

## Extractive Spectrophotometric Method For Simultaneous Determination Of Losartan Potassium And Atenolol In Bulk And In Pharmaceutical Dosage Form

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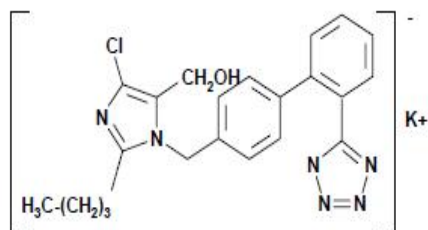
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**Abstract:** A simple, accurate and precise extractive spectrophotometric method was developed for the Simultaneous estimation of Losartan Potassium and Atenolol in both pure and pharmaceutical dosage form. The method was based on the formation of colored complex by Losartan Potassium and Atenolol with reagents like ferriin Solution and Methyl orange respectively in Phosphate buffer PH 7.0. The linearity range of Losartan Potassium and Atenolol were found to be 25-300 µg/ml and 50-1400 µg/ml respectively. The ion-pair complex formed was quantitatively extracted under the experimental conditions with chloroform and the absorbances of the organic layers were measured at 571.0nm and 426.0 nm for Losartan Potassium and Atenolol respectively. The correlation coefficient ( $r^2$ ) for Losartan Potassium and Atenolol were found to be 0.9975 and 0.9974, respectively. The method was statistically evaluated and was found to be precise and accurate. This method is validated as per the guidelines of ICH. The method is applied for the determination of drugs in commercial tablet.

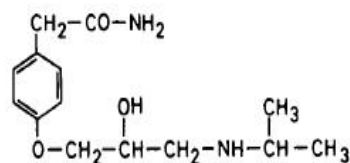
**Keywords:** Losartan Potassium and Atenolol, Extractive spectrophotometric method, Ferriin Solution and Methyl orange indicator.

### INTRODUCTION:

Losartan potassium (LSK) is chemically Monopotassium salt of 2-butyl-4-chloro-1-[[2-(1H-tetrazol-5-yl)[1,1-biphenyl]-4-yl]methyl]-1H-imidazole-5-methanol (Fig.1) used as anti-hypertensive drug by inhibiting Angiotensin II receptor<sup>1-5</sup>. LSK and its tablet dosage form is official in Indian Pharmacopoeia (IP), British Pharmacopoeia (BP) and United state Pharmacopoeia (USP). It is estimated by potentiometric titration and chromatographic method as per IP, BP & USP<sup>6-8</sup>. Literature review also reveals that HPLC<sup>10-12</sup>, HPTLC<sup>13</sup>, UV<sup>14-18</sup> spectrophotometric and extractive spectrophotometric<sup>19-25</sup> methods have been reported for the estimation of LSK in pharmaceutical dosage forms. Atenolol (ATN) is chemically (RS)-4-(2-hydroxy-3-Isopropylamino propoxy)phenyl acetamide (Fig. 2) used as anti-anginal, anti-hypertensive drug<sup>1-5</sup>. It is official in Indian Pharmacopoeia (IP), British Pharmacopoeia (BP) and United state Pharmacopoeia (USP). It is estimated by potentiometric titration and chromatographic method as per IP, BP & USP<sup>6-8</sup>. Literature review reveals that HPLC<sup>26-30</sup> and extractive spectrophotometric<sup>31-36</sup> methods have been reported for estimation of ATN in pharmaceutical dosage forms. Literature survey does reveal only UV Spectrophotometric<sup>37</sup> and HPLC<sup>37</sup> methods have been developed and reported, but does not any extractive spectrophotometric method for simultaneous determination of LSK and ATN in Pharmaceutical dosage form. The present developed method is simple, precise and accurate for simultaneous determination of both drugs in their Pharmaceutical Dosage forms as per International Conference on Harmonization (ICH) guidelines<sup>9</sup>.



**Fig. 1: Structure of Losartan potassium (LSK)**



**Fig.2:Structure of Atenolol (ATN)**

## EXPERIMENTAL:

**INSTRUMENT:** Absorbance measurements were made on Shimadzu UV-1700 double beam UV-Visible spectrophotometer with 10 mm matched quartz cells.

## MATERIALS AND REAGENTS:

All materials and reagents used are of analytical grade; solvents are of spectroscopic grade and distilled water. Pure drug samples of Losartan potassium and Atenolol were provided as a gift sample by Olcare Laboratories, Surendranagar, Gujarat, India. Commercial pharmaceutical tablet **LOSAR\*-BETA** (Unichem Laboratories, India) was procured from local pharmacy.

### Preparation of standard stock solution of Losartan Potassium (1000µg/ml)

100 mg of Losartan potassium was weighed accurately and transferred to 100 ml volumetric flask. 50 ml of distilled water was added and allowed to shake for 5 minutes. Volume was made up to 100 ml with distilled water.

### Preparation of standard stock solution of Atenolol (10000 µg/ml)

1000 mg of Atenolol was weighed accurately and transferred to 100 ml volumetric flask. 50 ml of distilled water was added and allowed to shake for 5 minutes. Volume was made up to 100 ml with distilled water.

### Selection of solvent for extraction

Chloroform, Methylene chloride and benzene were tried for extraction. Chloroform was found to be the most convenient solvent for extraction. Other solvents were not suitable owing to the limited solubility of ion pair complex.

### Selection of dye

The nature of both drugs are polar; therefore many water soluble dyes were tried. All dyes were prepared as per the Pharmacopoeial and other official methods. Colour formation in chloroform layer was observed in three different pH medium with 1 ml of standard drug stock solutions and 1 ml of dye solution.

For the preparation of blank solutions, same procedure was followed without addition of drug solution in three different test tubes. If colour is observed in chloroform layer against the blank, it indicates that the ion pair complex has been formed which is chloroform extractable. About 20 dyes have been tried. Among all, following dye formed ion pair complex with respective drugs.

1. Ferriin solution with Losartan Potassium (Purple colour)
2. Methyl orange with Atenolol (Yellow colour)

### Preparation of dye

1. Ferriin solution  
0.7 g of Ferrous sulphate and 1.5 g of 1,10-phenanthroline hydrochloride were weighed accurately and dissolved in 70 ml of water and sufficient water was added to produce 100 ml.
2. Methyl orange  
0.1 g of Methyl orange was weighed accurately and dissolved in 80 ml of water and sufficient ethanol (95 per cent) was added to produce 100 ml.

### Phosphate Buffer pH 7.0:

0.50 g of anhydrous disodium hydrogen phosphate and 0.301 g of potassium dihydrogen phosphate were weighed accurately and dissolved in sufficient water to produce 1000 ml.

### Selection of analytical wavelength

The chloroform layers of selected dyes were collected in 10 ml volumetric flask and volume was made up to mark with chloroform. The resulting solutions containing 100 µg/ml were scanned in UV-Visible spectrophotometer. The  $\lambda_{max}$  were found to be

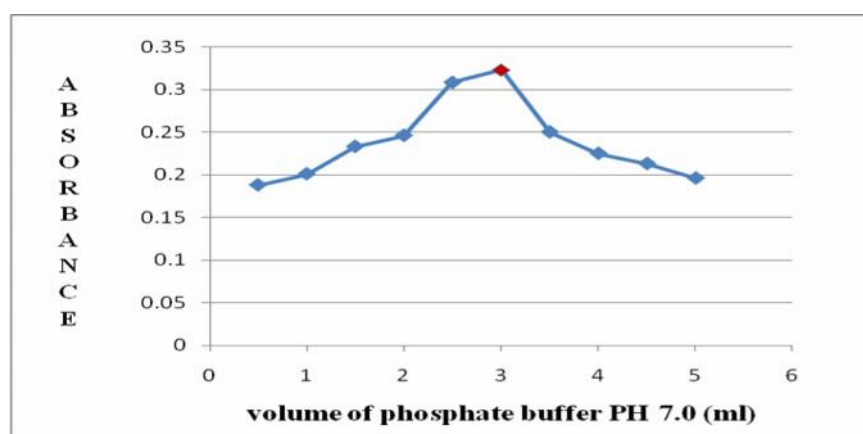
|                 |          |
|-----------------|----------|
| Feroin solution | 571.0 nm |
| Methyl orange   | 426.0 nm |

### Optimization of reagents for both the drugs

#### A. For Losartan Potassium

##### ➤ Volume of Phosphate Buffer pH 7.0:

Solution of Phosphate Buffer pH 7.0 was prepared and volume was added ranging from 0.5 ml to 5 ml to drug solution. Chloroform layer was collected after extracting and passing through anhydrous sodium sulphate bed and scanned for 300-800 nm range. Peak absorbance was recorded and from the graph, it was found to be 3.0 ml of Phosphate Buffer pH 7.0 (Figure 3, Table 1).



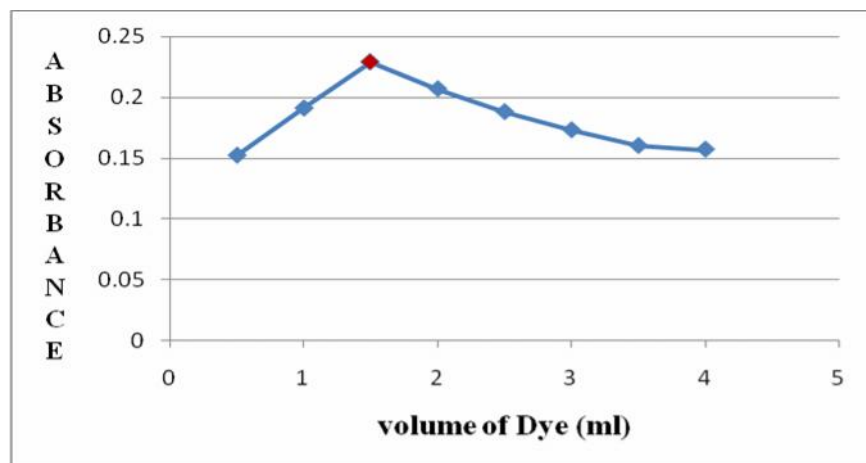
**Fig. 3: Optimum Volume of Phosphate buffer PH 7.0 for Losartan Potassium**

**Table 1: Optimization of volume of Phosphate Buffer PH 7.0 for Losartan Potassium**

| VOLUME (ml) | ABSORBANCE   |
|-------------|--------------|
| 0.5         | 0.188        |
| 1           | 0.201        |
| 1.5         | 0.233        |
| 2           | 0.246        |
| 2.5         | 0.308        |
| <b>3</b>    | <b>0.323</b> |
| 3.5         | 0.25         |
| 4           | 0.225        |
| 4.5         | 0.213        |
| 5           | 0.196        |

##### ➤ Volume of Feroin solution :

Volumes of dye ranging from 0.5 ml to 4.0 ml were added to Neutral drug solutions, Chloroform layer was collected after extracting and passing through anhydrous sodium sulphate bed and scanned for 300-800 nm range. Peak absorbances were recorded, from the graph 1.5 ml of dye was found to be optimum (Figure 4, Table 2).



**Fig. 4: Optimum Volume of Dye(Ferroun Solution) for Losartan Potassium**

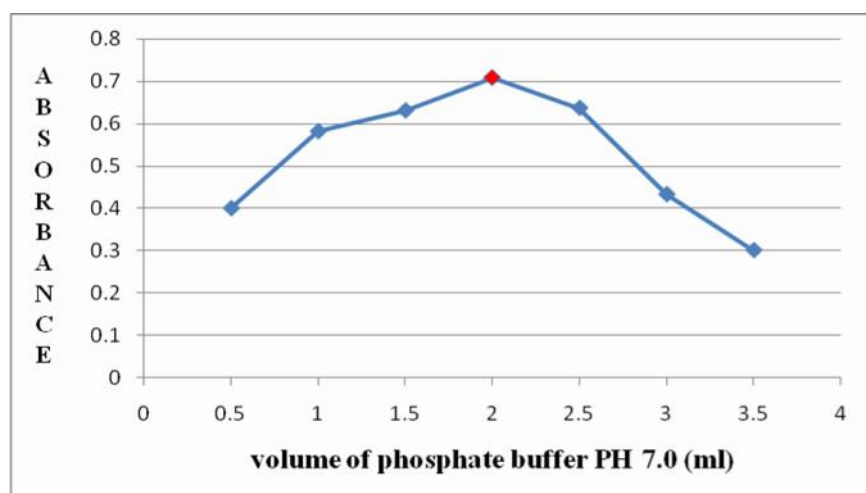
**Table 2: Optimization of volume of dye (Ferroun Solution) For Losartan Potassium**

| VOLUME (ml) | ABSORBANCE   |
|-------------|--------------|
| 0.5         | 0.152        |
| 1           | 0.191        |
| <b>1.5</b>  | <b>0.229</b> |
| 2           | 0.207        |
| 2.5         | 0.188        |
| 3           | 0.173        |
| 3.5         | 0.16         |
| 4           | 0.157        |

#### **B. For Atenolol**

##### ➤ Volume of Phosphate Buffer pH 7.0:

Solution of Phosphate Buffer pH 7.0 was prepared and volume was added ranging from 0.5 ml to 3.5 ml to drug solution. Chloroform layer was collected after extracting and passing through anhydrous sodium sulphate bed and scanned for 300-800nm range. Peak absorbance was recorded and from the graph, it was found to be 2.0 ml of Phosphate Buffer pH 7.0(Figure 5, Table 3).



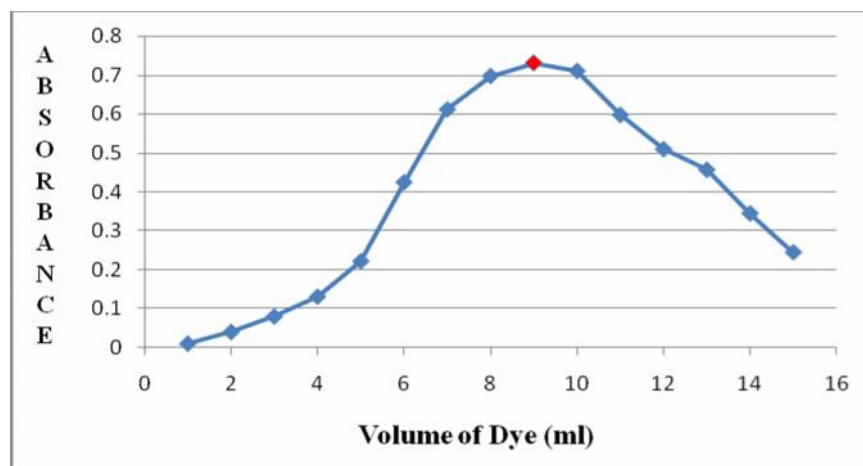
**Fig. 5 : Optimum Volume of Phosphate buffer PH 7.0 for Atenolol**

**Table 3: Optimization of volume of Phosphate Buffer PH 7.0 for Atenolol**

| VOLUME (ml) | ABSORBANCE   |
|-------------|--------------|
| 0.5         | 0.4          |
| 1           | 0.582        |
| 1.5         | 0.631        |
| <b>2</b>    | <b>0.708</b> |
| 2.5         | 0.637        |
| 3           | 0.433        |
| 3.5         | 0.301        |

➤ **Volume of Methyl Orange :**

Volumes of dye ranging from 1.0 ml to 15.0 ml were added to Neutral drugsolutions, Chloroform layer was collected after extracting and passing through anhydrous sodium sulphate bed and scanned for 300-800nm range. Peak absorbances were recorded, from the graph 9.0 ml of dye was found to be optimum (Figure 6, Table 4).

**Fig. 6 : Optimum Volume of Dye (Methyl Orange) for Atenolol****Table 4: Optimization of volume of dye (Methyl Orange) For Atenolol**

| VOLUME (ml) | ABSORBANCE   |
|-------------|--------------|
| 1           | 0.01         |
| 2           | 0.04         |
| 3           | 0.08         |
| 4           | 0.131        |
| 5           | 0.222        |
| 6           | 0.425        |
| 7           | 0.612        |
| 8           | 0.698        |
| <b>9</b>    | <b>0.731</b> |
| 10          | 0.711        |
| 11          | 0.598        |
| 12          | 0.51         |
| 13          | 0.457        |
| 14          | 0.345        |
| 15          | 0.245        |

## Construction of Calibration curves:

### A. For Losartan Potassium

In 125 ml separating funnel, appropriate aliquot (0.25, 0.5, 1.0, 1.5, 2.0, 2.5, 3.0 ml) of Losartan Potassium from Standard stock solution was transferred, 1.5 ml of Ferroin Solution and 3.0 ml of Phosphate Buffer PH 7.0 were added in to it and mixed. The aqueous solution was extracted with an equal volume of chloroform (2 to 5 ml) and shaken for 45 sec and funnel was allowed to stand to get two phases separated. Organic layer was collected in dry 10 ml volumetric flask after passing through activated anhydrous sodium sulphate bed to remove aqueous traces. Volume was made up to 10 ml with chloroform and absorbance was measured at 571 nm (Figure 7, 9 & Table 5).

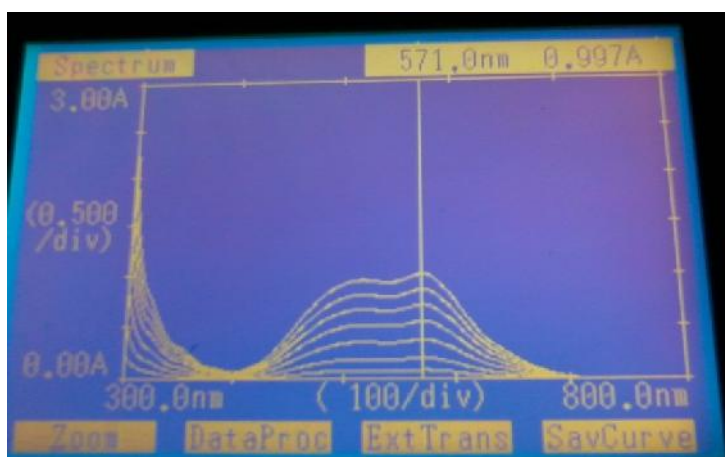


Fig.7: Overlay Spectrum of Losartan Potassium 25µg/ml-300 µg/ml at 571.0 nm

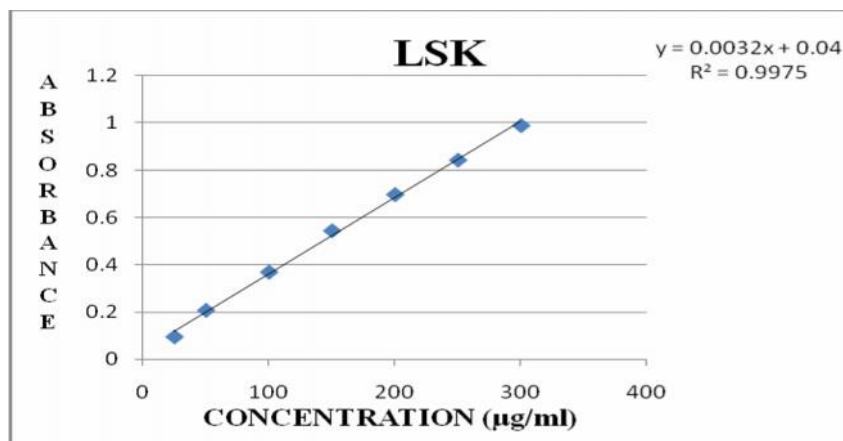


Fig. 9 : Calibration curve for Losartan Potassium

Table 5: Calibration Curve Data for Losartan Potassium at 571.0 nm

| CONCENTRATION (µg/ml) | MEAN ± S.D.(n=6) | % RSD  |
|-----------------------|------------------|--------|
| 25                    | 0.095 ± 0.0019   | 1.9797 |
| 50                    | 0.207 ± 0.0019   | 0.906  |
| 100                   | 0.369 ± 0.0015   | 0.3987 |
| 150                   | 0.544 ± 0.0023   | 0.4257 |
| 200                   | 0.697 ± 0.0015   | 0.2112 |
| 250                   | 0.843 ± 0.0018   | 0.2176 |
| 300                   | 0.989 ± 0.0019   | 0.1893 |

### B. For Atenolol

In 125 ml separating funnel, appropriate aliquot (0.05, 0.2, 0.4, 0.6, 0.8, 1.0, 1.2, 1.4 ml) of Atenolol from Standard stock solution was transferred, 9.0 ml of Methyl orange and 2.0 ml of phosphate Buffer PH 7.0 were added in it and mixed. The aqueous solution was extracted with an equal volume of chloroform (2 to 5 ml) and shake for 45 sec and flask was allowed to stand to get two phase separated. Organic layer was collected in dry 10 ml volumetric flask after passing through activated anhydrous sodium sulphate bed to remove aqueous traces. Volume was made up to 10 ml with chloroform and absorbance was measured at 426.0 nm (Figure 8, 10 & Table 6).

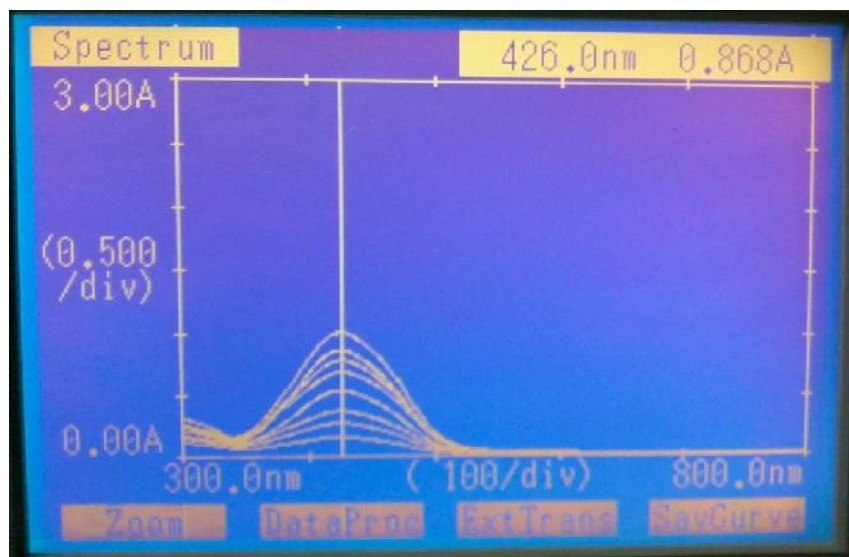


Fig. 8 : Overlay Spectrum of Atenolol 50 µg/ml-1400 µg/ml at 426.0 nm

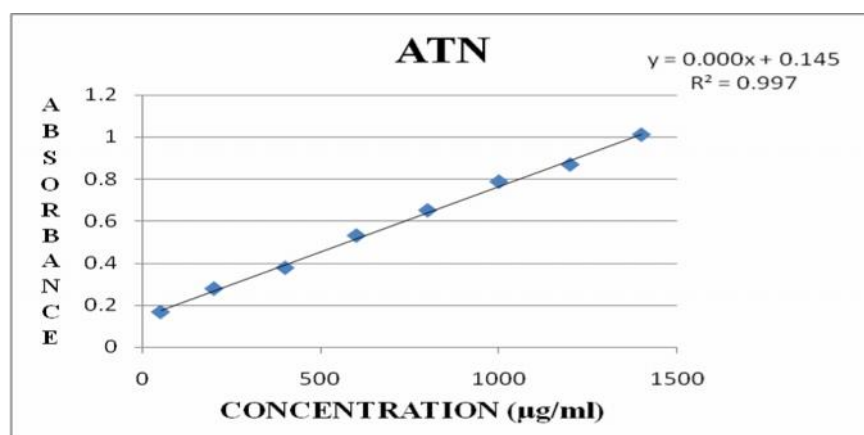


Fig. 10 : Calibration curve for Atenolol

Table 6: Calibration Curve Data for Atenolol at 426.0 nm

| CONCENTRATION (µg/ml) | MEAN ± S.D. (n=6) | % RSD  |
|-----------------------|-------------------|--------|
| 50                    | 0.167 ± 0.0022    | 1.2962 |
| 200                   | 0.278 ± 0.0021    | 0.7682 |
| 400                   | 0.377 ± 0.0023    | 0.6148 |
| 600                   | 0.530 ± 0.0023    | 0.4429 |
| 800                   | 0.650 ± 0.0021    | 0.3179 |
| 1000                  | 0.786 ± 0.0025    | 0.3186 |
| 1200                  | 0.867 ± 0.0021    | 0.2382 |
| 1400                  | 1.009 ± 0.0019    | 0.1855 |

### Assay of Drugs from pharmaceutical dosage form

Twenty tablets were weighed and powdered in a glass mortar. Tablet powder equivalent to 100 mg of Losartan Potassium and Atenolol were weighed accurately and transferred into 100 ml volumetric flask. The drug was dissolved in distilled water and the volume was made up to the mark. The solution was suitably diluted and assayed as under the respective assay procedure described for the preparation of calibration curves for both the drugs. Results are listed in Table 7.

**Table 7: Assay Results of Tablet dosage form**

| FORMULATION | ACTUAL CONC. OF DRUG ( $\mu\text{g/ml}$ ) |     | AMT. OF DRUG FOUND ( $\mu\text{g/ml}$ ) |        | % OF DRUG FOUND |        | %MEAN |        | % RSD  |        |
|-------------|---|-----|---|--------|-----------------|--------|-------|--------|--------|--------|
|             | LSK                                       | ATN | LSK                                     | ATN    | LSK             | ATN    | LSK   | ATN    | LSK    | ATN    |
| LOSAR -BETA | 100                                       | 200 | 96.87                                   | 200.16 | 96.87           | 100.08 | 96.04 | 100.08 | 0.8179 | 0.8343 |
|             | 100                                       | 200 | 95.31                                   | 198.5  | 95.31           | 99.25  |       |        |        |        |
|             | 100                                       | 200 | 95.94                                   | 201.8  | 95.94           | 100.92 |       |        |        |        |

### Method Validation [10, 11]

- Linearity and Range:** The linearity was determined at six levels over the range of 25-300  $\mu\text{g/ml}$  and 50-1400  $\mu\text{g/ml}$  for Losartan Potassium and Atenolol respectively. Absorbances of above linearity solution preparations were taken at each concentration six times. Mean absorbance at each concentration was calculated and Graph of mean absorbance (y-axis) versus concentration (x-axis) was Plotted. Values of correlation co-efficient (r), y-intercept & slope of regression line were Calculated and Recorded (Figure 7, 8, 9, 10 & Table 5, 6).
- Accuracy:** Accuracy is the closeness of the test results obtained by the method to the true value. To study the accuracy 20 Tablets were taken and weighed. Powder equivalent to 100 mg was taken and analysis of the same was carried out. Recovery studies were carried out by addition of standard drug to the sample at 3 different concentration levels (80%, 100% & 120%) taking into consideration percentage purity of added bulk drug samples (Table 8, 9).
- Precision:** The precision of an analytical method is the degree of agreement among individual test results when the method is applied repeatedly to multiple samplings of homogenous samples. It provides an indication of random errors in results and was expressed as % RSD (Table 10, 11).
  - Repeatability**  
Standard solutions of Losartan Potassium (25-300  $\mu\text{g/ml}$ ) and Atenolol (50-1400  $\mu\text{g/ml}$ ) were prepared and spectrums were recorded. Absorbances were measured at 571.0 and 426.0 nm for Losartan Potassium and Atenolol respectively using chloroform as a blank. The absorbances of the same concentration solution were measured six times and % RSD was calculated.
  - Intra and inter-day precision:** Variation of results within the same day (intra- day) and variation of results between days (inter- day) were analyzed. Intra-day precision was determined by analysing Losartan Potassium and Atenolol for three times in the same day. Inter-day precision was determined by analysing Losartan Potassium and Atenolol daily for three days.
- Specificity and Selectivity:** Specificity is a procedure to detect quantitatively the analyte in presence of all degraded product & components that may be expected to be present in the sample matrix. While selectivity is the procedure to detect qualitatively the analyte & all degradation product in presence of components that may be expected to be present in the sample matrix.
- Solution Stability study / stability of colour:** Sample solution was prepared as per test procedure. The Absorbance of Sample Solution after extraction was monitored by UV-Visible spectrophotometer system at regular intervals for 24 hrs. Data were recorded which indicates required colour stability (Table 12).
- Limit of Detection and Limits of Quantitation:** From the linearity curve equation, the standard deviation (SD) of the intercepts (response) was calculated. The limit of detection (LOD) of the drug was calculated by using the following equation designated by International Conference on Harmonization (ICH) guideline:



$$LOD = 3.3\sigma / S$$

Where,  $\sigma$  = the standard deviation of the response

S = slope of the calibration curve.

From the linearity curve equation, the standard deviation (SD) of the intercepts (response) was calculated. The limit of quantitation (LOQ) of the drug was calculated by using the following equation designated by International Conference on Harmonization (ICH) guideline:

$$LOQ = 10\sigma / S$$

Where,  $\sigma$  = the standard deviation of the response

S = slope of the calibration curve

**Table 8: Determination of Accuracy for Losartan Potassium**

| AMT. OF SAMPLE (mg) | AMT. OF DRUG ADDED(mg) | AMT. OF DRUG RECOVERED (mg) | %RECOVERY | MEAN   | SD       | %RSD     |
|---------------------|------------------------|-----------------------------|-----------|--------|----------|----------|
| 100                 | 80                     | 79.72                       | 99.31     | 99.71  | 0.433128 | 0.434388 |
| 100                 | 80                     | 79.44                       | 99.65     |        |          |          |
| 100                 | 80                     | 80.14                       | 100.17    |        |          |          |
| 100                 | 100                    | 200.31                      | 100.16    | 100.05 | 0.32909  | 0.328925 |
| 100                 | 100                    | 199.38                      | 99.68     |        |          |          |
| 100                 | 100                    | 200.63                      | 100.31    |        |          |          |
| 100                 | 120                    | 218.75                      | 119.32    | 119.83 | 0.51     | 0.425603 |
| 100                 | 120                    | 219.69                      | 119.83    |        |          |          |
| 100                 | 120                    | 220.63                      | 120.34    |        |          |          |

**Table 9: Determination of Accuracy for Atenolol**

| AMT. OF SAMPLE (mg) | AMT. OF DRUG ADDED (mg) | AMT. OF DRUG RECOVERED (mg) | %RECOVERY | %MEAN    | SD       | %RSD     |
|---------------------|-------------------------|-----------------------------|-----------|----------|----------|----------|
| 200                 | 160                     | 159.33                      | 99.58     | 99.58    | 0.46     | 0.46194  |
| 200                 | 160                     | 158.59                      | 99.12     |          |          |          |
| 200                 | 160                     | 160.07                      | 100.04    |          |          |          |
| 200                 | 200                     | 200.08                      | 100.04    | 100.0367 | 0.41501  | 0.414858 |
| 200                 | 200                     | 200.92                      | 100.45    |          |          |          |
| 200                 | 200                     | 199.25                      | 99.62     |          |          |          |
| 200                 | 240                     | 239.18                      | 99.65     | 99.65667 | 0.380044 | 0.381353 |
| 200                 | 240                     | 238.27                      | 100.04    |          |          |          |
| 200                 | 240                     | 240.09                      | 99.28     |          |          |          |

**Table 10 : Intra-Day and Inter-Day Precision study of Losartan Potassium**

| Concentration ( $\mu\text{g/ml}$ ) | Intra-Day Absorbance Mean (n=3) $\pm$ SD | %RSD   | Inter-Day Absorbance Mean (n=3) $\pm$ SD | %RSD   |
|------------------------------------|--|--------|--|--------|
| 100                                | 0.369 $\pm$ 0.0015                       | 0.4136 | 0.369 $\pm$ 0.0020                       | 0.5420 |
| 150                                | 0.545 $\pm$ 0.0015                       | 0.2805 | 0.544 $\pm$ 0.0030                       | 0.5515 |
| 200                                | 0.697 $\pm$ 0.0015                       | 0.2193 | 0.695 $\pm$ 0.0015                       | 0.2199 |

**Table 11 : Intra-Day and Inter-Day Precision study of Atenolol**

| Concentration (µg/ml) | Intra-Day Absorbance Mean (n=3) ± SD | %RSD   | Inter-Day Absorbance Mean (n=3) ± SD | %RSD   |
|-----------------------|--------------------------------------|--------|--------------------------------------|--------|
| 400                   | 0.376 ± 0.0015                       | 0.4066 | 0.378 ± 0.0031                       | 0.8075 |
| 600                   | 0.531 ± 0.0025                       | 0.4742 | 0.534 ± 0.0031                       | 0.5717 |
| 800                   | 0.650 ± 0.0015                       | 0.2349 | 0.654 ± 0.0040                       | 0.6183 |

**Table 12: Colour stability monitoring**

| TIME    | ABSORBANCE      |                 |
|---------|-----------------|-----------------|
|         | LSK (100 µg/ml) | ATN (200 µg/ml) |
| 10.00am | 0.369           | 0.278           |
| 1.00 pm | 0.368           | 0.278           |
| 6.00pm  | 0.366           | 0.276           |
| 10.00am | 0.364           | 0.273           |

**Table 13: Optical characteristics of proposed method for the Drugs**

| Parameter                                | LOSARTAN POTASSIUM | ATENOLOL |
|--|--------------------|----------|
| max (nm )                                | 571                | 426      |
| Linear Range (µg/ml)                     | 25-300             | 50-1400  |
| Regression Equation* (y)                 | y=bx+a             | y=bx+a   |
| Slope (b)                                | 0.0032             | 0.0006   |
| Intercept (a)                            | 0.0400             | 0.1459   |
| Correlation coefficient(r <sup>2</sup> ) | 0.9975             | 0.9974   |
| Standard deviation of slope              | 0.0000             | 0.0000   |
| Standard deviation of intercept          | 0.0018             | 0.0022   |
| Limit of Detection (µg/ml)               | 1.8717             | 12.0065  |
| Limit of Quantitation (µg/ml)            | 5.6719             | 36.3833  |

\*Y = bx+a, where 'Y' is the absorbance and x is the concentration of drugs (µg/ml) For six replicates.

## RESULTS AND DISCUSSION:

The proposed method is simple, accurate and precise. Losartan Potassium and Atenolol were found to yield a clear Purple and Yellow colored complexes with Ferroin Solution and Methyl orange respectively which were extractable with chloroform having the absorption maxima of 571.0 and 426.0 nm respectively. The colored products were due to the ion pair complex formation of the drug with the dye in the presence of Phosphate buffer of pH 7.0. The linearity ranges were found to be 25-300 µg/ml and 50-1400 µg/ml for Losartan Potassium and Atenolol respectively. Validation parameters have been performed such as Limit of detection (LOD), Limit of quantitation (LOQ), accuracy, precision, robustness, specificity and selectivity as per International conference of Harmonization (ICH) guidelines<sup>9</sup>. The optical characteristics such as Beer's law limit, the regression analysis using the method of least square was made for the slope (b), intercept (a). Correlation coefficient (r) were also determined for the proposed method and results are presented in Table-13. Commercial formulation containing both drugs was successfully analyzed by the reference and proposed method. The Recovery studies were performed by adding a fixed amount of the drug to the pre analysed formulation. Interference studies reveals that the common excipients and other additives usually present in the dosage form did not interfere in the proposed method.

## CONCLUSION:

The method was successfully validated and applied to marketed formulation and excellent results were obtained with both the dyes. Extractive Spectrophotometric method was found to be simple, accurate and precise. As the method is selective and specific, it can be useful to the routine analysis of drugs.

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## REFERENCES:

1. Sweetman Sean C., Martindale The Complete Drug Reference, Thirty-Sixth Edition, Pharmaceutical Press, London, 2009, 1217-1218, 1326-1327.
2. Maryadele J. O' Neil., The Merck Index, 14<sup>th</sup> edition, United States pharmaceutical company, USA, 2006, 142, 967.
3. Drug bank: Atenolol(DB00335), open drug data and drug target database, <http://www.drugbank.ca/drugs/DB00335>
4. Drug bank: Losartan potassium(DB00678), open drug data and drug target database, <http://www.drugbank.ca/drugs/DB00678>
5. Florey Klaus, Analytical profile of drug substance, Academic press, London, 1975, Vol 13, 1-25.
6. Indian pharmacopoeia, Ministry of health and family welfare, 6<sup>th</sup> edition, Indian pharmacopoeia commission, Ghaziabad, India, 2010, Vol.II, 847-849, 1607-1609.
7. United state pharmacopoeia - 34 and National Formulary – 29, second supplement, united state pharmacopoeial convention, Rockville, MD, USA, 2011, Vol II & III, 1945-1948, 3342-3343.
8. British pharmacopoeia, 6<sup>th</sup> edition, British pharmacopoeia commission office, London, 2010, Vol I & II, 185, 1295-1297.
9. ICH Q2 (R1), Validation of analytical procedure: Text and Methodology, ICH Harmonised Tripartite Guideline, November 2005, IFPMA, Geneva, Switzerland.
10. Sumithra M., Shanmugasundaram P. and Sankar ASK. et al., Method Development and Validation of Losartan Potassium by RP-HPLC, Research Journal of Pharmaceutical, Biological and Chemical Sciences, March 2012, 3(1), 463-479.
11. Kathiresan K., Gothandaraman S. and Swamivel Manickam M. et al., Analytical method development and validation of Losartan potassium tablet by RP-HPLC, Rasayan J. Chem, 2008, 1(3), 521-525.
12. Mohammed Mustafa A., Syed Sultan Q. and Ehab Youssef A., Isocratic RP-HPLC method validation and verification of losartan potassium in pharmaceutical formulations with stress test stability for drug substance, Scholars Research Library, 2011, 3(5), 160-167.
13. Muralidharan S. and Subramaniya Nainar M., Sensitive and accurate estimation of losartan potassium formulation by high-performance thin-layer chromatography, Pharmaceutical methods, 2011, 2(2), 95-98.
14. Venugopal V., Anil Kumar G and Ravindergoud D. et al., Quantitative estimation of Losartan potassium in pharmaceutical dosage forms by UV spectrophotometry, International journal of research in pharmacy and chemistry, 2011, 1(3), 295-302.
15. Tangri P., Tangri S. and Singh P. et al., Development and Validation of UV-spectrophotometric method for the estimation of Losartan Potassium in bulk and formulation, International research journal of pharmacy, 2012, 3(5), 391-393.
16. Tsvetkova D.D. and Obreshkova D.P., validation of UV- spectrophotometric method for identification and determination of angiotensin II receptor antagonist Losartan Potassium, International journal of pharmacy and pharmaceutical sciences, 2012, 4(1), 428-431.
17. Subbarao J., Venkateswara Rao P. and Vidyadhara S. et al., UV spectrophotometric validation for identification and determination of losartan potassium in tablets, International Journal of Pharmacy & Technology, April-2012, 4(1), 4137-4143.
18. Lastra O.C., Lemus I.G. and Sánchez H.J. et al., Development and validation of an UV derivative spectrophotometric determination of Losartan potassium in tablets, J Pharm Biomed Anal., Sep 2003, 33(2), 175-80.
19. Nafisur Rahman, Masoom Raza Siddiqui and Syed Najmul Hejaz Azmi, Development and Validation of Kinetic Spectrophotometric Method for the Determination of Losartan Potassium in Pure and Commercial Tablets, Journal of the Chinese Chemical Society, 2006, 53, 735-743.
20. Rudy Bonfilio, Livia Botacini Favoretto and Gislaïne Ribeiro Pereira et al., Comparative study of analytical methods by direct and first-derivative UV spectrophotometry for evaluation of losartan potassium in capsules, Brazilian Journal of Pharmaceutical Sciences March 2010, 46(1), 147-156.

21. Swetha Y., Malleshwari P. and Jyotsna Y. et al., New UV-Spectrophotometric Method for the Determination of Losartan potassium in Pharmaceutical dosage form and its application to Protein binding study, *Journal of Pharmacy Research*, 2011, 4(11), 4139-4141.
22. Prabhakar A.H. and Giridhar R.A., Rapid colorimetric method for the determination of Losartan potassium in bulk and in synthetic mixture for solid dosage form, *Journal of Pharmaceutical and Biomedical Analysis*, 2002, 27(6), 861-866.
23. Latheeshj Lal L., Parthiban P. and Alagarsamy V. et al., Spectrophotometric Determination of Losartan Potassium and its Dosage Form by Bromothymol Blue and Phosphate Buffer, *E-Journal of Chemistry* 2010, 7(1), 320-324.
24. Sankar D.G., Raju M.S. and Murthy T.K. et al., Extractive spectrophotometric determination of losartan potassium using acidic and basic dyes, *Indian drugs*, 2003, 40(12), 724-726.
25. Tulja rani G., Gowri Shankar D. and Shireesha M. et al., spectrophotometric method for determination of angiotensin –II receptor antagonist in bulk and pharmaceutical dosage forms, *International journal of pharmacy and pharmaceutical sciences*, 2012, 4(1), 198-202.
26. Cho H.S., Santoro M.I. and Kedor-Hackmann E.R. et al., Enantiomeric Separation and Quantitative Determination of Atenolol in Tablets by Chiral High-Performance Liquid Chromatography, *Drug Development and Industrial Pharmacy*, 2000, 26(10), 1107-1110.
27. Ceresole R., Moyano M.A. and Pizzorno M.T. et al., Validated Reversed –Phase HPLC Method for the Determination of Atenolol in the Presence of Its Major Degradation Product, *Journal of Liquid Chromatography & Related Technologies*, 2006, 29(20), 3009-3019.
28. Chatterjee D.J., Hurst A.K. and Koda R.T. et al., High-Performance Liquid Chromatographic Method for Determination of Atenolol from Human Plasma and Urine: Simultaneous Fluorescence and Ultraviolet Detection, *Journal of Liquid Chromatography*, 1995, 18(4), 791-806.
29. Radulovic D., Zivanovic L.J. and Velimirovic G. et al., High-Performance Liquid Chromatographic Determination of Atenolol in Tablets, *Analytical Letters*, 1991, 24(10), 1813-1823.
30. Anelise weich, Janine de melo and Karin goebel et al., Validation of UV Spectrophotometric and HPLC Methods for Quantitative determination of Atenolol in Pharmaceutical Preparations, *Latin American Journal of Pharmacy*, 2007, 26(5), 765-770.
31. Ghannam A.L., Sheikha M. and Belal et al., Kinetic Spectrophotometric Determination of Atenolol in Dosage Forms, *Journal of AOAC International*, July 2002, 85(4), 817-823.
32. Abass S., Al-kahdimy H. and Hussain Ahmed A. et al., Novel analytical method for the determination of Atenolol in pharmaceutical preparations, *J. Chem. Pharm. Res.*, 2010, 2(3), 394-399.
33. Basavaiah K., Chandrashekar U. and Nagegowda P., Sensitive determination of Atenolol in tablets using chloramine-T and Two dyes, *Indian journal of chemical Technology*, November 2004, 11(6), 769-776.
34. Kudige N., Prashanth and Basavaiah K., Sensitive Spectrophotometric Determination of Atenolol in Pharmaceutical Formulations Using Bromate-Bromide Mixture as an Eco-Friendly Brominating Agent, *Journal of Analytical Methods in Chemistry*, December 2011, 2012, 1-12.
35. Kudige N., Prashanth and Basavaiah K., Simple, sensitive and selective spectrophotometric methods for the determination of atenolol in pharmaceuticals through charge transfer complex formation reaction, *Acta Pol Pharm*, 2012, 69 (2), 213-23.
36. Agrawal Y.K., Raman K. and Rajput S., Spectrophotometry Determination of Atenolol via Hydroxamic acid Formation, *Analytical Letters*, 1992, 25(8), 1503-1510.
37. Dwivedi N. and Patil U.K., Simultaneous Estimation of Atenolol and Losartan Potassium by High Performance Liquid Chromatography and UV Spectrophotometric Method, *Journal of Pharmacy Research*, Oct 2012, 5(1), 681-685.

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