

Department of Chemistry

<u>Su</u>bject - Medicinal <u>Chemistry</u>

Class - T.Y.B.Sc

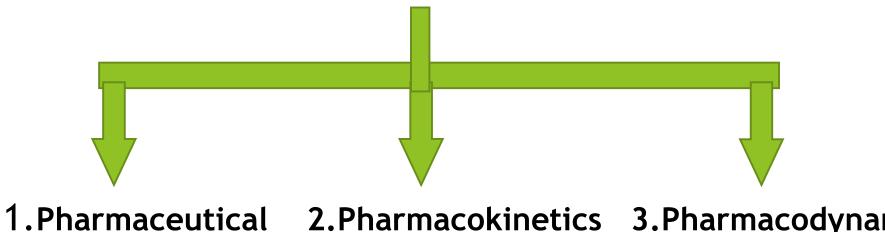
Name - Prof. Bhor Madhuri M.

Presentation on...

Pharmacokinetics and related topic

Absorption, Distribution, Metabolism, Excitation.

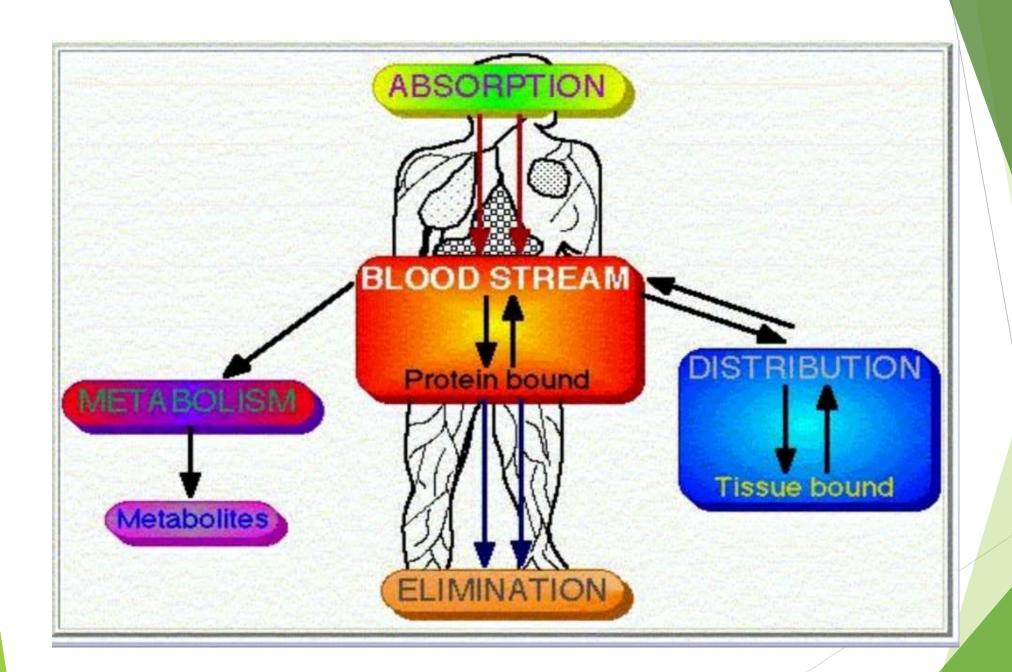
The three phase of drug action

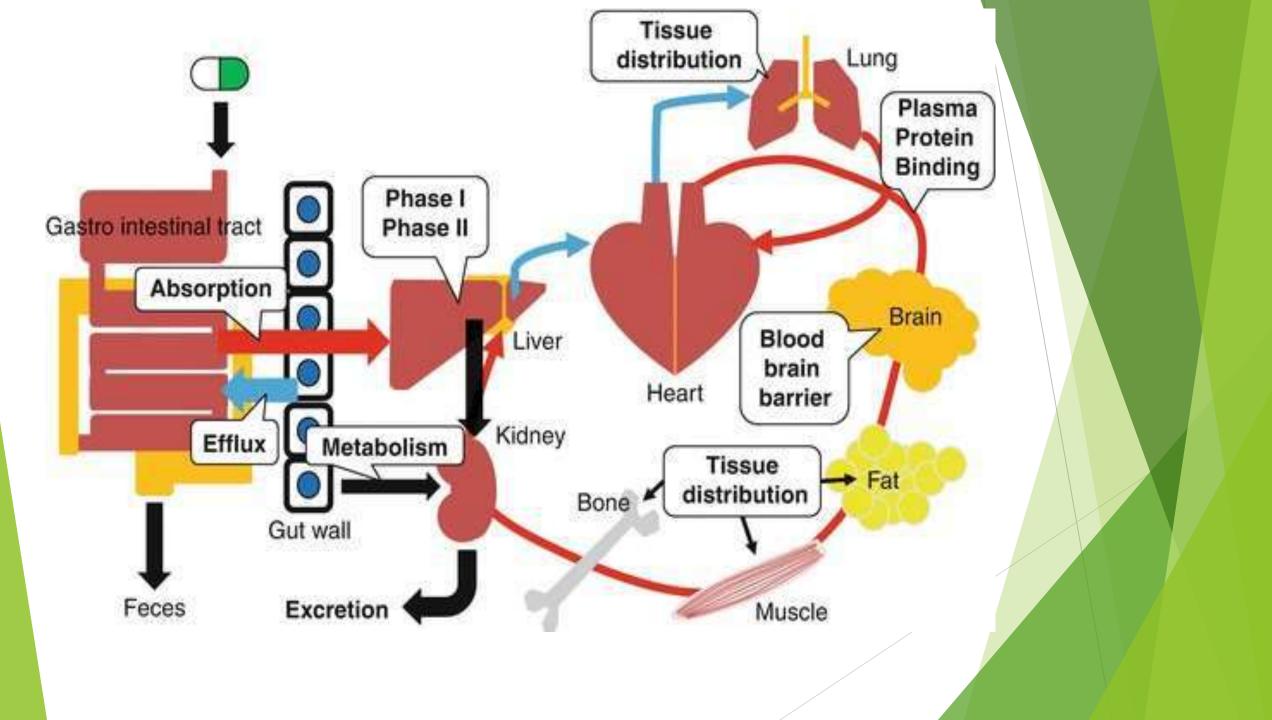


- Pharmaceutical Phase.
- 2. Pharmacokinetic Phase.
- 3. Pharmacodynamics Phase

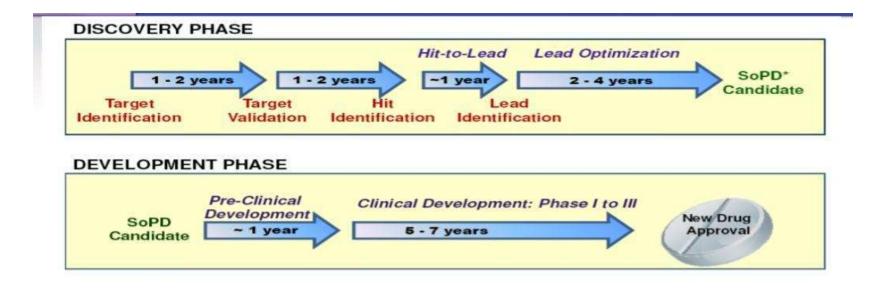
Pharmacokinetics Introduction

- Pharmacokinetics is the movement of drug through the body.
- It is described as What the body does to the drug.
- It is the study of absorption, distribution, metabolism, excretion of drug





Drug formation process



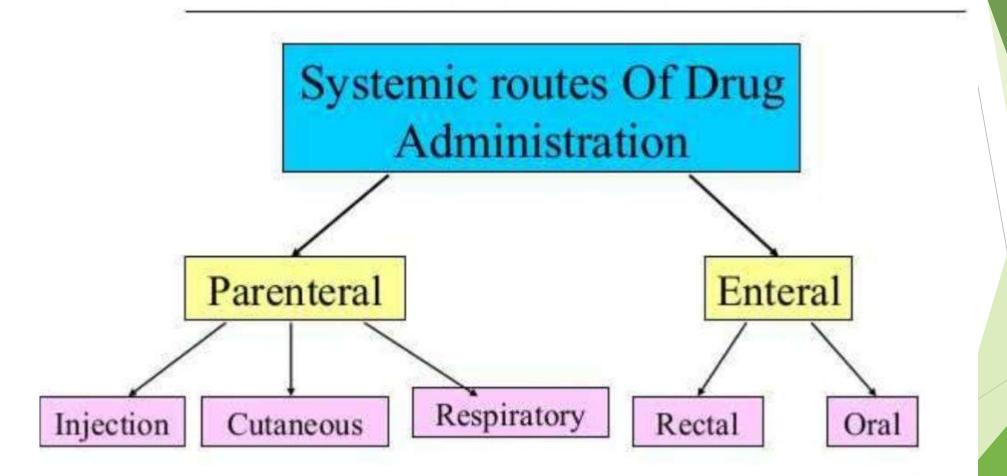
Drug discovery and development

- ·10-15 years to develop a new medicine
- ·Likelihood of success: 10%
- Cost \$800 million 1 billion dollars (US)

Absorption

- A drug must have the right balance of water and fat solubility...
- If the drug is too polar (hydrophilic), It does not pass through the fatty cell membranes of the gut well.
- ▶ If the drug is too hydrophobic, it will be poorly soluble.
- ▶ The drug must be stable to chemical and enzyme.
- Necessary for the production of a therapeutic effect.
- Most drug undergo gastrointestinal absorption
- Absorption must be efficient

Routes Of Administration



Factors affecting drug absorption

Physio-chemical properties

- 1) Partical size (drug molecule)
- 2) Formation (dosage form).
- 3) Ionisation.
- 4) pH
- 5) Liquid solubility and concentration.

Henderson-Hasselbalch Equation

pH = pKa + log
$$\frac{[base]}{[acid]}$$

pH = pH of the buffered solution

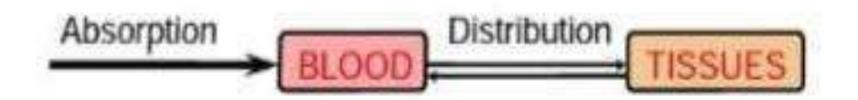
pKa = pKa of the weak acid

[base] and [acid] are <u>initial</u> []'s of the conjugate <u>acid/base</u> pair

Lipinski's rule of five.

- ► The rule of thumb, orally absorbed drugs tend to obey is known as Lipinski's rule of five.
- Poor absorption are more likely when:
- ► There are more than 5 H- bond donar (HBD) groups;
- ► There are more than 10 H-bond acceptor (HBA) groups;
- ▶ The molecular weight is over 500.
- ▶ The log p value less than +5.

Distribution



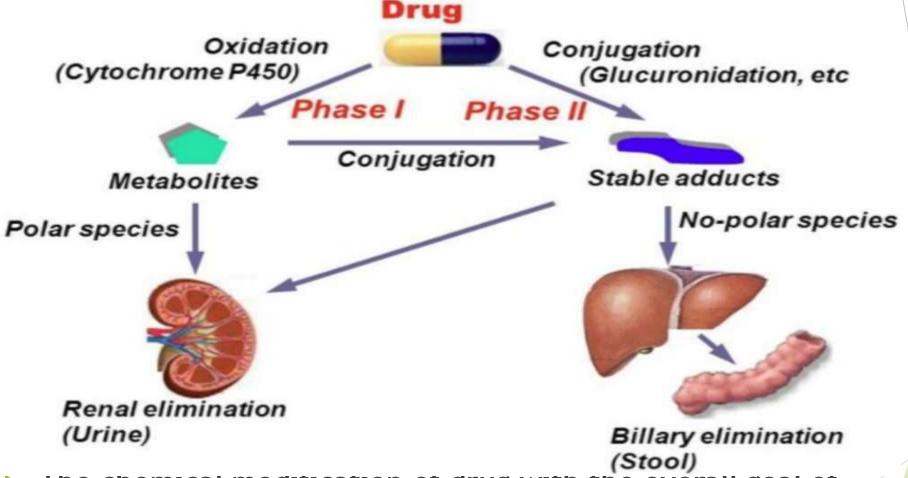
- Distribuation around the blood supply is rapid
- Distribuation to the interstitial fluid surrounding tissue and organs.
- Some drug have to enter cell in order to reach their target.
- ► A drug may be absorbed into fatty tissue and bound to macromolecules.
- Drug entering the CNS have to cross the blood-brain barrier.

- All of the glide in the body, in which a drug can be dissolved,
- ► Can be roughly divided into three compartments.

- 1) Intravascular (blood plasma found within blood vessel)
- 2) Interstitial / tissue (fluid surrounding cells).
- 3) Intracellular (fluid within cells)

The distribution of a drug into this compartments is directed by its physical and chemical properties.

Metabolism



- Ine chemical modification of drug with the overall goal of getting rid of the drug.
- Enzymes are typical involved in metabolism.

Phase I drug metabolism

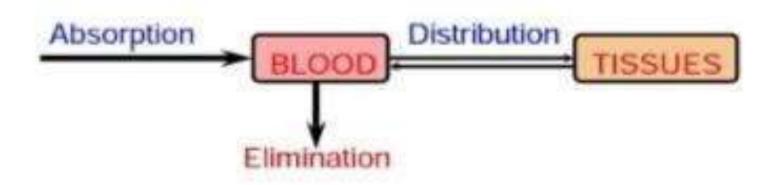
- Reaction
- Convert parents compound into a more polar (hydrophilic) metabolite by adding functional groups (-OH, -SH, -NH2, -COOH, etc.)
- Ex. Oxidation.

Oxidation by cytochrome P450 enzyme.

Phase II

- Conjugation with endogenous substrate to further increase aqueous solubility.
- Conjunction with glucoronide, sulphate, acetate, amino acid.

Excretion (Elimination)



Elimination: the irreversible transfer of a drug from the systemic circulation

Major routes of elimination:

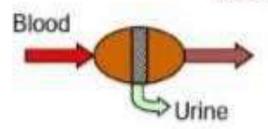
Metabolism

Renal excretion (for free drug, ie low logD)

Biliary excretion

Also lungs, sweat etc.

Renal Excretion



- All unbound drug in plasma is filtered in the glomerulus. Only significant for very polar compounds, log D < 0.
- Some compounds are actively secreted into urine along the proximal tubule.
- Unionised drug can undergo passive reabsorption from urine into blood along the length of the nephron (net excretion may be zero).
- 4. Drug that is bound to plasma proteins is not filtered.

Nephron

