

# Pharmacology of the ANS I. Parasympathomimetics/-lytics

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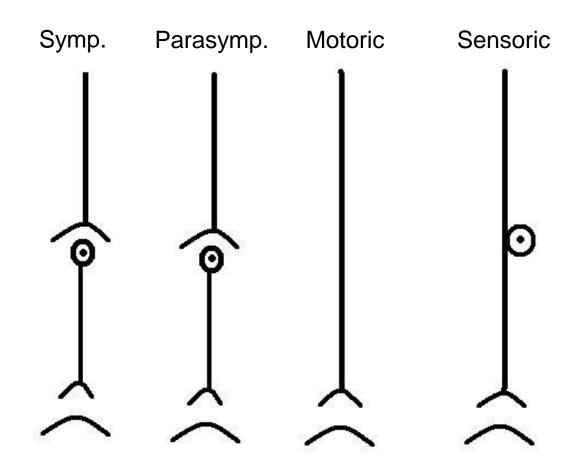
### The autonomic nervous system

- sympathetic (thoracolumbar)
- parasympathetic (brainstem, craniosacral, cranial-nerves!!!)
- enteric GIT -plexus submucosus (Meissner)
  - -plexus myentericus (Auerbach) (NANC!!!)
- independent autonomous
- to secure homeostasis
- manage vital functions (cardiac output, blood pressure, etc.)

sympathetic vs. parasympathetic



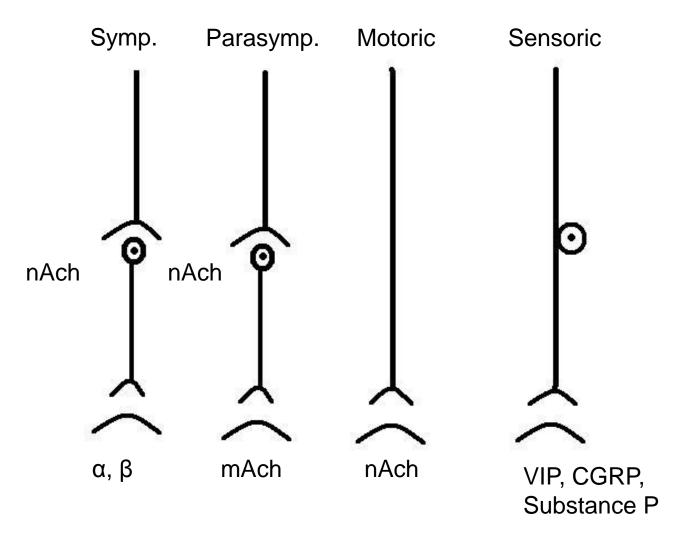








### Fibres





### Cholinergic transmission I.



Neurotransmitter - Receptor

Ach – AcCoA + choline (phosphatydyle-etanol-amin) - ChAT

Synthesis-Transport-Storage - TARGET!

- Hemicholinium-3 ChAT!!!
- colchicin (RA) vinblastin (chemotherapeutic drugs)
- vesamicol vesicular transport





# Cholinergic transmission II.

#### m Ach - metabotropic:

- $\blacksquare$  M<sub>1</sub> neural, IP<sub>3</sub>, DAG, Ca<sup>2+</sup>
- $M_2$  cardial, cAMP  $\downarrow$ ,  $K^+$
- M<sub>3</sub> glandular-endothelial, IP<sub>3</sub>, DAG, Ca<sup>2+</sup>
- $M_4$  CNS, cAMP  $\downarrow$ ,  $K^+$
- $\blacksquare$  M<sub>5</sub> CNS, IP<sub>3</sub>, DAG, Ca<sup>2+</sup>

#### n Ach - ionotropic:

- $\blacksquare$  N<sub>m</sub> NMJ, Na<sup>+</sup>, K<sup>+</sup>
- N<sub>n</sub> autonomic ganglia, Na<sup>+</sup>, K<sup>+</sup>





### Cholinergic transmission III.

#### Degradation/Hydorlysis:

- AchE: 2ms, RBC, synaptic cleft, spec. for Ach, active sides! N.B.! Cholinesterase inhibiting drugs
- ButchE, (PchE): not spec. (muscle relaxant), liver

#### Cholinergic transmission:

- Parasympathetic postggl. fibres
- NMJ
- Autonomic preggl. fibres
- CNS





# Cholinomimetic agents

- Def.:!
- Direct (Cholinoceptor activating drugs) vs. Indirect (ChE-inhibiting drugs)

Cholinoceptor activating drugs: Alkaloids – Choline esters

Alkaloids:

- muscarine: Amanita muscaria, mACh

- pilocarpine: Pilocarpinium chloratum,

glaucoma th., hypersalivation

-lobeline, arecoline: euphoriac effect





# Cholinoceptor activating drugs

Choline esters: -metacholine: th. of urinary retention

-carbachol: GIT, eye-drop 3%

-betanechol: GIT, prokinetic effect

#### Effects:

- heart:- (-) chronotropic, (-) inotropic M<sub>2</sub>R
- vessels:- intact endothel: M<sub>3</sub>-IP<sub>3</sub>, DAG, Ca<sup>2+</sup>- NO
   (EDRF)(endothel) cGMP(smooth muscle)- vazodilation!
  - injured endothel: M<sub>3</sub>-IP<sub>3</sub>, DAG, Ca<sup>2+</sup> (smooth muscle) vazoconstriction!





# Cholinoceptor activating drugs

Respiratory tract: -bronchial constriction, secretion \( \)

GIT: -motility\u2221, peristaltic effect\u2221, secretion\u222,

kolinokinetic effect

Urinary tract.: - motility↑

Miscellaneous glands: -secretion \( \)

Eye: -pupil\u00c4, miosis

-m. ciliaris constriction, near - vision, macropsia

-th. of glaucoma - Schlemm canals, Fontana canals, outflow of humour aquosus





# Choline esterase-inhibiting drugs

Reversible vs. Irreversible

Alcohols (kvaterner) – Carbamates - Organophosphates

- edrophonium (Tensilon), galantamin
- neostigmin (N<sup>+</sup>), physostigmin (eserine), pyridostigmin (MG)
- DFP, Soman

Mech. of action.: active sides!!! revers.-irrevers.

Th.: - Glaucoma

- GIT retention ileus (neostigmin)
- -Atropin intox. (physostigmin)
- -Myasthenia gravis (Tensilon)





# Intoxication of organophosphates

Nerve gases: Soman, Tabun, Sarin

Pesticides/Insecticides: Diclorvos, Bi58, DFP

Cholinomimetics effects:

- hypersalivation, sweating
- miosis
- HR↓- BP↓
- Bronchial constriction asphyxia
- GIT↑ vomitus, diarrhea
- CNS somnolentia, coma
- convulsions





# Intoxication of organophosphates

Th.: -Decontamination, CPR, vital signs/parameters!!!

- Antidotum!
- -Spec. th.: Oxims

Pralidoxim-chlorid, Obidoxim-iodid

- (nucleophil agents)





Def.:!

nAch: - hexamethonium (ggl. blocking dru)

- curare (NMJ-muscle relaxant drugs)

mAch: - atropine, scopolamine, etc.

Atropos –mytology

NB.!-poison!







Atropa belladonna - atropine
Belladonnae folium extractum siccum normatum
Hyoscyamus niger - scopolamin
Synthetic – ipratropium - bromid

Atropine: -D,L hyoscyamine

- Atropinium sulfuricum

- Atropinum sulfuricum<sup>®</sup>, Atropin<sup>®</sup>

Mechanism of action:

- competitive antagonist on mAchR





#### Effects:

- Heart:- (+) chronotropic, tachycardia but! primarily bradycardia (stimulate central nuclei of n. X.) not effect on denervated heart!
- Vessels:- RR↑, but! high dose-toxic!
- Bronchial tract: -bronchodilatation, secretion↓
- GIT: -motility↓, secretion ↓, -atonic obstipation (NB.: morfin)
- Genitourinary.: motility ↓
- Miscellaneous tract: secretion ↓, sweat glands!!! S.Ch.!!! atropine fever!!!
- Eye: -pupil↑, mydriasis m. dilatator pupillae, -fotophobia
   -cycloplegia, unable to accomodate, micropsia
- CNS: -sedative
  - vestibular disturbances↓
  - extrapyr. system





- Ipratropium-bromide: N<sup>+</sup> no effect in CNS -aerosol — inhalation route -anti-asthmatic drug
- Scopolamine: -TTS
  - vestibular disturbances-motion sickness
  - mydriatic in the cc. 0,5%
- Benzatropine: N, therapy of Parkinson disease
- Pirenzepine: -gastric ulcus





### Therapeutic applications:

- anaesthesia, premedication:-protect against bradycardia-secretion↓
- Parkinson disease
- diarrhea, hypermotility (Reasec®)
- motion sickness
- colica abd. (Troparinum Combinatum®)
- intoxication of organophosphates
- bradycardia

Max. dose! 0,3 mg-1mg  $\Sigma$ :3mg





#### Intoxication of atropine:

- mydriasis
- dry skin
- tachycardia
- extrapyramidal movement disorders
- agitility, agressivity
- atropin fever

Th.: -ChE blocking drug – CNS - physostigmine (N)!!!

-sedatohipnotics