

Drug Metabolism (Biotransformation)

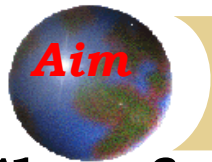
- **Drug metabolism** is the chemical **reactions** that are responsible for the conversion of drugs into other products within the body before and after they have reached their sites of action.

- Almost all of these reactions are catalyzed by **enzymes** and so they will exhibit the general characteristics of enzyme-controlled processes.

The amount of drug reaching the receptor site depends upon how much of the drug is metabolized before it reaches its site of action.

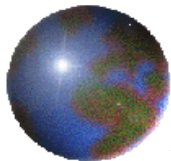
Drug metabolism is useful in both:

Design of new drugs and development of the existing drugs

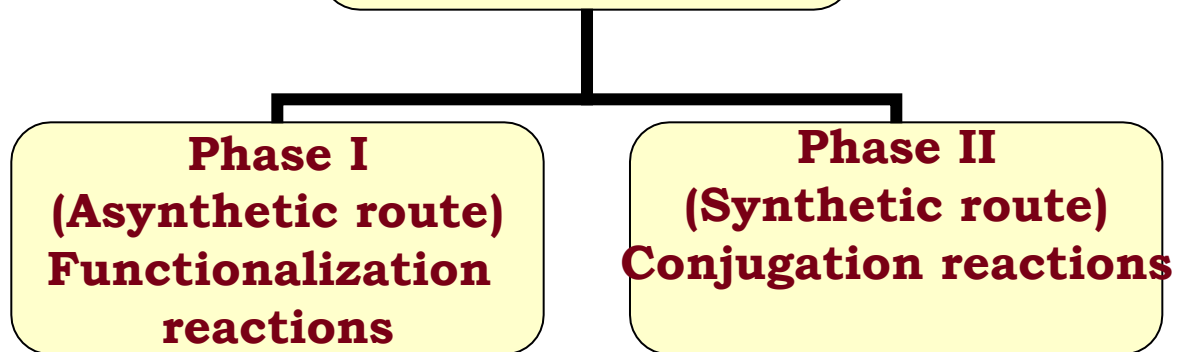


The function of biotransformation is conversion of foreign compounds (**Xenobiotics**) into water-soluble derivatives, which can easily excreted

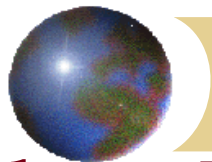
Xenobiotics are foreign compounds enters to the body such as drugs, pesticides, insecticides, industrial chemicals, pollutants, etc.



Drug metabolism

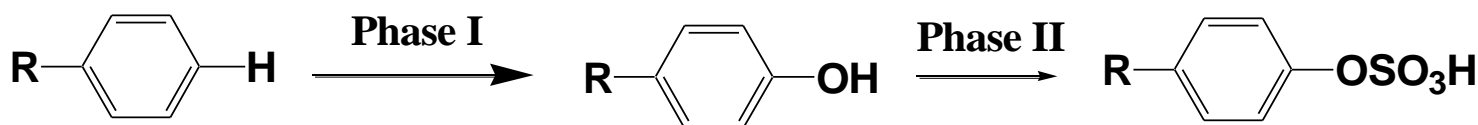


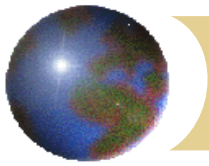
Both types produce metabolites that are more water soluble, more easily excreted than the original drug.



Phase I: will introduce more water soluble functional groups like $-\text{COOH}$, NH_2 , and SO_3H . Or unmasking polar water-solubilizing group by reaction like hydrolysis.

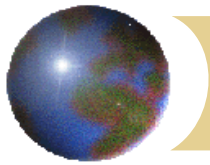
Phase II: The polar groups created in phase I serves as an anchor point for the second metabolic step, where conjugation reactions occur linking an endogenous solubilizing moiety either to the original drug (if a polar groups are already present) or to the phase I metabolite. Common solubilizing groups are glucuronic acid, various amino acids or sulphonate. The conjugate molecule is more polar and easily extracted *via* the renal route.



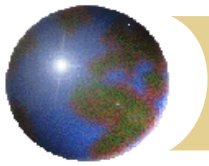


Drug metabolism occurs in more than one route resulting in compounds (metabolites**), that are in most cases, pharmacologically **inactive** or in little cases pharmacologically **active** or **harmful**.**

In the development of new drugs, it is important to document behavior of the metabolic product and its parent drug in the body.

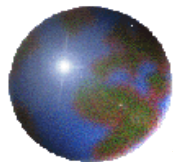


- **Phase I metabolites are sometimes excreted prior to conjugation. On the other hand, reactions of functionalization (mainly hydrolysis and oxidation) can occur after conjugation reactions.**
- **Some small molecules like CH_3NH_2 , CO_2 , some thiols and thioethers are generated due to their gaseous nature can be excreted through the lungs.**



The highly polar compounds (e.g. saccharin, strong acids, strong bases) in addition to the highly lipophilic halogenated xenobiotics like insecticides are not subjected to metabolism.

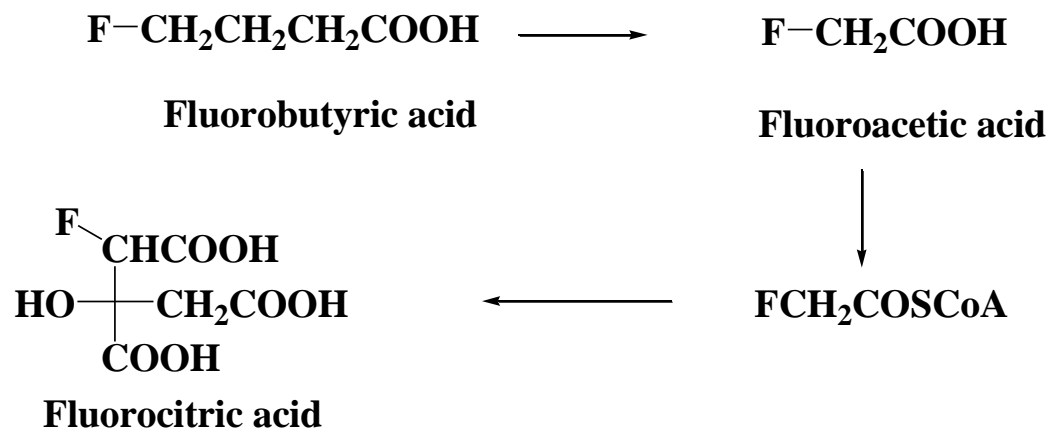
•In some cases, metabolites retain their activity, which may be similar or different from the parent drug. In cases of “prodrugs”, the start drug is inactive, while the metabolite is active.



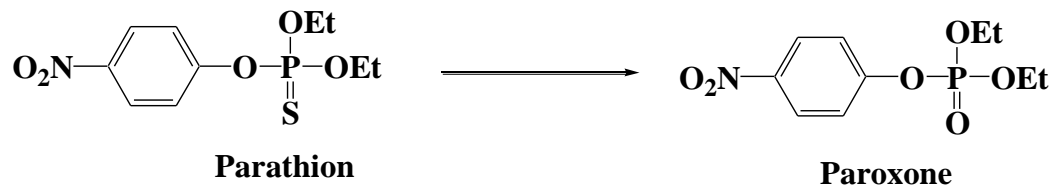
Lethal Synthesis

Some xenobiotics are metabolized to toxic metabolites, this occurs in some insecticides, pollutants and industrial chemicals not in therapeutically used drugs

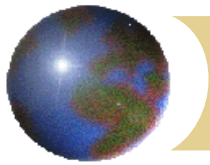
Examples



blocks the tricarboxylic acid cycle (Krebs cycle), the essential supplier of energy.

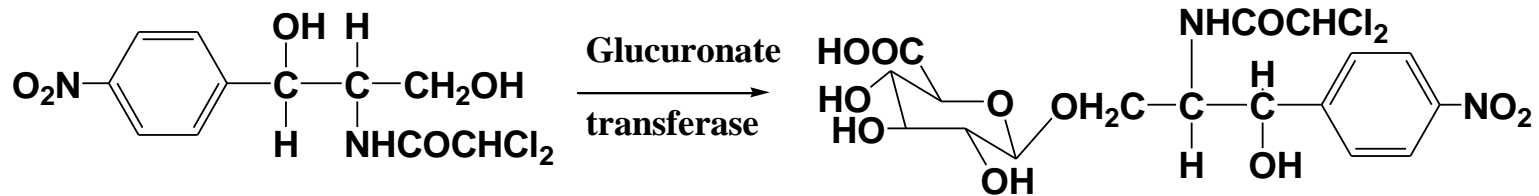


Acetylcholinesterase inhibitor



Biological Factors affecting Metabolism

1-Age



2-Gender

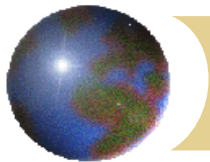
In diazepam

The half-life of 41.9 hr in females but only 32.5 hr in males. Why?

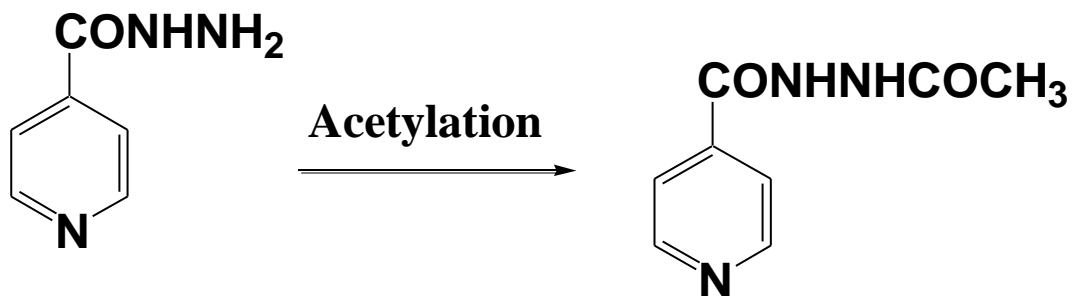
the women exhibit changes in the rate of metabolism of some drugs during pregnancy.e.g:

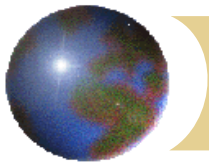


Pethidine



3-Genetic Variations

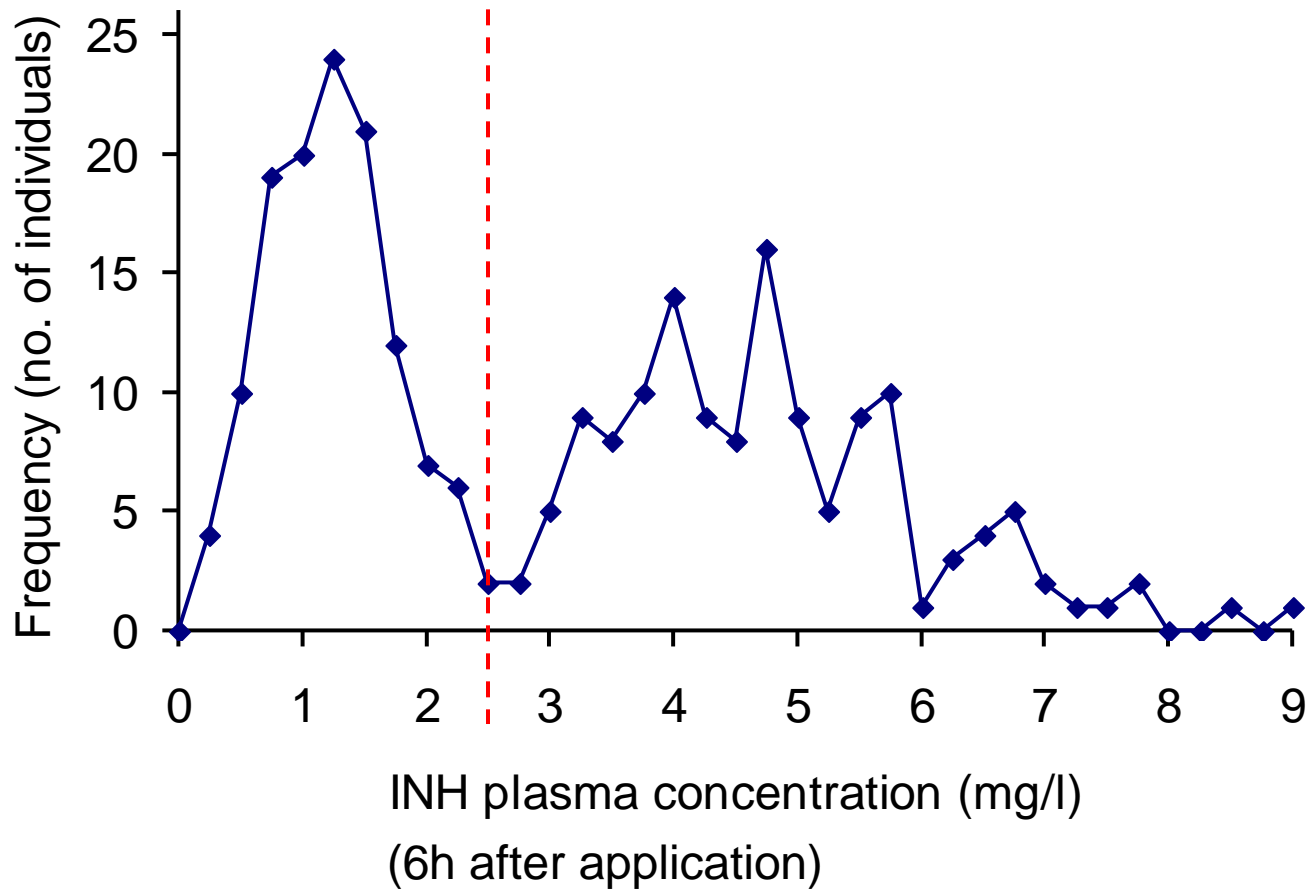


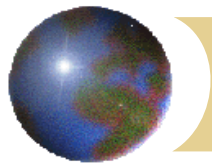


Genetic variability in INH acetylation

‘fast acetylators’

‘slow acetylators’

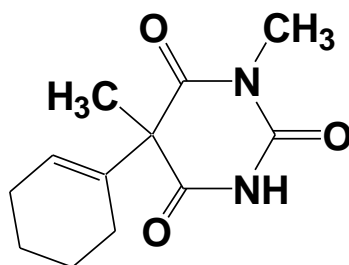




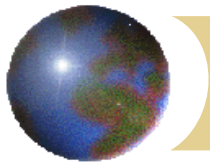
Environmental Factors affecting Metabolism

Species and Metabolism

For instance, a dose of 50 mg/Kg body mass of hexobarbiton will anaesthetize humans for several hours but the same dose will only anaesthetize mice for few minutes.



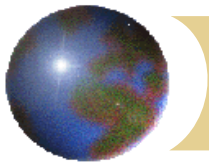
Hexobarbitone



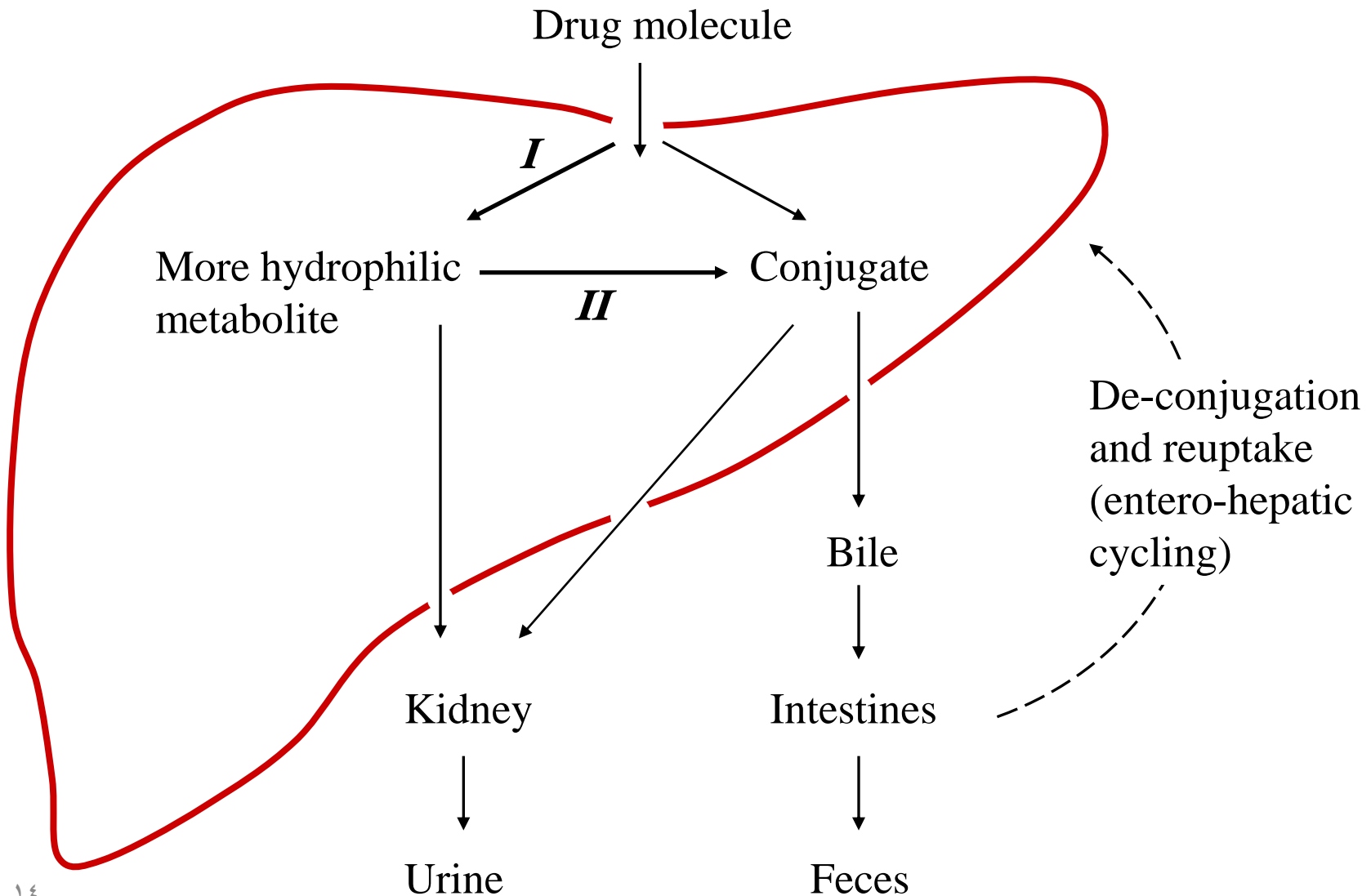
Phase I metabolic reactions

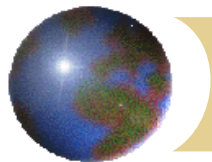
These reactions include **oxidation, reduction or hydrolysis**. Oxidation involves electron removal, hydrogen removal or hydroxylation. Reduction involves electron donation, hydrogenation or removal of oxygen.

Many metabolic reactions take place in the **endoplasmic reticulum of the liver cells**, but other organs particularly **kidney** and **lung** also participate in drug metabolism.

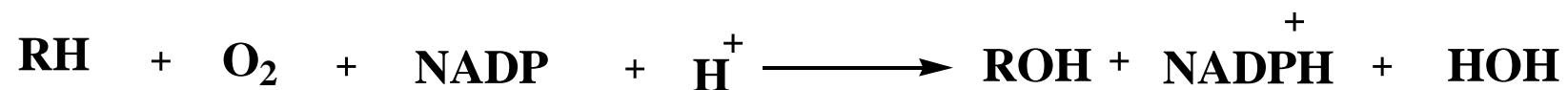


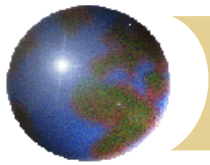
Drug elimination (2): Liver



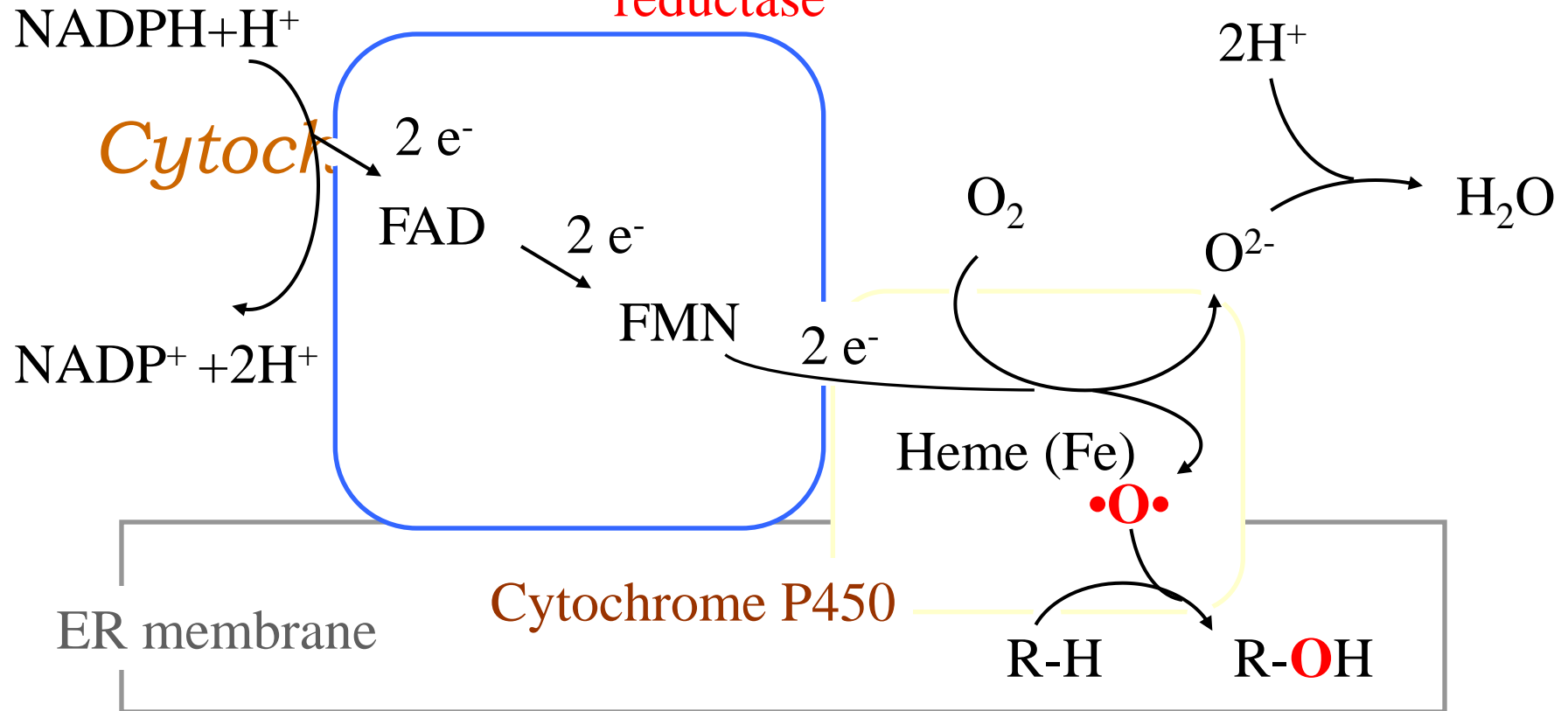


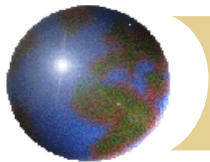
A-Oxidation catalyzed by Monooxygenase



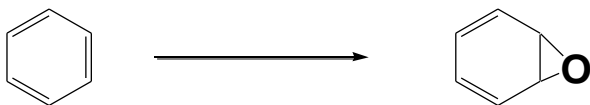
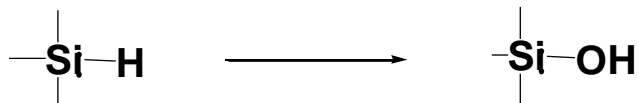
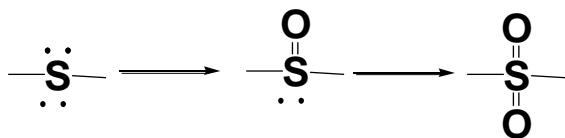
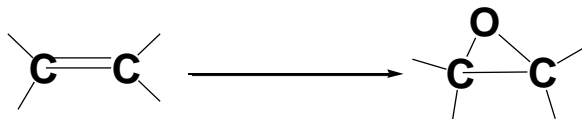
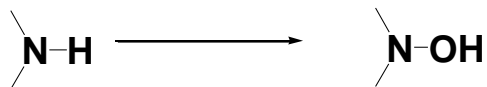
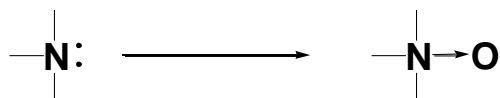
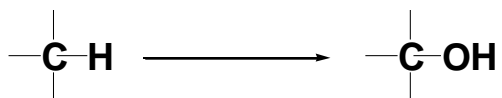


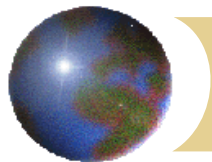
Cytochrome P450 reductase





The Oxidation reaction catalyzed by monooxygenase involves C, Si, N, P, S, Si sand others. Examples



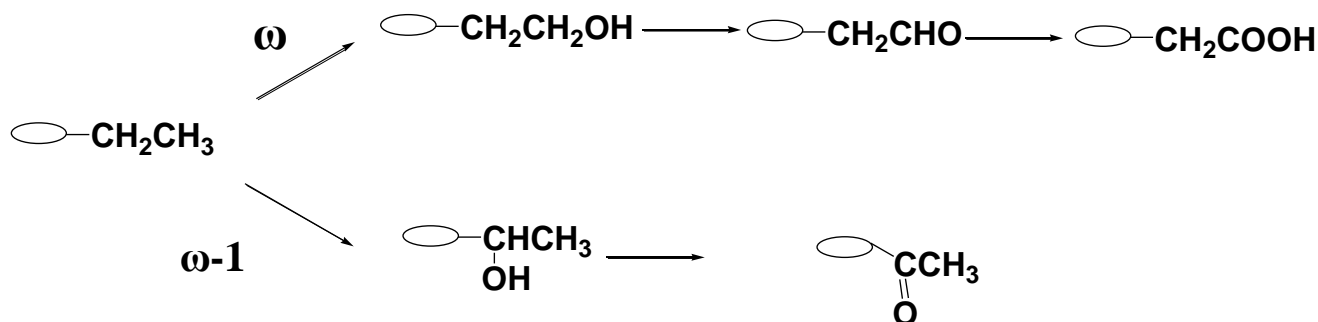


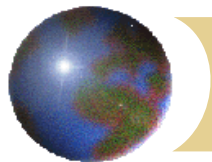
Reactions of Carbon Oxidation

A-Hydroxylation of Saturated Aliphatic C-atoms

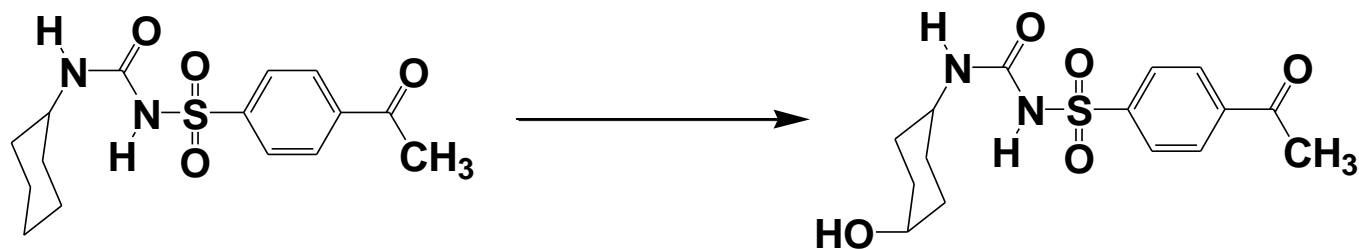
Alkanes

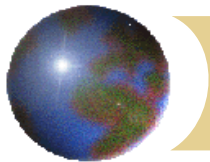
Saturated aliphatic C-H bonds are normally metabolized by Hydroxylation. Hydroxylation normally occurs at either the (ω) and ω -1 C-H bonds or the C-H next to an electron withdrawing group(α), such as benzene ring, chloro, aliphatic amino, keto or ester group. The latter oxidation is preferred to the (ω) and ω -1 oxidations.



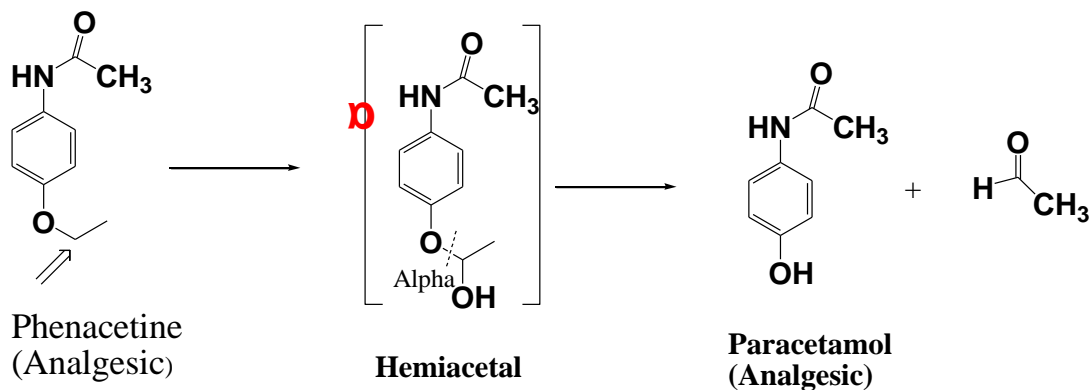
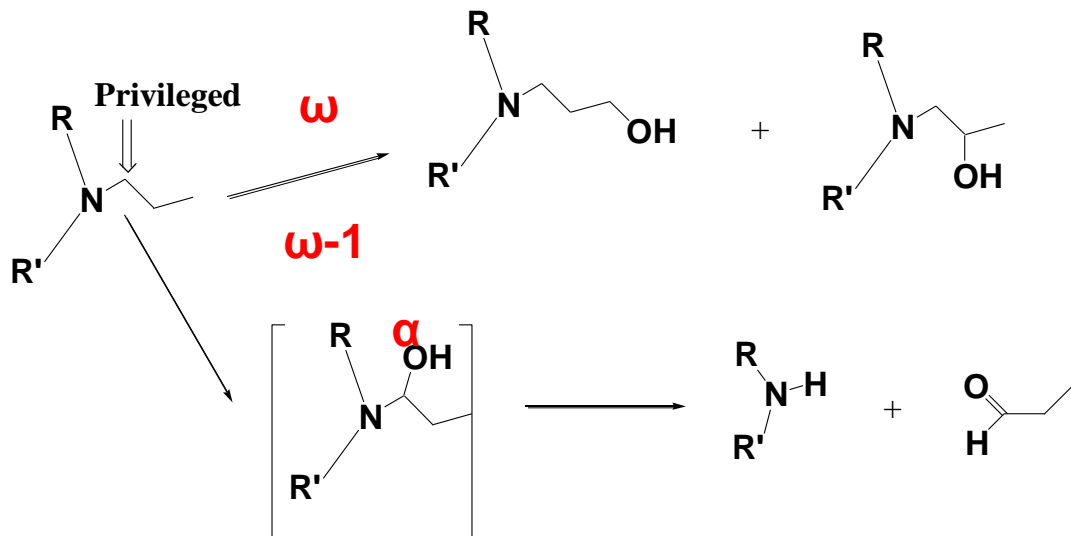


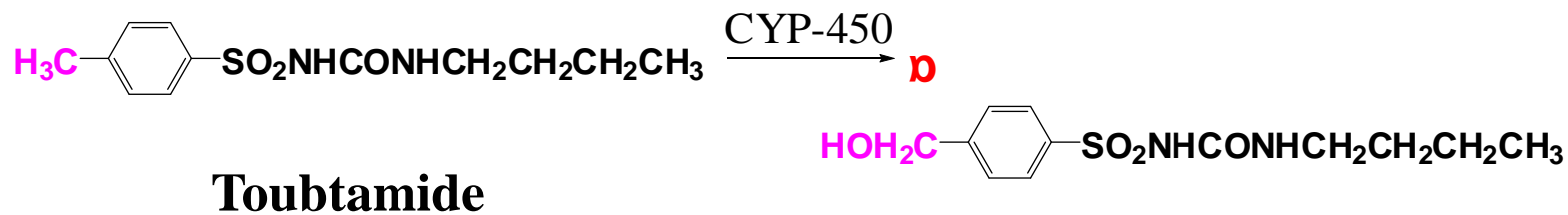
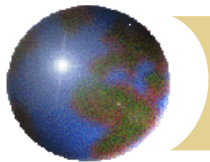
Cyclic aliphatic systems are usually hydroxylated on the least hindered or most activated carbon atom.



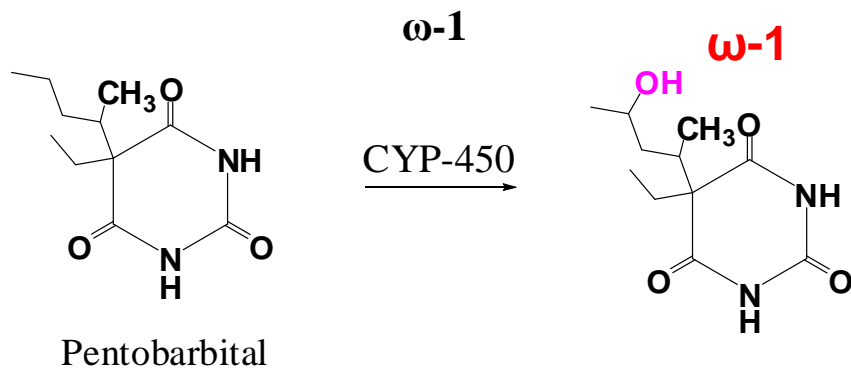


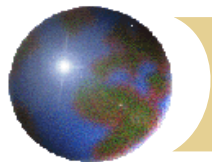
The same rules applied to the carbons in the α -position of the heteroatom such as N, O, or S.



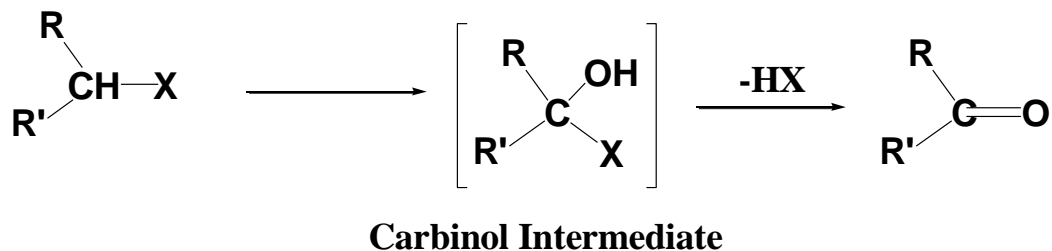


**Preference
position**

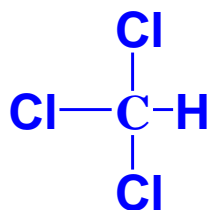




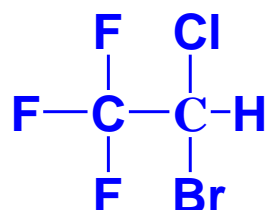
Chlorinated or brominated aliphatic derivatives



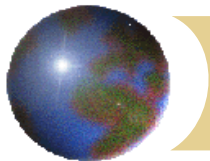
What about chloroform and halothane?



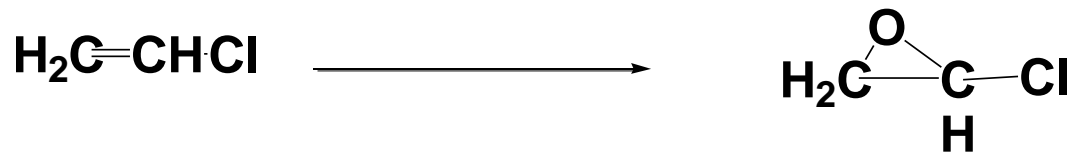
Chloroform



Halothane

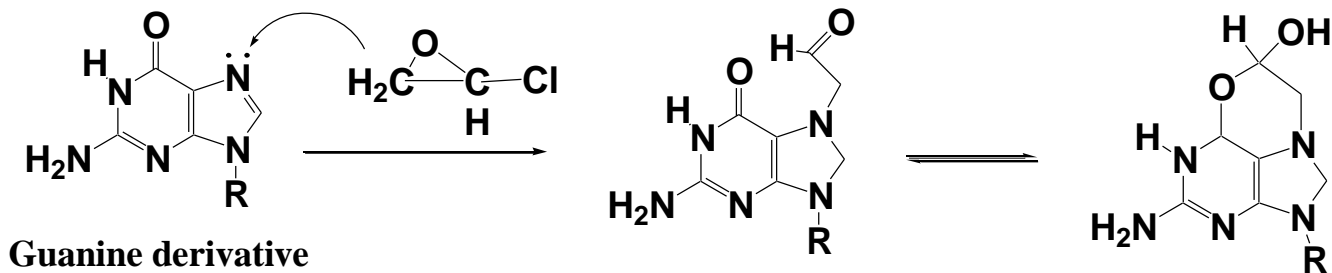


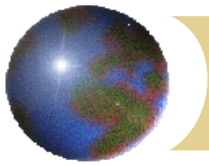
Oxidative attack on unsaturated aliphatic systems



Vinyl Chloride

Epoxychloroethane



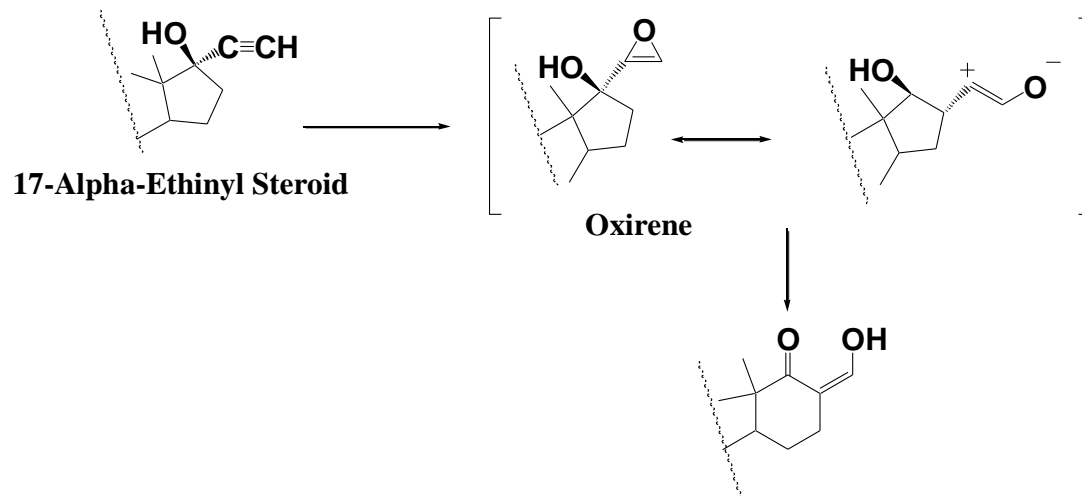
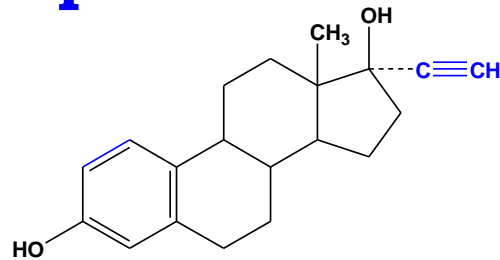


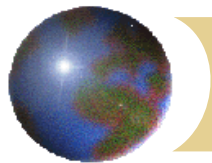
Diethylstilbestrol



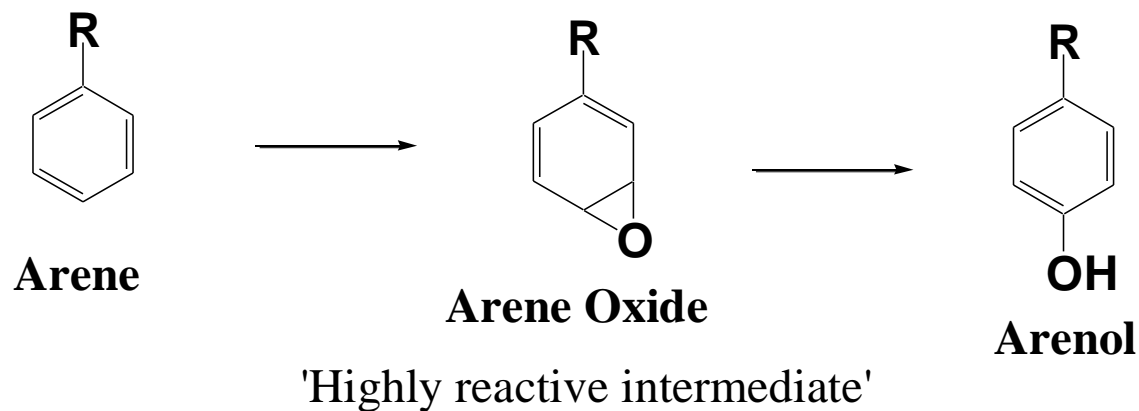
With Carbon-carbon triple bond

Ethinyl estradiol



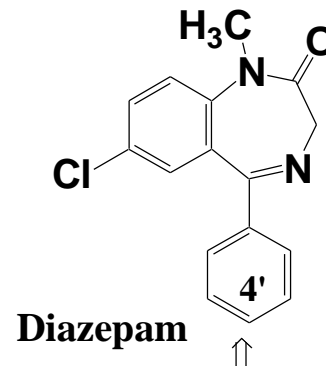
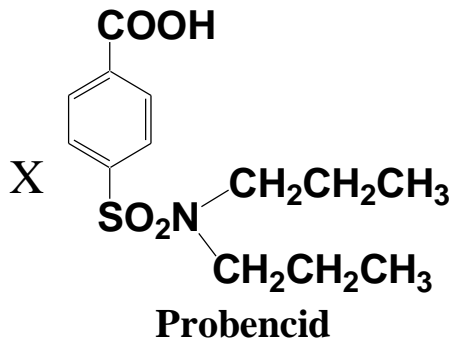
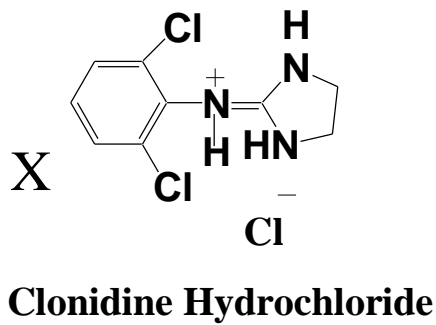


Hydroxylation of aromatic ring



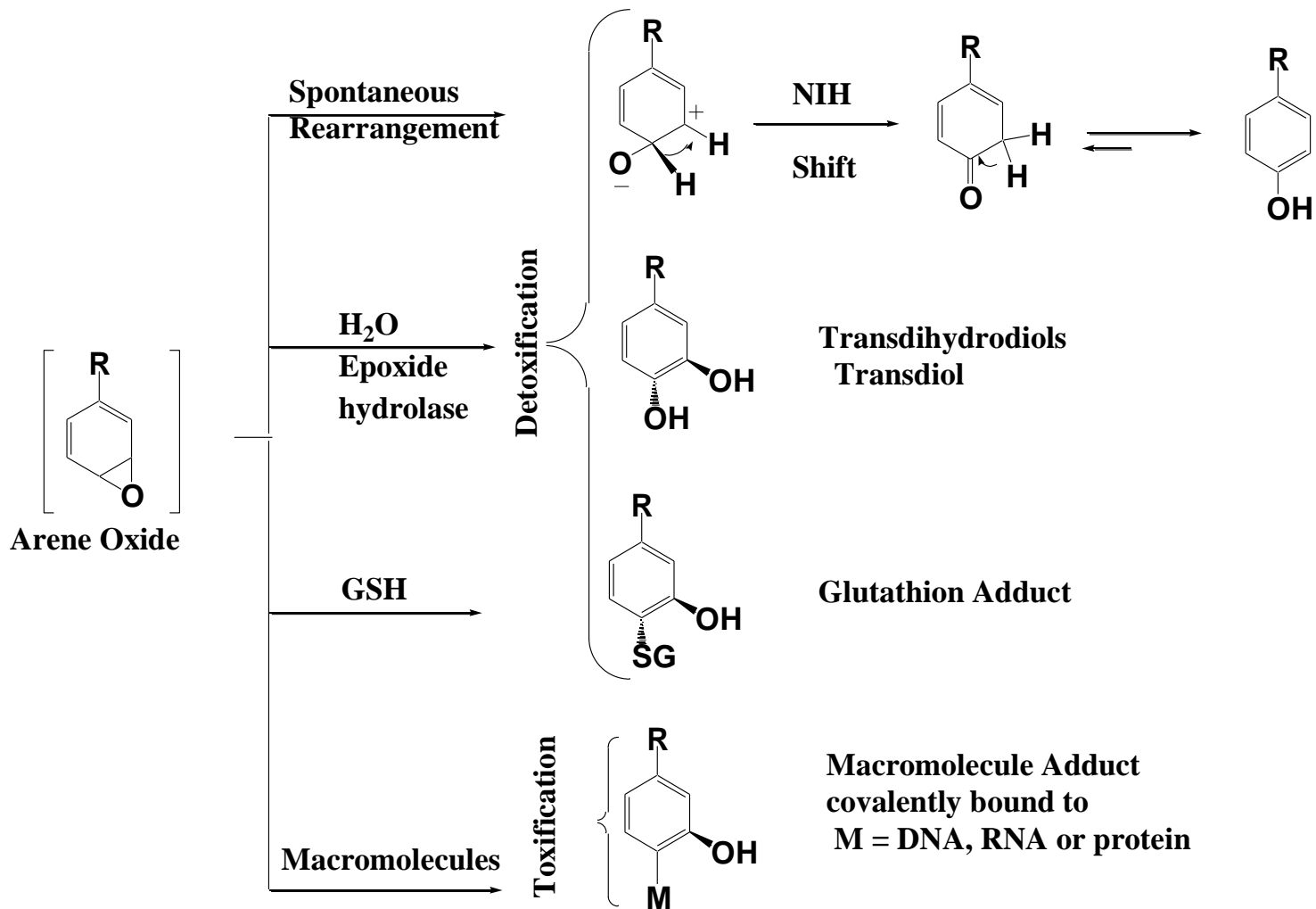


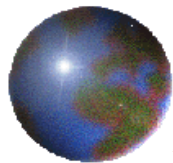
Effect of the substituent





Fate of arene oxides

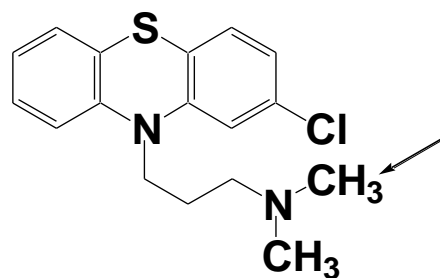
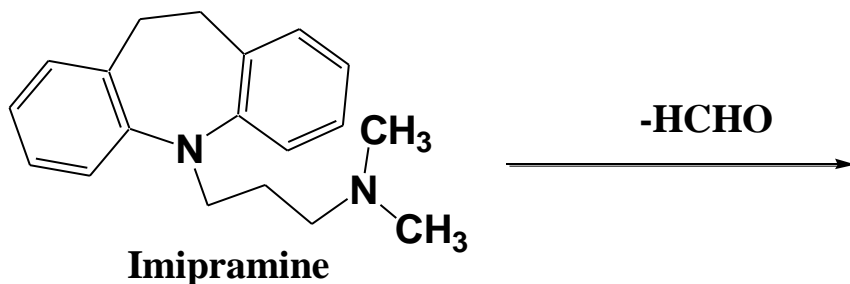




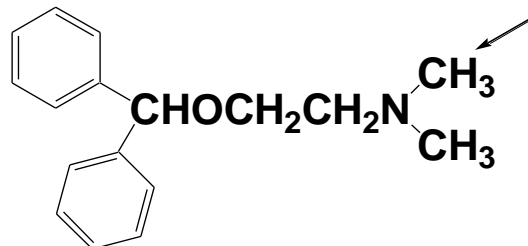
Oxidation Involving C-Nitrogen Systems

Amines and Amides

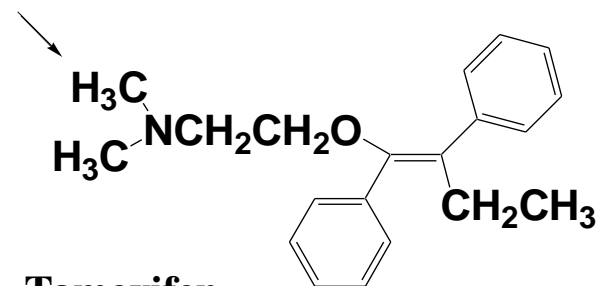
3° Aliphatic & Alicyclic amines



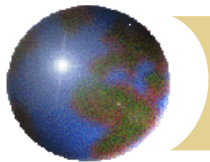
Chlorpromazine



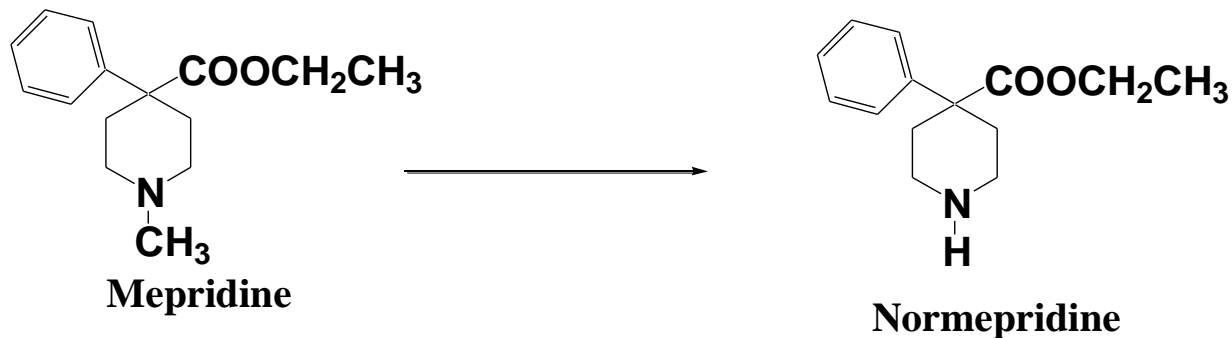
Diphenhydramine



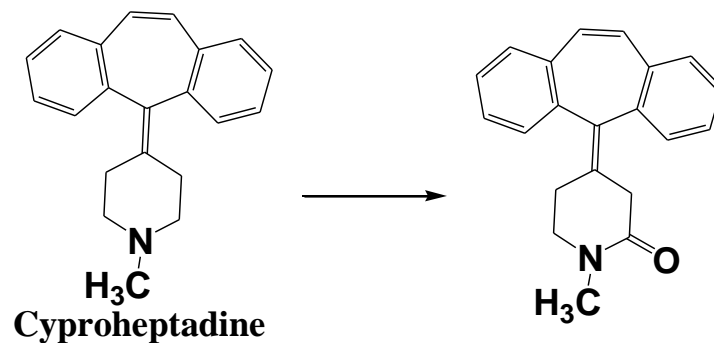
Tamoxifen

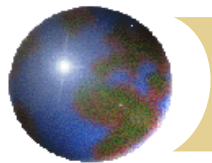


The Alicyclic 3° amines



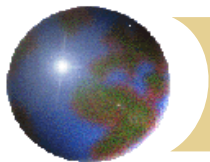
Alicyclic tertiary amines often generate lactam metabolites by α -hydroxylation reactions, e.g:





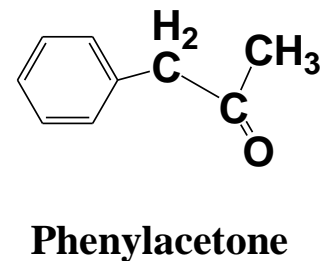
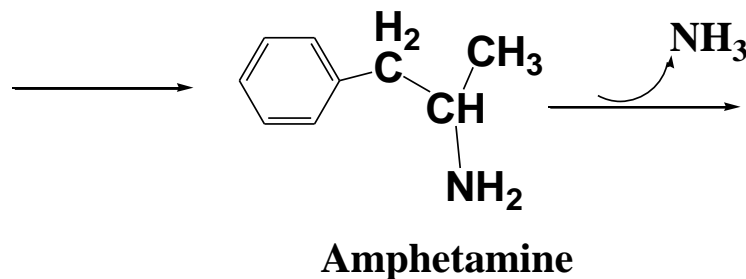
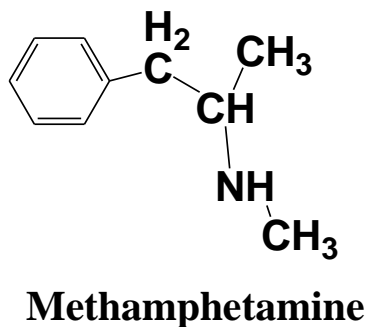
N-Oxidation of tertiary amines

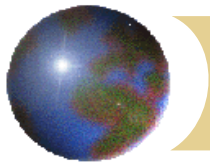
E.g: Morphine, chlorpromazine, imipramine, etc.



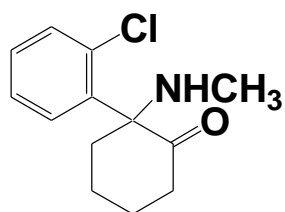
Secondary & Primary Amines

- Oxidative dealkylation
- Oxidative deamination.
- N-Oxidation

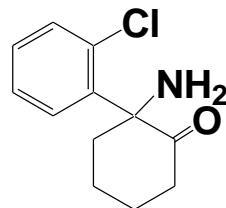




Ketamine



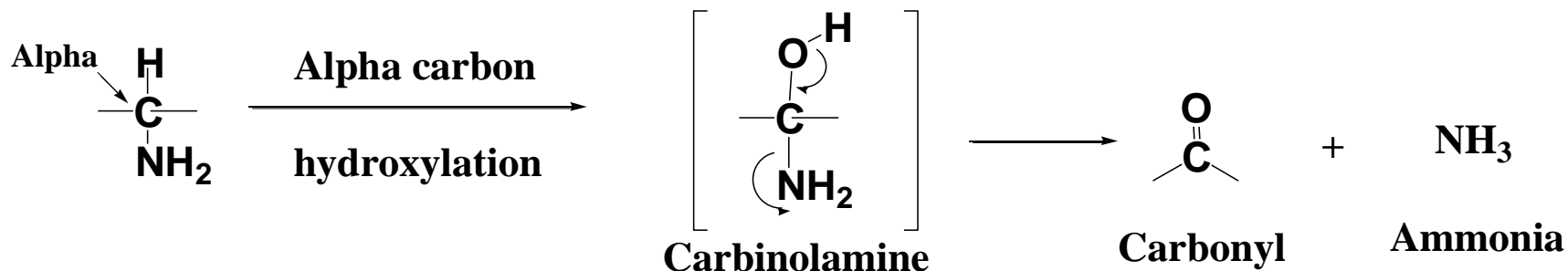
Ketamine

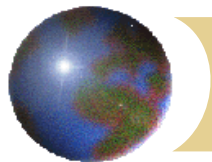


Norketamine

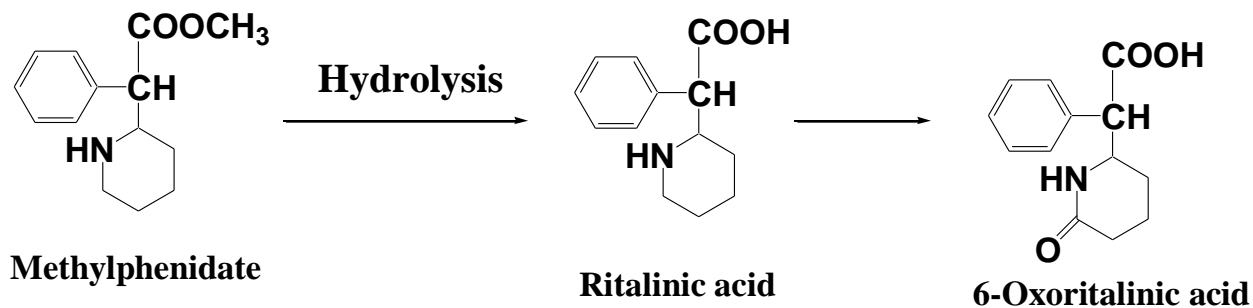
**Oxidative deamination
can not occur**

Oxidative deamination mechanism

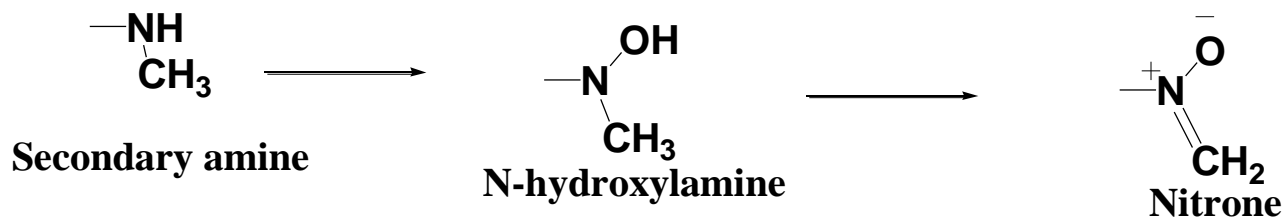


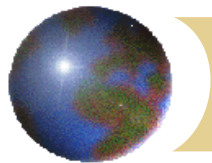


Secondary alicyclic amines



N-oxidation





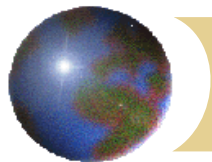
Primary Aliphatic Amines

- Oxidative deamination (carbinolamine pathway).**
- N-Oxidation**

Endogenous primary amines

dopamine, norepinephrine, tryptamine and serotonin are metabolized through oxidative deamination by a specialized family of enzymes called **monoamine oxidases** (MAO).

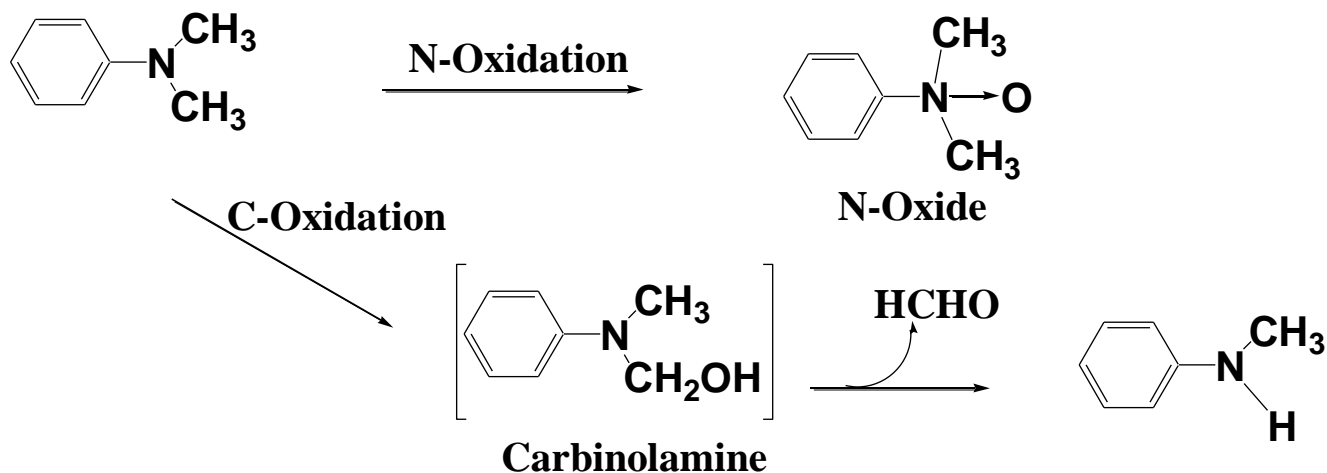
MAO apparently plays no role in the metabolism of xenobiotic primary amines.

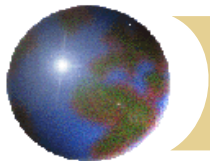


Aromatic Amines & Heterocyclic Nitrogen Compounds

3° Aromatic amines

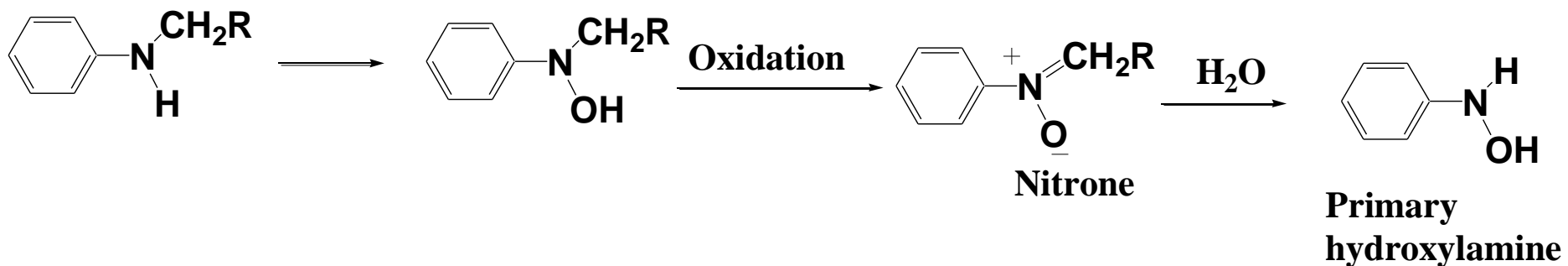
- Oxidative dealkylation
- N-oxidation occur.

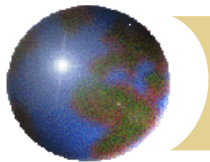




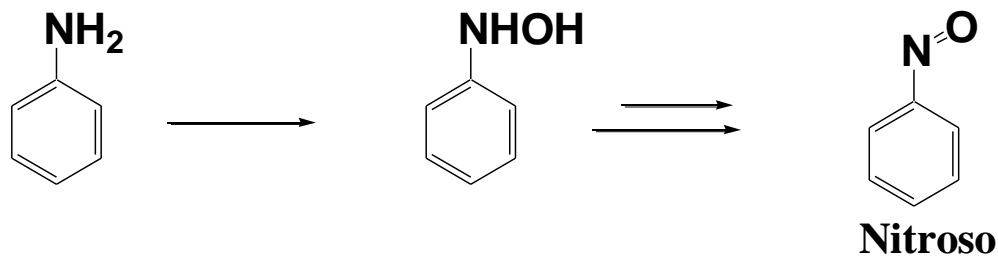
2° Aromatic amines

- N-dealkylation or
- N-hydroxylation to give the corresponding N-hydroxylamines.

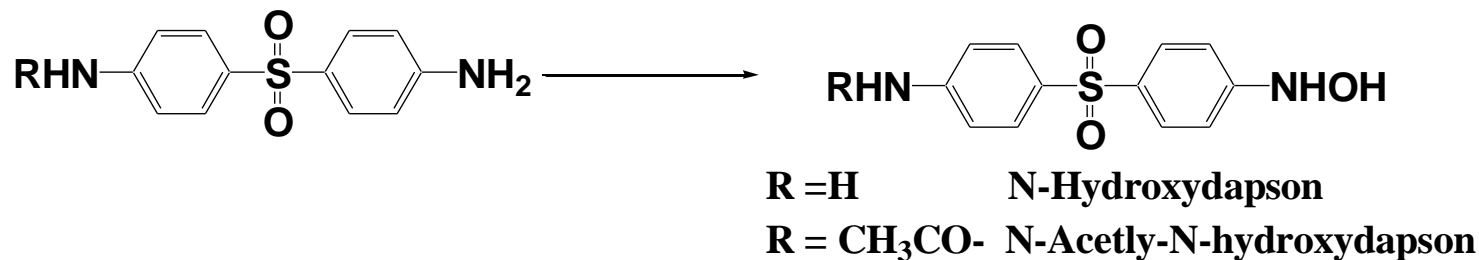


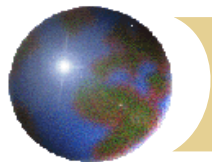


1° Aromatic amines

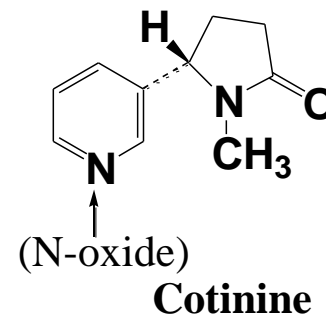
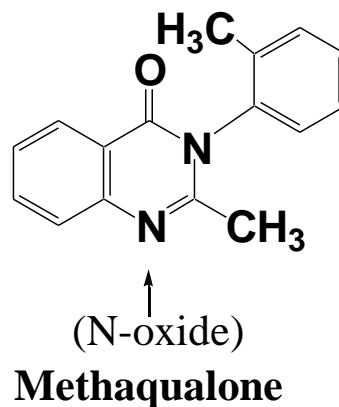
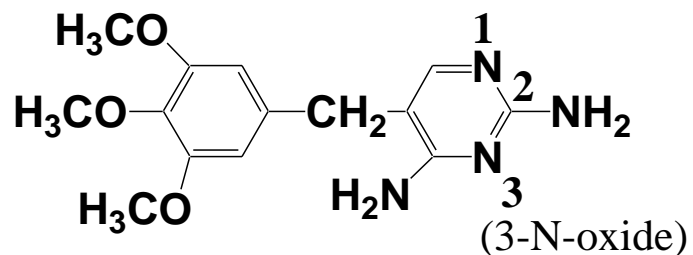


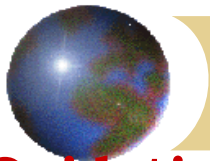
Methemoglobinemia toxicity





N-Oxidation of the nitrogen atom present in aromatic heterocycles occurs to a minor extent, e.g: trimethoprine, Methaqualone, cotinine, etc.

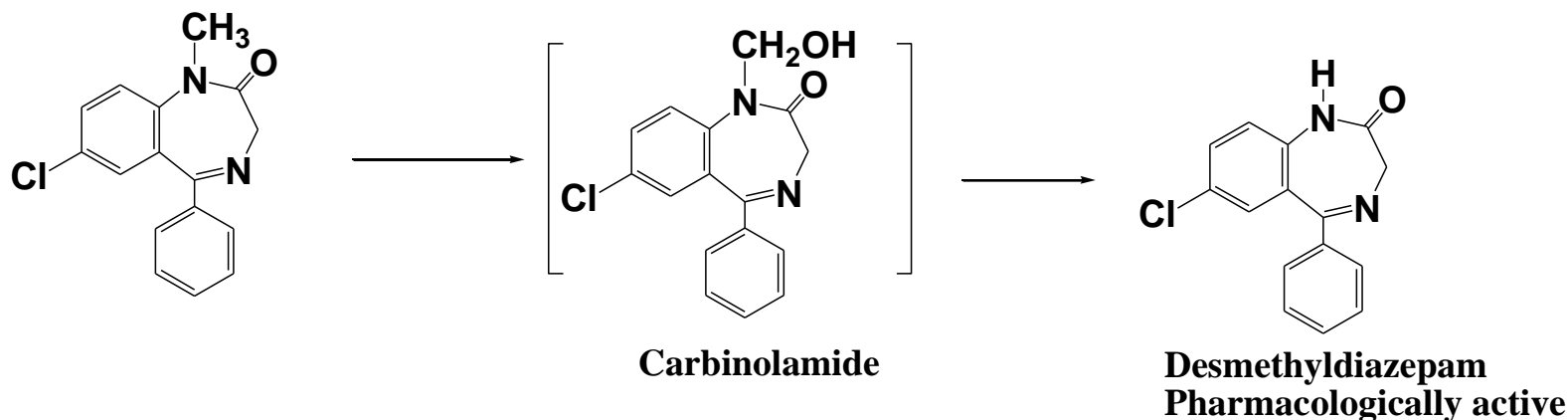


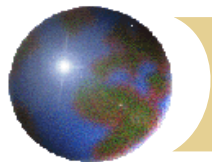


Amides

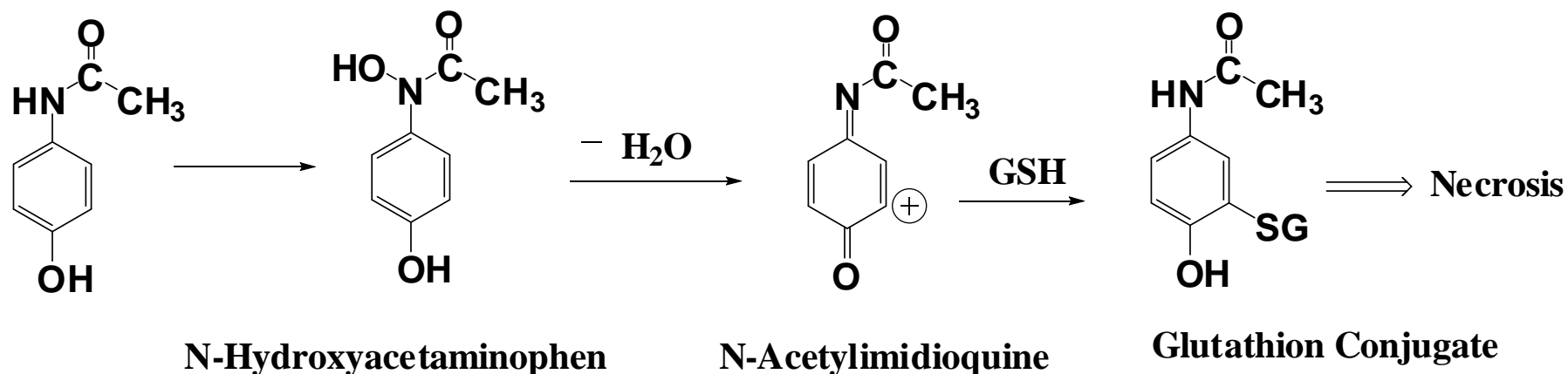
-Oxidative carbon-nitrogen bond cleavage (by α -carbon hydroxylation).

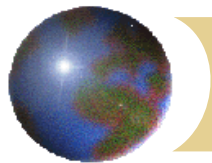
-N-hydroxylation reactions





N-Hydroxylation of aromatic amides, which occurs to a minor extent, is of some toxicological interest,





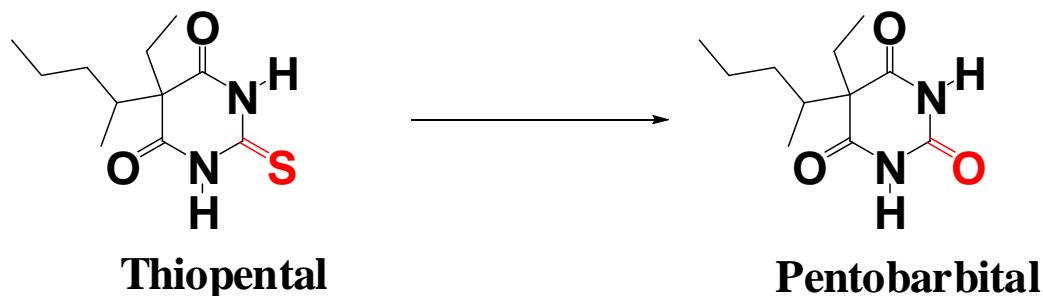
Oxidation Involving Carbon-Sulphur System

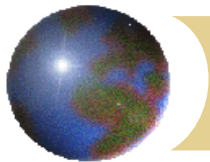
- S-Dealkylation
- Desulphonation
- S-Oxidation

Examples: S-Dealkylation

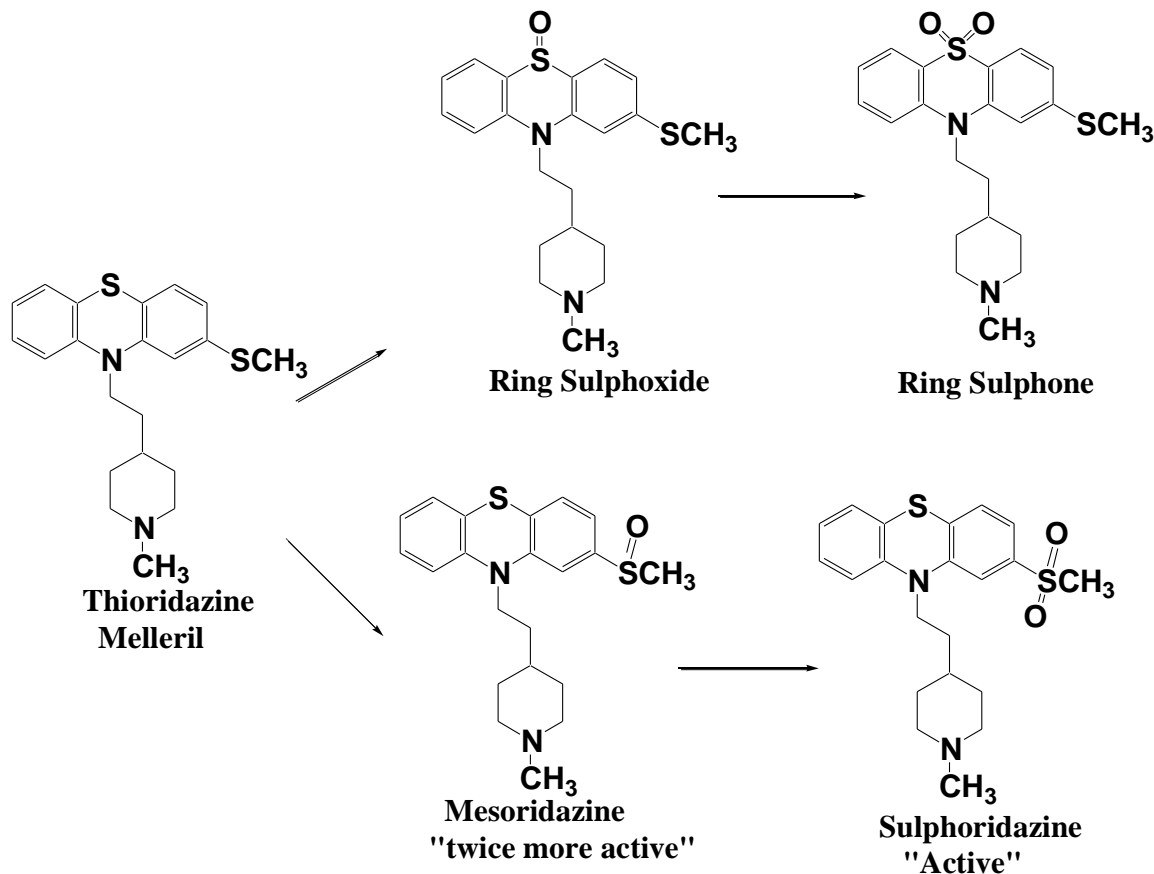


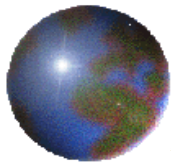
Oxidative conversion of C=S (thiono) to the corresponding C=O is called **desulphonation**



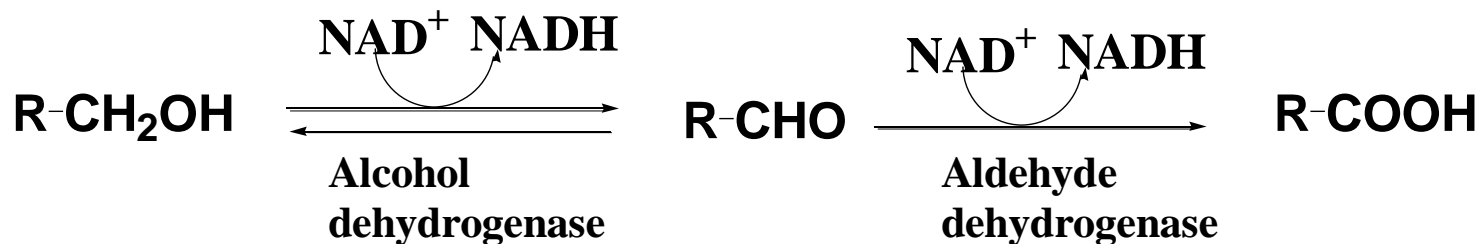


Organosulphur xenobiotics are commonly undergo **S-oxidation reaction to yield sulphoxide derivatives, e.g: phenothiazines.**

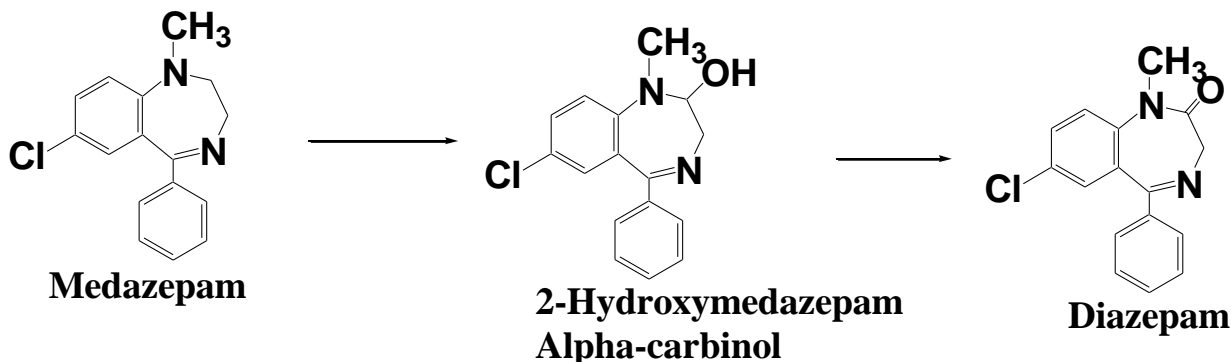


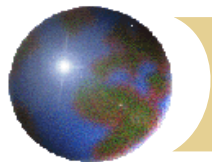


Oxidation of Alcohols and Aldehydes



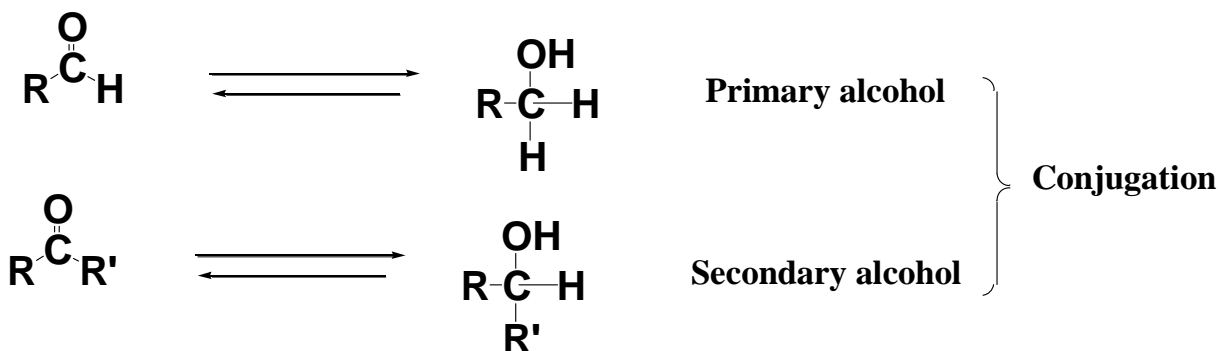
Also, the microsomal dehydrogenases and oxidases are involved in oxidizing the carbinol group of the intermediate carbinolamine into carbonyl moiety. E.g:



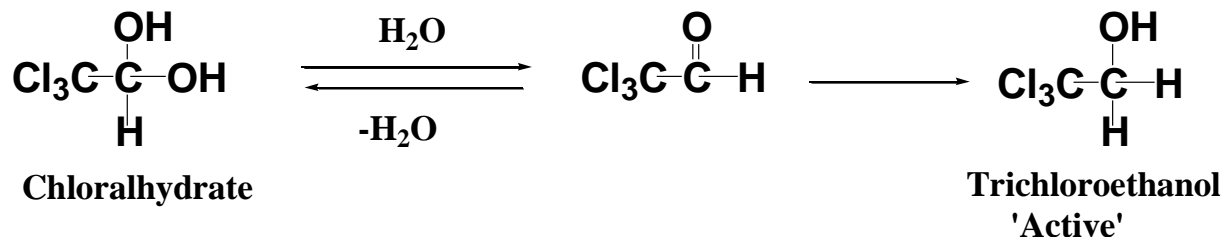


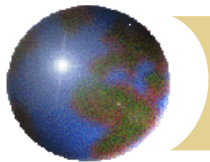
Reduction Reactions

Reduction of Aldehydes and Ketones

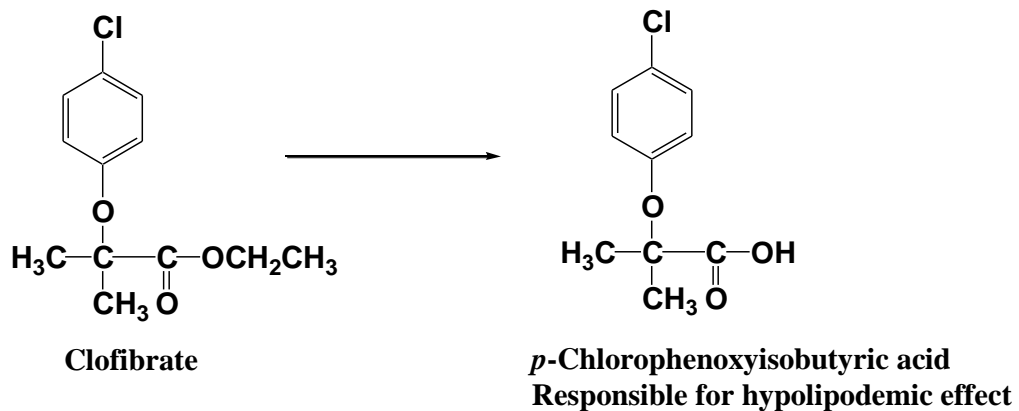
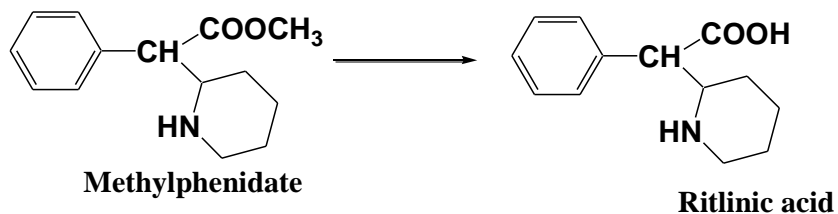
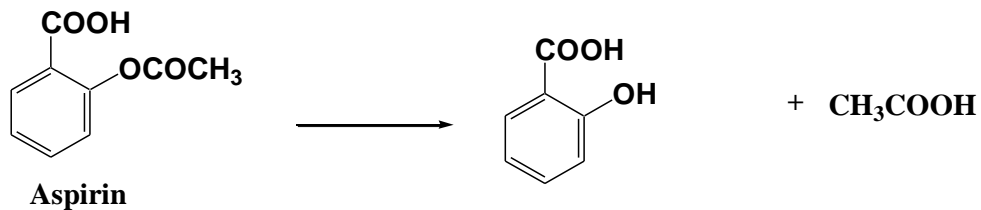


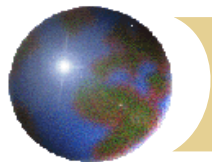
These reactions are catalyzed by aldoketoreductases (NADPH dependent), which are found in the liver, kidney and other tissues. Also, oxidoreductases are capable (e.g. in the liver). Alcohol dehydrogenase is a NAD⁺ dependent oxidoreductase converts alcohols into aldehydes and ketones



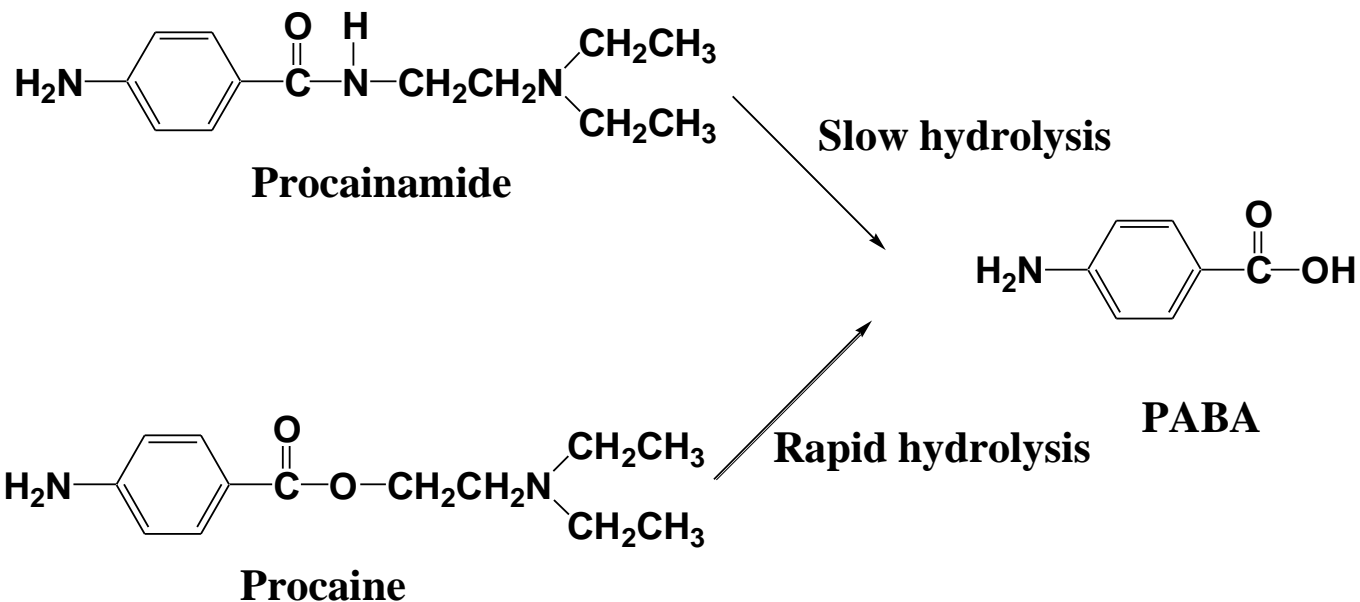


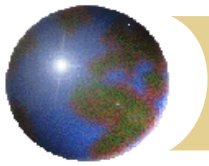
Hydrolytic Reactions





Amides





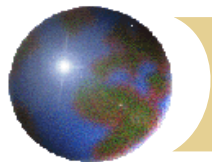
Phase II metabolic Route (Conjugation Reactions)

Can occur at any point in drug metabolism. However they represent the final step in metabolic pathways before excretion.

Phase II reactions are:

Acetylation, Acylation, sulphate formation and conjugation with amino acids, glucuronic acid and glutathion in addition to methylation.

**All phase II reactions are catalyzed by a group of enzymes:
known as *Transferases*.**



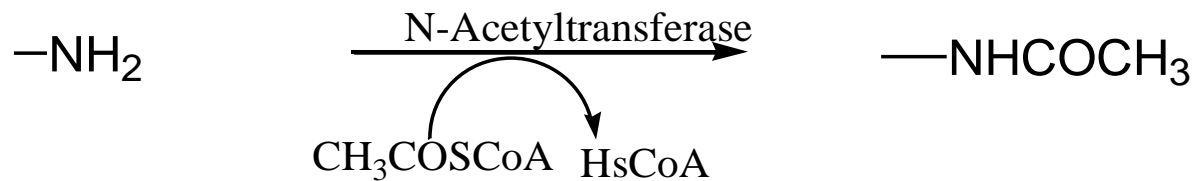
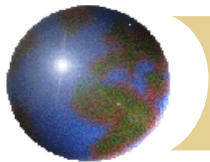
Acetylation

N-Acetylation is the most important route for:

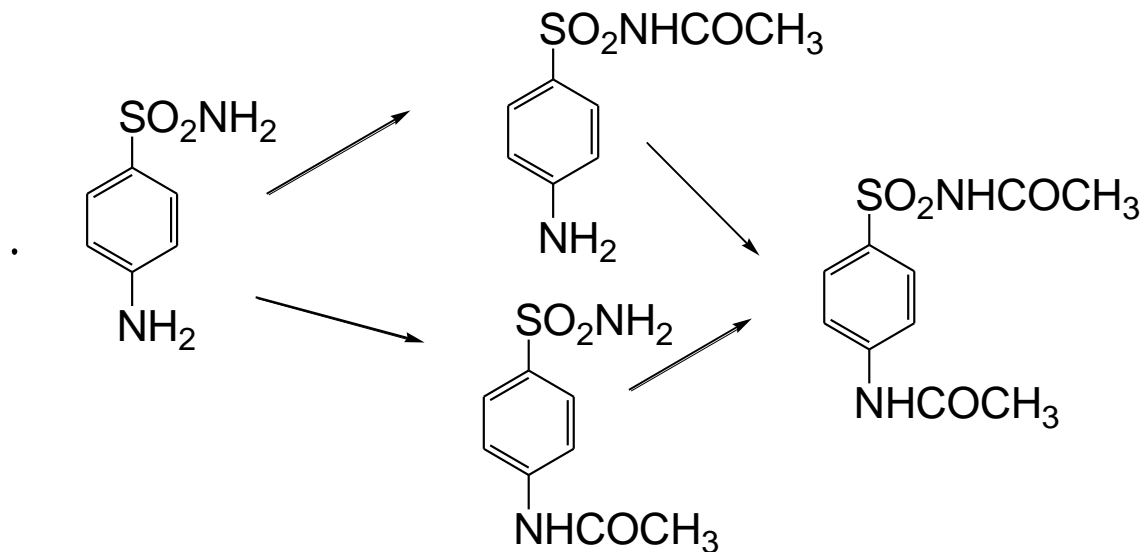
- Primary Amines RNH_2
- Sulphonamides SO_2NH_2
- Hydrazines $-\text{NHNH}_2$
- Hydrazides CONHNH_2

Enzyme catalyzing this reaction is N-acetyltransferase.
with acetyl co-enzyme A supplying the acetyl group.

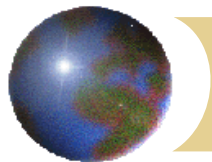
-The product in this reaction is not more water soluble, but pharmacologically inactive.



Example



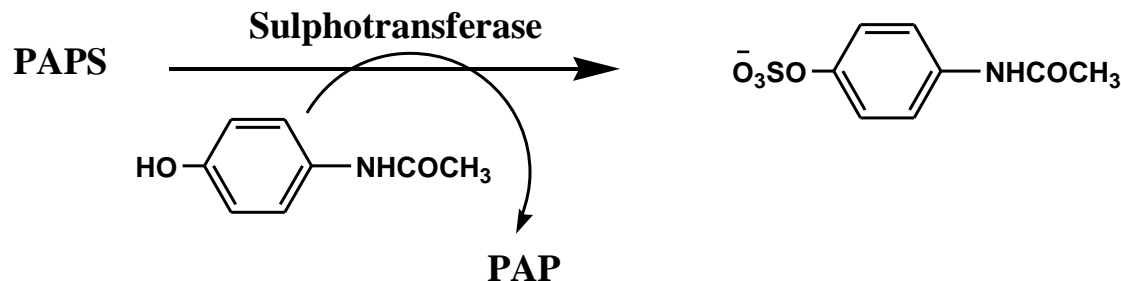
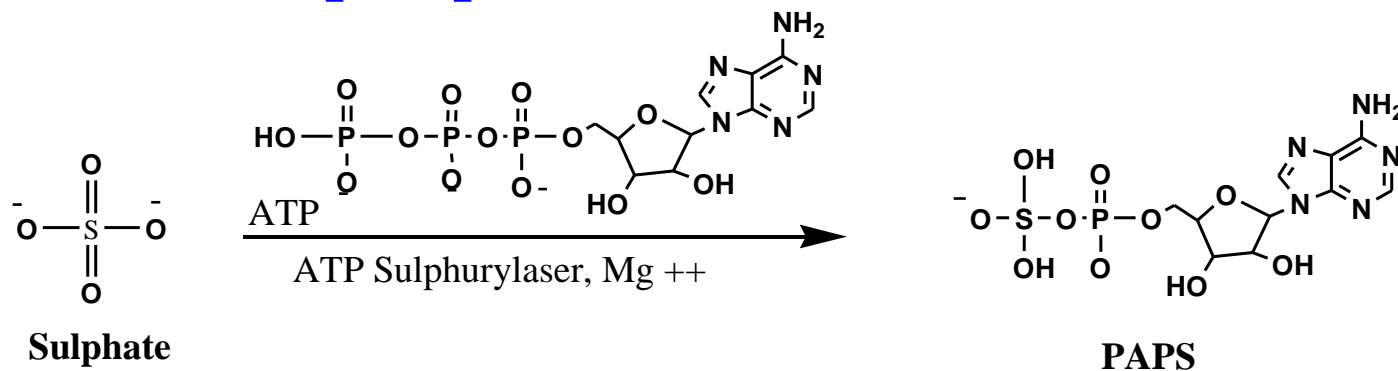
Sulphanilamide
Antibacterial

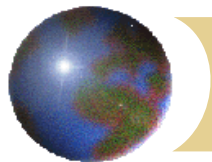


Sulfate Formation

Sulfate conjugation is an alternative route for **phenols** and occasionally some **alcohols** and **amines**.

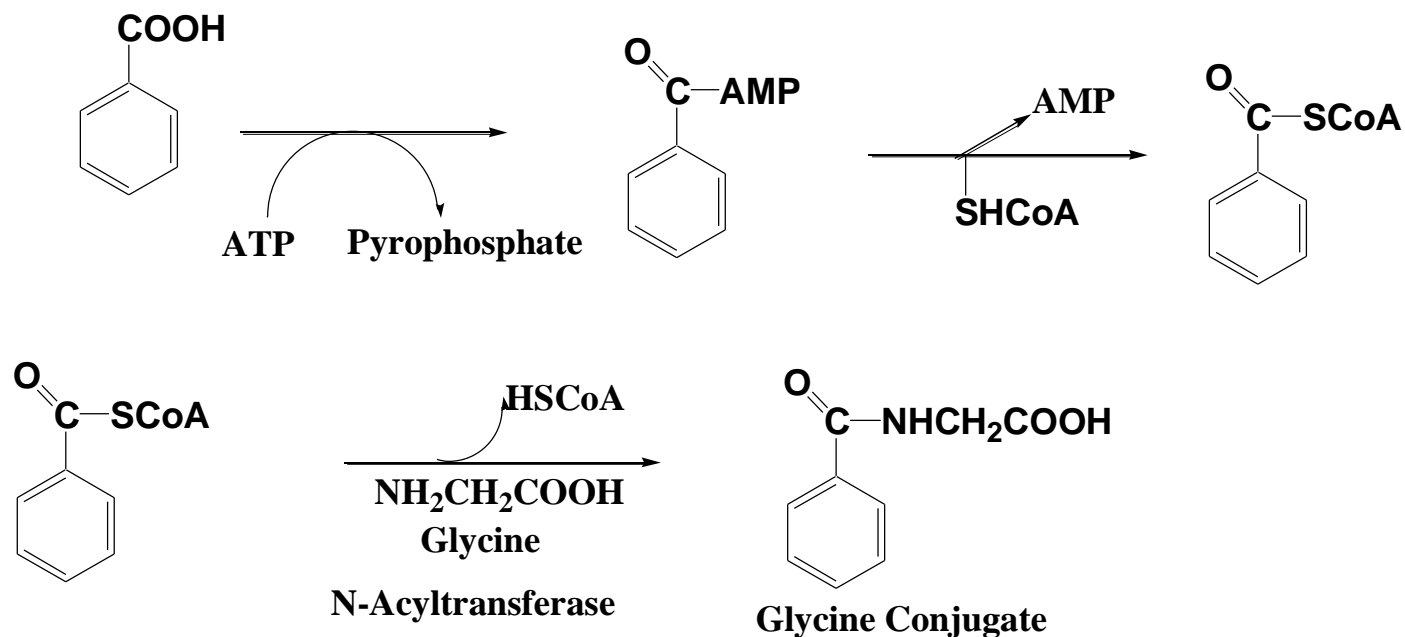
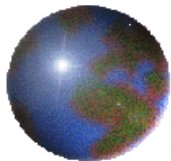
The sulfate originates from the body's sulfate pool. It is believed to be activated by conjugation with ATP to form 3'-phosphoadenosine-5'-phosphosulfate (**PAPS**).



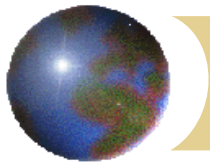


Conjugation With Amino Acids

Conjugation with amino acids is an important route for the metabolism and conjugation of **carboxylic acids**. It is thought that the reaction proceeds in a series of steps. Initially, the carboxylic acid reacts with ATP to form **monoadenosinophosphate (AMP)**, Then converted into an active acyl-coenzyme A intermediate by the action of coenzyme A. The coenzyme A intermediate undergoes nucleophilic displacement with the amino acid. All these reactions are catalyzed by various **N-acyltransferases**. The formed amino acid conjugates are more water soluble than the parent acid and are mainly excreted in the urine.



The quantity of amino acids available for conjugation is **limited**, so few amino acid conjugates are found in the urine.

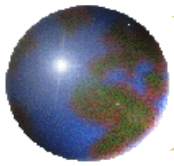


Conjugation With Glucuronic Acid

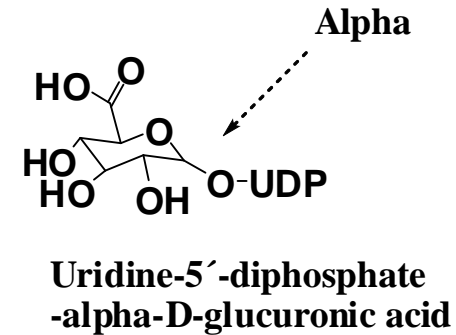
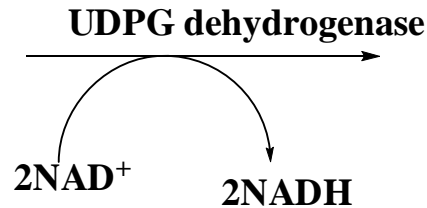
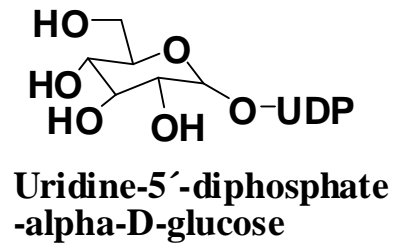
Glucuronic acid conjugation is the most important of all the phase II reactions, this is due to:

- 1-The presence of good supply of glucuronic acid in the body.**
- 2-Numerous alcohols, phenols, amines, thiols and some carboxylic acids have been found to be metabolized by this route.**

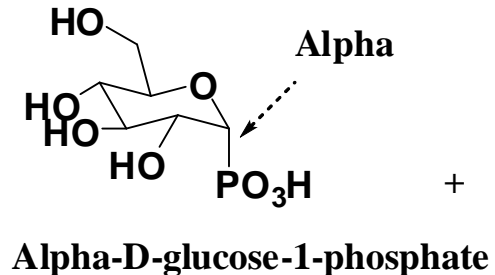
The xenobiotic reacts with the activated form of glucuronic acid, uridine diphosphate glucuronic acid (UDPGA) to form highly water soluble glucuronoid conjugate. This reaction is catalyzed by microsomal uridine diphosphate glucuranyl transferase (UDPG-transferase).



Mechanism

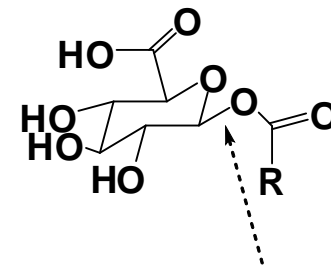
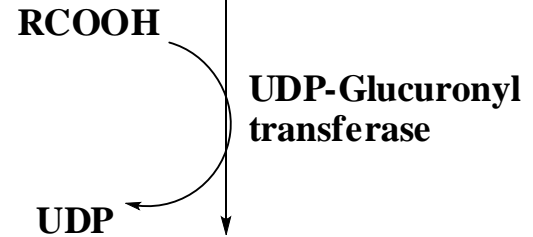


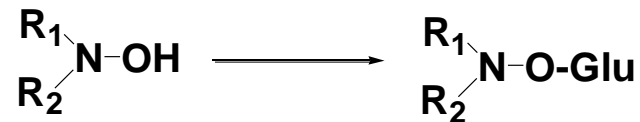
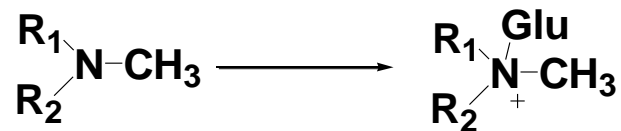
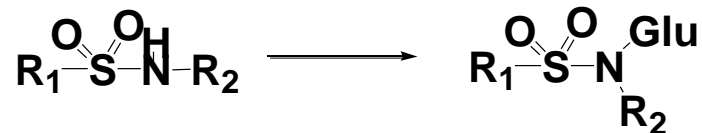
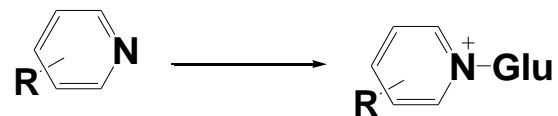
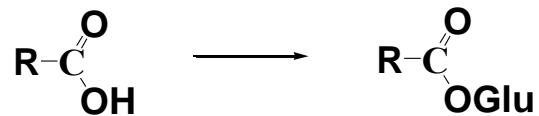
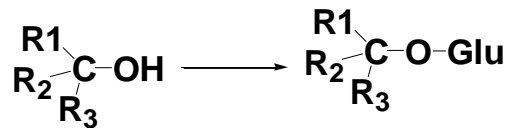
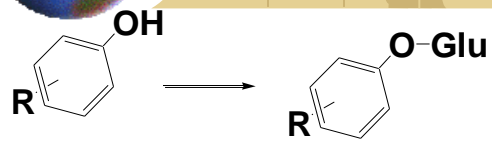
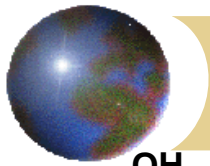
Phosphorylase

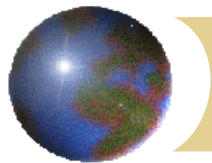


+

UTP





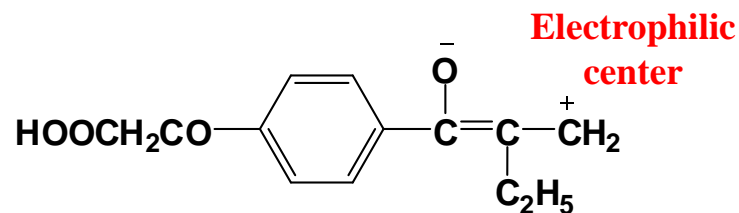
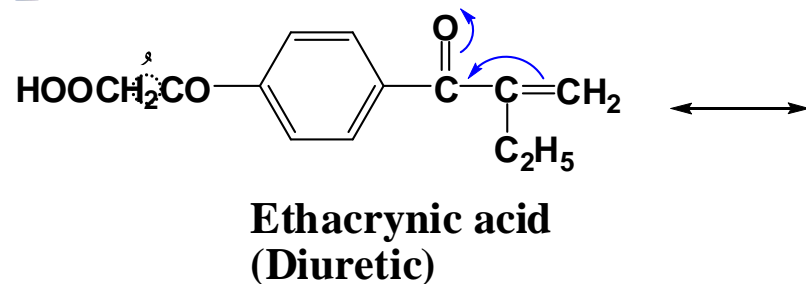
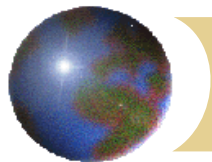


Conjugation with Glutathione

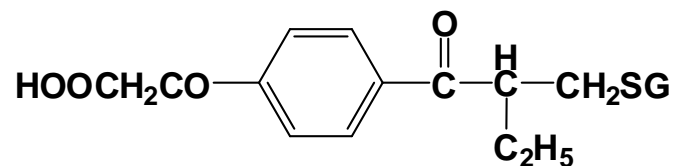
Conjugation with nucleophilic thiol group of glutathione (GSH) is the first step in the elimination of compounds whose structures contain and electrophilic center.

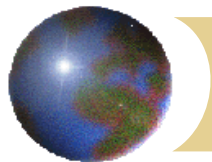
These electrophilic centers are caused by the presence of electron withdrawing groups such as carbonyl, halides, nitro, sulfonate, nitrate, Epoxide and organophosphate groups in the structure

The reaction being catalyzed by a family of enzymes known as glutathione-S-transferases, which are found in most tissues. through substitution, displacement or addition.



**Glutathione-S-
transferases**





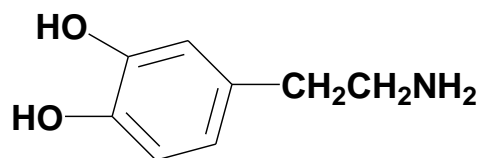
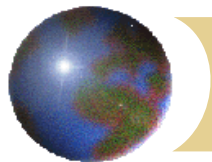
Methylation Reactions

Substrates: Phenol, thiol, NH_2 , some heterocycles are metabolized by this route.

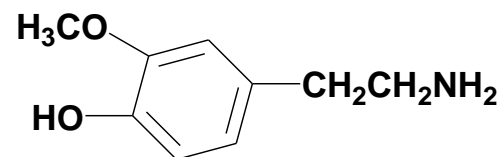
Catalyzed by specific **methyltransferases**

The formed methylated metabolites, except with **amines** are less water soluble and pharmacologically inactive

The co-enzyme is: **S-adenosylmethionine**

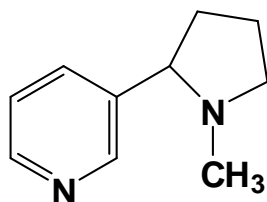


SAM

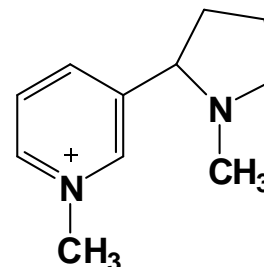


(Dopamine)
a neurotransmitter

3-Methoxy
(Selective)

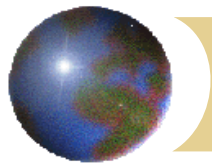


SAM



Quaternary ammonium salts
(water soluble)

N.B: Catechol –O-Methyltransferase COMT is the enzyme responsible for methylation of the *m*-OH group in catechol-type biogenic amines



Drug Metabolism and Drug Design

There is a strong relation between drug design and knowing the metabolic pathway of drugs.

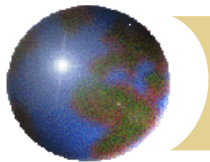
Increasing metabolic and hence duration of the action of a drug is usually achieved by replacing a reactive group by less reactive one.

e.g1:

N-dealkylation could be retarded by replacing the N-CH₃ Group by n-t-butyl.

e.g2:

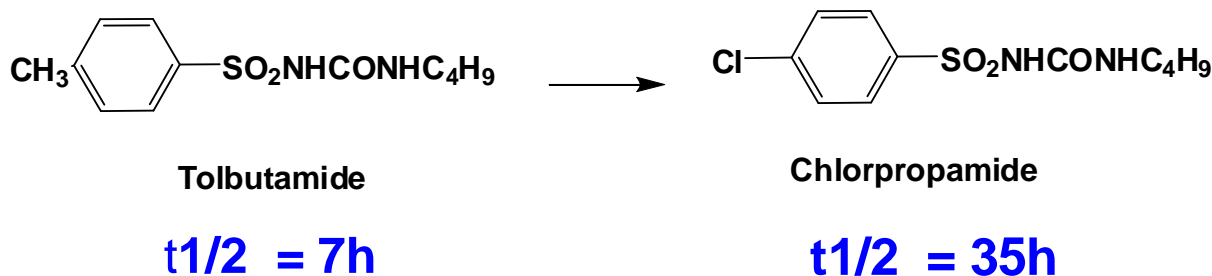
Reactive ester group could be replaced by less reactive amide group

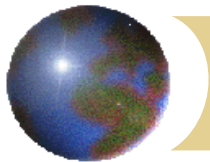


e.g³

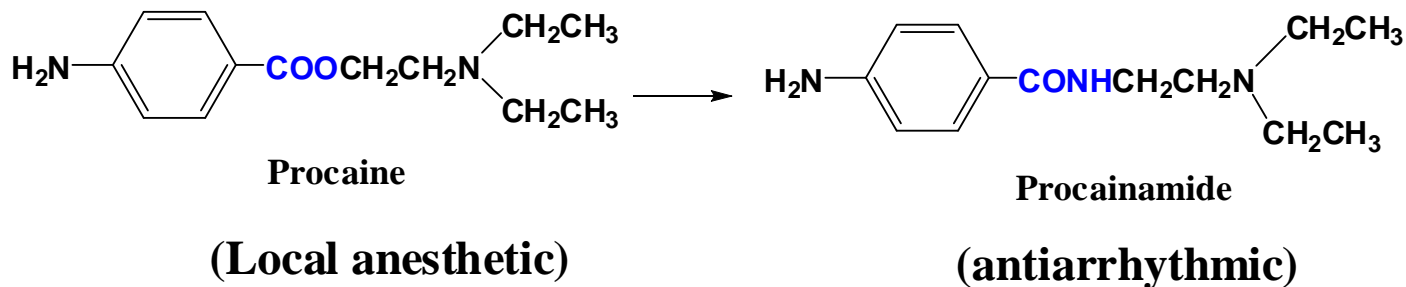
Oxidation of the aromatic ring could be retarded by introduction of a strong electronwacceptor group such as -Cl, quaternary amines (-NR₃), -COOH, SO₃R or – SO₂NHR groups.

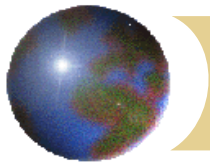
e.g: Replacement of the arylmethyl substituent of the antidiabetic tolbutamide by Cl yielded the antibiabetic chloropropamide with **longer half life (duration of action)**.



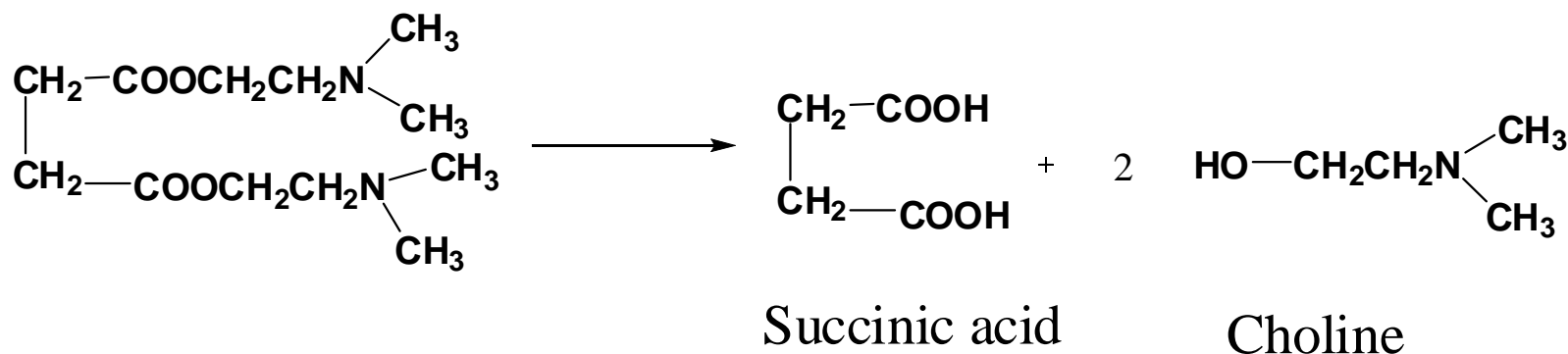


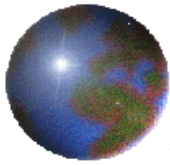
e.g4: Replacement of the ester group of the local anesthetic **procaine** by an amide group produced the **procainamide** with antiarrhythmic activity





e.g5: The labile ester moiety decreased the $t_{1/2}$ of succinylcholine (neuromuscular blocker) to 10 min. Reducing the chances of fatal overdoses.





Prodrugs

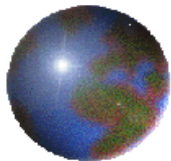
Definition:

Prodrugs are **inactive** compounds that yield an **active** compound on metabolism in the body

Classification

1-Bioprecursor

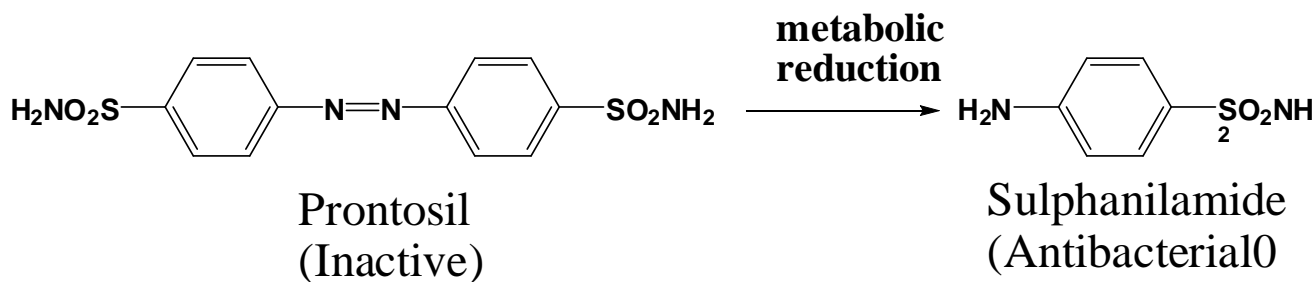
2-Carrier Prodrugs



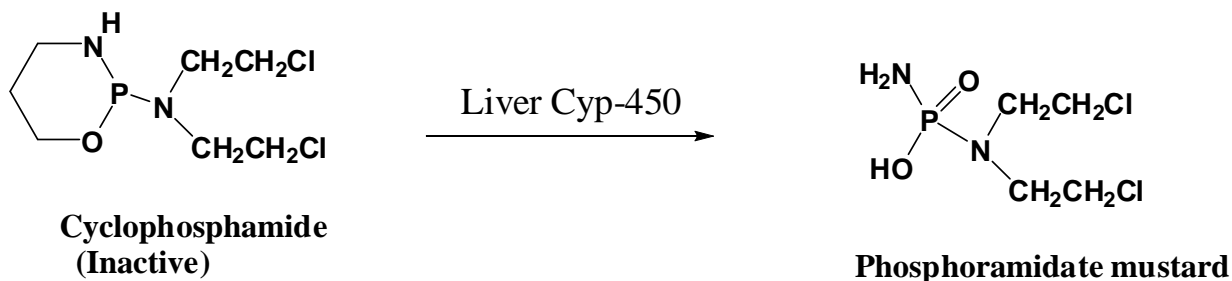
1-Bioprecursor Prodrugs

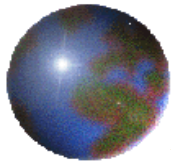
They produce the active species on metabolism

e.g:Prontosil



e.g:Cyclophosphamide





2-Carrier Prodrugs

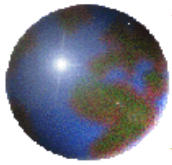
Carrier prodrugs are formed by combining an active drug with a carrier species to form a compound with the desired chemical and biological characteristics.
e.g: Lipophilic moiety to improve transport across membranes.

The link between the carrier and the active species must be an amide or ester group easily metabolized by esterases or amidases.

Carrier + Active species \rightarrow Carrier Prodrug



Carrier + Active Species



All types of carrier prodrugs should meet the following criteria:

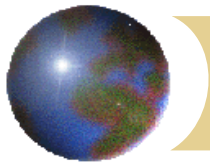
1-Less toxic than the drug

2-The prodrug should be inactive or significantly less active than the parent drug.

3-The rate of formation of the active drug from the prodrug should be rapid enough to maintain the drug concentration.

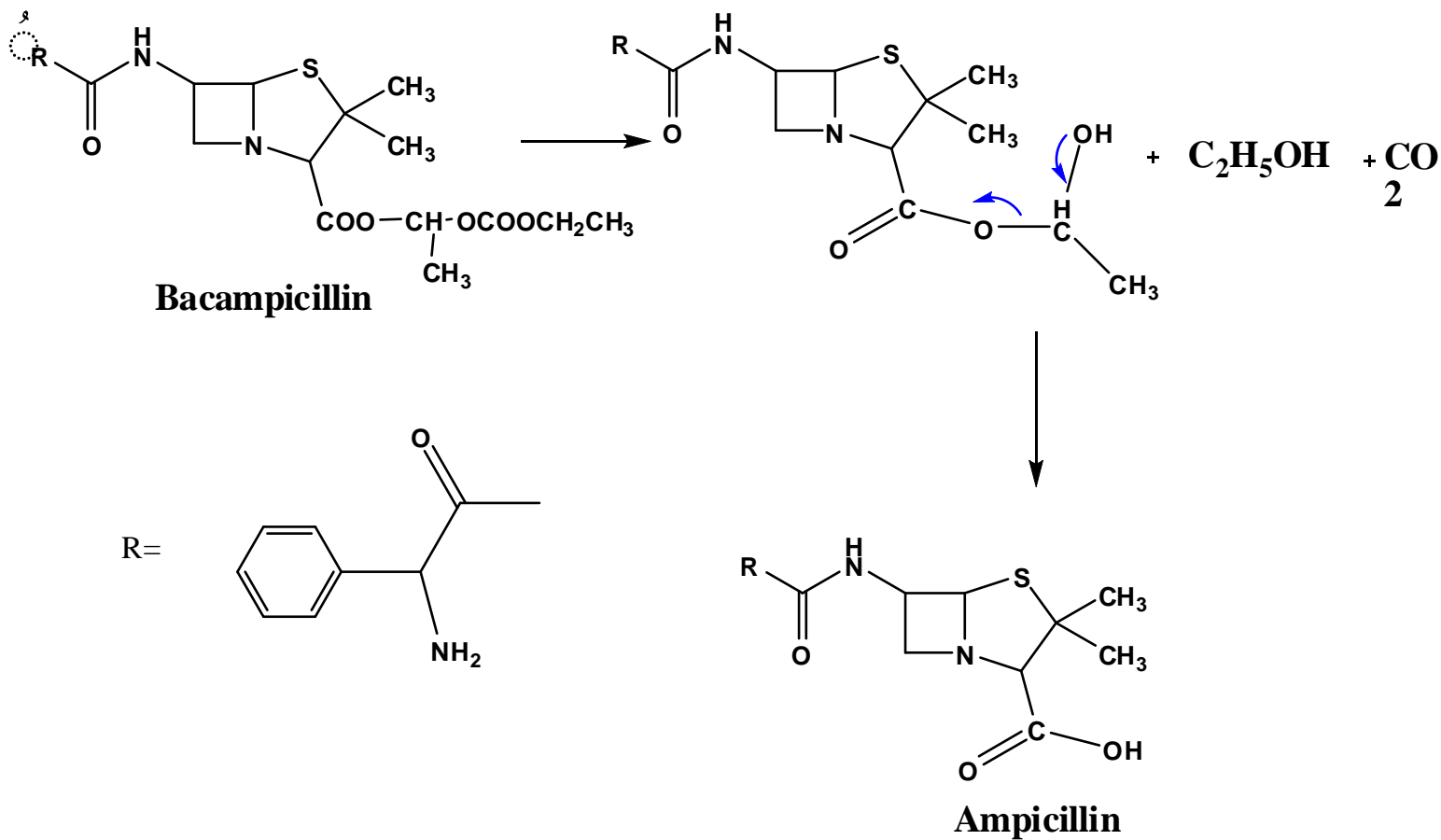
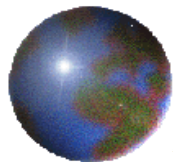
4-Prodrug should be with improved bioavailability if administered orally.

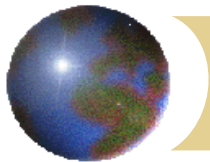
5-The prodrug should be site specific.



The ideal prodrugs meeting most of these criteria is **Bacampicillin**: It is a prodrug of ampicillin

Only about 40 % of the orally administered ampicillin is absorbed where the remaining in the GI tract destroys the normal flora. The % of absorption of bacampicillin is 98-99 % where a smaller dose is required to maintain the required concentration of the drug in the blood. The metabolism of the prodrug yields carbon dioxide, ethanal and ethanol, all of which are natural metabolites in the body.



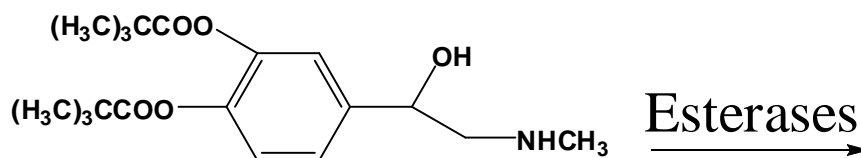


○ Design of Prodrug System for Specific Purposes

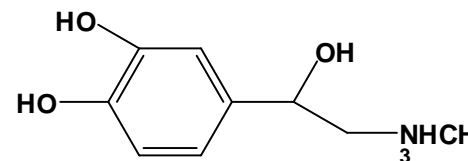
-Improving Absorption

Lipophilic carriers are used to increase the lipophilic nature and hence the absorption of the drug.

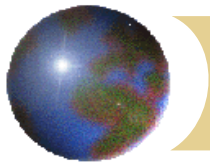
Example: adrenaline when used in treatment of glaucoma is poorly absorbed through the cornea. However the more lipophilic dipivaloyladrenaline increased the absorption.



Dipivaloyladrenaline

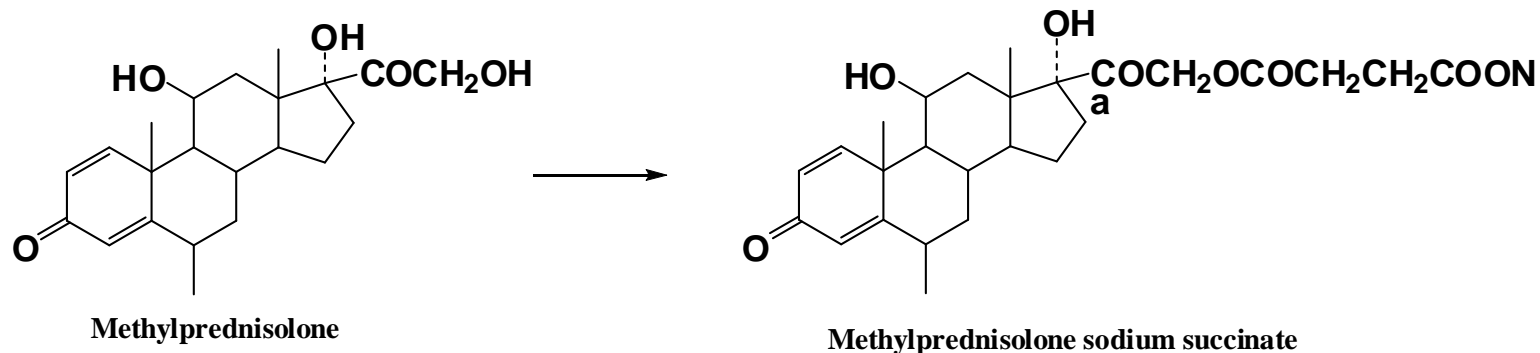


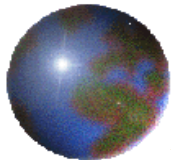
Adrenaline



Absorption also depends upon water solubility. A drug must have a suitable water solubility if it is transported through membranes by passive diffusion.

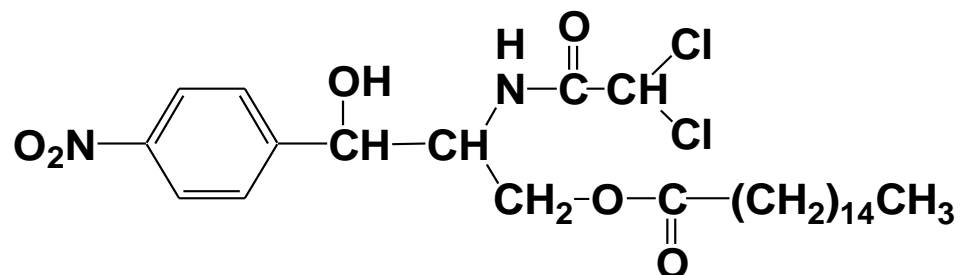
e.g: Water soluble carrier sodium succinate is used to increase the water solubility of the glucocorticoid methylprednisolone.

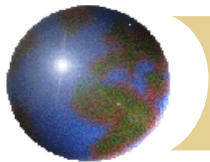




Improving Patient Acceptance

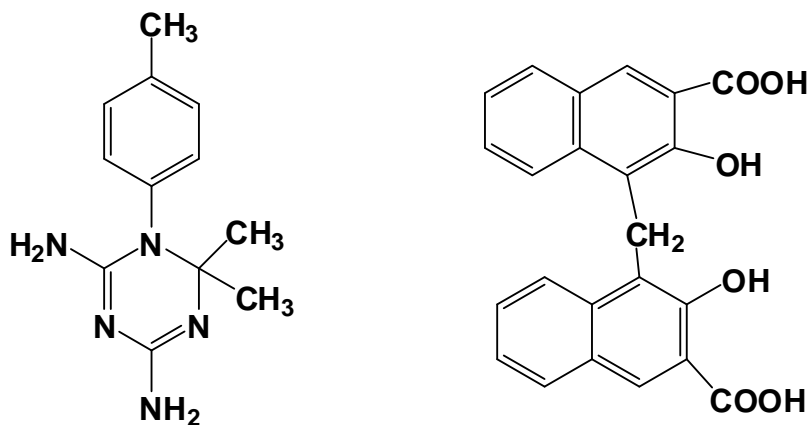
E.g: Chloramphenicol is derivatized as its **palmitate** ester to overcome its bitter taste to improve its palatability in pediatric liquid suspensions.





Slow Release

The slow release carrier prodrugs are also used as the basis of depot preparations, which are administered by intramuscular injection. E.g The a single dose of the insoluble carrier prodrug cycloguanil embonate will slowly release the antimalarial drug at the therapeutic Level over a period of several months.



Cycloguanil embonate