



CODEN [USA]: IAJPBB

ISSN : 2349-7750

**INDO AMERICAN JOURNAL OF
PHARMACEUTICAL SCIENCES**

SJIF Impact Factor: 7.187

<https://doi.org/10.5281/zenodo.20204506>Available online at: <http://www.iajps.com>

Review Article

**A COMPREHENSIVE REVIEW OF RP-HPLC TECHNIQUES
FOR IMPURITY PROFILING IN PHARMACEUTICAL DRUG
ANALYSIS****Ms. Kadam Susmita Bhausaheb^{1*}, Ms. Waghmode P.A.², Mr. A.B. Waghmode³,
Dr. Nagaraju Potnuri⁴**^{1*}M.pharm Scholar, Dnyanganga Education Society, Mandesh Institute of Pharmaceutical science and Research center, Mhaswad, Maharashtra 415509²Guide, Dnyanganga Education Society, Mandesh Institute of Pharmaceutical science and Research center, Mhaswad, Maharashtra 415509³HOD, Dnyanganga Education Society, Mandesh Institute of Pharmaceutical science and Research center, Mhaswad, Maharashtra 415509⁴Principal, Dnyanganga Education Society, Mandesh Institute of Pharmaceutical science and Research center, Mhaswad, Maharashtra 415509**Abstract:**

Impurity profiling is an essential component of pharmaceutical analysis that ensures the safety, efficacy, stability, and quality of drug substances and pharmaceutical formulations. The presence of impurities in active pharmaceutical ingredients (APIs) and finished dosage forms may arise from synthesis, degradation, storage conditions, residual solvents, excipient interactions, or manufacturing processes. Regulatory agencies such as ICH, USFDA, USP, BP, and IP have established stringent guidelines for identification, quantification, qualification, and control of impurities in pharmaceutical products. Among various analytical techniques, reversed-phase high-performance liquid chromatography (RP-HPLC) has emerged as one of the most reliable, sensitive, and widely employed methods for impurity profiling due to its excellent resolution, reproducibility, specificity, and compatibility with different detection systems. The present review comprehensively discusses the concept, classification, sources, and regulatory aspects of pharmaceutical impurities along with detailed applications of RP-HPLC in impurity profiling. The review also highlights RP-HPLC method development strategies, forced degradation studies, stability-indicating methods, and advanced detection approaches used for impurity analysis. Various chromatographic parameters including column selection, mobile phase optimization, buffer selection, pH optimization, wavelength selection, and gradient elution techniques have also been discussed. Furthermore, the applications of RP-HPLC in API impurity profiling, degradation product analysis, residual solvent analysis, genotoxic impurity determination, herbal drug analysis, and biological sample analysis are summarized. Owing to its high sensitivity, versatility, and regulatory acceptance, RP-HPLC continues to play a central role in pharmaceutical quality control and impurity assessment. The review concludes that RP-HPLC remains an indispensable analytical tool for comprehensive impurity profiling and stability evaluation in modern pharmaceutical industries.

KEYWORDS:RP-HPLC; Impurity Profiling; Pharmaceutical Analysis; Degradation Products; Stability-Indicating Method; ICH Guidelines; Genotoxic Impurities; Residual Solvents.

Corresponding author:**Ms. Kadam Susmita Bhausaheb,**

B.Pharm Student,

Dnyanganga Education Society,

Mandesh Institute of Pharmaceutical science and Research center,

Mhaswad, Maharashtra 415509

Email: susmitavpawar@gmail.com

Please cite this article in press Kadam Susmita Bhausaheb et al., A Comprehensive Review Of Rp-Hplc Techniques For Impurity Profiling In Pharmaceutical Drug Analysis., Indo Am. J. P. Sci., 2026; 13(05),

INTRODUCTION:

The pharmaceutical industry is primarily concerned with the development of safe, effective, and high-quality drug products. During the synthesis, formulation, storage, and transportation of pharmaceutical compounds, several unwanted chemicals may be generated along with the desired active pharmaceutical ingredient (API). These undesired chemicals are known as impurities.^{1,2} The presence of impurities, even at trace levels, can significantly influence the quality, stability, safety, and therapeutic efficacy of pharmaceutical products. Therefore, identification, quantification, and control of impurities have become essential aspects of modern pharmaceutical analysis.³

Impurities may originate from different sources, including raw materials, intermediates, reagents, catalysts, degradation reactions, residual solvents, or interactions between drug substances and excipients. In many cases, environmental conditions such as heat, light, moisture, and oxidation also contribute to impurity formation during storage and handling. As pharmaceutical products are directly associated with patient health, strict monitoring and control of impurities are mandatory throughout the manufacturing process.

Impurity profiling is defined as the systematic identification, characterization, and quantification of impurities present in pharmaceutical substances and drug products. It provides detailed information regarding the chemical nature, origin, concentration, and toxicological significance of impurities. Impurity profiling plays a crucial role in ensuring the consistency, purity, and quality of pharmaceutical formulations. Moreover, it helps manufacturers optimize synthetic pathways, improve formulation stability, and comply with regulatory standards established by international agencies.⁴⁻⁷

The significance of impurity profiling has increased considerably due to the growing awareness regarding drug safety and regulatory compliance. Certain impurities may possess toxic, mutagenic, carcinogenic, or teratogenic properties that can adversely affect human health. Even impurities present in very small quantities may alter the

pharmacological activity of a drug or reduce its therapeutic effectiveness. Therefore, accurate impurity analysis is necessary to minimize potential health risks and to maintain the safety profile of pharmaceutical products.

Table 1. Major Sources of Pharmaceutical Impurities

Sr. No.	Source of Impurity	Examples
1	Raw materials	Unreacted starting materials
2	Manufacturing process	Intermediates, by-products
3	Residual solvents	Methanol, acetone, acetonitrile
4	Degradation reactions	Hydrolysis, oxidation products
5	Environmental factors	Moisture, heat, light
6	Excipients interaction	Drug–excipient incompatibility
7	Storage conditions	Decomposition products
8	Catalyst contamination	Heavy metals, inorganic residues

Regulatory authorities such as the International Council for Harmonisation (ICH), United States Food and Drug Administration (USFDA), European Medicines Agency (EMA), and various pharmacopoeias including USP, BP, and IP have established stringent guidelines for impurity control in pharmaceuticals. Guidelines such as ICH Q3A, ICH Q3B, and ICH Q2(R1) specify impurity thresholds, reporting limits, identification limits, qualification requirements, and analytical method validation parameters for pharmaceutical products. These guidelines require manufacturers to identify and quantify impurities above specified acceptance criteria and to develop reliable analytical methods for routine quality control.⁸⁻¹⁰

The increasing complexity of pharmaceutical formulations and the requirement for trace-level impurity detection have created a demand for highly sensitive, selective, accurate, and reproducible analytical techniques. Several

analytical approaches such as thin-layer chromatography (TLC), gas chromatography (GC), capillary electrophoresis (CE), spectroscopic methods, and high-performance liquid chromatography (HPLC) are employed for impurity profiling. Among these techniques, reversed-phase high-performance liquid chromatography (RP-HPLC) has emerged as one of the most widely used and preferred analytical methods in pharmaceutical analysis.¹¹⁻¹³

RP-HPLC offers several advantages including high sensitivity, excellent resolution, reproducibility, rapid analysis, and compatibility with a wide range of pharmaceutical compounds. The technique is particularly effective for separating structurally related impurities, degradation products, and process-related contaminants present in complex pharmaceutical matrices.¹⁴ RP-HPLC methods can be easily optimized through variations in mobile phase composition, pH, flow rate, stationary phase selection, and gradient elution conditions, thereby

enabling efficient impurity separation and quantification.

Another important advantage of RP-HPLC is its compatibility with advanced detectors such as photodiode array (PDA), fluorescence, and mass spectrometric detectors, which enhance impurity identification and characterization. The technique also supports stability-indicating analysis and forced degradation studies, making it highly suitable for regulatory submissions and routine quality control applications.¹⁵⁻¹⁶

Recent advancements in RP-HPLC instrumentation, column technology, and hyphenated analytical techniques have further improved the efficiency and reliability of impurity profiling in pharmaceutical drug analysis. Consequently, RP-HPLC continues to play a central role in pharmaceutical research, method development, stability testing, and regulatory compliance.

Table 2. Regulatory Guidelines Related to Impurity Profiling

Guideline	Purpose
ICH Q3A(R2)	Impurities in new drug substances
ICH Q3B(R2)	Impurities in new drug products
ICH Q2(R1)	Validation of analytical procedures
ICH M7	Assessment of mutagenic impurities
USP/BP/IP	Pharmacopoeial impurity standards

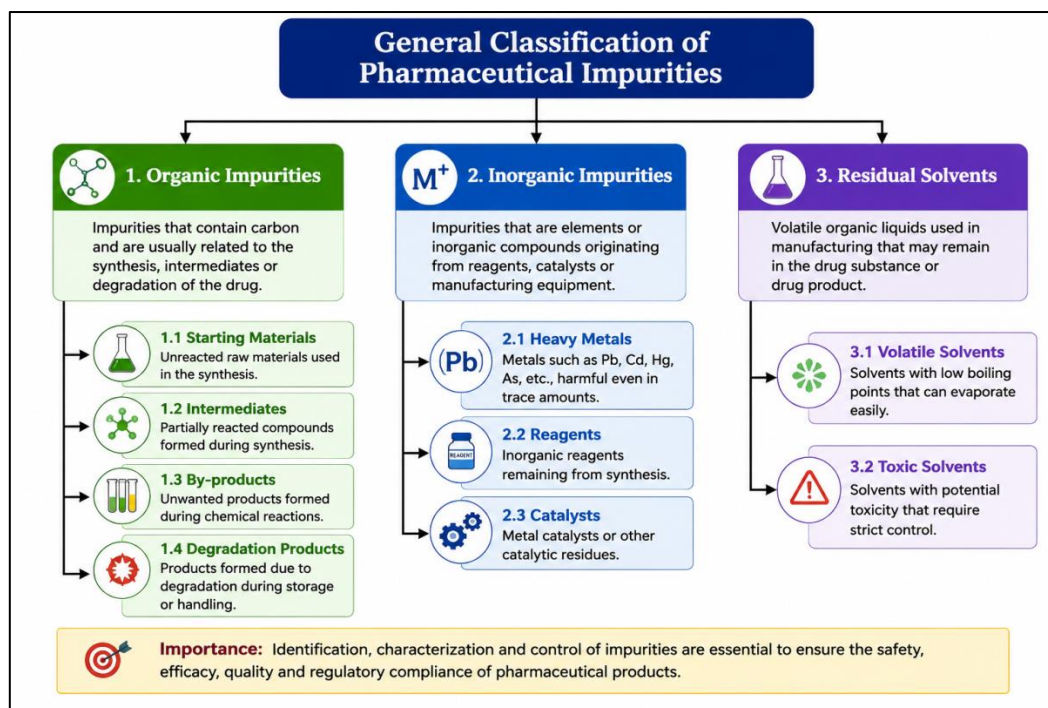


Figure 1. General Classification of Pharmaceutical Impurities

Impurity profiling involves identifying and quantifying impurities that may arise during synthesis, degradation, or storage conditions of pharmaceutical products.¹⁷

Concept of Impurity Profiling

Impurity profiling is one of the most essential components of pharmaceutical quality assurance and analytical drug evaluation. The presence of impurities in pharmaceutical substances may influence the safety, efficacy, stability, and therapeutic performance of drug products. Therefore, modern pharmaceutical industries place significant emphasis on the identification, quantification, characterization, and control of impurities during drug development and manufacturing processes.¹⁸⁻²⁰

The advancement of analytical technologies and stringent regulatory requirements have greatly increased the importance of impurity profiling in pharmaceutical research and industrial applications. Impurity profiling not only ensures compliance with regulatory standards but also helps in improving manufacturing processes, maintaining batch-to-batch consistency, and minimizing toxicological risks associated with pharmaceutical products.

Definition of Impurity Profiling

Impurity profiling refers to the systematic process of detecting, identifying, characterizing, and quantifying impurities present in active pharmaceutical ingredients (APIs), intermediates, and finished pharmaceutical dosage forms. It provides detailed qualitative and quantitative information regarding the nature, origin, structure, and concentration of impurities present in pharmaceutical products.²¹

Impurities may originate during synthesis, purification, storage, formulation, or degradation processes. These unwanted substances may include organic impurities, inorganic impurities, residual solvents, degradation products, intermediates, catalysts, and by-products formed during manufacturing. Impurity profiling involves the use of advanced analytical techniques to evaluate these impurities and ensure that their levels remain within acceptable regulatory limits.

The primary purpose of impurity profiling is to establish the purity profile of pharmaceutical products and to ensure the overall quality and safety of medicines before they reach patients. Modern impurity profiling studies focus not only on detecting known impurities but also on identifying unknown and trace-level impurities that may possess toxic or mutagenic properties.²²

Impurity profiling provides both qualitative and quantitative information regarding impurities present in pharmaceutical substances and formulations.

Objectives of Impurity Profiling

The main objectives of impurity profiling are associated with ensuring the quality, safety, efficacy, and regulatory compliance of pharmaceutical products. The pharmaceutical industry utilizes impurity profiling studies throughout drug development and commercial manufacturing processes to maintain consistent product standards.²³

The major objectives of impurity profiling include:

Identification of Impurities

Identification involves determining the chemical structure and nature of impurities present in a pharmaceutical product. The impurity may be identified as a process-related impurity, degradation product, residual solvent, or unknown contaminant. Structural elucidation techniques such as LC-MS, NMR, IR spectroscopy, and RP-HPLC coupled with photodiode array detectors are commonly employed for impurity identification.²⁴

Quantification of Impurities

Quantification refers to the determination of the amount or concentration of impurities present in the drug substance or formulation. Accurate quantification is essential because even trace amounts of certain impurities may exhibit toxicological effects. Quantitative impurity analysis helps manufacturers ensure that impurity levels remain below permissible limits specified by regulatory agencies.

Qualification of Impurities

Qualification is the process of establishing the biological safety and toxicological acceptability of impurities. This step evaluates whether a particular impurity at a specific concentration poses any harmful effects to humans. Toxicological studies and risk assessment approaches are generally used for impurity qualification.

Improvement of Manufacturing Processes

Impurity profiling helps identify the sources of impurities generated during synthesis and formulation. This information assists manufacturers in optimizing reaction conditions, purification procedures, and storage conditions to minimize impurity formation.

Stability Evaluation

Impurity profiling is essential during stability studies because degradation products formed under stress conditions may affect the stability and shelf life of pharmaceutical products. Stability-indicating analytical methods are therefore developed to monitor impurity formation during storage.

Importance in Pharmaceutical Industries

Impurity profiling has become an integral component of pharmaceutical industries due to increasing regulatory requirements and the need for safer medicines. The pharmaceutical industry must

ensure that all drug products meet predefined quality standards before commercial distribution.

One of the major advantages of impurity profiling is its ability to support quality assurance during the manufacturing process. The identification and control of impurities help maintain product consistency and reduce the possibility of batch failure. By monitoring impurity levels, pharmaceutical manufacturers can optimize synthetic routes, improve process efficiency, and reduce production costs.

Impurity profiling also plays a crucial role in drug development and formulation research. During the development of new pharmaceutical compounds, impurities generated at different stages of synthesis are thoroughly studied to establish safe manufacturing procedures. In formulation development, impurity studies help evaluate compatibility between active ingredients and excipients.

In pharmaceutical industries, impurity profiling additionally supports:

- Process validation
- Stability testing
- Shelf-life determination
- Quality control analysis
- Regulatory documentation
- Patent evaluation
- Bioequivalence studies

Furthermore, impurity profiling is important for maintaining the reputation and reliability of pharmaceutical companies by ensuring the production of high-quality medicines that comply with international standards.²⁵

Safety and Toxicological Significance

The toxicological significance of pharmaceutical impurities has become a major concern in modern healthcare systems. Certain impurities may exhibit toxic, mutagenic, carcinogenic, teratogenic, or genotoxic properties even at very low concentrations. Therefore, comprehensive impurity profiling is necessary to evaluate potential health risks associated with pharmaceutical products.

Impurities may alter the pharmacological activity of drugs and reduce their therapeutic effectiveness. In some cases, impurities can interact with biological systems and produce adverse drug reactions, organ toxicity, hypersensitivity, or long-term toxic effects. The severity of toxicity depends upon factors such as impurity concentration, duration of exposure, route of administration, and patient susceptibility.

Genotoxic impurities are particularly significant because they can damage genetic material and increase the risk of cancer development. Regulatory agencies therefore require highly sensitive analytical methods capable of detecting trace-level genotoxic impurities in pharmaceutical products.

Degradation products formed during storage also possess toxicological importance. Exposure to heat, light, oxygen, and moisture may lead to the formation of unstable or harmful degradation compounds. Consequently, forced degradation and stability studies are essential parts of impurity profiling.

Proper impurity profiling minimizes toxicological risks and ensures patient safety by:

- Identifying hazardous impurities
- Controlling impurity levels
- Establishing safe exposure limits
- Supporting toxicological qualification studies

Regulatory Expectations

Regulatory authorities worldwide have established strict guidelines for impurity profiling to ensure the safety, efficacy, and quality of pharmaceutical products. International organizations such as the International Council for Harmonisation (ICH), United States Food and Drug Administration (USFDA), European Medicines Agency (EMA), and various pharmacopoeias provide detailed recommendations regarding impurity identification, qualification, reporting, and control.²⁶⁻³⁰

The ICH guidelines play a major role in impurity regulation within pharmaceutical industries. Important guidelines associated with impurity profiling include:

- ICH Q3A(R2): Impurities in new drug substances
- ICH Q3B(R2): Impurities in new drug products
- ICH Q2(R1): Validation of analytical procedures
- ICH M7: Assessment of mutagenic impurities

These guidelines specify:

- Reporting thresholds
- Identification thresholds
- Qualification thresholds
- Validation requirements
- Acceptance criteria for impurities

Regulatory agencies expect pharmaceutical manufacturers to develop validated analytical methods capable of detecting impurities at trace levels with high specificity, sensitivity, precision, and accuracy. Stability-indicating RP-HPLC methods are widely preferred for meeting these regulatory requirements.

Additionally, manufacturers must submit detailed impurity profiles during:

- Drug approval applications
- Stability studies
- Process validation reports
- Regulatory audits
- Post-marketing surveillance

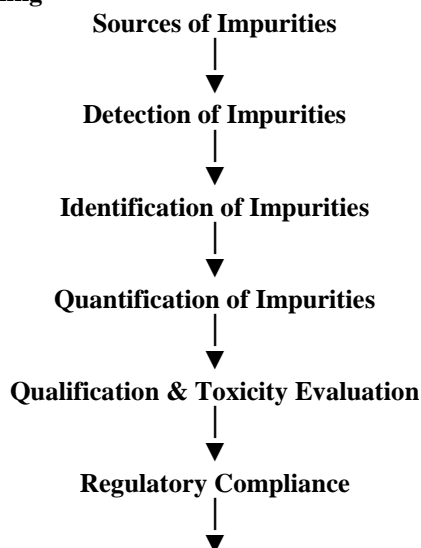
Compliance with regulatory expectations ensures the production of safe, effective, and high-quality

pharmaceutical products suitable for human use.

Table 3. Major Components of Impurity Profiling

Sr. No.	Component	Description
1	Identification	Determination of impurity structure and origin
2	Quantification	Measurement of impurity concentration
3	Qualification	Evaluation of biological safety and toxicity
4	Characterization	Study of physicochemical properties
5	Monitoring	Routine analysis during manufacturing and storage

Basic Workflow of Impurity Profiling



Quality Assurance of Pharmaceutical Product

Classification of Impurities

Pharmaceutical impurities are unwanted chemical substances that remain associated with active pharmaceutical ingredients (APIs) or finished pharmaceutical formulations. These impurities may arise during synthesis, purification, formulation, storage, transportation, or degradation processes. The classification of impurities is essential because different impurities possess different physicochemical properties, toxicological characteristics, and regulatory significance. Proper classification helps in selecting suitable analytical methods for impurity identification, quantification, and control.

According to International Council for Harmonisation (ICH) guidelines, pharmaceutical impurities are broadly classified into organic impurities, inorganic impurities, and residual solvents. In addition to these categories, modern pharmaceutical analysis also considers genotoxic impurities, process-related impurities, and formulation-related impurities because of their increasing importance in drug safety and quality assurance.³¹⁻⁴²

Organic Impurities

Organic impurities are the most common impurities encountered in pharmaceutical products. These impurities are generally formed during the

manufacturing process or during storage due to chemical degradation reactions. Organic impurities may originate from starting materials, intermediates, by-products, degradation products, or reactions occurring during synthesis and formulation development.

Organic impurities may affect the stability, potency, and therapeutic activity of pharmaceutical products. Therefore, their identification and control are extremely important in pharmaceutical quality assurance.

Organic impurities are generally classified into the following categories:

Starting Material Impurities

Starting materials are the raw chemical substances used during the synthesis of active pharmaceutical ingredients. If these raw materials are not completely consumed during the chemical reaction, traces of unreacted starting materials may remain in the final drug substance as impurities.

These impurities usually arise due to:

- Incomplete chemical reactions
- Improper purification
- Poor reaction optimization
- Inadequate washing procedures

The presence of starting material impurities may alter the purity profile of pharmaceutical products and may contribute to toxicological complications. Therefore, efficient purification and process

optimization are necessary to minimize these impurities.

Examples include:

- Unreacted aromatic amines
- Organic acids
- Halogenated compounds
- Alcohol derivatives

Intermediate Impurities

Intermediates are compounds formed during multistep synthesis before the formation of the final active pharmaceutical ingredient. Incomplete conversion of intermediates into final products may result in the presence of intermediate impurities in pharmaceutical substances.

Intermediate impurities are commonly observed in complex synthetic pathways involving several reaction stages. Their occurrence may indicate inadequate reaction conditions or insufficient purification processes.

The concentration of intermediates must be carefully monitored because some intermediates may possess toxic or reactive functional groups capable of affecting drug safety and stability.

By-products

By-products are undesired compounds formed during side reactions occurring simultaneously with the intended chemical reaction. These impurities are generated due to:

- Overreaction
- Rearrangement reactions
- Oxidation
- Reduction
- Hydrolysis
- Polymerization

The formation of by-products depends on reaction temperature, pH, catalysts, solvent systems, and reaction time. Some by-products may possess structures similar to the desired drug molecule, making their separation difficult during purification.

Advanced chromatographic techniques such as RP-HPLC and LC-MS are commonly employed for the detection and characterization of by-product impurities.

Degradation Products

Degradation products are impurities formed due to the chemical decomposition of pharmaceutical substances during storage, handling, or exposure to environmental conditions. Factors responsible for degradation include:

- Heat
- Light
- Moisture
- Oxygen
- pH changes

Degradation products may significantly alter drug potency and safety. Therefore, stability studies and forced degradation studies are conducted to

evaluate the degradation behavior of pharmaceutical compounds.

Common degradation reactions include:

- Hydrolysis
- Oxidation
- Photolysis
- Decarboxylation
- Isomerization

The identification of degradation products is important for developing stability-indicating analytical methods and determining shelf life.

Inorganic Impurities

Inorganic impurities are generally derived from manufacturing processes, reagents, catalysts, filter aids, and equipment used during pharmaceutical production. These impurities do not contain carbon atoms and may include metallic residues, inorganic salts, acids, or other non-organic substances.

Although inorganic impurities are usually present in trace quantities, excessive levels may produce toxic effects and compromise product quality.

Major categories of inorganic impurities include:

Heavy Metals

Heavy metal impurities are among the most critical inorganic contaminants in pharmaceuticals because of their toxicological significance. Heavy metals may enter pharmaceutical products through:

- Catalysts
- Water sources
- Manufacturing equipment
- Reagents
- Containers

Common heavy metals include:

- Lead (Pb)
- Cadmium (Cd)
- Mercury (Hg)
- Arsenic (As)
- Chromium (Cr)

Heavy metals may accumulate in biological tissues and produce serious toxic effects such as nephrotoxicity, neurotoxicity, hepatotoxicity, and carcinogenicity. Therefore, strict regulatory limits are established for heavy metal contamination.

Analytical techniques such as ICP-MS, AAS, and ICP-OES are commonly used for heavy metal analysis.

Catalysts

Catalysts are substances used to accelerate chemical reactions during API synthesis. Residual catalyst impurities may remain in the final product if purification procedures are inadequate.

Transition metal catalysts commonly used in pharmaceutical synthesis include:

- Palladium
- Platinum
- Nickel
- Copper
- Rhodium

Residual catalysts may affect product stability and exhibit toxicological effects. Consequently, their concentration must remain within acceptable limits established by regulatory agencies.

Reagents

Reagents used during chemical synthesis may also contribute to inorganic impurities. Acidic or basic reagents, oxidizing agents, reducing agents, and salts may remain as residues in pharmaceutical products.

Examples include:

- Sulfates
- Chlorides
- Phosphates
- Nitrates

Careful purification and washing procedures are required to eliminate reagent-related impurities.

Residual Solvents

Residual solvents are volatile organic chemicals used during pharmaceutical manufacturing and purification processes that are not completely removed from the final product. These solvents are commonly used in:

- Extraction
- Crystallization
- Purification
- Synthesis
- Chromatographic separation

Residual solvents are classified according to their toxicity by ICH Q3C guidelines.

Classification of Residual Solvents

Class 1 Solvents

Highly toxic solvents that should be avoided.

Examples:

- Benzene
- Carbon tetrachloride

Class 2 Solvents

Solvents with moderate toxicity.

Examples:

- Methanol
- Acetonitrile
- Toluene

Class 3 Solvents

Low toxic solvents with minimal health risk.

Examples:

- Ethanol
- Acetone
- Isopropanol

Residual solvents may produce toxic effects including central nervous system depression, liver damage, and carcinogenicity. Therefore, their levels must be controlled carefully.

Gas chromatography is widely employed for residual solvent analysis.

Genotoxic Impurities

Genotoxic impurities are highly critical impurities capable of damaging genetic material and causing mutations, chromosomal abnormalities, or cancer

development. Even trace quantities of genotoxic impurities may pose significant health risks.

These impurities may originate from:

- Reactive intermediates
- Alkylating agents
- Nitroso compounds
- Epoxides
- Hydrazines

Regulatory agencies have established strict guidelines such as ICH M7 for the assessment and control of genotoxic impurities.

Highly sensitive analytical methods such as LC-MS/MS, GC-MS, and ultra-performance liquid chromatography are commonly used for detecting genotoxic impurities at trace levels.

Process-Related Impurities

Process-related impurities are impurities generated specifically during manufacturing and synthetic procedures. These impurities depend on:

- Synthetic route
- Reaction conditions
- Purification process
- Reagents and solvents used

Process-related impurities may include:

- Starting materials
- Intermediates
- By-products
- Catalyst residues
- Reagent residues

The identification of process-related impurities is important for optimizing manufacturing procedures and ensuring batch consistency.

RP-HPLC is extensively used for monitoring process-related impurities because of its high sensitivity and separation efficiency.

Formulation-Related Impurities

Formulation-related impurities are generated during formulation development or storage due to interactions between the active pharmaceutical ingredient and excipients. These impurities may arise because of:

- Drug–excipient incompatibility
- Moisture absorption
- Oxidation
- pH changes
- Packaging interactions

Certain excipients may accelerate drug degradation or produce reactive degradation products. Environmental factors such as temperature, humidity, and light may further increase impurity formation.

Formulation-related impurities are commonly observed in:

- Liquid dosage forms
- Suspensions
- Emulsions
- Injectable preparations

Stability-indicating RP-HPLC methods are widely applied for monitoring formulation-related

impurities during stability studies.

Table 4. Classification of Pharmaceutical Impurities

Sr. No.	Type of Impurity	Source	Examples
1	Organic impurities	Synthesis and degradation	Intermediates, by-products
2	Inorganic impurities	Catalysts and reagents	Heavy metals
3	Residual solvents	Manufacturing solvents	Methanol, benzene
4	Genotoxic impurities	Reactive chemicals	Nitroso compounds
5	Process-related impurities	Manufacturing process	Catalyst residues
6	Formulation-related impurities	Drug–excipient interaction	Oxidative products

Sources of Impurities

Impurities present in pharmaceutical substances and finished dosage forms may originate from several stages of drug development, manufacturing, formulation, storage, transportation, and packaging. The identification of impurity sources is an essential aspect of pharmaceutical quality assurance because impurities can significantly affect the safety, efficacy, stability, and therapeutic performance of pharmaceutical products. Understanding the origin and formation mechanisms of impurities helps pharmaceutical industries design effective manufacturing processes, optimize storage conditions, and develop suitable analytical methods for impurity control.

Impurities may arise from synthetic reactions, degradation pathways, residual solvents, catalysts, excipients, environmental exposure, and interactions with packaging materials. The nature and concentration of impurities depend on factors such as reaction conditions, formulation composition, environmental stress, and duration of storage. Regulatory agencies therefore require comprehensive impurity profiling studies during pharmaceutical development and commercialization.

Pharmaceutical impurities may arise from synthesis, storage, degradation reactions, catalysts, reagents, and interactions between excipients and drug substances.

Impurities Arising from Manufacturing Process

The manufacturing process is one of the primary sources of pharmaceutical impurities. During the synthesis of active pharmaceutical ingredients (APIs), several unwanted compounds may be generated along with the desired product due to incomplete reactions, side reactions, rearrangements, or inadequate purification procedures. In multistep synthesis, intermediates and starting materials may remain unreacted and persist as impurities in the final product.⁴³

Catalysts, reagents, and solvents used during manufacturing may also contribute to impurity formation if they are not completely removed during purification. Residual solvents and catalyst residues are commonly encountered process-related impurities in pharmaceutical products. Furthermore, contamination from manufacturing

equipment and processing environments may introduce metallic or particulate impurities into the formulation.

Improper reaction conditions such as unsuitable temperature, pH, pressure, and reaction time may further increase impurity generation. Therefore, optimization of synthetic pathways and validation of manufacturing procedures are necessary to minimize process-related impurities and ensure product quality.⁴⁴

Impurities Formed During Storage

Pharmaceutical products may undergo degradation during storage due to prolonged exposure to environmental conditions such as heat, moisture, oxygen, and light. These degradation reactions result in the formation of degradation products, which may reduce drug potency and compromise therapeutic efficacy.

The stability of pharmaceutical products depends on the physicochemical nature of the drug substance, formulation type, packaging system, and storage conditions. Drugs containing unstable functional groups are highly susceptible to degradation during storage. The formation of storage-related impurities may also alter the color, odor, dissolution behavior, and appearance of pharmaceutical products.

To evaluate impurity formation during storage, pharmaceutical products are subjected to accelerated and long-term stability studies according to ICH guidelines. Stability-indicating analytical methods such as RP-HPLC are widely used for monitoring degradation products during shelf-life studies.⁴⁵⁻⁴⁸

Hydrolytic Degradation

Hydrolysis is one of the most common pathways responsible for impurity formation in pharmaceutical products. Hydrolytic degradation occurs when drug molecules react with water or moisture, resulting in cleavage of chemical bonds and formation of decomposition products.

Compounds containing ester, amide, lactam, and lactone functional groups are particularly susceptible to hydrolysis. Hydrolysis may occur in both solid and liquid dosage forms, especially under conditions of high humidity and elevated temperature. The rate of hydrolysis is influenced by

pH, temperature, moisture content, and the presence of catalytic substances.

Hydrolytic degradation can significantly reduce drug stability and may produce toxic degradation products. Therefore, hydrolysis studies are important for evaluating formulation stability and establishing appropriate storage conditions.

Oxidative Degradation

Oxidation is another major source of pharmaceutical impurities. Oxidative degradation occurs when drug substances react with oxygen, free radicals, or oxidizing agents, leading to chemical transformation and impurity formation.

Pharmaceutical compounds containing phenolic, aldehydic, sulfur-containing, and unsaturated functional groups are highly prone to oxidation. Oxidative degradation may be accelerated by exposure to air, light, elevated temperature, and metal ions.

Oxidation can lead to potency loss, discoloration, and formation of harmful degradation products. Antioxidants are often incorporated into pharmaceutical formulations to minimize oxidative degradation. Forced oxidation studies are also performed during stability testing to identify oxidation-related impurities and develop stability-indicating analytical methods.

Photolytic Degradation

Photolytic degradation refers to impurity formation caused by exposure to ultraviolet (UV) light or visible light. Many pharmaceutical compounds are photosensitive and undergo chemical decomposition when exposed to light during manufacturing, storage, or transportation.

Photolysis may result in oxidation, isomerization, bond cleavage, and rearrangement reactions. The extent of photodegradation depends on the wavelength and intensity of light, duration of exposure, and the nature of packaging materials.

Photosensitive drugs require special protective packaging such as amber-colored bottles or light-resistant containers to minimize degradation. Photostability studies are conducted according to ICH guidelines to assess the impact of light on pharmaceutical stability and impurity formation.

Interaction with Excipients

Excipients used in pharmaceutical formulations may interact chemically or physically with active pharmaceutical ingredients, resulting in impurity formation. Drug–excipient interactions are among the major causes of formulation-related impurities. Certain excipients may alter the pH of formulations, provide moisture, generate peroxide

impurities, or catalyze degradation reactions. For example, lactose may react with amine-containing drugs through Maillard reactions, leading to discoloration and impurity formation.

Interactions between drug substances and excipients may affect stability, dissolution behavior, and bioavailability of pharmaceutical products. Therefore, compatibility studies are essential during formulation development to identify suitable excipients and minimize interaction-related degradation.

Environmental Factors

Environmental conditions play a significant role in impurity formation during manufacturing, storage, and transportation of pharmaceutical products. Exposure to unfavorable environmental conditions may accelerate degradation reactions and reduce product stability.

Major environmental factors responsible for impurity formation include temperature, humidity, oxygen exposure, and light. High temperature may increase reaction rates and accelerate chemical decomposition, whereas high humidity may initiate hydrolysis or microbial contamination.

Environmental stress may additionally alter the physical properties of pharmaceutical products, including crystal structure, dissolution rate, and particle size distribution. Consequently, pharmaceutical products must be stored under controlled environmental conditions to maintain stability and minimize impurity formation.

Packaging Interactions

Packaging materials may contribute to impurity formation through leaching, adsorption, diffusion, or chemical interaction with pharmaceutical formulations. Packaging-related impurities may originate from plasticizers, rubber closures, adhesives, inks, glass containers, and metallic components.

Leachables and extractables from packaging systems may migrate into pharmaceutical products and affect their safety and stability. Certain packaging materials may also permit moisture or oxygen penetration, thereby accelerating degradation reactions.

Compatibility studies between packaging materials and pharmaceutical formulations are therefore essential to ensure product stability throughout shelf life. Appropriate packaging systems help minimize impurity formation and protect pharmaceutical products from environmental exposure.

Table 5. Compiled Sources of Pharmaceutical Impurities

Sr. No.	Source of Impurity	Cause of Formation	Examples of Impurities	Impact on Pharmaceutical Product
1	Manufacturing process	Incomplete reaction, side reactions, poor purification	Intermediates, by-products, catalyst residues	Reduced purity and stability
2	Storage degradation	Heat, moisture, oxygen exposure	Degradation products	Loss of potency and efficacy
3	Hydrolysis	Reaction with water or moisture	Hydrolyzed products	Chemical instability
4	Oxidation	Reaction with oxygen or oxidizing agents	Oxidative degradation products	Toxicity and discoloration
5	Photolysis	Exposure to UV or visible light	Photo-degraded compounds	Reduced drug effectiveness
6	Drug–excipient interaction	Chemical incompatibility	Maillard reaction products	Formulation instability
7	Environmental factors	Temperature, humidity, light	Oxidative and hydrolytic impurities	Shortened shelf life
8	Packaging interaction	Leachables and extractables	Plasticizers, metal ions	Product contamination

Table 6. Common Degradation Pathways Responsible for Impurity Formation

Degradation Pathway	Responsible Factor	Commonly Affected Functional Groups	Examples of Affected Drugs
Hydrolysis	Moisture, pH	Esters, amides	Aspirin, penicillins
Oxidation	Oxygen, peroxides	Phenols, aldehydes	Adrenaline, ascorbic acid
Photolysis	UV light	Aromatic compounds	Nifedipine, riboflavin
Thermal degradation	Heat	Thermolabile compounds	Vitamins, antibiotics
Isomerization	Light, pH	Unsaturated compounds	Tetracycline

Regulatory Guidelines for Impurity Profiling

Regulatory guidelines for impurity profiling play a crucial role in ensuring the quality, safety, efficacy, and stability of pharmaceutical products. International regulatory authorities have established stringent recommendations regarding impurity identification, quantification, qualification, reporting, and control during drug development and manufacturing. These guidelines help pharmaceutical industries maintain product consistency, minimize toxicological risks, and ensure compliance with global quality standards.

Regulatory agencies such as the International Council for Harmonisation (ICH), United States Food and Drug Administration (USFDA), United States Pharmacopeia (USP), British Pharmacopoeia (BP), and Indian Pharmacopoeia (IP) have issued various guidelines related to impurity profiling and analytical method validation. These guidelines specify impurity threshold limits, validation requirements, acceptance criteria, and procedures for stability studies and impurity monitoring.⁴⁹⁻⁵²

ICH Guidelines

The International Council for Harmonisation (ICH) provides internationally accepted guidelines for impurity profiling in pharmaceutical products. ICH guidelines are widely followed by pharmaceutical industries and regulatory authorities worldwide

because they establish harmonized standards for drug quality and safety.

The major ICH guidelines associated with impurity profiling include ICH Q3A(R2), ICH Q3B(R2), ICH Q2(R1), and ICH M7.

ICH Q3A(R2): Impurities in New Drug Substances

ICH Q3A(R2) guideline addresses impurities present in new drug substances or active pharmaceutical ingredients (APIs). This guideline provides recommendations regarding identification, reporting, qualification, and control of organic and inorganic impurities generated during synthesis or storage.

The guideline specifies impurity threshold limits based on the maximum daily dose of the drug substance. It also describes requirements for stability studies, impurity characterization, and analytical procedures used for impurity detection.

The primary objective of ICH Q3A(R2) is to ensure that impurities present in APIs remain within acceptable safety limits and do not adversely affect product quality or patient health.

ICH Q3B(R2): Impurities in New Drug Products

ICH Q3B(R2) guideline focuses on impurities present in finished pharmaceutical dosage forms or drug products. These impurities may originate from

degradation reactions, excipient interactions, manufacturing processes, or storage conditions.

The guideline establishes limits for degradation products and specifies procedures for impurity reporting, identification, qualification, and stability testing. It also emphasizes the development of stability-indicating analytical methods capable of monitoring degradation impurities throughout the shelf life of pharmaceutical products.

ICH Q3B(R2) is particularly important for evaluating formulation-related impurities and degradation products formed during storage.

ICH Q2(R1): Validation of Analytical Procedures

ICH Q2(R1) guideline provides recommendations for validation of analytical methods used in pharmaceutical analysis, including impurity profiling methods. The guideline ensures that analytical procedures are reliable, accurate, specific, precise, and reproducible.

Validation parameters described in ICH Q2(R1) include:

- Specificity
- Accuracy
- Precision
- Linearity
- Range
- Detection limit (LOD)
- Quantitation limit (LOQ)
- Robustness

This guideline is widely used for validation of RP-HPLC methods developed for impurity analysis in pharmaceutical products.

ICH M7: Assessment and Control of Genotoxic Impurities

ICH M7 guideline addresses the assessment and control of genotoxic impurities in pharmaceutical products. Genotoxic impurities are compounds capable of damaging genetic material and causing mutations or carcinogenic effects.

The guideline provides risk assessment strategies, toxicological evaluation procedures, and acceptable intake limits for genotoxic impurities. It also recommends highly sensitive analytical techniques for detecting trace levels of mutagenic impurities in drug substances and products.

ICH M7 is especially important in modern pharmaceutical industries because even very low concentrations of genotoxic impurities may pose significant health risks.

USFDA Guidelines

The United States Food and Drug Administration (USFDA) has established strict regulatory requirements regarding impurity profiling and pharmaceutical quality control. USFDA guidelines emphasize the identification, quantification, and qualification of impurities throughout drug development and commercialization.

USFDA requires pharmaceutical manufacturers to:

- Develop validated analytical methods

- Perform stability studies
- Monitor degradation products
- Control residual solvents and elemental impurities
- Maintain impurity levels within acceptable limits

The USFDA also supports the implementation of ICH guidelines for impurity profiling and analytical method validation. During regulatory submissions, manufacturers must provide detailed impurity profiles and toxicological data related to impurities present in pharmaceutical products.

USP/BP/IP Requirements

Pharmacopoeias such as the United States Pharmacopeia (USP), British Pharmacopoeia (BP), and Indian Pharmacopoeia (IP) provide official standards and monographs related to pharmaceutical impurities and analytical methods.

These pharmacopoeias specify:

- Permissible impurity limits
- Test procedures
- Identification methods
- Residual solvent limits
- Heavy metal limits
- Acceptance criteria for pharmaceutical products

USP, BP, and IP also include official monographs for many pharmaceutical substances describing impurity-related tests and chromatographic procedures. Compliance with pharmacopoeial standards is mandatory for ensuring pharmaceutical product quality and regulatory approval.

Acceptance Criteria for Impurities

Acceptance criteria refer to predefined limits established for impurities present in pharmaceutical substances and finished products. These criteria are based on toxicological safety, therapeutic dose, route of administration, and duration of treatment.

Acceptance criteria are established for:

- Organic impurities
- Inorganic impurities
- Residual solvents
- Genotoxic impurities
- Degradation products

If impurity levels exceed specified limits, further toxicological qualification and safety evaluation become necessary. Pharmaceutical manufacturers must ensure that impurity concentrations remain below established acceptance criteria throughout the shelf life of the product.

Acceptance criteria are generally determined based on:

- Maximum daily dose
- Toxicological data
- Stability studies
- Clinical safety evaluation

Threshold Limits

Threshold limits are regulatory limits established for reporting, identification, and qualification of

impurities in pharmaceutical products. These limits are specified by ICH guidelines and depend on the maximum daily intake of the drug substance.

The major threshold categories include:

Reporting Threshold

The reporting threshold is the minimum impurity level at which an impurity must be reported during analysis and regulatory submission.

Identification Threshold

The identification threshold is the impurity level above which the chemical structure of the impurity must be identified.

Qualification Threshold

The qualification threshold is the impurity level above which toxicological qualification studies are required to establish impurity safety.

Threshold limits help ensure that potentially harmful impurities are properly evaluated and controlled before pharmaceutical products are marketed.

Table 7. Comparative Regulatory Guidelines for Impurity Profiling

Guideline	Purpose	Major Focus Area
ICH Q3A(R2)	Impurities in new drug substances	Organic and inorganic impurities in APIs
ICH Q3B(R2)	Impurities in drug products	Degradation products and formulation impurities
ICH Q2(R1)	Validation of analytical methods	Accuracy, precision, specificity, robustness
ICH M7	Genotoxic impurities	Mutagenic impurity assessment and control
USFDA Guidelines	Pharmaceutical quality and safety	Stability studies and impurity monitoring
USP/BP/IP	Pharmacopoeial standards	Official impurity limits and test methods

Table 8. Important Validation Parameters According to ICH Q2(R1)

Validation Parameter	Purpose
Specificity	Ability to analyze analyte without interference
Accuracy	Closeness of measured value to true value
Precision	Reproducibility of analytical results
Linearity	Relationship between concentration and response
LOD	Lowest detectable concentration
LOQ	Lowest quantifiable concentration
Robustness	Reliability under small method variations

RP-HPLC Technique

Reversed-Phase High-Performance Liquid Chromatography (RP-HPLC) is one of the most important and extensively used analytical techniques in pharmaceutical analysis. It is widely employed for the separation, identification, and quantification of pharmaceutical compounds, degradation products, and impurities present in active pharmaceutical ingredients and dosage forms. RP-HPLC has become a preferred analytical method because of its high sensitivity, excellent resolution, rapid analysis, reproducibility, and compatibility with different pharmaceutical compounds. The technique plays a major role in quality control, impurity profiling, stability studies, and regulatory analysis in the pharmaceutical industry.⁵³⁻⁶¹

Principle of RP-HPLC

RP-HPLC works on the principle of differential partitioning of analytes between a nonpolar stationary phase and a relatively polar mobile phase. In this chromatographic system, the stationary phase is hydrophobic in nature, whereas the mobile phase consists mainly of water mixed with organic solvents such as methanol or acetonitrile. During separation, compounds interact differently with the stationary and mobile phases depending on their polarity and hydrophobicity.

Nonpolar compounds exhibit stronger interaction with the hydrophobic stationary phase and therefore remain retained for a longer duration, whereas polar compounds elute more rapidly through the mobile phase. The retention behavior and separation efficiency depend on factors such as mobile phase composition, pH, flow rate, temperature, and the nature of the stationary phase. Because of its excellent separation capability, RP-HPLC is highly suitable for impurity profiling and pharmaceutical analysis.

Instrumentation of RP-HPLC

The RP-HPLC system consists of several important components that function together to achieve efficient chromatographic separation and accurate analysis. The major components include the pump, injector, chromatographic column, detector, and data processing system.

The pump is responsible for delivering the mobile phase through the chromatographic system at a constant flow rate and under high pressure. Stable flow of the mobile phase is necessary for achieving reproducible chromatographic results and efficient separation of analytes.

The injector introduces a precise volume of sample solution into the mobile phase stream. Both manual injectors and autosamplers are commonly used in pharmaceutical laboratories. Accurate sample

injection is essential for reliable quantitative analysis and reproducible peak areas. The chromatographic column is considered the heart of the RP-HPLC system because actual separation of analytes occurs within the column. The column contains stationary phase particles packed inside stainless steel tubing. Separation efficiency depends on particle size, column dimensions, and stationary phase chemistry.

The detector identifies compounds eluting from the column and converts them into measurable electronic signals. Different detectors such as UV, PDA, fluorescence, and mass spectrometric detectors are used depending on analytical requirements.

The data system records chromatographic signals and performs peak integration, quantitative calculations, chromatogram processing, and report generation. Modern computerized data systems improve analytical precision and documentation in pharmaceutical analysis.

Stationary Phases Used in RP-HPLC

The stationary phase is one of the most critical components affecting chromatographic separation in RP-HPLC. Different stationary phases are selected according to the chemical properties and polarity of analytes.

C18 columns, also known as octadecylsilane columns, are the most commonly used stationary phases in pharmaceutical analysis. These columns contain long-chain hydrocarbon groups bonded to silica particles and provide strong hydrophobic interactions. C18 columns offer excellent resolution, high reproducibility, and broad applicability for pharmaceutical impurity profiling. C8 columns contain octylsilane groups attached to silica particles and are less hydrophobic compared to C18 columns. These columns provide shorter retention times and are useful for moderately polar compounds or when rapid analysis is required.

Phenyl columns contain phenyl functional groups bonded to silica particles. These columns provide π - π interactions with aromatic compounds and improve selectivity for structurally related analytes and isomeric compounds. Phenyl columns are

therefore useful for specialized pharmaceutical separations.

Mobile Phase Selection

The mobile phase plays a significant role in determining chromatographic performance in RP-HPLC. Proper mobile phase selection is necessary for achieving suitable retention time, peak symmetry, resolution, and sensitivity.

The mobile phase generally consists of water or aqueous buffers mixed with organic solvents such as methanol or acetonitrile. Buffer systems are commonly used to maintain pH and control analyte ionization. The choice of mobile phase depends on analyte polarity, solubility, column chemistry, and detection method.

Commonly used mobile phase components include:

- Water
- Acetonitrile
- Methanol
- Phosphate buffers
- Orthophosphoric acid

Optimization of mobile phase composition improves separation efficiency and enhances impurity detection in pharmaceutical samples.

Gradient and Isocratic Elution

RP-HPLC separations may be performed using either isocratic or gradient elution techniques depending on sample complexity and analytical requirements.

In isocratic elution, the composition of the mobile phase remains constant throughout the chromatographic run. This technique is simple, reproducible, and suitable for samples containing analytes with similar polarity. However, complex pharmaceutical mixtures may require longer run times under isocratic conditions.

In gradient elution, the mobile phase composition changes gradually during analysis, usually by increasing the concentration of organic solvent. Gradient elution improves separation efficiency, shortens analysis time, and provides better resolution for complex mixtures containing analytes with varying polarity. Because pharmaceutical impurity profiling often involves structurally diverse compounds, gradient elution is widely preferred in RP-HPLC methods.

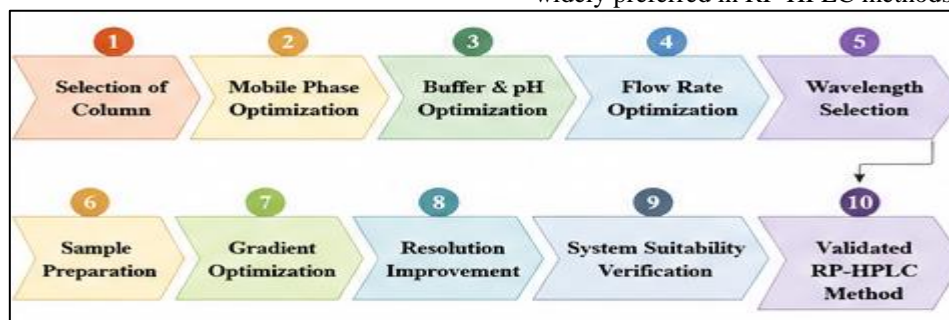


Figure 2. General Workflow of RP-HPLC Method Development

Detection Systems Used in RP-HPLC

Different detection systems are employed in RP-HPLC depending on the sensitivity and selectivity requirements of analysis.

UV detectors are the most commonly used detectors in pharmaceutical analysis because many pharmaceutical compounds absorb ultraviolet radiation. UV detectors are economical, simple, and suitable for routine impurity analysis.

Photodiode array (PDA) detectors record absorbance at multiple wavelengths simultaneously and provide spectral information for peak purity evaluation and impurity identification. PDA detectors are highly useful in stability-indicating methods.

Fluorescence detectors provide high sensitivity and selectivity for fluorescent compounds and are particularly useful for trace-level impurity analysis. RP-HPLC coupled with mass spectrometry (LC-MS) is widely used for structural characterization and identification of unknown impurities. LC-MS provides accurate molecular weight information and is highly valuable in genotoxic impurity analysis and degradation studies.

Advantages of RP-HPLC

RP-HPLC offers several advantages that make it one of the most preferred analytical techniques in pharmaceutical industries. The method provides high sensitivity, excellent separation efficiency, rapid analysis, reproducibility, and accurate quantification of impurities and degradation products.

The technique is suitable for the analysis of complex pharmaceutical mixtures and can separate structurally similar compounds with high precision. RP-HPLC methods can also be easily optimized by adjusting mobile phase composition, pH, flow rate, and column type.

Another major advantage of RP-HPLC is its compatibility with advanced detectors such as PDA and mass spectrometry, which improves impurity identification and characterization. Because of these advantages, RP-HPLC has become an indispensable analytical tool for impurity profiling, stability studies, quality control, and pharmaceutical research.

Table 9. Major Components of RP-HPLC Instrumentation

Component	Function
Pump	Delivers mobile phase at constant flow rate
Injector	Introduces sample into chromatographic system
Column	Performs separation of analytes
Detector	Detects separated compounds
Data system	Records and processes chromatographic data

RP-HPLC Method Development for Impurity Profiling

RP-HPLC method development is one of the most critical stages in pharmaceutical impurity profiling because the accuracy and reliability of impurity analysis depend largely on chromatographic conditions. A properly developed RP-HPLC method should provide efficient separation of active pharmaceutical ingredients, degradation products, process-related impurities, and excipient-related impurities within a reasonable analysis time. The developed method must be selective, sensitive, reproducible, robust, and stability indicating in nature.

Method development for impurity profiling involves systematic optimization of chromatographic parameters such as column selection, mobile phase composition, buffer system, pH, flow rate, wavelength, sample preparation procedure, and gradient program. Proper optimization of these parameters helps achieve good peak shape, high resolution, shorter retention time, and accurate quantification of impurities.

Gradient elution using orthophosphoric acid (OPA) and acetonitrile has been effectively optimized for efficient separation of pharmaceutical impurities in RP-HPLC analysis.

Selection of Column

Selection of a suitable chromatographic column is one of the most important factors in RP-HPLC method development because the stationary phase directly influences retention behavior, peak symmetry, and resolution of analytes. The choice of column depends on the physicochemical properties of the drug substance and related impurities.

C18 columns are the most commonly used columns in pharmaceutical impurity profiling because they provide strong hydrophobic interactions and broad applicability for both polar and nonpolar compounds. These columns offer excellent separation efficiency, reproducibility, and peak resolution.

In certain cases, C8 or phenyl columns may be selected to improve selectivity or reduce retention time for highly hydrophobic compounds. Column dimensions, particle size, and pore size also affect chromatographic performance. Smaller particle size columns generally provide higher efficiency and improved peak separation.

During method development, several columns are often screened to identify the stationary phase capable of producing optimum impurity separation with acceptable system suitability parameters.

Mobile Phase Optimization

Mobile phase optimization is essential for achieving suitable retention time, peak symmetry, and impurity resolution in RP-HPLC analysis. The mobile phase usually consists of an aqueous phase combined with an organic solvent such as acetonitrile or methanol.

The selection of mobile phase composition depends on:

- Solubility of analytes
- Polarity of impurities
- Column chemistry
- Detector compatibility

Acetonitrile is widely preferred because it provides lower viscosity, better peak shape, and shorter retention time compared to methanol. However, methanol may improve selectivity for certain compounds.

Optimization of organic solvent concentration significantly influences analyte retention and chromatographic separation. Proper mobile phase selection helps minimize peak tailing and improves sensitivity in impurity profiling methods.

Buffer Selection

Buffers are commonly used in RP-HPLC methods to maintain consistent pH and improve chromatographic reproducibility. Buffer selection is particularly important for ionizable pharmaceutical compounds because pH fluctuations may affect analyte ionization and retention behavior.

Commonly used buffers in pharmaceutical analysis include:

- Phosphate buffer
- Acetate buffer
- Formate buffer
- Orthophosphoric acid buffer

Phosphate buffers are widely used because they provide good buffering capacity and compatibility with RP-HPLC systems. Orthophosphoric acid is frequently employed to adjust acidic pH conditions and improve peak symmetry.

The concentration and ionic strength of the buffer should be optimized carefully because excessive buffer concentration may increase back pressure and reduce column life.

pH Optimization

pH optimization plays a major role in controlling analyte ionization, retention time, and peak shape in RP-HPLC analysis. The pH of the mobile phase affects the degree of ionization of acidic and basic compounds, thereby influencing their interaction with the stationary phase.

Improper pH conditions may result in:

- Peak tailing
- Poor resolution
- Broad peaks
- Variable retention time

Generally, acidic pH conditions are preferred in pharmaceutical impurity profiling because they suppress ionization of basic analytes and improve peak symmetry. Orthophosphoric acid is commonly used for maintaining acidic pH in RP-HPLC methods.

During method development, different pH conditions are evaluated to achieve optimum

separation between the drug substance and related impurities.

Flow Rate Optimization

Flow rate optimization is important for balancing chromatographic efficiency, analysis time, and system pressure. The flow rate controls the movement of the mobile phase through the chromatographic column and directly affects retention time and peak resolution.

Lower flow rates generally improve resolution but increase analysis time, whereas higher flow rates shorten run time but may reduce separation efficiency. Therefore, an optimum flow rate must be selected to achieve acceptable chromatographic performance within a reasonable analysis time.

In most pharmaceutical RP-HPLC methods, flow rates between 0.8 and 1.5 mL/min are commonly used depending on column dimensions and analytical requirements.

Wavelength Selection

Selection of a suitable detection wavelength is necessary for obtaining maximum sensitivity and accurate quantification of impurities. The selected wavelength should provide adequate absorbance for both the active pharmaceutical ingredient and related impurities.

Wavelength selection is generally performed using UV spectral scanning with a photodiode array detector. The wavelength corresponding to maximum absorbance (λ_{max}) is usually selected for analysis.

Appropriate wavelength selection helps:

- Improve sensitivity
- Enhance signal-to-noise ratio
- Minimize interference
- Increase method specificity

In impurity profiling studies, wavelengths between 210 and 280 nm are commonly used depending on the chromophoric nature of analytes.

Sample Preparation

Sample preparation is a critical step in RP-HPLC method development because improper sample handling may introduce additional impurities or affect analytical accuracy. The sample preparation procedure should ensure complete extraction of analytes and impurities without causing degradation.

Sample preparation generally involves:

- Dissolution
- Dilution
- Filtration
- Sonication
- Centrifugation

The choice of diluent depends on analyte solubility and mobile phase compatibility. Commonly used diluents include mixtures of water, methanol, and acetonitrile.

Proper sample preparation improves reproducibility, minimizes particulate

contamination, and ensures reliable chromatographic analysis.

Gradient Optimization

Gradient optimization is highly important in impurity profiling because pharmaceutical samples often contain compounds with varying polarity and retention characteristics. Gradient elution involves gradual variation of mobile phase composition during chromatographic analysis.

Gradient methods provide:

- Better separation of complex mixtures
- Improved impurity resolution
- Shorter run time
- Enhanced peak shape

The gradient program is optimized by adjusting:

- Initial mobile phase composition
- Gradient slope
- Organic solvent percentage
- Total run time

Gradient elution with orthophosphoric acid and acetonitrile has been effectively employed for simultaneous separation of pharmaceutical impurities with excellent resolution and shorter analysis time.

Resolution Improvement

Resolution is one of the most important chromatographic parameters in impurity profiling because impurities must be completely separated from the main drug peak for accurate quantification. Poor resolution may lead to overlapping peaks and inaccurate impurity estimation.

Resolution can be improved by optimizing:

- Mobile phase composition
- Gradient program
- pH
- Flow rate
- Column type
- Temperature

Column temperature optimization may additionally improve peak symmetry and reduce analysis time. Smaller particle size columns and advanced stationary phases may also enhance chromatographic efficiency.

The ultimate goal of RP-HPLC method development is to achieve baseline separation of all impurities with acceptable peak shape, reproducibility, and system suitability parameters.

Table 10. Important Parameters in RP-HPLC Method Development

Parameter	Purpose	Effect on Chromatography
Column selection	Separation of analytes	Resolution and retention
Mobile phase optimization	Peak separation	Peak shape and retention time
Buffer selection	pH stability	Reproducibility
pH optimization	Ionization control	Peak symmetry
Flow rate optimization	Control analysis time	Resolution and pressure
Wavelength selection	Detection sensitivity	Signal intensity
Sample preparation	Proper extraction	Analytical accuracy
Gradient optimization	Separation of complex mixtures	Impurity resolution

Forced Degradation Studies

Forced degradation studies are an important part of pharmaceutical impurity profiling and stability-indicating method development. These studies are performed to evaluate the intrinsic stability of drug substances and drug products under different stress conditions. Forced degradation helps identify degradation pathways, degradation products, and possible impurities formed during storage and handling. It also assists in developing robust and stability-indicating RP-HPLC methods capable of separating the active pharmaceutical ingredient from its degradation products.⁶²⁻⁶⁴

Forced degradation studies are generally performed under stress conditions such as acidic, alkaline, oxidative, thermal, photolytic, and hydrolytic environments. The information obtained from these studies is useful for stability testing, formulation development, packaging selection, and regulatory submissions.

Acid Degradation

Acid degradation studies are performed to evaluate the stability of pharmaceutical compounds under acidic conditions. In this study, the drug substance

is exposed to acidic reagents such as hydrochloric acid or sulfuric acid for a specific period under controlled temperature conditions.

Acid-sensitive drugs may undergo hydrolysis, rearrangement, or decomposition in acidic media, resulting in the formation of degradation products. Acid degradation studies help identify acid-labile functional groups and establish suitable formulation and storage conditions.

Alkali Degradation

Alkali degradation studies are conducted to determine the stability of pharmaceutical compounds under basic conditions. The drug substance is treated with alkaline reagents such as sodium hydroxide or potassium hydroxide to induce degradation.

Many pharmaceutical compounds containing ester or amide groups are highly susceptible to alkaline hydrolysis. Alkali degradation studies help identify degradation pathways and evaluate the stability of formulations in alkaline environments.

Oxidative Degradation

Oxidative degradation studies are performed to evaluate the susceptibility of drug substances to

oxidation. In this study, oxidizing agents such as hydrogen peroxide are commonly used to generate oxidative stress conditions.

Compounds containing phenolic, sulfur-containing, or unsaturated functional groups are more prone to oxidative degradation. Oxidation may lead to formation of toxic degradation products, discoloration, and potency loss. Oxidative degradation studies are therefore essential for developing stable pharmaceutical formulations.

Thermal Degradation

Thermal degradation studies are carried out to assess the stability of pharmaceutical products under elevated temperature conditions. The drug substance or formulation is exposed to high temperatures for a specified duration to accelerate degradation reactions.

Heat-sensitive compounds may undergo decomposition, oxidation, or physical changes under thermal stress. Thermal degradation studies provide valuable information regarding storage temperature, shelf life, and packaging requirements for pharmaceutical products.

Photolytic Degradation

Photolytic degradation studies evaluate the effect of ultraviolet (UV) light and visible light on pharmaceutical compounds. During this study, the drug substance is exposed to light under controlled conditions according to ICH photostability guidelines.

Photosensitive drugs may undergo oxidation, isomerization, or structural decomposition upon light exposure. Photolytic degradation studies help identify light-sensitive compounds and assist in selecting suitable light-resistant packaging materials.

Hydrolytic Degradation

Hydrolytic degradation studies are performed to examine the effect of water or moisture on pharmaceutical compounds. Hydrolysis commonly occurs in drugs containing ester, amide, lactam, or lactone functional groups.

Hydrolytic degradation may occur under acidic, neutral, or alkaline conditions depending on the nature of the compound. These studies help determine moisture sensitivity and establish appropriate storage and formulation conditions for pharmaceutical products.

Table 11. Types of Forced Degradation Studies

Degradation Study	Stress Condition Used	Commonly Observed Degradation
Acid degradation	Hydrochloric acid, sulfuric acid	Acid hydrolysis
Alkali degradation	Sodium hydroxide, potassium hydroxide	Alkaline hydrolysis
Oxidative degradation	Hydrogen peroxide	Oxidation products
Thermal degradation	Elevated temperature	Thermal decomposition
Photolytic degradation	UV and visible light	Photo degradation
Hydrolytic degradation	Water and moisture	Hydrolysis products

Applications of RP-HPLC in Pharmaceutical Impurity Profiling

RP-HPLC is one of the most versatile and widely applied analytical techniques in pharmaceutical impurity profiling. The technique provides excellent sensitivity, accuracy, reproducibility, and separation efficiency for the analysis of pharmaceutical compounds and impurities. RP-HPLC is extensively employed in pharmaceutical industries for quality control, stability studies, degradation analysis, residual solvent monitoring, and biological sample analysis. Its compatibility with advanced detection systems further enhances its application in impurity identification and quantification.

Because of its ability to separate structurally similar compounds and detect impurities at trace levels, RP-HPLC has become an indispensable analytical tool in modern pharmaceutical analysis.⁶⁵⁻⁷⁷

API Impurity Profiling

RP-HPLC is widely used for impurity profiling of active pharmaceutical ingredients (APIs). During API synthesis, several process-related impurities such as intermediates, by-products, starting materials, and residual reagents may remain associated with the final product. RP-HPLC

methods are developed to identify, separate, and quantify these impurities accurately.

The technique provides excellent resolution between the API and structurally related impurities, thereby ensuring compliance with regulatory impurity limits. RP-HPLC is routinely employed in quality control laboratories for batch release testing and purity assessment of pharmaceutical substances.

Stability Studies

RP-HPLC plays an important role in pharmaceutical stability studies by monitoring the formation of degradation products under different storage conditions. Stability-indicating RP-HPLC methods are specifically designed to separate degradation products from the active pharmaceutical ingredient without interference.

The technique is used during accelerated and long-term stability studies to evaluate the effect of temperature, humidity, light, and storage conditions on pharmaceutical products. Stability studies help determine shelf life, storage conditions, and packaging requirements of drug formulations.

Degradation Product Analysis

Degradation product analysis is one of the major applications of RP-HPLC in pharmaceutical impurity profiling. Pharmaceutical compounds may

undergo degradation due to hydrolysis, oxidation, photolysis, or thermal stress, leading to formation of degradation impurities. RP-HPLC methods are capable of separating degradation products from the parent drug compound with high sensitivity and accuracy. The technique is extensively used in forced degradation studies to identify degradation pathways and establish stability-indicating analytical methods.

Residual Solvent Analysis

Residual solvents are volatile organic chemicals used during pharmaceutical manufacturing and purification processes. Incomplete removal of these solvents may result in toxicity and product instability. RP-HPLC is used for the analysis of certain residual solvents, especially when combined with specialized detectors or derivatization techniques. The method provides reliable quantification of residual solvents present in

pharmaceutical products and helps ensure compliance with ICH Q3C guidelines. Residual solvent analysis is essential for maintaining pharmaceutical product safety and quality.

Genotoxic Impurity Determination

Genotoxic impurities are highly toxic compounds capable of causing genetic mutations and carcinogenic effects even at trace levels. Detection and quantification of these impurities require highly sensitive and selective analytical methods. RP-HPLC coupled with advanced detectors such as mass spectrometry (LC-MS) is extensively used for genotoxic impurity determination. The technique provides excellent sensitivity for trace-level impurity analysis and supports compliance with ICH M7 regulatory guidelines. Genotoxic impurity analysis is particularly important in modern pharmaceutical development because of increasing regulatory focus on patient safety.⁶⁶

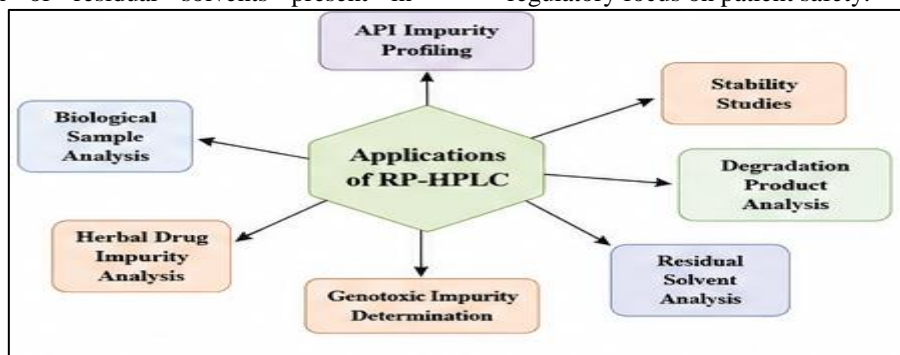


Figure 3. Applications of RP-HPLC in Impurity Profiling

Herbal Drug Impurity Analysis

RP-HPLC is also widely applied in the analysis of herbal medicines and phytopharmaceuticals. Herbal formulations may contain impurities such as pesticides, degradation products, heavy metals, microbial toxins, and adulterants. RP-HPLC methods are employed for standardization, quality control, and impurity profiling of herbal products. The technique allows simultaneous analysis of multiple phytoconstituents and impurities in complex herbal matrices.⁶⁷ The use of RP-HPLC in herbal drug analysis improves the safety, efficacy, and consistency of herbal formulations.

Biological Sample Analysis

RP-HPLC is extensively used for impurity and drug analysis in biological samples such as plasma, serum, urine, and tissues. Biological sample analysis is important in pharmacokinetic studies, bioavailability studies, toxicological investigations, and therapeutic drug monitoring. The technique provides high sensitivity and selectivity for detecting drugs and metabolites in complex biological matrices. RP-HPLC coupled with mass spectrometry is commonly used for trace-level quantification of pharmaceutical compounds and impurities in biological samples. Biological sample analysis using RP-HPLC supports clinical research and pharmaceutical development.⁶⁸⁻⁷⁷

Table 12. Applications of RP-HPLC in Pharmaceutical Impurity Profiling

Sr. No.	Application Area	Purpose of RP-HPLC Analysis
1	API impurity profiling	Identification and quantification of process impurities
2	Stability studies	Monitoring degradation during storage
3	Degradation product analysis	Identification of degradation pathways
4	Residual solvent analysis	Detection of residual organic solvents
5	Genotoxic impurity determination	Trace-level analysis of mutagenic impurities
6	Herbal drug impurity analysis	Standardization and impurity monitoring in herbal products
7	Biological sample analysis	Drug and metabolite estimation in biological fluids

CONCLUSION:

Impurity profiling has become an integral part of pharmaceutical analysis because impurities can significantly affect the safety, efficacy, stability, and therapeutic performance of pharmaceutical products. The identification, quantification, and control of impurities are essential for ensuring regulatory compliance and maintaining high-quality standards in pharmaceutical industries. Regulatory authorities such as ICH, USFDA, USP, BP, and IP have established stringent guidelines for impurity evaluation, stability studies, and analytical method validation to ensure patient safety and product consistency. Among the various analytical techniques available, RP-HPLC has emerged as one of the most efficient, reliable, and widely accepted methods for pharmaceutical impurity profiling. The technique offers excellent resolution, high sensitivity, reproducibility, rapid analysis, and compatibility with multiple detection systems including UV, PDA, fluorescence, and mass spectrometry. RP-HPLC is extensively used for the analysis of process-related impurities, degradation products, residual solvents, genotoxic impurities, and formulation-related impurities in pharmaceutical substances and dosage forms. The review highlights the importance of systematic RP-HPLC method development involving optimization of chromatographic parameters such as column selection, mobile phase composition, buffer system, pH, flow rate, wavelength, and gradient conditions. Forced degradation studies and stability-indicating methods further enhance the reliability of impurity analysis and provide valuable information regarding degradation pathways and product stability. In conclusion, RP-HPLC continues to play a vital role in pharmaceutical quality assurance, regulatory compliance, stability testing, and impurity assessment. Continuous advancements in chromatographic instrumentation, stationary phase technology, and hyphenated analytical techniques are expected to further improve the efficiency and sensitivity of impurity profiling methods in the future.

ACKNOWLEDGMENT:

The authors are sincerely grateful to the Dnyanganga Education Society, Mandesh Institute of Pharmaceutical Science and Research Center for providing the necessary facilities, academic support, encouragement, and research environment required for the successful completion of this review work. The authors also express their appreciation to the faculty members and colleagues for their valuable guidance and support throughout the preparation of this manuscript.

CONFLICT OF INTEREST:

The authors declare that there is no conflict of interest regarding the publication of this review article.

REFERENCES:

1. ICH Harmonised Tripartite Guideline. Q3A(R2): Impurities in new drug substances. International Council for Harmonisation; 2006.
2. ICH Harmonised Tripartite Guideline. Q3B(R2): Impurities in new drug products. International Council for Harmonisation; 2006.
3. ICH Harmonised Tripartite Guideline. Q2(R1): Validation of analytical procedures: text and methodology. International Council for Harmonisation; 2005.
4. ICH Harmonised Guideline. M7(R1): Assessment and control of DNA reactive (mutagenic) impurities in pharmaceuticals. International Council for Harmonisation; 2017.
5. Bakshi M, Singh S. Development of validated stability-indicating assay methods—critical review. *J Pharm Biomed Anal.* 2002;28(6):1011-40.
6. Blessy M, Patel RD, Prajapati PN, Agrawal YK. Development of forced degradation and stability indicating studies of drugs—A review. *J Pharm Anal.* 2014;4(3):159-65.
7. Gorog S. The importance and the challenges of impurity profiling in modern pharmaceutical analysis. *TrAC Trends Anal Chem.* 2006;25(8):755-7.
8. Gorog S. Identification and determination of impurities in drugs. Amsterdam: Elsevier; 2000.
9. Singh S, Bakshi M. Guidance on conduct of stress tests to determine inherent stability of drugs. *Pharm Technol Online.* 2000;24(2):1-14.
10. Swartz ME, Krull IS. Analytical method development and validation. New York: Marcel Dekker; 2012.
11. Snyder LR, Kirkland JJ, Dolan JW. Introduction to modern liquid chromatography. 3rd ed. New York: Wiley; 2010.
12. Dong MW. Modern HPLC for practicing scientists. Hoboken: Wiley-Interscience; 2006.
13. Kazakevich Y, Lobrutto R. HPLC for pharmaceutical scientists. Hoboken: Wiley-Interscience; 2007.
14. Ahuja S, Rasmussen H. HPLC method development for pharmaceuticals. Amsterdam: Elsevier Academic Press; 2007.
15. Ermer J, Miller JHM. Method validation in pharmaceutical analysis. Weinheim: Wiley-VCH; 2005.
16. Rao RN, Nagaraju V. An overview of the recent trends in development of HPLC methods for determination of impurities in drugs. *J Pharm Biomed Anal.* 2003;33(3):335-77.

17. Lindholm J. Development and validation of HPLC methods for analytical and preparative purposes. *Acta Univ Ups.* 2004;13:1-43.
18. Meyer VR. Practical high-performance liquid chromatography. 5th ed. Chichester: Wiley; 2010.
19. Snyder LR, Dolan JW. High-performance gradient elution: the practical application of the linear-solvent-strength model. Hoboken: Wiley-Interscience; 2007.
20. Watson DG. Pharmaceutical analysis: a textbook for pharmacy students and pharmaceutical chemists. 4th ed. London: Churchill Livingstone; 2020.
21. Carstensen JT, Rhodes CT. Drug stability: principles and practices. 3rd ed. New York: Marcel Dekker; 2000.
22. Gorog S. Identification and determination of impurities in drugs. Amsterdam: Elsevier Science Publishing Company; 2000. p.154.
23. International Conference on Harmonisation. ICH Topic Q3A: impurities testing guideline: impurities in new drug substances. European Agency for the Evaluation of Medicinal Products; 2006. p.105-13.
24. Farmer S, Anderson P, Burns P, Velagaleti R. Forced degradation of ibuprofen in bulk drugs and tablets. *Pharm Technol.* 2002;142-48.
25. Bhat P, Velingkar VS. Synthesis and characterization of degradation products in diclofenac sodium and clotrimazole. *Indian Drugs.* 2004;40(7):396-400.
26. Volk KJ, Hill SE, Kerns EH, Lee MS. Profiling degradants of paclitaxel using liquid chromatography-mass spectrometry and liquid chromatography-tandem mass spectrometry substructural techniques. *J Chromatogr B.* 1997;696(1):25-37.
27. Riley TN. Steric aspects of drug action. *Pharmacist.* 1998;23(3):40-51.
28. Skoog DA, Holler FJ, Crouch SR. Principles of instrumental analysis. Boston: Cengage Learning; 2017. p.142-57.
29. Shukla R, Singh K, Upadhyay S. A comprehensive review on high-performance liquid chromatography (HPLC). 2023;27(1):312-24.
30. Dongare MVS, Kohale DNB, Rathod MSB. A review of chromatography: principle, classification, application. *Int J Humanit Soc Sci Manag.* 2023;3(2):367-73.
31. Food and Drug Administration. Consumer media release. 1998 May 6;1-8.
32. Roy J, Mahmud M, Sobhan A, Aktheruzzaman M, Al-Faoouque M, Ali E. Marketed vitamin B-complex injectables: stability and mutual interaction. *Drug Dev Ind Pharm.* 1994;20(13):1344-51.
33. Baertschi SW, Alsante KM, Reed RA. Pharmaceutical stress testing: predicting drug degradation. 2nd ed. New York: Informa Healthcare; 2011.
34. United States Pharmacopeia 43–National Formulary 38. Rockville: United States Pharmacopeial Convention; 2020.
35. British Pharmacopoeia Commission. British Pharmacopoeia. London: The Stationery Office; 2021.
36. Indian Pharmacopoeia Commission. Indian Pharmacopoeia. Ghaziabad: IPC; 2022.
37. Snyder LR, Kirkland JJ, Glajch JL. Practical HPLC method development. 2nd ed. New York: Wiley; 1997.
38. Ngwa G. Forced degradation studies as an integral part of HPLC stability-indicating method development. *Drug Deliv Technol.* 2010;10(5):56-9.
39. Kromidas S. HPLC made to measure: a practical handbook for optimization. Weinheim: Wiley-VCH; 2006.
40. McPolin O. An introduction to HPLC for pharmaceutical analysis. Mourn Training Services; 2009.
41. Sharma BK. Instrumental methods of chemical analysis. 24th ed. Meerut: Goel Publishing House; 2005.
42. Sharma YR. Elementary organic spectroscopy: principles and chemical applications. New Delhi: S Chand Publishing; 2013.
43. Willard HH, Merritt LL, Dean JA, Settle FA. Instrumental methods of analysis. 7th ed. New Delhi: CBS Publishers; 2004.
44. Sethi PD. High performance liquid chromatography: quantitative analysis of pharmaceutical formulations. New Delhi: CBS Publishers; 2001.
45. Sethi PD. HPLC quantitative analysis of pharmaceutical formulations. 1st ed. New Delhi: CBS Publishers; 1996.
46. Ahuja S. Impurities evaluation of pharmaceuticals. New York: Marcel Dekker; 1998.
47. Careri M, Mangia A, Musci M. Development and validation of RP-HPLC methods for pharmaceutical analysis. *J Chromatogr A.* 2001;936(1-2):77-89.
48. Niessen WMA. Liquid chromatography-mass spectrometry. 3rd ed. Boca Raton: CRC Press; 2006.
49. Dong MW. HPLC columns: theory, technology, and practice. New Jersey: Wiley; 2013.
50. Stavchansky S. Pharmaceutical validation and process controls in drug development. New York: Informa Healthcare; 2008.
51. Sharma MC, Sharma S. Stability indicating RP-HPLC methods for pharmaceutical analysis: a review. *Int J Pharm Sci Res.* 2012;3(11):4051-60.

52. Kale UN, Naikwade NS. RP-HPLC method development and validation in pharmaceutical analysis. *Int J PharmTech Res.* 2010;2(1):341-52.
53. Patel RB, Patel MR, Bhatt KK, Patel BG. Development and validation of RP-HPLC methods in pharmaceutical analysis. *J Young Pharm.* 2009;1(3):259-65.
54. Rao BM, Ravi TK. Recent trends in impurity profiling of pharmaceuticals. *Pharm Rev.* 2008;6(2):45-52.
55. Ramachandran S, Singh SK, Larsson DGJ. Environmental and toxicological significance of pharmaceutical impurities. *Sci Total Environ.* 2019;657:1439-53.
56. Guideline for elemental impurities Q3D. International Council for Harmonisation; 2014.
57. Kaza M, Karra VK. Stability indicating RP-HPLC methods for impurity profiling. *Int J Pharm Pharm Sci.* 2013;5(3):24-31.
58. Jain D, Basniwal PK. Forced degradation and impurity profiling: recent trends in pharmaceutical analysis. *Int J Pharm Sci Drug Res.* 2013;5(3):95-102.
59. Chatwal GR, Anand SK. Instrumental methods of chemical analysis. 5th ed. Mumbai: Himalaya Publishing House; 2007.
60. Sharma PP. How to practice GMPs. 4th ed. New Delhi: Vandana Publications; 2010.
61. Meyer VR. Pitfalls and errors of HPLC in pictures. Weinheim: Wiley-VCH; 2006.
62. Nagpal S, Upadhyay A, Bhardwaj TR, Thakkar A. A review on need and importance of impurity profiling. *ISFAL.* 2011;62-70.
63. Palve R, Gaikwad A, Mandale K, Pawar R. A review of impurity profile in pharmaceutical substances. 2018;201-205.
64. Venkatesan P, Valliappan K. Impurity profiling: theory and practice. 2014;254-269.
65. Bari SB, Kadam BR, Jaiswal YS, Shirkhedkar AA. Impurity profile: significance in active pharmaceutical ingredient. 2007;204-208.
66. Ayre A, Varpe D, Nayak R, Vasa N. Impurity profiling of pharmaceuticals. *Adv Res Pharm Biol.* 2011;1(2):76-90.
67. Gupta R, Jain S, Gupta A. A review on the impurity profiling in pharmaceuticals. 2014;301-310.
68. United Nations Office on Drugs and Crime. Drug characterization of impurity: manual for use by national law enforcement authorities and drug testing laboratories. New York: United Nations; 2001. p. 378-392.
69. Gorog S, Babjak M, Balogh G. Drug impurity profiling strategies. *Talanta.* 1997;44:1517-26.
70. Ayre A, Varpe D, Nayak R, Vasa N. Impurity profiling of pharmaceuticals. *Adv Res Pharm Biol.* 2011;1(2):76-90.
71. International Conference on Harmonisation. Specifications: test procedures and acceptance criteria for new drug substances and new drug products: chemical substances Q6A. 1999;65(146):67488.
72. Ahuja S. Impurities evaluation of pharmaceuticals. New York: Marcel Dekker; 1998. p.130-42.
73. Conner KA, Amidon GL, Stella VJ. Chemical stability of pharmaceuticals: a handbook for pharmacists. New York: John Wiley & Sons; 1986. p.458-60.
74. Dongare MVS, Kohale DNB, Rathod MSB. A review of chromatography: principle, classification, application. *Int J Humanit Soc Sci Manag.* 2023;3(2):367-73.
75. Aydođan C. Recent advances and applications in LC-HRMS for food and plant natural products: a critical review. *Anal Bioanal Chem.* 2020;412(9):1973-91.
76. Shah SR, Patel MA, Naik MV, Pradhan PK, Upadhyay UM. Impurity profiling in pharmaceutical analysis. 2012;3503-17.
77. Gupta R, Jain S, Gupta A. A review on the impurity profile of pharmaceuticals. *Int J Drug Formul Res.* 2012;312-22.