

**Distribution** - distribution of the substance throughout the body compartment

- ① Vascular
- ② Vascular + interstitial (extracellular)
- ③ Vascular + interstitial + intracellular

### 1. Vascular compartment:

small  $V_d \approx 4L$

drugs with this  $V_d$  are: ① hydrophilic ② ionized in plasma

Heparin

### 2. Vascular + interstitial compartment:

moderate  $V_d \approx 4 + 10 \approx 14L$

drugs with this  $V_d$  are: ① hydrophilic ② lesser ionization ③ small MW

Neostigmine

### 3. EC compartment + IC compartment:

Large  $V_d \approx 4 + 10 + 26 \approx 40 \dots 42L$

drugs with this  $V_d$  are: ① Lipophilic ② non-ionized

## ▲ BARBITURATES

⊕ **BBB** only lipid soluble + non-ionized drugs pass it

⊕ **Placental B** :- drugs pass it may cause:

during pregnancy

↳ Teratogenicity

↳ embryotoxicity

during Labor

↳ Neonatal Asphyxia

↳ Jaundice

↳ Kernicterus



**Redistribution:** characteristic of highly lipid soluble drug like **theopental** that is caused redistribution of drug to less perfused tissue after distribution of it to CNS.

⊕ **Volume of distribution ( $V_d$ ):** -

$$V_d = \frac{\text{Amount of drug in body}}{\text{Plasma concentration}}$$

**Importance of ( $V_d$ )**

→ **Loading dose**

$$= T_c \times V_d \left( \frac{\text{desired plasma} - \text{achieved plasma}}{V_d} \right)$$

→ **corrective dose**

→ **treat drug toxicity**

**high  $V_d$**  →

hemodialysis

**moderate  $V_d$**  →

peritoneal dialysis

**low  $V_d$**  →

hemodialysis

**Factors affecting drug distribution :-**

① **Lipophilicity :-** Diffusion

lipophilicity & distribution

② **Tissue affinity :-**

▶ Chloroquine is concentrated in Liver

▶ Iodides = = = Thyroid

③ **Plasma protein binding (PPB) :-**

PP bound form      Free Form

reservoir, (Not) excrete      active, diffusible  
diffuse & metabolize      ...

\* taking Aspirin

+ Warfarin

may cause

bleeding