

Nature of drug

The background features abstract, overlapping geometric shapes in various shades of green, ranging from light lime to dark forest green. The shapes are primarily located on the right side of the frame, creating a dynamic, layered effect against the white background.

The physical nature of drugs

- ▶ **Organic** --- proteins, lipids, carbohydrates or
- ▶ **Inorganic** --- iron, lithium, Iodine
- ▶ **Physical nature determine the best route of administration**
- ▶ **Solid** at room temperature - aspirin, atropine
- ▶ **Liquid** --- Nicotine, Ethanol
- ▶ **Liquid & evaporate** ---- halothane, amyl nitrate
- ▶ **Gaseous** --- Nitrous oxide

Size of a drug molecule

- ▶ Very small (lithium ion MW 7) to very large (alteplase (t-PA) MW 59050)
- ▶ **Majority of drugs MW between 100 to 1000**
- ▶ **Route of administration &**
- ▶ **Ability to move within the body from the site of administration to site of action**
 - ▶ Very large drugs (usually proteins) directly administered into the compartment of action ---alteplase -- I/V

Aqueous & Lipid Solubility

- ▶ **Weak bases or weak acids**
- ▶ **The aqueous solubility --- degree of ionization or polarity of the molecule.**
 - ▶ Water molecules behave as dipoles & are attracted to charged molecules, forming an aqueous shell around them.
- ▶ **The lipid solubility of a molecule is inversely proportional to its charge.**

What drugs can do?

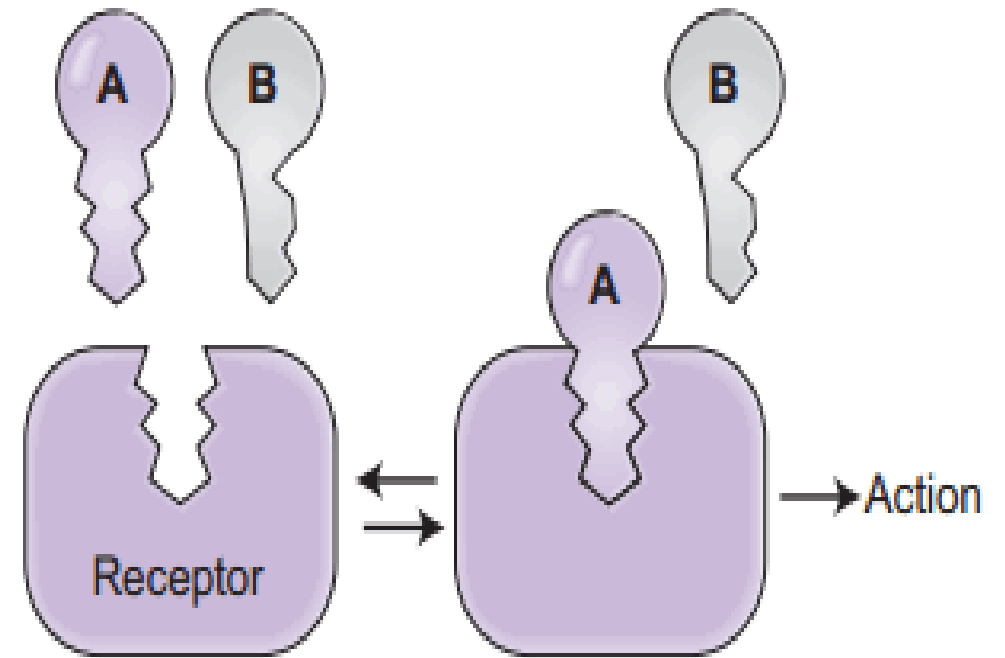
- ▶ **Drugs alter** (activate or inhibit) **the normal functions of cells and tissues in the body**
- ▶ Drugs cannot confer any new function on them

How drugs act?

- ▶ Through Specific **receptors**
- ▶ Alteration of the activity of **enzymes**
- ▶ Nonspecific **chemical or physical interactions** -- Antacids, osmotic agents, and chelators
- ▶ **Antimetabolite action** --- Drug act as nonfunctional analogue of a naturally occurring metabolite

Shape of Drug molecule

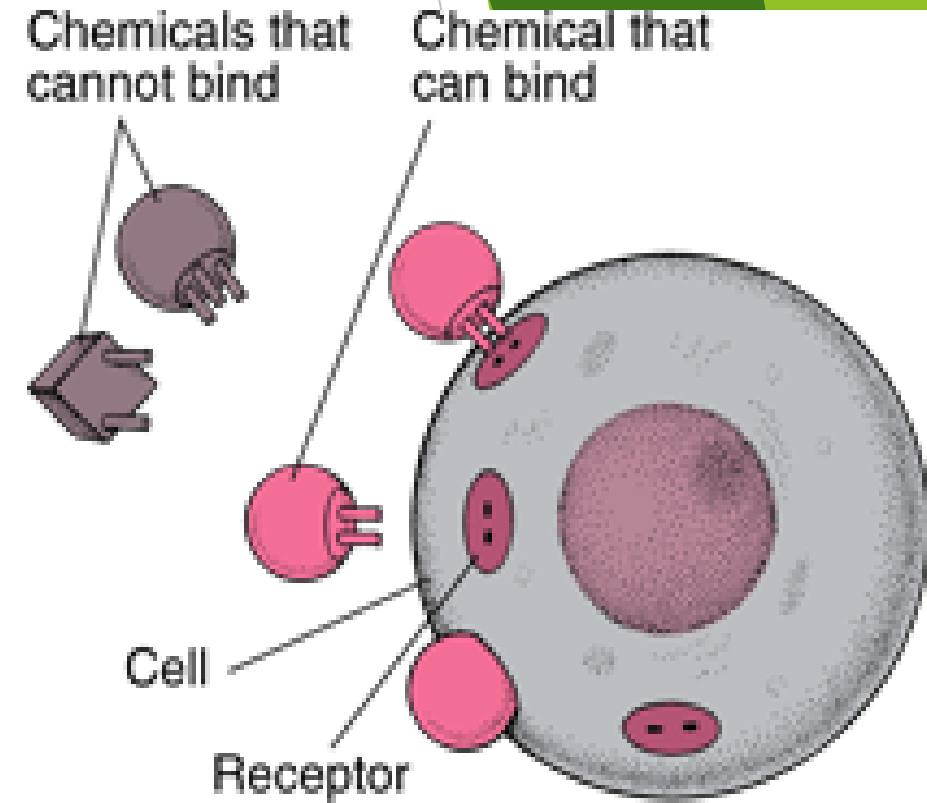
- ▶ Shape --- permit binding to its receptor site
- ▶ Drug reacts with a regulator molecule called as receptor to show its effects



Drug A binds to receptor
Drug B cannot bind to receptor

What are receptors?

Receptors are **Protein molecules** whose function is to **recognize & respond to endogenous chemical signals**

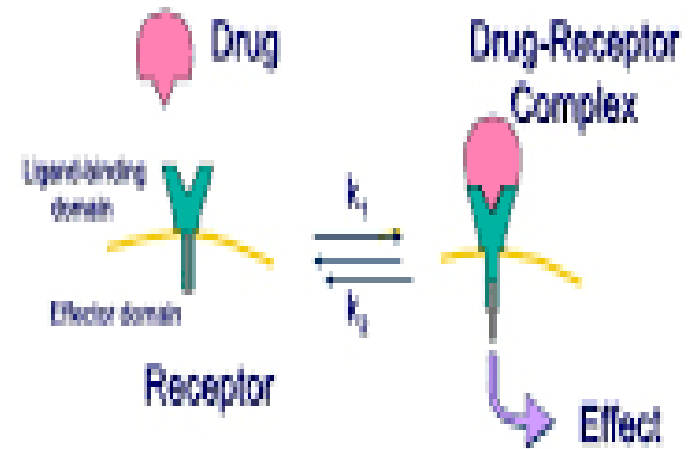


Drug + Receptor \leftrightarrow
drug-receptor
complex \rightarrow **Effector**
molecule \rightarrow
biological effects

- ▶ Other macromolecules with which drugs interact to produce their effects are known as **drug targets**

Drug(Ligand) \leftrightarrow Receptor interaction

Langley (1878)



How drugs bind with the receptors?

▶ Drugs interact with receptors by means of chemical forces or bonds

▶ **Covalent**

▶ **Electrostatic**

▶ **Hydrophobic**

Covalent

(Very strong , may be irreversible)

- ▶ **Phenoxybenzamine & α adrenergic receptors**
- ▶ Aspirin whose acetyl group forms covalent bond with **cyclooxygenase of platelets.**
- ▶ **DNA-alkylating agents** in cancer chemotherapy

Electrostatic & Hydrophobic bonds

▶ Electrostatic

- ▶ Weaker & more **common** than covalent bonding
- ▶ Due to linkages between **ionic molecules & hydrogen bonds**
- ▶ Force varies from relatively strong linkage to very weak Van der Waal forces

▶ Hydrophobic

- ▶ Quite weak, between **highly lipid soluble drugs with the lipids of cell membrane**
- ▶ Due to interaction of the drug with the internal walls of the receptor pockets

Chirality (stereoisomerism)

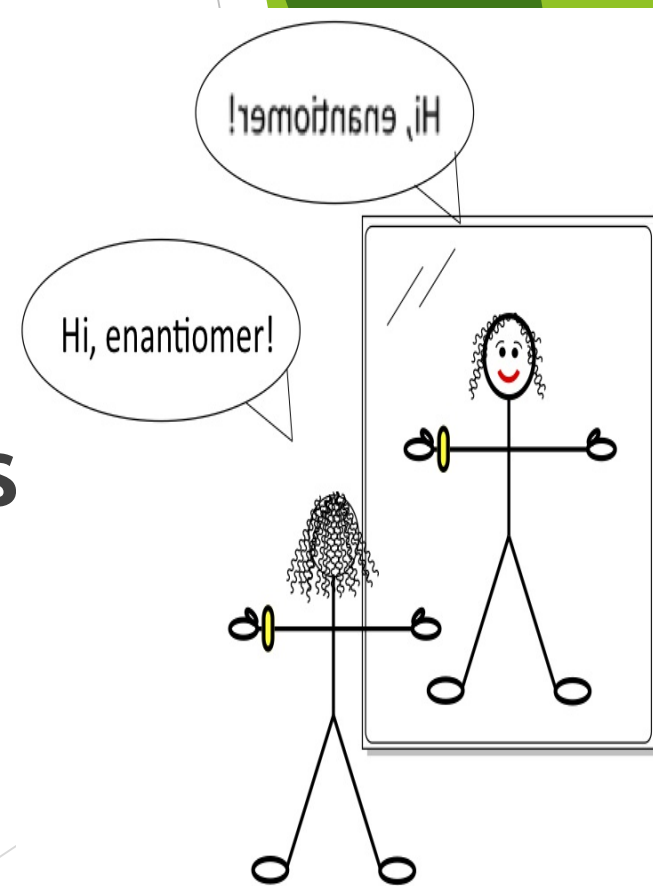
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What is the role of the shape of the drug molecule?

- ▶ It permit binding to its receptor site
- ▶ Drug's shape is complimentary to the receptor site like a key is complimentary to a lock
- ▶ **Shape and charge to 'fit' to only one type of receptors**

Chirality (stereoisomerism)

- A single chiral molecule --- two enantiomers
 - ▶ > than $\frac{1}{2}$ of all useful drugs are chiral molecules ----They exist as enantiomeric pairs
- ▶ Drugs with two asymmetric centers have four diastereomers
 - ▶ Ephedrine, a sympathomimetic drug
 - ▶ Labetalol, an α & β receptor blocking drug



- ▶ Active isomers ----- About 45% of the chiral drugs used clinically are active isomers
- ▶ **Racemic mixture** --- The rest are available only as racemic mixtures
 - ▶ More active enantiomer
 - ▶ Inactive

What qualities of the drugs are affected by Chirality (stereoisomerism)?

▶ **Potency**

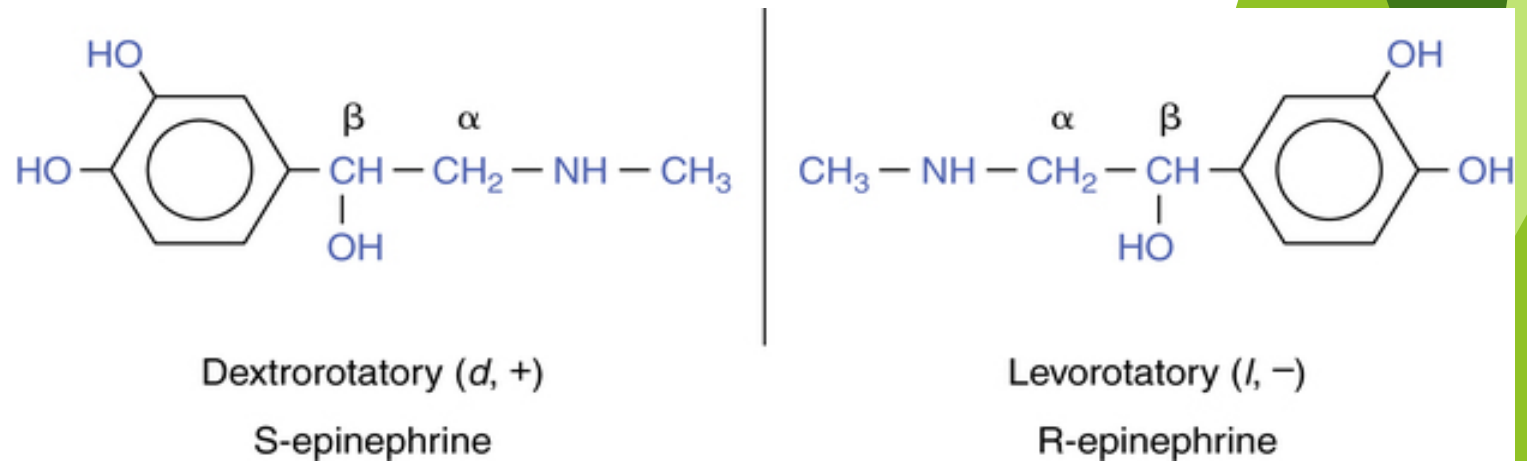
- ▶ One of the enantiomers may be much **more effective** than its mirror image enantiomer, reflecting a **better fit to the receptor site**

▶ **Side effects &**

▶ **Duration of action**

Examples -- A single chiral molecule --- two enantiomers

- The levoisomer *s* (-) of adrenaline/epinephrine is ten times more potent than its dextroisomer
- S(+) enantiomer of methacholine, a parasympathomimetic drug, is over 250 times more potent than its mirror image enantiomer.



Examples -- A single chiral molecule --- two enantiomers

▶ Carvedilol --

- ▶ S(-) isomer is a potent β receptor blocker
- ▶ R(+) isomer is 100 fold weaker at β receptor
- ▶ Equipotent as α receptor blockers

▶ Ketamine

- ▶ The (+) enantiomer is a potent anesthetic & is less toxic than the (-) enantiomer



Stereoisomerism and receptor binding

Receptor site is like a glove into which the hand (the drug molecule) fits to bring its effects
If receptor site is to be like a glove.
“**left oriented**” drug will be more effective in binding to a left-hand receptor than will be its “right oriented” enantiomer

