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Stability of solutions of antineoplastic agents during preparation and storage for in vitro assays

III. Antimetabolites, tubulin-binding agents, platinum drugs, amsacrine, L-asparaginase, inteferons, steroids and other miscellaneous antitumour agents

Andrew G. Bosanquet

Bath Cancer Research Unit, Royal United Hospital, Combe Park, Bath BA1 3NG, England

Summary. The stability of solutions of the antitumour antimetabolites, vinca alkaloids, podophyllotoxins, interferons, steroids and platinum drugs as well as maytansine, asparaginase, amsacrine, flavone-8-acetic acid, mitoguazone, and N-phosphonoacetyl-1-aspartate (PALA) is reviewed. Much of the published work has been done with biological, not stability-indicating, assays; thus, the relevant results should be used with caution. With this proviso, almost all of these drugs can be stored in solution for several days at room temperature or 4° C. Most reports also suggest that the drugs that have been tested are stable when frozen in solution. For a number of the drugs, particular precautions are required; for instance, amsacrine should not be mixed with chloride-containing solutions, whereas cisplatin is most stable in solutions containing > 0.1 M chloride.

Introduction

In the first two reviews of this series [13, 14], general considerations about anticancer drug stability and the methods for its measurement were discussed; details were given as to the stability of the alkylating agents and nitrosoureas [13] as well as the antitumour antibiotics [14]. In this review, the stability of many other antitumour agents is discussed, including the antimetabolites, tubulin-binding agents, platinum drugs and other antitumour agents, among which are some steroids.

It should be borne in mind that the values cited in this review for drug stability represent, for the most part, the chemical stability of the drug. However, the time during which these drugs can be given to patients is often limited by other considerations, and care should be taken to abide by the time constraints listed on package inserts.

Antimetabolites

The structures of the antimetabolites discussed in this review are shown in Fig. 1. A summary of the stability of these drugs is presented in Table 1.

Methotrexate

The main problem with methotrexate is that it is photolabile [3, 21, 24, 68]. Despite its being used for many years, no reports the drug's photolability appeared in the literature until 1976 [22]; however, when methotrexate was first thoroughly investigated in 1978 [24, 68], this problem seemed to have been recognised. Chatterji and Gallelli [24] found a lag phase to its degradation followed by zero-order kinetics, suggesting a free radical mechanism. The photolability of the drug is increased by drug dilution [3] and the addition of bicarbonate [24].

Methotrexate (at 0.5 mg/ml) is stable during freezing and thawing [76]. The type of container used, whether glass or polyvinylchloride (PVC), does not seem to affect the stability of the drug over 2 days at room temperature [6], but methotrexate dissolved in methanol or ethanol adsorbs to glassware [25], suggesting that these solvents should not be used when working with the drug. Methotrexate binds quite strongly (94%) to serum albumin [82].

A decade ago, methotrexate was only available as >85% pure 4-amino-10-methyl-folic acid [23, 68]. Now it is 94% pure but still contains significant amounts of other substances; therefore, care should be taken in making up standard solutions.

Fig. 1. Structures and NSC numbers of the antimetabolites

Table 1. Summary of the stability of the antimetabolites and mitotic spindle inhibitors

Drug	Stability frozen ^a	Stability at 4°C ^a	Stability at room temperature ^a	Stability in medium at 37°C	Stability (RT) dissolved in the i.v. formulation	
Antimetabolites:						
Methotrexate	−20°C S 30 days (H) [76] ^f	S 7 days (U) [68]	10 days (H) [24] 4 years (dark, H) [59]	-	S 2 years [m]g	
5-Fluorouracil	-20° C S 2 weeks (B) [153] -70° C S 2 weeks (B) [153] -60° C S 37 weeks (B) [48]	S 2 weeks (B) [153]	S 7 days (U) [128]	t _{1/2} > 2 weeks (B) [65]	S 4 years [m]	
6-Thioguanine	_	S 24 h [138]	S 24 h [138]	-	S < 24 h at 15 mg/ml [138]	
6-Mercaptopurin	e – 20°C S 52 days (plasma, H) [37]	S 7 days (U) [52, 139]	S 7 days (U) [52, 139]	_	S > 3 weeks at 10 mg/ml [138]	
Cytarabine	-20°C S 2 weeks (H) [100]	S 2 weeks (H) [100]	12 days (U, H) [31, 100]	_	S > 2 years [152] 3 years (4°C) [m]	
Mitotic spindle in	hibitors:					
Vincristine	-60°C S 68 weeks (B) [49]	S 2 weeks (M) [72, 81]	S 24 h (H) [5]	S 2 weeks (B) [50, 65]	S 2 weeks (4°C) [m]	
Vinblastine	-60°C S 14 weeks (B) [48] -20°C S 30 days (U) [124]	S 30 days (M, U) [124]	S 24 h (H) [6]	S 2 weeks (B, R) [50, 65, 93]	S > 30 days at 1 mg/ml [138]	
Vindesine	-70° C S 3 weeks (B) [153] -20° C S 3 weeks (B) [153]	S 30 days (M) S 3 weeks (B) [153]	_	-	S 30 days (4° C) [m]	
Etoposide	-70° C S 3 weeks (B) [153] -20° C S 3 weeks (B) [153] -60° C S 77 weeks (B) [49]	S 3 weeks (B) [153]	S 6 h (M, ≤400 μg/ml) [70]	t _{1/2} 36 h (B, R) [1, 93]	S 5 years [m]	
Teniposide	-	S 24 h (M, $\leq 100 \mu\text{g/ml}$) [139]	S 24 h (M, ≤100 μg/ml) [70, 138, 139]	-	-	
Maytanzine	-	S 4 days (U) [138]	S 4 days (U) [138]	_	_	

5-Fluorouracil

Fluorouracil is a reasonably stable drug that degrades at high pH (hydrolyses) [120] and under UV light (96, 101], but at high concentrations (50 mg/ml) in amber bottles it is stable for 8 weeks [96]. Adsorption of fluorouracil seems to be negligible [40, 41, 83, 84, 109, 110, 114], although it cannot be quantitatively recovered after having been evaporated to dryness in glass [40, 41]. By biological assay, when frozen it is stable for 2 weeks [153], and it is also reasonably stable at 37° C in medium (including 15% heat-in-activated foetal bovine serum) [65]. Fluorouracil is less cytotoxic at pH 6.8 than at pH 7.4–7.7 (as measured by the inhibition of [³H]-uridine incorporation) [102] as well as in the presence of hepatocytes [2], but its cytotoxicity is not reduced by 25 mg/ml human serum albumin [134].

6-Thioguanine

Very little has been published about the stability of 6-thioguanine. Trissel [138] has reported that it is stable at 15 mg/ml for 24 h at 4° C but may form a precipitate at room temperature. When diluted with 150 mM NaCl or 5% dextrose, it is stable for 24 h at 4° C or room temperature [138].

6-Mercaptopurine

Mercaptopurine is sensitive to light and oxidation [4, 69], degrading to hypoxanthine in light [4]. At 10 mg/ml it is stable for >21 days at room temperature and 4° C [138]. When diluted to 3.3 mg/ml with 150 mM NaCl or 5% dextrose, it is stable for 7 days at 5° C [52]. Mercaptopurine frozen in plasma is stable for 52 days [37] and is neither activated nor inactivated by rat hepatocytes [2].

Cytarabine

Cytarabine is stable in vitro but is deaminated more rapidly in vivo to inactive uracil arabinoside [79, 103, 104, 106]. Deaminase inhibitors are required to keep the drug stable in plasma [18, 130], and prodrugs have been suggested in an attempt to limit this metabolism in vivo [60, 79].

Table 1. (continued)

Drug	Most stable pH	Adsorp- tion to filters ^b	Protein binding ^c	Effect of light ^d	Drug stability reduced by	References for frozen storage ^c
Antimetabolites:						
Methotrexate	7 [59]	0 [110]	94% [82]	+ [3, 21, 24, 68]	Bicarbonate, aluminium [24, 92]	[34, 42, 51, 78, 119, 122, 123, 126, 127, 129, 136, 143, 144, 148]
5-Fluorouracil	<9[120]	0 [109, 110]	-	+ [95]	UV light, bisulphite [96, 101, 118]	[34, 65, 67, 78, 99, 123, 126, 127, 129, 143, 144, 148, 150]
6-Thioguanine	_	_	_	_	_	[9, 10, 90, 91, 144]
6-Mercaptopurine	_	_	_	+ [4, 69]	Oxidation [69]	[9, 37, 129]
Cytarabine	7 [105]	+/- [45, 110]	13% [18, 133, 140]	0 [31]	-	[9, 10, 51, 91, 99, 129, 145]
Mitotic spindle inhi	bitors:					
Vincristine	-	+ [19, 75 109, 110]	++ [38]	+/- [138] + [m]		[9, 10, 16, 34, 42, 51, 65, 78, 99, 119, 126, 127, 129, 143, 144]
Vinblastine	-	0 [19, 109, 110]	++ [38]	+/- [138] 0 [m]	_	[9, 10, 34, 42, 65, 99, 119, 122, 123, 129, 143 – 145, 148, 150]
Vindesine	_	_	_	_		[9, 10, 36, 129]
Etoposide	-	_	_	+ [m]	Increased drug concentration, dextrose [39, 138]	[10, 34, 51, 67, 143]
Teniposide	_	_	_	_	Increased drug concentration, "plastic" [138, 139]	[10, 99, 143]
Maytanzine	_	+++ [109, 110]	_	0 [138]	_	[129]

Where possible, values for the stability frozen, at 4°C and at room temperature were determined in experiments with the drug dissolved in 150 mM NaCl or similar physiological solution; at room temperature they were usually determined in room light

b Drug binding to cellulose ester membranes: 0, negligible (<5%); +/-, uncertain; +, slight (5%-15%); ++, considerable (15%-50%); +++, severe (>50%). Most drugs that bind to cellulose ester also bind to other membrane materials such as PTFE [109, 110]

• Drug binding to plasma protein; values are expressed as either percentages or: 0, negligible; +/- uncertain; +, some binding; ++, considerable binding

d 0, not photolabile; +/-, uncertain; +, photolabile; ++, severely degraded by light

References were tabulated for cases in which the authors have reported that "all drugs were stored frozen in solution" and the drug was used in their work. However, due to the large numbers of drugs involved, this might conceivably have been an oversimplification for the purposes of writing this paper; moreover, all of the drugs mentioned in a publication may not have always been stored frozen

Thrugs are listed as either stable (S) for the time given (assay method), as a figure representing 5% degradation ($t_{0.95}$) or as a $t_{1/2}$. Assay methods are abbreviated as: H, high-pressure liquid chromatography; B, biological assay; U, UV absorption; M, manufacturer's information; R, radioimmunoassay

g [m], information obtained from the package insert or directly from the manufacturer

Fig. 2. Structures and NSC numbers of the mitotic spindle inhibitors

A constant proportion of the drug (13%-15%) is bound to plasma proteins over a wide concentration range [18, 133, 140], but this does not affect its cytotoxicity [134].

Cytarabine injection formulation can be stored "indefinitely" at room temperature [152] and, under a variety of conditions, more dilute solutions (200–1000 μ g/ml) are stable for up to 14 days [31, 53, 77, 100, 105]. In 60 mM phosphate buffer (pH 6.9), the $t_{0.95}$ was calculated to be 3 months at room temperature [105]. There is disagreement as to whether the drug is slightly [45], or not at all [110], adsorbed by filters.

Tubulin-binding agents

The tubulin-binding agents include the vinca alkaloids vincristine, vinblastine and vindesine, the podophyllotoxins etoposide and teniposide, and maytansine (Fig. 2). The stability of these compounds is summarised in Table 1 and more detailed information is given below.

Vinca alkaloids

Originally it was suggested that the vinca alkaloids be used "as soon as possible" after reconstitution [137] and be protected from light [72, 138]. The former suggestion has been superseded by the results of stability studies, drug information sheets no longer mention any influence of light.

Both vincristine and vinblastine bind strongly to α -and β -globulins [38], and their biological activity is increased by 25 mg/ml human serum albumin [134]. According to Ferguson et al. [47], the two drugs are avidly taken up into cultured cells in a pH-dependent process, with a maximum uptake around pH 7.5, but these authors did not mention whether the pH affected cytotoxicity. This avid uptake may explain the observation of Freshney et al. [50] that whereas vinblastine is stable for 24 h in Ham's F12 medium containing 20% foetal bovine serum, the addition of HeLa cells reduces the concentration of unbound drug to about 0.005% of that in controls.

Despite their similarity in structure, vincristine binds significantly (5%-15%) to cellulose ester membranes [19, 75, 109, 110] — and the problem is increased by more dilute solutions [19] — whereas vinblastine does not [19, 109, 110]. The use of polytetrafluoroethylene (PTFE) membranes did not reduce this binding of vincristine [109, 110], whereas an unspecified "treatment" was more successful at doing so [75]. Hyperthermia has only a slight (additive) effect on the cytotoxicity of vindesine [63] and other vinca alkaloids [58].

Concentration-dependent crystallisation is a limiting factor in the stability of etoposide at room temperature [138], and the drug has been observed to precipitate in dextrose solution [39].

Platinum drugs

A considerable amount of work has been undertaken on the stability of cisplatin and its analogues (Fig. 3 and Table 2). Unlike that of most drugs, the degradation of these compounds does not usually follow first-order or pseudo-first-order kinetics. The components of the solution tend to form mixtures of different drug species, the proportions of which can often be relatively stable as long as the solution composition remains unchanged [26]. In general, solutions containing the leaving groups (from the

Fig. 3. Structures and NSC numbers of the platinum drugs

platinum) seem to confer the best stability on the drug. Thus, chloride is best for cisplatin [43, 56, 86, 94, 146] and tetraplatin [26], malonate is best for JM40 [33], and sulphate is best for spiroplatin [44]. Both water and chloride are good for iproplatin [86, 139] and carboplatin [55, 86, 117].

Cisplatin

For the stability of cisplatin, the main consideration is the chloride concentration of the solution; thus, whether the drug is in water [56, 86, 146], dextrose [66] or plasma [86], an increase in the chloride concentration to $\geq 0.1~M$ confers the best stability. Hence, at $100~\mu g/ml$ and 37° C, cisplatin in 150~mM NaCl is stable for 6 days [86]. In medium (+15% foetal bovine serum), the half-life of the cell-killing ability has been reported to be 18.5~h [65].

Cisplatin has been observed to isomerise slowly to trans-diaminodichloroplatinum II, an inactive but toxic form [69, 146], but no details were reported except that UV light seemed to encourage the isomerisation [146], suggesting that solutions of the drug should not be placed in direct sunlight. One group [56] has suggested that normal laboratory lighting is harmful, whereas three others [66, 94, 116] have reported that it is not.

Due to the possibility of precipitation [56], it has been suggested that cisplatin not be refrigerated when the solution concentration exceeds 0.6 mg/ml [29, 39, 137]. The drug is incompatible with aluminium [11, 113] and is neutralised by thiols [125]. It does not bind to cellulose ester membrane filters [109], but does bind to proteins [61, 135], with a consequent, considerable reduction in cytotoxicity [134, 135]. The cytotoxicity of cisplatin to Walker 256 carcinoma cells has also been affected by the pH of the medium, with a minimum cytotoxicity observed at pH 7.0, which increased considerably at pH 7.4 [73]. Increased temperature also increases the cytotoxicity of the drug [62, 64], whereas cell density has no effect [108].

Frozen cisplatin has been successfully stored at high concentrations, showing minimal decomposition over

Table 2. Summary of the stability of the platinum, steroid and miscellaneous antitumour drugs

Drug name	Stability frozen ^a	Stability at 4°C ^a	Stability at room temperature ^a	Stability in 150 m <i>M</i> NaCl at 37°C	Stability in medium at 37°C	Stability (room temperature) dissolved in the i.v. formulation
Platinum drugs:				1000		
Cisplatin	-70°C S 3 weeks (B) [153] ^f -60°C S 36 weeks (B) [48] -15°C S 30 days (SI) [87]	S 6 days (<0.6 µg/ml) [29, 39, 56, 87, 137]	S 2 days (SI) [26, 87]	S 6 days (H) [86]	t _{1/2} 18.5 h (B) [1, 65]	_
Carboplatin	-25°C S 7 days (H) [55]	_	24 h (SI) [26]	S 7 days (H) [55, 86]	t _{1/2} 94 h (B) [65]	S > 24 h at 15 mg/ml [32, 139]
Iproplatin	_	-	S 24 h [26, 139]	S 6 days (H) [86]	_	S 24 h at 5 mg/ml [139]
Spiroplatin	_	_	_		_	_
Tetraplatin	_	_	4 h (SI) [26]	_	-	_
JM40	_	_	70 min (H) [142]	20 h (water) 2 h (0.1 <i>M</i> NaCl) [33]	_	_
Miscellaneous drug	s:					
Asparaginase	_	S 7 days (B) [20]	S 2 days (B) [20]	_	_	S > 2 days [20, 115, 138] S > 20 days (37°C) [m]
Amsacrine	_	_	_	Precipitates [138, 139]	-	S > 2 days at 5 mg/ml [139]
Flavone-8-acetic acid	-	-	S 14 days (H) [139]	S 10 days (H, 80°C, dark) [7]	_	S > 2 weeks at 25 mg/ml [139]
Interferons, α - & β	"Indefinite" [46, 151]		S < 3 h (no carrier protein) [89]	_	-	_
Mitoguazone	_	S 7 days [139]	S 7 days [139]	_	_	S > 2 days at 100 mg/ml [139]
PALA	_	_	S 2 weeks [139]	_	$t_{1/2} > 2$ weeks (B) [65]	S > 2 years at 100 mg/ml [139]
Steroid drugs:						
Prednisolone	_		S 92 days [57]	6 h (H) [17]	_	_
Prednisolone sodium succinate	_	S 12 days [52]	_		_	_
Prednisone	-	_	Crystalises [57]	_	_	_
Dexamethasone	_	_	_	_	_	_
Dexamethasone sodium phosphate	Not high concentrations [138]	_	-	_	_	S 3 years [27] [m]

3 weeks [153] and 36 weeks [48], but Yang and Drewinko [153] claim that it is not as stable when stored at more dilute concentrations.

Other platinum drugs

Carboplatin has been found to be stable in 150 mM NaCl for 7 days ($100 \,\mu\text{g/ml}$, 37° C) [86] and in water for 5 days at 37° C ($200 \,\mu\text{g/ml}$) [55]. No degradation has been observed in 5% dextrose at either high [139] or low drug concentrations [32]. Despite these good stability results, $150 \,\text{mM}$ NaCl has been suggested to increase the drug's decomposition to the more toxic cisplatin and is therefore not recommended as a diluent [139]. Carboplatin binds to

a small extent to plasma proteins [55, 98], and the halfife of its cell-killing ability in medium is reported to be 94 h [65].

Iproplatin is stable at $40 \,\mu\text{g/ml}$ in $150 \,\text{m}M$ NaCl or water for 6 days at 37° C [86] and for at least 1 day at 5 mg/ml at room temperature [139]. Dextrose (5%) does not seem to reduce this stability, but it has been suggested that solutions are protected from light if stored for $> 24 \,\text{h}$ [139]. Spiroplatin readily forms an equilibrium with a number of aquatic species [44]. The drug precipitates in chloride-containing solutions [141].

JM40 is stable for 2 days in water [141] or 5% glucose [142], whereas it is unstable in 150 mM NaCl [142], with

Table 2. (continued)

Drug name	Most stable pH	Adsorp- tion to filters ^b	Protein binding ^c	Effect of light ^d	Drug stability reduced by	References for frozen storage ^e
Platinum drugs:					4	
Cisplatin		0 [109]	+/++ [61, 132, 135]	+/- [56, 66, 94, 116]	<0.1 <i>M</i> chloride, UV light, aluminium, thiols [11, 56, 66, 86, 107, 113, 125, 146]	[34, 65, 67, 74, 112, 119, 126, 127, 129, 143 – 145, 148 – 150]
Carboplatin	_	-	+/- [55, 98]		Chloride [26, 139]	[65, 129]
Iproplatin	_	_	0 [98]	+/- [139]	_	_
Spiroplatin	_	_	_	_	Chloride [141]	_
Tetraplatin	-	_	_	_	< 0.1 M chloride [26]	_
JM40	≥ 7 [33]		_	_	Chloride [33]	_
Miscellaneous drugs:						
Asparaginase	5-9 [115]		_	_	PVC, dilution, preservatives, shaking [30, 54, 80, 115, 138]	[9, 10, 51]
Amsacrine	_	_	97% [111]	_	Chloride [138, 139]	[10, 51, 143, 144]
Flavone-8-acetic acid	<10 [155]	0 [7]	0 h	++ [7]	Dextrose [139]	[7]
Interferons, α - & β -	_	_	_		Lack of 5 mg/ml human serum albumin as carrier protein, mechanical stress [46, 151]	[143 – 145]
Mitoguazone	_	_		0 [139]	? Preservatives [54]	[143]
PALA	_	0 [110]	_	_	_	[65, 126, 129]
Steroid drugs:						
Prednisolone	_	_	++ [17, 71, 88, 97]	?+ [28]	Citrate [57]	_
Prednisolone sodium succinate	-	-	-	+ [28] [m]	-	[10, 16]
Prednisone	_		_	+ [28]	_	
Dexamethasone	_	_	_	+ [28] [m]	_	
Dexamethasone sodium phosphate	_	0 [121]	-	+ [138]	-	[51, 150]

^a Where possible, values for the stability frozen, at 4°C and at room temperature were determined in experiments with the drug dissolved in 150 mM NaCl or similar physiological solution; at room temperature they were usually determined in room light

both chloride and low pH displacing the malonate group [33]. When the drug was dissolved in water at 37° C, a $t_{0.95}$ of 20 h was observed for JM40; its stability was increased by the addition of potassium malonate to the solution [33].

Other antitumour drugs

The structures of antitumour drugs that are not high-molecular-weight proteins are shown in Figs. 4 and 5. Stability information is given in Table 2, and further details about some of these drugs are recorded below.

Amsacrine

Amsacrine cannot be diluted with chloride-containing solutions, as amsacrine hydrochloride is poorly soluble [138, 139]; thus, a lactate buffer is used with the formulated product. The cytotoxicity of the drug is reduced by 25 mg/ml human serum albumin [134], presumably due to its very high protein binding [111]. In contrast to almost all other cytotoxic drugs, the cytotoxicity of amsacrine is *reduced* by treating cells at 42.4° C [63]; this effect is not caused by drug degradation [63].

b Drug binding to cellulose ester membranes: 0, negligible (<5%); +, slight (5%-15%); ++, considerable (15%-50%); +++, severe (>50%). Most drugs that bind to cellulose ester also bind to other membrane materials such as PTFE [109, 110]

^c Drug binding to plasma protein; values are expressed as either percentages or: 0, negligible; +/- uncertain; +, some binding; ++, considerable binding

d 0, not photolabile; +/-, uncertain; +, photolabile; ++, severely degraded by light

^c References were tabulated for cases in which the authors have reported that "all drugs were stored frozen in solution" and the drug was used in their work. However, due to the large numbers of drugs involved, this might conceivably have been an oversimplification for the purposes of writing this paper; moreover, all of the drugs mentioned in a publication may not have always been stored frozen

f Drugs are listed as either stable (S) for the time given (assay method), as a figure representing 5% degradation ($t_{0.95}$) or as a $t_{1/2}$. Assay methods are abbreviated as: H, high-pressure liquid chromatography; B, biological assay; U, UV absorption; M, manufacturer's information; R, radioimmunoassay

g [m], information obtained from the package insert or directly from the manufacturer

h Betteridge and Bosanquet, unpublished observation

Fig. 4. Structures and NSC numbers o the miscellaneous antitumour agents

L-Asparaginase

L-Asparaginase is a rather different sort of cytotoxic drug acting, it is thought, by reducing L-asparagine levels. It has been isolated from a number of different sources, including Erwinia carotovora, Escherichia coli [20, 80] and other bacteria [35]. The E. coli variety is a tetramer with a molecular weight of 255,000 daltons; each tetramer is capable of being split into subunits weighing about 22,000 daltons [80]. At high concentrations (>2 mg/ml), L-asparaginase is stable in PBS for 2 days at 20° C [20, 115, 138], but dilution to <1 ug/ml causes rapid deactivation [30, 154], probably due to adsorption onto vessel surfaces [115]. PVC containers have been found to be worse than glass, polyethylene, polystyrene or steel containers in this respect [115]. The drug's stability is also reduced by preservatives [54] and shaking [115, 138] but increased by non-ionic detergents and polyethylene glycol [115].

Interferons

The interferons are proteins weighing around 20,000 daltons. Their stability is difficult to assess because of the large number of different species known and because accurate determination of their activity is difficult. There is a distinct need for a good interferon assay [12].

The α - and β -interferons are more stable than γ -interferon, the latter being heat- and acid-sensitive [147]. Good

stability has been reported for α -interferon at $<-10^{\circ}$ C [46, 151]. The most important aspect of the stability of these molecules seems to be the presence of 5 mg/ml human serum albumin as a carrier protein [151]. Without this, a solution of β -interferon in 150 mM NaCl was only stable for 2 h at room temperature.

Steroids

Prednisone, prednisolone and dexamethasone (Fig. 5) are all derivatives of cortisone normally used in combination with other cytotoxic agents. Prednisolone sodium succinate and prednisolone sodium phosphate are used both for i.v. injection and quite often in vitro due to their increased solubility, but these drugs come with a number of other additives [138]. Prednisolone binds strongly to proteins [17, 88], even at low protein concentrations [71]; surprisingly, this binding is inhibited by hydrocortisone but not by prednisone [88]. Prednisolone does not adsorb to plastic delivery systems [83, 84]. The succinate and phosphate esters are more stable in solution than is prednisolone [17, 52, 57, 85, 131].

The stability of dexamethasone (sodium phosphate) is probably similar to that of the other cytotoxic steroids [28]. The sodium succinate ester has shown good stability in a number of dosage forms [8].

Conclusions and recommendations

In general, the stability of a drug should be checked when the drug is first handled, even if the stability of a close analogue is already known; although many of the drugs mentioned in this review are reasonably stable, there are sometimes small but significant differences in stability between close analogues.

The light sensitivity of a number of drugs mentioned here remains unclear, perhaps because initial observations suggested light sensitivity, whereas it was later realised that such an effect was very minor compared with other causes of degradation. We recently reported a similar situation with chlorambucil [15].

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Fig. 5. Structures and NSC numbers of the steroid antitumour agents

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