



Fast Dissolving Tablet: An Overview

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Abstract

Fast dissolving Tablets are disintegrating and/or dissolve rapidly in the saliva without the need for water. Some tablets are designed to dissolve in saliva remarkably fast, within a few seconds, and are true fast-dissolving tablets. Others contain agents to enhance the rate of tablet disintegration in the oral cavity, and are more appropriately termed fast-disintegrating tablets, as they may take up to a minute to completely disintegrate. Oral delivery is currently the gold standard in the pharmaceutical industry where it is regarded as the safest, most convenient and most economical method of drug delivery having the highest patient compliance. This tablet format is designed to allow administration of an oral solid dose form in the absence of water or fluid intake. Such tablets readily dissolve or disintegrate in the saliva generally within <60 seconds. Fast- or mouth dissolving tablets have been formulated for pediatric, geriatric, and bedridden patients and for active patients who are busy and traveling and may not have access to water. Such formulations provide an opportunity for product line extension in the Many elderly persons will have difficulties in taking conventional oral dosage forms (viz., solutions, suspensions, tablets, and capsules) because of hand tremors and dysphagia. Swallowing problems also are common in young individuals because of their underdeveloped muscular and nervous systems. Other groups that may experience problems using conventional oral dosage forms include the mentally ill, the developmentally disabled, and patients who are uncooperative, on reduced liquid-intake plans, or are nauseated. In some cases such as motion sickness, sudden episodes of allergic attack or coughing, and an unavailability of water, swallowing conventional tablets may be difficult.

Introduction

Oral routes of drug administration have wide acceptance up to 50-60% of total dosage forms. Solid dosage forms are popular because of ease of administration, accurate dosage, self-medication, pain avoidance and most importantly the patient compliance. The most popular solid dosage forms are being tablets and capsules; one important drawback of this dosage forms for some patients, is the difficulty to swallow. Drinking water plays an important role in the swallowing of oral dosage forms. Often times people experience inconvenience in swallowing

conventional dosage forms such as tablet when water is not available, in the case of the motion sickness (kinetosis) and sudden episodes of coughing during the common cold, allergic condition and bronchitis. For these reason, tablets that can rapidly dissolve or disintegrate in the oral cavity have attracted a great deal of attention. Or dispersible tablets are not only indicated for people who have swallowing difficulties, but also are ideal for active people⁴. Fast dissolving tablets are also called as mouth-dissolving tablets, melt-in mouth tablets, Orodispersible tablets, rapimelts, porous tablets, quick dissolving etc. Fast dissolving tablets are those when put on tongue disintegrate instantaneously releasing the drug which dissolve or disperses in the saliva⁵. The faster the drug into solution, quicker the absorption and onset of clinical effect. Some drugs are absorbed from the mouth, pharynx and esophagus as the saliva passes down into the stomach. In such cases, bioavailability of drug is significantly greater than those observed from conventional tablets dosage form. The advantage of mouth dissolving dosage forms are increasingly being recognized in both, industry and academics⁷. Their growing importance was underlined recently when European pharmacopoeia adopted the term “ Orodispersible tablet” as a tablet that to be placed in the mouth where it disperses rapidly before swallowing. According to European pharmacopoeia, the ODT should disperse/disintegrate in less than three minutes. The basic approach in development of FDT is the use of superdisintegrants like cross linked carboxymethyl cellulose (croscarmellose), sodium starch glycolate (primogel, explotab), polyvinylpyrrolidone (polyplasdone) etc, which provide instantaneous disintegration of tablet after putting on tongue, their by release the drug in saliva. The bioavailability of some drugs may be increased due to absorption of drug in oral cavity and also due to pregastric absorption of saliva containing dispersed drugs that pass down into the stomach. More ever, the amount of drug that is subjected to first pass metabolism is reduced as compared to standard tablet. The technologies used for manufacturing fast-dissolving tablets are freeze-drying, spray-drying, tablet molding, sublimation, sugar-based excipients, tablet compression, and disintegration addition. As a result of increased life expectancy, the elderly constitute a large portion of the worldwide population today. These people eventually will experience deterioration of their physiological and physical abilities.

Criteria for Fast dissolving Drug Delivery System:

The tablets should

- Not require water to swallow, but it should dissolve or disintegrate in the mouth in matter of seconds.
 - Be compatible with taste masking.
 - Be portable without fragility concern.
 - Have a pleasant mouth feel.
- Leave minimum or no residue in the mouth after oral administration.
- Exhibit low sensitive to environmental condition as temperature and humidity.
 - Allow the manufacture of the tablet using conventional processing and packaging equipments at low cost.

Salient Feature of Fast Dissolving Drug Delivery System:

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- Ease of Administration to the patient who can not swallow, such as the elderly, stroke victims, bedridden patients, patient affected by renal failure and patient who refuse to swallow such as pediatric, geriatric & psychiatric patients.
- No need of water to swallow the dosage form, which is highly convenient feature for patients who are traveling and do not have immediate access to water.
- Rapid dissolution and absorption of the drug, which will produce quick onset of action.
- Some drugs are absorbed from the mouth, pharynx and esophagus as the saliva passes down into the stomach. In such cases bioavailability of drug is increased.
- Pre-gastric absorption can result in improved bioavailability and as a result of reduced dosage; improve clinical performance through a reduction of unwanted effects.
- Good mouth feel property helps to change the perception of medication as bitter pill particularly in pediatric patient.
- The risk of choking or suffocation during oral administration of conventional formulation due to physical obstruction is avoided, thus providing improved safety.
- New business opportunity like product differentiation, product promotion, patent extensions and life cycle management.
- Beneficial in cases such as motion sickness, sudden episodes of allergic attack or coughing, where an ultra rapid onset of action required.
- An increased bioavailability, particularly in cases of insoluble and hydrophobic drugs, due to rapid disintegration and dissolution of these tablets.
- Stability for longer duration of time, since the drug remains in solid dosage form till it is consumed. So, it combines advantage of solid dosage form in terms of stability and liquid dosage form in terms of bioavailability.

Benefits of fast dissolving tablets

- ❖ Administered without water, anywhere, any time.
- ❖ Suitability for geriatric and pediatric patients, who experience difficulties in swallowing and for the other groups that may experience problems using conventional oral dosage form, due to being mentally ill, the developmentally disabled and the patients who are un-cooperative, or are on reduced liquid intake plans or are nauseated.
- ❖ Beneficial in cases such as motion sickness, sudden episodes of allergic attack or coughing, where an ultra rapid onset of action required.
- ❖ An increased bioavailability, particularly in cases of insoluble and hydrophobic drugs, due to rapid disintegration and dissolution of these tablets.
- ❖ Stability for longer duration of time, since the drug remains in solid dosage form till it is consumed. So, it combines advantage of solid dosage form in terms of stability and liquid dosage form in terms of bioavailability.

Limitations of Mouth Dissolving Tablets

- The tablets usually have insufficient mechanical strength. Hence, careful handling is required.
- The tablets may leave unpleasant taste and/or grittiness in mouth if not formulated properly.

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Techniques for Preparing Fast dissolving Tablets

Many techniques have been reported for the formulation of Fast dissolving tablets or Orodispersible tablets.

1. Freeze drying / lyophilization
2. Tablet Moulding
3. Spray drying
4. Sublimation
5. Direct compression
6. Mass extrusion

Freeze-Drying or Lyophilization

Freeze drying is the process in which water is sublimed from the product after it is frozen. This technique creates an amorphous porous structure that can dissolve rapidly. A typical procedure involved in the manufacturing of ODT using this technique is mentioned here. The active drug is dissolved or dispersed in an aqueous solution of a carrier/polymer. The mixture is done by weight and poured in the walls of the preformed blister packs. The trays holding the blister packs are passed through liquid nitrogen freezing tunnel to freeze the drug solution or dispersion. Then the frozen blister packs are placed in refrigerated cabinets to continue the freeze-drying. After freeze-drying the aluminum foil backing is applied on a blister-sealing machine. Finally the blisters are packaged and shipped. The freeze-drying technique has demonstrated improved absorption and increase in bioavailability. The major disadvantages of lyophilization technique are that it is expensive and time consuming; fragility makes conventional packaging unsuitable for these products and poor stability under stressed conditions.

Tablet Molding:

Molding process is of two types i.e. solvent method and heat method. Solvent method involves moistening the powder blend with a hydro alcoholic solvent followed by compression at low pressures in molded plates to form a wetted mass (compression molding). The solvent is then removed by air-drying. The tablets manufactured in this manner are less compact than compressed tablets and possess a porous structure that hastens dissolution. The heat molding process involves preparation of a suspension that contains a drug, agar and sugar (e.g. mannitol or lactose) and pouring the suspension in the blister packaging wells, solidifying the agar at the room temperature to form a jelly and drying at 30°C under vacuum. The mechanical strength of molded tablets is a matter of great concern. Binding agents, which increase the mechanical strength of the tablets, need to be incorporated. Taste masking is an added problem to this technology.

The taste masked drug particles were prepared by spray congealing a molten mixture of hydrogenated cottonseed oil, sodium carbonate, lecithin, polyethylene glycol and an active ingredient into a lactose based tablet triturate form. Compared to the lyophilization technique, tablets produced by the molding technique are easier to scale up for industrial manufacture.

Spray Drying :

In this technique, gelatin can be used as a supporting agent and as a matrix, mannitol as a bulking agent and sodium starch glycolate or crosscarmellose or crospovidone are used as superdisintegrants. Tablets manufactured from the spray-dried powder have been reported to disintegrate in less than 20 seconds in aqueous medium. The formulation contained bulking agent like mannitol and lactose, a superdisintegrant like sodium starch glycolate & crosscarmellose sodium and acidic ingredient (citric acid) and/or alkaline ingredients (e.g. sodium bicarbonate). This spray-dried powder, which compressed into tablets showed rapid disintegration and enhanced dissolution.

Sublimation:

To generate a porous matrix, volatile ingredients are incorporated in the formulation that is later subjected to a process of sublimation. Highly volatile ingredients like ammonium bicarbonate, ammonium carbonate, benzoic acid, camphor, naphthalene, urea, urethane and phthalic anhydride may be compressed along with other excipients into a tablet. This volatile material is then removed by sublimation leaving behind a highly porous matrix. Tablets manufactured by this technique have reported to usually disintegrate in 10-20 sec. Even solvents like cyclohexane; benzene can be used as pore forming agents.

Direct Compression:

Direct compression represents the simplest and most cost effective tablet manufacturing technique. This technique can now be applied to preparation of ODT because of the availability of improved excipients especially superdisintegrants and sugar based excipients.

(a) Superdisintegrants:

In many orally disintegrating tablet technologies based on direct compression, the addition of superdisintegrants principally affects the rate of disintegration and hence the dissolution. The presence of other formulation ingredients such as water-soluble excipients and effervescent agents further hastens the process of disintegration.

(b) Sugar Based Excipients:

This is another approach to manufacture ODT by direct compression. The use of sugar based excipients especially bulking agents like dextrose, fructose, isomalt, lactilol, maltitol, maltose, mannitol, sorbitol, starch hydrolysate, polydextrose and xylitol, which display high aqueous solubility and sweetness, and hence impart taste masking property and a pleasing mouthfeel. Mizumito et al have classified sugar-based excipients into two types on the basis of molding and dissolution rate.

Type 1 saccharides (lactose and mannitol) exhibit low mouldability but high dissolution rate.

Type 2 saccharides (maltose and maltitol) exhibit high mouldability and low dissolution rate.

Mass-Extrusion:

This technology involves softening the active blend using the solvent mixture of water-soluble polyethylene glycol and methanol and subsequent expulsion of softened mass through the extruder or syringe to get a cylinder of the product into even segments using heated blade to form tablet. The dried cylinder can also be used to coat granules for bitter drugs and thereby achieve taste masking.

Important Patented Technologies for Fast Dissolving Tablets

1. Zydis Technology :

Zydis formulation is a unique freeze dried tablet in which drug is physically entrapped or dissolved within the matrix of fast dissolving carrier material. When zydis units are put into the mouth, the freeze-dried structure disintegrates instantaneously and does not require water to aid swallowing. The zydis matrix is composed of many material designed to achieve a number of objectives. To impart strength and resilience during handling, polymers such as gelatin, dextran or alginates are incorporated. These form a glossy amorphous structure, which imparts strength.

To obtain crystallinity, elegance and hardness, saccharides such as mannitol or sorbitol are incorporated. Water is used in the manufacturing process to ensure production of porous units to achieve rapid disintegration while various gums are used to prevent sedimentation of dispersed drug particles in the manufacturing process. Collapse protectants such as glycine prevent the shrinkage of zydis units during freeze-drying process or long-term storage. Zydis products are packed in blister packs to protect the formulation from moisture in the environment.

2. Durasolv Technology:

Durasolv is the patented technology of CIMA labs. The tablets made by this technology consist of drug, filler and a lubricant. Tablets are prepared by using conventional tableting equipment and have good rigidity.

These can be packaged into conventional packaging system like blisters. Durasolv is an appropriate technology for product requiring low amounts of active ingredients.

3. Orasolv Technology:

CIMA labs have developed Orasolv Technology. In this system active medicament is taste masked. It also contains effervescent disintegrating agent. Tablets are made by direct compression technique at low compression force in order to minimize oral dissolution time. Conventional blenders and tablet machine is used to produce the tablets. The tablets produced are soft and friable.

4. Flash Dose Technology:

Flash dose technology has been patented by fuisz. Nurofen meltlet, a new form of ibuprofen as melt in mouth tablets prepared using flash dose technology is the first commercial product launched by biovail corporation. Flash dose tablets consist of self-binding shear form matrix termed as “floss”. Shear form matrices are prepared by flash heat processing.

5. Wow tab Technology:

Wow tab technology is patented by Yamanouchi Pharmaceutical Co. WOW means “Without Water”. In this process, combination of low mouldability saccharides and high mouldability saccharides is used to obtain a rapidly melting strong tablet. The active ingredient is mixed with a low mouldability saccharide (eg. lactose, glucose, and mannitol) and granulated with a high mouldability saccharide (eg. Maltose, oligosaccharides) and compressed into table

6. Flash tab Technology:

Prographarm laboratories have patented the Flash tab technology. Tablet prepared by this system consists of an active ingredient in the form of micro crystals. Drug micro granules may be prepared by using the conventional techniques like coacervation, micro encapsulation and extrusion spheronisation. All the processing utilized conventional tableting technology.

Table -1

★ List of commercially Available Fast dissolving tablets:

Trade Name	Active Drug	Manufacturer
Felden fast melt	Piroxicam	Pfiser Inc., NY, USA
Claritin redi Tab	Loratidine	Schering plough Corp., USA
Maxalt MLT	Rizatriptan	Merck and Co., NJ, USA
Zyprexa	Olanzapine	Eli lilly, Indianapolis, USA
Pepcid RPD	Famotidine	Merck and Co., NJ, USA
Zofran ODT	Ondansetron	Glaxo Wellcome, Middlesex, UK
Zoming-ZMT	Zolmitriptan	AstraZeneca, Wilmington, USA
Zeplar TM	Selegilline	Amarin Corp., London, UK
Tempra Quiclets	Acetaminophen	Bristol myers Squibb, NY, USA
Febrectol	Paracetamol	Prographarm, Chateaufneuf, France
Nimulid MDT	Nimesulide	Panacea Biotech, New delhi , India
Torrox MT	Rofecoxib	Torrent pharmaceuticals , India
Olanex instab	Olanzapine	Ranbaxy lab. Ltd. New-delhi, India
Romilast	Montelukast	Ranbaxy lab. Ltd. New-delhi, India
Benadryl Fastmelt	Diphenhydramine and pseudoephedrine	Warner Lambert, NY, USA

Mechanism of Superdisintegrants:

There are four major mechanisms for tablets disintegration as follows

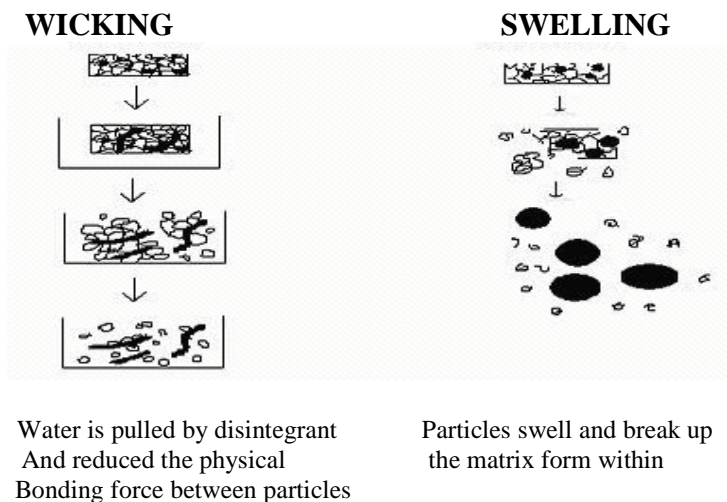
1. Swelling:

Perhaps the most widely accepted general mechanism of action for tablet disintegration is swelling. Tablets with high porosity show poor disintegration due to lack of adequate swelling force. On the other hand, sufficient swelling force is exerted in the tablet with low porosity. It is worthwhile to note that if the packing fraction is very high, fluid is unable to penetrate in the tablet and disintegration is again slows down.

2. Porosity and capillary action (Wicking):

Disintegration by capillary action is always the first step. When we put the tablet into suitable aqueous medium, the medium penetrates into the tablet and replaces the air adsorbed on the particles, which weakens the intermolecular bond and breaks the tablet into fine particles. Water uptake by tablet depends upon hydrophilicity of the drug /excipient and on tableting conditions. For these types of disintegrants maintenance of porous structure and low interfacial tension

towards aqueous fluid is necessary which helps in disintegration by creating a hydrophilic network around the drug particles.



3. Due to disintegrating particle/particle repulsive forces

Another mechanism of disintegration attempts to explain the swelling of tablet made with ‘non-swelling’ disintegrants. Guyot-Hermann has proposed a particle repulsion theory based on the observation that nonswelling particle also cause disintegration of tablets. The electric repulsive forces between particles are the mechanism of disintegration and water is required for it. Researchers found that repulsion is secondary to wicking.

4. Due to deformation

During tablet compression, disintegrated particles get deformed and these deformed particles get into their normal structure when they come in contact with aqueous media or water. Occasionally, the swelling capacity of starch was improved when granules were extensively deformed during compression. This increase in size of the deformed particles produces a break up of the tablet. This may be a mechanism of starch and has only recently begun to be studied.

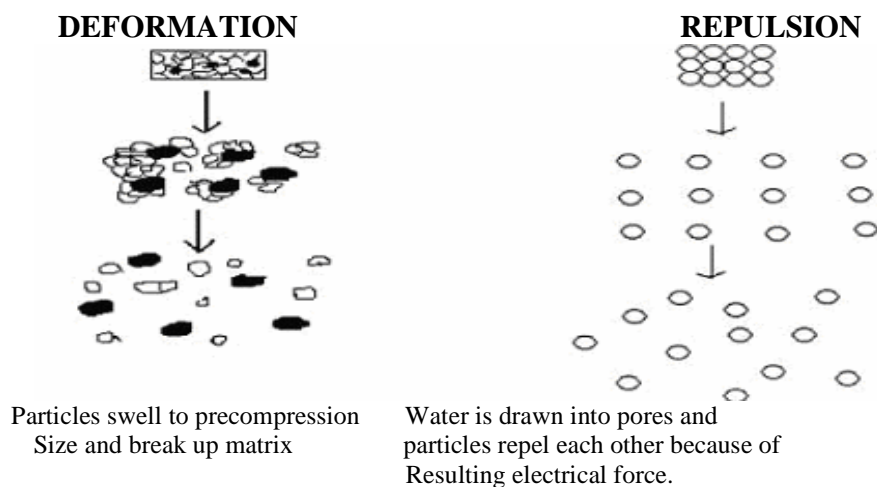


Table -2
★ list of super disintegrants

Superdisintegrants	Example	Mechanism Of action	Special comment
Crosscarmellose [®] Ac-Di-Sol [®] Nymce ZSX [®] Primellose [®] Solutab [®] Vivasol [®] L-HPC	Crosslinked cellulose	-Swells 4-8 folds in < 10 seconds. -Swelling and wicking both.	-Swells in two dimensions. -Direct compression or granulation -Starch free
Crosspovidone Crosspovidon M [®] Kollidon [®] Polyplasdone [®]	Crosslinked PVP	-Swells very little and returns to original size after compression but act by capillary action	-Water insoluble and spongy in nature so get porous tablet
Sodium starch glycolate Explotab [®] Primogel [®]	Crosslinked starch	-Swells 7-12 folds in < 30 seconds	-Swells in three dimensions and high level serve as sustain release matrix
Alginic acid NF Satialgine [®]	Crosslinked alginic acid	-Rapid swelling in aqueous medium or wicking action	-Promote disintegration in both dry or wet granulation
Soy polysaccharides Emcosoy [®]	Natural super disintegrant		-Does not contain any starch or sugar. Used in nutritional products.
Calcium silicate		-Wicking action	Highly porous, Optimum concentration is between 20-40%

Preformulation studies fast dissolving tablet

Preformulation study relates to pharmaceutical and analytical investigation carried out proceeding and supporting formulation development efforts of the dosage form of the drug substance. Preformulation yields basic knowledge necessary to develop suitable formulation for the toxicological use. It gives information needed to define the nature of the drug substance and provide frame work for the drug combination with pharmaceutical excipients in the dosage form. Hence, the following preformulation studies were performed on the obtained sample of drug.

1. Bulk Density (D_b):

It is the ratio of total mass of powder to the bulk volume of powder. It was measured by pouring the weight powder (passed through standard sieve # 20) into a measuring cylinder and initial weight was noted. This initial volume is called the bulk volume. From this the bulk density is calculated according to the formula mentioned below. It is expressed in g/ml and is given by

$$D_b = M / V_b$$

Where, M is the mass of powder

V_b is the bulk volume of the powder.

2. Tapped Density (D_t):

It is the ratio of total mass of the powder to the tapped volume of the powder. Volume was measured by tapping the powder for 750 times and the tapped volume was noted if the difference between these two volumes is less than 2%. If it is more than 2%, tapping is continued for 1250 times and tapped volume was noted. Tapping was continued until the difference between successive volumes is less than 2 % (in a bulk density apparatus). It is expressed in g/ml and is given by

$$D_t = M / V_t$$

Where, M is the mass of powder

V_t is the tapped volume of the powder.

3. Angle of Repose (θ):

The friction forces in a loose powder can be measured by the angle of repose (θ). It is an indicative of the flow properties of the powder.

It is defined as maximum angle possible between the surface of the pile of powder and the horizontal plane

$$\tan(\theta) = h / r$$

$$\theta = \tan^{-1}(h / r)$$

Where, θ is the angle of repose.

h is the height in cms

r is the radius in cms.

The powder mixture was allowed to flow through the funnel fixed to a stand at definite height (h). The angle of repose was then calculated by measuring the height and radius of the heap of powder formed. Care was taken to see that the powder particles slip and roll over each other through the sides of the funnel. Relationship between angle of repose and powder flow property.

Table No.3: Angle of Repose as an Indication of Powder Flow Properties

Sr. No.	Angle of Repose (°)	Type of Flow
1	< 20	Excellent
2	20 – 30	Good
3	30 – 34	Passable
4	> 34	Very Poor

4. Carr's index (or) % compressibility:

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It indicates powder flow properties. It is expressed in percentage and is give

$$I = \frac{D_t - D_b}{D_t} \times 100$$

Where, D_t is the tapped density of the powder and
 D_b is the bulk density of the powder.

Table No.4: Relationship between % compressibility and flow ability

% Compressibility	Flow ability
5 – 12	Excellent
12 – 16	Good
18 – 21	Fair Passable
23 – 35	Poor
33 – 38	Very Poor
< 40	Very Very Poor

5.Hausner ratio:

Hausner ratio is an indirect index of ease of powder flow. It is calculated by the following formula.

$$\text{Hausner ratio} = \frac{D_t}{D_b}$$

Where, D_t is the tapped density.

D_b is the bulk density.

Lower hausner ratio (<1.25) indicates better flow properties than higher ones (>1.25).

Identification of drug sample:

It was confirmed by melting point determination and also by FT-IR spectral analysis

Drug excipient Compatibility study:

Compatibility of the drug with excipients was determined by FT-IR spectral analysis, this study was carried out to detect any changes on chemical constitution of the drug after combined it with the excipients. The samples were taken for FT-IR study.

Evaluation of fast dissolving tablets

Weight variation:

20 tablets were selected randomly from the lot and weighted individually to check for weight variation. Weight variation specification as per I.P. is shown in table No.5

Table No.5: Weight Variation Specification as per IP

Average Weight of Tablet	% Deviation
80 mg or less	±10
More than 80 mg but less than 250 mg	±7.5
250 mg or more	±5

Hardness:

Hardness or tablet crushing strength (f_c), the force required to break a tablet in a diametric compression was measured using Monsanto tablet hardness tester. It is expressed in kg/cm^2 .

Friability (F):

Friability of the tablet determined using Roche friabilator. This device subjects the tablet to the combined effect of abrasion and shock in a plastic chamber revolving at 25 rpm and dropping a tablet at I height of 6 inches in each revolution. Prewighted sample of tablets was placed in the friabilator and were subjected to the 100 revolutions. Tablets were dusted using a soft muslin cloth and reweighed. The friability (F) is given by the formula.

$$F = \frac{W_{\text{initial}} - W_{\text{final}}}{W_{\text{initial}}} \times 100$$

4. Wetting time:

Wetting time is closely related to the inner structure of the tablets and to the hydrophilicity of the excipient. According to the following equation proposed by Washburn E.W (1921), the water penetration rate into the powder bed is proportional to the pore radius and is affected by the hydrophilicity of the powders.

$$dl/dt = r\gamma\cos\theta/(4\eta l)$$

Where l is the length of penetration, r is the capillary radius, γ is the surface tension, η is the liquid viscosity, t is the time, and θ is the contact angle. It is obvious that pores size becomes smaller and wetting time increases with an increase in compression force or a decrease in porosity. A linear relationship exists between wetting time and disintegration time. Thus wetting is the important step for disintegration process to take place.

A piece of tissue paper folded double was placed in a Petri plate (internal diameter is 6.5 cm) containing 6ml of water. The tablet was placed on the paper and the time for complete wetting of the tablet was measured in seconds. The method was slightly modified by maintaining water at 37° .

Wetting time corresponds to the time taken for the tablet to disintegrate when kept motionless on the tongue.

5. In-Vitro drug release:

Release of the drug *in vitro*, was determined by estimating the dissolution profile.

Dissolution test:

USP 2 Paddle apparatus was used and paddle was allowed to rotate at 50 rpm .phosphate buffer (PH 6.8) (900 ml) was used as a dissolution medium.

Mechanical Strength:

Tablets should possess adequate strength to withstand mechanical shocks of handling in manufacturing, packaging and shipping. Crushing strength and friability are two important parameter to evaluate a tablet for its mechanical strength.

Crushing Strength:

It is the force required to break a tablet by compression in the radial direction, it is an important parameter in formulation of mouth dissolve tablets because excessive crushing strength significantly reduces the disintegration time.

In the present study the crushing strength of the tablet was measured using Pfizer hardness testers. An average of three observations is reported.

Friability testing:

The crushing test may not be the best measure of potential behavior during handling and packaging. The resistance to surface abrasion may be a more relevant parameter. Friability of each batch was measure in “Electro lab friabilator”. Ten preweighed tablets were rotated at 25 rpm for 4 min, the tablets were then re weighed and the percentage of weight loss was calculated.

Rapidly Disintegrating Property

To evaluate the tablets for their rapid disintegration properties, following tests were carried out.

Wetting time:

Five circular tissue papers of 10 cm diameter are placed in a petridish with a 10 cm diameter. Ten millimeters of water-containing Eosin, a water-soluble dye, is added to petridish. A tablet is carefully placed on the surface of the tissue paper. The time required for water to reach upper surface of the tablet is noted as a wetting time.

Modified disintegration test:

The standard procedure of performing disintegration test for these dosage forms has several limitations and they do not suffice the measurement of very short disintegration times. The disintegration time for ODT needs to be modified as disintegration is required without water, thus the test should mimic disintegration in salivary contents. For this purpose, a petridish (10 cm diameter) was filled with 10 ml of water. The tablet was carefully put in the center of petridish and the time for the tablet to completely disintegrate into fine particles was noted.

Disintegration in oral cavity

The time required for complete disintegration of tablets in oral cavity was obtained from six healthy volunteers, who were given tablets from the optimum formulation.

Water absorption Ratio-

A piece of tissue paper folded twice was placed in a small Petri dish containing 6 ml of water. A tablet was put on the paper & the time required for complete wetting was measured. The wetted tablet was then weighed. Water absorption ratio, R, was determined using following equation,

$$R=10(wa/wb) \text{ where,}$$

Wb is weight of tablet before water absorption & wa is weight of tablet after water absorption.

In-vitro dispersion time-

Tablet was added to 10 ml of phosphate buffer solution, pH 6.8 at 37±0.5°C, Time required for complete dispersion of a Tablet was measured.

Conclusion

It is developing a novel, cost effective one step FDDT manufacturing process using conventional tableting technology for the production of robust tablets suitable for conventional packaging. This proprietary technology is applicable to a wide range of therapeutic agents including generics, thereby adding value, i.e. 'supergenerics' for veterinary or human application.. There is a clear opportunity for new enhanced oral products arising within this market segment. Approximately one-third of the population, primarily the geriatric and pediatric populations, has swallowing difficulties, resulting in poor compliance with oral tablet drug therapy which leads to reduced overall therapy effectiveness. A new tablet dosage format, the fast dissolving tablet has been developed which offers the combined advantages of ease of dosing and convenience of dosing in the absence of water or fluid. These tablets are designed to dissolve or disintegrate rapidly in the saliva generally within <60 seconds (range of 5-50seconds). Due to the constraints of the current FDDT technologies as highlighted above, there is an unmet need for improved manufacturing processes for fast dissolving tablets that are mechanically strong, allowing ease of handling and packaging and with production costs similar to that of conventional tablets. To fulfill these medical needs, formulators have devoted considerable effort to developing a novel type of tablet dosage form for oral administration, one that disintegrates and dissolves rapidly in saliva without the need for drinking water. The development of a fast-dissolving tablet also provides an opportunity for a line extension in the marketplace, A wide range of drugs (e.g., neuroleptics, cardiovascular drugs, analgesics, antihistamines, and drugs for erectile dysfunction) can be considered candidates for this dosage form. Pharmaceutical marketing is another reason for the increase in available fast-dissolving/disintegrating products. As a drug entity nears the end of its patent life, it is common for pharmaceutical manufacturers to develop a given drug entity in a new and improved dosage form. A new dosage form allows a manufacturer to extend market exclusivity, while offering its patient population a more convenient dosage form or dosing regimen. In this regard, fast-dissolving/disintegrating tablet formulations are similar to many sustained release formulations that are now commonly available. An extension of market exclusivity, which can be provided by

a fast-dissolving/disintegrating dosage form, leads to increased revenue, while also targeting underserved and under-treated patient populations. Although the cost to manufacture these specialized dosage forms exceeds that of traditional tablets, this additional cost is not being passed on to the consumer.

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