



STABILITY INDICATING RP-HPLC METHOD FOR THE DEVELOPMENT AND VALIDATION OF DASIGLUCAGON IN BULK AND PHARMACEUTICAL DOSAGE FORMS

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ABSTRACT

Targeted RP-HPLC methodology for the quantification of Dasiglucagon in pharmaceutical formulations. The chromatogram was analysed using an Agilent 150, 4.6 mm, 5 μ m column. Orthophosphoric acid and acetonitrile were combined in an 80:20 ratio and pushed through the column at a flow rate of 1.0 ml/min. The temperature was sustained at 30°C. The chosen optimised wavelength was 271.0 nm. The retention time of Dasiglucagon was determined to be 2.171 minutes. %The relative standard deviation (RSD) of Dasiglucagon was determined to be 0.2%. The method precision RSD for Dasiglucagon was found to be 0.5%.The recovery rate for Dasiglucagon was 99.72%. The LOD and LOQ values derived from the regression equation for Dasiglucagon are 0.03 and 0.09, respectively. The regression equation is expressed as $y = 135330x + 20334$. The retention durations and run times were reduced, indicating that the new approach is straightforward and cost-effective, suitable for routine quality control testing in industries.

Key Words: Dasiglucagon, Method development, Validation, RP-HPLC

INTRODUCTION¹⁻¹⁰

Dasiglucagon is a novel, next-generation glucagon analog developed to rapidly treat severe hypoglycemia in patients with diabetes. Hypoglycemia, particularly in individuals with type 1 diabetes (T1D), poses a serious risk of seizures, unconsciousness, and even death if not treated immediately. Traditional glucagon treatments require reconstitution before administration, which can be time-consuming and prone to error in emergency situations. Dasiglucagon, in contrast, is a ready-to-use formulation, offering a fast, simple, and effective solution for managing acute episodes of hypoglycemia.

Dasiglucagon functions by mimicking the effects of endogenous glucagon, a hormone that raises blood glucose levels by stimulating glycogenolysis, the breakdown of glycogen into glucose in the liver. It is administered via subcutaneous injection and has shown to rapidly elevate blood glucose levels within minutes. Its stability in liquid form and ease of administration provide a significant advantage over traditional glucagon, especially in emergency settings.

The approval of dasiglucagon by the U.S. Food and Drug Administration (FDA) in March 2021 under the brand name Zegalogue marked a significant advancement in hypoglycemia management. The efficacy and safety of dasiglucagon were demonstrated in clinical trials involving individuals with type 1 diabetes, showing rapid recovery from insulin-induced hypoglycemia. Compared to older formulations, dasiglucagon's key advantage lies in its ready-to-use format and fast action, which can be crucial in preventing severe complications from hypoglycemia.

Dasiglucagon is also under investigation for use in other therapeutic areas, such as congenital hyperinsulinism, where its ability to raise blood glucose may help manage persistent hypoglycemia caused by excessive insulin

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production in infants and children. Additionally, dasiglucagon is being studied for its potential use in artificial pancreas systems, offering a more complete approach to glucose management for patients with T1D.

Dasiglucagon works by binding to glucagon receptors in the liver, activating pathways that promote glycogen breakdown into glucose. This glucose is then released into the bloodstream, counteracting the effects of insulin and increasing blood glucose levels. The ready-to-use nature of dasiglucagon, which does not require reconstitution, allows for rapid intervention during episodes of severe hypoglycemia.

The advent of dasiglucagon provides a critical option for individuals with diabetes, especially those prone to severe hypoglycemia. Its ready-to-use formulation, rapid glucose-raising effect, and safety profile make it a significant improvement over traditional glucagon therapies. In an emergency setting, where time is of the essence, dasiglucagon's ease of use ensures prompt and effective treatment, potentially reducing the risk of long-term complications associated with severe hypoglycemia.

Analytical Background¹¹

Dasiglucagon works to increase blood glucose levels under normal and hypoglycemic conditions. After administration of dasiglucagon in adult patients with type 1 diabetes, the mean glucose increase from baseline at 90 minutes was 168 mg/dL. It is chemically known as L-histidyl-L-seryl-L-glutaminyl-glycyl-L-threonyl-L-phenylalanyl-L-threonyl-L-seryl-L-alpha-aspartyl-L-tyrosyl-L-seryl-L-lysyl-L-tyrosyl-L-leucyl-L-alpha-aspartyl-L-alpha-methyl-alanyl-L-alanyl-L-arginyl-L-alanyl-L-alpha-glutamyl-L-alpha-glutamyl-L-phenylalanyl-L-valyl-L-lysyl-L-tryptophyl-L-leucyl-L-alpha-glutamyl-L-seryl-L-threonine

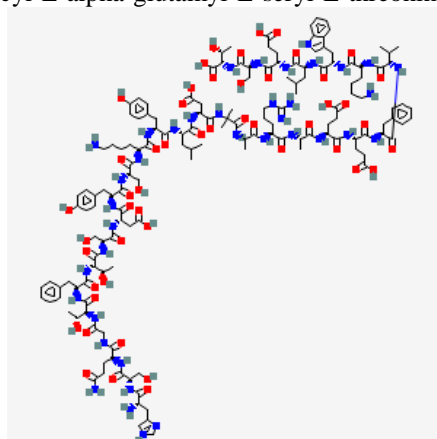


Figure 1 structure of Dasiglucagon

High Performance Liquid Chromatography (HPLC) plays a crucial role in the validation of Dasiglucagon. In the review of literature, more economical methods were observed¹²⁻¹³, hence a simple, cost-effective stability-indicating simultaneous estimation of Dasiglucagon by RP-HPLC in pharmaceutical dosage form must be developed and validated as per the guidelines of ICH (Q2 specification).

MATERIALS:

Dasiglucagon pure drug (API), Dasiglucagon formulation (**Tepmetko**), Distilled water, Acetonitrile, Phosphate buffer, Methanol, Potassium dihydrogen ortho phosphate buffer, Ortho-phosphoric acid. All the above chemicals and solvents are from Rankem.

Instrumentation

The development and method validation were conducted using a WATERS HPLC, specifically the model 2695 SYSTEM, equipped with a Photo diode array detector. The system also included an automated sample injector and the Empower 2 software.

Table 1: Chromatographic Conditions

Mobile phase	0.1% OPA: MeCN (80:20 v/v)
Flow rate	1.0 ml/min
Column	Agilent C18 (4.6 x 150mm, 5µm)
wave length	271 nm
Column temperature	30°C
Injection volume	10µL
Run time	10.0 min

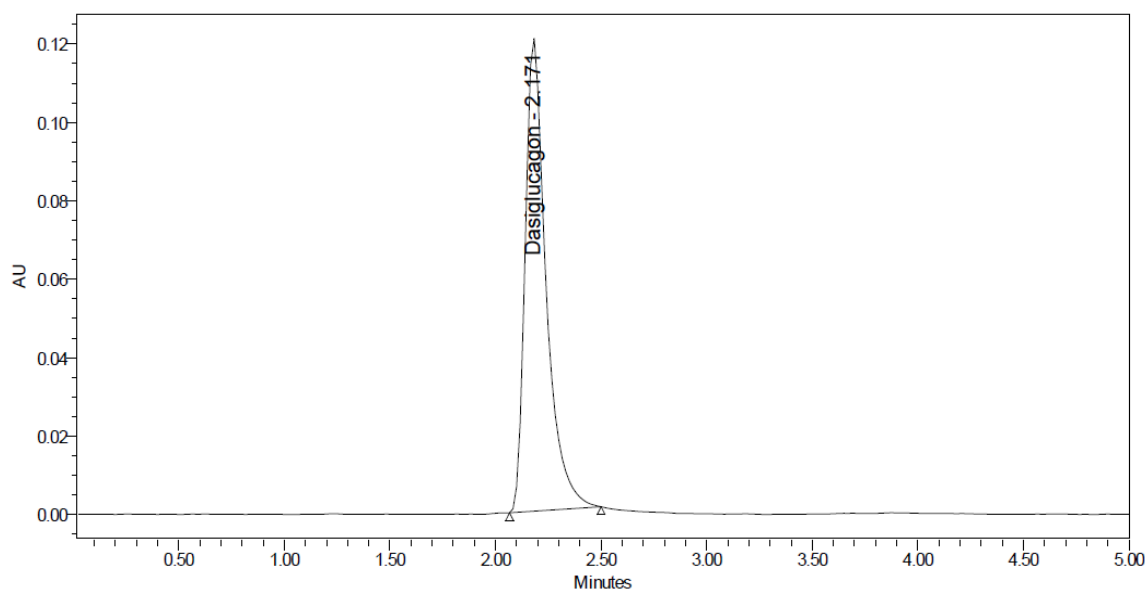


Figure 2: Optimized Chromatogram

Methods:

Preparation of Standard stock solutions: Accurately weighed 3mg of Dasiglucagon is transferred to 50ml volumetric flask. 3/4 th of diluents was added to the flask and sonicated for 10 minutes. Flask was made up with diluents and labeled as Standard stock solution. (60µg/ml of Dasiglucagon)

Preparation of Standard working solutions (100% solution): 1ml from stock solution was pipetted out and taken into a 10ml volumetric flask and made up with diluent. (6µg/ml of Dasiglucagon).

Preparation of Sample stock solutions: Pipette out 0.6ml of Dasiglucagon injection sample from autosampler vial into a 10 volumetric flask, 50ml of diluents was added and sonicated for 25 min, further the volume was made up with diluent and filtered by HPLC filters. (60µg/ml of Dasiglucagon)

Preparation of Sample working solutions (100% solution): 1ml of filtered sample stock solution was transferred to 10ml volumetric flask and made up with diluent. (6µg/ml of Dasiglucagon)

Validation:**System suitability parameters:**

The system suitability parameters were determined by preparing standard solution of Dasiglucagon (6 ppm) and the solution were injected six times and the parameters like peak tailing, resolution and USP plate count were determined.

The % RSD for the area of six standard injections results should not be more than 2%.

Specificity (Selectivity): Checking of the interference in the optimized method. We should not find interfering peaks in blank and placebo at retention times of these drugs in this method. So, this method was said to be specific. Representative chromatogram is shown in Figure 3 and experimental data is given in Table 2

Table: 2 System suitability parameters for Dasiglucagon

S no	Dasiglucagon		
Inj	RT(min)	USP Plate Count	Tailing
1	2.179	2524	1.49
2	2.180	2609	1.52
3	2.181	2617	1.50
4	2.186	2734	1.53
5	2.186	2744	1.53
6	2.186	2724	1.51

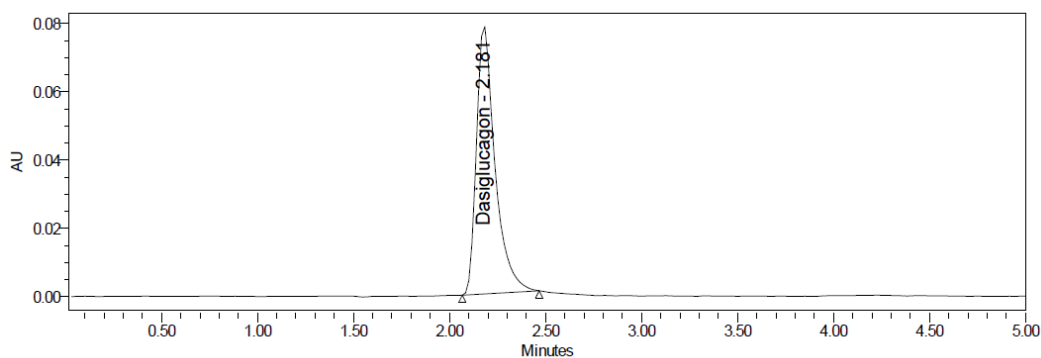


Figure 3: System Suitability Chromatogram of Dasiglucagon

Table 3: Specificity Data

Peak name	Rt	Area	USP plate count	Tailing
Dasiglucagon	2.171	850101	2555.6	1.3

Specificity:

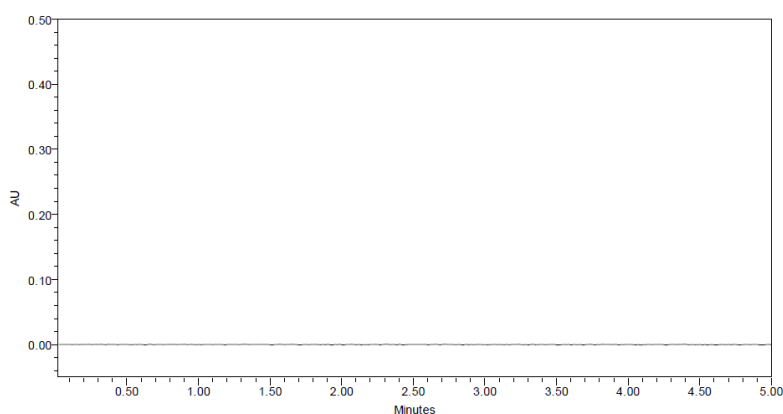


Figure 4 Chromatogram of blank.

The forced degradation conditions are mentioned in Table 4 and the results are mentioned in Table 5

Table 4: Forced degradation conditions for Dasiglucagon

Stress condition	Solvent	Temp(⁰ C)	Exposed time
Acid	2N HCL	60 ⁰ c	30 mins
Base	2N NAOH	60 ⁰ c	30 mins
Oxidation	20% H ₂ O ₂	60 ⁰ c	30 mins
Thermal	Diluent	105 ⁰ c	6 hours
Photolytic	Diluent	-	-
Hydrolytic	Water	60 ⁰ c	

From the results, degradation peaks were observed when the samples were exposed to acid. According to the stress study, none of the degradant co-eluted with the active drug peaks formed.

Table 5: Degradation profile results

Degradation Condition	% Drug Undegraded	% Drug Degraded
Acid	95.11	4.89
Base	94.42	5.58
Oxidation	96.08	3.92
Thermal	97.78	2.22
Photolytic	98.3	1.67
Hydrolytic	99.3	0.74

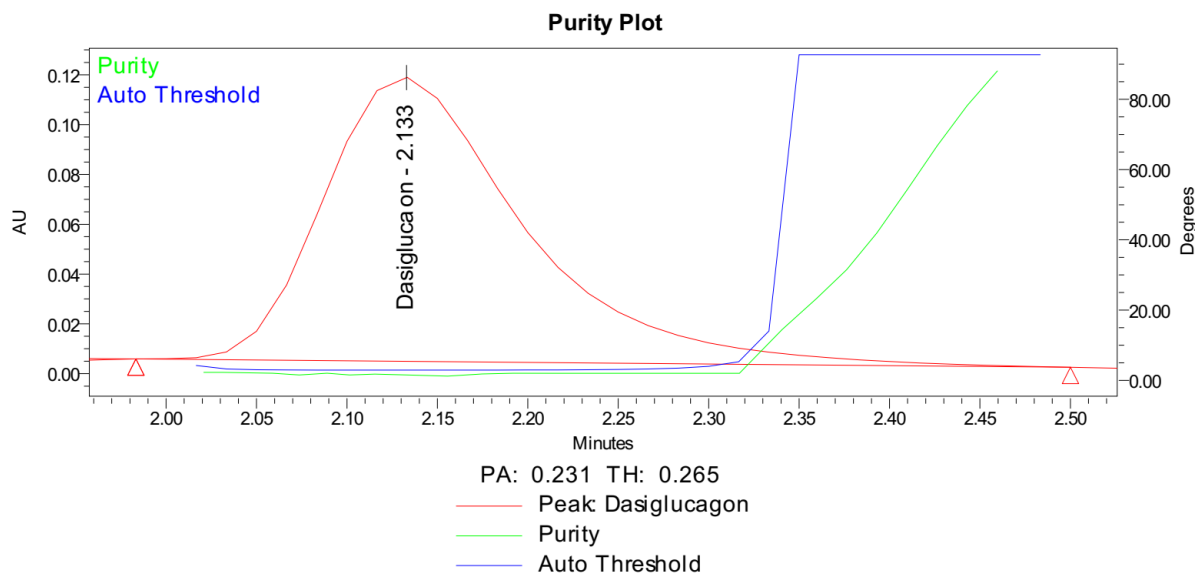


Figure 5: Purity Plot of Acid

Limit of detection (LOD) The detection limit is considered as very low level of concentration of an analyte in a sample that can be detected, but not necessarily quantitated.

Limit of quantitation (LOQ): The limit of quantitation is considered as the lowest concentration of an analyte in a sample that can be determined with acceptable precision and accuracy of the method.

The LOD values obtained for Dasiglucagon are listed in Table 6.

Table 6: Summary of limit of detection

Sample	Conc (µg/ml)
LOD	0.03
LOQ	0.09

Linearity: The linearity of the method was demonstrated for Dasiglucagon by analyzing the solutions ranging from 25% to 150% of the specification limit (Table 7). The correlation coefficient for Dasiglucagon was 0.999. This indicates good linearity

Linearity:

Calibration data is given in table 7 and regression data in table 8 and calibration curve in figure 6

Table 7: Calibration data of Dasiglucagon

Dasiglucagon	
Conc (µg/mL)	Peak area
0	0
1.5	219105
3	421821
4.5	631501
6	849382
7.5	1033769
9	1229328

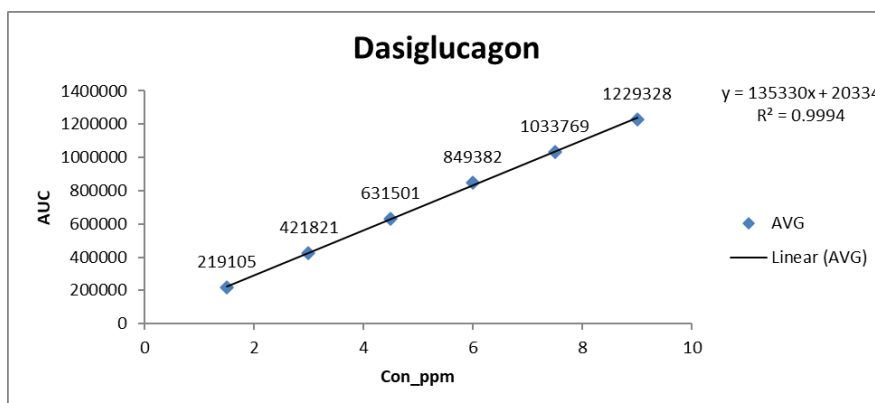


Figure 6: Calibration curve of Dasiglucagon

Table 8: regression data

Parameter	Dasiglucagon
Conc range (µg/mL)	1.5-9 µg/ml
Regression Equation	$y = 135330x + 20334$
Co-relation	0.999

Accuracy: The accuracy of the method was determined by using solutions containing spiked samples of Dasiglucagon at 50%, 100% and 150% of the working strength. All the solutions were prepared in triplicate and analysed. The percentage recovery results obtained for each impurity was listed in Table 9

Table 9 Accuracy table of Dasiglucagon

% Level	Amount Spiked (µg/mL)	Amount recovered (µg/mL)	% recovery
50%	3	2.964	98.81
	3	2.972	99.07
	3	2.986	99.55
100%	6	6.058	100.96
	6	5.994	99.90
	6	5.987	99.78
150%	9	8.981	99.78
	9	8.981	99.79
	9	8.989	99.88
Mean % recovery			99.72

System Precision: The system precision was performed by analyzing six replicate injections of standard solution at 100% of the specified limit with respect to the working strength of Dasiglucagon. Results of peak area are summarized in Table 10

Table 10 System precision table of Dasiglucagon

S. No	Area of Dasiglucagon
1.	847219
2.	849289
3.	846670
4.	845629
5.	849366
6.	845509
Mean	847280
S.D	1710.3
%RSD	0.2

Method Precision: The precision of the method was determined by analyzing a sample of Dasiglucagon). Data obtained is summarized in Table 11

Table 11 Repeatability table of Dasiglucagon

S. No	Area of Dasiglucagon
1.	845935
2.	849486
3.	850904
4.	840699
5.	842435
6.	845833
Mean	845882
S.D	3923.3
%RSD	0.5

Intermediate precision: It is differently from the repeatability, the precision obtained within a single laboratory over a longer period (generally at least several months) and considers more changes than repeatability. Data obtained is summarized in Table 12

Table 12 Intermediate precision table of Dasiglucagon

S. No	Area of Dasiglucagon
1.	844648
2.	846929
3.	843642
4.	845783
5.	846012
6.	844302
Mean	845219
S.D	1226.8
%RSD	0.1

Robustness: The chromatographic conditions were deliberately changed to evaluate the robustness of the existing method. To determine the robustness of method, system suitability solution is prepared as per methodology and injected into HPLC at different altered conditions to check the method's ability like flow rate ($\pm 10\%$), column oven temperature ($\pm 5^\circ\text{C}$) and Mobile phase ($\pm 10\%$) from actual method conditions. No significant change is observed by changing flow, temperature, Mobile phase, and system suitability also complied as per methodology. The robustness results are summarized in Table 13.

Table 13 Robustness data for Dasiglucagon

Condition	%RSD of Dasiglucagon
Flow rate (-) 0.9ml/min	0.2
Flow rate (+) 1.1ml/min	0.5
Mobile phase (-) 75B:25A	0.2
Mobile phase (+) 85B:15A	0.4
Temperature (-) 27°C	0.3
Temperature (+) 33°C	0.5

Assay data: -

Tepmetko Tablet bearing the label claims Dasiglucagon 300 mg. Assay was performed with the above formulation. Average % Assay for Dasiglucagon obtained was 99.54%. Assay data shown in table no 14.

**Figure 7: Dasiglucagon Marketed Drug**

Formula to calculate assay:

$$\% \text{ Assay} = \frac{\text{AT}}{\text{AS}} \times \frac{\text{WS}}{100} \times \frac{1}{10} \times \frac{10}{1} \times \frac{10}{5} \times \frac{\text{P}}{100} \times \frac{\text{FV}}{\text{L.C}} \times 100$$

AT	Average Peak area of Carboprost in test solution
AS	Mean peak area of Carboprost in standard solution
WS	Weight of Carboprost working standard taken in mg
P	Assay of Carboprost working standard in % on dried basis
L.C	Label Claim
FV	Filled volume(1ml of a vial)

Table 14: Assay Data of Dasiglucagon

S.no	Standard Area	Sample area	% Assay
1	847219	845935	99.5
2	849289	849486	100.0
3	846670	850904	100.1
4	845629	840699	98.9
5	849366	842435	99.1
6	845509	845833	99.5
Avg	847280	845882	99.54
Stdev	1710.3	3923.3	0.46
%RSD	0.2	0.5	0.5

CONCLUSION

The outcomes of the Dasiglucagon HPLC investigation indicate that this approach can precisely measure the concentration and purity of the medication. This method is ideal for pharmacokinetic studies and routine quality control due to its capacity for repeated usage with sharp peak resolutions and consistent retention times. Ensuring Dasiglucagon efficacy and safety for medical use, along with verifying its chemical makeup, relies on HPLC analysis.

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