

Background

An oral suspension formulation of spironolactone at 5mg/ml in InOrpha[®] (for its safety profile) is proposed for neonatal use. This formula sedimentates rapidly (caking), impacting on appropriate use of oral suspension

Objective

The aim is to optimize the oral suspension of spironolactone in InOrpha[®] and assess its stability.

Material & Method

Galenic optimization

Added 0.2% xanthan gum (m/V) to the formula in InOrpha[®].

Dosing method

Stability indicating method via HPLC-UV

Stability study

2 conditions: $22^{\circ}C \pm 3^{\circ}C$ and $5^{\circ}C \pm 3^{\circ}C$

Triplicate analysis at D0, D15, D30, D60, D90, D120, D135 before opening and at D0, D15, D30, D37 after opening (with daily sampling of oral suspension) The parameters monitored are:

- Dosing of spironolactone and detection of degradation products
- Organoleptic characteristics, sedimentation (concentration in unstirred bottle), viscosity (rotary rheometer), density (hand refractometer), pH (potentiometry) and osmolality (osmometer)
- Microbial enumeration test and specific detection of E.coli according to the European Pharmacopoeia

✓ Optimization of the galenic formulation with the addition of a safe excipient for pediatrics. Sedimentation is no longer observed at 4 months post-production at 22°C ± 3°C and 5°C ± 3°C. Y Physico-chemical and microbiological stability of oral suspension has been demonstrated for a shelf-life of 135 days before opening (i.e. 4 effective months) and 37 days after opening (i.e. 1 effective month) at 22°C and 5°C.

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Conclusion/**Discussion**



Conservation at room temperature to simplify storage.