



# Sensitive determination of anticancer drug imatinib in spiked human urine samples by differential pulse voltammetry on anodically pretreated boron-doped diamond electrode

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## ABSTRACT

In the present work, the electrochemical oxidation of a new generation of anticancer drug, imatinib (*Ima*), using differential pulse voltammetry (DPV) on anodically pretreated boron doped diamond electrode (BDDE) has been reported. The results of a study showed that *Ima* provided well-shaped oxidation peak at positive potential of around +1.0 V (vs. Ag/AgCl/KCl) in the Britton–Robinson (B–R) buffer at pH 2.0. The experimental conditions, i.e. pH, a modulation amplitude, a modulation time, a step potential, and a scan rate, were optimized. A simple, rapid, selective and sensitive DPV procedure for the determination of *Ima* was performed in the concentration range of  $3.0 \times 10^{-8}$ – $2.5 \times 10^{-7}$  mol L<sup>-1</sup> with the limit of detection (LOD) and the limit of quantification (LOQ) of  $6.3 \times 10^{-9}$  mol L<sup>-1</sup> and  $2.1 \times 10^{-8}$  mol L<sup>-1</sup>, respectively. The proposed methodology with using an anodic signal of imatinib at BDDE shown comparable detection limit as for hanging mercury drop electrode in the determination of this anticancer drug. A biological significance of the developed DPV procedure was demonstrated by a quantitative analysis of the spiked human urine samples with satisfactory recoveries (from 102.2% to 105.5%). Additionally, the influence of some interfering compounds and ions (*Int*) was also evaluated. The cyclic voltammetry (CV) was used for the investigation of the electrooxidation mechanism of *Ima*. The developed approach could be beneficial in analysis of imatinib in biological samples using BDDE as up-to-date electrochemical sensor and could represent non-toxic analytical alternative to HMDE.

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## 1. Introduction

Cancer is considered to be one of the leading causes of morbidity and mortality worldwide [1]. It is a disease which involves uncontrolled cellular multiplication and spread of abnormal cells throughout the body. The most commonly used in anticancer drug therapy are cytostatic drugs [2], which act to inhibit the growth of cell lines or directly kill cells, but the effect is relatively unselective, i.e. they act on both healthy and cancerous cells [3]. Many of them have been classified as carcinogenic, teratogenic and mutagenic. The widespread use of cytostatic drugs invoke concerns about their occupational exposure, and moreover, toxicological risks to the environment [4].

One of the representative of cytostatics is a first-generation drug, imatinib (*Ima*, Fig. 1.), which is the first protein kinase inhibitor approved for clinical applications, and it is a seminal drug used in targeted therapy [5]. *Ima* is applied in the treatment of chronic myelogenous leukemia (CML), and it is active against a number of related tyrosine kinases, such as ABL, BCR-ABL, KIT, PFGFR, and TEL [6]. In this way, *Ima* blocks

the abnormal proteins, and simultaneously removes the proliferative advantage that it provides to cancer cells [7]. Under therapy with *Ima*, the bulk of patients achieve complete hematologic remission, and 75% of patients attain cytogenetic remission [7]. It is also worth noting that today, after 15 years of its launching to clinical practice, *Ima* is still the first-line treatment for CML, especially active against a BCR-ABL tyrosine kinases [8]. Its tremendous success is based on high efficacy and progression-free survival, relatively low toxicity, as well as a convenient dosing schedule [8]. However, although some patients treated with *Ima* may experience prolonged disease control, 20–25% of them will eventually develop *Ima* resistance [9].

Based on the available literature data, there are several studies on the analytical determinations of *Ima* in biological fluids or pharmaceuticals [10–21]. So far, the most commonly used technique for the *Ima* determination has been chromatography, i.e. liquid chromatography-electrospray-tandem mass spectrometry (LC-ESI-MS/MS) [10,11], liquid chromatography-tandem mass spectrometry (LC-MS/MS) [12], high-performance liquid chromatography with UV detection (HPLC-UV) [13,14], HPLC with mass detection (HPLC-MS) [15,16], and ultra high-performance liquid chromatography tandem mass spectrometry (UHPLC-MS) [17]. Additionally, electrophoretic methods, i.e. capillary zone electrophoresis (CZE) [18], and nonaqueous capillary

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