

Adrenergic Drugs

Dr. Mohammed Al-Sbou
Professor in Clinical Pharmacology
Pharmacology Department
Faculty of Medicine, Mutah University

Beta-adrenoceptors (receptors)

Two subgroups β_1, β_2

β_1 -adrenoceptors:

➤ Heart

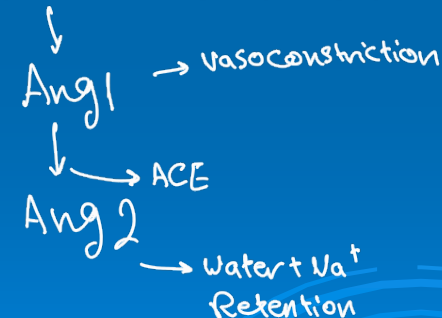
(main) why? → More receptors in the heart than the kidney.

Increase HR, contractility & conductivity ⇒ in cases of Heart Failure

➤ Kidneys

↳ in cases of kidney dysfunction ⇒ we might use ACE inhibitors.

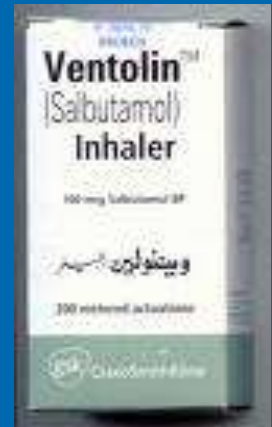
Increase renin release



β_2 -adrenoceptors

- Bronchi Bronchodilatation
- Bladder wall Relaxation
- Skeletal M. arterioles Vasodilatation
- Glycogenolysis Increase blood glucose
- Gluconeogenesis Increase blood glucose
- Uterus Relaxation
- Enhances entry of K into cells Hypokalemia

β-Stimulants



1. Selective β₂ agonists:

Salbutamol (Albuterol) (Ventolin)

USA x tradename x

- non-catecholamine
- can be given by inhalation, orally & injection
- Short acting bronchodilator
- Its t_{1/2} is about **4 hours** short duration
- Has a rapid onset of action (**acute asthmatic attacks**) → very effective why?

1. Selective β_2 agonists:

It is used in treatment of:

- **Acute bronchial asthma attacks**
- **Premature labour** or threatened abortion
- **Adverse effects:**

**Tremor, tachycardia & hypokalemia,
hyperglycemia**

*Because it
→ causes relaxation
of uterus*

Salmeterol & Formoterol



- is a **long acting bronchodilator** similar to salbutamol with **longer t_{1/2} (12 hr)**
- **Have a delay onset of action**
- It is useful in **prophylaxis of bronchial asthma**
- **Not useful for acute attacks** ⇒ because of the delay onset
- Not recommended as monotherapy & highly efficacious **when combine with corticosteroid**

↘ Repeated attacks in a short specific time. ex → cold weather in winter.

↓
Anti-infection

↘ Mucus + contraction of Smooth.M may cause an Inflammation.

2. Selective β_1 -agonist



Dobutamine

- Is a synthetic, direct acting catecholamine
- Inotropic sympathomimetic $\Rightarrow \uparrow\uparrow$ contractility.
- is used in congestive heart failure (CHF) to increase cardiac output
- Inotropic support after cardiac surgery
- Septic and cardiogenic shock

3. Non-selective β -stimulants:

Isoprenaline (Isoproterenol)

- A synthetic, direct acting drug
- It is a catecholamine with **non-selective β_1 & β_2** agonistic activities
- It increases **SBP & HR** (β_1 effect) & decreases **DBP** (β_2 effect) \Rightarrow Vasodilatation effects
- It is **rarely** used to increase heart rate in **heart block** & to stimulate heart in **cardiac arrest**

Main choice of therapy \uparrow
is Adrenaline

Mixed Alpha & Beta agonists

Adrenaline (Epinephrine)

- It is an **endogenous catecholamine** synthesized in adrenal medulla & certain areas in brain
- **Commonly used therapy (drug of choice in emergency situations)**

↳ why? Because of the Rapid onset.

Pharmacodynamic effects

➤ On blood vessels: ^{→ Vasoconstriction}

Response differs according to site of vessels:

- **Skin, mucous membrane & viscera arterioles** contain α_1 receptors & show **vasoconstriction**
- **Skeletal muscle vessels** contain mainly β_2 -receptors that show **vasodilatation**

Remember :-

- $\alpha_1 \Rightarrow$ Smooth.M constriction ✓
- $\beta_2 \Rightarrow$ Smooth.M + skeletal.M arterioles dilatation ✓

Pharmacodynamic effects

- **Veins** contain $\alpha 1$ vasoconstrictors
- **Heart** shows ^{HR} **+ve inotropic** \Rightarrow Contractility
+ve chronotropic effects
 \Downarrow HR

Effect on blood pressure:

- Small doses of adrenaline given by Sc or i.m will **increase SBP** (β_1 effect on heart) & **decrease DBP** (β_2 vasodilatation of skeletal BV) (**β effect predominate**)
- Giving adrenaline in large doses or by IV administration will **increase both SBP & DBP** (predominant **α_1 effect**)

→ Radial Muscle

- Iris (**mydriasis**), bronchi (**bronchodilatation**)
- Sphincters of gut & bladder show **contraction**, while walls of gut & bladder show relaxation ⇒ Sympathetic effect ⇒ decrease GI motility.
- Metabolic effects: **adrenaline increases blood glucose**
↳ β effect.

Adrenaline (Epinephrine)

Pharmacokinetics:

- ❑ Has rapid onset & brief duration of action
- ❑ Is given Iv, Sc, by inhalation or **topically to the eye**

↓
for eye
examination!

Therapeutic uses

- 1 shot of Adrenaline is give directly in the chest towards the Heart.
- **Cardiac arrest (cardiopulmonary resuscitation-CPR)**
 - **Severe allergic reactions (anaphylactic shock & angioedema):** Severe shortness of Breath due to Accumulation of Mucus in the Airway.
 - Physiological antagonist to histamine & stabilizer of mast cells
 - **Vasoconstrictor with LA** → Bluish in the eye due to ↑ IOP
 - **Chronic open angle glaucoma (topically):** vasoconstriction; reduces aqueous humor production & IOP
Relieve the pressure of the Abnormal Aqueous humor amount in the eye which leads to IOP↓

Adverse effects

- **CNS disturbances:** Headache, tremor, anxiety
- **High doses may increase BP, precipitate cerebral haemorrhage, cardiac arrhythmias**

↓
disturbance
in the Conductivity
+ contractility.

↙ due to ↑ contractility
which leads to massive
Blood flow to the
Cerebral area

↘ α₁ effect

Noradrenaline (Norepinephrine)

- It has **alpha agonist**, **β_1 -agonist** & **weak β_2 agonist** effects
- It increases both **SBP & DBP (potent α_1 effect)**
- It is **mainly used to treat shock** as a **vasoconstrictor**

↓
low HR
Hypoxia
So?

Dopamine

- It is an **alpha, beta & dopaminergic** agonist ⇒ Mixed
- Increases renal blood flow due to D1 vasodilatory effect on renal circulation
- **At low dose**, activates B1 receptors on heart, increases cardiac output, heart rate & BP
- **At very high doses**, activates **alpha receptors**, causes vasoconstriction حبيب الشعب
- Is the drug of choice for **shock (cardiogenic & septic)** and is given by **continuous infusion** to improve renal blood flow
هو الوحيد الذي يعمل

Indirect-acting sympathomimetics



Amphetamines

- Are important because can be **misused** as a **central psychostimulants** that **improve mood & alertness** ^{منشط}
- Acts by ^{Enhance} **releasing endogenous NA** from adrenergic neurons after being taken up into neurons

Amphetamines

- Its effects include increase **alertness & improved mood & decreased fatigability** ^{السَّخَب}
- It has also **central anorectic effects (depress appetite)** due to its action in hypothalamic feeding center

Amphetamines

- **Paradoxically**, it produces **sedation in children** *used in treatment of Hyperkinesia cases in children.*
- Peripheral effects include **increase in BP & arrhythmias**
- It produces **emotional dependence**

Extra (عزلة) ←
- state of mind where a person is incapable of taking full responsibility for their own feelings.
⊕ عندي مشاعر، بس ما بجزت فيهم.

Therapeutic uses of amphetamines

- **Narcolepsy** (excessive abnormal sleep in adults- daytime)
- **Attention deficit hyperkinetic disorder (ADHD) in children** (abnormal pathological hyperactivity):
amphetamines improve attention, reduce hyperkinesia)

loss of concentration

Adverse effects

- **CNS:** ^{الأرق} insomnia, irritability, dizziness, tremor
- **CVS:** Palpitations, cardiac arrhythmias, **HTN**,
angina pain _{Hypertension}
- **Emotional dependence**
- **Psychosis** (Schizophrenia-like with hallucinations & delusions) _{إختلالات عقلية} _{انهمام}
- **Anorexia** _{loss of Apetite.}

Direct & indirect sympathomimetics

Ephedrine

- **Mixed-action drugs induce release of NA from pre-synaptic terminals and they activate adrenergic receptor on postsynaptic membrane**
- **Non-catecholamine**

Ephedrine

- It is **non-selective agonist**, stimulate **both alpha & beta receptors** & its effects are **similar to that of adrenaline**
- **Ephedrine** raises systolic & diastolic blood pressure by **vasoconstriction** & cardiac stimulation
- It causes bronchodilation
- Is give **orally**

Therapeutic uses

- **Bronchial asthma** *But NOT the Primary choice!*
- **Mydriatic agent & nasal mucosal decongestant**
- **Pressor agent in chronic orthostatic hypotension**
- **Heart block to increase heart rate**