



ANTI-UROLITHIATIC HERBAL FORMULATION: DEVELOPMENT, STANDARDISATION AND EVALUATION

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Article History

Volume 6, Issue 12, 2024

Received: 02 Jun 2024

Accepted: 25 Jun 2024

doi:

10.48047/AFJBS.6.12.2024.3536-3553

Abstract

Urolithiasis, also known as kidney stones, is a medical condition affecting around 10% of the global population and is more common in men. Treatment strategies include lifestyle and dietary changes to lower risk factors and the possibility of recurrence. Bryophyllumpinnatum, also known as the "miracle leaf" or "life plant," is rich in bioactive substances such as flavonoids, tannins, glycosides, steroids, alkaloids, triterpenes, and phenolic compounds. These compounds contribute to the plant's anti-inflammatory, antibacterial, antioxidant, analgesic, and possibly anti-cancer properties. Conventional therapies for urolithiasis often have drawbacks, such as invasiveness, inadequate therapy, and restricted accessibility. This research focuses on developing an anti-urolithiatic herbal formulation using medicinal plants and aiming to produce a strong, standardized formulation that may improve urolithiasis therapy and improve patient outcomes. The study studied the pharmacological effects of herbal medicine extracts from Bryophyllumpinnatum and *Bergenia ciliata*, using various sources and instruments. The research established standard calibration curves for Bryophyllumpinnatum and *Bergenia ciliata* extracts in 6.8 pH phosphate buffer, conducted anti-urolithiatic activity tests, and established the optimum dissolving efficiency of calcium oxalate crystals in various groups. The herbal capsules were produced and tested for color, shape, size, acceptability criteria, disintegration time, and stability. Over 60 days, the capsules retained their physical qualities and dissolving characteristics, indicating their potential for application in urolithiasis treatment. Overall, these findings demonstrate the viability of employing Bryophyllumpinnatum and *Bergenia ciliata* extracts in pharmaceutical formulations targeted at treating urolithiasis efficiently.

Keywords: Urolithiasis, Bryophyllumpinnatum, *Bergenia ciliata*, Conventional therapies, herbal formulation.

Introduction

Urolithiasis, sometimes referred to as urinary stones or kidney stones, is a medical disorder characterised by the development of calculi inside the urinary system. Kidney stones, also known as renal calculi, may form in the kidneys, ureters, or bladder as a result of the crystallisation of solutes found in urine. Urolithiasis is a common condition that affects about

10% of the global population at some stage in their life [1]. It is more common in males than women. Urolithiasis happens when the levels of stone-forming chemicals such as calcium, oxalate, and uric acid go beyond their ability to dissolve, causing them to crystallise and form stones. Dehydration, eating habits, genetic susceptibility, and metabolic abnormalities are all variables that increase the likelihood of developing a certain condition. Urolithiasis may be detected using several imaging techniques such as ultrasonography, X-ray, computed tomography (CT), and intravenous pyelography (IVP) [2]. Additionally, urine analysis can be conducted to identify chemicals that contribute to the formation of stones. Urinary stones come in several kinds, such as calcium oxalate, calcium phosphate, uric acid, struvite, and cystine stones, each with unique causes. Treatment methods vary from conservative approaches including increased fluid intake and dietary adjustments to pharmacological interventions using medicines that modify urine composition. In instances of extreme severity, surgical procedures such as extracorporeal shock wave lithotripsy (ESWL), ureteroscopy, or percutaneous nephrolithotomy may be necessary. Preventive techniques prioritise modifications in lifestyle and food to diminish risk factors and the likelihood of recurrence [3].

Bryophyllumpinnatum (Lam) is known as the "wonder leaf" or "life plant", and belongs to the Crassulaceae family. The plant is commonly known as air plant and cathedral bells. Native to Madagascar, it is widely naturalized worldwide in tropical and subtropical climates. The plant is morphologically identified by its thick, fleshy and succulent leaves with scalloped edges, which are oppositely grouped and often have small plantlets at the edges. *Bryophyllumpinnatum* is rich in bioactive chemicals such as flavonoids such as quercetin and kaempferol, tannins, bufadienolides, glycosides such as bryophyllin A and bryophyllin B, steroids, alkaloids, triterpenes and phenolic compounds. These compounds contribute to the plant's various pharmacological actions [4].

Studies have revealed that it has strong anti-inflammatory properties, making it beneficial in treating arthritis. It displays antibacterial action against bacteria and fungi, which is useful for infections. The antioxidant qualities of the plant help neutralize free radicals, lowering oxidative stress. It also offers analgesic effects for pain reduction and possible anti-cancer properties, notably against leukemia and other malignant disorders [5,6]. Some researches have revealed that *Bryophyllumpinnatum* leaf helps decrease blood sugar levels, has anti-diabetic benefits, and protects the liver from toxins, demonstrating hepatoprotective qualities. Its wound healing capacity is enhanced by its antibacterial and anti-inflammatory actions, and it serves as a diuretic, assisting in the treatment of edema and hypertension. Traditionally, it is used for wound healing by placing crushed fresh leaves on wounds, cuts, and burns. It gives relief from respiratory disorders like asthma, cough and bronchitis, gastrointestinal ailments including dysentery, diarrhoea and stomach ulcers, decreases fever and helps eliminate kidney stones owing to its diuretic properties [7].

Bergenia ciliata, widely known as Hairy *Bergenia*, is a perennial plant famous for its medicinal properties in traditional medicine. Its leaves and rhizomes are rich in diverse bioactive components, including bergenin, catechin, and gallic acid, which contribute to its therapeutic benefits. Pharmacologically, *B. ciliata* has anti-inflammatory, antioxidant, antibacterial, and hepatoprotective activities. The plant is effective in treating kidney stones, lung disorders, and gastrointestinal difficulties. Its anti-inflammatory abilities are very essential in treating arthritis and wound healing. The many medicinal characteristics of *Bergenia ciliata* make it a significant plant in pharmacognosy and herbal medicine [8].

A DDS is a formulation or technology that delivers therapeutic chemicals in the body to accomplish a desired therapeutic effect. These systems are intended to optimize medication ADME, ensuring that the drug reaches the target place in the body at the appropriate time and in the proper concentration. Advanced DDS strive to enhance the effectiveness and safety of

therapies by managing the rate, timing, and site of drug release. This subject comprises a number of technologies, including sustained-release formulations, transdermal patches, nanoparticles, and tailored delivery mechanisms, altering the way pharmaceuticals are provided and improving patient outcomes [9].

Conventional techniques for treating urolithiasis, or kidney stones, frequently have substantial shortcomings that affect patient outcomes and healthcare efficiency. These treatments, such as open surgery and non-targeted lithotripsy, usually require substantial invasiveness, leading to extended recovery periods and increased risk of complications. Furthermore, they may not successfully target all stone kinds or sizes, leading in inadequate therapy and recurring stone development. Additionally, traditional therapies might be restricted by their accessibility, expense, and the demand for specific equipment and experience. These limitations underline the need for developments in less intrusive, more accurate, and cost-effective treatment techniques for urolithiasis [10].

The rising frequency of urolithiasis, or kidney stones, needs novel research into efficient therapies. Current techniques, including surgery and medication, typically come with considerable side effects and exorbitant costs, underlining the urgent need for better, more inexpensive alternatives [11]. The current study focuses on producing an anti-urolithiatic herbal formulation, exploiting the therapeutic potential of medicinal plants. This unique strategy attempts to harness the natural litholytic and diuretic qualities of selected herbs, delivering a comprehensive, side-effect-free therapy. The project stresses thorough scientific confirmation of these herbal components, seeking to build a powerful, standardized formulation that may transform urolithiasis care and enhance patient outcomes [13].

Method &Material

Chemical used:The Chemical and excipients used in our investigation were obtained from many trustworthy businesses. Lactose and microcrystalline cellulose were acquired from S. D. Fine Chemicals Ltd., a company located in Mumbai, India. Molychem provided the methanol. Tri's buffer was obtained from Central Drug House (P) Ltd., while talc was procured from S. D. Fine Chemicals Ltd. SRL Pvt. Ltd. supplied potassium permanganate. Both disodium hydrogen phosphate and potassium dihydrogen phosphate were obtained from Central Drug House (P) in New Delhi. In addition, hydrochloric acid (HCl) and sulphuric acid were acquired from Central Drug House (P) Ltd. in New Delhi, India.

Instrument used: Systronic provides the UV Spectrophotometer, while Wensar supplies the electronic balance. The digital pH metre is also from Systronic. Spruce Enterprise Equipment offers various instruments such as the warm plate with magnetic firebrand, disintegration apparatus, dissolution apparatus, water bath, and capsule filling machine. Mlabs supplies the desiccator, and Radical Scientific Equipment provides the incubator. The micropipette is supplied by Recorder & Medicare System, and the FTIR is from Agile.

Plant collection & Authentication: In December 2023, the foliage of *Bryophyllumpinnatum* and the rhizomes of *Bergenia ciliata* were gathered from the Dehradun region of Uttarakhand, India. The plants that were gathered were verified by the Forest Research Institute (FRI) in Dehradun.

Preparation of Extract: The plant extract was prepared using the soxhlet method, which involved drying the collected leaves of *Bryophyllumpinnatum* and rhizomes of *Bergenia ciliata* without direct sunrays. The dried leaves were then crushed into a well fine powder, which was stored in a closed container. The powdered material was weighed, prepared, and weighed into a thimble. The extraction was carried out in a 70:30 ratio, and the solvent was evaporated. The extract was then filtered and evaporated to dryness using a water bath. The solid extract was then stored in a desiccator for further use. The same procedure was repeated for the powdered plant material of *Bergenia ciliata* [13].

Pre-formulation studies:

Organoleptic properties: It was determined what the nature, colour, odour, and taste of both extracts were [14].

Solubility studies: The study aimed to determine the soluble nature of herbal medicine extracts in various solvents. 10 mg of the drug sample was liquified in 10 ml of solvents, and the mixture was maintained in an orbital shaker. After reaching equilibrium, the samples were centrifuged for 15 minutes at 3000 rpm, and the supernatant was filtered through Whitman filter paper. The filtrate had been dissolved in the proper solvent and diluted with pH 6.8 and measured using a UV-visible spectrophotometer [15].

Maximum Wavelength of *B. pinnatum* & *B. ciliata*: The purpose of the study was to find out how soluble herbal medicine extracts were in different types of solvents. An orbital shaker was used to keep the mixture mixed after 10 mg of the drug sample was dissolved in 10 ml of solvents. The samples were centrifuged at 3000 rpm for 15 minutes once they had reached equilibrium, and the supernatant was then filtered using Whitman filter paper. A UV-visible spectrophotometer was used to determine the concentration of the drug extracts after the filtrate had been dissolved in the proper solvent and diluted with pH 6.8 buffer [16].

Drug –Drug compatibility studies: Using IR spectroscopy, the drug substance's IR spectra was verified. Notable was the appearance of distinctive peaks connected to certain drug molecule structural features. Drug-drug interactions were investigated using Fourier transform infrared analysis (SHIMADZU). The scanning range for the samples was 400–4000 cm^2 [17].

Preparation of standard calibration curve:

Preparation of standard plot of Bryophyllum pinnatum in 6.8 pH phosphate buffer: In a 1000 ml volumetric flask was prepared by dissolving 28.80g of disodium hydrogen phosphate and 11.45g of potassium dihydrogen phosphate in water. 100mg of extract was weighed and placed in a flask with a 6.8 phosphate buffer solution, resulting in a concentration of 1000 $\mu\text{g/ml}$. The stock solution was diluted 10 times with 6.8 pH phosphate buffer solutions, resulting in final concentrations of 10, 20, 30, 40, and 50 $\mu\text{g/ml}$. The absorbances of the samples were measured at 286nm wavelength, and a graph was generated [18].

Preparation of standard plot of *Bergenia ciliata* in 6.8 pH phosphate buffer: The procedure requires producing a standard plot of *Bergenia ciliata* in 6.8 pH phosphate buffer. Dissolved disodium hydrogen phosphate and potassium dihydrogen phosphate in water to generate 1000 ml. Transfer 100mg of extract to a 100ml volumetric flask, add a 6.8 phosphate buffer solution, and dilute to reach a concentration of 1000 $\mu\text{g/ml}$ stock solution. Dilute further to get final concentrations of 10, 20, 30, 40, and 50 $\mu\text{g/ml}$. The absorbance of the samples was evaluated at 215 nm wavelength, and a graph was drawn to estimate concentration and absorbance [19].

***In –Vitro* Anti-urolithiatic Activity Test by Titrimetric Method:[20]**

Step 1 Stone collection: The kidney stones were acquired from the Synergy Hospital Dehradun, U.K.

Step 2: Preparation of semi-permeable membrane from farm eggs: The semi - permeable membrane of eggs resides in between the exterior calcified shell and the inner contents like albumin & yolk. Apex of eggs was pierced by a glass rod in order to suck out the full content. Empty eggs were rinsed carefully with distilled water and put in a beaker comprising 2 M HCl for an overnight, which induced completed calcification. Further, washed with distilled water and put it in ammonia solution for neutralization of acid traces in the wet state for a

while and rinsed it with distilled Water. Then membrane was kept in refrigerator at a pH of 7-7.4.

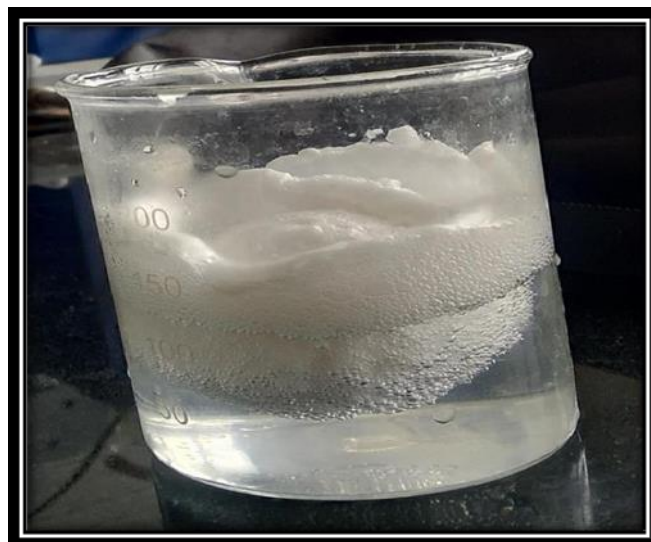


Figure 1 Separation of egg semi permeable membrane

Step 3: To check the best Calcium Oxalate crystal dissolution efficiency of each group:

The study aimed to determine the best dissolving efficiency of calcium oxalate crystals in different groups. The dissolving percentage of calcium oxalate was measured by taking 0.10 gm of calcium oxalate crystal and 100,200,300,400 mg of extract, packed together in an egg membrane. The first group was provided as a blank, the second group was a positive control with 0.10 gm of calcium oxalate and varying amounts of standard drug cystone, and the third and fourth groups included 0.10gm of calcium oxalate crystals and hydroalcoholic extracts. The conical flasks were stored in an incubator at 37°C for 4-5 days. The semi permeable membrane contents were collected and titrated with 0.9494 N KMnO₄ until a bright pink color end point was reached.

Antiuro lithiatic Activity Test by Titrimetry: The dissolving percentage of calcium oxalate was determined by taking varied ratio of both extracts i.e. 1:1, 1:2, 1:3, and 1:4 and 0.10 gm of stone, packed it together in semipermeable membrane of egg. This was allowed to suspend in a conical flask containing 100 ml of 0.1M Tri's buffer. The conical flasks of all groups were housed in an incubator warmed to 37°C for 4-5 days. The contents of semipermeable membranes from each group were removed into separate test tubes. 2 ml of 1N Sulphuric acid was added to each test tube and titrated with 0.9494 N KMnO₄ until a bright pink hue end point was attained[20].

Formulation of Herbal Capsule[21]

Selection of Excipients: Apart from the active ingredients, diluents (filler), binder, disintegrating agent, lubricant, and preservatives are required excipients for the manufacturing of capsules. The choice of excipients was done bearing in mind the current Food and Drugs Administration (FDA) restrictions.

Preparation of Granules: Dry granulation technique was used to make granules of the extracts: Calculated quantity of crude extract, Micro crystalline cellulose, were weighed and blended well. After drying this substance moved to screen no.6 to make homogeneous granules and lactose and talc were added.

Table 1 Formulation Batch F1 F2 and F3

Ingredients	F1(Mg)	F2(Mg)	F3(Mg)
<i>Bryophyllumpinnatm</i> extract	320	320	320
<i>BergeniaCiliata</i> extract	80	80	80

Microcrystalline Cellulose	50	50	50
Lactose	25	5	35
Talc	24	4	14
Sod.Methyl paraben	0.5	0.5	0.5
Sodiumbenzoate	0.5	0.5	0.5

Pre-filling parameters

Angle of Repose: Angle of repose was determined by using funnel method. The accurately weighed blend was taken in a funnel. The height of the funnel was repositioned such that its tip just touched the top of the blend head/heap. The mixture of medicine excipient was free to pass through the funnel and reach the surface. The powder cone's diameter was measured and angle of repose was calculated using the equation,

$$\tan \theta = h/r$$

Where, **h = Height of pile, r = Radius of pile**

Relationship between angle of repose and powder flow was determined as per pharmacopoeia standards, mentioned in table [22].

Compressibility index: It is also one of the simple methods to evaluate flow property of powder by comparing the bulk density and tapped density. A useful empirical guide is given by the Carr's compressibility [23].

Carr's index= TD-BD/TDX100

Hausner's ratio: It provides an indication of the degree of densification which could result from vibration of the feed hopper [24].

Hausner's ratio = Tapped density/ Bulk density

Lower Hausner's ratio = Better flowability, Higher Hausner's ratio = Poor flow Ability

Table 2 Flow properties and corresponding Angle of Repose, CI, Hausner's ratio

Flow property	Angle of repose	Compressibility index	Hausner's ratio
Excellent	25-30	<10	1.00-1.11
Good	31-35	11-15	1.12-1.18
Fair	36-40	16-20	1.19-1.25
Passable	41-45	21-25	1.26-1.34
Poor	46-55	26-31	1.35-1.45

Capsule Filling: Capsule filling was done by hand filling method. The formulated granules were filled in "0" size capsules to an average net content weight of 520 mg. The capsules were then deducted, transferred into polybags, and labelled. The samples were evaluated as per the testing requirements. From the trials, samples were taken for accelerated stability studies as per the testing requirements [25].

Evaluation of Capsules [26]

Description: Colour, shape and size of formulated capsules were determined

Uniformity of weight: Twenty distinct units were chosen at random, and after their contents were weighed, the average weight of the units was determined. The percentage that separates the average weight from any 2 of the different weights cannot be more than that indicated in the table.

Table 3 Acceptance Criteria I.P Limit

Dosageform	Average weight	% Deviation

Capsules	Lessthan300mg	10
	300mgor more	7.5

Disintegration Time: Disintegrating apparatus was used to conduct the disintegration test. Six Vassals held one capsule each, and the equipment was kept at $37 \pm 0.50^\circ\text{C}$ with the immersion liquid (phosphate buffer, pH 6.8). It was recorded how long it took for the capsules to completely dissolve. When there are no more particles above the gauge after they have easily gone through a 10# mesh screen, the capsules are considered dissolved.

In-vitro Dissolution Studies: The USP type 2 dissolving equipment was used to conduct 1-hour dissolution investigations of the formulation in 900 ml of phosphate buffer (pH 6.8) from 3 to 24 hours at 100 rpm while keeping the temperature at $37 \pm 0.5^\circ\text{C}$. Over the course of a day, five millilitre samples of each were gathered. The removed sample was quickly swapped out for an equivalent amount of brand-new buffer. The collected samples underwent spectrophotometric analysis using a UV-Vis spectrophotometer (Systronics Double beam) at wavelengths measured for *B.pinnatum* and *B.ciliata*. The result was a cumulative percent drug release calculation. Plotting the cumulative percentage of medication release against time in minutes was done.

Stability Study as Per ICH Guideline: According to ICH requirements, a two-month stability study was conducted at $40^\circ\text{C} \pm 2^\circ\text{C}$ and 75% relative humidity $\pm 5\%$. We assessed the formulation's in vitro drug release, weight homogeneity, and disintegration time.

Results

Pre-formulation studies:

Organoleptic properties: Organoleptic properties of extracts were done. The results are given in table 4.

Table 4 Organoleptic properties of extracts

Nameof plantextract	Nature	Colour	Odour	Taste
<i>Bryophyllumpinnatum</i>	Gummy	DarkBrown	Characteristic	Acrid
<i>Bergeniaciliata</i>	Amorphous	Rust orange	Noodour	Bitter

Solubility studiesof *B. pinnatum*& *B.*

ciliata: PhosphateBuffer>Methanol>Distilledwater>0.1 N HCL. Maximum solubility was found to be in phosphate buffer pH 6.8

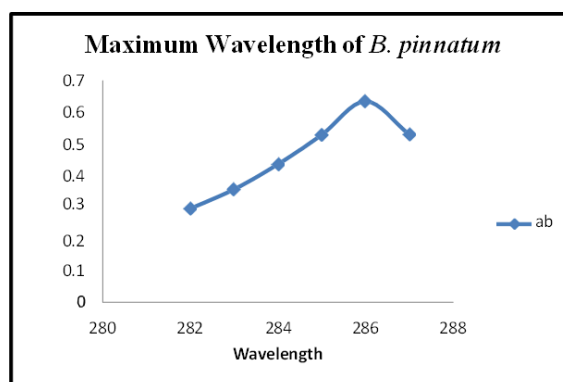
Table 5 Solubility of B. pinnatum& B .ciliata in different Solutions

Solution	Solubility (B.P) ($\mu\text{g/ml}$)	Solubility (B.C) ($\mu\text{g/ml}$)
Distilled Water	465.08	477.25
0.1N HCl	408.33	436.63
Methanol	521.25	535.01
PhosphateBuffer	550.03	552.2

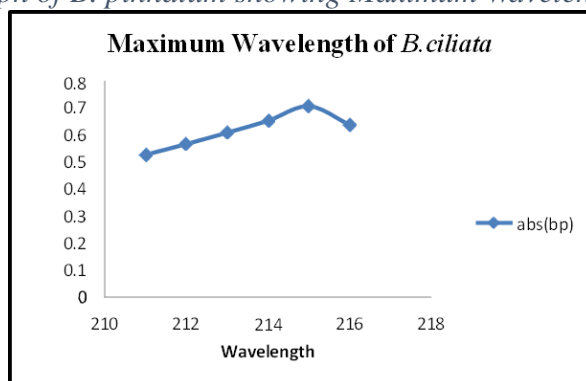
Determination of Maximum Wavelength of *B. pinnatum* & *B. ciliata*: Maximum Wavelength of *B. pinnatum* and *B. ciliata* was found to be 286 nm & 215 nm respectively. This peak was used as a marker for quantification in all dissolution studies of both extract preparations. The results are shown in table no 6.

*Table 6 Absorbance of *B. pinnatum* & *B. ciliata* at different Wavelength*

Wavelength (B.C)	Absorbance (B.C)	Wavelength (B.P)	Absorbance (B.P)
211	0.527	282	0.296
212	0.567	283	0.357
213	0.609	284	0.436
214	0.653	285	0.529
215	0.707	286	0.635
216	0.638	287	0.530

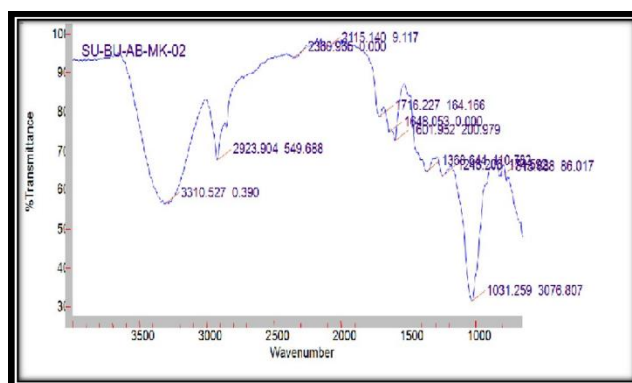
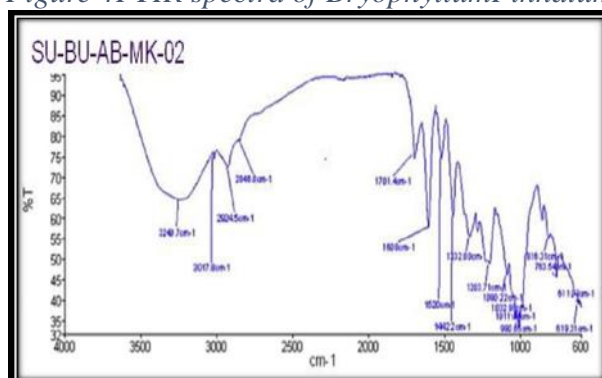


*Figure 2 Graph of *B. pinnatum* showing Maximum Wavelength at 286 nm*



*Figure 3 Graph of *B. pinnatum* showing Maximum Wavelength at 215 nm*

Fourier Transfer Infrared (FTIR) studies:

Figure 4 FTIR spectra of *Bryophyllum Pinnatum*Figure 5 FTIR spectra of *Bergenia ciliata*Table 7 FTIR spectral data of *Bryophyllum Pinnatum*

Vibration frequency cm-1	Major Peak cm-1	Molecular vibration
3310	3600-3200	Stretching OH
2923	3600-2500	Stretching O-H Acid
2115	2260-2100	Stretching C=O
1716	1745-1715	C=O Ketone
1648	1700-1500	Stretching C=O Amide
1368	1400-1300	Stretching NO ₂
1031	1400-1000	C-F

Table 8 FTIR spectral data of *Bergenia ciliata*

Vibration frequency cm-1	Major Peak cm-1	Molecular vibration
3240	3600-3200	Stretching OH
3017	3100-3000	Stretching =C-H
2924	2950-2840	Stretching -C-H
1520	1700-1500	C=C amide
1442	1465-1440	CH ₃ Bending
1332	1400-1300	Stretching NO ₂
1011	1400-1000	C-F

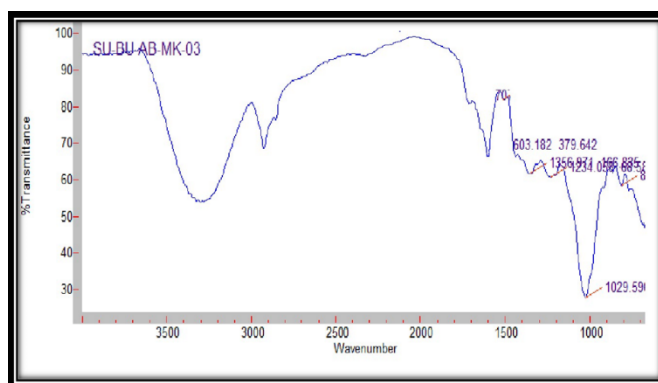


Figure 6 FTIR of plant extracts (*Bergenia ciliata* & *B. pinnatum*)

FTIR studies confirmed Drug-Drug compatibility studies. From the FTIR graph there was none of the extra peak found. Thus, FTIR studies showed that there was no drug-drug and drug-excipient interaction.

Standard Calibration Curve: -

Table 9 Standard plot of *B. pinnatum* in Phosphate Buffer pH 6.8

Concentration(µg/ml)	Absorbance
10	0.121
20	0.180
30	0.262
40	0.321
50	0.383

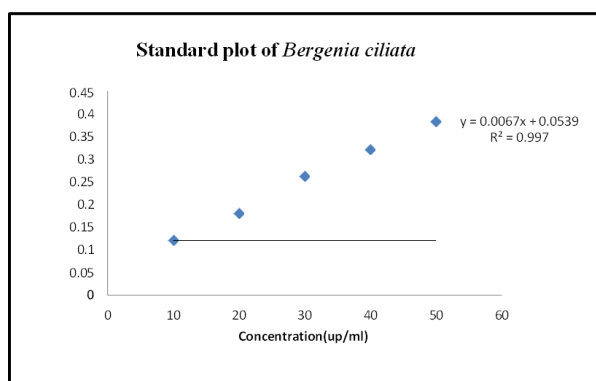


Figure 7 Standard plot graph of *B.P* extract in phosphate buffer pH 6.8

The standard plot of the extract was formed in 6.8pH phosphate buffer at λ max of 286nm and R2 value found to be 0.997.

Table 10 Standard plot of *B. ciliata* Phosphate Buffer

Concentration(µg/ml)	Absorbance
10	0.086
20	0.114
30	0.156
40	0.206
50	0.274

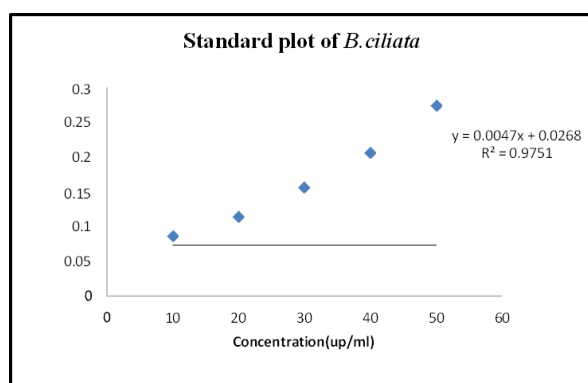


Figure 8 Standard plot graph of B.C extract in phosphate buffer pH 6.8

The standard plot of the extract was formed in 6.8pH phosphate buffer at λ max of 215nm and R² value found to be 0.975.

In-Vitro anti-urolithiatic assay

Table 11 Dissolution of Calcium oxalate stone by extract & cystone

Group	Concentration	Vol. of standard KMnO ₄	Wt. of calcium estimate	Wt. of calcium Reduced	% Dissolution
Control	-	4.7	0.8920	-	-
Standard (Cystone)	100	3.5	0.6643	0.2277	25.52
	200	3.2	0.6073	0.2847	31.91
	300	2.9	0.5504	0.3416	38.29
	400	2.7	0.5124	0.3796	42.55
Bergeniaciliate (extract)	100	4.5	0.8541	0.0379	4.24
	200	4.3	0.8161	0.0759	8.50
	300	4.1	0.7781	0.1139	12.76
	400	4	0.7592	0.1328	14.88
Bryophyllumpinnatu(extract)	100	4.4	0.8351	0.0637	6.37
	200	4.2	0.7971	0.0949	10.63
	300	4.1	0.7781	0.1139	12.76
	400	4	0.7402	0.1518	17.01

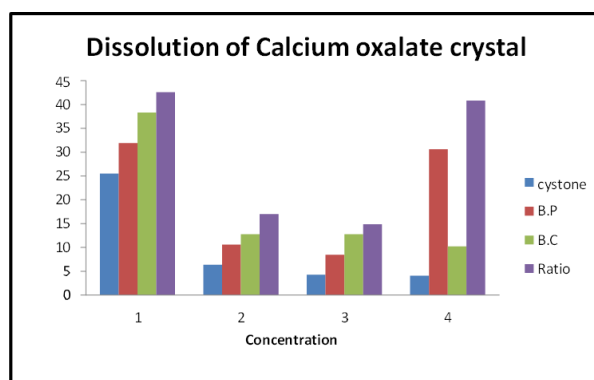


Figure 9 Dissolution of calcium oxalate crystal by extracts & cystone

From the investigation, it was found that the *B.pinnatum* & *B.ciliata* extract exhibited maximal dissolving at 400 mg. It was compared with standard Cystone 400 mg. From this result, we concluded that we may utilise *B. pinnatum* & *B. ciliata* extract in urolithiasis therapy.

Table 12 In-Vitro dissolution of stones in different ratio of extract in combination

Ratio BC:BP	Wt.Ofratio (mg)	Wt.ofstone (g)	Wt. of stone reduced	Vol. of standard KMnO ₄ (ml)	Wt. of calcium estimated	Wt. of calcium Reduced	%Dissolution
Control	-	0.10	-	4.9	0.93002	-	-
1:1	200:200	0.10	0.09	4.7	0.89206	0.03796	4.08
1:2	133.33:266.66	0.10	0.07	3.4	0.64532	0.2847	30.61
1:3	100:300	0.10	0.09	4.4	0.8351	0.09492	10.20
1:4	80:320	0.10	0.07	2.9	0.5504	0.3796	40.81



Figure 10 Dissolution of calcium oxalate crystal of different groups before incubation



Figure 11 Dissolution of calcium oxalate crystal of different groups after incubation

Evaluation of Pre-compression parameters:

Table 13 Evaluation of physical properties of powder blend of all formulations

Formulations	Angle of repose (°)	Bulk density (gm/ml)	Tapped density (gm/ml)	Carr's Index (%)	Hausner's Ratio
F1	30.96	0.45	0.52	13.46	1.15
F2	27.47	0.41	0.54	15.07	1.31
F3	32.2	0.46	0.50	8.00	1.08

Angle of repose: Angle of repose was determined by fixed funnel method. Angle of repose was found to be in range of 27.47-32.2 for different powder blend batches, which indicates good powder flow.

Bulk and Tapped density: Pre-compression blend was evaluated for bulk and tapped density by using tapped density apparatus. Bulk and tapped density was found to be 0.41-0.46 gm/ml and 0.50-0.54 gm/ml respectively. This shows good repacking ability of powder blend.

Carr's index and Hausner's ratio: Carr's index and Hausner's ratio was calculated from bulk and tapped density. The Carr's index of the ingredients was found to be in the range of 8-15.07% and Hausner's ratio in the range of 1.08- 1.31. These findings prove that the composition of ingredients for compression possess good compression property and good flow property.



Figure 12 Formulated capsules of plant extracts

Evaluation of capsules

Description: The polyherbal capsules were evaluated for organoleptic characters which include colour, odour, taste and nature.

Table 14 Description of capsules

Parameters	Observations
Colour	Cap-orange, Body-Light grey
Size	0
Shape	Cylindrical
Taste	Tasteless

Uniformity weight of the capsule: The maximum weight variation of the capsules was 498.3 ± 0.57 which falls within the acceptable weight variation range of + 7.5%, hence the capsules of all batch passed the weight variation test.

Table 15 Uniformity weight of different formulation

Formulation	Uniformity of weight
F1	496.3±0.57
F2	497.3±0.57
F3	498.3±0.57

Disintegration Test- The capsule passed the test as no residue of drug was remained. The disintegration time for F3 formulation was found 15 min 25 second.

Table 16 Disintegration time of different formulation

Formulation	Disintegration time (min)
F1	16 min 45 sec
F2	17 min 15 sec
F3	15 min 25 sec

The capsule passed the test as no residue of drug was remained. The disintegration time for F3 formulation was found 15 min 25 sec.

In-vitro Dissolution Studies: In-vitro dissolution studies were carried out in phosphate buffer 6.8 pH.

Table 17 % CDR of different formulations of capsule at different time interval

Time (min)	%CDR of F1		%CDR of F2		%CDR of F3	
	B.C	B.P	B.C	B.P	B.C	B.P
5	17.22	21.03	16.11	20.5	18.67	22.19
10	23.01	31.55	22.32	30.27	24.75	32.85
15	28.21	35.03	27.45	34.23	29.7	36.14
20	30.85	40.75	31.25	39.08	33.07	41.1
25	37.06	43.15	36.33	42.52	38.47	44.7
30	41.22	48.11	40.36	46.33	42.52	49.95
35	44.33	51.24	44.1	50.1	46.57	52.8
40	49.02	56.32	49.65	54.59	51.3	57.9
45	53.11	62.22	52.87	60.35	54.67	63.3
50	56.22	64.57	56.07	62.3	58.27	65.7
55	60.95	66.14	59.65	65.03	61.87	67.8
60	65.21	69.41	65.74	68.74	67.95	70.5
65	72.06	70.1	71.22	69.62	73.12	71.7
70	76.03	73.18	76.26	72.02	78.97	74.1
75	77.22	75.66	78.3	74.65	80.77	76.2
80	84.36	77.05	83.33	76.24	85.27	78.75
85	87.20	79.85	86.47	78.67	88.65	80.25

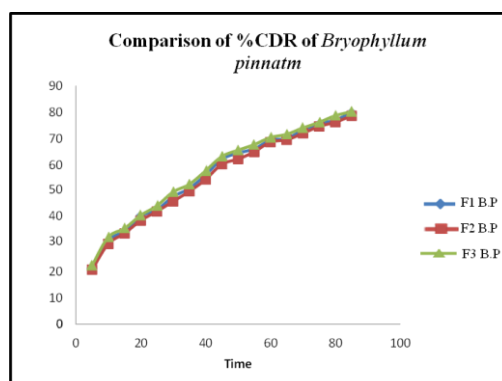


Figure 13 Comparison of %CDR of different formulations of *Bryophyllum pinnatum*

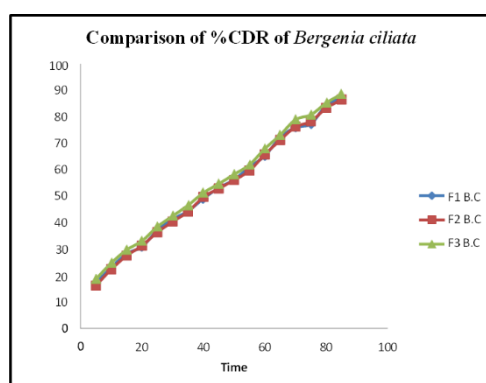


Figure 14 Comparison of %CDR of different formulations of *Bergenia ciliata*

Comparative study of different (F1-F3) is shown in the plot. The in-vitro release of formulation F3 was found to be maximum.

Stability Study:

Table 18 Stability study result of Formulation (F3) after 60 Days

Parameter	Initial study	30 days	60 days
Nature	Powder	NC	NC
Colour	Cap-orange, Body-Grey	NC	NC
Taste	Characteristic	NC	NC
Odour	NC	NC	NC
Uniformity of weight	498.3±0.57	NC	NC
Disintegration time	15 min 25 sec	15 min	15 min
In-vitro drug release	B.P	80.25	80.6
	B.C	88.65	88.65

Conclusion

In conclusion, the pre-formulation experiments done on extracts of *Bryophyllum pinnatum* and *Bergenia ciliata* give complete insights into their physical, chemical, and pharmacological characteristics, crucial for developing successful therapeutic medicines.

Organoleptic studies indicated different features of each extract, with *Bryophyllum pinnatum* being sticky, dark brown, acrid in taste, and having a particular odor, whereas *Bergenia ciliata* seemed amorphous, rust orange in color, bitter in flavour, and odorless.

Solubility experiments indicated that both extracts displayed maximal solubility in phosphate buffer pH 6.8, critical for their bioavailability and formulation design. Spectrophotometric study indicated the maximum wavelengths for quantification: 286 nm for *Bryophyllumpinnatum* and 215 nm for *Bergenia ciliata*, assisting in standardization and quality control.

Fourier Transform Infrared (FTIR) spectroscopy demonstrated the lack of drug-drug and drug-excipient interactions, verifying the chemical stability and compatibility of the extracts. Standard calibration curves in phosphate buffer pH 6.8 further verified their quantitative analytical procedures, exhibiting strong linearity (R^2 values of 0.997 for *Bryophyllumpinnatum* and 0.975 for *Bergenia ciliata*).

In vitro anti-urolithiatic experiments indicated considerable dissolving of calcium oxalate stones by both extracts, similar to the standard medication Cystone, suggesting their potential therapeutic utility in urolithiasis therapy. Formulation experiments indicated excellent physical qualities of the powder blends and capsules, with uniformity of weight and suitable disintegration durations, crucial for dose consistency and optimal drug administration.

Moreover, in vitro dissolution experiments in phosphate buffer 6.8 pH demonstrated sustained release patterns for both extracts, with formulation F3 displaying the largest cumulative drug release percentages over time. Stability experiments over 60 days demonstrated that the formulation maintained its physical and chemical integrity, with minor changes in nature, color, taste, odor, and drug release profiles, demonstrating its potential for long-term preservation and usage.

In summary, the extensive pre-formulation experiments underline the pharmacological potential of *Bryophyllumpinnatum* and *Bergenia ciliata* extracts, encouraging their development as effective therapeutic agents for urolithiasis and perhaps other medical uses.

Funding: Nil

Conflict of interest: None

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