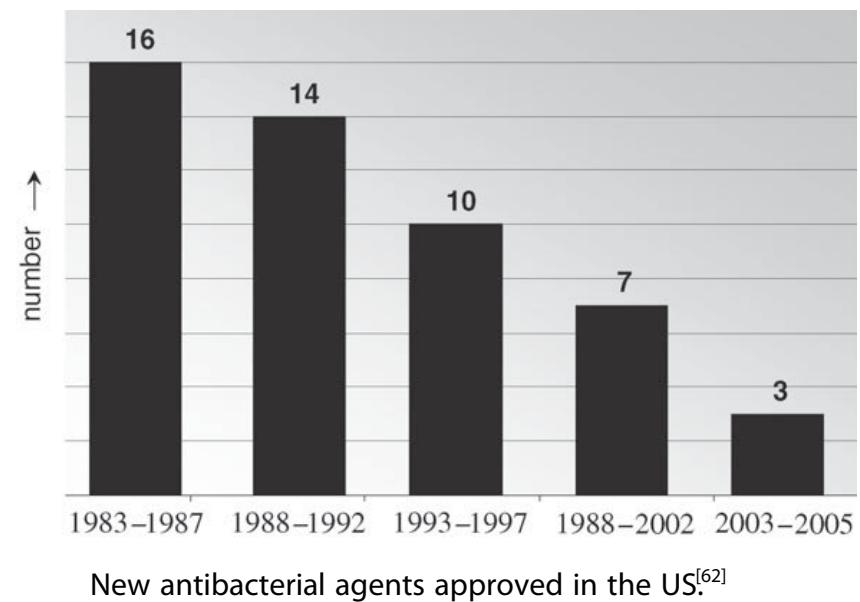


# Antibacterial Drugs

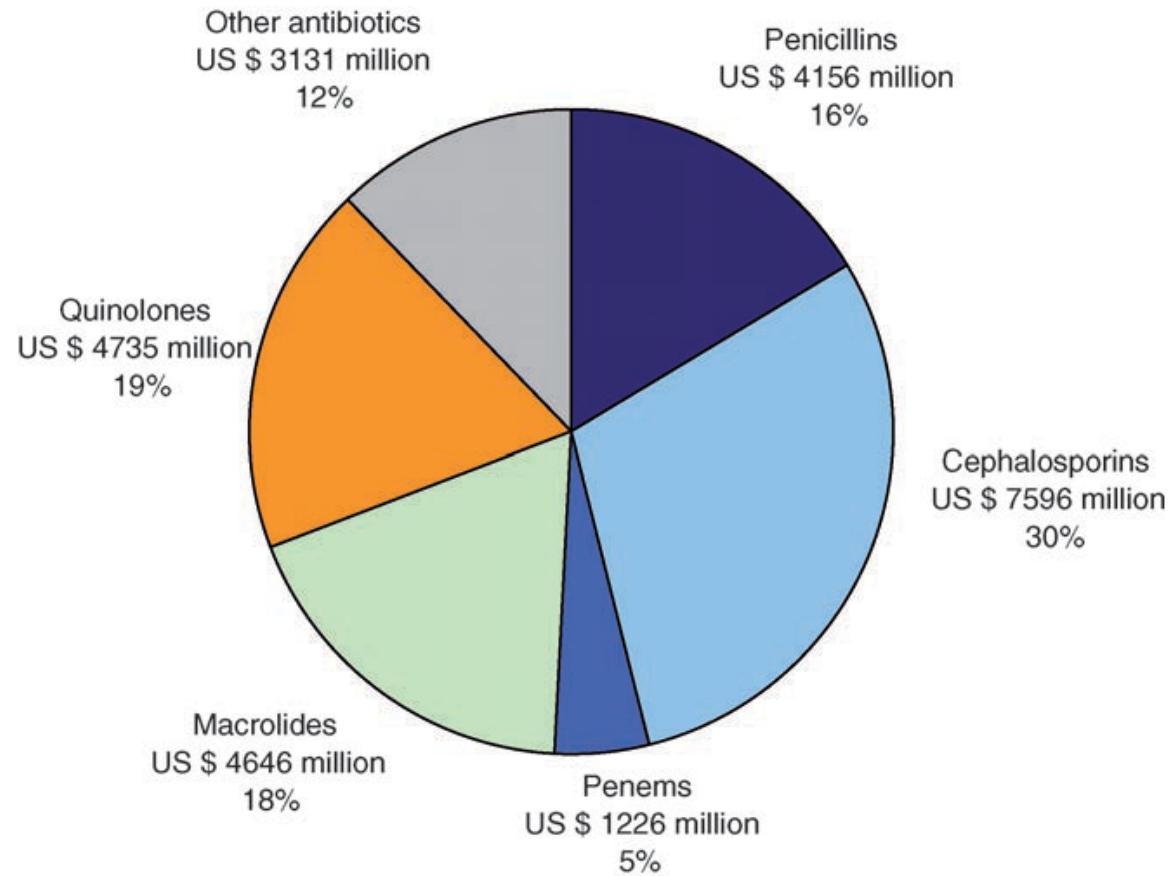
# Antibiotics: Commercial Aspects

Table : Top 10 antibacterial companies by global sales of antibiotics in 2004 (Source: Wood Mackenzie<sup>[69]</sup>).

Rank	Company	US \$ million
1	Pfizer	2938
2	GlaxoSmithKline	2425
3	Abbott	1657
4	Bayer	1346
5	Johnson & Johnson	1295
6	Hoffmann-La Roche	1142
7	Wyeth	846
8	Merck & Co.	704
9	Daiichi	687
10	Shionogi	678
Others		12064
Total		25782



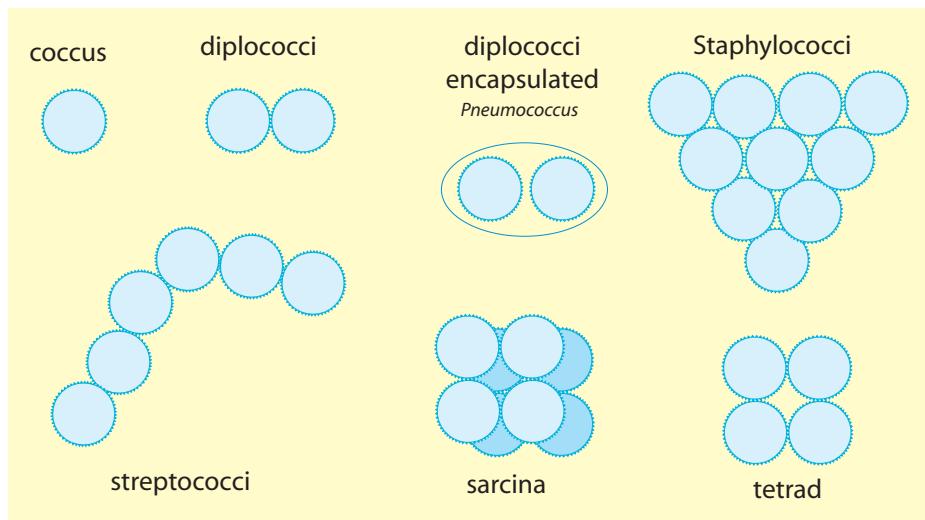
- Bacteristatics: Inhibit cell growth and cell division
- Bactericidals: Kill bacteria



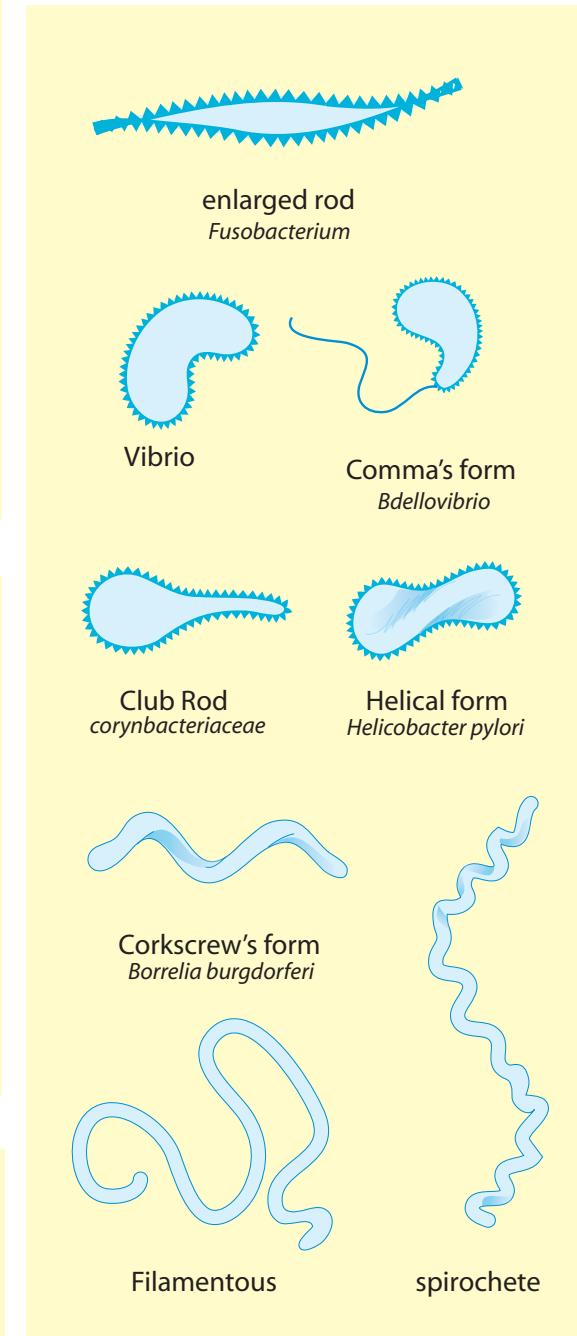
Global sales of the major antibacterial classes in 2004 (from Wood Mackenzie<sup>[69]</sup>).

# Classification of bacteria according to shape

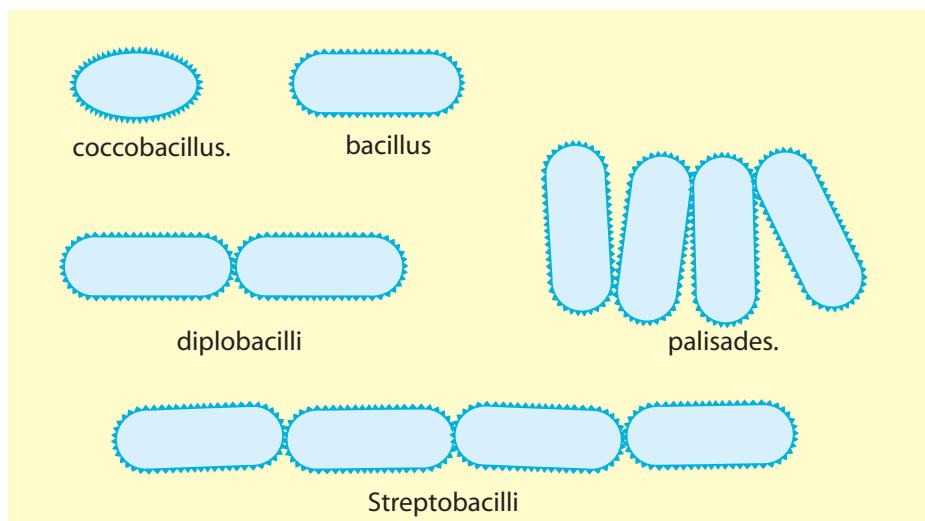
## Cocci



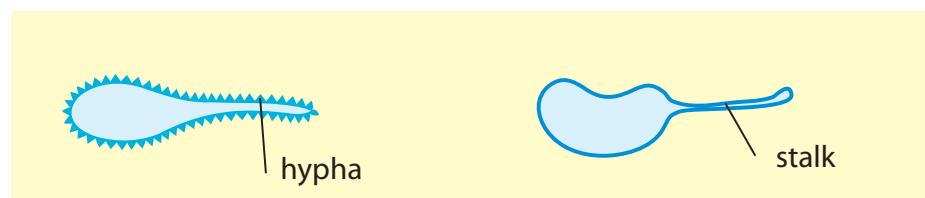
## Others



## Bacilli



## Budding and appendaged bacteria



## Gram-positive

## Gram-negative

### Cocci

- *Enterococcus*
- *Peptostreptococcus*
- *Staphylococcus*
- *Streptococcus*

### Rods

- *Bacillus*
- *Clostridium*
- *Corynebacterium*
- *Erysipelothrix*
- *Lactobacillus*
- *Listeria*
- *Propionibacterium*

### Cocci

- *Acinetobacter*
- *Moraxella*
- *Neisseria*

### Nonenteric rods

- *Bartonella*
- *Bordetella*
- *Brucella*
- *Francisella*
- *Hemophilus*
- *Legionella*
- *Pasteurella*
- *Pseudomonas*

### Enteric rods

- *Bacteroides*
- *Campylobacter*
- *Enterobacter*
- *Escherichia*
- *Fusobacterium*
- *Helicobacter*
- *Klebsiella*
- *Prevottella*
- *Proteus*
- *Providencia*
- *Pseudomonas*
- *Salmonella*
- *Serratia*
- *Shigella*
- *Vibrio*
- *Yersinia*

Pathogen	Infectious Disease
<i>Staphylococcus aureus</i>	skin and wound infection, abscess, bacteremia, nosocomial pneumonia, endocarditis, toxic shock syndrome
<i>Streptococcus pneumoniae</i>	upper respiratory infection, pneumonia, otitis, sinusitis, meningitis
<i>Streptococcus pyogenes</i>	pharyngitis, tonsillitis, skin and soft-tissue infection, scarlet fever
<i>Enterococcus faecalis</i>	bacteremia, endocarditis, urinary-tract infection, peritonitis
<i>Enterococcus faecium</i>	bacteremia, endocarditis, peritonitis
<i>Escherichia coli</i>	bacteremia, urinary-tract and gastrointestinal infection
<i>Klebsiella pneumoniae</i>	hospital-acquired pneumonia, bacteremia
<i>Proteus spp.</i>	urinary-tract infection
<i>Haemophilus influenzae</i>	respiratory infection, otitis, sinusitis, meningitis
<i>Moraxella catarrhalis</i>	respiratory infection
<i>Pseudomonas aeruginosa</i>	nosocomial pneumonia, burn infection, bacteremia
<i>Acinetobacter spp.</i>	pneumonia in immuno-compromised patients
<i>Mycobacterium tuberculosis</i>	tuberculosis

# Overview of Bacterial infections

## Bacterial meningitis

- *Streptococcus pneumoniae*
- *Neisseria meningitidis*
- *Haemophilus influenzae*
- *Streptococcus agalactiae*
- *Listeria monocytogenes*

## Otitis media

- *Streptococcus pneumoniae*

## Pneumonia

Community-acquired:

- *Streptococcus pneumoniae*
- *Haemophilus influenzae*
- *Staphylococcus aureus*

Atypical:

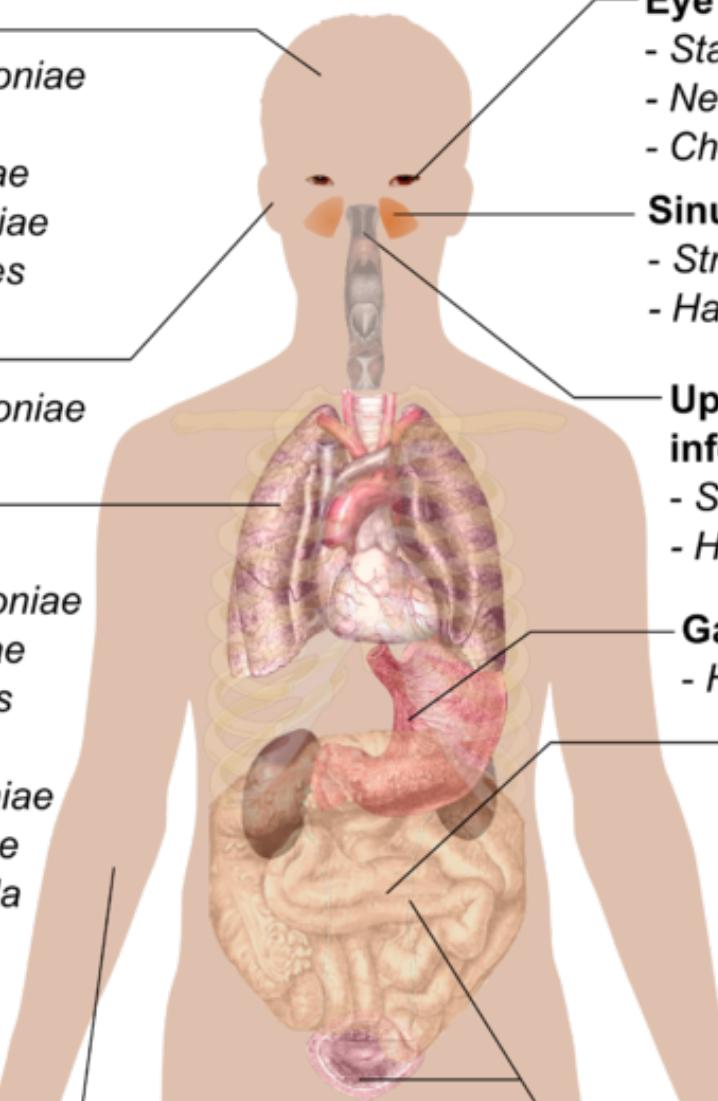
- *Mycoplasma pneumoniae*
- *Chlamydia pneumoniae*
- *Legionella pneumophila*

Tuberculosis

- *Mycobacterium tuberculosis*

## Skin infections

- *Staphylococcus aureus*
- *Streptococcus pyogenes*
- *Pseudomonas aeruginosa*



## Eye infections

- *Staphylococcus aureus*
- *Neisseria gonorrhoeae*
- *Chlamydia trachomatis*

## Sinusitis

- *Streptococcus pneumoniae*
- *Haemophilus influenzae*

## Upper respiratory tract infection

- *Streptococcus pyogenes*
- *Haemophilus influenzae*

## Gastritis

- *Helicobacter pylori*

## Food poisoning

- *Campylobacter jejuni*
- *Salmonella*
- *Shigella*
- *Clostridium*
- *Staphylococcus aureus*
- *Escherichia coli*

## Sexually transmitted diseases

- *Chlamydia trachomatis*
- *Neisseria gonorrhoeae*
- *Treponema pallidum*
- *Ureaplasma urealyticum*
- *Haemophilus ducreyi*

## Urinary tract infections

- *Escherichia coli*
- Other Enterobacteriaceae
- *Staphylococcus saprophyticus*
- *Pseudomonas aeruginosa*

# Medically relevant

## gram-positive

- *Bacillus* - degrades complex macromolecules- dust, water, plants, animals fur
- *Bacillus anthracis*: Common in cattle, Bioterrorism
- *Bacillus cereus*: food, rice, potatoes, meat
- *Clostridium perfringens*: progressive, toxins diffuse to healthy tissue, Surgical, compound fractures, sores, septic abortions, gunshot wounds, crushing injuries with dirt

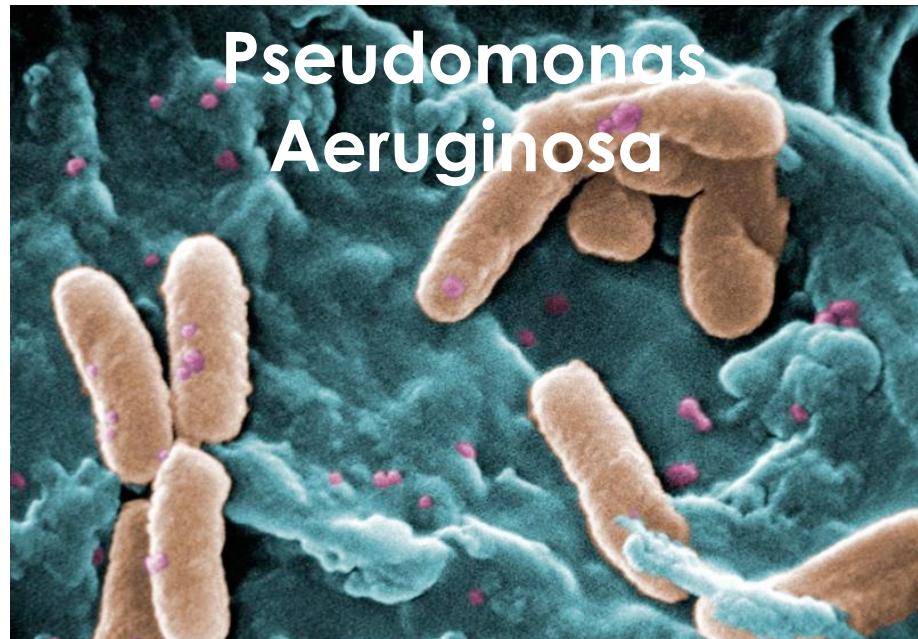
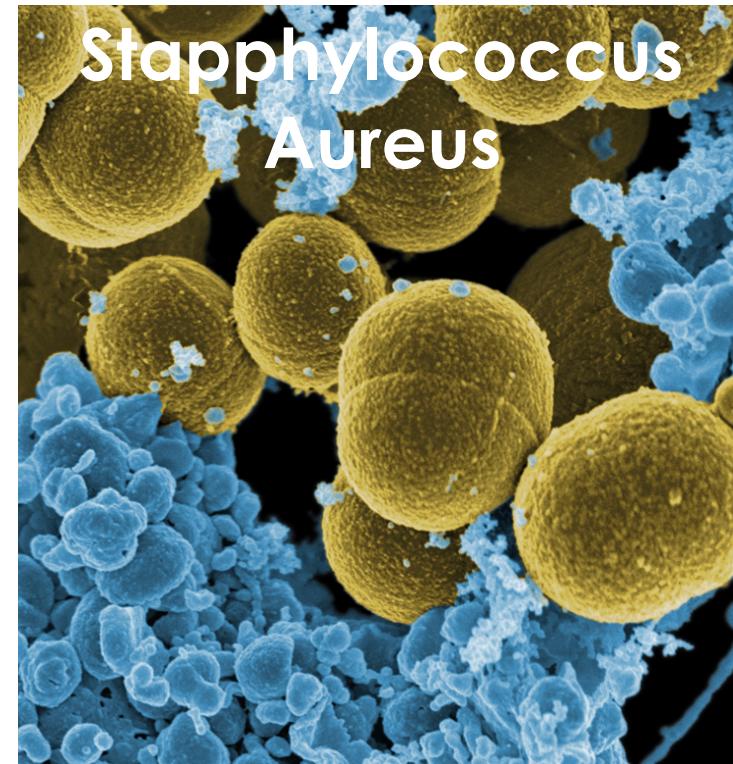
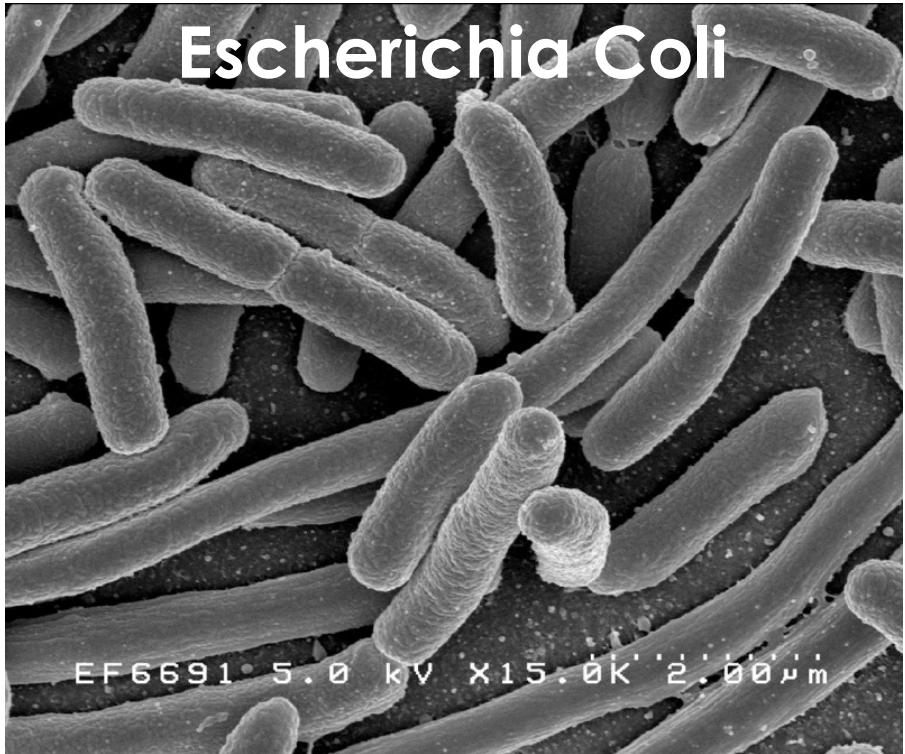
## gram-negative cocci

- sexually transmitted disease (*Neisseria gonorrhoeae*)
- meningitis (*Neisseria meningitidis*)
- respiratory symptoms (*Moraxella catarrhalis*).

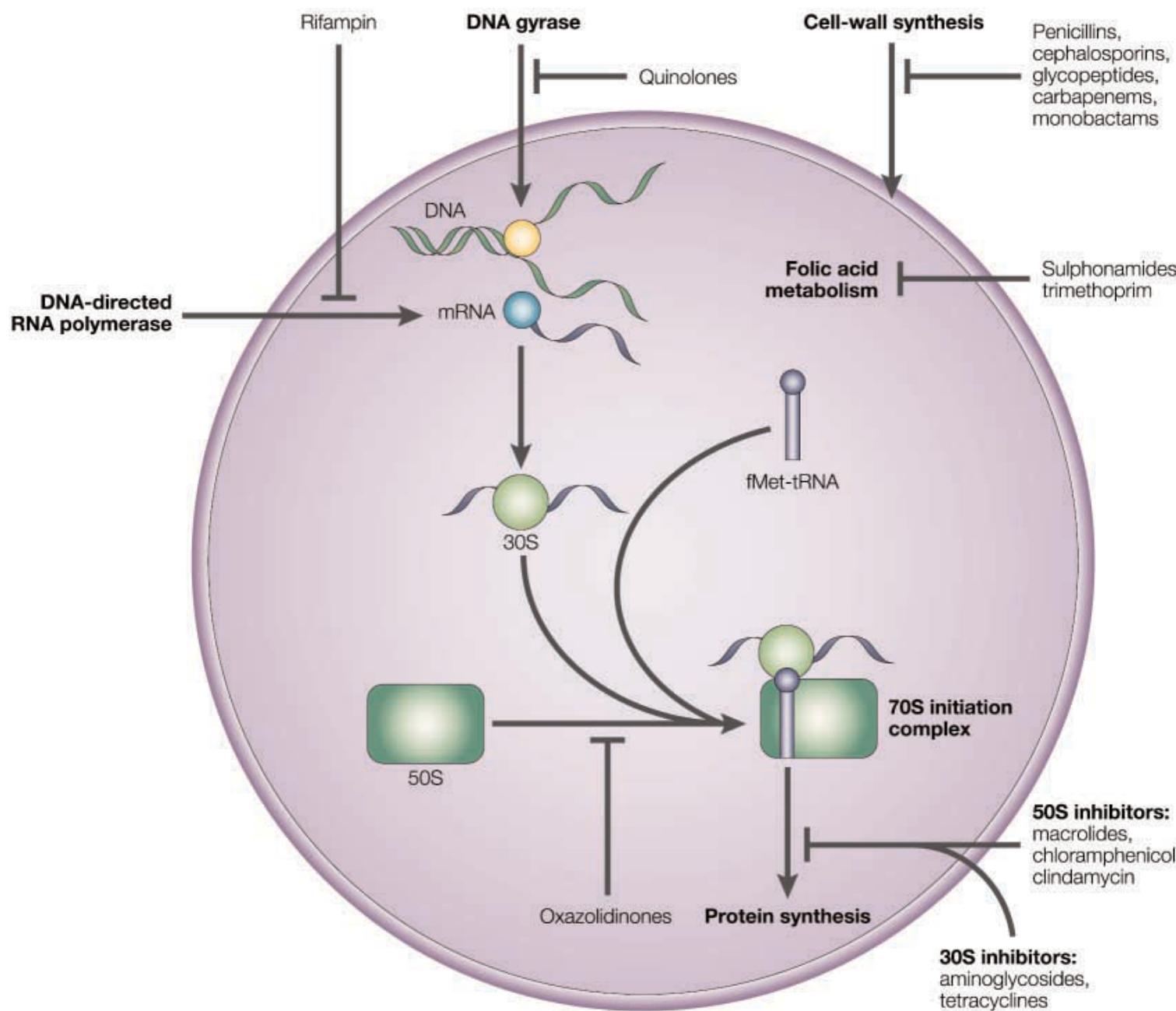
## gram-negative bacilli

- respiratory problems (*Hemophilus influenzae*, *Klebsiella pneumoniae*, *Legionella pneumophila*, *Pseudomonas aeruginosa*)
- urinary problems (*Escherichia coli*, *Proteus mirabilis*, *Enterobacter cloacae*, *Serratia marcescens*)
- gastrointestinal problems (*Helicobacter pylori*, *Salmonella enteritidis*, *Salmonella typhi*)

# Bacteria under the electron microscope



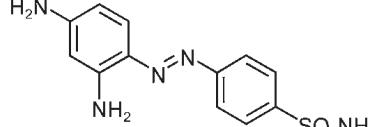
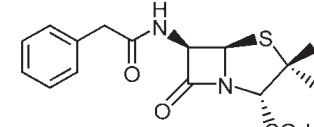
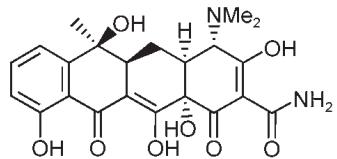
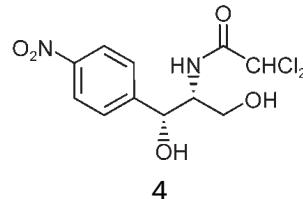
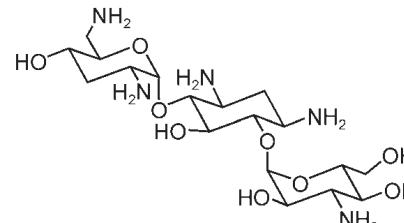
# Strategy of Antibacterial Drugs



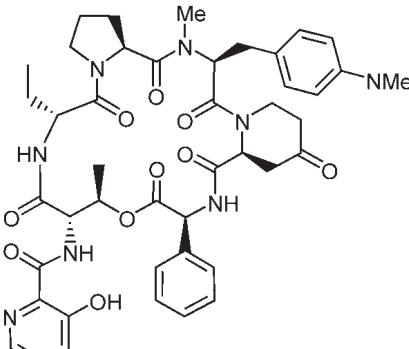
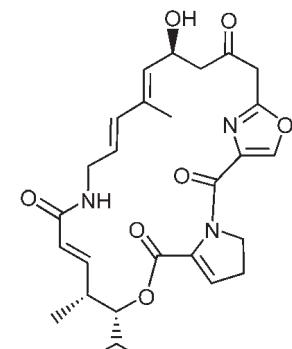
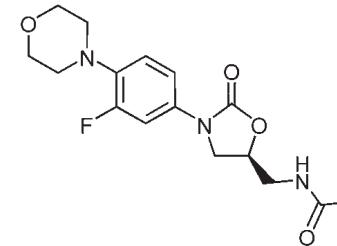
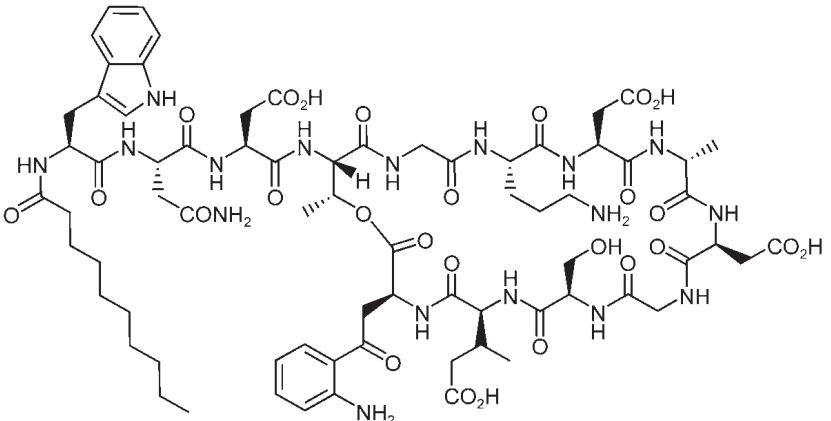
# The mode of action of antibacterial compounds

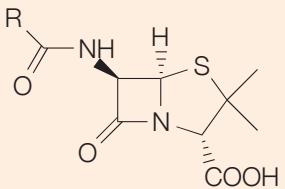
- Inhibition of metabolism (antimetabolites): Sulfonamides
- Inhibition of bacterial cell wall synthesis: Penicillins, Cephalosporins, Vancomycin
- Interaction with the plasma membrane: Polymyxin, Tyrothricin
- Disruption of protein synthesis: Rifamycins, aminoglycosides, tetracyclines, chloramphenicol
- Inhibition of nucleic acid transcription and replication: Nailidixic acid, proflavine

# The introduction of antibacterials

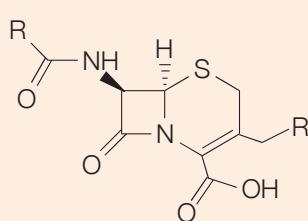
Year	Class	Target	Example	Structure
1935	sulfonamide	folate pathway	prontosil	 1
1940	$\beta$ -lactam	cell wall	penicillin G	 2
1949	polyketides	protein biosynthesis	tetracycline	 3
1949	phenylpropanoids	protein biosynthesis	chloramphenicol	 4
1950	aminoglycosides	protein biosynthesis	tobramycin	 5

Year	Class	Target	Example	Structure
1952	macrolides	protein biosynthesis	erythromycin A	<p>6</p>
1958	glycopeptides	cell wall	vancomycin	<p>7</p>
1962	quinolones (synthetic)	DNA replication	ciprofloxacin	<p>8</p>

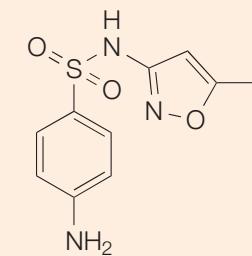
Year	Class	Target	Example	Structure	
1962	streptogramins	protein biosynthesis	pristinamycin (I <sub>A</sub> + II <sub>A</sub> )	 9	 10
...					
2000	oxazolidinones (synthetic)	protein biosynthesis	linezolid		 11
2003	lipopeptides	bacterial membrane	daptomycin		 12



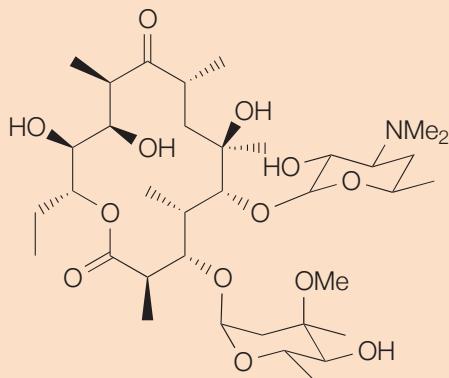
**Penicillins**



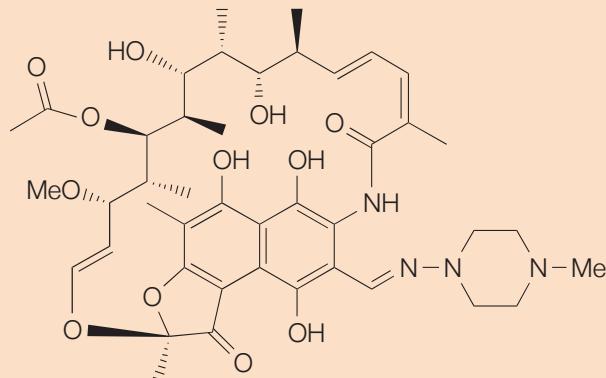
**Cephalosporins**



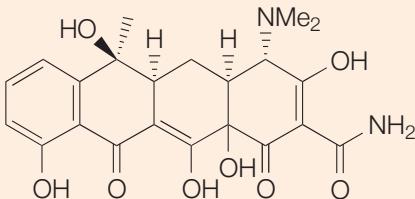
**Sulphomethoxazole**



**Erythromycin A**



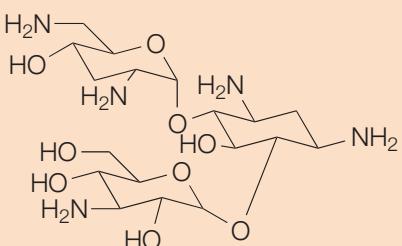
**Rifampin**



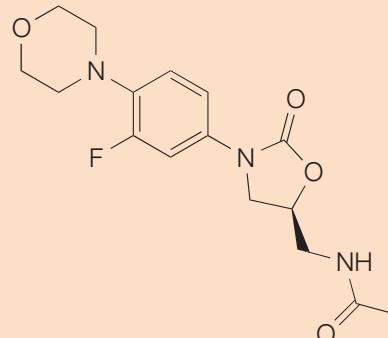
**Tetracycline**



**Trimethoprim**



**Tobramycin**



**Linezolid**

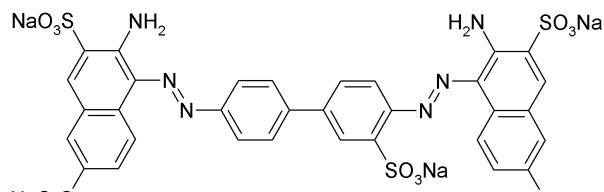
Table 1 | Main classes of antibiotics

Class	Examples
<b><math>\beta</math>-Lactams</b>	
Penicillins	Penicillin G, penicillin V, methicillin, oxacillin, cloxacillin, dicloxacillin, nafcillin, ampicillin, amoxicillin, carbenicillin, ticarcillin, mezlocillin, piperacillin, azlocillin, temocillin
Cephalosporins	
First generation	Cepalothin, cephapirin, cephradine, cephaloridine, cefazolin
Second generation	Cefamandole, cefuroxime, cephalexin, cefprozil, cefaclor, loracarbef, cefoxitin, cefmetazole
Third generation	Cefotaxime, ceftizoxime, ceftriaxone, cefoperazone, ceftazidime, cefixime, cefpodoxime, cefributen, cefdinir
Fourth generation	Cefpirome, cefepime
Carbapenems	Imipenem, meropenem
Monobactams	Astrenonam
<b><math>\beta</math>-Lactamase inhibitors</b>	Clavulanate, sulbactam, tazobactam
<b>Aminoglycosides</b>	
	Streptomycin, neomycin, kanamycin, paromycin, gentamicin, tobramycin, amikacin, netilmicin, spectinomycin, sisomicin, dibekalin, isepamicin
<b>Tetracyclines</b>	Tetracycline, chlortetracycline, demeclocycline, minocycline, oxytetracycline, methacycline, doxycycline
<b>Rifamycins</b>	Rifampicin (also called rifampin), rifapentine, rifabutin, bezoxazinorifamycin, rifaximin
<b>Macrolides</b>	Erythromycin, azithromycin, clarithromycin
<b>Lincosamides</b>	Lincomycin, clindamycin
<b>Glycopeptides</b>	Vancomycin, teicoplanin
<b>Streptogramins</b>	Quinupristin, dalfopristin
<b>Sulphonamides</b>	Sulphanilamide, para-aminobenzoic acid, sulfadiazine, sulfisoxazole, sulfamethoxazole, sulfathalidine
<b>Oxazolidinones</b>	Linezolid
<b>Quinolones</b>	Nalidixic acid, oxolinic acid, norfloxacin, pefloxacin, enoxacin, ofloxacin/levofloxacin, ciprofloxacin, temafloxacin, lomefloxacin, fleroxacin, grepafloxacin, sparfloxacin, trovafloxacin, clinafloxacin, gatifloxacin, moxifloxacin, sitafloxacin
<b>Others</b>	Metronidazole, polymyxin, trimethoprim

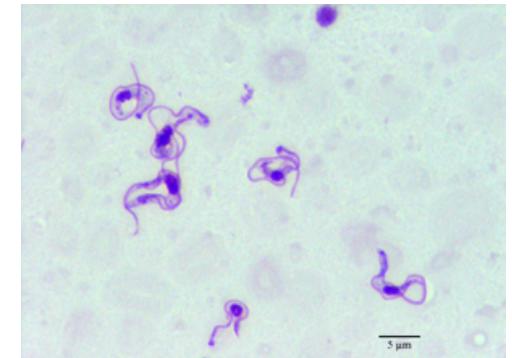
# History of Antimetabolites

**Paul Ehrlich** developed staining dyes, and for example discovered mast cells. He tested more than 100 synthetic dyes for biological activity against *Trypanosoma equinum*, responsible for a disease that horses suffered from.

The first active compound was **trepan red**

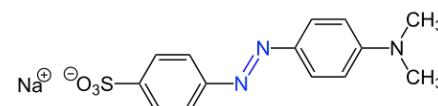


trepan red



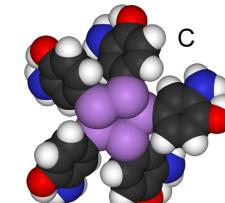
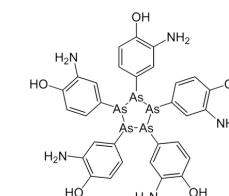
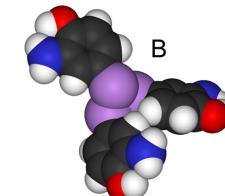
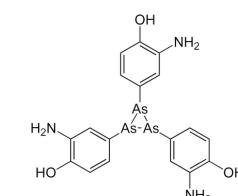
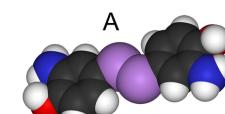
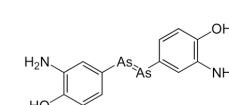
*Trypanosoma equinum*

trepan red belongs to the class of **azo dyes**



methyl-orange

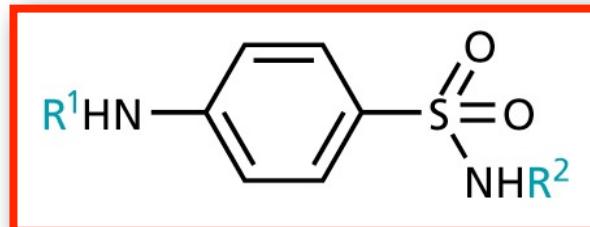
**salvarsan** is a anti-syphilis compound that is chemically related



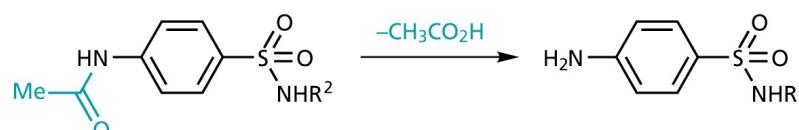
Hoechst was a company that produced ago dyes, and the discovery of these antibiotics triggered the transition to pharma industry !

# Antimetabolites

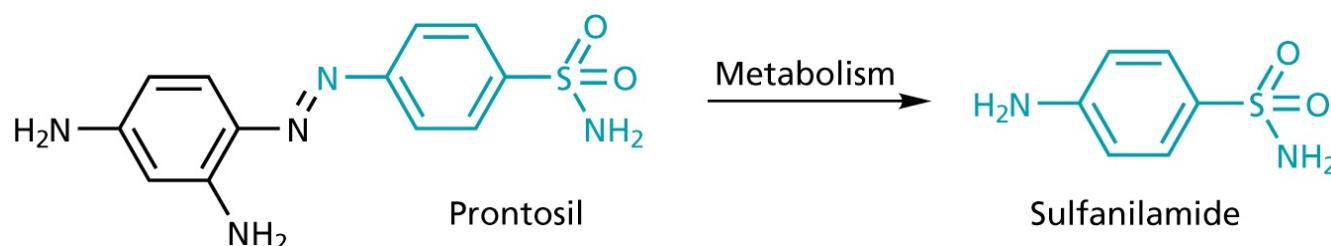
- **Sulfonamides**



- aromatic ring and sulfonamide required, ring must be para-substituted.
- the sulfonamide nitrogen must be primary or secondary
- $\text{R}^1$  must be H (or acyl),  $\text{R}^2$  is variable

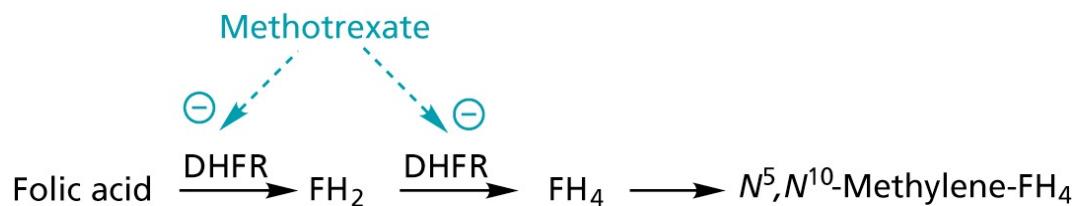


- active form can be formed in vivo (prodrugs)

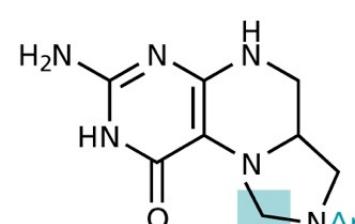
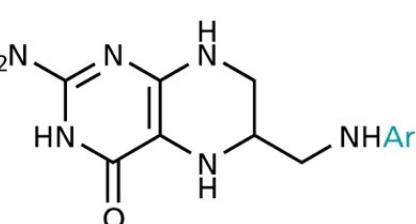
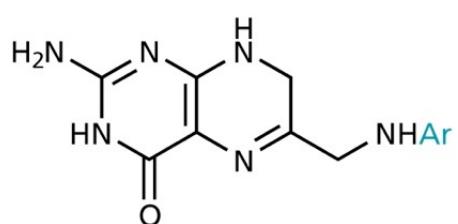
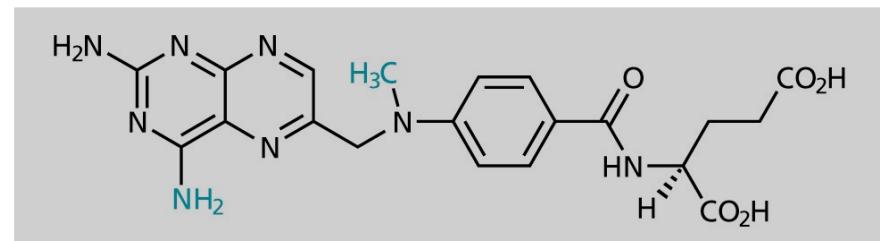
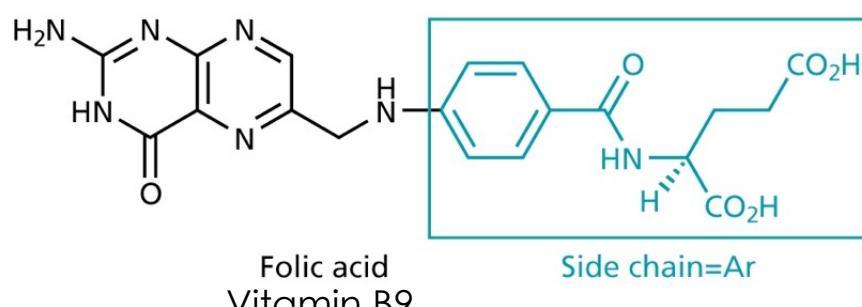


1932, Bayer

# Antimetabolites



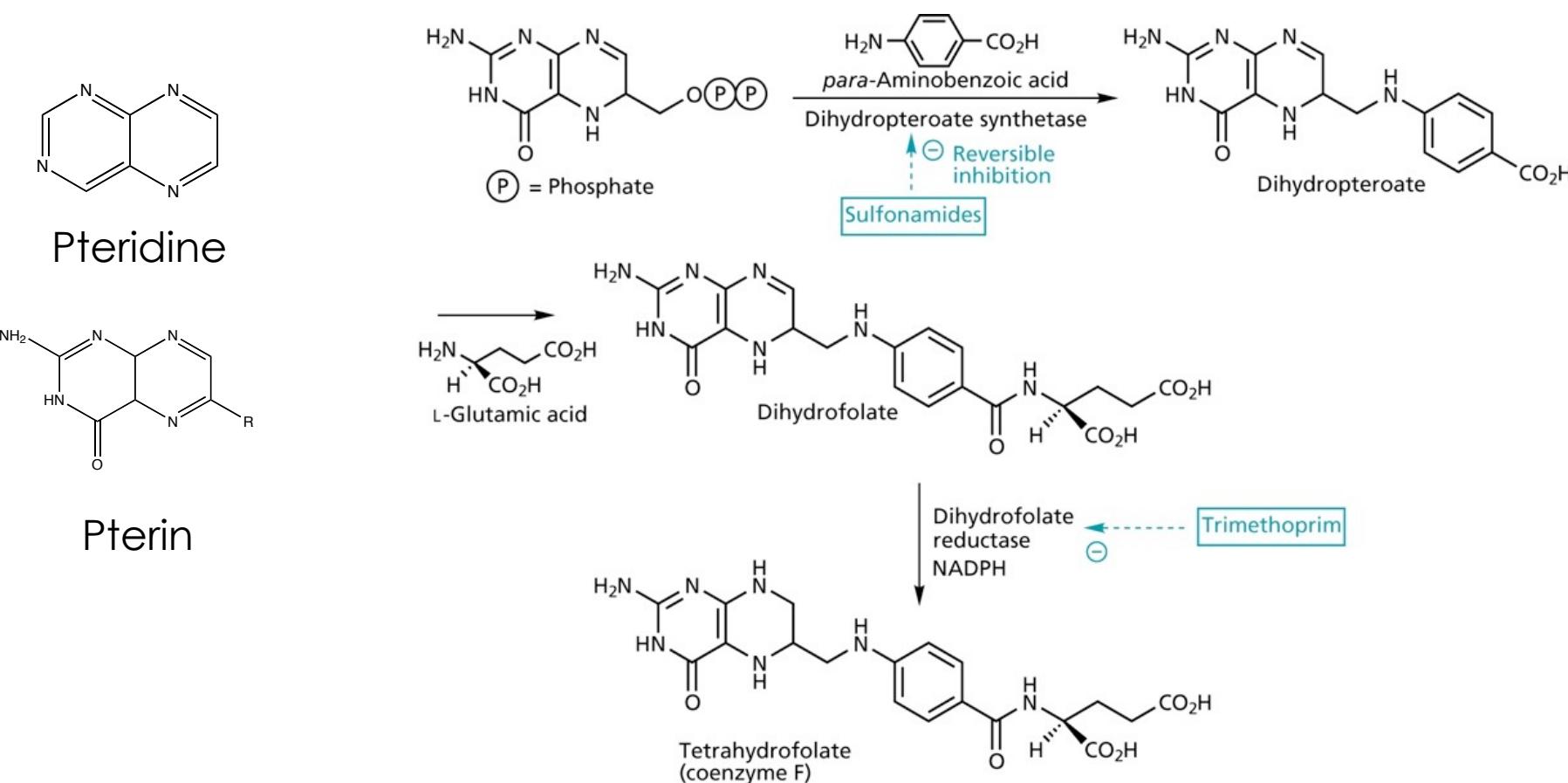
conversion of FH<sub>4</sub> to Methylen-FH<sub>4</sub> by the serine **hydroxymethyltransferase**



source of one-C unit for methylations of deoxyuridinemonophosphate (dUMP) to form deoxythymidinemonophosphate (dTMP)

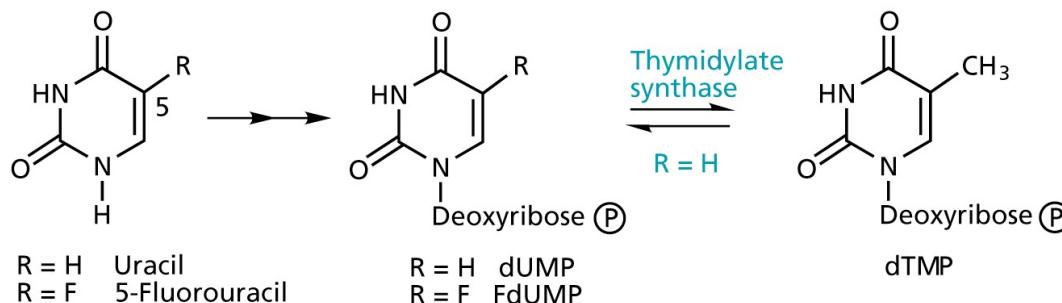
# Mode of action of sulfonamides

- sulfonamides **block the biosynthesis of tetrahydrofolate** in bacterial cells. Tetrahydrofolate provides C-1 units for the pyrimide biosynthesis required for DNA synthesis.
- Sulfonamides **mimick p-aminobenzoic acid**, a substrate for dihydropteroate synthetase.

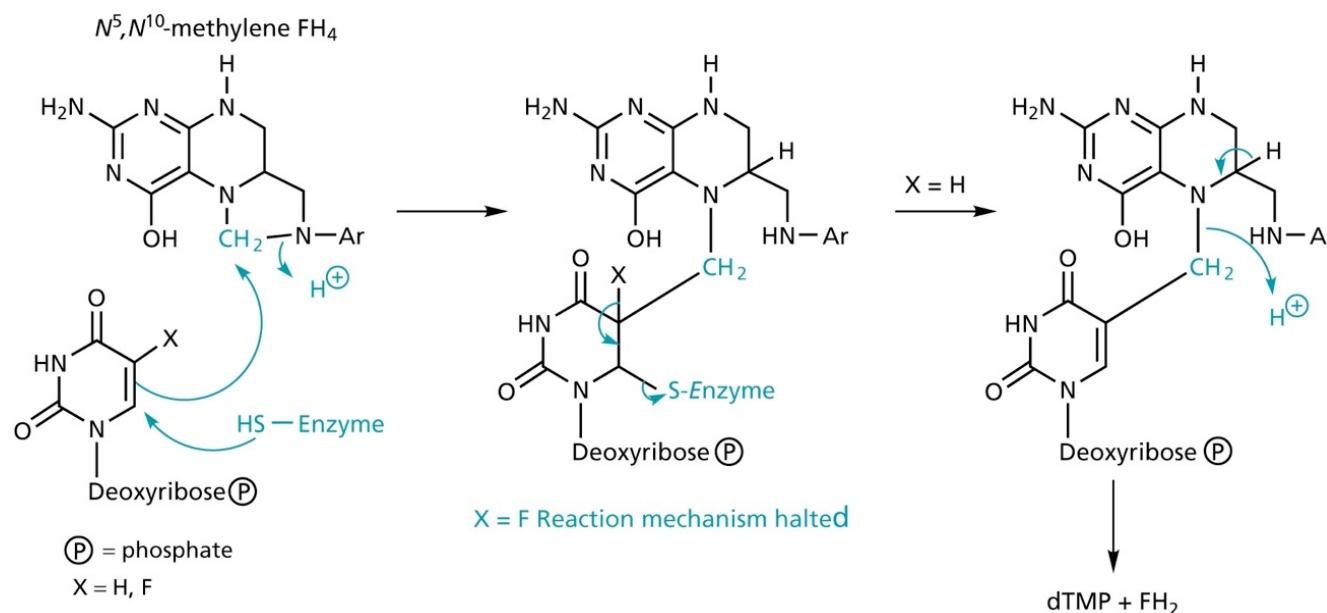


# Antimetabolites

## Thymidylate synthase inhibitors

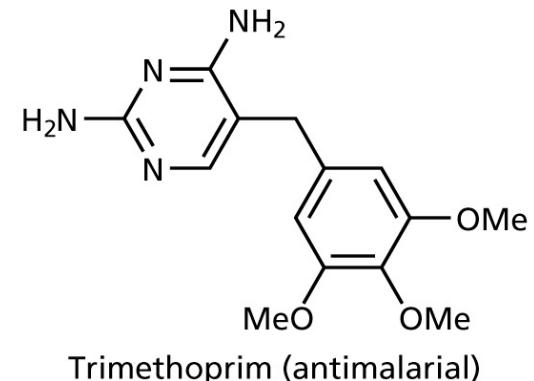


**5-Fluorouracil** acts as an suicide inhibitor



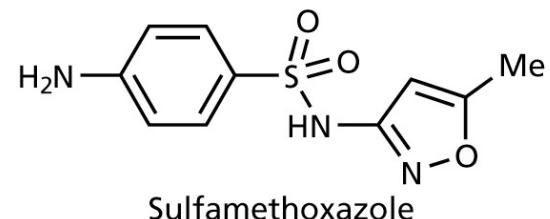
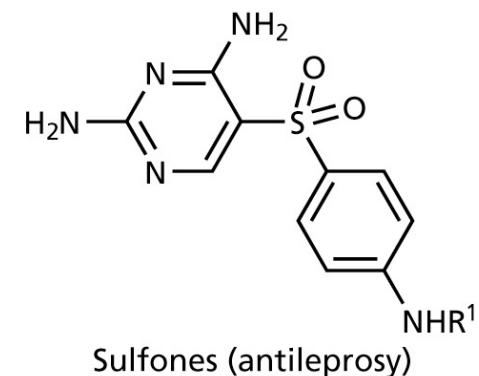
# Other Antimetabolites

- Trimethoprim: Inhibits dihydrofolate reductase

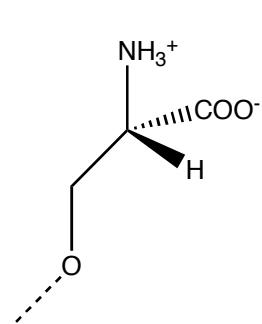
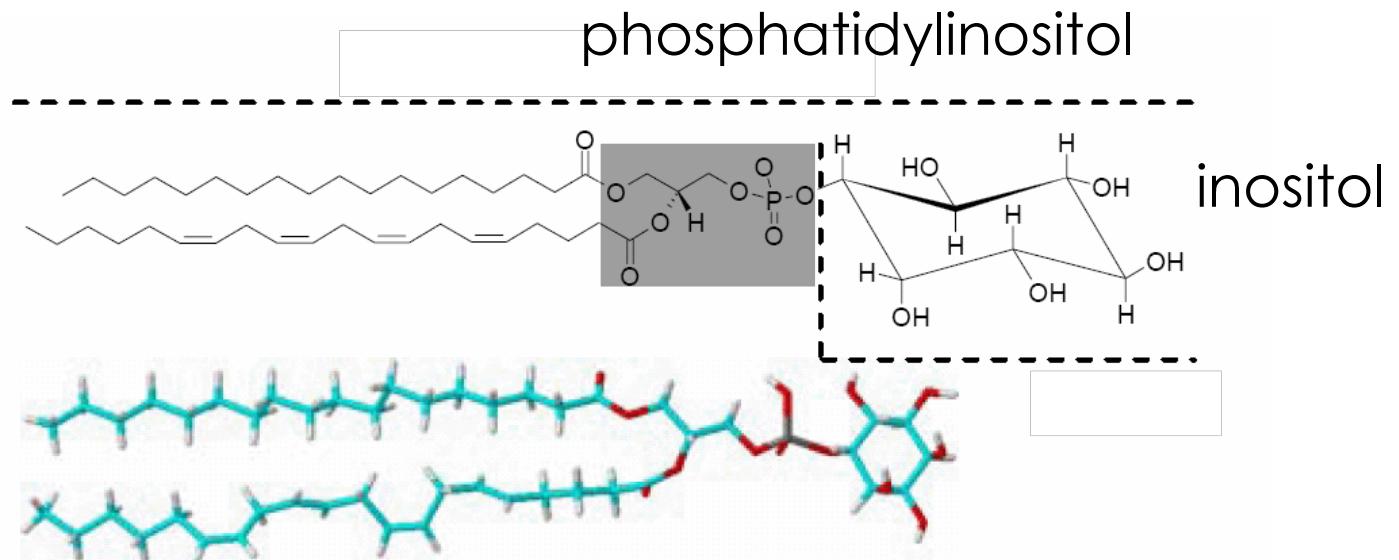
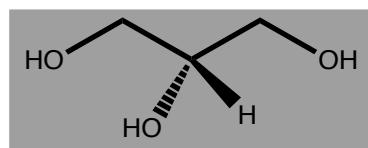


## Applications

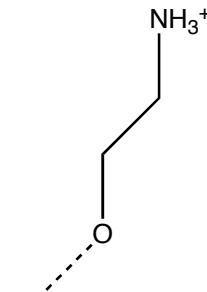
- treatment of urinary tract infections
- eye lotions
- treatment of infections of mucous membranes
- treatment of gut infections



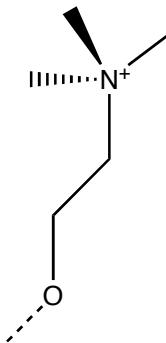
# Lipid components of mammalian membranes



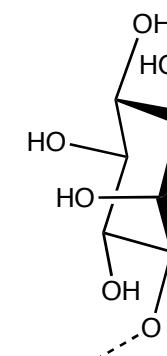
..serine



..ethanolamine



..choline



..inositol

total  
charge

-1

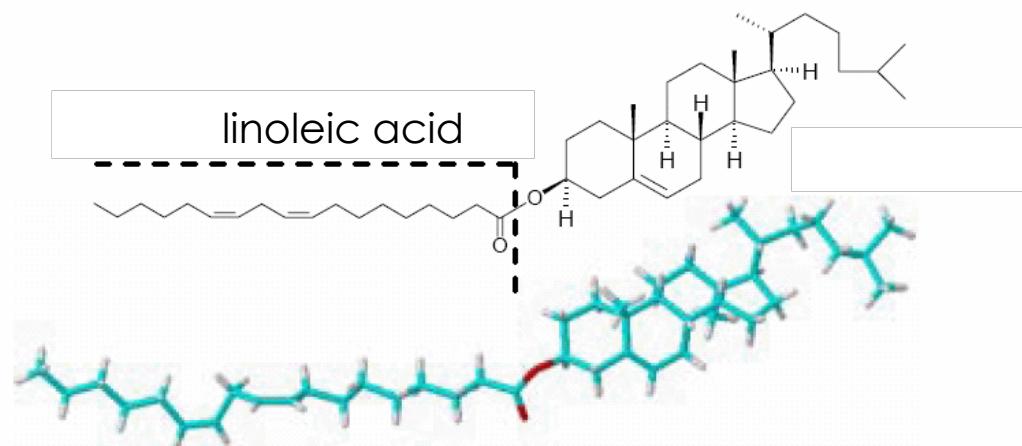
0

0

-1

cholesterol

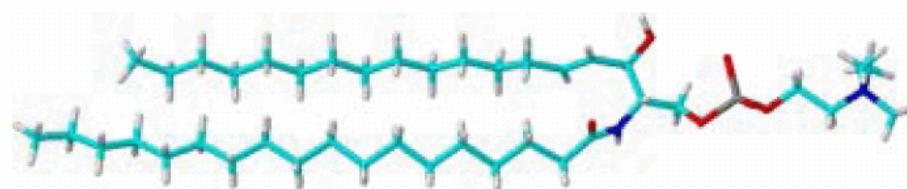
linoleic acid



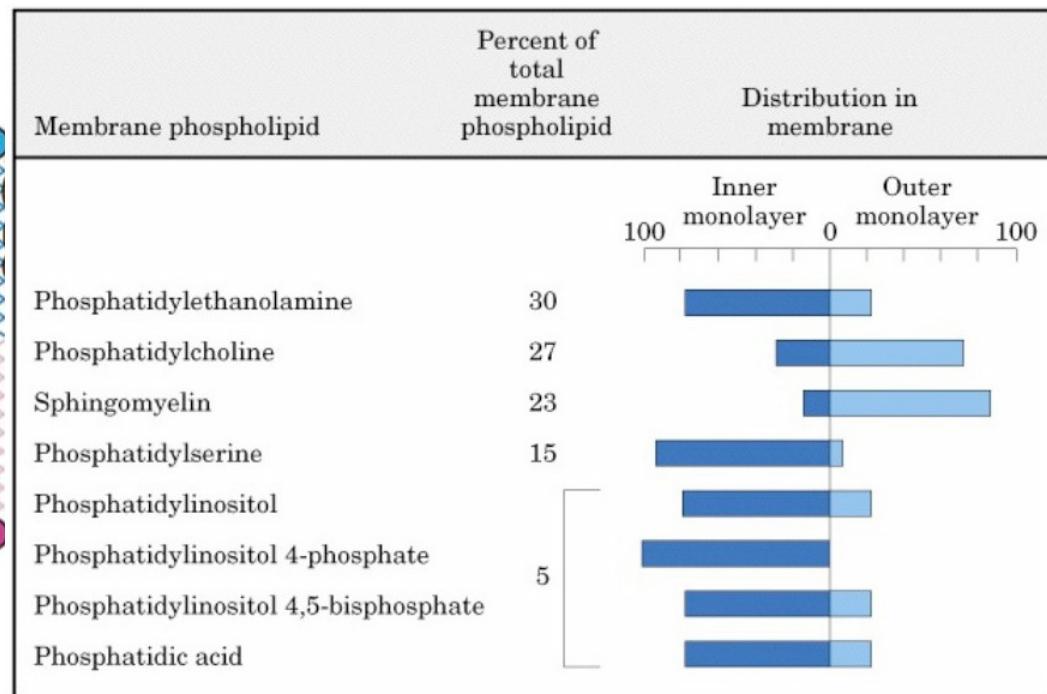
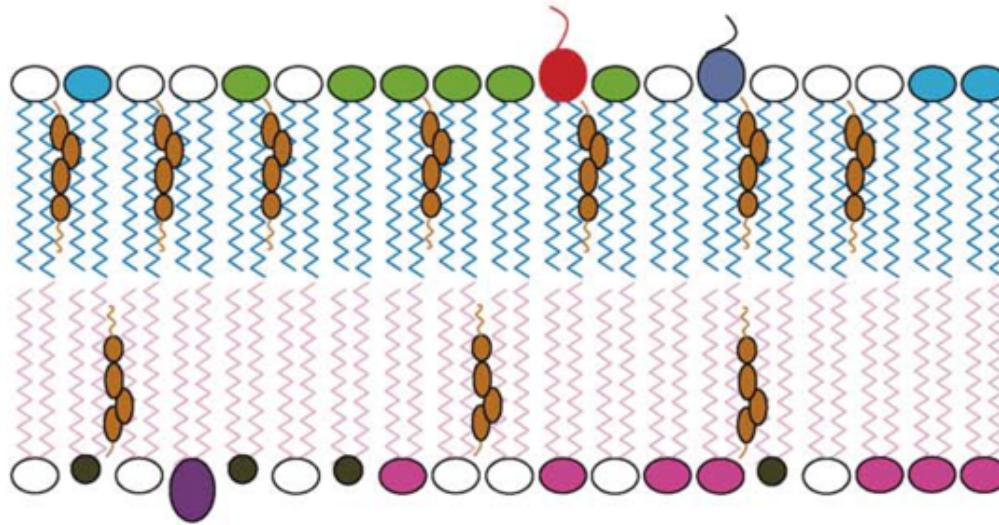
sphingomyelin

ceramide

sphingosine



# Lipid Asymmetry



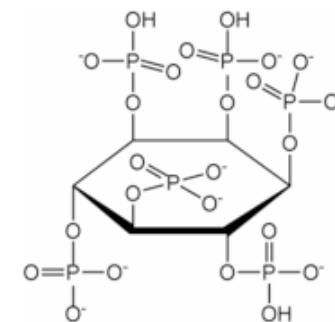
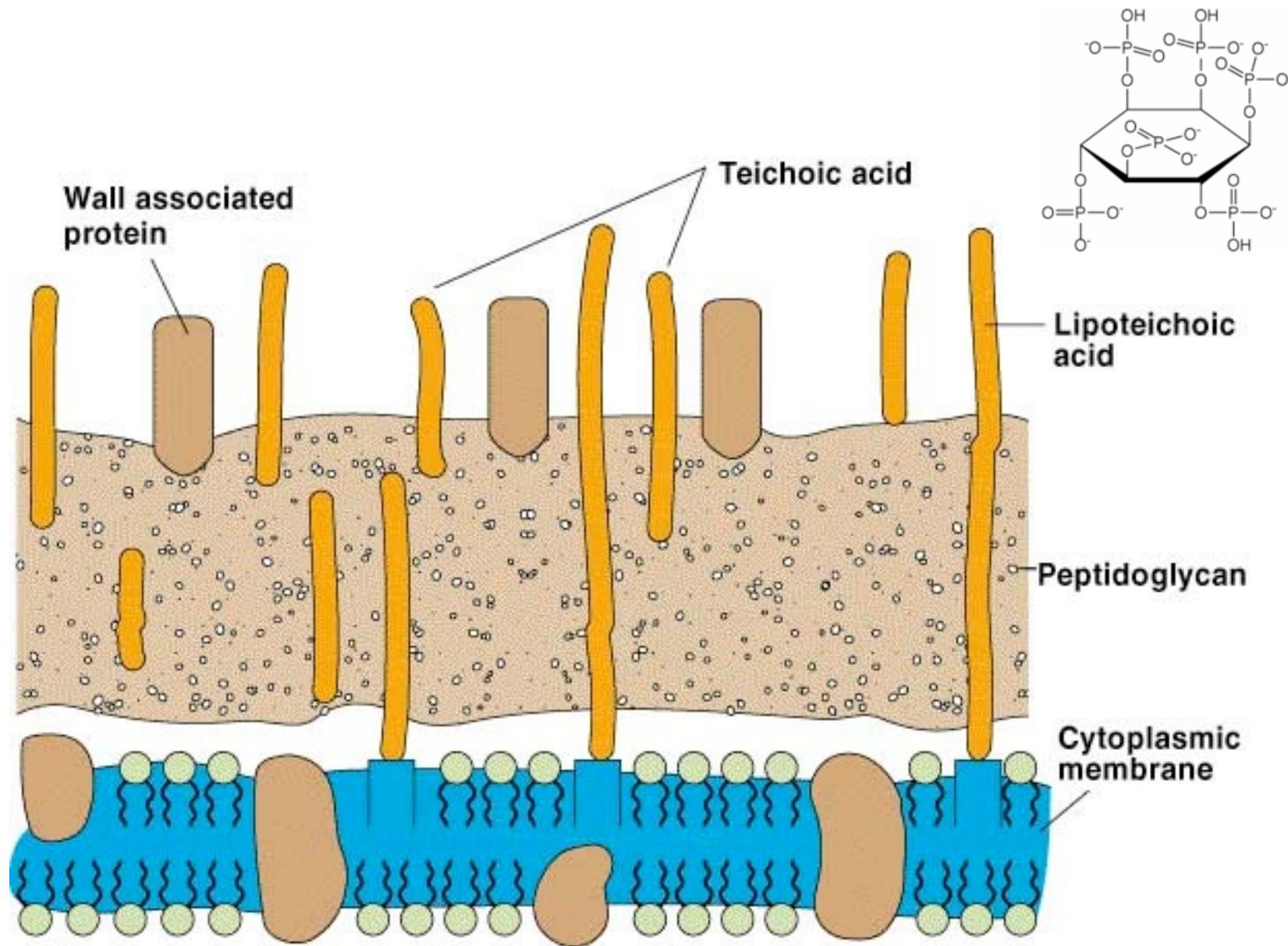
## Outer leaflet

- Cholesterol
- Phosphatidylcholine
- Sphingomyelin
- Glycolipids

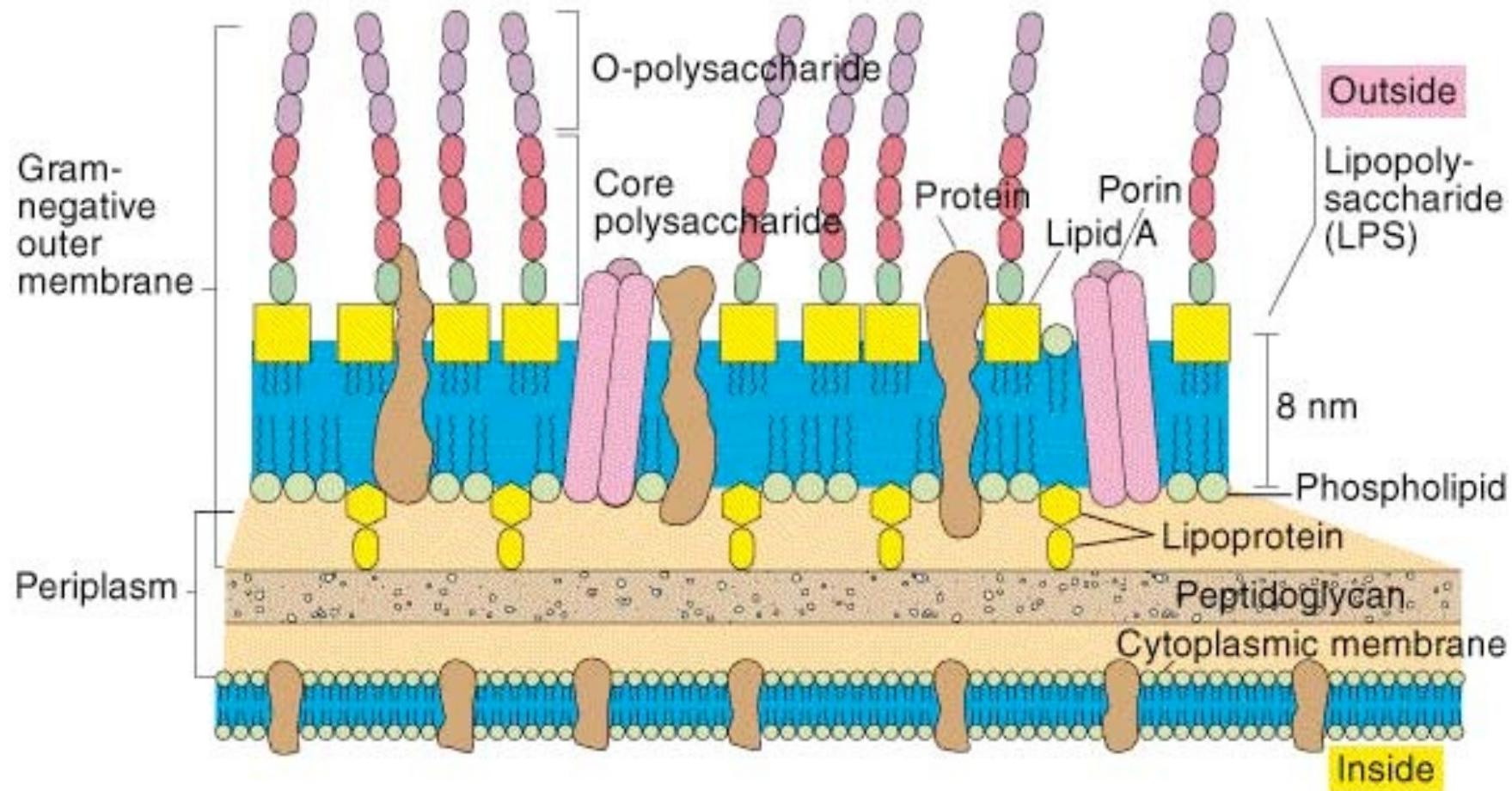
## Inner leaflet

- Cholesterol
- Phosphatidylethanolamine
- Phosphatidylserine
- Phosphoinositides (PI, PIP, PIP<sub>2</sub>, PIP<sub>3</sub>)

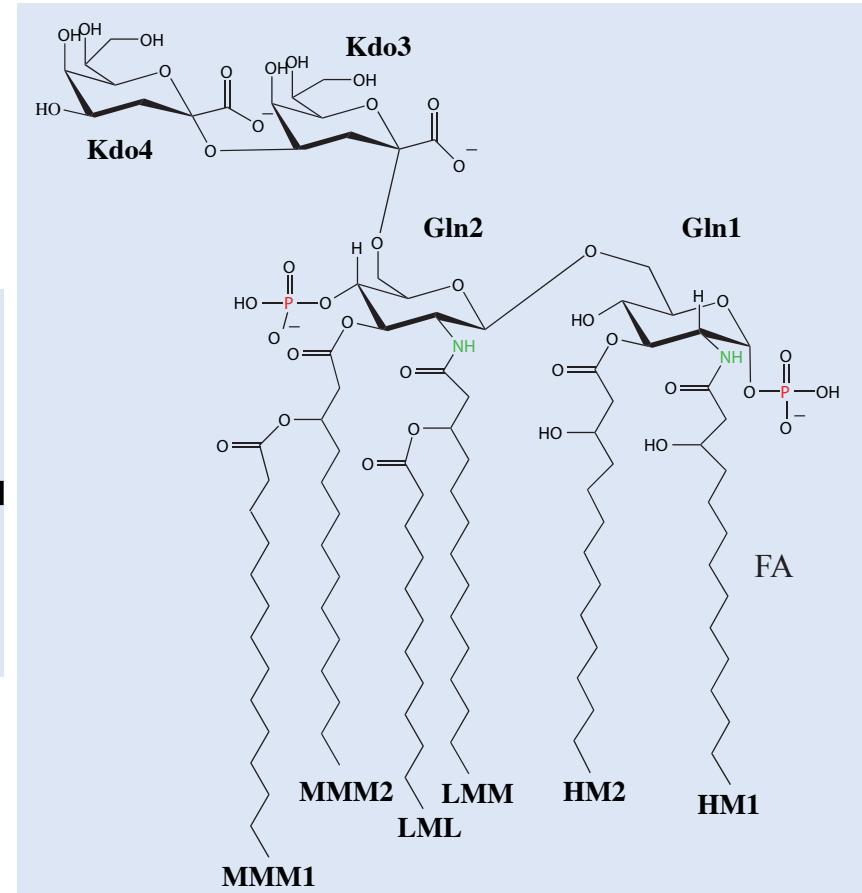
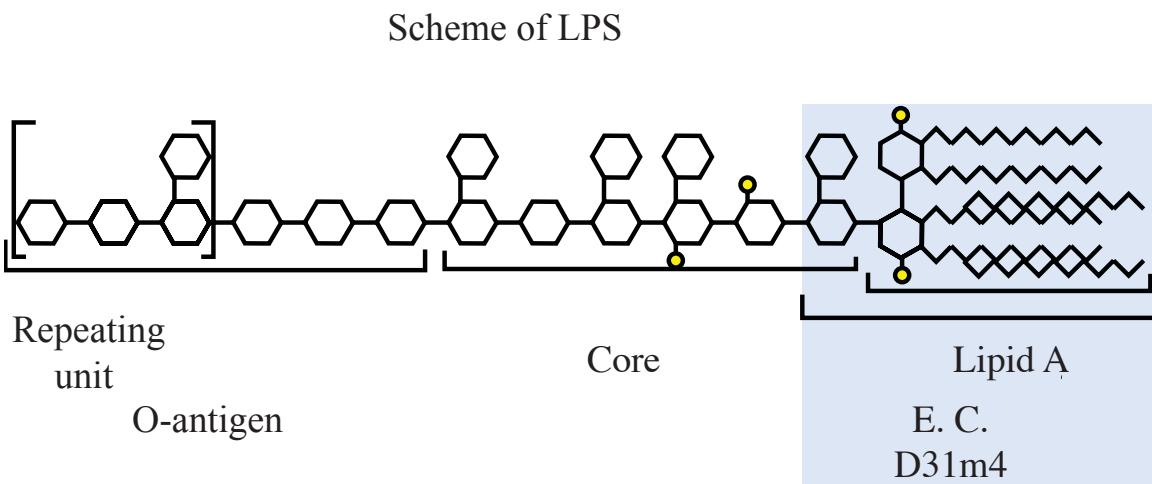
# Cell wall of gram-positive bacteria



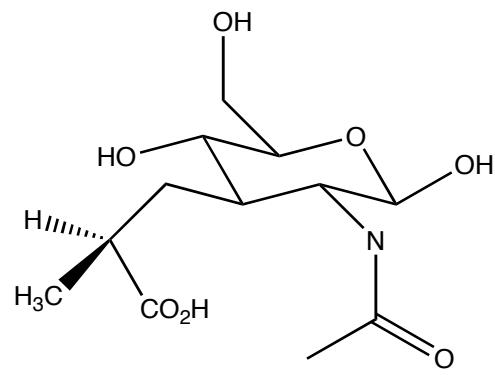
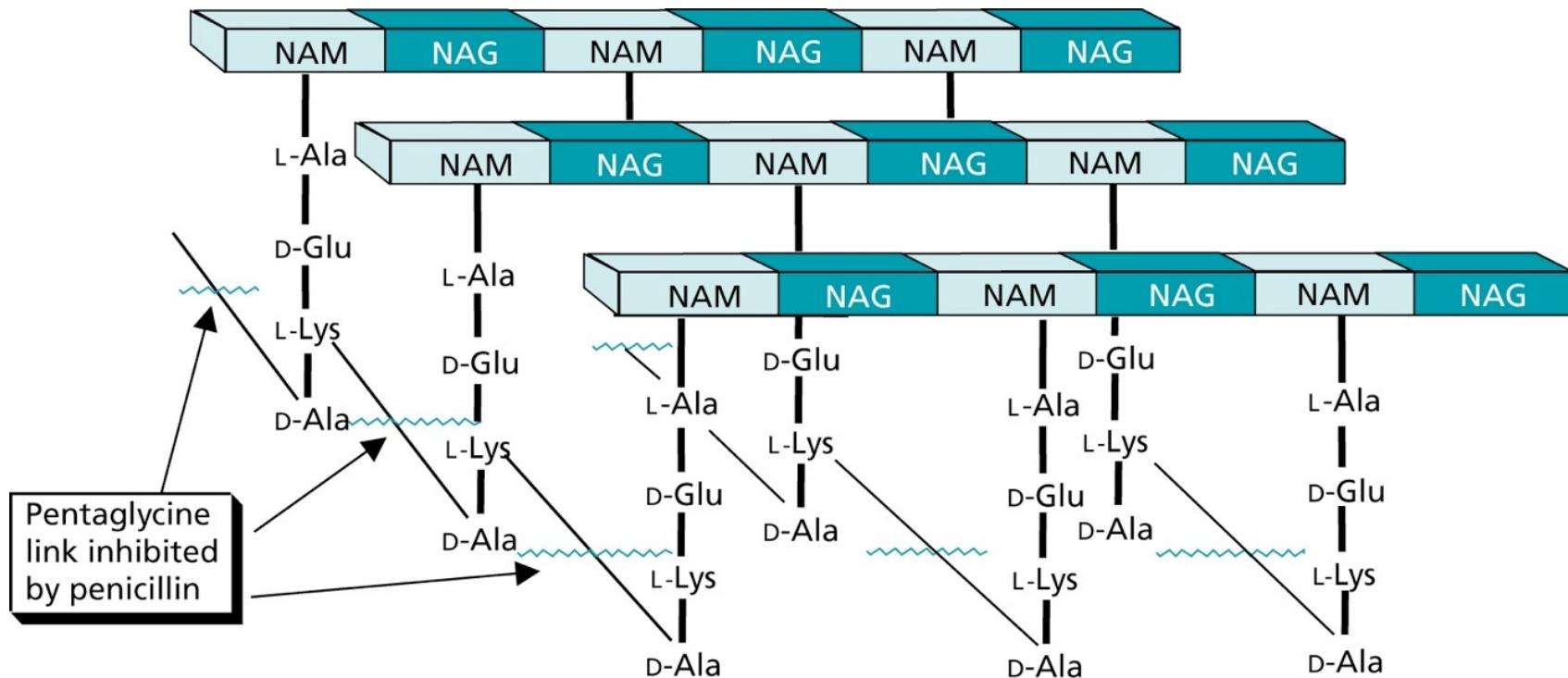
# Cell wall of gram-negative bacteria



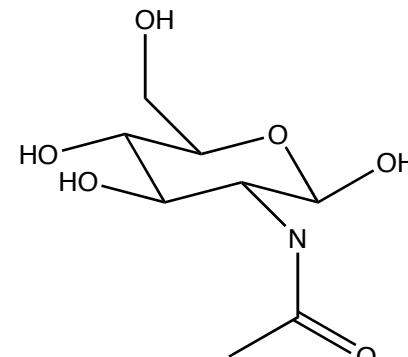
# The Structure of Lipopolysaccharide (LPS)



# The peptidoglycan layer

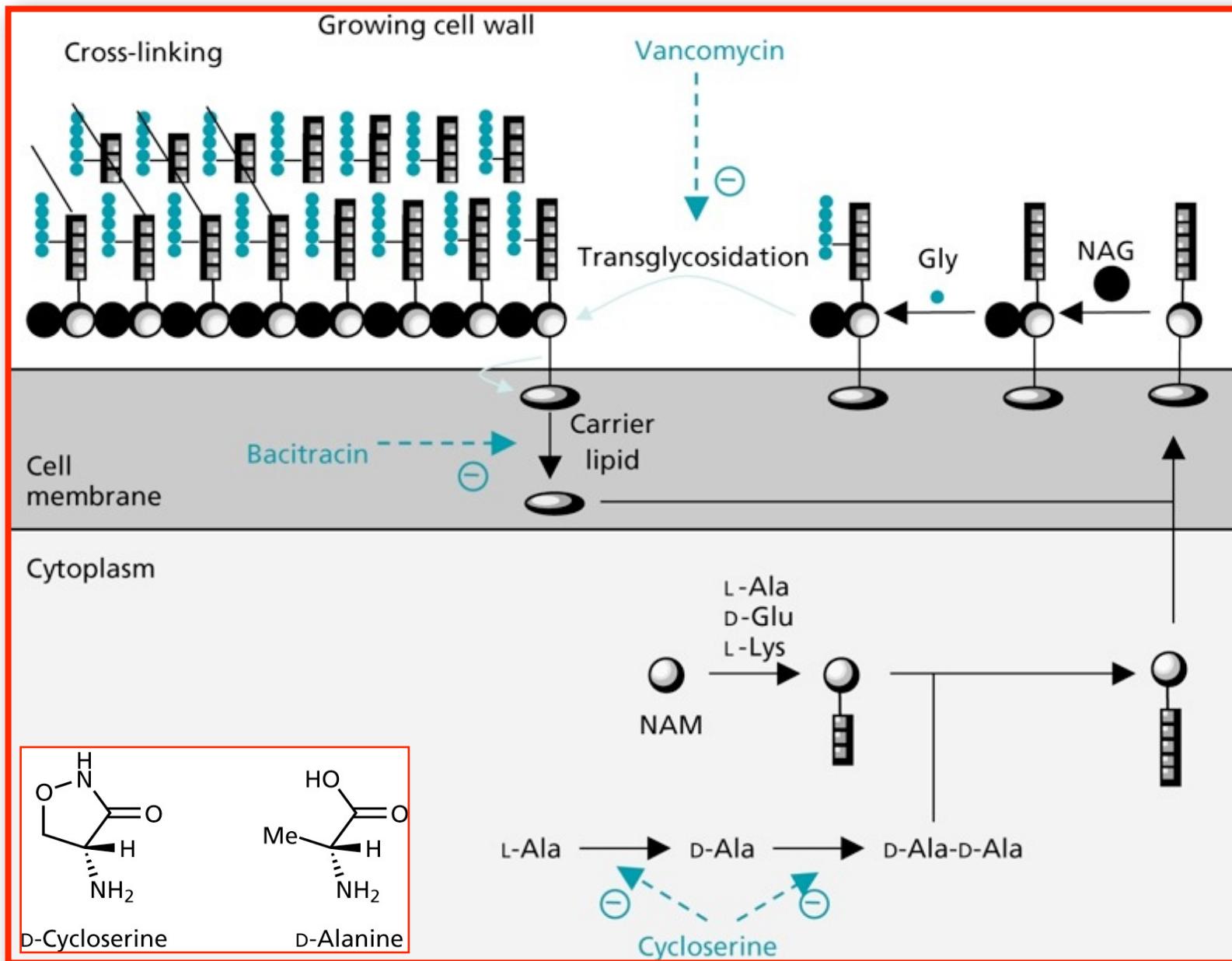


NAM



NAG

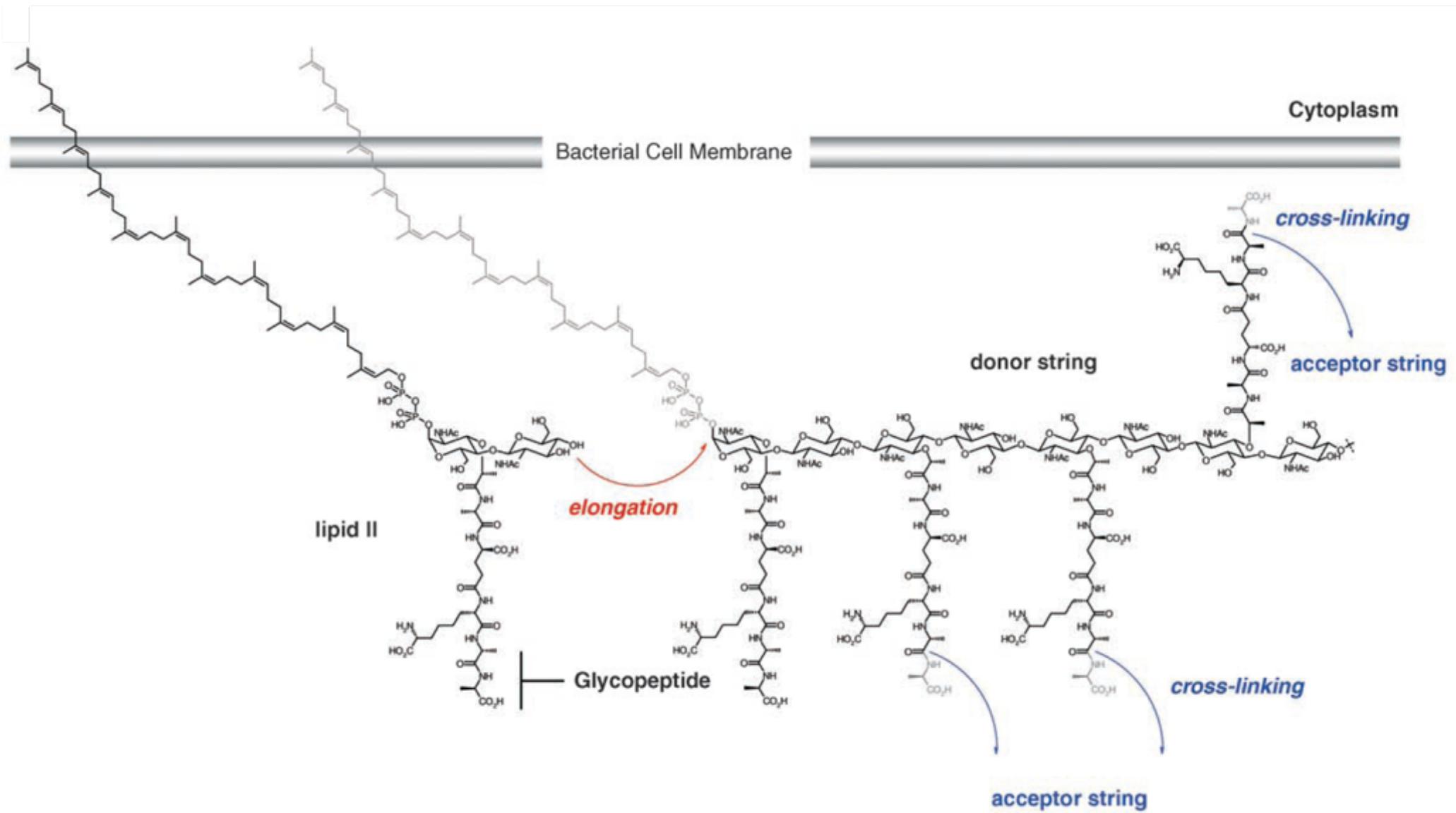
# Cell Wall Biosynthesis



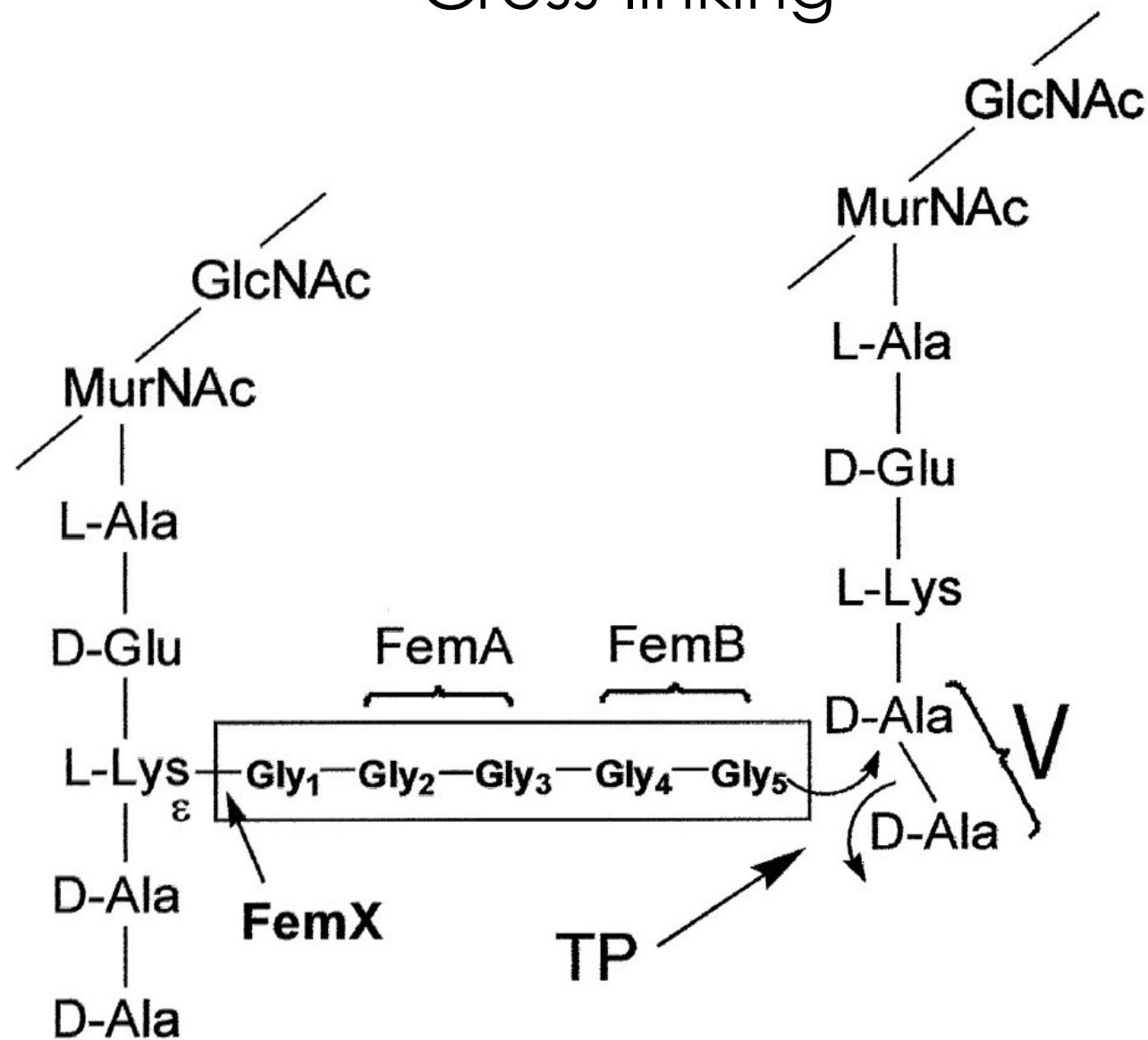
# Cell Wall Biosynthesis

- Firstly, N-acetylmuramic acid (NAM) is linked to three amino acids (<sup>L</sup>Ala-<sup>D</sup>Glu-<sup>L</sup>Lys)
- The tripeptide is then linked to <sup>D</sup>Ala-<sup>D</sup>Ala
- The resulting pentapeptide glycopeptide is attached to a C55 carrier lipid by a translocase enzyme, and carried to the outer surface of the cell membrane
- In the following step N-acetylglucosamine (NAG) is added
- Afterwards a pentaglycine chain is linked to the peptide part
- A transglycosylase enzyme catalyses the attachment of the disaccharide building block to the growing cell wall, and releases the lipid carrier

# Chain elongation



## Cross-linking

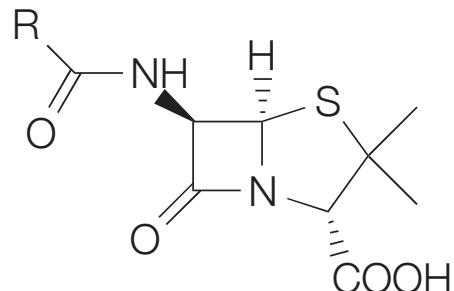


# Discovery of Penicillin

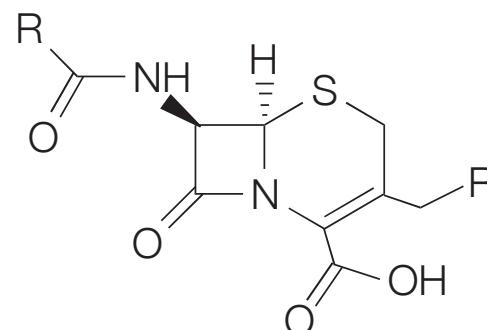
- Alexander Flemming discovers in 1928 that a fungus grew on a bacterial plate containing staphylococci. Close to the fungus all bacteria were killed.
- Biotechnological production of penicillins was established during the second world war and helped saving the life of many soldiers.
- Fleming, Chain und Florey received the Nobel price 1945



# Antibacterials that inhibit the cell wall synthesis



**Penicillins**

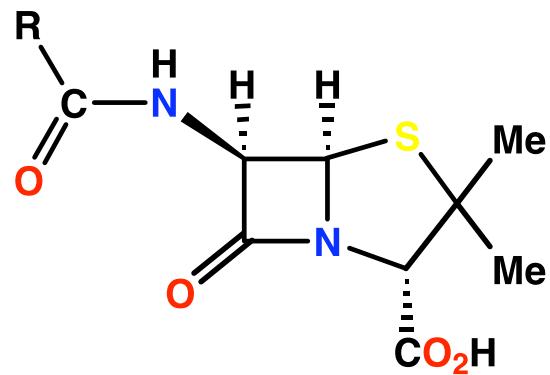


**Cephalosporins**

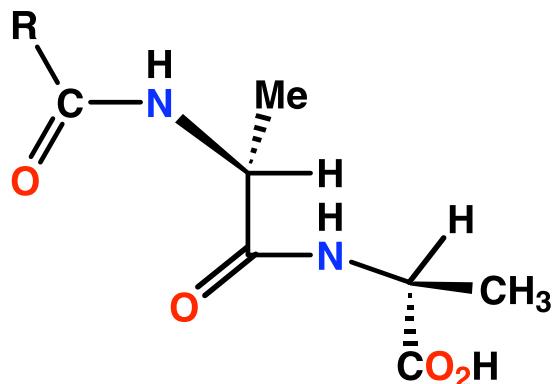
- Antibacterial agents which inhibit bacterial cell wall synthesis
- Discovered by Fleming from a fungal colony (1928)
- Shown to be non toxic and antibacterial
- Isolated and purified by Florey and Chain (1938)
- First successful clinical trial (1941)
- Produced by large scale fermentation (1944)
- Structure established by X-Ray crystallography (1945)
- Full synthesis developed by Sheehan (1957)
- Isolation of 6-APA by Beechams (1958-60) - development of semi-synthetic penicillins
- Discovery of clavulanic acid and  $\beta$ -lactamase inhibitors

# Mechanism of action - bacterial cell wall synthesis

- Penicillin inhibits final crosslinking stage of cell wall synthesis
- It reacts with the transpeptidase enzyme to form an irreversible covalent bond
- Inhibition of transpeptidase leads to a weakened cell wall
- Cells swell due to water entering the cell, then burst (lysis)
- Penicillin possibly acts as an analogue of the L-Ala- $\gamma$ -D-Ala portion of the pentapeptide chain. However, the carboxylate group that is essential to penicillin activity is not present in this portion

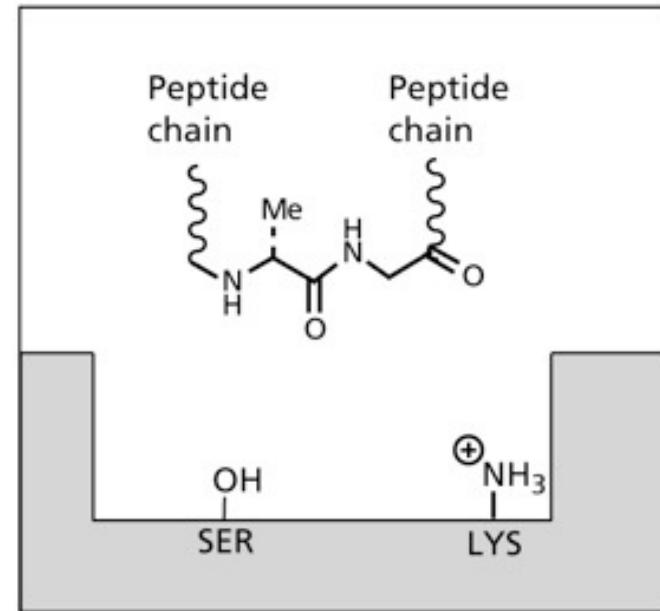
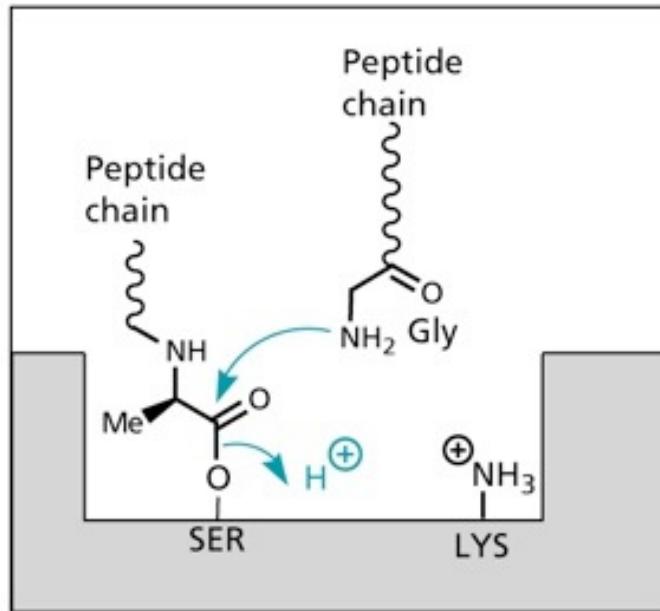
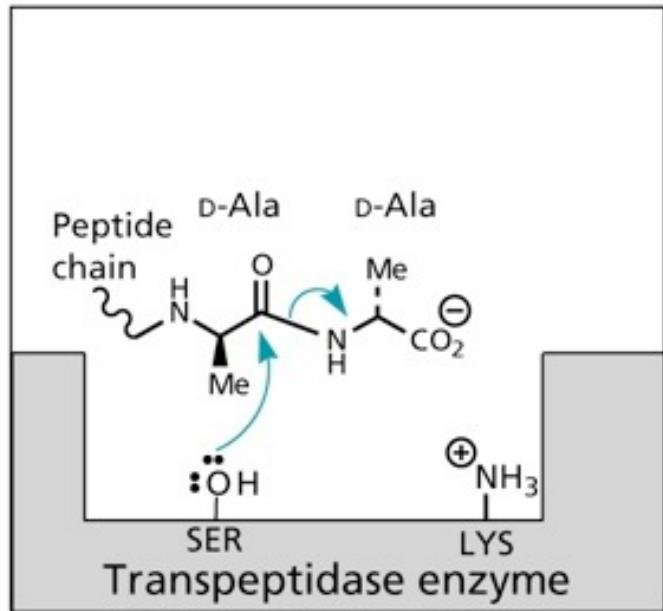


Penicillin

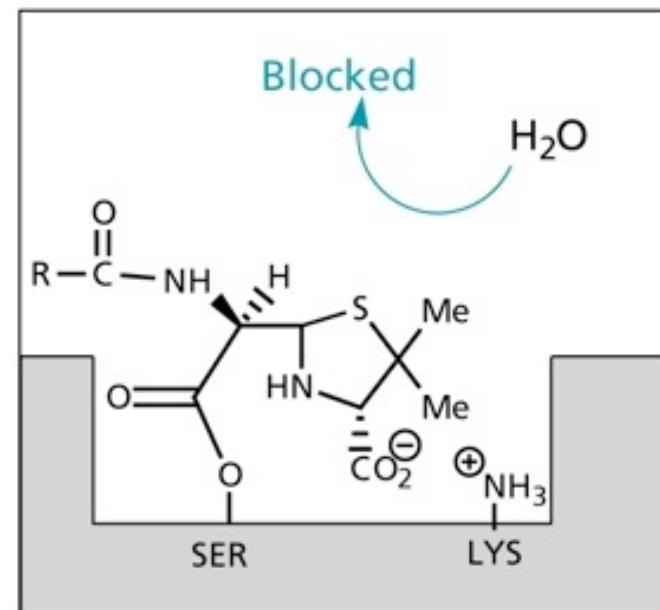
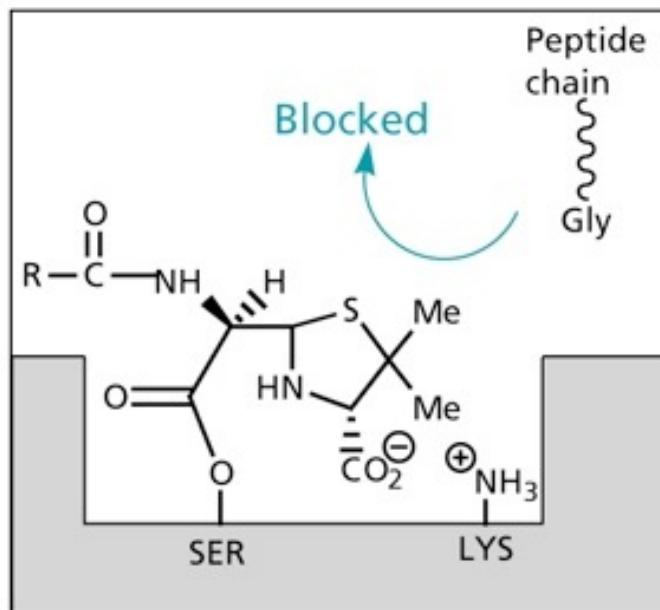
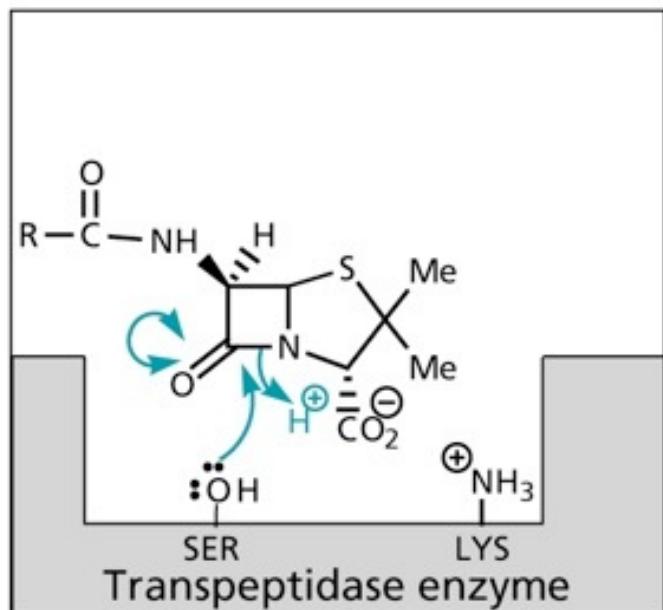


Acyl-D-Ala-D-Ala

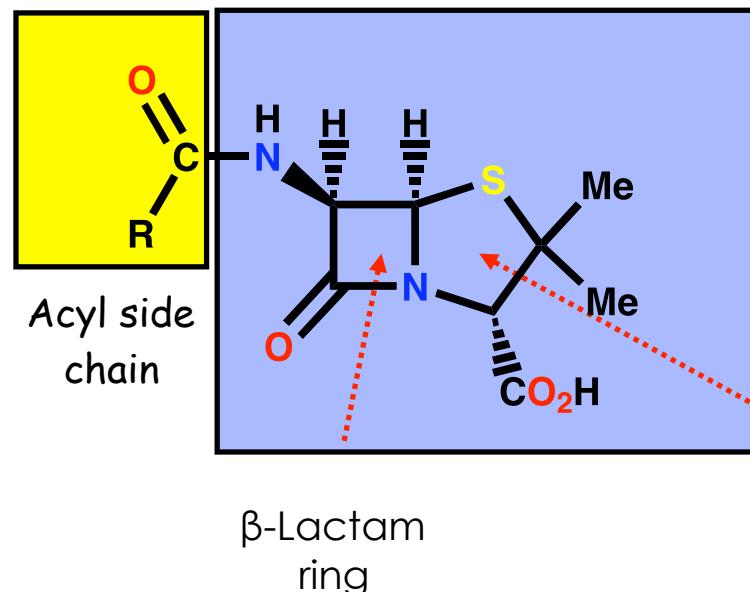
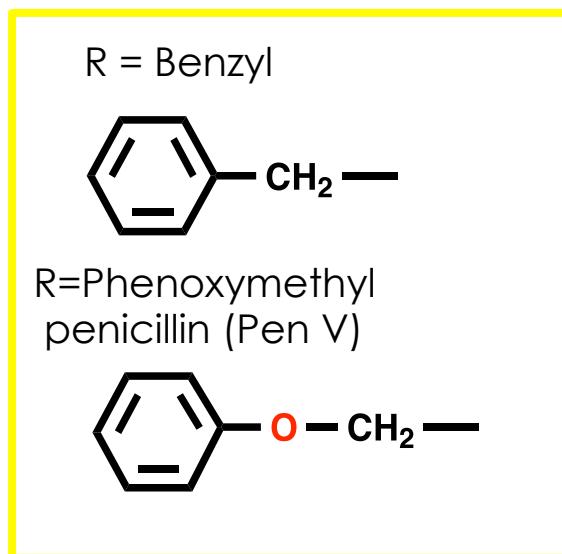
(a) Transpeptidase cross-linking



(b) Penicillin inhibition



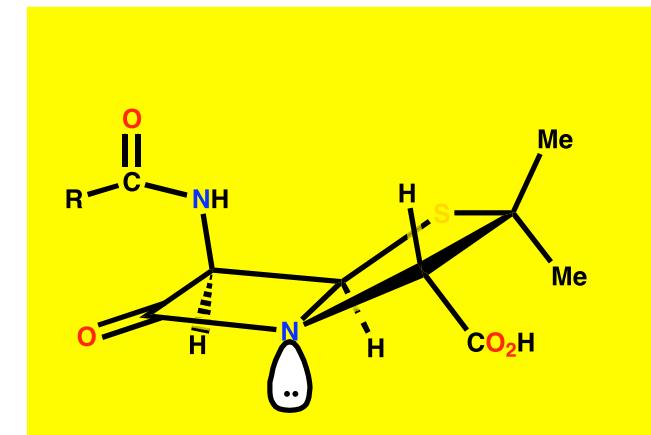
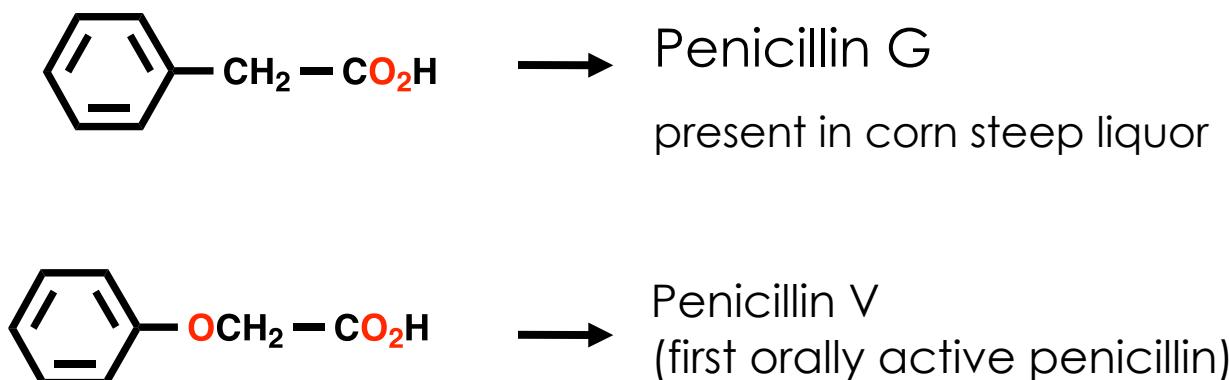
# Penicilins



6-Aminopenicillanic acid  
(6-APA)

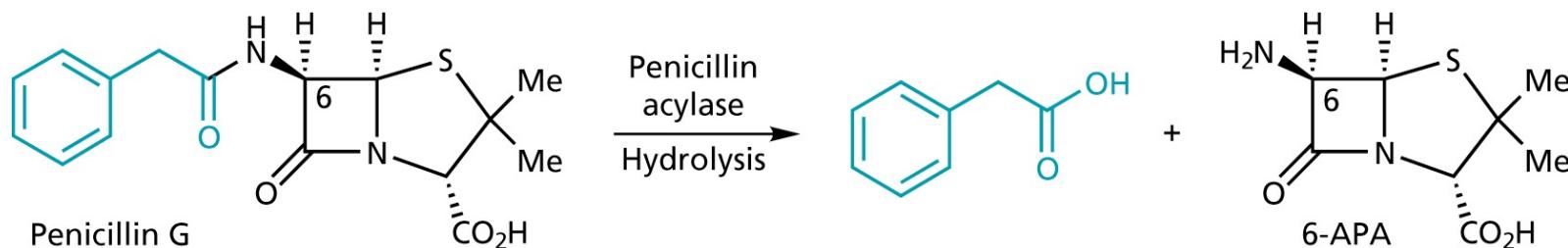
Side chain varies depending on carboxylic acid present in fermentation medium

Shape of Penicillin G

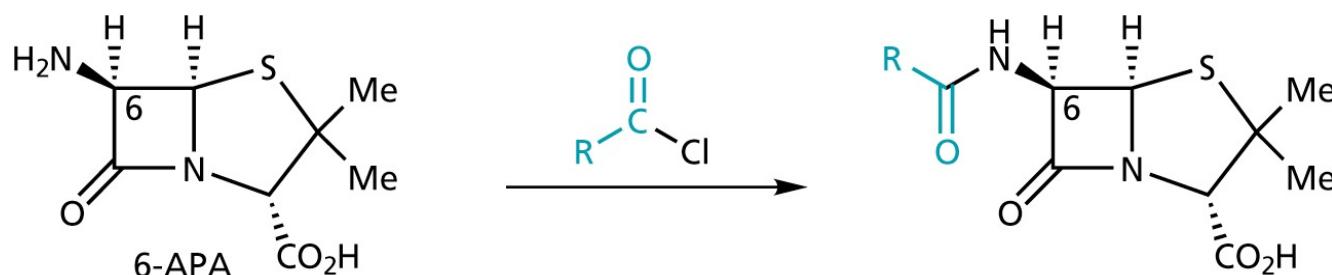


# Synthesis of Penicillins

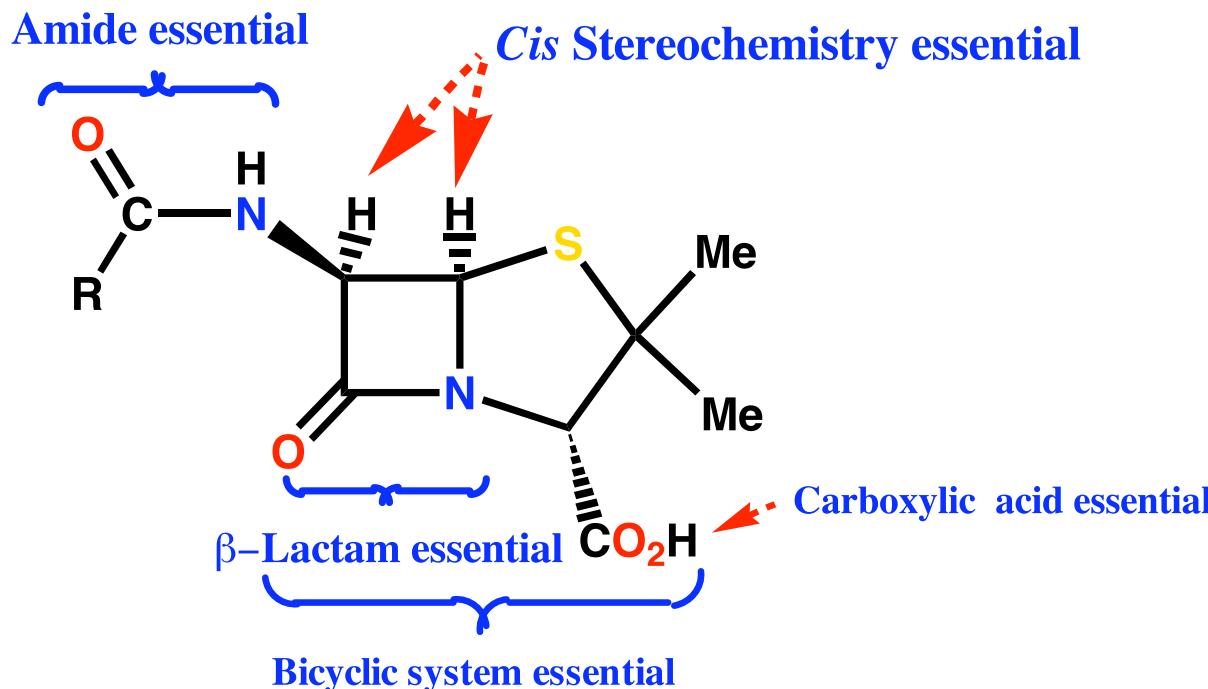
Penicillin G can be enzymatically converted into 6- aminopenicillanic acid (6-APA)



6-APA serves as a convenient starting material for the synthesis of other penicillins



# SAR



## Conclusions

- Amide and carboxylic acid are involved in binding
- Carboxylic acid binds as the carboxylate ion
- Mechanism of action involves the β-lactam ring
- Activity related to β-lactam ring strain (subject to stability factors)
- Bicyclic system increases β-lactam ring strain
- Not much variation in structure is possible
- Variations are limited to the side chain (R)

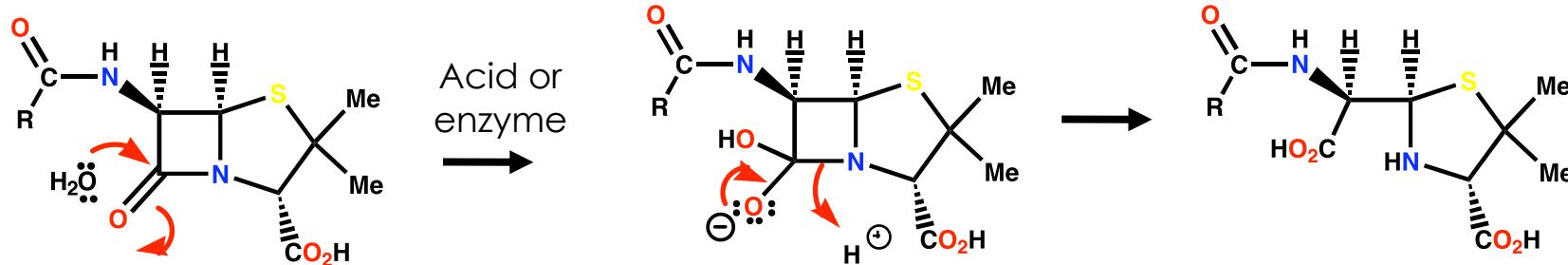
# Resistance to Penicillins

- Gram -ve bacteria have a lipopolysaccharide (LPS) outer membrane preventing access to the cell wall
- Penicillins can only cross via porins in the outer membrane
- Porins only allow small hydrophilic molecules that can exist as zwitterions to cross
- High levels of transpeptidase enzyme may be present
- The transpeptidase enzyme may have a low affinity for penicillins (e.g. PBP 2a for *S. aureus*)
- Presence of  $\beta$ -lactamases
- Concentration of  $\beta$ -lactamases in periplasmic space
- Mutations
- Transfer of  $\beta$ -lactamases between strains
- Efflux mechanisms pumping penicillin out of periplasmic space

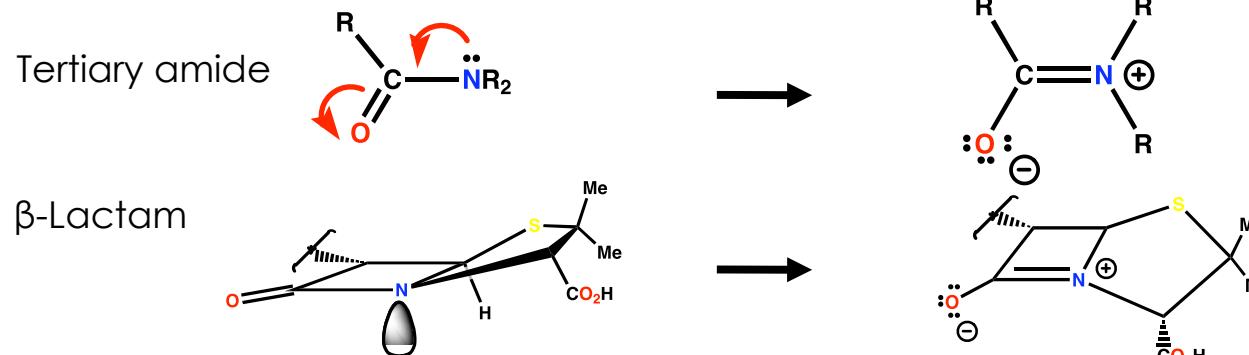
# Problems with Penicillin G

- It is sensitive to stomach acids
- It is sensitive to  $\beta$ -lactamases - enzymes which hydrolyse the  $\beta$ -lactam ring
- It has a limited range of activity

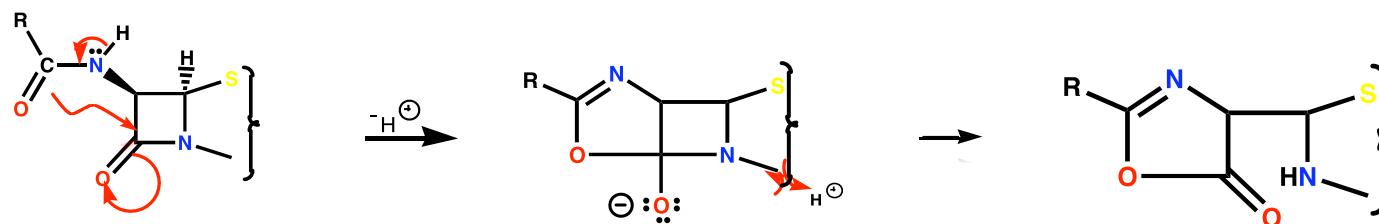
ring  
strain



reactive  
carbonyl group

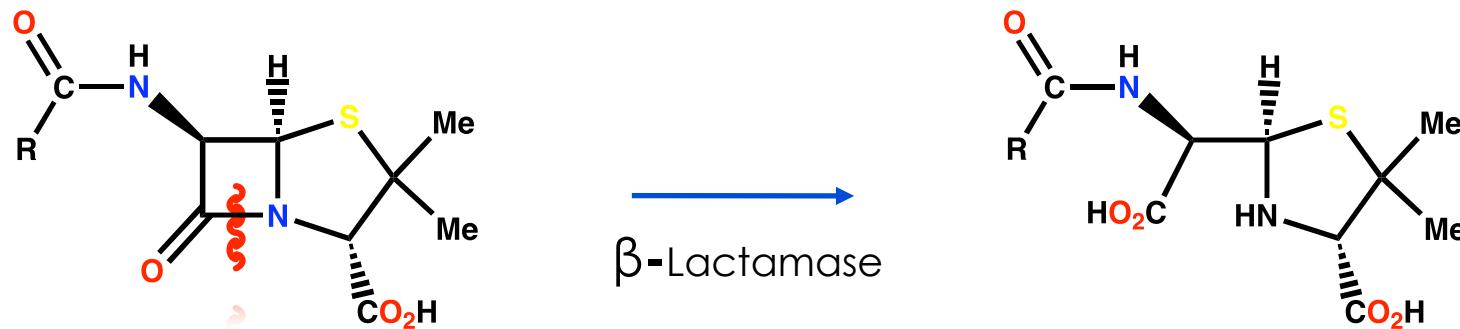


neighboring  
group part.



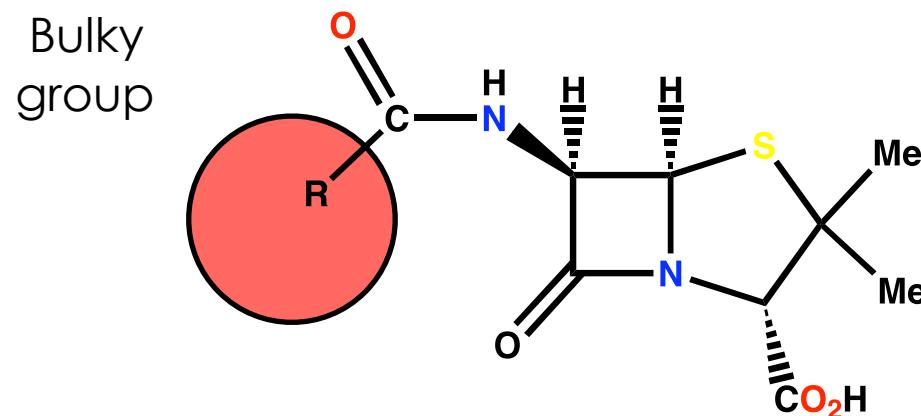
# Sensitivity to $\beta$ -Lactamases

- Enzymes that inactivate penicillins by opening  $\beta$ -lactam rings
- Allow bacteria to be resistant to penicillin
- Transferable between bacterial strains (i.e. bacteria can acquire resistance)
- Important w.r.t. *Staphylococcus aureus* infections in hospitals
- 80% Staph. infections in hospitals were resistant to penicillin and other antibacterial agents by 1960
- Mechanism of action for lactamases is identical to the mechanism of inhibition for the target enzyme
- But product is removed efficiently from the lactamase active site



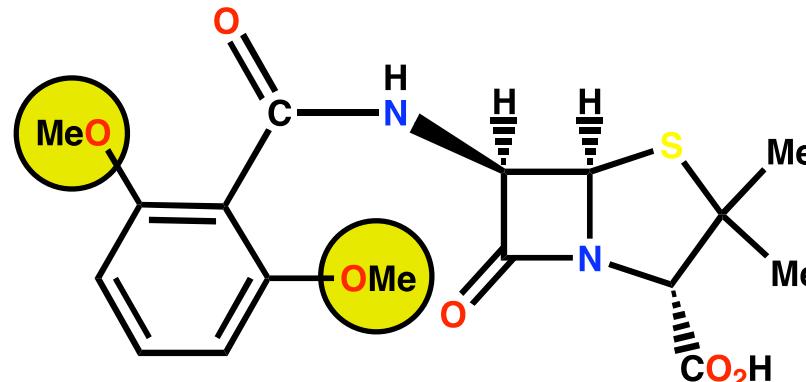
# Sensitivity to $\beta$ -Lactamases

- Block access of penicillin to active site of enzyme by introducing bulky groups to the side chain to act as steric shields
- Size of shield is crucial to inhibit reaction of penicillins with  $\beta$ -lactamases but not with the target enzyme (transpeptidase)

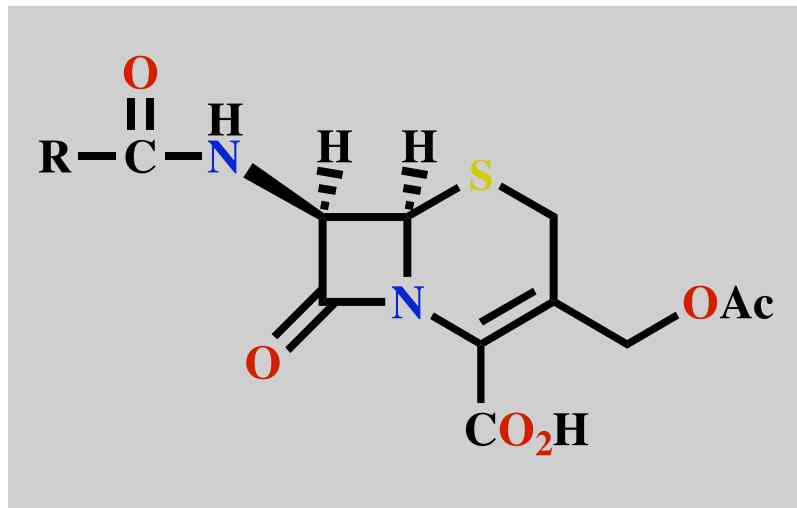


**Methicillin** (Beechams - 1960)

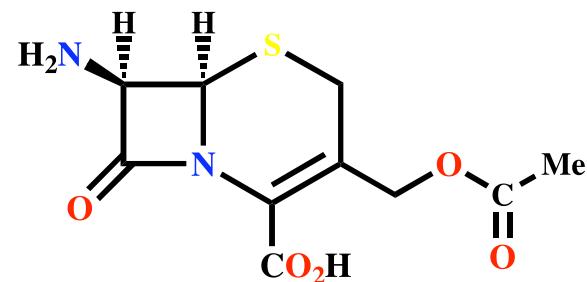
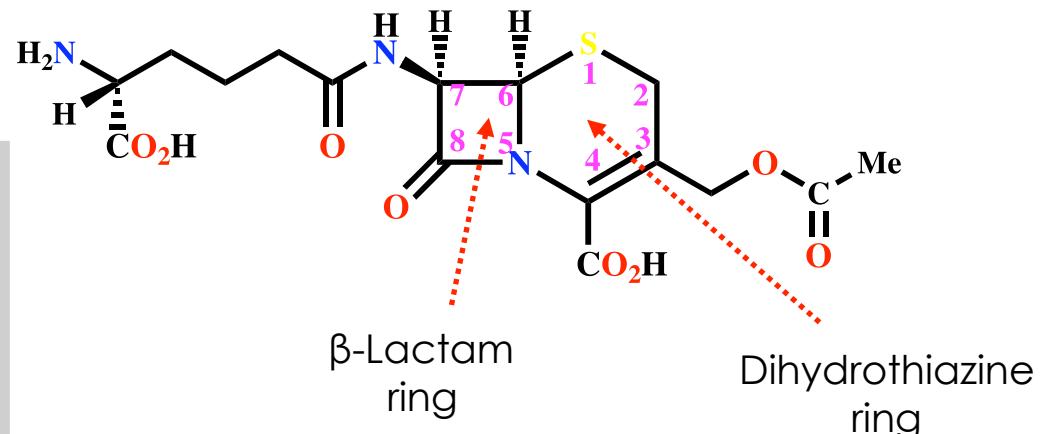
ortho groups  
important



# CEPHALOSPORINS



7-Amino adipic side chain



**7-Aminocephalosporanic acid (7-ACA)**

# Properties of Cephalosporin C

## Disadvantages

- Polar due to the side chain - difficult to isolate and purify
- Low potency, not absorbed orally

## Advantages

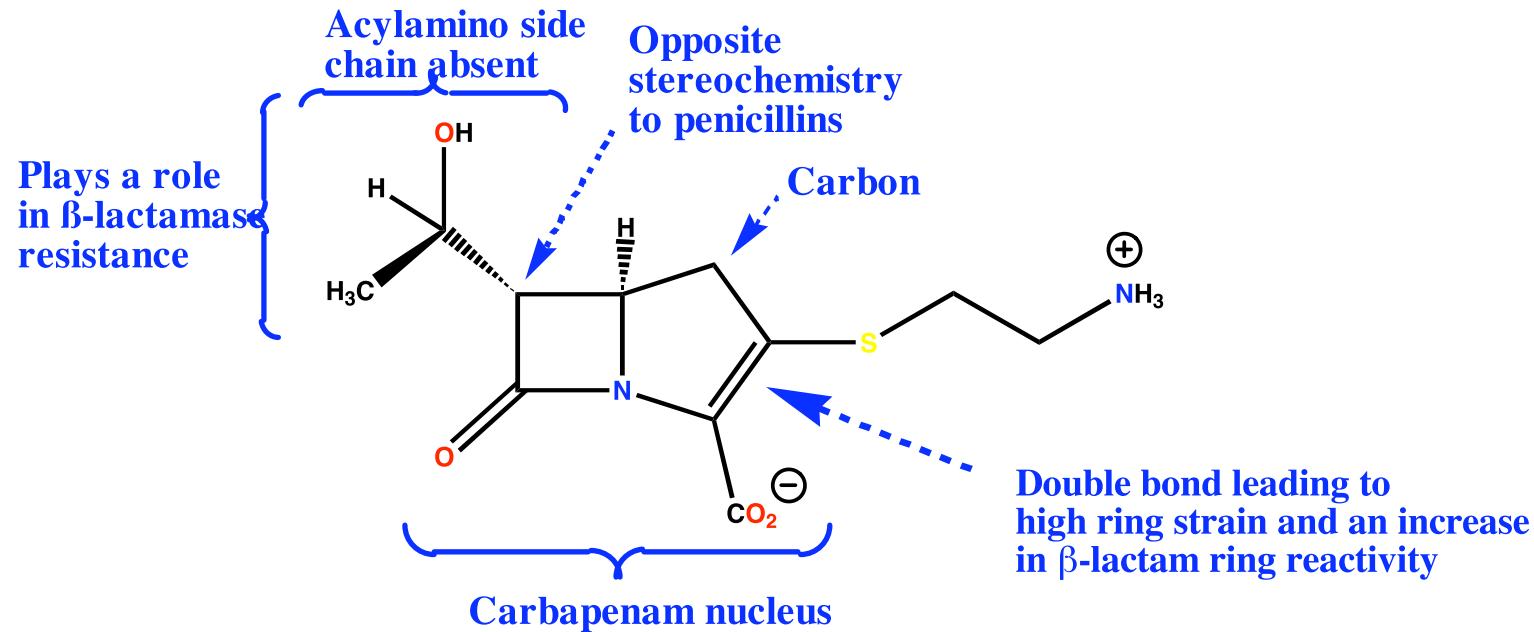
- Non toxic
- Lower risk of allergic reactions compared to penicillins
- More stable to acid conditions
- More stable to  $\beta$ -lactamases
- Ratio of activity vs Gram -ve and Gram +ve bacteria is better

## SAR

- The  $\beta$ -lactam ring is crucial to the mechanism
- The carboxylic acid at position 4 is important to binding
- The bicyclic system is important in increasing ring strain
- Stereochemistry is important
- The acetoxy substituent is important to the mechanism
- Possible modifications
- 7-Acylamino side chain
- 3-Acetoxymethyl side chain
- Substitution at C-7

# Newer $\beta$ -Lactam Antibiotics

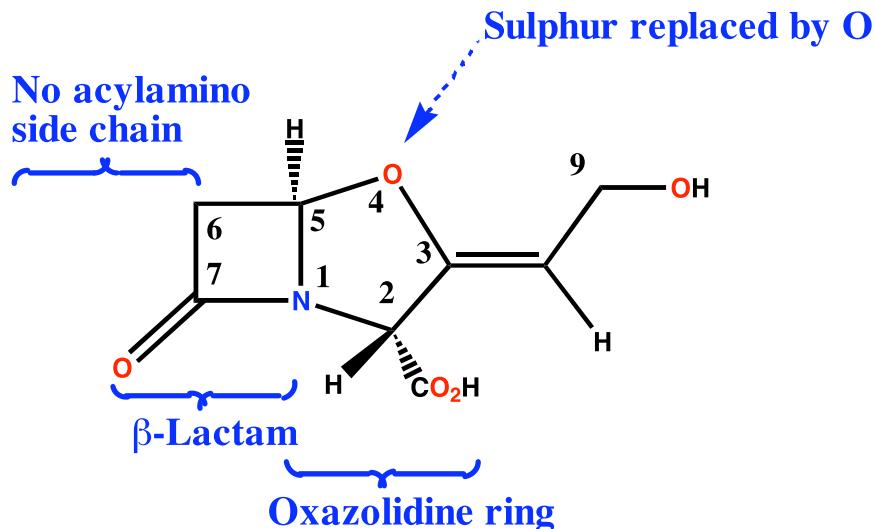
**Thienamycin** (Merck 1976) (from *Streptomyces cattleya*)



- Potent and wide range of activity vs Gram +ve and Gram -ve bacteria
- Active vs. *Pseudomonas aeruginosa*
- Low toxicity
- High resistance to  $\beta$ -lactamases
- Poor stability in solution (ten times less stable than Pen G)

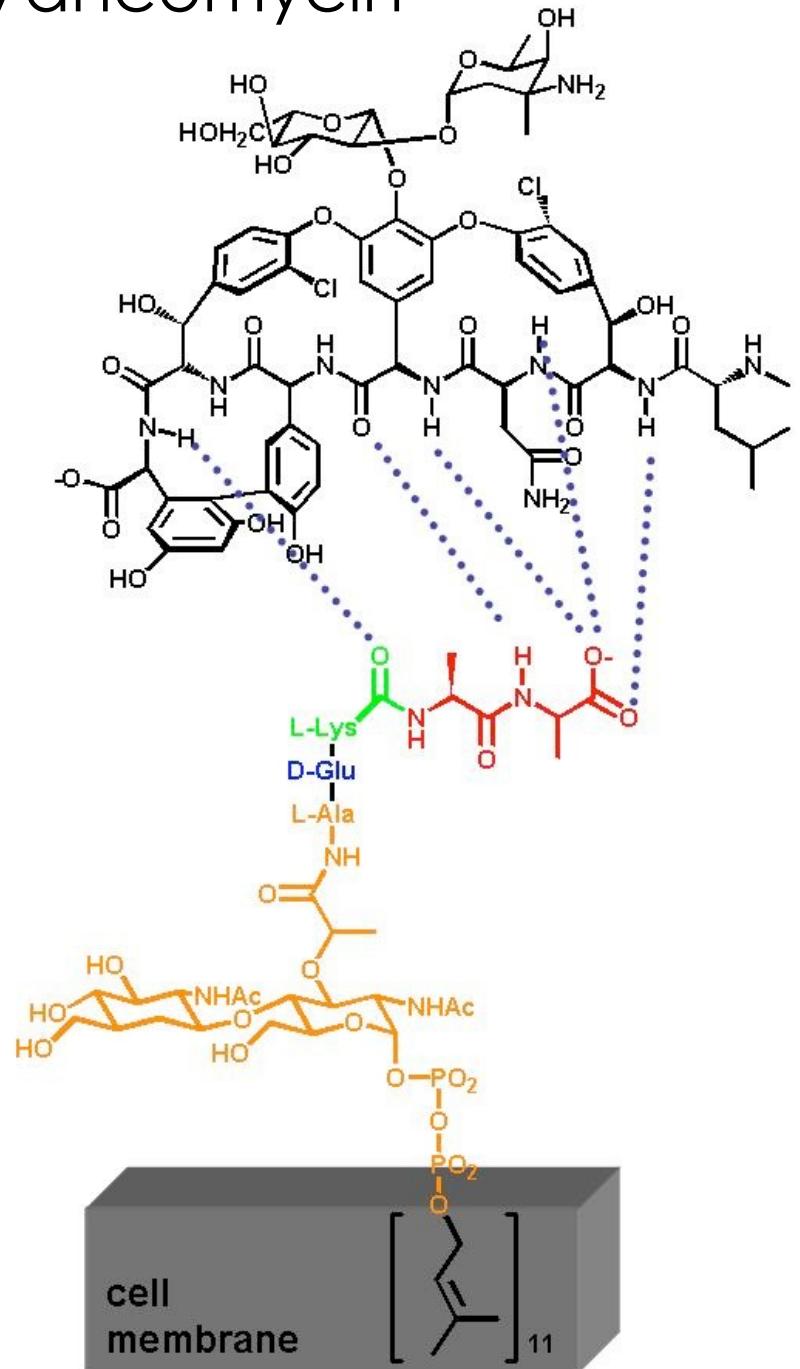
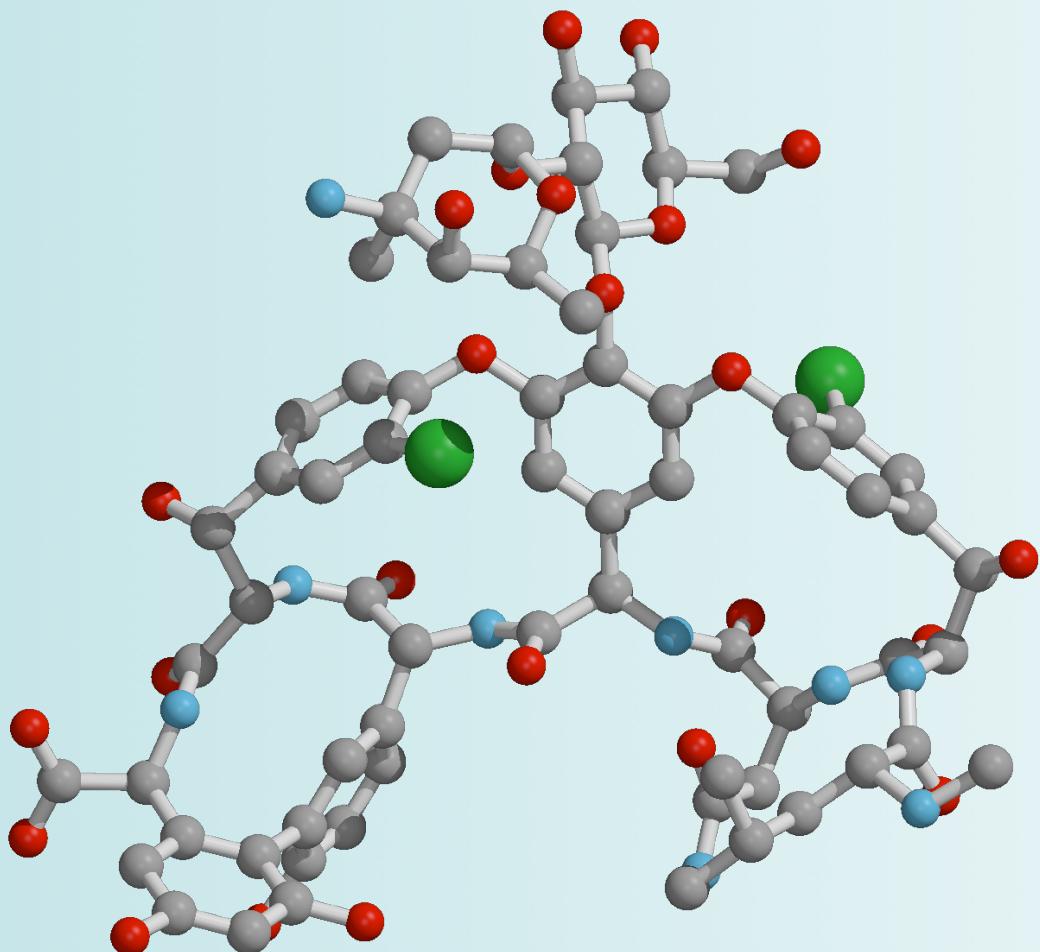
# $\beta$ -Lactamase Inhibitors

**Clavulanic acid** (Beechams 1976) (from *Streptomyces claviger*)

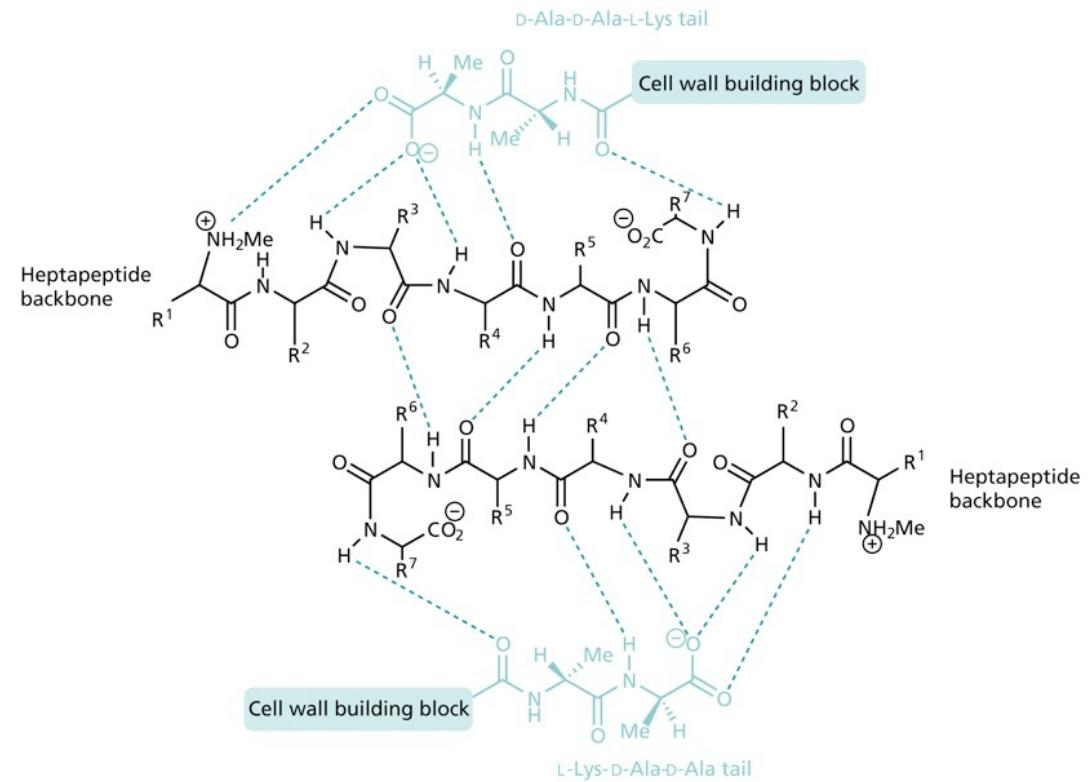
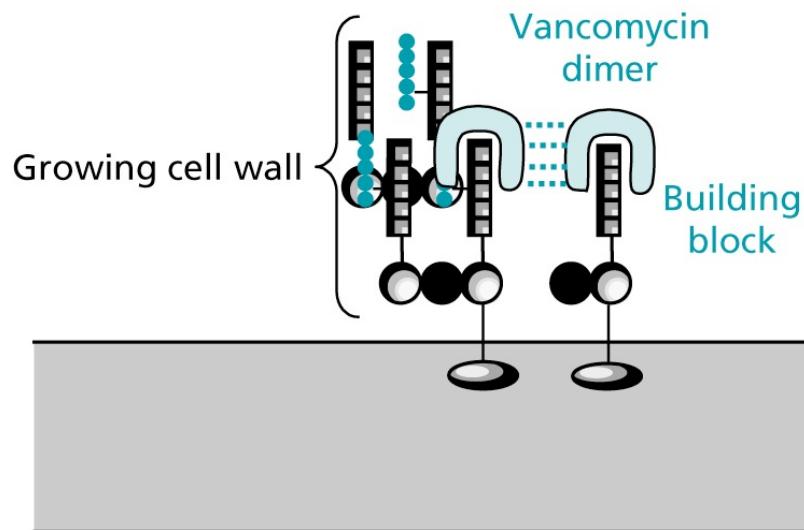


- Weak, unimportant antibacterial activity
- Powerful irreversible inhibitor of  $\beta$ -lactamases - suicide substrate
- Used as a sentry drug for ampicillin
- Augmentin = ampicillin + clavulanic acid
- Allows less ampicillin per dose and an increased activity spectrum
- Timenitin = ticarcillin + clavulanic acid

# Glycopeptide antibiotics: Vancomycin

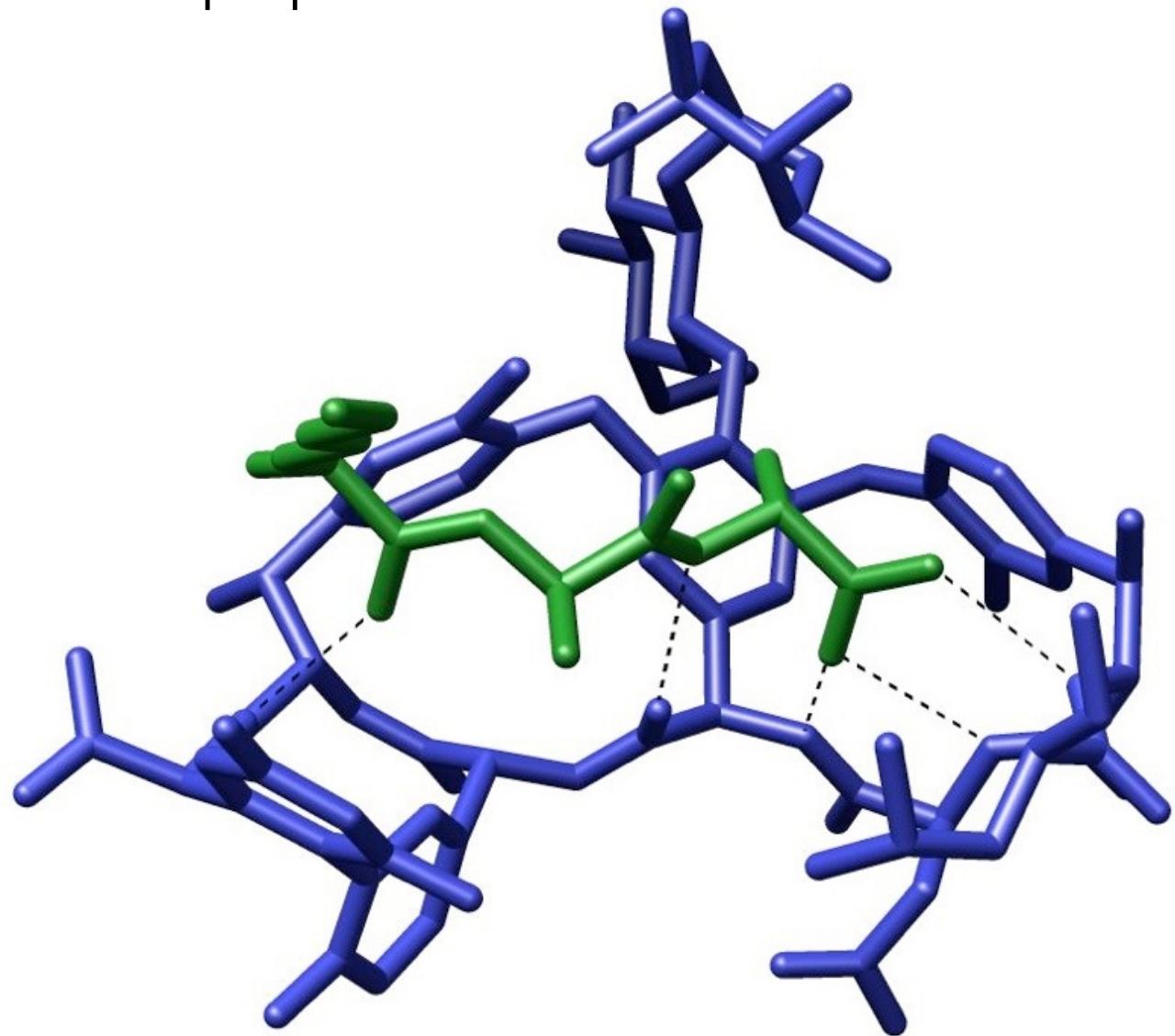
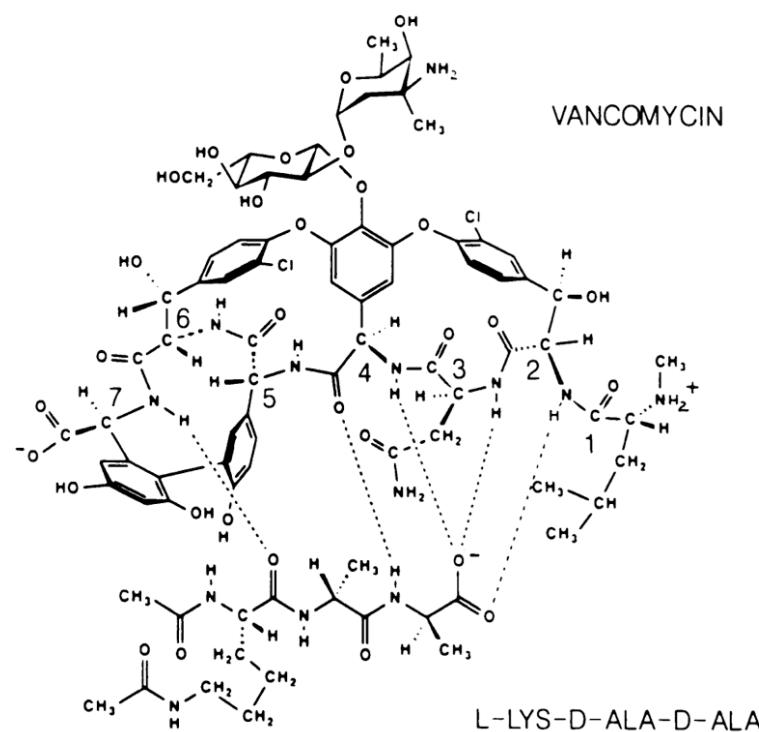


# Inhibition of transglycosylation by Vancomycin

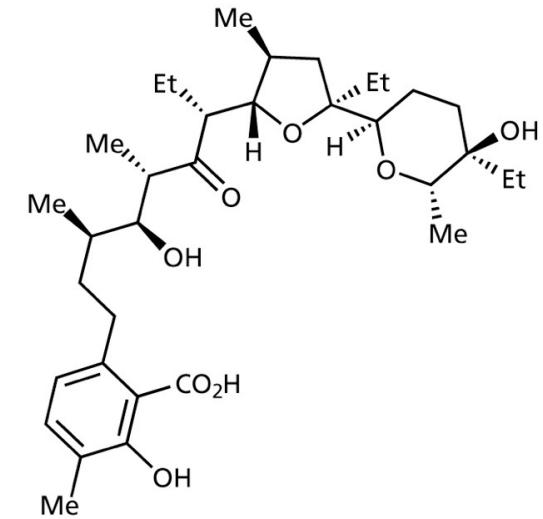
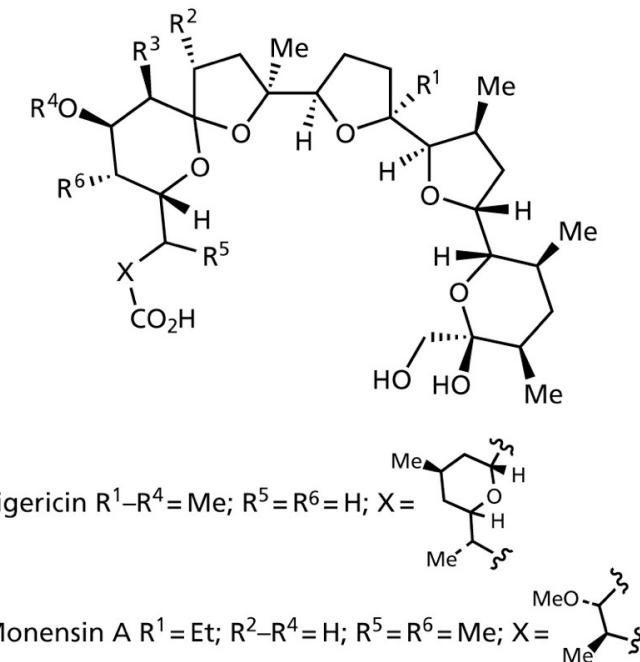
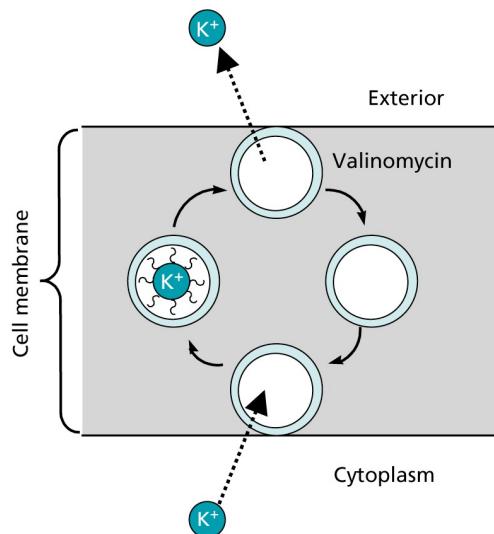
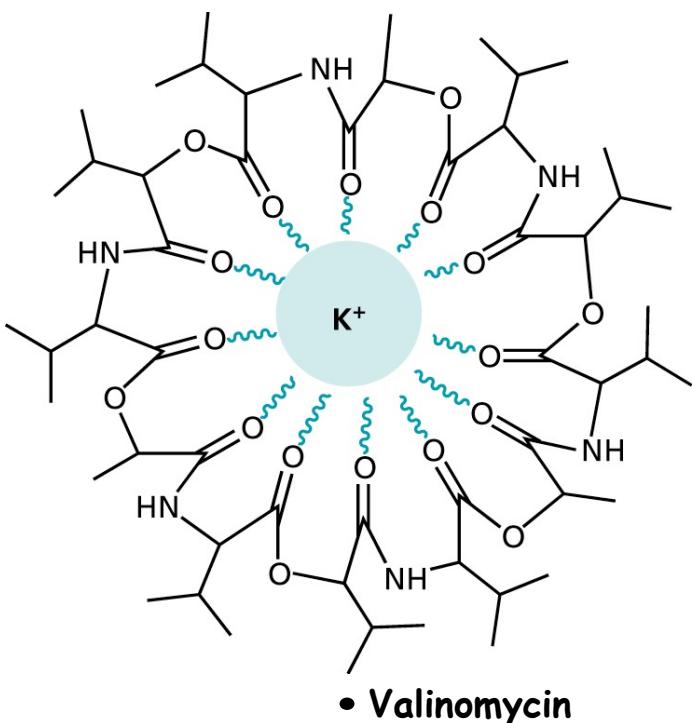


- Vancomycin forms tight hydrogen bonds with the <sup>D</sup>Ala-<sup>D</sup>Ala terminal unit of the pentapeptide, thereby capping the pentapeptides
- Vancomycin can form rather stable head-to-tail dimers
- Due to the large size of Vancomycin it acts as a steric block preventing access from the transglycosylase and transpeptidase enzymes

# Structure of the complex between Vancomycin and a tripeptide



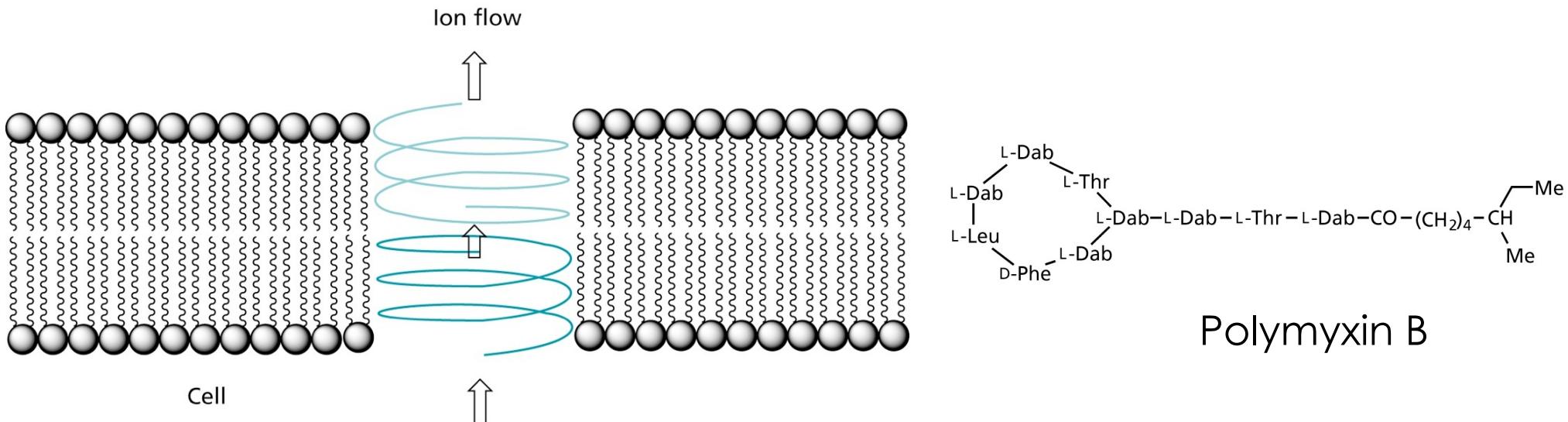
# Agents that act on the plasma membrane



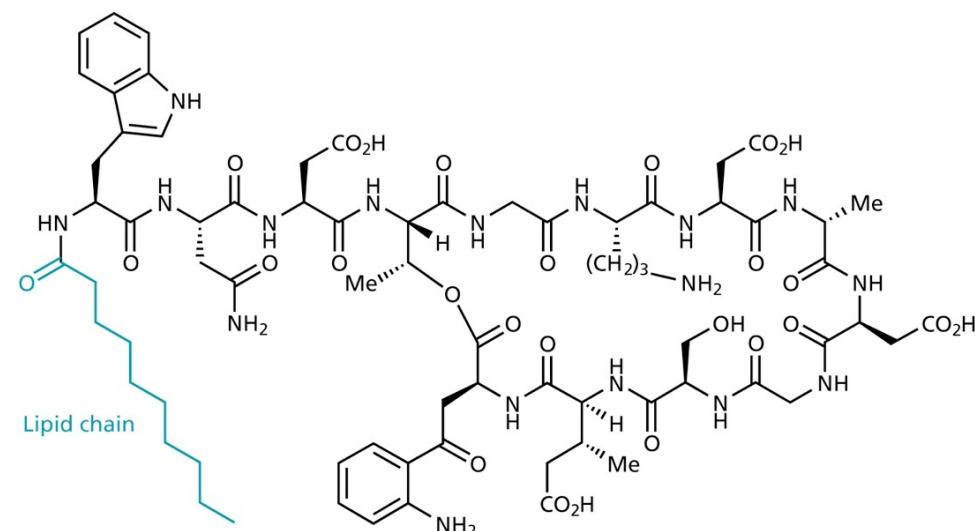
Ionophores such as **Valinomycin**, **Nigericin**, **Monensin A** and **Lasalocid A** complex ions and transport them in a non-regulated fashion through the membrane disturbing ion concentrations intra- and extracellularly.

Lasalocid A

**Gramicidin A** forms channels that allow passing of ions, but also of nucleosides. Another such peptide is **Polymyxin B**, that binds with high selectivity to the bacterial plasma membrane

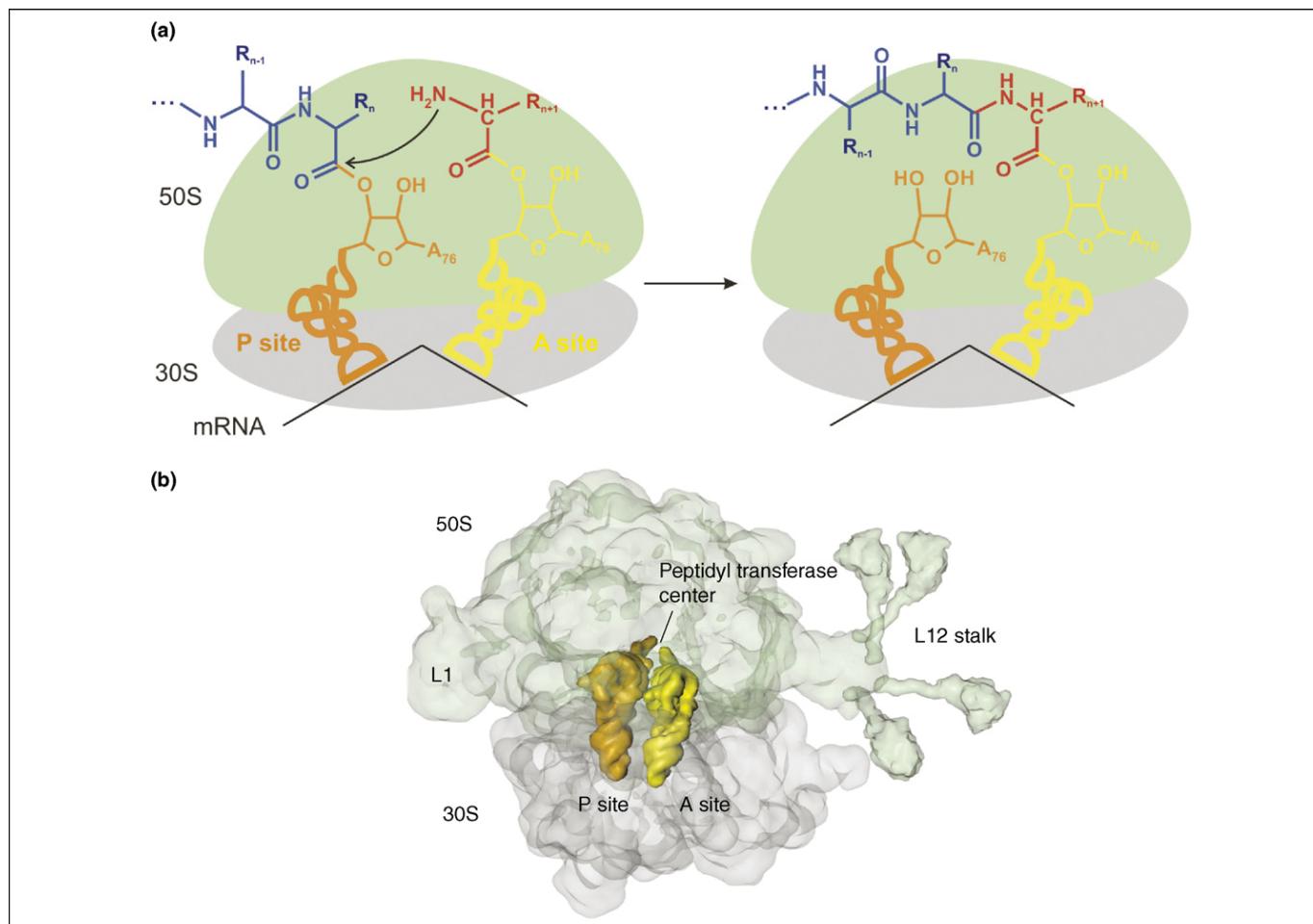


Recently, lipopeptides such as **Daptomycin** were discovered that disrupt the cell membrane

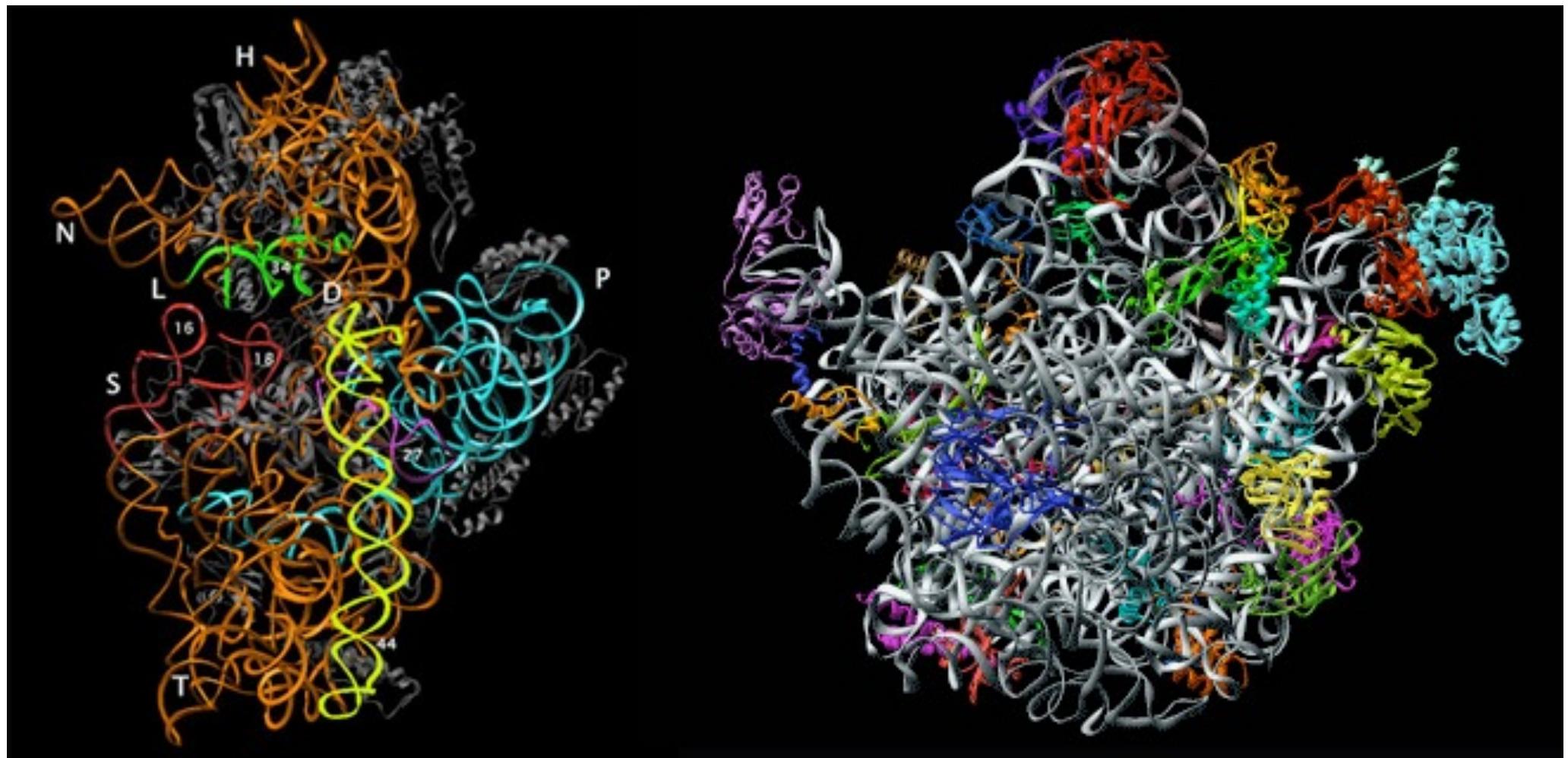


# The ribosomes

- ribosomes are the location of protein biosynthesis
- ribosomes consist of both proteins and RNA
- the active site for peptide bond formation consists solely of rRNA
- it consists of a large (50S) and a small (30S) subunit



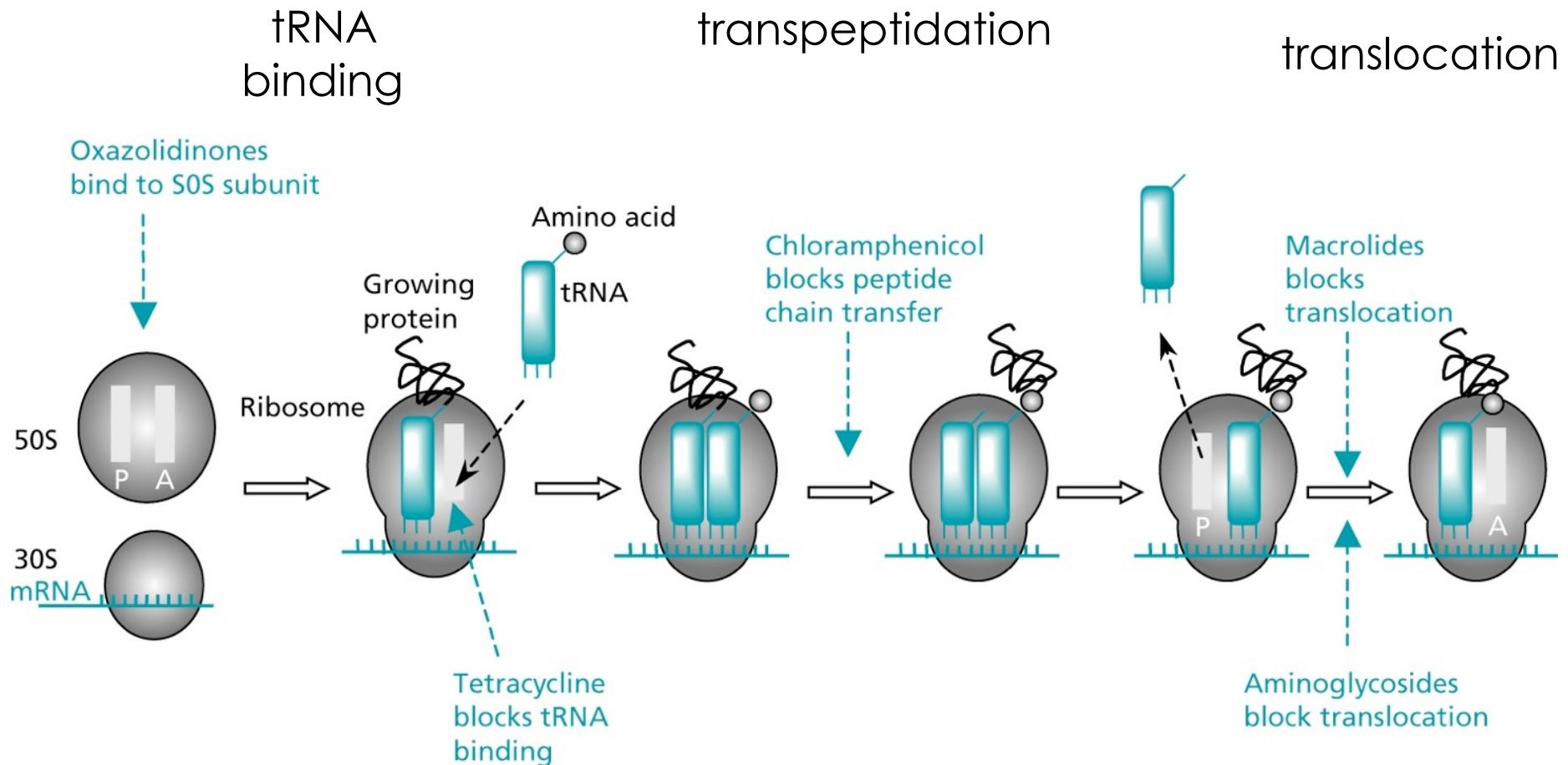
# Ribosomes are made of RNA and proteins



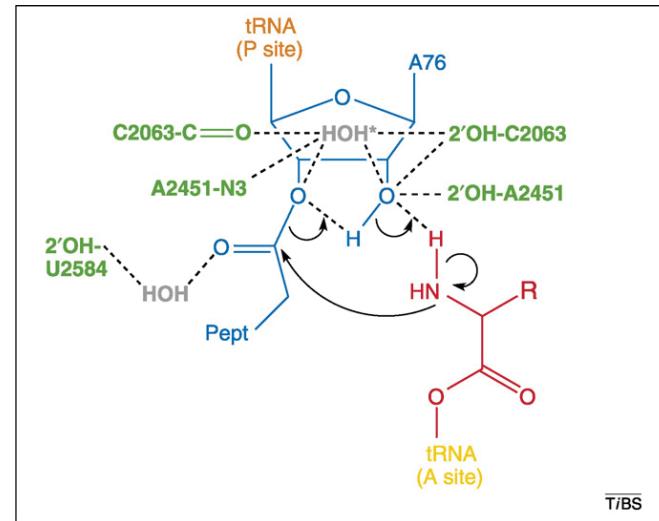
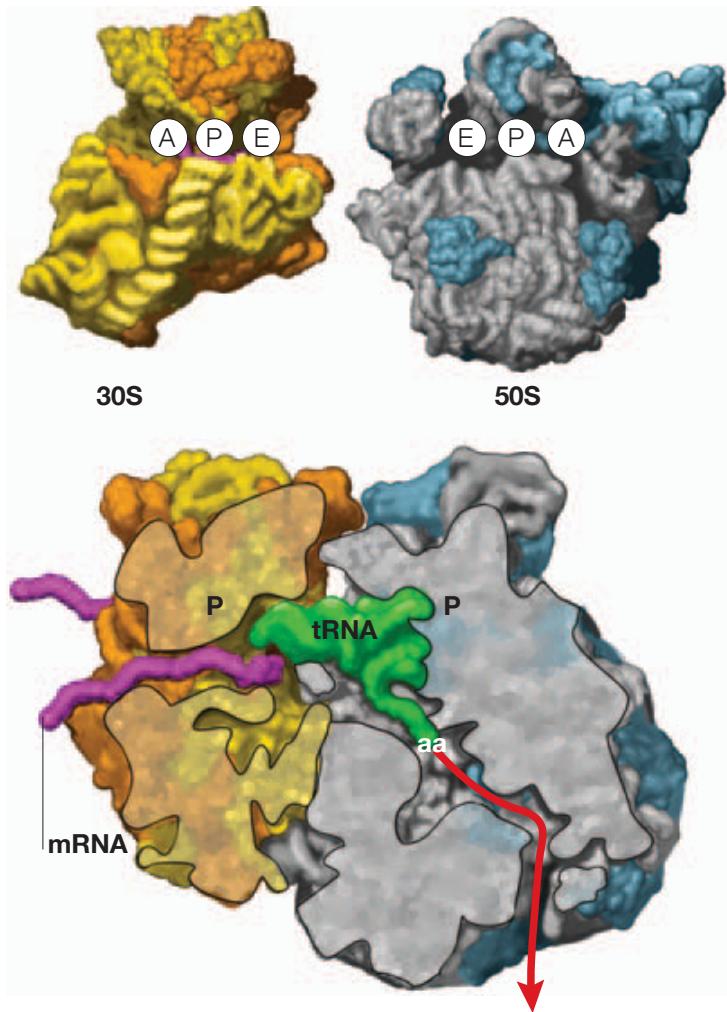
Structure of the 30S subunit  
from *T. thermophilus*

Structure of the 50S subunit  
from *D. radiodurans*

# Interference with protein synthesis by blocking protein translation



Protein biosynthesis at the bacterial ribosome  
([video](#))

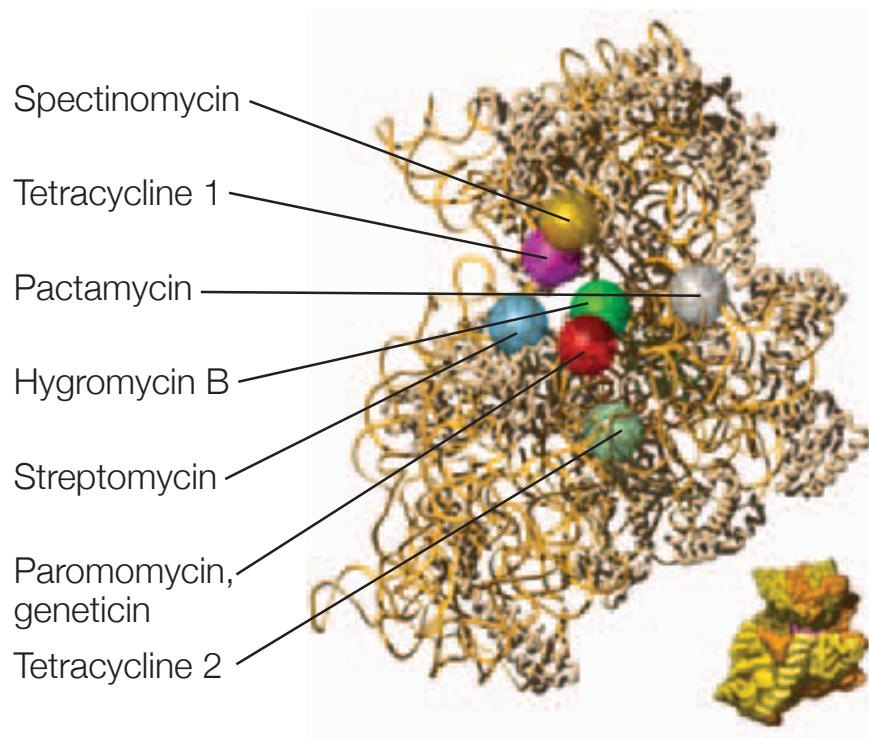


the ribosome employs entropic catalysis by positioning substrates, re-organizing water and providing an electrostatic network to stabilize reaction intermediates

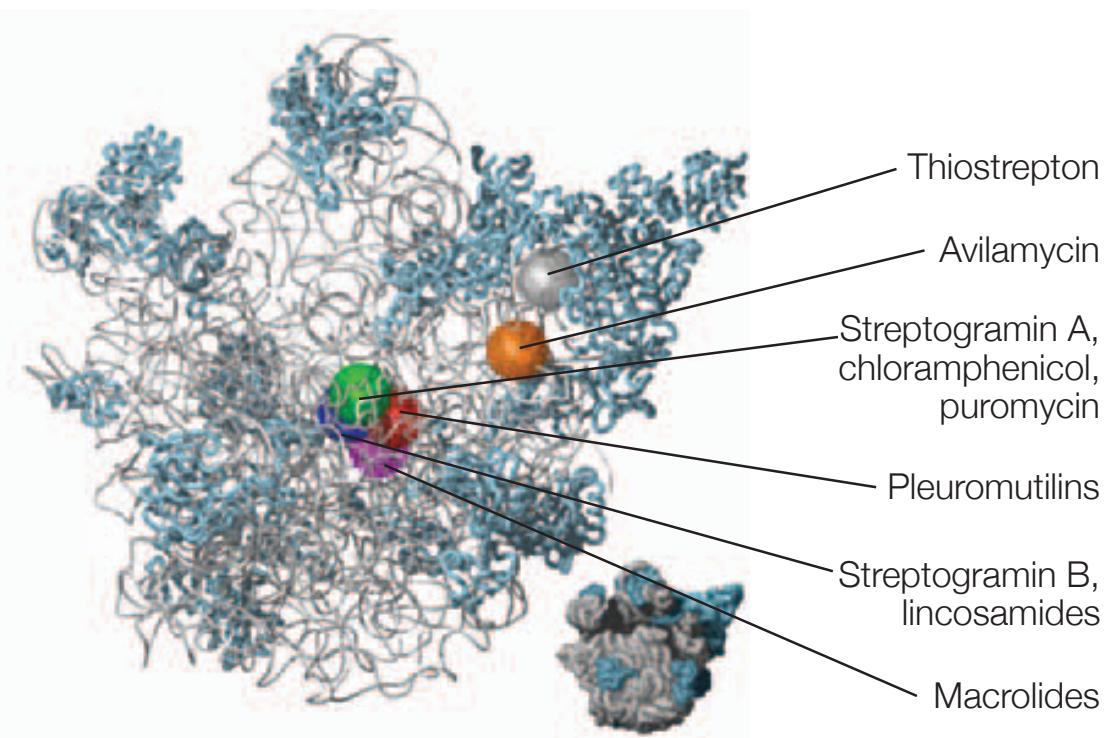
- mRNA passes through two narrow channels on the 30S subunit to be displayed at the interface decoding site where it interacts with the tRNA anticodon
- Initially the start codon is translocated into the P site on the 30S subunit to interact with the initiator tRNA charged with Met
- the second mRNA codon , in the adjacent A site, accepts the next tRNA. Basepair matching is checked by the decoding site
- If it matches, the aminoacyl end of the tRNA is swung to the peptidyl-transferase centre, on the 50S subunit
- The ribosome then moves along the mRNA to bring the next codon into the aminoacyl (A) site. In addition, the tRNA holding the nascent peptide strand is translocated into the peptidyl (P) site
- At the end the full strand is moved into the E (exit) site, from where it is ejected

# Binding sites for antibiotics

30S

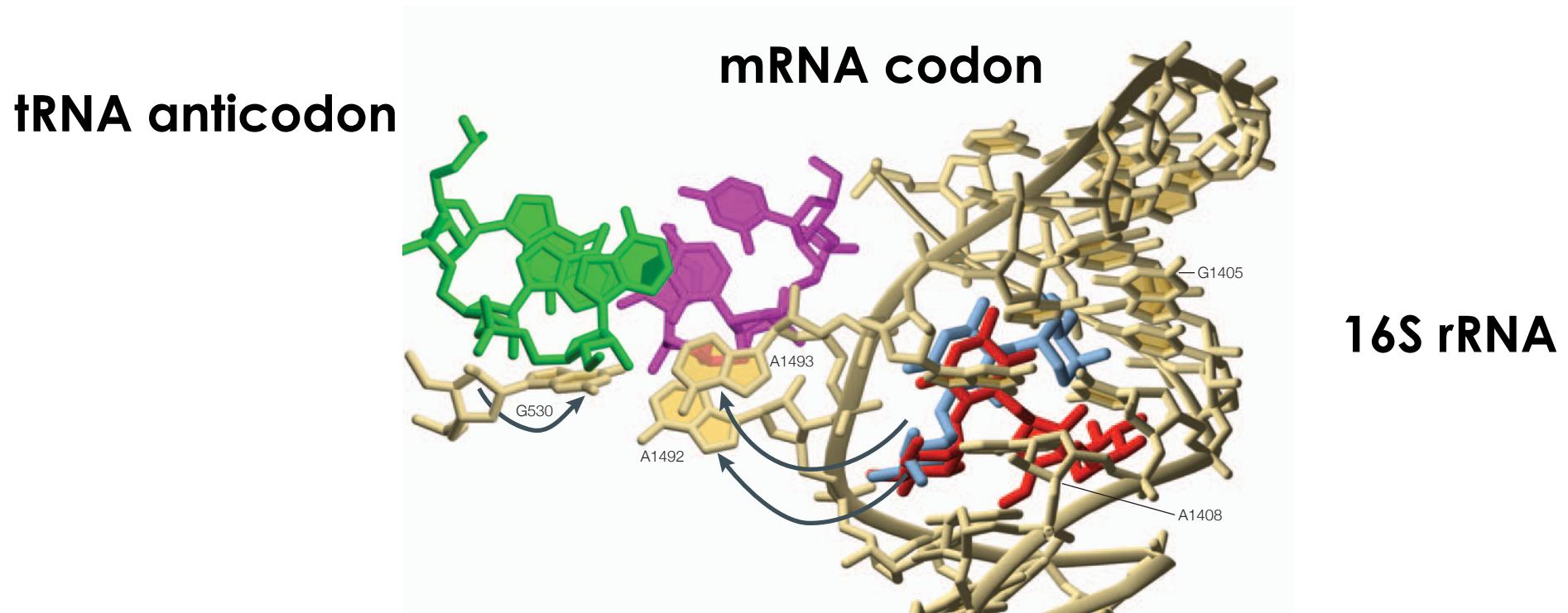


50S



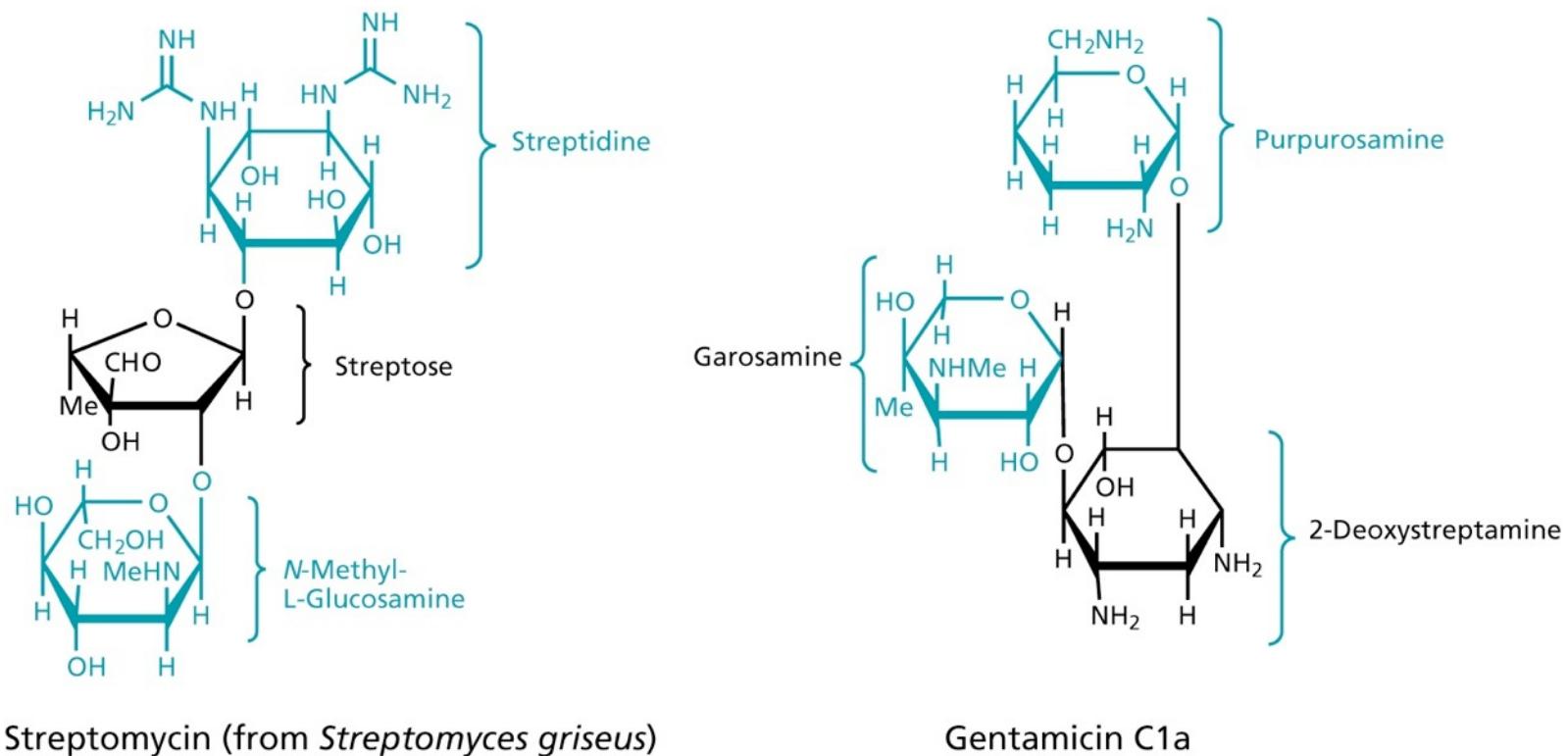
- the chain of the nascent polypeptide passes through a narrow tunnel on the 50S subunit, which is 100 Å in length, and runs from the peptidyltransferase centre to emerge from the back of the ribosome
- the macrolides bind in the narrow tunnel blocking exit of the nascent chain

# Binding site on the 30S subunit



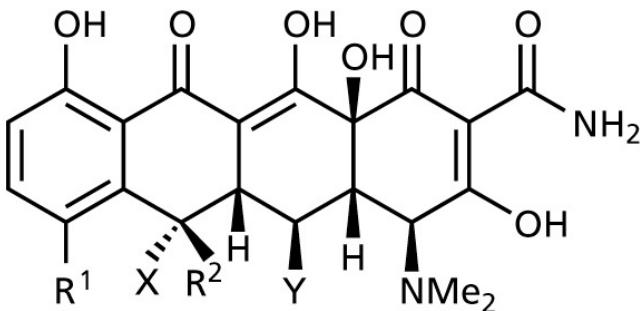
- during protein synthesis nucleotides A1492 and A1493 are flipped out of the 16S rRNA helix to interact with the mRNA codon and its cognate tRNA anticodon at the ribosomal A-site
- some aminoglycosides antibiotics bind within the helix and induce a similar but not identical flip-out of A1493 and A1492.
- as a result basepair matching is NOT required leading to the addition of incorrect amino acids to the nascent chain.

# Aminoglycosides



- at physiological pH charged-> binding to lipopolysaccharide, phospholipids and permeabilize the membrane
- bind to the 30S ribosomal subunit, thereby preventing the movement along the mRNA, so that the triplet code cannot be read
- don't bind to human ribosomes
- polar molecules, need to be injected, unable to cross the BBB

# Tetracyclines



Chlortetracyclin (Aureomycin) ( $R^1 = Cl$ ,  $R^2 = MeX = OH$ ,  $Y = H$ )

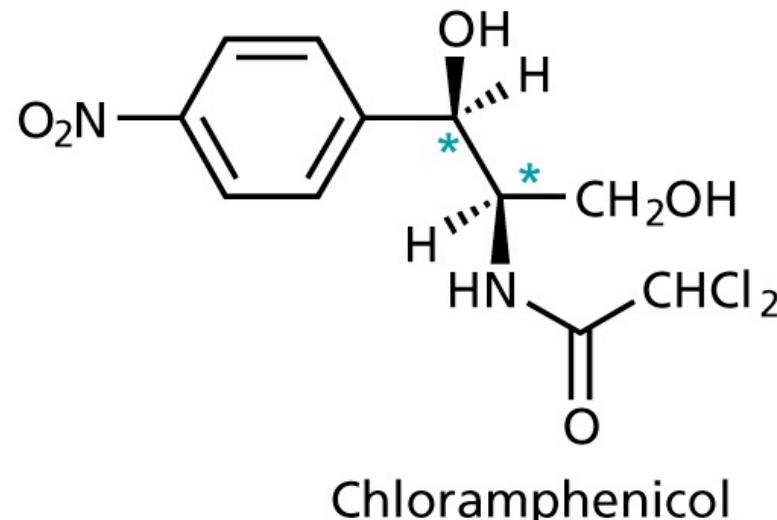
Tetracycline ( $R^1 = H$ ,  $R^2 = MeX = OH$ ,  $Y = H$ )

Doxycycline (Vibramycin) ( $R^1 = H$ ,  $R^2 = MeX = H$ ,  $Y = OH$ )

Demeclocycline ( $R^1 = Cl$ ,  $R^2 = H$ ,  $X = OH$ ,  $Y = H$ )

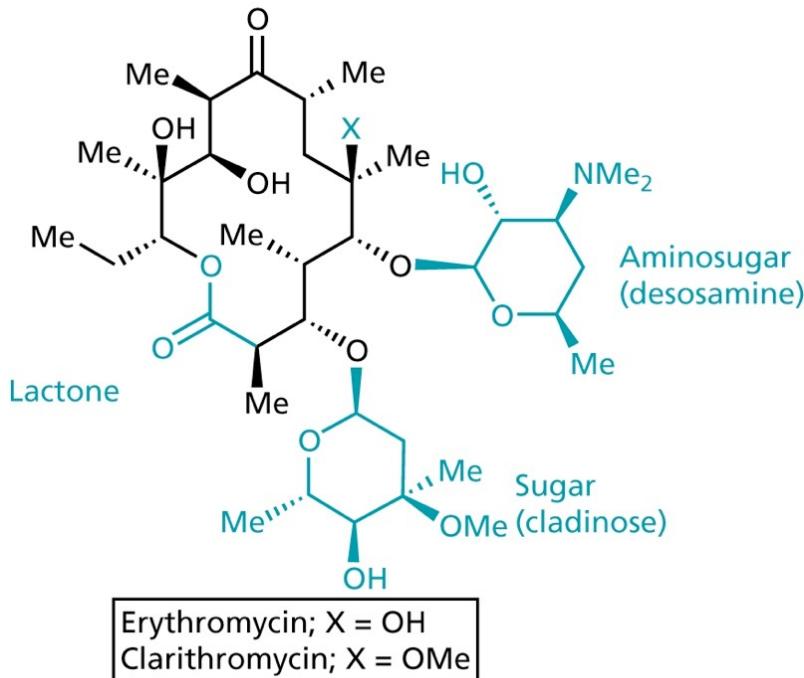
- bacteriostatic, widely prescribed
- broad-band antibiotic against gram-positive and gram-negative bacteria
- bind to **30S subunit** of ribosomes, and thereby prevent aminoacyl-tRNA from binding
- passes through membrane via porins
- inhibits also protein synthesis in mammalian cells, but more effective in bacteria

# Chloramphenicol



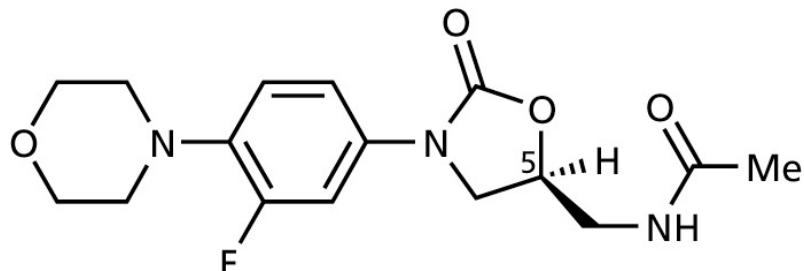
- binds to the **50S subunit** of the ribosomes, inhibiting the movement of the ribosomes along the mRNA
- used to cure eye infections and typhoid
- quite toxic
- bacteria that contain the gene for chloramphenicol transferase are resistant

# Macrolides



- one of the safest antibiotics
- binds to the 50S subunit of the ribosome, thereby inhibiting translocation
- can be orally taken
- acid sensitive

# Oxazolidones



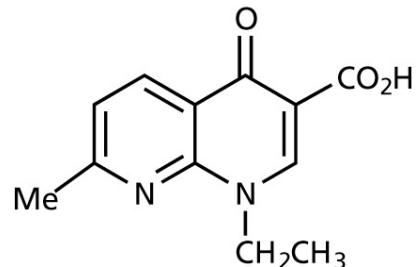
**Linezolid**

Before protein synthesis the 30S and the 50S subunits must associate to form the 70S ribosome. This step is inhibited

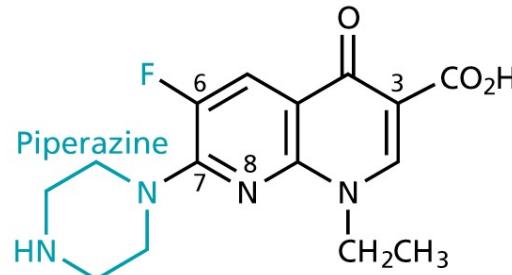
# Antibiotics inhibiting nucleic acid transcription and replication:

## Quinolones and fluoroquinolones

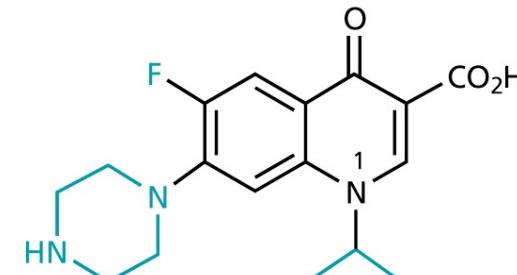
1st generation



Nalidixic acid



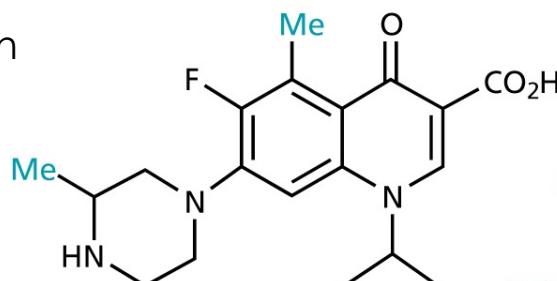
Enoxacin



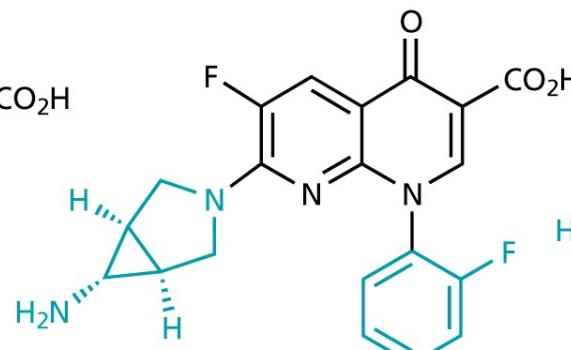
Ciprofloxacin

- broad-band antibiotics
- inhibit the replication and transcription of bacterial DNA by **inhibiting the topoisomerases**
- used for infections involving the urinary, respiratory and gastrointestinal tracts as well as against infections of skin, bone and joints

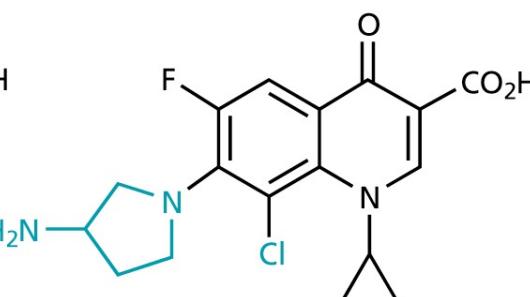
2nd generation



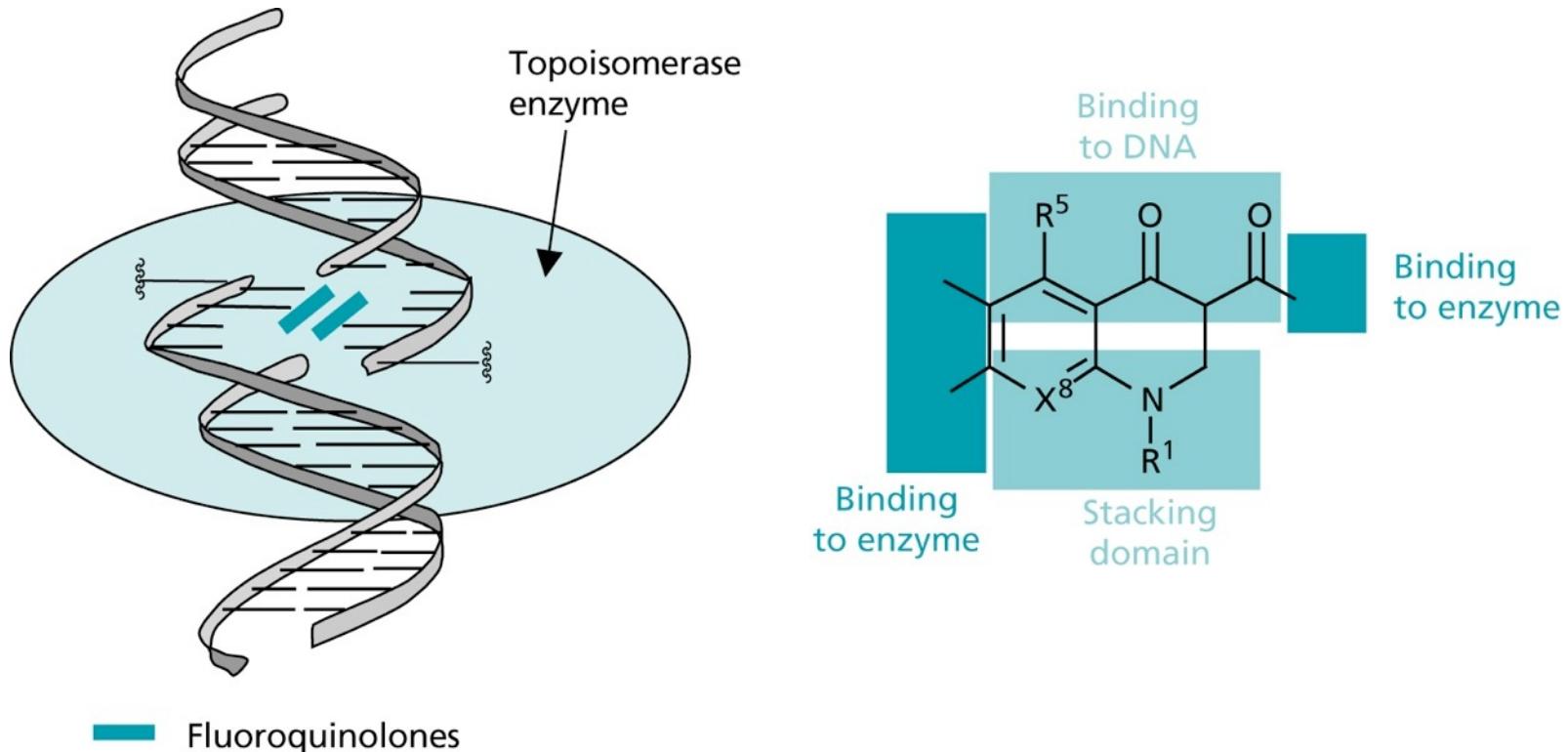
Grepafloxacin



Trovafloxacin

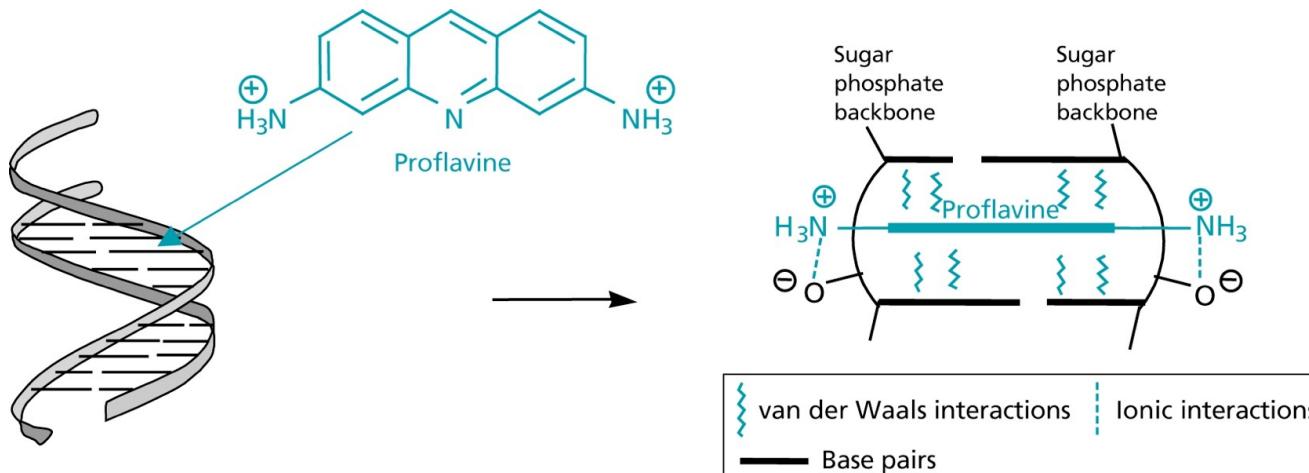


Clinafloxacin

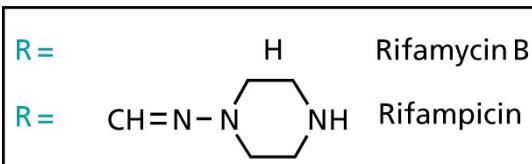
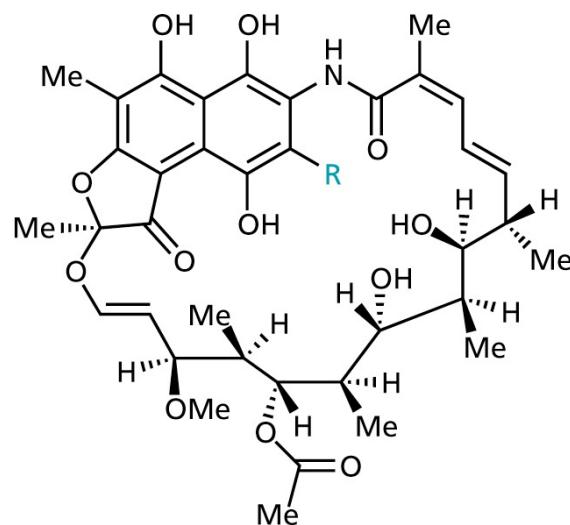


- during replication, supercoiling of the DNA is removed by helicases
- the created tension is released by **topoisomerases**, that cut break both strands of the DNA and rejoin them
- fluoroquinolones inhibit topoisomerase IV in gram +ve bacteria with 1000 fold selectivity over the human enzyme
- in gram -ve bacteria, the topoisomerase II (**DNA gyrase**), that reintroduces supercoiling after replication and transcription is inhibited

# Aminoacridines



- directly interact with bacterial DNA through intercalation
- thereby prevents replication and transcription (but toxic)



# Rifamycins

- binds non-covalently to the bacterial DNA-dependent RNA polymerase
- does not attach to eukaryotic RNA polymerase
- bactericidal
- used to treat tuberculosis and staphylococci infections