

Formulation Factors

Objectives

- Understand formulation factors which affect oral absorption
 - In general fastest absorption from:
 - Solution > suspension > capsule > tablet > coated tablet
 - E.g. for pentobarb
 - Solution > suspension = capsule > tablet

Formulations

- Solutions
- Suspensions
- Capsules
- Tablets

Solutions

- Common dosage form
 - Easily adjust dose
- Usually rapid and complete absorption
- Gastric emptying may be limited factor
- Acidic drugs given as salt may precipitate in stomach - fine suspension should redissolve
- Mixed solvent - water/alcohol/glycerol (altered dielectric)
 - Emulsion or soft gelatin capsule

Suspensions

- Particle size down- increase absorption
- Dispersion of fine particles aided by surface active agent
- Aging of suspension - solution/precipitation
 - leading to larger less soluble particles
 - Solubility function of particle size

Capsules

- Gelatin shell should disrupt quickly
- Dispersing agent should aid solution
- Tightly packed capsule may have reduced absorption

Tablets

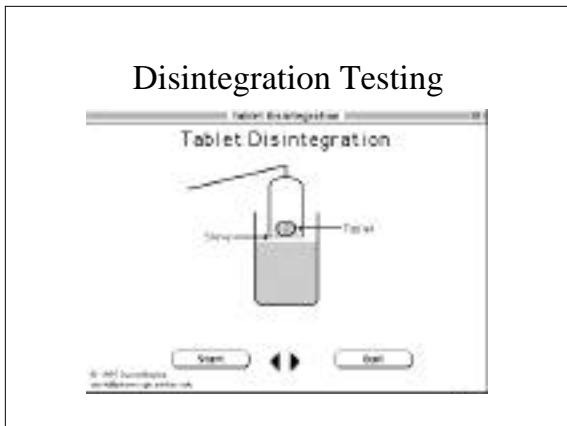
- Ingredients
 - Drug - may be poorly soluble
 - Lubricant - usually hydrophobic
 - Granulating agent - holds particles together
 - Filler - drug interaction (possible)
 - Wetting agent - helps penetration of water
 - Disintegrating agent - breaks up the tablet
 - Coating, enteric coating - may reduce absorption

Sustained Release Tablets

- Benefits - sustained blood levels, reduce variability in C_p , reduced side effects (?)
- More complicated, larger doses, more expensive
- Types
 - Erosion, waxy matrix, coated pellets, coated ion exchange, osmotic pump

In vitro testing

- Disintegration testing
 - Tablet break into granules
- Dissolution testing
 - Tablet breaks up and drug goes into solution
 - Factors include dissolution medium, agitation, temperature and apparatus
 - Quality control between batches
 - *In vitro* / *in vivo* correlation



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