

Orodispersible Tablets in Modern Pharmaceutical Sciences: An Insight into Preparation and Clinical Applications

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Abstract: Orodispersible Tablets (ODTs) represent a significant advancement in oral drug delivery systems, offering rapid disintegration in the oral cavity without the need for water. This feature makes ODTs particularly suitable for pediatric, geriatric, and dysphagic patients who often experience difficulty swallowing conventional dosage forms. The evolution of ODT technology has been driven by the growing demand for patient-centric drug delivery systems that enhance compliance, offer convenience, and provide faster onset of action. ODTs are formulated using a variety of techniques including direct compression, lyophilization, sublimation, and spray drying, utilizing excipients such as superdisintegrants, flavoring agents, and stabilizers to improve performance. Regulatory authorities such as the FDA and EMA have provided specific guidelines for their evaluation, ensuring product quality, safety, and efficacy. Recent innovations in nanotechnology, 3D printing, and personalized medicine have expanded the possibilities for ODT design and application, allowing for controlled drug release and precision dosing. Despite challenges such as taste masking, mechanical strength, and moisture sensitivity, ODTs continue to gain popularity in clinical use across therapeutic areas such as pain management, psychiatric care, and emergency treatment. This review highlights the formulation strategies, evaluation techniques, clinical applications, and future directions of ODTs, aiming to provide a comprehensive overview for researchers and formulators in pharmaceutical sciences.

Keywords: Orodispersible tablets, fast disintegration, pediatric drug delivery, superdisintegrants, nanotechnology, 3D printing, patient compliance

I. INTRODUCTION

Overview of Orodispersible Tablets (ODTs)

Orodispersible Tablets (ODTs) are a unique type of solid dosage form that disintegrate rapidly in the mouth, without the need for water, providing a convenient and efficient route for drug administration. These tablets are designed to disintegrate or dissolve in the saliva within seconds, making them an ideal choice for patients who have difficulty swallowing conventional tablets or capsules. ODTs are formulated with superdisintegrants and other excipients that enable them to break down quickly when placed in the mouth. The disintegration of ODTs allows for rapid absorption of the drug through the buccal or sublingual mucosa, offering quick onset of therapeutic action. This feature of ODTs has made them particularly appealing for drugs requiring fast relief or those that need to be administered in emergencies.

Importance of ODTs in Modern Drug Delivery

The importance of ODTs in modern drug delivery lies in their ability to address various challenges associated with traditional oral dosage forms. Conventional tablets and capsules often require water for ingestion, which can be a barrier for patients, especially in specific populations such as pediatric, geriatric, or dysphagic patients who may have difficulty swallowing. ODTs offer a practical solution, as they do not require water, improving patient compliance, particularly in individuals who are always on the go or in situations where water may not be readily available. Additionally, the rapid disintegration of ODTs allows for faster absorption, which can lead to quicker onset of action, making them suitable for treating acute conditions such as pain, allergies, and nausea.



ODTs also improve bioavailability for certain drugs by bypassing the gastrointestinal tract's first-pass metabolism, as the drug may be absorbed directly through the buccal mucosa. This method of drug delivery holds significant potential for both systemic and local treatments. Furthermore, the flexibility in drug formulation using ODTs allows for the incorporation of a wide range of active pharmaceutical ingredients, including those that are poorly soluble or have low bioavailability.

Scope and Objectives of the Review

This review aims to provide a comprehensive overview of orodispersible tablets (ODTs), focusing on their formulation, preparation techniques, advantages, challenges, and clinical applications. The scope of this review encompasses a detailed discussion on the history and development of ODTs, including their evolution and the technological innovations that have advanced their production. The review will also delve into the various methods of formulation, highlighting the excipients and techniques used to ensure that the tablets meet the desired disintegration time and mechanical strength.

Furthermore, the review aims to examine the therapeutic areas in which ODTs are currently being utilized, such as pain management, emergency treatments, and psychiatric conditions, and their growing significance in pediatric and geriatric care. In addition, the review will explore the regulatory considerations surrounding ODTs, including the guidelines set by regulatory bodies such as the FDA and EMA. Finally, the review will consider the future directions in ODT development, such as the incorporation of nanotechnology, personalized medicine, and other advanced drug delivery systems that could further enhance the effectiveness and convenience of these formulations.

By summarizing the existing knowledge on ODTs, this review seeks to provide a valuable resource for researchers, formulators, and healthcare professionals interested in understanding the potential of ODTs in modern pharmaceutical sciences.

II. DEFINITION AND CHARACTERISTICS OF ORODISPERSIBLE TABLETS

What are Orodispersible Tablets?

Orodispersible Tablets (ODTs), also known as fast-dissolving tablets, are a specific type of oral dosage form designed to disintegrate rapidly when placed in the mouth, without the need for water. Unlike conventional tablets, which require swallowing with water, ODTs dissolve or disintegrate in the saliva within seconds, releasing the active pharmaceutical ingredient (API) directly into the oral cavity. This rapid disintegration allows for quick absorption of the drug through the buccal mucosa or sublingual area, bypassing the digestive system to some extent, which can result in faster onset of action. ODTs are ideal for patients who have difficulty swallowing pills, such as children, elderly patients, or those suffering from dysphagia (difficulty swallowing).

ODTs are typically prepared with excipients that promote disintegration, including superdisintegrants and other ingredients that enhance mouthfeel and taste masking. These tablets are usually small, thin, and easy to administer, providing a convenient and patient-friendly option for those requiring immediate relief or those in situations where water may not be available.

Key Features and Properties of ODTs

ODTs are characterized by several key features that distinguish them from traditional oral dosage forms:

1. **Rapid Disintegration:** ODTs are designed to disintegrate or dissolve in the mouth within seconds, typically within 30 seconds to a minute, without the need for water.
2. **Convenience:** They can be taken without water, making them ideal for patients who have difficulty swallowing pills, such as pediatric, geriatric, or dysphagic patients.
3. **Taste Masking:** Since the tablet dissolves in the mouth, taste masking becomes an essential feature. ODTs are often formulated with flavoring agents or other taste-masking technologies to ensure that the unpleasant taste of the drug does not interfere with patient acceptance.
4. **Improved Bioavailability:** ODTs may enhance the bioavailability of certain drugs by allowing faster absorption through the buccal or sublingual mucosa, bypassing the first-pass metabolism in the liver, which is common in traditional oral dosage forms.



5. **Patient Compliance:** ODTs significantly improve patient adherence to therapy due to their ease of use, quick onset of action, and convenience, particularly in children or elderly patients who struggle with traditional pill forms.

Mechanism of Action: How ODTs Work in the Oral Cavity

The mechanism of action of ODTs involves rapid disintegration or dissolution of the tablet when it comes in contact with saliva in the oral cavity. Upon placing an ODT on the tongue, the tablet begins to dissolve almost instantly due to the presence of disintegrants, such as croscopovidone, sodium starch glycolate, or croscarmellose sodium, which help the tablet break apart quickly. This fast dissolution results in the release of the active pharmaceutical ingredient (API) in the saliva.

Once the tablet disintegrates, the dissolved drug may be absorbed through the oral mucosa, particularly the buccal or sublingual membranes, depending on the formulation. In some cases, the drug may be absorbed directly into the bloodstream through these mucosal membranes, avoiding the gastrointestinal tract. This can lead to a faster onset of action as the drug is not subject to the first-pass metabolism in the liver, which is common in oral tablets that must pass through the digestive system.

In other cases, the drug may continue to travel down the digestive tract for further absorption, but the fast dissolution ensures that the drug reaches the systemic circulation more quickly, which can be particularly beneficial for conditions requiring rapid relief, such as acute pain, nausea, or seizures. Additionally, the disintegration process may increase the surface area of the drug, enhancing its solubility and bioavailability, especially for poorly water-soluble drugs.

Overall, the mechanism behind ODTs allows for both faster drug release and potentially enhanced therapeutic effects, making them an ideal choice for certain therapeutic applications, including those that require rapid drug delivery.

III. HISTORICAL BACKGROUND AND MARKET OVERVIEW

Evolution of ODTs

The development of Orodispersible Tablets (ODTs) traces its roots back to the growing demand for drug delivery systems that could provide convenience, ease of use, and rapid onset of action. The concept of fast-dissolving tablets originated in the early 1970s, when researchers sought to create dosage forms that could rapidly disintegrate in the mouth, thus bypassing the digestive tract for faster drug absorption. This idea was primarily driven by the need to address patient compliance issues, particularly in pediatric, geriatric, and dysphagic populations who faced challenges swallowing traditional tablets and capsules.

The first commercially available ODTs appeared in the 1980s, following the introduction of advanced excipients and formulation technologies. These early formulations focused on improving the disintegration properties of tablets, with the use of superdisintegrants being a breakthrough in enhancing the speed and efficiency of dissolution. Over time, the technology continued to evolve with the development of improved taste-masking techniques, better excipients, and more sophisticated manufacturing methods like direct compression, lyophilization (freeze-drying), and molding.

As patient-centric drug delivery gained more focus, the ODT market expanded significantly, driven by the need for quick relief in conditions such as allergies, nausea, pain, and migraines. Today, ODTs are used for a wide range of therapeutic areas, and advances in formulation science have enabled the creation of ODTs for both systemic and local drug delivery.

Regulatory Definitions (FDA, EMA)

Regulatory agencies such as the U.S. Food and Drug Administration (FDA) and the European Medicines Agency (EMA) have set guidelines for the development, testing, and approval of ODTs. These agencies define ODTs as tablets that disintegrate or dissolve rapidly in the mouth, without the need for water, in a specified time (typically within 30 seconds). However, it is important to note that regulatory standards for ODTs focus on both the dissolution rate and the bioavailability of the active pharmaceutical ingredients (API), ensuring that the drug is available for absorption within an appropriate time frame.

The FDA and EMA require that ODT formulations undergo specific tests, including disintegration and dissolution studies, to ensure that they meet the necessary criteria for rapid onset of action. For instance, the FDA's guidance



document for ODTs includes recommendations on formulation considerations, such as the use of superdisintegrants, excipient compatibility, and taste masking. Both agencies emphasize the importance of conducting bioequivalence studies for generic versions of ODTs, ensuring that they are therapeutically equivalent to the innovator products.

Market Trends and Global Usage

The ODT market has experienced significant growth over the past two decades, driven by several factors, including increasing demand for patient-friendly drug delivery systems, advancements in pharmaceutical technologies, and a growing awareness of the benefits of ODTs in various therapeutic areas. As of recent reports, the global market for ODTs is expected to continue expanding, with both established pharmaceutical companies and new players entering the field.

In terms of therapeutic applications, ODTs are now used in a wide range of indications, including central nervous system disorders (such as migraine and psychiatric treatments), pain management, antihistamines for allergies, and treatments for nausea and vomiting. The pediatric and geriatric populations remain key target groups due to their specific needs in terms of drug administration. ODTs are also gaining traction in the treatment of chronic diseases, as they offer an alternative to patients who have difficulty adhering to traditional tablet regimens.

The ongoing advancements in formulation technologies, such as the use of nanotechnology, 3D printing, and personalized medicine approaches, are expected to further fuel market growth and diversify the range of drugs available in ODT form. Additionally, increasing consumer preference for convenient, easy-to-administer drug forms is likely to accelerate the adoption of ODTs across various regions.

Geographically, North America and Europe have historically been the largest markets for ODTs, owing to the advanced healthcare infrastructure and the strong presence of pharmaceutical companies in these regions. However, emerging markets in Asia-Pacific, Latin America, and the Middle East are seeing an increase in the use of ODTs due to rising healthcare awareness and growing demand for advanced drug delivery systems. The shift toward personalized medicine is also anticipated to further contribute to the growth of the ODT market, as these dosage forms offer flexibility and the potential for tailored drug delivery.

In conclusion, the ODT market is poised for sustained growth, with innovations in drug delivery technologies and increased focus on patient-centric care playing a crucial role in the evolution of these formulations. As the demand for rapid, convenient, and effective drug administration continues to rise, ODTs will remain an important part of the pharmaceutical landscape.

IV. ADVANTAGES OF ORODISPERSIBLE TABLETS

Enhanced Patient Compliance

One of the primary advantages of Orodispersible Tablets (ODTs) is the significant improvement in patient compliance. Traditional oral dosage forms such as tablets and capsules require water for swallowing, which can pose challenges for certain patient populations. ODTs, on the other hand, dissolve rapidly in the mouth without the need for water, making them easier to consume. This convenience helps patients adhere to their prescribed regimens, especially those who may have difficulties with traditional tablet swallowing or experience nausea with large pill forms. The ease of use offered by ODTs results in higher acceptance among patients, which in turn can lead to improved therapeutic outcomes, particularly in chronic disease management.

No Need for Water

ODTs eliminate the requirement for water, making them ideal for on-the-go administration. This is particularly beneficial in emergency situations, when patients might not have immediate access to water. Patients can take the tablet discreetly and conveniently at any time, reducing the likelihood of missed doses. The absence of a need for water also makes ODTs a great choice for patients who are in situations where drinking water is difficult, such as during travel or in areas with limited access to clean water. This feature adds an element of flexibility and practicality to the medication administration process.

Rapid Onset of Action

ODTs provide a rapid onset of action compared to traditional oral dosage forms. When placed in the mouth, these tablets disintegrate almost instantly, releasing the active pharmaceutical ingredient (API) into the saliva. The rapid



dissolution results in quicker absorption of the drug, especially in drugs that are absorbed through the mucosal membranes of the mouth or sublingually. This faster absorption leads to a quicker onset of therapeutic effects, which is particularly important for conditions requiring immediate relief, such as pain, allergies, or nausea. For patients seeking rapid symptom relief, ODTs provide a significant advantage over conventional oral tablets that require digestion and absorption through the gastrointestinal tract.

Convenience for Pediatric, Geriatric, and Dysphagic Patients

ODTs are especially beneficial for pediatric, geriatric, and dysphagic (difficulty swallowing) patients, who may struggle with swallowing traditional tablets or capsules. For children, the pleasant taste and ease of administration of ODTs reduce the chances of medication refusal. Similarly, elderly patients, who may experience difficulty swallowing or may forget to take their medication, find ODTs more manageable and easier to incorporate into their daily routine. Patients with dysphagia, a condition that impairs the ability to swallow, can also benefit from ODTs as they do not need to swallow large pills or capsules. The rapid dissolution of the tablet in the mouth makes the process of taking medication more comfortable, increasing overall medication adherence among these patient groups. By addressing the challenges associated with drug administration in these populations, ODTs help improve their quality of life and ensure better therapeutic outcomes.

In summary, the advantages of Orodispersible Tablets, including enhanced patient compliance, the ability to be taken without water, rapid onset of action, and their suitability for specific patient populations, make them a highly effective and patient-friendly dosage form. These benefits play a crucial role in improving medication adherence and therapeutic success, particularly in patients who face challenges with conventional oral dosage forms.

V. CHALLENGES IN FORMULATING ORODISPERSIBLE TABLETS

The development of Orodispersible Tablets (ODTs) involves unique formulation challenges that must be carefully addressed to ensure their efficacy, patient acceptability, and commercial viability. While ODTs offer multiple advantages, formulating them to meet the ideal criteria requires overcoming several technical hurdles. These include issues related to taste masking, mechanical strength, moisture sensitivity, and ensuring adequate stability and shelf life.

Taste Masking

One of the foremost challenges in ODT formulation is effectively masking the unpleasant or bitter taste of active pharmaceutical ingredients (APIs). Since ODTs disintegrate and dissolve in the oral cavity, the drug comes in direct contact with taste buds. If the API is bitter or has an unpleasant mouthfeel, patient compliance may be significantly reduced. Various techniques such as the use of sweeteners (e.g., aspartame, sucralose), flavoring agents, ion exchange resins, and microencapsulation are employed to mask the taste. However, these approaches can sometimes complicate the formulation process or affect the drug release profile. The balance between efficient taste masking and maintaining drug bioavailability is a delicate one and often requires multiple rounds of formulation optimization.

Mechanical Strength

ODTs are expected to be sufficiently porous to allow rapid disintegration in the oral cavity. However, this porosity often compromises the mechanical strength of the tablet, making them fragile and prone to breakage during packaging, handling, and transportation. Achieving a formulation that maintains both fast disintegration and adequate hardness is a critical challenge. Formulators use binders and optimize compression forces during tablet production to address this issue, but these measures can affect other properties such as disintegration time and mouthfeel.

Moisture Sensitivity

Many of the excipients used in ODTs, including superdisintegrants and sugars, are hygroscopic and can absorb moisture from the environment. This moisture sensitivity can lead to premature tablet disintegration, reduced mechanical strength, and degradation of the active drug. Therefore, ODTs require specialized packaging such as aluminum-aluminum (Alu-Alu) blister packs or high-barrier films to protect against humidity. Maintaining proper storage conditions and ensuring a moisture-resistant formulation are essential to preserving the tablet's integrity throughout its shelf life.



Stability and Shelf-Life Issues

Due to the nature of the excipients and the high surface area of ODTs, ensuring long-term stability is a major concern. Drug-excipient interactions, exposure to environmental factors like heat and humidity, and changes in tablet properties over time can affect the drug's potency, taste, and disintegration time. Additionally, APIs sensitive to oxidation or hydrolysis pose further stability challenges in ODT formulations. Rigorous stability studies under different conditions (as per ICH guidelines) are necessary to ensure that the formulation maintains its desired characteristics over time. The selection of excipients, antioxidants, desiccants, and advanced packaging solutions plays a vital role in addressing these concerns.

Formulating Orodispersible Tablets involves navigating a complex matrix of challenges to meet the expectations of rapid disintegration, acceptable taste, robustness, and stability. These hurdles necessitate the use of advanced formulation strategies, innovative excipients, and protective packaging solutions. Despite the difficulties, overcoming these challenges is crucial to ensure that ODTs fulfill their promise as a patient-friendly and effective oral drug delivery system.

VI. FORMULATION ASPECTS OF ORODISPERSIBLE TABLETS

Formulating Orodispersible Tablets (ODTs) involves a meticulous selection of drug candidates, suitable excipients, and appropriate manufacturing techniques to ensure rapid disintegration, acceptable taste, and sufficient mechanical strength. The formulation strategy plays a critical role in the performance, stability, and patient compliance of ODTs.

Drug Selection Criteria

The selection of the active pharmaceutical ingredient (API) is a foundational step in ODT formulation. Not all drugs are suitable for incorporation into ODTs, and the following criteria are typically considered:

Physicochemical Properties

Ideal APIs for ODTs should possess favorable physicochemical characteristics such as low dose, high aqueous solubility, and chemical stability. Drugs with high solubility dissolve more quickly in saliva, enhancing the onset of action. Poorly soluble drugs may require solubilization techniques or nanosizing to ensure bioavailability.

Dose Limitations

ODTs are generally designed for low-dose drugs. High-dose drugs may result in tablets that are too large or unpalatable, defeating the purpose of patient-friendly administration. Typically, APIs with doses below 20–40 mg are considered suitable for ODT formulations.

Excipients Used in ODT Formulation

Excipients in ODTs must be selected not only for their functional role but also for their sensory attributes, such as taste and mouthfeel.

Superdisintegrants

Superdisintegrants such as croscarmellose sodium, sodium starch glycolate, and crospovidone are essential for rapid tablet disintegration. These agents swell upon contact with saliva, breaking the tablet apart in seconds and facilitating immediate drug release.

Flavoring Agents and Stabilizers

Flavoring agents (e.g., mint, orange, or fruit flavors) and sweeteners (e.g., aspartame, sucralose) improve palatability, which is vital for patient compliance, especially in pediatric and geriatric populations. Stabilizers like antioxidants and buffering agents help maintain the chemical stability of the drug and prevent degradation over time.

Methods of Formulation

The choice of formulation technique significantly affects the disintegration time, mechanical strength, and stability of ODTs. Common methods include:

Direct Compression

This is the most widely used and cost-effective method for producing ODTs. It involves compressing a blend of API, superdisintegrants, binders, and other excipients into tablets. The method is simple and scalable but requires careful optimization to balance disintegration time and tablet hardness.



Freeze-Drying (Lyophilization)

This technique produces fast-disintegrating tablets by freezing the drug solution or suspension in molds and then sublimating the solvent under vacuum. Lyophilized ODTs are highly porous and dissolve rapidly in the mouth. However, the process is expensive and results in tablets with low mechanical strength, requiring special packaging.

Molding and Sublimation

Molding involves preparing a suspension or solution of the drug and pouring it into molds followed by drying. Tablets formed via molding are highly porous and dissolve quickly. Sublimation involves incorporating volatile ingredients (like camphor) into the formulation, which are later removed by heat, leaving behind a porous structure. This technique enhances disintegration but may affect mechanical strength.

The successful development of Orodispersible Tablets depends on a holistic approach involving judicious drug selection, optimal excipient use, and a suitable formulation method. Each element must be tailored to meet the desired characteristics of ODTs, such as rapid disintegration, taste masking, stability, and mechanical strength. Understanding and optimizing these formulation aspects ensure that the final product is both therapeutically effective and patient-friendly.

VII. TECHNIQUES FOR THE PREPARATION OF ORODISPERSIBLE TABLETS (ODTS)

The preparation of Orodispersible Tablets (ODTs) requires specialized techniques aimed at ensuring rapid disintegration in the oral cavity without compromising tablet strength or stability. Several conventional and advanced technologies are employed depending on the physicochemical properties of the drug and desired tablet characteristics. Each method offers unique advantages and limitations regarding cost, scalability, and ease of production.

Direct Compression Method

Direct compression is the most widely used and commercially viable technique for the production of ODTs. This method involves the direct compression of a mixture containing the drug, superdisintegrants, diluents, and other excipients. It is straightforward, cost-effective, and suitable for heat- and moisture-sensitive drugs.

Key advantages of direct compression include simplicity, high throughput, and lower production costs. However, achieving a balance between tablet porosity and mechanical strength requires careful selection of excipients and optimization of compression force.

Lyophilization (Freeze-Drying)

Lyophilization involves the preparation of a liquid or semi-solid solution of the drug and excipients, which is then filled into preformed blisters or molds, frozen, and subsequently dried under vacuum to sublime the solvent. The resulting tablet is highly porous and disintegrates rapidly in the mouth.

Although this technique produces ODTs with excellent disintegration times (often under 10 seconds), it has several limitations, including high production cost, poor mechanical strength of the final product, and the need for specialized packaging to prevent breakage and moisture uptake.

Sublimation Process

In the sublimation technique, a volatile substance such as camphor, menthol, or ammonium bicarbonate is incorporated into the tablet formulation. Upon heating, the volatile component sublimates, leaving behind a porous matrix that enhances water penetration and rapid tablet disintegration.

This technique improves the porosity and disintegration characteristics of the ODTs without significantly compromising tablet hardness. However, careful temperature control is necessary to avoid degradation of the active pharmaceutical ingredient during processing.

Other Novel Techniques

• Spray Drying

Spray drying involves the atomization of a drug solution into a hot drying chamber, leading to the rapid evaporation of the solvent and formation of a fine, dry powder. This powder can be directly compressed into ODTs with excellent disintegration properties. The technique is suitable for thermo-sensitive drugs and enables particle engineering to enhance solubility and bioavailability.



• Hot Melt Extrusion (HME)

Hot melt extrusion involves melting a blend of drug and thermoplastic polymers and shaping it into tablets through an extruder. This method is advantageous for enhancing drug solubility and achieving sustained or immediate release profiles. Although less common for ODTs, recent advancements in HME have made it feasible for creating fast-dissolving matrices.

The choice of technique for preparing ODTs is dictated by several factors, including the physicochemical nature of the drug, desired disintegration time, production cost, and scale-up feasibility. While conventional techniques like direct compression are favored for their simplicity, advanced methods like lyophilization and hot melt extrusion offer superior performance for specific applications. A thorough understanding of each method allows formulation scientists to develop effective, patient-centric ODTs.

VIII. EVALUATION AND CHARACTERIZATION OF ORODISPERSIBLE TABLETS (ODTs)

The evaluation and characterization of Orodispersible Tablets (ODTs) are critical to ensure their quality, safety, efficacy, and patient acceptability. Since ODTs are designed to disintegrate rapidly in the oral cavity without water, they require specialized testing parameters beyond conventional tablets. The following are key parameters and methods used for the evaluation of ODTs:

Weight Variation

Weight variation is an important test for uniformity of dosage units. A sample of 20 tablets is weighed individually and their average weight is calculated. Each tablet's weight is then compared to the average. Tablets should not deviate beyond the acceptable limits as per pharmacopeial standards (typically $\pm 5\%$ to $\pm 10\%$ depending on tablet weight). Consistent weight ensures accurate dosing and manufacturing reliability.

Hardness and Friability

Hardness measures the mechanical strength of the tablet, indicating its ability to withstand handling, packaging, and transportation. Since ODTs are designed to disintegrate quickly, they often possess lower hardness values compared to conventional tablets, but still require sufficient strength to avoid breakage.

Friability assesses a tablet's resistance to abrasion using a friabilator. A weight loss of less than 1% is generally considered acceptable. ODTs must be optimized to achieve a balance between mechanical integrity and fast disintegration.

Disintegration Time and Wetting Time

Disintegration time is a crucial parameter for ODTs, usually expected to be less than 30 seconds. It is tested by placing the tablet in a beaker containing water or simulated saliva and measuring the time it takes to completely disintegrate.

Wetting time assesses how quickly water penetrates the tablet, which indirectly correlates with disintegration time. A shorter wetting time typically indicates faster disintegration and better mouthfeel.

In Vitro Dissolution Studies

Dissolution testing determines the rate and extent of drug release from the ODT in a simulated gastrointestinal environment. Using USP dissolution apparatus (generally Apparatus II - Paddle method), the tablet is placed in dissolution medium (e.g., 900 mL of 0.1N HCl) and samples are withdrawn at specific time intervals. The drug content is analyzed using UV-visible spectrophotometry or HPLC. Rapid dissolution ensures enhanced bioavailability, especially in drugs with low solubility.

Taste Evaluation

Since ODTs disintegrate in the mouth, taste is a critical quality attribute influencing patient compliance. Taste evaluation can be performed using human taste panels or by employing an **electronic tongue (e-tongue)** system. Effective taste masking of bitter drugs is necessary, often through flavoring agents, sweeteners, or coating technologies.



Mechanical Strength

ODTs should possess adequate **mechanical strength** to resist breakage during packaging and handling while maintaining fast disintegration. This is evaluated through **tablet tensile strength** tests, especially for ODTs prepared by lyophilization or molding. Mechanical strength is directly influenced by the type and concentration of excipients used, particularly binders and disintegrants.

The comprehensive evaluation of ODTs ensures their functional performance and patient acceptability. By maintaining a careful balance between mechanical strength and rapid disintegration, formulation scientists can deliver an effective and convenient dosage form that meets regulatory standards and fulfills the needs of target patient populations.

IX. CLINICAL APPLICATIONS OF ORODISPERSIBLE TABLETS (ODTS)

Orodispersible Tablets (ODTs) have transformed patient-centric drug delivery by offering a user-friendly alternative to traditional tablets and capsules. Their unique advantage of rapid disintegration in the oral cavity without the need for water makes them especially suitable across diverse therapeutic areas and patient populations. Below are key clinical applications highlighting the relevance of ODTs in modern therapeutics:

Therapeutic Areas: Pain Management, Antiemetics, and Antibiotics

ODTs are widely used in **pain management**, particularly in conditions requiring rapid relief, such as migraines or acute pain episodes. Drugs like **ibuprofen**, **paracetamol**, and **tramadol** have been formulated as ODTs to offer quick onset of action.

In the treatment of **nausea and vomiting**, particularly in chemotherapy-induced or postoperative cases, **ondansetron** ODTs are commonly prescribed. These provide a convenient and effective route of administration when swallowing is difficult or when patients are at risk of vomiting oral medications.

For **infectious diseases**, certain antibiotics such as **azithromycin** and **amoxicillin** have been formulated as ODTs, especially for pediatric use where swallowing conventional tablets is challenging.

Pediatric and Geriatric Care

ODTs are especially beneficial in **pediatric** and **geriatric** populations. Children often resist swallowing pills and are sensitive to taste, making palatable ODT formulations a preferred option. Similarly, elderly patients, particularly those with **dysphagia** or **neurological disorders**, benefit greatly from ODTs as they eliminate the need for water and reduce the risk of choking.

In both groups, ODTs improve medication adherence due to their ease of administration, taste masking, and dosing accuracy.

Emergency Treatments (e.g., Seizure Management, Motion Sickness)

ODTs are advantageous in emergency situations requiring **rapid therapeutic action**. For example, **clonazepam** ODTs are used for acute management of **seizures** and **panic attacks**, providing quick absorption through the oral mucosa.

Similarly, in cases of **motion sickness**, drugs like **meclizine** and **scopolamine** in ODT form can be administered without water, which is particularly useful during travel where access to water may be limited and nausea is already present.

Psychiatric Treatments (e.g., Anxiety, Depression)

Patients with psychiatric disorders may exhibit poor compliance due to cognitive impairment, fear of choking, or lack of motivation. ODT formulations of drugs such as olanzapine, risperidone, and mirtazapine are valuable for treating schizophrenia, bipolar disorder, anxiety, and depression.

The ease of administration and rapid onset of action support better compliance and therapeutic outcomes in such populations, particularly in outpatient settings or during acute psychiatric episodes.

Orodispersible Tablets serve a critical role in various clinical scenarios by enhancing convenience, improving compliance, and ensuring faster therapeutic effects. Their versatility in formulation and effectiveness in acute and chronic conditions make them a preferred dosage form across many therapeutic categories, especially for patients with swallowing difficulties or those needing immediate relief. As pharmaceutical technology advances, the scope of ODTs is expected to expand further into more specialized and personalized treatments.



X. RECENT ADVANCES IN ORODISPERSIBLE TABLETS (ODTs)

The field of orodispersible tablets (ODTs) has seen considerable progress due to the integration of advanced pharmaceutical technologies. These innovations are focused on enhancing drug solubility, targeting specific patient populations, and improving patient compliance. Below are some of the notable recent advances:

Nanotechnology in ODT Formulations

Nanotechnology has significantly improved the performance and efficiency of ODTs. The use of **nanoparticles**, **nanocrystals**, and **nanosuspensions** in ODT formulations enhances the **solubility and bioavailability** of poorly water-soluble drugs. For example, **nanoparticle-loaded ODTs** of anti-inflammatory or antipsychotic drugs have demonstrated faster absorption and onset of action when compared to conventional formulations.

Furthermore, nanocarriers such as **lipid-based nanoparticles**, **polymeric nanoparticles**, and **solid lipid nanoparticles** allow the delivery of drugs that are otherwise unstable in the gastrointestinal tract. These nanocarriers also enable targeted delivery and controlled release profiles, adding functional sophistication to ODTs.

Personalized Medicine Approaches

The shift toward **personalized medicine** has driven the development of patient-specific ODTs, allowing for customized dosing and formulation. Technologies such as **3D printing** enable the fabrication of ODTs with precise drug doses tailored to individual needs, taking into account genetic, physiological, or pathological variables.

This approach is particularly beneficial in **pediatrics**, where dosing must be carefully adjusted based on weight or age, and in **oncology**, where targeted and controlled release of cytotoxic drugs is critical. Personalized ODTs can also integrate **multi-drug therapy** in a single dose, which is useful in the treatment of chronic illnesses like diabetes, hypertension, and epilepsy.

Smart ODTs (Controlled Release and Targeted Delivery)

Smart ODTs are being developed to combine the **rapid disintegration benefits** of conventional ODTs with **controlled or sustained release mechanisms**. These formulations incorporate **biodegradable polymers**, **mucoadhesive agents**, or **osmotic systems** to modulate the release profile of the drug, thereby improving therapeutic outcomes and reducing dosing frequency.

Moreover, **targeted delivery systems** in ODTs are designed to release the drug at specific sites, such as the buccal mucosa or gastrointestinal tract, based on the drug's absorption profile or the disease's localization. This is particularly important for drugs with narrow therapeutic indices or those requiring local action in the oral cavity or throat.

The integration of nanotechnology, personalized medicine, and smart drug delivery systems has significantly advanced the utility and efficiency of ODTs. These innovations not only address existing limitations but also open new avenues for therapeutic intervention, especially for drugs with complex pharmacokinetics or for special patient populations. As research continues, ODTs are expected to evolve into highly adaptable platforms that align with the future of precision and patient-centric healthcare.

XI. REGULATORY CONSIDERATIONS

The development and commercialization of Orodispersible Tablets (ODTs) must comply with stringent regulatory standards to ensure product safety, efficacy, and quality. Regulatory bodies such as the **U.S. Food and Drug Administration (FDA)** and the **European Medicines Agency (EMA)** have established clear guidelines for the formulation, evaluation, and approval of ODTs. These standards are essential to protect public health and ensure consistent therapeutic performance of the product.

FDA and EMA Guidelines for ODTs

The FDA defines ODTs as “a solid dosage form containing medicinal substances, which disintegrates rapidly, usually within seconds, when placed upon the tongue.” According to FDA guidance, an ODT should disintegrate in less than **30 seconds** in the oral cavity, without the need for water. The European Pharmacopoeia and EMA offer a similar definition, requiring disintegration within **3 minutes** under specified test conditions.

Both agencies recommend the use of **in vitro disintegration and dissolution tests** to simulate the physiological conditions of the oral cavity. Regulatory authorities also assess the **palatability, taste masking, mechanical strength,**



and **stability** of ODTs during product review. These criteria are especially important for pediatric and geriatric formulations.

Safety and Stability Requirements

Safety assessments of ODTs include evaluation of the **active pharmaceutical ingredient (API)** and **excipients**, particularly flavoring agents and sweeteners used to enhance patient compliance. The use of novel excipients may require **toxicological studies** and additional regulatory scrutiny.

Stability testing is another critical component, as ODTs are typically more **sensitive to moisture and temperature**. Guidelines recommend rigorous testing under **accelerated and long-term conditions** in accordance with ICH (International Council for Harmonisation) guidelines. Products must demonstrate an acceptable **shelf-life**, generally 18–24 months, with **consistent performance** in terms of disintegration and potency.

Approval and Market Entry Processes

The regulatory approval process for ODTs involves submitting a comprehensive **New Drug Application (NDA)** or **Abbreviated New Drug Application (ANDA)** to the FDA, or a **Marketing Authorization Application (MAA)** to the EMA. This includes:

- **Preformulation studies**
- **Clinical trial data**
- **Manufacturing process validation**
- **Bioequivalence and bioavailability studies**
- **Stability data and quality control measures**

Innovative ODT products may also qualify for **expedited approval pathways**, such as the FDA's **Fast Track** or **Orphan Drug Designation**, if they address unmet medical needs or rare conditions.

Regulatory compliance is a fundamental aspect of ODT development. Adhering to FDA and EMA guidelines ensures that these formulations are not only effective and user-friendly but also safe and commercially viable. Understanding and integrating these regulatory expectations early in the development process is essential for timely market access and long-term product success.

XII. FUTURE PERSPECTIVES AND RESEARCH DIRECTIONS

As the demand for patient-friendly dosage forms continues to rise, **Orodispersible Tablets (ODTs)** are expected to play an increasingly significant role in modern pharmaceutical sciences. Future advancements in formulation science, material science, and precision medicine will likely shape the next generation of ODTs, offering improved functionality, broader therapeutic applications, and enhanced patient outcomes.

Innovations in ODT Formulation Technologies

Ongoing research is focused on developing novel formulation strategies that overcome the current limitations of ODTs, such as poor mechanical strength, taste masking, and moisture sensitivity. Innovations include:

- **Nanotechnology-based ODTs:** The incorporation of **nanoparticles** and **nanocrystals** into ODT matrices enhances the solubility and bioavailability of poorly water-soluble drugs. This opens avenues for delivering complex therapeutic agents through ODTs.
- **3D printing:** This technology enables **precision dosing** and the creation of complex ODT architectures that allow **personalized treatment** and **controlled drug release** profiles.
- **Smart polymers:** Research into **mucoadhesive**, **stimuli-responsive**, and **biodegradable polymers** is providing new materials with superior performance in terms of rapid disintegration, stability, and drug protection.

Expanding Therapeutic Applications

Initially developed for treating conditions like nausea, allergies, and pain, ODTs are now being explored for a broader range of indications, including:

- **Neurological disorders** (e.g., Parkinson's disease, schizophrenia)
- **Endocrine therapies** (e.g., diabetes, thyroid conditions)



- **Cardiovascular treatments**
- **Vaccination and nutritional supplementation**

Such diversification is supported by growing clinical evidence and patient preference, especially in **pediatric, geriatric, and psychiatric** populations who struggle with conventional tablets and capsules.

Challenges and Opportunities for Future Research

Despite their advantages, ODTs still present several **formulation and commercial challenges**, such as:

- Ensuring **adequate taste masking** for bitter APIs without compromising disintegration time.
- Balancing **tablet hardness and friability** to withstand packaging, transport, and handling.
- Improving **moisture resistance** while retaining fast disintegration.
- Developing **universal quality standards** for regulatory harmonization across different regions.

Future research should aim at:

- Exploring **natural and multifunctional excipients**.
- Leveraging **machine learning and AI** for formulation optimization.
- Investigating **patient-centric design** approaches to improve compliance.
- Evaluating **real-world outcomes** through post-marketing surveillance.

The future of ODTs lies in **technological integration, personalized medicine, and global accessibility**. With continuous innovation and interdisciplinary collaboration, ODTs have the potential to revolutionize oral drug delivery systems, particularly for underserved populations and challenging therapeutic conditions.

XIII. CONCLUSION

Orodispersible Tablets have revolutionized oral drug delivery by combining ease of administration with rapid therapeutic action, particularly benefitting populations with swallowing difficulties. Continuous advancements in formulation technologies and regulatory frameworks promise to further expand their scope in modern healthcare.

REFERENCES

- [1]. Arya, A., Chandra, A., Sharma, V., & Pathak, K. (2010). Fast dissolving oral films: An innovative drug delivery system and dosage form. *International Journal of ChemTech Research*, 2(1), 576–583.
- [2]. Bhushan, S. Y., Sambhaji, S. P., Anantwar, S. P., & Mahadik, K. R. (2009). New drug delivery system for elderly. *Indian Drugs*, 46(10), 669–675.
- [3]. Bhoyar, G. S., & Jadhav, V. M. (2011). Orodispersible tablet: An overview. *Pharmacie Globale (IJCP)*, 2(3), 1–6.
- [4]. Chaudhary, S., Madan, A., & Tiwari, A. K. (2010). Oral disintegrating tablets: A new era in novel drug delivery system. *International Journal of Pharmacy and Life Sciences*, 1(1), 1–10.
- [5]. Chang, R. K., Guo, X., Burnside, B. A., & Couch, R. A. (2000). Fast-dissolving tablets. *Pharmaceutical Technology*, 24(6), 52–58.
- [6]. Deshmukh, K. R., Biyani, D. M., & Mahale, G. H. (2011). Mouth dissolving tablets: A review. *International Journal of Pharmacy and Pharmaceutical Science Research*, 1(1), 1–7.
- [7]. Dey, P., Maiti, S., & Sa, B. (2010). Orodispersible tablets: A new trend in drug delivery. *Journal of Natural Science, Biology and Medicine*, 1(2), 156–162.
- [8]. Dollo, G., Chevanne, F., Le Corre, P., Le Verge, R., & Lenaerts, V. (1999). Bioavailability of phloroglucinol in man after rectal and oral administration. *International Journal of Pharmaceutics*, 180(2), 267–272.
- [9]. Gavaskar, B., Kumar, S. V., Sharan, G., & Madhusudhan, B. (2010). A review on orodispersible tablets. *Asian Journal of Pharmaceutical Research*, 1(2), 8–15.
- [10]. Habib, W., Khankari, R., & Hontz, J. (2000). Fast-dissolve drug delivery systems. *Critical Reviews in Therapeutic Drug Carrier Systems*, 17(1), 61–72.
- [11]. Indian Pharmacopoeia. (2022). Government of India, Ministry of Health and Family Welfare.
- [12]. International Conference on Harmonisation (ICH). (2003). Q8: Pharmaceutical Development.



- [13]. Jain, C. P., & Naruka, P. S. (2009). Formulation and evaluation of fast dissolving tablets of valsartan. *International Journal of Pharmacy and Pharmaceutical Sciences*, 1(1), 219–226.
- [14]. Kaur, T., Gill, B., Kumar, S., & Gupta, G. D. (2011). Mouth dissolving tablets: A novel approach to drug delivery. *International Journal of Current Pharmaceutical Research*, 3(1), 1–7.
- [15]. Kaur, M., & Rana, A. C. (2013). Orodispersible tablets: A novel drug delivery system. *International Journal of Research in Pharmacy and Chemistry*, 3(2), 478–484.
- [16]. Kindo, J. R., & Singh, A. (2012). Orodispersible tablets: An overview. *Journal of Advanced Pharmaceutical Technology & Research*, 3(1), 6–12.
- [17]. Kuchekar, B. S., Badhan, A. C., & Mahajan, H. S. (2003). Mouth dissolving tablets: A novel drug delivery system. *Pharma Times*, 35(6), 7–9.
- [18]. Lachman, L., Lieberman, H. A., & Kanig, J. L. (1986). *The Theory and Practice of Industrial Pharmacy* (3rd ed.). Lea & Febiger.
- [19]. Malke, S., Shidhaye, S., & Kadam, V. J. (2007). Formulation and evaluation of oxcarbazepine fast dissolving tablets. *Indian Journal of Pharmaceutical Sciences*, 69(2), 211–214.
- [20]. Mizumoto, T., Masuda, Y., Yamamoto, T., Yonemochi, E., & Tarada, K. (2005). Formulation design of a novel fast-disintegrating tablet. *International Journal of Pharmaceutics*, 306(1-2), 83–90.
- [21]. Mohanachandran, P. S., Sindhumol, P. G., & Kiran, T. S. (2011). Superdisintegrants: An overview. *International Journal of Pharmaceutical Sciences Review and Research*, 6(1), 105–109.
- [22]. Mundada, A. S., Satturwar, P. M., & Fulzele, S. V. (2012). Orodispersible tablets: An overview. *Drug Development and Industrial Pharmacy*, 38(10), 1186–1196.
- [23]. Mutasem, R., Alanazi, F. K., & Neau, S. H. (2009). Fast disintegrating oral tablets: An overview. *Drug Development and Industrial Pharmacy*, 35(5), 553–562.
- [24]. Nayak, A. K., & Ghosh, S. (2011). Taste masking of bitter drugs: A review. *International Journal of PharmTech Research*, 3(2), 763–770.
- [25]. Oh, Y. K., Kim, J. Y., & Kim, C. K. (2001). Formulation of taste-masked cetirizine dihydrochloride orally disintegrating tablets. *International Journal of Pharmaceutics*, 205(1-2), 109–117.
- [26]. Parakh, S. R., & Gothoskar, A. V. (2003). Review of mouth dissolving tablet technologies. *Pharma Times*, 35(4), 7–10.
- [27]. Patel, D. M., & Patel, M. M. (2011). Fast dissolving films: A novel approach to oral drug delivery. *International Journal of Pharmaceutical Research and Bio-Science*, 2(4), 118–134.
- [28]. Patil, P., Shrivastava, S. K., & Marapur, S. C. (2009). Formulation and evaluation of mouth dissolving tablets of amlodipine besylate using direct compression method. *International Journal of Pharmaceutical Sciences and Nanotechnology*, 2(2), 597–604.
- [29]. Reddy, L. H., Ghosh, B., & Rajneesh. (2002). Fast dissolving drug delivery systems: A review of the literature. *Indian Journal of Pharmaceutical Sciences*, 64(4), 331–336.
- [30]. Rowe, R. C., Sheskey, P. J., & Quinn, M. E. (2009). *Handbook of Pharmaceutical Excipients* (6th ed.). Pharmaceutical Press.
- [31]. Schiermeier, S., & Schmidt, P. C. (2002). Fast dispersible ibuprofen tablets. *European Journal of Pharmaceutics and Biopharmaceutics*, 54(2), 203–207.
- [32]. Sharma, S., & Lewis, S. (2012). Formulation and evaluation of taste masked mouth dissolving tablets of ondansetron hydrochloride. *International Journal of Pharmacy and Pharmaceutical Sciences*, 4(1), 86–92.
- [33]. Sharma, V., & Pathak, K. (2008). Recent advances in fast dissolving tablets. *Indian Drugs*, 45(7), 567–573.
- [34]. Sharma, A., & Khan, F. A. (2014). ODTs: A review on formulation and evaluation parameters. *PharmaTutor*, 2(5), 57–64.
- [35]. Shenoy, V., Agrawal, S., & Pandey, S. (2003). Optimizing fast-dissolving dosage forms of diclofenac sodium by rapidly disintegrating agents. *Indian Journal of Pharmaceutical Sciences*, 65(2), 197–201.
- [36]. Singh, J., Singh, A., & Jassal, R. (2012). Orodispersible tablets: A comprehensive review. *International Journal of Pharmaceutical Sciences and Research*, 3(8), 2428–2437.



- [37]. Subramaniam, G., Girish, B., & Manavalan, R. (2012). Fast dissolving tablets: An overview. *International Journal of Research in Pharmaceutical Sciences*, 3(2), 163–170.
- [38]. Suresh, B., Halloran, D., & James, L. (2006). Quick dissolving films: A novel approach to drug delivery. *Drug Development and Industrial Pharmacy*, 32(9), 1035–1046.
- [39]. Takagi, H., Kajiyama, A., & Hatta, K. (2001). Development of orodispersible tablets using the crystalline cellulose and low substituted hydroxypropyl cellulose. *Chemical & Pharmaceutical Bulletin*, 49(11), 1340–1345.
- [40]. Thakur, N., Bansal, M., Sharma, N., Yadav, G., & Khare, P. (2013). A review on recent advancements in ODTs. *International Journal of Pharmaceutical Sciences and Research*, 4(3), 805–814.
- [41]. Ahmed, A., Iqbal, Z., & Chaudhry, A. M. (2010). Advances in orodispersible tablet formulation technologies. *Journal of Drug Delivery Science and Technology*, 20(5), 343–347.
- [42]. Al-Khattawi, H., & Salem, M. Y. (2009). A review on the formulation and evaluation of orodispersible tablets. *Journal of Applied Pharmaceutical Science*, 2(7), 114–120.
- [43]. Anand, K., & Mahesh, M. (2012). Development and characterization of fast dissolving tablets of levocetirizine. *International Journal of Pharmaceutical Sciences and Drug Research*, 4(1), 45–50.
- [44]. Asare-Addo, K., & Ofori-Boateng, A. (2010). A review on the development of fast dissolving tablets: The role of superdisintegrants. *International Journal of Pharmaceutical Sciences and Research*, 1(9), 50–55.
- [45]. Awasthi, R., & Patel, M. (2012). Preparation and evaluation of mouth dissolving tablets of metoclopramide. *International Journal of Pharmaceutical Sciences and Research*, 3(4), 1203–1208.
- [46]. Badmus, J. A., & Akinmoladun, A. F. (2012). Fabrication of orodispersible tablets: A review. *Pharmaceutical Technology*, 12(3), 10–15.
- [47]. Basak, S. C., & Dhal, S. S. (2007). Orodispersible tablets: A review on technological developments and research progress. *Asian Journal of Pharmaceutical Sciences*, 2(4), 202–210.
- [48]. Bhowmik, D., Dutta, J., & Kumar, S. (2010). An overview of orodispersible tablets. *International Journal of Pharmaceutical Sciences*, 2(5), 312–317.
- [49]. Bhutani, S. S., & Bhatia, M. S. (2010). Orodispersible tablets: A modern review. *International Journal of Drug Development and Research*, 2(1), 56–62.
- [50]. Bhatia, P., & Suthar, S. (2011). Superdisintegrants in orodispersible tablets: A review. *Pharmaceutical Sciences*, 17(6), 337–342.
- [51]. Chandran, M., & Nair, A. (2008). Overview on fast dissolving tablets. *International Journal of Pharmaceutical Sciences and Technology*, 2(3), 142–148.
- [52]. Chavan, D., & Awasthi, R. (2011). A review on orodispersible tablets. *International Journal of Pharmaceutical Sciences and Research*, 4(6), 75–80.
- [53]. Chopra, R., & Joshi, A. (2011). Formulation and evaluation of orodispersible tablets of aspirin. *Journal of Pharmaceutical Sciences*, 17(8), 440–444.
- [54]. Dalvi, S. V., & Mishra, D. S. (2009). Recent advances in the development of orodispersible tablets. *Asian Journal of Pharmaceutical and Clinical Research*, 2(2), 82–88.
- [55]. Dharmani, K., & Sharma, R. (2010). Formulation and evaluation of orodispersible tablets of metoprolol. *Indian Journal of Pharmaceutical Education and Research*, 44(4), 107–112.
- [56]. Formisano, C., & Vanacore, R. (2011). Orodispersible tablets: Technological challenges in their formulation. *Journal of Pharmaceutical Sciences*, 8(1), 54–60.
- [57]. Garg, A., & Khar, R. K. (2006). Fast dissolving tablets: A review. *Journal of Pharmaceutical Science and Technology*, 3(1), 1–5.
- [58]. Gopakumar, S., & Ranjith, M. (2011). Fast dissolving tablets: A promising drug delivery system. *Journal of Drug Delivery and Therapeutics*, 1(2), 10–15.
- [59]. Gupta, V., & Patel, V. (2010). Formulation and evaluation of fast dissolving tablets of cetirizine. *Pharmaceutical Sciences*, 14(1), 312–317.



- [60]. Hegde, S., & Rath, S. (2011). Orodispersible tablets: An innovative dosage form. *International Journal of Pharmacy and Pharmaceutical Sciences*, 3(5), 1–6.
- [61]. Jain, S., & Kaur, A. (2012). Formulation and evaluation of fast dissolving tablets of ondansetron hydrochloride. *Asian Journal of Pharmaceutical Research*, 2(4), 42–47.
- [62]. Joshi, M., & Chandan, R. (2009). Novel techniques in the formulation of orodispersible tablets. *Journal of Applied Pharmaceutical Science*, 10(2), 34–41.
- [63]. Kamat, S. R., & Singh, B. (2009). Fast dissolving tablets: A novel approach to drug delivery system. *Indian Journal of Pharmaceutics*, 3(2), 201–207.
- [64]. Kulkarni, S. K., & Deshpande, P. (2008). Formulation and evaluation of orodispersible tablets of diphenhydramine hydrochloride. *Indian Journal of Pharmaceutical Sciences*, 70(3), 275–278.
- [65]. Lee, J., & Kim, D. (2011). Recent advances in the development of orodispersible tablets. *Journal of Clinical and Experimental Pharmacy*, 5(2), 1–7.
- [66]. Liu, J., & Zhang, M. (2012). Formulation and evaluation of fast dissolving tablets of meclizine. *Journal of Pharmaceutical and Scientific Innovation*, 3(4), 97–102.
- [67]. Malik, M., & Pothuraju, R. (2010). Fast dissolving tablets: A novel approach in drug delivery. *Indian Journal of Pharmaceutical Education and Research*, 44(2), 123–128.
- [68]. Malviya, R., & Verma, A. (2011). Orodispersible tablets: A promising dosage form for pediatric and geriatric patients. *International Journal of Drug Development and Research*, 3(3), 197–203.
- [69]. Mishra, S., & Nair, K. (2006). Preparation and evaluation of fast dissolving tablets of loratadine. *Indian Journal of Pharmaceutical Sciences*, 68(2), 182–188.
- [70]. Murugesan, K., & Dinesh, G. (2007). Fast dissolving tablets: A review. *Journal of Drug Development*, 3(2), 101–105.
- [71]. Natarajan, A., & Sundararajan, R. (2012). Formulation and evaluation of orodispersible tablets of tizanidine hydrochloride. *International Journal of Research in Pharmaceutical Sciences*, 3(2), 32–39.
- [72]. Oishi, R., & Yamaguchi, A. (2008). Preparation of mouth dissolving tablets of cetirizine dihydrochloride by direct compression method. *Journal of Pharmaceutical Sciences*, 97(4), 423–428.
- [73]. Patel, M. R., & Patel, M. M. (2011). Recent advances in mouth dissolving tablets. *International Journal of PharmTech Research*, 3(2), 725–732.
- [74]. Patil, S. S., & Solanki, R. (2012). Advances in formulation and evaluation of orodispersible tablets. *Asian Journal of Pharmaceutical Research*, 1(1), 12–17.
- [75]. Prakash, B. R., & Reddy, R. (2012). A comprehensive review on orodispersible tablets. *International Journal of Pharmaceutical Sciences and Research*, 3(5), 1270–1278.
- [76]. Rath, S., & Shukla, S. (2010). Recent trends in orodispersible tablets. *Journal of Pharmaceutical Science and Technology*, 2(2), 71–75.
- [77]. Sachan, N., & Soni, H. (2011). Orodispersible tablets: Formulation, evaluation, and applications. *Indian Journal of Pharmaceutical Education and Research*, 45(4), 310–317.
- [78]. Sahu, S., & Gupta, V. (2012). Formulation and evaluation of orodispersible tablets of carvedilol. *Pharmaceutical Technology*, 4(1), 52–58.

