

Development and validation of the high-pressure liquid chromatographic method for the quantitative determination of propylthiohinothiadiazole

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Abstract

Background: Propylthiohinothiadiazole is a thiadiazole derivative with pronounced antimycobacterial action. Substance is researched in order to develop methods of analysis and standardization, analytical documents regulating quality for use as an active principle in the development of pharmaceutical forms.

Material and methods: 3 series of propylthiohinothiadiazole, internal reference standard of 2-(propylthio)-5H-[1,3,4]-thiadiazole[2,3-b]-quinazolin-5-one substance with concentration 99.98%, chromatographic system Shimadzu LC-20AD high-pressure liquid chromatography (HPLC) with UV-VIS detector, acetonitrile and dimethylsulfoxide of purity grade "pro HPLC analysis" (Sigma Aldrich and Merck), bidistilled purified water.

Results: Linearity is proved for concentrations of 5-30 µg/ml, the linear regression equation is $y=36472x-44580$, $R^2=0.9999$. The limit of detection is 0.729 µg/ml and the limit of quantification is 2.210 µg/ml. It was established that the method is accurate (mean recovery values at 80%, 100% and 120% concentration levels were close to 100%). The accuracy of the method was expressed by repeatability and intermediate accuracy. The variation of the chromatographic conditions established that the method is robust. For all validation parameters, relative standard deviation was less than 1.

Conclusions: The validation results show that the developed HPLC method is simple, fast, accurate and reproducible.

Key words: high-pressure liquid chromatography, propylthiohinothiadiazole, dosing, validation.

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Introduction

Tuberculosis remains one of the most common infectious diseases worldwide. According to the World Health Organization (WHO), there is an incidence of 10 million cases, which would be equivalent to 133 cases per 100.000 people [1]. The Republic of Moldova is among the 18 countries in the European Region where tuberculosis control is a priority and among the 30 countries in the world with a high burden of multidrug-resistant tuberculosis (MDR TB) [2]. Currently, the WHO recommends 11 common international drug names for the treatment of tuberculosis, of which 4 are first-line (isoniazid, rifampicin, pyrazinamide, ethambutol) and 7 are second-line (aminoglycosides, quinolones, thioamides, etc.) [3, 4]. The evolution of pharmaceutical technologies and clinical trials have reduced the duration of treatment for tuberculosis from 24 months to 6-8 months of intensive treatment, the basic method being the administration of therapeutic combinations, with preparations from the first and second line simultaneously [5]. However, the latest studies show a rate of resistance to treatment in about 73% of patients, 35% of whom have multi-drug resistance since the first weeks of treatment [3]. There are several causes: non-compliance with treatment; stopping or abandoning treatment at the first reduction of symptoms, then resuming it after a while; late diagnosis;

mycobacterial mutations over time and lack of alternative medication [3, 4, 6].

Thus, finding and obtaining new compounds with antimycobacterial potential is an important and very current research topic. A promising direction is the development of new substances with a high activity against MDR mycobacteria by valuing thiadiazole (quinazolinone) derivatives with structures similar to Triptantrine alkaloid [7, 8].

Propylthiohinothiadiazole (2-(propylthio)5H-[1,3,4]thiadiazolo-[2,3-b]quinazolin-5-one) is a thiadiazole derivative, synthesized in the Laboratory of Organic Synthesis and Biopharmaceuticals of the Institute of Chemistry, Chisinau, being one of the most promising substances in the series of about 80 derivatives obtained. This compound has a pronounced antimycobacterial activity ($\rho 99\%$) and low toxicity [9, 10, 11]. The substance is being researched in order to develop methods of analysis and standardization, of the Analytical Documents of Quality Standardization (DAN) for use as an active principle in the development of antimycobacterial pharmaceutical forms.

Evolutionary development of analytical methods provides researchers a wide range of modern, advantageous and cost-effective techniques. High-pressure liquid chromatography (HPLC) is one of them, being based on the separation of components between two phases under pressure,

allows the identification and assay of individual substances in pharmaceutical forms, but also the possible impurities from synthesis or degradation. Quantitative determination of medicinal substances is one of the most important stages of the analysis, being also the main quality parameter. The requirements assigned to a quantitative method in the process of pharmaceutical analysis are stipulated in various guidelines, which regulate the analytical procedures. The validation of analytical methods, in accordance with the guidelines of the International Conference on Harmonization (ICH), aims to "demonstrate that the method is appropriate to the proposed purpose" [12].

Propylthiohinothiadiazole, being a newly-synthesized compound, has no formalized methods of analysis. Thus, this study proposes the development for the first time of the HPLC method for propylthiohinothiadiazole assay and its validation in accordance with the provisions of the ICH guidelines.

Material and methods

The experimental researches were performed within the Laboratory of analysis, standardization and control of drugs (LASCD) of Nicolae Testemitanu State University of Medicine and Pharmacy.

The elaboration of the propylthiohinothiadiazole assay method was performed based on the requirements of the ICH guideline "Q2R1: For analytical and validation procedures" [12].

The study used the drug substance propylthiohinothiadiazole, synthesized in the Laboratory of Organic Synthesis and Biopharmaceuticals of the Institute of Chemistry, synthesis series: MF1-001, MF1-002, MF1-003; internal reference standard for 2-(propylthio)5H-[1,3,4]thiadiazolo-[2,3-b] quinasolin-5-one substance, purified by recrystallization from LASCM (concentration 99.98%).

Apparatus: Shimadzu LC-20AD HPLC chromatographic system, Zorbax Eclipse Plus C18 analytical column, 5 mm, 4.6 x 250 mm was used; UV-VIS detector, wavelength – 300 nm.

Chemicals: Acetonitrile (ACN) purity grade "pro HPLC analysis" (Sigma Aldrich), dimethylsulfoxide (DMSO) purity grade "pro analysis" (Merck), bidistilled purified water.

Chromatography conditions: The mobile phase was prepared by mixing ACN with purified water in proportions of 80:20 by volume, filtering the solution under vacuum through a Millipore XF 5423050 capron filter (0.2-0.45µm), and degassing in the DONAU-LAB SONIC DLS 660 T/H. The temperature of the chromatographic column was 30°C; injection volume 20 µl; mobile phase flow – 1 ml/min. The retention time was 4.5 min.

Preparation of the standard solution: Approximately 0.001 g (exact mass) of the internal reference standard is placed in a 25.0 ml volumetric flask, dissolved in 5 ml of DMSO, stirred until dissolved, 10 ml of mobile phase is added and mixed, then made up with the same solvent to the quota and mixed (stock standard solution). Place 5 ml

of standard stock solution in a 10 ml volumetric flask and make up to the mark with the same solvent. The solution is used freshly prepared.

Chromatographic system utility control: Before performing the analysis, the chromatographic column is stabilized with mobile phase for 10 min, then chromatographed 20 µl standard solution until an established retention time (4.5 min) is obtained after two consecutive injections; at least 3 chromatograms are obtained. The chromatographic system is considered useful when: the performance of the column, calculated after the propylthiohinothiadiazole peak, is at least 2000 theoretical plates; the asymmetry coefficient of the peak, calculated at the level ½ of the peak height does not exceed 1.5; the relative standard deviation of the peak area does not exceed 2.0%.

Preparation of the sample solution: Approximately 0.001 g (exact mass) of propylthiohinothiadiazole was accurately weighed and transferred into a 25.0 ml volumetric flask, 5 ml of DMSO was added and stirred until the substance dissolved. 10.0 ml of mobile phase was added, then it was mixed and made up to the level with the same solvent. 5.0 ml of obtained solution was placed into a 10 ml volumetric flask and made up to the mark with the same solvent.

Quantitative determination: Each 20 µl of sample solution and standard solution were chromatographed, obtaining at least 5 chromatograms of each solution under the same conditions indicated above. Then it was determined the mean value of the propylthiohinothiadiazole peak area from the chromatograms of sample solution (San) and standard solution (Sst). The chromatograms of the standard and sample solutions with a concentration of 20 µg/ml are shown in fig.1.

The propylthiohinothiadiazole content (X%) in the substance is determined according to the formula:

$$X\% = \frac{S_{an} \cdot m_{st} \cdot W_{an} \cdot P_o \cdot [100-U] \cdot 100}{S_{st} \cdot m_{an} \cdot a_x \cdot W_{st} \cdot 100} \text{ in which:}$$

S_{an} – the mean value of the peak area, calculated from the chromatograms of the sample solution;

S_{st} – the average value of the peak area, calculated from the chromatograms of the standard solution;

m_p – mass of the substance, g;

U_s – humidity of the standard substance, %;

m_{st} – mass of standard substance, g;

P_o – active substance content, %;

W_{st} and W_{an} – the volumes of solutions for the standard and the analyte.

Validation of the method. The method was validated according to the ICH guide, being determined by the parameters: linearity, accuracy, precision, sensitivity (LOQ and LOD) and robustness, solution stability [12].

Linearity. The linearity of the results of an analysis procedure represents its ability to obtain results directly proportional to the analyte concentration in the sample. The linearity of the HPLC method of propylthiohinothiadiazole assay on the concentration ranges 5-30 µg/ml was investigated. Thus, the standard stock solutions of propylthiohi-

nothiadiazole 40 µg/ml were initially prepared. From the stock standard solution, 5 samples with concentrations 5, 10, 15, 20 and 30 µg/ml were prepared by dilution, using mobile phase as solvent and then were injected into the chromatograph, obtaining chromatograms and peak areas. The determinations were performed in triplicate, being constructed by the calibration curve (fig. 2). Linear regression analysis was used to evaluate the linearity of the calibration curve using the least squares method.

Accuracy. Accuracy is defined as a characteristic of the approximation of analytical results to true value and is a measure of the deviation of the mean value found by analysis from true value. It is evaluated by applying the method to samples with known concentrations [13]. To determine the accuracy of the HPLC propylthiohinothiadiazole assay method, the standard addition (sample enrichment) method was used by analyzing in triplicate solutions with concentrations of 80%, 100% and 120% (8.0 µg/ml, 10 µg/ml and 12.0 µg/ml) and the percentage recovery of the amount of substance was calculated, the relative standard deviation (RSD) value being evaluated for each concentration level (tab. 3).

Precision. Determination of the precision of the method was performed by evaluating repeatability and intermediate accuracy [14]. Repeatability was determined for 6 samples, at the concentration level of the drug substance of 100%, on the same day, respecting the same conditions (tab. 4). The intermediate accuracy was determined using the same procedure for identical samples, in the same laboratory, by different operators, using different equipment and in a specific time interval. The intermediate accuracy was investigated in 2 different days, under the same conditions, performing 6 determinations (tab. 5).

Sensibility (LOQ and LOD). The limit of detection (LOD) and limit of quantification (LOQ) of propylthiohinothiadiazole were determined by analyzing the substance solutions and measuring the signal-to-noise ratio. The limit of detection (LOD) is the concentration, which is due to the signal/noise ratio of about 3:1, while the limit of quantification (LOQ) is the concentration that gives a signal/noise ratio of about 10:1 with RSD values (n = 3) less than 10%.

Robustness. The robustness of an analytical method is demonstrated by assessing the ability of the method to remain unaffected by small, deliberate variations in parameters. It was determined by varying the following chromatographic conditions: flow rate of the mobile phase by ± 0.1 ml/min, amount of acetonitrile in the mobile phase by ± 2% and column temperature by ± 5°C [12] (tab. 6).

Stability of the solution. The stability of standard and sample analytical solutions was determined by analyzing them immediately after preparation and after 24 hours of refrigeration and room temperature (25°C). Three determinations were performed, the peak areas were evaluated, the analyte concentration in the sample (relative to a freshly prepared reference solution) and the RSD were calculated (tab. 7).

Statistical analysis. Statistical analysis was carried out by using the Statistical Package for the Social Sciences (IBM SPSS Statistics) 10.5 software.

Results and discussion

Method Development and Optimization. Preliminary study of the physicochemical properties of propylthiohinothiadiazole allowed the development of the HPLC analytical method by preliminary selection of chromatographic conditions, including detection wavelength, mobile phase, stationary phase, and sample preparation procedure. For this purpose, a series of tests were performed varying the ratio between acetonitrile and water, optimizing the chromatographic conditions on the *Zorbax Eclipse Plus* C18 column, 5 µm, 4.6 x 250 mm. The results of the method optimization are summarized in tab. 1. The mobile phase consists of acetonitrile and water in a ratio of 80:20 v/v with a flow rate of 1 ml/minute, injection volume 20 µl, running time 6 minutes and column temperature 30°C at wavelength (λ) 300 nm. It was determined that these are the optimal conditions under which propylthiohinothiadiazole was eluted forming symmetrical peaks, resolution, and adequate analysis time, with retention time around 4.5 minutes (fig. 1.A and fig. 1.B).

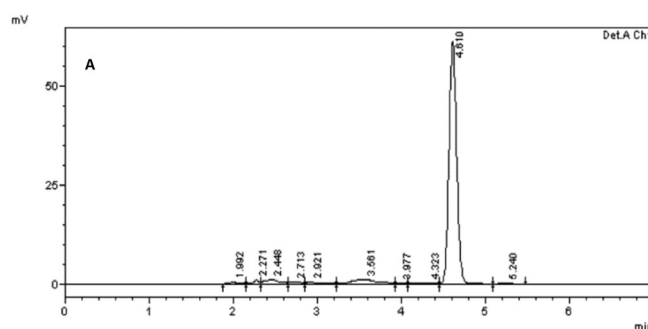


Fig. 1.A. Chromatograms of propylthiohinothiadiazole solutions with concentration 20 µg/ml: A – standard solution.

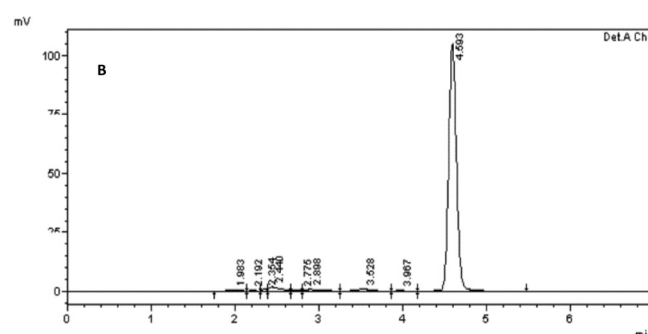


Fig. 1.B. Chromatograms of propylthiohinothiadiazole solutions with concentration 20 µg/ml: B – sample solution.

Linearity. By evaluating the averages of the peak areas obtained in the HPLC determinations, represented in relation to the corresponding concentrations, the calibration graph was obtained. The results of the linearity study (tab. 2, fig. 2) showed a linear relationship over the concentration range of 5-30 µg/ml for propylthiohinothiadiazole.

From the regression analysis, a linear equation was obtained: $y=36472x-44580$, and the correlation coefficient (r^2) was 0.9999, which indicates a linear relationship between the analyte concentration and the area of the chromatographic peak.

Table 1

Results of the optimization of the HPLC method of propylthiohinothiadiazole dosing

Used Column	Mobile phase	Flow rate	Wavelength	Observation	Result
Nucleosil 100, C-18, 15 μm ., 4 x 150 mm	Acetonitrile: water 80:20	1.0 ml/min	235 nm	Poor resolution 1.3	Method rejected
Zorbax Eclipse Plus C18, 5 mm, 4.6 x 250 mm	Acetonitrile: water 80:20	1.0 ml/min	300 nm	Good resolution 2.4	Method accepted
Zorbax Eclipse Plus C18, 5 mm, 4.6 x 250 mm	Acetonitrile: water 65:35	1.0 ml/min	300 nm	Poor resolution 1.8	Method rejected

Table 2

Calibration data for propylthiohinothiadiazole

Solution concentration, $\mu\text{g/ml}$	Retention time, min	Peak area
5	4.483	135014.0
10	4.487	270657.0
15	4.471	405158.0
20	4.477	541687.0
30	4.479	823649.0

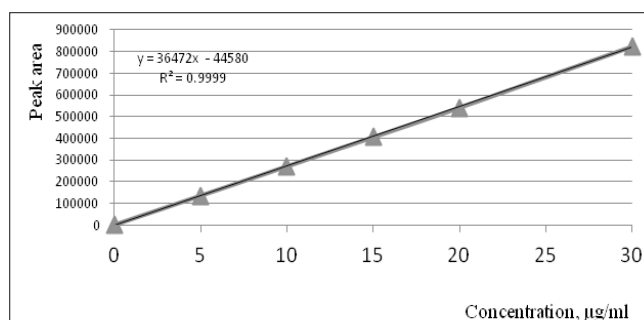


Fig. 2. Calibration curve of standard propylthiohinothiadiazole solution.

Accuracy. Determining the accuracy of the analytical quantitative procedure, the selectivity of the results obtained in this method was found to achieve the true value. As in-

Table 3

Results of accuracy of developed method of assay of propylthiohinothiadiazole

Concentration levels, %	Number of determinations	Theoretical concentration of spiked sample, $\mu\text{g/ml}$	Peak area	Concentration in spiked sample, $\mu\text{g/ml}$	% Recovery	Average, % RSD
80	1	8	6746764.55	8.045	100.56	100.530 0.061
	2	8	6747213.28	8.046	100.58	
	3	8	6739989.94	8.037	100.46	
100	1	10	8433455.69	10.045	100.45	100.710 0.240
	2	10	8460275.02	10.077	100.77	
	3	10	8472697.44	10.091	100.91	
120	1	12	10110546.81	12.033	100.28	100.260 0.031
	2	12	10108824.57	12.031	100.26	
	3	12	10105489.14	12.027	100.23	

Note: RSD – relative standard deviation

indicated in table 3, RSD values are between 0.03-0.24. The triplicate analysis of solutions with concentrations of 80%, 100% and 120% (8.0 $\mu\text{g/ml}$, 10 $\mu\text{g/ml}$ and 12.0 $\mu\text{g/ml}$) demonstrated a percentage recovery of the substance of at least 100.23% and maximum 100.91%, values that were within the accepted limits from 98.0% to 102.0%, which indicates the applicability of the method for quantitative analysis.

Precision. The precision expresses the narrowness of the agreement (degree of dispersion, coefficient of variation) between a series of measurements that come from several series of the same homogeneous sample (independent results) under identical working conditions. Precision provides data on random errors and has no relation to the true value. Because all measurements contain random errors, the result of a single measurement cannot be accepted as true. An estimate of this error is required to predict the range in which the true value is found, which is done by repeating

the measurement several times. From this process two important parameters are obtained, namely the average value and the variability of the measurements [12]. The results of the determinations showed that the method is accurate within acceptable limits. RSD was calculated for retention time, peak area and concentration, all values being less than 1% (tab. 4 and tab. 5).

Sensibility: detection limit and quantification limit (LOD and LOQ). The limit of detection (LOD) is the smallest amount of analyte in a sample that can be detected, but not necessarily quantified, while the limit of quantity (LOQ) is the smallest amount of analyte in a sample that can be determined quantitatively with adequate accuracy [15]. The results of the determinations showed LOD of 0.729 $\mu\text{g/ml}$ and LOQ of 2.210 $\mu\text{g/ml}$ respectively.

Robustness. The robustness of the analytical method was tested to assess the lack of influence of minor changes

Table 4

Results of determinations of repeatability of the HPLC method for propylthiohinothiadiazole assay

No	Retention time, min	Peak area	Assay, %
1	4.483	8433455.69	100.45
2	4.487	8460275.02	100.77
3	4.471	8472697.44	100.91
4	4.477	8439984.05	100.53
5	4.479	8433455.69	100.45
6	4.484	8439984.05	100.53
Average	4.480	8446641.98	100.60
RSD, %	0.128	0.191	0.188

Table 5

Results of intermediate precision determinations in the validation of the propylthiohinothiadiazole HPLC method

No.	Day 1			Day 2		
	Retention time, min	Peak area	Assay, %	Retention time, min	Peak area	Assay, %
1	4.483	8433455.69	100.45	4.495	9275724.35	101.73
2	4.487	8460275.02	100.77	4.937	9303352.96	102.03
3	4.471	8472697.44	100.91	4.922	9189046.32	100.78
4	4.477	8439984.05	100.53	4.956	9388533.41	102.96
5	4.479	8433455.69	100.45	4.988	9307879.46	102.08
6	4.484	8439984.05	100.53	4.943	9268835.80	101.65
Average	4.480	8446641.98	100.60	4.949	9288895.38	101.87
RSD, %	0.128	0.191	0.188	0.450	0.698	0.698

Table 6

Results of the determination of the robustness of the HPLC method for dosing propylthiohinothiadiazole

Variable parameters	Retention time, min	Peak area	Assay, %
Mobile phase flow 0.9 ml/min	4.482	8434755.24	99.72
0,5	4.472	8461005.87	100.03
Acetonitrile: purified water 80:20	4.486	8473097.57	100.17
Acetonitrile: purified water 81.6:18.4	4.479	8439784.07	99.78
Column temperature 30° C	4.481	8432915.21	99.70
Column temperature 35° C	4.482	8438584.13	99.77
The average value	4.480	8.45E+06	99.86
Standard deviation	S ²	2.19E-05	2.70E+08
	S	0.005	16418.795
Relative standard deviation	RSD	0.104	0.194

Table 7

Results of solution stability testing for HPLC propylthiohinothiadiazole assay method

Determined parameters	Storage period	Retention time, min	Peak area	Assay, %	RSD for the peak area
Standard solution	0 h	4.483	8457894.12	-	0.03
	24 h at 25°C	4.479	8457387.08	100.09	0.17
	24 h at 4°C	4.482	8457614.21	100.10	0.07
Sample solution	0 h	4.484	8434755.24	-	0.05
	24 h at 25°C	4.484	8432915.21	99.70	0.21
	24 h at 4°C	4.479	8433089.57	99.71	0.11

in the conditions of chromatography using for obtaining the results of the analysis. The test results showed that at a minor change in the method conditions, such as the composition and flow rate of the mobile phase, the temperature of the column, the method is robust. A good separation has been achieved, and the RSD values are within the limits and do not exceed 2.0% (tab. 6).

Stability of the solution. After testing the stability of the solution, the concentration of propylthiohinothiadiazole in the solutions varied from 99.7% to 100.1% and the RSD was not higher than 1.0%, which indicates a high stability of the sample and standard solutions during 24 hours both by refrigeration and under normal conditions. The results of the solution stability test are presented in Table 7.

Conclusions

The HPLC method of assay of propylthiohinothiadiazole was developed and validated, which proved to be simple, fast, accurate and precise, sensitive and robust. The selected chromatographic conditions and mobile phase provide a good resolution for the test substance. The retention time does not exceed 5 min. During the experiments, the rigors of the ICH guidelines regarding the validation of the analysis methods were taken into account. The developed and validated HPLC method can be included in the Quality Standardization Analytical Documents for the propylthiohinothiadiazole quantitative determination.

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Author's contribution

AU designed the study, conducted the laboratory work and performed the analytical part of the laboratory work, interpreted the data, drafted, revised and approved the manuscript.

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Ethics approval and consent to participate

No approval was required for this study.

Conflict of Interests

No competing interests were disclosed.