



BIOTRANSFORMATION

(Metabolism)

- ❖ These are: the chemical changes that occur to drugs after absorption until excretion.
- Drug metabolism occurs mainly in the liver, also in other organs, e.g. intestinal lumen or wall, lung, plasma, skin and kidney.
- The aim of drug metabolism is the conversion of the lipophilic drug to a
 more polar (hydrophilic, ionized) metabolite which is easily excreted in
 urine.
- The hydrophilic drugs usually do not undergo metabolism and secreted unchanged in urine

Types of Biotransformation Reactions

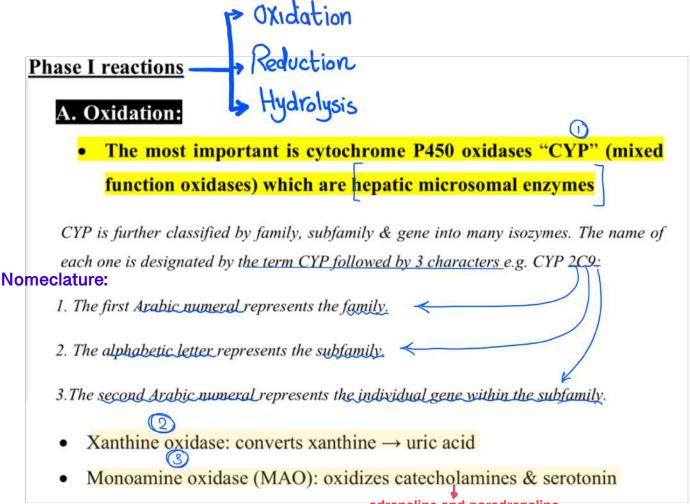
Phase I (Non-Synthetic)

- Phase I reactions include: oxidation reduction hydrolysis. بصير تفاعل واحد منهم
- The most important reaction is oxidation by cytochrome P450 enzyme system.
- Phase I reactions result in unmasking of a polar group (-OH, -SH, or -NH₂) to an ionized metabolite that can be easily excreted.

Phase II (Synthetic)

- An endogenous substrate, (e.g. glucuronic acid, glycine, glutathione, sulfate or acetic acid) is conjugated with the functional group of the drug or its metabolite → nontoxic highly polar, rapidly eliminated conjugates.
- The most important is conjugated with glucuronic acid.

The kidney cannot efficiently excrete lipophilic drugs that readily cross cell membranes and are reabsorbed in the distal convoluted tubules. Therefore, lipid-soluble agents are first metabolized into more polar (hydrophilic) substances in the liver via two general sets of reactions, called phase I and phase II



Notes for your knowledge:

adrenaline and noradrenaline

- ** Allopurinol (Zyloprim) and febuxostat (Uloric) are the only FDA-approved xanthine oxidase inhibitors for the treatment of gout, we decreases uric acid synthesis = we treats Gout
- **Serotonin is a chemical that carries messages between nerve cells in the brain and throughout your body. Serotonin plays a key role in such body functions as mood, sleep, digestion, nausea, wound healing, bone health, blood clotting and sexual desire.
- **Catecholamines are hormones made by your adrenal glands, two small glands located above your kidneys. These hormones are released into the body in response to physical or emotional stress. The main types of catecholamines are dopamine, norepinephrine, and epinephrine(adrenaline).

B. Reduction:

- Nitroreductase → chloramphenicol
- Carbonyl reductase → naloxone

C. Hydrolysis:

- It occurs mainly non-microsomal (in plasma and body fluids)
 - Cholinestrase → Ach. Acetylcholine
 - Peptidase → insulin

Nots for your knowledge

- **Chloramphenicol is a medication used in the management and treatment of superficial eye infections such as bacterial conjunctivitis
- **Naloxone is a medication approved by the Food and Drug Administration (FDA) designed to rapidly reverse opioid overdose. It is an opioid antagonist—meaning that it binds to opioid receptors and can reverse and block the effects of other opioids, such as heroin, morphine (بيوقف شغل المورفين)
- **Cholinesterase inhibitors (also called acetylcholinesterase inhibitors) are a group of medicines that block the normal breakdown of acetylcholine.

Consequences of phase I reactions:

- The activity of the drug is modified in one of the following ways:
 - 1- Active drugs → inactive drugs (occurs with most drugs).
 - 2- Inactive drugs (prodrugs) → active drugs, e.g. cortisone to cortisol (hydrocortisone).
 - 3- Active drug → another active one, e.g. codeine to morphine.
 - 4- Active drug → a toxic metabolite e.g. methanol → formaldehyde → retinotoxic

المُيثانول هو الكحول الميثيلي (الخمر) بس يشربه الشخص كتير رح يتراكم ال formaldehyde وتسببله عمى بسبب سميته على شبكية العين

paracetamol → toxic metabolite (NAPQI) → hepatotoxic in case of toxicity

ملاحظة: هاي السمية بتمثل حوالي 5% من ال matabolism و الجسم بقدر يتعامل معها عن طريق انه بدخل لphase 2 و يرتبط مع molecule مثل ال glutathione و بهاي الحالة ببطل harmfull و بصير اله secretion و لكن الخطر لما المريض يوخد جرعة كبيرة مرة وحدة أو عدة جرعات بفترة قصيرة

و لكن الخطر لما المريض يوخد جرعة كبيرة مرة وحدة أو عدة جرعات بفترة قصيرة حيكون الكند مما يؤدي الى حيكون الكبد مما يؤدي الى hepatotoxicity و liver necrosis



تذكير سريع لعمل الGlutathione 👀 أخذناه بالبيوكيم 😁

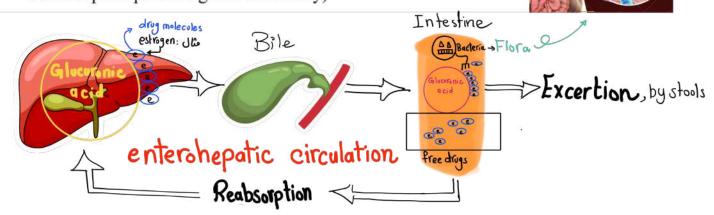
Phase II reactions

A. Glucuronide conjugation:

- It is the most common conjugation reaction
- Glucuronide conjugates secreted in bile may be hydrolyzed by intestinal

bacteria and free drug can be reabsorbed again i.e. enterohepatic circulation

prolong duration of drug action e.g. estrogen (so contraceptive pills are given once daily)



حتستمر هاي العملية لمدة 24h لغاية ما يصير في excertion لوestrogen بنسبة 100% ، لهيك المرأة بتوخد حبوب منع الحمل كل 24h

و بنلاحظ انه هاي العملية زادت من فعالية الدوا (long duration of drug action)

HO

نطلق على هذه الدورة -> interohepatic circulation

Phosphate group

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Steroid

معلومة اضافية: لو المريضة اخدت antibiotic ادى لقتل بكتيريا flora ممكن يصير حمل لأنه الدواء ما حيصير اله

B. Non-Glucuronide conjugation:

Sulphate formation e.g. steroids Vitamine D, estrogen, testosterone
 O

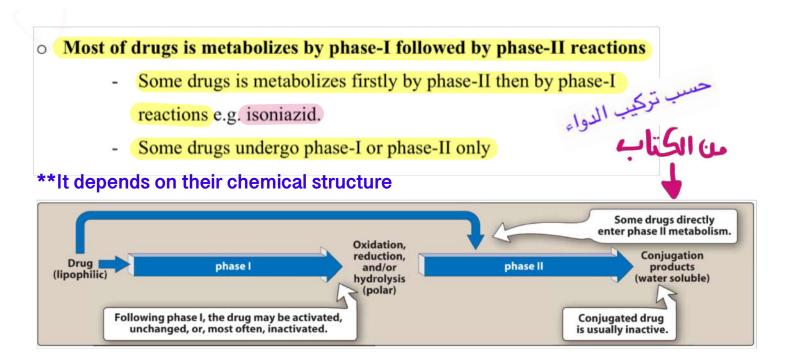
Glycine conjugation e.g. salicylic acid Aspirin

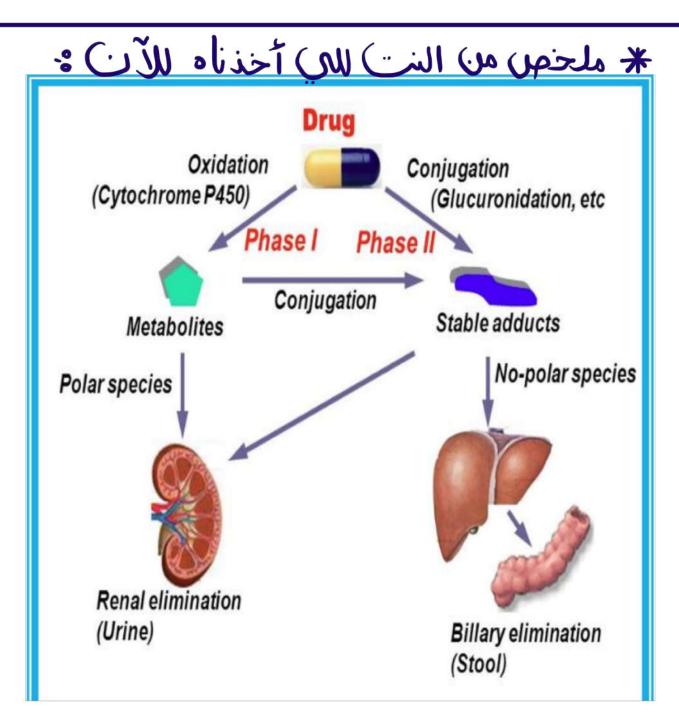
Glutathione conjugation e.g. ethacrynic acid diuretic

Acetyl conjugation (slow & rapid acetylation) e.g. isoniazid is an antibiotic used for the treatment of tuberculosis.

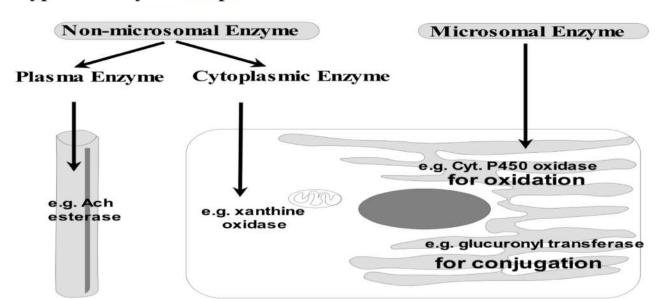
Consequences of phase II reactions:

- Mostly result in drug inactivation Active --> Inactive
- Some exceptions can occur e.g. morphine is partially converted into morphine-6-glucuronide (active metabolite) Active --> Active





Types of enzymes responsible for biotransformation reactions



MA

Microsomal enzymes	Non-microsomal enzymes
Site: in the liver in microsomes of ER. So, they are called hepatic microsomal enzymes	Present in liver, GIT, lung, kidney, plasma, skin: in cytoplasm and mitochondria
التفاعلات المسؤولة عنها:	Reactions:
Phase-I: Oxidation ~~ CYP *	Phase-I: Oxidation wo But not "CYP"
Reduction	Reduction
المحدِّه (few reactions)	Hydrolysis (mostly) کیں
Phase-II: Glucuronic a. conjugation Only	Phase-II: All Conjugations Except Glucuronic
Substrate: lipophilic drugs & bilirubin	Lipophilic, hydrophilic drugs (to terminate action as succinylcholine) & natural body constituents
Affection by drugs: Inducible	Non-inducible

الأدوية الي بتشنتغل عليها

معناته في أدوية ممكن تتحكم بعملها inhibition or induction و تعمل الها

ال lipophilic الي بتقدر تعمل penetration وهاد من عوامل ال distribution فهي ال lipophilic هي الي بتقدر تدخل جوا ال liver فهي الي بصيرلها metabolism **Succinylcholine is a depolarizing skeletal muscle relaxant used adjunctly to anesthesia and for skeletal muscle relaxation during intubation, mechanical ventilation, and surgical

Factors Affecting Biotransformation:

- 1. Drugs: (Enzyme induction & enzyme inhibition).
- Some drugs and environmental substances can induce or inhibit the microsomal enzyme activity and lead to undesirable drug interactions

Tolerance is a person's diminished response to a drug, which occurs when

Clinical significance of Enzyme Induction: the drug is used repeatedly and the body adapts to the continued presence of the drug.

- ❖ Drugs stimulating the microsomal entyme systems → ↑ activity →
- ↑ their own metabolism → tolerance e.g. phenobaritone.

يقلل تأثير الدواء

- •↑ metabolism of <u>other drugs</u> metabolized by these enzymes and are given at same time → drug interactions e.g.:
 - Rifampicin →↑ oral contraceptive metabolism → pregnancy
 Rifampicin is used to treat TB, it increases the the metabolism, so it decreases the effect of oral contraceptive
 - Phenytoin →↑ cyclosporine metabolism → transplant rejection وقناالعندالذي والمائك
 - *Phenytoin is used to control certain type of seizures, and to treat and prevent seizures that may begin during or after surgery
 - *Ciclosporin, used as an immunosuppressant medication (مثبط للمناعة), is used mostly in organs transplantation
 - Rifampicin → warfarin metabolism → therapeutic failure.
 - *warfarin treats blood clots and reduces risk of heart attacks and stroke.
- ↑ metabolism of <u>endogenous</u> substrates e.g. **phenobarbitone** → telimination of **bilirubin** → used in treatment of neonatal jaundice)

مفيدة للناس الي عندهم يرقان زي الأطفال حديثي الولادة، لحتى نزيد الmtabolism تبع bilirubin

- ↑ metabolism of <u>vitamins</u> e.g. phenytoin → ↑ of vit.D, vit.K, folic acid

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 ↑ osteomalacia, bleeding and megaloplastic anemia
 - *Vitamin D helps regulate the amount of calcium and phosphate in the body.
 - *Vitamin K helps to make various proteins that are needed for blood clotting and the building of bones.
 - *Folic acid is a B vitamin that helps your body make red blood cells.

• Enzyme induction is <u>reversible</u>. <u>It occurs over a few days-months and</u> passes off over 2-3 weeks after withdrawal of the inducer.



Examples of Enzyme Inducers

Phenytoin & carbamazepine- phenobarbitone – rifampicin - griseofulvin - ♂ androgen- nicotine- chronic alcohol ingestion.



- 1) Which of the following reactions represents Phase II of drug metabolism?
 A. Amidation
 B. Hydrolysis
 C. Oxidation
 D. Reduction
- E. Sulfation
- 2)Which of the following is a phaseII drug metabolism reaction associated with a genetic polymorphism?
- A. Acetylation
- **B. Glucuronidation**
- C. Oxidation
- D. Reduction
- E. Glutathione conjugation
- 3) A woman is taking oral contraceptives (OCs). Which of the following drugs is unlikely to reduce the effectiveness of the OCs?
- A. Carbamazepine
- **B.** Phenytoin
- C. Ketoconazole
- D. Phenobarbital
- E. Rifampin
- 4) Aprodrug is:
- A. The prototype member of a class of drugs
- B. The oldest member of a class of drugs
- C. An inactive drug that is transformed in the body to an active metabolite
- D. A drug that is stored in body tissues and is then gradually released in the circulation

- 5) Microsomal enzyme induction can be a cause of:
- A. Tolerance
- B. Physicaldependence
- C. Psychological dependence
- D. Idiosyncrasy
- 6) Which of the following types of drug metabolizing enzymes are inducible:
- A. Microsomal enzymes
- **B. Nonmicrosomal enzymes**
- C. Both microsomal and non microsomal enzymes
- D. Mitochondrial enzymes