

# Formulation and Evaluation of Mucoadhesive Tablet of Sitagliptin Phosphate with Mucuna Gum

Amit Kumar Shukla\*<sup>1</sup>, Vinay Yadav<sup>2</sup>, Jai Narayan Mishra<sup>3</sup>

Kailash Institute of Pharmacy and Management GIDA Gorakhpur, Uttar Pradesh, India 273209

**Abstract**— The quick washing and brief contact time between the formulation and the absorption barrier frequently prevent medications from being absorbed fully. However, the residence period of the dose form on the mucosa can be greatly extended by using mucoadhesive polymers. Materials' capacity to stick to the mucosal membranes of the human body and offer momentary retention is known as mucoadhesion. Hydrophilic polymers containing charged groups and/or non-ionic functional groups capable of establishing hydrogen bonds with mucosal surfaces often have excellent mucoadhesive characteristics. Natural excipients including gums, mucilages, and pectins are frequently employed in both traditional and innovative dosage forms. The pharmaceutical industry has agreed to employ the majority of natural polymers in formulations as a result of the growing interest in these materials. Natural items that are required for a range of uses have seen great growth in recent years. This study examines the usage of mucuna gum in the creation of mucoadhesive tablets.

**Keywords**— Drug delivery; Gums; Mucoadhesion; Polymers.

## I. INTRODUCTION

According to modern-day estimates, the global marketplace percentage for all pharmaceutical formulations designed for human use is held through oral formulations to a point of approximately 90%. Orally given prescribed drugs make up round 84% of the top-promoting medications, which might be currently valued at \$35 billion and developing at a 10% every year pace.[1] Patients are regularly extra compliant with oral formulations for bronchial allergies pills than they may be with opportunity parenteral strategies along with intravenous, subcutaneous, and intramuscular injections. For the localised remedy of pathological situations like belly and colorectal cancers, infections, inflammations, bowel diseases.[2]

*Advantages of oral route of drug administration [3]*

1. It is the maximum straightforward, sensible, and steady approach of medicine delivery.
2. It is sensible for common and prolonged use.
3. It is painless and self-administrable.
4. It is cost-powerful due to the fact the affected person incurs no extra expenses. When taking a stable medicine, including capsules and capsules, the affected person simply calls for one or glasses of water, that's commonly effortlessly available. If the medicine is in liquid form, only a size device—which commonly comes with the medicine—is required.
5. No sterile safeguards are required.
6. There is little hazard of an acute medicine response.
7. Its utilization doesn't require any specialized education or equipment (including syringes or needles).

### *Microspheres*

Microspheres are tiny, round debris that commonly have dimensions among 1 and one thousand micrometers. Micro particles are every other call for microspheres. Numerous natural and artificial substances may be used to make microspheres. Commercially reachable microspheres encompass glass, polymer, and ceramic varieties.

Microspheres are regularly free-flowing powders fabricated from biodegradable proteins or artificial polymers, preferably with a particle length of much less than two hundred m. [4-6]

### *Advantages [7]*

There are numerous benefits, inclusive of the following:

1. A regular and sustained healing effect is supplied via way of means of microspheres.
2. Decreases the frequency of dose, which complements affected person compliance.
3. Because in their decreased length and round form, they will be injected into the body.
4. Improved medicinal drug use will frequency or severity of facet effects.
5. Controllable variability in drug launch and degradation is made viable via way of means of the form of microspheres.

### *Diabetes*

Diabetes Mellitus (DM), that is once in a while called simply "diabetes," is a class of metabolic ailments wherein someone well-known shows hyperglycemia in the main due to both an insulin deficit or mobile resistance to insulin generated with the aid of using the body.

### *Type I (or) Insulin-dependent diabetes mellitus:*

It is characterized via way of means of the want for insulin injections and the incapability of the frame to fabricate insulin because of the lack of cells with inside the islets of Langerhans. Type-1 diabetes is basically introduced on via way of means of autoimmune issues AND emerges because of environmental variables main the frame's immune gadget to erroneously kill the beta cells withinside the islet tissue of the pancreas that create insulin.[8]

### *Type II (or) Non-insulin-dependent diabetes mellitus:*

characterized through overall insulin scarcity in a few instances collectively with insulin resistance, a ailment wherein cells improperly utilise insulin. Type 2 diabetes can strike everyone at any age, even children.[9]

### *Gestational diabetes*

Gestational diabetes is a situation in which a pregnant lady who does not have diabetes develops excessive blood sugar levels. Despite the fact that gestational diabetes usually has minimum symptoms, it increases the chance of pre-eclampsia, depression, and the requirement for a Caesarean section. Macrosomia, postpartum hypoglycemia, and jaundice are all heightened dangers for toddlers whose mothers have untreated gestational diabetes. [10]

### *Treatment / Management*

Diabetes has a complex body structure and remedy plan that necessitate numerous remedies for powerful disorder manipulate. The control of diabetes relies upon on affected person involvement and diabetic education. Patients who can manipulate their weight loss program (carbohydrate and general calorie restriction), exercising often (extra than one hundred fifty mins consistent with week), and independently test their blood sugar have higher results.[11]

### *Mucoadhesive*

The term "mucoadhesion" refers back to the forces that draw organic materials to mucus or mucous membranes. Epithelial surfaces inclusive of the ones of the protected in mucous membranes. Because they incorporate a variety of hydrogen polymers and feature a excessive water content (round 95% via way of means of volume), they're frequently hydrophilic.[12]

### *Mucoadhesives in drug delivery*

Mucoadhesives may be utilised for nearby or systemic drug shipping, relying at the dose kind and mode of management. Vjera Grabovac and Andreas Bernkop-Schnürch provide a precis of the mucoadhesive traits of mucoadhesives. Numerous elements precise to every management technique have an effect at the bioavailability of such medications. Generally speaking, mucoadhesives characteristic to prolong the house length at those locations, prolonging touch time, and retaining an green launch rate.[13,14]

### *Mechanisms of Mucoadhesion*

The touch degree and the consolidation degree are the 2 ranges that make up the mucoadhesion mechanism. The mucoadhesive's first touch moisture reasons the machine to come to be plastic, which frees the mucoadhesive molecules and allows them to shape susceptible hydrogen and van der Waals bonds.[15]

### *Advantages*

1. It might also additionally prolong the length the dose shape spends on the absorption site.
2. It might also additionally enhance the dose shape's bioavailability.
3. It is extraordinarily available and takes impact quickly.
4. The buccal medicine management has a excessive affected person popularity because it has a relatively short starting of motion in comparison to different non-oral methods.

5. Increased affected person compliance due to the fact dose paperwork are less complicated to apply than needles and do not motive any discomfort.[16]

## II. MATERIAL & METHOD

### *Preformulation study*

The first step in the logical emergence of dosing documentation for pharmacological substances is the testing of pre-formulations. It is the study of the physical and chemical properties of medicinal elements individually and in mixtures with excipients.

### *Fourier transform infrared (FTIR) spectral analysis*

The molecular functional groups can be located via FT-IR. The medication and KBr are combined, and a pellet is created. Each KBr disc was scanned throughout a wave number range of 400 to 4,500  $\text{cm}^{-1}$  at a speed of 4 mm/s, with a resolution of 2 cm. The distinctive summits were noted. The table and graphic below display the results.

### *Drug-Excipient Compatibility studies by FT-IR*

Infrared Fourier Transform Infrared (FT-IR) analysis was performed on pure drug and physical additives (polymer, excipient) to determine if there is an interaction between drug, polymer and excipient.

### *Extraction of mucuna gum*

Mucuna seeds are roasted for 10 minutes at a temperature of 70°C to make the shells brittle. After peeling the seeds, the cotyledons were autoclaved for 15 min at 121 °C in 1% (w/v) sodium metabisulfite solution. This reduces browning and promotes the inactivation of enzymes that normally occur. The cotyledons were then air-dried and ground in a hammer mill, and the resulting flour was soaked in a 1% (w/v) sodium metabisulfite solution for 24 hours and then filtered through muslin cloth. The obtained filtrate was desolvated using acetone. This desolvation by-product (mucuna gum) was dried in a hot air oven and then pulverized into powder.

### *Preparation of Sitagliptin Phosphate Loaded Mucuna Gum Microspheres*

An ion gelation technique was used to create batches of Mucuna Gum microspheres containing sitagliptin phosphate.  $\text{CaCl}_2$  was used as an ionic crosslinker. Aqueous dispersion mixtures of Mucuna Gum polymers at various to create a homogeneous dispersion of all components. I did., India) 15 minutes. A single dose of sitagliptin phosphate was then added to the polymer dispersion. Each formulation had equal proportions (1.0% w/v), as well as different amounts of guar gum (0.25%, 0.5%, 0.75% and 1.0 wt%). had). /in). The polymer dispersion mixture containing sitagliptin phosphate was sonicated for 5 minutes to remove air bubbles. Through a 21 G needle (0.51 mm ID) and 10 ml hypodermic syringe, one drop of a homogenized, bubble-free mixture of Mucuna Gum alginate containing sitagliptin phosphate was extruded into an aqueous solution of  $\text{CaCl}_2$  (fixed concentration, i.e. v at room temperature). A drop was dropped from a distance of 5 cm, and an additional drop was kept in the  $\text{CaCl}_2$  solution for 20

min to complete the curing process and obtain spherical hard microspheres.

TABLE 1 Formulation table of Microspheres

Formulation	Sitagliptin (mg)	Eudragit Rs 100 (mg)	HPMC E-15 (mg)	Mucuna Gum (% w/v)	ACETONE (ml)	TWEEN 80 (%)
FM-1	0.25	0.25	-	0.25%	6.00	0.10
FM-2	0.25	0.50	-	0.50%	9.00	0.30
FM-3	0.25	0.75	-	0.75%	12.00	0.50
FM-4	0.25	1.00	-	0.25%	9.00	0.70
FM-5	0.25	1.25	0.10	0.50%	9.00	0.90
FM-6	0.25	1.25	0.20	0.75%	15.00	0.70
FM-7	0.25	1.25	0.30	0.25%	15.00	0.90
FM-8	0.25	1.25	-	0.50%	12.00	0.70
FM-9	0.25	0.75	-	0.75%	10.00	0.50
FM-10	0.25	1.00	-	0.25%	8.00	0.80
FM-11	0.25	1.25	0.10	0.50%	8.00	0.80
FM-12	0.25	1.25	0.15	0.75%	12.00	0.60
FM-13	0.25	1.50	0.25	0.25%	12.00	0.80
FM-14	0.25	1.15	-	0.50%	15.00	0.60
FM-15	0.25	1.10	-	0.75%	15.00	0.40

The final solution of the drug-polymer combination was homogenized and stirred at 1000 rpm for 25 minutes to obtain a homogeneous dispersion. Then, the microspheres were removed by decantation, washed two or more times with distilled water.

*Characterization & Evaluation of Prepared Microspheres*

*Determination of Percentage Yield*

After drying, the weight of each batch of microspheres was determined taking into account the total weight of polymer and drug used in the preparation. The formula below was used to obtain the % yield:

$$\text{Percentage yield} = \frac{\text{WEIGHT OF THE MICROSPHERE RECOVERED}}{\text{WEIGHT OF POLYMERS} + \text{WEIGHT OF DRUG}} \times 100$$

*Mean particle size*

Dry microspheres (10 ml) were suspended in a small amount of petrolatum oil. A small drop of the resulting suspension was placed on a clean glass slide. A calibrated optical micrometer was used to measure the diameter of at least 300 particles on a glass slide containing microspheres and placed them on a microscope stage.

*Scanning Electron Microscopy*

Using a scanning electron microscope, the researchers were able to characterize the topography of the microspheres. Microspheres were attached to brass plugs with double-sided adhesive tape. Scanning electron microscopy images were obtained using a scanning electron microscope at the required magnification and at room temperature. A secondary electron image was used as a detector and the working distance was maintained at 39 mm. The accelerating voltage used was 15 kV.

*Determination of Drug Content and Encapsulation Efficiency*

A phosphate buffer with a pH of 7.2 was used to suspend 100 mg of precisely weighed microspheres for up to 24 hours. The next day, the sample was agitated for a few hours using a mechanical shaker. After filtering, a few millilitres of the filtrate were obtained, diluted appropriately, and tested by

spectrophotometry for the presence of drugs at 267 nm. Calculated was the % of encapsulation efficiency. The amount of drug encapsulated per unit weight of microbeads was evaluated considering the dilution factor and the number of microbeads. Drug encapsulation efficiency was determined using prescription.

$$\text{Encapsulation efficiency} = \frac{\text{practical drug content}}{\text{theoretical drug content}} \times 100$$

*Evaluation of in vitro release by static method*

In a beaker containing one hundred ml of phosphate buffer, microspheres weighing exactly 25 mg of sitagliptin phosphate had been delivered (pH 7.2). Following suitable dilution, the quantity of medicine launched became calculated the usage of a spectrophotometer at 267 nm even as the flask became held in a magnetic stirrer at 37 °C. 1 ml of phosphate buffer became delivered to the discharge medium to fill up it after every pattern withdrawal. After permitting the microspheres to settle, the clean supernatant medium became eliminated for drug detection. The research became carried out over a 12-hour length with samples being taken each hour. After filtering the pattern, the microspheres had been amassed and delivered to the dissolving flask.

*Kinetics of drug Release*

The dissolution of medicine from on the spot launch and changed launch dosage paperwork is defined through some of hypotheses and kinetic fashions. There are numerous fashions that can be used to depict the drug dissolution profiles, in which f (t) is a characteristic of time connected to the quantity of drugs dissolved from the pharmaceutical dosage form.

The use of a preferred equation that mathematically interprets the dissolution curve characteristic of different factors connected to pharmaceutical dosage paperwork makes it less complicated to quantitatively compare the records received withinside the dissolution experiment. Kinetic fashions of drug dissolution from stable dosage paperwork were used to explain the process. In those fashions, the quantity of drugs that dissolves (Q) is a characteristic of the take a look at time 't' or Q (t). The Q(t) characteristic is commonly described analytically the use of phrases like 0

order, first order, Higuchi, Korsmeyer-Peppas, Hixson-Crowell fashions, and Weibull fashions. Drug dissolution/launch traits are characterized the use of those fashions.

#### Zero Order Kinetics

For the purpose of achieving the pharmaceutical extended effect, this model provides the optimal release profile. Medication release from the dosage form known as zero order release is unaffected by the quantity of the drug in the delivery mechanism (that is, a constant release rate). The model is expressed by the next equation:

$$Q_t = Q_0 + K_0t$$

Where,

The amount of medication dissolved in time t is known as  $Q_t$ .

$Q_0$  is the starting concentration of the drug in the mixture.

The zero order release constant is called  $K_0$ .

For simplicity, the equation is rearranged as follows:

$K_0t$  = percentage of medication released

This is true for dosage forms such matrix tablets with low soluble drug content, coated dosage forms, osmotic systems, and transdermal systems.

#### First Order Kinetics

First order release is a form of drug release that is proportionate to the amount of the drug still within; as a result, the amount of medication released per unit time decreases. The model is expressed by the next equation.:

$$\log Q_t = \log Q_0 + K_1t/2.303$$

Where,  $Q_t$  is the quantity of the drug dissolved during time t, and  $Q_0$  is the amount of the drug present at the start of the solution.

The first order release constant is called  $K_1$ .

For simplicity, the equation is rearranged as follows:

$K_1t/2.303$  Log% of unreleased drug

This approach may be used with dosage forms that include porous matrices that hold water-soluble medicines.

#### Higuchi Model

Drug release, according to Higuchi, is a diffusion mechanism based on Fick's law that is square root dependent. The model is expressed by the next equation.:

$$Q_t = K_h t^{1/2}$$

Where,  $K_h$  is the first order release constant and  $Q_t$  is the amount of medication dissolved in time t.

For simplicity, the equation is rearranged as follows:

$K_h t^{1/2}$  = percentage of medication released

This approach can be used in systems where the drug is uniformly spread in a swellable polymer matrix, as in the case of matrix tablets containing a water-soluble drug.

#### Peppas-Korsmeyer Model

When the release mechanism is unknown or when more than one sort of release phenomena may be present, this model is frequently utilised.

The model is expressed by the next equation.

$$Q_t/Q_\infty = K_1 t^n$$

Where  $Q$  is the amount of drug dissolved in endless time and  $Q_t$  is the quantity of drug dissolved in time t. The launch

exponent n presents statistics at the drug launch process. The kinetic regular is  $K_1$ .

For simplicity, the equation is rearranged as follows:

Log percentage of the drugs launched equals  $\log k + n \log t$

An internally calibrated microscopic slide's ring become full of five mg of the microspheres, and a drop of glycerol become added. A cowl slip become located over the slide, and a binocular microscope with an X100 magnification become used to look it.

The microsphere length of eudragit RS 100, chitosan, and HPMC rose with growing polymer concentrations (i.e., drug polymer ratio multiplied from 1:1 to 1:4), from 54.fifty one to 92.sixty two, 61.forty two to 75.59, and 60.sixty nine to 71.39 m, respectively. But in each instance, the upward push become insignificant. Microsphere length regarded to have decreased with an boom in stirring fee from six hundred to a thousand rpm, despite the fact that the extrade become now no longer substantial.

The common particle length of microspheres ranged from 54. fifty-one to 92. sixty two m, and it's been mounted that if the scale of the microspheres is much less than fifty five m, the drug launch fee can be excessive with decreased floating ability. It become proven that as HPMC attention multiplied and Eudragit RS100 attention declined, the suggest particle length of the microspheres drastically decreased. With a upward push in Eudragit RS100 content material withinside the medium, it could be defined via way of means of the formation of a thicker Eudragit RS100 layer.

#### Stability studies

According to legitimate definitions, balance is the time period at some point of which a drug product continues the equal characteristics and attributes because it did on the time of manufacturing. Early tiers of improvement are whilst this technique starts.

Definition The potential of a positive formulation (dosage shape or medicinal product) in a particular container/closure gadget to stay inside its physical, chemical, microbiological, therapeutic, and toxicological parameters at some point of its shelf existence is known as a pharmaceutical preparation's balance.

Modern formulations frequently encompass instability this is hard to be aware till after a long term of garage below ordinary circumstances. It is not unusual place coaching to situation designed merchandise to intense strain environments with the intention to boost up degradation and shorten trying out times. Temperature and humidity are traditional excessive strain elements. This will eliminate terrible formulation.

*Purpose of stability testing:*

1. To research the kinetics of drug breakdown
2. Create a reliable dose form
3. To determine the shelf life or expiration date for a drug product that is readily available on the market.
4. To guarantee the potency, security, and purity of the drug's active ingredient and dosage forms.

TABLE 2 Stability Conditions Chart

S.NO	STUDY	STORAGE CONDITION	MINIMUM PERIOD
1	Long term	25°C ± 2°C 60% ± 5% RH	12 months
2	Intermediate	30°C ± 2°C 65% ± 5% RH	6 months
3	Accelerated	40°C ± 2°C 75% ± 5% RH	6 months

TABLE 4 Calibration of drug in phosphate buffer pH 7.2

S.NO	CONCENTRATION (µg/ml)	ABSORBANCE(nm)
1	5	0.021±0.0024
2	10	0.045±0.0019
3	15	0.069±0.0026
4	20	0.092±0.0031
5	25	0.116±0.0045

The stability experiments of formulations FM-1 to FM-8 were conducted at 45° C, 2° C, 75%, and 5% RH, and the proportion of medication that leaked from the microspheres was examined.

III. RESULTS

Characterization of Sitagliptin Phosphate Microspheres

The drug content, mean particle size, encapsulation effectiveness, and drug loading of each formulation were all assessed.

TABLE 3 Calibration of drug in 0.1n HCL

S.NO	CONCENTRATION (µg/ml)	ABSORBANCE(nm)
1	5	0.011±0.0021
2	10	0.031±0.0016
3	15	0.05±0.0016
4	20	0.07±0.0012
5	25	0.089±0.0002

Regression value = 0.999605

Regression value=0.9999975

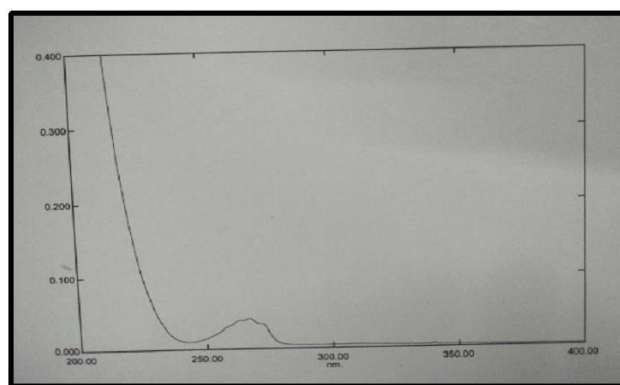


Fig. 3. Determination of λ max for sitagliptin phosphate (0.1n HCL)

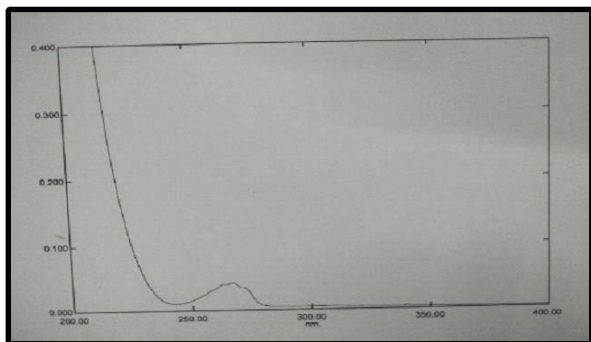


Fig. 1. Determination Of Amax For drug Phosphate Buffer P<sup>h</sup> 7.2 At 267nm

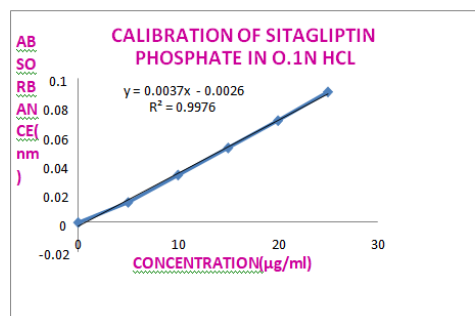


Fig. 4. Calibration Of Sitagliptin Phosphate In 0.1n HCL

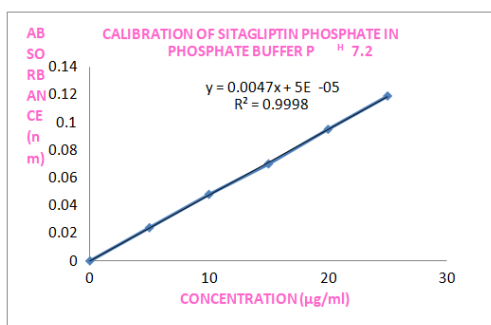


Fig. 2. Calibration of drug in phosphate buffer pH 7.2

IR spectra study

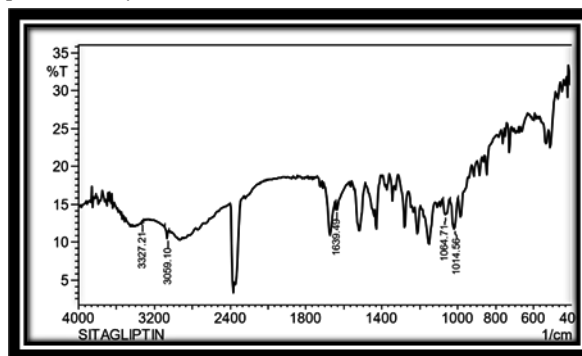


Fig. 5. IR Spectra of Sitagliptin Phosphate

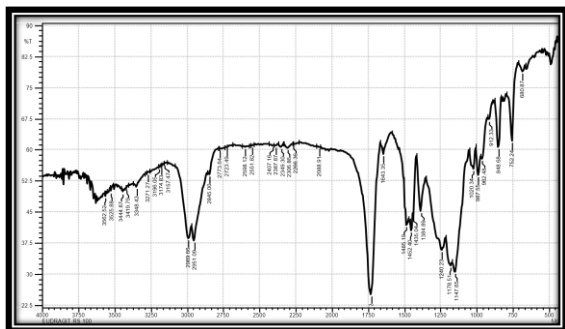


Fig. 6. IR Spectra of Eudragir Rs 100

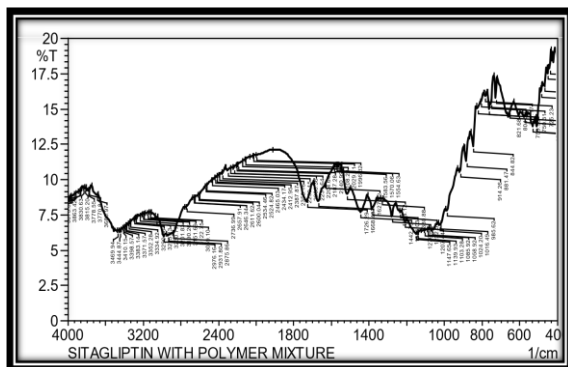


Fig. 7. IR Spectra Of Sitagliptin+Eudragir Rs 100+ HPMC E15+ Mucuna gum+Tween 80

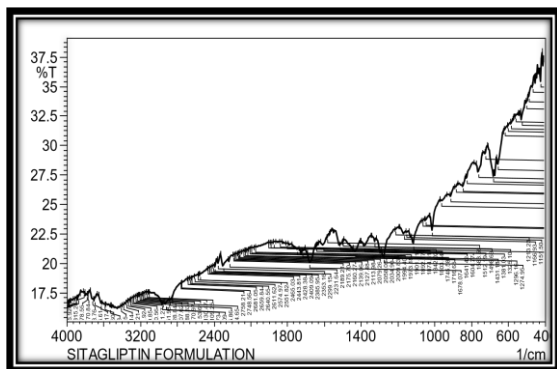


Fig. 8. IR Spectra of Sitagliptin Formulation (Best)

**Determination of Drug content**

All formulations had between 52.08% and 97.92% of the active ingredient, and as the HPMC level rises, so does the effectiveness of the drug. The distribution of microspheres' particle sizes was controlled by the degree of loading. Drug entrapment into microspheres was more effective when the dispersion coefficient was high. As has already been mentioned, a number of variables, including temperature, stirring speed, the amount and size of a porous carrier, and the viscosity of the dispersion medium, affect the size of microspheres. In order to get the appropriate size of microspheres, these elements might be changed.

**Mean particle size**

Microsphere size rose from 54.51 to 92.62 when polymer ratio increased. 60.69 to 71.39 m for HPMC, 61.42 to 75.59 m for chitosan, and 61.42 to 61.42 m for eudragit rs 100. However, the rise was not much larger in any of the cases.

Microsphere size appeared to have reduced with an acceleration in stirring rate from 600 to 1000 rpm, however the difference was not very large.

The particle size of microspheres ranged from 54.51 to 92.62 m, and it has been shown that if the size of the microspheres is smaller than 55 m, the drug release rate will be high with low floating capacity. It was shown that as HPMC concentration increased and Eudragit RS100 concentration declined, the mean particle size of the microspheres considerably reduced. It could be explained by the thicker Eudragit RS100 layer that develops when the medium's Eudragit RS100 concentration rises.

TABLE 5 Evaluation of Drug loaded microspheres

S.NO	FORMULATION CODE	DRUG CONTENT (%)	MEAN PARTICLE SIZE(μm)
1.	FM-1	60.42	92.62
2.	FM-2	70.83	85.52
3.	FM-3	81.25	76.35
4.	FM-4	83.33	56.35
5.	FM-5	75	54.51
6.	FM-6	60.42	60.69
7.	FM-7	66.66	61.63
8.	FM-8	97.92	62.28
9.	FM-9	81.25	66.54
10.	FM-10	77.08	71.39
11.	FM-11	52.08	61.42
12.	FM-12	60.41	65.39
13.	FM-13	62.5	64.16
14.	FM-14	66.67	71.94
15.	FM-15	75	75.59

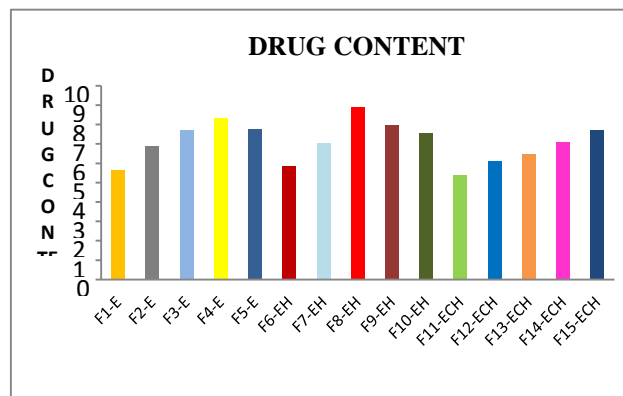


Fig. 9. Drug content for Drug loaded microspheres

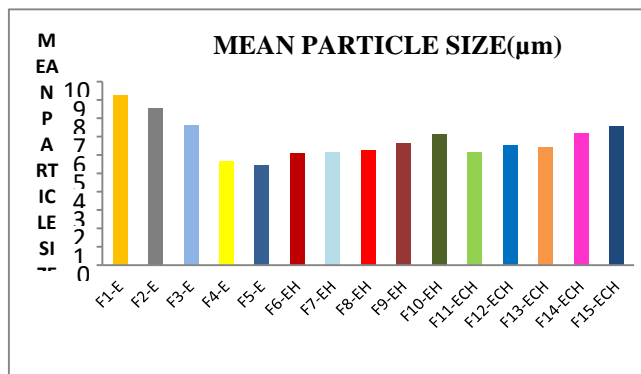


Fig. 10. Mean particle size for Drug loaded microspheres

TABLE 6 Characterization of Sitagliptin Phosphate Microspheres

S.NO	F.CODE	%YIELD (%)	THEORETICAL DRUG LOADING (%)	EXPERIMENTAL DRUG LOADING (%)	ENCAPSULATION EFFICIENCY (%)
1.	FM-1	39.91	50	70.47	56.25
2.	FM-2	46.74	33.33	49.02	68.75
3.	FM-3	56.79	25	33.93	77.08
4.	FM-4	63.39	20	26.29	83.33
5.	FM-5	69.86	16.67	18.55	77.77
6.	FM-6	65.73	18.51	16.43	58.33
7.	FM-7	67.24	17.24	17.98	70.13
8.	FM-8	70.89	16.12	20.22	88.88
9.	FM-9	72.79	15.15	16.62	79.86
10.	FM-10	77.54	14.28	13.94	75.69
11.	FM-11	66.71	18.51	15.03	54.17
12.	FM-12	69.05	17.24	15.25	61.11
13.	FM-13	71.79	16.12	14.51	64.58
14.	FM-14	72.37	15.15	14.82	70.83
15.	FM-15	74.86	14.29	14.70	77.08

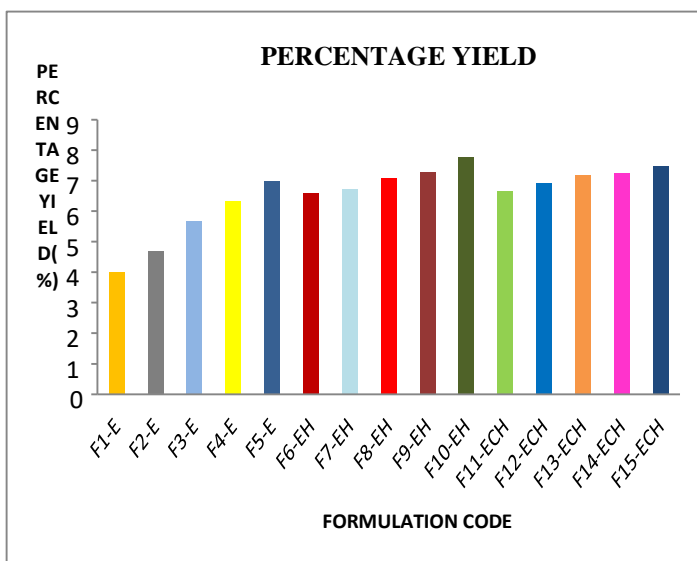


Fig. 11. Percentage yield of sitagliptin microspheres

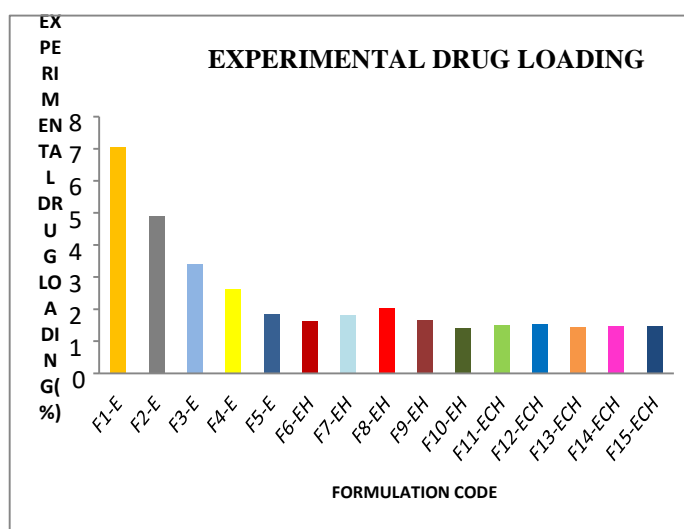


Fig. 13. Experimental drug loading for sitagliptin microspheres

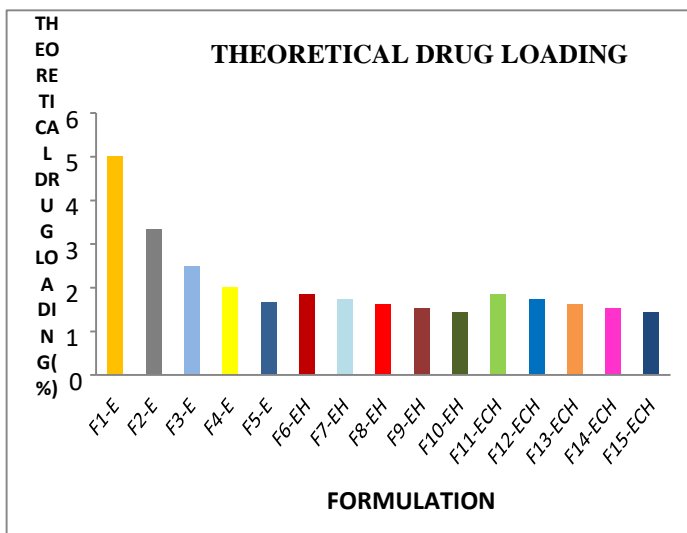


Fig. 12. Theoretical drug loading for sitagliptin Microspheres

Encapsulation Efficiency

It was determined that formulations F1 to F15 had encapsulation efficiencies ranging from 54.17% to 88.88%.

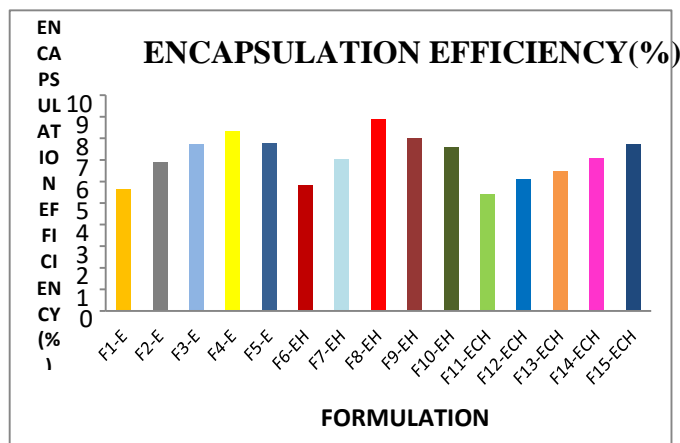


Fig. 14. Encapsulation efficiency for drug loaded microspheres

*In-vitro drug release of Sitagliptin phosphate microspheres*

The dissolving investigations have been performed for 12 hours in a phosphate buffer with a pH of 7.2. All formulations` in vitro dissolution experiments have been contrasted with the ones of the natural medication. the results of exams at the in vitro dissolution of all formulations crafted from sitagliptin microspheres.

All formulations had plenty better in vitro launch profiles compared to sitagliptin phosphate, the natural medication.

Eudragit RS one hundred changed into utilized in formulations (F1E-F5E) at numerous ratios, and the proportion drug launch changed into 99.37% after seven hours, 95.08% after 8 hours, 91.85% after 9 hours, 90.96% after ten hours, and 94.48% after 9 hours, respectively.

Eudragit RS one hundred and HPMC E15 have been utilized in formulations (F6EH-F510EH) at numerous ratios, and the proportion drug launch changed into 90.46% at eight hours, 90.39% at 10 hours, 92.63% at 12 hours, 96.07% at nine hours, and 92.20% at 10 hours, respectively.

Eudragit RS one hundred and chitosan have been utilized in formulas (F11ECH-F15ECH) at numerous ratios, and the proportion drug launch changed into 88.26% at eight hours, 86.84% at 10 hours, 87.34% at 12 hours, 88.44% at nine hours, and 86.13% at 10 hours, respectively.

Following 12 hours, drug launch (for a 1:three drug/polymer ratio) passed off withinside the following order: HPMC > Mucuna gum > eudragit rs one hundred, with the method made with HPMC E15 freeing approximately 92.63% of the medication.

The charge of drug launch changed into multiplied through growing the stirring velocity from six hundred rpm to 1400 rpm. All drug launch changed into visible at 1600 rpm, aside from the chitosan microspheres. According to Fig. 10, there has been no discernible version withinside the way wherein exceptional kinds of polymers launched drugs.

*Kinetic analysis*

For the, launch records become acquired. Table 5.sixteen shows the correlation coefficient of the F1E to F15-ECH formulations for the primary order, 0 order, Higuchi, and Hixson-Crowell equations. Instead of Hixson-Crowell models, formula F8-EH become proven to have a sturdy correlation to 0 order kinetics.

TABLE 7. In-Vitro Release Kinetics Of Sitagliptin Phosphate Microspheres

FORMULATION CODE	ZERO ORDER KINETICS		FIRST ORDER KINETICS		HIGUCHI MODEL		KORSMEYER PEPPAS MODEL		HIXON CROWELL MODEL	
	R <sup>2</sup>	KO(h <sup>-1</sup> )	R <sup>2</sup>	KO(h <sup>-1</sup> )	R <sup>2</sup>	KH(h <sup>-1/2</sup> )	R <sup>2</sup>	n <sup>2</sup>	R <sup>2</sup>	KHC(h <sup>-1/3</sup> )
F1-E	0.775	9.877	0.776	-9.877	0.575	-0.366	0.557	0.362	0.575	-0.366
F2-E	0.847	9.020	0.847	-9.020	0.782	-0.273	0.657	0.371	0.782	-0.273
F3-E	0.897	8.199	0.897	-8.199	0.897	-0.236	0.779	0.394	0.897	-0.236
F4-E	0.868	6.869	0.868	-6.869	0.871	-0.195	0.739	0.345	0.870	-0.196
F5-E	0.860	7.654	0.886	-7.489	0.856	-0.233	0.639	0.386	0.856	-0.233
F6-EH	0.852	8.878	0.852	-8.877	0.814	-0.249	0.589	0.306	0.814	-0.249
F7-EH	0.785	5.542	0.786	-5.542	0.900	-0.153	0.639	0.331	0.731	-0.153
F8-EH	0.899	5.551	0.830	-5.550	0.778	-0.256	0.637	0.331	0.777	-0.167

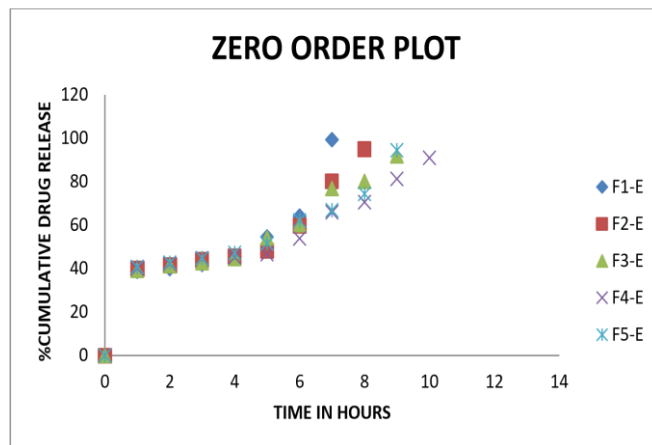


Fig. 15. Comparison of in vitro zero order release kinetics of sitagliptin phosphate microspheres by using eudragit rs 100 at different ratios



Fig. 16. Comparison Of In-Vitro Zero Order Release Kinetics Of Sitagliptin Phosphate Microspheres By Using Eudragit Rs 100 With HPMC E-15 Ratios

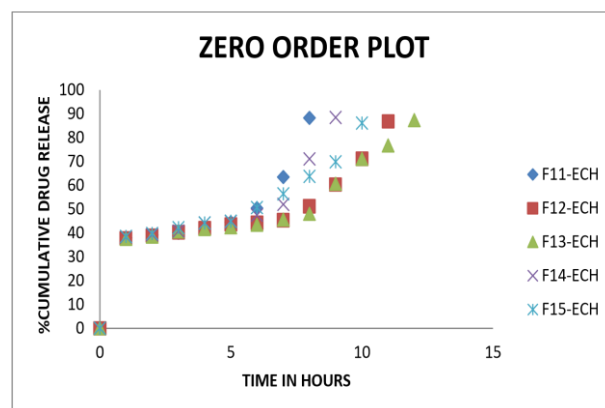


Fig. 17. Comparison Of In Vitro Zero Order Release Kinetics Of Sitagliptin Phosphate Microspheres By Using Eudragit Rs 100 With Mucuna Gum Ratios

*Higuchi model*

The Higuchi model best fits the release kinetics of all formulations. Model by Higuchi with R2 ranges of 0.575 to 0.900. The release kinetics were shown to be entirely diffusion-controlled based on the Higuchi model values.

*Korsmeyer-peppas model*

The drug launch from polymeric microspheres became diffusion regulated because it became proportional to



rectangular root time. The accumulated data became extensively utilized to clear up the Korsmeyer-Peppas equation to decide the discharge exponent (n values among zero.five and 1.zero for anomalous delivery correspond to diffusion, erosion and swelling mechanism, or blended order kinetics (n values variety from zero.557 to zero.739), which describes the drug launch mechanism via way of means of non-fickian diffusion.

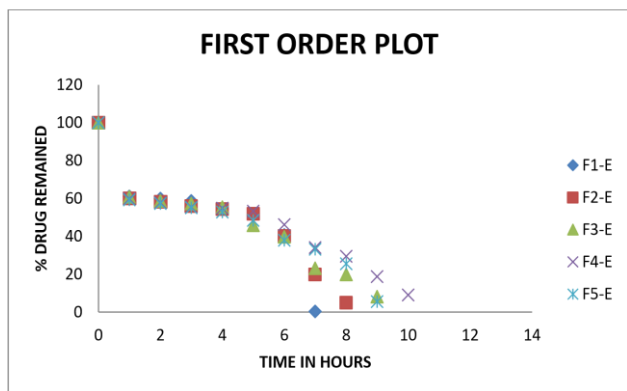


Fig. 18. Comparison Of In-Vitro First Order Release Kinetics Of Sitagliptin Phosphate Microspheres By Using Eudragit Rs 100 At Different Ratios

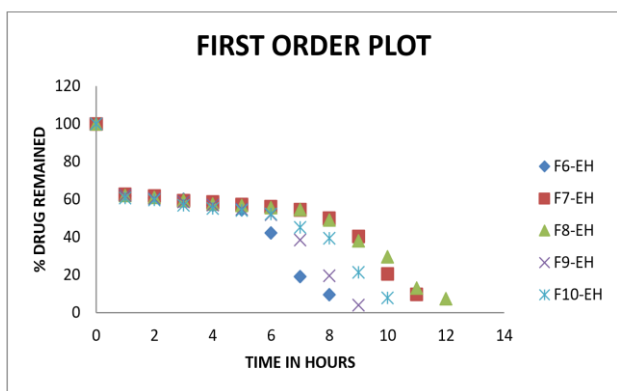


Fig. 19. Comparison of in vitro first order release kinetics of sitagliptin phosphate microspheres by using eudragit rs 100 with hpmc e-15 ratios



Fig. 20. Comparison of in-vitro first order release kinetics of sitagliptin phosphate microspheres by using eudragit rs 100 with chitosan ratios

**Stability studies**

The formulation FM-15 was chosen for stability testing due to its high cumulative % drug release, high drug content, and effective encapsulation. The stability tests were done for the optimal formulation up to 30 days at 25 °C. The microspheres' drug content, encapsulation effectiveness, and

cumulative% drug release were examined over a 15-day period. No parameter in the formulation exhibited substantial variance.

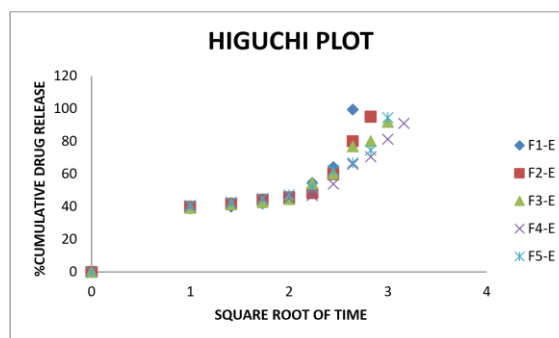


Fig. 21. Comparison of in-vitro higuchi model release kinetics of sitagliptin phosphate microspheres by using eudragit rs 100 at different ratios

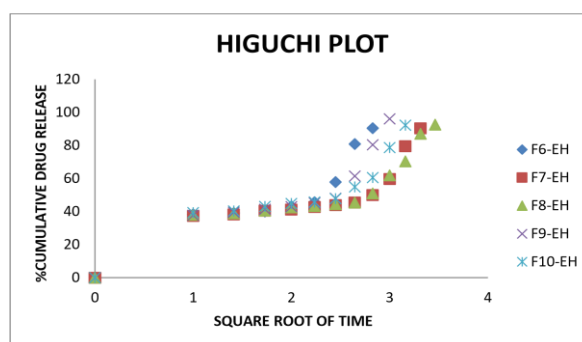


Fig. 22. Comparison of in-vitro higuchi model release kinetics of sitagliptin phosphate microspheres by using eudragit rs 100 with hpmc e-15 ratios

TABLE 8 Stability studies

S.NO	FORMULATION CODE	EVALUATION PARAMETERS	BEFORE STORAGE	Stored at 40°C ± 2°C and 75% ± 5% RH (AFTER STORAGE)		
				For 15 days	For 30 days	For 30 days
1.	FM-3	Drug content (%)	97.9	96.8	95.1	
2.	FM-5	Encapsulation efficiency(%)	88.88	86.9	85.8	
3.	FM-7	% cumulative drug release(%)	92.63	91.5	90.2	

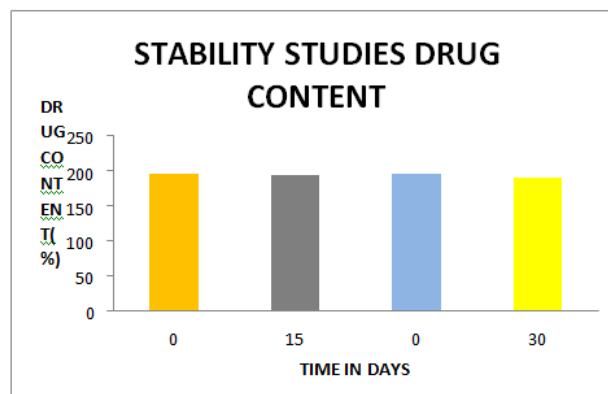


Fig. 23. A Stability Studies For drug loaded Microspheres

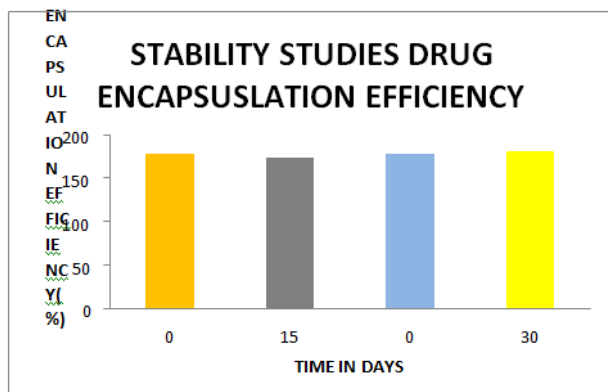


Fig. 24. Stability studies for drug loaded microspheres

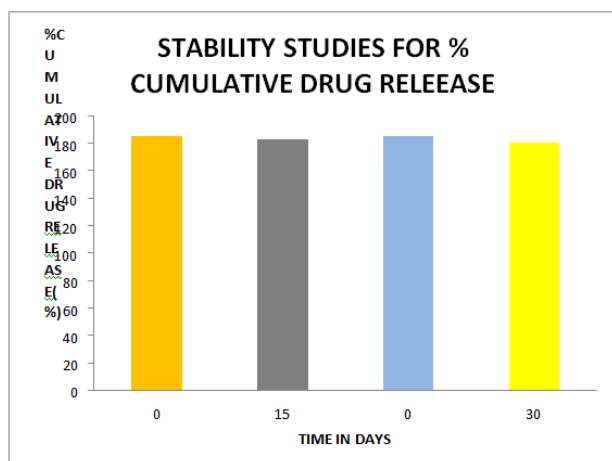


Fig. 25. Stability studies for drug loaded microspheres

#### IV. CONCLUSION

Sitagliptin phosphate microspheres with sustained release have been effectively created using the non-aqueous solvent evaporation method with rate-retardant polymers. According to the findings, the drug: polymer ratio affects the sustained release microspheres' particle size, drug content, encapsulation effectiveness, and in-vitro drug release. The created microspheres demonstrated effective drug loading. The gel formulation, which contained sitagliptin microspheres loaded with the medication, demonstrated sustained release for 12 hours, proving its potential for the sustained administration of medications for the treatment of DM. The effectiveness of the gel as a treatment, however, has to be confirmed by more research, including clinical trials. The mean particle size range was 54.51 to 92.62 m. The FM8 displays figures for the maximum drug content of 97.92% Percentage. The FM8's encapsulation efficiency is 88.88%. Due to an increase in the viscosity of the solution, the drug entrapment effectiveness% rose as the polymer concentration did as well. An increase in the concentration of various rate-retardant polymers was shown in the in-vitro release research of all formulations to result in a sustained drug release (EUDRAGIT RS 100,

HPMC E15, Mucuna gum). For 12 hours, the dissolving investigation was conducted in phosphate buffer with a pH of 7.2. All formulations demonstrated more than 90% drug release, and the formulations indicate sustained drug release for up to 12 hours.

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#### Conflict of interest

The Authors declare no conflict of interest.

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