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Research Article

# In Vitro Analytical Method Development And Validation Of Sacubitril And Valsartan In Rabbit Plasma Using RP-UPLC

VS Mani kumar Pinaka<sup>\*1</sup>, Chennu M M Prasada Rao<sup>2</sup>

<sup>1</sup>\*Research Scholar, School of Pharmacy, Raffles university, Neemrana- 301705.

<sup>2</sup> Professor, School of Pharmacy, Raffles University, Neemrana- 301705. [chennuprasad12@gmail.com](mailto:chennuprasad12@gmail.com)

**\*Corresponding Author;** VS mani Kumar Pinaka

\*E-mail: [Vsmac27@gmail.com](mailto:Vsmac27@gmail.com),

## Abstract

A simple, Accurate, precise method was developed for the simultaneous estimation of Sacubitril and Valsartan in Rabbit plasma was developed and validated. By using solvent phase extraction [SPE] the sample preparation was prepared. Chromatogram was run through Std CHS (50mm x 2.1 mm, 1.8μm). Mobile phase containing Buffer AmmoniumAcetate: Acetonitrile taken in the ratio 70:20 was pumped through column at a flow rate of 0.3ml/min. Buffer used is Disodium Phosphate buffer in this method was buffer. For the separation of Sacubitril and Valsartan Internal Standard [IS] used is Emtricitabine. The Temperature was maintained at 30°C. Optimized wavelength selected was 260nm. Retention time of Sacubitril and Valsartan was found to be 1.196min (IS) and 1.528min of Sacubitril and 1.799min of Valsartan. The standard curve was linear ( $R^2 > 0.995$ ) over the concentration range of 0.4-8 μg/ml of Valsartan & 0.2-4 μg/ml of Sacubitril. All the analytical validation parameters were determined as per ICH guidelines The bioanalytical method developed approach was selective, robust, and reliable, as accuracy, precision, recovery, and other validation parameters were all within the recommendations' limitations. The peaks produced for the drug of interest and the internal standard were well separated from one another without any plasma interferences, and the peaks were symmetrical with an adequate tailing factor. The method has the potential to be very beneficial in therapeutic drug monitoring (TDM), bioequivalence research, pharmacokinetics studies, toxicology, and biomedical investigations.

**Key Words:** Sacubitril and Valsartan, Internal Standard, RP- UPLC, Bioanalysis, Rabbit Plasma

**\*Authors for correspondence: E-mail Id:** [sidheswarprasadshukla@yahoo.com](mailto:sidheswarprasadshukla@yahoo.com)

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## Introduction

Bioanalytical techniques, employed for the quantitative determination of drugs and their metabolites in biological fluids and creates a specific procedure to enable a coalesce of interest to be identified and at the same time to be quantified in a matrix. A coalesce is measured by several procedures. The choice of analytical procedures involve many considerations, such as: concentration levels, chemical properties of the

analyte, specimen matrix, cost of the analysis, experimental speed, quantitative or qualitative measurement, required precision and necessary equipment<sup>2</sup>. Bioanalytical method validation comprises all criteria determining data quality, such as selectivity, accuracy, precision, recovery, sensitivity, and stability.

## DRUG ANALYSIS IN VARIOUS BIOLOGICAL MEDIA

Blood, urine, and faeces are the most commonly acquired samples for biopharmaceutical analysis, especially if the drug or metabolite is poorly absorbed or substantially eliminated in the bile. Saliva, breath, and tissue are examples of other media that can be used. The nature of the investigation heavily influences the selection of sampling media. In a clinical pharmacokinetic investigation, for example, medication levels necessitate the use of blood, urine, and saliva. A bioavailability study may necessitate drug level data in blood and/or urine, but a drug identification or drug addiction concern may only necessitate one type of biological sample.

The nature of the drug investigation heavily influences the selection of sample media. In a clinical pharmacokinetic study, for example, medication levels necessitate the use of blood, urine, and perhaps saliva. A bioavailability research may necessitate medication level measurements in blood or urine. The steps involved in estimating medicines in biological fluid are sample collection, sample treatment, separation of the compound of interest from the matrix, and analysis.

Bioanalysis can determine the therapeutic efficacy of a specific medicine. Bioanalysis is important in the pharmaceutical industry. The following steps are involved in bioanalysis.

- Biological fluid selection and collection
- Sample preparation -Analyte extraction from biological matrix.
- Analyte detection is accomplished through a variety of approaches.

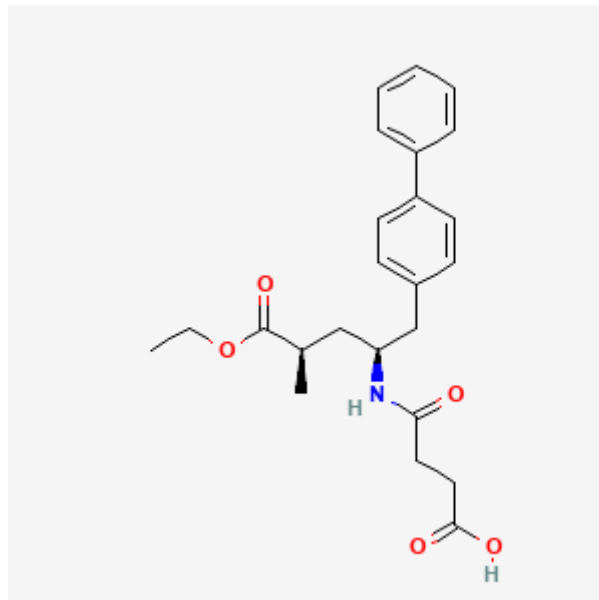
The desired analyte should be extracted from the biological fluid after it has been selected. This phase in the bioanalytical approach is more crucial since sample preparation can be done using several extraction methods. The preparation of the sample takes time and should be done carefully due to its importance. If the biological matrix is liquid, such as blood, plasma, or urine, liquid-liquid extraction is employed; if it is solid, liquid-solid extraction is utilized.

The following are the most well-known and widely utilized extraction methods

1. Protein precipitation method.
2. Liquid-liquid extraction method.(LLE)
3. Solid-phase extraction method.(SPE)

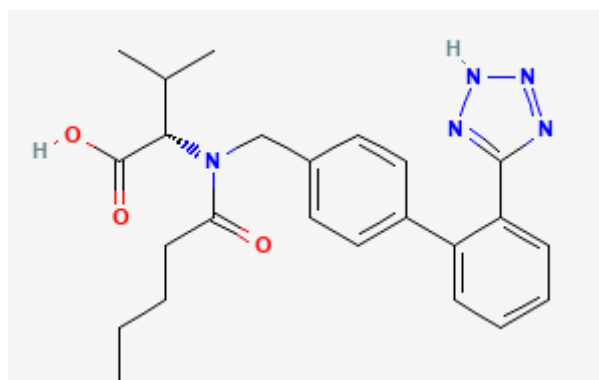
Sacubitril is a prodrug neprilysin inhibitor used in combination with valsartan to reduce the risk of cardiovascular events in patients with chronic heart failure (NYHA Class II-IV) and reduced ejection fraction. It was approved by the FDA after being given the status of priority review for on July 7, 2015. Sacubitril's active metabolite, LBQ657 inhibits neprilysin, a neutral endopeptidase that would typically cleave natriuretic peptides such as atrial natriuretic peptide (ANP), brain natriuretic peptide (BNP), and c-type natriuretic peptide (CNP). ANP and BNP are released under atrial and ventricle stress, which activate downstream receptors leading to vasodilation, natriuresis and diuresis. Under normal conditions, neprilysin breaks down other vasodilating peptides and

also vasoconstrictors such as angiotensin I and II, endothelin-1 and peptide amyloid beta-protein. Inhibition of neprilysin therefore leads to reduced breakdown and increased concentration of endogenous natriuretic peptides in addition to increased levels of vasoconstricting hormones such as angiotensin II.



**Figure 1 Chemical Structure of Sacubitril**

Valsartan is a monocarboxylic acid amide consisting of L-valine in which the amino hydrogens have been replaced by a pentanoyl and a [2'-(1H-tetrazol-5-yl)biphenyl]-4-ylmethyl group. It exhibits antihypertensive activity. It has a role as an antihypertensive agent, an angiotensin receptor antagonist, a xenobiotic and an environmental contaminant. It is a biphenylyltetrazole, a monocarboxylic acid amide and a monocarboxylic acid.



**Figure 2: Chemical Structure of Valsartan**

## Experimental Work:

**Materials and Chemical's Used:** 1. API: Sacubitril and Valsartan API was obtained as a gift sample from Akivris Pvt Limited , Kukatpally, Hyderabad, Internal Standard From Akivris Pharma pvt Ltd. Rabbit plasma: The Plasma was supplied from Akivris Pharma pvt Ltd., Hyderabad Chemicals used in the AR and HPLC grades are Used. All instrument used in the Work calibrated

# Methodology:

**Preparation of solutions:** - All solutions performed sonication, were stored at room temperature, and were utilized within 24 hours after their production. The next section outlines the methodology for preparing buffers and possible solutions.

## Preparation of diluent (v/v):

Based up on the solubility of the drugs, diluent was selected, Na<sub>2</sub>HPO<sub>4</sub> and acetonitrile taken in the ratio of 70:20.

## Preparation of Buffer (v/v):

**0.01N Na<sub>2</sub>HPO<sub>4</sub> Buffer:** Accurately weighed 1.41gm of Potassium dihydrogen Ortho phosphate in a 1000ml of Volumetric flask add about 900ml of milli-Q water added and degas to sonicate and finally make up the volume with water then PH adjusted to 4.8 with dil. Orthophosphoric acid solution.

## Preparation of stock solutions: -

**Standard Preparation:** Accurately Weighed and transferred 20mg of Sacubitril and 40 mg of Valsartan working Standards into a 100ml clean dry volumetric flask, add 3/4th volume of diluent, sonicated for 5 minutes and make up to the final volume with diluents, and filter the solution with Hplc nylon 0.5µm size filters (200 ppm/µg/ml of Sacubitril and 400 ppm/µg/ml of Valsartan).

**Standard Working Solution:** From the above stock solution 0.1ml, 0.2ml, 0.3ml, 0.8ml, 1.0ml, 1.2ml, 1.6ml and 2.0 ml was pipette and transferred to 8 individual of 10 ml volumetric flask and make up the volume up to the mark with diluent to produce 0.4 µg/ml, 0.8 µg/ml,

1.2µg/ml, 3.2 µg/ml, 4.0 µg/ml, 4.8 µg/ml, 6.4 µg/ml and 8.0µg/ml of Valsartan, 0.2 µg/ml, 0.4 µg/ml, 0.6µg/ml, 1.6 µg/ml, 2.0 µg/ml, 2.4 µg/ml, 3.2 µg/ml and 4.0µg/ml of Sacubitril.

## Stock solution of internal standard (Emtricitabine):

-

**Standard Preparation:** Accurately Weighed and transferred 50 mg of Emtricitabine working Standards into a 100ml clean dry volumetric flask, add 3/4th volume of diluent, sonicated for 5 minutes and make up to the final volume with diluents, and filter the solution with Hplc nylon 0.5µm size filters (500 ppm/µg/ml of Emtricitabine).

**Final concentration:** From the above solution, take 1ml of solution and spiking blank plasma with working stock dilutions of analyte to produce 50µg/ml ISD concentration.

## Preparation of calibration curve (CC) standards and quality control (QC) samples

Quality control (QC) samples were prepared by spiking blank plasma with working stock dilutions of analytes to produce 0.4 µg/ml (Standard-1/LLOQ), 0.8 µg/ml (Standard-2), 1.2 µg/ml (Standard-3/LQC), 3.2 µg/ml (Standard-4), 4.0 µg/ml (Standard-5/MQC), 4.8µg/ml (Standard-6), 6.4µg/ml (Standard-7/HQC) and 8.0µg/ml (Standard-8/ULOQ) of Valsartan and 0.2 µg/ml (Standard-1/LLOQ), 0.4 µg/ml (Standard-2), 0.6 µg/ml (Standard-3/LQC), 1.6 µg/ml (Standard-4), 2.0 µg/ml (Standard-5/MQC), 2.4µg/ml (Standard-6), 3.2µg/ml (Standard-7/HQC) and 4.0µg/ml (Standard-8/ULOQ) of Sacubitril.

**Table 1 CC spiking solutions of Sacubitril.**

Spiking solution	pippetout in ML	make up in ML	spiking in ML	make upon ML	final conc in ng/ml
Standard-1	0.1	10	0.25	2.5	200
Standard-2	0.2	10	0.25	2.5	400
Standard-3	0.3	10	0.25	2.5	600
Standard-4	0.8	10	0.25	2.5	1600
Standard-5	1.0	10	0.25	2.5	2000
Standard-6	1.2	10	0.25	2.5	2400
Standard-7	1.6	10	0.25	2.5	3200
Standard-8	2.0	10	0.25	2.5	4000

**Table 2 CC spiking solutions of Valsartan.**

Spiking solution	pippetout in ML	make up in ML	spiking in ML	make upon ML	final conc in ng/ml
Standard-1	0.1	10	0.25	2.5	400
Standard-2	0.2	10	0.25	2.5	800
Standard-3	0.3	10	0.25	2.5	1200
Standard-4	0.8	10	0.25	2.5	3200
Standard-5	1.0	10	0.25	2.5	4000
Standard-6	1.2	10	0.25	2.5	4800
Standard-7	1.6	10	0.25	2.5	6400
Standard-8	2.0	10	0.25	2.5	8000

**Table 3 Preparation of QC spiking solutions**

Spiking solution	pipetout in ML	make up in ML	spiking in ML	make upon ML	final conc in ng/ml of Sacubitril	Final conc in ng/ml of Valsartan.
LLOQ	0.1	10	0.25	2.5	200	400
LQC	0.3	10	0.25	2.5	600	1200
MQC	1.0	10	0.25	2.5	2000	4000
HQC	1.6	10	0.25	2.5	3200	6400
ULOQ	2.0	10	0.25	2.5	4000	8000

The solutions containing carbon compounds (CCs) and quality controls (QCs) were stored in a deepfreeze at a temperature of -20°C. A 0.25 mL amount of spiked samples was hermetically sealed and stored in several pre-labeled vials at a temperature of -20°C.

1. Common Core standards.
2. Quality control samples.
3. A blank sample including both spiking internal standard (IS) and analyte.
4. The standard zero sample involves adding an internal standard (IS) working solution to blank plasma during sample processing.
5. The aforementioned samples were subsequently utilized for conducting several validation experiments and assessing samples from animal studies.

#### **Extraction procedure for Bio-Sample analysis.**

The protein precipitation method was employed to extract Sacubitril and Valsartan from rat plasma, utilizing Emtricitabine as an internal standard (IS), in the subsequent procedure.

In this experiment, a total of 750µl of plasma was combined with 500µl of internal standard and an additional 250µl of Eluite. The mixture was subjected to a 15-second cyclomixing process. Following this, 1 ml of acetonitrile was added to the mixture, and the resulting solution was subjected to vortexing for a duration of 2 minutes. Subsequently, the solution was centrifuged at a speed of 3200 rpm for a period of 5 minutes, allowing for the collection of the supernatant sample. To ensure the removal of any impurities, the sample was then filtered using a polyvinylidene fluoride or polyvinylidene difluoride 0.45µ filter. Finally, 10 µL of the filtered sample was injected into the high-performance liquid chromatography (HPLC) system for further analysis.

#### **Data analysis**

The Analyst software version empower 2 was used to data acquisition and analysis, and additionally, a validated excel sheet was used to compute the statistics like mean, SD and %CV for analytical values generated during method validation.

#### **Validation Methodology in bioanalytical method: - System Suitability Parameter**

System Suitability test are performed that the test mixture is essential to check the specifications of a liquid chromatographic system. The System suitability testing limits are acceptance criteria that must be prior to sample analysis.

**Methodology:** The experiment involves the administration of six quality control samples of MQC from a single vial at the beginning of the study.

**Acceptance criteria:** The criteria acceptance accordingly as the % CV of the retention time (RT) should be  $\leq 2.00$  %, The % CV of the area ratio should be  $\leq 5.00$  %.

#### **Auto Sampler Carryover**

Carry-over is an alteration of a measured concentration due to residual analyte from a preceding sample that remains in the analytical instrument, during validation carry-over should be assessed by analyzing blank samples after the calibration standard at the ULOQ.

**Methodology:** The high-performance liquid chromatography (HPLC) technology was evaluated in order to investigate the potential occurrence of carry-over. The carryover was evaluated by injecting the following samples in a sequential manner.

- Blank refers to a solution that is used as a mobile phase and contains water as the solvent.
- Standard\_QC (ULOQ).
- Blank
- Standard\_QC (ULOQ)
- lower standard (AQ LLOQ)

**Acceptance criteria:** - The carryover area response in subsequent injections of RS or STD Bulk after aqueous or extracted ULOQ should be  $\leq 20.00$  % of the equivalent aqueous or extracted LLOQ standard area.

#### **Specificity and Screening of Biological matrix**

Specificity is the ability of a bioanalytical method to detect and differentiate the analyte from other substances, including its related substances (e.g., substances that are structurally similar to the analyte, metabolites, isomer, impurities, and degradation products formed during sample preparation or concomitant medications that are expected to be used in the treatment of patients with the intended indication).

**Methodology:** Specificity is determined by the injecting six samples of standard solution and the LLOQC sample solution and

**Acceptance criteria:** - check the % Interference Response of interfering peaks in STD Blk at the retention time of analyte should be  $\leq 20.00$  % of that in LLOQ and At least 80 % of the matrix lots (Biological

Sample) with intended anticoagulant should be within the acceptance criteria.

#### **Sensitivity**

Sensitivity is often interpreted as related to the detection/determination ability, LLOQ based on precision and accuracy (bias) data, this is probably the most practical approach and defines the LLOQ as the lowest concentration of a sample that can still be quantified with acceptable Limit.

**Methodology:** - the sensitivity is performed by injecting six injections of lower concentration of sample (LLOQ).

**Acceptance criteria:** -the acceptance criteria of sensitivity of LLOQ are At least 67 % (4 out of 6) of samples should be within 80.00-120.00 %.

#### **Matrix Factor evaluation**

A matrix effect is defined as an alteration of the analyte response due to interfering and often unidentified component(s) in the sample matrix. During method validation it is necessary to evaluate the matrix effect between different independent sources/lots.

**Methodology:** - The matrix effect should be evaluated by analyzing at least 3 replicates of **low and high QCs (LQC and HQC)**, each prepared using matrix from at least 6 different sources/lots.

**Acceptance criteria:** - The accuracy should be within  $\pm 15\%$  of the nominal concentration and the precision (per cent coefficient of variation (%CV)) should not be greater than 15% in all individual matrix sources/lots.

#### **Linearity (Calibration Curve and Range)**

the relationship between the nominal analyte concentration and the response of the analytical platform to the analyte, Calibration standards, prepared by spiking matrix with a known quantity of analyte, span the calibration range and comprise the calibration curve. Calibration standards should be prepared in the same biological matrix as the study samples.

**Methodology:** - The calibration range is obtained by injecting 6 concentrations of calibration standards not including blank and zero samples and establishing the concentration-response relationship by the sample regression model method

**Acceptance criteria:** - The % accuracy for all CC standards except of LLOQ (STD 1) standard should be within 85.00-115.00 %. The % accuracy for LLOQ standard should be within 80.00-120.00 %.

#### **Rugged Linearity**

Linearity ruggedness is a measure for the susceptibility of a method to small changes that might occur during routine analysis,

**Methodology:** -The calibration range is obtained by injecting 6 concentrations of calibration standards not including blank and zero samples and establishing the concentration-response relationship by the sample regression model method and

**Acceptance criteria:** - The % accuracy for all CC standards except of LLOQ (STD 1) standard should be within 85.00-115.00 %. The % accuracy for LLOQ standard should be within 80.00-120.00 %.

#### **Precision and Accuracy (Intra-day)**

Accuracy and precision should be determined by analysing the QCs within each run (within-run) and in different runs (between-run). Accuracy and precision should be evaluated using the same runs and data.

#### **Methodology:** -

The test is performed injecting the QC samples were injected 6 replicates at each qc concentration level in each analytical run.

**Acceptance criteria:** - The overall accuracy at each concentration level should be within  $\pm 15\%$  of the nominal concentration, except at the LLOQ, where it should be within  $\pm 20\%$ . The precision (%CV) of the concentrations determined at each level should not exceed 15%, except at the LLOQ, where it should not exceed 20%.

#### **Rugged Precision and Accuracy (Inter-Day)**

Accuracy and precision should be evaluated using the same runs and data.

**Methodology:** -The test is performed injecting the QC samples were injected 6 replicates at each qc concentration level in each analytical run

**Acceptance criteria:** the overall accuracy at each concentration level should be within  $\pm 15\%$  of the nominal concentration, except at the LLOQ, where it should be within  $\pm 20\%$ . The precision (%CV) of the concentrations determined at each level should not exceed 15%, except at the LLOQ, where it should not exceed 20%.

#### **Recovery**

Recovery was determined by measuring the peak areas obtained from prepared plasma samples with those extracted blank plasma spiked with standards containing the same area with known amount of Drug.

**Methodology:** -The recoveries for Sucubitril and Valsartan

at LQC, MQC and HQC levels the results demonstrated that the bioanalytical method had good extraction efficiency by injecting the six samples of LQC, MQC and HQC with the main drug and check the interference with unextracted and extracted

#### **Acceptance criteria:**

The % CV of recovery at each QC level should be  $\leq 15.00\%$ . The overall mean recovery % CV for all QC levels should be  $\leq 20.00\%$ .

#### **Recovery of Internal Standard**

The measuring the peak areas obtained from prepared plasma samples with those extracted blank plasma spiked with Internal Standards containing the same area with known amount of Drug.

**Methodology:** -The recoveries for IS at 6 replicates the results demonstrated that the bioanalytical method had good extraction efficiency by injecting the six samples and check the interference with unextracted and extracted.

**Acceptance criteria:** The % CV of recovery at each QC level should be  $\leq 15.00\%$ . The overall mean recovery % CV for all QC levels should be  $\leq 20.00\%$ .

#### Reinjection Reproducibility

Reproducibility of the method is assessed by replicate measurements of the QCs and is usually included in the assessment of precision and accuracy. However, if samples could be reinjected (e.g., in the case of instrument interruptions or other reasons such as equipment failure), reinjection reproducibility should be evaluated and included in the Validation Report or provided in the Bioanalytical Report of the study where it was conducted.

**Methodology:** -The reproducibility was performed by injecting the qc samples in 6 replicates and check the acceptance limits.

**Acceptance criteria:** The % mean accuracy for LQC, MQC and HQC samples should be within 85.00-115.00 % and for the LLOQ QC sample it should be within 80.00-120.00 %.

#### Stabilities

Stability evaluations should be carried out to ensure that every step taken during sample preparation, processing and analysis as well as the storage conditions used do not affect the concentration of the analyte.

**Methodology:** -The stability is assessed by long term stock solution stability and Matrix samples stability at -

**Optimized method:**

$28 \pm 5^\circ\text{C}$  for 37 days &  $-80 \pm 5^\circ\text{C}$ , stability testing is performed by injecting the QC samples of high and low concentrations(HQC and LQC) with taken biological matrix

**Acceptance criteria:** The mean concentration at each QC level should be within  $\pm 15\%$  of the nominal.

## RESULTS AND DISCUSSIONS

### METHOD DEVELOPMENT

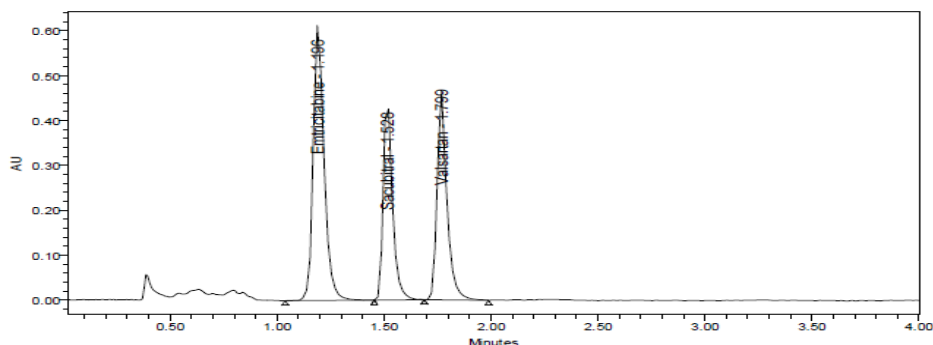
Based on drug solubility and  $P_{ka}$  Value following conditions has been used to develop the method estimation of Sacubitril and Valsartan as per current ICH guidelines.

#### Optimization of the chromatographic conditions

For developing the method for the assay of Sacubitril and Valsartan, a systematic study of the effect of various factors was undertaken by varying one parameter at a time and keeping all the other conditions constant. The following studies were conducted for this purpose. A hy\_purity advance C18column was chosen as the stationary phase for this study. The mobile phase and the flow rate in order to get sharp peaks and base line separation of the components, the author has carried out a number of experiments by varying the commonly used solvents, their compositions and flow rate. To effect ideal separation of the drug under isocratic conditions, mixtures of commonly used solvents like water, methanol and acetonitrile with or without buffers in different combinations were tested as mobile phases on a C18 stationary phase. A binary mixture of acetonitrile and 0.01N Sodium dihydrogen ortho phosphate buffer in a ratio of 70:20 v/v was proved to be the most suitable of all the combinations since the chromatographic peaks obtained were well defined and resolved and free from tailing. A mobile phase flow rate of 0.3mL/min was found to be suitable.

**Table4 : Chromatographic conditions**

Mobile phase	: Acetonitrile: Na2HPO4 (20:70)
Flow rate	: 0.3ml/min
Column	: CHS (50mm x 2.1 mm, 1.8 $\mu$ )
Detector wavelength	: 260nm
Column temperature	: 42 $^\circ\text{C}$
Injection volume	: 1.0 $\mu\text{L}$
Run time	: 4.0min



**Fig no 15: Chromatogram of Optimized**



**Table5 : Observation of Optimized Chromatogram**

	Peak Name	RT	Area	USP Plate Count	USP Resolution	USP Tailing
1	Entricitabine	1.196	97586	2465.5		1.2
2	Sacubitril	1.528	11465	4572.5	3.5	1.2
3	Valsartan	1.799	67765	6263.5	3.5	1.2

**Observation:** Sacubitril and Valsartan and Internal Standard were eluted at 1.528 min, 1.788min respectively and 1.196 min(IS) with good resolution. Plate count and tailing factor was very satisfactory, so this method was optimized and to be validated. Drugs were eluted with good retention time, resolution; all the system suitable parameters like Plate count and Tailing factor were within the limits

#### METHOD VALIDATION

##### System suitability of Sacubitril and Valsartan

This system suitability method is intended to guarantee that the UPLC system is working in such a way that correct and reproducible data may be submitted to regulatory agencies with confidence. This procedure includes signal stability, carryover, and instrument response tests.

**Table 6 : System Suitability of Sacubitril and Valsartan**

Sample Name	File Name	Analyte Area	Analyte RT (min)	ISTD Area	ISTD RT (min)	Area Ratio
AQ MQC		34278	4.28	97580	2.565	0.3513
AQ MQC		34336	4.30	97623	2.565	0.3517
AQ MQC		34380	4.36	97593	2.566	0.3523
AQ MQC		34425	4.37	97720	2.571	0.3523
AQ MQC		34486	4.37	97815	2.594	0.3526
AQ MQC		34538	4.38	97872	2.597	0.3529
MEAN			4.346		2.576	0.35217
SD			0.0434		0.0150	0.000581
%CV			1.00		0.58	0.17
<b>System Suitability</b>						
Sample Name	File Name	Analyte Area	Analyte RT (min)	ISTD Area	ISTD RT (min)	Area Ratio
AQ MQC		5823	3.11	97580	2.565	0.0597
AQ MQC		5890	3.13	97623	2.565	0.0603
AQ MQC		5763	3.13	97593	2.566	0.0591
AQ MQC		5823	3.13	97720	2.571	0.0596
AQ MQC		5862	3.18	97815	2.594	0.0599
AQ MQC		5792	3.19	97872	2.597	0.0592
MEAN			3.146		2.576	0.05963
SD			0.0316		0.0150	0.000475
%CV			1.00		0.58	0.80

**Discussion:** plate count, tailing factor, resolution of Sacubitril and Valsartan was According to ICH guidelines plate count should be more than 2000, tailing factor should be less than 2 and resolution must be more than 2. All the system suitable parameters were passed and were within the limits. The % CV of the retention time (RT) should be  $\leq 2.00$  %.

#### Auto sampler carryover of Sacubitril and Valsartan

The carryover was tracked back to the injection valve and eradicated by converting from a partial loop injection to a full loop injection, which allowed more effective cleansing of the sample flow channel. The

UPLC system's susceptibility to carryover was shown to be dependent on the detection method's absolute sensitivity and the mass of analyte injected at the assay's lower limit of quantitation (LLOQ).

**Table 7 : Auto sampler carryover of Sacubitril and Valsartan**

Parameters	Peak Area		% Carryover	
	Drug	ISTD	Drug	ISTD
<b>Unextracted samples</b>				
RS	0	0	N/A	N/A
AQ ULOQ	69523	98362	<b>0.00</b>	<b>0.00</b>
RS	0	0		
AQ LLOQ	1792	97980	N/A	N/A
<b>Extracted samples</b>				
STD Blk	0	0	N/A	N/A
ULOQ	68449	97570	<b>0.00</b>	<b>0.00</b>
STD Blk	0	0		
LLOQ	1709	97532	N/A	N/A
Parameters	Peak Area		% Carryover	
	Drug	ISTD	Drug	ISTD
<b>Unextracted samples</b>				
RS	0	0	N/A	N/A
AQ ULOQ	22986	98623	<b>0.00</b>	<b>0.00</b>
RS	0	0		
AQ LLOQ	594	98485	N/A	N/A
<b>Extracted samples</b>				
STD Blk	0	0	N/A	N/A
ULOQ	22720	97532	<b>0.00</b>	<b>0.00</b>
STD Blk	0	0		
LLOQ	577	97539	N/A	N/A

**Discussion:** - The area obtained is less than 20 % of extracted LLOQ standard area to unextracted area by injected of replicate manner

#### Specificity and Screening of Biological Matrix

Specificity is the ability to assess unequivocally the analyte in the presence of components which may be expected to be present

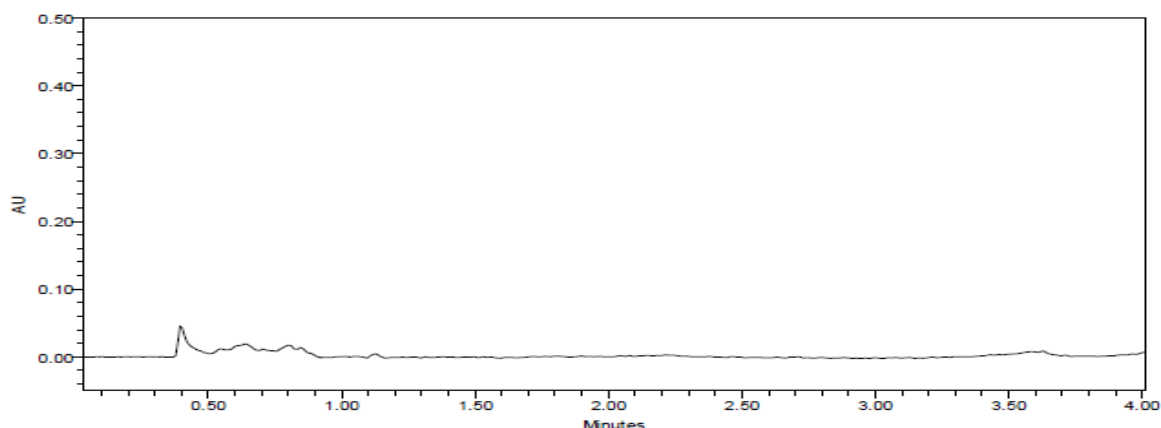
**Table 8 Specificity and Screening of Biological Matrix of Sacubitril and Valsartan**

S.No.	Parameters	Response		% Interference		Pass/Fail
		Drug	ISTD	Drug	ISTD	
1	STD Blk1	0	0	0.00	0.00	Pass
2	LLOQ1	1709	97532			
3	STD Blk2	0	0	0.00	0.00	Pass
4	LLOQ2	1725	97625			
5	STD Blk3	0	0	0.00	0.00	Pass
6	LLOQ3	1718	97680			
7	STD Blk4	0	0	0.00	0.00	Pass
8	LLOQ4	1735	97762			
9	STD Blk5	0	0	0.00	0.00	Pass
10	LLOQ5	1738	97846			
11	STD Blk6	0	0	0.00	0.00	Pass
12	LLOQ6	1715	97558			
S.No.	Parameters	Response		% Interference		Pass/Fail
		Drug	ISTD	Drug	ISTD	
1	STD Blk1	0	0	0.00	0.00	Pass

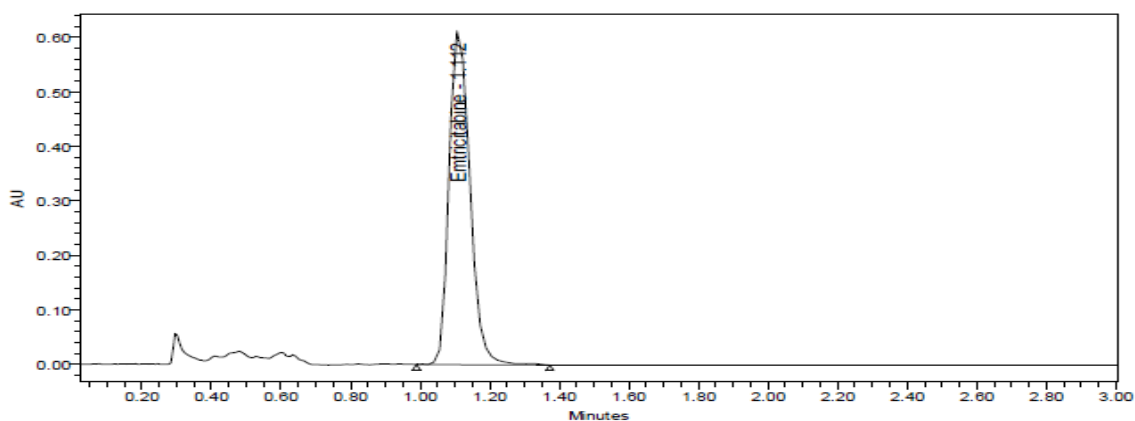


2	LLOQ1	577	97577			
3	STD Blk2	0	0	0.00	0.00	Pass
4	LLOQ2	583	97862			
5	STD Blk3	0	0	0.00	0.00	Pass
6	LLOQ3	592	97965			
7	STD Blk4	0	0	0.00	0.00	Pass
8	LLOQ4	586	98120			
9	STD Blk5	0	0	0.00	0.00	Pass
10	LLOQ5	568	97653			
11	STD Blk6	0	0	0.00	0.00	Pass
12	LLOQ6	572	97590			

**Observation:** We did not find and interfering peaks in blank and placebo at retention times of these drugs in this method. So this method was said to be specific.



**Fig.16 Representative Chromatogram of a Blank Plasma Sample**



**Fig. 17 Representative Chromatogram of Blank Plasma with Internal Standard Sample**

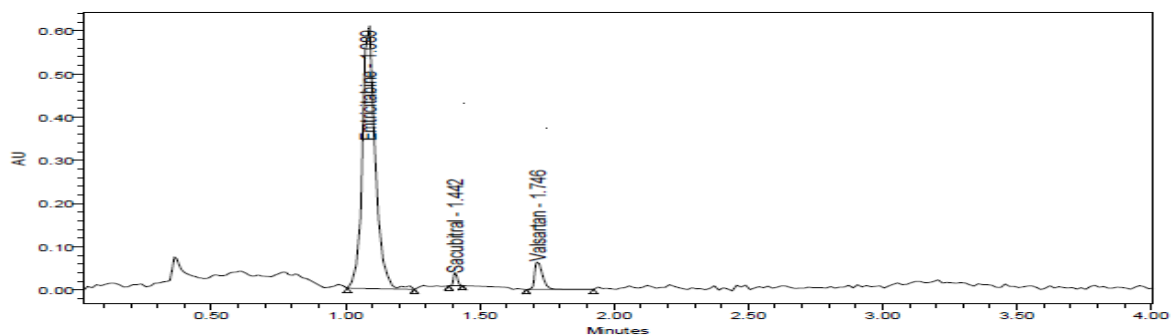
**Discussion** – The response areas obtained of analyte and internal standard are less than 20% and 5 % of LLoq Area. We did not find and interfering peaks in blank and placebo at retention times of these drugs in this method. So this method was said to be specific

#### **Sensitivity**

A sensitivity is defined as “the lowest analyte concentration that can be measured with acceptable accuracy and precision i.e., LLOQ

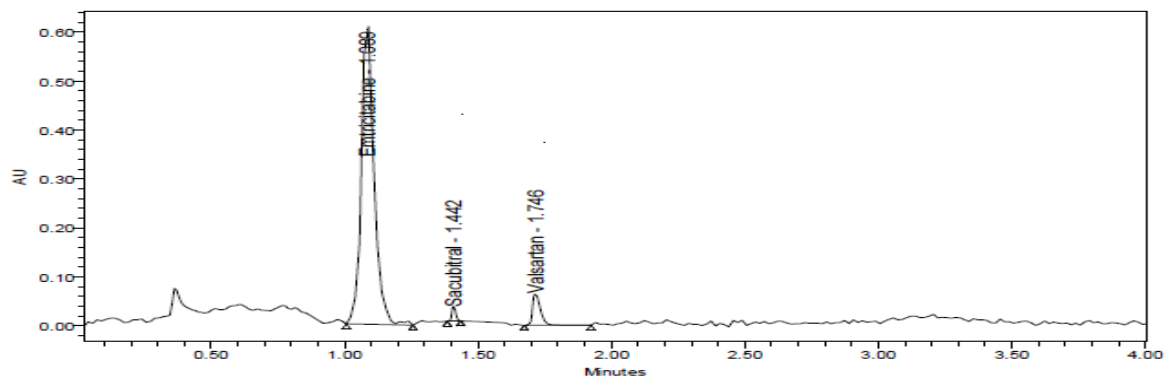
**Table 9 Sensitivity of Sacubitril and Valsartan**

Sensitivity of Sacubitril	
S No.	LLOQ
	Nominal Concentration (ng/mL)
	300.000
	Nominal Concentration Range (ng/mL)
	(240.000-360.000)
	Calculated Concentration (ng/mL)
	298.000
	302.000
	306.000
	295.000
	301.000
	290.000
	6
	298.6667
	5.64506
	1.89
	99.56
Sensitivity of Valsartan	
S No.	LLOQ
	Nominal Concentration (ng/mL)
	200.000
	Nominal Concentration Range (ng/mL)
	(160.000-240.000)
	Calculated Concentration (ng/mL)
	198.000
	196.000
	200.000
	203.000
	205.000
	198.000
	6
	200.0000
	3.40588
	1.70
	100.00



**Figure 18: Sensitivity Chromatogram.**

**Discussion:** - The LLOQ concentration was found between 80 -120 % and % Coefficient of variation found to be 1.87% and 1.70% of Valsartan and Sacubitril and Mean of 6 injections was found to be 99.56% & 100.00 % of Valsartan and Sacubitril within the acceptance limits. As the limit of Sensitivity % CV was less than “20%” the system Sensitivity was passed in this method.



**Figure 19: LLOQ Chromatogram**

**Matrix factor evaluation**

**Table 10 Matrix factor evaluation for Sacubitril (absence of matrix factor)**

Matrix Effect			
S. No.	Plasma Lot No.	HQC	LQC
		Nominal Concentration (ng/mL)	
		4800.000	600.000
		Nominal Concentration Range (ng/mL)	
		(4,080.000-5,520.000)	(510.000-690.000)
		Calculated Concentration (ng/mL)	
1	LOT1	4830.000	578.000
		4750.000	655.000
		4871.000	620.000
2	LOT2	4701.000	601.000
		4890.000	574.000
		4819.000	565.000
3	LOT3	4782.000	590.000
		4825.000	599.000
		4875.000	602.000
4	LOT4	4966.000	555.000
		4875.000	609.000
		4850.000	596.000
5	LOT5	4812.000	685.000
		4810.000	645.000
		4789.000	612.000
6	LOT6	4880.000	627.000
		4865.000	630.000
		4820.000	615.000
n		18	18
Mean		4833.8889	608.7778
SD		59.24812	32.44825
% CV		1.23	5.33
% Mean Accuracy		100.71	101.46
No. of QC Failed		0	0

**Table 11 : Matrix factor evaluation for Sacubitril**

S. No.	Plasma Lot No.	HQC	LQC
		Nominal Concentration (ng/mL)	
		3200.000	600.000
		Nominal Concentration Range (ng/mL)	
		(2,720.000-3,680.000)	(510.000-690.000)
1	LOT1	Calculated Concentration (ng/mL)	
		3198.00	599.00
		3210.00	605.00
		3171.00	601.00
2	LOT2	3205.00	566.00
		3201.00	617.00
		3183.00	591.00
3	LOT3	3211.00	613.00
		3218.00	621.00
		3233.00	632.00
4	LOT4	3189.00	628.00
		3185.00	616.00
		3285.00	598.00
5	LOT5	3175.00	652.00
		3089.00	618.00
		3101.00	605.00
6	LOT6	3088.00	599.00
		3199.00	618.00
		3179.00	617.00
<b>n</b>		18	18
<b>Mean</b>		3184.4444	610.8889
<b>SD</b>		49.55238	18.41320
<b>% CV</b>		1.56	3.01
<b>% Mean Accuracy</b>		99.51	101.81
<b>No. of QC Failed</b>		0	0

**Discussion-** The Evaluation of Matrix by injecting the QC samples of high and low concentrations in 6 lots the %Mean obtained was 100.71% and 101.46 of HQC and LOQ of Valsartan & 99.51% and 101.81% of HQC and LOQ of Sacubitril and % CV obtained are 1.23% and 5.33% of HQC and LOQ of Valsartan & % CV obtained are 1.56% and 3.01% of HQC and LOQ of Sacubitril. As the limit of CV was, less than “20%” the system Matrix was passed in this method.

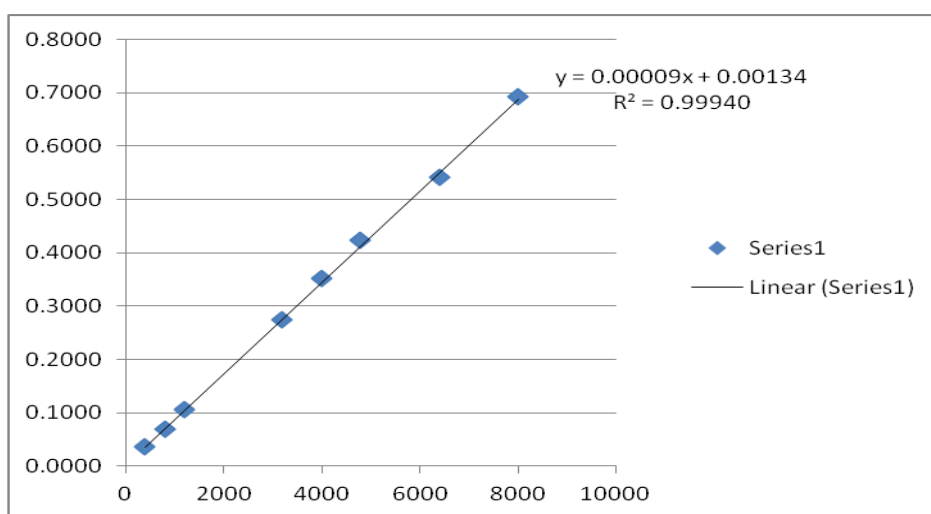
**Linearity:**

**Table 12: Linearity of Sacubitril and Valsartan**

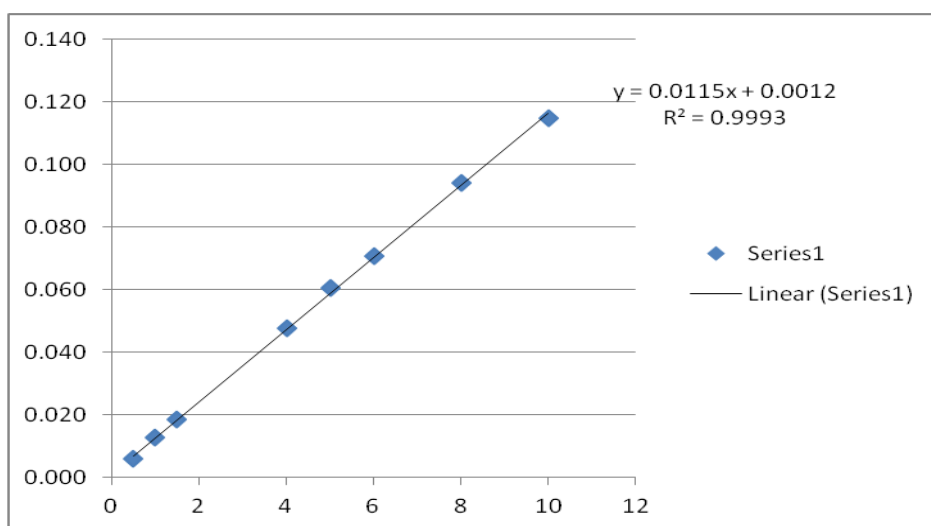
	STD1	STD2	STD3	STD4	STD5	STD6	STD7	STD8
	Nominal Concentration (ng/mL)							
	300.000	600.000	900.000	2400.000	3000.000	3600.000	4800.000	6000.000
	Nominal Concentration Range (ng/mL)							
	(240.000-360.000)	(510.000-690.000)	(765.000-1,035.000)	(2,040.000-2,760.000)	(2,550.000-3,450.000)	(3,060.000-4,140.000)	(4,080.000-5,520.000)	(5,100.000-6,900.000)
	Back Calculated Concentration (ng/mL)							
P&A1	290.000	590.000	916.000	2399.00	2999.00	3697.00	4790.00	6001.00
P&A2	295.000	595.000	905.000	2419.00	3010.00	3602.00	4894.00	5999.00
P&A3	301.000	605.000	909.000	2401.00	3000.00	3670.00	4808.00	6010.00
<b>n</b>	3	3	3	3	3	3	3	3
<b>Mean</b>	295.3333	596.6667	910.0000	2406.3333	3003.0000	3656.3333	4830.6667	6003.3333
<b>SD</b>	5.50757	7.63763	5.56776	11.01514	6.08276	48.95236	55.58177	5.85947
<b>%CV</b>	1.86	1.28	0.61	0.46	0.20	1.34	1.15	0.10
<b>% Mean Accuracy</b>	98.44	99.44	101.11	100.26	100.10	101.56	100.64	100.06

**Table 13: Linearity of Valsartan**

	STD1	STD2	STD3	STD4	STD5	STD6	STD7	STD8
	Nominal Concentration (ng/mL)							
	200.000	400.000	600.000	1600.000	2000.000	2400.000	3200.000	4000.000
	Nominal Concentration Range (ng/mL)							
	(160.000-240.000)	(340.000-460.000)	(510.000-690.000)	(1,360.000-1,840.000)	(1,700.000-2,300.000)	(2,040.000-2,760.000)	(2,720.000-3,680.000)	(3,400.000-4,600.000)
	Back Calculated Concentration (ng/mL)							
P&A1	189.000	402.000	595.000	1589.000	1989.000	2382.000	3125.000	3989.000
P&A2	211.000	389.000	598.000	1625.000	2089.000	2474.000	3189.000	3992.000
P&A3	195.000	405.000	609.000	1601.000	1985.000	2401.000	3219.000	4018.000
n	3	3	3	3	3	3	3	3
Mean	198.3333	398.6667	600.6667	1605.0000	2021.0000	2419.0000	3177.6667	3999.6667
SD	11.37248	8.50490	7.37111	18.33030	58.92368	48.56954	48.01389	15.94783
%CV	5.73	2.13	1.23	1.14	2.92	2.01	1.51	0.40
% Mean Accuracy	99.17	99.67	100.11	100.31	101.05	100.79	99.30	99.99



**Figure Representative Calibration Curve for sacubitril**



**Fig. 20: Representative Calibration Curve for valsartan**

**Discussion** :- Calibration was found to be linear over the concentration range of 0.15 to 6  $\mu\text{g/ml}$ . The coefficient correlation ( $r^2$ ) value was found consistently greater than 0.999 in all the cases. This indicating linearity of results and an excellent correlation between peak area ratios for each concentration of analytes.

**Precision and accuracy (intra-day runs of Sacubitril and Valsartan)**

**Table 14 : precision data for intra-day runs of Sacubitril and Valsartan**

<b>Precision and Accuracy of Sacubitril</b>				
	<b>HQC</b>	<b>MQC1</b>	<b>LQC</b>	<b>LLOQ QC</b>
	<b>Nominal Concentration (ng/mL)</b>			
	<b>4800.000</b>	<b>3000.000</b>	<b>600.000</b>	<b>300.000</b>
	<b>Nominal Concentration Range (ng/mL)</b>			
	<b>(4,080.000-5,520.000)</b>	<b>(2,550.000-3,450.000)</b>	<b>(510.000-690.000)</b>	<b>(240.000-360.000)</b>
	<b>Back Calculated Concentration (ng/mL)</b>			
	<b>4799.00</b>	<b>2995.00</b>	<b>599.000</b>	<b>295.000</b>
	<b>4801.00</b>	<b>3001.00</b>	<b>539.000</b>	<b>299.000</b>
	<b>4820.00</b>	<b>3010.00</b>	<b>589.000</b>	<b>300.000</b>
	<b>4789.00</b>	<b>2920.00</b>	<b>679.000</b>	<b>310.000</b>
	<b>4800.00</b>	<b>2990.00</b>	<b>607.000</b>	<b>298.000</b>
	<b>4810.00</b>	<b>2989.00</b>	<b>610.000</b>	<b>297.000</b>
<b>n</b>	<b>6</b>	<b>6</b>	<b>6</b>	<b>6</b>
<b>Mean</b>	<b>4803.1667</b>	<b>2984.1667</b>	<b>603.8333</b>	<b>299.8333</b>
<b>SD</b>	<b>10.60974</b>	<b>32.38158</b>	<b>45.04405</b>	<b>5.26941</b>
<b>%CV</b>	<b>0.22</b>	<b>1.09</b>	<b>7.46</b>	<b>1.76</b>
<b>% Mean Accuracy</b>	<b>100.07</b>	<b>99.47</b>	<b>100.64</b>	<b>99.94</b>
	<b>4896.00</b>	<b>2888.00</b>	<b>598.000</b>	<b>299.000</b>
	<b>4900.00</b>	<b>2999.00</b>	<b>602.000</b>	<b>292.000</b>
	<b>4995.00</b>	<b>3001.00</b>	<b>612.000</b>	<b>300.000</b>
	<b>4940.00</b>	<b>2889.00</b>	<b>590.000</b>	<b>301.000</b>
	<b>4811.00</b>	<b>3011.00</b>	<b>596.000</b>	<b>299.000</b>
	<b>4985.00</b>	<b>3000.00</b>	<b>601.000</b>	<b>310.000</b>
<b>n</b>	<b>6</b>	<b>6</b>	<b>6</b>	<b>6</b>
<b>Mean</b>	<b>4921.1667</b>	<b>2964.6667</b>	<b>599.8333</b>	<b>300.1667</b>
<b>SD</b>	<b>67.96887</b>	<b>59.15629</b>	<b>7.33258</b>	<b>5.77639</b>
<b>%CV</b>	<b>1.38</b>	<b>2.00</b>	<b>1.22</b>	<b>1.92</b>



<b>% Mean Accuracy</b>	<b>102.52</b>	<b>98.82</b>	<b>99.97</b>	<b>100.06</b>
	<b>4800.00</b>	<b>2892.00</b>	<b>591.000</b>	<b>289.000</b>
	<b>4920.00</b>	<b>2985.00</b>	<b>604.000</b>	<b>299.000</b>
	<b>4899.00</b>	<b>3001.00</b>	<b>589.000</b>	<b>307.000</b>
	<b>4888.00</b>	<b>3020.00</b>	<b>607.000</b>	<b>305.000</b>
	<b>4874.00</b>	<b>2986.00</b>	<b>579.000</b>	<b>300.000</b>
	<b>4985.00</b>	<b>3110.00</b>	<b>600.000</b>	<b>301.000</b>
<b>n</b>	<b>6</b>	<b>6</b>	<b>6</b>	<b>6</b>
<b>Mean</b>	<b>4894.3333</b>	<b>2999.0000</b>	<b>595.0000</b>	<b>300.1667</b>
<b>SD</b>	<b>60.42075</b>	<b>70.11419</b>	<b>10.56409</b>	<b>6.27429</b>
<b>%CV</b>	<b>1.23</b>	<b>2.34</b>	<b>1.78</b>	<b>2.09</b>
<b>% Mean Accuracy</b>	<b>101.97</b>	<b>99.97</b>	<b>99.17</b>	<b>100.06</b>
<b>Between Batch Precision and Accuracy</b>				
<b>n</b>	<b>18</b>	<b>18</b>	<b>18</b>	<b>18</b>
<b>Mean</b>	<b>4872.8889</b>	<b>2982.6111</b>	<b>599.5556</b>	<b>300.0556</b>
<b>SD</b>	<b>71.87644</b>	<b>54.70685</b>	<b>25.67494</b>	<b>5.43921</b>
<b>%CV</b>	<b>1.48</b>	<b>1.83</b>	<b>4.28</b>	<b>1.81</b>
<b>% Mean Accuracy</b>	<b>101.52</b>	<b>99.42</b>	<b>99.93</b>	<b>100.02</b>
<b>Precision and Accuracy of Valsartan</b>				
	<b>HQC</b>	<b>MQC1</b>	<b>LQC</b>	<b>LLOQ QC</b>
	<b>Nominal Concentration (ng/mL)</b>			
	<b>4800.000</b>	<b>3000.000</b>	<b>600.000</b>	<b>300.000</b>
	<b>Nominal Concentration Range (ng/mL)</b>			
	<b>(4,080.000-5,520.000)</b>	<b>(2,550.000-3,450.000)</b>	<b>(510.000-690.000)</b>	<b>(240.000-360.000)</b>
	<b>Back Calculated Concentration (ng/mL)</b>			
	<b>4799.00</b>	<b>2995.00</b>	<b>599.000</b>	<b>295.000</b>

	4801.00	3001.00	539.000	299.000
	4820.00	3010.00	589.000	300.000
	4789.00	2920.00	679.000	310.000
	4800.00	2990.00	607.000	298.000
	4810.00	2989.00	610.000	297.000
<b>n</b>	<b>6</b>	<b>6</b>	<b>6</b>	<b>6</b>
<b>Mean</b>	<b>4803.1667</b>	<b>2984.1667</b>	<b>603.8333</b>	<b>299.8333</b>
<b>SD</b>	<b>10.60974</b>	<b>32.38158</b>	<b>45.04405</b>	<b>5.26941</b>
<b>%CV</b>	<b>0.22</b>	<b>1.09</b>	<b>7.46</b>	<b>1.76</b>
<b>% Mean Accuracy</b>	<b>100.07</b>	<b>99.47</b>	<b>100.64</b>	<b>99.94</b>
	4896.00	2888.00	598.000	299.000
	4900.00	2999.00	602.000	292.000
	4995.00	3001.00	612.000	300.000
	4940.00	2889.00	590.000	301.000
	4811.00	3011.00	596.000	299.000
	4985.00	3000.00	601.000	310.000
<b>n</b>	<b>6</b>	<b>6</b>	<b>6</b>	<b>6</b>
<b>Mean</b>	<b>4921.1667</b>	<b>2964.6667</b>	<b>599.8333</b>	<b>300.1667</b>
<b>SD</b>	<b>67.96887</b>	<b>59.15629</b>	<b>7.33258</b>	<b>5.77639</b>
<b>%CV</b>	<b>1.38</b>	<b>2.00</b>	<b>1.22</b>	<b>1.92</b>
<b>% Mean Accuracy</b>	<b>102.52</b>	<b>98.82</b>	<b>99.97</b>	<b>100.06</b>
	4800.00	2892.00	591.000	289.000
	4920.00	2985.00	604.000	299.000
	4899.00	3001.00	589.000	307.000
	4888.00	3020.00	607.000	305.000
	4874.00	2986.00	579.000	300.000
	4985.00	3110.00	600.000	301.000
<b>n</b>	<b>6</b>	<b>6</b>	<b>6</b>	<b>6</b>
<b>Mean</b>	<b>4894.3333</b>	<b>2999.0000</b>	<b>595.0000</b>	<b>300.1667</b>
<b>SD</b>	<b>60.42075</b>	<b>70.11419</b>	<b>10.56409</b>	<b>6.27429</b>
<b>%CV</b>	<b>1.23</b>	<b>2.34</b>	<b>1.78</b>	<b>2.09</b>
<b>% Mean Accuracy</b>	<b>101.97</b>	<b>99.97</b>	<b>99.17</b>	<b>100.06</b>
<b>Between Batch Precision and Accuracy</b>				

<b>n</b>	<b>18</b>	<b>18</b>	<b>18</b>	<b>18</b>
<b>Mean</b>	<b>4872.8889</b>	<b>2982.6111</b>	<b>599.5556</b>	<b>300.0556</b>
<b>SD</b>	<b>71.87644</b>	<b>54.70685</b>	<b>25.67494</b>	<b>5.43921</b>
<b>%CV</b>	<b>1.48</b>	<b>1.83</b>	<b>4.28</b>	<b>1.81</b>
<b>% Mean Accuracy</b>	<b>101.52</b>	<b>99.42</b>	<b>99.93</b>	<b>100.02</b>

**Rugged Precision and Accuracy (inter-day runs of Sacubitril and Valsartan)**

**Table 15 : precision data for inter-day runs of Sacubitril and Valsartan**

<b>Ruggedness Precision and Accuracy</b>				
	<b>HQC</b>	<b>MQC1</b>	<b>LQC</b>	<b>LLOQ QC</b>
	<b>Nominal Concentration (ng/mL)</b>			
	<b>3200.000</b>	<b>2000.000</b>	<b>600.000</b>	<b>200.000</b>
	<b>Nominal Concentration Range (ng/mL)</b>			
	<b>(2,720.000-3,680.000)</b>	<b>(1,700.000-2,300.000)</b>	<b>(510.000-690.000)</b>	<b>(160.000-240.000)</b>
	<b>Calculated Concentration (ng/mL)</b>			
<b>Different Column</b>	<b>3199.00</b>	<b>1968.00</b>	<b>592.00</b>	<b>199.00</b>
	<b>3151.00</b>	<b>2025.00</b>	<b>601.00</b>	<b>201.00</b>
	<b>3191.00</b>	<b>1915.00</b>	<b>595.00</b>	<b>193.00</b>
	<b>3209.00</b>	<b>1968.00</b>	<b>618.00</b>	<b>191.00</b>
	<b>3221.00</b>	<b>1989.00</b>	<b>619.00</b>	<b>221.00</b>
	<b>3211.00</b>	<b>1985.00</b>	<b>609.00</b>	<b>197.00</b>
<b>n</b>	<b>6</b>	<b>6</b>	<b>6</b>	<b>6</b>
<b>Mean</b>	<b>3197.0000</b>	<b>1975.0000</b>	<b>605.6667</b>	<b>200.3333</b>
<b>SD</b>	<b>24.78709</b>	<b>36.03887</b>	<b>11.51810</b>	<b>10.78270</b>
<b>% CV</b>	<b>0.78</b>	<b>1.82</b>	<b>1.90</b>	<b>5.38</b>
<b>% Mean Accuracy</b>	<b>99.91</b>	<b>98.75</b>	<b>100.94</b>	<b>100.17</b>
<b>Different Analyst</b>	<b>3188.00</b>	<b>2065.00</b>	<b>591.00</b>	<b>198.00</b>
	<b>3114.00</b>	<b>1951.00</b>	<b>599.00</b>	<b>218.00</b>
	<b>3268.00</b>	<b>1978.00</b>	<b>608.00</b>	<b>196.00</b>
	<b>3211.00</b>	<b>2011.00</b>	<b>601.00</b>	<b>204.00</b>
	<b>3232.00</b>	<b>2026.00</b>	<b>615.00</b>	<b>192.00</b>
	<b>3189.00</b>	<b>1971.00</b>	<b>617.00</b>	<b>198.00</b>
<b>n</b>	<b>6</b>	<b>6</b>	<b>6</b>	<b>6</b>
<b>Mean</b>	<b>3200.3333</b>	<b>2000.3333</b>	<b>605.1667</b>	<b>201.0000</b>
<b>SD</b>	<b>51.82535</b>	<b>41.82663</b>	<b>10.00833</b>	<b>9.18695</b>
<b>% CV</b>	<b>1.62</b>	<b>2.09</b>	<b>1.65</b>	<b>4.57</b>
<b>% Mean Accuracy</b>	<b>100.01</b>	<b>100.02</b>	<b>100.86</b>	<b>100.50</b>
	<b>HQC</b>	<b>MQC1</b>	<b>LQC</b>	<b>LLOQ QC</b>
	<b>Nominal Concentration (ng/mL)</b>			
	<b>4800.000</b>	<b>3000.000</b>	<b>600.000</b>	<b>300.000</b>
	<b>Nominal Concentration Range (ng/mL)</b>			
	<b>(4,080.000-5,520.000)</b>	<b>(2,550.000-3,450.000)</b>	<b>(510.000-690.000)</b>	<b>(240.000-360.000)</b>
	<b>Calculated Concentration (ng/mL)</b>			
<b>Different Column</b>	<b>4795.000</b>	<b>2995.000</b>	<b>595.000</b>	<b>289.000</b>
	<b>4800.000</b>	<b>2889.000</b>	<b>586.000</b>	<b>299.000</b>
	<b>4770.000</b>	<b>3000.000</b>	<b>595.000</b>	<b>300.000</b>
	<b>4885.000</b>	<b>3109.000</b>	<b>605.000</b>	<b>302.000</b>
	<b>4798.000</b>	<b>2997.000</b>	<b>601.000</b>	<b>292.000</b>
	<b>4810.000</b>	<b>2920.000</b>	<b>610.000</b>	<b>299.000</b>
<b>n</b>	<b>6</b>	<b>6</b>	<b>6</b>	<b>6</b>
<b>Mean</b>	<b>4809.6667</b>	<b>2985.0000</b>	<b>598.6667</b>	<b>296.8333</b>
<b>SD</b>	<b>39.22584</b>	<b>76.53235</b>	<b>8.50098</b>	<b>5.11534</b>
<b>% CV</b>	<b>0.82</b>	<b>2.56</b>	<b>1.42</b>	<b>1.72</b>
<b>% Mean Accuracy</b>	<b>100.20</b>	<b>99.50</b>	<b>99.78</b>	<b>98.94</b>
<b>Different Analyst</b>	<b>4820.000</b>	<b>2988.000</b>	<b>597.000</b>	<b>288.000</b>

	4787.000	2992.000	589.000	291.000
	4777.000	2887.000	590.000	298.000
	4808.000	3085.000	610.000	310.000
	4775.000	3100.000	620.000	302.000
	4790.000	3108.000	590.000	308.000
<b>n</b>	6	6	6	6
<b>Mean</b>	4792.8333	3026.6667	599.3333	299.5000
<b>SD</b>	17.76982	86.71716	12.86338	8.89382
<b>% CV</b>	0.37	2.87	2.15	2.97
<b>% Mean Accuracy</b>	99.85	100.89	99.89	99.83

**Discussion:-** The intraday and inter day accuracy and precision was assessed by analysing six replicates at five different QC levels like LLOQ, LQC, MQC and HQC. Accuracy and precision method performance was evaluated by determined by six replicate analyses for Sacubitril and Valsartan at four concentration levels (LLOQ), (LQC), (MQC) and HQC The intra-day and inter day accuracy of plasma samples were assessed and excellent mean % accuracy was obtained with range varied from 99.96-100.35%, and 98.99%-99.93 % for intraday and 99.06%-100.02 and 98.91%-100.24 for inter day respectively. The precision (%CV) of the analytes and plasma samples were calculated and found to be 0.38-11.54% and 0.76%-13.49% for intraday and 0.66%-14.23% and 0.77 %-13.16% for inter day respectively.

#### Recovery of Sacubitril and Valsartan-

**Table 16 : Recovery of Sacubitril and Valsartan**

Recovery – Analyte for Sacubitril						
S. No.	HQC		MQC1		LQC	
	Un extracted Response	Extracted Response	Un extracted Response	Extracted Response	Un extracted Response	Extracted Response
1	18809	18237	11894	11482	1792	1740
2	18503	18051	11584	11470	1798	1760
3	18432	18650	11697	11499	1774	1756
4	18537	18121	11688	11475	1748	1750
5	18559	18331	11784	11486	1745	1749
6	18624	18237	11698	11466	1801	1753
n	6	6	6	6	6	6
Mean	18577	18271	11724	11480	1776	1751
SD	129.97	209.98	104.69	12.01	24.95	6.86
% CV	0.70	1.15	0.89	0.10	1.40	0.39
% Mean Recovery	98.35		97.91		98.59	
Overall % Mean Recovery	98.286					
Overall SD	0.3437					

Recovery – Analyte for valsartan						
S. No.	HQC		MQC1		LQC	
	Un extracted Response	Extracted Response	Un extracted Response	Extracted Response	Un extracted Response	Extracted Response
1	55423	54832	35050	34273	5280	5209
2	55848	54453	35195	34366	5359	5211
3	56561	55036	35075	34123	5269	5203
4	55417	53821	34701	34247	5282	5210
5	55738	54117	35300	34911	5275	5209
6	55866	54353	34909	34688	5262	5215
n	6	6	6	6	6	6
Mean	55809	54435	35038	34435	5288	5210
SD	419.04	448.10	212.14	301.42	35.63	3.89
% CV	0.75	0.82	0.61	0.88	0.67	0.07
% Mean Recovery	97.54		98.28		98.52	
Overall % Mean Recovery	98.112					
Overall SD	0.5104					
Overall % CV	0.52					

**Recovery - Internal standard**

**Table 17 : Recovery of Emtricitabine (IS)**

<b>Recovery - Internal standard for Sacubitril</b>		
S.No.	Un extracted Area Ratio	Extracted Area Ratio
1	98480	97532
2	98693	97585
3	98662	97638
4	98723	97480
5	98520	97570
6	98282	97630
<b>n</b>	6	6
<b>Mean</b>	98560.0	97572.5
<b>SD</b>	167.30	59.93
<b>% CV</b>	0.17	0.06
<b>% Mean Recovery</b>	99.00	
<b>Recovery - Internal standard for Valsartan</b>		
S.No.	Un extracted Area Ratio	Extracted Area Ratio
1	98380	97532
2	98693	97585
3	98682	97638
4	98763	97480
5	98510	97570
6	98252	97630
<b>n</b>	6	6
<b>Mean</b>	98546.7	97572.5
<b>SD</b>	201.24	59.93
<b>% CV</b>	0.20	0.06
<b>% Mean Recovery</b>	99.01	

**Discussion:** Recovery was determined by measuring the peak areas obtained from prepared plasma samples with those extracted blank plasma spiked with standards containing the same area with known amount of Sacubitril and Valsartan

**Rugged Linearity:**

**Table 18 : Rugged Linearity of Sacubitril and Valsartan**

<b>Ruggedness Linearity for Sacubitril</b>								
	STD1	STD2	STD3	STD4	STD5	STD6	STD7	STD8
	<b>Nominal Concentration (ng/mL)</b>							
	200.000	400.000	600.000	1600.000	2000.000	2400.000	3200.000	4000.000
	<b>Nominal Concentration Range (ng/mL)</b>							
	(160.000-240.000)	(340.000-460.000)	(510.000-690.000)	(1,360.000-1,840.000)	(1,700.000-2,300.000)	(2,040.000-2,760.000)	(2,720.000-3,680.000)	(3,400.000-4,600.000)
	<b>Calculated Concentration (ng/mL)</b>							
<b>Different Column</b>	0.035	0.075	595.000	1595.000	1998.000	2388.000	3197.000	4008.000
<b>Different Analyst</b>	0.038	0.073	601.000	6011.000	2011.000	2418.000	3299.000	4026.000
<b>Ruggedness Linearity fro Valsartan</b>								
	STD1	STD2	STD3	STD4	STD5	STD6	STD7	STD8
	<b>Nominal Concentration (ng/mL)</b>							
	300.000	600.000	900.000	2400.000	3000.000	3600.000	4800.000	6000.000
	<b>Nominal Concentration Range (ng/mL)</b>							
	(240.000-360.000)	(510.000-690.000)	(765.000-1,035.000)	(2,040.000-2,760.000)	(2,550.000-3,450.000)	(3,060.000-4,140.000)	(4,080.000-5,520.000)	(5,100.000-6,900.000)
	<b>Calculated Concentration (ng/mL)</b>							
<b>Different Column</b>	299.000	599.000	1089.000	2399.000	2998.000	3699.000	4820.000	6002.000
<b>Different Analyst</b>	301.000	606.000	990.000	2482.000	3013.000	3709.000	4885.000	6201.000

**Discussion:** Linearity ruggedness is a measure for the susceptibility of a method to small changes that might occur during routine analysis. The calibration range is obtained by injecting 6 concentrations (0.15 ng/ml-6ng/ml) of calibration standards not including blank and zero samples and establishing. The calibration curves were appeared linear and the coefficient of correlation was found to be 0.999 for Sacubitril and Valsartan.

#### Reinjection Reproducibility

**Table 19 : Reinjection Reproducibility of Sacubitril and Valsartan**

	HQC	MQC1	LQC	LLOQ QC
	Nominal Concentration (ng/mL)			
	3200.000	2000.000	600.000	200.000
	Nominal Concentration Range (ng/mL)			
	(2,720.000-3,680.000)	(1,700.000-2,300.000)	(510.000-690.000)	(160.000-240.000)
	Calculated Concentration (ng/mL)			
Different Column	3199.00	1968.00	592.00	199.00
	3151.00	2025.00	601.00	201.00
	3191.00	1915.00	595.00	193.00
	3209.00	1968.00	618.00	191.00
	3221.00	1989.00	619.00	221.00
	3211.00	1985.00	609.00	197.00
n	6	6	6	6
Mean	3197.0000	1975.0000	605.6667	200.3333
SD	24.78709	36.03887	11.51810	10.78270
% CV	0.78	1.82	1.90	5.38
% Mean Accuracy	99.91	98.75	100.94	100.17
Different Analyst	3188.00	2065.00	591.00	198.00
	3114.00	1951.00	599.00	218.00
	3268.00	1978.00	608.00	196.00
	3211.00	2011.00	601.00	204.00
	3232.00	2026.00	615.00	192.00
	3189.00	1971.00	617.00	198.00
n	6	6	6	6
Mean	3200.3333	2000.3333	605.1667	201.0000
SD	51.82535	41.82663	10.00833	9.18695
% CV	1.62	2.09	1.65	4.57
% Mean Accuracy	100.01	100.02	100.86	100.50
Reinjection Reproducibility				
	HQC	MQC1	LQC	LLOQ QC
	Nominal Concentration (ng/mL)			
	4800.000	3000.000	600.000	300.000
	Nominal Concentration Range (ng/mL)			
	(4,080.000-5,520.000)	(2,550.000-3,450.000)	(510.000-690.000)	(240.000-360.000)
	Calculated Concentration (ng/mL)			
P&A01	4865.000	2965.000	586.000	288.000
	4884.000	2950.000	672.000	298.000
	4921.000	2989.000	620.000	309.000
	4879.000	3009.000	584.000	312.000
	4886.000	2889.000	610.000	302.000
	4908.000	3019.000	625.000	299.000
n	6	6	6	6
Mean	4890.5000	2970.1667	616.1667	301.3333
SD	20.40343	47.47385	32.22680	8.57127
% CV	0.42	1.60	5.23	2.84
% Mean Accuracy	101.89	99.01	102.69	100.44



**Stabilities**

**Long term stock solution stability**

**Table no 20: stability of Sacubitril and Valsartan (zero days)**

S. No.	HQC	LQC
	Nominal Concentration (ng/mL)	
	3200.000	600.000
	Nominal Concentration Range (ng/mL)	
	(2,720.000-3,680.000)	(510.000-690.000)
1	Calculated Concentration (ng/mL)	
	3169.000	598.000
	3189.000	609.000
	3211.000	592.000
	3222.000	601.000
5	3191.000	612.000
6	3181.000	603.000
n	6	6
Mean	3193.8333	602.5000
SD	19.49786	7.28697
% CV	0.61	1.21
% Mean Accuracy	99.81	100.42
S. No.	HQC	LQC
	Nominal Concentration (ng/mL)	
	4800.000	600.000
	Nominal Concentration Range (ng/mL)	
	(4,080.000-5,520.000)	(510.000-690.000)
1	Calculated Concentration (ng/mL)	
	4965.000	589.000
	4889.000	598.000
	4895.000	610.000
	4920.000	599.000
5	4810.000	625.000
6	4871.000	620.000
n	6	6
Mean	4891.6667	606.8333
SD	51.56614	13.93437
% CV	1.05	2.30
% Mean Accuracy	101.91	101.14

**Matrix samples stability at -28±5 °C for 37 days**

**Table 21 : Matrix samples stability at -28±5 °C for 37 days**

Long Term Analyte Stability in Matrix for Sacubitril				
S. No.	HQC		LQC	
	Nominal Concentration (ng/mL)			
	3200.000	3200.000	600.000	600.000
	Nominal Concentration Range (ng/mL)			
	(2,720.000-3,680.000)	(2,720.000-3,680.000)	(510.000-690.000)	(510.000-690.000)
	Calculated Concentration (ng/mL)			
	Comparison Samples	Stability Samples	Comparison Samples	Stability Samples
1	3213.00	3189.00	598.000	592.000
2	3212.00	3198.00	605.000	585.000
3	3188.00	3168.00	589.000	595.000
4	3178.00	3178.00	601.000	601.000
5	3206.00	3165.00	595.000	605.000
6	3219.00	3025.00	601.000	596.000
n	6	6	6	6
Mean	3202.6667	3153.8333	598.1667	595.6667
SD	16.09555	64.33480	5.60060	6.97615
% CV	0.50	2.04	0.94	1.17
%Mean Accuracy	100.08	98.56	99.69	99.28
% Mean Stability	98.48		99.58	

Long Term Analyte Stability in Matrix for Valsartan				
S. No.	HQC		LQC	
	Nominal Concentration (ng/mL)			
	4800.000	4800.000	600.000	600.000
	Nominal Concentration Range (ng/mL)			
	(4,080.000-5,520.000)	(4,080.000-5,520.000)	(510.000-690.000)	(510.000-690.000)
	Calculated Concentration (ng/mL)			
	Comparison Samples	Stability Samples	Comparison Samples	Stability Samples
1	4825.000	4822.000	605.000	599.000
2	4801.000	4768.000	596.000	609.000
3	4795.000	4798.000	608.000	600.000
4	4859.000	4778.000	610.000	598.000
5	4810.000	4789.000	600.000	601.000
6	4877.000	4792.000	609.000	603.000
n	6	6	6	6
Mean	4827.8333	4791.1667	604.6667	601.6667
SD	33.20492	18.50856	5.57375	3.98330
% CV	0.69	0.39	0.92	0.66
%Mean Accuracy	100.58	99.82	100.78	100.28
% Mean Stability	99.24		99.50	

Matrix samples stability at -80±5 °C for 37days

Table no 22: Matrix samples stability at -80±5 °C for 37 days

Long Term Analyte Stability in Matrix for Sacubitril				
S. No.	HQC		LQC	
	Nominal Concentration (ng/mL)			
	4800.000	4800.000	600.000	600.000
	Nominal Concentration Range (ng/mL)			
	(4,080.000-5,520.000)	(4,080.000-5,520.000)	(510.000-690.000)	(510.000-690.000)
	Calculated Concentration (ng/mL)			
	Comparison Samples	Stability Samples	Comparison Samples	Stability Samples
1	4805.000	4725.000	616.000	589.000
2	4796.000	4791.000	605.000	601.000
3	4820.000	4805.000	592.000	598.000
4	4871.000	4801.000	620.000	595.000
5	4816.000	4799.000	609.000	598.000
6	4821.000	4801.000	615.000	601.000
n	6	6	6	6
Mean	4821.5000	4787.0000	609.5000	597.0000
SD	26.09789	30.72458	10.09455	4.51664
% CV	0.54	0.64	1.66	0.76
%Mean Accuracy	100.45	99.73	101.58	99.50
% Mean Stability	99.28		97.95	
Long Term Analyte Stability in Matrix for Valsartan				
S. No.	HQC		LQC	
	Nominal Concentration (ng/mL)			
	3200.000	3200.000	600.000	600.000
	Nominal Concentration Range (ng/mL)			
	(2,720.000-3,680.000)	(2,720.000-3,680.000)	(510.000-690.000)	(510.000-690.000)
	Calculated Concentration (ng/mL)			
	Comparison Samples	Stability Samples	Comparison Samples	Stability Samples
1	3162.000	3198.000	595.000	588.000
2	3271.000	3156.000	602.000	591.000
3	3225.000	3185.000	598.000	595.000
4	3211.000	3198.000	603.000	598.000
5	3182.000	3185.000	596.000	601.000
6	3177.000	3125.000	601.000	593.000
n	6	6	6	6
Mean	3204.6667	3174.5000	599.1667	594.3333
SD	39.88316	28.69669	3.31160	4.71876
% CV	1.24	0.90	0.55	0.79
%Mean Accuracy	100.15	99.20	99.86	99.06
% Mean Stability	99.06		99.19	

## Summary

VALIDATION RESULTS OF Sacubitril and Valsartan					
Analyte Parameters	Sacubitril and Valsartan		Internal standard	Acceptance Criteria	
	%Nominal	precision		%	Precision
Biological Matrix	Rabbit Plasma		Rabbit Plasma	N/AP	N/AP
Analytical Range	0.4ng/ml-8µg/ml of Valsartan & 0.2 µg/ml -4 µg/ml of Sacubitril		N/AP	N/AP	N/AP
Minimum Quantifiable	8 µg/ml of Valsartan 4 µg/ml of Sacubitril		N/AP	N/AP	≤ 20%
Matrix Effect LQC HQC	99.51%& 101.81% of Sacubitril & 100.71%& 101.46% of Valsartan		N/AP	85% - 115%	≤ 15%
Coefficient of correlation	0.999		N/AP	r <sup>2</sup> ≥ 0.98	
Accuracy and Precision for Sensitivity	100.0%		N/AP	80% - 120%	≤ 20%
Within Batch Accuracy and Precision	101.52%, 99.42%, 99.93 % of Valsartan & 100.71%, 101.48%, 100.18 % of Sacubitril		N/AP	85%-115% (L, M1, M2, H)80%-120%	≤15%% (L, M1, M2,H) ≤20%(LL

## Conclusion

A simple, accurate, precise method was developed for the estimation of the Sacubitril and Valsartan in Rabbit plasma using the Emtricitabine as internal standard. Retention time of Sacubitril and Valsartan was found to be 1.196min (IS) and 1.528min of Sacubitril and 1.799 min of Valsartan. Which reach the level of both drugs possibly found in Rabbit plasma. Further, the reported method was validated as per the ICH guidelines and found to be well within the acceptable range. The proposed method is simple, rapid, accurate, precise, and appropriate for pharmacokinetic and therapeutic drug monitoring in the clinical laboratories.

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