



# Pharmacodynamics1

By

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# ILOS

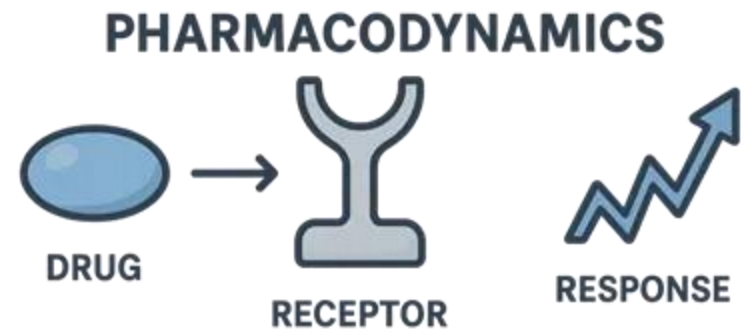


- Recognize different drug actions.
- Define receptors
- Outline different types of receptors and mention examples

# PHARMACODYNAMICS

What the drug does to the body?

1. Mechanism of action
2. Pharmacological actions

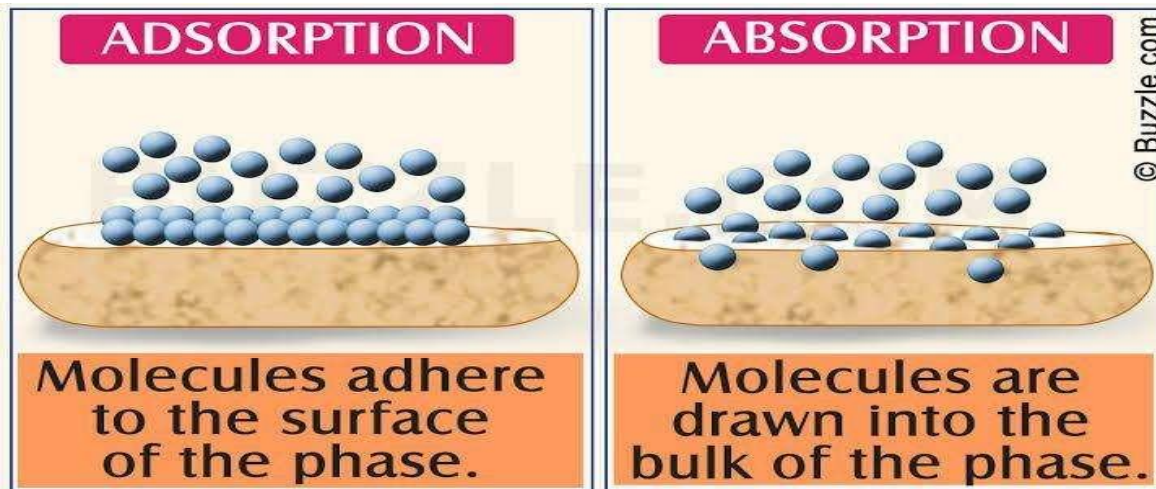


# PHARMACODYNAMICS

## \* Possible Mechanism/s of Action of Drugs:

### 1- Physical:

a- **Adsorption:** Kaolin & Activated charcoal in diarrhea.



Take care with these drugs

WHY?

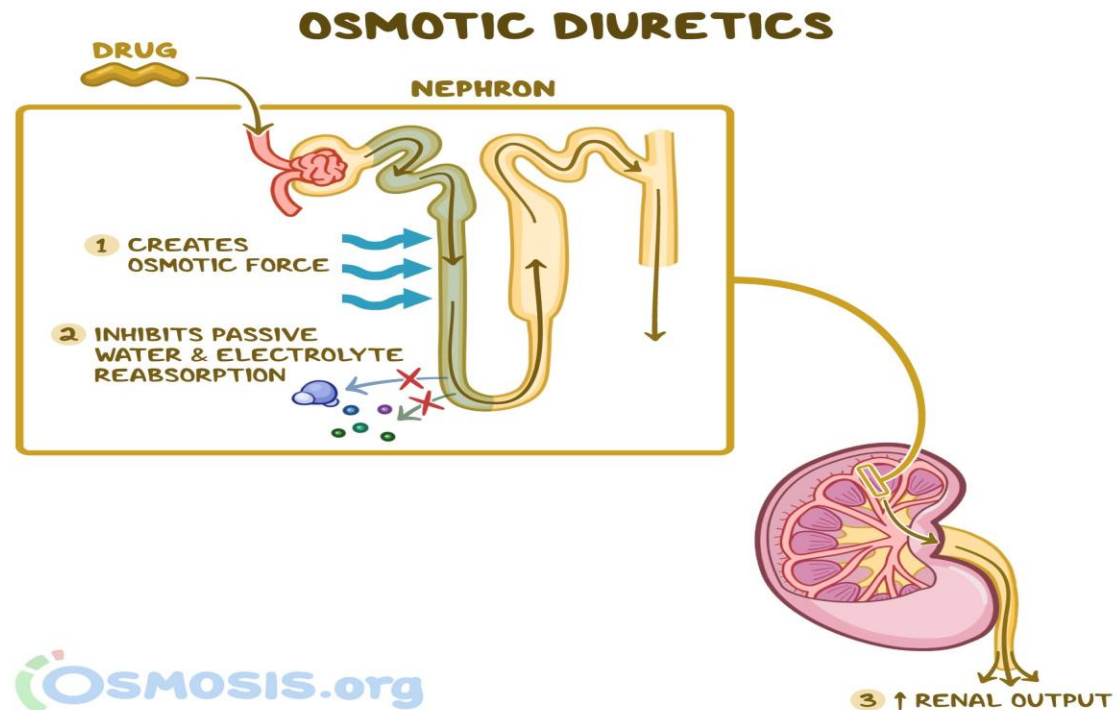
# PHARMACODYNAMICS

## \* Possible Mechanism/s of Action of Drugs:

### 1- Physical:

#### b- Osmotic:

Mannitol as a diuretic.

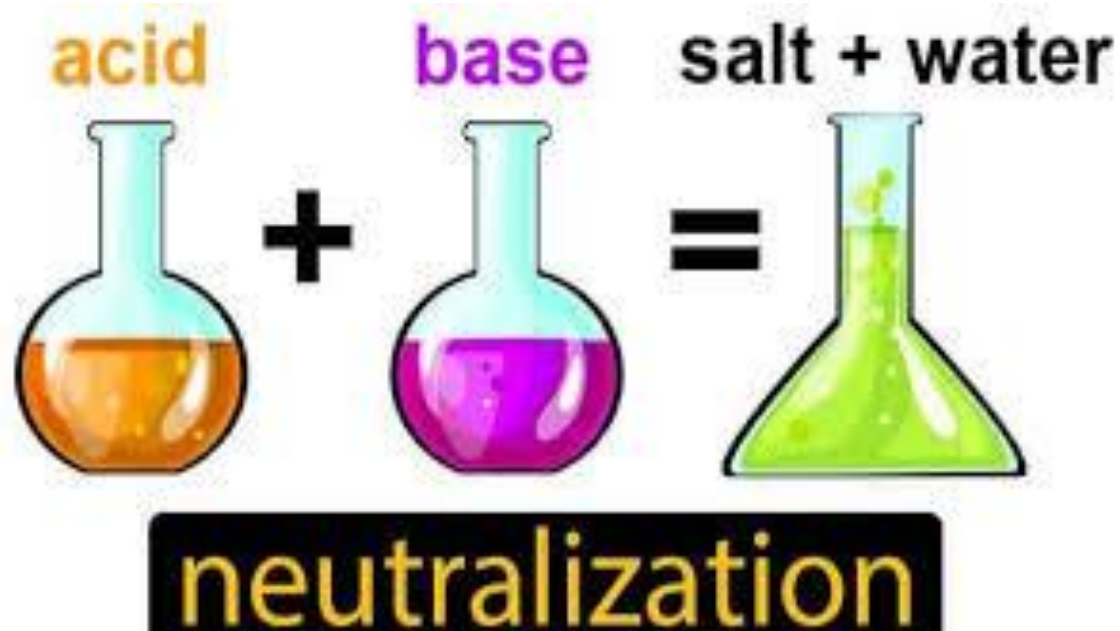


# PHARMACODYNAMICS

## \* Possible Mechanism/s of Action of Drugs:

### 2- Chemical:

#### a- Neutralization:



# PHARMACODYNAMICS

## \* Possible Mechanism/s of Action of Drugs:

### 2- Chemical:

#### a- Neutralization:

i-  $\text{NaHCO}_3$  (Antacid) +  $\text{HCl}$  (Gastric acid) in treatment of hyperacidity.

\*\*Antacids are weak bases that neutralize  $\text{HCl}$  in the stomach



# PHARMACODYNAMICS

## \* Possible Mechanism/s of Action of Drugs:

### 2- Chemical:

ii- Protamine sulfate (Basic) + Heparin (Acid) → Chemical antagonism.

- If bleeding occurs with heparin, administration of specific antidote protamine sulfate is indicated.
- Protamine is a highly basic, positively charged peptide that combines with negatively charged heparin as an ion pair to form a stable complex devoid of anticoagulant activity.



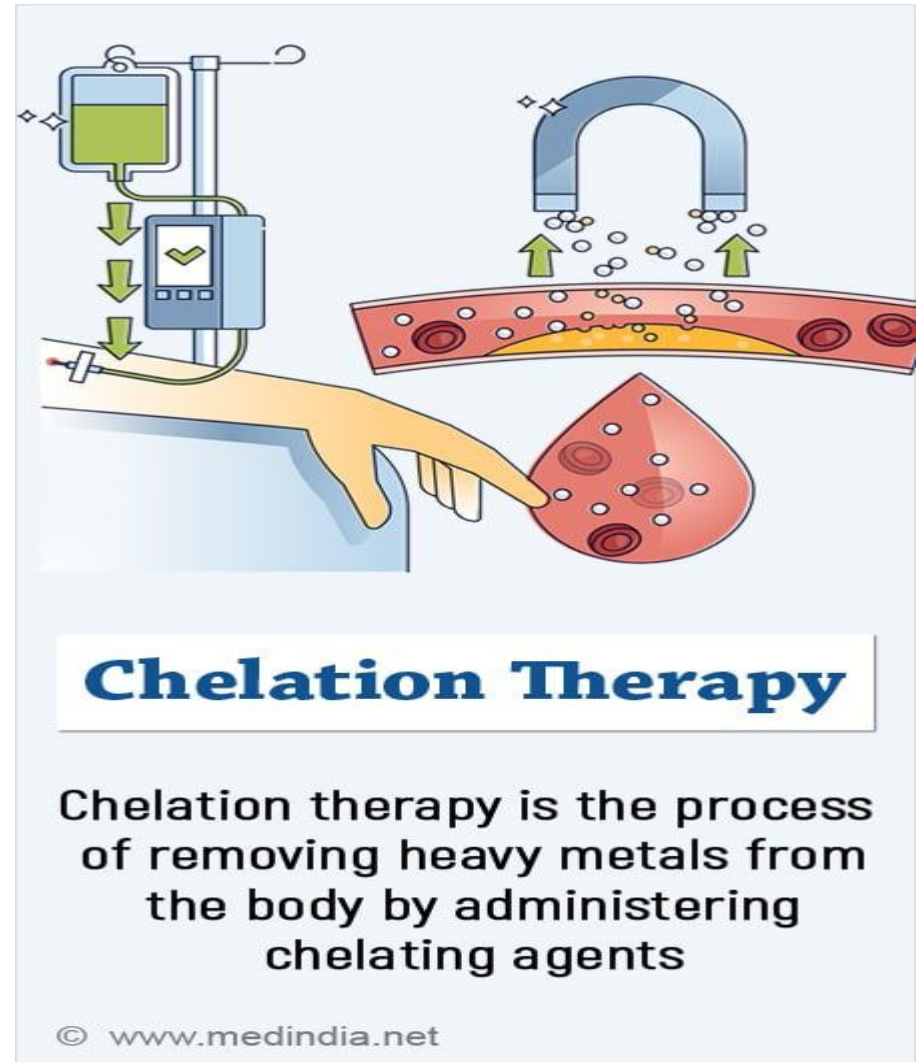
# PHARMACODYNAMICS

## \* Possible Mechanism/s of Action of Drugs:

### 2- Chemical:

#### b- Chelation:

Organic compound + Heavy metal → Non-toxic easy excreted complex e.g. Desferrioxamine for ferric iron ( $\text{Fe}^{+3}$ ).



# PHARMACODYNAMICS

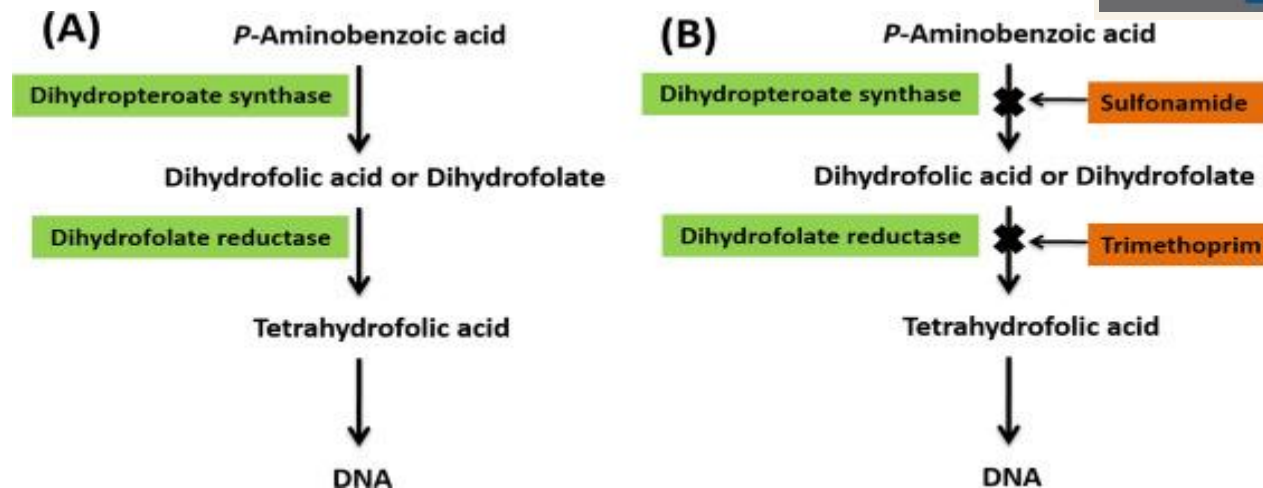
## \* Possible Mechanism/s of Action of Drugs:

### 3- Interference with Cell Division:

e.g. anti-cancer drugs

### 4- Interference with Metabolic Pathway:

**Sulfonamides** compete with PABA in bacteria leading to inhibition of synthesis of folic acid.



# PHARMACODYNAMICS

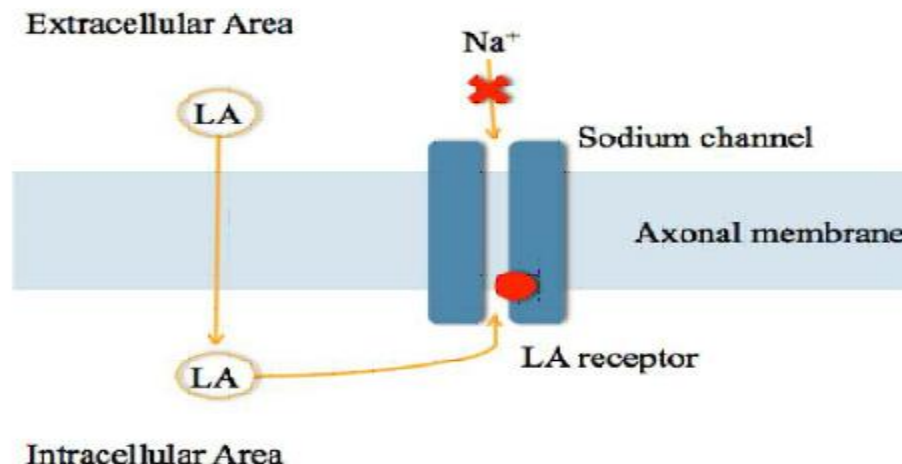
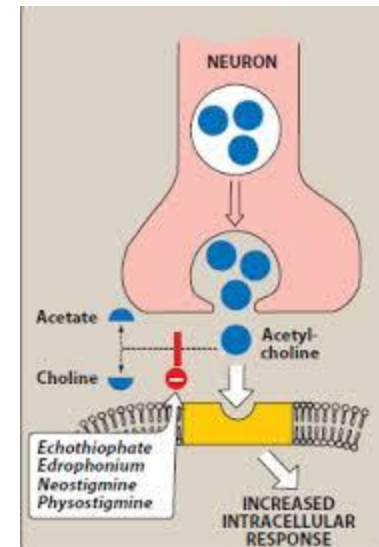
## \* Possible Mechanism/s of Action of Drugs:

### 5- Inhibition of Enzymes:

- **Physostigmine** ( $\downarrow$  Cholinesterase).

### 6- Action on Voltage Dependent Ion Channel:

**Local anesthetics** as procaine  $\rightarrow$  block Sodium ( $\text{Na}^+$ ) channels  $\rightarrow$  membrane stabilization.

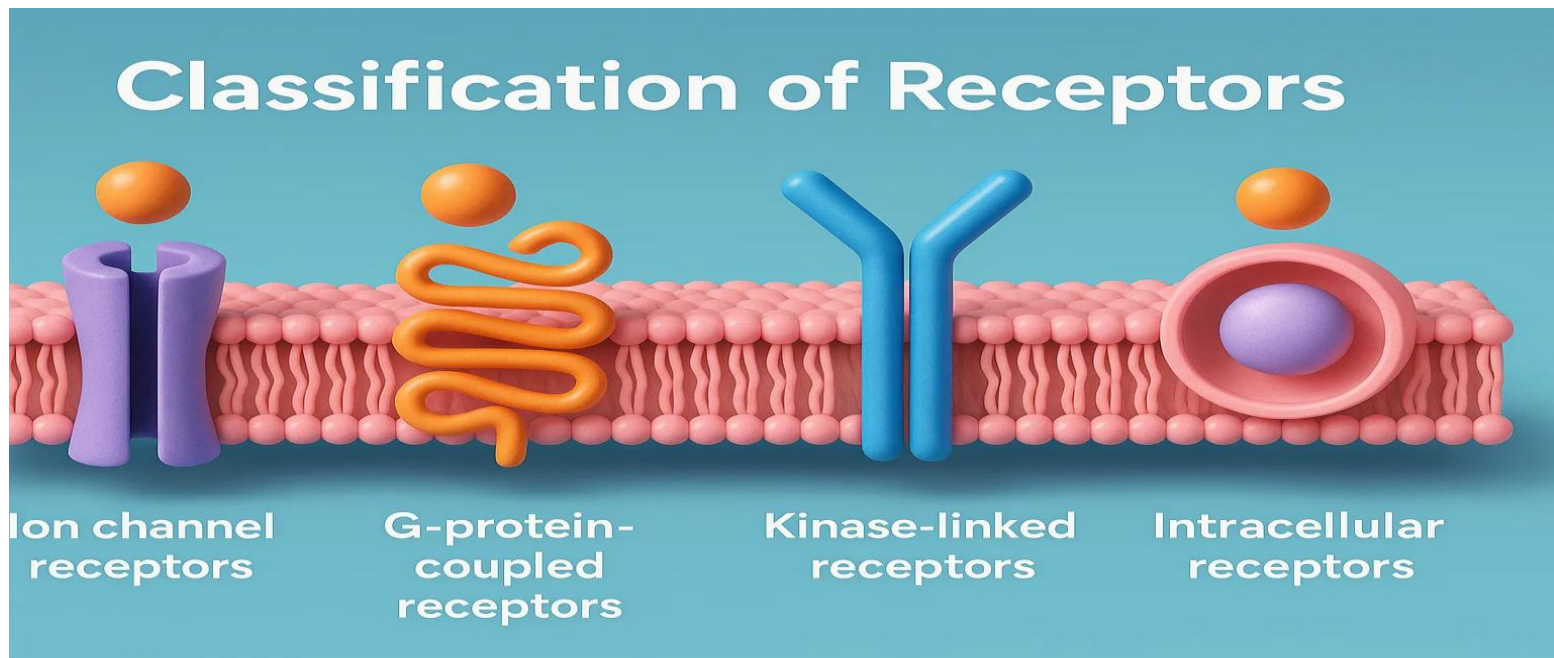


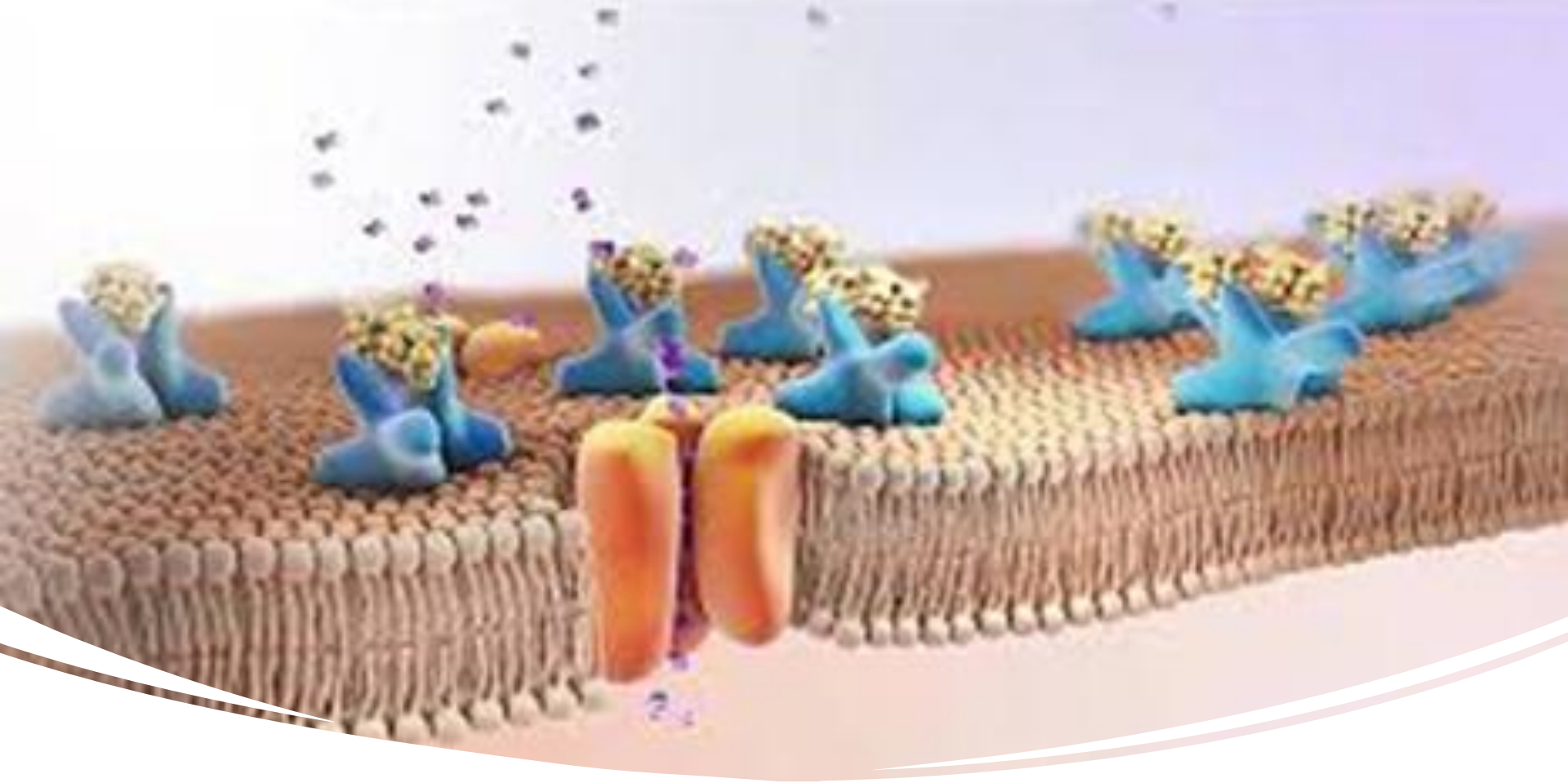
# PHARMACODYNAMICS

## \* Possible Mechanism/s of Action of Drugs:

### 7- Action on Receptors:

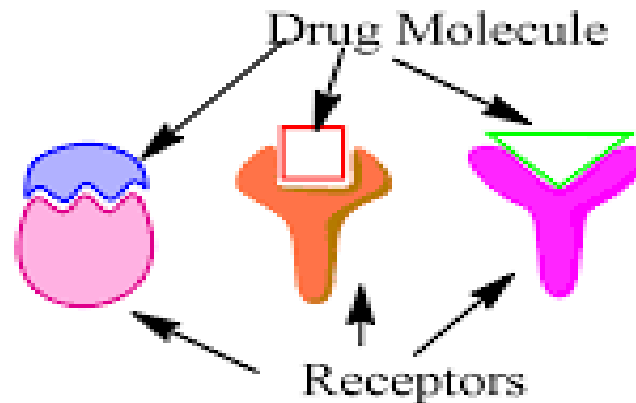
Most common mechanism of action.





- **A Receptor** is a macromolecule that reacts specifically with **a Ligand** (drug, transmitter or hormone) to produce **a biological response**.
- **The receptor may be** membrane or cytoplasmic or nuclear.

## LOCK-KEY MODEL FOR DRUG-RECEPTOR INTERACTION



1- **Affinity** = Ability of a drug to fit onto a receptor to form Drug/Receptor complex.

2- **Efficacy or Intrinsic Activity** = Ability of D/R complex to evoke a response.

3- **Ka** = Association constant with the receptor

4- **Kd** = Dissociation constant from the receptor

## NB) The Amount of Response to Drug/Receptor Complex Depends on:

### A) Occupation Theory:

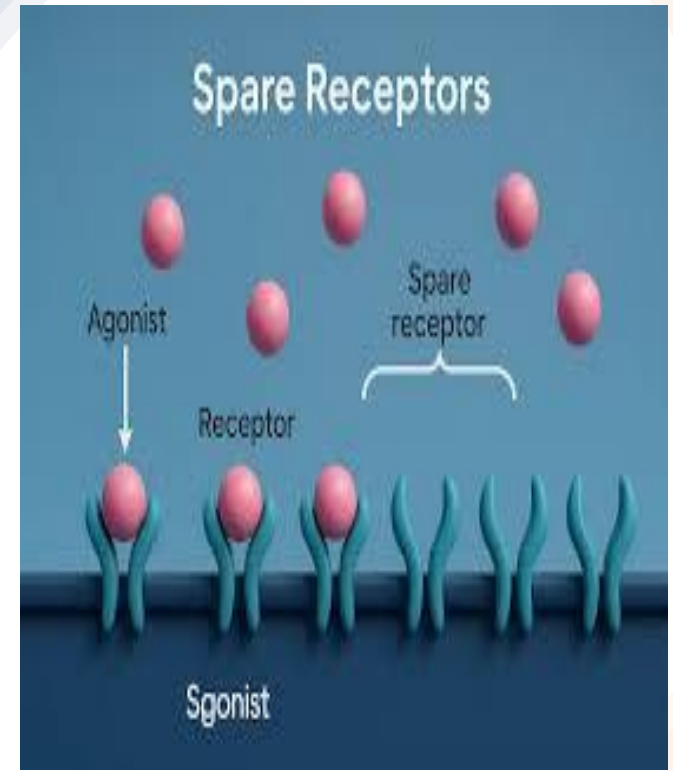
1-The amount of action  $\propto$  Number of receptors occupied by the drug.

2-When a drug produces its Maximum effect; there will be some receptors remain free = Spare receptors.

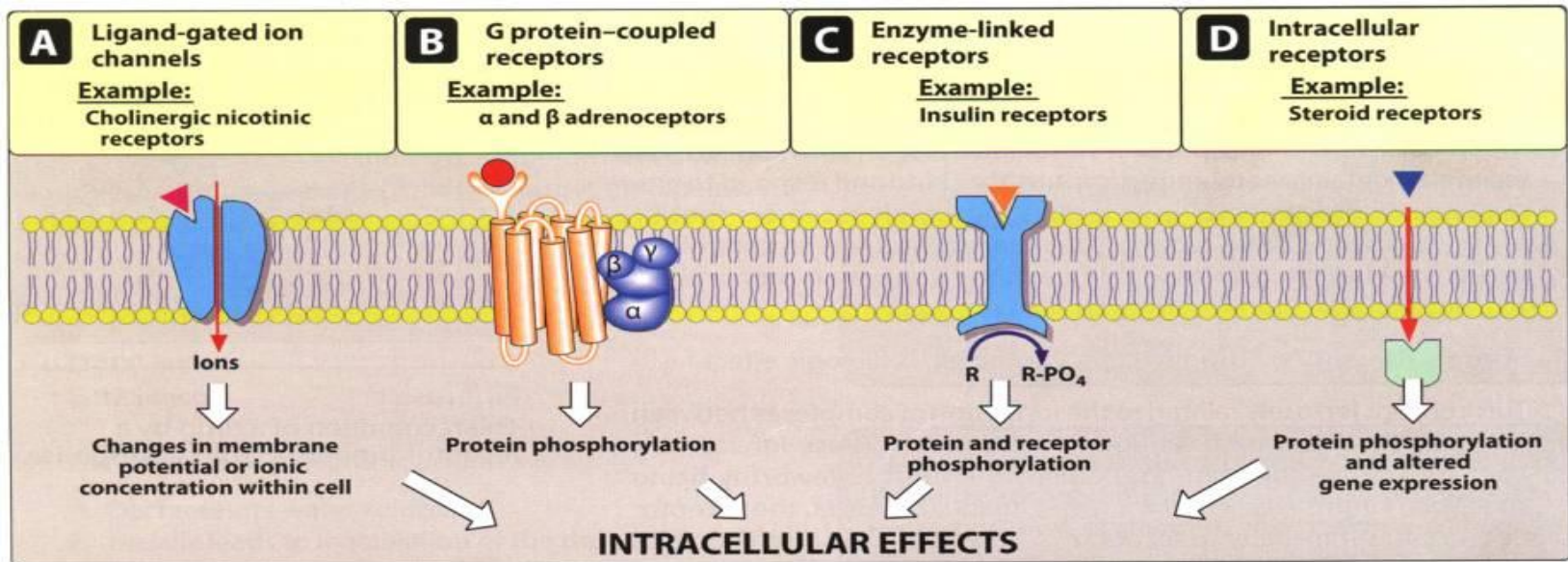
### B) Rate Theory of Paton:

1-The amount of action  $\propto$  Rates of association ( $K_a$ ) & dissociation ( $K_d$ ) of D/R complex.

2-Higher rates = Higher activity.



# Types of receptors and signal transduction mechanism



- A) Ligand binds to the **extracellular domain of a ligand-gated ion channel**.
- B) Ligand binds to a domain of a **transmembrane receptor, which is coupled to a G protein**.
- C) Ligand binds to the **extracellular domain of a receptor that activates a kinase enzyme**.
- D) Lipid-soluble ligand diffuses across the membrane to **interact with its intracellular receptor**.



# Questions



*1-Mention different mechanisms of drug action.*

*2- Discuss mechanism of action of sulphonamides.*



THANK YOU

