

# PHARMACODYNAMICS I

## MECHANISMS OF DRUG ACTION

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# Mechanisms of Drug action

By the end of this lecture, you should:

- Identify different targets of drug action
- Differentiate between their patterns of action; agonism versus antagonism
- Elaborate on drug binding to receptors



# What is Pharmacodynamics?



- Pharmacodynamics is a branch of pharmacology that deals with the study of the biochemical and physiological effects of drugs and their mechanisms of action.

# What are the mechanisms of drug action?



Drugs can produce their actions by:

- 1) Binding with biomolecules (Receptor-mediated mechanisms):
  - Biomolecules = Targets=Receptors
  - Mostly protein in nature (protein target).
- 2) Non receptor-mediated mechanisms Physiochemical properties of drugs.

# What are the mechanisms of drug action?



Drugs can produce their actions by:

- ▣ Binding with biomolecules (Receptor-mediated mechanisms):

Protein targets for drug binding

- Physiological receptors
- Enzymes
- Ion channels
- Carriers
- Structural protein

# What are targets for drug binding ?



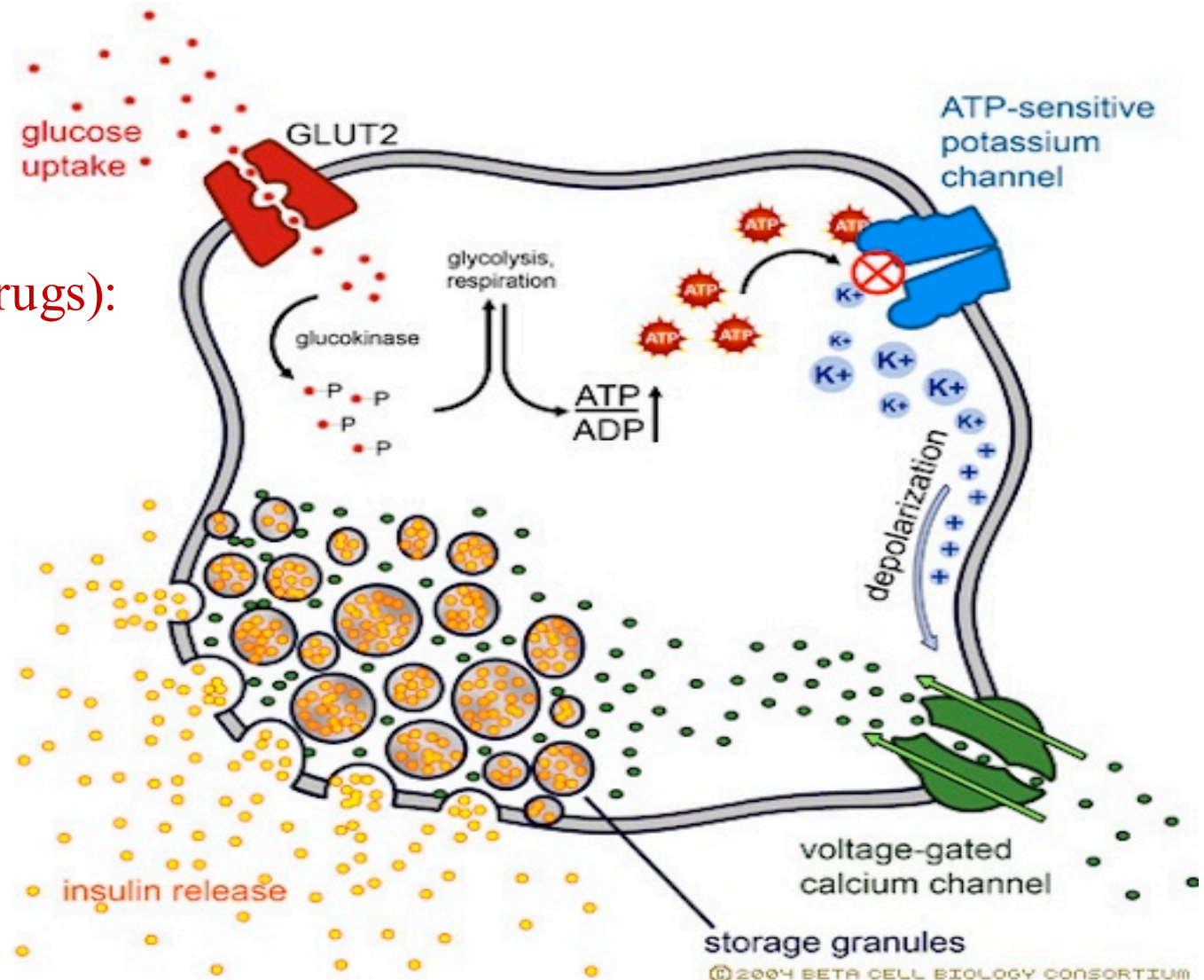
## Ion channels

- e.g. Sulfonylurea drugs (antidiabetic drugs): block  $K^+$  outflux via the K channels in pancreatic beta cells resulting in opening of calcium channels and insulin secretion.

# What are targets for drug binding ?

## Ion channels

- e.g. Sulfonylurea drugs (antidiabetic drugs):



# What are targets for drug binding ?



## Carrier molecules

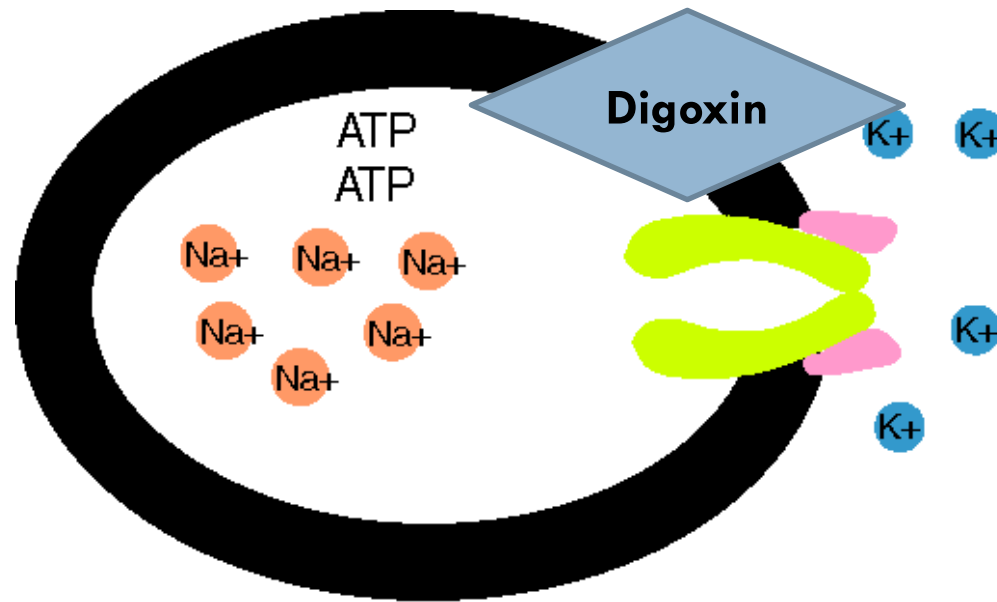
- The drug binds to such molecules altering their transport ability
- Responsible for transport of ions and small organic molecules between intracellular compartments, through cell membranes or in extracellular fluids.
- e.g.,  $\text{Na}^+, \text{K}^+$ -ATPase inhibitor



# What are targets for drug binding ?

## Carrier molecules

- **Digoxin:** blocks Na efflux via Na pump; used in treatment of heart failure.



# What are targets for drug binding ?



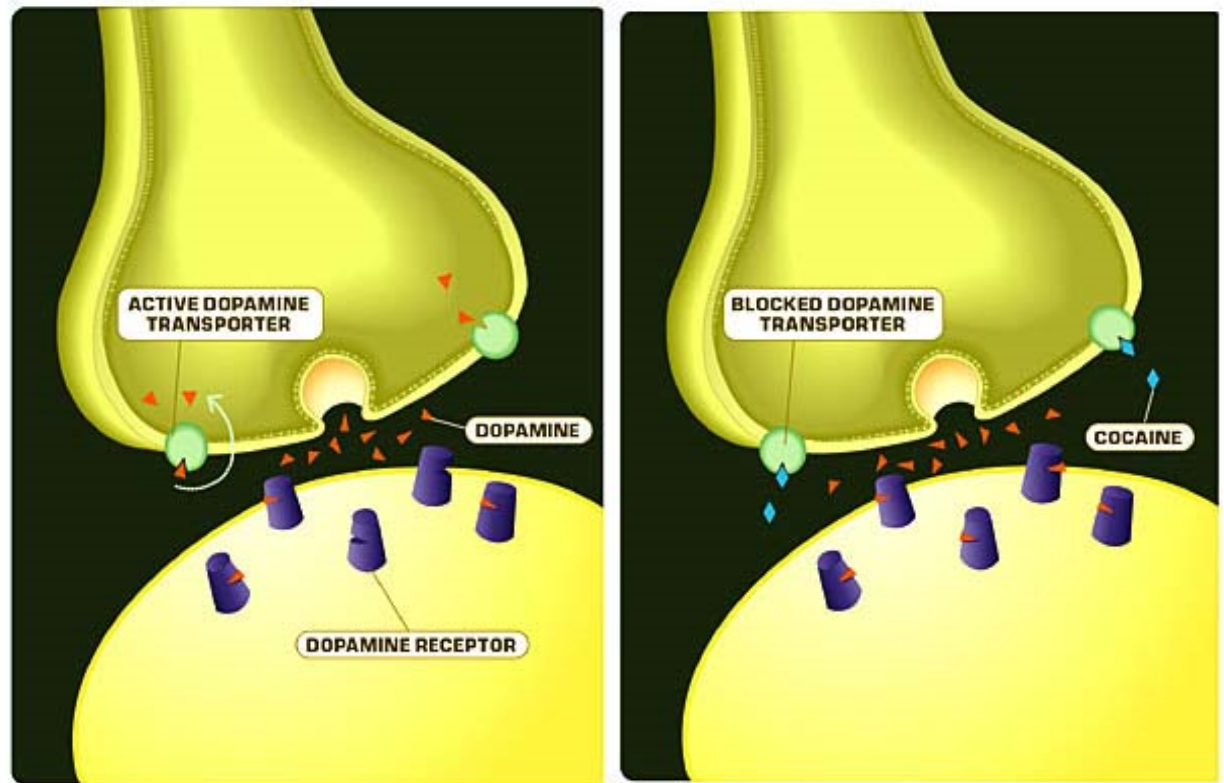
## Carrier molecules

- **Cocaine:** blocks transport or reuptake of catecholamines (dopamine) at synaptic cleft
- The dopamine transporter can no longer perform its reuptake function, and thus dopamine accumulates in the synaptic cleft.
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# What are targets for drug binding ?

## Carrier molecules

### □ Effect of cocaine



# What are targets for drug binding ?

## Structural proteins

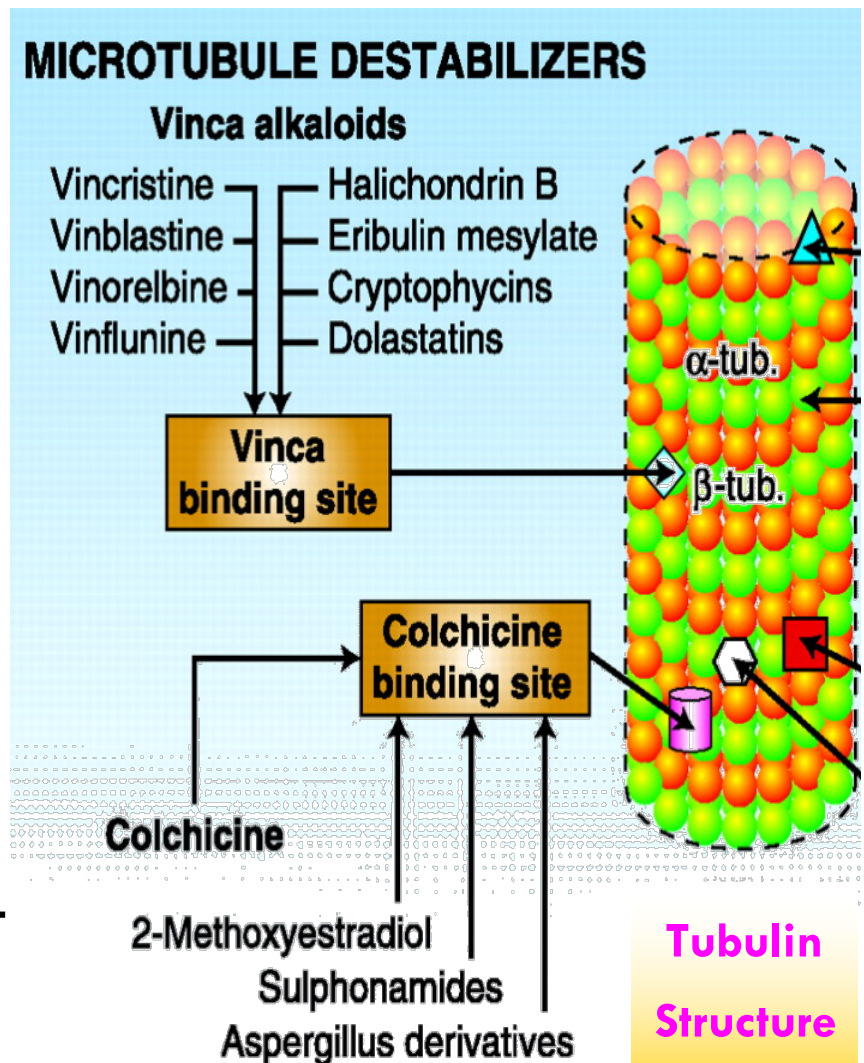
□ e.g. tubulin is target for:

□ Vincristine

■ anticancer agent

□ Colchicine

■ used in treatment of gout



# Drug-Receptor Interaction



- **Binding Forces between drugs and receptors**
  - ▣ Ionic bond.
  - ▣ Van-Dar-Waal.
  - ▣ Hydrogen bond.
  - ▣ Covalent bond.

# Drug-Receptor Interaction

## □ Affinity

Ability of a drug to combine with the receptor.



## □ Efficacy (Intrinsic Activity)

▣ Capacity of a drug receptor complex (D-R) to produce an action.

▣ is the maximal response produced by a drug (**E max**).

# Drug-Receptor Interaction

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- **Agonist**

is a drug that combines with receptor and elicit a response (has affinity and efficacy).

- **Antagonist**

is a drug that combines with a receptor without producing responses. It blocks the action of the agonist (has affinity but no or zero efficacy).

e.g. atropine

# Drug-Receptor Interaction

## Agonist and Antagonist





# Drug-Receptor Interaction



- **Agonist**

  - Full agonist.

  - Partial agonist

  - Full Agonist**

A drug that combines with its specific receptor to produce maximal effect by increasing its concentration (**affinity & high efficacy**). e.g. acetylcholine (Ach).

# Drug-Receptor Interaction

## □ Agonist

### Partial Agonist

combines with its receptor & evokes a response as a full agonist but produces submaximal effect regardless of concentration (affinity & partial efficacy).

□ e.g. pindolol

■ A beta blocker which is a **partial agonist**, produces less decrease in heart rate than pure antagonists such as propranolol.

# Drug-Receptor Interaction

## PARTIAL AGONISTS - EFFICACY

Even though drugs may occupy the same # of receptors, the magnitude of their effects may differ.

