

# PHARMACODYNAMICS I

## MECHANISMS OF DRUG ACTION

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(Slides are adopted and modified from Prof. Hanan Hajar)

# 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?

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- 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 (e.g. Neutralization of gastric acidity with antacids).

# 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

# Receptors

- A receptor is a special target macromolecule that binds the drug and mediates its pharmacological actions.

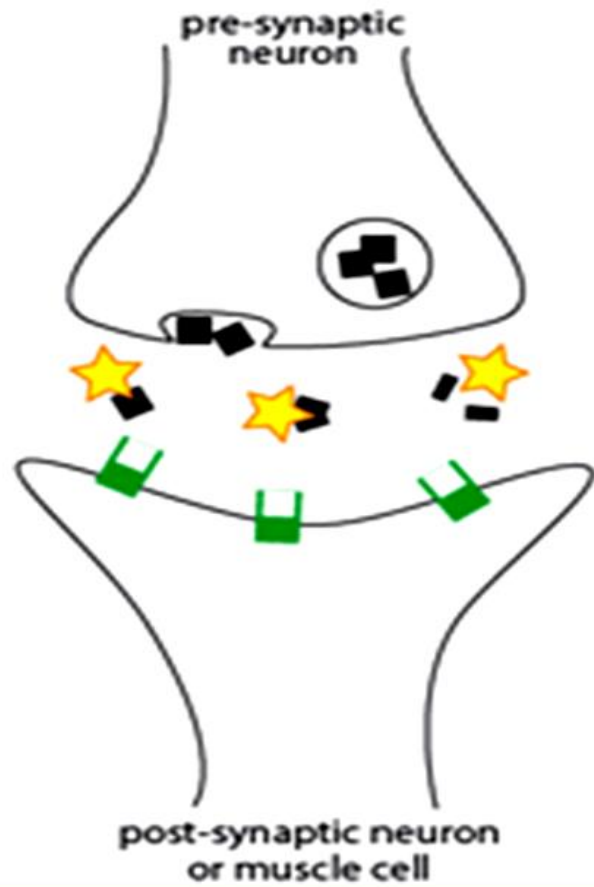
## **Where are receptors located?**

- Cell membrane.
- Cytoplasm.
- Nucleus.

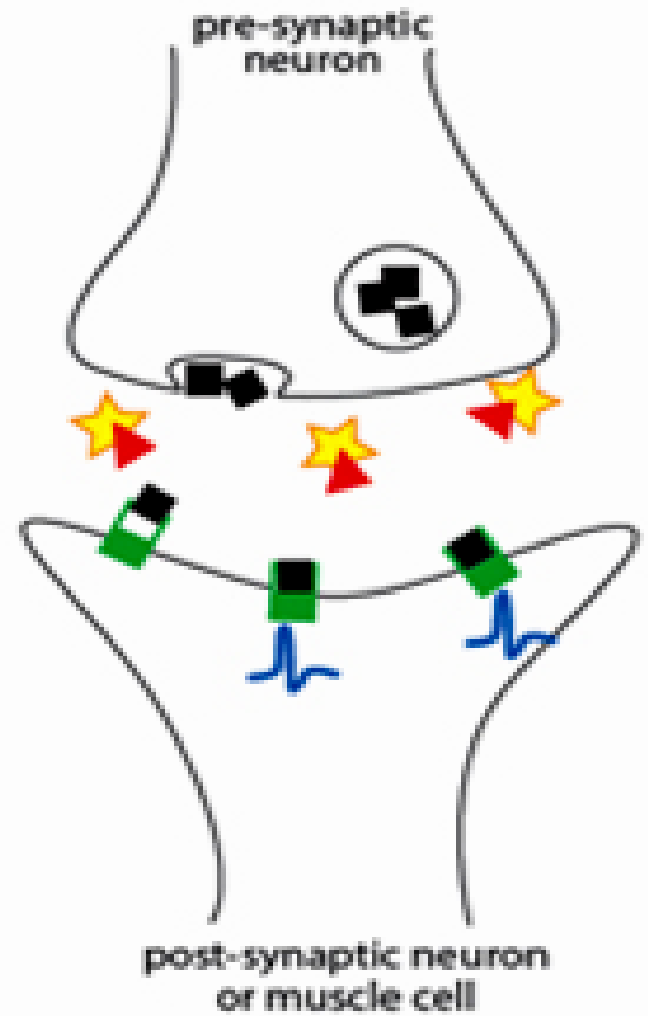
# Enzymes

- The drug competes with the natural endogenous substrate for the enzyme.
- ▣ Anticholinesterases inhibit acetylcholinesterase thus producing cholinomimetic action.
  - E.g. **Neostigmine** competes with **ACh** for acetyl cholinesterase enzyme at motor end plate (neuromuscular junction).

# ACh Esterase STOPS signaling process



- ACh
- U ACh Receptor
- ⚡ Signal transmission
- ★ ACh Esterase



- ACh
- U ACh Receptor
- ⚡ Signal transmission
- ★ ACh Esterase



# What are targets for drug binding ?

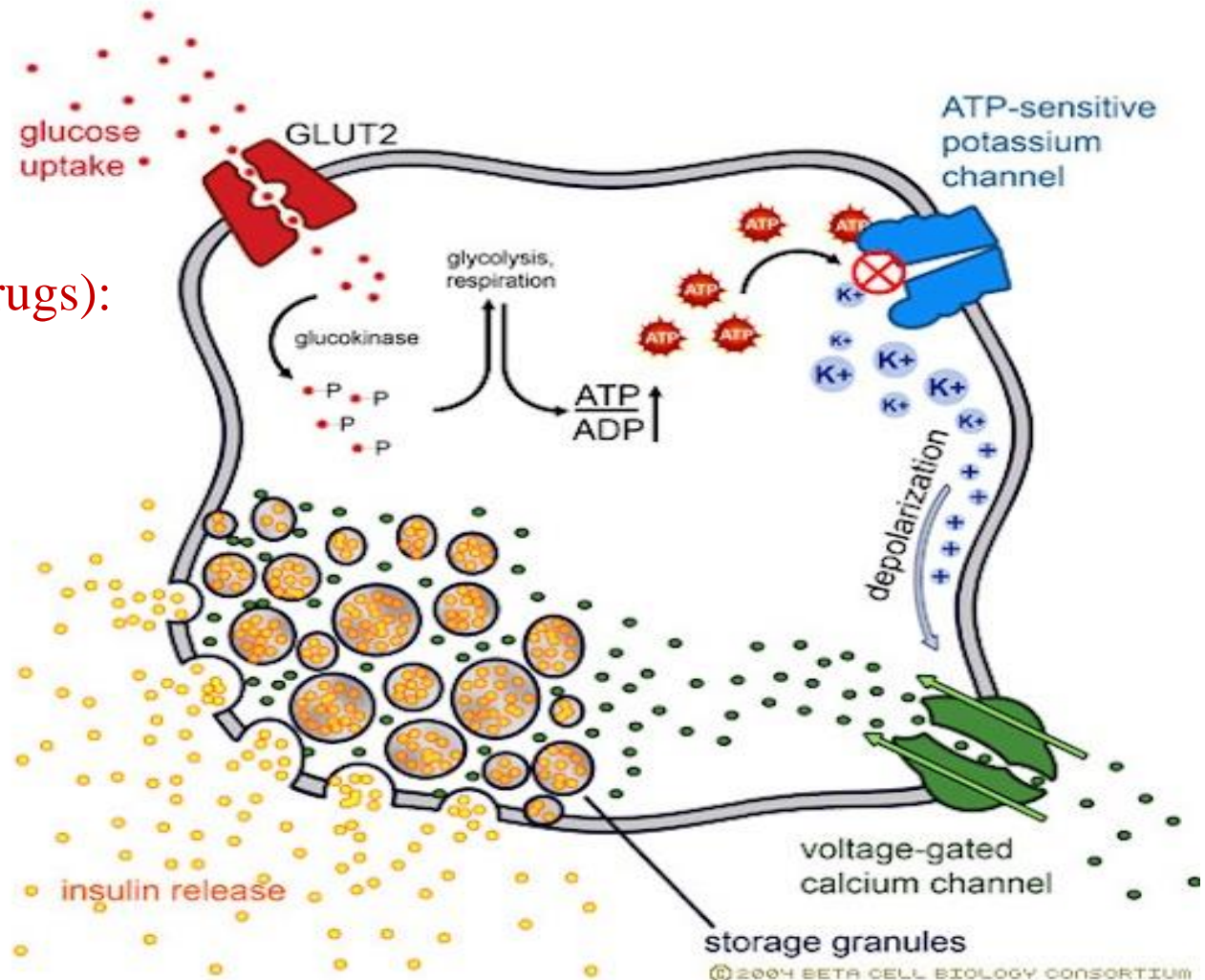
## Ion channels

- 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., Na<sup>+</sup>,K<sup>+</sup>-ATPase inhibitor

# What are targets for drug binding ?

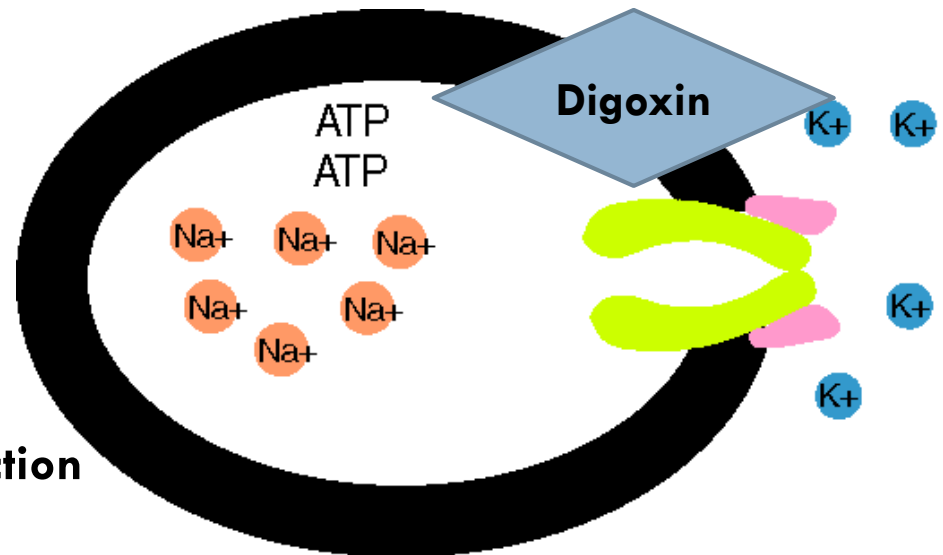
## Carrier molecules

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

- **More Na<sup>+</sup> in the cytosol**

→ less export of Ca<sup>++</sup>

→ **Stronger heart muscle contraction**



# What are targets for drug binding ?

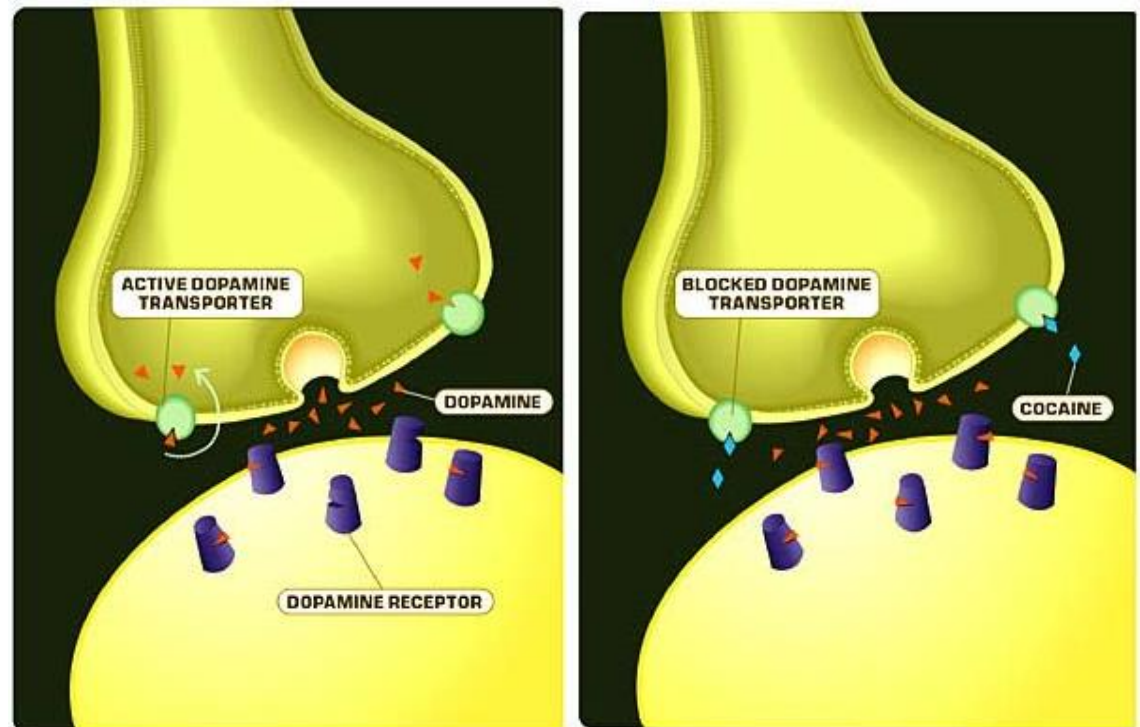
## Carrier molecules

- **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**.

# 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

## MICROTUBULE DESTABILIZERS

### Vinca alkaloids

Vincristine  
Vinblastine  
Vinorelbine  
Vinflunine

Halichondrin B  
Eribulin mesylate  
Cryptophycins  
Dolastatins

Vinca  
binding site

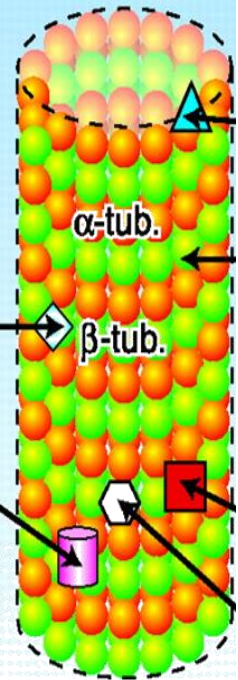
Colchicine  
binding site

Colchicine

2-Methoxyestradiol

Sulphonamides

Aspergillus derivatives



Tubulin  
Structure

# Drug-Receptor Interaction

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- **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.

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

# Drug-Receptor Interaction

- **Agonist**

is a drug that combines with a 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).

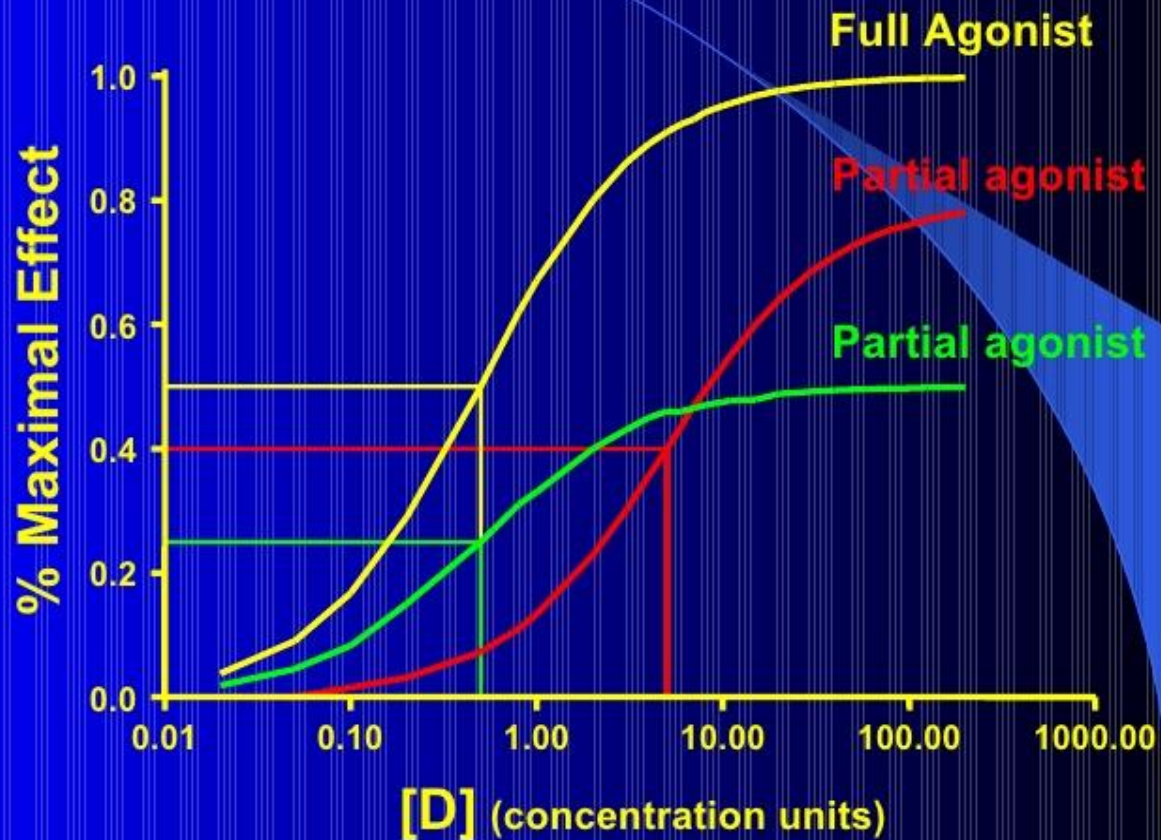
### □ e.g. Pindolol

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

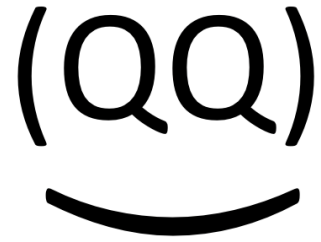
# Drug-Receptor Interaction

## PARTIAL AGONISTS - EFFICACY

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



# Questions/Quote (QQ)



**Life is 10% what happens to  
you and 90% how you react  
to it.**

Charles R. Swindoll



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