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# **Sympatholytic drugs;**

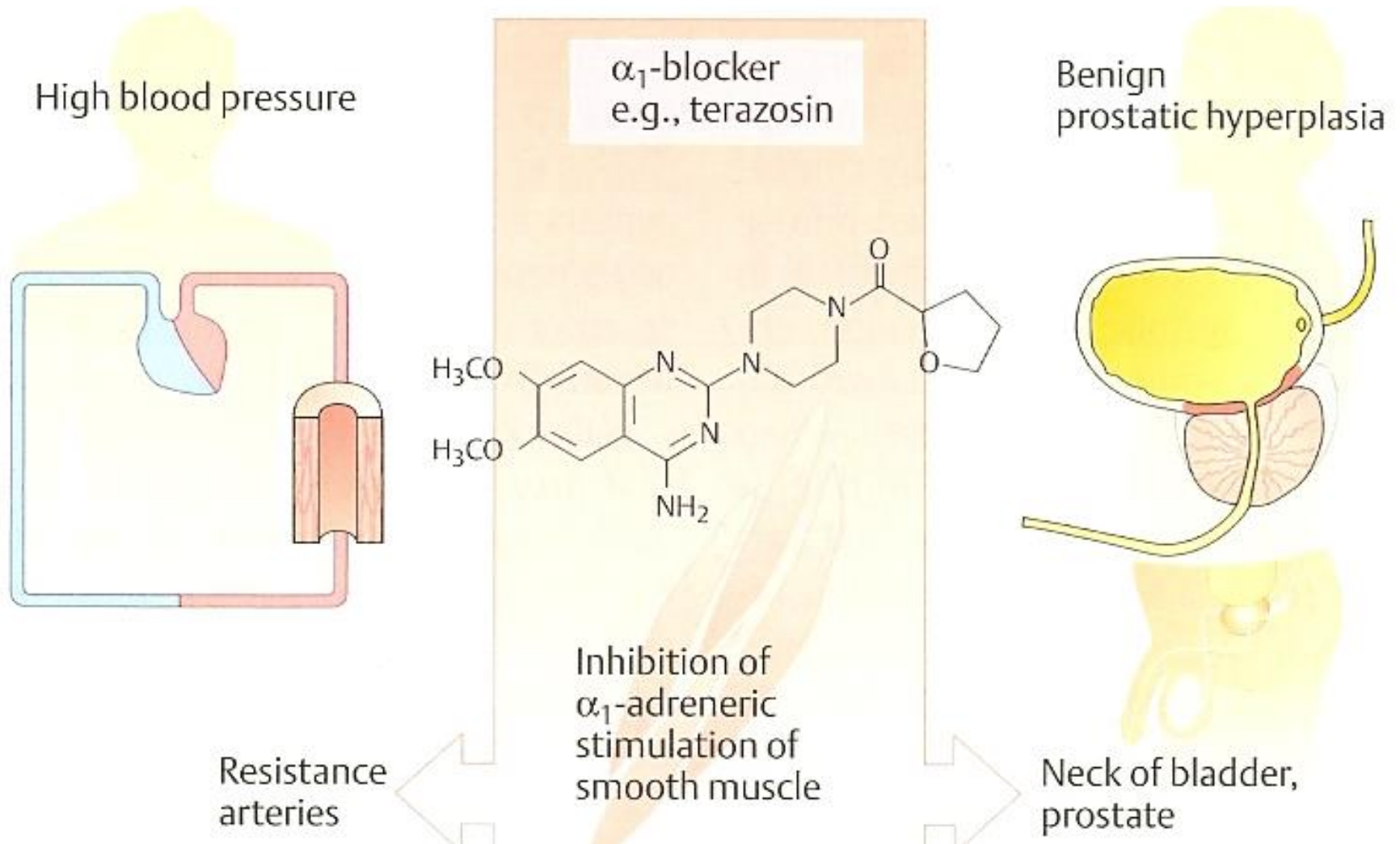
- **Adrenergic Blockers.**
- **Adrenergic antagonists.**
- **Adrenergic receptor antagonists.**
  - **Adrenoceptor antagonists.**

**by**

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# Clinical uses of $\alpha$ -blockers;

## . Indications for $\alpha_1$ -sympatholytics



# Clinical uses of $\alpha$ blockers;

- **Treatment of Hypertension.**
- **Benign prostatic hypertrophy (BPH).**
- **Pheochromocytoma.**
- **Peripheral vascular disease.**
- **Reversal of intense local vasoconstriction.**
- **Erectile dysfunction.**

# Treatment of Hypertension;

- **Prazosin, doxazosin and terazosin;**
  - Are used as **add-on drugs** in **difficult-to-treat** hypertension.
  - **Severe hypertension** in case of **overdose with indirect sympathomimetics** such as cocaine, amphetamines or phenylpropanolamine.
  - **Rebound hypertension** on sudden cessation of clonidine.
- An additive antihypertensive effect occurs when given with either a **diuretic** or a  **$\beta$  blocker**.
- **First dose hypotensive response;**
  - An exaggerated orthostatic hypotensive response to the first dose of  $\alpha_1$  selective agents in some patients.
  - The first dose is usually small and taken before going to bed.

# Treatment of Pheochromocytoma;

- **Phenoxybenzamine** (irreversible  $\alpha$  blocker);
  - in preparation for surgery,
  - in chronic treatment of inoperable or metastatic tumour.
- **Reversible or irreversible  $\alpha$  blocker?**
  - Phenoxybenzamine /Phentolamine.
  - In the treatment of pheochromocytoma a massive release of catecholamines from the tumour may overcome a reversible block.
- **$\beta$  receptor antagonists may be required after alpha antagonists.**
- **Nitroprusside** --- short duration of action, given in infusion and its dose can be readily titrated.
- **Calcium channel blockers.**
- **Phenoxybenzamine other uses;**
  - **Carcinoid tumour** -- it has serotonin blocking effects.
  - **Mastocytosis** – it has  $H_1$  antihistamine effects.



- **Benign prostatic hypertrophy;**
  - Tamsulosin, Alfuzosin.
    - selective  $\alpha_{1A}$  –receptor antagonists.
  - $\alpha_1$  antagonists – prazosin, doxazosin.
- **Peripheral vascular disease like Raynaud's phenomenon;**
  - Efficacy not well documented.
  - Phentolamine, prazosin.
  - Calcium channel blockers may be preferred.
- **Reversal of Local vasoconstriction;**
  - **Phentolamine is** infiltrated into ischemic tissue to reverse intense local vasoconstriction in **accidental local infiltration of potent alpha agonist such as NE.**

## • **Erectile dysfunction;**

- **Phentolamine or yohimbine** by direct injection to cause penile erection in men.
- used in combination with a nonspecific vasodilator papaverine.
- Long term ---fibrotic reaction.
- Prostaglandins, **Sildenafil**, a cyclic GMP **phosphodiesterase inhibitor** and apomorphine are now preferred.

## **$\alpha_2$ selective antagonists –Yohimbine ( $\alpha_2 \gg \alpha_1$ )** (Little clinical usefulness)

- Orthostatic hypotension ---  $\uparrow$  NE release.
- Male erectile dysfunction.
- can reverse the antihypertensive effects of an  $\alpha_2$  agonist such as clonidine.



# Adverse effects;

- **Postural hypotension.**
- **Reflex tachycardia.**
  - It is more marked with non-selective agents (Phenoxybenzamine & Phentolamine) and  $\alpha_2$  blockers.
  - It is less common and less severe with  $\alpha_1$  selective blockers.
  - The agents that also block  $\alpha_2$  presynaptic receptors augment release of NE and will further stimulate  $\beta$  receptors in the heart.
- **Tendency to retain sodium and fluid.**
- **Male sexual dysfunction --- Inhibit ejaculate** (more marked with phenoxybenzamine & phentolamine)
- **Dizziness, a lack of energy.**

# Tachycardia with $\alpha$ blockers;

- Why tachycardia is more marked with  $\alpha_2$  blockers & nonselective agents (Phenoxybenzamine & Phentolamine)? & It is less common & less severe with  $\alpha_1$  selective blockers?
- **The agents that block  $\alpha_2$  presynaptic receptors in the heart augment release of NE and will further stimulate  $\beta$  receptors in the heart.**
  - In patient with coronary disease angina may be precipitated by the tachycardia.

# Antagonism

## Phentolamine

- **Reversible.**
- **Competitive antagonist**, dissociate from the receptors & the block can be surmounted with sufficient high concentration of agonists.
- **Short acting.**

## Phenoxybenzamine

- **Irreversible.**
- Binds **covalently** to  $\alpha$  receptors, do not dissociate and cannot be surmounted.
- **Long acting.**

A landscape photograph featuring rolling green hills in the foreground and middle ground. The foreground is dominated by a field of bright yellow flowers, likely rapeseed or mustard. The sky is a deep blue, filled with soft, white, wispy clouds. The overall scene is bright and cheerful.

**Thank You**