified when being stored in warm temperatures (30–40° C). By adding Sorbitol in concentrations ranging from 0.5 to 7%, depending on the amount of Aluminum hydroxide per suspension, this issue can be avoided.

Magnesium hydroxide, which has a laxative effect, is typically mixed with aluminium hydroxide in commercial antacid formulas because it has a constipating effect. Consumer approval of an antacid depends on how it tastes. The flavour of sorbitol is cool,

sweet, and pleasant. Preservatives called parabens are employed. Using peppermint oil as a flavour. The medium is alcohol. The preparation is coloured by the addition of amaranth solution.

5.Method

Combine peppermint oil, sodium saccharine, methyl and propyl parabens, and alcohol in a dry, clean container. Add Sorbitol solution to another beaker after adding roughly half the volume of clean water. Mix well. Stir well after adding the alcoholic solution to this mixture. Small amounts of aluminium hydroxide should be added while stirring continuously. Mix in the amaranth solution. It is possible to run the finished product through with a colloidal mill and homogenizer. Transfer to a graduated cylinder and fill to desired volume with distilled water. Mix well. Transfer to a bottle.

6.Conclusion

This paper will look at the best methods for assessing suspensions to determine whether they serve the intended function. From the viewpoint of the control chemist, who is performing a regular set of procedures on a number of production samples but whose curiosity and desire are typically satisfied when he receives a yes or no answer, the efficiency assessment of suspension will not be examined. Instead, pharmacists will study suspensions in the phase of research and development of their evolution because they want to be sure they have the optimal formulation for the task at hand.

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