[PART II-SEC. 3(ii)]



FORM 2 THE PATENT ACT 1970

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2. APPLICANT (S)	adha a
(a) NAME: Prof. (Dr.) N. V. Sathersh	Madhar or Syprotha
(6) ADDOFCE. DIT University, Facult	y of Marmary
(C) ADDRESS. MUSSopie Dispulsa	Road, P.O Broguentpus, Markando Debradin (UK)
3. PREAMBLE TO THE DESCRIPTION	100000
PROVISIONAL	COMPLETE
The following specification describes the	The following specification particularly describes
invention.	the invention and the manner in which it is to be
•	performed.
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4. DESCRIPTION (Description shall start from	m next page.)
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	ecification. Claims should start with the preamble —
"I/we claim" on separate page)	Sugar
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6. DATE AND SIGNATURE (to be given at the	ne end of last page of specification
7 ARSTRACT OF THE INVENTION (to be a	iven along with complete specification on separate
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page)	(I)hallio-/
•	Director Director D.I.TFaculty of Pharmacy Dehradun (Uttaranchal)
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Note: •	
*Repeat boxes in case of more than one entry.	
*To be signed by the applicant(s) or by authorize	
Name of the applicant should be given in full,	
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Delivery of nanosized Tiagabine loaded Bio-flexy films using Bio-film former from Solanum lycopersicum bio-functional agent for Oro Soft Palatal Route

Background of the Invention:

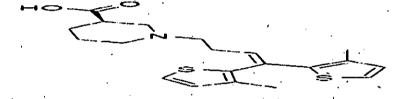
In this work an attempt has been made to explore the potentiality of Soft Palate as novel drug delivery platform for management of epilepsy. Due to drawbacks of conventional oral therapy of dose dumping, increased dose frequency and side effects of drugs, this novel route for drug delivery has been explored. Soft palate is enriched in abundant blood (Middle Meningeal artery, Accessory Meningeal artery, Greater Palatine branch of Maxillary Artery, Ascending Palatine branch of Facial Artery, Ascending pharyngeal artery) and nerve supply (Mandibular branch of trigeminal nerve; Lesser palatine nerve; Greater palatine nerve; Nasopalatine nerve; Glossopharyngeal nerve; Motor nerves). It has Thickness: 158-224 µm, pH: 7.34±0.38, Blood flow: 0.89 ml/min/cm². Soft palate being part of oral mucosa, acts as smart mucoadhesive site for both systemic and local drug delivery as well as for brain targeting of drugs. It provides controlled, sustained, retentive, systemic as well as site specific drug delivery and leads to enhanced drug bioavailability. Since Trigeminal nerve directly connects from soft palate to brain, thus, when nanosized drug is administered via this route, it directly reaches to brain via inter and intra neural pathways. First Pass metabolism in liver and Pre-systemic

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elimination in gastrointestinal tract gets avoided. Lowest Salivary Secretions, Low Enzyme Activity, avoids acid hydrolysis of drug. Self-medication is possible with proper patient counseling and termination of the drug delivery is achieved by removal of the dosage form from the site.

Tiagabine, anticonvulsant drug, BCS Class I Drug (High Permeability; High Solubility).



Tiagabine

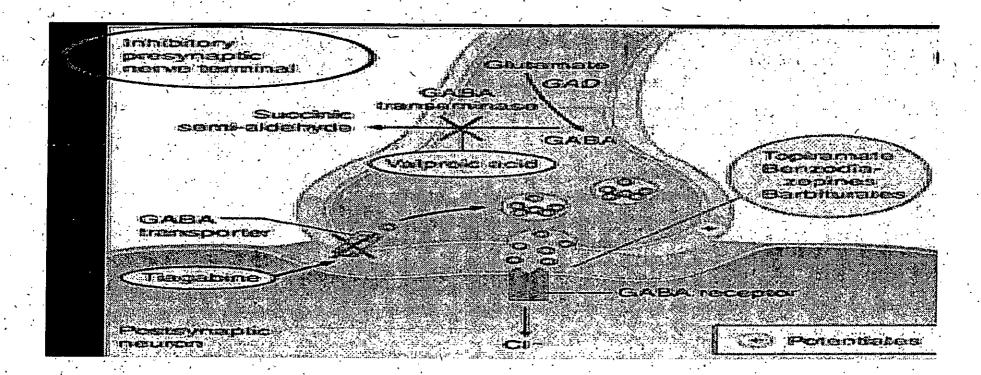
IUPAC name: (R)-1-[4,4-bis(3-methylthiophen-2-yl)but-3-enyl] piperidine-3-

Carboxylic acid

Molecular Formula:C₂₀H₂₅NO₂S₂; Molecular Weight:375.55 gm. mol⁻¹

Used for treatment of Infantile Spasms, Focal Seizure, Partial Seizure. Tiagabine Enhances activity of gamma amino butyric acid (GABA), the major inhibitory neurotransmitter in CNS. Blocks GABA uptake into presynaptic neurons, permitting more GABA to be available for receptor binding on the surfaces of post-synaptic cells. Acts as selective GABA reuptake inhibitor.

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Mechanism of Action of Tiagabine

It possesses plasma t_{1/2}: 7-9hours, Bioavailability: : 90-95%, Protein Binding:96%, Renal Clearance:109 ml/min, Plasma Elimination t_{1/2}: 7-9 hours, pKa: 3.3, 9.4, Log P:39.3,Onset of Action: 45 minutes,Solubility: Freely Soluble in Methanol, Soluble in aqueous base, Isopropanol, Ethanol, Sparingly Soluble in Water (22mg/ml), Very Slightly Soluble in Chloroform, Insoluble in Non-Polar Solvents. Adverse Effects include abdominal pain, nervousness, insomnia, pruritus, increased appetite, suicidal thoughts and sudden unexpected death.

Tiagabine is available in tablets of 2mg, 4 mg, 12 mg and 16 mg.

In this research work, Novel biopolymer was isolated from pulp of Tomato.It consists of fruits of plant *Solanum lycopersicum* belonging to family Solanaceae. Chemical constituents of Solanum lycopersicum includes Carotenoids like Lycopene, Fiber-1:6%, Flavonoids, Naringenin, Quercetin, Vitamins-19:10%

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like Vitamin C, Vitamin B₁, Vitamin B₃, β-Carotene, Malic Acid, Acetic Acid, Formic Acid, Lactic Acid, Fumaric Acid, P-Coumaric, Caffeic, Ferulic and Chlorogenic Acids, Carbohydrates like Glucose-0.9%, Fructose-1%, Protein-1%, Fat-0.1%, Minerals like Potassium, Sodium, Calcium, Magnesium, Iron, Zinc. prevents cancer, heart attacks, night blindness and acidosis, strengthen Bones, protects the body from carcinogens produced from cigarette smoke, reduces risk of kidney stones, treatment of GI disorders, lowers Cholesterol levels, Blood Pressure, Protection from Cell Damage, boosts Immunity, reduces migraine, lead toxicity, proper Brain functioning, protects from UV rays, treatment of Vasodilation, Antioxidant, Antidiabetic, Revitalizing Agent, Wound Healing Agent, Humectant.

Biopolymer isolated from Solanum lycopersicum was used as Bio-excipient in formulating nanosized Tiagabine loaded Bio-Flexy Films. Being of natural origin itis biodegradable, bio-safe, biocompatible, non-toxic, non-irritant in nature, non-reactive, and economical than synthetic polymers that are used in marketed pharmaceutical formulations. It possessed mucoadhesive, film former and bioretardant properties.

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Prior Art

Vossler D G et al. assessed the side effects and seizure reduction profile of Tiagabine Adverse effects, seizure, and assessment-of data in sequential patients treated open label with Tiagabine were recorded. Behavioral adverse effects occurred in a larger proportion of patients compared to those reported in Tiagabine preapproval randomized controlled trials. Moderate percentage of patients had meaningful reduction in seizure frequency, Tiagabine remains as useful antiepileptic drug.

Kalviainen R reviewed Long-Term Safety of Tiagabine. Short-term safety data of Tiagabine were derived mainly from five placebo-controlled, add-on studies in adults with therapy resistant partial epilepsy, and two conversions to Tiagabine monotherapy studies. Central nervous system (CNS)-related adverse effects, most frequently dizziness, were common with Tiagabine treatment during the titration period; the risk became similar to placebo rates during fixed-dose periods. Other adverse events that were more frequent in Tiagabine- than in placebo-treated patients were asthenia, nervousness, tremor, concentration difficulties, depressive mood, and language problems. Tiagabine doses were titrated slowly and taken with food to avoid rapid increases in plasma concentrations, thus minimizing the risks

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of adverse events. Overall, >2,500 patients have been exposed to Tiagabine during clinical trials, with 1,274 patients treated >12 months, the majority received Tiagabine 24–60 mg/day. No idiosyncratic reactions have been linked to the use of Tiagabine, and no abnormalities in hematology or common chemistry values were reported. No adverse effects on cognitive abilities were detected when the neuropsychological effects of Tiagabine add-on therapy and monotherapy were evaluated. Tiagabine does not appear to cause an excess risk of psychosis or increase the incidence of status epilepticus or spike/wave discharges. No evidence of a relationship between visual field constriction and Tiagabine treatment was found in a study of 15 patients converted to Tiagabine monotherapy (mean dose, 22 mg/day; mean duration, 2.5 years) who had a full ophthalmologic evaluation. The characteristics of Tiagabine in the management of partial epilepsy are enhanced by its favorable side-effect profile in the cognitive area. (51)

Pulman J, Marson AG, Hutton JL2014 suggested Tiagabine as an add-on for Drug-Resistant Partial Epilepsy. To evaluate the effects of add-on treatment with Tiagabine upon seizures, adverse effects, cognition and quality of life for people with drug-resistant localization related seizures. Randomized placebo controlled add-on trials of people of any age with localization related seizures, in which an adequate method of concealment of randomization was used were included. The

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studies could be double, single or unblinded and be of parallel or crossover design. Minimum treatment period wasof eight weeks. Trials using an active drug control group were also included. Doses between 30 and 56mg per day are likely to reduce thefrequency of seizures by 50% or more for between 13 and 20% of people.

Wang X, Ratnaraj N, Patsalos P N 2004; revealed the Pharmacokinetic interrelationship of Tiagabine in blood, Cerebrospinal Fluid and Brain Extracellular Fluid (frontal cortex and hippocampus). Adultmale rats were implanted with either a jugular vein catheter and a cisterna magna catheter for blood and Cerebrospinal Fluidsampling, respectively, or a blood catheter and a microdialysis probe in the hippocampus and frontal cortex (for ECF sampling). Tiagabine was administered intraperitoneally (i.p.) at 20 or 40 mg/kg and blood, Cerebrospinal Fluid and Brain Extracellular Fluid were collected at timed intervals for the measurement of Tiagabine concentrations by high performance liquid chromatography. Tiagabine concentrations in blood and Cerebrospinal Fluidrose linearly and dose-dependently and time to maximum concentration (T_{max}) was 15 and 29 min, respectively. Mean Cerebrospinal Fluid/serum Tiagabine concentration ratios (range, 0.008—0.01) were much smaller than the mean free/total Tiagabine concentration ratios in serum (0.045 ± 0.003). Entry of Tiagabine into Brain Extracellular Fluid (frontal cortex and hippocampus) was rapid with T_{max} values of 31—46 min. Distribution

of Tiagabine in brain was not brain region specific with values in the frontal cortex and hippocampus being indistinguishable. Whilst elimination from Cerebrospinal Fluid was comparable to that of serum, half-life $(t_{1/2})$ values in Brain Extracellular Fluid were three times longer. Tiagabine was associated with linear kinetic characteristics and with rapid brain penetration. Cerebrospinal Fluid concentrations are not reflective of free non-protein-bound concentrations in serum. The observation that Tiagabine elimination from the brain was threefold slower than that was seen in blood, might be due to relatively long duration of action of Tiagabine.

Kalviainen R 2001 reported Long-Term Safety of Tiagabine. Short-term safety data of Tiagabine were derived mainly from five placebo-controlled, add-on studies in adults with therapy resistant partial epilepsy, and two conversions to Tiagabine monotherapy studies. Central nervous system (CNS)-related adverse effects, most frequently dizziness, were common with Tiagabine treatment during the titration period; the risk became similar to placebo rates during fixed-dose periods. Other adverse events that were more frequent in Tiagabine- than in placebo-treated patients were asthenia, nervousness, tremor, difficulties, depressive mood, and language problems. Tiagabine doses were titrated slowly and taken with food to avoid rapid increases in plasma concentrations, thus minimizing the risks of adverse events. Overall, >2,500

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NANOSIZING OF TIAGABINE

(1)Solvent Evaporation Method: 100 mg Tiagabine mixed with 10 mg dextrose, 5 mg fructose and 10 mL methanol and triturated. Diluted mixture with 50 mL distilled water, sonicated for up to 15 cycles (3mins/cycle) in ultrasonic bath sonicator. Absorbance, % Transmittance, % Blockage (100- %Transmittance) was

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noted after every 5 cycles of sonication. After 15th cycle, residue was collected, dried, packed and stored. Non- aqueous solvent (methanol) was used. Solvent was evaporated naturally.

(2) Sonication Method: 100 mg Tiagabine mixed with 10 mg dextrose, 5 mg fructose and 10 mL distilled water and triturated. Diluted mixture with 50 mL distilled water and sonicated up to 15 cycles (3mins/cycle) in ultrasonic bath sonicator. Absorbance, % Transmittance, % Blockage (100- %Transmittance) was noted after every 5 cycles of sonication. After 15th cycle, residue was collected, dried, packed and stored. Aqueous solvent was used.

Similarly Tiagabine was nanosized by Solvent Evaporation and Sonication Methods.

Primarily screening method for nanosized range particles

It is a novel by U.V. Spectroscopy. Transmittance is based on the concept of Tyndall Effect. When light of specified wavelength passes through the media containing particles less than or greater than the specified particle range, the % blockage represents particles beyond the size range whereas the % transmittance is considered that the particles lies above the size range at particular range

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ISOLATION PROCESS OF SOLANUM LYCOPERSICUM BIOPOLYMÉR:

Procured Tomatoes from local market. Removed outer peel of 500 gm. Tomatoes by immersing in hot water. Pulp + 500 mL of distilled water, slurry obtained filtered using muslin cloth

Filtrate + 1000 mL.propan-2-one (1:2). Refrigeration at 2-8°C for 24 hours, filtered

Centrifuged at 3500 rpm for 15 minutes

Naturally dried obtained biomaterial for 24 hours powdered, passed through Sieve no.120. Optimized six times, calculated % yield and stored in well closed container for further use

CHARACTERIZATION

OF

SOLANUM

LYCOPERSICUM

BIOPOLYMER:

1) % yield: 12.4%±0.01

2) Color: Light Red

3) Odour: Characteristic

4) Texture: Powder

5) Solubility: Methanol, partially soluble in water

6) Color Changing Point: 194°C±2

7) Carbohydrates: Present

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- 8) Spectral Analysis:
- (i) Differential Scanning Calorimetry: DSC Peak of Sólanum lycopersicum biopolymer was obtained at 77.26°C, Peak Height was 1.5747 mW, Delta H was 67.3116 J/g, Onset depicted boiling point at 44.63°C and Glass Transition temperature was 105.90°C.
- (ii) Infra-Red Spectroscopy:IR Peaks of **Solanum lycopersicum** biopolymer were obtained at 3161 cm-1, 1618 cm-1, 1942 cm-1, 1398 cm-1, 1165 cm-1, 1844 cm-1 which indicated functional groups RCOOH, RCONH2, C=C-COOH, S=O, RNH2, RCH2OH.
- (iii) Nuclear Magnetic Resonance Spectroscopy: 1HNMR Spectra of Solanum lycopersicum biopolymer confirmed the presence of carbohydrates residue within the biopolymer extracted as shift of carbohydrate protons were 3-6 ppm and the spectra when compared reflected the peak at 3.5531 ppm.
- (iv)Scanning Electron Microscopy: SEM image of Solanum lycopersicum biopolymer showed size range of $100~\mu m$, flakes type Irregular structure with smooth texture.

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CELL-LINE TOXICITY STUDY: Safety of Biopolymer:

MTT cytotoxicity assay

MTT [3-(4, 5-dimethyl thiazol-2-yl)-5-diphenyl tetrazolium bromide] is taken up by the viable cells and reduced to formazan by the "Succinate-tetrazolium reductase" system that belongs to the mitochondrial respiratory chain functioning in metabolically active cells. Formazan formed, is a purple colored water-insoluble product that is largely impermeable to cell membranes, thus resulting in its accumulation within the healthy cells which is solubilized by adding Dimethyl sulphoxide (DMSO). The optical density (OD) of purple colored solution developed was read using a conventional ELISA plate reader at 590nm (maximum absorbance). The ability of cells to reduce MTT provides an indication of the mitochondrial integrity and activity, which, in turn, may be interpreted as a measure of viability and/or cell number.

The ability of the cells to survive a toxic insult has been the basis of most Cytotoxicity assays. This assay is based on the assumption that dead cells or their products do not reduce tetrazolium.

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Cell-line toxicity data of Solanum lycopersicum biopolymer

Compound ID	Concentration	Absorbance	% Cell Death	
Solanum	31.25	0.26	-30.9824	
lycopersicum	62.25	0.2475	-24.6851	
biopolymer		,		
	125	0.248	-24.937	
. ,				
	250	0.206	-3.77834	
	500	0.164	17.38035	

Cell-line toxicity data of Solanum lycopersicum biopolymer in concentrations ranging from 31.25-500 µM revealed IC50 (µM) of 253.613 and mean % cell viability of almost 100%. Hence isolated Solanum lycopersicum biopolymer was

In-Vitro Mucoadhesion Study:

The adhesion strength of the polymer was assessed by Modified Shear Stress Method at different concentrations 1%, 2%, 4%, 6%, 8% & 10% of biopolymer. 10% concentration showed maximum mucoadhesivity.

Isolated Solanum lycopersicum biopolymer was used as bio-filming agent in formulating nanosized Tiagabine loaded bio-flexy Films.

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FORMULATION OF NANOSIZED TIAGABINE LOADED BIO-FLEXY FILMS

FORMULATION	FST1	FST2	FST3	FST4	FST5	FST6
Drug: Biopolymer Ratios	1:0.5	1:1	1:3	1:5	1:6	1:10
Tiagabine (mg)	100	100	100	100	100	100
Solanum lycopersicum	50	100	300	500	600	1000
biopolymer (mg)			·			٠ .
Dextrose (mg)	10	-10	10	10	10	10
Fructose (mg)	5	5:	5	5	5	5
Glycerine (µl)	10	10	10	10	10	10
Pectin (gm.)	0.6	0.6	0.6	0.6	0.6	0.6
Distilled Water (ml)	20	20	20	20	20	20

Nanosized drug loaded Bio-flexy Films prepared by Solvent Casting Method Drug: Biopolymers (1:0.5 to 1:10) were mixed to form uniform dispersions, added coprocessing agents along with solvent. Subjected to Magnetic Stirring for 15 minutes, followed by sonication for 5 cycles (each cycle 3 minutes). Transferred into petridishes. Kept for natural drying for 24 hours Prepared Films were removed from petridishes Tiagabine was used as Anticonvulsant drug, Glycine max biopolymer as film former, Dextrose, and Fructose as Flexicizers, Glycerine as Plasticizer, Pectin as Film Initiator and Distilled Water as Solvent. Similarly prepared Tiagabine loaded Standard Sodium Carboxyl Methyl Cellulose Flexy Films.

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FORMULATION	FET1	FET2	FET3	FET4	FET5	FET6
Drug: Biopolymer Ratios	1:0.5	1:1	1:3	1:5	1:6	1:10
Tiagabine (mg)	100	100	100	100	100	100
Sodium Carboxyl Methyl Cellulose (mg)	50	100	300	500	600	1000
Dextrose (mg)	10	10	10	, 10	10	10
Fructose (mg)	5	5	5	5	5	5
Glycerine (µl)	10	10	10	10	10	10
Pectin (gm.)	0.6	0.6	0.6	0.6	0.6	0.6
Distilled Water (ml)	20	20	20	> 20	20	20

EVALUATION OF FORMULATED BIO-FLEXY FILMS

Prepared Formulations were evaluated for following parameters:

Thickness, Folding Endurance, Surface pH study, Weight Uniformity Study, Drug Content uniformity, Swelling Percentage Study, Percentage moisture uptake (PMU), *In-Vitro* drug release study (by Modified M.S. apparatus), *Ex-vivo* Studies (Mucoretention and Mucoadhesion Study), *In-Vivo* Study by Sub-cutaneous Pentylene Tetrazole (PTZ) Method, Stability Studies as per ICH Guidelines.

Results: Thickness of nanosized Tiagabine loaded bio-flexy films containing

Solanum lycopersicum biopolymer(FST1-FST6)Thickness of nanosized

Tiagabine loaded bio-flexy films containing Solanum lycopersicum

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Discrepancy

Line (Line 2000)

biopolymer (FST1-FST6) was ranging from 0.027±0.003 mm to 0.041±0.002 mm, Folding Endurance: 72-86, Surface pH: 7.01±0.02 to 7.01±0.01, Weight Uniformity: 0.012±0.03 to 0.021±0.02, Drug Content Uniformity: 66.6%±0.35 to 74.8%±0.24, Swelling Percentage: 63%±0.4 to 72%±0.2, Percentage Moisture Uptake (PTU): 2.0%±0.15 to 2.5%±0.12. Mucoadhesion by Dynamic method revealed that Nanosized Tiagabine loaded bio-flexy films containing Solanum lycopersicum biopolymer were mucoadhesive for time period of 30-120 minutes. Mucoretentive Study revealed that Nanosized Tiagabine loaded bio-flexy films containing Solanum lycopersicum biopolymer were mucoretentive for time period of 90-210 minutes. The drug release pattern for formulations FST1-FST6 containing Solanum lycopersicum biopolymer based on the T50% and T80% was found to be FST5 (1:6) > FST4 (1:5) > FST3 (1:3) > FST2 (1:1) > FST1 (1:0.5) > FST6 (1:10). In-vitro drug release was performed for all the formulations and the data indicate that drug loaded formulations show the sustained release behavior. Graph was plotted between %CDR and time, the R2 value, T50% and T80% were calculated from graph. Based on all above mentioned evaluation parameters, FST5 (containing Tiagabine: Solanum lycopersicum biopolymer (1:6)) Bio-flexy film having R2=0.9363, Peppas Korsemeyer as best fit model, follows Fickian Diffusion (Higuchi Matrix) release mechanism, T50%: 26 hrs., T80%: 31 hrs. using BITS Software 1.12. Stability study revealed stable bio-flexy films

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with no significant change in physical appearance and stable pH. Prepared formulations of Tiagabine loaded bio-flexy films containing Solanum lycopersicum biopolymer were suitable for Soft Palatal Delivery.

T50% and T80% values of Tiagabine-Solanum lycopersicum polymer Bio-flexy Films

Ratio	T50 % (hours)	T80 % (hours)
FST1 (1:0.5)	1.46	2.04
FST2 (1:1)	1.68	3.01
FST3 (1:3)	2.21	3.89
FST4 (1:5)	2.60	2.73
FST5 (1:6)	4.51	4.85
FST6 (1:10)	1.31	2.30

The two-tailed P value was found to be less than 0.05 thus, extremely statistically Significant.

T50% and T80% values of Tiagabine-Sodium Carboxyl Methyl Cellulose Standard polymer Flexy Films

Ratio	T50 % (hours)	T80 % (hours)
FET1 (1:0.5)	39.36	43.82
FET2 (1:1)	39.65	43.30
FET3 (1:3)	9.45	10.49
FET4 (1:5)	7.26	8.12
FET5 (1:6)	40.66	43.79 <i>j</i>
FET6 (1:10)	6.67	9.14

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Kinetic Release of Tiagabine-Solanum lycopersicum polymer Bio-Flexy Films

Release Kinetics Analysis Dynamic Method Formulation of Tiagabine: Solanum lycopersicum
Bio-Flexy Films

Formulations			\mathbb{R}^2		Best Fit	Mechanism of	
	Zero order	1 st order	Higuchi Matrix	Peppas	Hixon Crowell	Model	Action
FST1 (1:0.5)	0.8080	0.8086	0.8927	0.9138	0.8084	Peppas Korsmeyer	Fickian Diffusion (Higuchi Matrix)
FST2 (1:1)	0.7985	0.7991	0.9162	0.9449	0.7989	Peppas Korsmeyer	Fickian Diffusion (Higuchi Matrix)
FST3 (1:3)	0.8055	0.8063	0.9297	0.9530	0.8060	Peppas Korsmeyer	Fickian Diffusion (Higuchi Matrix)
FST4 (1:5)	0.8317	0.8319	0.9046	0.9049	0.8318	Peppas Korsmeyer	Fickian Diffusion (Higuchi Matrix)
FST5 (1:6)	0.8454	0.8455	0.9213	0.9363	0.8454	Peppas Korsmeyer	Fickian Diffusion (Higuchi Matrix)
FST6 (1:10)	0.6784	0.6793	0.9150	0.9277	0.6790	Peppas Korsmeyer	Fickian Diffusion (Higuchi Matrix)

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Kinetic Release of Tiagabine-Sodium Carboxyl Methyl Cellulose Standard polymer Flexy Films

Release Kineti Flexy Films	ics Analy	sis Dyna	mic Metho	od Formu	lations of	Tiagabine:	Sodium CMC
Formulations		······································	\mathbb{R}^2			Best Fit	Mechanism
	Zero	1 st	Higuchi	Peppas	Hixon	Model	of Action
	order	order	Matrix	٠.	Crowell	·	
FET1 (1:0:5)	0.8894	0.8897	0.9356	0.9300	0.8896	Higuchi-	Anomalous
			· .			Matrix	Transport
FET2 (1:1)	0.8852	0.8853	0.9324	0.8424	0.8853	Higuchi-	Anomalous
. ` '						Matrix	Transport
FET3 (1:3)	0.8868	0.8868	0.9377	0.9550	0.8868	Peppas	Anomalous
	·					Korsmeyer	Transport
FET4 (1:5)	0.8906	0.8908	0.9361	0.9514	0.8908	Peppas	Anomalous
				,	,	Korsmeyer	Transport
FET5 (1:6)	0.8360	0.8363	0.9301	0.9084	0.8362	Higuchi-	Fickian
						Matrix	Diffusion
ę							(Higuchi
							Matrix)
FET6 (1:10)	0.8960	0.8962	0.9372	0.9692	0.8961	Peppas	Anomalous
		·				Korsmeyer	Transport

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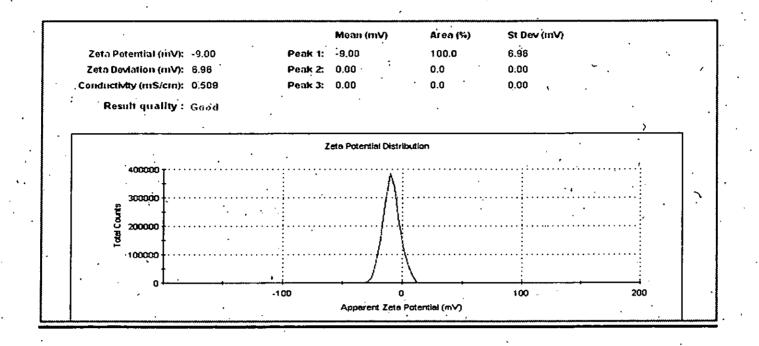
Summary of Invention:

The purpose of this study is to attain brain specificity by delivering nanosized Tiagabine loaded Flexy Films via Oro-Trans Soft Palatal route for Epilepsy treatment. The attempt is made to explore the potentiality of Soft Palatal mucosa as drug delivery platform being enriched with abundant nerve and blood supply, and minimizing side effectes of oral drug delivery. Nanosized Tiagabine loaded bioflexy films were formulated by Solvent Casting method and evaluated their performance, which depicted their suitability to be administered by Soft-Palatal route.

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DRAWINGS

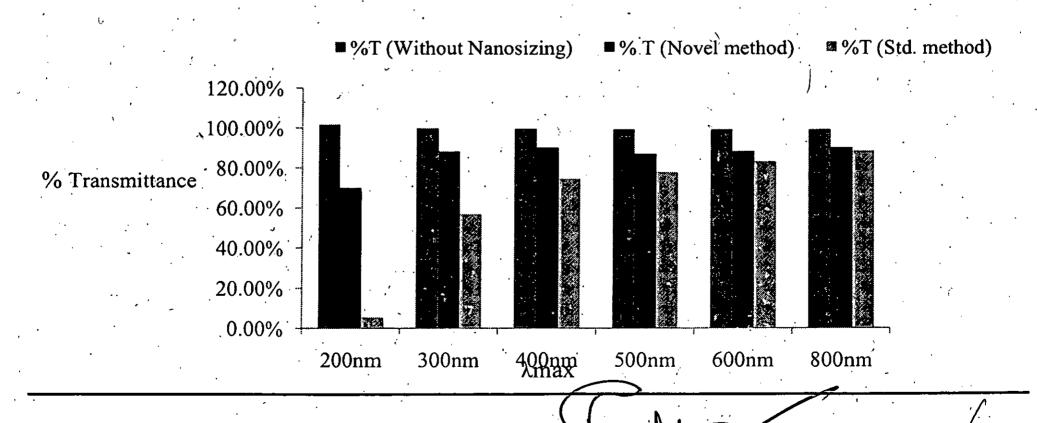
1. ZETA POTENTIAL OF TIAGABINE



Zeta Potential of Tiagabine: -9

Comparative Graph between %Transmittance and λ max of pure Tiagabine (without nanosizing) with nanosized Tiagabine (by novel sonication and standard solvent evaporation methods).

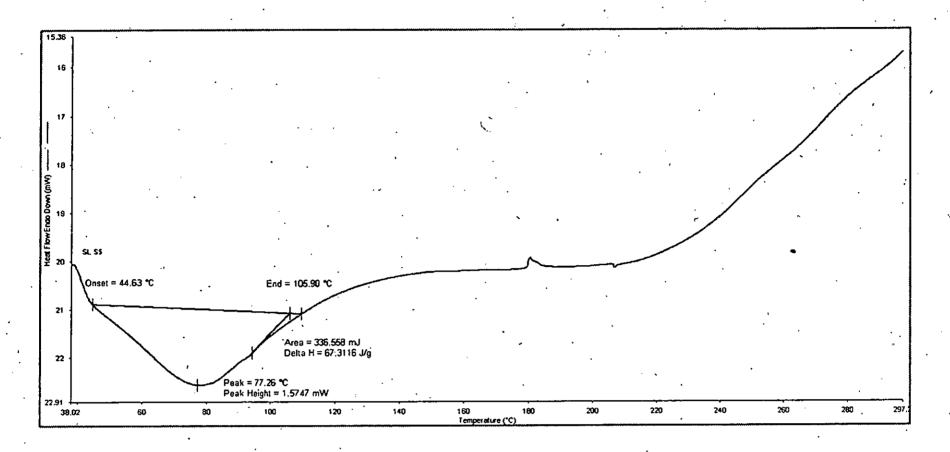
2. NANOSIZING OF TIAGABINE



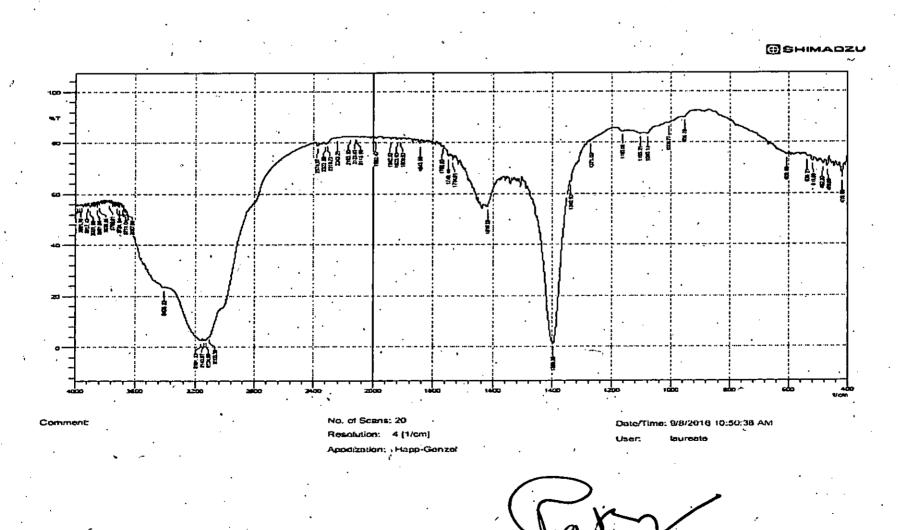
Director Director Director Of Pharmacy Director Director (Ultaranchal)

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3. DIFFERENTIAL SCANNING CALORIMETRY OF SOLANUM LYCOPERSICUM BIOPOLYMER



4. IR SPECTROSCOPYOF SOLANUM LYCOPERSICUM BIOPOLYMER



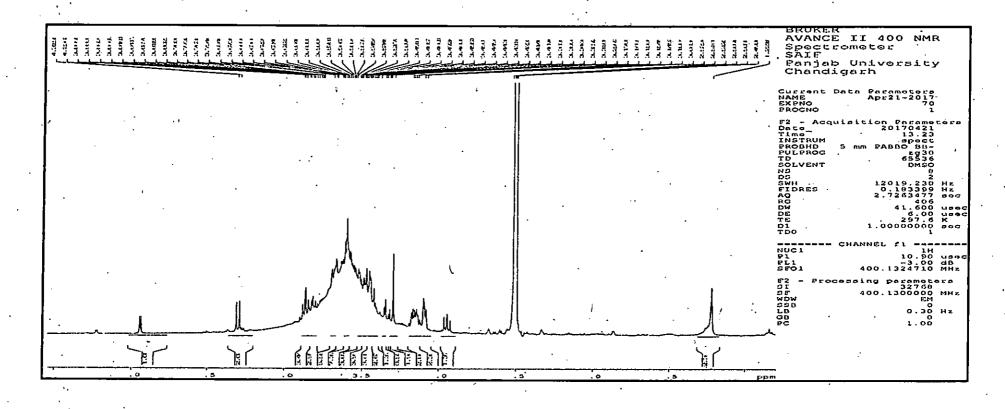
D.I.T.-Faculty of Pharmacy Dehradun (Uttaranchal) Lecarello

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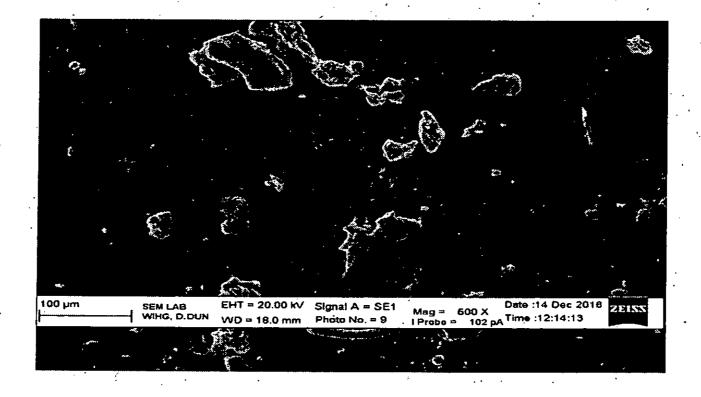
5. NUCLEAR MAGNETIC RESONANCE SPECTROSCOPYOF SOLANUM

LYCOPERSICUM

BIOPOLYMER



6. SCANNING ELECTRON MICROSCOPY OF SOLANUM LYCOPERSICUM BIOPOLYMER

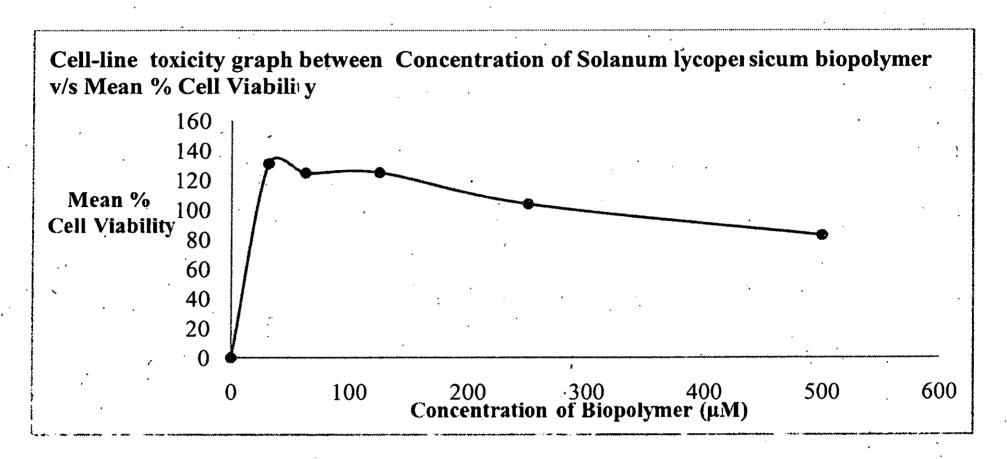


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D.I.T -Faculty of Pharmacy
Dahradun (Uttaranchal)

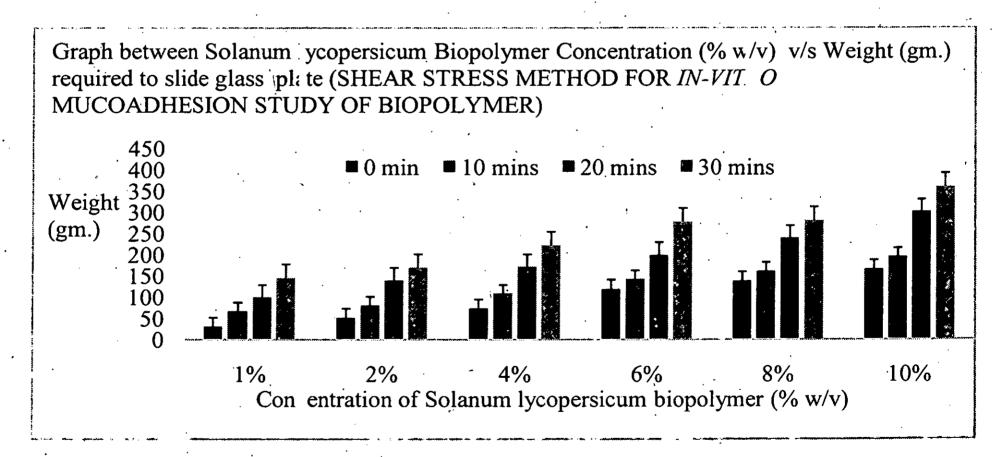
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BIOPOLYMER



8. MUCOADHESIVITY OF SOLANUM LYCOPERSICUM BIOPOLYMER

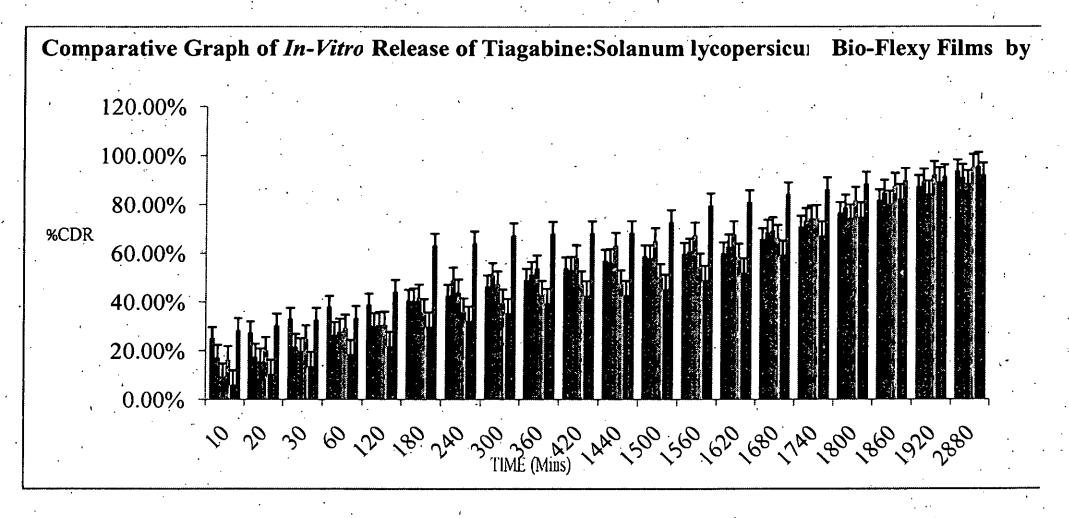


Director pharmacy

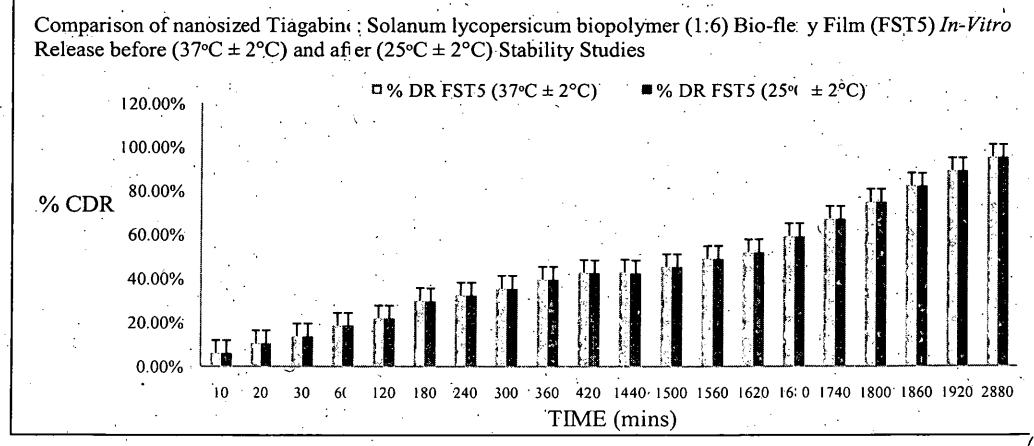
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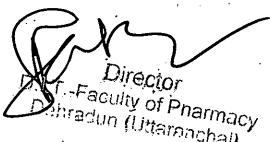
06-Mar-2019/21296/201911008672/Form 2(Title Pa

9. KINETIC RELEASE OF TOPIRAMATE-SOLANUM LYCOPERSICUM BIOPOLYMERBIO-FLEXY FILMS



10.STABILITY STUDIES OF BEST FORMULATION OF NANOSIZED TIAGABINE LOADED BIO-FLEXY FILM CONTAINING SOLANUM LYCOPERSICUM BIOPOLYMER







We claim: The invention claims:

- 1. A mucoadhesive system comprising of an antiepileptic moiety with one or more Co-processing agents derived from a natural edible source (Solanum lycopersicum i.e., tomato fruit pulp) as a bioretardant cum film former for Delivery of API to brain via Oro Trans- Soft Palatal platform.
- 2. The mucoadhesive system of Claim 1, where in it comprises of other coprocessing agents dextrose, fructose as flexicizers, pectin as initiator at optimized concentration ranging from 1-3%.
- 3. The antiepileptic drug of the Claim 1, wherein chemically comprises of (R)-1-[4,4-bis(3-methylthiophen-2-yl)but-3-enyl] piperidine-3- carboxylic acid or Tiagabine at concentration of $1\mu g/cm^2$ of the mucoadhesive device.
- 4. The bioretardant of Claim 1, which was isolated by a simplified economic process using optimized concentration of non-solvent dimethyl ketone in double proportion to aqueous extract and further bioretardant was recovered, characterized and showed in-built retardability, filmability and mucoadhesivity due to functional groups like RCOOH, RCONH2, C=C-COOH, S=O, RNH2, RCH2OH and GTT at 105.90°C.
- 5. The biomaterial spectral characterization of Claim 4 wherein comprises of mucoadhesive functional agents. The prolongability in Tiagabine release from the bio-flexy films was extended to 48 hours

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6. Tiagabine bio-flexy films of Claim 5 wherein show promising significant mucoadhesivity and mucoretentivity over a prolonged duration.

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Delivery of nanosized Tiagabine loaded Bio-flexy films using Bio-film former from Solanum lycopersicum bio-functional agent for Oro Soft Palatal Route.

ABSTRACT

The research work explores novel delivery approach for delivering Tiagabine via Trans-Soft Palatal route in form of Bio-flexy films for treatment of epilepsy. The formulations comprises of nanosized Tiagabine, Solanum lycopersicum mucoadhesive bio-film former, Flexicizers, Film Initiator and other co-processing agents and evaluated for various parameters. The prepared Formulations showed promising mucoadhesivity, filmability along with significant Pharmacokinetics and Pharmacodynamics Anticonvulsant activity on experimental animals.

Director

D.I.T.-Faculty of Pharmacy

Dehradun (Uttaranchal)

Sugaretha



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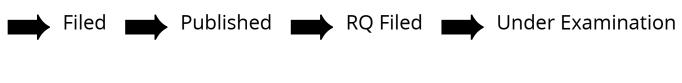


(http://ipindia.nic.in/index.htm)

	Application Details
APPLICATION NUMBER	201911008672
APPLICATION TYPE	ORDINARY APPLICATION
DATE OF FILING	06/03/2019
APPLICANT NAME	1 . PROF.(DR.) N.V. SATEESH MADHAV 2 . DR. SUGANDHA VARSHNEY
TITLE OF INVENTION	DELIVERY OF NANOSIZED TIAGABINE LOADED BIO-FLEXY FILMS USING BIO-FILM FORMER FROM SOLANUM LYCOPERSICUM BIO-FUNCTIONAL AGENT FOR ORO SOFT PALATAL ROUTE
FIELD OF INVENTION	CHEMICAL
E-MAIL (As Per Record)	
ADDITIONAL-EMAIL (As Per Record)	dit@dituniversity.edu.in
E-MAIL (UPDATED Online)	
PRIORITY DATE	
REQUEST FOR EXAMINATION DATE	
PUBLICATION DATE (U/S 11A)	11/09/2020

Application Status			
APPLICATION STATUS	Awaiting Request for Examination		

View Documents



Disposed

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