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Original article

Stability Indicating RP-HPLC Method Development and Validation for the Quantitative Estimation of Avapritinib in API form and Marketed Pharmaceutical Dosage Form

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ABSTRACT:
An efficient and simple RP-HPLC method has been developed and validated for the determination of Avapritinib in bulk and was applied on marketed Avapritinibproducts. The mobile phase used for the chromatographic runs consisted of Acetonitrile and Phosphate buffer (0.01M, pH-3.2) in the ratio of 30:70% v/v. The separation was achieved on a Symmetry C18 ODS (4.6mm×250mm) 5µm particle size column using isocratic mode. Drug peak were well separated and were detected by a UV detector at 246 nm. The method was linear at the concentration range 6–14 µg/ml for Avapritinib. The method has been validated according to ICH guidelines with respect to system suitability, specificity, precision, accuracy and robustness. Avapritinib limit of detection (LOD) and limit of quantification (LOQ) were 0.487µg/ml and 1.477µg/ml respectively.

Keywords: Avapritinib, RP-HPLC, Accuracy, Precision, Robustness, ICH Guidelines.

1. INTRODUCTION

Avapritinib is an orally bioavailable inhibitor of specific mutated forms of platelet-derived growth factor receptor alpha (PDGFR alpha; PDGFRa) and mast/stem cell factor receptor c-Kit (SCFR), with potential antineoplastic activity. Upon oral administration, Avapritinib [1] specifically binds to and inhibits specific mutant forms of PDGFRa and c-Kit, including the PDGFRa D842V mutant and various KIT exon 17 mutants. This results in the inhibition of PDGFRa- and c-Kit-mediated signal transduction pathways and the inhibition of proliferation in tumor cells that express these PDGFRa and c-Kit mutants. PDGFRa and c-Kit, protein tyrosine kinases and tumor-associated antigens (TAAs), are mutated in various tumor cell types; they play key roles in the regulation of cellular proliferation. Avapritinib, or BLU-285, is a selective tyrosine kinase inhibitor of KIT and platelet derived growth factor receptor alpha indicated for the treatment of unresectable, metastatic gastrointestinal stromal tumours. It is one of the first medications available for the treatment of multidrug resistant cancers. Avapritinib shares a similar mechanism with [Ripretinib]. Avapritinib [2] was granted FDA approval on 9 January 2020.Avapritinib is a selective kinase inhibitor that negatively modulates the action of cell transporters to resensitize them to other chemotherapies. It has a long duration of action as it is given once daily. Patients should be counseled regarding the risk of intracranial hemorrhage, CNS effects, and embryo-fetal toxicity. Avapritinib has a negative modulating effect on the transporters ABCB1 and ABCG2, which mediate the multidrug resistance phenotype of some cancers. This modulation may be due to interactions of Avapritinib [3] with the drug binding pocket of these transporters. Negative modulation of these transporters, resensitizes cancerous cells to treatment with chemotherapeutic agents like paclitaxel. The IUPAC Name of Avapritinib is (1S)-1-(4-fluorophenyl)-1-[2-[4-[6-(1-methylpyrazol-4-yl)pyrrolo[2,1-f][1,2,4]triazin-4-yl]piperazin-1-yl]pyrimidin-5-yl]ethanamine. The Chemical Structure of Avapritinib is as follows

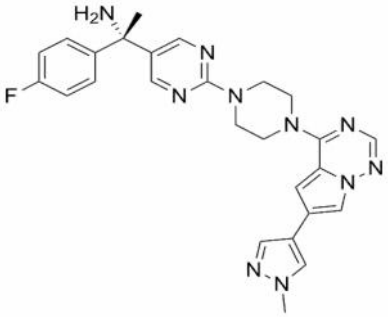

Fig 1: Chemical Structure of Avapritinib

2. MATERIALS AND METHODS

Table 1: List of Equipments

S.No.	Instruments/Equipments/Apparatus
1.	HPLC WATERS with Empower2 Software with Isocratic with UV-Visible Detector.
2.	T60-LABINDIA UV – Vis spectrophotometer
3.	High Precision Electronic Balance
4.	Ultra Sonicator (Wensar wuc-2L)
5.	Thermal Oven
6.	Symmetry C_{18} Column, 250 mm x 4.6 mm and 5µm particle size
7.	P^H Analyser (ELICO)
8.	Vaccum Filtration Kit (Labindia)

Chemicals and Reagents:

Table 2: List of Chemicals used

S.No.	Name	Grade	Manufacturer/Supplier
1.	HPLC grade water	HPLC	Sd fine-Chem ltd; Mumbai
2.	Methanol	HPLC	Loba Chem; Mumbai.
3.	Ethanol	A.R.	Sd fine-Chem ltd; Mumbai
4.	Acetonitrile	HPLC	Loba Chem; Mumbai.
5.	DMSO	A.R.	Sd fine-Chem ltd; Mumbai
6.	DMF	A.R.	Sd fine-Chem ltd; Mumbai

Method Development:

HPLC Instrumentation & Conditions: The HPLC system [4] employed was HPLC WATERS with Empower 2 Software with Isocratic with UV-Visible Detector.

Standard Preparation for UV-Spectrophotometer Analysis:

The Standard Stock Solutions – 10 mg of Avapritinib standard was transferred into 10 ml volumetric flask, dissolved & make up to volume with Methanol.

Further dilutions [5] were done by transferring 1 ml of the above solution into a 10ml volumetric flask and make up to volume with methanol to get 10 ppm concentration.

Itscanned in the UV spectrum in the range of 200 to 400nm. This has been performed to know the maxima of Avapritinib, so that the same wave number can be utilized in HPLC UV detector for estimating the Avapritinib.

Selection of Wavelength:

The detection wavelength was selected by dissolving the drug in mobile phase to get a concentration of 10µg/ml for individual and mixed standards. The resulting solution was scanned in U.V range from 200-400nm.

Selection of chromatographic methods:

The proper selection depends upon the nature of the sample, (ionic or ion stable or neutral molecule) its molecular weight and stability. The drugs selected are polar, ionic and hence reversed phase chromatography was selected.

Optimization of Column:

The method was performed with various columns like Hypersil C_{18} column, X- bridge column and X-terra (4.6 ×150mm, 5µm particle size), Symmetry C18 ODS (4.6mm×250mm) 5µm particle size Column was found to be ideal as it gave good peak shape and resolution at 1ml/min flow.

Mobile Phase Optimization:

Initially the mobile phase tried was Water: Methanol and Water: Acetonitrile and Methanol with TEA Buffer with varying proportions. Finally, the mobile phase was optimized to Acetonitrile: Phosphate buffer (0.01M, pH-3.2) in the ratio of 30:70 respectively.

Estimation ofAvapritinibin bulk and pharmaceutical dosage form:

Procedure

Preparation of Mobile Phase:

Accurately measured 300 ml (300%) of HPLC Grade Acetonitrile and 700 ml of Phosphate buffer (70%) were mixed and degassed in a digital ultra sonicater for 15 minutes and then filtered through 0.45 µ filter under vacuum filter.

Preparation of 0.01M Potassium dihydrogen orthophosphate Buffer Solution:

About 1.36086 grams of Potassium dihydrogen orthophosphate was weighed and transferred into a 1000ml beaker, dissolved and diluted to 1000ml with HPLC Grade water. The pH was adjusted to 3.20 with diluted orthophosphoric acid.

Diluent Preparation:

Accurately measured 300 ml (300%) of HPLC Grade Acetonitrile and 700 ml of Phosphate buffer (70%) were mixed and degassed in a digital ultra sonicater for 15 minutes and then filtered through 0.45 µ filter under vacuum filter.

Assay

Preparation of the Avapritinibstandard solution:

Preparation of standard solution: (Avapritinib)

Accurately weigh and transfer 10 mg of Avapritinib, working standard into a 10ml of clean dry volumetric flasks add about 7ml of diluent and sonicate to dissolve and removal of air completely and make volume up to the mark with the diluent.

Further pipette 0.1ml of Avapritinib from stock solution in to a 10ml volumetric flask and dilute up to the mark with diluent.

Procedure:

Inject the samples by changing the chromatographic conditions and record the chromatograms, note the conditions of proper peak elution for performing validation parameters as per ICH guidelines.

Preparation of Sample Solution:

Take average weight of Tablet and crush in a mortar by using pestle and taken weight 10 mg equivalent weight of Avapritinib sample into a 10ml clean dry volumetric flask and add about 7ml of Diluent and sonicate to dissolve it completely and make volume up to the mark with the same solvent.

Procedure:

Further pipette 0.1ml of Avapritinib from above stock solution into a 10ml volumetric flask and dilute up to the mark with diluent.

Inject the three replicate injections of standard and sample solutions and calculate the assay by using formula:

$$\%\,ASSAY = \frac{\text{Sample area}}{\text{Standard area}} \times \frac{\text{Weight of standard}}{\text{Dilution of standard}} \times \frac{\text{Dilution of sample}}{\text{Weight of sample}} \times \frac{\text{Purity}}{100} \times \frac{\text{Weight of tablet}}{\text{Label claim}} \times 100$$

Analytical Method Validation

Validation is a process of establishing documented evidence which provide a high degree of assurance that specific activity will consistently produce a desired result or product meeting its predetermined specification and quality characteristics.

System Suitability

System suitability [6] is the evaluation of the components of an analytical system to show that the performance of a system meets the standards required by a method. A system suitability evaluation usually contains its own set of parameters. For chromatographic assays, these may include tailing factor, resolution, precision, capacity factor time and theoretical plates.

Accuracy:

For preparation of 50% Standard stock solution:

Further pipette 0.05ml of Avapritinib from stock solutions in to a 10ml volumetric flask and dilute up to the mark with diluent.

For preparation of 100% Standard stock solution:

Further pipette 0.1ml of Avapritinib from stock solutions in to a 10ml volumetric flask and dilute up to the mark with diluent.

For preparation of 150% Standard stock solution:

Further pipette 0.15 ml of Avapritinib from stock solutions in to a 10ml volumetric flask and dilute up to the mark with diluent.

Procedure:

Inject the Three replicate injections of individual concentrations (50%, 100%, 150%) were made under the optimized conditions. Recorded the chromatograms and measured the peak responses. Calculate the Amount found and Amount added for Avapritinib and calculate the individual recovery [7] and mean recovery values.

Acceptance criteria:

The %RSD for each level should not be more than 2 .

Precision:

Repeatability

Preparation of Avapritinib for Precision:

Further pipette 0.1 ml of Avapritinib from stock solutions in to a 10ml volumetric flask and dilute up to the mark with diluent

The standard solution was injected for five times and measured the area for all five injections in HPLC. The %RSD for the area of five replicate injections was found to be within the specified limits.

Ruggedness

To evaluate the intermediate precision [8] of the method, Precision was performed on different days by maintaining same conditions.

Procedure:

DAY 1:

The standard solution was injected for six times and measured the area for all six injections in HPLC. The %RSD for the area of six replicate injections was found to be within the specified limits.

DAY 2:

The standard solution was injected for six times and measured the area for all six injections in HPLC. The %RSD for the area of six replicate injections was found to be within the specified limits.

The % RSD for the area of five standard injections results should be not more than 2%.

Linearity:

Preparation of Level – I (6µg/ml of Avapritinib):

Further pipette 0.06 ml of Avapritinib from stock solutions in to a 10ml volumetric flask and dilute up to the mark with diluent.

Preparation of Level – II (8µg/ml of Avapritinib):

Further pipette 0.08 ml of Avapritinib from stock solutions in to a 10ml volumetric flask and dilute up to the mark with diluent.

Preparation of Level – III (10µg/ml of Avapritinib):

Further pipette 0.1ml of Avapritinib from stock solutions in to a 10ml volumetric flask and dilute up to the mark with diluent.

Preparation of Level – IV (12µg/ml of Avapritinib):

Further pipette 0.12ml of Avapritinib from stock solutions in to a 10ml volumetric flask and dilute up to the mark with diluent.

Preparation of Level – V (14µg/ml of Avapritinib):

Further pipette 0.14ml of Avapritinib from stock solutions in to a 10ml volumetric flask and dilute up to the mark with diluent.

Procedure:

Inject each level into the chromatographic system [9] and measure the peak area. Plot a graph of peak area versus concentration (on X-axis concentration and on Y-axis Peak area) and calculate the correlation coefficient.

Acceptance Criteria: Correlation coefficient [18] should be not less than 0.999.

Limit of Detection:

The detection limit [9] is determined by the analysis of samples with known concentration of analyte and by establishing that minimum level at which the analyte can reliably detected.

Limit of Quantitation

The quantification limit is generally determined by the analysis of sample with known concentrations of analyte and by establishing the minimum level at which the analyte can be quantified with acceptable accuracy and precision.

Robustness:

The analysis was performed in different conditions to find the variability of test results. The following conditions are checked for variation of results. .

Effect of Variation of flow Rate:

The sample was analyzed at 0.9 ml/min and 1.1 ml/min instead of 1ml/min, remaining conditions are same. 20µl of the above sample was injected and chromatograms were recorded.

Effect of Variation of Mobile Phase Organic Composition:

The sample was analyzed by variation of mobile phase i.e. Acetonitrile: Phosphate Buffer was taken in the ratio and 70:30, 75:25 instead of 65:35, remaining conditions are same. 20µl of the above sample was injected and chromatograms were recorded.

Forced Degradation Studies:

The specificity [10] of the method can be demonstrated by applying stress conditions using acid, alkaline, peroxide, thermal, UV, water degradations. The sample was exposed to these conditions the main peak of the drug was studied for peak purity that indicating the method effectively separated the degradation [11] products from the pure active ingredient.

Acid Degradation Studies: To 1 ml of Avapritinib stock, 1 ml of 2N HCl was added and refluxed for 30 min at 60 ºC. The resultant solution was neutralized with 1 ml 2N NaOH and makeup to final volume to obtain (10µg/ml) solution. Cool the solution to room temperature and filtered with 0.45µm membrane filter. A sample of 20µl was injected into the HPLC system, and the chromatograms were recorded to assess the stability of the sample.

Alkali Degradation Studies: To 1 ml of stock solution of Avapritinib 1 ml of 2N sodium hydroxide was added and refluxed for 30 min at 60 ºC. The resultant solution was neutralized with 1 ml 2N HCl and makeup to final volume to obtain (10µg/ml) solution. Cool the solution to room temperature and filtered with 0.45µm membrane filter. The sample of 20µl was injected into the system, and the chromatograms were recorded to an assessment of sample stability [12].

Oxidation Degradation Studies: To 1 ml of stock solution of Avapritinib 1 ml of 20% hydrogen peroxide (H2O2) was added separately. The solution was kept for 30 min at 60ºC.For HPLC study, the resultant solution was diluted to obtain (10µg/ml) solution. Cool the solution to room temperature and filtered with 0.45µm membrane filter. A sample of 20µl solution was injected into the system, and the chromatograms were recorded to assess the stability of the sample [13-15].

Dry Heat Degradation Studies: The 1 ml of standard drug solution was placed in the oven at 60ºC for 6h to study dry heat degradation. For HPLC study, the resultant solution was makeup to final volume to obtain (10µg/ml) solution. Cool the solution to room temperature and filtered through a 0.45µm membrane filter. A sample of 20µl solution was injected into the system, and the chromatograms were recorded for the assessment of sample stability.

Photo Degradation Studies: The photo stability of the drug was studied by exposing the stock solution to UV light for 1day or 200Watt-hours/m2 in photo stability chamber. For HPLC study, the resultant solution was diluted to obtain (10µg/ml) solution and filtered with 0.45µm membrane filter. A sample of 20µl solution was injected into the system, and the chromatograms were recorded for the assessment of sample stability.

Water Degradation Studies: To 1 ml of stock solution of Avapritinib, 1 ml of distilled water was added. The solution was kept aside for 30 min at 60 ºC. For HPLC study, the resultant solution was diluted to obtain (10µg/ml) cool the solution to room temperature and filtered with 0.45µm membrane filter. A sample of 20µl was injected into the HPLC system, and the chromatograms were recorded for the assessment of sample stability.

3. RESULTS AND DISCUSSION

Method Development:

Selection of Wavelength:

The UV spectrum of Avapritinib was obtained and the Avapritinib showed absorbance's maxima at246nm.The UV spectra of drug are follows:

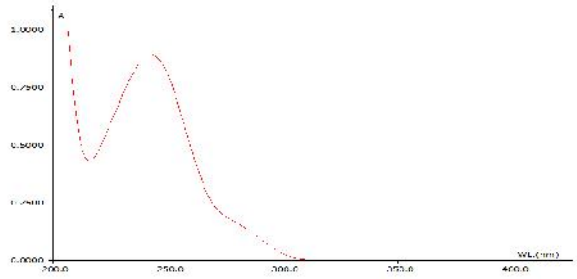

Fig 2: UV Spectrum of Avapritinib (246nm)

Observation: While scanning the Avapritinib solution we observed the maxima at 246nm. The UV spectrum has been recorded on T60-LAB INDIA make UV – Vis spectrophotometer model UV-2450.

Optimized Chromatographic Conditions:

Mobile phase : Acetonitrile: Phosphate buffer (0.01M, pH-3.2)(30:70v/v)
Column : Symmetry C18 ODS (4.6mm×250mm) 5µm particle size
Flow rate : 1 ml/min
Wavelength : 246 nm
Column temp : Ambient
Injection Volume : 20 µl
Run time : 10 minutes

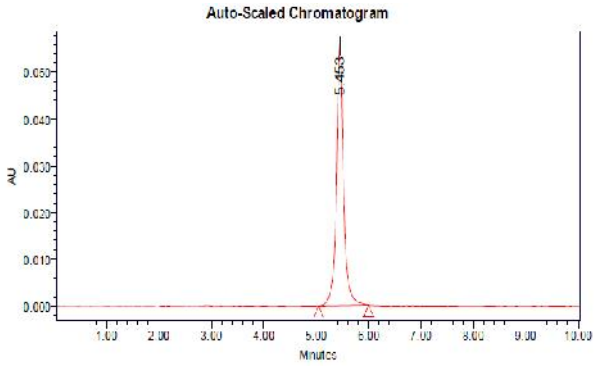

Fig 3: Optimized Chromatographic Condition

Method Validation:

According to the FDA, "Analytical method validation is the process of demonstrating that an analytical procedure is suitable for its intended purpose. The methodology and objective of the analytical procedures should be clearly defined and understood before initiating validation studies.

System Suitability:

System suitability is the checking of a system to ensure system performance before or during the analysis of unknowns. System suitability tests are an integral part of chromatographic methods, and are used to verify that the resolution and reproducibility [16, 17] of the system are adequate for the analysis to be performed.

Table 3: Observation of System Suitability Parameters

S.No.	Parameter	Avapritinib
1.	Retention Time (min)	5.453
2.	Theoretical Plates	6967
3.	Tailing factor	1.12
4.	Peak Area (AUC)	647856

The system suitability parameters were found to be within the specified limits for the proposed method.

Specificity

The ICH documents define specificity as the ability to assess unequivocally the analyte in the presence of components that may be expected to be present, such as impurities, degradation products, and matrix components [18].

Analytical method was tested for specificity to measure accurately quantitates Avapritinib in drug product.

$$\%\,ASSAY = \frac{\text{Sample area}}{\text{Standard area}} \times \frac{\text{Weight of standard}}{\text{Dilution of standard}} \times \frac{\text{Dilution of sample}}{\text{Weight of sample}} \times \frac{\text{Purity}}{100} \times \frac{\text{Weight of tablet}}{\text{Label claim}} \times 100$$

The % purity of Avapritinibin present in the marketed pharmaceutical dosage form was found to be 99.85%.

Linearity:

Linearity should be evaluated by visual inspection of a plot of signals as a function of analyte concentration or content. If there is a linear relationship, test results should be evaluated by appropriate statistical methods, for example, by calculation of a regression line by the method of least squares [19].

Table 4: Chromatographic Data for Linearity Study of Avapritinib

Concentration «g/ml	Average Peak Area
6	468784
8	615798
10	768759
12	925748
14	1078765

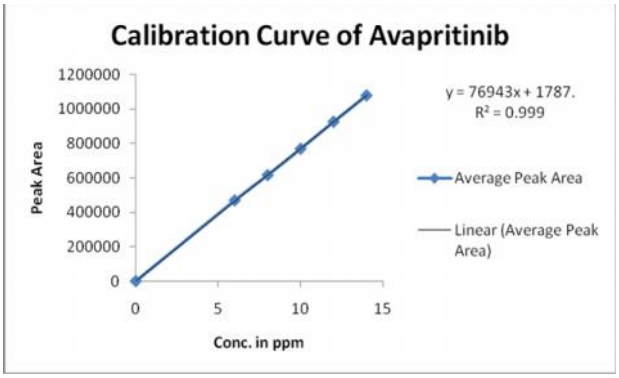

Fig 4: Calibration Curve of Avapritinib

Linearity Plot:

The plot of Concentration (x) versus the Average Peak Area (y) data of Avapritinib is a straight line.

Y = mx + c

Slope (m) = 76943

Intercept (c) = 1787

Correlation Coefficient (r) = 0.99

Validation Criteria: The response linearity is verified if the Correlation Coefficient is 0.99 or greater [20].

Conclusion: Correlation Coefficient (r) is 0.99, and the intercept is 76943. These values meet the validation criteria [21].

Precision:

The precision of an analytical procedure expresses the closeness of agreement (degree of scatter) between a series of measurements obtained from multiple sampling of the same homogeneous sample under the prescribed conditions [22].

Repeatability:

Obtained Six (6) replicates of 100% accuracy solution as per experimental conditions. Recorded the peak areas and calculated % RSD.

Table 5: Results of Repeatability for Avapritinib

S. No.	Peak Name	Retention time	Area(µV*sec)	Height (µV)	USP Plate Count	USP Tailing
1	Avapritinib	5.419	645784	83685	6825	1.05
2	Avapritinib	5.405	642589	84932	6849	1.09
3	Avapritinib	5.478	643658	85847	6845	1.08
4	Avapritinib	5.466	648759	86295	6839	1.09
5	Avapritinib	5.493	649657	86587	6895	1.07
6	Avapritinib	5.466	647854	87853	6874	1.10
Mean			**646383.5**			
Std. Dev			**2853.319**			
%RSD			**0.441428**			

Intermediate Precision/Ruggedness:

Analyst 1:

Table 6: Results of Intermediate precision for Avapritinib

S.No.	Peak Name	RT	Area (µV*sec)	Height (µV)	USP Plate Count	USP Tailing
1	Avapritinib	5.484	636854	84863	6758	1.09
2	Avapritinib	5.493	637489	84759	6726	1.08
3	Avapritinib	5.406	635762	84685	6749	1.09
4	Avapritinib	5.419	636984	84697	6698	1.07
5	Avapritinib	5.446	634856	84258	6728	1.08
6	Avapritinib	5.452	639689	84753	6699	1.08
Mean			**636939**			
Std.Dev.			**1649.149**			
%RSD			**0.258918**			

Analyst 2:

Table 7: Results of Intermediate Precision Analyst 2 for Avapritinib

S.No.	Peak Name	RT	Area (µV*sec)	Height (µV)	USP Plate Count	USP Tailing
1	Avapritinib	5.491	628985	85698	6985	1.09
2	Avapritinib	5.482	624879	85479	6899	1.07
3	Avapritinib	5.416	625846	85748	6928	1.06
4	Avapritinib	5.482	623568	85647	6874	1.09
5	Avapritinib	5.495	628985	85246	6984	1.07
6	Avapritinib	5.427	628473	85924	6872	1.08
Mean			**626789.3**			
Std.Dev.			**2340.636**			
%RSD			**0.373433**			

Accuracy:

Accuracy at different concentrations (50%, 100%, and 150%) was prepared and the % recovery was calculated.

Table 8: The Accuracy Results for Avapritinib

%Concentration (at specification Level)	Area	Amount Added (ppm)	Amount Found (ppm)	% Recovery	Mean Recovery
50%	386559	5	5.00	100.000%	100.130%
100%	768536	10	9.965	99.650%	
150%	1164522	15	15.111	100.740%	

Limit of Detection

The detection limit of an individual analytical procedure is the lowest amount of analyte in a samplewhich can be detected but not necessarily quantitated as an exact value [23].

LOD= 3.3 × σ / s

Where,

σ = Standard deviation of the response

S = Slope of the calibration curve

Result: 0.487µg/ml

Quantitation Limit

The quantitation limit of an individual analytical procedure is the lowest amount of analyte in a sample which can be quantitatively determined.

LOQ=10×σ/S

Where,

σ = Standard deviation of the response

S = Slope of the calibration curve

Result:1.477µg/ml

Robustness:

The robustness was performed for the flow rate variations from 0.9 ml/min to 1.1ml/min and mobile phase ratio variation from more organic phase to less organic phase ratio for Avapritinib. The method is robust only in less flow condition. The standard of Avapritinib was injected by changing the conditions of chromatography. There was no significant change in the parameters like resolution, tailing factor, asymmetric factor, and plate count [24, 25].

Table 9: Results for Robustness of Avapritinib

Parameter used for sample analysis	Peak Area	Retention Time	Theoretical plates	Tailing factor
Actual Flow rate of 1.0 mL/min	648759	5.484	6845	1.08
Less Flow rate of 0.9 mL/min	635248	5.599	6786	1.09
More Flow rate of 1.1 mL/min	659865	4.576	6528	1.05
Less organic phase	625986	7.415	6689	1.03
More organic phase	615869	3.827	6354	1.01

Forced Degradation Studies:

The specificity of the method can be demonstrated by applying stress conditions using acid, alkaline, peroxide, thermal, UV, water degradations [26, 27]. The sample was exposed to these conditions the main peak of the drug was studied for peak purity that indicating the method effectively separated the degradation products from the pure active ingredient. The results of forced degradation studies shown in table-10.

Table 10: Results of Forced Degradation Studies for Avapritinib

S.No.	Stress Condition	Peak Area	% of Degraded Amount	% of Active Amount	Total % of Amount
1	Standard	648759	0	100%	100%
2	Acidic	539378.232	16.86	83.14	100%
3	Basic	603540.497	6.97	93.03	100%
4	Oxidative	545217.063	15.96	84.04	100%
5	Thermal	616450.801	4.98	95.02	100%
6	Photolytic	533344.773	17.79	82.21	100%
7	Water	625079.296	3.65	96.35	100%

4. SUMMARY AND CONCLUSION

The analytical method was developed by studying different parameters. First of all, maximum absorbance was found to be at 246nm and the peak purity was excellent. Injection volume was selected to be 20µl which gave a good peak area. The column used for study was Symmetry C18 ODS (4.6mm×250mm) 5µm particle size because it was giving good peak. Ambient temperature was found to be suitable for the nature of drug solution. The flow rate was fixed at 1.0ml/min because of good peak area and satisfactory retention time. Mobile phase is Acetonitrile: Phosphate buffer (0.01M, pH-3.2) (30:70v/v) was fixed due to good symmetrical peak. So this mobile phase was used for the proposed study. Methanol was selected because of maximum extraction sonication time was fixed to be 10min at which all the drug particles were completely soluble and showed good recovery.

Run time was selected to be 10min because analyze gave peak around 5.453min and also to reduce the total run time.The percent recovery was found to be 98.0-102 was linear and precise over the same range. Both system and method precision was found to be accurate and well within range. The analytical method was found linearity over the range of 6-14ppm of theAvapritinib target concentration. The analytical passed both robustness and ruggedness tests. On both cases, relative standard deviation was well satisfactory.

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