



Review Article

A Comprehensive Review On Analytical Methods For The Simultaneous Estimation Of Donepezil And Memantine In Combined Dosage Form

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ABSTRACT

Donepezil and Memantine are commonly used drugs in the treatment of Alzheimer's disease. There are several methods available for the individual estimation of these drugs, but there are limited reports on simultaneous estimation of both in pharmaceutical dosage forms. In this context, various analytical methods have been reported in recent years for the simultaneous estimation of Donepezil and Memantine in pharmaceutical dosage forms. Analytical procedures play a crucial role in providing solutions for development. This article provides an overview and categorization of the different analytical approaches commonly used to identify supply issues. Pharmaceutical analysis is uniquely positioned to ensure the quality assurance and internal control of most pharmaceutical medications and preparations. The rapid growth of the pharmaceutical industry worldwide has led to an increased demand for innovative analytical methods. As a result, developing analytical methods has become an important learning experience. Recent advancements in analytical instruments have led to significant developments in analytical procedures.

INTRODUCTION

Alzheimer's disease is a chronic neurodegenerative disorder that affects the brain's function, particularly memory, thinking, and behavior. It is the most common form of dementia, accounting for approximately 60-80% of all cases. The disease was first described by a German psychiatrist, Dr. Alois Alzheimer, in 1906, who identified abnormal protein deposits and tangles in

the brain of a patient who had died after experiencing memory loss and other cognitive problems.[1] The symptoms of Alzheimer's disease typically develop slowly over a period of years and worsen over time, eventually leading to severe cognitive impairment and the loss of independence. Common symptoms include memory loss, difficulty in communicating,

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confusion, mood swings, and difficulty in performing everyday tasks. [2,3]

The exact cause of Alzheimer's disease is still unknown, but researchers believe that a combination of genetic, environmental, and lifestyle factors may contribute to the development of the disease. Some of the risk factors that have been identified include age, genetics, head injuries, cardiovascular disease, and lifestyle factors such as diet, exercise, and social engagement. Currently, there is no cure for Alzheimer's disease, but there are treatments available that can help to manage the symptoms and slow down the progression of the disease. These treatments include medications such as Donepezil and Memantine, which are commonly used together in the treatment of moderate to severe Alzheimer's disease. Accurate and reliable analytical methods are therefore essential for the simultaneous estimation of these drugs in combined dosage forms to ensure the safe and effective management of the disease. [4-6]

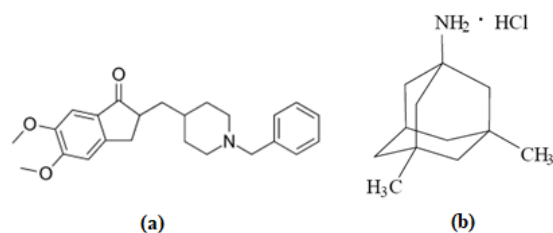


Fig. 1. Structure of (a) Donepezil Hydrochloride
(b) Memantine Hydrochloride

DRUG PROFILE

Drug	Donepezil Hydrochloride	Memantine Hydrochloride
IUPAC Name	2-[(1-benzylpiperidin-4-yl)methyl]-5,6-dimethoxy-2,3-dihydro-1H-inden-1-one hydrochloride	3,5-dimethyladamantan-1-amine hydrochloride
Chemical Formula	C ₂₄ H ₃₀ ClNO ₃	C ₁₂ H ₂₂ ClN

Molecular Mass	415.96 gm/mol	215.76 gm/mol
Solubility	Soluble in water (100 mM), DMSO (1 mg/ml), methanol, ethanol (2 mg/ml), and DMF (slightly)	soluble in water (1 mg/ml), yielding a clear, colorless solution
pKa	8.34	10.7
Therapeutic Use	Donepezil is an acetylcholinesterase inhibitor used to treat the behavioral and cognitive effects of Alzheimer's Disease and other types of dementia	Memantine is an NMDA receptor antagonist used to treat moderate to severe dementia in Alzheimer's

PHARMACOLOGY

A. Donepezil Hydrochloride [19,21]

Indication: The treatment of dementia of the Alzheimer's type is advised for donepezil, which can be given orally¹⁹ or topically²⁴. Moreover, it can be found as an extended-release capsule used in conjunction with memantine to treat Alzheimer's-related dementia in patients who have been stabilised on donepezil hydrochloride 10 mg once day.

Pharmacodynamics: Donepezil reduces the cognitive and behavioural signs and symptoms of Alzheimer's disease, including apathy, aggressiveness, disorientation, and psychosis, by suppressing the acetylcholinesterase enzyme.

Mechanism of action: According to the widely recognised cholinergic hypothesis¹³, reduced cholinergic transmission in the central nervous system may be the cause of some of the cognitive and behavioural changes linked to Alzheimer's disease. The acetylcholinesterase enzyme, which usually breaks down acetylcholine, is selectively and

permanently inhibited by donepezil. The major pharmacological effects of this medication are thought to be brought on by the inhibition of this enzyme, which improves cholinergic transmission and alleviates Alzheimer's dementia symptoms. The regulation of amyloid proteins, which have shown to have significant effects on the disease process of Alzheimer's, and the opposition of glutamate-induced excitatory transmission via downregulation of NMDA receptors are two additional mechanisms of action of donepezil in addition to the ones mentioned above.

Pharmacokinetic:

Absorption- Donepezil is administered orally and is slowly absorbed through the digestive system. About 15 to 21 days after dosing, steady-state concentrations are reached with a T_{max} of 3 to 4 hours and 100% bioavailability. One pharmacokinetic study's T_{max} was found to be 4.1 1.5 hours. According to the Canadian monograph, the C_{max} of donepezil tablets at a dosage of 5 mg is thought to be 8.34 ng/mL. The AUC of tablets containing 5 mg of donepezil was found to be 221.90-225.36 ng.hr/mL.

Volume of Distribution - With doses of 5 mg and 10 mg of donepezil, respectively, the volume of distribution is 11.8 1.7 L/kg and 11.6 1.91 L/kg. The extravascular compartments are where it is mostly disseminated. The blood-brain barrier is crossed by donepezil, whose concentration in the cerebrospinal fluid at the aforementioned dosages was 15.7%. According to the FDA label for donepezil, the steady-state distribution volume varies from 12 to 16 L/kg.

Metabolism- In addition to CYP2D6, the liver's first pass metabolism of donepezil is mainly mediated by CYP3A4. O-dealkylation, hydroxylation, N-oxidation,

hydrolysis, and O-glucuronidation then follow, resulting in a variety of compounds with half-lives that are comparable to those of the parent substance. A pharmacokinetics investigation of radiolabeled donepezil found that 53% of the plasma radioactivity was donepezil in its unaltered form, and 11% was the metabolite 6-O-desmethyl donepezil, which inhibits the acetylcholinesterase enzyme with a comparable efficacy.

Elimination- In a trial where donepezil was given radiolabeled to healthy individuals, 57% of the detected radioactivity was found in the pee and 5% in the faeces.

B. Memantine Hydrochloride [20,22]

Indication: Memantine is used to treat mild to intermediate forms of Alzheimer's disease. Memantine is advantageous when used as a first-line medication for the therapy of Alzheimer's dementia, according to a more recent systemic review and meta-analysis (6). Memantine may be combined with cholinesterase inhibitors to improve behavioural signs and other dementia symptoms even more.

Pharmacodynamics: This medication prevents glutamate's prolonged stimulation of the NMDA receptors, which results in calcium influx into cells. Increased memory and other positive central nervous system impacts show that this improves the signs of Alzheimer's dementia.

Mechanism of action: Some of the signs of Alzheimer's disease are believed to be brought on by the ongoing activation of the N-methyl-D-aspartate (NMDA) receptors in the central nervous system brought on by glutamate. Due to glutamate's activating characteristics, it is believed that this overactivation contributes to neurodegeneration. Memantine likely exerts its pharmacological impact by acting as an uncompetitive (open-channel) NMDA

receptor blocker and blocking glutamate's ability to bind to this receptor. Memantine prefers the cation channels controlled by NMDA receptors. Memantine has not been shown to stop or slow down the neurotoxicity seen in people with Alzheimer's disease, despite these antagonistic effects.

Pharmacokinetic:

Absorption- Memantine is well taken after an oral dosage. In between 3 and 7 hours, the drug content reaches its apex. When administered at typical medicinal dosages, memantine exhibits linear pharmacokinetics. Food has no impact on the uptake of memantine, so this medication can be taken regardless of what you eat.

Distribution - Memantine's average amount of spread is 9–11 L/kg.

Metabolism - The liver only partly metabolises this medication. The liver CYP450 enzyme system plays a minor role in this drug's breakdown.

Elimination- The pee is where this medication is primarily excreted. Memantine is ingested, and about 48% of it is released in urine unaltered. The remaining substance is broken down into three major compounds. These metabolites, which have weak NMDA receptor antagonist activity, include N-glucuronide conjugate, 6-hydroxy memantine, and 1-nitroso-deaminated memantine.

OBJECTIVES OF THE REVIEW: [11,12]

1. To provide a comprehensive overview of the different analytical methods used for the simultaneous estimation of Donepezil and Memantine in combined dosage forms.
2. To compare the advantages and disadvantages of the different analytical methods, including their sensitivity, selectivity, accuracy, precision, and cost-effectiveness.

3. To highlight the applications of the analytical methods in pharmaceutical analysis, including quantification of Donepezil and Memantine in pharmaceutical dosage forms, bioequivalence studies, stability studies, and pharmacokinetic studies.
4. To identify the gaps in the current analytical methods and suggest areas for further research and development.
5. To provide recommendations for the selection of appropriate analytical methods for the simultaneous estimation of Donepezil and Memantine in combined dosage forms based on their specific applications and requirements.[14]

ANALYTICAL METHODS:

There are several analytical methods available for the simultaneous estimation of Donepezil and Memantine in combined dosage forms, including spectrophotometry, chromatography, and electrochemical methods. In this section, we will compare the advantages and disadvantages of these methods based on their sensitivity, selectivity, accuracy, precision, and cost-effectiveness. [15,18]

1. **Spectrophotometry** It is a widely used analytical method for the determination of drugs in pharmaceutical formulations. The method involves the measurement of the absorbance of a drug at a specific wavelength. In the case of Donepezil and Memantine, the method is based on their UV absorbance at a wavelength of 239 and 265 nm, respectively. The advantages of spectrophotometry include its simplicity, low cost, and non-destructive nature. However, the method suffers from poor selectivity and sensitivity, making it unsuitable for complex matrices such as biological fluids. Spectrophotometry is therefore not recommended for the simultaneous estimation of Donepezil and Memantine in combined dosage forms. [18]



2. **Chromatography** It is a separation technique that is widely used in pharmaceutical analysis. High-performance liquid chromatography (HPLC) and ultra-high-performance liquid chromatography (UHPLC) are the most commonly used chromatographic techniques for the simultaneous estimation of Donepezil and Memantine in combined dosage forms. The method involves the separation of the drugs from the sample matrix using a stationary phase and a mobile phase. The advantages of chromatography include its high selectivity and sensitivity, making it suitable for the quantification of drugs in complex matrices such as biological fluids. However, the method is time-consuming and expensive, requiring specialized equipment and skilled personnel. [23]

3. **Electrochemical methods** These are based on the measurement of the electrical properties of a drug. Voltammetry and amperometry are the most commonly used electrochemical methods for the simultaneous estimation of Donepezil and Memantine in combined dosage forms. The method involves the measurement of the current produced by the drugs under specific conditions.[24] The advantages of electrochemical methods include their high sensitivity, selectivity, and speed, making them suitable for the analysis of complex matrices such as biological fluids. However, the method requires specialized equipment and skilled personnel, and the results may be affected by environmental factors such as temperature and pH. [25]

Overall, chromatography is the most suitable analytical method for the simultaneous estimation of Donepezil and Memantine in combined dosage forms, providing high sensitivity and selectivity, and is widely used in pharmaceutical analysis. However, the choice of analytical method will depend on the specific requirements and

applications of the analysis, and the availability of resources such as equipment and personnel. [27,30]

REPORTED METHODS

➤ **Kamepalli Sujana, et al.** - A new RP-HPLC method for the simultaneous estimation of Donepezil and Memantine in bulk and tablets has been developed. The separation was achieved on an Agilent C8 column with a mobile phase consisting of Buffer, water and Acetonitrile (50:5:45 v/v) and UV detection at 230nm. The linear response was observed over the range of 50-70µg/ml for Donepezil and 100-140µg/ml for Memantine with lower limit of quantification and detection of 9.95/3.0 and 10.01/3.14 for Donepezil and Memantine respectively. The method was validated according to the ICH guidelines and can be used for the routine analysis of Donepezil and Memantine in pharmaceutical dosage forms.[4]

➤ **Syeda noorain amena, et al.** - The article presents a stability-indicating HPLC method for the analysis of Memantine HCl and Donepezil HCl. The separation was performed on Hypersil BDS using Sodium dihydrogen ortho phosphate: Acetonitrile (30:70v/v) as mobile phase. The method was found to be linear over the range of 40-120µg/ml for Memantine HCl and 20-60µg/ml for Donepezil HCl. The percentage recovery of Memantine HCl and Donepezil HCl was found to be 99.62% and 99.45%, respectively, and the percentage purity was 98.5% and 98.6% for Memantine HCl and Donepezil HCl. The method showed no degradation in acid, base, peroxide, heat, and sunlight. The Limit of Detection of Memantine HCl and Donepezil HCl was found to be 3.69 µg/ml and 2.72 µg/ml, respectively, and the Limit of Quantification of Memantine HCl and Donepezil HCl was



11.13 µg/ml and 8.25 µg/ml, respectively. The developed method can be used for the routine determination of Memantine HCl and Donepezil HCl stability. [7]

- **Rramaswamy Ravikumar, et al.** - The article describes the development of a stability-indicating HPLC method with diode array detection for the simultaneous estimation of Memantine and Donepezil in the presence of their degraded products. The chromatographic conditions involved inertsil ODS (4.6 x 250mm, 5µ) and acetonitrile with 0.1% orthophosphoric acid at a ratio of 10:90 as the mobile phase. The method was validated as per ICH guidelines for linearity, accuracy, precision, robustness, limit of detection, and limit of quantification. The sample drugs were subjected to various forced degradation methods, and the proposed method can be used to quantify the target drugs in tablet formulations. The study concluded that the proposed method was simple, rapid, precise, accurate, and low-cost.[8]
- **Sonja jose, et al.** - The study aimed to develop a simple, accurate, and rapid Reverse Phase High-Performance Liquid Chromatographic (RP-HPLC) method to estimate donepezil and memantine in pharmaceutical dosage forms. The separation was conducted using a mobile phase consisting of phosphate buffer: methanol in the ratio of 70:30. The developed method resulted in donepezil and memantine eluting at 5.067 min and 2.003 min. The method was found to be linear over the concentration range 25-125 µg/ml with a coefficient regression of 0.999. The mean recovery was found to be in the range of 99.8% during accuracy studies. The limit of detection (LOD) was found to be 2.75 mg/ml and 3.14 mg/ml, and the limit of quantitation (LOQ) was found to be 9.96 mg/ml and 10.05

mg/ml, respectively. The developed method is cheap, accurate, precise, linear, and rapid and can be utilized for the quantitative estimation of donepezil and memantine in pharmaceutical dosage forms. The validation was performed as per International Conference on Harmonisation (ICH) guidelines.[10]

- **Rajgor Vm, et al.** - The article describes the development and validation of a simple, accurate, and specific RP-HPLC method for the simultaneous estimation of Memantine HCl and Donepezil HCl in bulk and pharmaceutical dosage form. The separation of the two drugs was achieved using an Amino column with a mobile phase of HPLC Grade Water (100%) at a flow rate of 1 mL/min. Detection was performed using a Waters Refractive Index Detector (RI Detector). The method was found to be linear over the range of 50-90 µg/mL for both drugs. The assay results of the marketed formulation showed that the %label claim of Memantine HCl and Donepezil HCl was found to be 100.96 ± 0.48 and 100.35 ± 0.76 respectively, with % recoveries in the range of 98.56%–99.76% and 98.38%–99.25% respectively. The developed method was found to be simple, precise, and accurate and can be used as a quality control tool for the simultaneous estimation of both drugs from their pharmaceutical dosage form.[11]
- **Güzide Pekcan Ertokuş, et al.** - The study developed precise and accurate spectrophotometric-chemometric methods for analyzing Alzheimer's drugs donepezil and rivastigmine in pharmaceutical tablets using partial least squares regression (PLS) and principal component regression (PCR) chemometric methods. The methods were successfully applied to synthetic mixtures and pharmaceutical tablets. Validation results

showed high recoveries and low standard deviations. The methods used absorbance and concentration values to calculate estimated concentrations with PCR and PLS. The study also calculated the amounts of donepezil and rivastigmine in drug tablets (Exelon and Doenza). [15]

- **Ayesha Anees, et al.** - The study aimed to develop a simple, precise, and economical method for determining Memantine hydrochloride in tablet formulations. The separation of the drug was achieved using Inertsil ODS 3V column and the mobile phase comprised of KH₂PO₄, Acetonitrile, and methanol. The method showed a good linear relationship and the LOD and LOQ values were 1.82µg/ml and 5.50µg/ml, respectively. The method was also used for the tablet formulation (Mentadem 10mg), and the recovery was found to be 99.15%. Overall, the developed method is suitable for the analysis of Memantine hydrochloride in tablet formulations, as per ICH guidelines.[16]

- **M. Phanisri, et al.** - The study aimed to develop and validate a simple, rapid, and precise reverse phase liquid chromatographic (RPHPLC) method for simultaneous estimation of Donepezil and Memantine in bulk drug and in a synthetic mixture. The separation was carried out using INERTSIL ODS C18 pre-packed column with a mobile phase containing a buffer of pH 4.5, sodium dihydrogen phosphate, and Acetonitrile. UV-detection was done at 277 nm, and both drugs were well resolved on the stationary phase with retention times of 2.697 minutes for Donepezil and 4.815 minutes for Memantine. The method was validated and found to be linear for both drugs, with high correlation coefficients of 0.998 and 0.999 for Donepezil and Memantine, respectively. The study concluded that the developed RPHPLC method can be used for simultaneous estimation of Donepezil and Memantine in bulk drug and in a synthetic mixture.[17]

Sr. No.	Authors	Method	Description	Reference
1	Kamepalli Sujana, D. Gowri Sankar	HPLC	Column: Agilent C8 (150mm x 4.6mm i.d., 3.5mm particle size) M.P: Buffer, water and Acetonitrile (50:5:45 v/v) F.R: 0.8 ml/min Lambda max: 230 nm Linearity: 50-70µg/ml for Donepezil and 100-140µg/ml for Memantine R.T: 3.707 and 6.976 min of Donepezil and Memantine, respectively	4
2	Syeda noorain amena, s. H. Rizwan	Stability Indicating HPLC	Column: Hypersil BDS (4.6 x 150 mm, 5µ) M.P: Sodium dihydrogen ortho phosphate: Acetonitrile (30:70v/v) F.R: 1.0 ml/min Linearity: 40-120µg/ml for Memantine HCl and 20-60µg/ml for Donepezil HCl R.T: Memantine HCl and Donepezil HCl were found to be 2.833 min. and 4.777 min respectively	7
3	Rramaswamy Ravikumar, Mani Ganesh	Stability Indicating HPLC-DAD	Column: inertsil ODS (4.6 x 250mm, 5µ) M.P: acetonitrile with 0.1% orthophosphoric acid (10:90) F.R: 1.0 ml/min Linearity: 10-50µg/ml for both drugs Lambda max: 271 nm	8

			R.T: Memantine HCl and Donepezil HCl were found to be 2.1 min. and 3.1 min respectively	
4	Sonja jose, Ishwarya. P.J	HPLC	Column: inertsil C-18 (4.6×250mm×5µm) M.P: phosphate buffer: methanol (70:30). F.R: 1.0 ml/min Lambda max: 273 nm R.T: donepezil and memantine eluting at 5.067 min and 2.003 min	10
5	Rajgor Vm, Parmar Pt	HPLC	Column: Amino, Column 250 X 4.8 Mm (5 µm) M.P: Grade Water (100%) F.R: 1.0 ml/min Linearity: 50-90 µg/mL for Memantine and 50-90 µg/mL for Donepezil. R.T: Memantine HCl and Donepezil HCl were found to be 3.561 min. and 4.212 min respectively	11
8	M. Phanisri, M. Samuel	HPLC	Column: INERTSIL ODS C18 (4.6 x 150mm, 5µm), pre-packed column. M.P: buffer of pH 4.5, sodium dihydrogen phosphate and Acetonitrile (30:70 v/v) F.R: 1.0 ml/min Linearity: 40-120 µg/mL for Memantine and 20-620 µg/mL for Donepezil. Lambda max: 277 nm R.T.: 2.697 minute for Donepezil and 4.815 minute for Memantine	17

VALIDATION PARAMETERS :[1,5,13]

Validation is an important aspect of any good analytical procedure. The approach for a certain test is appropriate for the task at hand. The process of confirming that the analytical method is employed is the validation method, which is used to examine the quality, reliability, and consistency of analytical data. Validation parameters are a set of standardized tests and criteria used to evaluate the suitability and reliability of an analytical method, such as an HPLC method, for its intended use. The validation parameters typically include the following:

- 1. Specificity or Selectivity:** This parameter demonstrates the ability of the method to measure the analyte accurately in the presence of other components. It is also known as the interference check, and it determines whether the method can differentiate and measure the analyte in the presence of impurities, degradants, and other related substances.
- 2. Linearity:** Linearity describes the proportionality of the response with the concentration of the analyte in a specific range. It assesses the method's ability to produce results that are directly proportional to the concentration of the analyte. Linearity is determined by analyzing a series of solutions of different concentrations of the analyte and determining the response of the detector. A plot of concentration versus detector response is used to determine linearity.
- 3. Accuracy:** Accuracy represents the closeness of the test results to the true value. It is determined by spiking a known quantity of the analyte into a sample and measuring the response. The percentage of recovery is calculated by comparing the spiked concentration and measured concentration of the analyte.



4. **Precision:** Precision determines the reproducibility and repeatability of the method. It evaluates the degree of variation in the results obtained by multiple analyses of the same sample under the same conditions. The precision of the method is assessed by calculating the standard deviation and relative standard deviation (RSD) of the measurements.
5. **Limit of Detection (LOD):** The LOD is the lowest concentration of the analyte that can be reliably detected and distinguished from the background noise. It is determined by analyzing a series of samples containing progressively lower concentrations of the analyte until the signal-to-noise ratio reaches a predetermined value.
6. **Limit of Quantification (LOQ):** The LOQ is the lowest concentration of the analyte that can be quantified with a specific degree of accuracy and precision. It is determined by analyzing a series of samples containing progressively lower concentrations of the analyte until the signal-to-noise ratio reaches a predetermined value.
7. **Robustness:** Robustness describes the ability of the method to produce consistent results in the face of small changes in the method parameters. It evaluates the impact of small variations in the chromatographic conditions, such as pH, temperature, mobile phase composition, and flow rate, on the results.[32]

APPLICATIONS OF ANALYTICAL METHODS: [33]

Analytical methods play a crucial role in the pharmaceutical industry by ensuring the quality, safety, and efficacy of drugs. The simultaneous estimation of Donepezil and Memantine in combined dosage forms using analytical methods has several applications, including:

1. **Quality control in pharmaceutical manufacturing**

Analytical methods are used to monitor the quality of drugs during the manufacturing process. The simultaneous estimation of Donepezil and Memantine in combined dosage forms ensures that the drugs are present in the correct amount and meet the required specifications for purity, identity, and potency.[12]

2. **Bioequivalence studies**

Bioequivalence studies are conducted to compare the pharmacokinetic properties of a test drug with a reference drug. Analytical methods are used to determine the concentration of Donepezil and Memantine in biological fluids such as plasma or serum, enabling the evaluation of bioavailability, bioequivalence, and pharmacokinetic parameters.[34]

3. **Therapeutic drug monitoring**

Therapeutic drug monitoring involves measuring drug concentrations in biological fluids to optimize drug therapy and prevent adverse drug reactions. Analytical methods are used to determine the concentration of Donepezil and Memantine in plasma or serum, enabling the monitoring of drug levels and adjustment of dosages to achieve therapeutic outcomes.

4. **Pharmacokinetic studies**

Pharmacokinetic studies involve the measurement of drug concentrations over time to determine drug absorption, distribution, metabolism, and elimination. Analytical methods are used to determine the concentration of Donepezil and Memantine in biological fluids, enabling the evaluation of pharmacokinetic parameters and drug interactions.[9]

5. **Stability studies**

Stability studies are conducted to evaluate the shelf life and storage conditions of drugs. Analytical methods are used to monitor the

degradation of Donepezil and Memantine in combined dosage forms under various storage conditions, enabling the determination of shelf life and appropriate storage conditions.

6. Forensic analysis

Forensic analysis involves the analysis of drugs in biological fluids or tissues for legal or forensic purposes. Analytical methods are used to determine the concentration of Donepezil and Memantine in biological fluids or tissues, enabling the detection of drug abuse, poisoning, or overdose. [8,15]

CONCLUSION

The simultaneous estimation of Donepezil and Memantine in combined dosage forms is essential for the treatment of Alzheimer's disease. Various analytical methods, including HPLC, LC-MS/MS, and UV-Vis spectroscopy, have been developed and validated for this purpose. The selection of an appropriate analytical method depends on factors such as sensitivity, selectivity, accuracy, precision, and cost-effectiveness.

HPLC is the most widely used analytical method for the simultaneous estimation of Donepezil and Memantine in combined dosage forms due to its high sensitivity, selectivity, and accuracy. LC-MS/MS offers higher sensitivity and selectivity than HPLC and is preferred for pharmacokinetic and bioequivalence studies. UV-Vis spectroscopy is a simple and cost-effective method but offers lower sensitivity and selectivity than HPLC and LC-MS/MS. The validation of analytical methods is critical to ensure the accuracy, precision, and reliability of results. Validation parameters include linearity, accuracy, precision, specificity, limit of detection, limit of quantitation, and robustness. The use of reference standards and internal standards is essential for accurate and reliable results. The simultaneous estimation of Donepezil and Memantine in combined dosage forms using analytical methods has several applications, including quality control, bioequivalence studies,

therapeutic drug monitoring, pharmacokinetic studies, stability studies, and forensic analysis. The selection of an appropriate analytical method depends on the intended application and available resources. In conclusion, the development and validation of analytical methods for the simultaneous estimation of Donepezil and Memantine in combined dosage forms is essential for the treatment of Alzheimer's disease and has significant implications for the pharmaceutical industry and patient outcomes. The continued improvement and optimization of analytical methods will contribute to the development of more effective and safe drugs for the treatment of Alzheimer's disease and other neurological disorders.

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