



# **SEMINAR ON LOZENGES**

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# **INTRODUCTION**

**Lozenges are solid and flavored medicated dosage forms intended to be sucked and held in the mouth or pharynx.**

**They can be prepared by:**

**A) Molding**

**Ex: Pastilles**

**These are soft variety of lozenges contains medicament in gelatin or glycerol gelatin base or acacia, sucrose, water.**

**B) Compression of sugar based tablets.**

**Ex: Troches**



- Lozenges are OTC and prescription products.
- Provide drug delivery locally to the mouth and tongue, throat, etc.
- Maximizes the local activity of the drug.
- Contains variety of active ingredients like Local Anesthetics, Antimicrobials, Antibiotics, vitamins, Decongestants, Analgesics, Cough suppressants, Nicotine like substances for smoking cessation.





## Advantages over conventional tablets:

1. No disintegration
2. Slower dissolution rate
3. Pleasant taste
4. Organoleptic properties like color, smoothness
5. Slow release of medicament.

# SHAPES OF LOZENGES:

Flat

Circular

Octagonal

Biconvex

Cylindrical





## **TYPES OF LOZENGES:**

1. Medicated lozenges

Based on manufacturing

A) Hard candy lozenges

i) Center filled hard candy lozenges

Liquid filled

Fruit centers

Paste centers

Fat centers

ii) Chewy or caramel base medicated tablets

Caramels

Toffees

- B) Compressed lozenges
  - Tablets compressed in weight range of 1.5- 4 g .
  - Large in diameter.
  - Having desired area of activity on mucous membrane and mouth.
2. Non medicated lozenges
- \*sugar candies,
  - \*Lollypops.





## Cough Drop (Throat lozenges)

A Cough drop is medicated candy intended to deliver active ingredients which suppress or relieve the cough reflex. They are made just like hard candies. These are sweet in taste and good mouth feel characteristics.

BRANDS:

Capacol

Halls

Chloraseptic

Fishermans friend

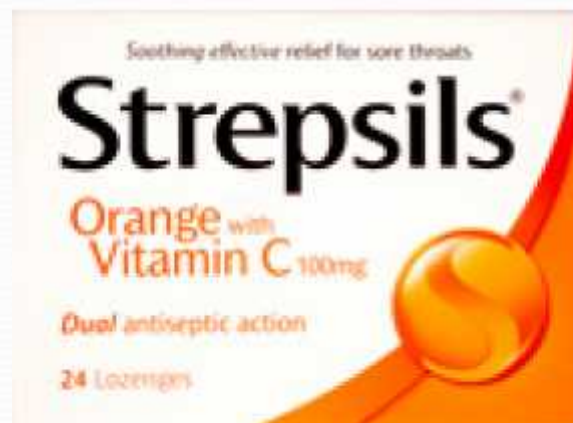
Lokerol

Lockets

Ricola

Strepsils

Vicks





# RAW MATERIALS

1. Hard candy lozenges

a) Sugars:

Dextrose, sucrose, corn syrup,

b) Acidulants:

Citric acid, Fumaric acid, Tartaric acid,

c) Colourants;

Dyes, Organic colourants.

d) Medicaments

Local anesthetics

Ex; Benzocain, Hexyl resorcinol,

Diperidon Hcl, Benzyl alcohol, Diclonine.



- E) Antihistamines;

Chlorpheniramine maleate , Phenyltolaxamine  
Dihydrogen citrate, Diphenhydramine HCl.

- F) Antitussives;

Dextromethorphan hydrobromide.

- g) Analgesics;

Aspirin, Acetaminophen.

- H) Decongestants;

Phenylpropanolamine HCl, d-pseudoephedrine  
HCl.

## A) For chewy or caramel base;

Candy base  
Humectants  
Lubricants  
Medicaments  
Seeding crystals  
Flavours



## B) Center filled hard candy lozenges



## 2) COMPRESSED TABLETS

### 1. Tablet base or vehicle :

a) Sugars: Dextrose, Nu-tab, Royal T, Di-pac, Sugar tab, Honey tab, Mola tab

b) Sugar free vehicles: Sorbitol, Mannitol, Poly ethylene glycol-8000,6000

c) Other fillers: Dicalcium phosphate, calcium sulphate, calcium carbonate, Lactose, Micro crystalline cellulose

### 2. Binders:

Acacia, corn syrup, Sugar syrup, Gelatin, Polyvinylpyrrolidone, Tragacanth, Methyl cellulose.

### 3. Colours:

Water soluble dyes and Lakolene dyes

# FORMULATION

## 1. Hard candy lozenges

A) Medicament-Flavour-Ground Salvage Method of Addition

B) Direct Medicament Addition

Ex: Analgesic lozenges(162.5mg or 4 gm)

Ingredient	Quantity
Liquid sugar(67.5%)w/w	88.9lb
cornsyrup	49.7lb
Ground candy solvage	2.0lb
Aspirin 100 mesh	1.85kg
Imitation orange flavour	35.0g
Menthol crystals	50.0g
Orange colour paste	12.0g





C) Medicament Addition via Granulation

D) Dual- Granulation Addition to Reduce chemical incompatibilities

E) Addition of Liquid salvage with colour

F) Addition of liquid salvage with colour and Medicament

2)Compressed based:

a)wet granulation techniques

b)Direct compression techniques



## Wet granulation techniques:

### Antitussive-Anesthetic Lozenges(2.5g)

Ingredient	Quantity
Dextromethorphan HBr	4.05%
Benzocaine	2 %
Confectioner sugar	58 %
Polyethylene glycol	15 %
Corn starch	12 %
Gelatin	3%
Spray dried powder	Q.S
Lakolene colour	Q.S
Magnesium stearate USP	0.5 %
Polyethylene glycol 8000	1.0 %



# MANUFACTURING OF LOZENGES

## 1. Hard candy lozenges:

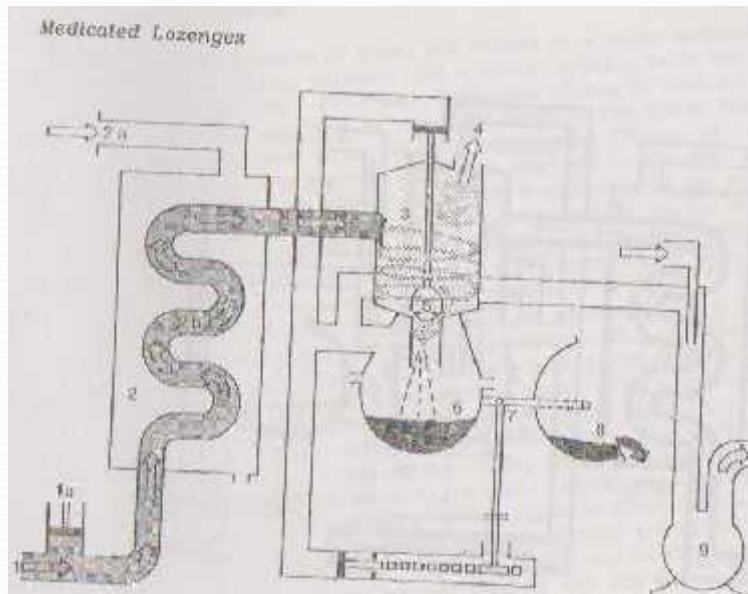
### A) Cooking

3 types of candy base cookers

a) Fire cookers

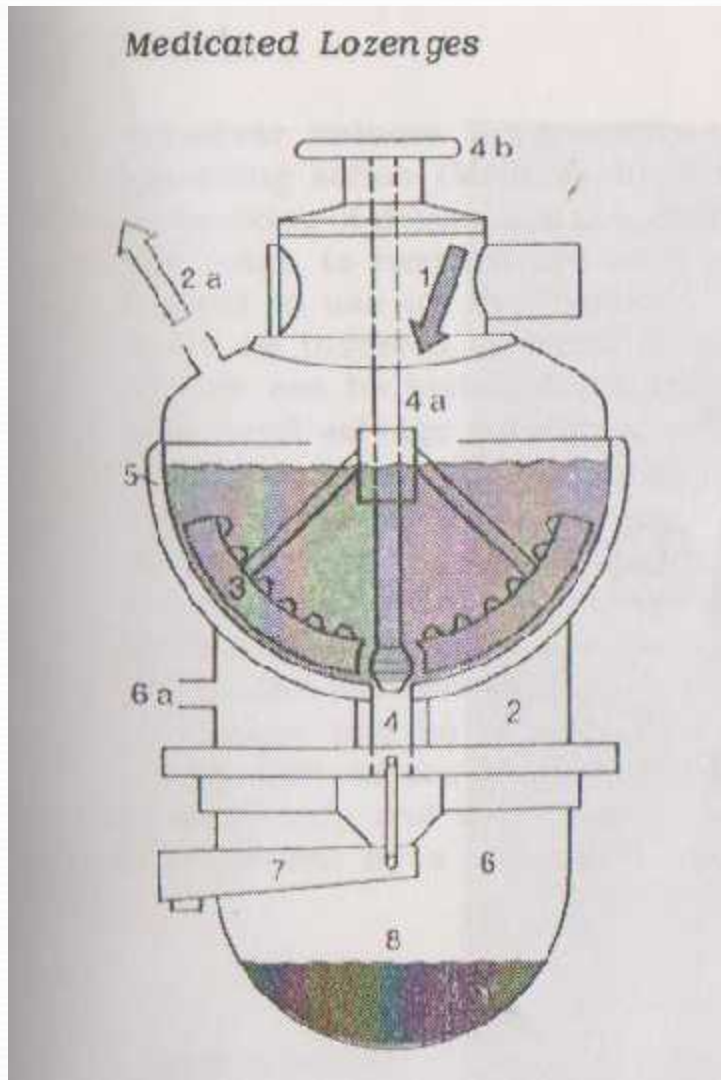
b) High speed atmospheric cookers

c) Vacuumed cookers



1. Precooked sugar glucose solution
- 1a. Feed pump
2. Steam chamber
- 2a. Steam supply
- 2b. Cooking coil
- 3 Vapours space
4. Extraction of vapours
5. Valve
6. Vacuum chamber
7. Pan swiveling device
8. Discharge pan
9. Vacuum pump

## B) Batch cookers



- \* Batch cookers working based on the principle of stirring .

- \* Produces lighter and more reproducible products.

1. Filling 2. Batch cooker 3. Beater 4a. Valve rod 4b. Valve operating wheel 5. Steam heating 6. Vacuum chamber 6a. Vacuum connection 7. Swivel device 8. Delivery pan with boiled sugar mass

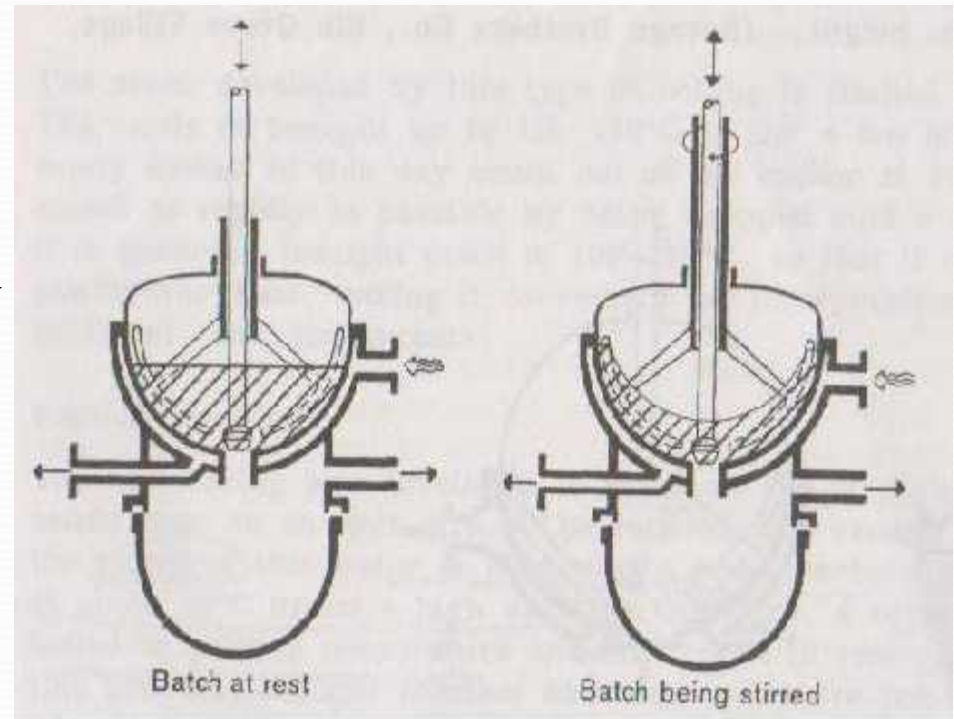
C) Pure sugar cookers:

\*The pure sugar cookers lend themselves to easy wash out sugar crystals which are formed on the sides of the kettle.

D) Standard vacuum cookers

\*continuous batch process cooker

\*Pre cooker





E) Cooking machines

F) Candy base preparation:

PRINCIPLE: The entire unit is heated to candy base cooking temperature by passing the steam into and around the copper coil.

G) Mixing

H) Batch processing

I) Rope sizing

J) Adjustment of weight

K) Lozenge formation

L) Cooling

M) Lozenge storage



2) Compressed Tablet lozenges

a) Wet granulation

Anaesthetics, Antitussives

b) Dry granulation

Analgesics, Antihistamine lozenges

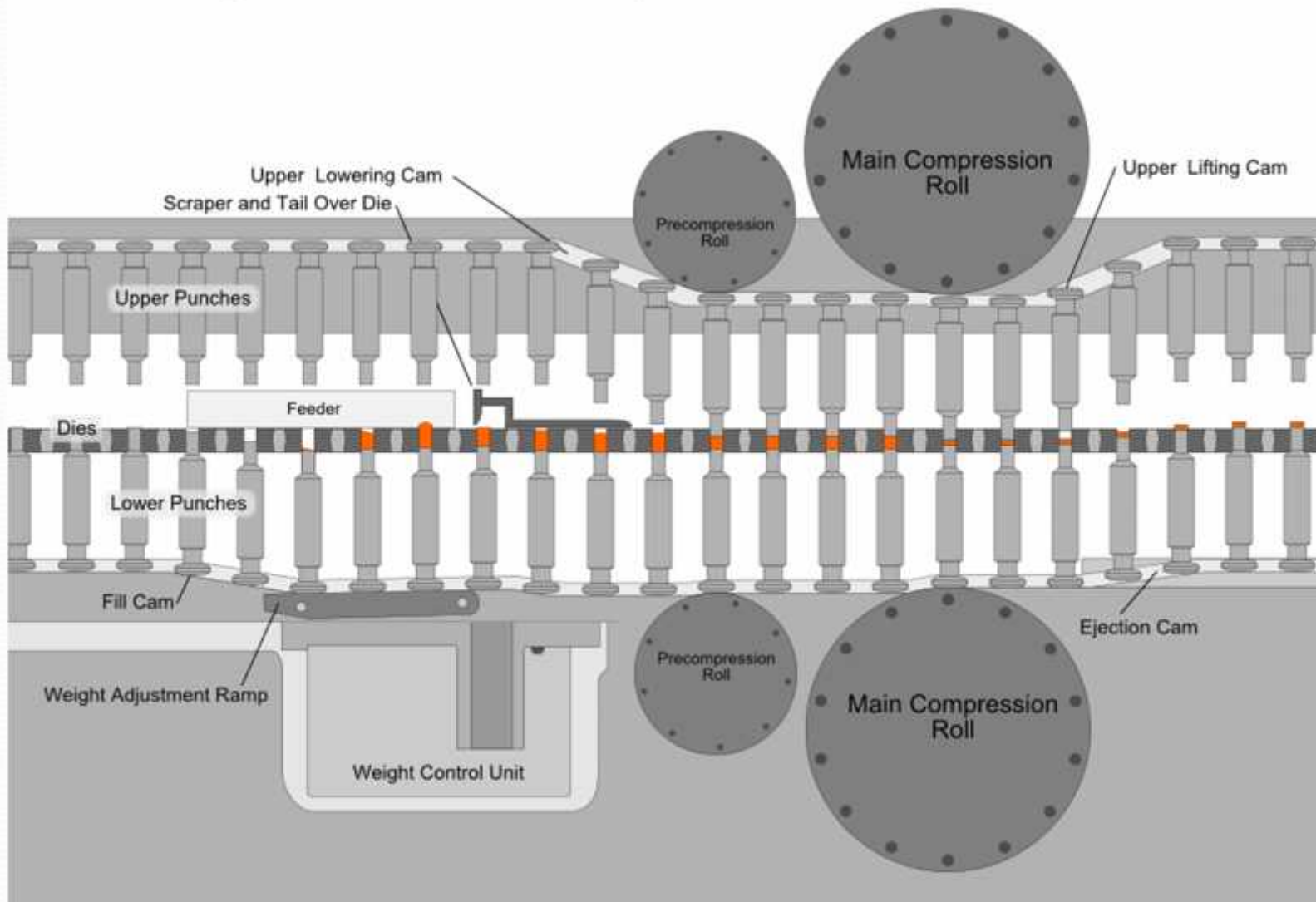
Compression sequences:

A) Die -filling

B) weight adjustment

C) Compression hardness

# Compression process





# Packaging:

a) Individual bunch wrap

it is Cellophane, Aluminium foil tissue paper impregnated with a wax or FDA food approved releasing agent.

b) Container

Plastic tubes, moisture resistant glass ,poly vinyl chloride or metal container over wrapped with cellophane or aluminium foil.



### c)Carton overwrap

Over wrapped with nitro cellulose cellophane or saran wrap and stored at 25c<sup>0</sup> with a relative humidity of 80%.

### d)Bundle wrap

Waxed aluminium foil, saran wrap, poly propylene, waxed paper used.

e)Foil pouches: They employs aluminium foil as thin as 0.0008inch laminated with poly ethylene and tissue paper.







## **STORAGE:**

The properly sized lozenges are transferred to a conditioning area i.e, maintained at a temperature of 15 to 20<sup>o</sup>c and controlled relative humidity of 25 to 35%.

# Quality control tests

- 1) General checks
  - \*Forming checks
  - \*cooling checks
  - \*Moisture analysis
- 2) Microbiological testing
  - Total plate count
  - Total coli form count
  - Staphylococcus ,Salmonella tests.



### 3)Batch release test

- \*Test for grittiness
- \*Dosage uniformity

### 4)Stability testing:

- \*Shelf life determination
- \*Flavour stability test

### Physical stability study:

- \*Colour
- \*odour
- \*Taste
- \*Hardness,
- \*Bunch wrap
- \*Appearance



# Recent advances

- The USP currently recognizes Cetyl pyridinium chloride Lozenges and Nystatine lozenges.
- Sublingual Zolpidem tartarate lozenge for the treatment of Insomnia was developed.
- Bacitracin was developed in the form of lozenge for the treatment of infections caused after burns, scars etc.,.



# Nicotine lozenges

- These are the newest form of Nicotine replacement therapy on the market. The FDA recently approved the first Nicotine-containing lozenge as an over-the-counter aid in smoking cessation.
- These are available in 2 strengths: 2 mg and 4 mg.



## CONCLUSION

- Lozenges are medicated confections designed to locally deliver drug to mouth and throat.
- Provide slow dissolution and drug release.
- These are totally different from other dosage forms in terms of ingredients, method of manufacturing ,therefore require specialized facilities.
- For these and other reasons, lozenges are produced by few pharmaceutical manufacturers and represent a very small percentage of pharmaceutical sales .



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*THANK  
YOU*