



SB-1171

Fourth Year B. Pharm. Examination

March/April - 2011

PH-401 : Pharmaceutics - V

(Biopharmaceutics, Pharmacokinetic &
Dosage Form Design)

Time : 3 Hours]

[Total Marks : 70

Instructions :

(1)

नीचे दर्शाविए निशानीवाणी विगतो उत्तरवडी पर अवश्य वजवी. Fillup strictly the details of signs on your answer book.	Seat No. :
Name of the Examination :	<input type="text"/>
<input type="text" value="Fourth Year B. Pharm."/>	<input type="text"/>
Name of the Subject :	<input type="text"/>
<input type="text" value="Pharmaceutics - 5"/>	<input type="text"/>
Subject Code No. : <input type="text" value="1"/> <input type="text" value="1"/> <input type="text" value="7"/> <input type="text" value="1"/>	<input type="text" value="Student's Signature"/>
Section No. (1, 2,.....) : <input type="text" value="1&2"/>	

- (2) There are two sections each of 35 marks.
- (3) Each section having three questions.
- (4) Answer and submit both the sections separately.

SECTION - I

- 1 Attempt any **five** from the following : 10
- (a) Write the characteristic of passive diffusion.
 - (b) Why is the placental barrier not effective as BBB ?
 - (c) Why HSA considered a versatile protein for drug distribution ?
 - (d) Phase II reactions are called as true detoxification reaction. Explain.
 - (e) What is sink condition and how is it maintained and why it is needed ?
 - (f) List the various pharmaceutical and pharmacokinetic application of prodrug.
 - (g) What factors determine the pulmonary excretion of drug ?

2 Attempt any **four** from the following :

16

- (a) Explain BBB (Blood brain barrier)
- (b) Discuss drug metabolizing enzyme.
- (c) Following data is obtained for 4 formulation of a drug in patients of average weight 50 kg.

Drug Product	Dose (mg/kg)	AUC (mcg.hr/l)
I.V. solution	1.2	450
Oral solution	4.0	822
Oral capsule	4.0	736
Oral S.R tablet	8.0	1040

- (i) What is the absolute bioavailability from capsule and S.R. tablet ?
 - (ii) What is the relative bioavailability of capsule and S.R. tablet against oral solution ?
 - (iii) Which solid formulation shows better bioavailability?
 - (iv) Are the two solid formulation shows bioequivalent ?
- (d) A new antibiotic drug was given in a single intravenous bolus of 4 mg/kg to five healthy male adults ranging in age from 23 to 38 years (average weight 75 kg). The pharmacokinetics of the plasma drug concentration-time curve for this drug fits a one-compartment model. The equation of the curve that best fits the data is

$$C_p = 78 e^{-0.46t}$$

Determine the following (Assuming units of μ g/ml for C_p and hr for t)

- (i) What is the $t_{1/2}$?
 - (ii) What is the V_D ?
 - (iii) What is the plasma level of the drug after 4 hours ?
 - (iv) How much drug is left in the body after 4 hours ?
- (e) Explain cross over study and Balance incomplete block design.
- (f) What are the two methods of calculating K_E from urinary excretion data ? Compare their merits and demerits.

- 3** Attempt any **three** from the following : **9**
- (a) Define dose ratio. Why is it always smaller for extra vascularly administered drug in comparison to intravenously administered drug ?
 - (b) Discuss diffusion controlled release system.
 - (c) Define preformulation and write about solubility studies.
 - (d) Write the limitation and significance of P^H partition hypothesis.
 - (e) Estimate the creatinine clearance of a 30 year old, 70 kg man with serum creatinine value 2.0 mg%. What is renal function value of such a patient ?

SECTION - II

- 4** Attempt any eleven from the following : **11**
- (a) Define extraction ratio.
 - (b) Enlist all official apparatus of dissolution.
 - (c) Why buffered tablet are more soluble than salt form of aspirin ?
 - (d) Name the three approaches by which a polar drug can be targeted to brain.
 - (e) Define intrinsic solubility.
 - (f) Define fluctuation and accumulation index.
 - (g) Delayed intestinal transit time is some time desirable. Why ?
 - (h) Define prospective validation.
 - (i) What is stress testing ?
 - (j) Comment - Micronization of hydrophobic drug is not advisable.
 - (k) Define MRT.
 - (l) Why are reservoir devices susceptible to dose dumping ?
 - (m) What is dose dependent kinetics and write the name of tests by which it can detect ?
 - (n) Comment - Can a drug have two or more than V_d ?
 - (o) Define IVIVC.

5 Attempt any **three** from the following : 12

- (a) Write the name of non renal methods of drug excretions and discuss in detail biliary excretion.
- (b) Discuss in detail process variable of tables.
- (c) Write in brief the effects of urine P^H, drug PKa and lipid solubility on re-absorption of drug.
- (d) Discuss BCS (Biopharmaceutical Classification System).
- (e) How a dosage regimen will design. Explain every step in detail.

6 Attempt any two from the following : 12

- (a) Calculate the absorption rate constant using wagner-nelson method of following given data. Ke = .086 hr⁻¹.

Time (hr)	0	1	2	3	5	7	9	12	18	24	36	48
Drug Concentration (μ g/ml)	0	1.88	3.05	3.74	4.21	4.08	3.70	3.02	1.86	1.12	0.40	0.14

- (b) Explain all methods to increase bioavailability in detail.
- (c) Atenolol is to be administered orally to a 50 kg patient suffering from hypertension. The typical parameter of the drug on population basis are :

F	V _d	CL _T	Therapeutics range
0.4	1.23 l/kg	118.4 ml/min	0.2 - 1.3 mcg/ml

Design a dosage regimen to attain and maintain the plasma concentration within the therapeutics range. Assume rapid absorption.