

RECENT ADVANCEMENTS ON MULTILAYER TABLET AND THEIR TECHNOLOGIES

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ABSTRACT

Multilayer tablets are one of the promising techniques aimed at the development of slow deliver dosages notice which having successful features that providing the key constituents of the medication provision scheme. Multilayer tablets stand as the most key option to avoid the unsuitability of chemical components such as the active pharmaceutical ingredients (APIs) and additives, due to incompatibility physical separation is accrued resulting in facilitated the drug release profile. Multilayer is suitable for the intended release for dual preparations in mixture and unrelenting release dosages form respectively individual layer is instant release by way of the loading dose and alternative is the preservation dose due to this benchmarks

multilayer tablets is one of the most negotiating exposures for the anti-hypersensitive, diabetic, anti-inflammatory, and analgesics drug dosages developments such types if combination therapy used. Many Medicinal firms are at this time developing multilayer tablets for various reasons such as manifest delay, therapeutic, marketing to name. General pills are much more to consider due to the ground rules of manufacturing processes is the same, much more considered the same process for advances of the multilayer tablets. For the preparation of multilayer tablets, there are a lot of mismatched produces, supplementary apparatus, and many formulations and processes, these objectives provided an introduction to multilayer tablets expertise, encounters in multi-layers tablets designing, various tablets correspondents are used, excellence and GMP requirements intended for their production and several technologies rummage-sale for the development of tablets and advances in the field of a multilayer tablet.

KEYWORDS: Multilayer Tablets, Advantages, and its limitation, Technologies, and Application.

INTRODUCTION

Oral drug delivery is the most prominent routes of drug delivery, its compared to the all other drug delivery system. Solid medicaments is the most convenient and safe routes of the drug administration and various types of tablets are being manufactured according to the routes and types of dosages form.^[1-3]

Multilayer tablets are a type of most promising medication conveyance scheme, which consists active material in core section in addition have a greater number of the regulating coats combined during the tableting progression. The regulating layer delay the interaction of the solute multilayer matrix tablet is a drug delivery system, the regulating layer postponement the collaboration of the solute of the dynamic materials matrix tablet drug delivery system, this layer interruption the interface of vigorous solute and decreased the asperse degree and precise release rate, and period of solute discharge be able to be conserved by the relatively perpetual through the barriers coats puffiness and destruction process, the puffy process is dominate by the dissolution process and swollen barriers also affected the surface which provided the drug release on slowly manner, resulting decreasing the drug supply proportion owed to the increment of dispersion pathway span which stands, also called the saturation level effects which also be counter balanced by simultaneously increases the area which is available for drug release pattern due to this, combined the period reliant on regulator of the asperse rate of these devices which have reduction of dosage superficial uncovered to the dissolution medium, its advantages toward founded the lined discharge profile which indicated the controlled releases the dosages form also possible to obtain the various dissolution profile such as pulsatile or hindered conveyance, multi-modular, prolonged discharge (characterized by the continual proportion) for deferent drugs by fluctuation the formulations of layers. By the application of the multilayer system should be a swelled and form gel and finally destroy completed, leaving the inconsequential residual in the gastric tracts. Multilayer arrangement is a new era for the medication developments by using medication conveyance devices overcome the main disadvantages of abridges released accompanying through supreme diffusible-controlled matrix arrangement which have being compatibles with out-dated manufacturing methods.^[4-5]

Advantages of Multilayer Tablets

1. During the formulation, incompatible materials are separated in the form of layers such as the dual coats or third coats of its inert substances as a barrier between them.
2. Bilayer tablet may be designed such as the primary coat is sustained release and the additional layer is immediate announcement resulting in maintaining promulgate blood level.
3. In multilayers, tablet formulation layers are colour for better identification.
4. Bitter taste and its odour are masking by using the masking techniques.
5. Tablet is the single or unit dosages form which had the greater abilities of oral dosages form.
6. Calm to take the minimum propensity to suspend up
7. Used intended for pilot plan scale manufacture
8. In single tablet give two types of release such utilizing stocking dose and maintenance dose respectively resulting ability to upturn the rate of utilization of preparation.^[5,6]

Limitation of Existing Drug Delivery System

- Drugs having a short half-life tending to miss the dose which is reciprocated administration of the drug which is necessary.
- Drug concentration may be a fluctuate in the bloodstream due to ended drug.
- A crowning of the peak plasma concentration is achieved which assures the stable state-owned which is difficult to fulfil.
- Having poor patient compliance, when patients want to revenue their drug more than two whiles in a day on behalf of chronic basis, resulting from the drawback of a shortcoming of the controlled release of drug dosages form.^[5-7]

Disadvantages of Multilayer tablet

1. In dense compaction, the drug resists owing to shapeless and have low-density characters.
2. The unpleasant taste of the drug is subtle to oxygen may necessitate encapsulation.
3. In the instance of paediatric and insensible difficult to take orally.
4. Maybe the difficult formulation of dosages which is low soaking and have deliberate closure possessions which are hard to achieve the bioavailability.

Due to appropriate closeness and bond at interface level together compacted layers are crack and layer separation

Types of Multilayer Tablets^[7]

1. Bilayer Tablet

This is prominent dosages form which is sequential and simultaneously release of two different APIs such as the first coating is instant and second coating is continued release which performances as the conservation dose, double cover or bilayer tablet are delivered the two active drug in a single time without any pharmacological and energetic interaction.

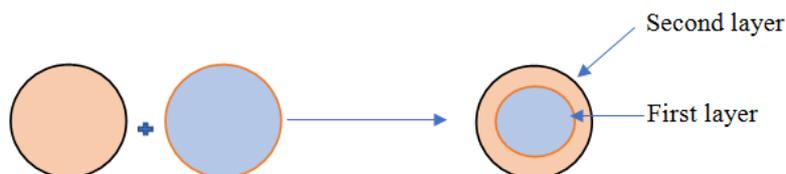


Fig. No. 01: A Unit of Bilayer Tablet.

2. Triple Layer Tablet

These type of tablet contains three layers first indicate the instantaneous release and second layer is continuous release and third layers have separated both layers which are present in the middle of them, these type of tablets are mostly used in procurement of disorders.

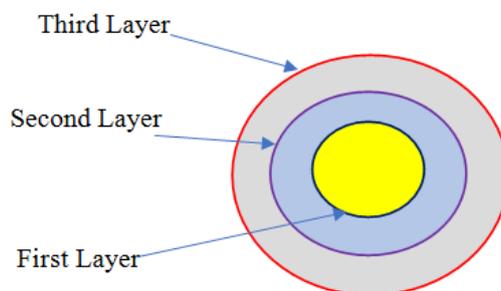


Fig No. 02: Triple Layer Tablet.

Various Techniques for Bilayer Tablet^[3]

A. OROS Push Pull Technology

This method consists of the dual or triple layer surrounding by which by the single or supplementary layer are important for preparation, first stratum considered as the push layer and drug stratum comprises along with their different layers and consists one or more layers which having the different agents, so the drug is poorly soluble and has addition of appending mediators and osmotic mediators and semipermeable membrane have presents surrounding the tablet core.^[8]

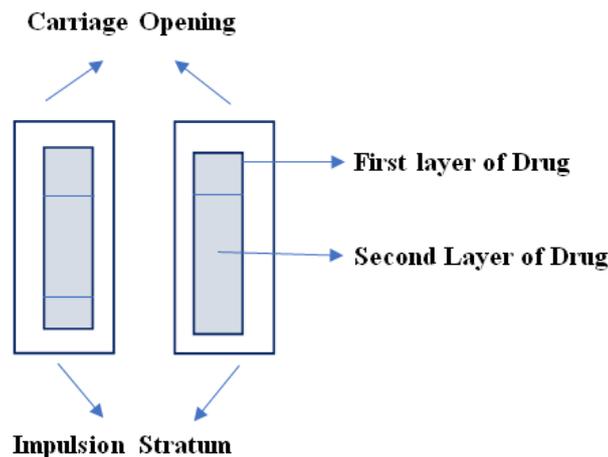


Fig No. 03: OROS Push Pull Technology.

L-OROSTM Technology^[9-11]

This technology developed by 'Alza development', generally encompasses of the solubility issues determination and system consists a wax soft emollient product having drug in a liquefied state is initially contrived and then covered with barricade layer then impulsion besides pull layer are present such as osmotic and semipermeable membrane devoted with exit slit.

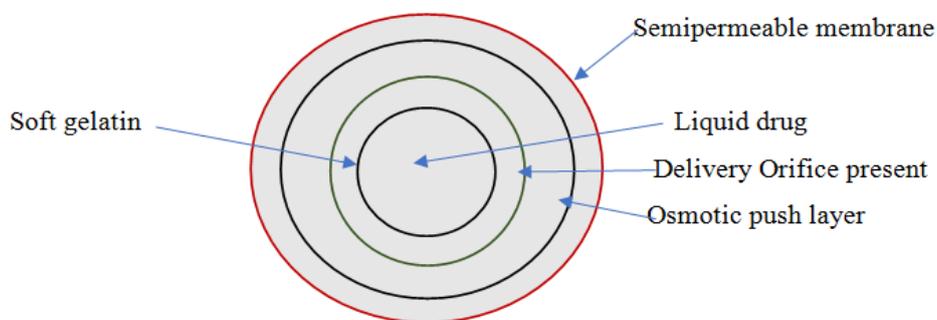


Fig No. 04: L-OSORTOM Technology.

EN-SOTROL Technology

ENSTROL technology is solubility perfection technology to greatness to create the elevated dosages form such as Shire Laboratory used as incorporated preparation conveyance concentrating on permits and assimilation of the identified accompaniment into precise release expertise.^[12]

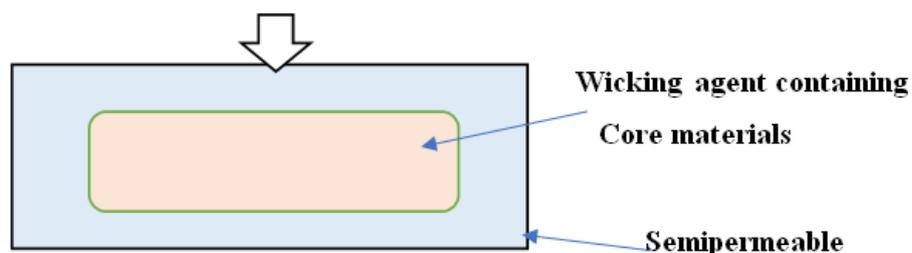


Fig No. 05: EN SOTROL Technology.

DUREDAS Technology

DUREDAS Technology is also known as Elan drug Technology which consist of the dual discharge delivery arrangement. This technology used for the dual layer tablet fabrication, effective for the release of drug such as the sustained and immediate release, which indicating the dissimilar drug have altered release rate, one drug provided the an immediate release particles and modified release are given of other drug which is the amalgamation form of polymeric materials.

DUROS Technology

This type of technology consists of an outer layer that is cylindrical and finished up with the titanium alloys reservoir and have reservoir have high asset and shields the drug fragments as of enzymes. Generally, this expertise are used for the medication distributing method that be in conflict with like miniature syringes and release the very minute concentration of drug months to years.^[13,14]

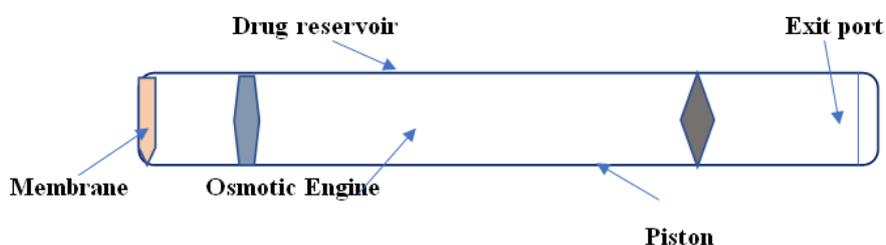


Fig No. 06: DUROS Technology.

PRE-FORMULATION OF MULTILAYERS TABLET

Particle Size Determination: It was measured by using the sieving method.^[15]

Photo-microscope Study: Photo-microscopy was taken by using the photomicroscope at the magnificence of X450 magnificent.

Angle of Repose: It's accomplishes the flow ability of powder, which can be define as the it's the extreme angle that can be got by amid the free stand-up surface of the precipitate pile and the level plan.^[16-17]

$$\text{Angle of Repose} = \tan^{-1} h/r,$$

Where, h = height, and r = radius

Determination of Bulk Density and Tapped Density: Take 5gm of powder from each formula was introduced into a 25ml measuring cylinder, after this initial volume are noted and cylinder allow to fall down under its own weight on hard surface from the height of 2.5cm at 2-3 sec intervals and tapping was continue until no further change in volume was noted. The bulk, tapped density were calculate using the following formula.^[18-19]

$$\text{Bulk density} = W/ V_B$$

Tapped Density = W/ V_T to measure the compressibility

W= Weight of powder, V_B = Bulk Density and V_T = Tapped Density

Compressibility Index: Its important factor to measure the compressibility index of powder, obtain from the flow ability from bulk and tapped densities resulting less compressible and have more flow able is it, materials having the 20-30% called as free flowing materials which is calculated by^[20]

$$CI = 100 (V_B - V_T) / V$$

Where,

CI= Compressibility index, V_B = Bulk Volume, and V_T = tapped volume

KINETICS OF MULTILAYER TABLET

Zero Order Drug Delivery

The scheme includes the water-loving or water-hating polymers as matrix in their preparation to regulate the release of active ingredients by the covering of polymer to together sides of the milieu and opposed side are coated to achieve the dissolution and give sustained discharge of the medication.^[21-24]

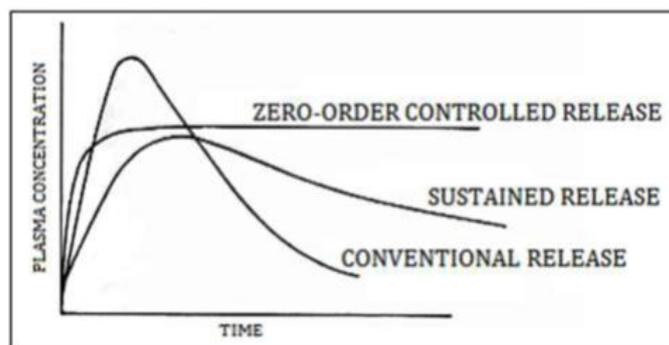


Fig No. 07. Graph of Zero Order Drug Delivery.

<http://deliveryordermigunsa.blogspot.com/2017/09/zero-order-drug-delivery-system.htm>

Evaluations of Multilayer Tablets

Weight Variation of Tablets

Take individual weight of 20 tablets and selecting the inconstantly for the weight variations, then taken the average mean of weight and standard deviation were also calculated and matched with ideals and weightiness of the tablet existence ended is stately to guarantee that it contains fixed expanse of medication.^[25]

Table: Limits of Weight Variation According to Pharmacopoeias.^[26-27]

IP/BP	USP	Limits
80mg or less	130mg or less	10%
More than 80mg or less than 250mg	130mg to 324mg	7.5%
250mg or more	More than 324mg	5%

Friability

The friability test is strictly associated to hardness of tablets and is design to estimate capacity of the tablets with viewpoint tight spot in packaging, management and transport. Friability is unwavering by R. Friabilator. A numeral of tablets stay placed in friabilator and rotate 100 per revolution and they rendering to progressing and shockwaves as they drop 6 inches in respectively crack with in apparatus, friction and impact are the forces that most often cause the tablet breaks. Finally tablet are weighted and weight compared to initial weight to final weight which found after rotation of apparatus. The value of friability is less than one percentages of the weight of tablets being tried during the friability and test is deliberated satisfactory and any fragmented tablets, breadth have reduced internal stress the damage in weight of the tablet is measure of variability and expressed in percentages^[28-30]

$$\% \text{ loss} = [(\text{Initial weight of tablet} - \text{Final weight of tablet}) / \text{Initial weight. of tablet}] \cdot 100$$

Determination of Hardness

Generally rigidity of tablet is resolved by the using by hardness tester such as Monsanto which used for infringement the tablets and point to be considered called as the breaking point and tests the essential reliability during handling and storages.^[31,36]

Determination of Dissolution Study

In vitro dissolution studies of tablets are done in gastric fluid and intestinal fluids to appraise the measured drug conveyance prospective. Dissolution studies are conducted out, by means of USP I dissolution apparatus at 100 rpm at $37\pm 0.5^\circ\text{C}$ with 900ml pH 1.2 buffer for 2 hours, later dissolution medium is swapped with 900ml of pH is 6.8 buffer for 10 hours, all the sampling was done by replacement methods such as if withdraw 5ml then added 5 ml blank such buffers and dilution are prepared and analysis done by UV spectrophotometer and observed the absorbance be noted.^[36-43]

Applications^[43-54]

Table For: Application for Multilayer Tablets.

Sr.No.	Drugs	Immediate/sustained release(IR/SR)	Treatment	References
01.	Nebivololan, Nateglinide	IR-Nebilol SR-Nateglinide	Diabetis Hypertension	[9-17]
02.	Metoprolol Amlodipine	SR-Metoprolol IR-Amlodipin	Hypertension	[15]
03.	Levofloxacin Ambroxol	IR-Levofloxacin SR-Ambroxol	Respiratory tract infection	[19]
04.	Metformin HCL Atrovastin Calcium	IR-Atrovastin Calcium SR- Metformin HCL	Hyperlipidemia	[13]
05.	Pioglitazon HCL Glicazide	IR-PioglitazoneHCL CR-Glicazide	Type-2 diabetes mellitus	[11]

Zero Order Drug Delivery

This type of drug delivery system provided the constant release concerning drug concentration is independent in the process.

Numerous Kinetics Model of Multilayer Tablet

Multilayer tablets designing based on the configuration of modulating layers which allow dissimilar tablets patterns which give different release properties which tending to achieved the dissolution pattern like delayed, multi-modal, and pulsatile release which is described in the following manner –

- Zero Order Sustained Release

- Rapid/ Relaxed Delivery System
- Time Programmed Delivery System
- Bimodal Release Profile

Zero Order Sustained Release

Rapid or Relaxed Delivery System

When the drug release gives rapid release which is followed by the prolonged discharge of drug for the attainment of the speedy announcement for better therapeutic effect and both keep the plasma profile of the medication in systemic level, these concepts are applied when regime not satisfied humble discharge of a drug.

Period Programmed Delivery System

This type of drug delivery system provided the instant release of these medication which is tracked by the precise release, once conveyance mandatory in a period for controlled release manner in GIT, this system comprises of a central which is coated with various polymeric barricade, the release of core tablet swelling of water-hating or water-loving barriers that expression the pulsating release the drug.

Bimodal Release Profile

The bimodal release is also shown a speedy discharge which tracked by the deliberate discharge and additional phase of fast medication release such as sigmoidal curve, this process pays the deliberate engagement in the stomach and intestinal and spontaneous pulse type release that gives more effective from the place of achievement to undertake interrupted modifications.^[9-13]

Mechanism of Drug Release

Introduction to fluids, water-soluble matrix revenue up water and polymer have been swelled and form gel layer, drugs are described the release pattern in a controlled manner by superficial destruction, when the rupture of a resolvable medication may happen due to surface trickle matrix covering dispensable slippery polymer come into interaction with an aqueous system, resulting from the sudden change from slippery to elastic state which associated with the puffiness procedure by means of period, water penetrates and profound into the case cumulative the breadth of emollient layer and outer layer becomes dampen and starts corroding when water extents the centre of scheme and attentiveness of medication decrease under the solubilization assessment and discharge proportion commence condensed

at the same time breadth is increased of the barricade layer with its period, resulting dispersion rate dimension of travel decreased and affected the release rate of drug.

CONCLUSION

Multilayer tablet improve single unit dosages and formulated multi layers tablet which contain one or more drug which are used as sustained or immediate release and must be reduced dosages frequency, these techniques have tendency to incredulous the limitation of the single layer tablet.

Conflicts of Interest: Nill.

BIBLIOGRAPHY

1. Colombo PU, Conte A, Gazzaniga L, Maggi ME, Sangalli NA, Peppas A. et al. Drug release modulation by physical restriction of matrix swelling. *Int. J. Pharm.*, 1990b; 63: 43-48.
2. Conte U, Maggi L, Colombo P, La Manna A. Multi-layered hydrophilic matrices as constant release devices (Geo matrix Systems*). *J. Control. Release*, 1993; 26: 39-47.
3. Nagashree K. Solid dosage forms: Tablets. *Res Rev J Pharm Anal [Internet]*, 2015; 4(2): 60–71. Available from: <http://www.rroij.com/open-access/solid-dosage-forms-tablets.pdf>
4. Conte U, Maggi L. Multilayer tablets as drug delivery devices. *Pharm. Technol*, 1998; 22(3): 174-182.
5. Jagtap SR, Phadtare D and Saudagar, RB: Multilayer Tablet- A Review, *International Journal of Universal Pharmacy and Bio Sciences*, 2016.
6. Jagtap SR, Phadtare D and Saudagar, RB: Multilayer Tablet- A Review, *International Journal of Universal Pharmacy and Bio Sciences*, 2016.
7. Vyas SP and Khar RK. Essentials of controlled drug delivery. In chapter 1 of, *Controlled drug delivery concepts and advances* first edition. Vallabh Prakashan, Delhi, 2005; 421.
8. Shahi SR, Ingale TB, Magar DR, Karva GS: Bi-Layer Tablet Technology, *International Journal of Pharmaceutical Sciences Review and Research*, 2015; 32(2): 145-153.
9. Vyas SP and Khar RK: *Controlled drug delivery. Concept and advances*, 1st edition, Vallabha prakashan, Delhi, 2002; 267-347.
10. Lachman Leon, Lieberman Herbert A. Compression coated and layer tablets. In: *Pharmaceutical Dosage Forms: Tablets*. Marcel.
11. Mc Conville JT. Recent trends in oral drug delivery. *Drug Del Re Autumn / winter*, 2005.

12. Wise D.L., ed. Handbook of Pharmaceutical Controlled Release Technology. New York: Marcel Dekker, Inc; first ed. Indian reprint, 2005; 211,431. <http://dissertations.ub.rug.nl/Files/faculties/science/2005/r.steendam/c2.pdf/> 7/11/2008
13. Wise D.L., ed. Handbook of Pharmaceutical Controlled Release Technology. New York: Marcel Dekker, Inc; first ed. Indian reprint, 2005; 211,431.
14. Noor AV. Formulation design, characterisation and in vitro evaluation of bilayered tablets containing Telmisartan and Hydrochlorthizide. *Int J Biopharm*, 2013; 4(1): 29-36.
15. Wise D.L., ed. Handbook of Pharmaceutical Controlled Release Technology. New York: Marcel Dekker, Inc; first ed. Indian reprint, 2005; 211,431.
16. Aushutosh A, Arunanachalam A, Karkikeyan M, Mandipa S, Ravishankar V, Senthilaraj R. Design and evaluation of sustained release tablets of Telmisartan. *Int J Pharm Sci.*, 2010; 8(1): 595-603.
17. The United States Pharmacopoeia, United states Pharmacopoeial convention, Inc., Rockville, MD, 2000.
18. Uttam M. Formulation and In Vitro Studies of a Fixed-Dose Combination of a Bilayer Matrix Tablet Containing Metformin Hcl as Sustained Release and Glipizide as Immediate Release. *Drug Develop & Ind. Pharm.*, 2008; 34(3): 305-13.
19. Enose, A., A, Prithiviraj, A., Kesavan, B., Eudragit NE30D based metformin gliclazide extended release tablets: formulation, characterization and in vitro release studies. *Chem. Pharm Bull*, 2002; 50(11): 1495-98.
20. Defang O, Shufang, N, Wei L. In vitro and in vivo evaluation of two extended release preparations of combination Metformin and Glipizide. *Drug Dev. Ind. Pharm.*, 2005; 31(7): 677-85.
21. Sahota R, Singh G, Mankoo P, Kaur R, Singh S, Nagpal M, Upendra K and JainUK, Shelly KS and Sharma M. Development and characterization of bilayer tablets containing metformin hydrochloride sustained release layer and atorvastatin calcium in the immediate release layer. *IPP.*, 2013; 1(3): 220-229.
22. Chaudhari S, Bawaskar M and Shirsat A. Formulation and evaluation of player floating tablet of carvedilol phosphate. *JDDT*, 2012; 2(5): 9-19.
23. Indian Pharmacopoeia. The Controller of Publication, Delhi, 1996; 2: 735.
24. <http://deliveryordermigunsa.blogspot.com/2017/09/zero-order-drug-delivery-system.htm>
25. D.Rohini, S.Alexandar, and M, J.N.Chandrasekar, "Preparationandinvitroevaluation of sustained release tablet formulations of metformin HCL, "Asian Journal of Pharmaceutical and Clinical Research, 2012; 5(1): 45-48.

26. (Indian & Commission, 2010)
27. Edy Susanto, M. indian pharmacopoeia, vol III. In *Journal of Chemical Information and Modeling*, 2019; 53: 9.
28. Sahota R, Singh G, Mankoo P, Kaur R, Singh S, Nagpal M, Upendra K and JainUK, Shelly KS and Sharma M. Development and characterization of bilayer tablets containing metformin hydrochloride sustained release layer and atorvastatin calcium in the immediate release layer. *IPP*, 2013; 1(3): 220-229.
29. Chaudhari, S, Bawaskar, M and Shirsat A. Formulation and evaluation of player floating tablet of carvedilol phosphate. *JDDT*, 2012; 2(5): 9-19.
30. Indian Pharmacopoeia. The Controller of Publication, Delhi, 1996; 2: 735.
31. Nirmal J, et al. Bilayer tablets of atorvastatin calcium and nicotinic acid: formulation and evaluation. *Chem. Pharm Bull*, 2008; 56: 1455-1458.
32. Patra CN, et al. Design and evaluation of sustained release bilayer tablets of propranolol hydrochloride. *Acta Pharm.*, 2007; 57: 479-489.
33. Narendra C, et al. Optimization of bilayer floating tablet containing metoprolol tartrate as a model drug for gastric retention. *AAPS PharmSciTech*, 2006; 7: 23-29.
34. Rahman Z, et al. Design and evaluation of bilayer floating tablets of captopril. *Acta, Pharm.*, 2006; 56: 49-57.
35. Sanna V, at al. Bilayer tablets based on poly (epsilon-capro-lactone) and polymethyl methacrilates as controlled release systems for ruminants. *Pharm Dev Technol*, 2004; 9: 321-328.
36. Ohmori S, et al. Sustained-release phenylpropanolamine hydrochloride bilayer caplets containing the hydroxyl propyl methyl cellulose 2208 matrix. II. Effects of filling order in bilayer compression and manufacturing method of the prolonged-release layer on compactibility of bilayer caplets. *Chem Pharm Bull*, 2000; 48: 678-682.
37. Ohmori S, et al. Sustained-release phenylpropanolamine hydrochloride bilayer caplets containing the hydroxylpropylmethylcellulose 2208 matrix. I. Formulation and dissolution characteristics. *Chem. Pharm Bull*, 2000; 48: 673-677.
38. Shahi SR, Ingale TB, Magar DR, Karva GS: Bi-Layer Tablet Technology, *International Journal of Pharmaceutical Sciences Review and Research*, 2015; 32(2): 145-153.
39. <https://www.semanticscholar.org/paper/Bilayer-Floating-Tablet-Technology-%3A-An-Overview-Garg-Singhvi/983a8ef36e9f437ce75618307ee4f49acbc71540/figure/3>
40. Science and Technologies [online].[cited 2012 Available from URL: http://www.durect.com_

41. Naisarg d. Pujara ronak k. Gokani, Jalpa s. paun. Bilayer tablet –An emerging trend *ijprd*, 2011; 4(04): une, 2012(102-111).
42. https://www.researchgate.net/figure/Figure-3-L-OROSTM-Technology_fig3_264092622.
43. https://www.researchgate.net/figure/EN-SO-TROL-Technology_fig1_270823137
44. https://www.researchgate.net/figure/Figure-5-DUROS-Technology_fig5_2640926.
45. Asole S, Padole A, Bodhankar M: Emerging trends in bilayer tablet technology: review, *International Journal of Pharmaceutical Sciences Review and Research*, 2013; 20(1).
46. Ryakala H, Dineshmohan S, Ramesh A and Gupta VRM: Formulation and in-vitro evaluation of bilayer tablets of nebivolol hydrochloride and nateglinide for the treatment of diabetes and hypertension, *Journal of Drug Delivery*, 2015. Article ID 827859.
47. Chowdary YA, Raparla R and Madhuri M: Formulation and evaluation of multilayered tablets of pioglitazone hydrochloride and metformin hydrochloride, *Journal of Pharmaceutics*, 2014. Article ID 848243.
48. Sharma SK, Mohan S, Jaimini M, Chauhan BS and Chatterjee: A Formulation and in-vitro evaluation of bilayer tablets containing pioglitazone HCl and gliclazide for type II. *International Journal of pharmtech Research*, 2014; 6(2): 607-622.
49. Kotta M, Reddy N and Naga RK: formulation and evaluation of bilayer matrix tablet of pioglitazone HCl metformin HCl USP 15mg and 500mg *Asian J Pharm Clin Res.*, 2013; 6(3): 155-161.
50. Mohindeen S, Jyothi B, Pavani S, Satyanarayana T, Kumar SP and Krishna NS: Formulation and evaluation of bilayered tablets of metformin hydrochloride and atorvastatin calcium. *Int J Pharm Sci Rev Res.*, 2011; 10(2): 130-4.
51. Sindhu P, Sakshi MB and Rao MT: Formulation development and evaluation of bi-layer sustained release tablets of amlodipine and metoprolol *Research and Reviews in Pharmacy and Pharmaceutical Sciences*, 2014.
52. Jadhav RT, Patil PH and Patil PR: Formulation and evaluation of bilayered tablets of piracetam and vinpocetine. *J Chem Pharm Res.*, 2011; 3(3): 423-31.
53. Nirmal J, Saisivam S, Peddanna C, Muralidharan S, Nagarajan M: Bilayer tablets of atorvastatin calcium and nicotinic acid: formulation and evaluation. *Chem. Pharm. Bull*, 2008; 56: 1455–1458.
54. Nirmal J, Saisivam S, Peddanna C, Muralidharan S, Nagarajan M: Bilayer tablets of atorvastatin calcium and nicotinic acid: formulation and evaluation. *Chem. Pharm. Bull*, 2008; 56: 1455–1458.