REFERENCES

- Akers, M. J., Fites, A. L. and Robison, R. L. 1987. Formulation design and development of parenteral suspensions. <u>Journal of parenteral science and technology</u> 41(3): 88-96.
- Alburyhi, M. M., Siaf, A. A. and Noman, M. A. 2013. Stability study of six brands of amoxicillin trihydrate and clavulanic acid oral suspension present in Yemen markets. <u>Journal of Chemical and Pharmaceutical Research</u> 5(5): 293-296.
- Altreuther, P. 1987. Data on chemistry and toxicology of Baytril. <u>Veterinary medical review</u> 2: 87-89.
- An, J., Zuo, G. Y., Hao, X. Y., Wang, G. C. and Li, Z. S. 2011. Antibacterial and synergy of a flavanonol rhamnoside with antibiotics against clinical isolates of methicillin-resistant *Staphylococcus aureus* (MRSA). <u>Phytomedicine</u> 18(11): 990-993.
- Arends, J. P., Hartwig, N., Rudolphy, M. and Zanen, H. C. 1984. Carrier rate of *Streptococcus suis* capsular type 2 in palatine tonsils of slaughtered pigs. <u>Journal of Clinical Microbiology</u> 20(5): 945-947.
- ASEAN stability testing guidelines. 2005. [Online]. Available from: http://www.aseansec.org [2014, February 14].
- Baker, C. N., Stocker, S. A., Culver, D. H. and Thornsberry, C. 1991. Comparison of the E test to agar dilution, broth microdilution, and agar diffusion susceptibility testing techniques by using a special challenge set of bacteria. <u>Journal of Clinical Microbiology</u> 29(3): 533-538.
- Bonapace, C. R., White, R. L., Friedrich, L. V. and Bosso, J. A. 2000. Evaluation of antibiotic synergy against *Acinetobacter baumannii*: a comparison with Etest, time-kill, and checkerboard methods. <u>Diagnostic Microbiology And Infectious Disease</u> 38(1): 43-50.
- British Pharmacopoeia (BP). 2007. The British Pharmacopoeia United Kingdom.
- British Pharmacopoeia (BP). 2013. The British Pharmacopoeia (veterinary). United Kingdom.



- Cain, D., Malouin, F., Dargis, M., Harel, J. and Gottschalk, M. 1995. Alterations in penicillinbinding proteins in strains of Streptococcus suis possessing moderate and high levels of resistance to penicillin. <u>FEMS Microbiology Letters</u> 130(2–3): 121-127.
- Calsavara, L. P. V., Zanin, G. M. and Moraes, F. F. 2012. Enrofloxacin inclusion complexes with cyclodextrins. <u>Journal of Inclusion Phenomena and Macrocyclic Chemistry</u> 73(1-4): 219-224.
- Clifton-Hadley, F. A. and Enright, M. R. 1984. Factors affecting the survival of *Streptococcus* suis type 2. <u>Veterinary Record</u> 114(24): 584-586.
- Clifton-Hadley, F. A., Enright, M. R. and Alexander, T. J. 1986. Survival of *Streptococcus suis* type 2 in pig carcases. <u>Veterinary Record</u> 118(10): 275.
- Clinical and Laboratory Standards Institute (CLSI). 2011. Performance Standards for Antimicrobial Susceptibility Testing: Twenty-first Informational Supplement M100-S21. USA: Wayne, PA.
- D'Souza, S. S. and DeLuca, P. P. 2006. Methods to Assess in Vitro Drug Release from Injectable Polymeric Particulate Systems. <u>Pharmaceutical Research</u> 23(3): 460-474.
- D'Souza, S. S., Faraj, J. A. and DeLuca, P. P. 2005. A model-dependent approach to correlate accelerated with real-time release from biodegradable microspheres.

 <u>AAPS PharmSciTech</u> 6(4): E553-E564.
- David, K. and Blankmore and Stanley, G. F. 1994. *Streptococcal* infection, pp. 167-180.

 Handbook of Zoonoses. 2nd ed. Florida.
- Dipiro, J. T., Talbert, R. L., Yee, G. C., Matzke, G. R., Wells, B. G., Posey, L. M. 2008.

 Pharmacotherapy: a pathophysiologic approach. 7th ed. China: McGraw-Hill.
- Direksin, K., Piewkhao, T. and Somon, A. 2007. Prevalence of *Streptococcus suis* in tonsils of nursery pigs raised in an evaporative house. <u>KKU Research Journal</u> 12(2): 167-172.

- Du, Y. P., Qian, W. J. and Xu, G. B. 2000. Investigation on 8 human cases with meningitis caused by *Streptococcus suis* type 2. <u>Chinese Journal of Preventive Medicine</u> 34: 305.
- Elliott, S. D., Clifton-Hadley, F. and Tai, J. 1980. *Streptococcal* infection in young pigs. V. An immunogenic polysaccharide from *Streptococcus suis* type 2 with particular reference to vaccination against *streptococcal* meningitis in pigs. <u>Journal of Hygiene</u> 85(2): 275-285.
- Fernando, R., Joe, B. and Lynn, G. F. 2012. Amoxicillin. [Online]. Available from: ftp://ftp.fao.org/ag/agn/iecfa/vetdrug/12-2012-amoxicillin.pdf [2013, February 14].
- Francois, B., Gissot, Y., Ploy, M. C. and Vignon, P. 1998. Recurrent septic shock due to Streptococcus suis. <u>Journal of Clinical Microbiology</u> 36(8): 2395.
- Ghassempour, A., Rafati, H., Adlnasab, L., Bashour, Y., Ebrahimzadeh, H. and Erfan, M. 2007.

 Investigation of the solid state properties of amoxicillin trihydrate and the effect of powder pH. <u>AAPS PharmSciTech</u> 8(4): E93.
- Gido, C., Langguth, P., Kreuter, J., Winter, G., Woog, H. and Mutschler, E. 1993. Conventional versus novel conditions for the in vitro dissolution testing of parenteral slow release formulations: application to doxepin parenteral dosage forms. Die Pharmazie 48(10): 764-769.
- Giteau, A., Venier-Julienne, M. C., Aubert-Pouëssel, A. and Benoit, J. P. 2008. How to achieve sustained and complete protein release from PLGA-based microparticles?

 International Journal of Pharmaceutics 350(1–2): 14-26.
- Golovnev, N. N., Vasiliev, A. D. and Kirik, S. D. 2012. Enrofloxacinium citrate monohydrate:

 Preparation, crystal structure, thermal stability and IR-characterization. <u>Journal of Molecular Structure</u> 1021(112-117.

- Gottschalk, M., Higgins, R., Jacques, M., Beaudoin, M. and Henrichsen, J. 1991. Isolation and characterization of *Streptococcus suis* capsular types 9-22. <u>Journal of veterinary diagnostic investigation</u> 3(1): 60-65.
- Gottschalk, M., Higgins, R., Jacques, M., Mittal, K. R. and Henrichsen, J. 1989. Description of 14 new capsular types of *Streptococcus suis*. <u>Journal of Clinical Microbiology</u> 27(12): 2633-2636.
- Gottschalk, M. and Segura, M. 2000. The pathogenesis of the meningitis caused by Streptococcus suis: The unresolved questions. <u>Veterinary Microbiology</u> 76(3): 259-272.
- Grobbel, M., Lübke-Becker, A., Wieler, L. H., Froyman, R., Friederichs, S. and Filios, S. 2007.

 Comparative quantification of the in vitro activity of veterinary fluoroquinolones.

 Veterinary Microbiology 124(1–2): 73-81.
- Francois, B., Gissot, Y., Ploy, M. C. and Vignon, P. 1998. Recurrent septic shock due to Streptococcus suis. Journal of Clinical Microbiology 36(8): 2395.
- Haag, T. and Lincrini, D. 1984. Ester of parahydroxybenzoic acid, pp. 63-77. *In:* Kabara, J. J. (ed.) <u>Cosmetic Drug preservation</u>. New York: Marcel Dekker.
- Han, D. U., Choi, C., Ham, H. J., Jung, J. H., Cho, W. S., Kim, J., Higgins, R. and Chae, C. 2001.

 Prevalence, capsular type and antimicrobial susceptibility of *Streptococcus suis* isolated from slaughter pigs in Korea. <u>Canadian Journal of Veterinary Research</u> 65(3): 151-155.
- Henal, P., Sudeendra, B. R., Balamuralidhara, V. and Pramod Kumar, T. M. 2011. Comparison of stability testing requirements of ICH with other International Regulatory Agencies. <u>Pharma Times</u> 43(9): 21-24.
- Higgins, R. and Gottschalk, M. 1999. *Streptococcal disease*, pp. 563-570. *In:* Leman, A. D., Straw, B. E., S., D. A., Mengeling, W. L. and D.J., T. (eds.) <u>Disease of swine</u>. 8th ed. Ames, IA, Iowa State University Press: Wiley.

- Higgins, R. and Gottschalk, M. 2006. *Streptococcal disease*, pp. 769-783. *In:* Straw, B. E., Zimmerman, J. J., D'Allaire, S. and Taylor, D. J. (eds.) <u>Disease of swine</u>. 9th ed. Ames, IA, Iowa State University Press: Wiley.
- Higgins, R., Gottschalk, M., Boudreau, M., Lebrun, A. and Henrichsen, J. 1995. Description of six new capsular types (29-34) of *Streptococcus suis*. <u>Journal of veterinary diagnostic investigation</u> 7(3): 405-406.
- Hill, J. E., Gottschalk, M., Brousseau, R., Harel, J., Hemmingsen, S. M. and Goh, S. H. 2005.

 Biochemical analysis, cpn60 and 16S rDNA sequence data indicate that

 Streptococcus suis serotypes 32 and 34, isolated from pigs, are Streptococcus

 orisratti. Veterinary Microbiology 107(1-2): 63-69.
- Hooper, D. C. 2001. Mechanisms of Action of Antimicrobials: Focus on Fluoroquinolones.

 <u>Clinical Infectious Diseases</u> 32(Suppl 1): S9-S15.
- lyer, S. S., Barr, W. H. and Karnes, H. T. 2006. Profiling in vitro drug release from subcutaneous implants: a review of current status and potential implications on drug product development. <u>Biopharmaceutics & Drug Disposition</u> 27(4): 157-170.
- Jacobs, A. A., Loeffen, P. L., van den Berg, A. J. and Storm, P. K. 1994. Identification, purification, and characterization of a thiol-activated hemolysin (suilysin) of *Streptococcus suis*. Infection and Immunity 62(5): 1742-1748.
- Jacobs, A. A. C., van den Berg, A. J. G. and Loeffen, P. L. W. 1996. Protection of experimentally infected pigs by suilysin, the thiol-activated haemolysin of *Streptococcus suis*. <u>Veterinary Record</u> 139(10): 225-228.
- Jorgensen, J. H. and Ferraro, M. J. 2009. Antimicrobial susceptibility testing: a review of general principles and contemporary practices. <u>Clinical Infectious Diseases</u> 49(11): 1749-1755.
- Kaur, S. P., Rao, R. and Nanda, S. 2011. Amoxicillin: A broad spectrum antibiotic.

 International Journal of Pharmacy & Pharmaceutical Sciences 3(3): 30.

- Kopić, J., Paradižik, M. T. and Pandak, N. 2002. *Streptococcus suis* infection as a cause of severe illness: 2 cases from Croatia. <u>Scandinavian Journal of Infectious Diseases</u> 34(9): 683-684.
- Kumana, C. R. and Yuen, K. Y. 1994. Parenteral aminoglycoside therapy. Selection, administration and monitoring. <u>Drugs</u> 47(6): 902-913.
- Leblanc, G. E., Secco, R. A. and Kostic, M. 1999. Viscosity Measurement, pp. 30-31 30-23.

 In: Webster, J. G. (ed.) The Measurement, Instrumentation, and Sensors Handbook.

 CRC Press.
- Lesse, A. J. 1995. Miscellaneous agents: quinolones, sulfonamides and trimethoprim, urinary tract agents, metronidazole, spectinomycin, bacitracin, and antimycobacterial drugs, pp. 386-389. *In:* Smith, C. M. and Reynard, A. M. (eds.) Essential of Pharmacology. Philadelphia: WB Saunders.
- Li, L. L., Liao, X. P., Sun, J., Yang, Y. R., Liu, B. T., Yang, S. S., Zhao, D. H. and Liu, Y. H. 2012.

 Antimicrobial resistance, serotypes, and virulence factors of *streptococcus suis* isolates from diseased pigs. <u>Foodborne Pathogens and Disease</u> 9(7): 583-588.
- Lieberman, H. A., Rieger, M. M., Banker, G. S. 1996. <u>Pharmaceutical Dosage Forms: Disperse</u>

 <u>Systems. Volume 2</u>. 2nd ed. New York: Marcel Dekker.
- Lun, Z. R., Wang, Q. P., Chen, X. G., Li, A. X. and Zhu, X. Q. 2007. *Streptococcus suis*: an emerging zoonotic pathogen. <u>The Lancet Infectious Diseases</u> 7(3): 201-209.
- Ma, E., Chung, P. H., So, T., Wong, L., Choi, K. M., Cheung, D. T., Kam, K. M., Chuang, S. K. and Tsang, T. 2008. *Streptococcus suis* infection in Hong Kong: An emerging infectious disease? *Epidemiology and Infection* 136(12): 1691-1697.
- Manceau, J., Gicquel, M., Laurentie, M. and Sanders, P. 1999. Simultaneous determination of enrofloxacin and ciprofloxacin in animal biological fluids by high-performance liquid chromatography: Application in pharmacokinetic studies in pig and rabbit.

- Journal of Chromatography B: Biomedical Sciences and Applications 726(1–2): 175-184.
- Marie, J., Morvan, H., Berthelot-Hérault, F., Sanders, P., Kempf, I., Gautier-Bouchardon, A. V., Jouy, E. and Kobisch, M. 2002. Antimicrobial susceptibility of *Streptococcus suis* isolated from swine in France and from humans in different countries between 1996 and 2000. Journal of Antimicrobial Chemotherapy 50(2): 201-209.
- Meyer, B. K., Ni, A., Binghua, H. and Li, S. 2007. Antimicrobial preservative use in parenteral products: Past and present. <u>Journal of Pharmaceutical Sciences</u> 96(12): 3155-3167.
- Numan, A. A., Noman, M., Alkadi, H., Tayeb, A. I., Alsolwi, A., Zawia, N. and Alhakami, A. 2009. Validation and application of a reversed-phase Hplc method for the determination of amoxicillin trihydrate in human plasma. <u>Journal of Applied Sciences Research</u> 5(12): 2219-2224.
- Okwumabua, O., Abdelmagid, O. and Chengappa, M. M. 1999. Hybridization analysis of the gene encoding a hemolysin (suilysin) of *Streptococcus suis* type 2: evidence for the absence of the gene in some isolates. <u>FEMS Microbiology Letters</u> 181(1): 113-121.
- Papatsiros, V. G., Vourvidis, D., Tzitzis, A. A., Meichanetsidis, P. S., Stougiou, D., Mintza, D. and Papaioannou, P. S. 2011. *Streptococcus suis*: an important zoonotic pathogen for human -- prevention aspects. <u>Veterinary World</u> 4(5): 216-221.
- Patel, R. M. 2010. Parenteral suspension: An overview. <u>International Journal of Current Pharmaceutical Research</u> 2(3): 4-13.
- Perch, B., Kristjansen, P. and Skadhauge, K. 1968. Group R streptococci pathogenic for man.

 Two cases of meningitis and one fatal case of sepsis. Acta pathologica et microbiologica Scandinavica 74(1): 69-76.

- Petcharat, S. and Jasda, J. 2008. Prevalence and Antimicrobial Susceptibility of Streptococcus suis from Swine in Western Thailand. [Online]. Available from: http://vrd-wp.dld.go.th/images/article/research/2551_S.suis.pdf [2012, February 14].
- Pierini, E., Famiglini, G., Mangani, F. and Cappiello, A. 2004. Fate of enrofloxacin in swine sewage. <u>Journal of Agricultural Food Chemistry</u> 52(11): 3473-3477.
- Pillai, S. K., Moellering, R. C., Jr. and Eliopoulos, G. M. 2005. Antimicrobial Combinations, pp. 365-440. *In:* Lorian, V. (ed.) <u>Antibiotics in Laboratory Medicine</u>. 5th ed. USA: Lippincott Williams and Wilkins.
- Plumb, D. C. (ed.) 2005. <u>Veterinary Drug Hanbook</u>. 5th ed. USA: Blackwell Publishing Professional.
- Quay, J. F. and Stucky, J. F. 1989. Non aqueous cephalosporin suspension for parenteral Administration. <u>Journal of Pharmaceutical Sciences</u> 11(1602-1606.
- Reams, R. Y., Glickman, L. T., Harrington, D. D., Thacker, H. L. and Bowersock, T. L. 1994.

 Streptococcus suis infection in swine: a retrospective study of 256 cases. Part II.

 Clinical signs, gross and microscopic lesions, and coexisting microorganisms. Journal of veterinary diagnostic investigation 6(3): 326-334.
- Rennie, R., Turnbull, L. and Brosnikoff, C. 2008. Comparison of Oxoid M.I.C. Evaluator device with broth microdilution and E test device from AB Biodisk for antimicrobial susceptibility testing of Enterobacteriaceae [abstract P859]. In: Program and abstracts of the 18th Annual Meeting of the European Congress on Clinical Microbiology and Infectious Diseases.. Barcelona.
- Richter, S. S. and Ferraro, M. J. 2007. Susceptibility testing instrumentation and computerized expert systems for data analysis and interpretation, pp. 245-256. *In:* Murray, P. R., Baron, E. J., Jorgensen, J. H., Landry, M. L. and Pfaller, M. A. (eds.) Manual of clinical microbiology. 9th ed. Washington, DC: American Society for Microbiology.

- Robertson, I. D. and Blackmore, D. K. 1989. Occupational exposure to *Streptococcus suis* type 2. <u>Epidemiology and Infection</u> 103(1): 157-164.
- Rusmeechan, S. and Sribusara, P. 2008. *Streptococcus suis* meningitis: The newest serious infectious disease. <u>Journal of the Medical Association of Thailand</u> 91(5): 654-658.
- Schmitt, C. S., Halbur, P. G., Roth, J. A., Kinyon, J. M., Kasorndorkbua, C. and Thacker, B. 2001. Influence of ampicillin, ceftiofur, attenuated live PRRSV vaccine, and reduced dose *Streptococcus suis* exposure on disease associated with PRRSV and S. suis coinfection. <u>Veterinary Microbiology</u> 78(1): 29-37.
- Seedher, N. and Agarwal, P. 2009. Various solvent systems for solubility enhancement of enrofloxacin. <u>Indian Journal of Pharmaceutical Sciences</u> 71(1): 82-87.
- Shafiq, S., Shakeel, F., Talegaonkar, S., Ahmad, F. J., Khar, R. K. and Ali, M. 2007.

 Development and bioavailability assessment of ramipril nanoemulsion formulation.

 <u>European Journal of Pharmaceutics and Biopharmaceutics</u> 66(2): 227-243.
- Smolinske, S. C. 1992. Benzyl Alcohol, pp. 47-54. *In:* Smolinske, S. C. (ed.) <u>CRC Handbook of Food. Drug. and Cosmetic Excipients</u>. Denver: CRC Press.
- Staats, J. J., Feder, I., Okwumabua, O. and Chengappa, M. M. 1997. *Streptococcus suis*: Past and present. <u>Veterinary Research Communications</u> 21(6): 381-407.
- Tarradas, C., Luque, I., De Andrés, D., Shahein, Y. E. A.-A., Pons, P., González, F., Borge, C. and Perea, A. 2001. Epidemiological Relationship of Human and Swine Streptococcus suis Isolates. <u>Journal of Veterinary Medicine</u>. <u>Series B</u> 48(5): 347-355.
- Toku-e. 2013. Enrofloxacin hydrochloride. [Online]. Available from: file:///C:/Users/Administrator.I9ZR6W8GRDHZCIS/Downloads/Enrofloxacin%20hydrochloride.pdf [2013, June 28].
- United States Pharmacopeial Convention (USP). 2011. <u>The United States Pharmacopeia 34-</u>
 <u>The National Formulary 29</u>. Pensylvania: Mack Pulishing.

- Wang, Y. H., Dong, D. P., Xie, Q., Wang, D. X., Han, L. Z. and Ni, Y. X. 2005. Analysis of infectious syndrome caused by *Streptococcus suis* type 2. <u>Jiangsu Medical Journal</u> 31(419-420.
- Wangkaew, S., Chaiwarith, R., Tharavichitkul, P. and Supparatpinyo, K. 2006. *Streptococcus suis* infection: a series of 41 cases from Chiang Mai University Hospital. <u>Journal of Infection</u> 52(6): 455-460.
- Watkins, E. J., Brooksby, P., Schweiger, M. S. and Enright, S. M. 2001. Septicaemia in a pig-farm worker. Lancet 357(9249): 38.
- Wei, Z., Li, R., Zhang, A., He, H., Hua, Y., Xia, J., Cai, X., Chen, H. and Jin, M. 2009. Characterization of *Streptococcus suis* isolates from the diseased pigs in China between 2003 and 2007. <u>Veterinary Microbiology</u> 137(1–2): 196-201.
- WHONET 5.6. 2011. Microbiology Laboratory Database Software. World Health Organization.

 Department of Communicable Disease Surveillance and Response. USA.
- Yotsombut, K. (ed.) 2011. <u>Comprehensive pharmacy review</u>. 3th ed. Bangkok: nannaphong.
- Zelenitsky, S. A., Booker, B., Laing, N., Karlowsky, J. A., Hoban, D. J. and Zhanel, G. G. 1999. Synergy of an investigational glycopeptide, LY333328, with once-daily gentamicin against vancomycin-resistant Enterococcus faecium in a multiple-dose, in vitro pharmacodynamic model. Antimicrobial Agents and Chemotherapy 43(3): 592-597.
- Zhang, C., Ning, Y., Zhang, Z., Song, L., Qiu, H. and Gao, H. 2008. In vitro antimicrobial susceptibility of *Streptococcus suis* strains isolated from clinically healthy sows in China. <u>Veterinary Microbiology</u> 131(3-4): 386-392.
- เพชรรัตน์ ศักดินันท์. 2006. โรคสเตร็ปโตค็อคโคซิสในสุกร (Streptococcosis). [Online]. Available from: http://www.dld.go.th/vrd_wp/images/stories/File%20PDF/animal%20diseases %20060955/11.Streptococcosis.pdf [2013, September 1].

- กรีพล แม่นวิวัฒนกุล. 2008. ยาน้ำแขวนตะกอน (Suspension). การผลิตและประกันคุณภาพเภสัชภัณฑ์.

 [Online]. Available from: http://www.docstoc.com/docs/46957299/Buffer [2012, February 10].
- จันทรา วรรธนะวานิชกุล. 2007. โรคติดเชื้อ*สเตรปโตคอคคัส ซูอิส (Streptococcus suis)*. ความรู้ด้าน สุขภาพสัตว์ ศูนย์วิจัยและพัฒนาสัตว์แพทย์ตอนบน จ.ลำปาง. [Online]. Available from: http://www.dld.go.th/vrd_np/sara_strep6-11-49.htm [2013, June 15].
- พรเพ็ญ พัฒนโสภณ และกิจจา อุไรรงค์. 2007. การรักษาในสัตว์ <u>แนวทางป้องกันควบคุมโรคติดเชื้อจาก</u> <u>สเตร็ปโตค็อกคัส ซูอิส (Streptococcus suis)</u>. กรุงเทพมหานคร: สำนักงานกิจการโรงพิมพ์ องค์การสงเคราะห์ทหารผ่านศึกในพระบรมราชูปถัมภ์.
- สมบูรณ์ ธนาศุภวัฒน์. 2010. <u>เทคนิคการเก็บรักษาจุลินทรีย</u>์. 3th ed. กรุงเทพมหานคร: สำนักพิมพ์แห่ง จุฬาลงกรณ์มหาวิทยาลัย.
- อโนชา อุทัยพัฒน์ และนงลักษณ์ สุขวาณิชย์ศิลป์. 2007. <u>เภสัชวิทยา เล่ม 2</u>. กรุงเทพมหานคร: โรงพิมพ์นิว ไทยมิตรการพิมพ์.





APPENDIX



APPENDIX A

The particle size and percent remainings of antibacterial suspension formulations

Table A-1 Particle size of all formulations after heating cooling cycle (n=3).

Formulations	Particle size (µm) (Mean ± SD)								
TOTTICIATIONS	Cycle 0	Cycle 2	Cycle 4	Cycle 6					
CT20	35.5 ± 36	32.4 ± 30	30.8 ± 50	31.6 ± 28					
CT80	34.9 ± 31	32.5 ± 28	31.6 ± 28	35.4 ± 24					
COT20	34.7 ± 47	34.9 ± 36	36.1 ± 42	32.3 ± 36					
COT80	34.2 ± 34	30.9 ± 27	32.7 ± 26	34.2 ± 23					

Table A-2 Particle size of antibacterial suspension formulations after 3 months storage (n=3).

Code	Conditions	Particle size (µm) (Mean ± SD)							
Code	Conditions	Day 0	2 weeks	1 month	2 months	3 months			
COT201	30 °C	31.9 <u>+</u> 34	31.8 <u>+</u> 31	44.1 <u>+</u> 34	40.3 <u>+</u> 42	44.87 <u>+</u> 43			
COT201	40 °C	31.9 <u>±</u> 34	30.9 <u>+</u> 30	41.4 <u>+</u> 37	49.7 <u>+</u> 50	51.82 <u>+</u> 47			
COT202	30 °C	30.2 <u>+</u> 26	31.3±30	44.2 <u>+</u> 34	46.6 <u>±</u> 31	49.44±42			
COT202	40 °C	30.2 <u>+</u> 26	37.6 <u>+</u> 35	38.6 <u>+</u> 27	48.4 <u>+</u> 45	51.62 <u>+</u> 43			

Table A-3 The percent remainings of amoxicillin in suspensions after 3 months storage (n=3).

Formulations	Conditions	percent rema	ainings of amo	kicillin (Mean±	:SD)
romutations	Conditions	2 weeks	1 month	2 months	3 months
COT201	30 °C	99.52 ± 0.24	100.38 ± 0.07	99.41 ± 0.57	101.57 ±0.71
COT201	40 °C	98.12 ± 0.30	95.50 ± 0.67	95.13 ± 0.53	95.65 ± 0.30
COT202	30 °C	97.35 ± 0.06	97.65 ± 0.66	99.62 ± 1.39	96.42 ± 0.63
COT202	40 °C	98.24 ± 0.66	95.82 ± 0.52	94.97 ± 1.02	84.17 ± 1.46



Table A-4 The percent remainings of enrofloxacin in suspensions after 3 months storage (n=3).

Formulations	Conditions	percent remainings of enrofloxacin (Mean±SD)							
romutations	Conditions	2 weeks	1 month	2 months	3 months				
COT201	30 °C	99.98 ± 0.20	99.97 ± 0.86	99.55 ± 0.20	98.81 ± 2.22				
COT201	40 °C	98.80 ± 0.12	95.66 ± 0.06	94.83 ± 0.79	92.59 ± 0.58				
COT202	30 °C	99.29 ± 0.10	97.13 ± 0.68	97.04 ± 0.05	95.75 ± 2.49				
COT202	40 °C	100.46 ± 0.06	97.19 ± 1.74	96.02 ± 0.64	94.21 ± 0.28				





APPENDIX B

Validation of HPLC method

Partial validation for the quantitative analysis of amoxicillin and enrofloxacin by HPLC method

The HPLC method was modified from Numan et al. (2009) and Manceau et al. (1999). The UV-Vis detector was set at 229 nm and 277 nm detect amoxicillin and enrofloxacin, respectively. The analytical parameters used in the partial validation of HPLC method were specificity, linearity, accuracy and precision.

1. Specificity

The specificity of HPLC method was evaluated by comparing the assay results of amoxicillin and enrofloxacin in the suspension and in the receptor medium with those in the standard solution. The peak of amoxicillin and enrofloxacin must be completely separated from interference and other components in the sample.

2. Linearity

Six standard solutions of amoxicillin and enrofloxacin mixture (concentration 5 - 60 μ g/mL) were prepared and analyzed (three sets). The relationship between concentrations and peak area was plotted by using linear regression. The linearity was determined from the coefficient of determination (r^2).

Acceptance criteria: The coefficient of determination (r²) must be more than 0.9990.

3. Accuracy

The accuracy of the analytical method was determined from the percentage of analytical recovery. Three concentrations (low, medium, high) of five sets of amoxicillin and enrofloxacin mixture at 5, 20, and 60 μ g/mL were prepared and analyzed. The percentage of recovery of each concentration was calculated.

Acceptance criteria: The percentage of analytical recovery must be within 98.0-102.0% of each nominal concentration.



4. Precision

4.1 Intraday precision

The intraday precision was determined by analyzing three concentrations of five sets of amoxicillin and enrofloxacin mixture at 5, 20, and 60 μ g/mL in the same day. The relative standard deviations (%RSD) of the peak area responses vs concentration were determined.

4.2 Interday precision

The interday precision was determined by analyzing three concentrations of of amoxicillin and enrofloxacin mixture at 5, 20, and 60 μ g/mL on five different days. The relative standard deviations (%RSD) of the peak area responses at each concentration were determined.

Acceptance criteria: The percentage of relative standard deviation (%RSD) for both intraday and interday precision must be less than 2%.



Partial validation for the quantitative analysis of amoxicillin and enrofloxacin by HPLC method

The developed HPLC system was applied to analyze amoxicillin and enrofloxacin content in suspension. The analytical method was partially verified under following topic.

1. Specificity

Potassium phosphate buffer pH 3.0/acetonitrile was used as the mobile phase. The typical chromatograms of potassium phosphate buffer pH 3.0/acetonitrile and amoxicillin and enrofloxacin combination standard solution are presented in Figures 33 – 35. All chromatograms are presented under the same attenuation and scale.

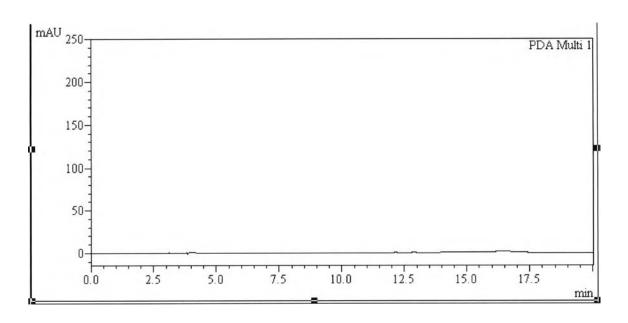


Figure 34 HPLC chromatogram of potassium phosphate buffer pH 3.0/acetonitrile medium (90:10 v/v).



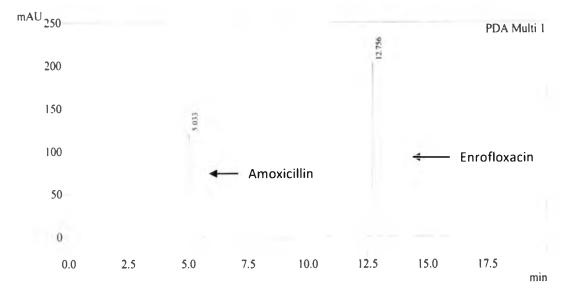


Figure 35 HPLC chromatogram of amoxicillin and enrofloxacin at wavelength 229 nm.

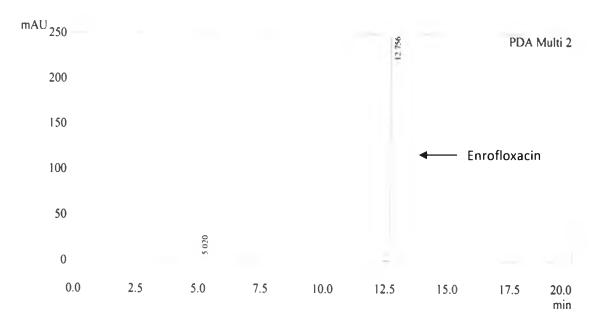


Figure 36 HPLC chromatogram of enrofloxacin at wavelength 277 nm.

From Figures 34 - 36, the retention time of amoxicillin and enrofloxacin peak were obtained at about 5.03 and 12.76 minutes, respectively. There was no interference from other components in the chromatograms including the solvent peak of solvent system, mobile phase, oils and surfactants. Thus, the HPLC system was acceptable for specificity.



2. Linearity

The calibration curve data of amoxicillin and enrofloxacin are presented in Table B-1 and B-2, respectively. The calibration curve was potted between the peak area and amoxicillin and enrofloxacin concentrations (Figure 37). Linear regression analysis was performed with the coefficient of determination (r^2) of 1.0000. These results indicated that the HLPC system was acceptable for quantitative analysis of amoxicillin and enrofloxacin in the studied range.

Table B-1 Data for calibration curve of amoxicillin trihydrate by HPLC method.

Concentration of amoxicillin		Peak area	- Mean	SD	
trihydrate (µg/mL)	Set 1 Set 2		Set 3	ivieari	3U
5.0	137315	128990	128550	131618	4939
10.0	275506	266390	266705	269533	5175
20.2	542334	535335	528513	535394	6911
40.3	1079228	1052262	1047967	1059819	16945
50.4	1349314	1312634	1312797	1324915	21130
60.5	1620228	1568327	1569724	1586093	29570
r	1.0000	0.9999	1.0000	1.0000	

Table B-2 Data for calibration curve of enrofloxacin base by HPLC method.

Concentration of		Peak area		- Mean	SD	
enrofloxacin base (µg/ml)	Set 1 Set 2		Set 3	Mean	30	
5.1	814328	917539	727636	819835	95071	
10.1	1531612	1549414	1422477	1501168	68727	
20.2	2888062	2984678	2768506	2880415	108288	
40.4	5706481	5735719	5530973	5657724	110739	
50.5	7134899	7073461	6919863	7042741	110760	
60.6	8554125	8390342	8255809	8400092	149397	
r ²	1.0000	0.9999	1.0000	1.0000	-	



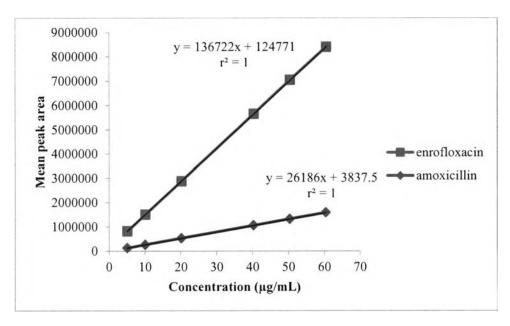


Figure 37 Calibration curve of amoxicillin trihydrate and enrofloxacin base by HPLC method.

3. Accuracy

The accuracy as percent recovery was obtained from the mean of observed concentrations calculated from the calibration curve then divided by the mean of actual concentrations and multiplied by 100. The percentages of analytical recovery of amoxicillin and enrofloxacin were in the range of 98.73 - 99.88% and 99.96 - 100.10%, respectively, which were in the range of 98.00 - 102.00%. The data are shown in table B-3 and B-4. The results indicated that HPLC method could be used to accurately determine amoxicillin and enrofloxacin within the concentration range (5 – $60 \mu g/mL$).



Table B-3 The percentage of analytical recovery of amoxicillin trihydrate by HPLC method.

Concentration of						
amoxicillin trihydrate (µg/mL)	Set 1	Set 2	Set 3	Set 4	Set 5	Mean ± SD
5.0	99.21	99.86	99.87	100.50	99.96	99.88 ± 0.46
20.0	100.84	99.35	100.01	99.42	99.69	99.86 ± 0.60
60.0	99.27	99.31	98.39	97.98	98.70	98.73 ± 0.57

Table B-4 The percentage of analytical recovery of enrofloxacin base by HPLC method.

Concentration of		%An				
enrofloxacin base (µg/ml)	Set 1	Set 2	Set 3	Set 4	Set 5	Mean ± SD
5.0	98.39	100.05	100.52	100.36	100.48	99.96 ± 0.90
20.0	99.64	99.75	99.22	101.26	100.54	100.08 ± 0.81
60.0	99.46	100.69	99.26	99.61	101.46	100.10 ± 0.94

4. Precision

The precision was determined in terms of percent relative standard deviation (%RSD) or percent coefficient of variation (%CV) of series of measurements. Table B-5 to B-8 showed the data of intraday precision and interday precision, respectively, of amoxicillin and enrofloxacin. The ranges of relative standard deviation values of intraday precision of amoxicillin and enrofloxacin were 0.73 - 0.98% and 0.59 - 0.65%, respectively. Interday precision, relative standard deviation values were in range of 0.90 - 1.67% and 1.33 - 1.45% for amoxicillin and enrofloxacin, respectively. %RSD of an analytical method should be less than 2%. So, the HPLC method was precise for the quantitative analysis of amoxicillin and enrofloxacin in the studied range.



 Table B-5
 Data of intraday precision of amoxicillin trihydrate by HPLC method.

Concentration of	Est	timated C	oncentra	tion (µg/n	nL)	-	
amoxicillin trihydrate (µg/mL)	Set 1	Set 2	Set 3	Set 4	Set 5	Mean ± SD	%RSD
5.0	5.0	5.0	4.9	4.9	4.9	4.9 ± 0.04	0.73
20.0	19.2	19.6	19.4	19.2	19.1	19.3 ± 0.19	0.98
60.0	56.6	56.9	56.4	55.8	57.3	56.6 ± 0.53	0.94

Table B-6 Data of intraday precision of enrofloxacin base by HPLC method.

Concentration of	Est	timated C	oncentrat	ion (µg/m	nL)		
enrofloxacin base	Set 1	Set 2	Set 3	Set 4	Set 5	Mean ± SD	%RSD
(µg/mL)	3et 1	361.2	361.3	361.4	Jet 5		
5.000	5.0	5.0	5.0	5.0	4.9	5.0 ± 0.03	0.60
20.000	20.1	20.1	20.0	20.0	20.0	20.0 ± 0.12	0.61
60.000	60.3	60.1	60.0	59.3	60.2	60.0 ± 0.38	0.64

 Table B-7
 Data of interday precision of amoxicillin trihydrate by HPLC method.

Concentration of	Estimat	ed Conce	ntration ((µg/mL)		_	%RSD
amoxicillin	Set 1	Set 2	Set 3	Set 4	Set 5	Mean ± SD	
trihydrate (µg/mL)	Set 1	Jet 2	361.3	JEL 4	Jet J		
5.0	5.0	5.0	5.0	5.1	5.0	5.0 ± 0.05	0.90
20.0	19.6	20.5	20.2	20.1	20.1	20.1 ± 0.33	1.66
60.0	57.3	59.5	59.0	59.3	59.7	5.0 ± 0.98	1.67

Table B-8 Data of interday precision of enrofloxacin base by HPLC method.

Concentration of	Estimat	ed Conce	ntration ((µg/mL)			%RSD
enrofloxacin base	Set 1	Set 2	Set 3	Set 4	Set 5	Mean ± SD	
(µg/mL)	36(1	Set 2	361.3	361.4	3et 3		
5.0	5.0	5.0	5.2	5.1	5.1	5.1 ± 0.07	1.36
20.0	20.1	20.2	20.9	20.5	20.3	20.4 ± 0.30	1.45
60.0	60.1	61.0	59.4	60.4	61.5	60.5 ± 0.81	1.33



In conclusion, the analysis of amoxicillin and enrofloxacin by HPLC method developed in this research exhibited good specificity, linearity, accuracy and precision. Therefore, this HPLC method was used for determination of amoxicillin and enrofloxacin in suspension.



VITA

Miss Atchara Ritkumlung was born on August 10, 1986 in Khonkaen, Thailand. She received Bachelor's Degree of Pharmacy from Huachiew Chalermprakiet University in 2009. She entered the Master's Degree program in Pharmaceutics at Chulalongkorn University in 2010.

