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Q NO 1 :

Ans: Drug Receptor:

Receptor is a macromolecule in the membrane or inside the cell that specifically (chemically) bind a ligand (drug). The binding of a drug to receptor depends on types of chemical bonds that can be established between drug and receptor. The strength of this chemical bonds (covalent, ionic, hydrogen, hydrophobic) determined the degree of affinity of ligand to receptor. Ligands (drugs) that attracted the receptor may be classified as agonists or antagonists. Agonists produce the biological response as a result of receptor ligand interaction therefore agonists possess efficacy.

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i) Enumerate different receptors:

"A cell within a multicellular organism may need to signal to other cell that are at various distance from the original cell. Not all cell are affected by the same signals. Different type of signaling are used for different purposes.

Receptor on protein molecule inside the target cell or on its surface that receives a chemical signal. Chemical signals are released by signaling cell in the form of small, usually water or soluble molecule called ligands. A ligand is a molecule that bind another specific molecule in some cases, delivering a signal in the process.

ii) Receptor show effect through Second Messenger System.

Second messenger are intracellular signaling molecule released by the cell in response to exposure to extracellular signaling molecule. The first messengers (intracellular signals) a non-local form of cell signaling encompassing both first messengers are classified as juxtacrine, paracrine and endocrine depending on the range of the signal. Second messenger triggers physiological changes at cellular level such as proliferation.

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differentiation, migration survival
apoptosis and depolarization.
They are one of the trigger of
intracellular signal transduction
cascades.

Secondary messengers systems can be
synthesized and activated by enzymes.
for example, the cyclases that
synthesize cyclic nucleotides or by
opening of ion channels to allow
influx of metal ions, for example
 Ca^{2+} signaling. These small molecule
bind and activate protein kinases,
ion channels, and other proteins, thus
continuing the signaling cascade.

Q NO : 2

Ans: Drug Interaction:-

A drug interaction is a
change in the action or side
effects of a drug caused by
concomitant administration with a food
beverage supplement, or another drug.
There are many causes of drug
interaction for example, one drug
may alter the pharmacokinetic of
another. Alternatively drug interaction
may result from competition for
a single receptor or signaling pathway.

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The risk of a drug-drug interaction increase with the number of drugs used. over a third (36%) of the elderly in the U.S. regularly use five or more medication or supplements, and 15% are at risk of a significant drug-drug interaction.

Enumerate various Types::

There are several different types of drug interaction to be aware of.

(i) Drug-drug:

A drug-drug reaction in when there is an interaction between two or more prescription drug.

(ii) Drug Food:

This happens when food or beverage intake alters a drug's effects.

For example: Some statins (used to treat high cholesterol) can interact with grapefruit juice. If a person who take one of these statins drinks a lot of grapefruit juice, too much of drug may stay in their body, increase their risk for liver damage or kidney failure.

(iii) Drug Alcohol:

Certain medication shouldn't taken with alcohol. often, combining these drugs with alcohol can cause toxicity and delayed reaction.

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it can also increase your risk for negative side effects.

② Drug-disease: This interaction is when the use of a drug alters or worsens a condition or disease additionally. Some medical condition can increase the risk of side effects from specific drugs.

③ Drug-laboratory: Some medication can interfere with specific laboratory tests. This can result in inaccurate test result.

④ Pharmacokinetic Drug interaction: pharmacokinetic is what the body does to the drug. These interaction occur when one drug alters the concentration of another drug (the object) with clinical consequence.

pharmacokinetic interaction occur when the absorption, distribution, metabolism or elimination process of the object drug is altered by the precipitant drug and hence such interaction are also called as PDPIE interaction. The resultant effect is altered plasma concentration of the object drug.

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Factors:

There are four factors that will influence the pharmacokinetic drug test. water solubility, fat soluble, dissociation degree and molecular weight.

pharmacokinetic is a quantitative study of drugs in the body absorption distribution metabolism and excretion of the fact. the use of mathematical principles and methods to explain the plasma concentration with time changes in a discipline.

water is the carrier of drug transport and the body by the medium. Drugs in the absorption site must have a certain degree of water solubility in a dissolved state. So that can be absorbed. therefore the drug is required to have a certain water solubility. polarity (the introduction of polar groups can increase water solubility).

crystal form (the impact of drug bioavailability is more and more attention. The melting point of the solubility thus affecting the absorption of drug, affecting bioavailability.

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Q No 3:

∴ Local Anaesthesia:

Ans: ~~Local Anaesthesia~~ is where a small area of the body is numbed and you remain fully conscious - often used during minor procedures.

∴ general Anaesthesia: is where totally unconscious and unaware of the procedure, often used for more serious operation.

∴ Stages of Anaesthesia:

(i) Stage of Analgesia:

- starts from beginning of anaesthetic inhalation and lasts up to the loss of consciousness.
- pain is progressively abolished.
- patient remain conscious can hear and see, and feels a dream like state.
- Reflexes and respiration remain normal.

(ii) Stage of Excitement:

- stage starts from loss of consciousness upto gain of rhythmic respiration.
- Respiration - irregular and large in volume.
- Heart rate and BP raises
- pupils - large and divergent
- patient may shout or struggle.

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- muscle tone increased - jaw may be tight.
- involuntary micturition, or defecation.

(i) Stage (III) Surgical Anaesthesia:

• Extends from onset of regular respiration to cessation of spontaneous breathing.

• This has been divided into 4 planes

(i) plane 1: Roving eyeballs.
This plane ends when eye become fixed.

(ii) plane 2:

loss of corneal and laryngeal reflexes.

(iii) plane 3: pupil start dilating and light reflex is lost.

(iv) plane 4: intercostal paralysis
shallow abdominal respiration
Dilated pupil.

(i) Stage (IV) Stage of medullary paralysis:

• There is cessation of breathing leading to failure of circulation and death.

- pupil is widely dilated
- muscles are totally flabby
- pulse is thready or imperceptible
- BP is very low.

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Q NO 4:

Ans: (a) Heart failure means:

Heart failure means that the heart is unable to pump blood around the body properly. It usually occurs because the heart has become too weak or stiff. It's sometimes called congestive heart failure, although this name is not widely used nowadays.

Heart failure does not mean your heart has stopped working. It just needs some support to help it work better.

It can occur at any age, but it's most common in older people.

(b) Pathophysiology Heart failure:

Pathophysiology Heart failure brings together leading basic scientists and clinicians presenting new approaches to this complex problem involving cardiomyopathic processes and ischemia reperfusion injury. The result is a synthesis of

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state of the art information
on molecular biology, cellular
physiology and structure and
function relationship in the
cardiovascular system. The role
which excess intracellular calcium
plays in the genesis of
cardiac dysfunction is described
as a fundamental mechanism
underlying heart failure one which
may lead to improved
prevention and treatment.
Clinical and experimental cardiologists
will find this book.

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Q no: 4 (b)

Ans: Drug used for treatment of heart failure:

Heart failure patient may need multiple medication. Each one treats a different symptom or contributing factor and comes with its own instruction and rules.

You and your caregivers should work with your healthcare team to understand the medication and when, how often, and in what dosage to take them. It's important to discuss all of the drugs you take with your doctor (or other healthcare providers) and understand their desired effects and possible side effects. Your doctor and your pharmacist are your best sources of information. Do not hesitate to ask them questions about your medicines. It's critical that people with heart failure take their medication exactly as directed by healthcare providers to optimize the benefits.

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Q No 5 (a)

Ans:

⇒ Broad Spectrum antibiotic: acts against multiple strains and forms of different bacteria which share common structure and metabolic function that can be attacked and affected to kill them.

⇒ Narrow Spectrum antibiotic: are more specific in their course and act against only certain bacteria as a more targeted approach.

⇒ Antibiotic Drugs:

Antibiotic chemical substance produced by a living organism generally a microorganism, that is detrimental to other microorganism. Antibiotic commonly are produced by soil microorganism and probably represent a means by which organism in a complex environment, such as soil control the growth of competing microorganism. microorganism that produced antibiotic help in preventing or treating disease include the bacteria and the fungi

where pathogenesis

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Antibiotic came into worldwide prominence with the introduction of penicillin in 1941. Since then they have revolutionized the treatment of bacterial infection in humans and other animals. They are however ineffective against viruses.

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Q no 5 (b)

Ans: Antivirals are a class of medication that are used to treat viral infection resolve spontaneously in immunocompetent individual. The aim of antiviral therapy is to minimize symptoms and infectivity as well as to shorten the duration of illness. These drugs act by arresting the viral replication cycle at various stages. Currently antiviral therapy is available only for a limited number of infections. Most of the antiviral drugs currently available are used to treat infection caused by HIV, herpes viruses, hepatitis B and C viruses, and influenza A and B viruses. Because viruses obligate intracellular parasites, it is difficult to find drug target that interferes with viral replication without also harming the host cells. Unlike other antimicrobials antiviral drugs do not deactivate or destroy the microbe (in the case, the virus) but act inhibiting replication. In this way they prevent the viral load from increasing to a point where it could cause pathogenesis.