

# 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:

3

**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 capitalized e.g. aspirin, atenolol, amlodipine, and captopril. *Very few drugs 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

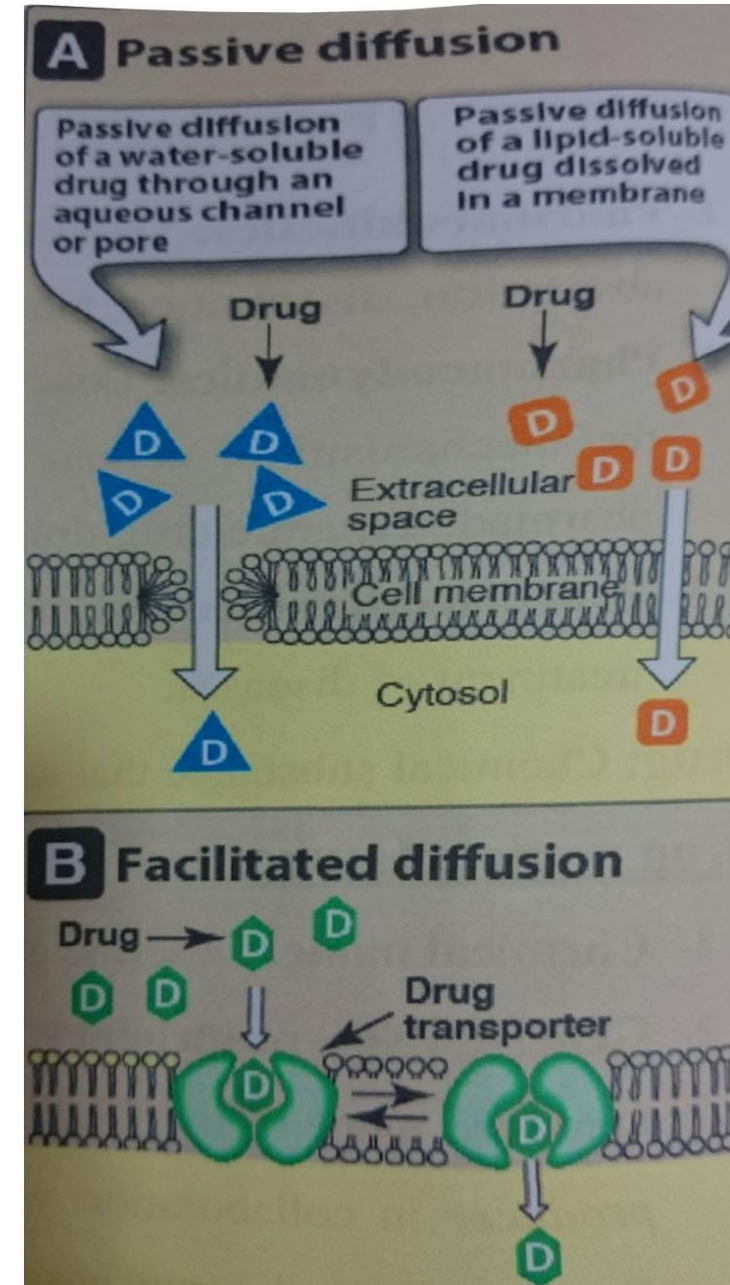
## ABSORPTION

4

**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:**

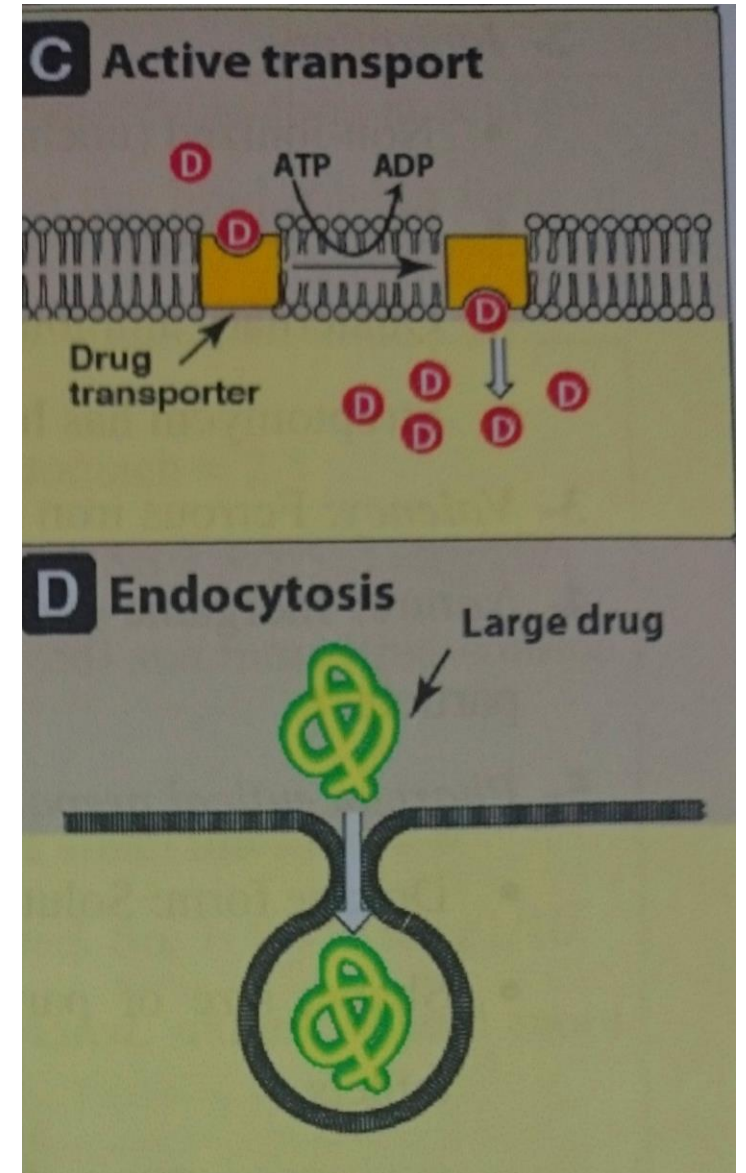
Energy is required because the drug movement may be *against the concentration gradient* by :

- 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:

8

### 1. Water and lipid solubility:

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

### 2. Ionization:

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



3. Valency : Ferrous iron ( $\text{Fe}^{+2}$ ) is absorbed better than ferric iron ( $\text{Fe}^{+3}$ )
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):  $\text{Ca}^{+2}$  salts                      oral absorption of tetracyclines