

2013

DRUGS ACTING ON KIDNEYS

APRIL

May
2013

We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr
01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24

Thursday

11

15th Week • 101-264

DIURETICS \Rightarrow A. High ceiling (Inhibitors of $\text{Na}^+ - \text{K}^+ - 2\text{Cl}^-$ Cotransport) (Loop diuretics)

- i) Furosemide (Frusemide)
- ii) Bumetanide
- iii) Torsemide
- iv) Ethacrynic Acid

B. Medium Efficacy (Inhibitors of $\text{Na}^+ - \text{Cl}^-$ Symport)

- a) Benzothiadiazines \rightarrow
 - i) Hydrochlorothiazide
 - ii) Hydroflumethiazide
 - iii) Benzthiazide

- b) Thiazide-like \rightarrow
 - i) Chlorthalidone
 - ii) Metolazone
 - iii) Xipamide
 - iv) Indapamide
 - v) Clopamide

C. weak / Adjunctive diuretics

- a) Carbonic Anhydrase Inhibitors \rightarrow
 - i) Acetazolamide
 - ii) Dorzolamide

- b) Osmotic diuretics \rightarrow (short duration of activity)
 - i) Mannitol (IV)
 - ii) Isosorbide (ORALLY)
 - iii) Glycerol (ORALLY)
 - iv) Urea (IV)

c) Potassium sparing diuretics

- (i) Aldosterone Antagonists \rightarrow
 - i) Spironolactone
 - ii) Eplerenone

- (ii) Renal epithelial Na^+ Channel inhibitors \rightarrow
 - i) Amiloride
 - ii) Triamterene

May
2013

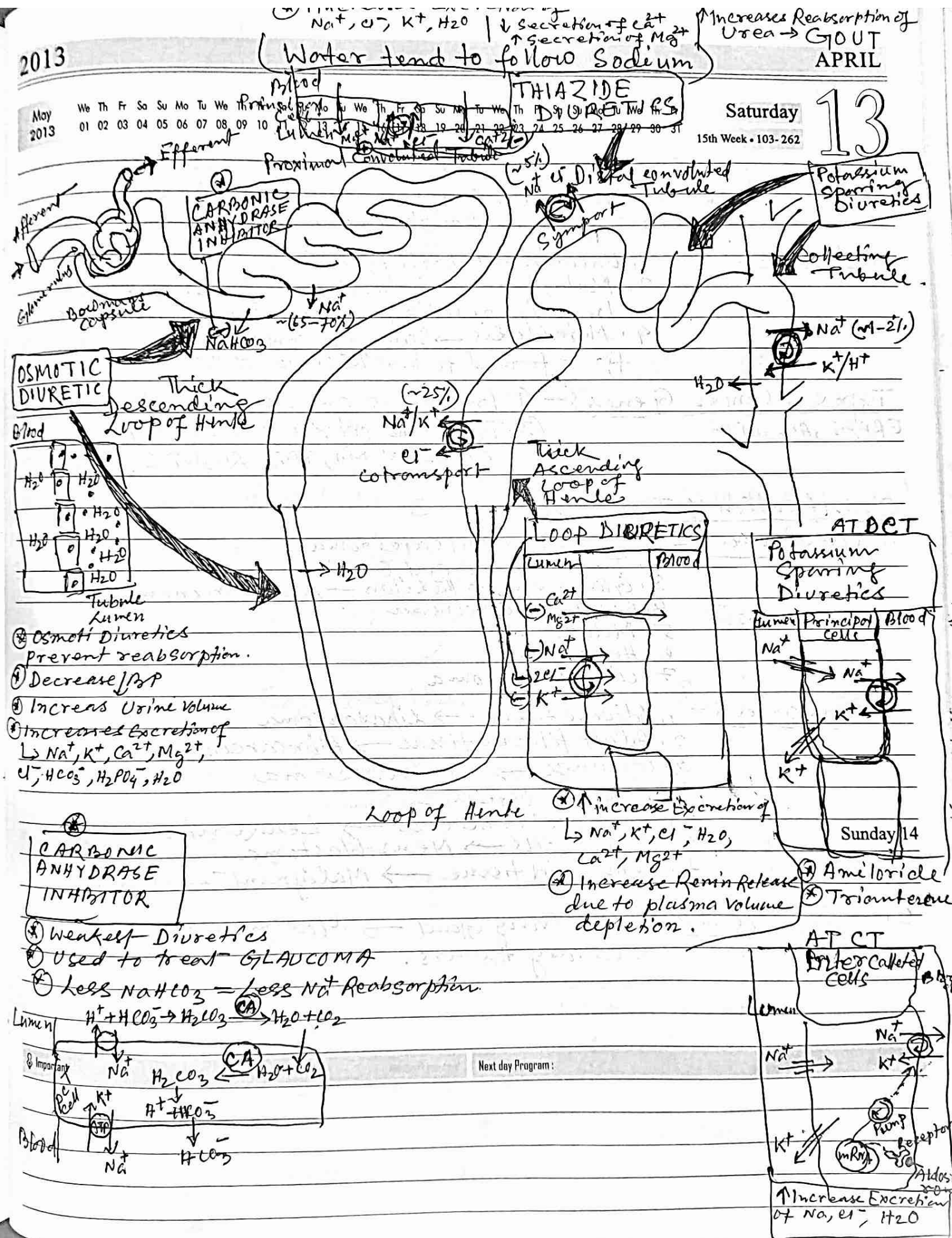
We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr
01	02	03	04	05	06	07	08	09	10

Increases Reabsorption of Urea \rightarrow GOUT

Saturday

15th Week • 103-262

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Friday

15th Week • 102-263

Mo Tu We Th Fr Sa Su Mo Tu We Th Fr Sa Su Mo Tu We Th Fr Sa Su Mo Tu We Th Fr Sa Su Mo Tu We

01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 •

April
2013UsesSide effectsA. Loop diuretics ⇒

- i) Heart Failure, ii) Hypercalcemic state
- iii) Refractory edemas iv) Acute Renal failure
- v) Acute Pulmonary edema
- vi) Anion overdose viii) Hypertension

- i) Hyperuricemia
- ii) Ototoxicity
- iii) Hypomagnesemia
- iv) Hypocalcemia
- v) Hypokalemia & Alkalosis
- vi) Sulfonamide hypersensitivity

B. Thiazides ⇒

- i) Hypertension, ii) CHF
- iii) Nephrolithiasis iv) Nephrogenic diabetes insipidus

- i) Sulfonamide hypersensitivity
- ii) Hypokalemia & Alkalosis
- iii) Hypercalcemia
- iv) Hyperuricemia
- v) Hyperglycemia
- vi) Hyperlipidemia

C. Carbonic Anhydrase Inhibitors ⇒

- i) Glaucoma ii) Metabolic Alkalosis
- iii) Acute Mountain Sickness

- i) Bicarbonaturia & Acidosis
- ii) Hypokalemia
- iii) Hyperchloremia
- iv) Paresthesias
- v) Renal Stone
- vi) Sulfonamide hypersensitivity.

D. Osmotic Diuretics ⇒

- i) ↓ IOP in Glaucoma
- ii) ↓ Intracerebral Pressure
- iii) Oliguric States

- i) Acute hypovolemia

E. Potassium Sparing Diuretics ⇒(a) Spironolactone ⇒

- i) Hyperaldosteronism
- ii) Adjunct to K-wasting diuretics
- iii) CHF

- i) Hyperkalemia & Acidosis
- ii) Antiandrogen symptoms

⚡ Important

Next day Program :

(b) Amiloride & Triamterene ⇒

- i) Adjunct to K-wasting diuretics
- ii) Lithium induced nephrogenic diabetes insipidus

- i) Hyperkalemia & Acidosis