

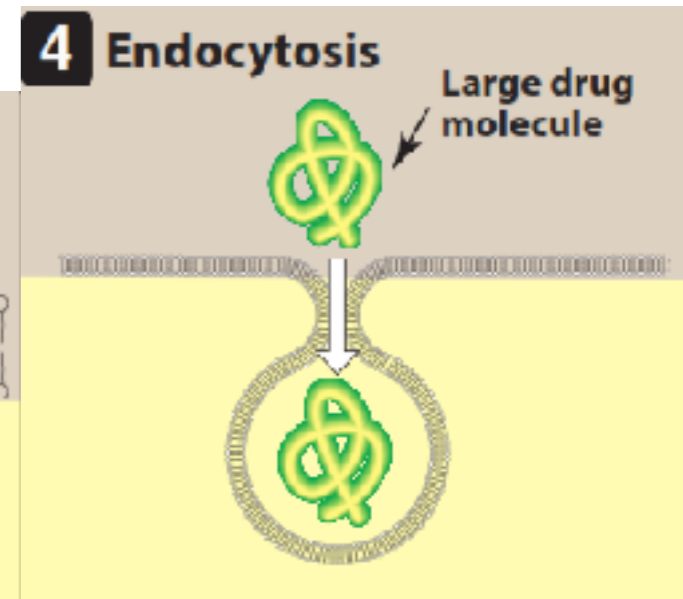
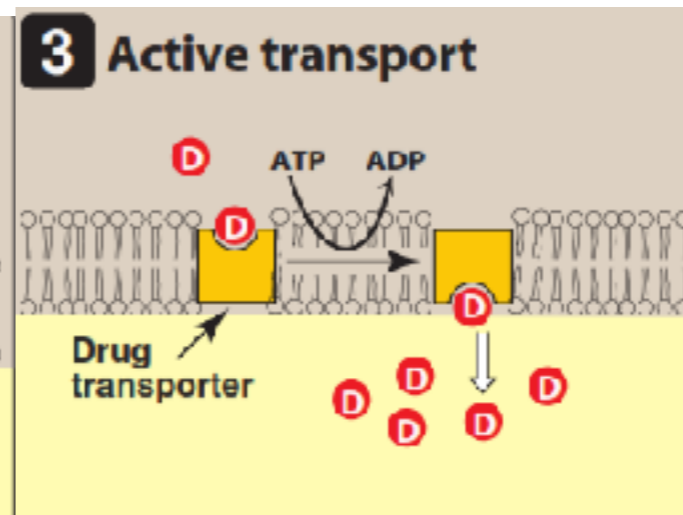
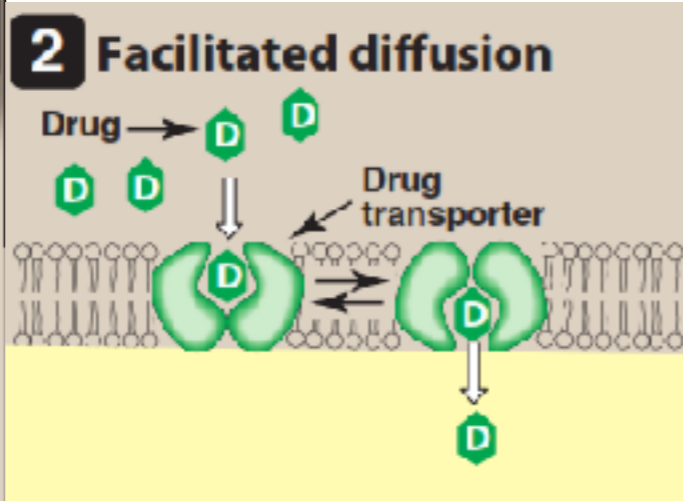
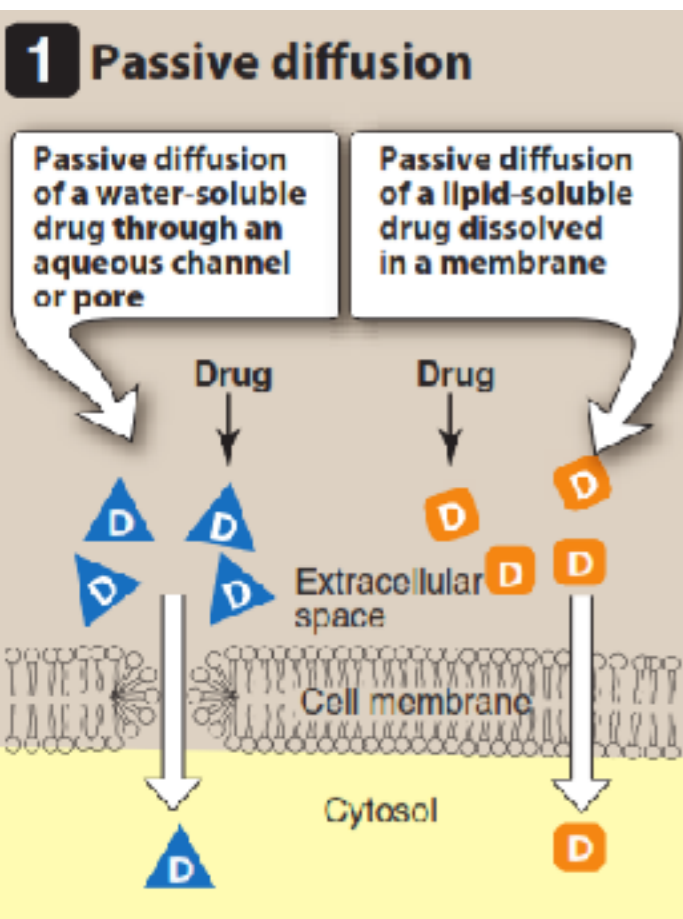


Absorption of Drugs

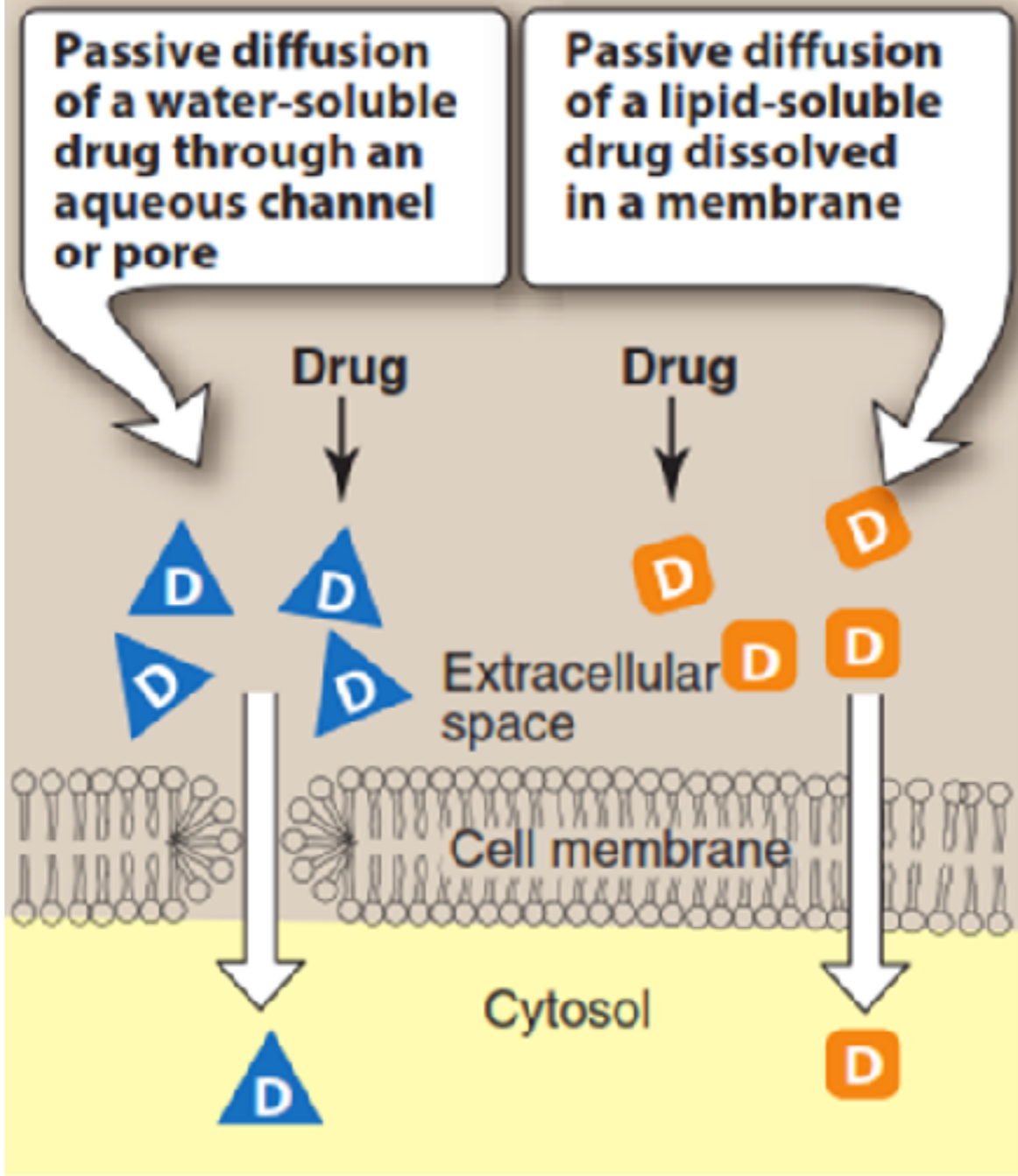
(mechanisms & factors controlling)

- *The transfer of D from site of administration to blood stream via several mechanisms*
- *Rate & Efficiency*
- *Mechanisms of absorption of drugs from GIT*
 - ❖ *Passive diffusion*
 - ❖ *Facilitated diffusion*
 - ❖ *Active transport*
 - ❖ *Endocytosis & exocytosis*

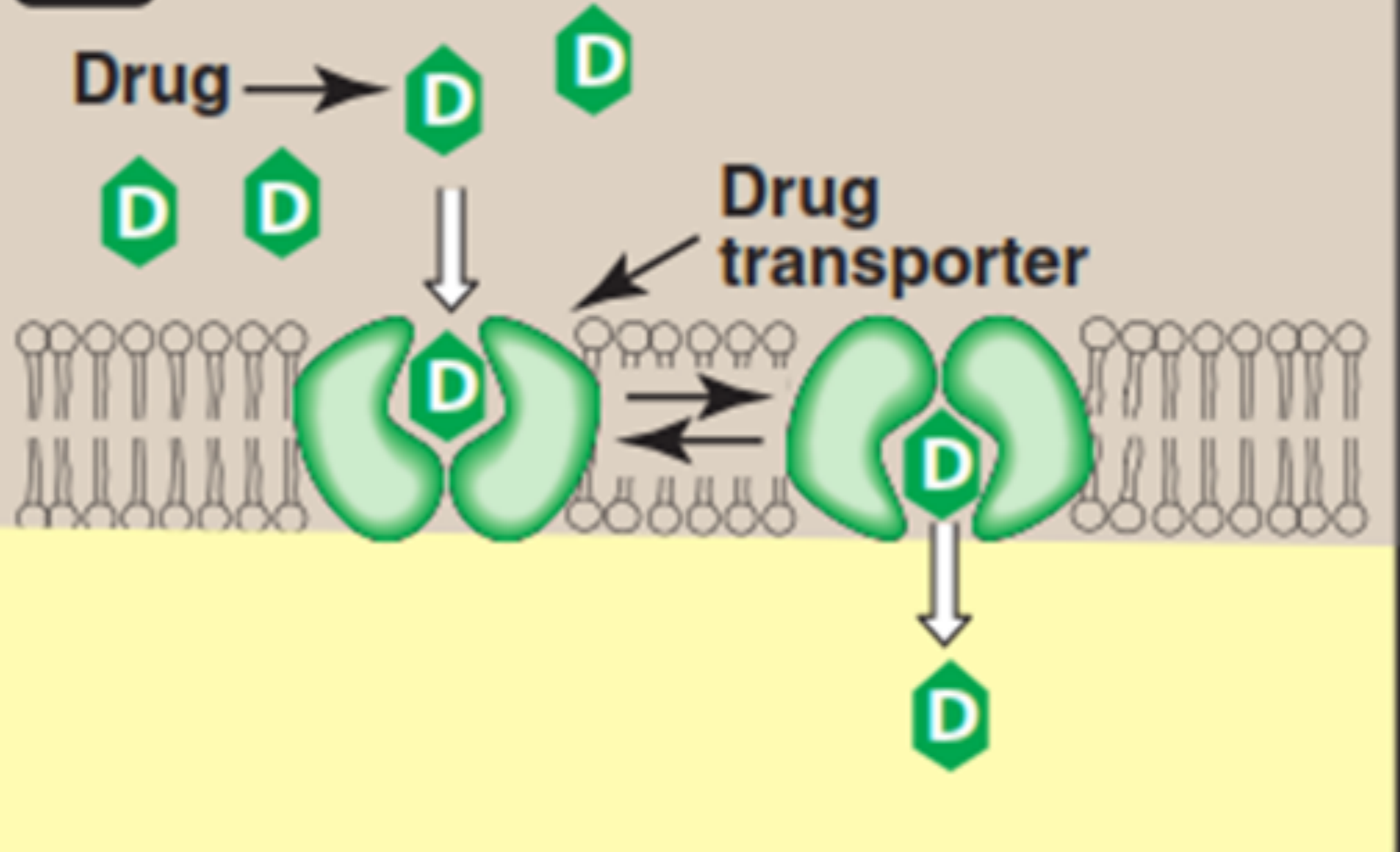
Mechanisms of absorption of drugs from GIT



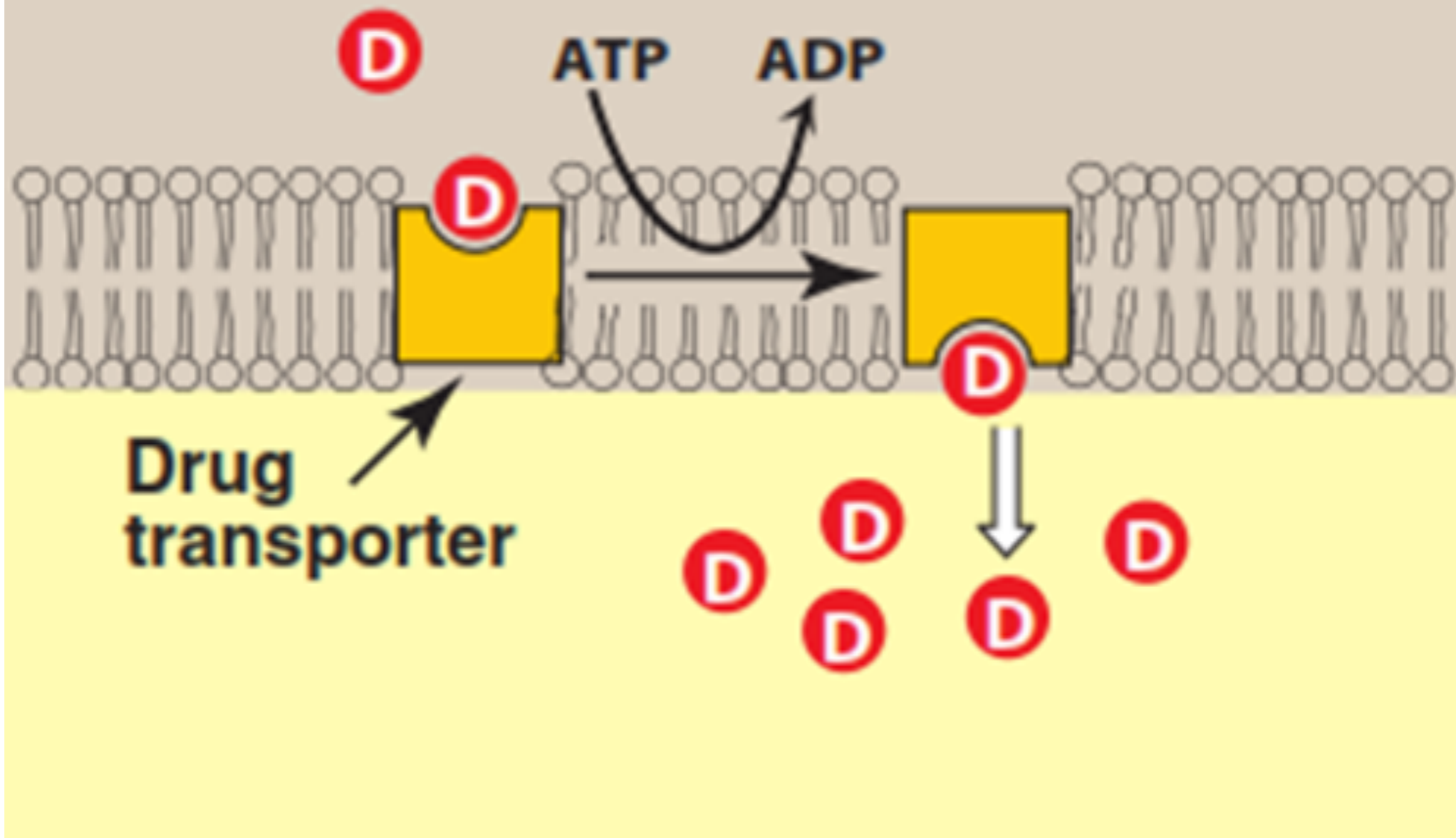
1 Passive diffusion

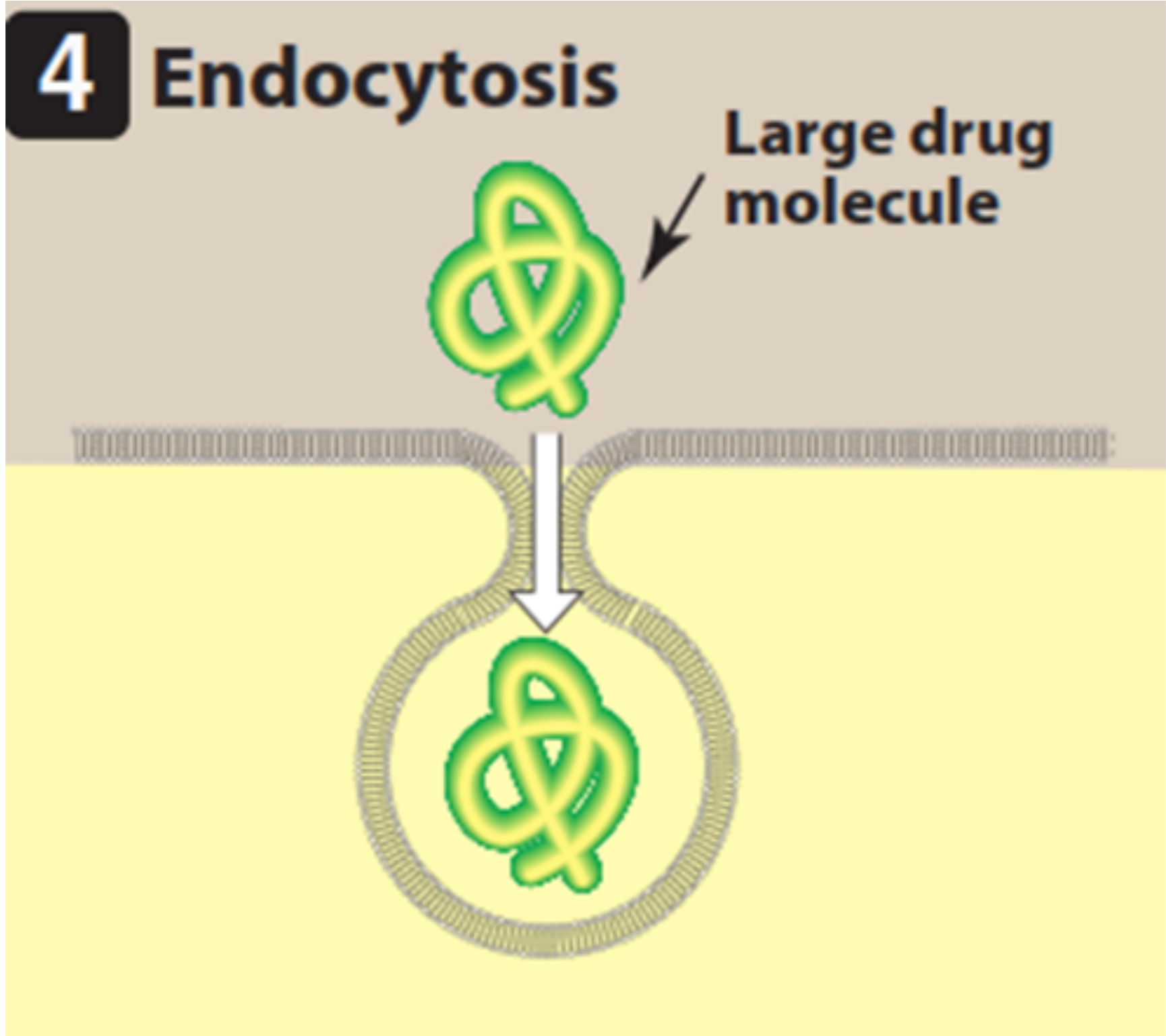


2 Facilitated diffusion



3 Active transport

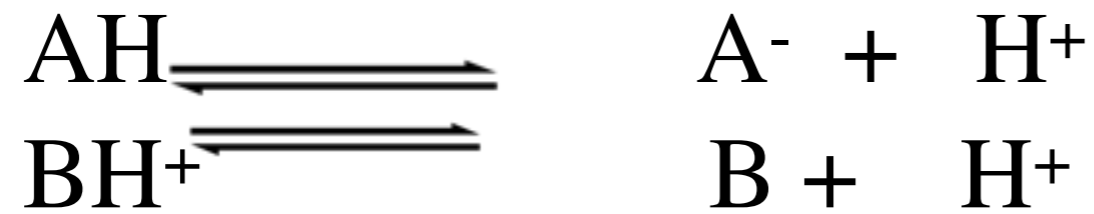






Factors Influencing Absorption

- 1- Effect of pH*
- 2- Blood flow*
- 3- Surface area*
- 4- Contact time*
- 5- Expression of P-gp*

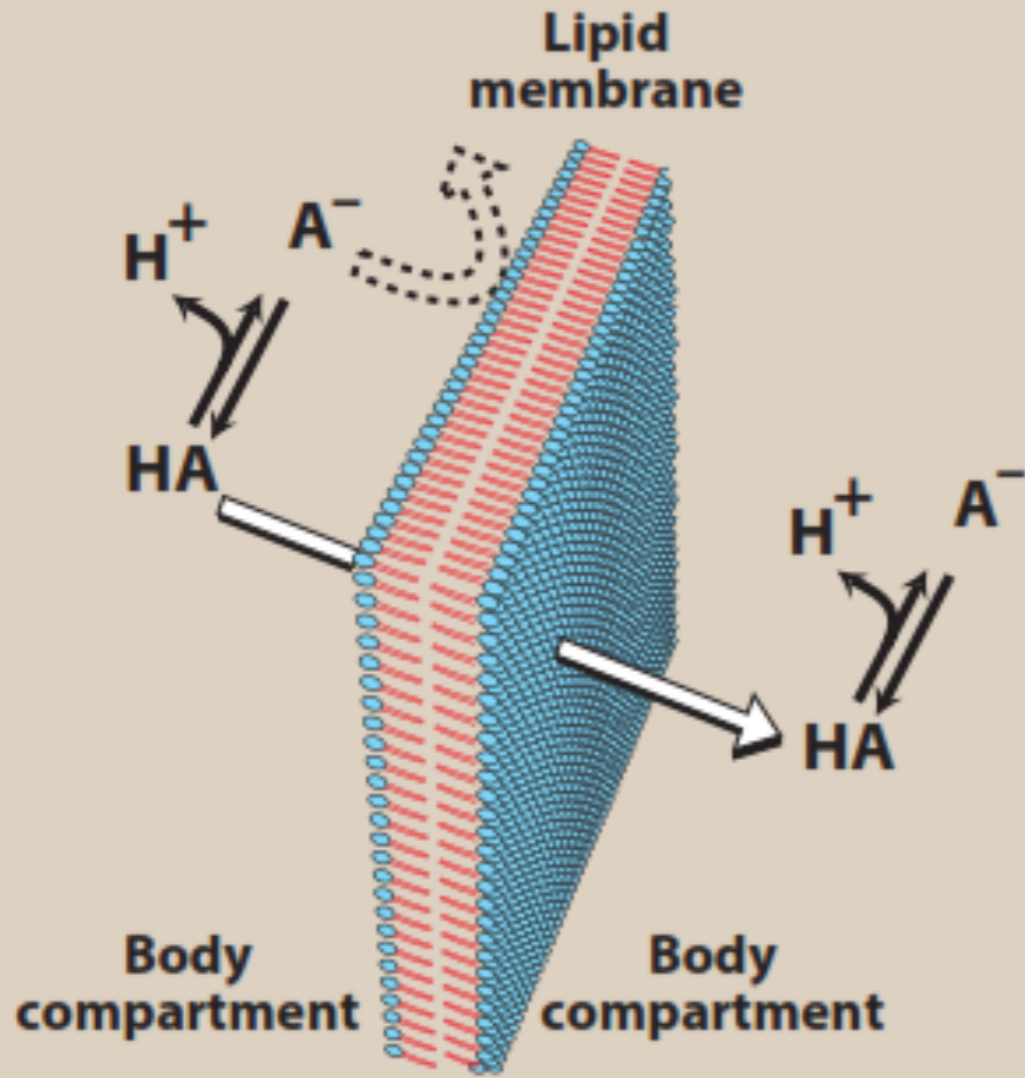


- In the case of weak acids and weak bases the ability to move from aqueous to lipid or vice versa varies with the pH of the medium.
- Henderson-Hasselbalch equation (can be use to predict the effect of pH change on ABSORPTION):

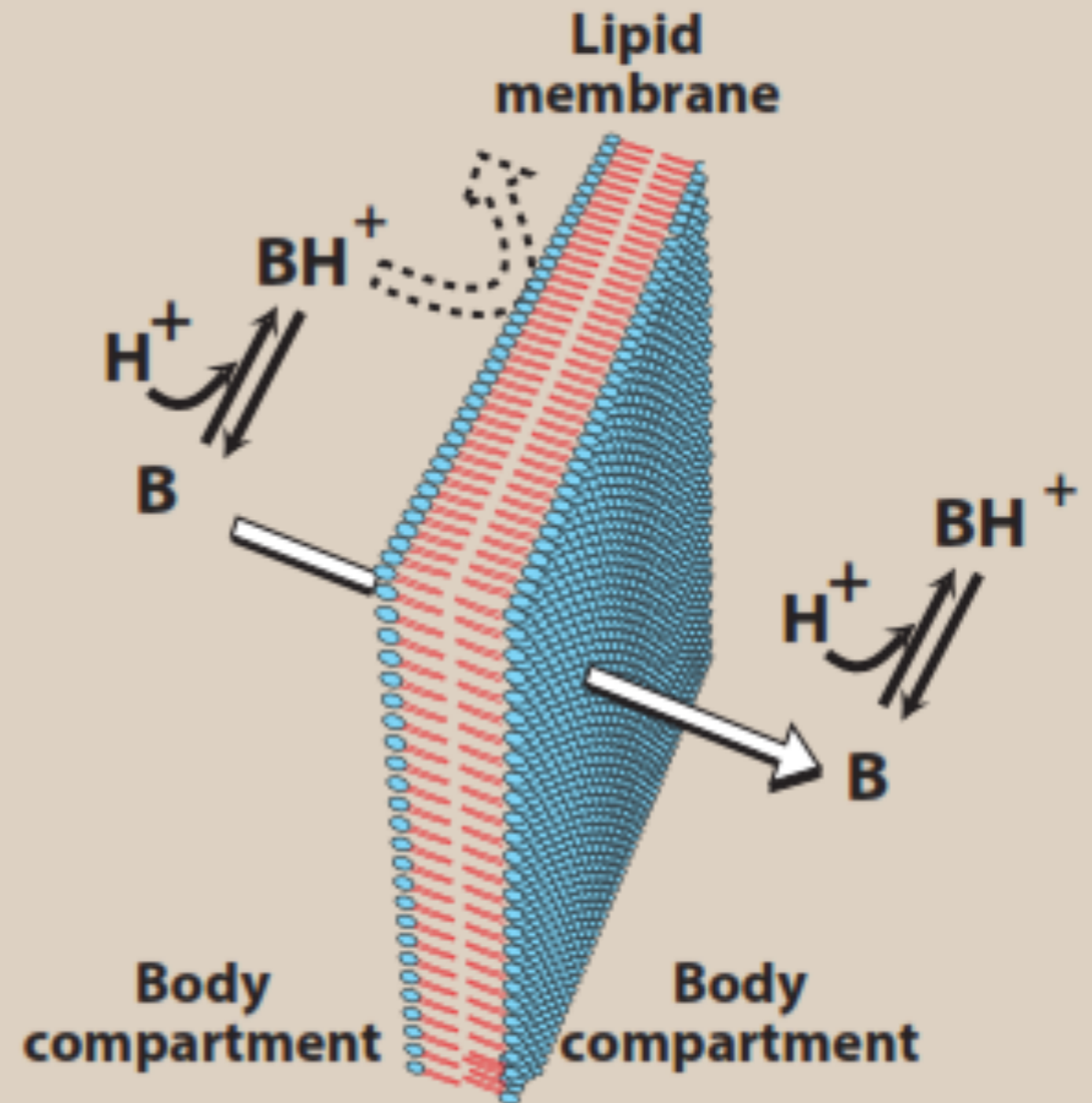
$$\text{Acid: } \text{pH} = \text{pKa} + \log \frac{[\text{A}^-]}{[\text{HA}]}$$

$$\text{Base: } \text{pH} = \text{pKa} + \log \frac{[\text{B}]}{[\text{HB}^+]}$$

A Weak acid



B Weak base





When pH is less than pK_a ,
the protonated forms
HA and BH^+ predominate.

When pH is greater than pK_a ,
the deprotonated forms
 A^- and B predominate.

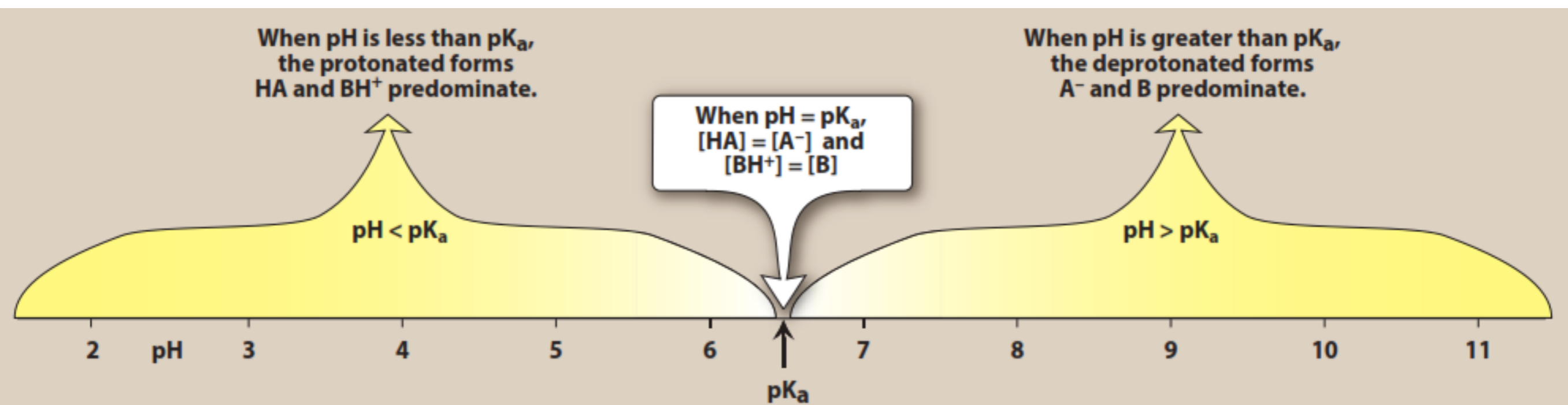
When $pH = pK_a$,
 $[HA] = [A^-]$ and
 $[BH^+] = [B]$

$pH < pK_a$

$pH > pK_a$

pK_a

2 pH 3 4 5 6 7 8 9 10 11





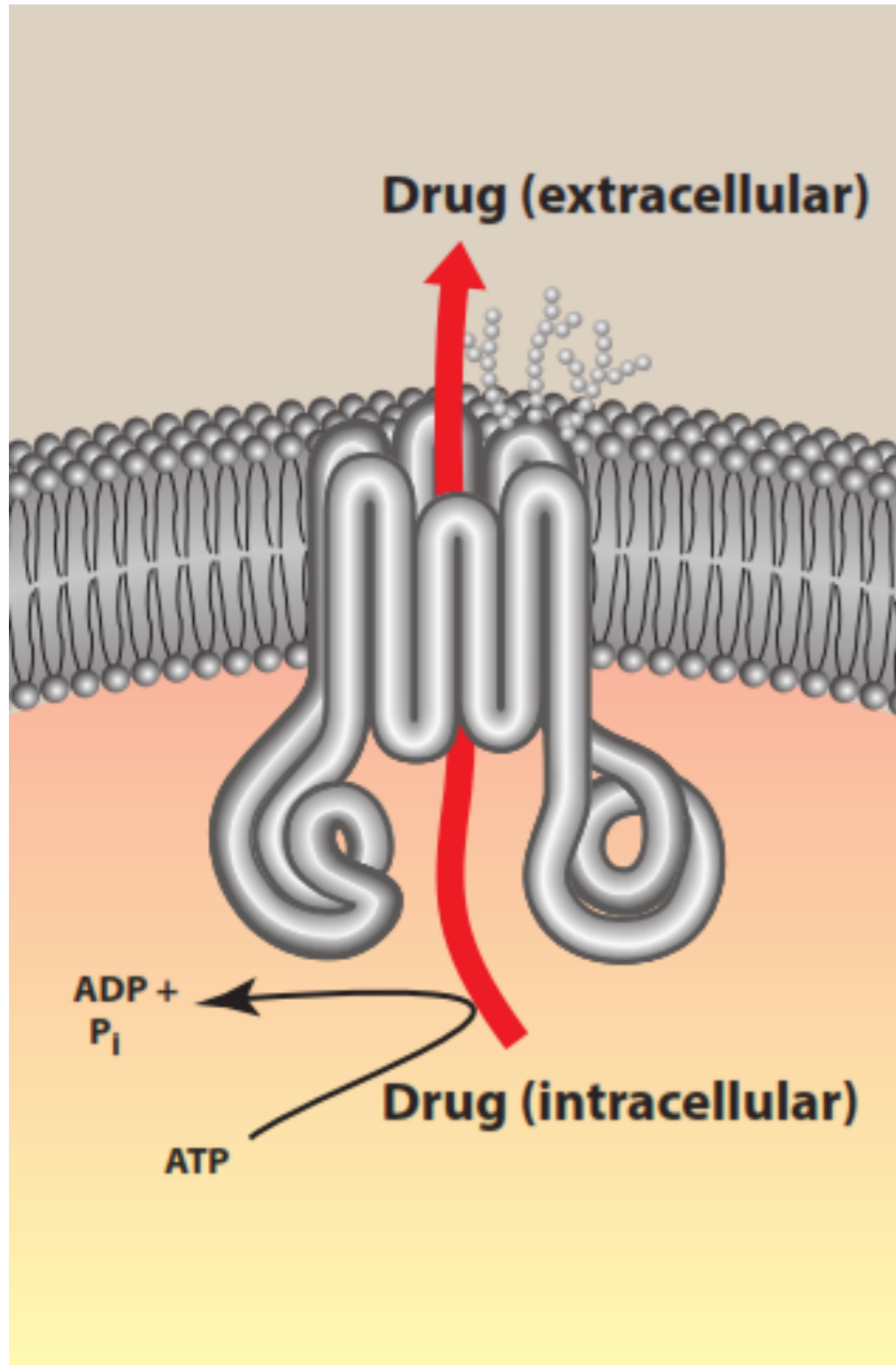
Factors Influencing Absorption (cont.)

2- Blood flow

3- Surface area

4- Contact time (diarrhea, parasympathetic, sympathetic, anticholinergic)

5- Expression of P-glycoprotein (expression, resistance)

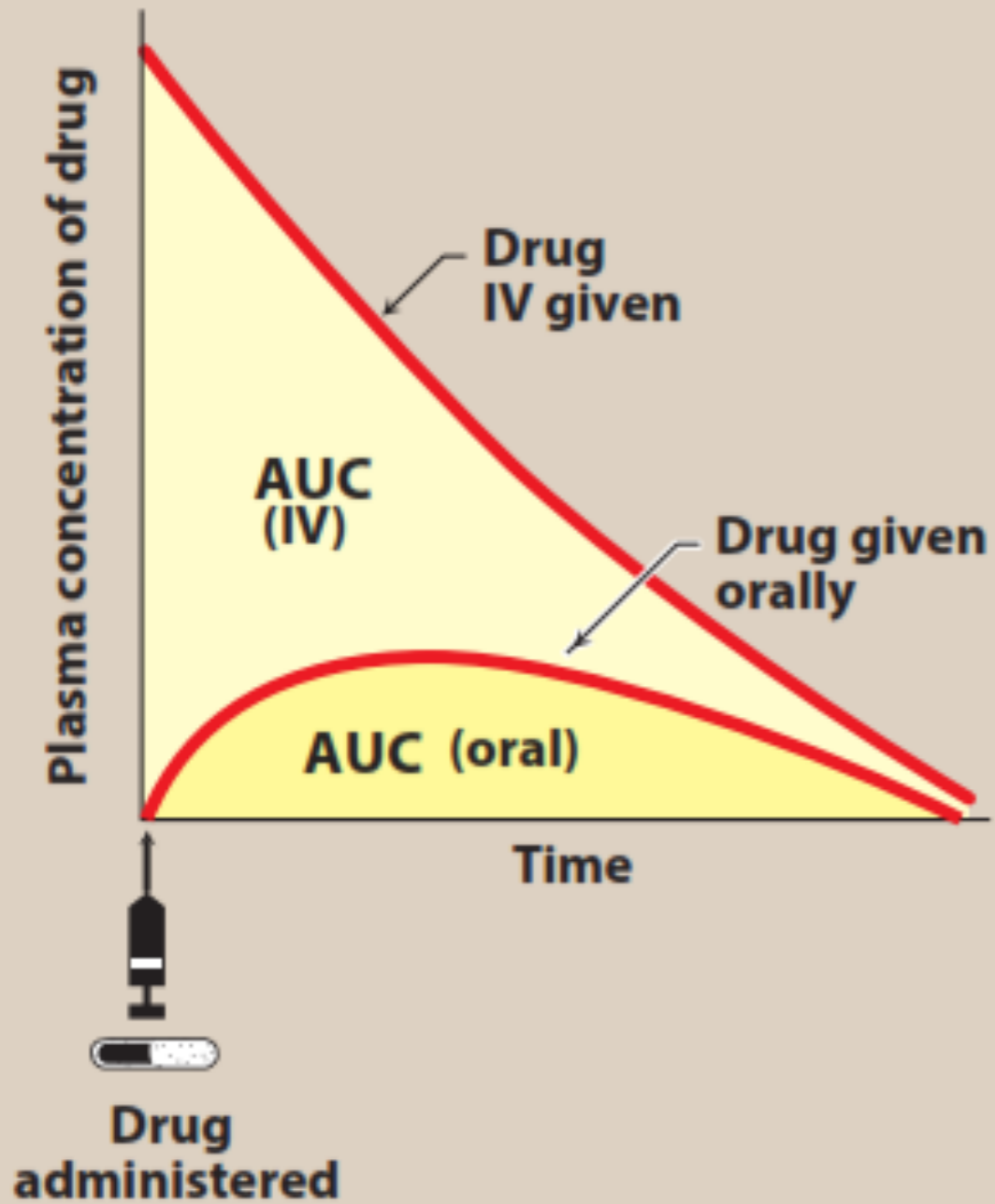


Expression of P-glycoprotein

- *Multidrug transmembrane transporter ptn*
- *Expression*
- *Function*
- *Multidrug resistance*

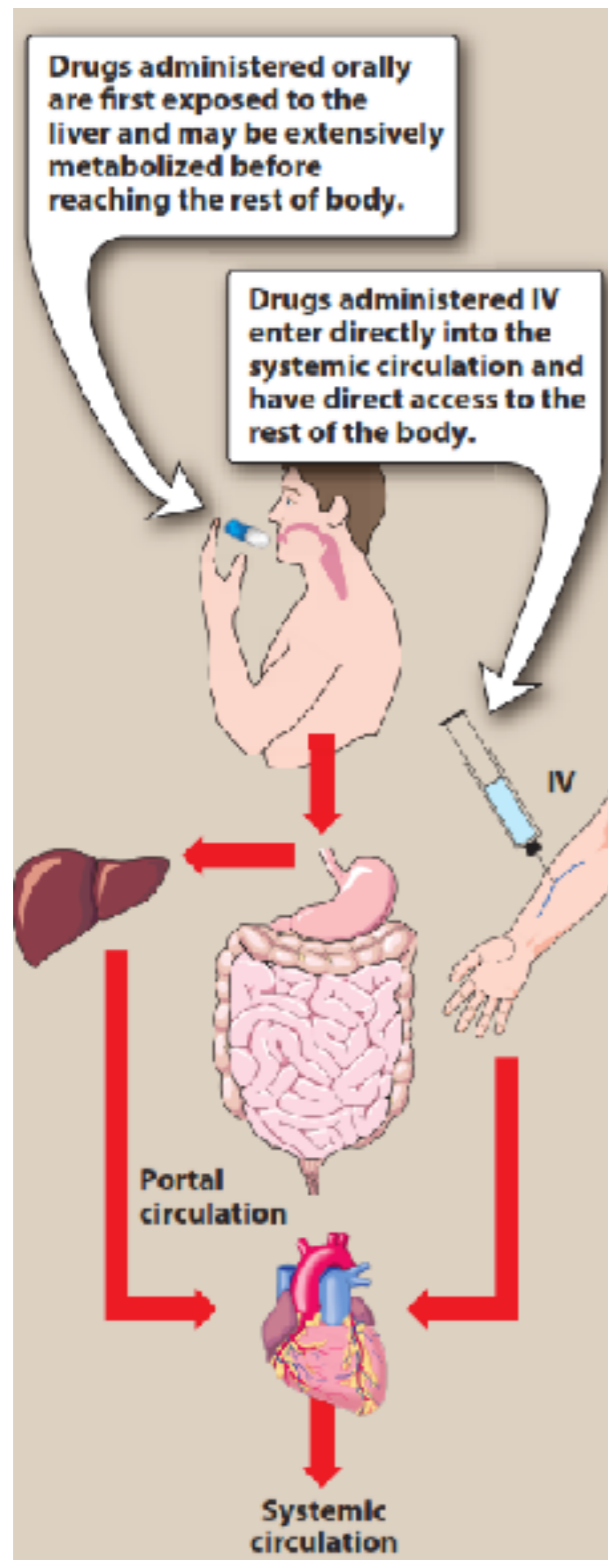


$$\text{Bioavailability} = \frac{\text{AUC oral}}{\text{AUC IV}} \times 100$$



Bioavailability

The fraction of the administered drug that reaches the systemic circulation



Factors Influencing Bioavailability:

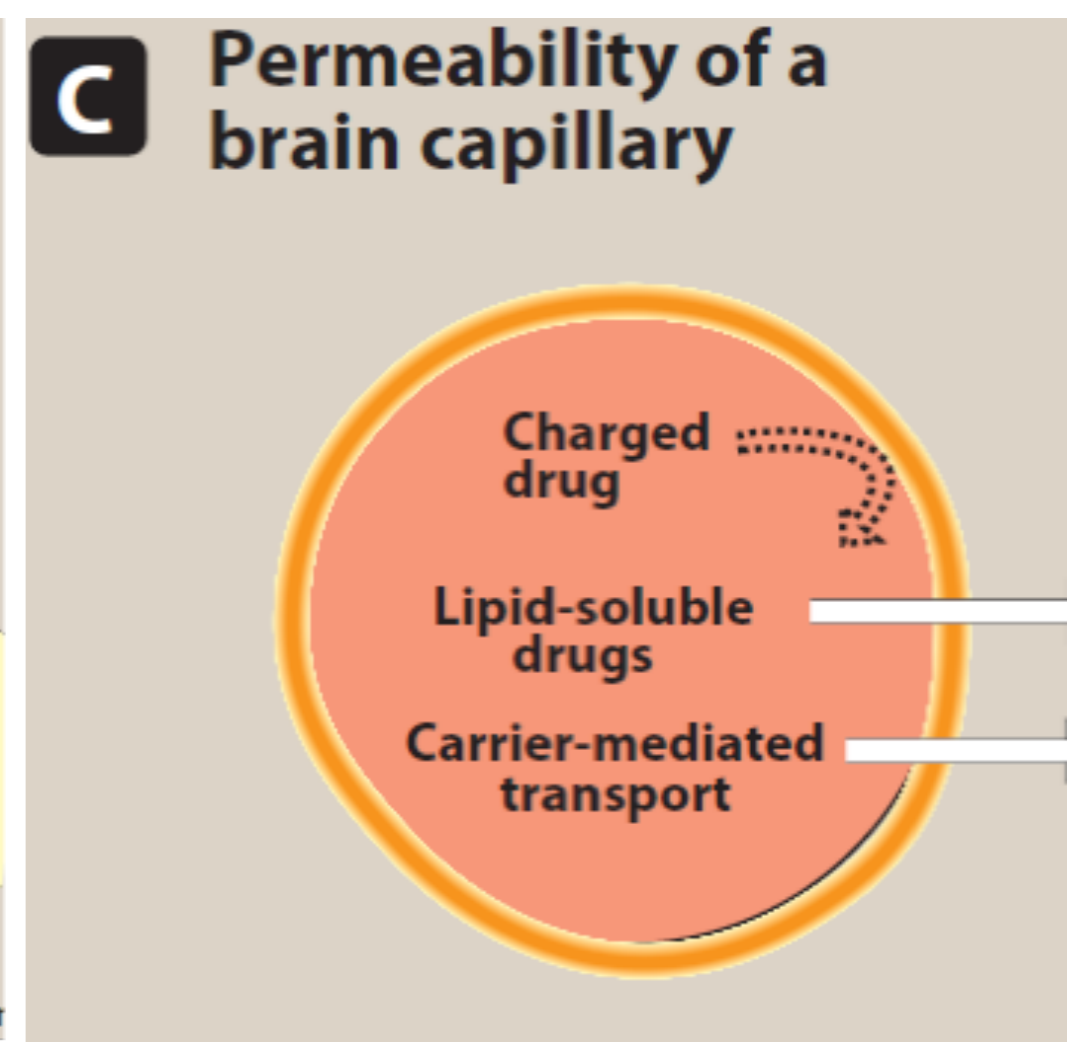
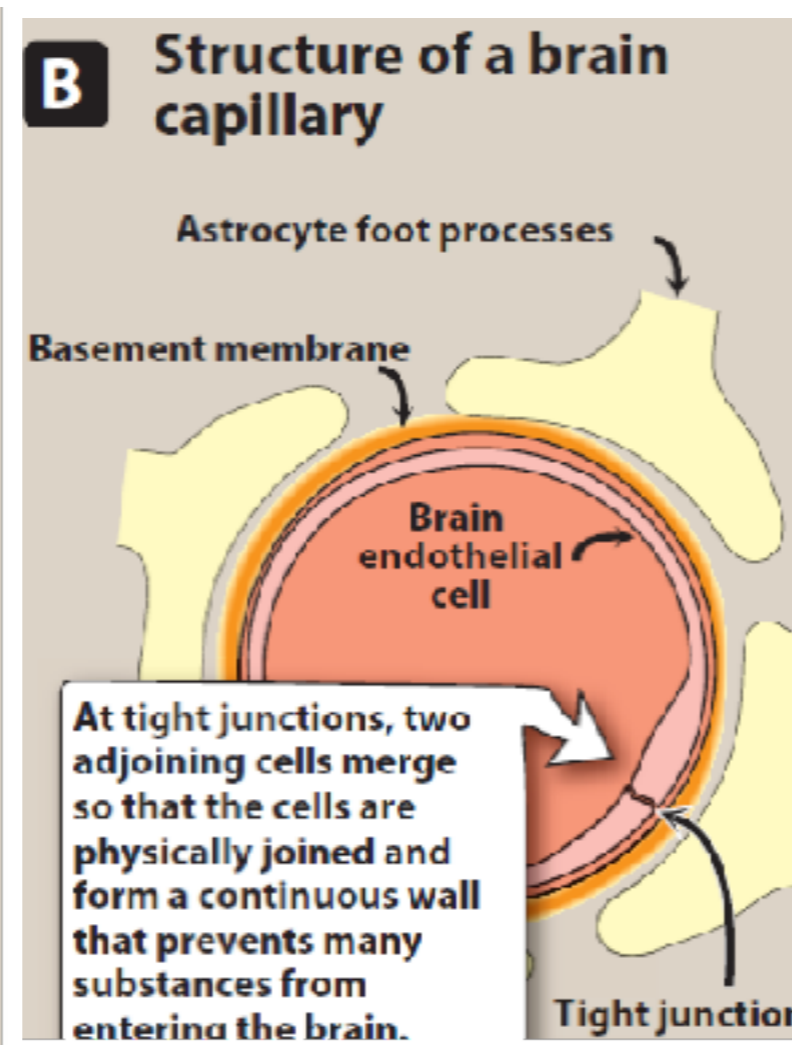
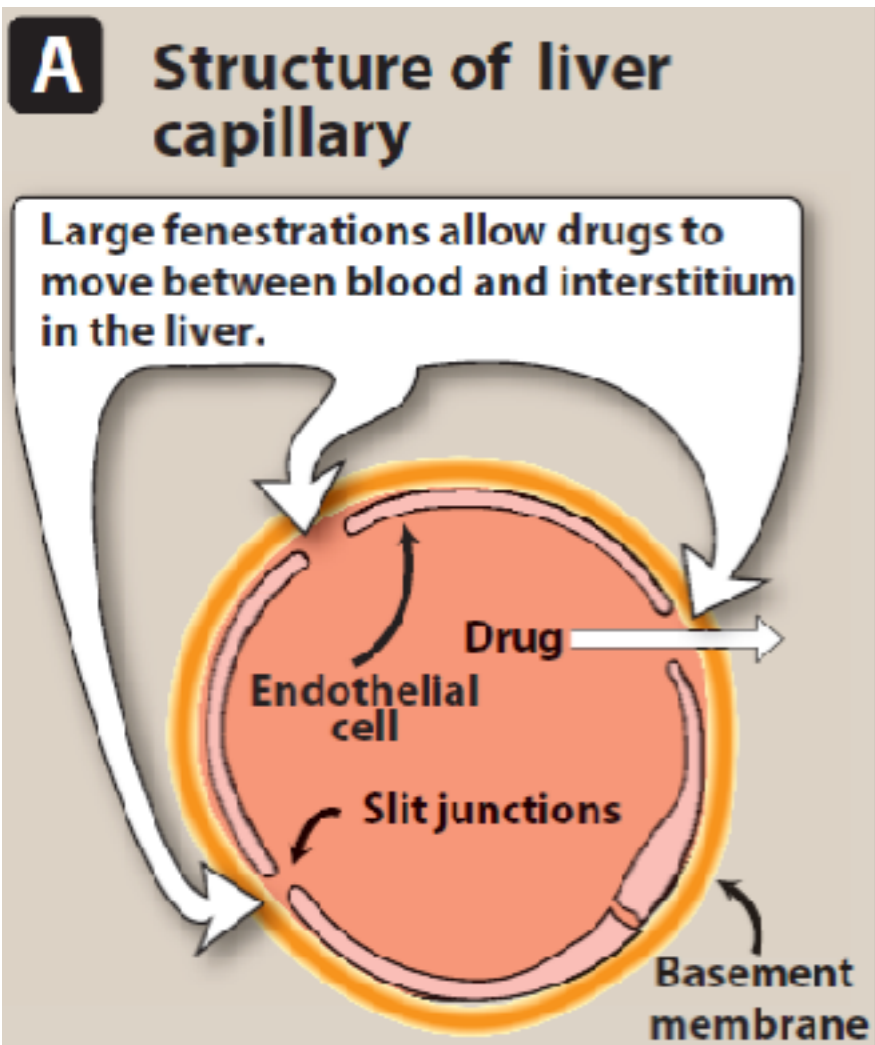
- *1st-pass effect*
- *Solubility of D*
- *Chemical instability*
- *Nature of D formulation*
- ✓ *Bioequivalence*
- ✓ *Therapeutic equivalence*



Drug Distribution

- *The process by which a drug reversibly leaves the blood stream and enters interstitium (ECF) and tissues*
- *capillary permeability, T vol., pl ptns binding, & relative lipophilicity*
- *Blood Flow (CO & local BF)*
- *Capillary permeability (capillary structure, chemical nature) e.g. levodopa*
- *Binding to pl ptns & tissues (acrolein metabolite of cyclophosphamide)*
- *lipophilicity*

Liver and Brain Capillaries





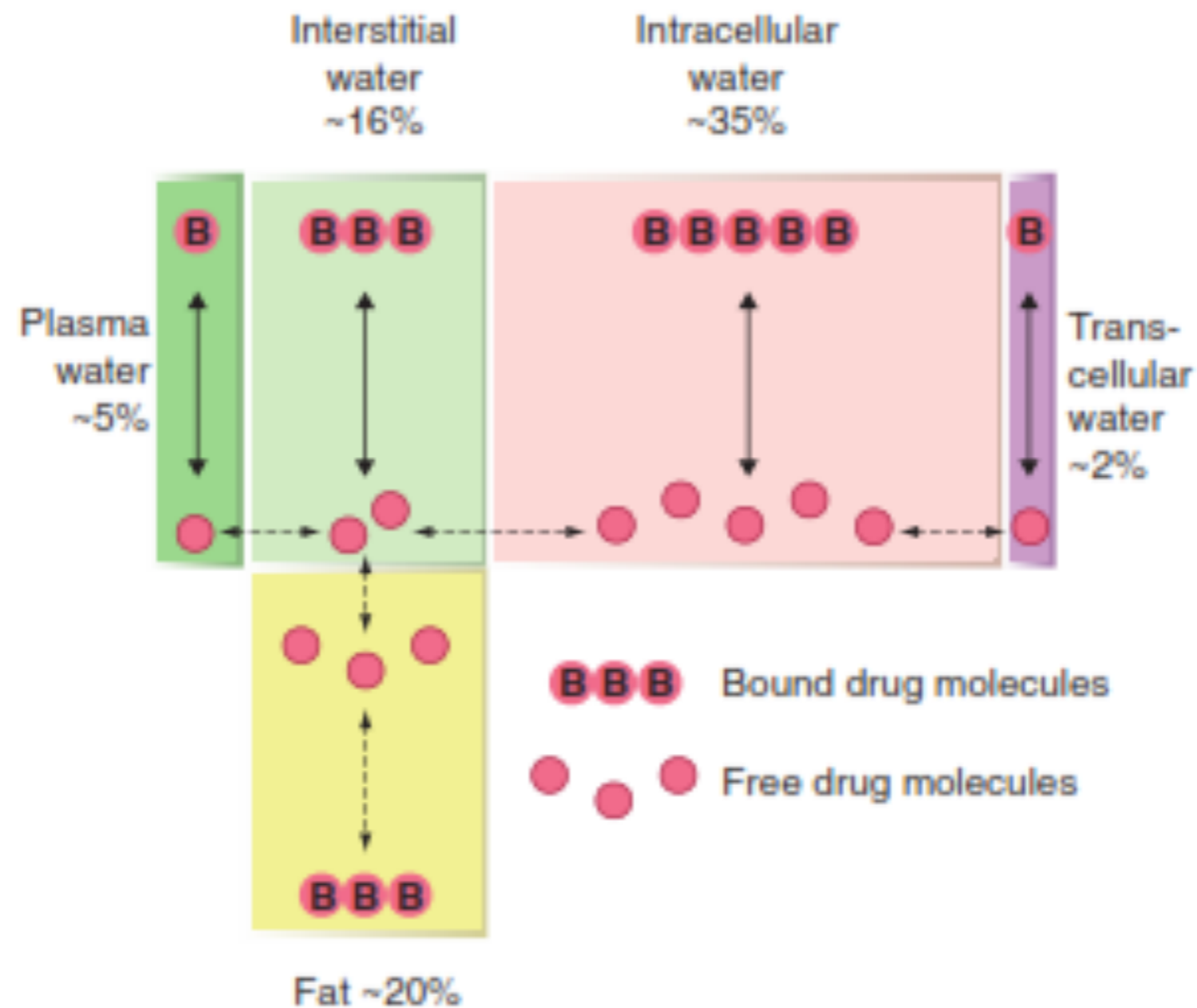
Volume of Distribution

Apparent volume of distribution: the fluid volume required to contain the entire drug in the body at the same concentration measured in the plasma

$$V_d = \frac{\text{Amount of drug in the body}}{C_0}$$

- ✓ *Plasma compartment*
- ✓ *ECF*
- ✓ *Total body water*

The Main Body Fluid Compartments





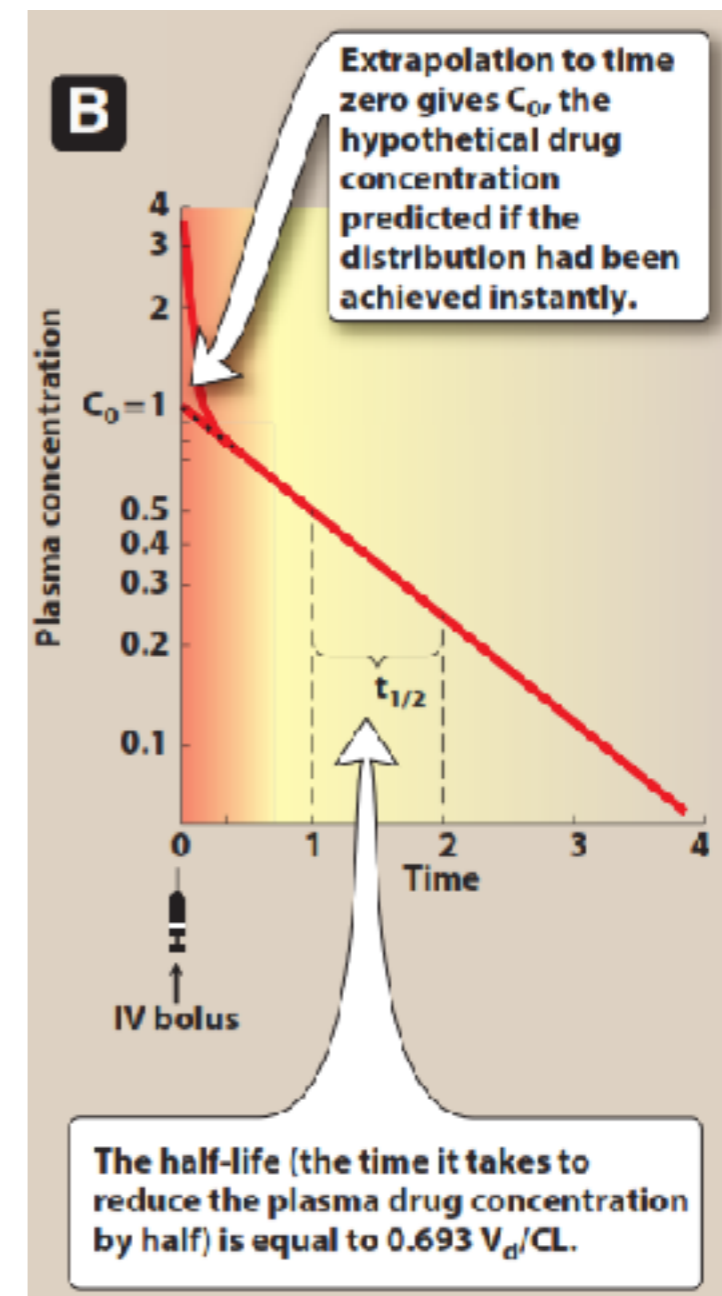
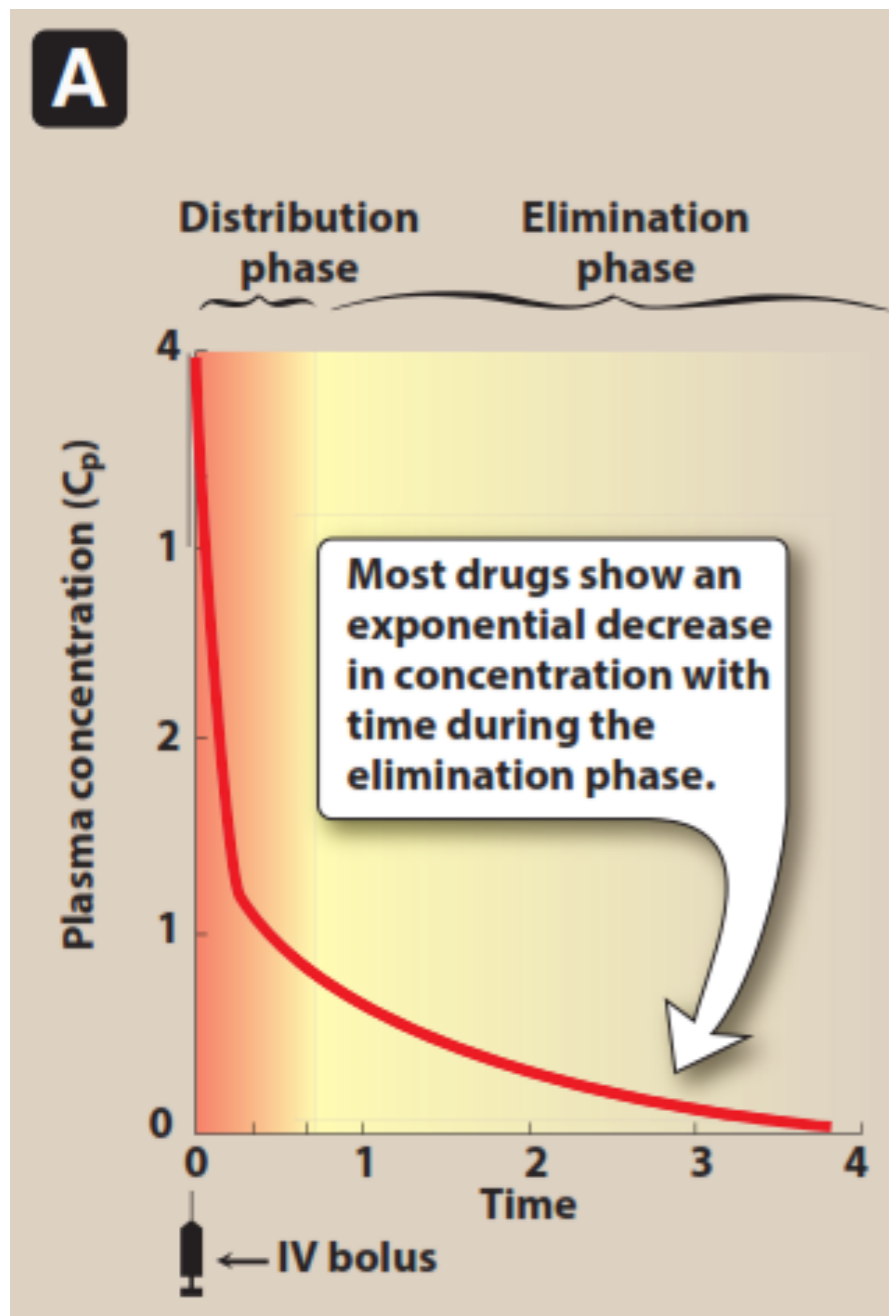
Volume of Distribution (cont.)

- Apparent volume of distribution (V_d)
- Determination of volume of distribution

$$V_d = \frac{\text{Dose}}{C_0}$$

- Plasma half life ($t_{1/2}$)
- Effect of V_d on $t_{1/2}$

Plasma Drug Concentration after Single Injection





Drug Clearance through Metabolism

Drugs are eliminated from the body by:

- ✓ Hepatic metabolism
- ✓ Elimination in bile
- ✓ Elimination in urine

Clearance (CL): amount of drug removed from body per unit time

$$CL = 0.693 \times V_d / t_{1/2}$$

1st order kinetics

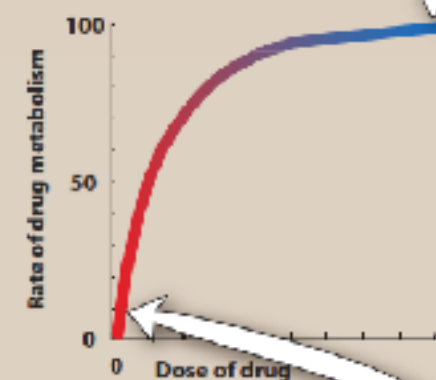
$$v = \text{Rate of drug metabolism} = \frac{V_{\max} [C]}{K_m + [C]}$$

$$v = \text{Rate of drug metabolism} = \frac{V_{\max} [C]}{K_m + [C]}$$

Zero order kinetics

$$v = \text{Rate of drug metabolism} = \frac{V_{\max} [C]}{[C]} = V_{\max}$$

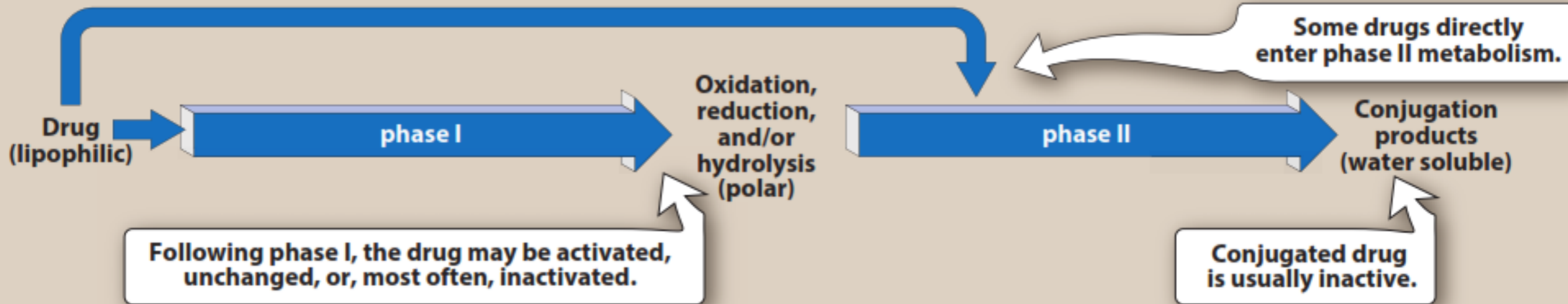
With a few drugs, such as aspirin, ethanol, and phenytoin, the doses are very large. Therefore, the plasma drug concentration is much greater than K_m , and drug metabolism is **zero order**, that is, constant and independent of the drug dose.



With most drugs the plasma drug concentration is less than K_m , and drug elimination is **first order**, that is, proportional to the drug dose.



Drug Metabolism





Reactions of Drug Metabolism

➤ *Phase I*

✓ *Phase I through P450*

Specificity

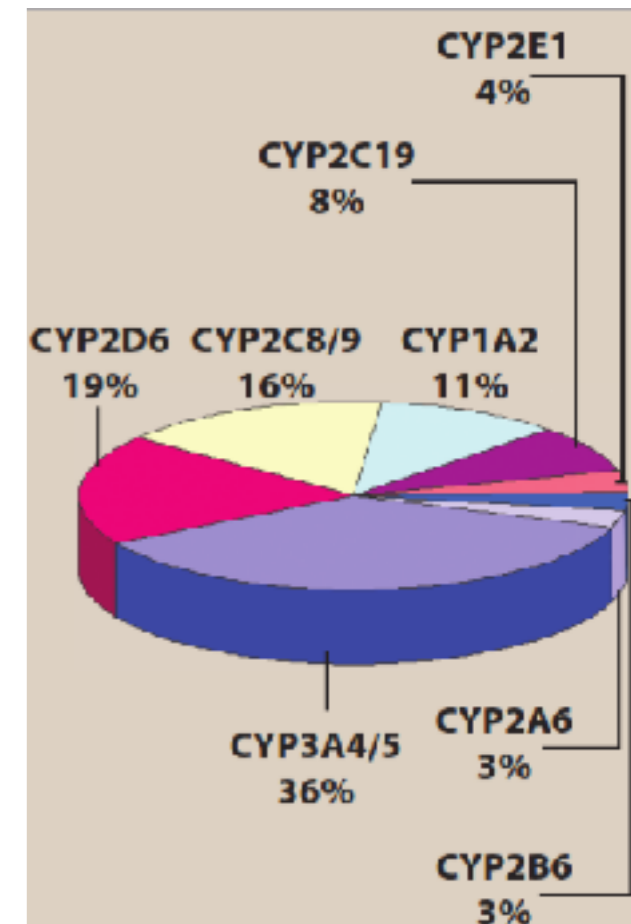
Genetic variability

Inducers

*Inhibitors (omeprazole,
grapefruit)*

✓ *Phase I not involving P450*

➤ *Phase II*





Isozyme: CYP2C9/10

COMMON SUBSTRATES	INDUCERS
<i>Warfarin</i> <i>Phenytoin</i> <i>Ibuprofen</i> <i>Tolbutamide</i>	<i>Phenobarbital</i> <i>Rifampin</i>

Isozyme: CYP2D6

COMMON SUBSTRATES	INDUCERS
<i>Desipramine</i> <i>Imipramine</i> <i>Haloperidol</i> <i>Propranolol</i>	None*

Isozyme: CYP3A4/5

COMMON SUBSTRATES	INDUCERS
<i>Carbamazepine</i> <i>Cyclosporine</i> <i>Erythromycin</i> <i>Nifedipine</i> <i>Verapamil</i>	<i>Carbamazepine</i> <i>Dexamethasone</i> <i>Phenobarbital</i> <i>Phenytoin</i> <i>Rifampin</i>

1. *1- decrease pl D conc*
2. *decrease D activity*
3. *Decrease therapeutic effect*
4. *Decrease therapeutic D effect*



Drug Clearance by the Kidney

- 1. Glomerular filtration*
- 2. Proximal tubular secretion*
- 3. Distal tubular reabsorption*

