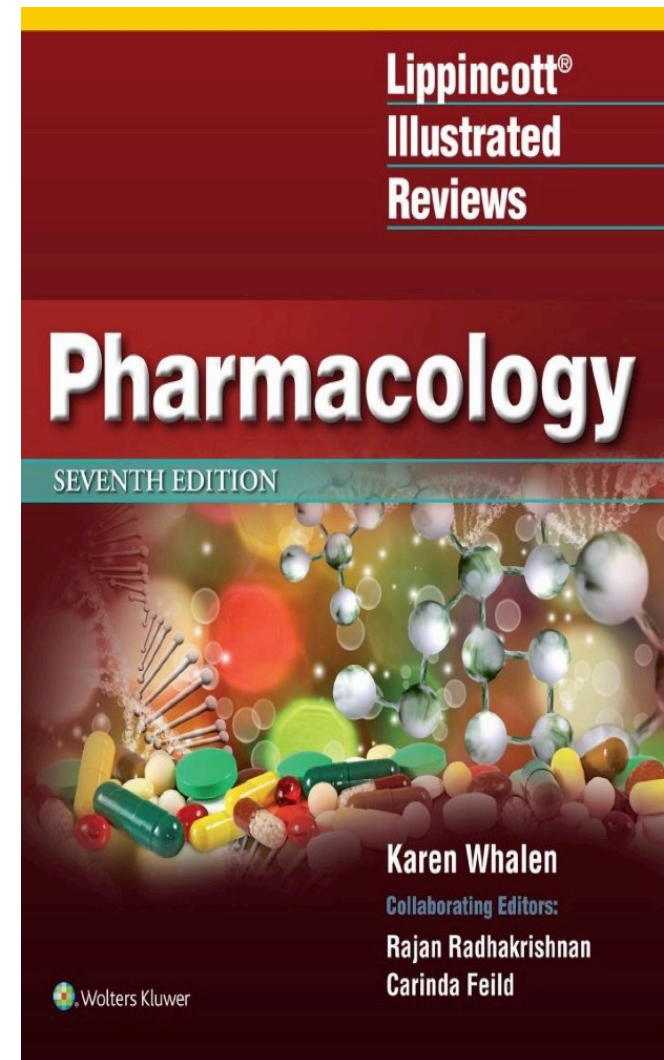




Pharmacology I

3 hrs/week

Ref: Lippincott Illustrated Pharmacology





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PHARMACOLOGY



AGE 0-4
AMOXICILIN

4-12
RITALIN

12-18
APPETITE
SUPPRESSANTS

18-24
NO-DOZ

24-38
PROZAC

38-65
VIAGRA

65 —
EVERYTHING
ELSE





• *What is a Drug?*

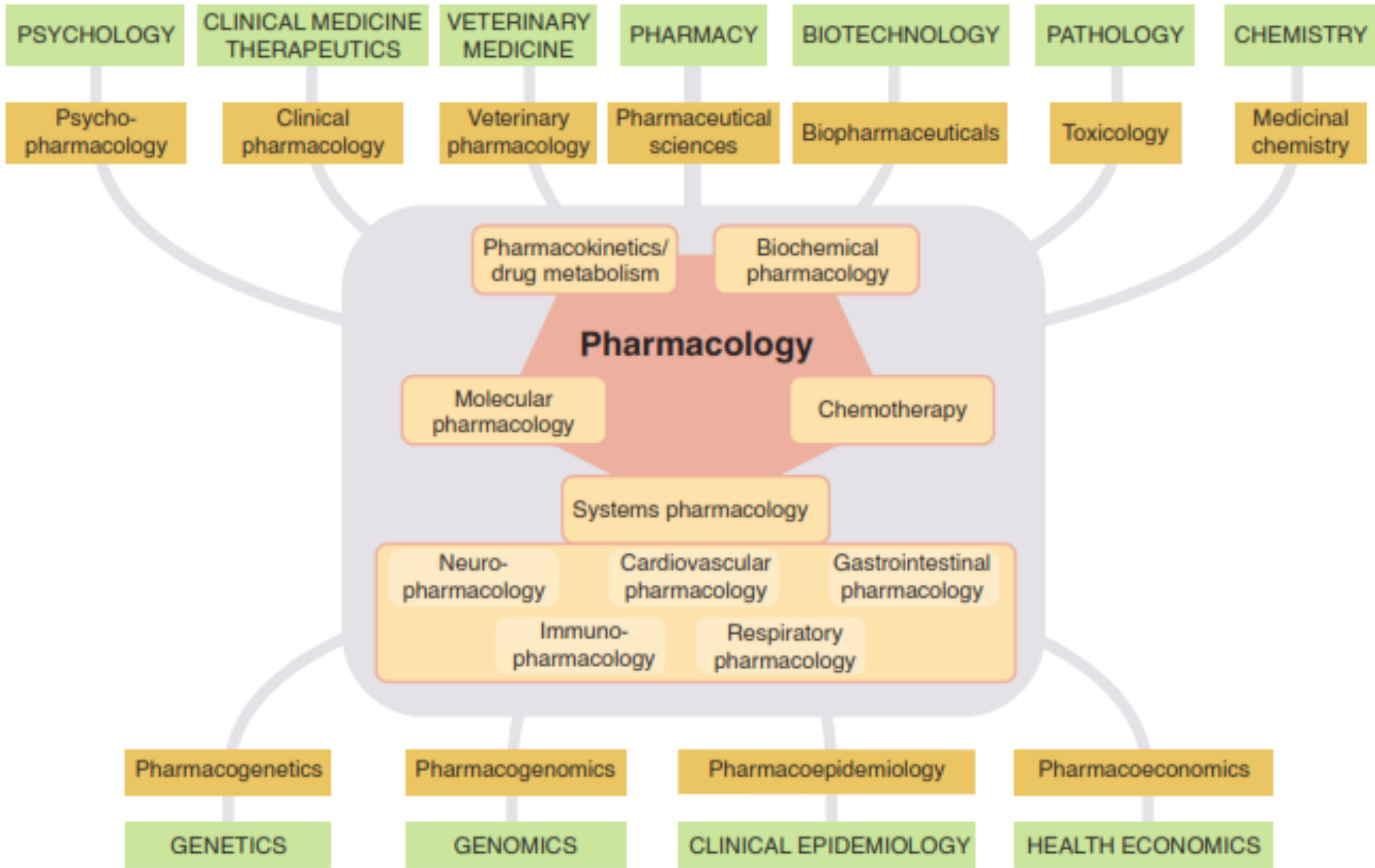
- *A chemical substance of known structure, other than nutrients or essential dietary ingredients, which, when administered to a living organism, produces a biologic effect*

• *What is a Medicine*

- *A chemical preparation, which usually, contains one or more drugs, given intentionally to have a therapeutic effect*

• *Pharmacology*

- *The study of the effects of drugs on the function of living systems*
 - *Clinical pharmacology*
 - *Toxicology*



Pharmacology today with its various subdivisions

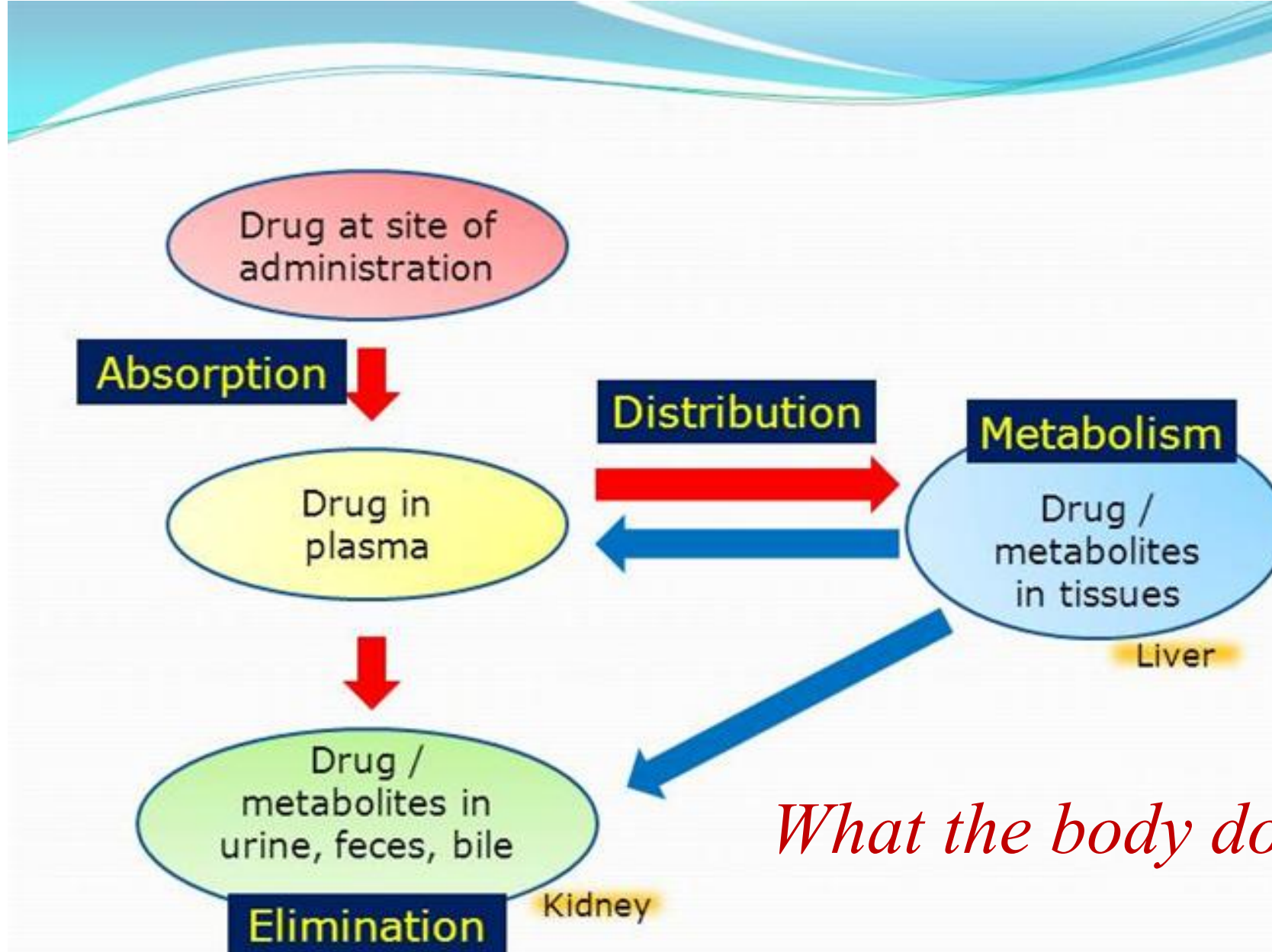
Interface disciplines (brown boxes) link pharmacology to other mainstream biomedical disciplines (green boxes)



Pharmacology (pharmakon = drug logos = the study of)

- *Pharmacodynamics*: how drugs, alone and in combination, affect the body (young, old, well, sick).
- *Pharmacokinetics*: absorption, distribution, metabolism, excretion or how the body – well or sick – affects drugs.

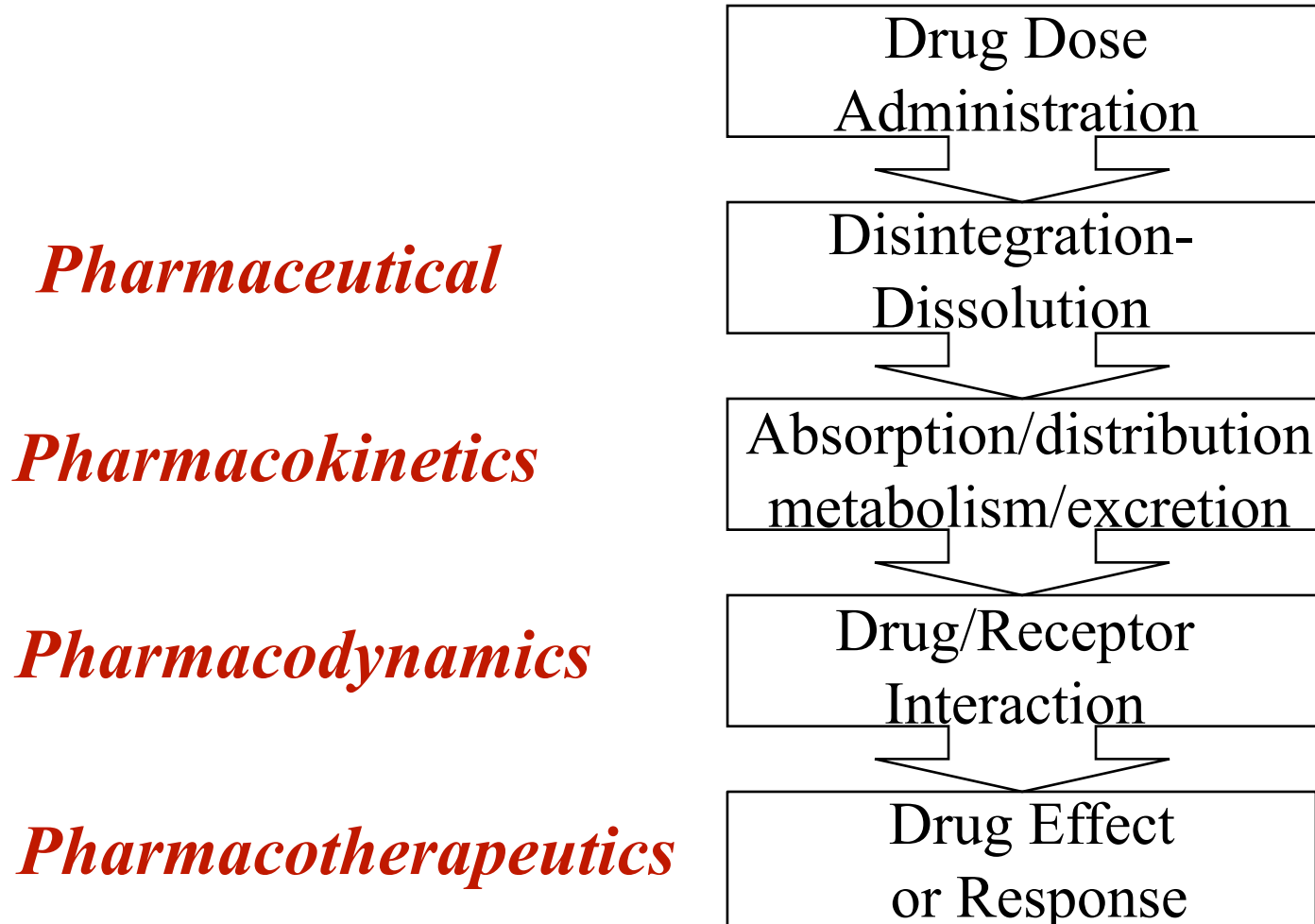
Pharmacokinetics



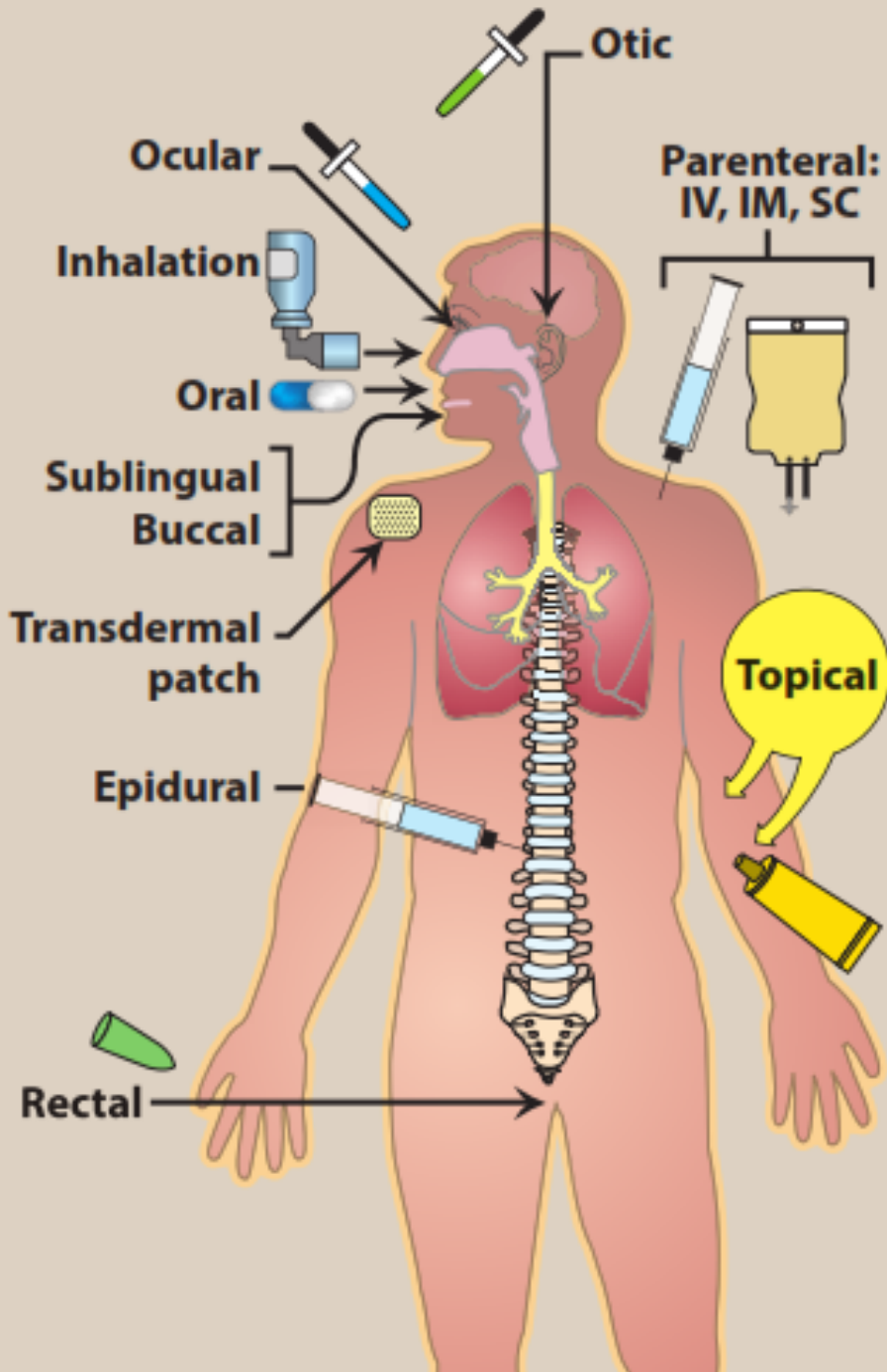
What the body does to a drug



General Concepts



Routes of Drug Administration



1-Enteral

I- Oral

a- Enteric-coated preparations

b- Extended-release preparations

II- Sublingual

2- Parenteral

I- Intravenous (IV)

II- Intramuscular (IM)

III- Subcutaneous (SC)

3- Other

I- oral inhalation

II- nasal inhalation

III- intrathecal / intraventricular

IV- topical

V- transdermal

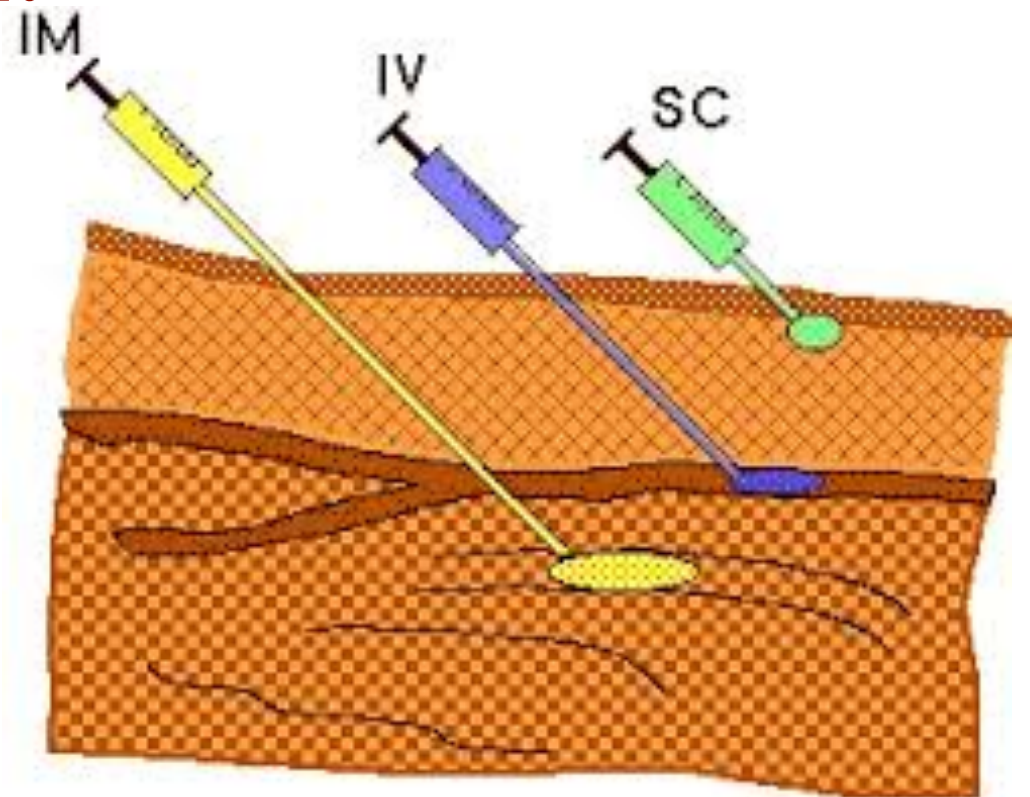
VI- rectal

Parenteral Administration:

a- Intravenous administration

b- Intramuscular administration

c- Subcutaneous administration



a- Intravenous administration

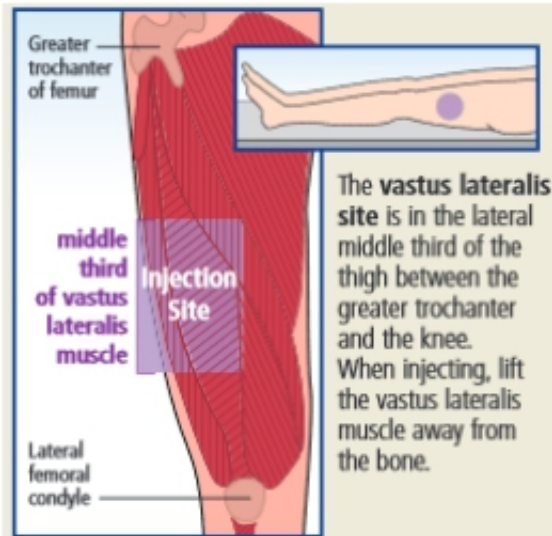


- I- Advantages
- II- Disadvantages



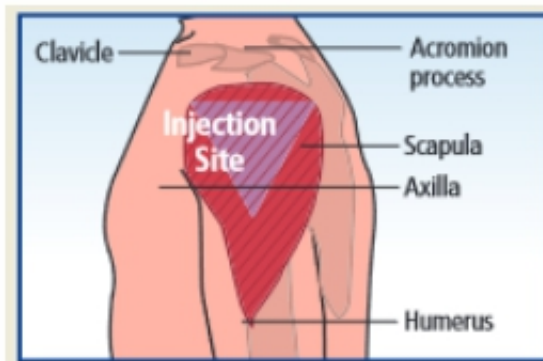
b- Intramuscular administration

Thigh



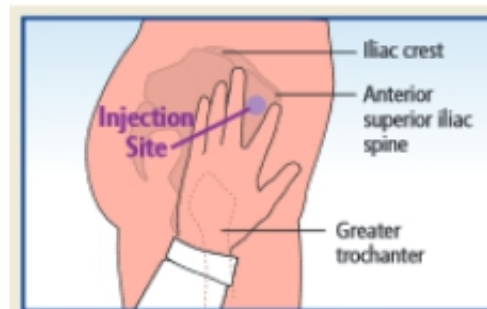
The **vastus lateralis site** is in the lateral middle third of the thigh between the greater trochanter and the knee. When injecting, lift the vastus lateralis muscle away from the bone.

Arm



The thickest part of the **deltoid muscle** is 2.5-5cm (1-3 finger breadths) below the lower edge of acromion process of the scapula over the midaxillary line.

Hip



The **ventrogluteal site**: place the palm over the greater trochanter, form a 'V,' with the middle finger toward the iliac crest and the index finger toward the anterior superior iliac spine. Inject within the center of the 'V,' below the anterior superior iliac crest.

Buttocks



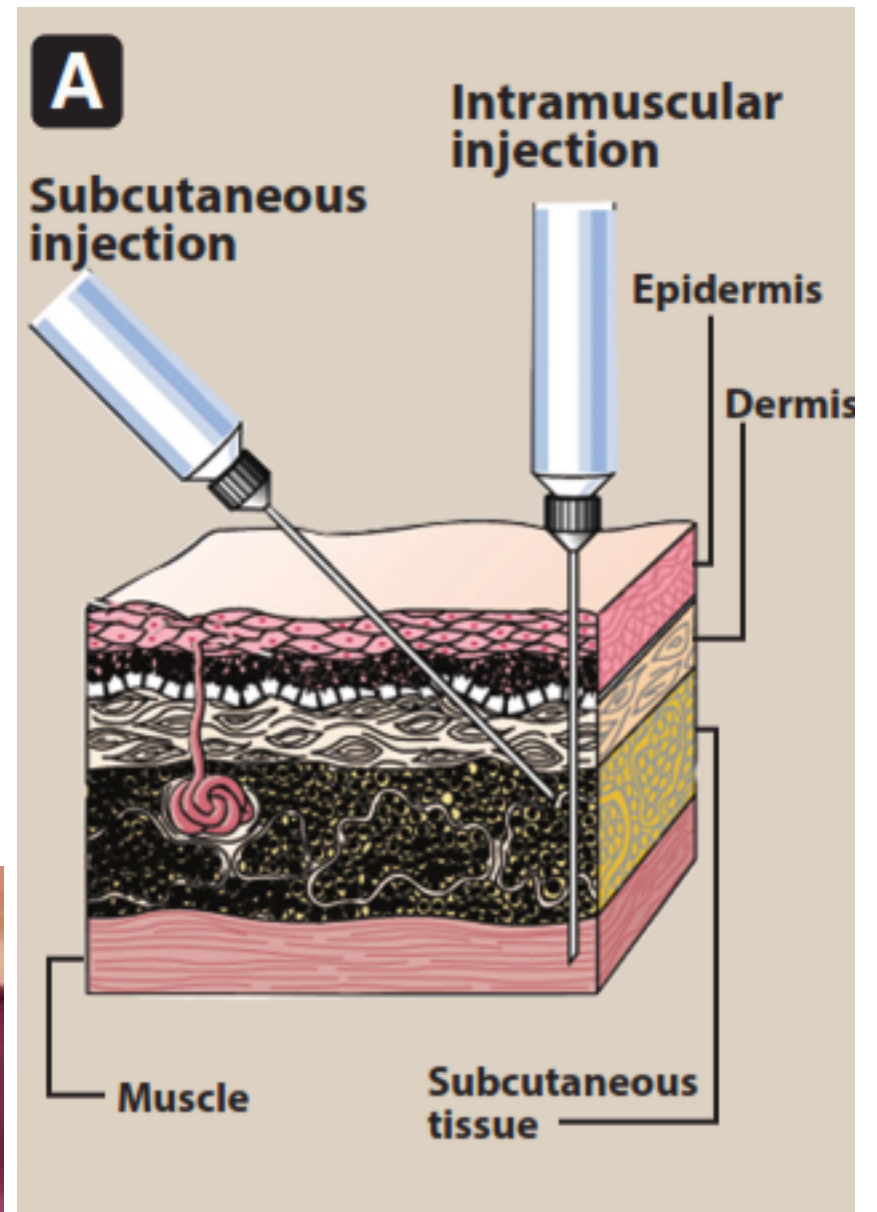
The **dorsogluteal site** is above an imaginary line between the greater trochanter and the posterior superior iliac crest. The injection is administered laterally and superior to this imaginary line.

I- aqueous solutions

II- specialized depot preparations

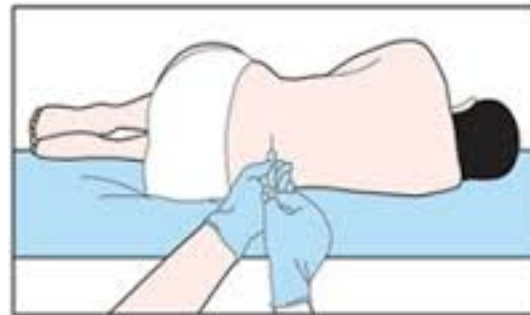
e.g medroxyprogesterone

c-Subcutaneous administration

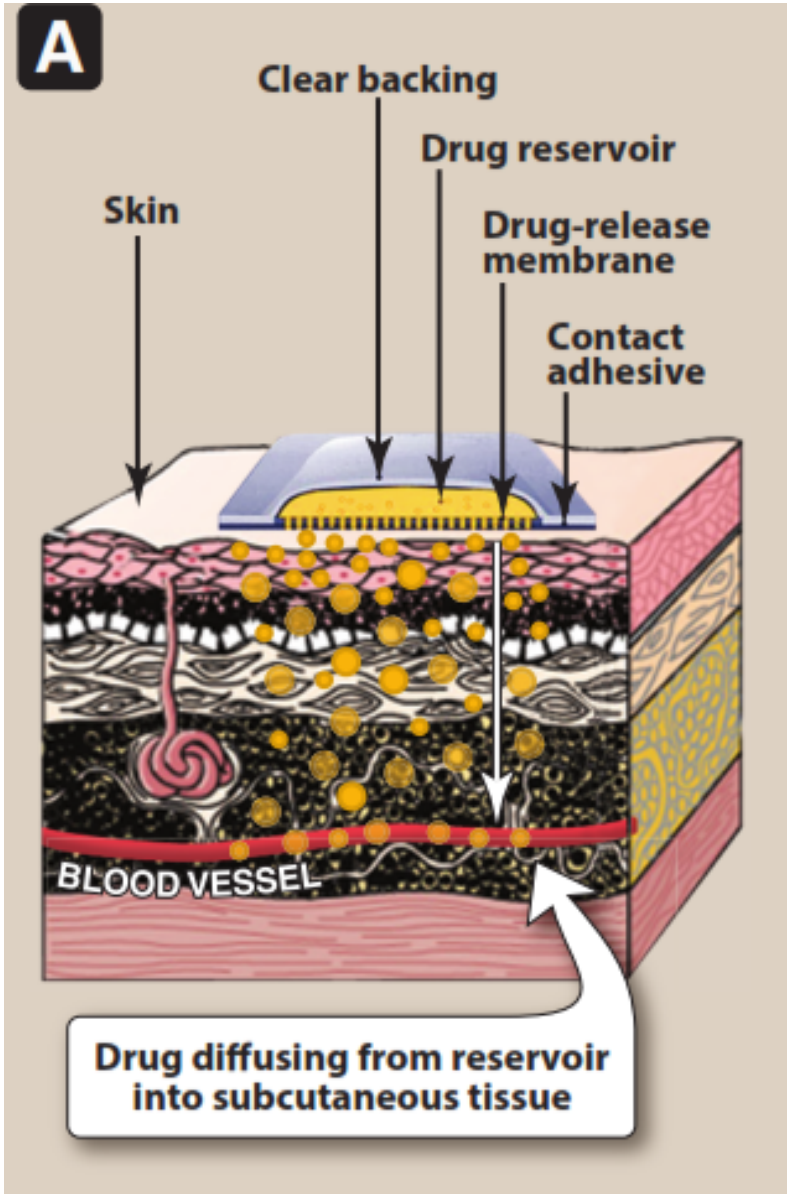


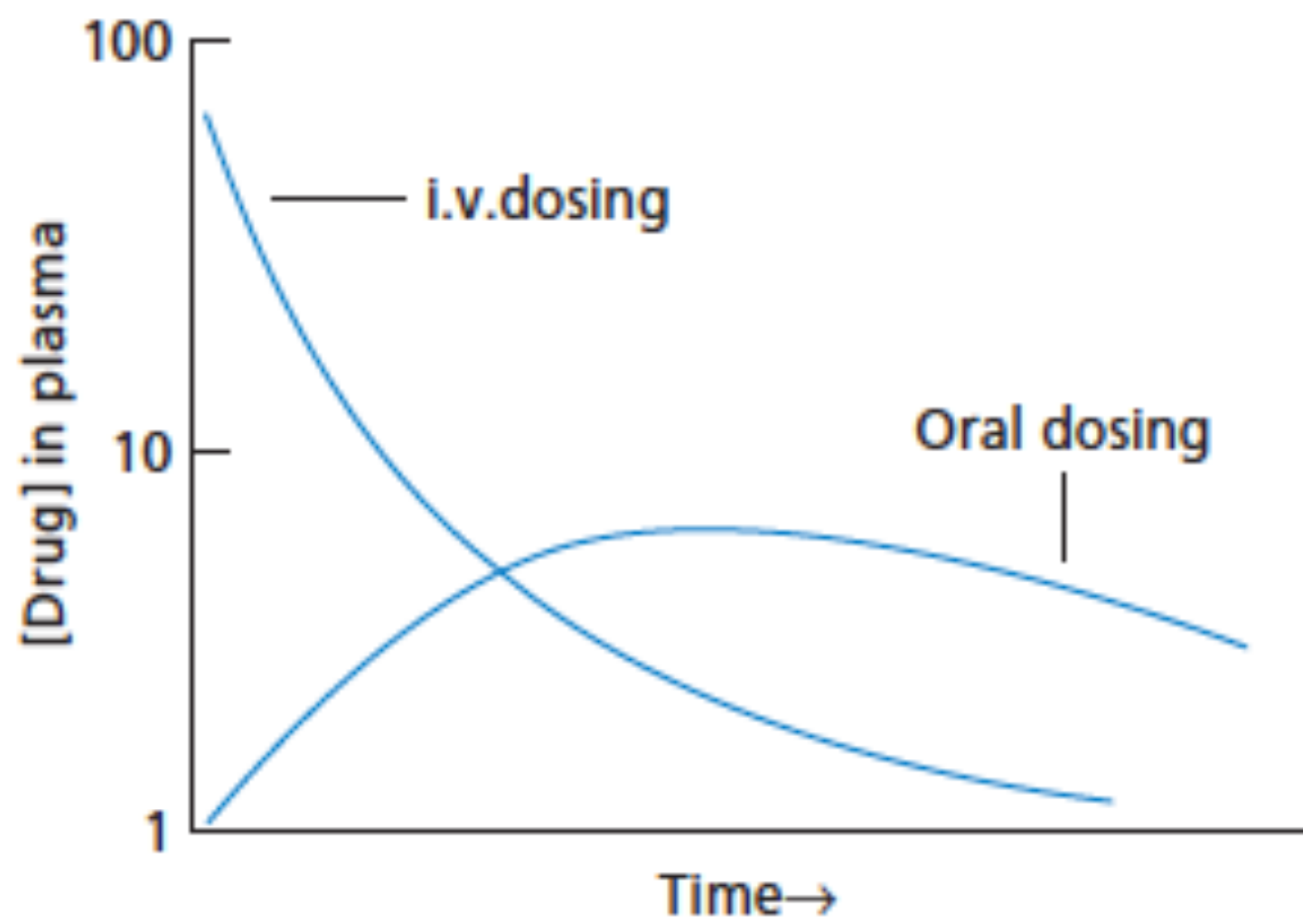
Other Routes

- *Oral inhalation*
- *Nasal Inhalation*
- *Intrathecal / intraventricular*
- *Topical*
- *Transdermal*
- *Rectal*



Transdermal Patch







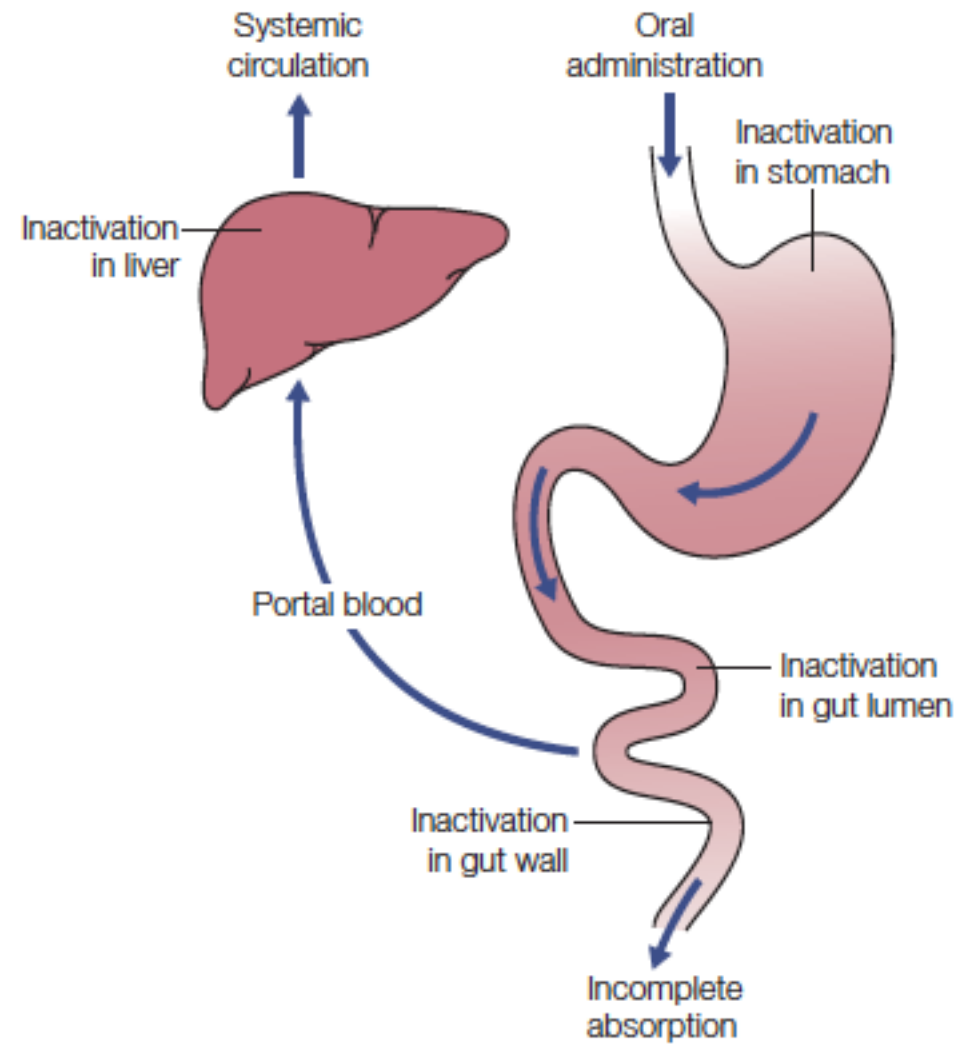
ROUTE OF ADMINISTRATION	ABSORPTION PATTERN	ADVANTAGES	DISADVANTAGES
Oral	<ul style="list-style-type: none">● Variable; affected by many factors	<ul style="list-style-type: none">● Safest and most common, convenient, and economical route of administration	<ul style="list-style-type: none">● Limited absorption of some drugs● Food may affect absorption● Patient compliance is necessary● Drugs may be metabolized before systemic absorption
Intravenous	<ul style="list-style-type: none">● Absorption not required	<ul style="list-style-type: none">● Can have immediate effects● Ideal if dosed in large volumes● Suitable for irritating substances and complex mixtures● Valuable in emergency situations● Dosage titration permissible● Ideal for high molecular weight proteins and peptide drugs	<ul style="list-style-type: none">● Unsuitable for oily substances● Bolus injection may result in adverse effects● Most substances must be slowly injected● Strict aseptic techniques needed
Subcutaneous	<ul style="list-style-type: none">● Depends on drug diluents: Aqueous solution: prompt Depot preparations: slow and sustained	<ul style="list-style-type: none">● Suitable for slow-release drugs● Ideal for some poorly soluble suspensions	<ul style="list-style-type: none">● Pain or necrosis if drug is irritating● Unsuitable for drugs administered in large volumes



ROUTE OF ADMINISTRATION	ABSORPTION PATTERN	ADVANTAGES	DISADVANTAGES
Intramuscular	<ul style="list-style-type: none">● Depends on drug diluents: Aqueous solution: prompt Depot preparations: slow and sustained	<ul style="list-style-type: none">● Suitable if drug volume is moderate● Suitable for oily vehicles and certain irritating substances● Preferable to intravenous if patient must self-administer	<ul style="list-style-type: none">● Affects certain lab tests (creatinine kinase)● Can be painful● Can cause intramuscular hemorrhage (precluded during anticoagulation therapy)
Transdermal (patch)	<ul style="list-style-type: none">● Slow and sustained	<ul style="list-style-type: none">● Bypasses the first-pass effect● Convenient and painless● Ideal for drugs that are lipophilic and have poor oral bioavailability● Ideal for drugs that are quickly eliminated from the body	<ul style="list-style-type: none">● Some patients are allergic to patches, which can cause irritation● Drug must be highly lipophilic● May cause delayed delivery of drug to pharmacological site of action● Limited to drugs that can be taken in small daily doses
Rectal	<ul style="list-style-type: none">● Erratic and variable	<ul style="list-style-type: none">● Partially bypasses first-pass effect● Bypasses destruction by stomach acid● Ideal if drug causes vomiting● Ideal in patients who are vomiting, or comatose	<ul style="list-style-type: none">● Drugs may irritate the rectal mucosa● Not a well-accepted route



ROUTE OF ADMINISTRATION	ABSORPTION PATTERN	ADVANTAGES	DISADVANTAGES
Inhalation	<ul style="list-style-type: none">● Systemic absorption may occur; this is not always desirable	<ul style="list-style-type: none">● Absorption is rapid; can have immediate effects● Ideal for gases● Effective for patients with respiratory problems● Dose can be titrated● Localized effect to target lungs: lower doses used compared to that with oral or parenteral administration● Fewer systemic side effects	<ul style="list-style-type: none">● Most addictive route (drug can enter the brain quickly)● Patient may have difficulty regulating dose● Some patients may have difficulty using inhalers
Sublingual	<ul style="list-style-type: none">● Depends on the drug: Few drugs (for example, <i>nitroglycerin</i>) have rapid, direct systemic absorption Most drugs erratically or incompletely absorbed	<ul style="list-style-type: none">● Bypasses first-pass effect● Bypasses destruction by stomach acid● Drug stability maintained because the pH of saliva relatively neutral● May cause immediate pharmacological effects	<ul style="list-style-type: none">● Limited to certain types of drugs● Limited to drugs that can be taken in small doses● May lose part of the drug dose if swallowed



Enterohepatic circulation of drugs.

