GUIDELINES FOR ABSTRACT SUBMISSION

1st InBHIs 2021

ABSTRACT GUIDELINES

1. File Format:
   ☐ MS Word

2. Soft Copy:
   ☐ Soft copy of Abstract must be sent to inbhis2021@gmail.com **AND**

   ☐ Participant has to fill up the ***Registration form*** http://bit.ly/InBHIs2021Registration

3. Language:
   ☐ The content of abstract should be written in English.
   ☐ All abstracts **MUST** be submitted and presented in clear **British English** with accurate grammar and spelling.

4. Word Limit:
   ☐ The **Title of research** should not more than 20 words, Capital Letters & Bold

   ☐ The **Abstract of research** should not more than **250 words** (**Excluding** title, authors name and affiliations plus keywords)

5. Font type and size:
   ☐ Font type is Arial
   ☐ Font size is 12

6. Line Spacing:
   ☐ Single line

7. **The structure of Abstract is given as follow:**

   a) Title of research article
      ☐ Name of authors
      ☐ Institutional address of authors
      ☐ Title of abstract should be concise, descriptive, and preferably not exceeding 20 words.

   Note the followings:

   Title: Maximum 20 words, Capital Letters & Bold,

   Authors Names: Bold the first author name,

   Corresponding author: Supervisor is a corresponding author which can be recognize by adding **ASTERISK (*)** on his/her name. The E-mail of supervisor should have written.

   Institutional address of authors: Make sure you have written all authors institutional address very clearly.

   b) Abstract
      ☐ Keywords: 3 -to- 5

   Note the followings:

   The abstract should have written in **ONE PARAGRAPH** having Background

& Aim, Methodology, Results, Conclusion and **3 to 5** keywords etc.

8. The SAMPLES of Abstract are given as follow:

ABSTRACT SAMPLE EXAMPLE
(Single affiliations)

ANTI-FUNGAL ACTIVITY OF SUCCESSIVE EXTRACTS OF *CITRUS LIMON* PEEL FOR AN ANTIDANDRUFF SHAMPOO FORMULATION

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ABSTRACT

Background and Aim: The peel of *Citrus limon* which is a rich source of acid contents had been identified as the potential anti-fungal as well as anti-dandruff agent. This study was aimed to focus on determining the best solvent responsible for extraction of maximum active anti-fungal constituents. **Methodology:** Defatted peel powder of *C. limon* was successively extracted with chloroform, ethanol and water using Soxhlet extractor. Phytochemical tests for the presence of metabolites were done for all extracts. The anti-fungal activity against *Malassezia furfur* and *Candida albicans* of all extracts were determined using well diffusion methods at three concentrations: 50, 100 & 200mg/ml followed by minimum inhibition concentration (MIC) determination using well dilution method. The extract showing best anti-fungal activity was chosen for formulation and evaluation. **Results:** Flavonoids presence in all extracts while ethanol is considered as the optimal solvent to obtain various phytochemical constituents. The extract obtained from ethanol exhibited highest anti-fungal activity (MIC=12.5mg/ml against *M. furfur*; MIC=6.25mg/ml against *C. albicans*). Other extracts showed lower anti-fungal activity against *M. furfur* and *C. albicans* (MIC≥25mg/ml). Meanwhile, all extracts showed anti-fungal activity against *C. albicans* with zone of inhibition (ZOI) ranging from 7.00-19.67mm. Ethanol extract demonstrated the highest ZOI of 19.67±0.09mm compared to others at 200mg/ml. Analysis carried out using one-way ANOVA indicated no significant different between extracts and standard (p>0.05) when compared individually at all concentrations: 200, 100 & 50mg/ml except for petroleum ether extract. **Conclusion:** The promising anti-fungal activity from ethanol extract was due to the presence of various secondary metabolites.

Keywords: *Citrus limon*, anti-fungal, successively extracted, *Malassezia furfur*, *Candida albicans*

(Multiple affiliations)
ABSTRACT SAMPLE EXAMPLE

FORMULATION AND NOSE-TO-BRAIN DELIVERY OF TEMOZOLOMIDE (TMZ) WITH HYDROXYPROPYLCELLULOSE (HPC)

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ABSTRACT

Background and Aim: TMZ is a first line drug for Glioblastoma Multiforme (GBM). However, the treatment is of GBM is often related with damage of healthy brain tissues, resistance of TMZ and inadequate drug delivery across the blood brain barrier as TMZ has poor pharmacokinetic (PK) profiles. Meanwhile, research has shown that plasma concentration of certain drugs after administration from intranasal route produces rapid and effective absorption and has lower risk of early side-effects with mucociliary clearance (MC) as a limiting factor. HPC (H) in powder formulation can enhance nasal drug absorption and reduce MC. Thus, the aim of this research will focus on developing formulation of TMZ encapsulated with HPC (TMZ-HPC) and nose-to-brain delivery of the formulation. **Methodology:** Quantification method of TMZ, *In vitro* Drug Release of TMZ Solution and TMZ with HPC Formulation using Franz type diffusion cells, Viscosity test using Viscomate VM-150III, evaluation of prepared formulations by collection of blood plasma in rats and analysis of TMZ in rats' brain using HPLC. **Results**: The TMZ-HPC formulation was clear in gel-like solution. TMZ-HPC exhibited sustained drug release behavior compared to TMZ solution. Likewise, the TMZ- HPC has a longer retention time in blood plasma compared to TMZ solution. The TMZ-HPC also shows exciting results in which the concentration TMZ was cleared slower in the brain for a period of 8 hours. **Conclusion:** HPC (H) has the potential as suitable excipient to improve the pharmacokinetic profile of TMZ. It will slowly release TMZ hence increasing the retention time and reducing the side effects.

Keywords: Temozolomide, Hydroxypropylcellulose, Drug Release, Pharmacokinetic, Glioblastoma