

General Pharmacology

- Pharmacokinetics
- Pharmacodynamics
- Drug-drug interactions

- 1. Pharmacokinetics:** Describe what the body does to the drug. This includes: absorption, distribution, biotransformation and excretion of drug.
- 2. Pharmacodynamics:** Describe what the drug does to the body. This includes the mechanism of action, pharmacological action, adverse effects, and the pharmacodynamic drug-drug interaction.
- 3. Pharmacotherapeutics:** Describe uses of drug for prevention, diagnosis and treatment of diseases.

Drug: Chemical substance that affects biologic systems of living organism.

Drug nomenclature:

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1. Chemical name: Describe chemistry of the drug e.g. acetyl salicylic acid.

2. Generic (Non-proprietary or approved) name: This is the abbreviated and approved name of the drug. It is the official medical name assigned by the *producer* in collaboration with the food & Drug Board and Nomenclature committee. Each drug has *only one name* all over the world and it is not capitalizes e.g. aspirin, atenolol, amlodipine, and captopril. *Very few drug have two generic names e.g* (“paracetamol-acetaminophen”, “neostigmine-prostigmine”, “epinephrine-adrenaline”, “norepinephrine-noradrenaline”, “meperidine-pethidine”).

3. Brand (Proprietary or Trade) name: These are names given to the drug by the manufacturing and marketing company, and they are *copyrighted* terms selected by the manufacturer e.g. Aspocid, Inderal, Tonormin, Myodura, and Capoten.

PHARMACOKINETICS

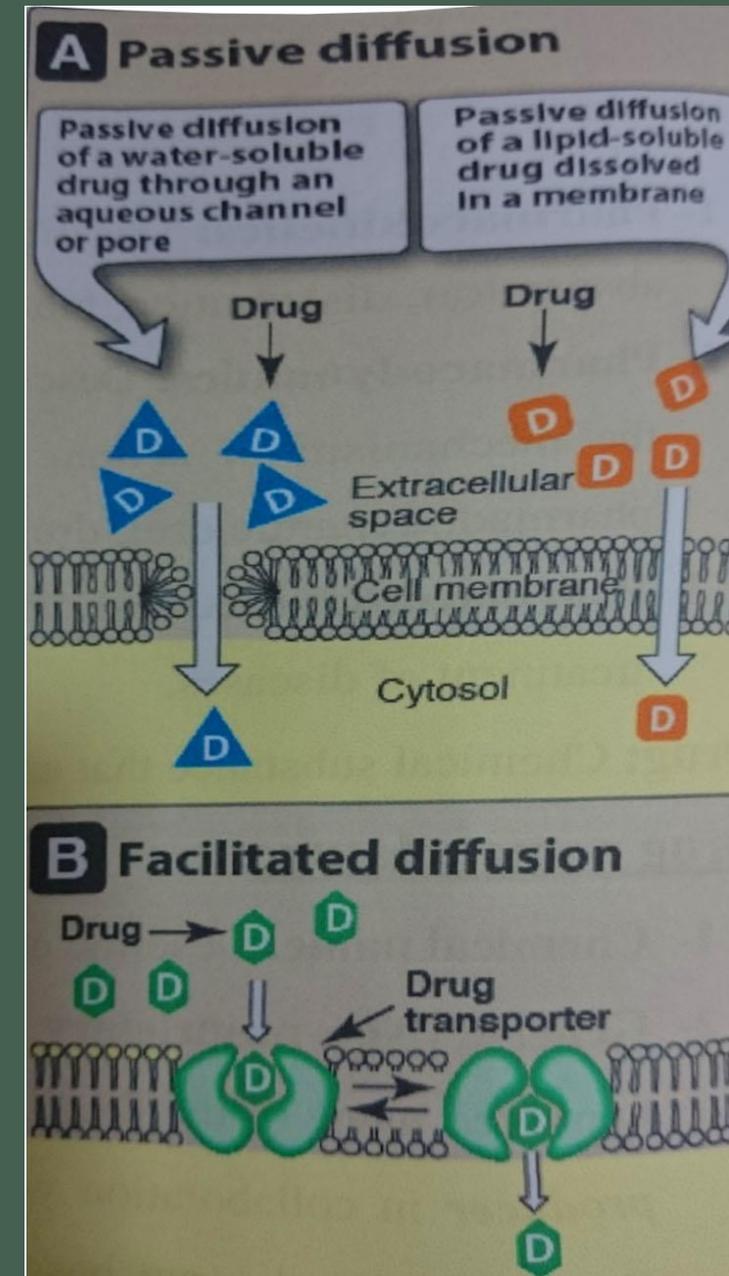
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ABSORPTION

Definition: Passage of drugs from site of administration to systemic circulation.

the mechanisms of drug absorption follow the mechanisms of drug movement across the biological membranes, which include:

- 1. Passive diffusion:** The most common and most important mechanism, it includes:
 - A.** Rapid movement of lipid-soluble drug across the cell membrane.
 - B.** Movement of water-soluble drugs across the aqueous channels (water pores).



2. Facilitated diffusion:

No energy is required as the drugs are carried to inside of the cell *according to the concentration gradient* by :

- a. Carrier protein.
- b. Drug transporter.

3. Active transport:

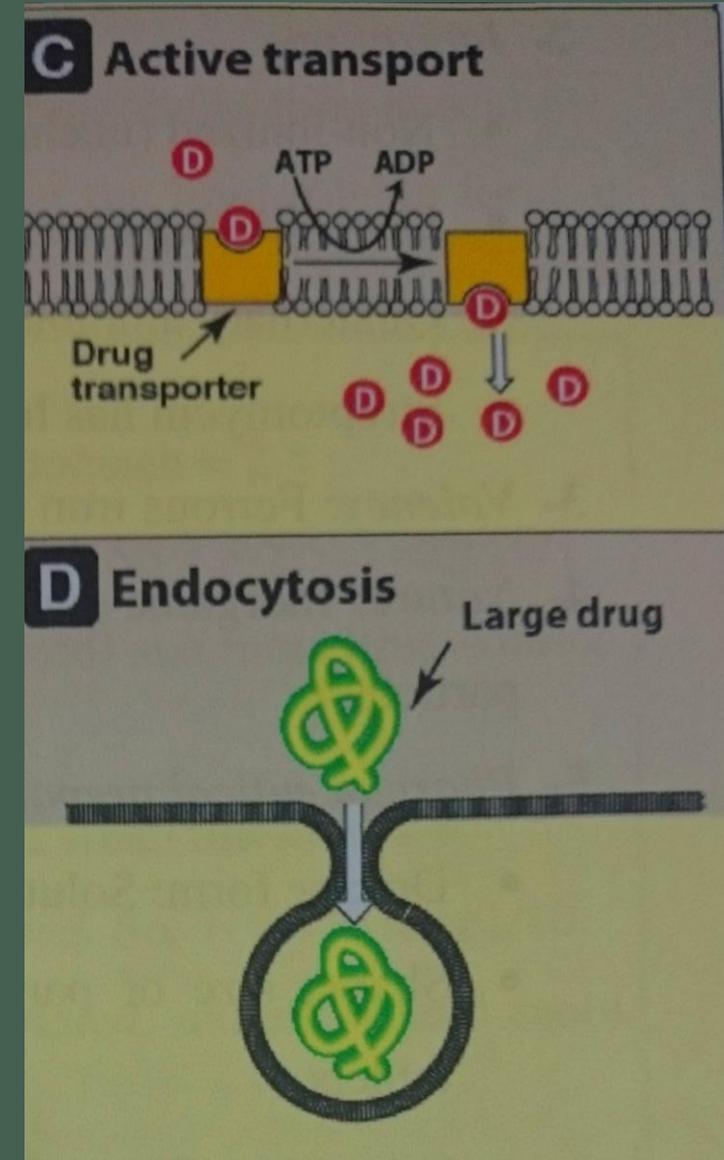
Energy is required because the drug movement may be *against the concentration gradient* by :

- a. Drug transporter.
- b. P-glycoprotein drug transporter extrudes drug outside the cells, and it is responsible for drug resistance.

4. Endocytosis and exocytosis:

Usually occur by drugs of high molecular weight. The drug binds to the cell membrane, dips in and enveloped by the cell membrane, a tear in the cell membrane allow the drug to move inside/ outside the cell.

The tear is healed immediately.



2. Factors affecting absorption:

A) Factors related to the patient:

1. *Route of administration*: I.V. and inhalation > I.M. > S.C. > Oral > Topical.

2. Absorbing surface:

➤ Vascularity (Alveoli > Skeletal muscle > S.C.tissue).

➤ Surface area (Alveoli > Intestine > Stomach).

➤ Pathological conditions: Diarrhea & malabsorption → ↓ oral absorption.

3. Systemic circulation :

H.F. & shock → ↓ absorption → oral and I.M. routes are not suitable.

4. Specific factors: Intrinsic factor is essential for vitamin B12 absorption.

B) Factor related to the drug:

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1. Water and lipid solubility:

- Both are needed for absorption
- Completely water-insoluble compounds are not absorbed (e.g. barium chloride).
- \uparrow Lipid solubility $\rightarrow \uparrow$ absorption (lipid /water partition coefficient)

2. Ionization:

- Non-ionized (uncharged) \rightarrow better absorption
- Depends on *pKa of the drug* and *pH of the medium*
- Quaternary ammonium compounds \rightarrow ionized \rightarrow poor absorption
- Streptomycin has high pKa \rightarrow always ionized \rightarrow not absorbed orally

3. Valency : Ferrous iron (Fe^{+2}) is absorbed better than ferric iron (Fe^{+3})
4. Nature: Inorganic compounds (small particles) > organic compounds (large particles)
5. Pharmaceutical preparation:
 - Dosage form: Solution > Suspension > tablet
 - Shape, size of particles and rate of disintegration and dissolution of tablets
 - Excipient (filler): Ca^{+2} salts → ↓ oral absorption of tetracyclines