

# New Validated LC-MS Method Development and Estimation of Nitrosamine impurities in Canagliflozin

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## ABSTRACT

**Background:** Canagliflozin is most prescribed anti-diabetic drug, as diabetic drugs are consumed daily there may be a chance of consuming nitrosamine impurities beyond their limits hence, the Food and Drug Association (FDA) recommends checking for carcinogenic impurities in routine use drugs.

**Aims and Objectives:** The study aims to simultaneous estimation of 4 nitrosamines (NMDA, NEIA, NIEA, and NDIPA) by liquid chromatography-mass spectrometry (LCMS) to detect the limit of detection (LoD) and limit of quantitation (LoQ). estimation of these impurities (NMDA, NEIA) in canagliflozin tablet dosage form with specificity parameters.

**Methods:** Drug canagliflozin was collected from hetero labs, methanol, LC-MS grade acetonitrile, formic acid four impurities (NMDA, NEIA, NDIPA, NIEA) purchased from Merck Pharmaceuticals Mumbai. The Zorbax SB C18 column (250 x 4.6 mm, 3 μm) is used as the stationary phase, 0.1% formic acid and acetonitrile in the ratio of 70:30 is used as the mobile phase, methanol is used as diluent flow rate was maintained at 1-mL/min, the injection volume was fixed to 10 μL, which is run at 10 minutes. The electron ionization ion source, multiple reaction monitoring, and acquisition mode is used for the study. The time required for the solvent delay and detector off is 4 and 9.5 minutes, respectively. The product ions peaks of impurities were observed at 44 for NDMA, 99 for NEIA.

**Results:** The %RSD for the peak areas of NDMA, NEIA obtained from six replicate injections of standard solutions were 2.5, 9.8, 1.4 and 7.7, respectively. The %recovery of NDMA and NEIA were within the limit. The %RSD for the results obtained from the method precision study was within the limit.

**Conclusion:** The above observations indicate that the LC-MS method meets the acceptance criteria for the parameters selected for the validation study. Hence, the method is suitable for the determination of NDMA, NEIA in a Drug Substance by LC-MS.

**Keywords:** Canagliflozin, Electron ionization, LC-MS method, NMDA, NDEA, NEIPA, NDIPA.

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## INTRODUCTION

The study of nitrosamine impurities gained a lot of exposure since 2019 when FDA and EMA agencies recalled some antihypertensive drugs like sartans from the market due to the presence of them beyond their limits.<sup>1</sup> These impurities classified as class 1 according to ICH M7 Guidelines as mutagenic and carcinogenic.<sup>2</sup> The agencies declare to check the presence of these impurities in daily consumed drugs. Impurities may get incorporated through intermediates, starting materials, APIs, reagents,<sup>3</sup> Solvents, drugs containing functional groups carbamates, amides, N alkyl are nitrosated,<sup>4</sup> DMF is used as solvent in many drug synthesis including

Gliflozins.<sup>5</sup> These nitrosamines are very carcinogenic and effects toxicity to the human body.<sup>6,7</sup>

Since Gliflozins (canagliflozin) is one of the most prescribed drug after metformin, and it is consumed on daily base it is important to check the presence of impurities to check their limits.<sup>8</sup> Drug canagliflozin reduces the reabsorption of filtered glucose and lowers renal threshold for glucose and shows maximal effect in patients with uncontrolled type 2 diabetes mellitus (T2DM)<sup>9</sup> this is a unique mechanism of action approved by USFDA in 2017. It also improves the sensitivity of liver which is beneficiary for T2DM patients as serum insulin level declines.<sup>10,11</sup> The drug helps in the reduction

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of BP and shows diuretic action. The chemical structure of canagliflozin is shown in Figure 1. In order to determine its limit, the median toxic dose (TD50) is used. ICH M7 (R1) recognizes the TD50 for the calculation of acceptable excess risk, which allows the calculation of acceptable intake (AI) for mutagenic and carcinogenic impurities.<sup>12</sup> A lot of literature review on canagliflozin reported some analytical methods a UV method for estimation of canagliflozin in bulk and formulation, the developed method obeys Beer Lambert's law with a concentration range from 5 to 10 mcg,  $\lambda_{max}$  was found at 290 nm. RS<sup>13</sup> method which is checked for purity of the drug by using solvent methanol,  $\lambda_{max}$  was detected at 290 nm, and linearity concentration ranges from 5 to 25 mcg/mL. A HPTLC study was reported by sheet team for determination of canagliflozin bulk by using mobile phase toluene, ethyl acetate, methanol in ratio 2:2:1 and silica gel 60F<sub>254</sub> as stationary phase the spots were identified by densitometric analysis at UV detector 290 nm.<sup>14</sup>

Some RPHPLC methods were also developed for the estimation of canagliflozin in bulk and formulations, using different mobile phases and stationary phases according to ICH guidelines.<sup>15</sup> Another few methods were reported on the simultaneous estimation of canagliflozin with other oral hypoglycemic agents like metformin. Simultaneous estimation of metformin and canagliflozin was developed by the Murugasen team; they developed an RPHPLC method for simultaneously estimating empagliflozin and canagliflozin; they used Grace Mart C18 column as stationary phase and acetonitrile: ammonium acetate buffer as mobile phase, PDA as detector and nanometer fixed at 252 nm,<sup>16</sup> this method found to be effective and less time-consuming. No analytical method was reported for the estimation of nitrosamine impurities in canagliflozin drug; hence the present study concentrates on this and tried to develop a new LC-MS method development to check their limits in bulk and formulations. Figure 2 describes nitrosamine impurities.

## Experimental Procedure

### Chemicals and instruments used

NDEA (N-Nitrosodiethylamine) having purity of 98% and NDMA (N-Nitroso-di-methylamine) having purity of 98 percent purchased from Yarrow Chemicals, Mumbai (Sigma Aldrich-German).

There was a solution of N-Nitroso-ethyl-isopropylamine (NEIA) and N-Nitroso-di-isopropylamine (NDIPA) from Yucca Enterprises, Mumbai (Sigma Aldrich, German) used in this experiment. In this research, Acetonitrile (99.9%) and Formic acid (98–100%) were procured from Bros Scientifics (Qualigens, Mumbai). In this investigation, ultrapure water was generated using Millipore Corporation's Milli-Q® purification system (Bedford, MA, USA). An Agilent (US) Zorbax SBC18 column (250 x 4.6 mm, 3.5  $\mu$ m) served as a stationary phase for the chromatographic separations. Water (A) and acetonitrile (B) were mixed in a 70:30 ratio to produce the mobile phases. Methanol was used as a diluent to maintain a 1 mL/min flow rate. There were two liquid chromatography systems: a binary

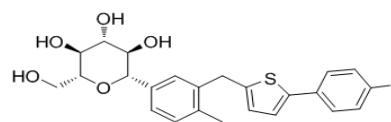


Figure 1: Canagliflozins structure

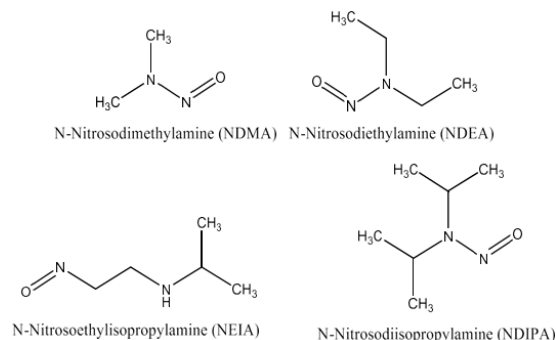


Figure 2: Various impurities of nitrosamine

LC pump and a Waters Quattro Micro tandem mass spectrometer (Waters, Hertfordshire, United Kingdom). Chromatographic separation was performed using gradient elution using the mass spectrometer in positive ion mode. In addition to N-Nitrosodi-methylamine, N-Nitrosodiethylamine, N-Nitroso-ethyl-isopropylamine, and N-Nitroso-di-isopropylamine, the multiple reaction monitoring (MRM) system of the Waters Quattro Micro tandem quadrupole mass spectrometer was utilized in this study. Calculations were performed with Microsoft Excel 2010 and data acquisition was performed with MassLynx™ software.

## METHODOLOGY

### Mobile Phase and Standard Solution Preparation

The mobile phase employed in this study consisted of acetonitrile and formic acid (0.1%) in a 70:30 ratio. To prepare formic acid (0.1%), 2 mL of formic acid was dissolved in 1000 mL of MilliQ ultra-pure H<sub>2</sub>O and mixed for 15 minutes. Acetonitrile and methanol solvents were also sonicated for 15 minutes. Certified standard solutions of NDMA (1-mg/mL), NDEA (1-mg/mL), NEIA (1-mg/mL), and NDIPA (1-mg/mL) were used. N-Nitroso-di-methylamine, N-Nitrosodiethylamine, N-Nitroso-ethyl-isopropylamine, and N-Nitroso-di-isopropylamine final standards were prepared and diluted with methanol to 999 ng/mL.

### Sample Solution Preparation

After adding 1-mL of diluent methanol to the headspace vial, 10 mg of the test sample was weighed accurately and placed inside the septum-sealed vial. Injecting the blank solution into the system followed the 16-minute equilibration with the mobile phase, leading to the recording of the chromatogram. Due to its programming, the data processor is able to inhibit peaks easily due to blanks. Chromatograms were recorded after injecting six times the standard solutions separately into the system.

## Validation Procedure

We validated LC-MS measurements of four N-nitrosamines through MRM mode by considering system suitability, specificity, sensitivity, linearity, LoQ, LoD, accuracy, precision, and stability. The following equation was used to determine the matrix effect.

$$\text{Matrix Impact} = \frac{A}{B} \times 100$$

where,

- A- Matrix concentrations of sample
- B- blank/mobile phase

## Detection of Specificity

Comparing the chromatograms of contaminants-free samples before and after being spiked with the respective analytes verified the specificity of the method for N-Nitroso-di-methylamine, N-Nitrosodiethylamine, N-Nitroso-ethyl- isopropylamine, and N- Nitroso-di-isopropylamine. When N-Nitroso-di-methylamine, N-Nitrosodiethylamine, N-Nitroso-ethyl- isopropylamine, and N- NNitroso-di-isopropylamine are retained at different retention times, no peak should co-elute with them.

## Accuracy, Precision and Linearity

For the N-Nitroso-di-methylamine, N-Nitrosodiethylamine, N-Nitroso-ethyl-isopropylamine, and N-N-Nitroso-di-isopropylamine assays, three seven-point calibration curves were established, incorporating canagliflozin, a contaminants-free drug, which was excluded from the linear regression. Concentrations of calibration standards were determined by evaluating the calibration curves individually through linear regression, ensuring that they shared slope, intercept, and a coefficient of determination of at least 0.999 for linearity. Each calibration curve was required to exhibit precision of less than 15% (expressed as the relative standard deviation), accuracy of less than 15% (expressed as the relative bias of measured concentrations from nominal concentrations) at each concentration level, with a permissible deviation of 20% at the lowest concentration level. To assess inter-day precision and accuracy, assays for NDMA, NDEA, NEIA, and NDIPA were conducted in triplicate on three different runs across two distinct days. Additionally, intra-day precision of empagliflozin matrix was examined in triplicate in the presence of NDMA, NDEA, NEIA, and NDIPA, as identified by positive tests.

## Limit of Quantification

LoQ is a parameter that represents the concentration at which acceptable accuracy and precision can still be achieved. The deviation of three repetitive measurements from the nominal concentration cannot exceed 20%, whereas the relative bias from the nominal concentration cannot exceed 20%. Additionally, the S/N ratio should be greater than 4 for N-Nitroso-di-methylamine, N-Nitrosodiethylamine, N-Nitroso-ethyl- isopropylamine, and N- Nitroso-di-isopropylamine.

## Sample Preparation

In order to increase the sensitivity of the results, a precise amount of finely powdered canagliflozin tablets (10 mg) was obtained. In

a 1.5 mL centrifuge tube, one-tenth of this weight was accurately weighed and then mixed with 500 mL of methanol containing the internal standard (NDMA). An additional 5 minutes were spent sonicating the mixture after vigorous shaking for 5 minutes. Following vigorous shaking for 5 minutes and sonication for 5 minutes, the suspension was diluted to a final volume of 1000 mL with MilliQ® water. Following centrifugation at 3°C at 5000 rpm for 35 minutes, the suspended samples were collected. As soon as the supernatants were centrifuged, they were carefully transferred into glass vials for further injection.

## RESULTS

According to the validation results below, the LC-MS/MS method developed for the quantification of the four contaminants N-Nitroso-di-methylamine, N-Nitrosodiethylamine, N-Nitroso-ethyl- isopropylamine, and N- Nitroso-di-isopropylamine is suitable for the determination of even traces of the four analytes.

### Systemic Validation

There was a matrix effect of  $96.44 \pm 3.43\%$  to  $98.88 \pm 1.21\%$ . There are no measurable interferences with canagliflozin caused by nitrosamine impurities in extraction recovery and matrix effects. Table 1 shows the system suitability parameters.

### Precision, Accuracy, and Linearity

Each analyte had different calibration ranges: NDMA 0.092 to 0.463 ppm, NDEA 0.065 to 0.465 ppm, NEIA 0.095 to 0.445 ppm, and NDIPA 0.089 to 0.440 ppm. Weighted ( $1/\text{concentration}^2$ ) linear regression was applied to achieve good linearity. Figures 3-6 show the coefficients of determination of calibration curves for all analytes. Figures 7-12 illustrate representative chromatograms and mass spectrometer data. A blank chromatogram confirms the specificity of the methods. According to the results, NDMA, NDEA, NEIA, and NDIPA were found to be suitable for 2.5, 9.8, 1.4, and 7.7, respectively shown in Table 2. For precision and accuracy in NDMA, the standard deviations were 2.4 and 2.9, for NDEA they were 7.9 and 3.5, NEIA they were 4.0 and 3.3, and for NDIPA they were 4.8 and 3.7.

### LoQ and LoD

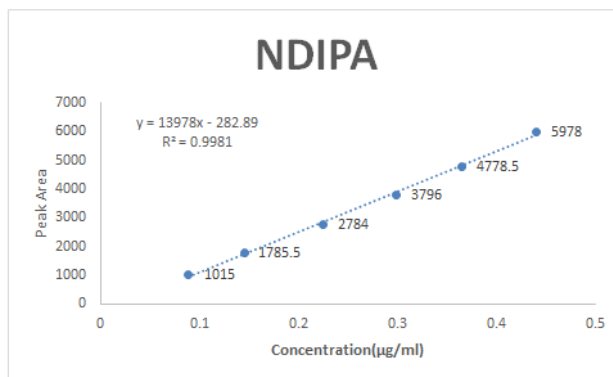
We found that the LLoD values for NDMA, NEIA, NDIPA, and NDEA were 0.02, 0.015, and 0.13 ppm, respectively. A further 0.09 ppm of LLoQ was found for NDMA, NEIA, and NDIPA, while 0.06 ppm was found for NDEA. Two sets of SQC samples were repeated for accuracy (bias within and between runs, -5.6 to -3.2%) and precision (coefficient of variation, 6.5%) for all tested concentrations of analytes (Table 3). A deviation of no more than  $\pm 20\%$  is acceptable for quality control above LoQ and no more than  $\pm 15\%$  is acceptable for LoQ.

### Accuracy

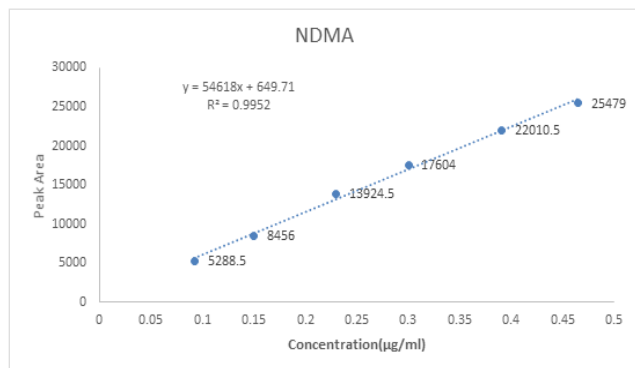
The triplicate analysis of the same finished product demonstrated excellent precisions, ranging between 0.8 and 15.3% for each analyte. The assay's repeatability was further confirmed by using varied amounts of the relevant analyte in finished products. The mean absolute recovery in ground tablets was

**Table 1:** System suitability results

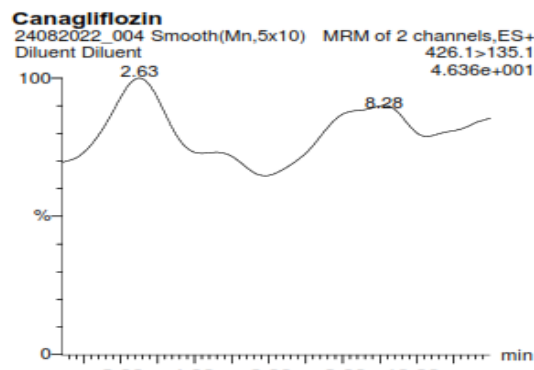
Injection Number	Curve area of NDMA	Curve area of NDEA	Curve area of NEIA	Curve area of NDIPA
1	13584	5652	9623	4526
2	13523	5896	9442	4412
3	13588	5748	9564	4896
4	13963	5847	9847	4231
5	14050	6012	9632	4452
6	14392	4521	9547	3865
Average	13850.0	5612.7	9609.2	4397.0
SD	344.3	548.9	135.0	340.4
% RSD	2.5	9.8	1.4	7.7



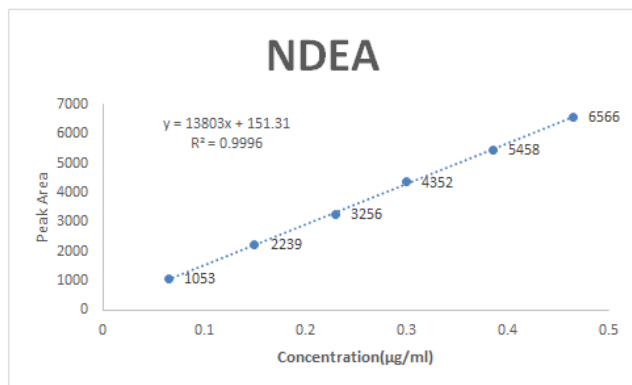
**Figure 6:** NDIPA Linearity curve



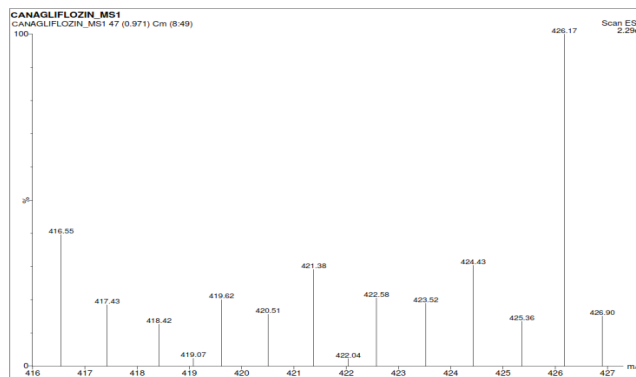
**Figure 3:** NDMA Linearity curve



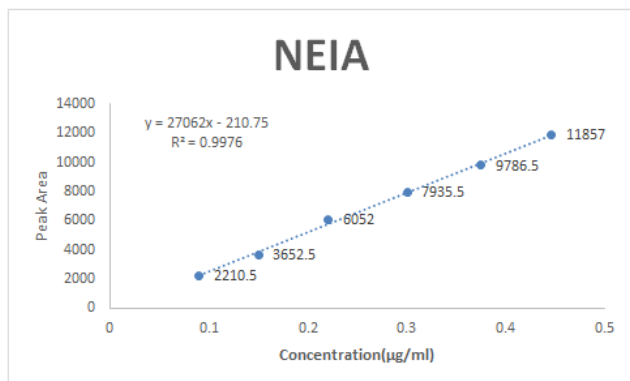
**Figure 7:** Chromatogram of blank injection



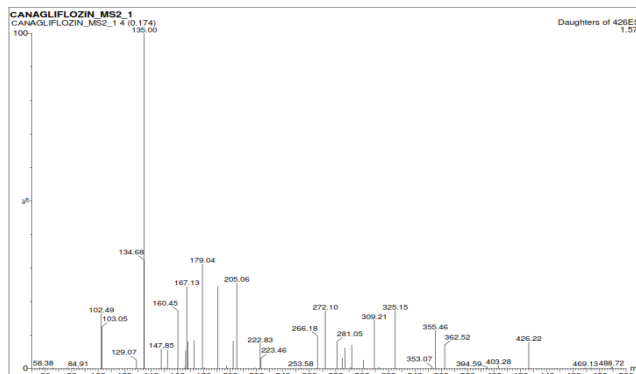
**Figure 4:** NDEA Linearity curve



**Figure 8:** Mass spectra of canagliflozin drug



**Figure 5:** NEIA Linearity curve



**Figure 9:** Mass spectra of canagliflozin

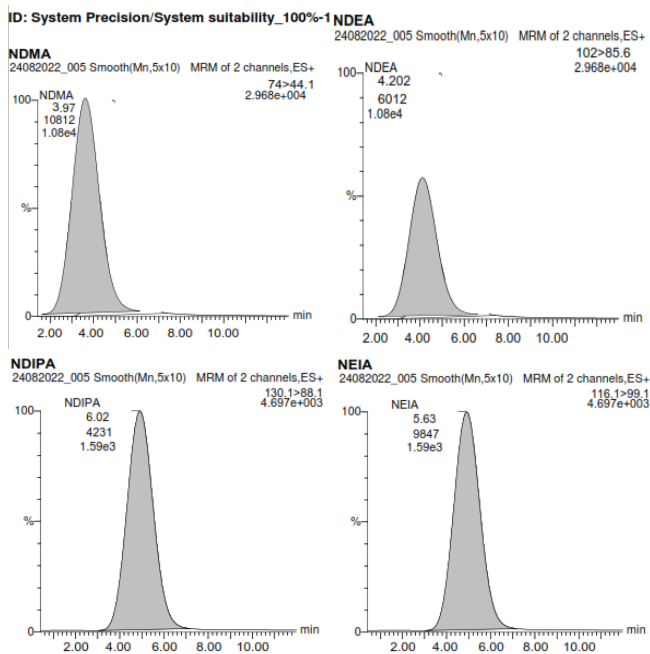


Figure 10: Chromatograms of impurities

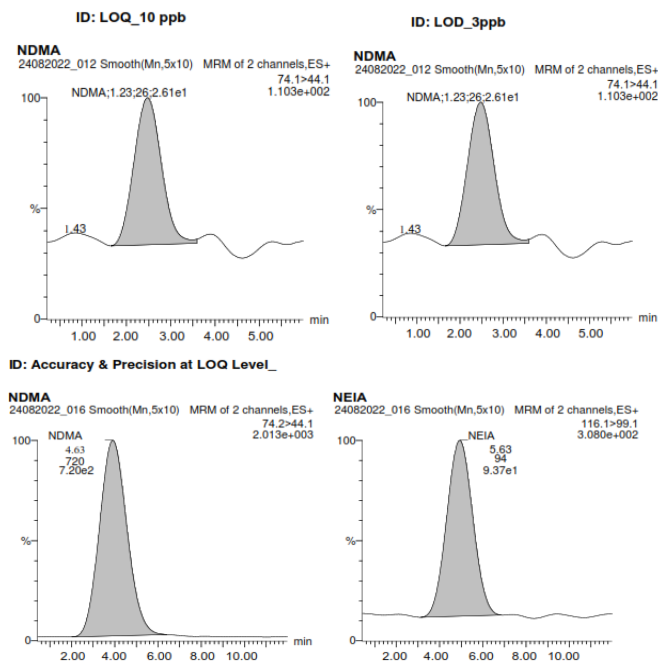


Figure 11: LOD chromatograms

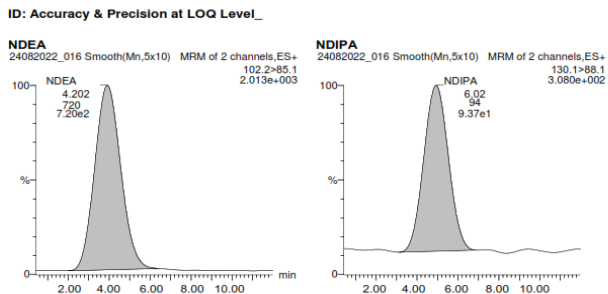


Figure 12: Chromatogram of precision at QL

Table 2: QL precision level

QL Level	NDMA- Peak area	NDEA- Peak area	NEIA-Peak area	NDIPA- Peak area
Injection-1	5322	1124	2235	1235
Injection-2	5314	1025	2214	1245
Injection-3	5103	1036	2256	1123
Injection-4	5490	1048	2214	1189
Injection-5	5291	976	2112	1153
Injection-6	5208	885	2387	1111
Average	5288.0	1015.7	2236.3	1176.0
SD	129.1	79.9	88.9	56.5
%RSD	2.4	7.9	4.0	4.8

Table 3: % recoveries at 3 concentrations

Accuracy level	Preparations	% Recovery of NDMA	% Recovery of NDEA	% Recovery of NEIA	% Recovery of NDIPA
50%	1	105.6	103.6	112.05	115.6
	2	104.5	102.5	112.5	115.6
	3	104.3	103.4	110.4	118.7
100 %	1	108.7	108.1	111.4	117.1
	2	107.1	106.8	109.7	115.7
	3	106.1	102.9	105.7	109.9
150%	1	106.3	104.7	110.2	112.2
	2	104.5	105.8	102.5	114.2
	3	105.4	104.2	104.5	112.5

determined to be  $104.3 \pm 1.05\%$  for NDMA,  $103.4 \pm 0.09\%$  for NDEA,  $110.80 \pm 2.02\%$  for NEIA, and  $115.6 \pm 2.09\%$  for NDIPA (Table 3). This indicates that the complete recoveries for ground tablets and tablet extracts are comparable, underscoring the efficiency of the extraction method. NDMA, NDEA, NEIA, and NDIPA exhibited percentage recoveries between 70 to 130% across three different concentrations.

**CONCLUSION**

An LC-MS method has been developed for screening and quantifying four nitrosamines in canagliflozin in this study. As a result of the development, the simultaneous estimation of nitrosamines can also be applied to other drugs. It was validated against the target nitrosamines both in APIs and finished products, with satisfactory results obtained. It has therefore proven to be an excellent screening and qualification method for nitrosamines due to its exemplary performance and specificity. Canagliflozin formulations can be routinely analyzed for nitrosamine impurities using the developed method.

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## REFERENCES

1. Bharate S. S. Critical Analysis of Drug Product Recalls due to Nitrosamine Impurities. *Journal of medicinal chemistry*. 2021; 64(6), 2923–2936. <https://doi.org/10.1021/acs.jmedchem>
2. International Council for Harmonisation of Technical Requirements for Pharmaceuticals for Human Use; “ICH Harmonised Guideline - Assessment And Control Of DNA Reactive (Mutagenic) Impurities in Pharmaceuticals to Limit Potential Carcinogenic Risk, M7(R1)”; 2017. [http://www.ich.org/fileadmin/Public\\_Web\\_Site/ICH\\_Products/Guidelines/Multidisciplinary/M7/M7\\_R1\\_Addendum\\_Step\\_4\\_2017\\_0331](http://www.ich.org/fileadmin/Public_Web_Site/ICH_Products/Guidelines/Multidisciplinary/M7/M7_R1_Addendum_Step_4_2017_0331)
3. Jires, J., Kalásek, S., Gibala, P., Rudovsky, J., Douša, M., Kubelka, T, et al. Insight into the formation of N-nitrosodimethylamine in metformin products. *Journal of pharmaceutical and biomedical analysis*. 2021; 195, 113877. <https://doi.org/10.1016/j.jpba.2020.113877>
4. ICH – Harmonized Tripartite Guideline, “Impurity in new drug substance Q3 (A)”, International Conference on Harmonization, IFPMA, Geneva, Switzerland, 2006. (Accessed 20 Nov 2021).
5. Liu, J., Xie, B., Mai, B., Cai, Q., He, R., Guo, D, et al. Development of a sensitive and stable GC-MS/MS method for simultaneous determination of four N- nitrosamine genotoxic impurities in sartan substances. *Journal of Analytical Science and Technology*. 2021; 12(1). doi:10.1186/s40543-020-00254-2
6. Sedlo, I., Kolonić, T., & Tomic, S. Presence of nitrosamine impurities in medicinal products. *Archives of Industrial Hygiene and Toxicology*. 2021; 72(1), 1–5.
7. Tuesuwan, B., & Vongsutilers, V. Nitrosamine Contamination in Pharmaceuticals: Threat, Impact, and Control. *Journal of pharmaceutical sciences*. 2021; 110(9), 3118–3128. <https://doi.org/10.1016/j.xphs.2021.04.021>
8. Ayoub, B. M., & Mowaka, S. LC-MS/MS Determination of Empagliflozin and Metformin. *Journal of chromatographic science*. 2017; 55(7), 742–747. <https://doi.org/10.1093/chromsci/bmx030>
9. National Center for Biotechnology Information. PubChem Compound Summary for CID 11949646, Empagliflozin. Retrieved December 2, 2021 from <https://pubchem.ncbi.nlm.nih.gov/compound/Empagliflozin>.
10. Buse, J. B., Wexler, D. J., Tsapas, A., Rossing, P., Mingrone, G., Mathieu, C, et al. Erratum. A consensus report by the American Diabetes Association (ADA) and the European Association for the Study of Diabetes (EASD). *Diabetes care*. 2020; 43(7), 1670–1670.
11. Guo, C., Liu, Q., Zhang, L., Zheng, J., Wang, Y., Yang, S, et al. *Chinese journal of chromatography*. 2020; 38(11), 1288–1293. <https://doi.org/10.3724/SP.J.1123.2020.03008>
12. U.S. Food & Drug Administration (FDA). Development and validation of a Nitrosodimethylamine (NDMA), N-Nitrosodiethylamine (NDEA), N-Nitrosoethylisopropylamine (NEIPA), N-Nitrosodiisopropylamine (NDIPA), N-Nitrosodibutylamine (NDBA) and N-Nitroso-N-methyl-4-aminobutyric acid (NMBA) in ARB drugs, 2019b. <https://www.fda.gov/media/125477>. Accessed 24 Dec 2021.
13. Ishpreet kaur, Sharad Wakode, Harsharan pal singh. Development and validation of UV method for estimation of canagliflozin in bulk and pharmaceutical dosage forms *pharma methods*. 2015; 6(2):82-86.
14. Ishpreet kaur, Sharad Wakode, Harsharan pal singh. Development and validation of stability indicating HPTLC method for estimation of canagliflozin in bulk and pharmaceutical dosage forms *Journal of applied pharmaceutical science*. 2016; vol 6(5): 51-57
15. Ishpreet kaur, Sharad wakode, Harsharan pal singh. A stability indicating reserve phase HPLC method for determination of canagliflozin in bulk and pharmaceutical dosage form *pharma methods*. 2016; 7(1)54-62.
16. Arul selvan murugesan, Annapurna mukthinulapati mathusri. Simultaneous estimation of Glifozin, Canagliflozin, Dapagliflozin, Empagliflozin using RPHPLC, *Acta scientifica pharmaceutical sciences*. 2022; 6(1) 3-12.