

(Review)

Review on different analytical techniques for analysis of atenolol alone or in combination with other antihypertensive drugs in different matrices

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ABSTRACT

Several analytical techniques were reported for the analysis of atenolol (antihypertensive) either in pharmaceutical dosage forms or in biological samples by various analytical techniques including HPLC, spectrophotometry, fluorimetry, and electrochemical methods. This article includes important information about the cited drug involving physical and chemical characteristics in addition to its pharmacological actions. Atenolol is a β -adrenoreceptor blocker that is used for hypertension, myocardial infarction, and angina. It works via inhibition of renin release, angiotensin -II, and aldosterone production. Atenolol is combined with several antihypertensive agents like losartan, amlodipine, and nifedipine. This review is concerned with different analytical methods of atenolol either alone or with others. The most common method that is used for the analysis of the studied drug is the chromatographic technique then spectroscopy. Fluorimetric and electrochemical methods were used mostly for the determination of atenolol in biological fluids. All methods were validated according to ICH.

Keywords: Atenolol; Analytical methods; antihypertensive.

1. Introduction

Atenolol is a β -adrenoreceptor blocker used for hypertension, myocardial infarction (MI), and angina. It works via inhibition of the release of the renin, angiotensin –II [1].

Atenolol **Figure 1** is 2-[4-{(2RS)-2- hydroxy-3-[(1-methyl ethyl) amino] propoxy} phenyl] acetamide. A white powder, soluble in water, acetonitrile, and acetic acid, sparingly soluble in ethanol, acetone, dioxane, dichloromethane, and chloroform [1]. Physically it was found as a white to slightly yellow crystalline powder and has good solubility in water, practically insoluble in chloroform, methyl alcohol, and benzene. Solutions are stable at pH 2.5 - 4.5 and stored in airtight containers [1, 2].

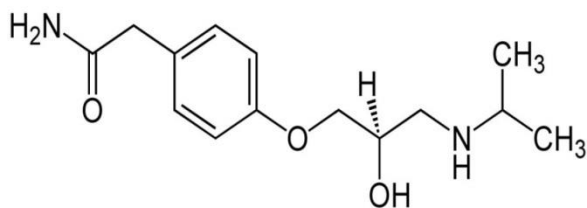


Fig.1. Chemical structure of Atenolol

This article was developed to discuss various analytical techniques that were reported for the analysis of atenolol. These techniques included spectrophotometric, spectrofluorimetric, electrochemical, and chromatographic methods.

2. Analytical methods

Several methods have been reported for the determination of atenolol in pure samples, pharmaceuticals, and biological fluids.

2.1. Titrimetric methods:

- Atenolol is titrated in glacial acetic acid with acetous perchloric acid using crystal violet as an indicator of the visual endpoint [3].
- A titrimetric method involving the oxidation of atenolol by a measured excess of chloramine-T in an acid medium followed by the determination of the residual oxidant by iodometric back titration had been reported for the determination of bumadizone [4].

- Another titrimetric method for the determination of atenolol was reported based on back titration with a bromate-bromide mixture in a hydrochloric acid medium, and the unreacted bromine was determined iodometrically [5].
- Another titrimetric method based on the treatment of atenolol with a measured excess of cerium (IV) sulfate in sulphuric acid medium followed by determination of the residual oxidant by back titration with ammonium ferrous sulfate using a ferroin indicator had been developed for the determination of atenolol [6].

2.2. UV-Visible spectrophotometric methods:

There are many reports on the UV-spectrophotometric determination of atenolol in dosage forms when present in combination with other drugs including:

- Atenolol with amlodipine has been estimated by using different methods including:
 - Vierodt's Method: Atenolol and amlodipine were measured at 224.6 nm and 239.6 nm respectively [7].
 - Vierodt's Method: The λ_{\max} values for amlodipine and atenolol in the solvent medium were found to be 238.4 nm and 273.4 nm respectively [8].
 - Vierodt's Method: Then spectra of amlodipine and atenolol exhibit λ_{\max} of 239 nm and 228 nm respectively [9].
 - Simultaneous equation and Q analysis method: based on measuring the absorptivity at 224.4 nm and iso-absorptive point at 232.2 nm [10].
 - Dual wavelength method: Two wavelengths 209 and 244.5 nm were chosen for atenolol the absorbance difference was found to be almost zero [11].
 - Another dual wavelength method at which the wavelengths selected for the determination of atenolol were 230 nm and 242 nm, whereas, the wavelengths selected for the determination of amlodipine were 263nm and 277nm [12].
 - Derivative spectrophotometric method: The obtained spectra were derivatized to obtain third-order derivative spectra [13].

- Zero crossing technique: Atenolol has absorbance maxima at 223 nm and amlodipine has absorbance maxima at 238nm. The interference of amlodipine at 228nm (wavelength for estimation of atenolol) was removed by using absorbance at 245nm; whereas estimation of amlodipine was done directly from its absorbance at 377 nm at which atenolol showed no absorbance [14].
- Absorbance ratio method: The quantitation of amlodipine and atenolol was done at wavelengths, 240 nm (λ max for Amlodipine) and 231 nm, (an isosbestic point) [15].
- Derivative spectroscopy: Involves the conversion of a normal spectrum (fundamental, zero-order, or D spectrum) to its first, second, or higher derivative spectrum by differentiating absorbance of a sample concerning wavelength λ for higher accuracy [15].
- Area under the curve: This method also utilizes two wavelength ranges. From the overlain spectra of both drugs, the area under the curve is determined at both the selected analytical wavelength ranges [15].
- Absorption factor method: The scanned spectra of amlodipine were measured at 226 nm and 360 nm [16].
- Ratio difference method: The stored spectra of atenolol were divided by the spectrum of 24 $\mu\text{g/mL}$ amlodipine. Calibration curves of Atenolol were constructed by plotting the difference between the amplitudes of ratio spectra at 210 and 226 nm, versus its corresponding concentrations and the regression equation was computed [16].
- Mean centering of the ratio spectra: The scanned spectra were exported to Matlab® for subsequent calculation, then the spectra of atenolol were divided by the absorption spectrum of the standard solution of amlodipine, and the obtained ratio spectra were mean-centered. The calibration curve for atenolol was constructed, by plotting the mean-centered values at 284 nm versus corresponding concentrations and the regression equation was computed [16].

Atenolol in combination with other drugs has been determined by several methods.

➤ With Losartan:

- Absorption ratio method (Q-Analysis) zero crossing method with losartan potassium at 275 nm for atenolol and 282 nm for losartan. [17].

- Artificial neural networks: Several concentrations of atenolol and losartan potassium were measured in the wavelength range (215-275) nm, interval 1 nm, to be used in computing the composition of the calibration mixture [18].
- Vierordt's simultaneous equation method: The maximum absorbance of atenolol and losartan potassium was found to be 223.6 nm & 205 nm respectively [19].
- Extractive spectrophotometric method: The method was based on the formation of colored complexes with reagents like ferroin solution and methyl orange. The ion-pair complex formed was extracted using chloroform and the absorbances of the organic layers were measured at 571 nm and 426 nm for losartan potassium and atenolol respectively [20].

➤ With hydrochlorothiazide:

- First-order derivative spectroscopy, using 214 nm (zero cross for atenolol) and 241 nm (zero cross for hydrochlorothiazide) [21].
- The area under the curve method involved the measurement of areas between 221 to 231 nm and 265 to 275 nm for the estimation of atenolol and hydrochlorothiazide respectively [22].
- Second-order derivative spectrophotometry, which involved measuring the amplitude values at 226 nm and 270 nm of the second derivative spectrum [22].
- With losartan and hydrochlorothiazide separately: by solving simultaneous equations using (251.6 nm and 224.2 nm) for losartan potassium and atenolol, (224.2 and 271.6) for atenolol and hydrochlorothiazide [23].

➤ With atorvastatin:

The method was based on the determination of atenolol and atorvastatin at their λ max 225 nm and 241 nm, respectively [24].

➤ With lercanidipine:

- Ratio derivative: 266.98 nm and 386.97 nm wavelength were selected to determine atenolol and lercanidipine respectively [25].

- Dual wavelength: two wavelengths were chosen for each drug, at wavelengths 234.01 nm and 238.66 nm lercanidipine had equal absorbance therefore these two wavelengths were used to determine atenolol and at 253.33 nm and 286.07 nm were chosen to determine lercanidipine in their combined mixture [25].
- Q Analysis: Employs 261 nm as λ_1 (Isosbestic point) and 273 nm as λ_2 (λ max of atenolol) for formation of equations [26].
- Simultaneous equation method: where the absorbances of these drugs were maximum. So λ max for lercanidipine hydrochloride and atenolol was 242 and 273 nm respectively [26].

➤ With Chlorthalidone:

- The first method depends on the first derivative of the ratio spectra by measurement of the amplitudes at 235 nm for atenolol and (236,249 nm) for chlorthalidone [27].
- The second method is the factorized absorptivity method at which both drugs are determined at more than one isosbestic point at (265, 284.5 nm) [27].
- The third method involved the application of the bivariate calibration algorithm for spectrophotometric simultaneous determination of the mixture [27].
- Partial least square chemometric method [28].
- UV-Spectrophotometry: The λ_{max} of atenolol and chlorthalidone were found to be 225 nm and 284 nm respectively [29].

➤ With nifedipine:

- Partial least squares (PLS) and principal component regression (PCR) chemometric methods. [30].
- Simultaneous equation method: The λ_{max} was found to be 341.2 nm for nifedipine and 273.8 nm for atenolol [31].
- Absorption correction method: Atenolol and nifedipine had λ_{max} at 276.5 nm and 328.5 nm respectively [32].

- First-order derivative zero-crossing method: Atenolol showed a zero-crossing point at 226.5 nm while nifedipine showed a zero-crossing point at 235 nm [32].

- With indapamide:
 - Simultaneous equation: The signals were measured at 225 nm and 240 nm corresponding to absorbance maxima of atenolol and indapamide respectively [33].
 - Simultaneous equation: The signals were measured at 246.4 nm and 266 nm for atenolol and indapamide [34].
 - Dual wavelength method: Atenolol was measured at 266 nm and 270.2 nm [34].
 - Ratio subtraction method: A calibration curve was constructed relating the absorbance of zero-order spectra of atenolol at λ_{max} 225 nm [35].
 - Bivariate method: The absorbance was measured at 220 and 240 nm [35].
 - Area under the curve method: The area under the curve for the wavelength ranges selected for the determination of atenolol and indapamide was 220-230 nm (λ_1 - λ_2) and 235-245 nm (λ_3 - λ_4) [35].

- There are many reports on the UV-spectrophotometric determination of atenolol alone in dosage forms including:
 - Using Bromate-Bromide mixture as an eco-friendly brominating agent: The methods were based on the bromination of atenolol by the bromine followed by the determination of unreacted bromine by reacting with either meta-cresol purple or eriochrome and measuring the absorbance at 540 nm, 630 nm respectively [36].
 - Via hydroxamic acid formation: forms a reddish violet colored complex with Iron (III) in an acidic medium having maximum absorbance at 510 nm [37].
 - Application of bromate-bromide mixture as a green brominating agent: The methods were based on the bromination reaction of atenolol with a known excess of the bromate-bromide mixture in acid medium followed by the determination of unreacted bromine. The residual bromine was determined by its reaction with excess iodide and the liberated iodine was either

measured at 360 nm (method A) or reacted with starch followed by the measurement of the starch-iodine chromogen at 570 nm (method B) [38].

- Using sodium nitroprusside reagent: Based on the determination of atenolol in basic media followed by the addition of sodium nitroprusside to generate a colored complex that absorbed at 495 nm [39].
- A spectrophotometric method: This assay involved the absorbance measurement of atenolol solution in 0.1 N sodium hydroxide at 273nm [40].
- Via complex formation: The methods were based on the formation of a colored complex between the drug and metal ions like Fe (III) chloride and Cr (III) sulfate. The maximum absorption wavelength was 454 nm for the Fe(III)-Atenolol complex and 594 nm for Cr(III)-Atenolol complex [41].
- Via charge transfer complex formation reaction: The methods were based on the charge transfer complexation reaction of atenolol as an n-electron donor with 2,3-dichloro-5,6-dicyano-1,4-benzoquinone (DDQ), 2,4-dinitrophenol (DNP) and 2,4,6-trinitrophenol (picric acid; PA) as π -acceptors to give highly colored radical anion species. The colored products were quantified spectrophotometrically at 590 nm with DDQ and at 420 nm with both DNP and PA [42].
- A spectrophotometric method: Atenolol reacts with phenol red and the resulting yellow-colored product was measured at 430 nm [43].
- Kinetic method: Based on the oxidation of atenolol by a known excess of permanganate in an alkaline medium and unreacted permanganate was measured at 526 nm by rate-constant, constant-concentration and constant-time methods [44].
- Spectrophotometric methods: involve the addition of an excess of Ce^{4+} and the determination of the amount of unreacted oxidant by reacting with ferroin or methyl orange, and measuring the increase in absorbance at 510 nm or 520 nm respectively [45].
- Another charge-transfer complex formation method: In this method 2,3-dichloro-5,6-dicyano-p-benzoquinone (DDQ) was utilized for the determination of atenolol forming charge transfer complex with maximum absorbance at λ_{max} 405 nm [46].
- UV- Spectrophotometry: Atenolol exhibited maximum absorbance at 273.2 nm in ammonium acetate solution [47].

- Two derivative spectrophotometric methods were described for the determination of atenolol. In first derivative spectrophotometry, absorbance values were measured at 273, 276, and 285 nm [48]. In second derivative spectrophotometry, absorbance values were measured at 276, 279, 282, and 287 nm [48].
- UV- Spectrophotometry: Based on the oxidation of atenolol with excess quantities of oxidants, N-bromosuccinimide (NBS) and nitrous acid. The excess NBS was determined using a dye celestine blue (CB) at λ_{max} 540 nm, while the excess nitrous acid was determined using a dye cresyl fast violet acetate CFVA at λ_{max} 555nm [49].
- UV- Spectrophotometry: The method was based on the measurement of the absorbance of atenolol solution in (10% methanol:90% phosphate buffer pH 6.8) at 224 nm [50].
- Derivatization of atenolol with 1,2-naphthoquinone-4-sulfonic (NQS) and the formed color measured at 454 nm [51].
- By using a hydrotropic solubilizing agent, the primary objective of the addition of this agent was to employ these hydrotropic solutions to improve the solubility of the poorly soluble drug, without the use of costlier organic solvents. The selected wavelength for atenolol was 275 nm [52].
- Another charge-transfer method based on the oxidization of the drug by a known excess of chloramine-T followed by the determination of the unreacted oxidant by a charge-transfer complexation reaction involving metal and sulphanilic acid was reported. The reacted oxidant amount corresponds to the drug content. The colored species exhibits maximum absorbance at 520 nm [53].
- Via ion pair formation method: The method was based on the formation of ion-pair between atenolol and bromothymol blue measured at 414 nm [54].
- Another ion-pair formation method: The method depends on the interaction of the drugs with 0.1% chloroform solutions of acidic sulphophthalein dyes to form stable, yellow-colored, ion-pair complexes measured at 415 nm [55].

2.3. spectrofluorimetric methods:

- A Spectrofluorimetric method based on a native fluorescence of atenolol was developed for the determination of atenolol in pure and pharmaceutical preparation. λ_{ex} 276 nm and λ_{em} 296 nm [56].

- Another reported spectrofluorimetric method was based on the reaction of atenolol with 0.1 N sodium hydroxide, which shows strong fluorescence. λ_{ex} at 278 nm and λ_{em} at 302 nm [57].
- Spectrofluorimetric method for the determination of atenolol was reported based on a native fluorescence of atenolol in human urine and the λ_{ex} was at 277 nm and λ_{em} was at 300 nm [58].
- A spectrofluorimetric method was based on the reaction of atenolol as n-electron donors with the fluorogenic reagent 9,10-dimethoxy-2-anthracene sulfonate (DMAS) as a π -acceptor in an acidic medium. The obtained ion pairs were extracted into chloroform. λ_{ex} at 385 nm and λ_{em} at 452 nm [59].
- Multivariate calibration method (partial least squares) combined with second-order data obtained from excitation-emission fluorescence matrices to determine atenolol in urine [60].
- A micellar-stabilized room-temperature phosphorescence (MS-RTP) method: maximum phosphorescence signal was completely developed in 10 min and the intensity was measured at λ_{ex} at 272 nm and λ_{ex} at 412 nm [61].

2.4. Electrochemical methods:

- Voltammetric method: Determination of atenolol at multi-walled carbon nanotubes modified glassy carbon electrode [62].
- Voltammetric oxidation: Determination of atenolol using a carbon paste electrode [63].
- Voltammetric method: Determination of atenolol at C-60 modified glassy carbon electrodes [64].
- Using graphite-polyurethane composite electrode as an amperometric flow detector in the determination of atenolol [65].
- Voltammetric method: Using nanogold-modified carbon paste electrode (GN-CPE) for the determination of atenolol in pharmaceutical formulations and urine [66].
- By graphite-polyurethane composite electrode: bare graphite-polyurethane composite was evaluated as an alternative electrode in the determination of atenolol in pharmaceutical formulations [67].

- Square-wave voltammetric determination of atenolol in pharmaceuticals using a boron-doped diamond electrode [68].
- Differential pulse voltammetric determination of atenolol in pharmaceutical formulations and urine using nanogold-modified indium tin oxide electrode [69].
- Electrochemical sensor based on gold nanoparticles/multiwall carbon nanotubes-modified glassy carbon electrode for selective determination of traces of atenolol was reported [70].
- Atenolol with propranolol was determined electrochemically using a platinum nanoparticle-doped multi-walled carbon-nanotube-modified glassy carbon electrode as a sensor [71].
- Atenolol with acetaminophen was determined electrochemically using a gold nanoparticle-modified carbon paste electrode as a sensor [72].
- Voltammetric method: Nanogold-modified carbon paste electrode for the determination of atenolol in pharmaceutical formulations and urine [73].
- Application of N-4,4'-azodianiline (ferrocenyl Schiff base): For electrocatalytic determination of atenolol on modified carbon paste electrode [74].

2.5. Chromatographic methods:

2.5.1. Capillary electrophoresis (CE) methods:

➤ Atenolol in Combination with:

- Chlorthalidone: The Capillary electrophoresis using the following conditions: capillary temperature, 25°C; applied voltage, 25 kV; 20 mM H₃PO₄-NaOH running buffer (pH 9.0); and detection at 198 nm [75].
- Amiloride: Capillary electrophoresis coupled with a capacitive coupled contactless conductivity detector (CE-C(4)D). The separation was carried out in normal polarity mode at 28 °C, 25 kV, and using hydrodynamic injection (25 s) [76].
- Other complementary anti-hypertensive agents in urine: The electrophoretic separation was performed using a 78-cm x 75-micron-i.d. (70-cm effective length) fused-silica capillary. A borate buffer (pH 9) was used as a running electrolyte. The sample was hydrostatically introduced for 20 s, and the running voltage was 25 kV at the injector end of the capillary [77].

- In tertiary mixture with amiloride and chlorthalidone: The separation was carried out in normal polarity mode at 25 degrees C, 25 kV, and using hydrodynamic injection (10 s). The separation was done in an uncoated fused-silica capillary (75 μ m i.d. x 52 cm) and a background electrolyte of 25 mM H₃PO₄ adjusted with 1 M NaOH solution (pH 9.0) and detection at 198 nm. Using phenobarbital as an internal standard, the analytes were all separated in less than 4 min [78].
- Atenolol alone By CE methods:
 - Determination of atenolol in the presence of its related substances in bulk and tablet dosage form [79].
 - The electrophoretic separation was performed using a 78 cm \times 75 μ m I.D. fused silica capillary. The electrolyte consisted of a buffer Na₂HPO₄ (25 mM)-Na₂B₄O₇ (25 mM) (50-50) v/v, pH 9.7. The introduction of the sample was made hydrostatically for 25 s and the running voltage was 20 KV at the injector end of the capillary. Photometric detection was used and a wavelength of 214 nm [80].
 - The capillary zone electrophoretic method was optimized for the determination of atenolol in plasma. Separation was performed in an uncoated silica capillary of 58.5 cm (effective length 50 cm x 75 micron I.D.,) and detection was at 194 nm [81].

2.5.2. Thin layer chromatographic methods:

- Densitometric evaluation of thin layer chromatograms of atenolol in tertiary mixture with amlodipine and hydrochlorothiazide: The chromatographic separation of the drugs was performed on aluminum plates pre-coated with silica gel 60 F254 as the stationary phase and the solvent system consisted of chloroform: methanol: acetic acid (8: 2: 0.2) by volume. The scanning was done at 232 nm [82].
- Densitometric evaluation of thin layer chromatograms of atenolol in a binary mixture with aspirin: using mobile phase n-butanol: water: acetic acid (8: 2: 0.2) by volume [83].
- Thin layer chromatographic separation of atenolol in a binary mixture with nitrendipine: the mobile phase was chloroform: methanol: toluene: 25% ammonia (2:2.5:5.5:0.1) by volume [84].

- Using HPTLC for separation of atenolol in binary mixture with losartan: The chromatographic separation was done using a Camag HPTLC system consisting of Camag Linomat V automatic sample applicator, Camag syringe, Camag TLC scanner 3, Camag WinCats software and Camag twin trough chamber, with pre-coated Silica Gel 60 F-254 aluminum sheets as stationary phase and ethyl acetate: methanol: 1,4 dioxane: ammonia (10: 2: 1: 2) by volume as the mobile phase. The scanning was done at 225nm [85].
- Densitometric method of atenolol in a binary mixture with lercanidipine using toluene: methanol: triethylamine (3.5: 1.5: 0.1) by volume as mobile phase. Detection was performed at 275 nm [86].
- Thin layer chromatographic separation of atenolol in a binary mixture with chlorthalidone and their degradation products using silica gel plates and chloroform: methanol: ethyl acetate: ammonia solution (75: 28: 2: 1.6) by volume at 227 nm [87].

2.5.3. Gas chromatographic (GC) methods:

- Atenolol was determined in human urine by gas chromatography-mass spectrometry (GC-MS): atenolol and metoprolol (internal standard, IS) were extracted from human urine with a mixture of chloroform and butanol at basic pH with liquid-liquid extraction. The extracts were derivatized with N-Methyl-N-(trimethylsilyl) trifluoroacetamide (MSTFA) and analyzed by GC-MS using a capillary column [88].
- Atenolol in whole blood, serum, tissue, and urine was reported to be determined by gas chromatography: The method involves the extraction of the free base from the prepared biological sample into an organic solvent mixture [89].
- Another method describes the validation of gas chromatography with flame ionization (FID) and mass spectrometric (MS) detection after derivatization with N-Methyl-N-(trimethylsilyl) trifluoroacetamide (MSTFA) for the determination of atenolol with an internal standard (Metoprolol) in pharmaceutical preparations [90].

2.5.4. HPLC methods:

Several HPLC methods have been reported for the analysis of atenolol, as maintained in Table (1).

Table (1): HPLC methods reported for the determination of Atenolol:

Matrix	Column	Mobile phase	Detection	Ref No.
		Atenolol alone		
Pharmaceutical preparations	Inertsil ODS C ₁₈	Phosphate buffer: acetonitrile (53:47) v/v	UV-230 nm.	[91]
Pharmaceutical preparations	Waters μ bondapak C ₁₈	Acetonitrile: sodium phosphate monobasic pH 3.0 (10:90) v/v.	UV-284 nm.	[92]
Plasma and urine	Ultrasphere ODS C ₁₈	(29/80 Acetonitrile/H ₂ O, 1% acetic acid, 5 mM heptane sulfonic acid, 2.5 mM triethylamine).	Fluorescence $\lambda_{\text{ex}} = 222$.	[93]
Pharmaceutical preparations	Purospher RP-C ₁₈	Ammonium acetate buffer (pH 7.0) and acetonitrile (80:20) v/v.	UV- 226 nm.	[94]
Human plasma	Ace C ₁₈ reverse-phase	Methanol-water containing 0.1% trifluoroacetic acid (50:50) v/v.	Fluorescence $\lambda_{\text{ex}} = 276$ nm. $\lambda_{\text{em}} = 296$ nm.	[95]
Pharmaceutical preparations	Hibar 100 RP- C ₈	Acetonitrile : methanol: 0.02 M phosphate buffer, pH 5 (20:20:60) by volume.	UV - 226 nm.	[96]
Pharmaceutical preparations	hypersil RP-C ₁₈	Acetonitrile: methanol: KH ₂ PO ₄ (250:250:500) by volume.	UV - 237 nm.	[97]
Human plasma	Kromasil KR100-5sil	5% Acetonitrile and 95% formate buffer.	Tandem mass spectrometry.	[98]
Pharmaceutical preparations	Atlantis d RP- C ₁₈	Ammonium acetate: methanol (60:40) v/v.	UV - 225 nm.	[99]
Pharmaceutical preparations	Purospher start C ₁₈	Methanol: water (80:20) v/v.	UV - 224 nm.	[100]

In vitro studies	Phenomenex C ₁₈ – RP	Ammonium acetate: methanol (75:25) v/v.	UV - 225 nm.	[101]
Human plasma	ODS-3 C ₁₈ inertsil	Dichloromethane: 2-propanol (75:25) v/v.	Fluorescence λ _{ex} = 228 nm. λ _{em} = 298 nm	[102]
Pharmaceutical preparations	Chiralcel AGP C ₁₈	Sodium phosphate buffer : methanol (95:5) v/v.	UV - 225 nm.	[103]
Human plasma	A Brownlee cartridge spheri-5 cyano analytical column	Aqueous solution containing 5 mM triethylamine, 10 mM phosphoric acid and 7 mM 1-octanesulfonic acid sodium salt with: acetonitrile (60/40) v/v.	(DAD).	[104]
Pharmaceutical preparations	Inertsil ODS C ₁₈	Water and acetonitrile (50:50v/v).	UV - 228 nm.	[105]
Whole blood	Nucleosil C ₁₈	Acetonitrile, methanol in 0.05 M phosphate-triethylamine buffer, pH 3.3.	Fluorescence detection.	[106]
Atenolol in combination with amlodipine				
Pharmaceutical preparations	Shim-pack CLC, ODS C ₁₈	Ammonium acetate buffer, acetonitrile, and methanol (35: 30: 35) by volume.	UV - 237 nm.	[107]
Pharmaceutical preparations	BDS C ₁₈	K ₂ HPO ₄ pH 5: methanol: acetonitrile (40:30:30) by volume.	UV - 213 nm.	[108]
Pharmaceutical preparations	Hypersil, BDS	Potassium dihydrogenate phosphate : acetonitrile (62:38) v/v.	UV - 238 nm.	[109]

Pharmaceutical preparations	Welchrom RP-C ₁₈	Phosphate buffer (pH 3.0): acetonitrile (50:50, v/v).	UV - 235 nm.	[110]
Pharmaceutical preparations	Waters, USA C ₁₈	Methanol: acetonitrile: buffer (55:10:35) by volume.	UV - 237 nm.	[111]
Pharmaceutical preparations	RP- stainless steel ODS C ₁₈	Potassium buffer: acetonitrile (50:50) v/v.	UV - 237 nm.	[112]
Pharmaceutical preparations	Thermo-hypersil keystone C ₁₈	0.05 M of Potassium dihydrogen orthophosphate in water.	UV - 230 nm.	[113]
Atenolol with amlodipine and aspirin				
Pharmaceutical preparations	Cosmosil C ₁₈ -MS-II	Acetonitrile: ammonium acetate buffer pH 4.6 (80:20) v/v.	UV - 233 nm.	[114]
Pharmaceutical preparations	Thermo hypersil BDS-C ₁₈	Methanol: 10 mM phosphate buffer with pH 7.0 adjusted with orthophosphoric acid (70: 30) v/v.	UV - 235 nm.	[115]
Atenolol with losartan				
Pharmaceutical preparations	Symmetry C ₁₈	Phosphate buffer: methanol: Acetonitrile (30:20:50) by volume.	UV - 234 nm.	[116]
Pharmaceutical preparations	Develosil C ₁₈	1%TEA: acetonitrile (60:40) v/v.	UV - 237 nm.	[117]
Pharmaceutical preparations	Supelcosil ODS C ₁₈	Acetonitrile : KH ₂ PO ₄ (45:55) v/v.	UV - 227 nm.	[118]
Atenolol in combinations with losartan and hydrochlorothiazide				

Pharmaceutical preparations	Phenomenex luna 5 μ CN 100 R	Acetonitrile: 0.2% of phosphate buffer pH 2.8 (50:50) v/v.	UV - 230 nm.	[119]
Pharmaceutical preparations	Phenomenex C ₁₈	Acetonitrile: KH ₂ PO ₄ (pH 3.5) (50:50) v/v.	UV - 270 nm.	[120]
Pharmaceutical preparations	Luna C ₁₈ phenomenex	(A) Acetonitrile: methanol (65:35) and (B) 10 mM sodium dihydrogen phosphate monohydrate buffer with 0.4% v/v triethylamine and mixture of A:B (60:40) v/v.	UV - 230 nm.	[121]
Pharmaceutical preparations	C ₁₈	0.035 M potassium dihydrogen orthophosphate, acetonitrile.	UV - 225 nm.	[122]
Pharmaceutical preparations	Hypersil gold	Methanol: water (95:5) v/v.	UV - 225 nm.	[123]
		Atenolol with losartan and atorvastatin		
Pharmaceutical preparations and plasma	KYA TECH HiQ Sil C ₁₈ HS	Acetonitrile: 0.02 M KH ₂ PO ₄ buffer (70:30) v/v pH 3.4 .	UV - 236 nm.	[124]
		Atenolol with hydrochlorothiazide and chlorthalidone		
Pharmaceutical preparations	Supelcosil LC-8-DB	Ammonium acetate and octane sulfonic acid sodium salt in acetonitrile : water (25 : 75) v/v.	UV - 232 nm.	[125]
		Atenolol with hydrochlorothiazide		
Pharmaceutical preparations	Zorbax SB-CN	Water: buffer: methanol (50:35:15) by volume.	UV - 286 nm.	[126]

Atenolol with chlorthalidone				
Spiked human plasma	Shim-pack cyanopropyl	KH ₂ PO ₄ (pH 6.0) : methanol (70:30) v/v.		UV - 225 nm. [127]
Pharmaceutical preparations	Xterra RP ₈	KH ₂ PO ₄ : methanol (50:50) v/v.		UV - 240 nm. [128]
Human breast milk.	Luna CN phenomenex	Acetonitrile : water (35:65) v/v.		UV - 225 nm. [129]
Pharmaceutical preparations	Comosil	Methanol: water (60: 40) v/v.		UV - 226 nm. [130]
Human plasma	ODS	Sodium dodecyl (pH 5.8): n-propanol (95:5) v/v.		UV for Chlorthalidone , fluorometric for atenolol. [131]
Atenolol with lercanidipine				
Pharmaceutical preparations	Phenomenx gemini C ₁₈	Methanol: water (95:5) v/v.		UV - 235 nm. [132]
Pharmaceutical preparations	Phenomenex Gemini C ₁₈	Acetonitrile: KH ₂ PO ₄ buffer	(55:45) v/v.	UV - 235 nm. [133]
Pharmaceutical preparations	Luna C ₁₈	Acetonitrile: phosphate buffer pH 3.6 (60:40) v/v.		UV - 235 nm. [134]
Pharmaceutical preparations	X-terra RP-C ₁₈	Acetonitrile: methanol : KH ₂ PO ₄ buffer (50:10:40) by volume.		UV - 226 nm. [135]
Pharmaceutical preparations	Inertsil 3V ODS	Ammonium acetate: THF: acetonitrile (35:10:55).		UV - 221 nm. [136]
Atenolol with nifedipine				

Pharmaceutical preparations	Agilent ODS C ₁₈	Methanol : acetonitrile : phosphate buffer (60:20:20) by volume.	UV - 235 nm.	[137]
Pharmaceutical preparations	Phenomenex ODS 3	Methanol : water : phosphate buffer : suitable quantity of sodium heptane sulfonate (65:35:3:0.13) v/v/v/w.	UV - 240 nm.	[138]
Pharmaceutical preparations	ODS - C ₁₈ metaphase	Phosphate buffer : methanol pH 4.0 (50:50) v/v.	UV - 237 nm.	[139]
Atenolol with indapamide				
Pharmaceutical preparations	Waters C ₁₈	Methanol : water (80:20) v/v.	UV - 230 nm.	[140]
Pharmaceutical preparations	Gemini C ₁₈	Acetonitrile : 0.02M KH ₂ PO ₄ (50: 50) v/v.	UV - 241 nm.	[141]
Pharmaceutical preparations	Xterra® C ₁₈	Octane sulphonic acid, sodium salt : methanol (55:45) v/v.	UV - 235 nm.	[142]
Pharmaceutical preparations	Intelligent C ₁₈	Methanol : water : diethylamine : glacial acetic acid (70 : 30 : 0.12 : 0.08) by volume.	UV - 240 nm.	[143]
Pharmaceutical preparations	Symmetry X-Terra C ₈	KH ₂ PO ₄ : acetonitrile (40: 60) v/v.	UV - 240 nm.	[144]

3. Conclusion:

This review includes the majority of analytical methods used for the quantification of atenolol in different matrices so; it will help every analyst to be aware of all the analytical methods used for the analysis of the studied drug. The most used analytical technique is the chromatographic technique, which has different advantages such as good resolution and can

separate different compounds at the same time. For determination in biological fluids, fluorimetric and electrochemical methods were used giving excellent sensitivity.

Conflict of interest

All authors declare no conflict of interest

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