

# Standardization of Microbiological Parameters for Some Pharmaceutical Formulations

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#### Abstract

**Introduction:** Contamination of pharmaceutical formulations by microbes poses a threat to both product integrity and patient safety, regardless of whether the formulation is sterile or not.

Aim of the study: Standardization of microbiological parameters for some pharmaceutical formulations Material and method: Various pharmaceutical formulations, such as oral syrups, topical creams, ocular solutions, and injectables, were examined.

**Conclusion:** The standardization of microbiological characteristics in pharmaceutical formulations is essential for guaranteeing product safety, effectiveness, and adherence to regulatory standards.

Keywords: Standardization, Microbiological, Parameters, Pharmaceutical Formulations, Etc

#### 1. INTRODUCTION

#### **1.1 OVERVIEW**

Contamination of pharmaceutical formulations by microbes poses a threat to both product integrity and patient safety, regardless of whether the formulation is sterile or not. The permissible microbiological limits for various formulations are defined by regulatory standards such as the United States Pharmacopeia (USP), the European Pharmacopeia (EP), and the Indian Pharmacopeia (IP). Standardized microbiological testing techniques are necessary due to the heterogeneity of raw materials, industrial sites, and storage conditions.

Microorganisms in pharmaceuticals may cause them to break down, have less of an effect, and even pose health risks, particularly to individuals with impaired immune systems. The microbiological load of a formulation is greatly affected by factors such as the source of the raw materials, the manufacturing environment, the quality of the water, the cleanliness of the persons involved, and the conditions of the packaging. Strict quality control procedures, Hazard Analysis Critical Control Point (HACCP) plans, and Good Manufacturing Practices (GMP) are necessary to guarantee microbiological control.



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Inadequate handling practices, unsterilized raw materials, and poor environmental controls may lead to microbial contamination in medications. Fungi like Aspergillus spp. and Candida albicans and bacteria like Pseudomonas aeruginosa and Escherichia coli are common examples of microbiological contamination. The importance of microbiological limit testing and sterility assurance is highlighted by the fact that these contaminants may lead to spoilage, harmful responses, and infections. Injectables and ophthalmic preparations are examples of sterile formulations that need strict microbial control to avoid infections. Oral syrups and topical creams are examples of non-sterile goods that need to meet microbiological acceptability standards in order to be safe and effective. To keep microbiological contamination below acceptable levels, pharmacopoeial recommendations define limitations for Total Aerobic microbiological Count (TAMC) and Total Yeast and Mold Count (TYMC).

Pharmaceutical companies are obligated to use control methods like these to ensure the microbiological integrity of their products:

- Using only top-notch, microbe-free raw ingredients.
- Setting up sterile rooms and other forms of controlled ventilation and air filtration.
- Appropriate sterilisation procedures, such as chemical, filtration, and heat sterilisation.
- Regular microbiological inspections of all manufacturing areas, raw materials, and completed goods.
- Ensuring microbiological stability throughout the product's shelf life by regular confirmation of the preservative effectiveness.

Many pharmaceutical formulations include water, which may be a cause of contamination. There has to be consistent monitoring of water systems for biofilm development and microbial contamination, and manufacturing water needs to be microbiologically pure according to pharmacopeial requirements. To guarantee that different pharmaceutical formulations meet international quality requirements, this research will assess and set microbiological characteristics for them. Public health is protected when microbiological criteria are standardized because it reduces the likelihood of contamination and increases the dependability and safety of pharmaceutical goods.

#### 2. LITERATURE REVIEW

**KUMAR, DR & Deshta, Umesh (2024)** The first life on Earth was microorganisms. Their versatility and capacity to adjust to new situations are really remarkable. When we work together for sustainable development, they will undoubtedly turn out to be the most cost-effective partners. Microbes impact humans in several ways. Their diverse range of activity includes both the manufacture of beneficial items and the infliction of illnesses on humans, other animals, and plants. Because of the crucial role that microbes play in the biotechnology age, microbiology has quickly become one of the most competitive fields of study at the graduate and postgraduate levels. The current book is structured into five chapters that address the fundamentals of microbiology, except the section on their practical applications. This comprehensive book provides up-to-date information on Bergey's handbook as well as topics such as the



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history of microbiology, microbial evolution, taxonomy, and nomenclature. Bacteria, viruses, archaea, mycoplasma, phytoplasma, and bacterial viruses are all discussed in this chapter along with their structures, metabolism, reproduction, function, and illnesses. An overview of cyanobacteria, including details on their diet and ability to reproduce, has been provided. Eukaryotes, such as algae and fungus, as well as Gram-negative and Gram-positive bacteria, are covered extensively in this book. There is an appendix at the end of the book with several kinds of questions for the students to use. The purpose of providing students with a brief overview of microbes in the textbook is to raise their awareness of these little creatures and all the things they can do.

Khan, Asma & Ahmed, Farah (2022) Primary health care is making substantial use of ancient medical systems, such as Unani Medicine. There are fewer side effects from these medications, and they are crucial to people's well-being. Traditional remedies are often used as a first line of defense against upper respiratory illnesses in high altitude locations. It is now crucial to standardize traditional medicines to guarantee their quality, given their growing popularity. Sharab Züf Murakkab on Classical Unani Formulation Sharbat zifa Murakkab, a polyherbal Unani formulation, is a popular treatment for asthma and phlegmatic cough in mountainous regions. It has an expectorant (Munaffith-i-Balgham) activity and successfully clears wet cough. Standard Operative Procedures (SOPs) were developed and standardized in light of the drug's heavy usage in order to guarantee the drug's authenticity and the market's access to high-quality treatment. To determine the quality of Sharbat Zafa Murakkab, pharmacopoeial measures including physico-chemical analysis and WHO parameters were used. These parameters include microbiological contamination, pesticide residue, aflatoxins level, and the presence of heavy metals.

**Noola, Netravati & Lingegowdaru, Jagadeesh (2022)** In the current experiment, seven polyherbal formulations were created using fruits, vegetables, medicinal herbs, and spices, focusing on their antidiabetic properties. Polyherbal formulations were meticulously crafted utilizing thirteen medicinal herbal powders: Syzygium cumini (jamun seeds), Emblica officinalis (Aonla fruits), Punica granatum (pomegranate peel), Artocarpus heterophyllus (jackfruit matured bulb), Momordica charantia (bitter gourd fruits), Allium sativum (garlic clove), Murraya koenigii (curry leaves), Trigonella foenumgraecum (fenugreek seeds), Cinnamomum verum (cinnamon bark), Curcuma longa (turmeric rhizome), Zingiber officinale (ginger rhizome), Costus igneus (insulin leaves), and Azadirachta indica (neem leaves). The microbial load and phytochemical parameters, including total bacteria, yeast, molds, and antioxidants, were assessed using established procedures. Outcomes: The total bacterial count in seven polyherbal formulations ranged from 21.92 to 102.18 cfu/g. The mould count ranged from 24.60 to 62.67 cfu/g. The yeast counts ranged from 22.25 to 62.65 cfu/g. The microbial load assessment of polyherbal formulations indicated a very low degree of microbial contamination.

**Oyedele, Ayobami & Elujoba, A.A. & Olayemi, Uduak (2020)** This research used a 4:1 combination ratio of Carica papaya fruit mesocarp and Sorghum bicolor leaf fermented extract, freeze-dried and designated as Siculine extractive (SE), as the active ingredient to manufacture Siculine syrup with significant antisickling characteristics. The in-vitro antisickling (inhibitory or reversal) properties of the test (SE) and control samples were assessed on sodium metabisulphite-induced sickled red blood cells obtained from verified non-crisis sickle cell patients. The particulate, pH, and microbiological characteristics of SE were assessed for its use in formulation. The efficacy of SE aqueous dispersion (1-6 mg/ml) and the manufactured Siculine syrup® was assessed using buffered normal saline as a negative



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control, alongside vanillic acid, parahydroxy benzoic acid (PHBA), and Ciklavit® (a commercial herbal antisickling medication) as positive controls. The treated plant materials produced  $17.7\pm1.4$  %w/w of water-insoluble, amber-hued particles ( $27.4 - 274.0 \mu m$  size range) of SE powder, exhibiting microbiological quality appropriate for oral liquid formulation. SE aqueous dispersion, neutral in pH, exhibited concentration-dependent sickling inhibition and reversal effects. The 5.0 mg/ml aqueous dispersion demonstrated optimal antisickling efficacy, specifically 80% inhibitory and 66% reversal effects, which were statistically comparable to the activities of the Siculine syrup® formulation, reference Ciklavit®, and the 4.0-6.0 mg/ml PHBA's reversal activity, yet surpassed the inhibitory activity of 4.0-6.0 mg/ml vanillic acid. The formulation of Siculine syrup® including 10%, 2%, 0.5%, and 0.25% w/v of sucrose, tragacanth, SE, and parabens, respectively, exhibited superior physicochemical and microbiological stability, along with robust antisickling actions akin to those of Ciklavit®.

Kapoor, Divya & Sharma, Pankaj (2020) Microbes are omnipresent in nature, and their immense potential is an indisputable and evident reality. The pharmacological implications of microbial variety may be carefully examined to promote and protect human health standards. Numerous investigations have shown significant advancements aimed at enhancing and preserving human health via the treatment of pathogenic illnesses and the management of various metabolic abnormalities, consequently supporting human well-being. The primary objective of pharmaceutical microbiology is to provide knowledge and assess the significance of the presence of bacteria, yeasts, molds, viruses, and toxins in various pharmacological raw materials, products, intermediates, and environments that support therapeutic development, as well as the microbial regulation of medicinal crops, manufacturing settings, and individuals. Simultaneously, the framework of this functional domain within microbiology, particularly pharmacological microbiology, has significantly evolved to encompass various additional aspects, such as the investigation and development of novel anti-infective agents, the utilization of microorganisms to identify mutagenic and oncogenic potential in pharmaceuticals, and the application of microbes in the synthesis of insulin and other human growth hormones. A variety of bioactive composites, sequestered through various methods, have demonstrated significance in numerous pharmaceutical and biotechnological applications, while also enhancing human engagement in the exploration of diverse microbiota and their multifaceted functions, as well as the underlying biology of their production. The sustainable and financial flow of dynamic pharmaceutical components is often easier to achieve via composites produced by microbial fermentation methods than through the cultivation of slower-growing macroorganisms. This article emphasizes microbial fabricators and their ability to produce new physiologically active chemicals, highlighting their significant role in enhancing human existence.

#### 3. METHODOLOGY

**Sample Selection**: Various pharmaceutical formulations, such as oral syrups, topical creams, ocular solutions, and injectables, were examined.

**Microbial Enumeration Test**: The Total Aerobic Microbial Count (TAMC) and Total Yeast and Mold Count (TYMC) were assessed using plate count techniques.



**Pathogen Screening**: Common contaminants, including Escherichia coli, Pseudomonas aeruginosa, Staphylococcus aureus, and Candida albicans, were discovered by selective culture media.

- **Sterility Testing**: Direct inoculation and membrane filtering procedures were used for sterile formulations.
- **Preservative Efficacy Test (PET)**: The efficacy of preservatives was assessed by inoculating established microbial strains and measuring decline over time.
- **Environmental Monitoring**: The microbial loads in the air and on surfaces inside the production area were assessed to establish a correlation with product contamination.

#### 4. **RESULTS**

#### 4.1 MICROBIAL GROWTH MEDIA/ MICROBIAL CULTURE MEDIA)

Culture: Microorganisms that proliferate in or on a culture medium

Culture Media: Substrate formulated for microbial cultivation in the laboratory.

#### **Requirements of a Microbial Culture Media:**

- $\cdot$  Must be sterile
- · Contain appropriate nutrients
- · Must be incubated at appropriate temperature

#### Types of Microbial Culture Media Culture Media Based on Consistency:

- · Solid Media
- · Semisolid media
- · Liquid Media

#### **Culture Media Based on Composition:**

- · Synthetic (chemically defined) media: Known chemical composition
- $\cdot$  Non-synthetic/ Complex (chemically not defined) media: Unknown chemical composition



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#### **Microbial Enumeration Test Results**

| Formulation Type     | TAMC (CFU/mL or<br>CFU/g) | TYMC (CFU/mL or<br>CFU/g) |
|----------------------|---------------------------|---------------------------|
| Oral Syrups          | 10-50                     | 5-30                      |
| Topical Creams       | 20-100                    | 10-50                     |
| Ophthalmic Solutions | <10                       | <5                        |
| Injectables          | <1                        | <1                        |

#### **Pathogen Screening Results**

| Pathogen                  | Oral<br>Syrups | Topical<br>Creams | Ophthalmic<br>Solutions | Injectables |
|---------------------------|----------------|-------------------|-------------------------|-------------|
| Escherichia<br>coli       | Absent         | Absent            | Absent                  | Absent      |
| Pseudomonas<br>aeruginosa | Present (2%)   | Absent            | Absent                  | Absent      |
| Staphylococcus<br>aureus  | Absent         | Present (3%)      | Absent                  | Absent      |
| Candida<br>albicans       | Absent         | Absent            | Absent                  | Absent      |

#### **Sterility Testing**

| Formulation Type         | Sterility Results |
|--------------------------|-------------------|
| Ophthalmic Solutions     | Pass              |
| Injectables              | Pass              |
| Non-Sterile Formulations | Not Applicable    |



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#### **Preservative Efficacy Testing**

|               | Reduction in   |
|---------------|----------------|
| Time Interval | Microbial Load |
|               | (%)            |
| 24 hours      | 50%            |
| 48 hours      | 75%            |
| 72 hours      | 95%            |
| 7 days        | 99.9%          |

#### **Environmental Monitoring Results**

| Sample Source        | Microbial Load<br>(CFU/m <sup>3</sup> ) |
|----------------------|---|
| Manufacturing Air    | 5-20                                    |
| Production Equipment | 10-50                                   |
| Personnel Hands      | 15-100                                  |
| Raw Material Storage | 20-150                                  |

#### Water Quality Testing Results

| Parameter                | Acceptable Limit | Measured Value |
|--------------------------|------------------|----------------|
| Total Bacterial<br>Count | <100 CFU/mL      | 50 CFU/mL      |
| Escherichia coli         | Absent           | Absent         |
| Pseudomonas<br>spp.      | Absent           | Absent         |
| Salmonella spp.          | Absent           | Absent         |



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- **Microbial Enumeration:** Non-sterile formulations had a negligible microbiological burden, remaining comfortably within pharmacopeial standards. The differences across various formulations underscore the need for customized microbial control strategies.
- **Pathogen Screening:** The detection of Pseudomonas aeruginosa in 2% of oral syrups and Staphylococcus aureus in 3% of topical creams indicates possible hazards stemming from insufficient preservation or contamination during processing. This emphasizes the need for stringent cleanliness measures and efficient preservatives.
- **Sterility Testing:** Sterile formulations, such as injectables and ophthalmic solutions, successfully passed sterility tests, validating the efficacy of aseptic production procedures.
- **Preservative Efficacy Testing:** The findings indicated a substantial decrease in microbial load over time, confirming the efficacy of preservatives in multi-dose formulations.
- Environmental Monitoring: The microbiological contamination seen on staff hands and raw material storage places underscores the need of rigorous personal hygiene and raw material handling procedures. The microbial load in the air and on manufacturing equipment is within permitted limits, indicating successful facility management.
- Water Quality Testing: The analyzed water samples adhered to pharmacopeial requirements, verifying that the water used in pharmaceutical procedures satisfies necessary microbiological safety criteria.

#### 5. CONCLUSION

The standardization of microbiological characteristics in pharmaceutical formulations is essential for guaranteeing product safety, effectiveness, and adherence to regulatory standards. Microbial contamination may result in product deterioration, therapeutic ineffectiveness, and significant health hazards for users, becoming microbiological quality control a critical component of pharmaceutical production.

Microbial enumeration findings demonstrate that while the majority of formulations adhered to permissible limits, sporadic contamination by Pseudomonas aeruginosa and Staphylococcus aureus underscores the need for more stringent environmental and raw material regulations. Sterility testing validated the efficacy of aseptic production procedures in ophthalmic and injectable formulations. The preservative effectiveness study underscored the significance of antimicrobial preservatives in non-sterile formulations, guaranteeing microbiological stability throughout time.

Environmental monitoring findings revealed the influence of production settings on microbiological contamination concerns. The results underscore the need of personal cleanliness, regulated air filtration, and equipment sterilization in reducing microbial load. Water quality evaluations underscored the need for rigorous purification and monitoring techniques, given that water is an essential element in pharmaceutical formulations.



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A thorough strategy for microbiological standardization necessitates compliance with Good Manufacturing Practices, ongoing quality assurance initiatives, and rigorous adherence to pharmacopeial standards. Future innovations in quick microbiological techniques, like real-time PCR and next-generation sequencing, might improve microbe identification and management, hence diminishing contamination hazards.

In summary, microbiological standardization in pharmaceutical formulations is a progressive and developing domain. Ongoing enhancements in microbiological control methods, regulatory supervision, and technological innovations will further elevate pharmaceutical quality, safeguarding patient safety and public health. The advancement of the pharmaceutical business necessitates the incorporation of novel microbiological testing techniques and enhanced quality control protocols to reduce microbial hazards and guarantee the sustained performance of pharmaceutical products.

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