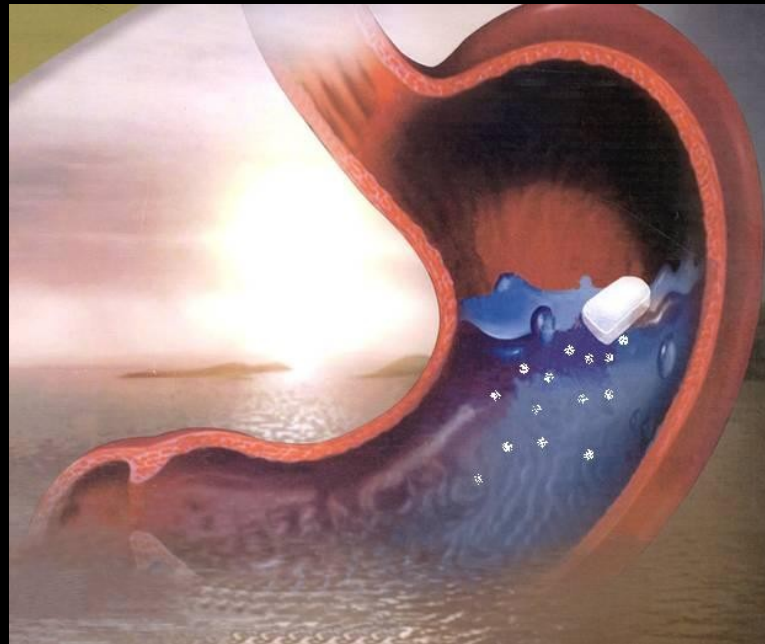


# Recent Advances in Formulation & Evaluation Of GRDDS



# LIST OF CONTENTS

- INTRODUCTION to GRRDS
- GRDDS TECHNOLOGIES
- EVALUATION OF GRDDS – In vitro
- EVALUATION OF GRDDS – In vivo

# Introduction to GRDDS

Physiological limitations of orally administered drugs:

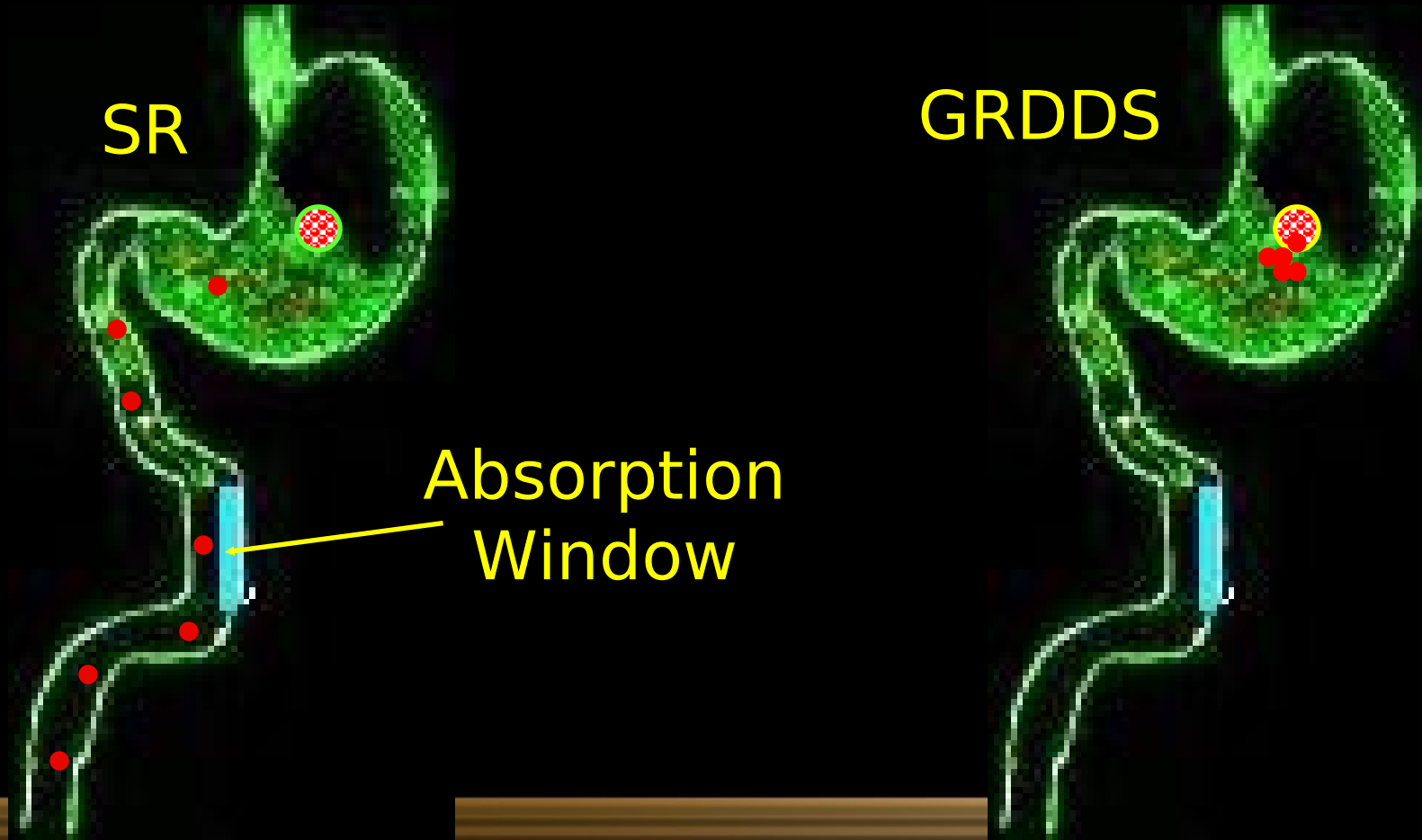
- Variable gastric emptying time (GET)
- Short Gastric residence time (GRT)
- Incomplete drug release due to brief gastrointestinal transit time (8-12 h)

# DRUGS WHICH REQUIRE GRDDS

## [A] NARROW ABSORPTION WINDOW

Narrow absorption window  
at upper part of GIT

Levodopa/ Riboflavin



## Rationale for GR

## Name of drug

- pH-dependant absorption from stomach (acidic drugs) **Furosemide**
- Degradation at higher pH (higher stability at lower pH) **Captopril**
- Degradation in intestine or colon **Ranitidine**
- Higher solubility at lower pH or weakly basic drugs **Cinnarizine / Verapamil**
- Drugs for local action **Antacids, anti-ulcers  
antibacterials for H. pylori**

# Gastro-Retentive Drug Delivery Systems (GRDDS)

Drug delivery systems that remain for prolonged time in the gastrointestinal tract

## Advantages of GRDDS

- Prolongation and control of gastric emptying time
- Drugs present at absorption site for longer time
- Improved bioavailability
- Reduced drug wastage

# Limitations of GRDDS

- Fed and Fasted States
- Intake of type of meal
- High level of fluids in stomach
- Unsuitable for drugs absorbed along entire GI tract e.g. nifedipine
- Drugs irritant to the gastric mucosa

# GI characteristics in humans

- Volume of stomach
- Gastric pH in fasting state
- Duodenal diameter
- Small intestinal transit time
- Total git transit time
- Size which does not empty from stomach
- 1500 ml
- 2
- 3-4 cm
- 180+60min
- 20-30 h
- Longer than 5 or larger than 3 cm



# GRDDS TECHNOLOGIES

[A] Low Density Approach

[B] Expandable Approach

[C] Bio/Muco-adhesive Approach

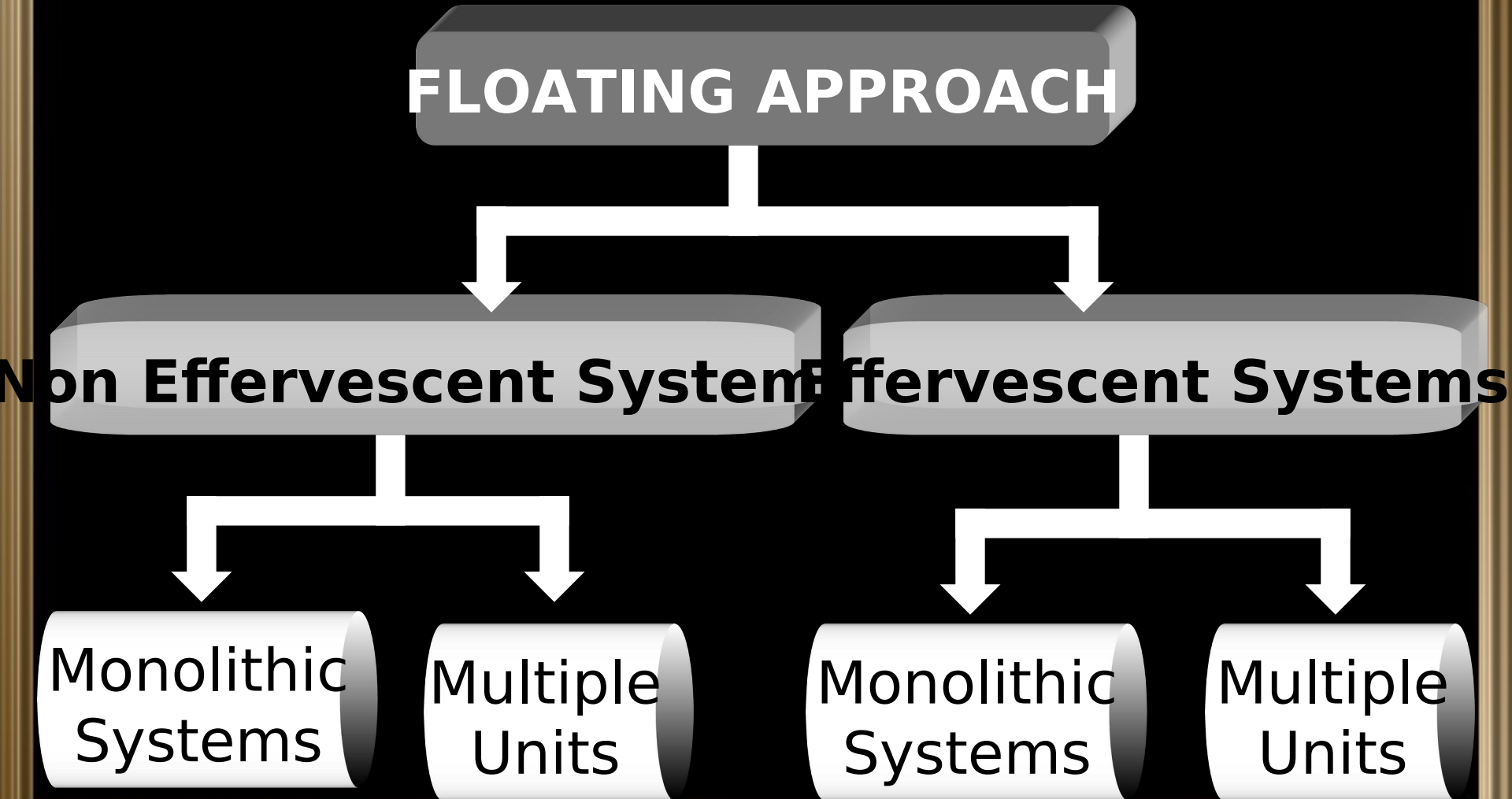
[D] High Density Approach

# Floating Systems/Low-Density Systems/Hydrodynamically Balanced Systems

- Bulk Density of dosage forms lower than gastric fluids, remain floating in gastric fluid
- Controlled Release of drug from the system
- Increase in gastric retention time

# GRDDS TECHNOLOGIES

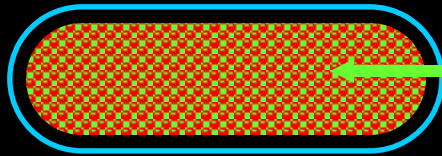
## [A] LOW DENSITY APPROACH



# A.1 - FLOATING - NON EFFERVESCENT

## MONOLITHIC SYSTEMS

### HBS™ CAPSULE



DRUG

+

Highly Swellable Gel  
forming Hydrocolloids

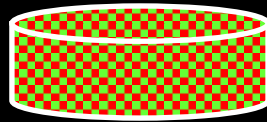
- HPMC
- HPC
- HEC
- MC

# A.1 - FLOATING - NON EFFERVESCENT

## MONOLITHIC SYSTEMS

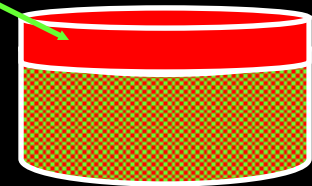
### MATRIX TABLET

Single Layer Tablet



Bilayer Tablet

Loading Dose

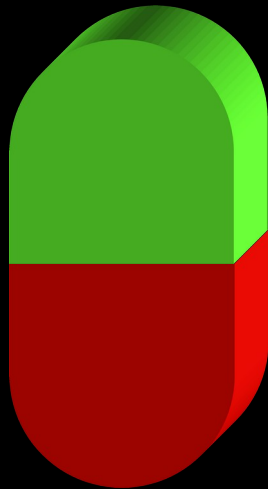


# A.1 - FLOATING - NON EFFERVESCENT

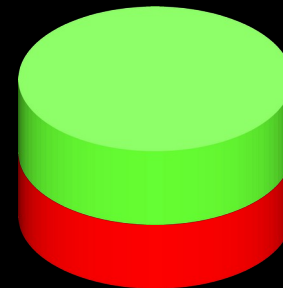
## MONOLITHIC SYSTEMS

### NON MATRIX BILAYER SYSTEM

BILAYER CAPSULE



BILAYER TABLET



# A.1 - FLOATING - NON EFFERVESCENT

## MONOLITHIC SYSTEMS

### **TABLET with FOAM**

- Polypropylene Foam
- Hydrophobic Powder
- Open-cell Structure
- Highly Porous
- Low Inherent Density

### **TABLET with LIPID**

#### **Glyceryl Monooleate**

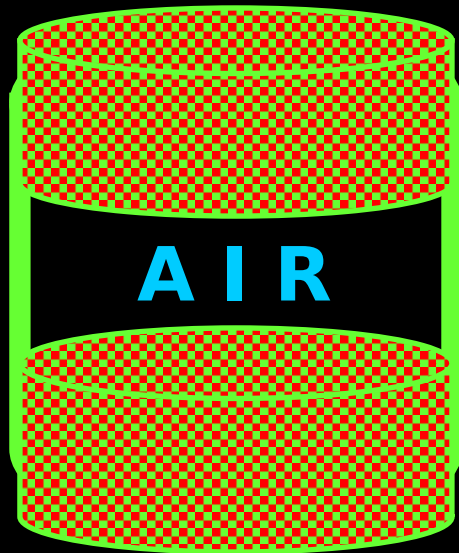
- Swells in Water
- Converted to Liquid Crystals - Cubic Shape

**Melted And Molded**

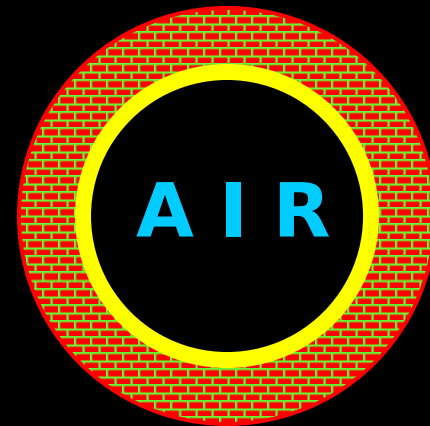
# A.1 - FLOATING - NON EFFERVESCENT

## MONOLITHIC SYSTEMS

**TABLETS IN  
CYLINDER**



**COATED HOLLOW  
GLOBULAR SHELL**

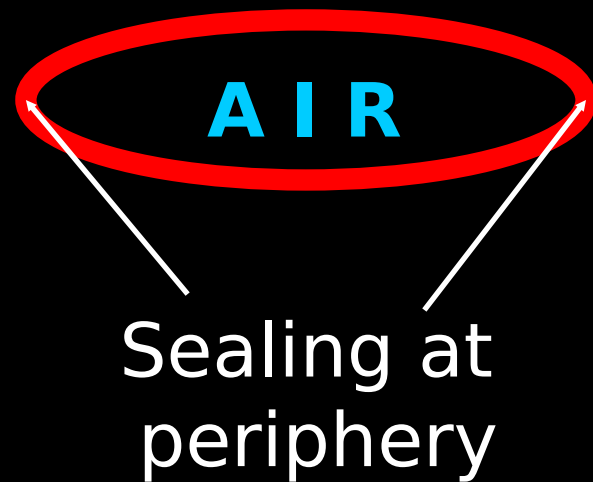




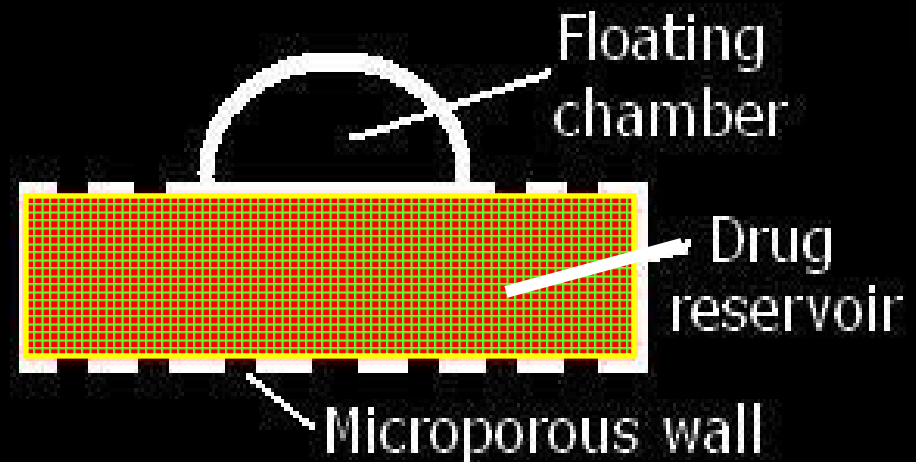
# A.1 - FLOATING - NON EFFERVESCENT

## MONOLITHIC SYSTEMS

### MULTILAYER FILM



### MICROPOROUS RESERVIOR

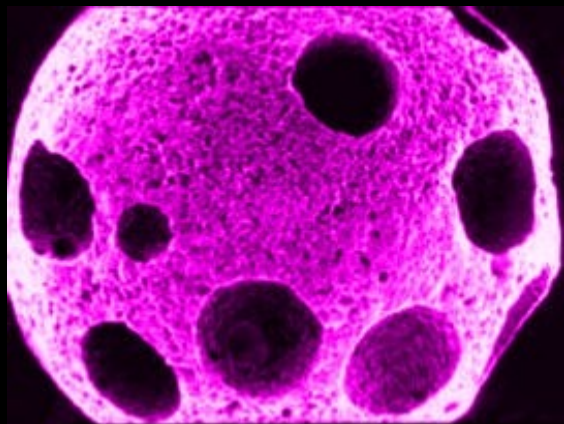


# A.1 - FLOATING - NON EFFERVESCENT

## MULTIPLE UNITS

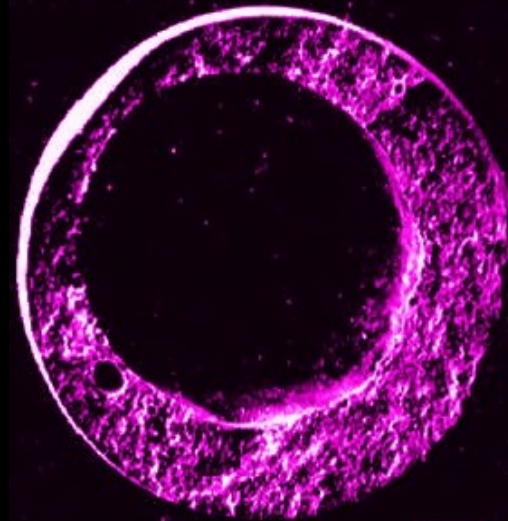
### HOLLOW MICROSPHERE

Solvent Evaporation



### MICROBALLOON

Emulsion Solvent  
Diffusion Method



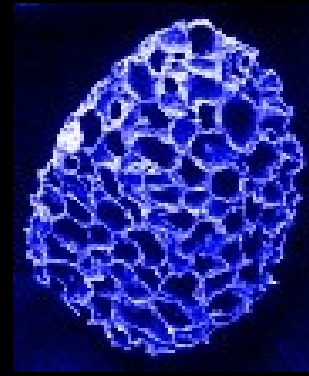
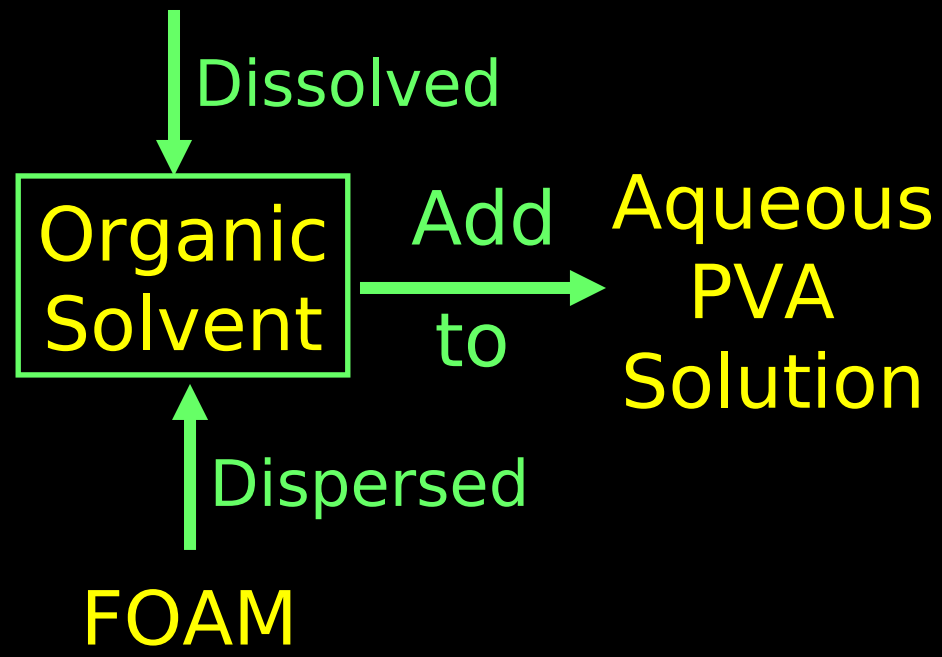
# A.1 - FLOATING - NON EFFERVESCENT

## MULTIPLE UNITS

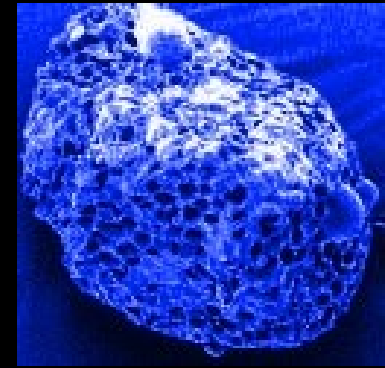
### FOAM Containing MICROPARTICLES

Drug,  
Polymer

Solvent Evaporation Method



Only  
FOAM



FOAM  
Microparticle

# A.1 - FLOATING - NON EFFERVESCENT

## MULTIPLE UNITS

### CALCIUM SILICATE As FLOATING CARRIER

- Highly Porous
- Large Pore Volume
- Low Inherent Density
- Granules Drug  
HPMC  
Ca-Silicate

### GELUCIRE® GRANULES

- Hydrophobic Lipid
- Diff. Grades – 39/01  
43/01
- Low Inherent Density
- Melt Granulation
- SR of Highly Soluble Drug

# A.2 - FLOATING - EFFERVESCENT

## MONOLITHIC SYSTEM

### MATRIX TABLET

- Bicarbonate + Polymer
- Single Layer Tablet
- Bilayer Tablet
- Triple Layer Tablet

### MATRIX TABLET with CARBOPOL

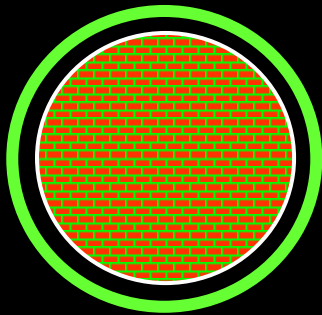
- pH dependent Gelling
- Only Carbopol  
- NO GELLING
- Bicarbonate + Carbopol  
- GELLING  
due to Alkaline

MICROENVIRONMENT

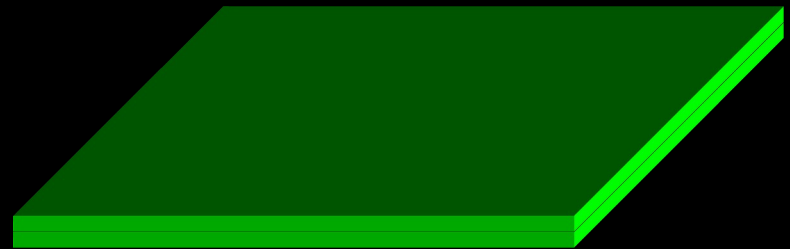
# A.2 - FLOATING - EFFERVESCENT

## MONOLITHIC SYSTEM

**COATED  
EFFERVESCENT  
CORE**



**MULTIPLE FILM**

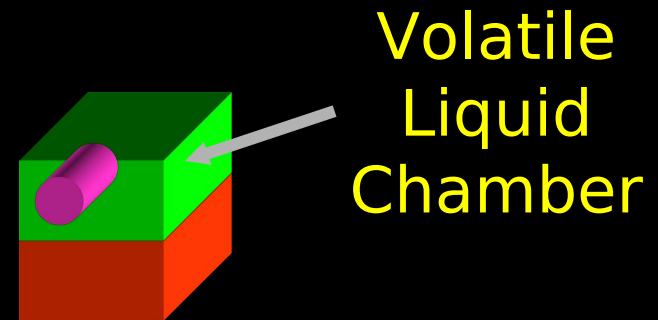
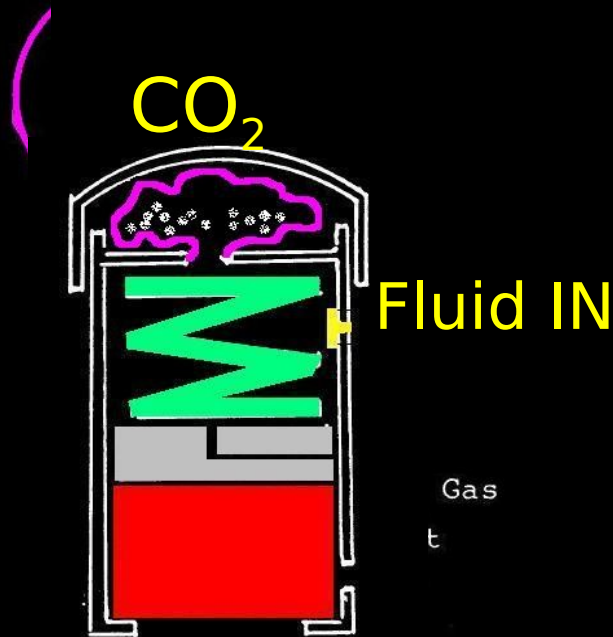


# A.2 - FLOATING - EFFERVESCENT

## MONOLITHIC SYSTEM

PROGRAMMABLE  
DRUG DELIVERY

SYSTEM with  
INFLATABLE  
CHAMBER

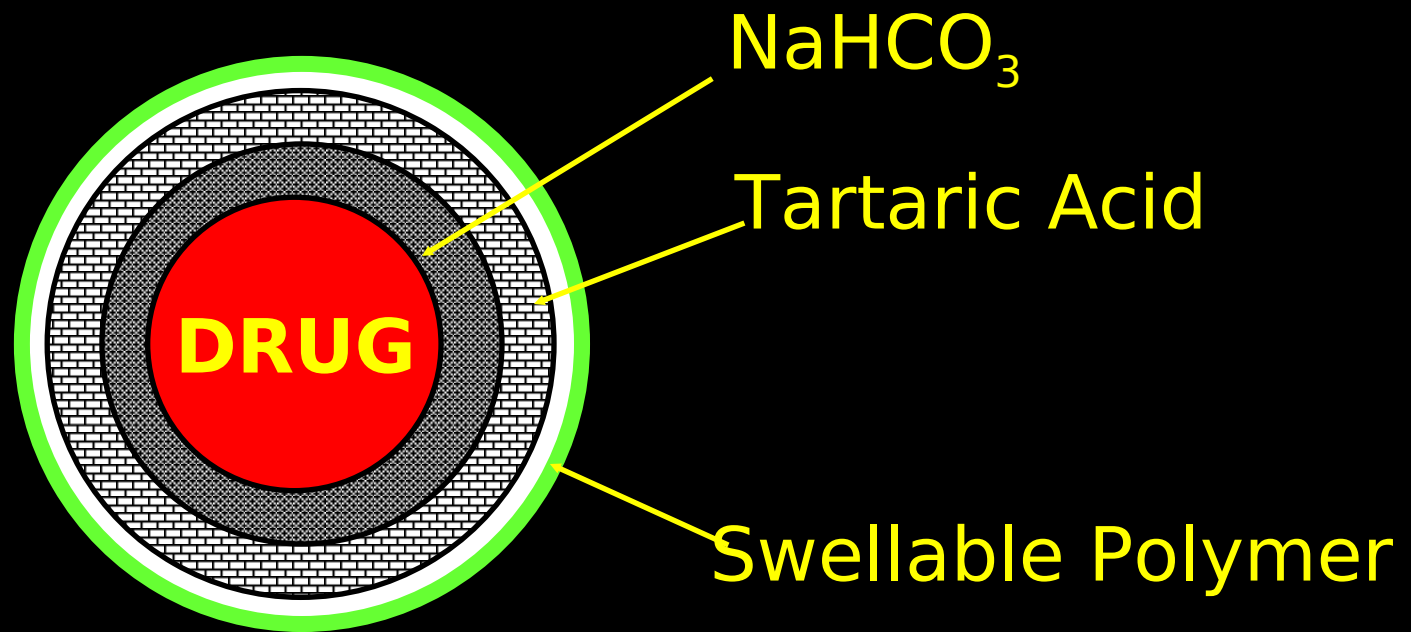


Drug Release

# A.2 - FLOATING - EFFERVESCENT

## MULTIPLE UNITS

### FLOATING PILLS

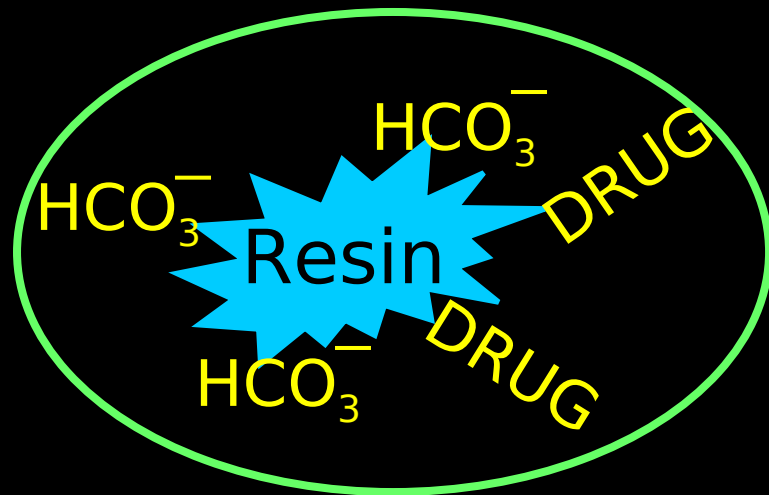




# A.2 - FLOATING - EFFERVESCENT

## MULTIPLE UNITS

### ION EXCHANGE RESIN BEADS



Uncoated Beads - No Floating - Escape of CO<sub>2</sub>

# GRDDS TECHNOLOGIES

## [B] EXPANDABLE APPROACH

- After ingestion they swell to an extent that their exit is prevented from the stomach.
- Dosage form retained for prolonged time due to Retropulsion
- PLUG TYPE devices



# GRDDS TECHNOLOGIES

## [B] EXPANDABLE APPROACH

EXPANDABLE APPROACH

Swelling Systems



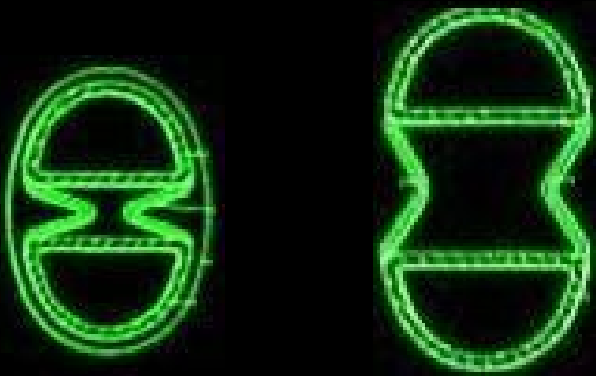
Infolding Systems

SHAPE MEMORY

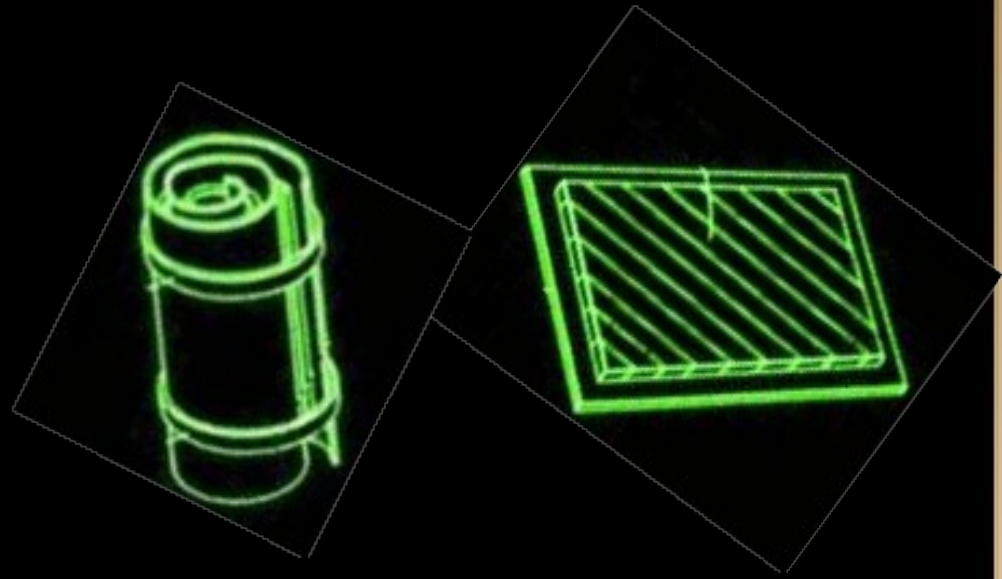
# [B] - EXPANDABLE APPROACH

## B.2 - UNFOLDING SYSTEMS

**OBSTRUCTING  
MEANS**



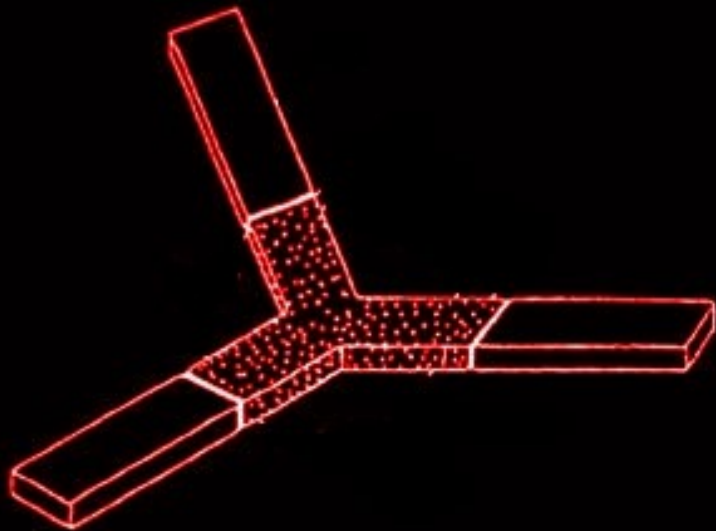
**MULTILAYER  
FILMS**



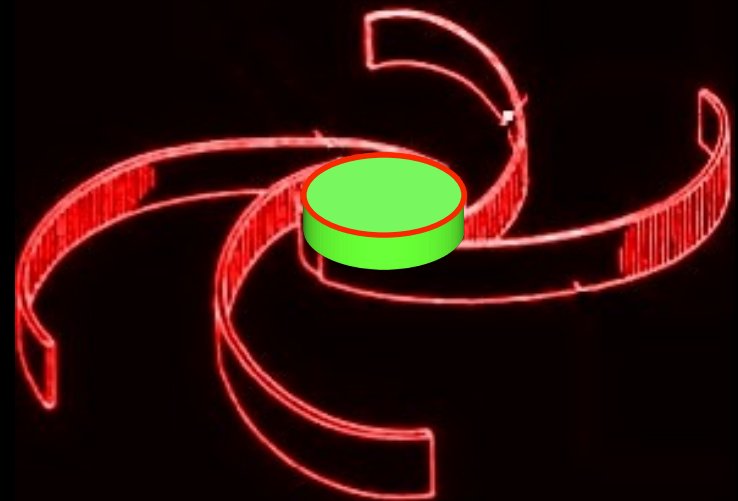
# [B] - EXPANDABLE APPROACH

## B.2 - UNFOLDING SYSTEMS

**GEOMETRIC  
CONFIGURATIONS**



**RECEPTACLE  
MEANS**



# Bioadhesive Systems

- Localize the dosage form within the stomach by using principle of bioadhesion
- Use of bioadhesive polymers that adhere to the epithelial surface of git
- Prolonged drug release and increased gastric retention

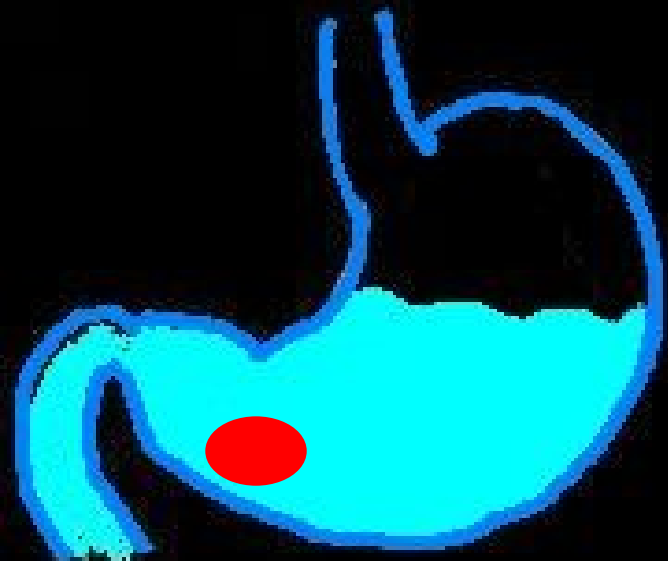
# GRDDS TECHNOLOGIES

## [C] BIO/MUCO ADHESIVE APPROACH



# High Density Systems

- Dosage forms coated with inert heavy metals such as  $\text{ZnO}_2/\text{BaSO}_4$  having density greater than stomach contents ( $\sim 1.004 \text{ g/cm}^2$ )





# EVALUATION OF GRDDS

## IN VITRO

### FLOATING DOSAGE FORMS

#### Floating Lag Time

- In 0.1 N HCl or Simulated Gastric Fluid
- Important for Effervescent Systems – For reaction
- Negligible for non-effervescent of hollow microspheres/ microballons
- Housekeeper waves of the stomach may sweep out the dosage form.

## Specific Gravity /

## Density

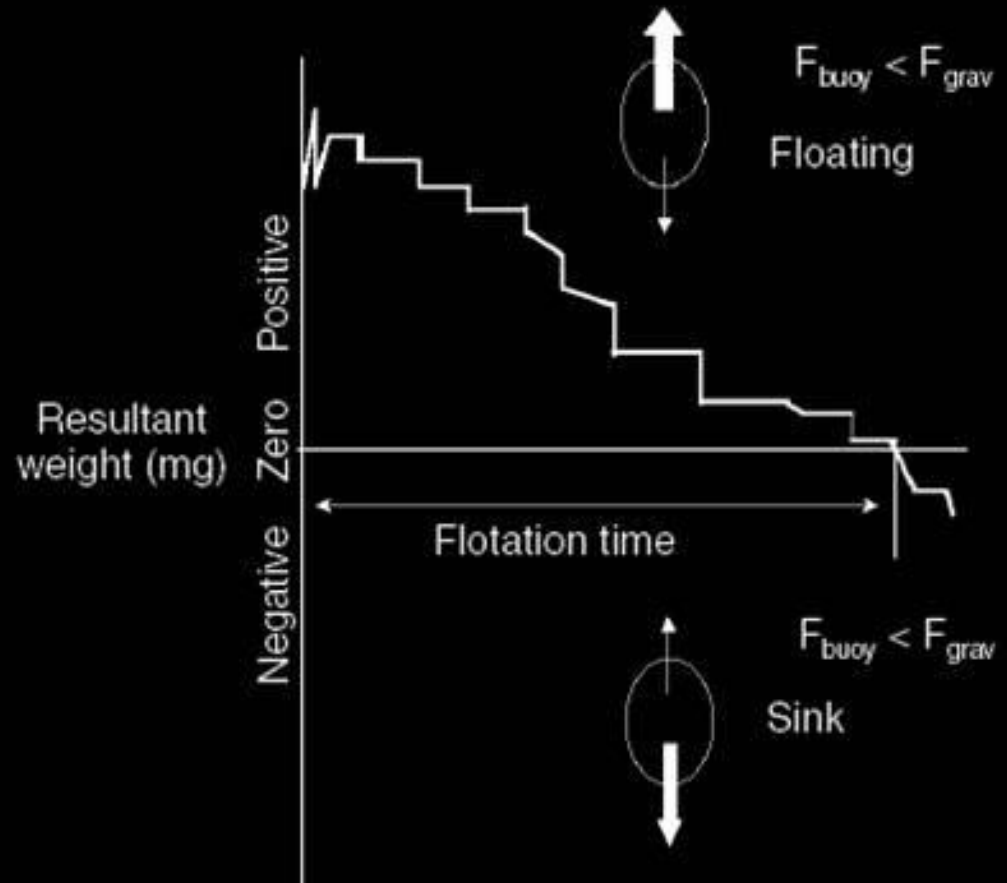
- Important to predict floatability
- Ratio of tablet weight to tablet volume (height & diameter)
- For multiple units – mass volume of known mass weight

## Floating Time / Buoyancy Time

- Total time period between placing a dosage form in the medium to the time it remains floating
- Indicates duration of GR
- For multiple units, Fraction of microspheres settled down as a function of time by determining its weight on drying

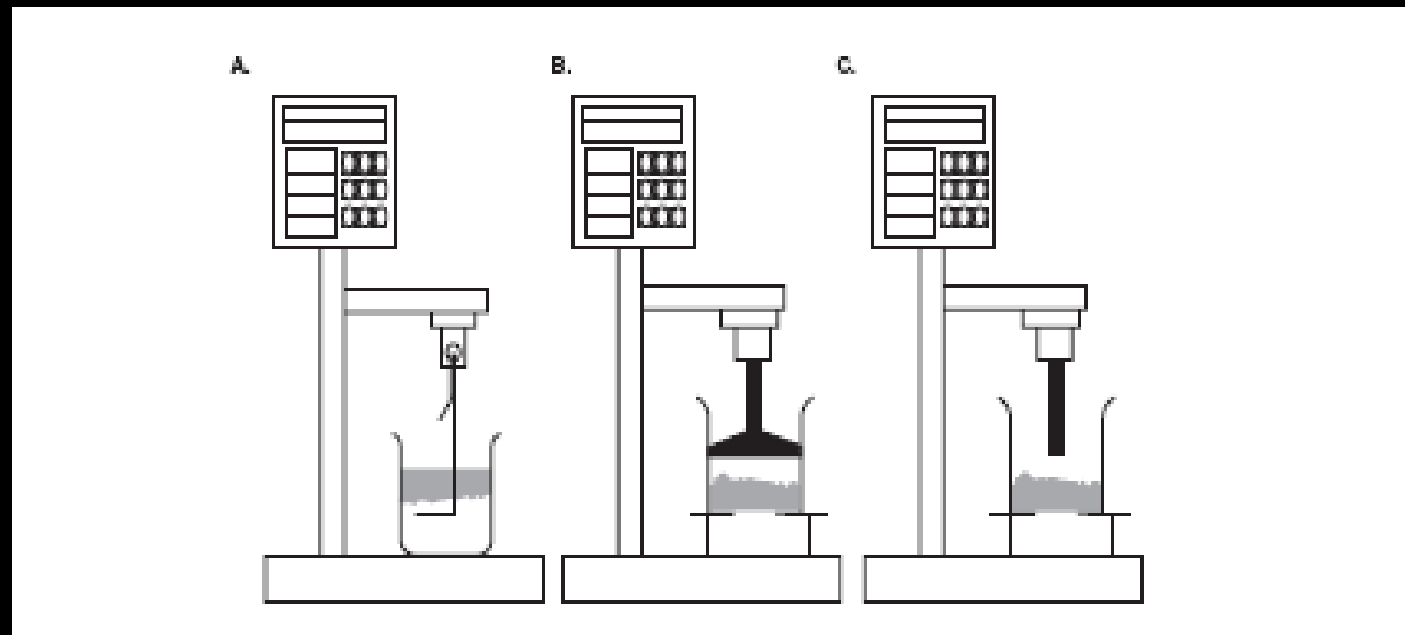
# Resultant Weight

- Total time period between placing a dosage form in the medium to the time it remains floating
- Indicates duration of GR



# Raft Characterization

- Raft Strength
- Raft Resistance to Reflux



Reproduced from : A review by

Parikh & Amin in **Expert Opinion On Drug Delivery (2008), 5(9), 1-15**

# EVALUATION OF GRDDS

## IN VITRO EVALUATION

### SWELLING SYSTEM

Swelling Index / Water Uptake / Weight  
Gain

Swelling Capacity of the polymer in contact  
with the dissolution medium

$$WU = (W_t - W_o) * 100 / W_o$$

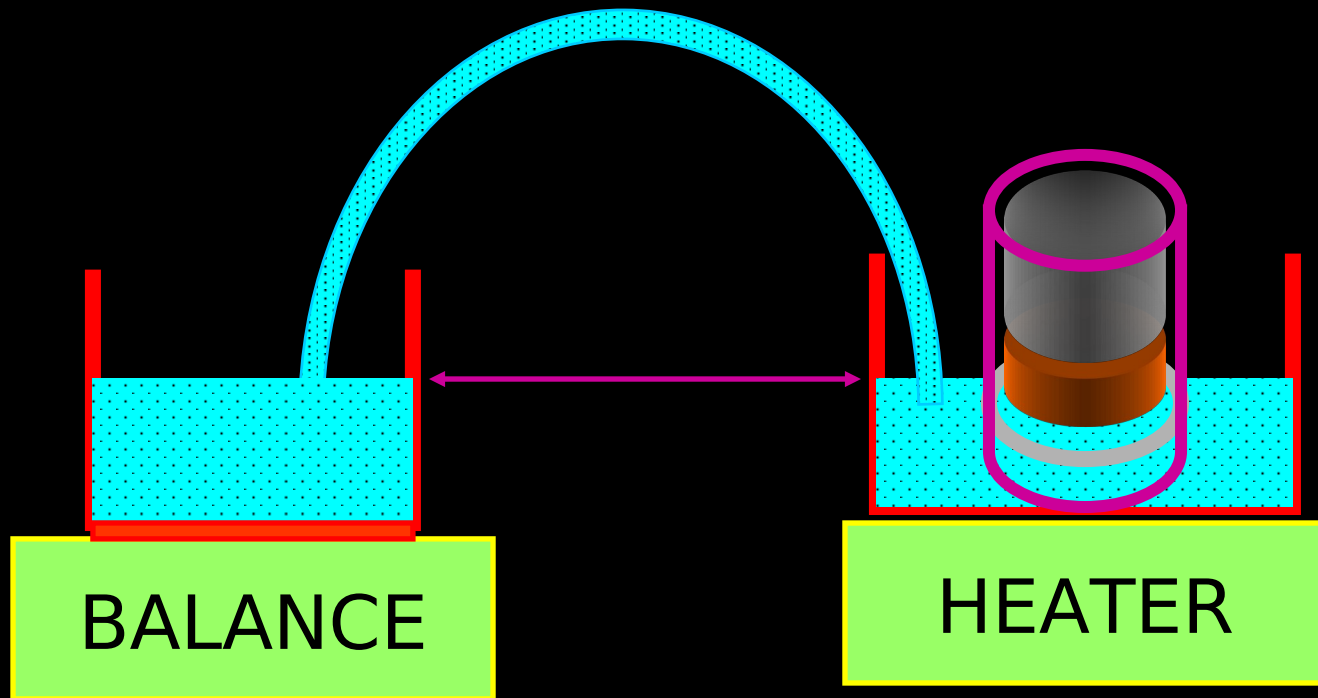
Important for GRDDS based on Swelling  
approach.

Also indicative of release properties

# EVALUATION OF GRDDS

## IN VITRO EVALUATION

### SWELLING SYSTEM



# EVALUATION OF GRDDS

## IN VITRO EVALUATION

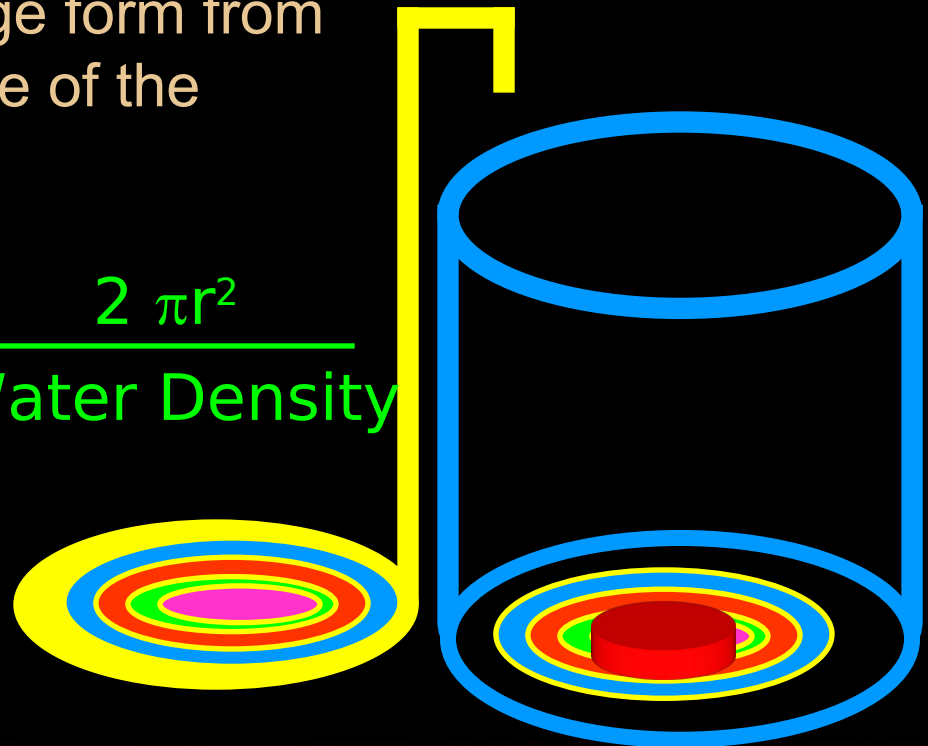
### Penetration Rate

Water uptake test for Swellable dosage forms

Requires removal of dosage form from the media. Leads to rupture of the matrix

$$PR = \frac{\text{Water Uptake}}{\text{Per Unit Time}} \times \frac{2 \pi r^2}{\text{Water Density}}$$

New method: Weight determination at regular time intervals



## Exposed Size Parameter

Test specifically for unfolding type of systems.

Placed in a capsule.

Suspended in dissolution medium

Unfolding Capacity ascertained

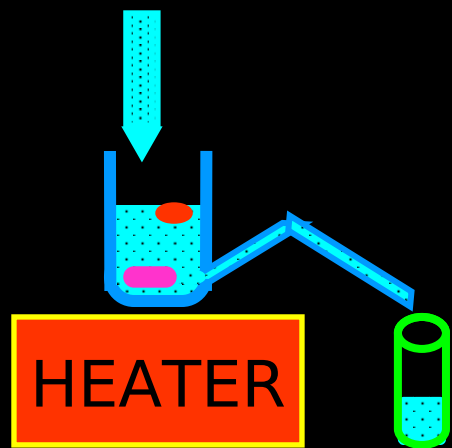
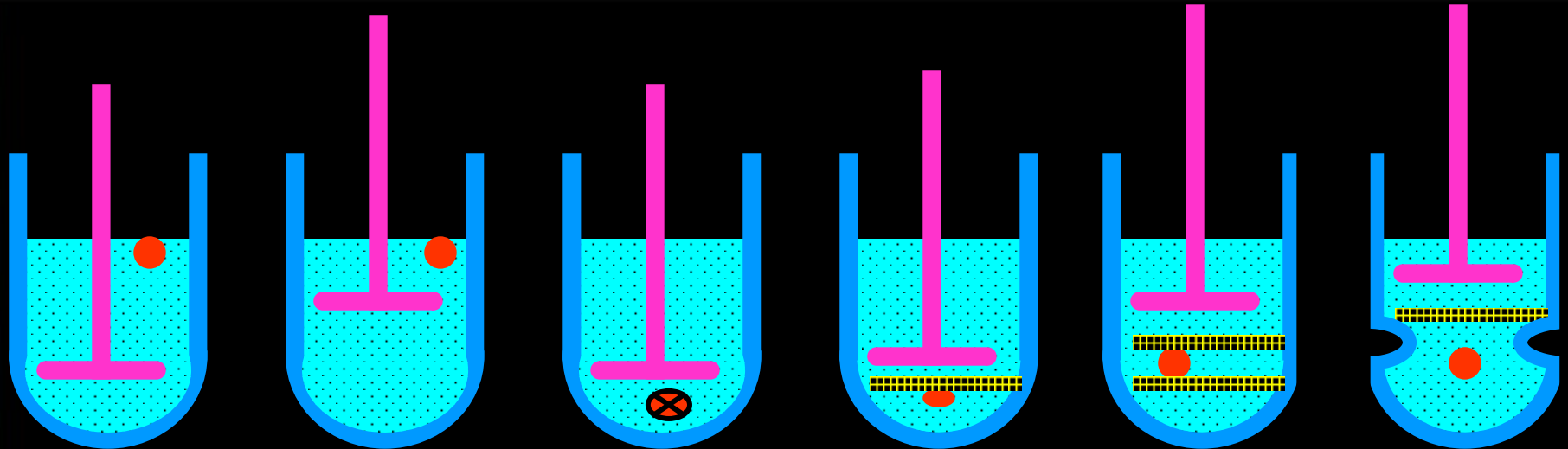


# In-vitro Drug Release

- Release Profile in SGF / 0.1 N HCl
- Use of USP Dissolution Apparatus I or II
- Use of Enzymes and surfactants required
- Position of Floating Type very Critical
  - Use of Sinkers

# EVALUATION OF GRDDS

## IN VITRO DISSOLUTION



Modified Rossett-Rice Test

# EVALUATION OF GRDDS

1. Roentgenography

2.  $\gamma$ -SCINTIGRAPHY

3. GASTROSCOPY

4. MAGNETIC MARKER  
MONITORING

5. ULTRASONOGRAPHY

6.  $^{13}\text{C}$  OCTANOIC ACID BREATH  
TEST

# Platform technologies for GRDDS

<u>Company</u>	<u>Platform technology</u>	<u>Type of technology</u>
Depomed	AcuForm	Polymer-based technology
Intec	Accordion Pill	Expandable film, filled in capsule
Sun Pharma	Gastro Retentive Innovative Device	Coated multilayer floating and swelling system

- Merrion Pharma      GI Retention System (GIRES)      Gas generating inflatable pouch in capsule
- Flame Micropump      Gastro-retention with osmotic system
- Roche Hydrodynamically Balanced System      Matrix forming polymer-based floating system

# MARKETED PRODUCTS

Brand Name	Drug (dose)	Company
Madopar <sup>®</sup>	Levodopa (100 mg), Benserazide (25 mg)	Roche, USA
Valrelease <sup>®</sup>	Diazepam (15 mg)	Hoffman LaRoche, USA
Liquid Gaviscon <sup>®</sup>	Al(OH) <sub>3</sub> + MgCO <sub>3</sub>	GlaxoSmithKlein, India
Topalkan <sup>®</sup> Liquid	Al – Mg antacid	Pierre Fabre Drug, France
Almagate Flotcoat <sup>®</sup>	Al – Mg antacid	
Conviron <sup>®</sup>	Ferrous sulfate	Ranbaxy, India
Cifran OD <sup>®</sup>	Ciprofloxacin (1 g)	Ranbaxy, India
Cytotec <sup>®</sup>	Misoprostal (100/200 µg)	Pharmacia, USA