

★

ADME

Movement of drug molecule from site of administration to blood stream so that it may reach to it's site of Action

↓
DR Complex.

Transport: → ① Passive diffusion.

~~ATP~~

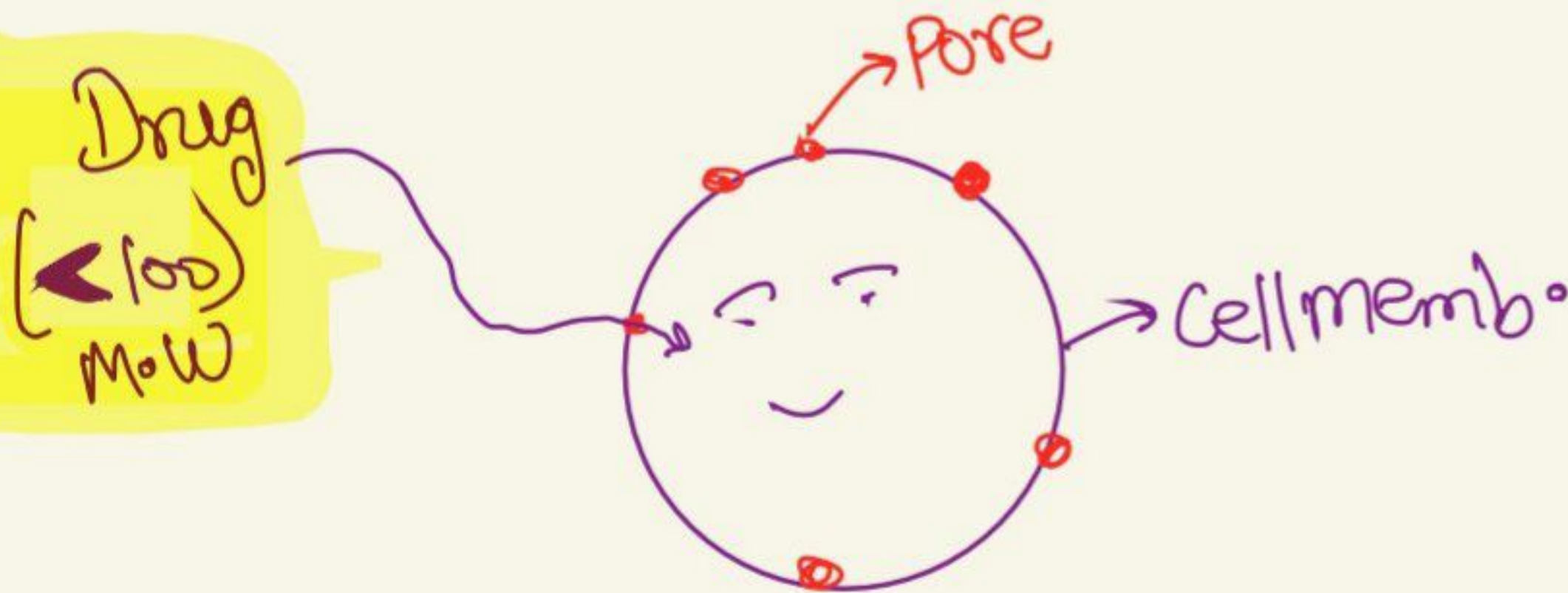
High Conco

Low Conco

(Movement)

② Filtration

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Eg ⇒ G_oF_oR.

③ Active Transport ⇒ Movement (Against the Conco gradient)

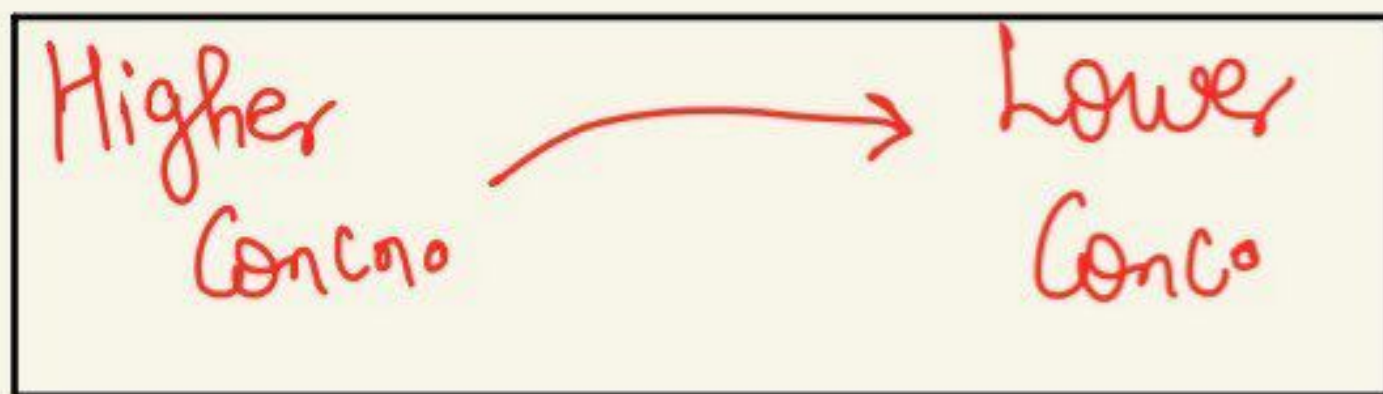
↓
ATP Consume

eg ⇒ Levodopa,
Carbidopa.

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④ Facillated Transport ⇒ Need a Carrier Molecule.

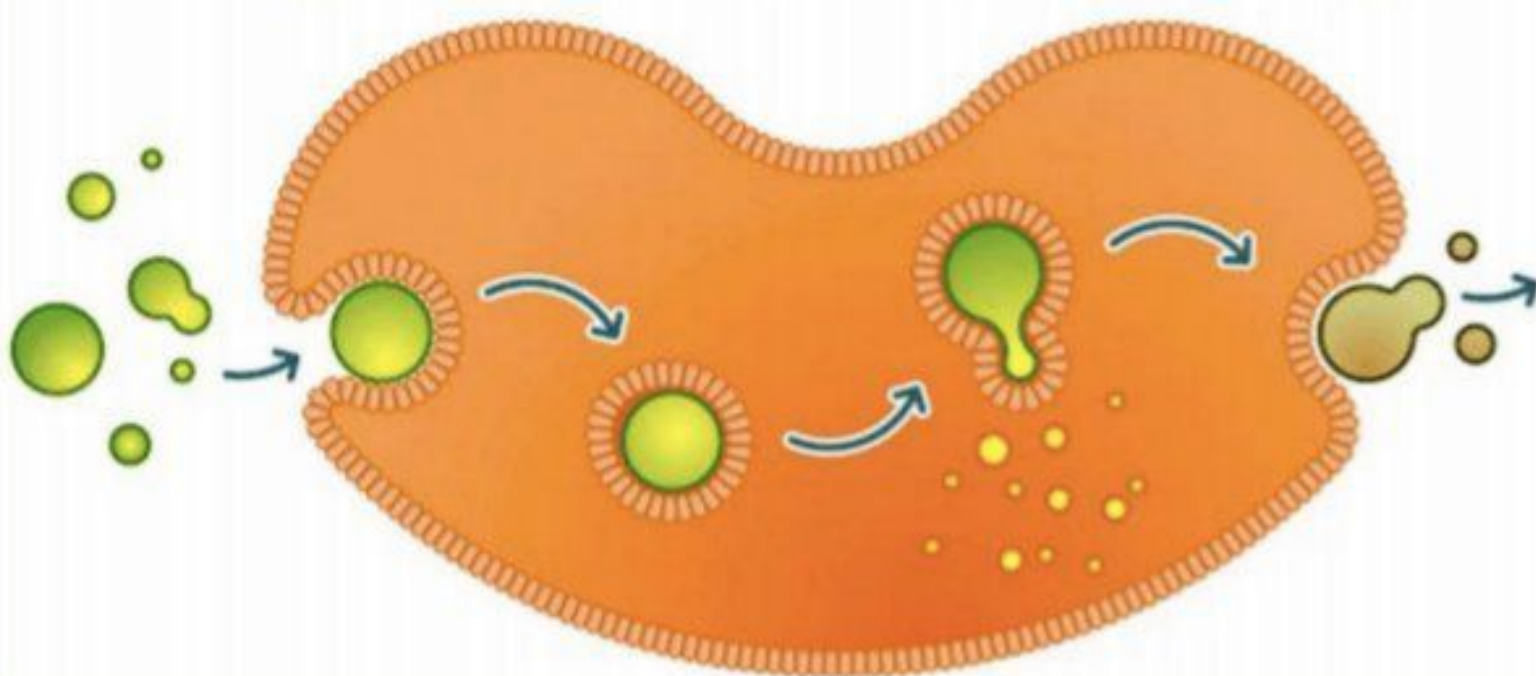
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eg ⇒ uptake of Glucose by Cell.

⑤ Endocytosis ⇒

Endocytosis VS **Exocytosis**



★ In endocytosis ⇒ Cell membrane modified as Vesicle.
↓ for
Drug molecule get engulfed.

Endo = engulf.

Exo = remove by cell.

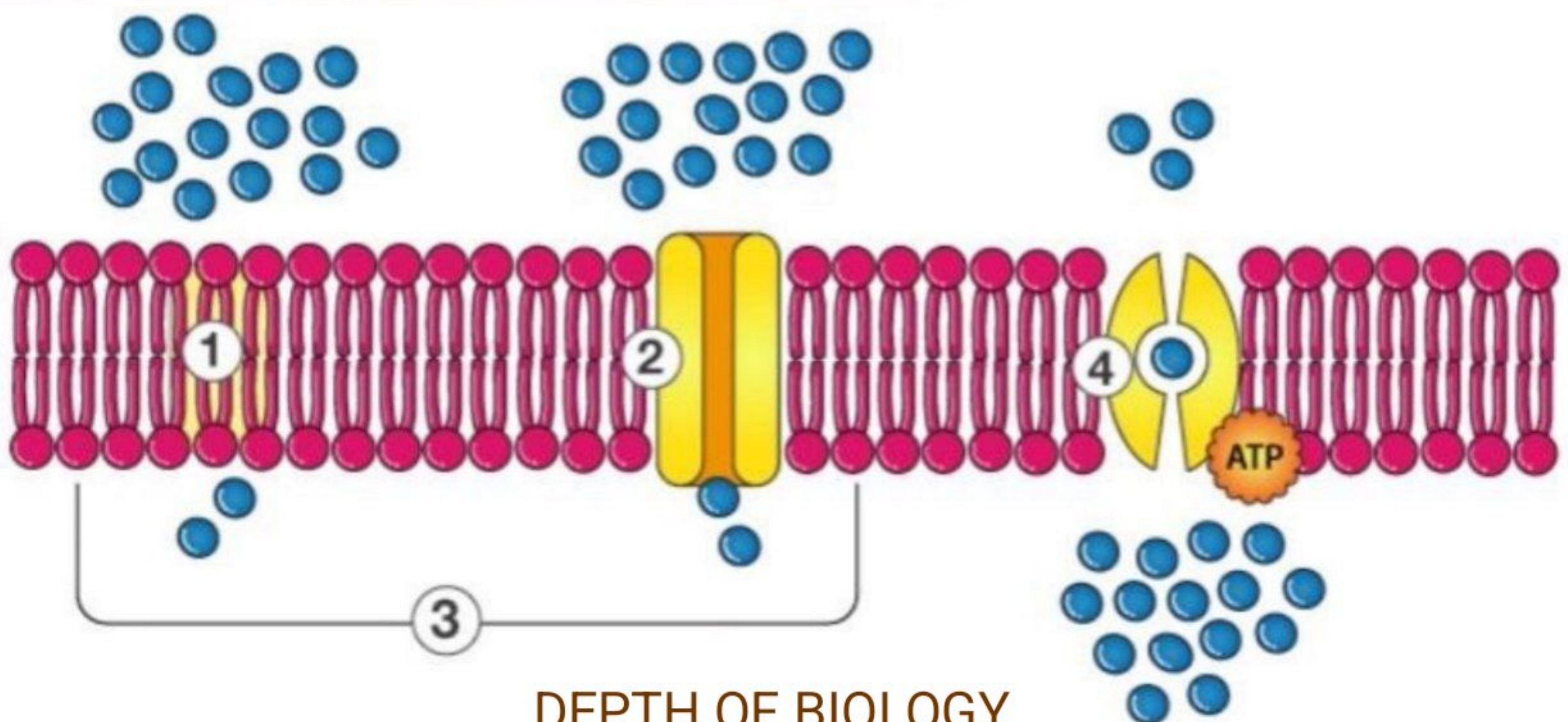
Endocytosis

Pinocytosis
Engulf Liquid drug

Phagocytosis
Engulf solid drug / Particle.

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DIFFUSION: MEANS OF TRANSPORT



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① Diffusion | ② Facillated diffusion | ③ Passive transport | ④ Active transport

① Absorption $\Rightarrow$ DEPTH OF BIOLOGY

Route of Administration (Drug) $\rightarrow$ Blood stream.

Factor affecting Absorption.

① Pharmaceutical factor $\Rightarrow$

formulation
 $\downarrow$
Tablet $\rightarrow$ Dry Granule method.
 $\rightarrow$ Wet Granule method.
 $\downarrow$
Excipients Used.

Like $\rightarrow$ formulation, Particle size.
 $\downarrow$
Dissolution. Disintegration.
 $\downarrow$
Small

Both must be good. DEPTH OF BIOLOGY

② Drug factor

Lipid Solubility.
 $\uparrow\uparrow$



Ionization.

pH $\Rightarrow$ Acidic drug dissolve in Stomach.
 $\rightarrow$ Basic drug dissolve in Intestine

drug to Absorption to body

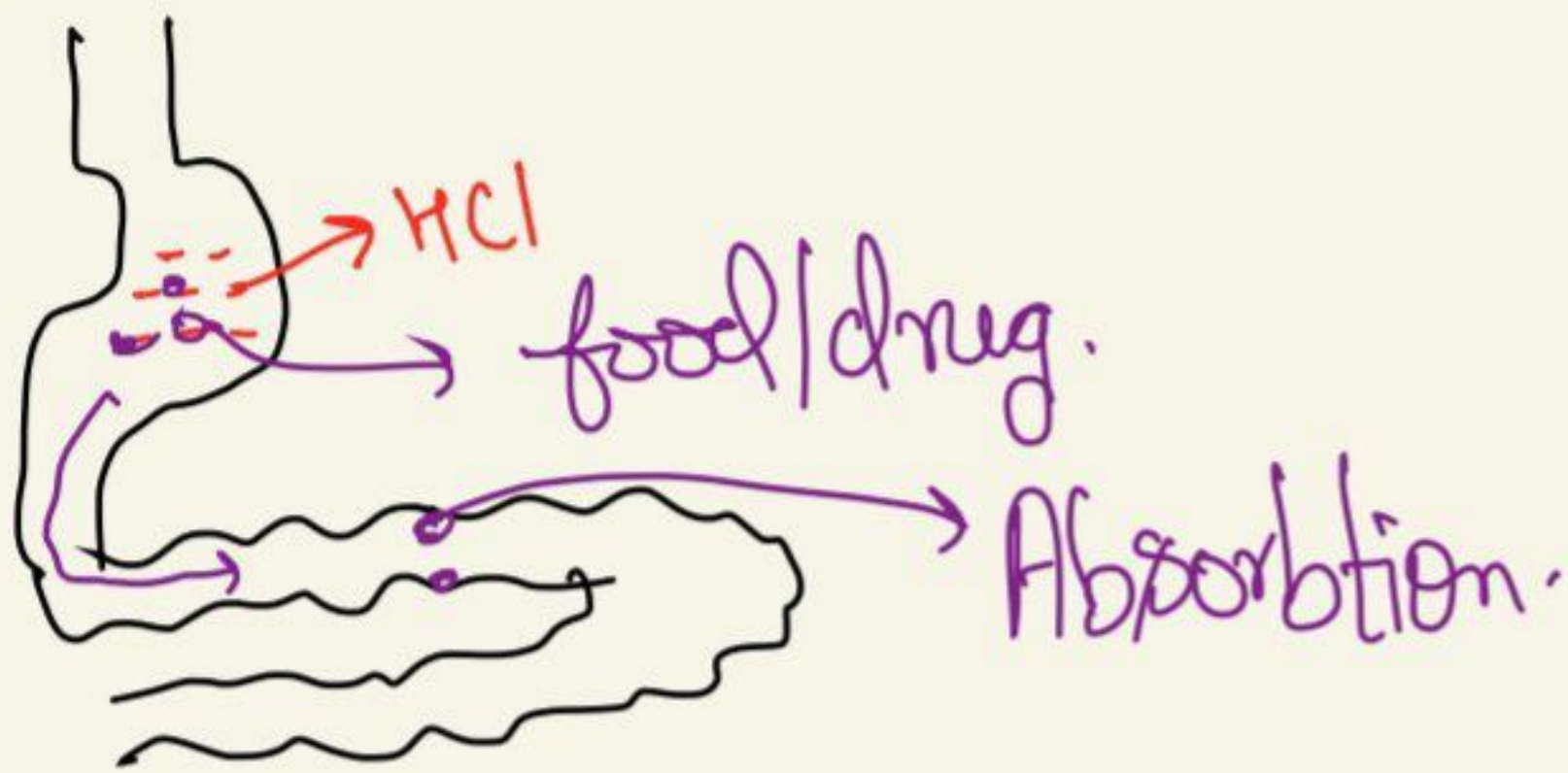
$\downarrow$
It must be in Unionised form.

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③ Biological factor $\Rightarrow$ DEPTH OF BIOLOGY

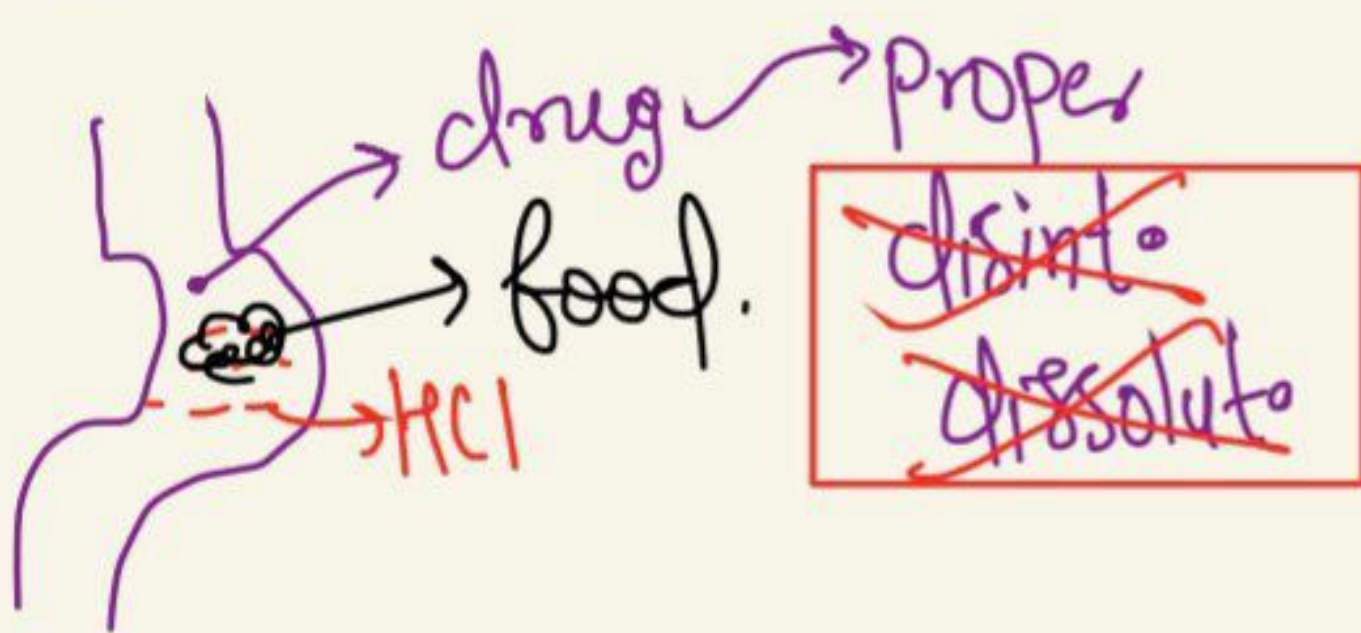
1) Surface Area $\Rightarrow$ (Small Intestine) $\rightarrow$ Contain Villi.
 $\downarrow$
Absorption $\uparrow$

② Gastric Emptying time $\Rightarrow$



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③ Presence of food $\Rightarrow$ After food drug $\rightarrow$ PCM, Aspirine
Empty Stomach drug $\rightarrow$ Pentaprozok
Omeprazole.



④ Disease $\rightarrow$ Stomach, Intestine, Liver, Kidney.
 $\swarrow$ which affect
 $\Downarrow$ Then ADME affect.

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⑤ First pass Metabolism.

Drug → Stomach → Small Intestine

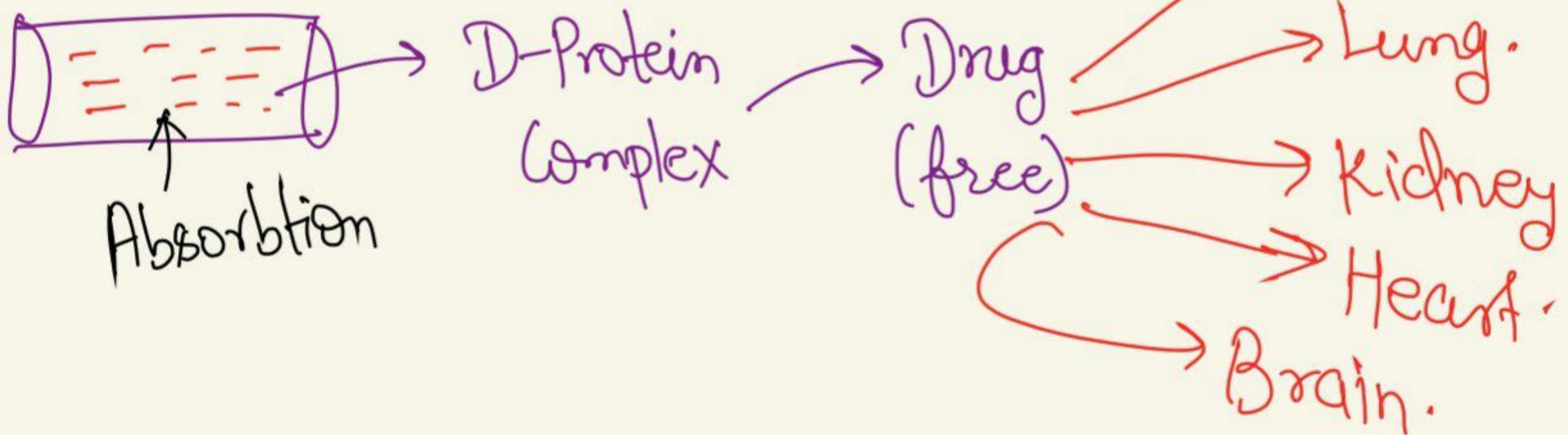
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So, Give Bypass → eg ⇒ IV, Nasal

II Distribution

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Factors

① Blood flow → Greater in Kidney, Brain

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→ lower → Skeletal muscle
→ Joint.

① Blood flow ↑ distribution ↑.
(Drug) → Example → (Anesthesia)
↓
Location
Brain, Liver, kidney.

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② Capillary Permeability ⇒
Permeability ↑
Drug Cross ↑ } → depends On
Capillary Struc.
Chemical Nature of drug.

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③ Lipophilicity ↑
Cross ↑ → Pharmacological Action ↑.

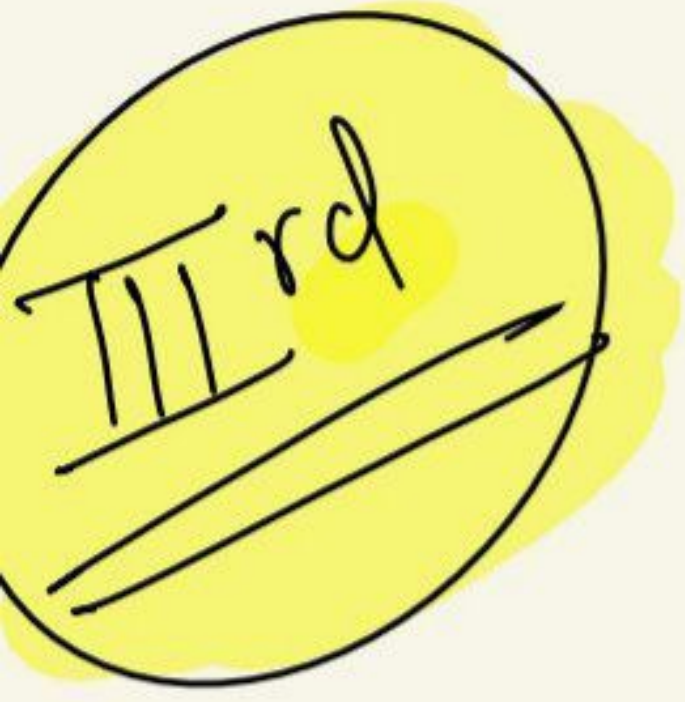
④ Drug Protein Complex ⇒
↓
Reversible
→ Acidic drug bind with Albumin.
→ Basic drug bind with α-Acid Glycoprotein

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Volume of Distribution $\Rightarrow$

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$$V_d = \frac{\text{Amount of drug in body.}}{\text{Plasma Concentration}}$$



Metabolism (Biotransformation)

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Conversion of One form of drug $\rightarrow$ to another form of drug.

$\Rightarrow$ for further Elimination of drug

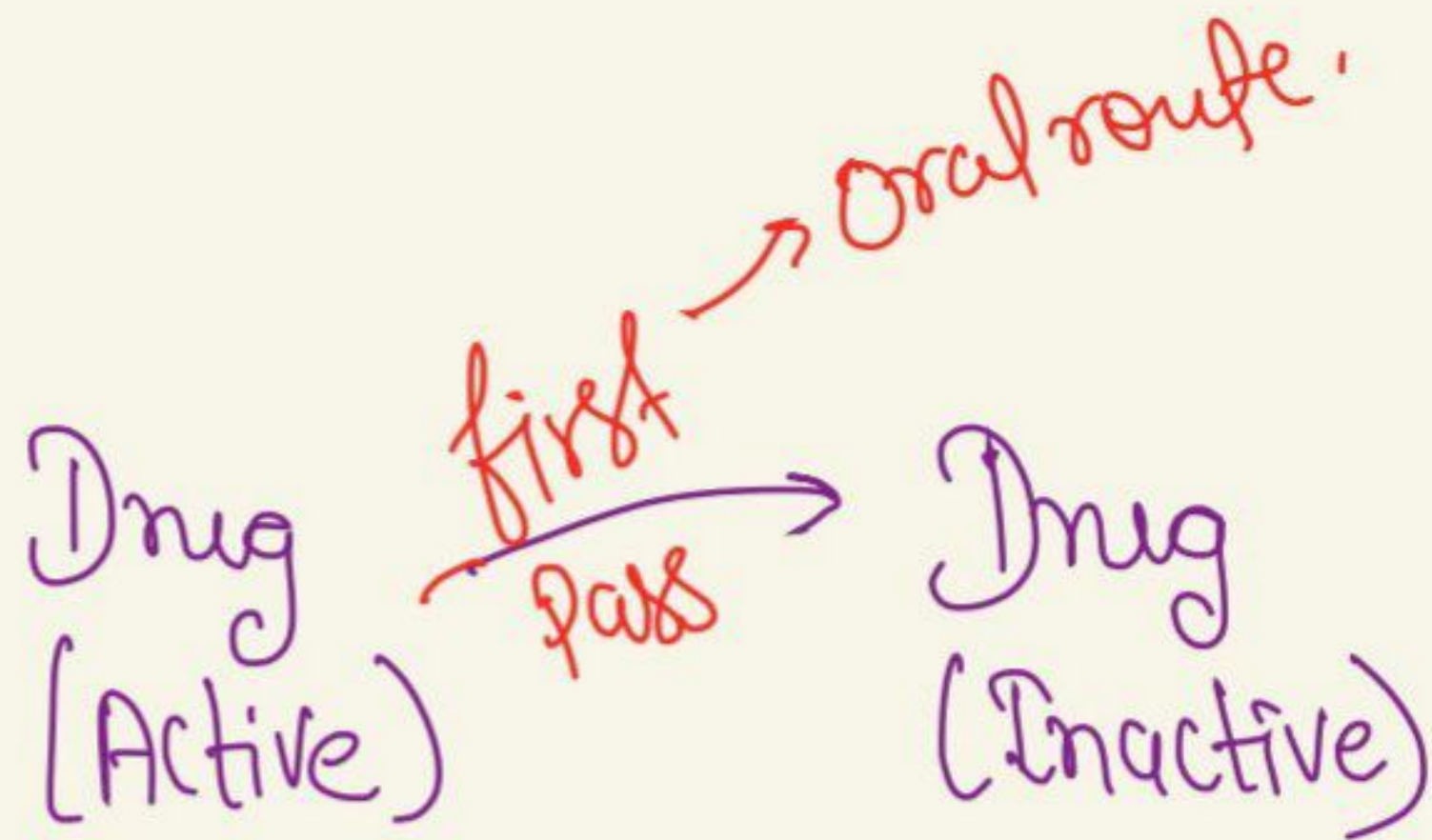
Metabolism is Necessary. (essential step)

Site of Metabolism $\Rightarrow$ Liver^{*}, Kidney, Lung, Skin
Gut Mucosa.

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Metabolism May Result:

① Inactivation of drug $\Rightarrow$



Eg $\rightarrow$ PCM, Propamolol.

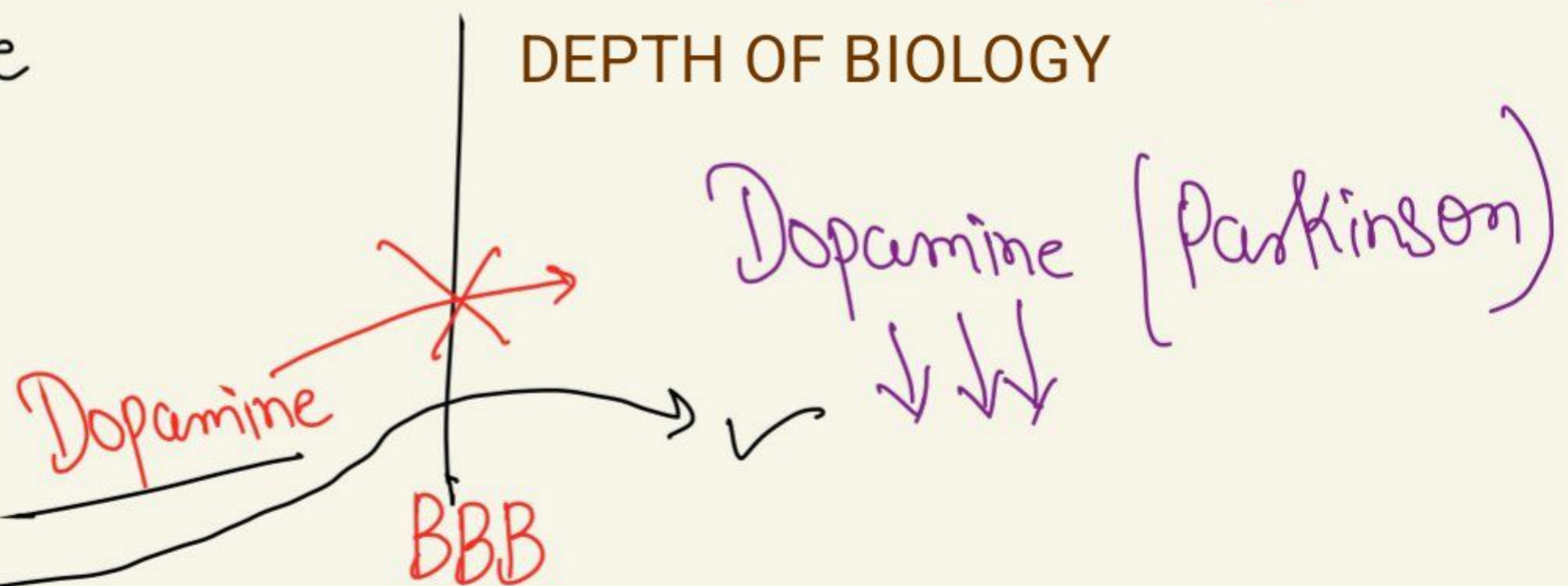
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② Active drug $\rightarrow$ Active Metabolite. [example: Digitoxin $\rightarrow$ Digoxin]

③ Prodrug. [Inactive drug] $\rightarrow$ Activation of drug.

Eg $\Rightarrow$ Dopamine

So, we used pro-drug
Levodopa
[cross].



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④ liver contain Microsomal & Non-Microsomal Enzyme.
found in Microsome of Liver.

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★ Microsomal Enzyme need NADPH & Oxygen for its Normal function.
↓
Eg → NADPH Cytochrome P450 reductase.

⇒ Non-Microsomal → Ent in Cytoplasm & Mitochondria of Liver Cells.

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Phase-I
Metabolism

Phase-II
Metabolism

(Cyth Gem)

Medichem

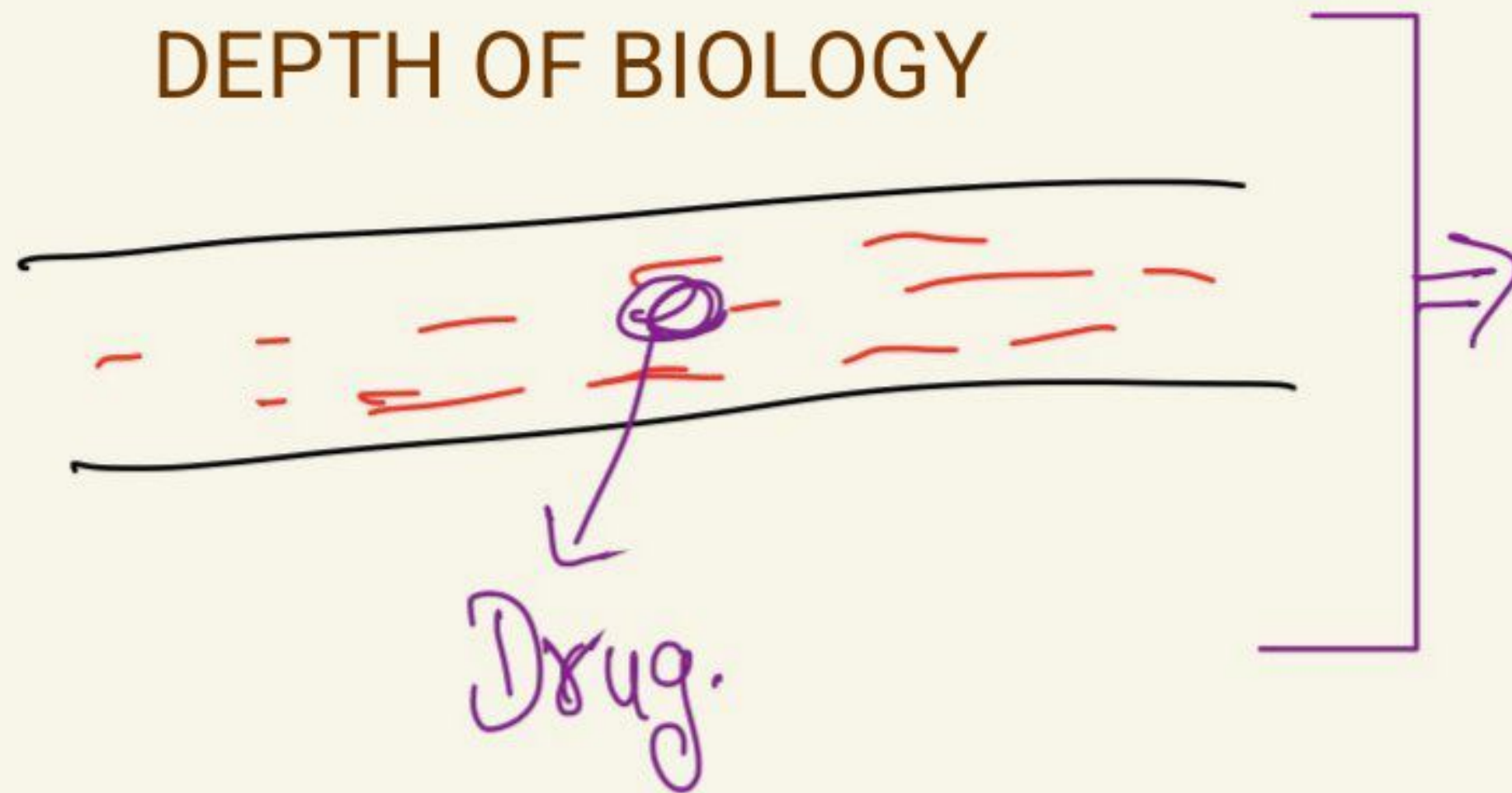
Unit-I

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Excretion

Drug

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Removal of systematically absorbed drug.

Elimination → ① Kidney → Urine.

② Bile → feces.

④ Milk.

⑥ Saliva.

③ Lungs → Exhaled air
(Volatile drug)
(Alcohol, $CHCl_3$)

⑤ Sperm. → Drug highly lipid soluble

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★ Drug remove from Bile → Ampicilline, Tetracycline.

★ Drug removed from Saliva → Lithium, Heavy Metal

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① Renal Excretion $\Rightarrow$

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④ Glomerular filtration.

⑤ Tubular secretion.

⑥ Tubular Reabsorption.

BoP Pharmacy II Ind sem. HAP II Ind.

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