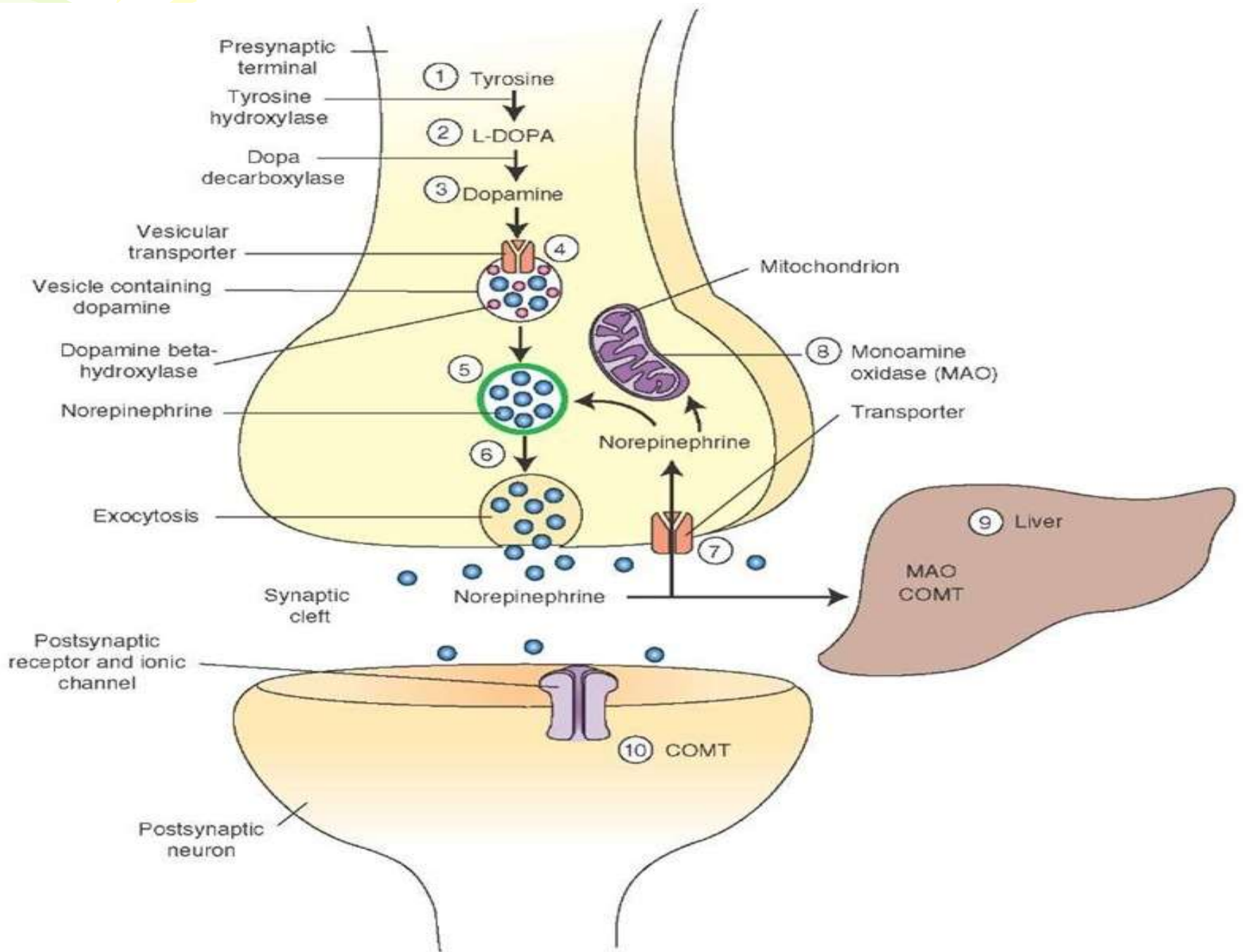
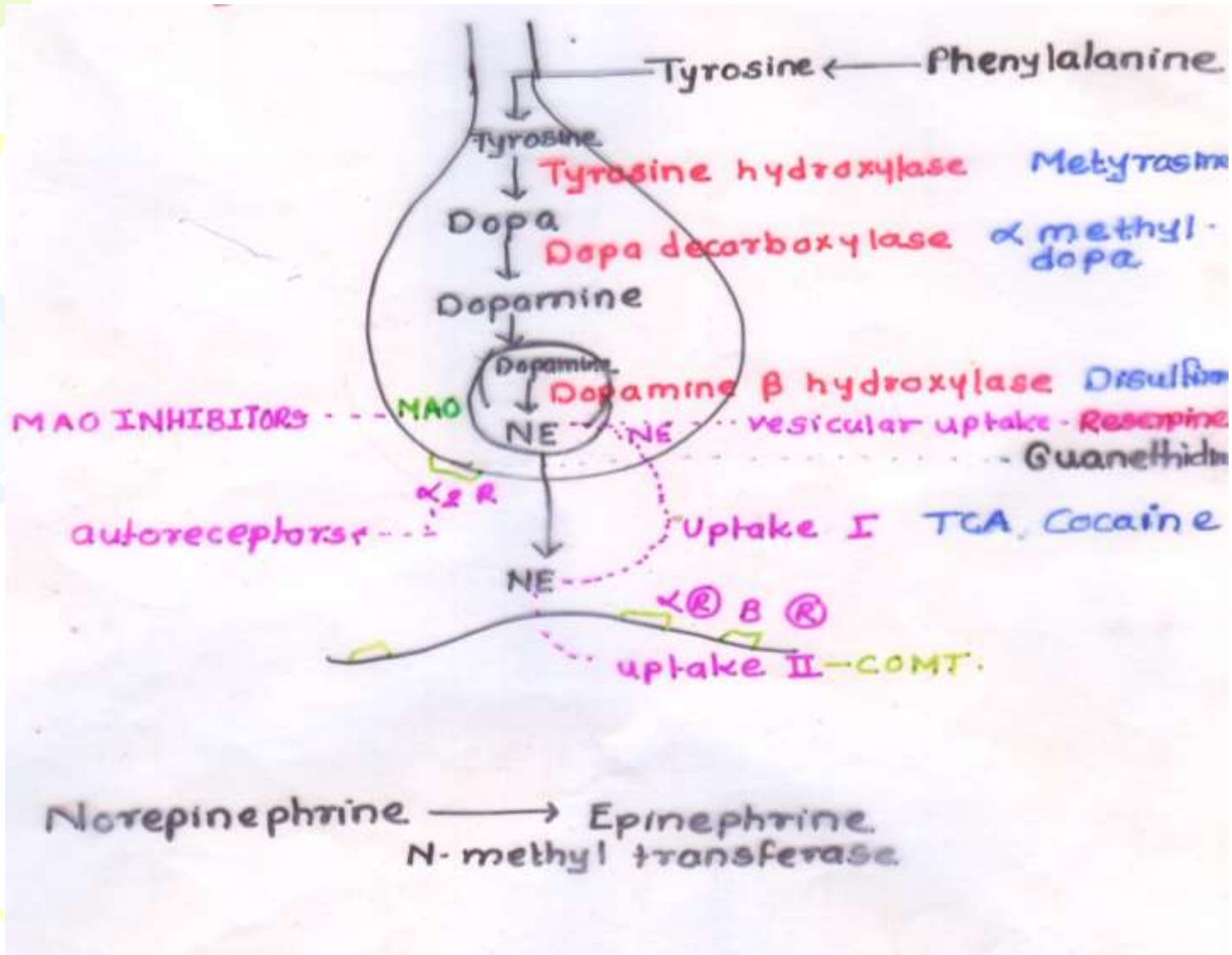


A decorative graphic on the left side of the slide features three balloons: a green one at the top, a light blue one in the middle, and a purple one at the bottom. Each balloon is attached to a string and has several small yellow triangular shapes radiating from it, resembling streamers or confetti.

Adrenergic Drugs/ Sympathomimetic Agents



Synthesis of NE



Synthesis of NE

Tyrosine ← phenylalanine



Tyrosine

↓ Tyrosine hydroxylase

DOPA

↓ Dopa decarboxylase

Dopamine

↓ Dopamine beta hydroxylase

Nor-Epinephrine

↓ N-methyl transferase

Epinephrine





- Uptake I

Axonal uptake (Nearly 80 percent)

Active amine pump-neuronal membrane-transport of NE

- Uptake II

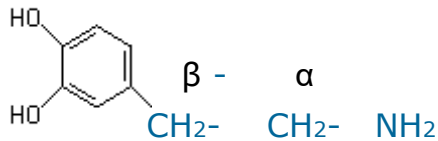
Extra neuronal uptake

- Metabolism

MAO,COMT

1. Catecholamines
2. Noncatecholamines

Parent compound β phenylethylamine



Catecholamines

Presence of catechol nucleus

Benzene ring with "OH" groups

At 3 & 4 position

Very potent at both types

Of receptor (α & β)

Can't cross BBB

Noncatecholamines

- **Lack one or both OH groups**
- **OH group at other position**
- **Other group substitution.**

**Absence of 'OH' at 3 & 4
benzene ring –Decrease overall
potency at receptor.**

Can cross BBB

Action on CNS +

Metabolized by MAO & COMT

Resistant

Can't be given orally

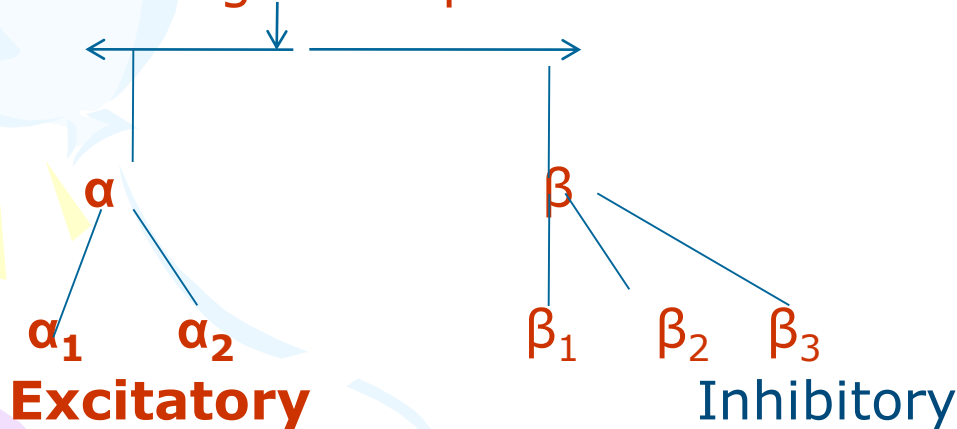
can be given orally

Direct action

Direct + Indirect

Natural- NE, Adrenaline, Dopamine
Synthetic -Dobutamine

Adrenergic Receptors



Second messenger system

β Receptor

G_s protein → + Adenylyl cyclase - cyclic AMP -Protein kinase
protein phosphorylation

α_1 - $G_q \rightarrow$ Phospholipase C - Phosphoinositides - IP_3 , DAG-
release of
Calcium

α_2 - $G_i \rightarrow \downarrow cAMP$

Organ

Radial Muscle (Iris)

Type of \textcircled{R}

α_1

Response

Contraction-dilatation of
pupil - Mydriasis

Heart

β_1

+ve Inotropic,
+ve chronotropic
 \downarrow Enhance conduction
Refractory period - Av Node

Arterioles - Skin

Mucosa

Abdominal

Viscera

α_1

Vasoconstriction

Veins

α_1

Venoconstriction

**Arterioles –skeletal
Muscle**

β_2 Vasodilatation

**Lung – Tracheal, bronchial
Muscle**

β_2 Relaxation- Bronchodilation

**Bronchial glands
G.I.T**

α_1 ↓ Secretion

$\alpha_1, \alpha_2, \beta_2$ ↓ Intestinal tone, Frequency
& amplitude of spon
contraction reduced.

**sphincters -
Urinary bladder**

α_1 Contraction

β_2 detrusor Relaxation

α_1 - Triagone Contraction

Uterus

β_2 Relaxation

**Kidney –Renin
secret**

β_1 ↑ Renin secretion

- Liver
- Pancreas (insulin)
- Fat cells
- Presynaptic
- Skeletal muscle

β_2

Glycogenolysis

α_1

↓ **secretion**

β_3

Lipolysis TG –fatty acids
Lipase

α_2

↓ **NE Release**

β

↑ **NE Release**

β_2

↑ **Change in contractility**
K⁺ Uptake.

• Receptor

α_1 β_1 β_2

α_1 β_1 ; no β_2

α_1 β_1 D_1 D_2

D_1

α_1 - Selective

α_2 - Selective

β_1 - - Selective

β_2 - - Selective

Agonist

Adrenaline

Norepinephrine

Dopamine

Fenoldopam

Phenylephrine,
Mephenteramine

Clonidine

Dobutamine

Salbutamol

Classification

- Chemical classification

Catecholamines

Non-catecholamines

- Depending on mode of action

Directly acting

NE, adrenaline, dopamine, salbutamol.

Indirectly acting

Tyramine

Mixed action

Ephedrine

Amphetamine



Vasopressors

NE, dopamine, mephenteramine



Cardiac stimulants

Adrenaline, Dopamine, Dobutamine



Bronchodilators

Salbutamol, Salmeterol



Nasal decongestants

Phenylephrine, Xylometazoline



Uterine relaxants

Ritodrine, Isoxsuprine

Epinephrine / Adrenaline

- **Catecholamine**
- **Adrenal medulla**
- **Receptors – α & β**
- **Actions :- Eye**
 - Mydriasis, ↓ I.O.P**
- **Heart**
- **Blood vessels**
- **B.P. – Systolic**
 - **Diastolic**
 - **Biphasic response**
 - **Dale's vasomotor reversal**
- **Bronchial Muscle- Relaxation**
- **Bronchial glands – ↓ secretion**
- **Mast cell (β_2) – ↓ Release of autacoids**
- **G.T.T**
 - **Uterus**
 - **Metabolic**

Uses

- **Anaphylactic shock**
- **Bronchial asthma**
- **Cardiac resuscitation**
- **Control of bleeding –Epistaxis**
- **With Local anesthetic**
- **Dipivefrine-Highly lipid soluble-good penetration-Glaucoma**

A/E

- **↑ B.P –Subarachnoid hemorrhage**
- **Ventricular fibrillation**
- **Tremors, palpitations**
- **Precipitate Angina**

Dopamine

Catecholamine

Receptors – α_1 , β_1 , Dopamine receptors.

At a dose- < 5 micrograms/ kg /min –D₁ receptors

Renal vasodilatation, Natriuretic

5-10 micrograms /kg /min –D₁receptors

β_1 , - heart

10-20 micrograms /kg/min - β_1 , receptors

> 20 micrograms /kg/min - α_1 receptors

Uses - oliguria

Heart failure

cardiogenic shock

Dobutamine

Mainly acts on β_1 receptors

Increases cardiac output.

No increase in heart rate.

Less increase in O₂ demand of heart as compared to dopamine.



Nor-adrenaline- used in shock in ICU

Doxidopa- prodrug –converted to NA, used in chronic orthostatic hypotension

Dopexamine- α_1 , D_1 , β_2 receptors, CCF

Mirabegron- β_3 receptors

• Ephedrine

- **Noncatecholamine**
 - **Direct + indirect action**
 - release of NE from nerve terminals
 - Tachyphylaxis
 - **Receptors α and β**
 - **Penetrates BBB**
 - **Resistant to MAO, COMT.**
 - **Uses – Chronic bronchial asthma**
 - Nasal decongestant
 - Hypotension following spinal anesthesia
- Lacks selectivity and efficacy low**

Selective α_1 stimulants

Mephenteramine

phenylephrine

**Hypotension following
Spinal anesthesia**

**As mydriatic –Fundoscopy
Nasal decongestant**

- **Selective β_2 stimulants**

Salbutamol

Terbutaline

Isoxsuprine

- **Uses – Bronchial asthma**
- **Uterine relaxant – Preterm labour**

β_2 agonist in bronchial asthma

- 1) **Bronchodilation - β_2 receptor**
- 2) **Stabilize mast cells - β_2 receptor**
- 3) **Enhance mucociliary clearance**
- 4) **Resistant to MAO, COMT**
- 5) **Longer duration of action**

Salbutamol

2mg, 4 mg tabs

Inhaler -100mg metered dose

Respiratory solution

Terbutaline

2.5, 5 mg tabs

Inj -0.5 mg/ml

Inhaler

- **Side –effects**

- 1) **Muscle tremors –Tolerance develops**
- 2) **Palpitations, tachycardia**
- 3) **Long-term use –diminished effectiveness**
Down regulation of receptors

Chronic asthma

Acute attack of asthma

Status asthmaticus.

Nasal decongestants

Oral

Pseudoephedrine

Phenylephrine

Topical

Xylometazoline

Oxymetazoline

Naphazoline

α_1 adrenergic agonist

1) α_1 $\text{\textcircled{R}}$ present on blood vessels supplying nasal mucosa – constrict vessels.

decrease blood supply ---- \downarrow congestion of mucosa
shrinkage of swollen turbinates

2) α_2 By facilitating release of NE

Increase nasal patency

Lower nasal resistance

Subjective relief of nasal symptoms.

Uses

- Common cold
- Allergic rhinitis
- Acute otitis media
- Sinusitis
- To visualize nasal, nasopharyngeal mucus memb.

S/E

Oral –Insomnia

Topical-stinging sensation

After congestion

Long term use- Loss of efficacy, Damage to nasal cilia, Atrophic rhinitis, Anosmia



- **Amphetamine –Not used**

- **Noncatecholamine**

- **Direct + Indirect action**

- **Abuse liability –CNS effects, ↑ attention span
Decreases appetite**

Endogenous

Site

Structure

Amino group

**Penetration
Of BBB**

Receptor

Action

Effects on organs.

Eye

Blood – vessels

α_1

Adrenaline

+

Adrenal Medulla

Catecholamine

CH₃

-

$\alpha_1 \beta$

Direct

Mydriasis

Contraction

Noradrenaline

+

**Adrenergic
nerve endings**

Catecholamine

No CH₃

-

$\nu_1 \beta_1$

Direct

Mydriasis

Contraction

Dopamine

+

**CNS- Neurotra-
nsmitter**

Basal ganglia

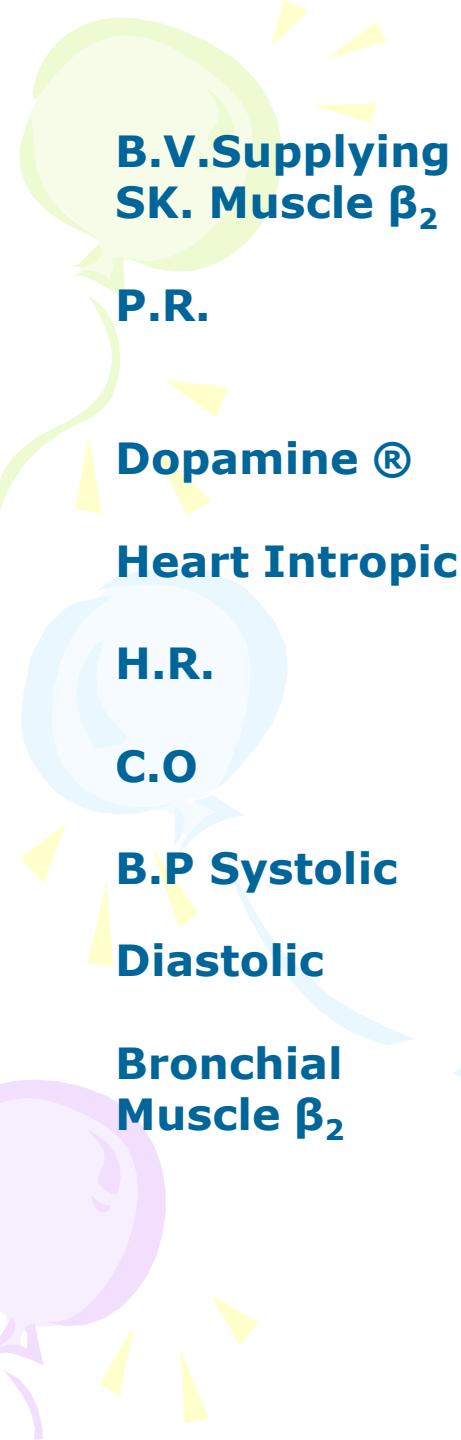
Catecholamine

-

$\alpha_1 \beta_1$

Direct

**Contraction
at dose >
20mg 1kg / min**



**B.V. Supplying
SK. Muscle β_2**

P.R.

Dopamine $\text{\textcircled{R}}$

Heart Intropic

H.R.

C.O

B.P Systolic

Diastolic

**Bronchial
Muscle β_2**

**Adrenaline
Vasodila
tation**

No. change/

+



No/ \downarrow

Bronchodilation

Noradrenaline

-

+



-

Dopamine

-

**at dose > 20 mg
1kg /min D1- Renal**

**cerebral Mesentreic
Vasodilatation**

+

**Unchanged
or ed**



-

	Adrenaline	Noradrenaline	Dopamine
G.I.T	Peristalsis	Peristalsis	-
Urinary bladder ($\beta 2$)	Detrusor relaxtion	-	-
Uterus	Relaxation	-	-
Renin Secretion($\beta 1$)			
Liver $\beta 2$	Glycogenolysis	+/-	
Lipolysis $\beta 3$	Lipolysis	+	
Metabolism	MAO, COMT	Uptake I	MAO, COMT
A/E		MAO, COMT	
		Extravasation	
		Necrosis	
Onset	Fast	Fast	Fast
Duration	Short	Short	Short



Uses

Adrenaline

Noradrenaline

Dopamine

of shock –To
T.B.P-Not
responding to
dopamine

olig urio
Heart failure
Cardiogenic
shock
endotoxic shock



Route

i.m S/C

i./v infusion
5% Dectrose

i.v infusion

- < 5 mg 1kg / min
 D_1 ®

- 5-10 mg 1kg / min
 D_1 ® β_1 ®

- 10-20mg 1kg / min
 β_1 ®

-> 20mg 1kg / min
 α ®



Ephedrine

Mephenteramine

Phenylephrine

Noncatechol

Noncatecholamine

Noncatecholamine

**Benzene ring
With OH at
Position
3 and 4**

-

-

3 OH.

Receptor

$\alpha_1 \beta_1 \alpha_1$

α_1

Action

**Direct Indirect
-by Releasing NE
From nerve
terminals**

Direct +Indirect

Direct

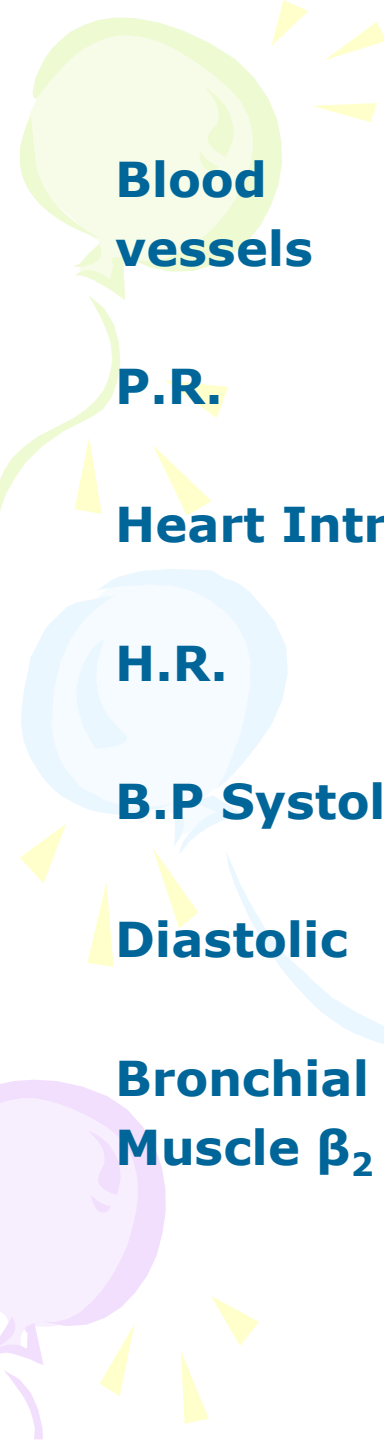
**Penetration
of BBB
Actions Eye**

+

+

+

Mydriasis



Ephedrine

Mephenteramine

Phenylephrine

**Blood
vessels**

Contraction

Contraction

Contraction

P.R.



Heart Intropic

+

+

-

H.R.



B.P Systolic



Diastolic

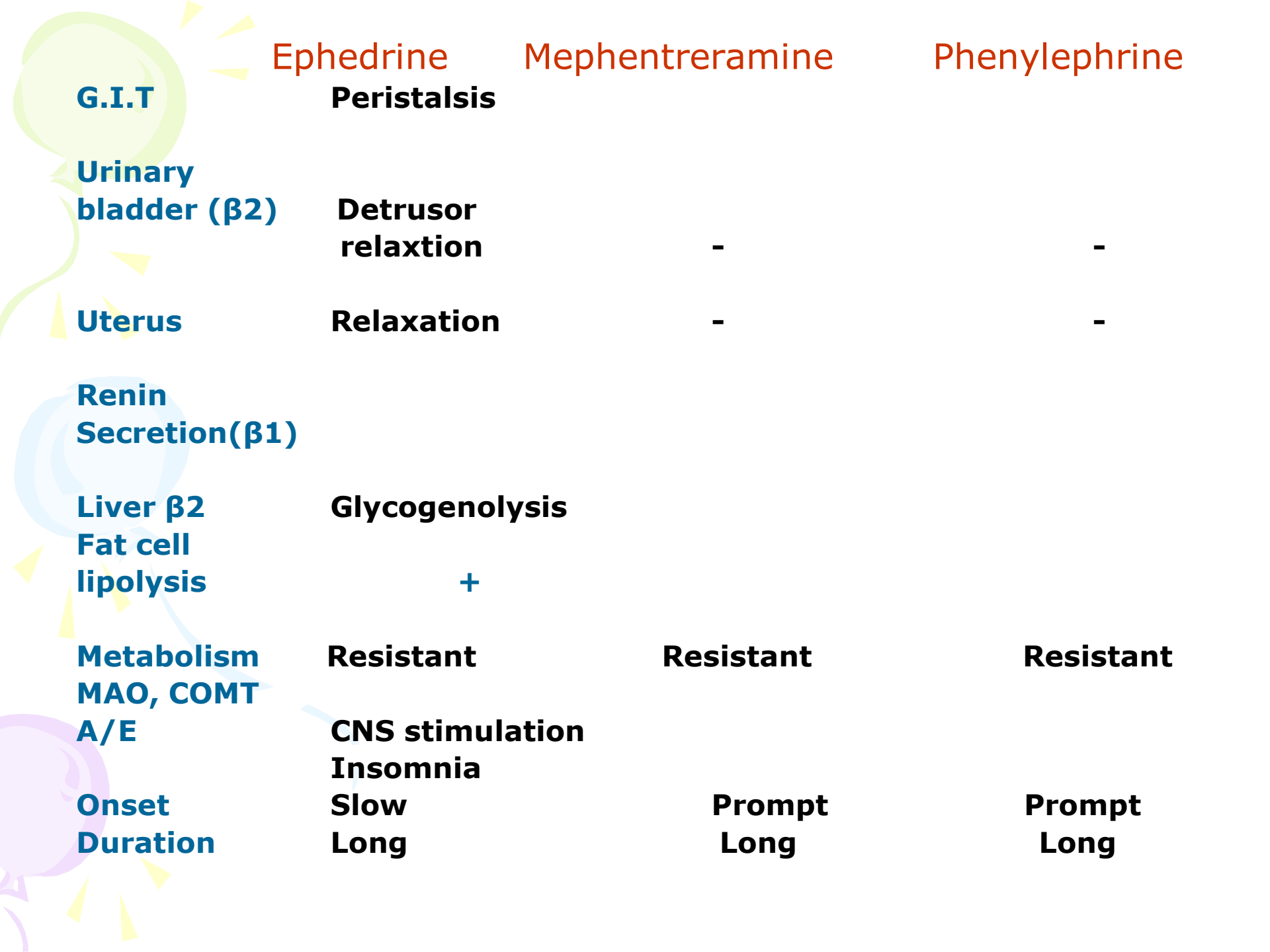


**Bronchial
Muscle β_2**

Bronchodilation

-

-



Ephedrine

Mephenteramine

Phenylephrine

Uses

**Chronic-bronchial
asthma, Hypotension**

**Of hypotension
after spinal anes**

**-Mydriatic
-Nasal
decongestant
-PAT**

Route

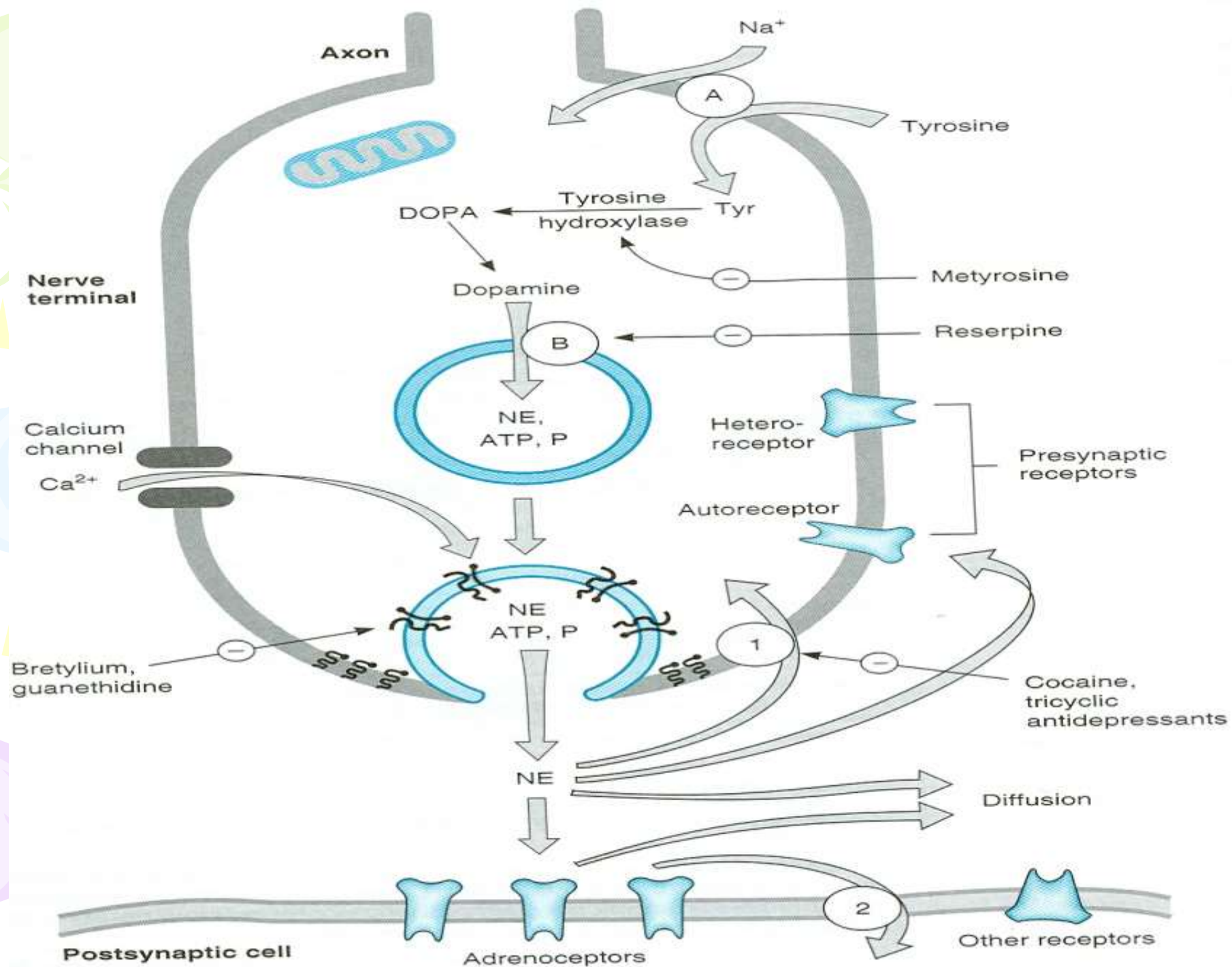
Oral

i.m Oral

**S/C i.m i.v, local
oral**

Tachyphylaxis

++



Axon

Na^+

Tyrosine

DOPA

Tyrosine hydroxylase

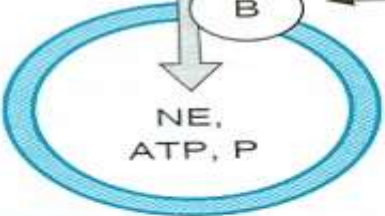
Tyr

Nerve terminal

Dopamine

Metyrosine

Reserpine



Calcium channel

Hetero-receptor

Presynaptic receptors

Ca^{2+}

Autoreceptor

Bretylium, guanethidine

NE, ATP, P

Cocaine, tricyclic antidepressants

NE

Diffusion

Postsynaptic cell

Adrenoceptors

Other receptors