

高效液相色谱法测定血中奎尼丁浓度及其药物动力学研究

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提要 用反相高效液相色谱法测定血浆奎尼丁浓度, 奎尼丁的保留时间为 4.8 min, 最低有效检测浓度为 0.29 $\mu\text{g/ml}$. 对 5 名健康中国人测得药物动力学参数为 $K = 0.24 \pm 0.22 \text{ h}^{-1}$, $K_a = 1.3 \pm 0.8 \text{ h}^{-1}$, $t_{1/2} = 7 \pm 6 \text{ h}$, $C_{\text{max}} = 0.5 \pm 0.3 \mu\text{g/ml}$, $t_{\text{max}} = 2 \pm 0.6 \text{ h}$, $\text{AUC}_{0-24\text{h}} = 7 \pm 6 \mu\text{g}\cdot\text{h/ml}$. 本法简单准确, 适用于国内临床作血药浓度监测.

关键词 高效液相色谱法; 奎尼丁; 药物动力学

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抗心律失常药奎尼丁易产生毒性反应。为保证用药安全有效, 临床常需进行血药浓度监测。已报道的方法主要有气相色谱法⁽¹⁾、高效液相色谱法⁽²⁾、荧光法⁽³⁾、酶免疫法⁽³⁾及气相色谱-质谱法⁽⁴⁾等。本文采用反相高效液相色谱法结合国内具体条件测定单次 po 后不同时相的血药浓度, 为研究奎尼丁的药效学、药物动力学及临床监测提供一种简便准确的测定方法。

材 料

硫酸奎尼丁粉(BDH), 硫酸奎尼丁片(信谊药厂), 内标物达克罗宁(dyclonine hydrochloride). 流动相为甲醇:水:冰醋酸(1000:10:0.5 v/v). YSB 高效液相色谱仪系中国科学院上海分院仪器厂产品, 紫外检测器波长254 nm, 层析柱5×150 mm, 内装固定相为YWG-C₁₈, 10 μ.

方法和结果

分析方法

1. 标准液及内标液 奎尼丁标准液(按游离碱计算)100 μg/ml 氯仿; 达克罗宁内标液160 μg/ml 氯仿.

2. 奎尼丁的高效液相层析测定 取标准液及内标液各25 μl, 混匀. 取5 μl 进样. 流动相流速为1.5 ml/min, 泵压60 kg/cm², 仪器灵敏度档放在0.02 OD. 层析结果见图1. 奎尼丁和内标物的保留时间(t_R)分别为4.8 min 和8 min.

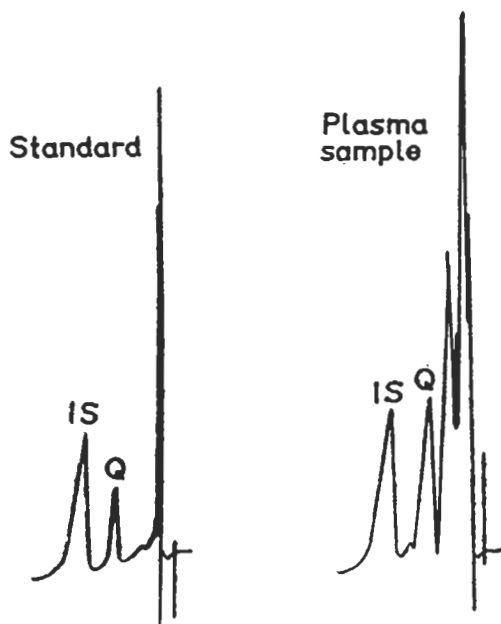


Fig 1. Typical HPLC of quinidine (Q) and internal standard (IS)

3. 血浆中药物的提取 取肝素抗凝血浆1 ml, 加硼酸缓冲液(pH 9.0) 1 ml, 加入标准液100 μl, 内标液25 μl, 混匀. 先后用乙醚2, 2和3 ml 提取3次, 合并提取液置40℃蒸干. 再用2 ml 乙醚淋洗管壁2次, 蒸干. 残留物用无水乙醇50 μl 溶解后取5 μl 进样. 层析图见图1.

4. 血浆中提取奎尼丁的标准曲线 取肝素抗凝血浆1 ml, 置10 ml 有塞试管中, 共6份. 分别加入奎尼丁标准液5, 10, 30, 50, 70和100 μl, 再加入内标液25 μl, 按前法提取后取5 μl 进样. 结果见图2. 其相关系数r=0.9990, 线性范围为0.5-10 μg/ml, 最低有效检出浓度为0.29 μg/ml.

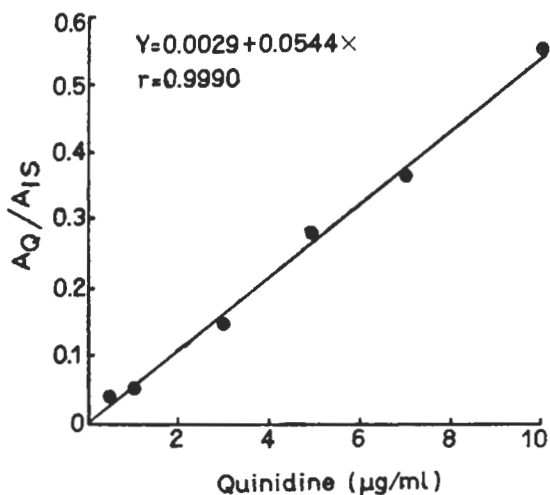


Fig 2. Standard curve of quinidine in plasma. A = area, Q = quinidine, IS = internal standard

家兔灌胃和志愿者口服奎尼丁后的药物动力学参数 兔5只, ♂, ig 奎尼丁200 mg/kg; 志愿者5名, 男性, 每人po 奎尼丁200 mg. 给药后定时取血, 经提取后进样. 从测定结果算得药物动力学参数($\bar{x} \pm SD$):

兔, $K_a = 0.2 \pm 0.07 \text{ h}^{-1}$, $t_{1/2} = 4.14 \pm 1.95 \text{ h}$, $C_{m, \max} = 5.9 \pm 1.8 \text{ μg/ml}$, $t_{m, \max} = 1.91 \pm 0.32 \text{ h}$, $AUC_{0-24h} = 60.2 \pm 12.6 \text{ μg} \cdot \text{h/ml}$.

人, $K = 0.24 \pm 0.22 \text{ h}^{-1}$, $K_a = 1.3 \pm 0.8$

h^{-1} , $t_{1/2} = 7 \pm 6 h$, $C_{max} = 0.5 \pm 0.3 \mu g/ml$,
 $t_{max} = 2 \pm 0.58 h$, $AUC_{0-24h} = 7.3 \pm 6.4 \mu g \cdot h/ml$.

疗效与血浓度 4名心律失常患者,住院期间按常规剂量服用奎尼丁治疗。经复律后,再次服用奎尼丁,2.5h后采集病人血样,提取后进样。测得其平均血浓度为 $1.14 \pm 0.30 \mu g/ml$ 。

讨 论

用高效液相色谱法测定血中奎尼丁浓度,在国内迄今未见报道。国外虽有介绍,但限于仪器的成本高,在国内较难推广,或因流动相中含有缓冲盐类⁽⁵⁻⁷⁾,易使国产仪器中的泵阻塞而失灵。为此,我们建立了能较普遍适用于国内临床使用的奎尼丁血药浓度测定法。用本法在5名志愿受试者po奎尼丁200mg后,测得平均 $t_{1/2}$ 为 $6.8 \pm 5.7 h$,达峰时间为2h,与文献报道^(8,9)近似;但5例中可能因年龄相差较大(24-51岁)等因素,所见各种参数个体差异较大。

健康人单次服用或心律失常患者连续服用

奎尼丁过程中,测定血浆浓度未见有干扰峰出现;而同时收集尿液,用本法提取后进样,则在原药峰前可见有一个较大的峰,这很可能是奎尼丁的代谢产物,但不干扰血浆标本的测定。因此,本法与其它方法相比,较为简便、准确,有效测定水平与实际血药浓度相适应,适合于国内临床监测奎尼丁血浓度。

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Determination of quinidine in plasma and its pharmacokinetics by high pressure liquid chromatography

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ABSTRACT: Reverse-phase liquid chromatographic assay method was used for quantitative analysis of quinidine in plasma. The mobile phase was a mixture of methanol: water: glacial acetic acid (1000: 10: 0.5 v/v) and the flow rate was 1.5 ml/min. Dyclonine was used as an internal

standard. The retention times for quinidine and dyclonine were 4.8 and 8min, respectively. Plasma levels could be assayed for concentrations of 0.5-10 $\mu g/ml$. Pharmacokinetic parameters were measured in 5 healthy volunteers and 5 σ rabbits after oral administration of quinidine 200 and

200 mg/kg, respectively. The $\bar{x} \pm \text{SD}$ were as follows: Men: $k = 0.24 \pm 0.22 \text{ h}^{-1}$, $K_s = 1.3 \pm 0.8 \text{ h}^{-1}$, $t_{1/2} = 7 \pm 6 \text{ h}$, $C_{\text{max}} = 0.5 \pm 0.3 \mu\text{g/ml}$, $t_{\text{max}} = 2 \pm 0.58 \text{ h}$, $\text{AUC}_{0-24\text{h}} = 7.3 \pm 6.4 \mu\text{g}\cdot\text{h/ml}$. Rabbits: $K_e = 0.2 \pm 0.07 \text{ h}^{-1}$, $t_{1/2} = 4.14 \pm 1.95 \text{ h}$, $C_{\text{max}} = 5.9 \pm 1.8 \mu\text{g/ml}$, $t_{\text{max}} = 1.91 \pm 0.32 \text{ h}$, $\text{AUC}_{0-24\text{h}} = 60.2 \pm 12.6 \mu\text{g}\cdot\text{h/ml}$. The HPLC method described is

rapid, accurate for the clinical monitoring of quinidine concentration in plasma.

KEY WORDS high pressure liquid chromatography; quinidine; pharmacokinetics

¹ The graduates of Pharmacology Speciality in this University in 1984

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