

Pharmacology

Pharmacokinetics

drug movement \Rightarrow Studies how body interacts w/drug

4 pillars of Pharmacokinetics (ADME)

Absorption

how drug moves from point of Absorption to bloodstream

factors:

- ① Pathway of Absorption (Oral, IV, Rectal) ↗ best (100% effective)
- ② Drug Composition (Different drugs have different Absorption Rates): \uparrow complex, \uparrow Absorption time
- ③ Blood flow to target organ: \uparrow blood flow, \downarrow time to reach target
- ④ Gastric pH: Drug capsules usually melt at Stomach pH (pH = 2); people who take Antacids (drugs which make Stomach Acid more basic), so ingested drugs might take longer to dissolve and be absorbed

Distribution

how drug is dispersed throughout body tissues

factors:

- ① Plasma protein: drug molecules that are bound to plasma proteins cannot cross tissues and are ineffective
- ② Tissue permeability: Impermeable tissues \Rightarrow \downarrow drug effectiveness (\uparrow permeability)
- ③ Blood flow to target organ: \uparrow blood flow, \downarrow time to reach target
- ④ Volume of Distribution (V_d)

Metabolism

How drugs are broken down in body (liver)
chemically modifying the drug.

factors:

- ① Phase I: Reduction, Oxidation, Hydrolysis (cytochrome P450)
- ② Phase II: Conjugation (used if phase I fails)
Glucuronidation, Sulfation \sim Add SO_4^{2-}
(Adding Glucuronic Acid)
 \star GlcUA (biochem I)
- ③ first-pass effect (liver metabolizes and removes some of drug before it reaches target organ \Rightarrow \therefore drug effectiveness \downarrow)

Excretion

How drug is removed from body (kidneys usually)

factors: (examples)

- ① Urine (Urinary)
- ② Faeces (Biliary)
- ③ Other (exhalation, sweat ...)

Phase I + Phase II both cause drug change from hydrophobic (or lipophilic) to hydrophilic; this \downarrow chance of drug moving back into bloodstream (and thus avoid being excreted)

