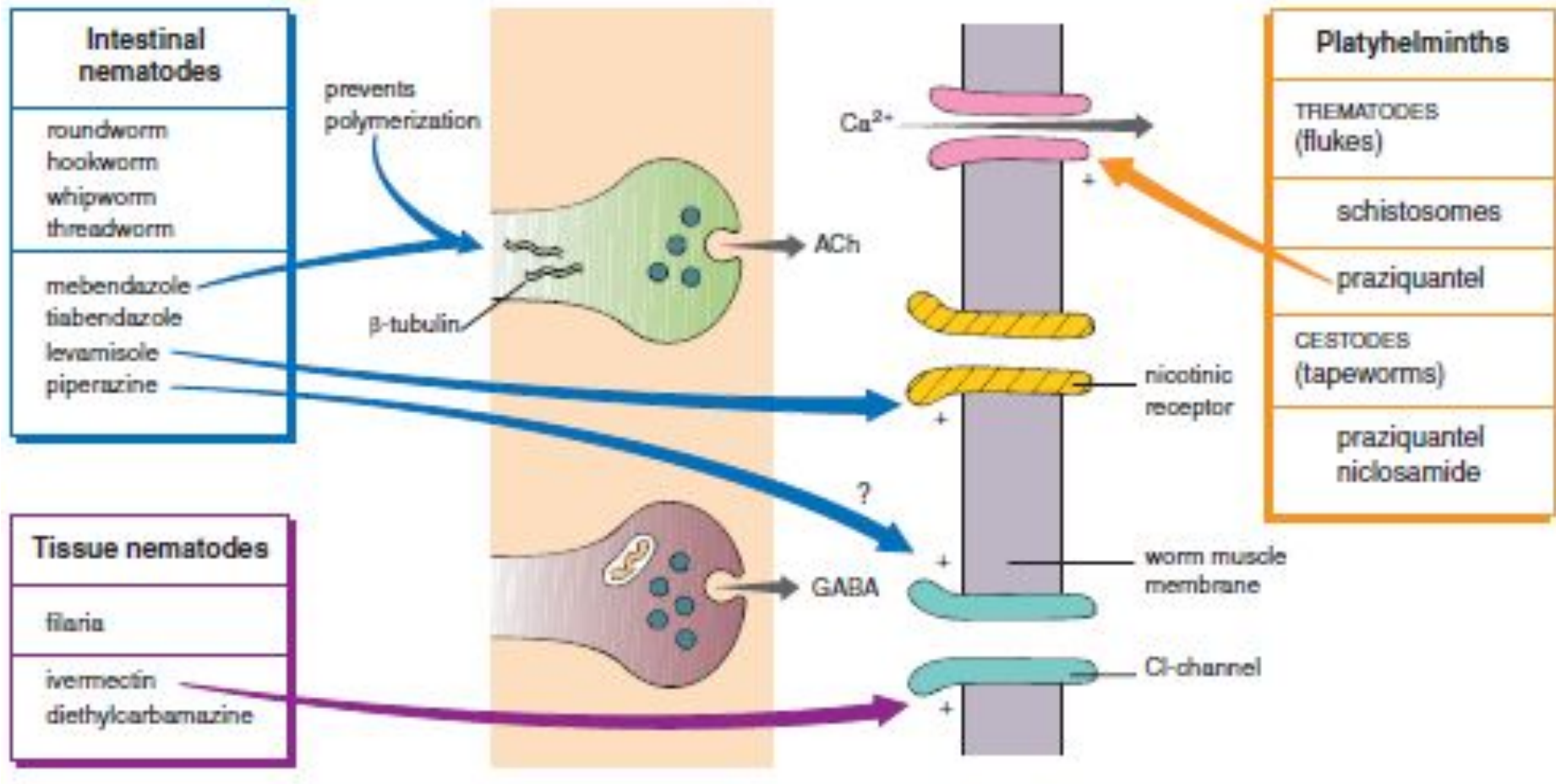


ANTIHELMINTHIC AND ANTIPROTOZOAL DRUGS



- Anthelmintics are drugs that either kill (vermicide) or expel (vermifuge) infesting helminths.
- Nematodes, trematodes, and cestodes are three major groups of helminthes (worms) that infect humans.
- Nematodes are elongated roundworms that possess a complete digestive system. They cause infections of the intestine as well as the blood and tissues.
- We use: mebendazole, albendazole, pyrantel, levamisol, piperazine.



Mebendazole

- **Uses:** whipworms (*Trichuris trichiura*), pinworms (*Enterobius vermicularis*), hookworms (*Necator americanus* and *Ancylostoma duodenale*), and roundworms (*Ascaris lumbricoides*);
in high doses: extraintestinal helminthiasis (trichinellosis and echinococcosis)
- It inhibits the assembly of the microtubules and glucose utilization in helminthes and paralyzes them. It kills ova and larvae of *Ascaris*.
- Absorption from intestines – 10-15%
- Adverse effects: abdominal pain, diarrhea, headache, allergic reactions

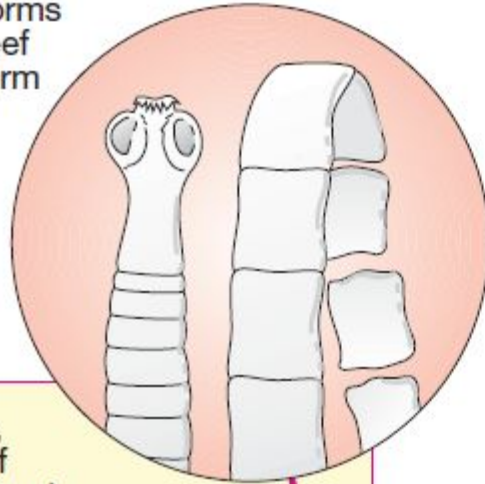
Albendazole

- ❖ Uses: ascariasis, hookworms and enterobiasis (a single dose) , toxocariasis, filariasis, cysticercosis, echinococcosis (long-term therapy).
- ❖ It is absorbed from GIT, metabolized in the liver.
- ❖ Adverse effects: headache, diarrhea, dizziness, leucopenia, skin rashes, abdominal pain, vomiting.

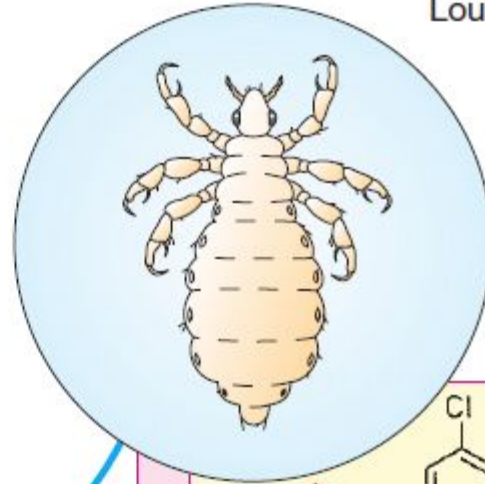
Levamisole

- Uses: a single dose – ascariasis, less effective – ankylostomiasis, strongyloidiasis, filariasis.
- Mechanism: stimulation of ganglia, drug-induced paralysis of helminthes due to depolarization of their muscles, inhibition of fumarate reductase and metabolism.
- Adverse effects: abdominal pain, diarrhea, nausea

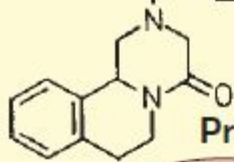
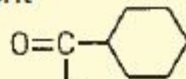
Tapeworms
e.g., beef
tapeworm



Louse

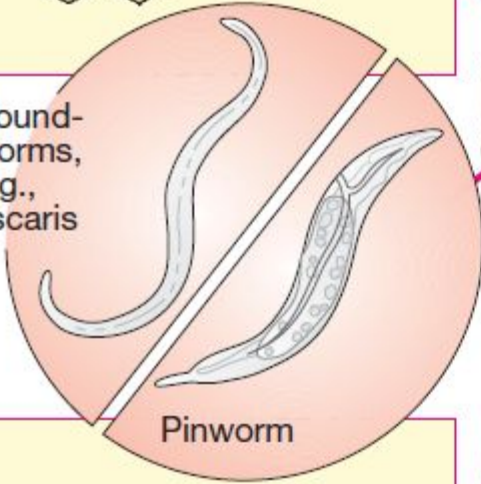


Spasm,
injury of
integument

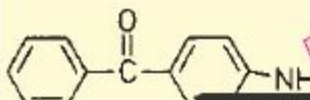


Praziquantel

Round-
worms,
e.g.,
ascaris

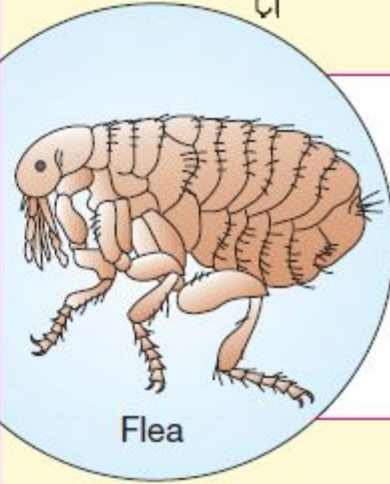
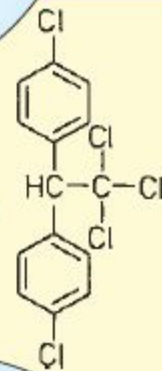


Pinworm

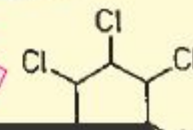


Damage to nervous system: convulsions, death

Chlor-
phenothane
(DDT)



Flea

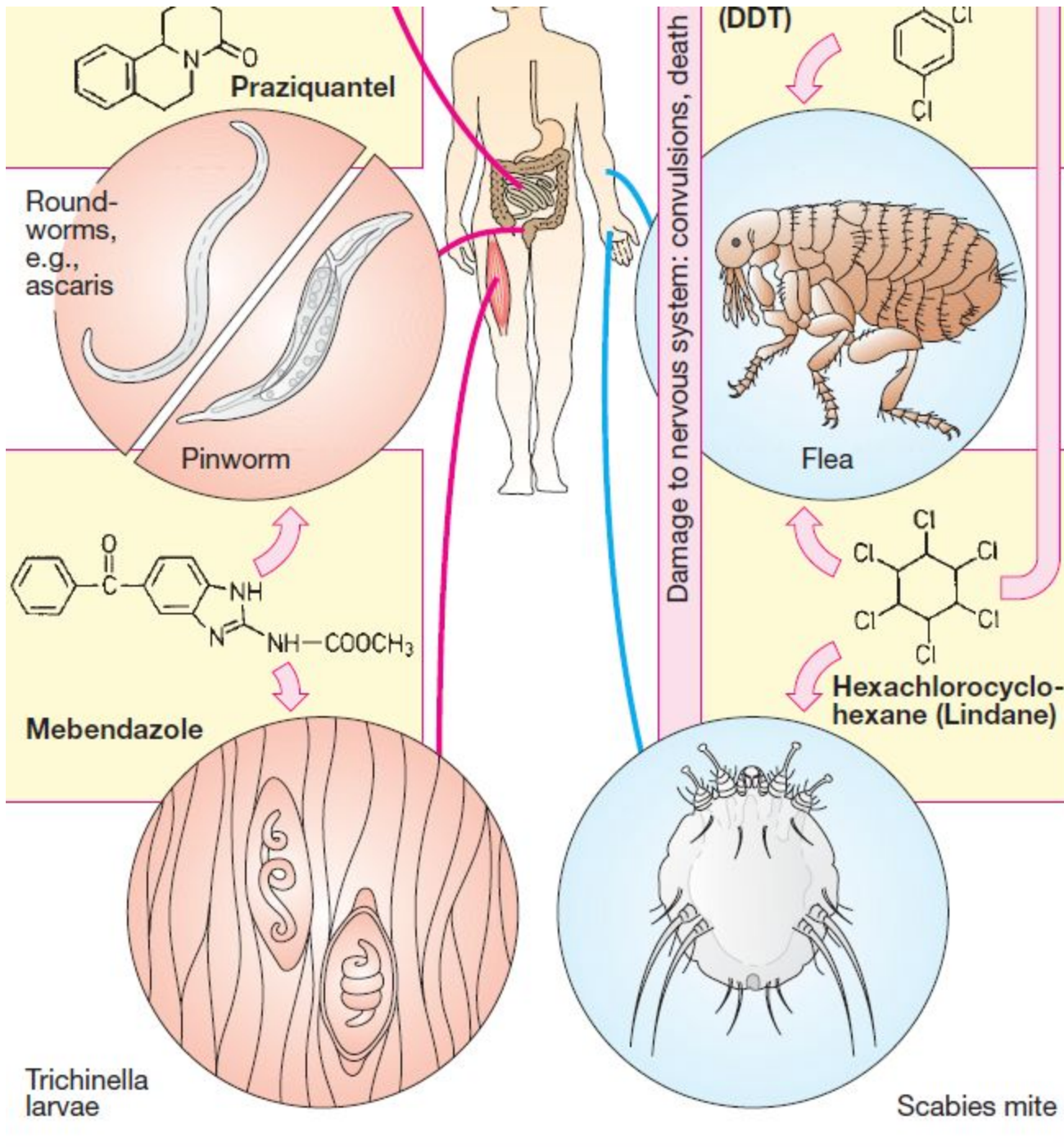


- **Pyrantel** is active against *Ascaris*, *Enterobius*, *Ancylostoma*, *Necator*, *Strongyloides*
- Mechanism: activation of nicotinic cholinergic receptors in the worms → persistent depolarization → slowly developing contracture and spastic paralysis.
- Absorption from GIT – 10-15%.
- Adverse effects: nausea, vomiting, abdominal pain, headache and dizziness

- ❑ **Diethylcarbamazine citrate** is microfilaricidal. It has a highly selective effect on microfilariae and against adult worms.
- ❑ It is rapidly absorbed following oral administration with meals and is excreted mainly in the urine.
- ❑ Adverse effects may include fever, nausea, vomiting, arthralgia, and headache.

Niclosamide

- Uses: *Taenia saginata*, *Diphyllobothrium latum* and *Hymenolepis nana*.
- It inhibits the mitochondrial phosphorylation of adenosine diphosphate (ADP). Anaerobic metabolism may also be inhibited.
- In cases of *T. solium*, digestion of the dead segments can be hazardous, because the ova released from them may develop into larvae in the intestine, penetrate its wall and cause visceral cysticercosis.
- It is minimally absorbed from GIT.
- Adverse effects: dyspepsia, allergic reactions.

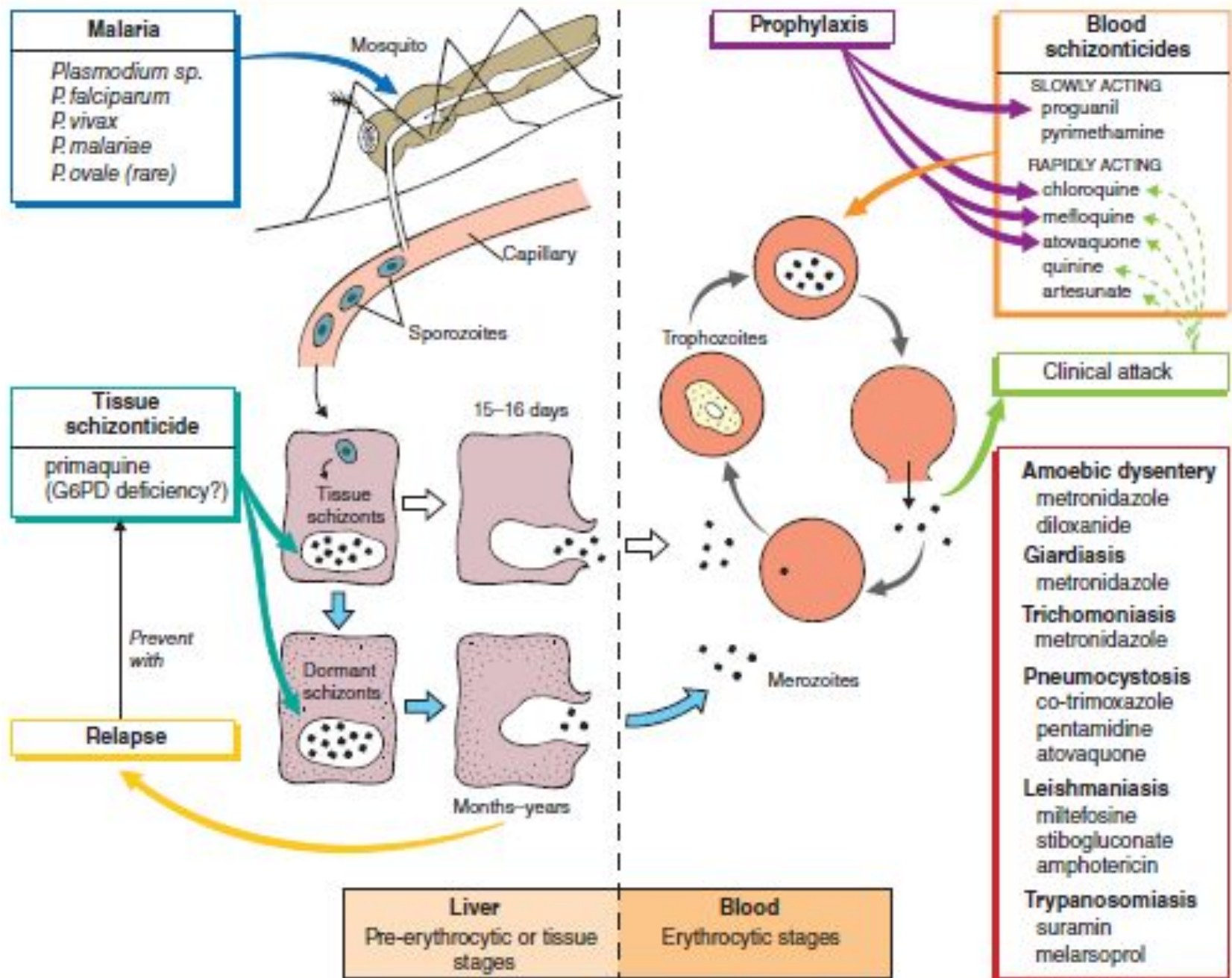


Praziquantel

- Uses: all forms of schistosomiasis, other trematode infections, cestode infections such as taeniasis, cysticercosis (caused by *Taenia solium* larvae)
- Mechanism: leakage of intracellular calcium from the membranes → contracture and paralysis.
- It is rapidly absorbed after oral administration and distributes into the cerebrospinal fluid (CSF). It is extensively metabolized, and the inactive metabolites are excreted primarily in the urine.
- Adverse effects: dizziness, malaise, headache

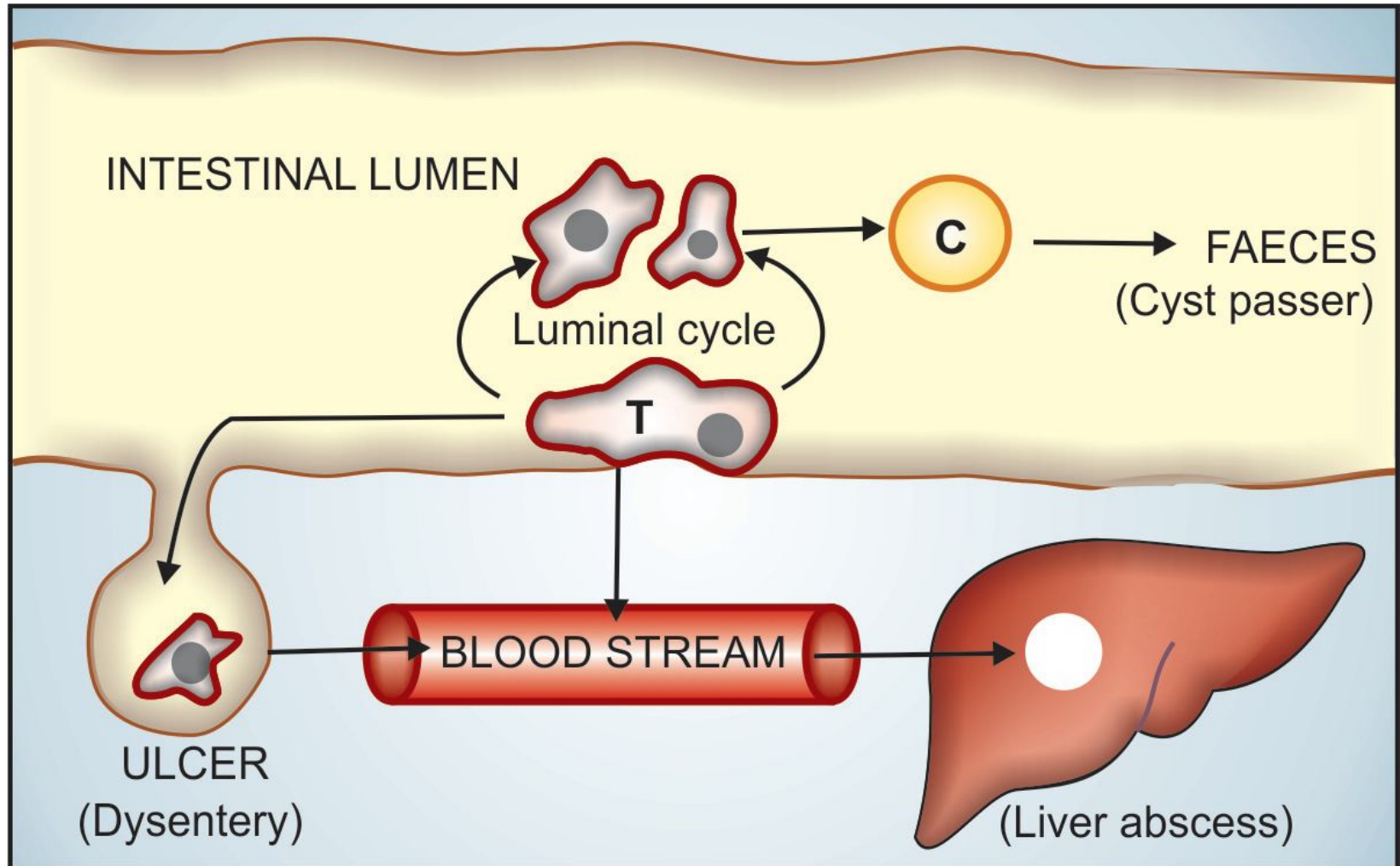
Antiprotozoal drugs are used for the treatment and prophylaxis of:

- Malaria
- Amebiasis
- Giardiasis (Metronidazole, furazolidone)
- Trixomoniasis (Metronidazole, furazolidone, Diiodohydroxyquin rect.)



- ❑ Toxoplasmosis (pyrimethamine, sulfadimidine)
- ❑ Balantidiasis (tetracyclines, monomycin, quiniofone)
- ❑ Leishmaniasis (solusurmine, stibogluconate, amphotericin B, paromomycin)
- ❑ Trypanosomiasis (melarsoprol, primaquine, suramin)

- ❖ **Antiamoebic drugs** - drugs useful in infection caused by the anaerobic protozoa *Entamoeba histolytica*.



CLASSIFICATION

1. **Tissue amoebicides**

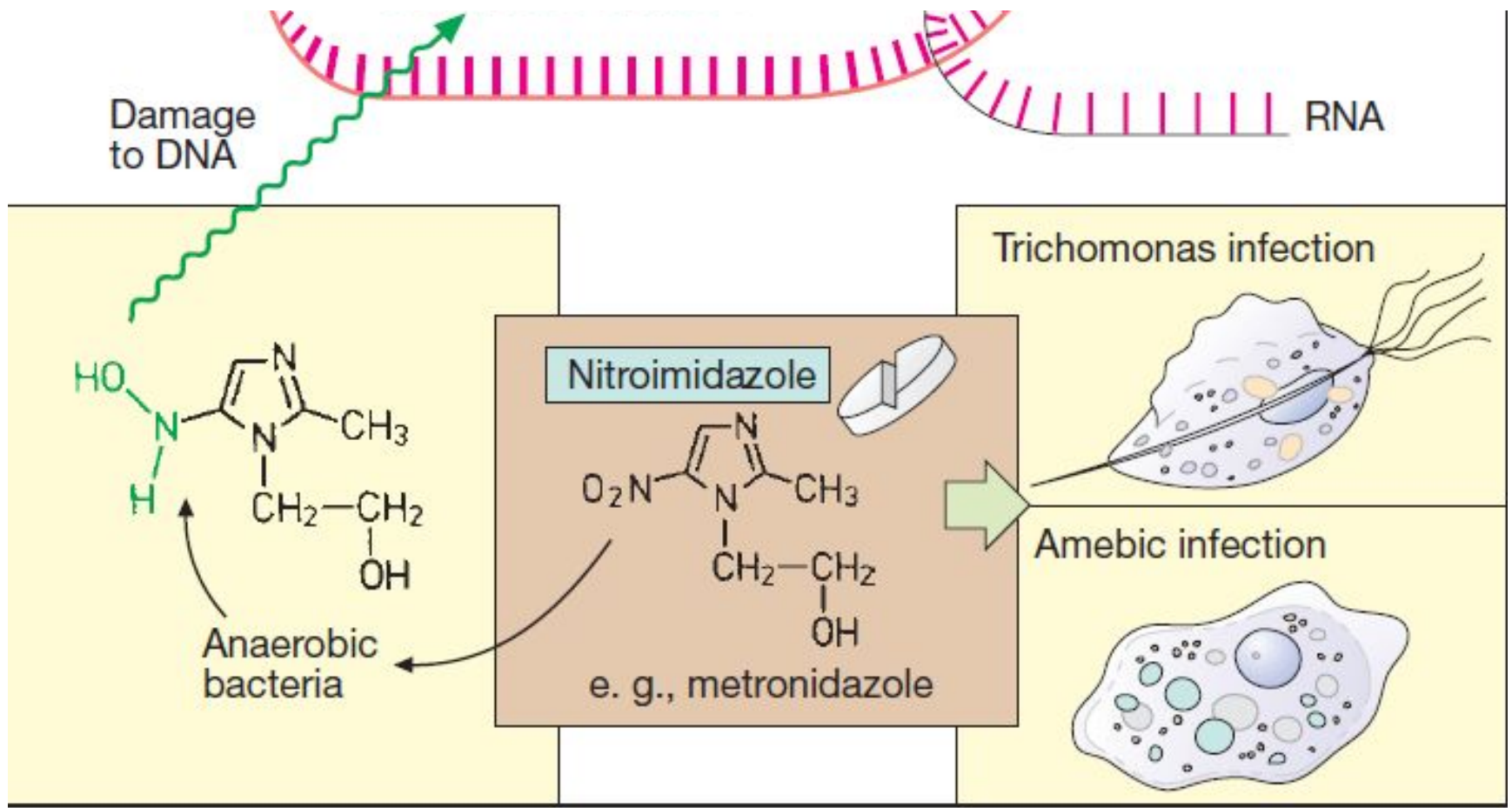
For both intestinal and extraintestinal amoebiasis:

Nitroimidazoles: **Metronidazole, Tinidazole,
Ornidazole**

For extraintestinal amoebiasis only: **Chloroquine**

2. *Luminal amoebicides*: **Tetracyclines**

- **Nitroimidazoles** (Metronidazole) is used for the treatment of infections caused by:
- *Entamoeba histolytica*,
- *Giardia lamblia*,
- *Trichomonas vaginalis*,
- anaerobic cocci, and anaerobic gram-negative bacilli (*Bacteroides* species),
- for the treatment of pseudomembranous colitis caused by the anaerobic, gram-positive bacillus *Clostridium difficile*.



A. Antibacterial drugs acting on DNA

- The nitro group of **Nitroimidazoles** is able to serve as an electron acceptor, forming reduced cytotoxic compounds that bind to proteins and DNA. The drugs disrupt metabolism and cause death of microorganisms.
- They are absorbed well from GIT, distribute well throughout body tissues and fluids. Therapeutic levels can be found in vaginal and seminal fluids, saliva, breast milk, and cerebrospinal fluid (CSF).
- Tinidazole and ornidazole are well absorbed from GIT, accumulated in the plasma in higher concentrations than Metronidazole and provide longer effect than it.

Adverse effects:

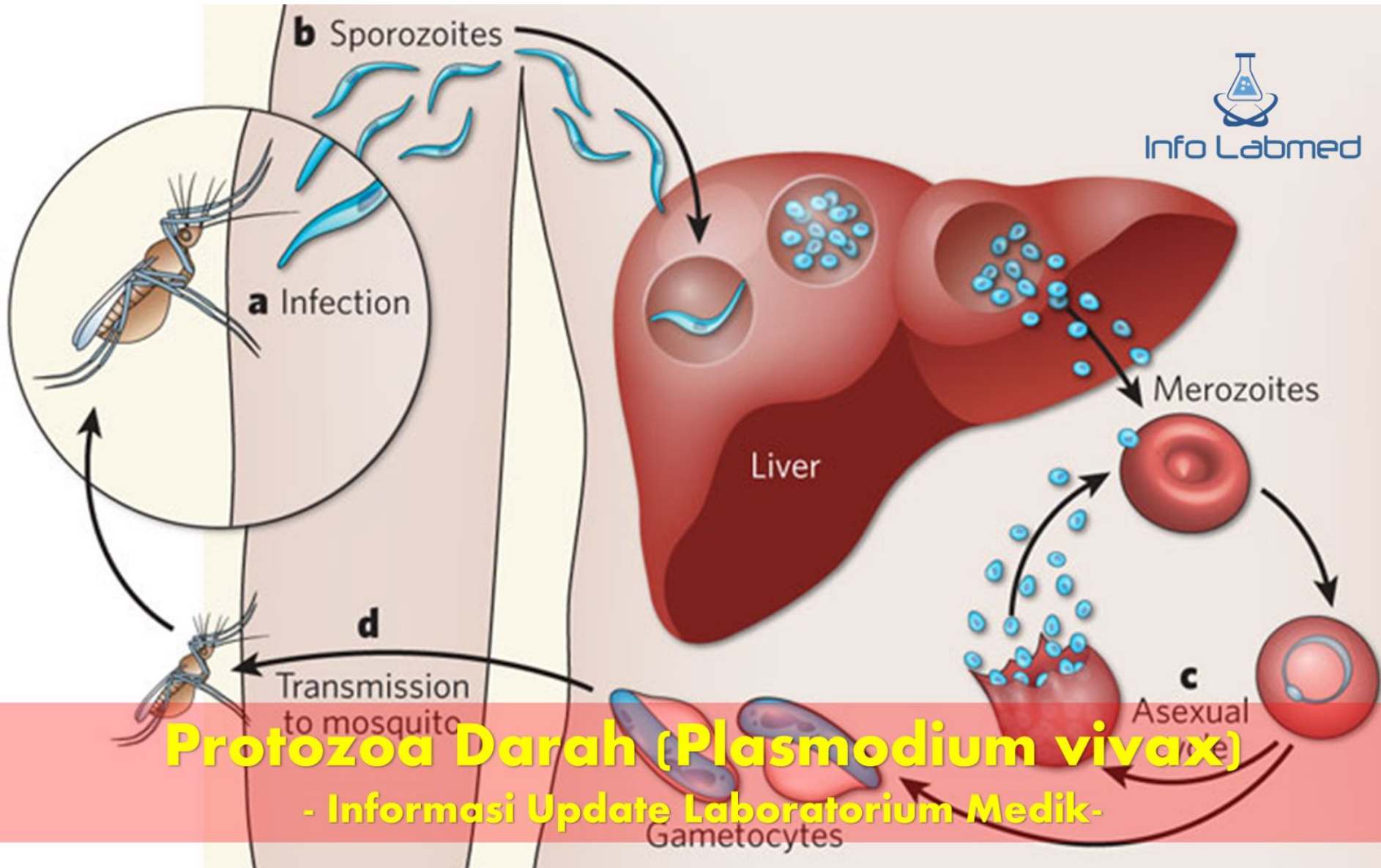
- ❑ nausea, vomiting, epigastric distress, and abdominal cramps, an unpleasant, metallic taste,
- ❑ oral moniliasis (yeast infection of the mouth),
- ❑ neurotoxicity (dizziness, vertigo, and numbness or paresthesia),
- ❑ a *disulfiram-like reaction* (if taken with alcohol).

- Malaria is one of the most common diseases worldwide and a leading cause of death. *Plasmodium* species that infect humans (*P falciparum*, *P malariae*, *P ovale*, *P vivax*) undergo a primary developmental stage in the liver and then parasitize erythrocytes. *P falciparum* and *P malariae* have only 1 cycle of liver cell invasion. The other species have a dormant hepatic stage responsible for recurrent infections and relapses. **Primary tissue schizonticides** (eg, **primaquine**) **kill schizonts in the liver**, whereas **blood schizonticides** (eg, **chloroquine, quinine**) **kill these parasitic forms only in the erythrocyte**. **Sporonticides** (proguanil, pyrimethamine) prevent sporogony and multiplication in the mosquito.

DRUGS FOR MALARIA



Info Labmed



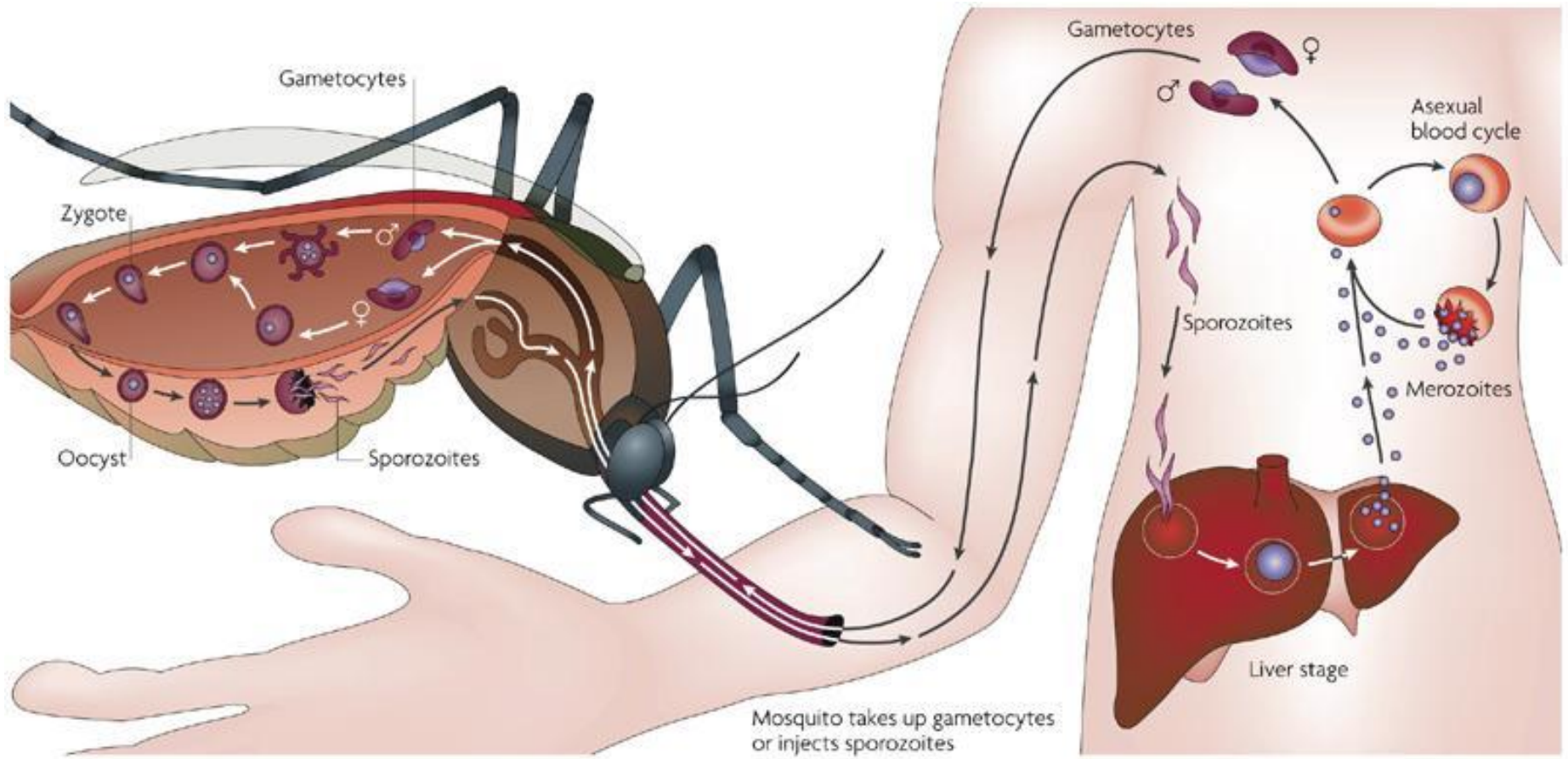
Protozoa Darah (Plasmodium vivax)

- Informasi Update Laboratorium Medik-

Principals of antimalarial drugs use

1. Individual chemoprophylaxis: prevention of the development of malaria in men during the time of residency in a area which has a high risk of malaria. We can use drugs influencing on preerythrocytic forms or hematoshizotropic drugs (pyrimethamine, chloroquin)
2. The treatment: oral administration of hematoshizotropic drugs, which influence erythrocytic forms of plasmodia. These drugs are used to cure the acute attacks of M.

3. Prevention of delayed relapses: administration of drugs which have tropism towards paraerythrocytic forms (primaquine).
4. Social chemoprophylaxis: prevention of the transmission of the infection by a sick person. We use gametotropic drugs (primaquine, pyrimethamine).



- **Chinine** (Quinine) complexes with doublestranded DNA and prevents strand separation, blocks DNA replication and transcription to RNA. It is solely a blood schizonticide.
- It is rapidly absorbed orally and is metabolized before renal excretion. Intravenous administration of quinine is possible in severe infections.
- It is used in the treatment of severe or complicated falciparum malaria.
- Adverse effects: **cinchonism** (gastrointestinal distress, headache, vertigo, blurred vision and tinnitus).

- **Chloroquine** is rapidly absorbed when given orally, is widely distributed to tissues.
- It accumulates in the food vacuole of plasmodia and prevents polymerization of the hemoglobin breakdown product heme into hemozoin. Intracellular accumulation of heme is toxic to the parasite.
- It is the drug of choice for acute attacks of malaria and for chemoprophylaxis.
- Side effects: gastrointestinal irritation, skin rash, and headaches; peripheral neuropathies, myocardial depression, retinal damage, auditory impairment, and toxic psychosis

- Sulfonamides act as antimetabolites of PABA and block folic acid synthesis by inhibiting dihydropteroate synthase.
- **Pyrimethamine is a selective inhibitor of protozoan dihydrofolate reductases.** The combination has synergistic antimalarial effects (**blockade of 2 steps in folic acid synthesis**).
- The antifols are blood schizonticides that act mainly against *P falciparum*.
- Adverse effects: skin rashes, gastrointestinal distress, hemolysis, kidney damage.

- **Primaquine** is a synthetic 8-aminoquinoline. It is used orally.
- It forms quinoline- quinone metabolites, which are electron-transferring redox compounds that act as cellular oxidants. The drug is a tissue schizonticide and also limits malaria transmission by acting as a gametocide.
- Uses: Eradication of liver stages of *P vivax* and *P ovale*, primary prevention
- Adverse effects: GI distress, methemoglobinemia, hemolysis in G6PD deficiency

Nitrofuran derivatives

Nitrofurantoin : antiseptic

Furazolidon: intestinal infections, giardiasis,
Trichomonas colpitis

**Nitrofurantoin (Furadonin), Furazidin
(Furagin)**: uroinfection.

Spectrum:

Gram-negative bacteria: Escherichia coli, Shigella,
Salmonella, Klebsiella

Cocci (entero-, staphylo-, strepto-, meningo,
gonorrhoea)

Vibrio cholerae, Giardia, Trichomonas

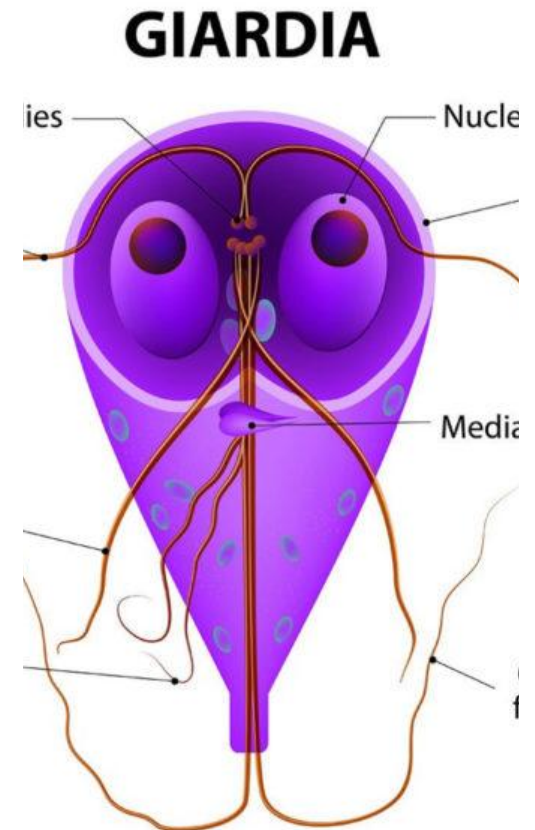
Mechanism:

- ❖ The restoration of the nitro group to the amino group under the influence of reductase microbial cells.
- ❖ The formation of complexes with nucleic acids,
- ❖ Disruption of the respiratory chain of microorganisms.
- ❖ Increase in the body's resistance to infections.
- ❖ The decline in the production of toxins.

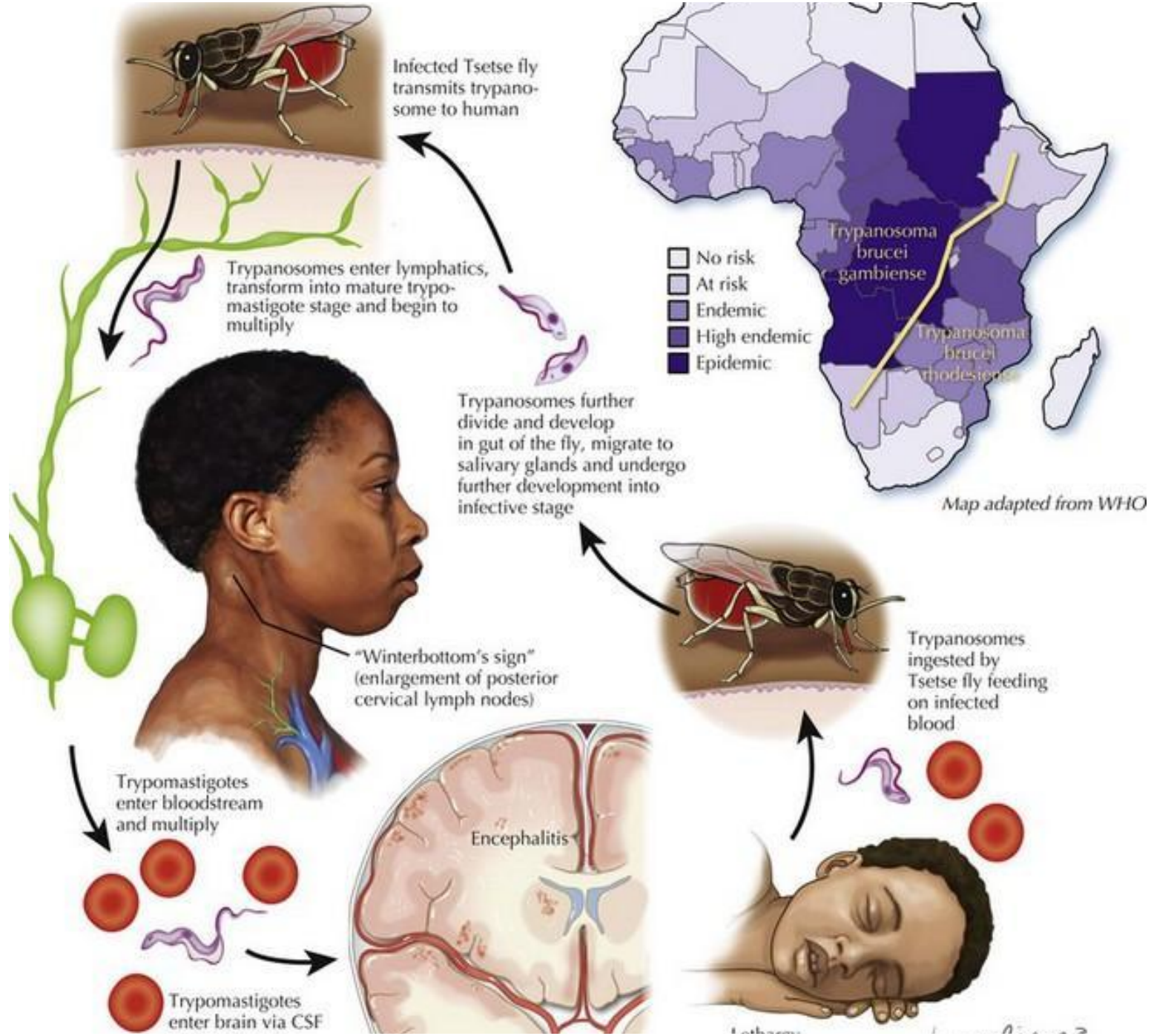
Type of action: bacteriostatic or bactericidal

Side effects

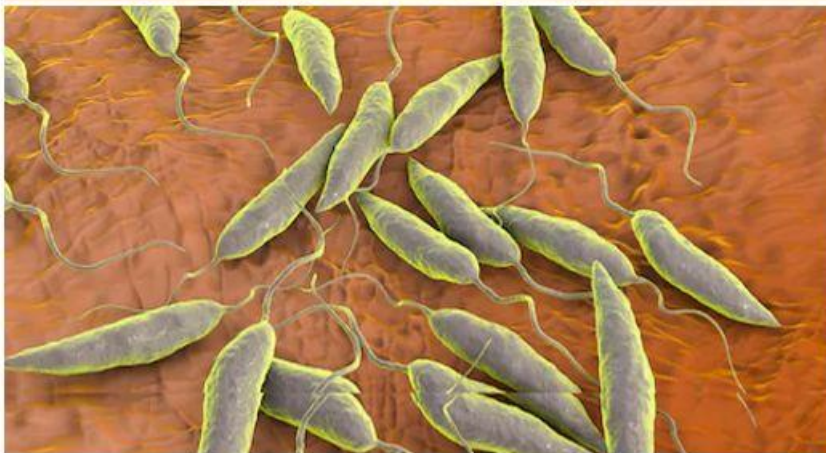
- Dyspeptic disorders: nausea, vomiting, diarrhea;
- Cholestasis; disorders of liver function;
- Allergic reaction;
- Headache, dizziness;
- Hemolytic anemia,
- Methemoglobinemia in children up to a year;
- Arterial hypertension



- **Melarsoprol** is used for the treatment of trypanosomal infections. The drug reacts with sulfhydryl groups of various substances, including enzymes in both the organism and host.
- It is administered by slow IV injection and has irritating effect. Adequate trypanocidal concentrations appear in the CSF. The drug has a very short half-life and is rapidly excreted in urine.
- Adverse effects: CNS toxicity, peripheral neuropathy, hypertension, albuminuria; allergy, febrile reactions; hemolytic anemia in patients with glucose-6-phosphate dehydrogenase deficiency.



Leishmania, transmitted by flesh-eating flies, cause various diseases ranging from mucocutaneous lesions to splenic and hepatic enlargement with fever.



- Solusurminum and Sodium stibogluconate (pentavalent antimony) kills the parasite by inhibition of glycolysis or effects on nucleic acid metabolism.
- Stibogluconate must be administered parenterally and is potentially cardiotoxic (QT prolongation). Alternative agents include fluconazole or metronidazole (for cutaneous lesions), and amphotericin (for mucocutaneous leishmaniasis).

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