Research Article

Formulation Development And Evaluation Of Simvastatin Sustained Release Tablets

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ABSTRACT

Purpose: The main objective of present research investigation is to formulate the sustained release tablet of Simvastatin using 3² factorial design. Simvastatin, an antihyperlipidemic agent, belongs BCS class-II agent. Methods: The SR tablets of Simvastatin were prepared employing different concentrations of HPMCK4M and SCMC in different combinations by wet granulation technique using 3² factorial design. The concentration of Polymers , HPMCK4M and SCMC required to achieve the desired drug release was selected as independent variables, X, and X, respectively whereas, time required for 10% of drug dissolution (t10%), 50% (t10%), 75% (t10%) and 90% (t____) were selected as dependent variables. Results and Discussion: Totally nine formulations were designed and are evaluated for hardness, friability, thickness, % drug content, In-vitro drug release. From the Results it was concluded that all the formulation were found to be with in the Pharmacopoeial limits and the Invitro dissolution profiles of all formulations were fitted in to different Kinetic models, the statistical parameters like intercept, slope & regression coefficient were calculated. Polynomial equations were developed for t100%/ t_{cross}, t_{ress}, t_{oress}, Validity of developed polynomial equations were verified by designing 2 check point formulations (C₁, C₂). According to SUPAC guidelines the formulation (F₄) containing combination of 17.5% HPMCK4M and 30% SCMC, is the most similar formulation (similarity factor $f_1 = 89.652$, dissimilarity factor $f_1 = 1.6424$ & No significant difference, t = 0.00558) to marketed product (ZOCOR). **Conclusion:** The selected formulation (F,) follows Zero order, Higuchi's kinetics, and the mechanism of drug release was found to be Non-Fickian Diffusion (n=0.963).

Keywords: Simvastatin, 3² Factorial Design, Sustained Release Tablet, HPMCK4M, SCMC, SUPAC, Non-Fickian Diffusion Mechanism, Zero order kinetics.

INTRODUCTION

Oral administration is the most convenient, popularly used route of administration for both conventional and novel drug delivery systems, and preferred route of drug delivery for systemic action. Tablets are the most popular oral solid formulations available in the market and are preferred by patients and physicians alike. There are many reasons for this, not the least of which would include acceptance by the patient and ease of administration . In long-term therapy for the treatment of chronic disease conditions, conventional formulations are required to be administered in multiple doses and therefore have several disadvantages¹. However, when administered orally, many therapeutic agents are subjected to extensive presystemic elimination by gastrointestinal degradation and/or first pass hepatic metabolism as a result of which low systemic bioavailability and shorter duration of therapeutic activity and formation of inactive or toxic metabolites².

Sustained release (SR) tablet formulations are preferred for such therapy because they offer better patient compliance, maintain uniform drug levels, reduce dose and side effects, and increase the safety margin for high-potency drugs³. Sustained release dosage forms may be defined as any drug or dosage form modification that prolonged but not necessarily uniform release of

drug. The goal of a sustained release dosage form is to maintain therapeutic blood or tissue levels of the drug for an extended period. This is usually accomplished by attempting to obtain zero-order release from the dosage form. Zero-order release constitutes the drug release from the dosage form that is independent of the amount of drug in the delivery system (i. e., constant release rate). Sustained release systems generally do not attain this type of release and usually try to mimic zero-order release by providing drug in a slow first-order fashion (i. e., concentration dependent). Systems that are designated as prolonged release can also be considered as attempts at achieving sustained release delivery⁴⁻⁶.

Sustained release tablet allowing a 2 fold or greater reduction in frequency of administration of a drug in comparison with the frequency required by a Prompt release dosage form^Z. Sustained release products provide advantage over Immediate release dosage form by optimising biopharmaceutical, pharmacokinetic and pharmacodynamic properties of drug. Sustained release dosage forms have been demonstrated to improve therapeutic efficiency by maintenance of a steady drug plasma concentration.

Among the different Sustained release drug delivery systems, matrix based SR tablet formulations are the most popularly preferred for its convenience to formulate a cost effective manufacturing technology in commercial scale. The use of polymers in controlling the release of drugs has become an important tool in the formulation of pharmaceutical dosage forms. Over many years, numerous studies have been reported in the literature on the application of hydrophilic polymers in the development of SR matrix systems for various drugs ⁸.

Since the early 1950s, the application of polymeric materials for medical purposes is growing very fast. Polymers have been used in the medical field for a large extent⁹. Natural polymers remain attractive primarily because they are economic, readily available, be capable of chemical modifications, non-carcinogenicity, mucoadhesivity, biodegradable, biocompatible, high drug holding capacity and high thermal stability and easy of compression¹⁰. This led to its application as excipient in hydrophilic drug delivery system. The various natural gums and mucilages have been examined as polymers for sustained drug release in the last few decades for example; guar gum,

tragacanth gum, xanthan gum, pectin, alginates etc. In the development of a sustained release tablet dosage form. Availability of wide variety of polymer and frequent dosing interval helps the scientist to develop sustained release product. cellulose derivatives such as carboxymethyl cellulose (CMC), sodium carboxy methyl cellulose(SCMC), hydroxyproyl cellulose (HPC), and hydroxypropyl methyl cellulose (HPMC) have been extensively studied as polymer in the sustained release tablet formulations⁹. These polymers are most preferred because of its cost effectiveness, broad regulatory acceptance, non-toxic and easy of compression. Some factors like molecular size, diffusivity, pKa-ionization constant, release rate, dose and stability, duration of action, absorption window, therapeutic index, protein binding, and metabolism affect the design of sustained release formulation. The future of sustained release products is promising in some area like chronopharmacokinetic system, targeted drug delivery system, mucoadhesive system, particulate system that provide high promise and acceptability.

Oral sustained release dosage form by wet granulation technique is a simple approach of drug delivery systems that proved to be rational in the pharmaceutical arena for its ease, compliance, faster production, avoid hydrolytic or oxidative reactions occurred during processing of dosage forms¹¹. The selection of the drug candidates for sustained release system needs consideration of several biopharmaceutical, pharmacokinetic and pharmacodynamic properties of drug molecule¹².

In the present study, a sustained release dosage form of Simvastatin has been developed that makes less frequent administering of drug.

Simvastatin, a newer antihyperlipidemic agent, belongs BCS class-II agent. It is a specific inhibitor of HMG CoA. It is a prodrug and is hydrolyzed to its active β -hydroxyacid form, simvastatin acid, after administration. It is practically insoluble in water and other aqueous media. The very poor aqueous solubility and wettability of simvastatin give rise to difficulties in the design of pharmaceutical formulations and led to variable oral bioavailability. Thus, there is a need to increase rate of dissolution. Hence, the study was carried out to formulate and evaluate sustained release dosage form of Simvastatin as a model drug and had a aim that final batch formulation parameters should shows prolong drug release.

Development of dosage form depends on chemical nature of the drug/polymers, matrix structure, swelling, diffusion, erosion, release mechanism and the in vivo environment.

It is an important issue is to design an optimized formulation with an appropriate dissolution rate in a short time period and minimum trials. Many statistical experimental designs have been recognized as useful techniques to optimize the process variables. For this purpose, response surface methodology (RSM) utilizing a polynomial equation has been widely used. Different types of RSM designs include 3-level factorial design, central composite design (CCD), Box-Behnken design and D-optimal design. Response surface methodology (RSM) is used when only a few significant factors are involved in experimental optimization. The technique requires less experimentation and time, thus proving to be far more effective and cost-effective than the conventional methods of formulating sustained release dosage forms¹³.

Hence an attempt is made in this research work to formulate sustained release (SR) tablets of Simvastatin using HPMCK4M and SCMC . Instead of normal and trial method, a standard statistical tool design of experiments is employed to study the effect of formulation variables on the release properties.

Large scale production needs more simplicity in the formulation with economic and cheapest dosage form.

A 3^2 full factorial design was employed to systematically study the drug release profile . A 3^2 full factorial design was employed to investigate the effect of two independent variables (factors), i.e the amounts of HPMCK4M and SCMC on the dependent variables, i.e. $t_{10\%'} t_{50\%'} t_{75\%'} t_{90\%'}$ (Time taken to release 10%,50%,75%,90% respectively).

MATERIALS AND METHODS

Materials used in this study were obtained from the different sources. Simvastatin was a gift sample from Aurobindo pharma Ltd, Hyderabad, India. HPMCK4M, SCMC, Mannitol and SLS were procured from Loba Chemie Pvt.Ltd, Mumbai. Other excipient such as magnesium stearate was procured from S.D. Fine Chem. Ltd., Mumbai.

Formulation Development of Simvastatin Sustained Release Tablets:

The factorial design is a technique that allows

identification of factors involved in a process and assesses their relative importance. In addition, any interaction between factors chosen can be identified. Construction of a factorial design involves the selection of parameters and the choice of responses^{14,15}.

A selected three level, two factor experimental design (3² factorial design) describe the proportion in which the independent variables HPMCK4M and SCMC were used in formulation of Simvastatin sustained release (SR) Tablets. The time required for 10% ($t_{10\%}$), 50% ($t_{50\%}$), 75% ($t_{75\%}$) and 90% ($t_{90\%}$) drug dissolution were selected as dependent variables. Significance terms were chosen at 95% confidence interval (p<0.05) for Final Equations. Polynomial equations were developed for $t_{10\%}$, $t_{50\%}$, $t_{75\%}$, (step-wise backward Linear Regression Analysis).

The three levels of factor X_1 (HPMCK4M) at a concentration of 10%, 17.5%, 25%. three levels of factor X_2 (SCMC) at a concentration of 10%, 20%, 30%. (% with respect to total tablet weight) was taken as the rationale for the design of the Simvastatin SR tablet formulation. Totally nine Simvastatin sustained release tablet formulations were prepared employing selected combinations of the two factors i.e X_1 , X_2 as per 3^2 Factorial and evaluated to find out the significance of combined effects of X_1 , X_2 to select the best combination and the concentration required to achieve the desired prolonged/ sustained release of drug from the dosage form.

Preparation of Simvastatin Sustained Release Tablets:

All ingredients were collected and weighed accurately. They were mixed uniformly in a glass mortar and required quantity of granulating agent was added (warm water) and mixed thoroughly until get a smooth damp mass. The granules were prepared by passing wet mass through sieve no 16. Wet granules were dried in hot air oven for 30 min at 60°C and then passed through sieve no 22. Add magnesium stearate and then again blend for 5-6 minutes. Lubricated granules were compressed by using rotary tablet punching machine (RIMEK), Ahmedabad). Compressed tablets were examined as per official standards and unofficial tests. Tablets were packaged in well closed light resistance and moisture proof containers.

Formulation Code	X ₁	X ₂
F ₁	1	1
F ₂	1	0
F ₃	1	-1
F ₄	0	1
F _s	0	0
F ₆	0	-1
F ₇	-1	1
F ₈	-1	0
F ₉	-1	-1
C ₁	-0.5	-0.5
ς	+0.5	+0.5

Experimental Design.

Experimental design utilized in present investigation for the optimization of polymer concentration such as, concentration of HPMCK4M was taken as X₁ and concentration of SCMC was taken as X₂. Experimental design was given in the Table 1. Three levels for the Concentration of HPMCK4M were selected and coded as -1= 10%, 0=17.5%, +1=25%. Three levels for the Concentration of SCMC were selected and coded as -1= 10%, 0=20%, +1=30%. Formulae for all the experimental batches were given in Table 2 ^{8.16}.

EVALUATION OF SIMVASTATIN SUSTAINED RE-LEASE TABLETS:

Hardness⁸

The hardness of the tablets was tested by diametric compression using a Monsanto Hardness Tester. A tablet hardness of about 2-4 kg/cm² is considered adequate for mechanical stability.

Friability⁸

The friability of the tablets was measured in a Roche friabilator (Camp-bell Electronics, Mumbai). Tablets of a known weight (W_0) or a sample of 20 tablets are dedusted in a drum for a fixed time (100 revolutions) and weighed (W) again. Percentage friability was calculated from the loss in weight as given in equation as below. The weight loss should not be more than 1 %

Friability (%) = [(Initial weight- Final weight) / (Initial weight)] x 100

Content Uniformity⁸

In this test, 20 tablets were randomly selected and the percent drug content was determined, the tablets contained not less than 85% or more than 115% of the labelled drug content can be considered as the test was passed.

Assay¹⁷

The drug content in each formulation was determined by triturating 20 tablets and powder equivalent to

able 2. Formulae for the preparation of simvastatin sustained release tablets as per experimental design											
Name of Ingredients	Quanti	Quantity of Ingredients per each Tablet (mg)									
	F ₁	F ₂	F ₇	F ₈	F,						
Simvastatin	40	40	40	40	40	40	40	40	40		
Mannitol	41	61	81	56	76	96	71	91	111		
НРМС К4М	50	50	50	35	35	35	20	20	20		
Sodium Carboxy Methyl Cellulose	60	40	20	60	40	20	60	40	20		
Magnesium Stearate	4	4	4	4	4	4	4	4	4		
Water	qs	qs	qs	qs	qs	qs	qs	qs	qs		
Hydroalcohol	qs	qs	qs	qs	qs	qs	qs	qs	qs		
Sodium Lauryl Sulphate	5	5	5	5	5	5	5	5	5		
Total Weight	200	200	200	200	200	200	200	200	200		

Table 3. Post-Compression parameters for the formulations										
S.No	Formulation	Hardness	Thickness	Friability	% Weight	Drug Content				
	Code	(kg/cm ²)	(mm)	(%)	Variation	(%)				
1	F ₁	3.5±0.1	2.76±0.16	0.28±0.03	201.3±0.13	99.13±0.475				
2	F ₂	3.5±0.5	2.86±0.12	0.25±0.025	199.4±0.25	98.47±0.515				
3	F ₃	4.0±0.5	2.76±0.14	0.41±0.03	199.2±0.31	98.53±0.33				
4	F ₄	3.7±0.2	2.63±0.15	0.38±0.025	198.51±0.42	99.46±0.45				
5	F ₅	4.0±0.5	2.68±0.14	0.35±0.02	201.0±0.19	99.40±0.300				
6	F ₆	3.8±0.20	2.55±0.26	0.22±0.025	202.1±0.10	98.64±0.30				
7	F ₇	3.5±0.40	2.55±0.14	0.51±0.025	200.6±0.16	99.23±0.38				
8	F ₈	4.0±0.20	2.54±0.16	0.48±0.02	201.1±0.10	99.59±0.32				
9	F,	3.8±0.5	2.49±0.15	0.23±0.025	199.6±0.21	98.47±0.43				

Table 4. Regression analysis data of 32 factorial design formulations of simvastatin

S.NO	Formulation	KINETIC	KINETIC PARAMETERS										
	Code	ZERO OI	RDER		FIRST ORDER			HIGUCHI		KORSMEYER-PEPPAS			
		a	b	r	a	b	r	a	b	r	a	b	r
1	F ₁	5.624	8.455	0.997	2.230	0.106	0.874	24.134	30.775	0.940	0.568	1.352	0.996
2	F ₂	3.711	8.240	0.999	2.173	0.093	0.920	22.357	30.263	0.949	0.657	1.258	0.998
3	F ₃	1.119	7.551	0.999	2.101	0.071	0.966	18.853	28.019	0.959	0.742	1.147	0.997
4	F ₄	1.384	8.335	0.999	2.276	0.133	0.839	18.586	31.103	0.965	0.963	0.966	0.999
5	F _s	2.220	8.345	0.998	2.183	0.100	0.925	21.357	30.759	0.952	0.826	1.083	0.998
6	F ₆	2.568	7.507	0.992	2.075	0.072	0.986	16.330	28.420	0.972	0.864	1.046	0.993
7	F ₇	3.975	8.223	0.998	2.165	0.090	0.929	22.575	30.195	0.949	0.631	1.282	0.997
8	F ₈	1.166	7.849	0.998	2.129	0.082	0.944	19.702	29.169	0.960	0.615	1.317	0.973
9	F,	4.117	8.127	0.997	2.134	0.081	0.963	22.651	29.911	0.950	0.526	1.397	0.993
	<i>C</i>	1.0	1		1	CC .							

 F_1 to F_9 are factorial formulations, r-correlation coefficient, a-Intercept, b-Slope.

Table 5. Dissolution parameters of simvastatin sustained release tablets 3² full factirial design batches

S.NO	FORMULATION CODE	KINETIC PARA	KINETIC PARAMETERS							
		t _{10% (Hrs)}	t _{50% (Hrs)}	t _{90% (Hrs)}	t _{75% (Hrs)}					
1	F ₁	0.431	2.837	9.426	5.673					
2	F ₂	0.494	3.251	10.805	6.503					
3	F ₃	0.642	4.221	14.025	8.441					
4	F ₄	0.345	2.267	7.534	4.535					
5	F ₅	0.459	3.021	10.040	6.043					
6	F ₆	0.634	4.171	13.861	8.343					

7	F ₇	0.510	3.357	11.157	6.715
8	F ₈	0.560	3.687	12.253	7.375
9	F ₉	0.568	3.734	12.408	7.468

Table 6. Dissolution parameters for predicted and observed values for check formulations

FORMULATION CODE	PREDICTED	VALUE			ACTUAL OBSERVED VALUE				
	t _{10% (h)}	t _{50% (h)}	t _{75% (h)})	t _{90% (h)}	t _{10% (h)}	t _{50% (h)}	t _{75% (h)})	t _{90% (h)}	
C ₁	0.577	3.793	7.587	12.607	0.586	3.786	7.629	12.589	
C ₂	0.472	3.105	6.209	10.317	0.459	3.150	6.328	10.334	

40 mg was dissolved in 100ml of phosphate buffer pH 6.8, followed by stirring. The solution was filtered through a 0.45μ membrane filter, diluted suitably and the absorbance of resultant solution was measured spectrophotometrically at 247 nm using phosphate buffer pH 6.8 as blank.

3.5. Thickness³

Thickness of the all tablet formulations were measured using vernier calipers by placing tablet between two arms of the vernier calipers.

In-vitro Dissolution Study¹⁷

The *In-vitro* dissolution study for the Simvastatin sustained release tablets were carried out in USP XXIII type-II dissolution test apparatus (Paddle type) using 900 ml of 0.1 N HCl as dissolution medium for first two hours followed by phosphate buffer pH 6.8 at 50 rpm and temperature $37\pm0.5^{\circ}$ C. At predetermined time intervals, 5 ml of the samples were withdrawn by means of a syringe fitted with a pre-filter, the volume withdrawn at each interval was replaced with same quantity of fresh dissolution medium. The resultant samples were analyzed for the presence of the drug release by measuring the absorbance at 247 nm using UV Visible spectrophotometer after suitable dilutions. The determinations were performed in triplicate (n=3).

Kinetic modeling of drug release.

The dissolution profile of all the formulations was fitted in to zero-order, first-order, Higuchi and Korsmeyerpeppas models to ascertain the kinetic modeling of drug release 8.18.19.

RESULTS AND DISCUSSION:

Sustained release tablets of Simvastatin were prepared and optimized by 3² factorial design in order to select the best combination of different Polymers, HPMCK4M, SCMC and also to achieve the desired prolong/sustained release of drug from the dosage form/ Formulation. The two factorial parameters involved in the development of formulations are, quantity of HPMCK4M & SCMC polymers as independent variables (X₁, X₂), and *In vitro* dissolution parameters such as $t_{10\%}$, $t_{50\%}$, $t_{75\%}$ & $t_{90\%}$ as dependent variables. Totally nine formulations were prepared using 3 levels of 2 factors and all the formulations containing 40 mg of Simvastatin were prepared as a sustained release tablet dosage form by Direct Compression technique as per the formulae given in Table 2.

All the prepared tablets were evaluated for different post compression parameters, drug content, mean hardness, friability, mean thickness as per official methods and results are given in Table 3. The hardness of tablets was in the range of 3.5±0.1-4.0±0.5 Kg/ cm². Weight loss in the friability test was less than 0.48%. Drug content of prepared tablets was within acceptance range only. Results for all Post-compression parameters were tabulated or summarised in Table 3. Invitro Dissolution studies were performed for prepared tables using 0.1 N HCl for first two hours followed by phosphate buffer pH 6.8 as a dissolution media at 50 rpm and temperature 37±0.5°C. The In-vitro dissolution profiles of tablets were shown in Fig.1-4 (Kinetic Plots) and the dissolution parameters were summarised in Table 4. Cumulative % Drug release of Factorial Design

Formulations F_1 - F_9 at 12Hr were found to be in the range of **87.38-99.46 %**. From the result it reveals that the release rate was higher for formulations containing Low level of HPMCK 15M compared with other Formulations containing Higher level, due to High concentration of polymer drug may have entrapped within a polymer matrix causing a decrease in rate of drug release. Therefore, required release of drug can be obtained by manipulating the composition of HPMCK4M and SCMC.

Much variation was observed in the $t_{10\%}$, $t_{50\%}$, $t_{75\%}$ and $t_{90\%}$ due to formulation variables. Formulation F_4 containing 35 mg of HPMCK4M, 60 mg of SCMC showed promising dissolution parameter ($t_{10\%=}$ 0.345 h, $t_{50\%=}$ 2.267 h, $t_{75\%=}$ 4.535 h, $t_{90\%=}$ 7.534 h). The difference in burst effect of the initial time is a result of the difference in the viscosity of the polymeric mixtures. As the increase in viscosity results in a corresponding decrease in the drug release, which might be due to the result of thicker gel layer formulation²⁰.



The *In -vitro* dissolution data of Simvastatin SR tablet formulations was subjected to goodness of fit test by linear regression analysis according to zero order and first order kinetic equations, Higuchi's and Korsmeyer-Peppas models to assess the mechanism of drug release. The results of linear regression analysis including regression coefficients are summarized in Table 4 and plots shown in fig.1,2,3,4. It was observed from the above that dissolution of all the tablets followed zero order kinetics with co-efficient of determination (R²) values above **0.992** (**0.992-0.99**). The values of r of factorial formulations for Higuchi's equation was found to be in the range of **0.940-0.972**, which shows that the data fitted well to Higuchi's square root of time equation confirming the release followed diffusion mechanism. Kinetic data also treated for Peppas equation, the slope (n) values ranges from **0.526- 0.963** that shows Non-Fickian diffusion mechanism.

Figure 2 . Comparative First Order Plots for F₁-F₉



Figure 3 . Comparative Higuchi Plots for F,-F,



Polynomial equations were derived for $t_{10\%}$, $t_{50\%}$, $t_{75\%}$ and $t_{90\%}$ values by backward stepwise linear regression analysis using **PCP Disso** software and Response surface plots were constructed using **SIGMAPLOT V13** software. The Response surface plots were shown in Fig.5-8 for $t_{10\%}$, $t_{50\%}$, $t_{75\%}$ and $t_{90\%}$ using X₁ and X₂ on both the axes respectively. The dissolution data (Kinetic parameters) of factorial formulations F₁ to F₉ were shown in Table 5.



Polynomial equation for 3^2 full factorial designs is given in Equation

 $Y = b_0 + b_1 X_1 + b_2 X_2 + b_{12} X_1 X_2 + b_{11} X_1^2 + b_{22} X_2^2 \dots$

Where, Y is dependent variable, b_0 arithmetic mean response of nine batches, and b_1 estimated co-efficient for factor X₁. The main effects (**X**₁ and X₂) represent the average result of changing one factor at a time from its low to high value. The interaction term (X₁X₂) shows how the response changes when two factors are simultaneously changed. The polynomial terms (X₁² and X₂²) are included to investigate non-linearity. Validity of derived equations was verified by preparing Two Check point Formulations of Intermediate concentration(C₁, C₂).



The equations for $t_{_{10\%'}}\,t_{_{50\%}}\,t_{_{75\%}}$ and $t_{_{90\%}}$ developed as follows,

 $Y_{1} = 00.516 - 0.012X_{1} - 0.093X_{2} - 0.038 \qquad X_{1}X_{2} + 0.0548$ $X_{1}^{2} + 0.0173X_{2}^{2} \text{ (for } t_{10\%}\text{)}$

$$Y_2 = 3.394-0.078X_1-0.610X_2-0.252$$
 $X_1X_2+0.362$
 $X_2^2+0.112X_2^2$ (for t....)

 $Y_4 = 11.279 - 0.260X_1 - 2.03X_2 - 0.837 X_1X_2 + 1.20 X_1^2 + 0.369 X_2^2$ (for $t_{90\%}$)

The positive sign for co-efficient of X₁ in Y₁, Y₂, Y₃ and Y₄ equations indicates that, as the concentration of HPMCK4M increases, $t_{10\%}$, $t_{50\%}$, $t_{75\%}$ and $t_{90\%}$ value increases. In other words the data demonstrate that both X₁ (amount of HPMCK4M) and X₂ (amount of SCMC) affect the time required for drug release ($t_{10\%}$, $t_{50\%}$, $t_{75\%}$ and $t_{90\%}$). From the results it can be concluded that, and increase in the amount of the polymer leads to decrease in release rate of the drug and drug release pattern may be changed by appropriate selection of the X₁ and X₂ levels.



The Dissolution parameters for predicted from the polynomial equations derived and those actual observed from experimental results are summarised in Table 6. The closeness of Predicted and Observed values for $t_{10\%}$, $t_{50\%}$, $t_{75\%}$ and $t_{90\%}$ indicates validity of derived equations for dependent variables.







The response surface plots were presented to show the effects of X₁ and X₂ on t_{10%}, t_{50%}, t_{75%} and t_{90%}. The final best (Optimised) formulation (F₄) is compared with marketed product (**ZOCOR**) shows similarity factor (f₂) 89.652, difference factor (f₁) 1.6424 (There is no significant difference in drug release because t_{cal} is<0.05).

CONCLUSION

The present research work envisages the applicability of Polymers such as HPMCK4M and SCMC in the design and development of sustained release tablet formulations of Simvastatin utilizing the 3² factorial design. From the results it was clearly understand that as the retardant

(HPMC) concentration increases the release rate of drug was retarded and both of these polymers can be used in combination since do not interact with the drug which may be more helpful in achieving the desired sustained release of the drug for longer periods. The optimized formulation followed Higuchi's kinetics while the drug release mechanism was found to be Non-Fickian Diffusion, Zero order release type, controlled by diffusion through the swollen matrix. On the basis of evaluation parameters, the optimized formulation F, may be used once a day administration in the management of hypercholesterolemia and to reduce the risk of Cardiovascular disease. This may improve the patient compliance by reducing the dosing frequency. which will ultimately improve the therapeutic outcome. We could be able to minimize the per oral cost of the Formulation.

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