



Review Article

Review article on instrumental analysis of molnupiravir, favipiravir, and ritonavir in different matrices

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ABSTRACT

Ever since the emergence of the COVID-19 outbreak, there have been so many casualties worldwide. According to WHO, more than half a billion people were infected by the virus, of which 6.5 million deaths were counted. However, some already existing antivirals were repositioned and repurposed as anti-COVID-19 therapeutics such as molnupiravir, favipiravir, and ritonavir. The emergency needs to develop effective anti-viral drugs for the treatment of COVID-19 infection. Consequently, there arose a need for effective, rapid, accurate, and reliable techniques for the determination of these antivirals. Here in this review, the different reported analytical methods for the quantitative determination of the studied anti-viral drugs were discussed. These reported methods include spectrophotometric methods, spectrofluorometric methods, electrochemical methods, and different chromatographic methods, with the reported method used for the quantitative determination of the studied anti-viral drugs in a single dosage form or in a co-formulated mixture also in different biological fluids and samples.

1. Introduction

Coronavirus disease 2019 (COVID-19) is a member of the novel coronaviruses, which is caused by the SARS-CoV-2 virus. It's one of the coronaviruses of the family *Coronaviridae* [1] which have been around for

quite a time, causing serious symptoms of fever and other respiratory illnesses such as dyspnea and pneumonia [2]. Some of the remarkable traits that distinguish this family of viruses are their extensive ability to recombine and mutate, in addition to their

ability to infect a variety of species and cell types. Because of this, they keep evolving and re-emerging, causing a lot of deaths [3, 4]. Often, outbreaks of coronaviruses start from animal hosts owing to their ability to jump between species. Examples of this are the outbreaks of SARS in 2002, MERS in 2012, and COVID-19 in 2019 which all started from animal hosts like bats and camels [3, 5-7]. According to WHO, there have been 628,694,934 cases of COVID-19 worldwide, of which 6,576,088 deaths were reported [8]. Hence, there was an urgent need for a treatment. For this sake, various antiviral drugs have been repurposed for the treatment of COVID-19, which were previously used for the treatment of other viral infections such as hepatitis C and HIV. The most important of such drugs are remdesivir, favipiravir, hydroxychloroquine, ritonavir [2, 9], and molnupiravir [10] of which only molnupiravir (MLP), favipiravir (FVR) and ritonavir (RTV) will be discussed here.

Molnupiravir

MLP (**Fig:1**) is an isopropyl ester prodrug that is converted inside the body into the active form¹; β -d-N4-hydroxycytidine [11]. It has a broad-spectrum antiviral activity against RNA viruses like influenza, SARS, MERS, and Ebola. Due to this, it was repurposed to be used against mild-to-moderate COVID-19 cases [12, 13]. It's a nucleoside analog that targets the RNA-dependent RNA-polymerase (RdRp) enzyme, which lies in the core of coronaviruses replication machinery [14], inducing errors in the RNA sequence, producing a fatally mutated viral RNA, and even inhibiting the RdRp enzyme. This consequently inhibits viral replication and pathogenesis [10-12].⁴

Favipiravir

FVR (**Fig:1**) is also a nucleotide analog (guanine) [15] and was initially used for the treatment of influenza, but later was repositioned as an anti-COVID-19 drug due to its wide antiviral activity spectrum [1, 16, 17]. Like molnupiravir and all nucleoside analogs, favipiravir also inhibits the viral

RdRp enzyme and can cause fatal mutations when incorporated into the viral RNA, resulting in alleviated disease severity [14, 15].

Ritonavir

RTV (**Fig:1**) is one of the few antivirals used for the treatment of HIV; it's a potent HIV protease inhibitor [18] that's usually used in combination with other synergetic antivirals [19, 20]. For this, it was repositioned as a co-administered drug for the treatment of COVID-19. The literature included co-administration of These antivirals demonstrated some treatment efficacy; however, there is a need to develop accurate and reliable methods for the determination of these drugs. In the following section of this article, the most recent literature concerning the determination of MLP, FVR, and RTV will be review.

Review of the analytical methods:

Different analytical methods were proposed for determination of MLP, FAR, and RTV in different matrices this method of analysis will be summarized as follows:

Spectrophotometric methods:

A few techniques were reported for the spectrophotometric determination of MLP, FVR, and RTV in bulk form and in pharmaceutical formulations, and they are summarized in **Table 1**.

Spectrofluorimetric methods:

A few techniques were reported for the spectrofluorimetric determination of MLP, FVR, and RTV as summarized in **Table 2**.

Chromatographic methods:

Most of the reported techniques in the literature were chromatographic. **Table 3** summarized the most recently published methods of determination of MLP, FVR, and RTV in a variety of matrices such as human and rat plasma, pharmaceutical formulations, and environmental water.

Electrochemical methods:

Some electrochemical approaches to the determination of MLP, FVR, and RTV were published (Table 4)

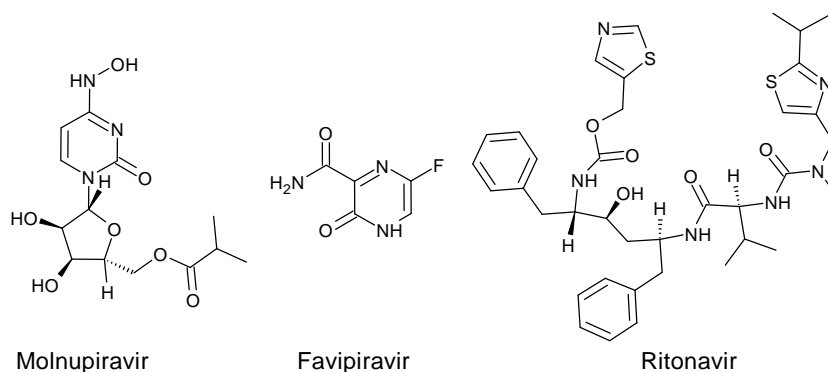


Figure 1: Chemical structures of molnupiravir, favipiravir and ritonavir.

Table 1: Spectrophotometric methods for determination of MLP, FVR, & RTV.

Drug(s)	Matrix	Method or reagent	λ_{\max}	Ref.
FVR	Bulk & tablets	Zero order & first order derivative	322 nm (pH 4) 361 nm (pH 6.4) 237 nm (pH 9)	[21]
FVR	Bulk & tablets	Methyl orange- (MO) & Methyl red- (MR) based colorimetry	477 nm (MO) 521.6 nm (MR)	[22]
MLP	Pure form & capsules	Diazo coupling-based spectrophotometry	515 nm	[23]
RTV	Pure form & tablets	Ethanol (solvent)	260 nm	[24]

Table 2. Spectrofluorometric methods for determination of MLP, FVR, & RTV.

Drug(s)	Matrix	Method	$\lambda_{\text{Excitation}}$	$\lambda_{\text{Emission}}$	Ref.
FVR/ Remdesivir	Synthetic mixtures & Human plasma	First derivative order	195 nm	335 nm	[25]
FVR	Tablets & Human plasma	Relative synchronous fluorescence intensity	312 nm	372 nm	[26]
FVR	Human plasma	Synchronous spectrofluorimetry	363 nm	423 nm	[27]
MLP	Human plasma	PA@CQDs-based spectrofluorimetry	440 nm	504 nm	[28]

Table 3. Chromatographic methods for determination of MLP, FVR, & RTV.

Drug(s)	Matrix	Column	Mobile phase	System	Ref.
FVR	Human plasma	RP-BEH C18 column	Methanol:ACN:water (acidified with orthophosphate, pH 4)	15:35:50 UPLC-DAD	[29]
FVR	Tablets & Human	Pre-coated silica gel 60	Ethyl acetate:methanol: ammonia (8:2:0.2, v/v)	Normal phase TLC	[30]

	plasma	F254 aluminum plates				
FVR	Bulk & Tablets	Poroshell 120EC-C18 Column	0.1% formic acid in water & 0.1% formic acid in ACN (90:10, v/v)	HPLC–DAD	[31]	
FVR	Human plasma	Acquity UPLCr BEH HILIC column	ACN & 0.005% ammonia in water (75:25, v/v)	UPLC–MS/MS	[32]	
FVR	Tablets	Zorbax C18 column	25 mM phosphate buffer (pH 3.5 ± 0.05) & 0.1% (w/v) heptane sulphonic acid sodium salt– methanol–acetonitrile (62:28:10, v/v)	HPLC–DAD	[33]	
FVR	Human plasma	Hypersil ODS C18 column	50 mM phosphate buffer (pH = 2.5) & ACN (60:40, v/v)	Gadolinium-based MIL microextraction– HPLC–UV Menthol-assisted microextraction– HPLC–UV	[34]	
FVR	Human plasma	Hypersil ODS C18 column	50 mM phosphate buffer (pH = 2.5) & ACN (60:40, v/v)	microextraction– HPLC–UV	[35]	
FVR	Rat plasma	Shim-pack GISS C18 column	Gradient elution; water:ACN (80:20 to 0:100) + 0.1% v/v formic acid	UHPLC–MS/MS	[36]	
FVR, MLP, & RTV	Pure form & capsules	Silica gel 60F254 TLC plates Poroshell 120 EC-C18 column	Methylene chloride: ethyl acetate: methanol: 25% ammonia (6:3:4:1, v/v/v/v)	HPTLC– Densitometric scanning	[37]	
FVR	Rat plasma	RP-C18 column	methanol: 0.1% formic acid (95:5, v/v)	UPLC–MS/MS	[38]	
MLP & FVR NHC, the active metabolite of MLP	Tablets & capsules	core-shell column Agilent Zorbax	0.1M SDS, 0.01M Brij-35, and 0.02M monobasic potassium phosphate	HPLC–UV/DAD	[39]	
MLP	Human plasma	Eclipse plus C18 column	0.2% Methanol: acetic acid (5:95, v/v)	HPLC–MS/MS	[40]	
MLP	Bulk	Phenomenex C18 column	10mM phosphate buffer (pH 7): ACN (80:20, v/v)	HPLC–DAD	[41]	
MLP	Tablet	Agilent C18 column	Orthophosphoric acid: ACN (60:40, v/v)	RP-HPLC–DAD	[42]	
RTV/	Human	Thermo BDS	Gradient elution; Deionized	HPLC–MS/MS	[43]	

Nirmatrelvir	plasma	Hypersil C18 column	water (solvent A) & methanol (solvent B), each with 0.1% v/v formic acid		
RTV	Pure form & tablets	ODS C18 column	20 mM KH ₂ PO ₄ (pH 3) & ACN (45:55, v/v)	HPLC–UV/Vis	[24]
RTV/ Ombitasvir/ Paritaprevir	Tablets	Inertsil ODS-C18 column	0.02 M phosphate buffer (pH 4.5): ACN: methanol (50:30:20, v/v)	RP-HPLC–UV/Vis	[44]
RTV	Environmental water	Inertsil ODS C18	Acidified water (pH 3.5): ACN (40:60, v/v)	SPE–HPLC–UV/Vis	[45]
RTV/ Lopinavir	Human plasma	analytical column	Gradient elution; 5 mM methanol & ammonium acetate (85:15, v/v)	UPLC–MS/MS	[46]
Darunavir	Tablet	C18 column	0.01N KH ₂ PO ₄ : ACN (45:55, v/v)	RP-HPLC–DAD	[47]
RTV	Yellow catfish Lipid nanocarriers	Alltima C8 column	Gradient elution; ACN & 0.1% formic acid	PT-SPE–UPLC–MS/MS	[48]
RTV		Inertsil ODS-3V C18 column	Orthophosphoric acid (OPA) in water (pH 3) & CAN	SPE–RP-HPLC–UV/Vis	[49]
RTV/ Lopinavir	Tablet	Kromasil C18 column	Phosphate buffer:ACN (30:70, v/v)	RP-HPLC–UV/Vis	[50]
FVR	Film-coated tablets	Inert sustain AQ-C18	Gradient elution; KH ₂ PO ₄ buffer:ACN (98:2, v/v) & water:ACN (50:50, v/v)	HPLC–DAD	[51]
RTV/ Nirmatrelvir	Human plasma	Zorbax XDB-C18 X-bridge phenyl columns	Gradient elution; aq. ammonium formate/formic acid buffer (pH 3.5): ACN (9:1, v/v)	HPLC–MS/MS	[52]
MLP	Rat plasma	Agilent ZORBAX eclipse plus C18 columns	Methanol:ACN (60:40, v/v)	HPLC–MS/MS	[53]
RTV/ Lopinavir	Rat plasma	Pharmaceutical dosage forms	Gradient elution; ACN: 0.1% formic acid	UHPLC-MS/MS	[54]
FVR		Nucleosil C18 column	ACN: methanol: water (50:40:10, v/v)	HPLC–DAD	[55]

Table 4. Electrochemical methods for determination of MLP, FVR, & RTV.

Drug(s)	Matrix	Method/Technique	Electrode/sensor	LOD	Ref.
FVR	Tablets & Serum Samples	AdSDPV AdSSWV	Diamond NPs-C paste (modified Carbon paste electrode)	4.83×10 ⁻⁹ M (Tab) 5.18×10 ⁻⁸ M (Ser) 2.44×10 ⁻⁷ M (Tab) 4.38×10 ⁻⁸ M (Ser)	[56]
FVR	Tablets & Serum Samples	CV & DPV	Au NPs/NiS ₂ NS/BC/GCE/MIP	0.13 nM	[57]
FVR	River water, human plasma, & urine	CV, DPV, EIS, & CA	MIP-Co/Ni@MOF/SPE	7.5×10 ⁻¹¹ M	[58]
FVR	Plasma & urine	CV, DPV, EIS	MoS ₂ @MIP core-shell nanocomposite	0.002 nM	[59]
MLP	Capsules	CV, EIS, & SWV	GCE modified with rGO	0.03 μM	[60]
FVR	Tablets, human urine, & artificial blood	DPV	Pencil graphite electrode (PGE)	0.35 μM	[61]

Conclusion

This review includes the most recent methods of determination of molnupiravir, favipiravir, and ritonavir, which were reported in 2022. There were a relatively small number of reported spectroscopic and electrochemical techniques. Meanwhile, on the other hand, most of the reported literature was chromatographic. The techniques included the determination of MLP, FVR, and RTV in bulk form, tablets, capsules, human and rat plasma, urine samples, combined with other antivirals, and in the form of their degradation products.

Conflict of Interest

The authors declare and state that this research was conducted in the absence of any potential or source for conflict of interest.

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