

تفريغ بيوفارما



اسم الموضوع: Drug Absorption

Slides [27-46]

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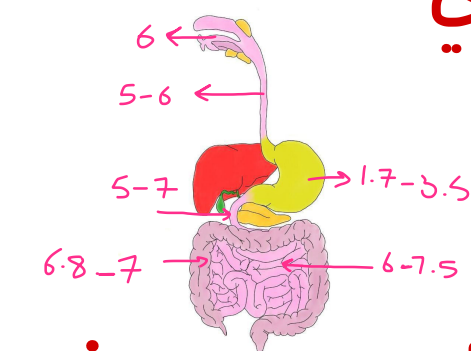
لجان الرُّفَعَات

إنتقال الدواء من مكان إعطائه نحو الدم

Drug absorption

I. Characteristics of GI physiology and Drug Absorption

بلعاضرة الى قبل درسنا جدول
وكان من ضمن الجدول فيه pH ولاحظنا
انه بتغير من جزء لثاني



على شان هاد السبب لازم ندرس pH عشان
اد drug تبغنا مايخرب قتل

The environment within the lumen:

① Gastrointestinal pH

- As we observed from the previous tables, the pH of fluids varies along the length of the GIT.

- The gastrointestinal pH may influence the absorption of drugs in a variety of ways:

A- It may affect the chemical stability of the drug in the lumen e.g. penicillin G, erythromycin

B- affect the drug dissolution or absorption e.g. weak electrolyte drug

↑ pH ← weak acid
↓ pH ← weak base
بالحموضة ← ionization
بالمعدة

يؤثر

هيك راجع

↓ stability ← degradation
↓ Bioavailability

هجوم الادوية اذا انخطوا orally

ددخلوا الى المعدة بصير الهم

خربوا شان انا عرفت هاي المعلومة فكرت بطريقة حتى مايخربوا

او اعمله counting لحق يصير drug release بال duodenum تملأ

اعطي بدلا injection

② Luminal enzymes

- The primary enzyme found in gastric juice is pepsin. Lipases, amylases and proteases are secreted from the pancreas into the small intestine.

بكر البروتين

بكر lipid

carb

protein

- Pepsins and proteases are responsible for the digestion of protein and peptide drugs in the lumen.

من الامثلة عليه اذا اعطيت insulin orally
كان المشكلة انه بتعظم بالمعدة

I. Characteristics of GI physiology and Drug Absorption

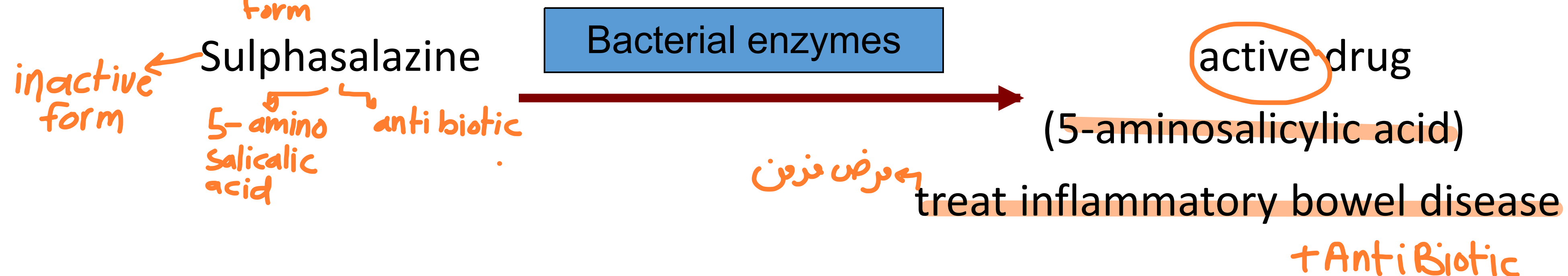
إذا أعطيت المريض Emulsion

↑ ← بـ كـ ر ا ر Lipid (oil) Fat

- The lipases may affect the release of drugs from fat / oil – containing dosage forms.

- Bacteria which are localized within the colonic region of the GIT secrete enzymes which are capable of a range of reactions. → قادراً على مجموعة ردود فعل
في غنا بكتيريا موجودة بالقولون بتفزر enzymes بتقدر نستفيد من الانزيمات
اي بتفزرها قليل
e.g. Sulphasalazine which is a prodrug used to target the colon.

ProDrug بال inactive form
خليت البكتيريا النافعة الانزيمات
اي بتفزر تفكك الدواء وتحوله ل active form
Normal flora البكتيريا النافعة large intestine



واحد منهم بتفزر الـ colon
وبنع التحفيز تبعه

تخيل أنه حد شايل جزء من المعدة قص معدته بغض
النظر عشان يضعف او لمرض معين رح يوصل الدواء لل
small intestine اسرع وال bioavailability
احسن .. لكن هاد الشي مش لكل الادوية فيه عندي ادوية
بتحب تضل بالمعدة لوقت اطول عشان يصير لها
dissolution مثل ال basic drug فا ال
↓ bioavailability اقل وال absorpant ↓
ونتخيل مثلا واحد عنده heart failure رح يكون ال
↓ blood flow بالتالي ال absorpant ↓

تحققا الامتور
جملتها في
معدومه
#

I. Characteristics of GI physiology and Drug Absorption

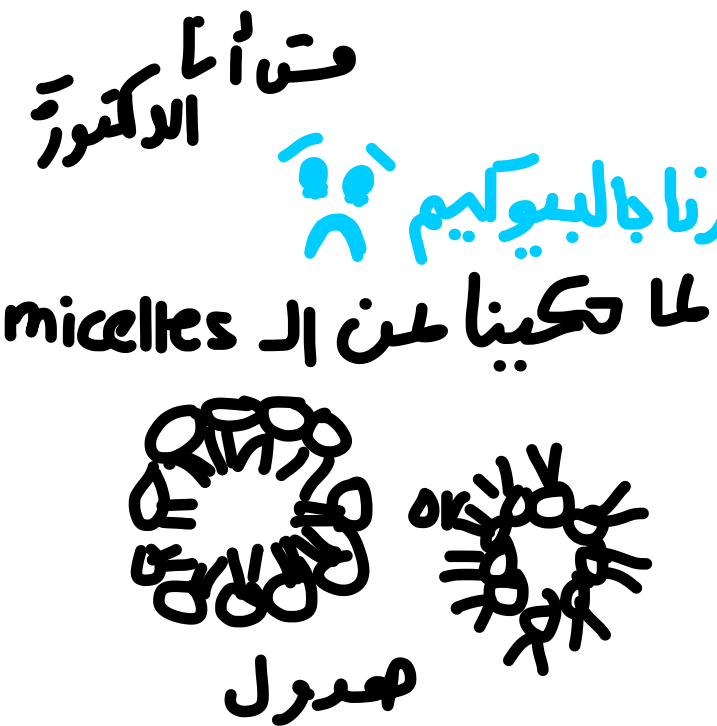
Disease state and physiological disorders

أنا بد استرب الدواء الى absorpant عندي هيسكون خبير
لن عجوز يحرقها 80 سنة

- Local diseases can cause alterations in gastric pH that can affect the stability, dissolution and absorption of the drug.
- Partial or total gastrectomy results in drugs reaching the duodenum more rapidly than in normal individuals. This may result in an increased overall rate of absorption of drugs that are absorbed in the small intestine.
- However, drugs that require a period of time in the stomach to facilitate their dissolution may show reduced bioavailability in such patients.

مثل الادوية القلوية برها Low PH

I. Characteristics of GI physiology and Drug Absorption



The unstirred water layer

- It is a more or less stagnant layer of water and mucous adjacent to the intestinal wall.

- This layer can provide a diffusion barrier to drugs.

- Some drugs (antibiotics e.g. tetracycline) are capable of complexing with mucous, thereby reducing their availability for absorption.

لديه polysaccharide



Mucous
intestinal wall

hydrophilic
diffusion

complexing with mucous
Polysaccharide

unstirred layer

phospholipid
head

طبقة موجودة على
أي همة على
ظنم البراء يعرفها لأنها ما تتحرك أبداً
بنكون موجودة على الـ intestinal wall

يعني البراء لازم يكون hydrophilic
يدخلنا بقلل الـ absorptant والـ diffusion

فتسبب هيك كمان ممكن يقلع الـ complexing with mucous

II Gastric emptying and motility

حركة الدواء من
ال Stomach إلى Small intestine

يطلق عادةً على الوقت الذي تستغرقه الجرعة لعبور المعدة:

- The time a dosage form takes to traverse the stomach is usually termed: the gastric residence time, gastric emptying time or gastric emptying rate.

هنا هي بتفرق بس المصطلح بشكل عام نفس الشي يعني هي بتفرق بالعلاقة انو كل ما زادت سرعة ال emptying يكون اخذ وقت اقل يعني انتي لما بتحكي عن emptying rate برضو بتحكي عن emptying time

الدكتوراه لقدام بتحكي انهم يختلفوا كيف؟

↑ Rate ↓ time ↑ blood conc

أحسن امتصاص
للدواء وين؟
Small intestine

- Generally drugs are better absorbed in the small intestine (because of the larger surface area) than in the stomach, therefore quicker stomach emptying will increase drug absorption.

↑ emptying rate ↑ absorption

- For example, a good correlation has been found between stomach emptying time and peak plasma concentration for acetaminophen. The quicker the stomach emptying (shorter stomach emptying time) the higher the plasma concentration.

نفسه [Paracetamol] بنادول

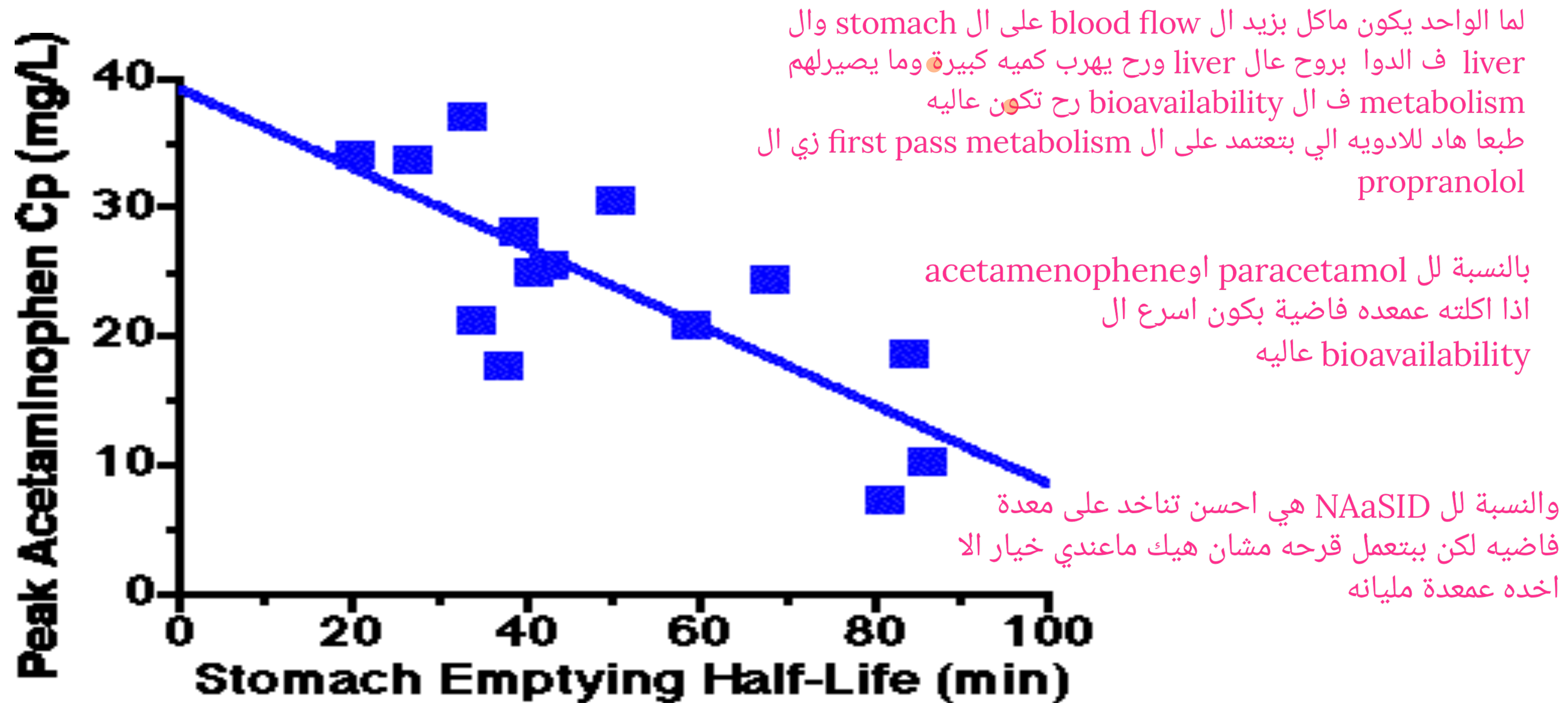
↓ emp ↑ cp

يعني اخذ ال Panadol على معدة خاوية بطني effect احن

- Also slower stomach emptying can cause increased degradation of drugs in the stomach's lower pH; e.g. L-dopa.

بس فيه ادرية العكس اذا اخدته على معدة خاوية
بتكر لانه يكون pH 1.7 تقريبا لانه الاكل بيزيد ال pH تاكل المعدة

II Gastric emptying and motility



Dependence of peak acetaminophen plasma concentration
as a function of stomach emptying half-life

II Gastric emptying and motility

Factors Affecting Gastric Emptying

Rate

بالبداية يزيد ال Rate بعدين
نقل

Volume of Ingested Material يعني انا مش اكلت رح تطول أو لا وجبة (عادي، سوبر، دبل، تريبل)	As volume increases initially an increase then a decrease. Bulky material tends to empty more slowly than liquids
Type of Meal نوع الاكل	
Fatty food	[Decrease]
Carbohydrate	[Decrease]
Temperature of Food	Increase in temperature, increase in emptying rate
Body Position أنا قايمة أو نايم أو واقفة المفروض	Lying on the left side decreases emptying rate Standing versus lying (delayed)
Drugs	
Anticholinergics (e.g. atropine) Pescopan	Decrease
Narcotic (e.g. morphine)	Decrease
Analgesic (e.g. aspirin)	Decrease

↑ Rate
↓ time
↑ blood conc

الأكل الساخن يزيد
مثان صيدو الرسول نفوس عن الاكل الساخن
والنفخ على الاكل
صلي عليه
رسلكم

↓ Parasympethitic
↓ GER

II Gastric emptying and motility

Factors Affecting Gastric Emptying

Viscosity <u>Fat</u>	Rate of emptying is greater for less viscous solutions <i>↑ viscous ↓ Rate</i> <i>كل ما كان Lipid ↑ Rate ↓ Rate</i>
Emotional states <i>التأثر</i>	- Stressful emotional states increase stomach contraction and emptying rate - Depression reduces stomach contraction and emptying
Disease states	- Rate of emptying is reduced in: Some diabetic patients, hypothyroidism - Rate of emptying is increased in: hyperthyroidism <i>تقلل كالمشي بالجسم</i>
Exercise <i>↑ Sympathetic ↓ parasympathetic</i>	Reduce emptying rate

III Effect of Food

- The presence of food in the GIT can influence the rate and extent of absorption, either directly or indirectly via a range of mechanisms.

A- Complexation of drugs with components in the diet ex: Milk + iron

e.g. Tetracycline forms non-absorbable complexes with calcium and iron, and thus it is advised that patients do not take products containing calcium or iron, such as milk, iron preparations or indigestion remedies, at the same time of day as the tetracycline.

B- Alteration of pH

Food tends to increase stomach pH by acting as a buffer. This liable to decrease the rate of dissolution and absorption of a weakly basic drug and increase that of a weakly acidic one.



III Effect of Food

الطعام يعادل حموضه المعدة بقللها الادوية القاعدية بتقلل ال dissolution مشان هيك بعض الادوية القاعدية يفضل اني اكلها بعد الاكل بساعتين او قبل الاكل

C- Alteration of gastric emptying

بعد اكل Fat
↓ gastric emptying
delay onset time

Fats and some drugs tend to reduce gastric emptying and thus delay the onset of action of certain drugs.

D- Stimulation of gastrointestinal secretions ← بفرز نتيجة لاكل

- Gastrointestinal secretions (e.g. pepsin) produced in response to food may result in the degradation of drugs that are susceptible to enzymatic metabolism, and hence a reduction in their bioavailability. ← تعرض لـ

- Fats stimulate the secretion of bile. Bile salts are surface active agents which increase the dissolution of poorly soluble drugs (griseofulvin).
↑ Surface area ↑ Solubility
↑ Bile Salt
↑ Emulsifying agent
↑ Solubility
↑ Dissolving rate
↑ Bioavailability
antifungal ←

Bile salts can form insoluble and non-absorbable complexes with some drugs, such as neomycin and kanamycin.

بعطيهم قبل الاكل عشان مايمنسك فيه ال bile بخرب الامتصاص عليهم
همه اصلا بنعطوا local effect لناس الي عندهم ammonia & urea in the blood 9 renal falier عشان مانرفع الامونيا بالدم
ومايمتنصه الجسم بنعطيه هاد الدوا وهو اصلا عليه charge

III Effect of Food

المنافسة بين مكونات
الغذاء والأدوية على آليات
الامتصاص المتخصصة

E-Competition between food components and drugs for specialized absorption mechanisms

نزي الادوية التي بتليها تدخل عن طريق
active transport

There is a possibility of competitive inhibition of drug absorption in case of drugs that have a chemical structure similar to nutrients required by the body for which specialized absorption mechanisms exist.

قل 5-Fluorouracil
↓
L-Dopa

F- Increased viscosity of gastrointestinal contents

The presence of food in the GIT provides a viscous environment which may result in:

- Reduction in the rate of drug dissolution
- Reduction in the rate of diffusion of drug in solution from the lumen to the absorbing membrane lining the GIT.

Hence, there is reduction in drug bioavailability.

III Effect of Food

اشي وهو مارق رح يتكسر رحت
ثببت الي بكسرة بالتالي رح يزيد
ال bioavailability

G- Food-induced changes in presystemic metabolism

- Certain foods may increase the bioavailability of drugs that are susceptible to presystemic intestinal metabolism by interacting with the metabolic process.
- E.g. Grapefruit juice is capable of inhibiting the intestinal cytochrome P450 (CYP3A) and thus taken with drugs that are susceptible to CYP3A metabolism which result in increase of their bioavailability.

د. ايمان (لا)
د. نزار
البرمالي والجرب فرتة
بنزلوا ضغط الدم
د. بعل

interaction

H- Food-induced changes in blood flow

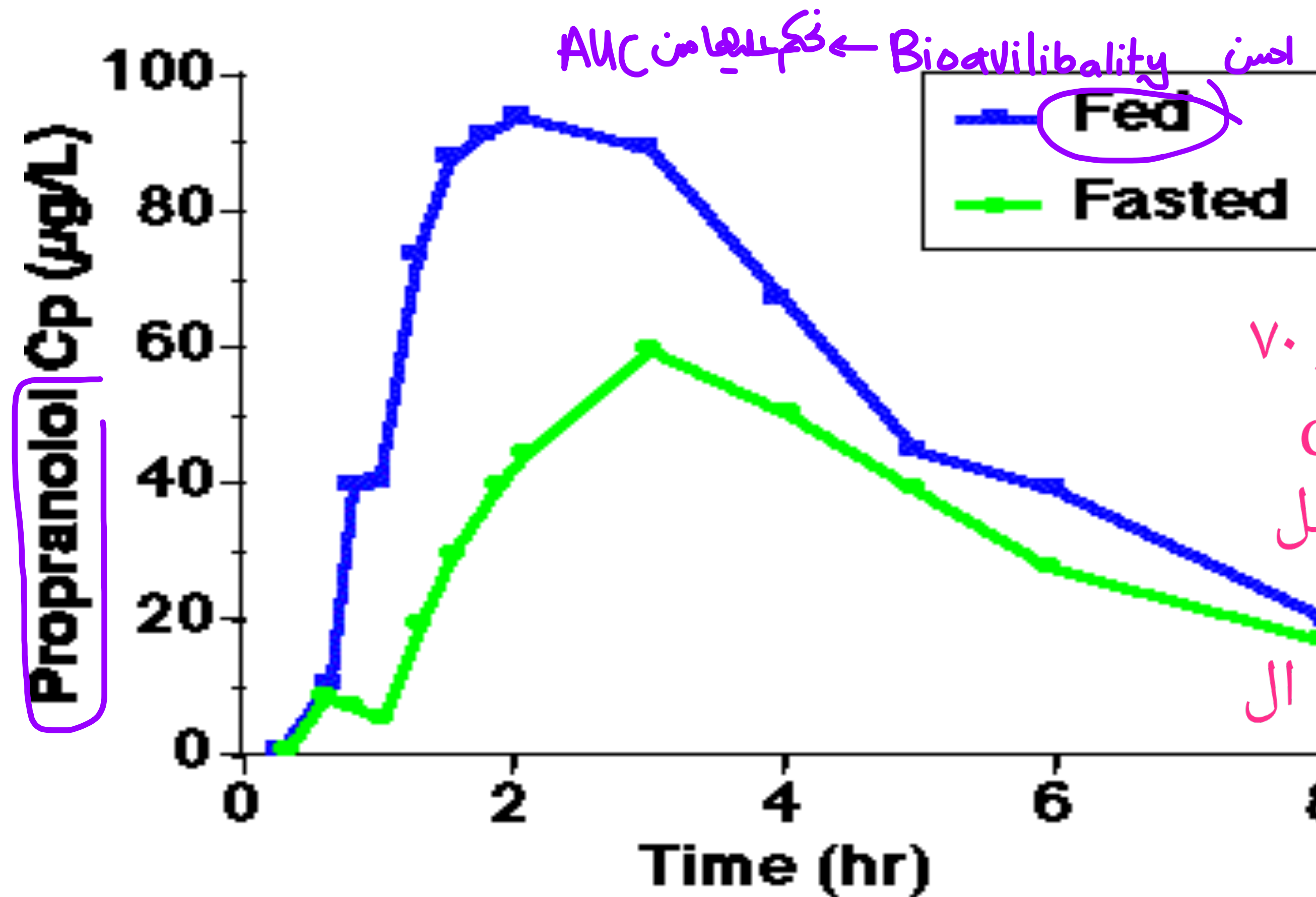
- Food serve to increase the bioavailability of some drugs (e.g. propranolol) that are susceptible to first-pass metabolism.
- Blood flow to the GIT and liver increases after a meal. The faster the rate of drug presentation to the liver; the larger the fraction of drug that escapes first-pass metabolism. This is because the enzyme systems become saturated.

الاكل بزيد ال
blood flow
كمية اكبر رح
توصل فارح يزيد
الامتصاص

امتصاصه مع ال
acid
أول فاصح
ال Fed state
ال B.F اسرع

لما الواحد يكون ماكل بزيد ال blood flow على ال stomach وال liver ف
الدوا بروح عال liver ورح يهرب كميه كبيرة وما يصير لهم metabolism ف ال
bioavailability رح تكون عاليه
طبعا هاد للادويه الي بتعتمد على ال first pass metabolism زي ال
propranolol

III Effect of Food



لما يدخل على الكبد بكسر ٧٠ %
منه فا يزيد ال dosage
تبعته فالكمية الي رح تدخل
على الكبد بتكون كبيرة
ما بتكسر الجميع فابتوصل ال
bioavailability ل ٣٠ %

Effect of Fasting versus Fed on Propranolol Concentrations

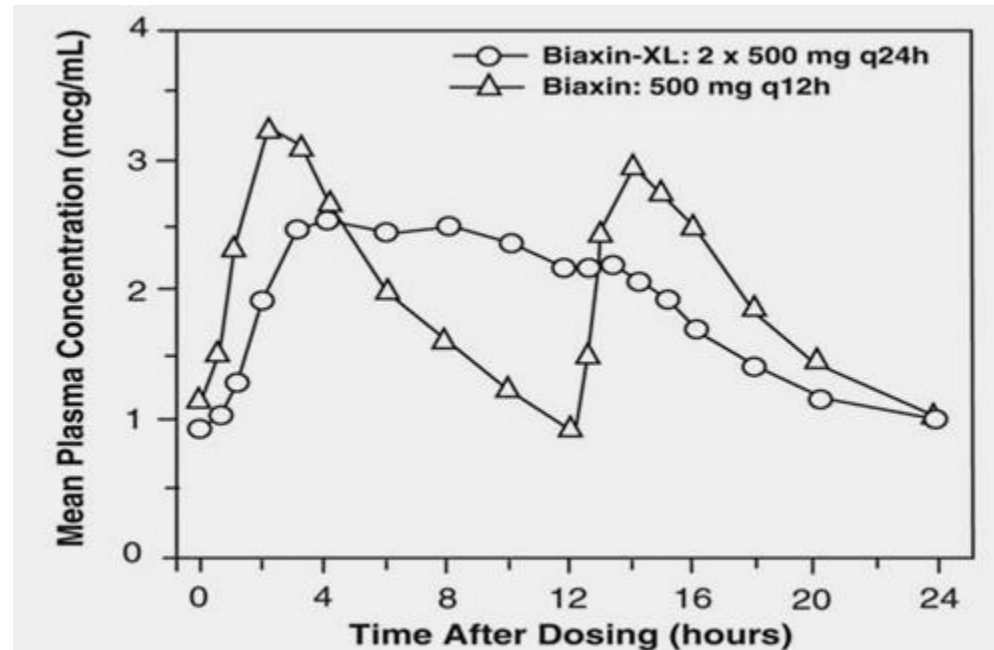
أدوية
Aya
استعملوا
الخط

Double peak phenomena

- Some drugs such as cimetidine and ranitidine, after oral administration produce a blood concentration curve consisting of two peaks.



- The presence of double peaks has been attributed to variability in stomach emptying, variable intestinal motility, presence of food, enterohepatic cycle or failure of a tablet dosage form.



Presystemic metabolism

هو ال metabolism الذي يغير للدواء قبل ما يوصل ال systemic circulation

Definition:

The metabolism of orally administered drugs by gastrointestinal and hepatic enzymes, resulting in a significant reduction of the amount of unmetabolized drug reaching the systemic circulation.

← ممكن لبعض الأدوية تخرب نصها بهذه الطريقة .

النوع الاول من Presystemic

Gut wall metabolism

- This effect is known as first-pass metabolism by the intestine.

- (Cytochrome P450 enzyme, (CYP3A), that is present in the liver and responsible for the hepatic metabolism of many drugs, is present in the intestinal mucosa and that intestinal metabolism may be important for substrates of this enzyme e.g. cyclosporin.

Small Intestine

تحتوي على أنزيمات

هذا الدواء يغير ال metabolism بالانزيمات التي ذكرناهم بال Small Intestine
بنحطية orally

Presystemic metabolism

• **Hepatic** ممكن يكون **Systemic** و ممكن يكون **Pre**
← **Pre** متى يكون ← بس يمر عندي من خلال **Portal Vein**

النوع الثاني

Hepatic metabolism

- After a drug is swallowed, it is absorbed by the digestive system and enters the hepatic portal system. It is carried through the portal vein into the liver before it reaches the rest of the body.
- The liver metabolizes many drugs (e.g. propranolol), sometimes to such an extent that only a small amount of active drug emerges from the liver to the rest of the circulatory system.
- This *first pass* through the liver thus greatly reduces the bioavailability of the drug.

مثال علا دوية



■ لا حكيما إنه المعدة والأمعاء Large, Small ما عدا Lower rectal vein + buccal

مدول كلسم لما يهضموا يروحوا من خلال ال Portal Vein على Liver قبل ما يوصلوا ال Circulation

وهاد نوع خط دفاع ربتا عز وجل حطه بجسمنا عشان مش أي شي Toxic أنت أخذته يروح على

ال Circulation , لكن بالطريقة أحياناً بتخرب بعض الأدوية مثل Propakolo

وهذا لا يعني بعد ما يروح من Portal Vein مارح يروح ال Liver مرّة ثانية -- لا

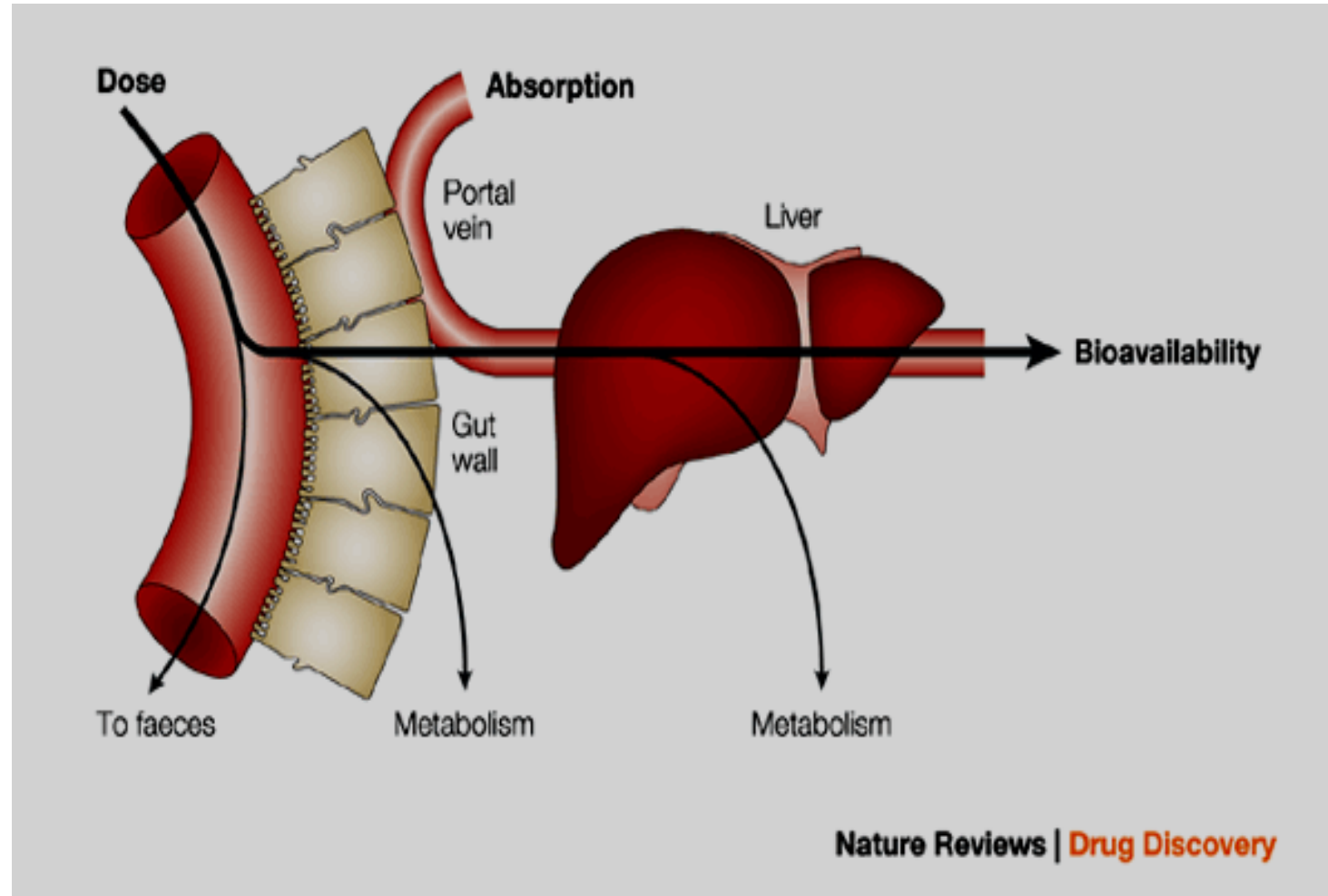
عادي يروح ال Liver بين الأقل يكون توزع على الجسم .

• ال first Pass metabolism ما يجير لكل الأدوية ، في بعض أدوية بتقرب ال Portal vein

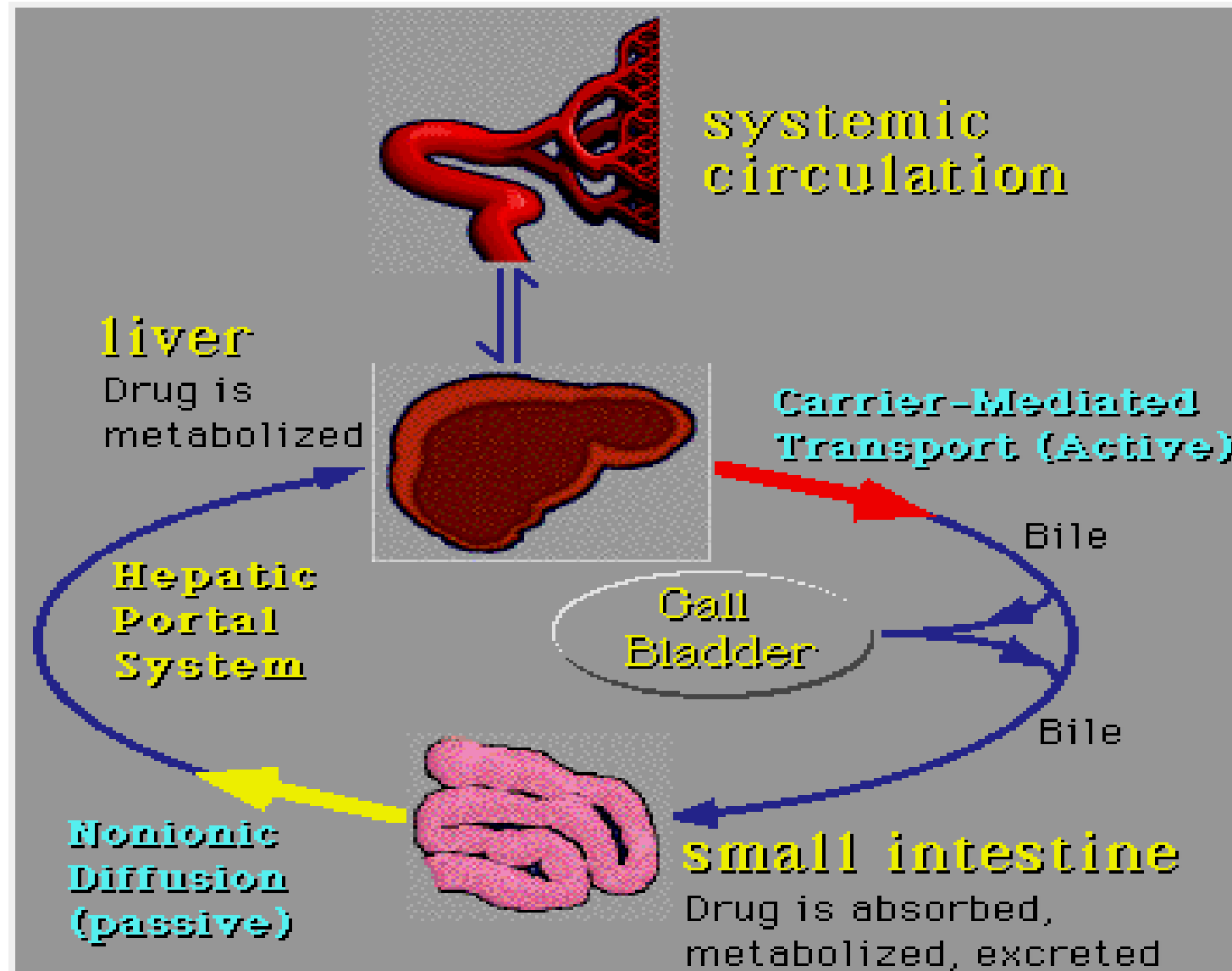
بين ما يجير عليها من الدرجة العالية من ال Metabolism .

Presystemic metabolism

مسألة بتبين كيف ال *Systemic circulation*
على إتعال بار *Liver*



Hepatic metabolism



II Physical-Chemical Factors Affecting Oral Absorption

Physical-chemical factors affecting oral absorption include:

- A- pH-partition theory
- B- Lipid solubility of drugs
- C- Dissolution and pH
- D- Drug stability and hydrolysis in GIT
- E- Complexation
- F- Adsorption

A. pH - Partition Theory

تشكل حاجز من (Lipid Barrier, Phospholipid)
 against drugs absorption

- According to the pH-partition hypothesis, the gastrointestinal epithelia acts as a lipid barrier towards drugs which are absorbed by passive diffusion, and those that are lipid soluble will pass across the barrier.

حتى يصير في diffusion من خلال الـ Lipid layer طبيعة الدواء ما بده يكون highly hydrophilic أو Ionic

- As most drugs are weak electrolytes, the unionized form of weakly acidic or basic drugs (the lipid-soluble form) will pass across the gastrointestinal epithelia, whereas the gastrointestinal epithelia is impermeable to the ionized (poorly-lipid soluble) form of such drugs.
- Consequently, the absorption of a weak electrolyte will be determined by the extent to which the drug exists in its unionized form at the site of absorption.

• 45% من الأدوية Weak Acid or Weak Base

• 5% فقط Neutral

• كونه معظم الأدوية Weak electrolyte عالي عند القدرة ليخترق الـ Cell membrane
هو الـ Unionized ← less hydrophilic ، عند القدرة إنه يمر
by Passive diffusion



فالم الـ A+

Ph. Ghada Lileg!

Ph. Aya

