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32 **Introduction**

33 Since the last decade, falsified medicines have been a burden for low and middle income
34 countries (LMIC) [1]. Because of the increase of online trading and the lack of laws in some
35 countries, pharmaceutical solid formulations are the best target for falsification. Several
36 conventions, notably MEDICRIME in 2010 [2], have really helped to understand and apply
37 laws creating the notion of “Pharmaceutical crime”. New low-cost tools have been used to fight
38 against falsification, such as the 2D barcodes or the Radio Frequency Identification (RFID) [3]
39 on the outside packaging. It is already known that Africa is the continent that contains the most
40 falsifications and the poorest quality drugs. Countries like Rwanda had the opportunity to be
41 funded by the US’s government’s department United States Agency International Development
42 in 2009 [4] and by Non-Governmental Organizations in 2011 [5] *inter alia*. Since then, some
43 strategies have been elaborated to control drug quality. For example, Rwanda prohibited
44 antimalarial drug sales through private pharmacies in order to have public pharmacy monopoly.
45 The Ministry of Health of Rwanda created a “Guideline for pharmacovigilance and medicine
46 information system” in 2011 [6]. Nevertheless, other countries still know a growth of falsified
47 drugs and an increasing mortality rate.

48 Many fatal diseases affect LMIC like malaria, which devastates people. Low quality medicines
49 constitute a double burden since it does not treat patients and it increases resistance. Indeed, the
50 low dose of active pharmaceutical ingredient (API) induces a rise of drug resistance and
51 weakens the whole antimalarial therapeutic efficacy [7]. The Nigerian National Agency for
52 Food and Drug Administration and Control (NAFDAC) has identified well known
53 Coartem[®](artemether/lumefantrine 20/120 mg) (batch number NOF 2153 and F2261) in
54 2011[8]. All of these drugs are still currently found on the African market with different expiry
55 dates but still the same batch number. It was found in Democratic Republic of the Congo [9],
56 Cameroon [10], Equatorial Guinea [11] and the last one was discovered the June 26th 2018 in
57 Ghana with an expiry date of 05/2020 for the Coartem[®] F2153 and 03/2020 for Coartem[®] F2261
58 [12]. At the moment, some African countries possess some basic analytical tools, like thin layer
59 chromatography (TLC) or the GPHF Minilab[™], to establish if an antimalarial drug is falsified,
60 but it is time consuming and requires consumables. Since several years, a few number of
61 laboratories have developed new analytical methods such as high pressure liquid
62 chromatography (HPLC) [13] or low-cost devices [14] to check the composition of antimalarial

63 tablets. Some works are still in progress to improve those methods thanks to the design space
64 approach [15]. The implement of these types of method is rather difficult because of the high
65 cost of analysis, due to the solvents, electricity and gas needed. Moreover, there is a lack of
66 skilled labor to ensure the analysis. That is why several spectroscopic methods have been
67 developed in parallel [16].

68 Indeed, vibrational spectroscopy is an analytical technique that has known a genuine expansion
69 since two decades because of its interesting properties and the relevant information obtained.
70 Some works have already been conducted on falsified medicines by near infrared spectroscopy,
71 mid-infrared spectroscopy or Raman spectroscopy [17–19]. These analytical techniques
72 requires no sample preparation (except surface milling) and can be applied on different type of
73 molecules and physico-chemical forms. Furthermore, they are non-invasive, non-destructive
74 and environment-friendly. However, spectral data have to be managed with chemometric tools
75 and multivariate analysis. Most of the time, no database is accessible to make a comparison
76 with the data obtained from analysis, so the database has to be done by itself. On the field, using
77 handheld Raman spectrophotometers can quickly highlight suspicious counterfeit medicines,
78 even through translucent containers [20]. Handheld devices can be used at any step of the supply
79 chain to control drugs. Meanwhile, this type of analysis can only give preliminary conclusions
80 regarding the API's presence or absence for example. That is why Raman spectroscopy has
81 been coupled with a microscope to obtain more information. Some studies have been conducted
82 on the screening of falsified drugs with Raman chemical imaging [21,22]. What is more, it has
83 been demonstrated that a direct classical least square (DCLS) applied on the multivariate curve
84 resolution – alternating least squares (MCR-ALS) pure spectrum matrix can be used to obtain
85 semi-quantitative information about the tablet's composition.

86 In the pharmaceutical field, applications of FT-IR imaging, especially in reflection mode were
87 not found in the literature, FT-IR imaging is usually performed with an attenuated total
88 reflectance (ATR) accessory. It has been shown to be a powerful technique to analyze co-crystal
89 formulation [23] or even to study the interconversion between the crystalline forms of
90 nimodipine[24]. A study has been done on the classification of falsified Viagra® and
91 Cialis®[25], showing that, with the help of chemometrics, mid-infrared spectroscopy can be an
92 efficient tool to discriminate conform from falsified drugs. ATR imaging of pharmaceutical
93 samples also helped analyzing tablet dissolution [26,27]. FT-IR microscopy is not a commonly
94 used technique because of the relatively high cost of the instrument. However, it could be an

95 interesting alternative to the Raman microscopy. Indeed, the latter suffer from auto fluorescence
96 of samples that is mainly present in colored samples or due to high amount of impurities.

97 The aim of this study was to compare the potential of the FT-IR chemical imaging versus
98 Raman chemical imaging to elucidate the whole composition of a falsified tablet. The first step
99 was to carry out FT-IR and Raman chemical imaging analyses on falsified and reference tablets
100 and to apply the MCR-ALS algorithm to extract the pure compound spectra. A comparison
101 study between results of each technique was performed, in order to try to establish a link
102 between supposed Coartem[®] Novartis and Combiart[®] Strides Arco Labs medicines. Thanks to
103 the combination of spectroscopy and imaging as sampling technique, essential information on
104 chemical composition were obtained, which provide the fingerprint of a falsified medicine
105 production.

106 **Experimental**

107 **Samples**

108 Genuine sample of Coartem[®] was purchased from a local pharmacy in Belgium under the brand
109 name Riamet[®] (batch X0136 exp: APR 2019), G1 and G2 (see Table 1).

110 Falsified samples were seized by the Ministry of Health in Democratic Republic of Congo. Two
111 batches of Coartem[®] and two batches of Combiart tablets were analyzed: S1, S2, S2 and S4
112 (see Table 1). For each batch, three samples were analyzed in order to have a good
113 representativeness of the production.

114 A supplementary tablet of falsified Coartem[®] seized by the Beninese Ministry of Health in
115 2014 was analyzed. (Batch F2261; Mfd 01-2014; exp: 02-2018). This sample was analyzed in
116 a previous study [28].

117 Before being analyzed by FT-IR and Raman imaging, tablets were glued on a microscope slide
118 and their surface was milled using a Leica EM Rapid milling system equipped with a tungsten
119 carbide miller (Leica Microsystems GmbH, Wetzlar, Germany).

120 **FT-IR Microscope**

121 The Fourier transform infrared hyperspectral imaging data was acquired with a FT-IR Cary
122 670/620 Agilent series microscope (Agilent Technologies) equipped with a 15x infrared
123 objective, with a numerical aperture (NA) of 0.62 and a FPA (64x64) detector. The software
124 used for the acquisition is Resolution Pro from Agilent Technologies. The imaging acquisition

125 gives a spatial resolution of 5.5 μm . All the acquisitions are performed in reflection mode, with
126 a resolution of 8 cm^{-1} over a spectral range of 850–4000 cm^{-1} and 16 co-added scans.

127 The reference database spectra were obtained compressing raw materials with a Specac 12 mm
128 die, with 5-ton compression.

129 **Raman microscope**

130 Raman hyperspectral imaging analyses of the samples were performed with a Labram HR
131 Evolution (Horiba scientific) equipped with an EMCCD detector (1600 \times 200 pixel sensor)
132 (Andor Technology Ltd.), a Leica 50x Fluotar LWD objective and a 785 nm laser with a power
133 of 45mW at sample (XTRA II single frequency diode laser, Toptica Photonics AG).

134 A 300 gr/mm grating fixed at 1200 cm^{-1} (spectral range of 464–1853 cm^{-1}) was used to perform
135 the mappings with a double acquisition of 1 sec. The confocal slit-hole was fixed at 200 μm .
136 The spectra were collected with the LabSpec 6 (Horiba Scientific) software.

137 The whole tablet surface was mapped with a step size of 60 μm .

138 **Data pre-processing**

139 The FT-IR data were corrected by two pre-processing. First, an Asymmetric Least Square
140 baseline correction ($p: 1 \times 10^{-5}$, $\lambda: 3 \times 10^4$) has been applied. Then, a Kubelka-Munk correction
141 [30] was used to correct the spectrum. As with Raman analysis, an MCR-ALS analysis was
142 applied with non-negativity on concentration and spectra as constraints.

143 The Raman data were corrected by an Asymmetric Least Square baseline correction ($p: 1 \times 10^{-5}$,
144 $\lambda: 3 \times 10^4$) [29]. The pre-processed data were then analysed by MCR-ALS. In order to detect
145 as much compounds as possible, three MCR-ALS models were successively done with 10, 30
146 and 50 components respectively. The number of MCR components to be resolved was fixed
147 and not optimized for each sample in order to have a generic strategy that could be applied to
148 any new sample. Major compounds (e.g. lumefantrine) are better resolved with less component
149 MCR models while minor compounds (e.g. magnesium stearate) are better resolved by higher
150 component MCR models. Non-negativity on concentration and spectra were used as
151 constraints.

152 FT-IR data are heavier than Raman ones, because the FPA provide a fixed size of mosaic that
153 gives a hypercube of 64 \times 64 \times 819 data points per mosaic. Because of the size of tablets,
154 approximately more than 1 \times 1 cm^2 , an image can represent almost 60 GB of data. Analyses

155 performed on CPU often ran out of memory. An alternative to manage such data size consists
156 in decomposing each image into 16 smaller images that are easier to analyse using less memory.
157 MCR-ALS is applied on each small image with a variable number of component.

158 Regarding the database, a homemade Matlab function has been created to match unknown
159 spectrum with any type of reference database and wavenumbers range. Reference spectra used
160 in this study are provided in supplementary data (Table S1).

161 All computations were carried out with Matlab R2018a (The Mathworks) and MCR-ALS have
162 been performed with the PLS Toolbox (version 8.6.2, Eigenvector Research).

163 **Theory**

164 **Multivariate Curve Resolution – Alternating Least Square (MCR-ALS)**

165 The hyperspectral data are represented as a hypercube (x,y,z) , where x and y are the pixel
166 coordinates and z is the spectral coordinate. The MCR-ALS algorithm is based on the
167 assumption Beer-Lambert law is respected; it means that each pixel is equal to the
168 concentration-weighted sum of the contributions of the pure spectra of the image. Because
169 hyperspectral data are multivariate data, the Beer-Lambert law is written as follow (Eq.1):

$$170 \quad \mathbf{D}=\mathbf{C}\cdot\mathbf{S}^T + \mathbf{E} \quad (1)$$

171 where C is the matrix of the relative concentration profiles of the components of the image, S
172 the matrix of pure spectrum and E , the residual matrix containing the experimental error which
173 does not originate from the sample under examination. This model is built via the alternating
174 least square iterative algorithm, which consists of three steps. First, the operator has to indicate
175 the number of supposed component in D . It can be initialized via a preliminary principal
176 component analysis or by the SIMPLISMA algorithm [31]. After this step, initial estimate of
177 the S^T matrix is done. Finally, several constraints have to be fixed for the optimization step until
178 the convergence. It is for example the non-negativity constraint on spectra or on the
179 contribution. As part of this study, these two constraints were applied. In the end of the iteration
180 algorithm, the two matrices are calculated as follow (Eq.2, Eq.3):

$$181 \quad \mathbf{C}=\mathbf{D}\cdot\mathbf{S}(\mathbf{S}^T\cdot\mathbf{S})^{-1} \quad (2)$$

$$182 \quad \mathbf{S}=(\mathbf{C}^T\cdot\mathbf{C})^{-1}\mathbf{C}^T\cdot\mathbf{D} \quad (3)$$

183 Thanks to the two matrices, the scores and loadings MCR are gathered. The information that
184 will be used for this study is the loadings matrix.

185 **Hit Quality Index**

186 In the study, the MCR-loadings were matched with a handmade previously built database
187 thanks to a hit quality index (HQI) [32](Eq.4).

$$188 \quad HQI = \frac{(\overrightarrow{Standard} \cdot \overrightarrow{Unknown})^2}{(\overrightarrow{Standard} \cdot \overrightarrow{Standard}) \times (\overrightarrow{Unknown} \cdot \overrightarrow{Unknown})} \quad (4)$$

189
190 This statistic tool provides the spectral correlation between a reference and an unknown sample.
191 The HQI gives a number between 0 and 1. The closer to HQI=1, the more correlated is the
192 unknown spectrum with the library.

193 **Results and discussion**

194 Regarding FT-IR analysis, the studied range of wavenumbers was reduced to the fingerprint
195 region (850-2000 cm⁻¹). Indeed, using the entire range has a bad incidence of the MCR results.
196 Most loadings are related to the upper range signal and mask the useful information mainly
197 present in the fingerprint region. The OH region is large and intense it has too much weigh on
198 variability.

199 The results of the analysis of reference tablet are rather the same comparing both techniques.
200 Results are described in Table 2 for the FT-IR analysis and in Table 3 for the Raman analysis.
201 The decomposition of the FT-IR data shows that it is composed of artemether, lumefantrine,
202 and hypromellose, with a HQI > 0.70. The results obtained from the small images have
203 improved the resolution. Indeed, microcrystalline cellulose has been found with a HQI > 0.90
204 whereas it was not detected based on the whole map. Meanwhile, the Raman data
205 decomposition shows that it is composed of artemether, lumefantrine, microcrystalline
206 cellulose, magnesium stearate with a HQI > 0.70. Raman microspectroscopy seems to be more
207 sensitive to detect low dosed molecules than FT-IR. The spatial repartition of each compound
208 is represented in the Figure 1 for FT-IR and in the Figure S1 for Raman. It allows having an
209 idea about the spatial distribution and the proportion of each chemical compound along the
210 tablet.

211 Regarding the falsified tablets, loadings obtained from both FT-IR and Raman systems show
212 that starch and calcium carbonate are the main constituents of all formulations. Titanium
213 dioxide (TiO₂) has two polymorphic forms, rutile and anatase. Anatase was not found during
214 this study since their absorption bands are below 850 cm⁻¹ and therefore not accessible to us.
215 Rutile, on the other hand, has a broad absorption band around 1000 cm⁻¹. However, this band

216 is so broad that it was very likely eliminated by the baseline correction. On the contrary, TiO₂
217 polymorphs have a strong Raman signature enabling an easy identification. An example of
218 matching between loadings and reference spectrum are shown in Figure 2 for the FT-IR
219 technique.

220 Raman mapping also detected the presence of talc and two unexpected API's: sildenafil citrate
221 and ciprofloxacin hydrochloride monohydrate. Sildenafil citrate is classically used for erectile
222 dysfunction and ciprofloxacin hydrochloride monohydrate is a fluoroquinolone family
223 antibiotic. This is an unexpected and worrying result for an antimalarial drug. Indeed, the
224 presence of an antibiotic can induce a future resistance for what the antibiotic is normally used.

225 **Comparison between FT-IR and Raman microscopy**

226 Regarding results obtained for each technique, it appears that there is a significant difference
227 between both in terms of sensitivity. It may be explained by the difference of spatial resolution
228 between the FT-IR and Raman equipment configuration. Indeed, the actual configuration of the
229 Raman system provides a theoretical spot size of ~2 μm, which increases the possibility of
230 measuring the spectrum of a pure compound. Whereas, FT-IR imaging measures the mean
231 spectrum over a surface of 5.5 μm of diameter. This spectrum may induce a loss of information.
232 A 25x IR objective with a higher NA (0.81) was tested. The resolution is better with 3.3 μm of
233 lateral resolution. New molecules have been detected such as magnesium stearate and a coloring
234 agent (possibly tartrazine) in falsified tablets (Figure 3). The last compound is interesting
235 because, falsified tablets are yellow colored to mimic the presence of lumefantrine. The
236 coloring agent was also detected in Raman imaging but its identity remains unclear since several
237 coloring agents have nearly the same spectrum (tartrazine and magnesium euxanthate). That is
238 why, more investigation should be performed to confirm the identity of this compound and add
239 it to the reference database.

240 After this first investigation, it seems that Raman hyperspectral imaging is more appropriated
241 for the composition elucidation of falsified tablets. Indeed, the difference of data size between
242 the two techniques (150 Mo for Raman mapping and from 9 GB to 60 GB for FT-IR data), the
243 total analysis time (data acquisition ~11h for a whole tablet and processing) are favorable to
244 Raman spectroscopy. For instance, data processing takes much more time with FT-IR data,
245 approximately 5 hours compared to Raman ones which can take approximately 2 hours. Some
246 new strategies have to be developed to find a way to reduce time consuming with FT-IR analysis
247 such as GPU analysis. In addition, other pre-processing techniques such as the Kramers-Krönig

248 transform may be interesting to suppress the specular reflection that masks the signal of interest.
249 The long analysis time may be shortened depending on the sought information. Indeed, for a
250 first screening, the analysis may be shortened to several minutes but, in the present case, we
251 wanted to find as much compounds as possible. Therefore, we optimized spectral signal rather
252 than analysis time. Furthermore, this approach is envisaged to be performed on already
253 confirmed falsified samples to obtain information on both organic and inorganic compound
254 without sample destruction.

255 Another major interesting result of this study is the link that may be inferred between several
256 falsification cases. Indeed, ciprofloxacin hydrochloride monohydrate and citrate sildenafil are
257 present in most of the formulation besides excipients such as talc, titanium dioxide, calcium
258 carbonate, starch and a coloring agent. The identification of particular polymorphs or salts of
259 API/excipients may constitute a specific fingerprint of a production. Because Raman and FT-
260 IR analysis are performed in reflection mode, the surface of analysis has a significant incidence
261 on the elucidation of the composition. The absence of detection of sildenafil citrate in some
262 tablets is possibly due to the non-homogeneity of the samples. This point constitutes a major
263 limitation to the present approach. Indeed, control laboratories often have few tablets to analyze
264 and it is impossible to ensure that the analysis of the surface of one (or even three) tablets is
265 representative of the whole production. Nevertheless, this may provide information on the
266 production and may possibly link several falsified samples, as it was the case in our study.
267 Besides these considerations on sample homogeneity, it may also provide a first insight in the
268 tablet composition (organic and inorganic) to guide and rationalize further analyses (e.g.
269 identity confirmation with mass spectrometry).

270

271 **Conclusion**

272 The potential of hyperspectral imaging for the analysis of falsified medicines has already been
273 demonstrated. During this research, we emphasize on the possibility to elucidate the complete
274 composition of falsified tablets. Indeed, vibrational spectroscopy is able to detect in a single
275 analysis both organic and inorganic compounds being also sensitive to solid states and salt
276 forms. The elucidated composition may then be used as a fingerprint of the production and
277 could be used to complete the forensic investigations.

278 Furthermore, thanks to the non-destructive character of this kind of analysis, it may be
279 performed as first laboratory screening to prepare the further depth analysis of the samples (e.g.
280 mass spectrometry, NMR, etc.). It may also give some answers to an urgent question: what is
281 the patient's risk taking this medicine.

282 Several technologies and equipment configurations exist on the market. In this study, we
283 investigated two complementary techniques: FT-IR imaging in reflection mode and Raman
284 imaging. Using default configurations of the equipment, Raman microspectroscopy
285 outperformed FT-IR imaging in terms of both elucidated compounds but also analysis time and
286 data size. However, several options are under investigation to enhance FT-IR performances in
287 this context. Indeed, some samples may not be analyzed by Raman microspectroscopy due to a
288 high auto fluorescence background and may therefore be analyzed by FT-IR imaging.

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294 **References**

- 295 [1] W.L. Hamilton, C. Doyle, M. Halliwell-Ewen, G. Lambert, Public health interventions
296 to protect against falsified medicines: a systematic review of international, national and
297 local policies, *Health Policy Plan.* 31 (2016) 1448–1466. doi:10.1093/heapol/czw062.
- 298 [2] Council of Europe, *The MEDICRIME Convention*, (2011).
- 299 [3] WHO | WHO Member State Mechanism, WHO. (2018).
300 <http://www.who.int/medicines/regulation/ssffc/mechanism/en/> (accessed September 19,
301 2018).
- 302 [4] J. Nwokike, M.P. Joshi, *Assessment of Pharmacovigilance and Medicine Safety System*
303 *in Rwanda, 2009.* www.msh.org/sps (accessed September 19, 2018).
- 304 [5] M.L. Heyman, R.L. Williams, Ensuring global access to quality medicines: Role of the
305 US pharmacopeia, *J. Pharm. Sci.* 100 (2011) 1280–1287. doi:10.1002/jps.22391.
- 306 [6] D.A. ASIIMWE, *Rwanda Pharmacovigilance Guidelines*, (2010).

- 307 [7] P.N. Newton, C. Caillet, P.J. Guerin, A link between poor quality antimalarials and
308 malaria drug resistance?, *Expert Rev. Anti. Infect. Ther.* 14 (2016) 531–533.
309 doi:10.1080/14787210.2016.1187560.
- 310 [8] Circulation Of Fake Anti-Malaria Drugs – NAFDAC, (n.d.).
311 <https://www.nafdac.gov.ng/circulation-of-fake-anti-malaria-drugs/> (accessed September
312 19, 2018).
- 313 [9] O. ILUNGA KALENGA, RDC _Santé : ALERTE! COMMUNIQUE DU MINISTRE
314 DE LA SANTE |, (2017). [http://aicmonline.com/rdc-_sante-alerte-communique-](http://aicmonline.com/rdc-_sante-alerte-communique-ministre-de-sante/)
315 [ministre-de-sante/](http://aicmonline.com/rdc-_sante-alerte-communique-ministre-de-sante/) (accessed September 19, 2018).
- 316 [10] E. ZIEMINE, Le Coartem en plaquette interdit, (2013). [http://ct2015.cameroon-](http://ct2015.cameroon-tribune.cm/index.php?option=com_content&view=article&id=77643:antipaludeens-le-coartem-en-plaquette-interdit&catid=4:societe&Itemid=3)
317 [tribune.cm/index.php?option=com_content&view=article&id=77643:antipaludeens-le-](http://ct2015.cameroon-tribune.cm/index.php?option=com_content&view=article&id=77643:antipaludeens-le-coartem-en-plaquette-interdit&catid=4:societe&Itemid=3)
318 [coartem-en-plaquette-interdit&catid=4:societe&Itemid=3](http://ct2015.cameroon-tribune.cm/index.php?option=com_content&view=article&id=77643:antipaludeens-le-coartem-en-plaquette-interdit&catid=4:societe&Itemid=3) (accessed September 19,
319 2018).
- 320 [11] H. Kaur, E.L. Allan, I. Mamadu, Z. Hall, M.D. Green, I. Swamidos, P. Dwivedi, M.J.
321 Culzoni, F.M. Fernandez, G. Garcia, D. Hergott, F. Monti, Prevalence of substandard
322 and falsified artemisinin-based combination antimalarial medicines on Bioko Island,
323 Equatorial Guinea, *BMJ Glob. Heal.* 2 (2017) e000409. doi:10.1136/bmjgh-2017-
324 000409.
- 325 [12] A. Basit, Fake Medicines For Malaria Uncovered, 2018.
326 <http://www.ghanalive.tv/2018/06/27/fake-medicines-malaria-uncovered/>.
- 327 [13] L. Hoellein, U. Holzgrabe, Development of simplified HPLC methods for the detection
328 of counterfeit antimalarials in resource-restraint environments, *J. Pharm. Biomed. Anal.*
329 98 (2014) 434–445. doi:10.1016/j.jpba.2014.06.013.
- 330 [14] R.D. Marini, E. Rozet, M.L.A. Montes, C. Rohrbasser, S. Roht, D. Rhème, P. Bonnabry,
331 J. Schappler, J.L. Veuthey, P. Hubert, S. Rudaz, Reliable low-cost capillary
332 electrophoresis device for drug quality control and counterfeit medicines, *J. Pharm.*
333 *Biomed. Anal.* 53 (2010) 1278–1287. doi:10.1016/j.jpba.2010.07.026.
- 334 [15] B. Debrus, P. Lebrun, J.M. Kindenge, F. Lecomte, A. Ceccato, G. Caliaro, J.M.T. Mbay,
335 B. Boulanger, R.D. Marini, E. Rozet, P. Hubert, Innovative high-performance liquid
336 chromatography method development for the screening of 19 antimalarial drugs based
337 on a generic approach, using design of experiments, independent component analysis

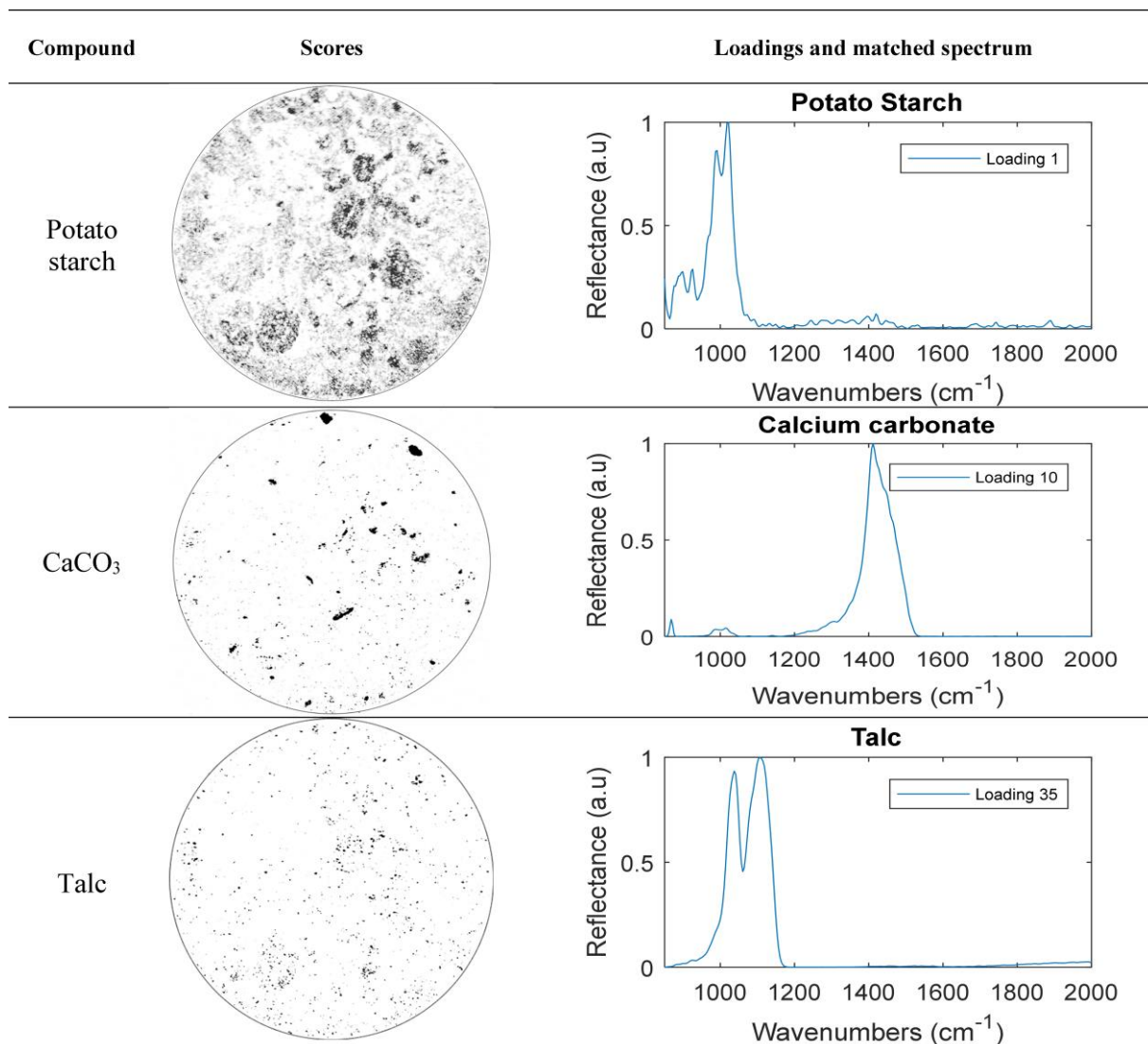
- 338 and design space, *J. Chromatogr. A.* 1218 (2011) 5205–5215.
339 doi:10.1016/j.chroma.2011.05.102.
- 340 [16] J.K. Mbinze, P.-Y. Sacré, A. Yemoa, J. Mavar Tayey Mbay, V. Habyalimana, N.
341 Kalenda, P. Hubert, R.D. Marini, E. Ziemons, Development, validation and comparison
342 of NIR and Raman methods for the identification and assay of poor-quality oral quinine
343 drops, *J. Pharm. Biomed. Anal.* 111 (2015) 21–27. doi:10.1016/j.jpba.2015.02.049.
- 344 [17] J. Coelho Neto, F.L.C. Lisboa, ATR-FTIR characterization of generic brand-named and
345 counterfeit sildenafil- and tadalafil-based tablets found on the Brazilian market, *Sci.*
346 *Justice.* 57 (2017) 283–295. doi:10.1016/j.scijus.2017.04.009.
- 347 [18] P.-Y. Sacré, E. Deconinck, T. De Beer, P. Courselle, R. Vancauwenberghe, P. Chiap, J.
348 Crommen, J.O. De Beer, Comparison and combination of spectroscopic techniques for
349 the detection of counterfeit medicines, *J. Pharm. Biomed. Anal.* 53 (2010) 445–453.
350 doi:10.1016/j.jpba.2010.05.012.
- 351 [19] H. Rebiere, C. Ghyselinck, L. Lempereur, C. Brenier, Investigation of the composition
352 of anabolic tablets using near infrared spectroscopy and Raman chemical imaging, *Drug*
353 *Test. Anal.* 8 (2015) n/a-n/a. doi:10.1002/dta.1843.
- 354 [20] D.I. Ellis, R. Eccles, Y. Xu, J. Griffen, H. Muhamadali, P. Matousek, I. Goodall, R.
355 Goodacre, Through-container, extremely low concentration detection of multiple
356 chemical markers of counterfeit alcohol using a handheld SORS device, *Sci. Rep.* 7
357 (2017) 1–8. doi:10.1038/s41598-017-12263-0.
- 358 [21] H. Rebiere, M. Martin, C. Ghyselinck, P.-A. Bonnet, C. Brenier, Raman chemical
359 imaging for spectroscopic screening and direct quantification of falsified drugs, *J.*
360 *Pharm. Biomed. Anal.* 148 (2018) 316–323. doi:10.1016/j.jpba.2017.10.005.
- 361 [22] P.-Y. Sacré, E. Deconinck, L. Saerens, T. De Beer, P. Courselle, R. Vancauwenberghe,
362 P. Chiap, J. Crommen, J.O. De Beer, Detection of counterfeit Viagra® by Raman
363 microspectroscopy imaging and multivariate analysis, *J Pharm Biomed Anal.* 56 (2011)
364 454–461. doi:http://dx.doi.org/10.1016/j.jpba.2011.05.042.
- 365 [23] P. Barmpalexis, A. Karagianni, I. Nikolakakis, K. Kachrimanis, Artificial neural
366 networks (ANNs) and partial least squares (PLS) regression in the quantitative analysis
367 of cocrystal formulations by Raman and ATR-FTIR spectroscopy, *J. Pharm. Biomed.*
368 *Anal.* 158 (2018) 214–224. doi:10.1016/j.jpba.2018.06.004.

- 369 [24] N.L. Calvo, N.M. Balzaretto, M. Antonio, T.S. Kaufman, R.M. Maggio, Chemometrics-
370 assisted study of the interconversion between the crystalline forms of nimodipine, J.
371 Pharm. Biomed. Anal. 158 (2018) 461–470. doi:10.1016/j.jpba.2018.06.019.
- 372 [25] A. Kahmann, M.J. Anzanello, F.S. Fogliatto, W.A. Chaovalitwongse, M.C.A. Marcelo,
373 M.F. Ferrão, R.S. Ortiz, K.C. Mariotti, Interval importance index to select relevant ATR-
374 FTIR wavenumber Intervals for falsified drug classification, J. Pharm. Biomed. Anal.
375 158 (2018) 494–503. doi:10.1016/j.jpba.2018.06.046.
- 376 [26] K.L.A. Chan, S. V Hammond, S.G. Kazarian, Applications of Attenuated Total
377 Reflection Infrared Spectroscopic Imaging to Pharmaceutical Formulations, Anal Chem.
378 75 (2003) 2140–2146. doi:10.1021/ac026456b.
- 379 [27] P.S. Wray, G.S. Clarke, S.G. Kazarian, Dissolution of tablet-in-tablet formulations
380 studied with ATR-FTIR spectroscopic imaging, Eur J Pharm Sci. 48 (2013) 748–757.
381 doi:10.1016/j.ejps.2012.12.022.
- 382 [28] A. Yemoa, V. Habyalimana, J.K. Mbinze, V. Crickboom, B. Muhigirwa, A. Ngoya, P.-
383 Y. Sacre, F. Gbaguidi, J. Quetin-Leclercq, P. Hubert, R.D. Marini, Detection of Poor
384 Quality Artemisinin-based Combination Therapy (ACT) Medicines Marketed in Benin
385 Using Simple and Advanced Analytical Techniques, Curr. Drug Saf. 12 (2017) 178–186.
386 doi:10.2174/1574886312666170616092457.
- 387 [29] P.H.C. Eilers, H.F.M. Boelens, asymmetric least squares for baseline correction, (2005).
- 388 [30] W. Kessler, D. Oelkrug, R. Kessler, Using scattering and absorption spectra as MCR-
389 hard model constraints for diffuse reflectance measurements of tablets, Anal. Chim.
390 Acta. 642 (2009) 127–134. doi:10.1016/j.aca.2009.01.057.
- 391 [31] K. Kumar, Random Initialisation of the Spectral Variables: an Alternate Approach for
392 Initiating Multivariate Curve Resolution Alternating Least Square (MCR-ALS)
393 Analysis, J. Fluoresc. 27 (2017) 1957–1968. doi:10.1007/s10895-017-2132-0.
- 394 [32] Q. Gao, Y. Liu, H. Li, H. Chen, Y. Chai, F. Lu, Comparison of several chemometric
395 methods of libraries and classifiers for the analysis of expired drugs based on Raman
396 spectra, J. Pharm. Biomed. Anal. 94 (2014) 58–64. doi:10.1016/j.jpba.2014.01.027.

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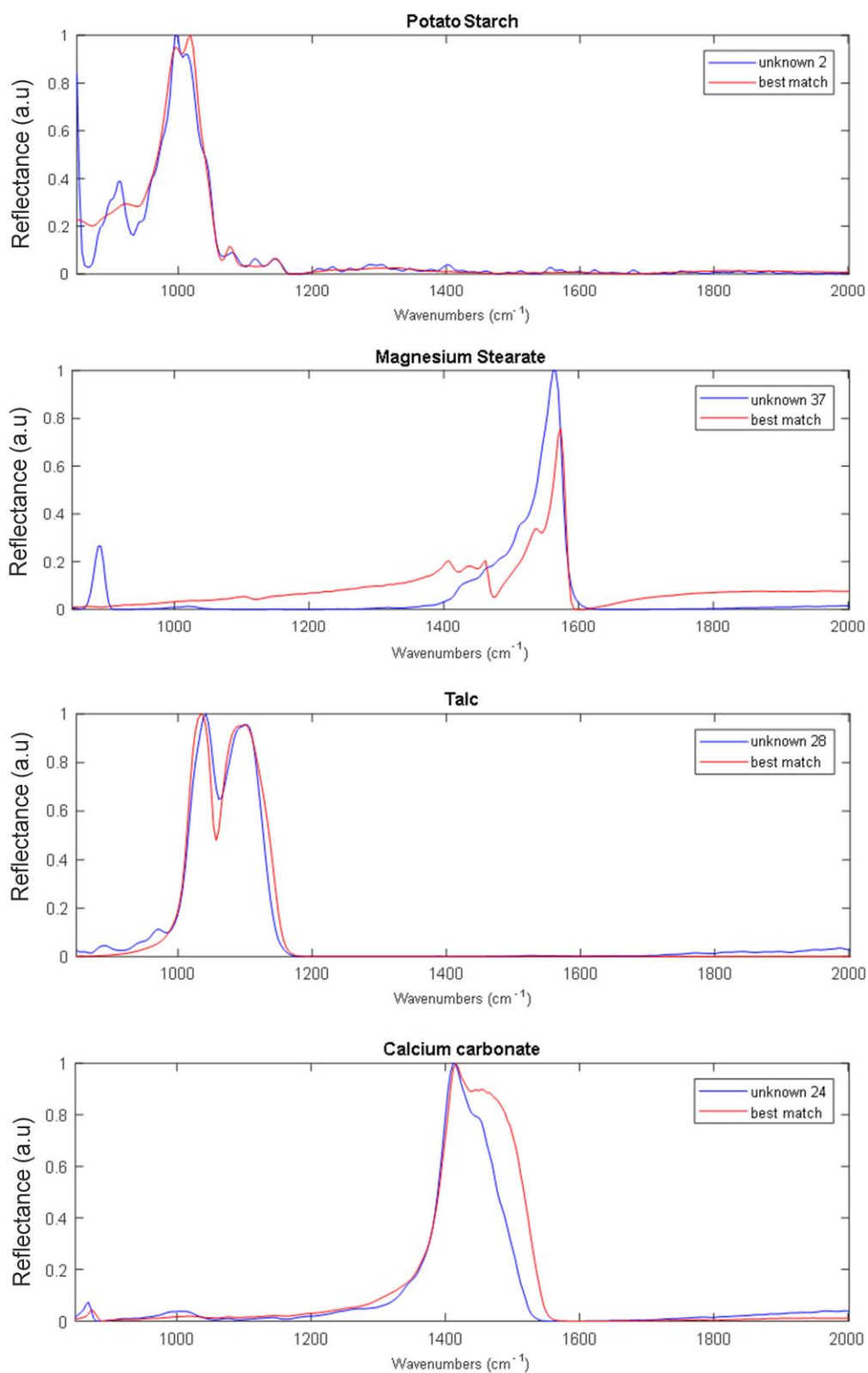
399 Figure 1 : FT-IR MCR scores and loadings for the S1 tablet



400

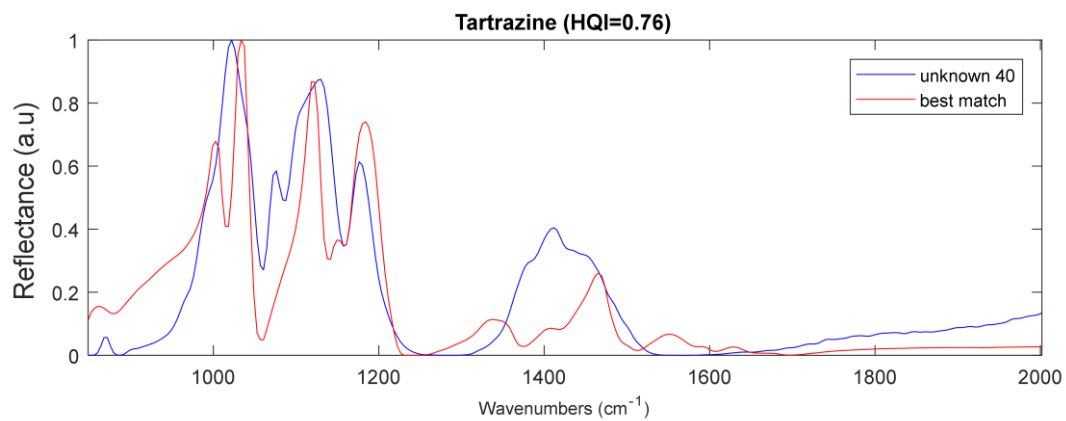
401

402 Figure 2 : MCR loadings match with the FT-IR reference database for the tablet S1. (a) potato
403 starch, (b) magnesium stearate, (c) talc and (d) calcium carbonate.



404

405 Figure 3 : MCR loadings for FT-IR imaging for the tablet S1 and match with the tartrazine
406 spectrum



407

408

409 Table 1 : Samples description. In the “code” column, G is assigned for reference tablets and S
 410 for samples

Authenticity	Code	Brand	Manufacturer	Batch number	Expiry date
Reference tablet	G1	Combiart	Strides Arco Labs	7227669	juin-18
Reference tablet	G2	Riamet	Novartis	X0136	apr-19
Falsified tablet	S1	Combiart	Strides Arco Labs	7225500	aug-19
Falsified tablet	S2	Combiart	Strides Arco Labs	7228051	juil-19
Falsified tablet	S3	Coartem	Novartis	F2153	nov-18
Falsified tablet	S4	Coartem	Novartis	F2153	juil-19
Falsified tablet	S5	Coartem	Novartis	F2261	feb-18

411
 412 Table2 : Solving composition of artemether/lumefantrine formulation by FT-IR hyperspectral
 413 imaging : matching with the database by using the HQI

FTIR microscope results	G1	G2	S1_R1	S1_R2	S1_R3	S2_R1	S2_R2	S2_R3	S3_R1	S3_R2	S3_R3	S4_R1	S4_R2	S4_R3	S5_R1
Artemether	0.9331	0.8289	-	-	-	-	-	-	-	-	-	-	-	-	-
Lumefantrine	0.8349	0.7254	-	-	-	-	-	-	-	-	-	-	-	-	-
Ciprofloxacin HCL.H2O	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Sildenafil citrate	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
TiO2 (anatase)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
TiO2 (rutile)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Talc	-	-	0.9779	0.9577	0.93	0.9702	0.8327	0.8938	0.8969	0.9103	0.9488	0.9621	0.917	0.9671	0.7246
Potato starch	0.9555	-	0.9743	0.9821	0.99	0.9955	0.9035	0.9549	0.9044	0.997	0.9529	0.9692	0.9813	0.903	0.9892
CaCO3	-	-	0.908	0.9715	0.87	0.8776	0.8802	0.9385	0.8816	0.9593	0.8754	0.8694	0.7176	0.897	0.9550
Magnesium stearate	-	-	0.6792	0.58	0.7063	-	-	-	-	0.5525	-	-	0.6156	0.6403	-
Microcrystalline cellulose	0.9541	0.9456	-	-	0.7391	-	-	-	-	-	-	-	-	-	-
Hypromellose	0.8226	-	-	-	-	-	-	-	-	-	-	-	-	-	-
D-Glucose	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0.8545
Tartrazine	-	-	0.7624	0.6432	-	0.533	-	-	-	0.5682	-	-	-	-	-

414
 415 Table3 : Solving composition of artemether/lumefantrine formulation by Raman hyperspectral
 416 imaging : matching with the database by using the HQI

Raman microscope results	G1	G2	S1_R1	S1_R2	S1_R3	S2_R1	S2_R2	S2_R3	S3_R1	S3_R2	S3_R3	S4_R1	S4_R2	S4_R3	S5_R1
Artemether	0.91	0.73	-	-	-	-	-	-	-	-	-	-	-	-	-
Lumefantrine	0.99	0.98	-	-	-	-	-	-	-	-	-	-	-	-	-
Ciprofloxacin HCL.H2O	-	-	0.97	0.92	0.93	0.96	0.93	0.92	0.91	0.95	0.95	0.84	0.93	0.91	-
Sildenafil citrate	-	-	0.96	0.78	0.71	-	0.75	-	0.86	-	0.82	-	0.79	0.81	-
TiO2 (anatase)	-	-	-	-	-	0.94	-	-	-	0.88	-	-	-	0.92	-
TiO2 (rutile)	-	-	0.93	0.94	0.98	0.86	0.97	0.98	0.98	0.98	0.97	0.86	0.99	0.98	-
Talc	-	-	0.95	0.98	0.99	0.99	0.97	0.97	0.96	0.98	0.95	0.98	0.98	0.96	-
Potato starch	-	-	0.98	0.97	0.95	0.98	0.96	0.94	0.95	0.97	0.97	0.92	0.97	0.94	0.95
CaCO3	-	-	0.92	0.98	0.93	0.98	0.99	0.95	0.95	0.97	1.00	0.99	0.99	0.98	0.91
Magnesium stearate	0.72	-	-	0.75	0.86	0.86	0.88	0.74	-	0.82	0.79	0.77	0.81	0.78	0.85
Microcrystalline cellulose	0.76	0.96	-	-	-	-	0.80	-	-	-	-	-	-	-	-
Hypromellose	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
D-Glucose	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0.96
Tartrazine	-	-	-	0.71	0.67	-	0.73	0.72	-	0.65	0.69	-	0.76	0.64	-

417