HOW DRUGS ACT

Corpora non agunt nisi fixata

(drugs do not act unless they are bound)



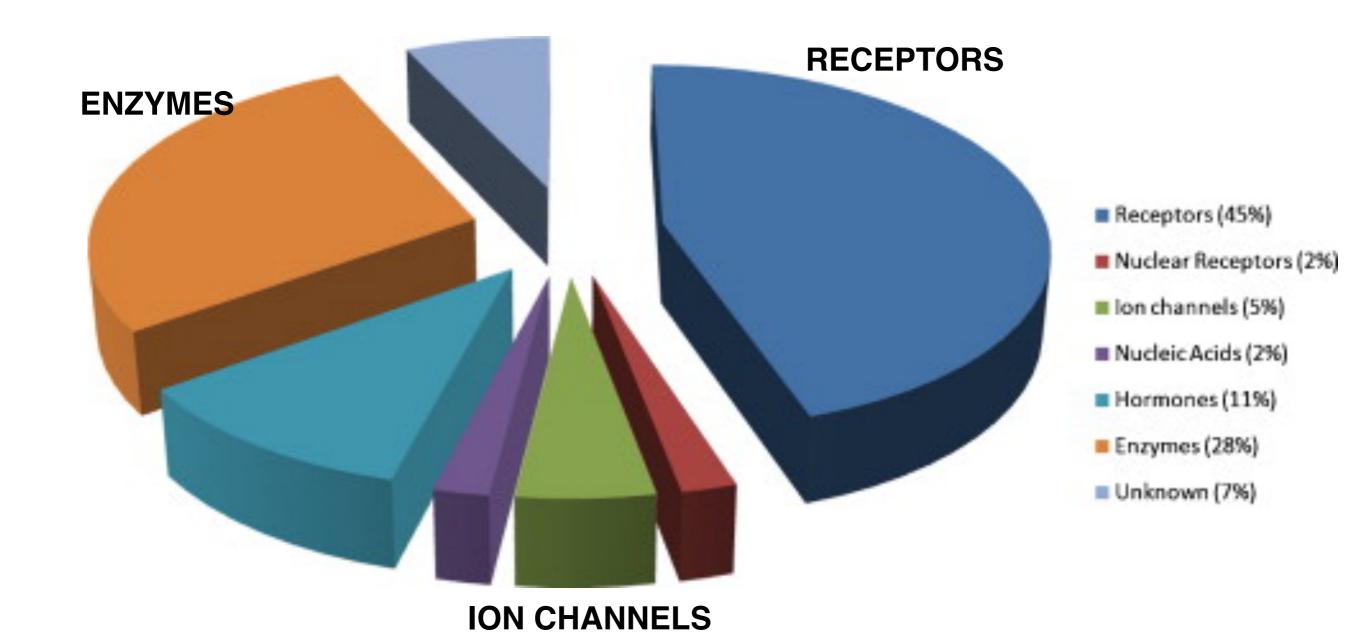
Paul Ehrlich (1854-1915)

CLASSIFICATION OF PROTEIN TARGETS FOR DRUG BINDING

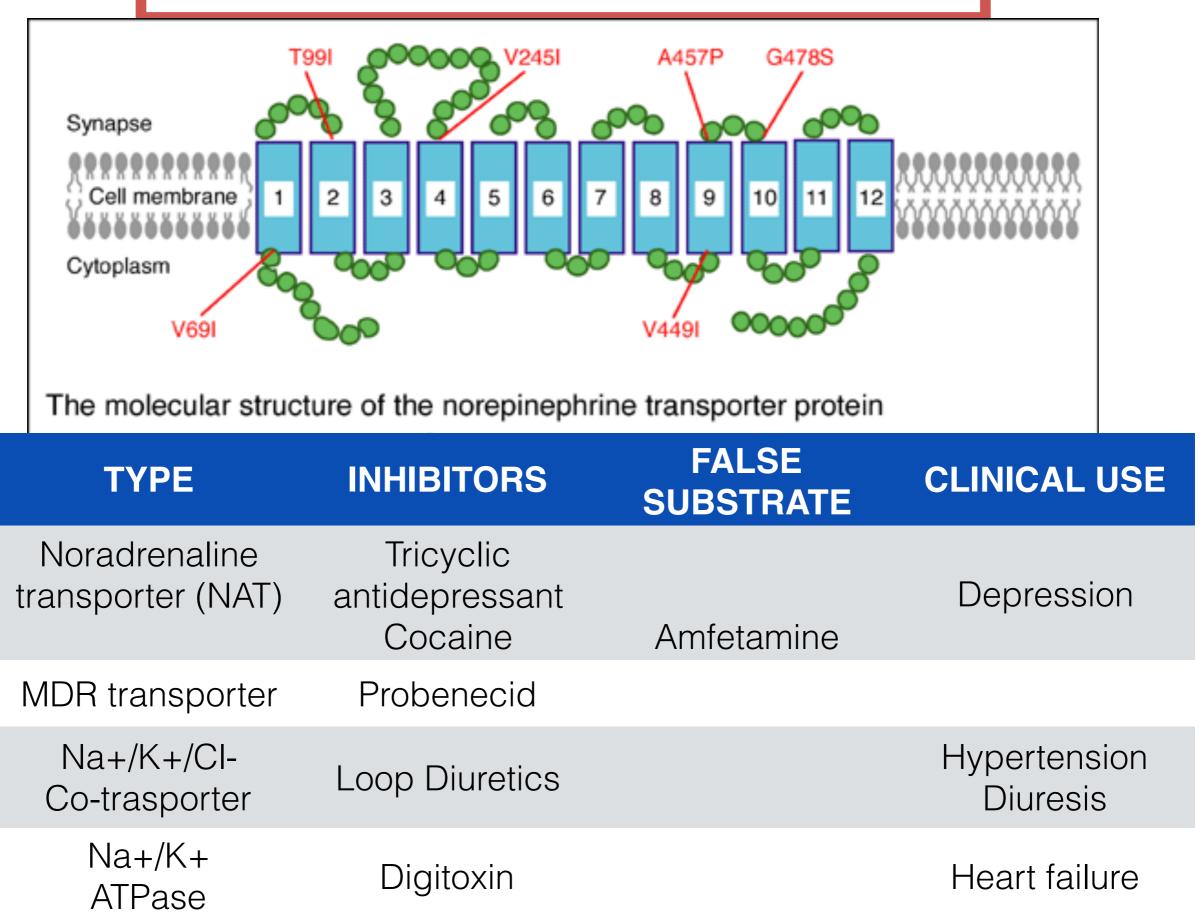
1. RECEPTORS 2.VOLTAGE DEPENDENT ION CHANNELS 3.ENZYMES 4.TRANSPORTERS

In pharmacology, the term "receptor" describes protein molecules whose function is to recognise and respond to endogenous chemical signals Other macromolecules with which drugs interact to produce their effects are "drug target"

PROTEIN TARGETS FOR DRUG BINDING



4. TRANSPORTERS or CARRIERS



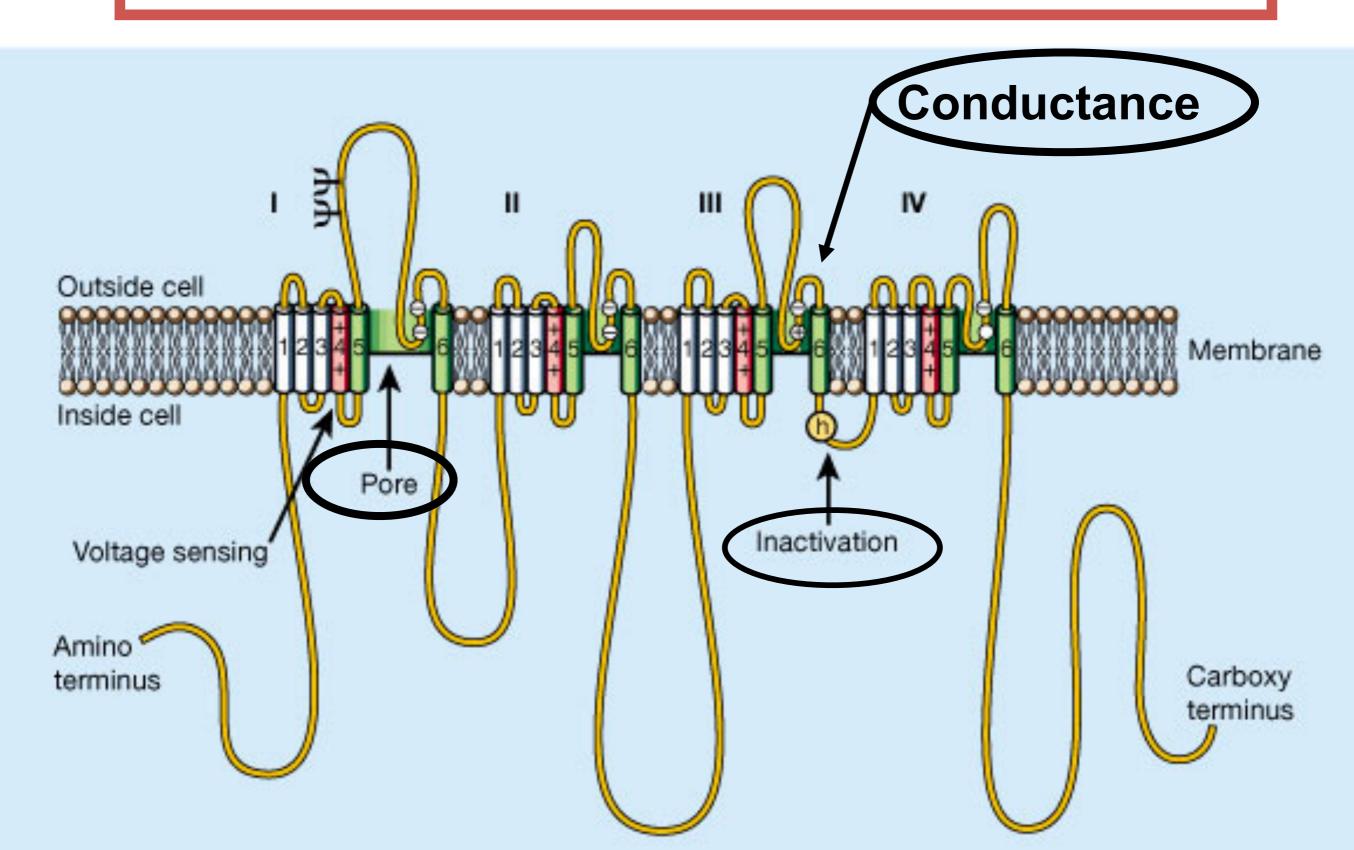


TYPE	INHIBITORS	FALSE SUBSTRATE	CLINICAL USE
Acethyl- cholinesterase	Donezepil Organophosphates		Alzheimer Insecticide
Cyclo-oxygenase	Aspirin		Anti-inflammatory Anti-aggregation (platelets)
Nitric Oxide Syntase	L-NMMA L-NAME		
Monoamine Oxidase (MAO)	Meclobemide		Depression Parkinson's
DOPA- decarboxylase		L-DOPA	Parkinson's

2. VOLTAGE DEPENDENT ION CHANNELS

TYPE	BLOCKERS	MODULATORS	CLINICAL USE
Na+ channels	Lidocaine Tetrodotoxin	Veratridine	Local anesthesia Anti-arithmic
Ca+ channels	Divalent cations e.g.: cadmium	Dihydropiridines	Hypertension
ATP-sensitive K+ channels	ATP	Sulfonylurea derivatives	Diabetes type 2

2. VOLTAGE-DEPENDENT ION CHANNELS General Features



VOLTAGE DEPENDENT Na+ CHANNELS

Neuro Rece sit	ptor Toxir)	Origin
1	Saxit	dotoxin oxin (PSP) notoxin	Fugu rubripes (blowfish) Dinoflagellates Conus geografus
2	batra acon	cotoxin	Veratrum (rhizome, Liliacee) Phyllobates terribilis (frog) r
3		orpion toxin anemone toxin	
4	β-sco	orpion toxin	25 E
5		toxins atoxins	Dinc DinoTlagellate
6	δ-cor	notoxin	Conus

Bufo alvarius (Colorado River toad or Sonoran Desert toad)

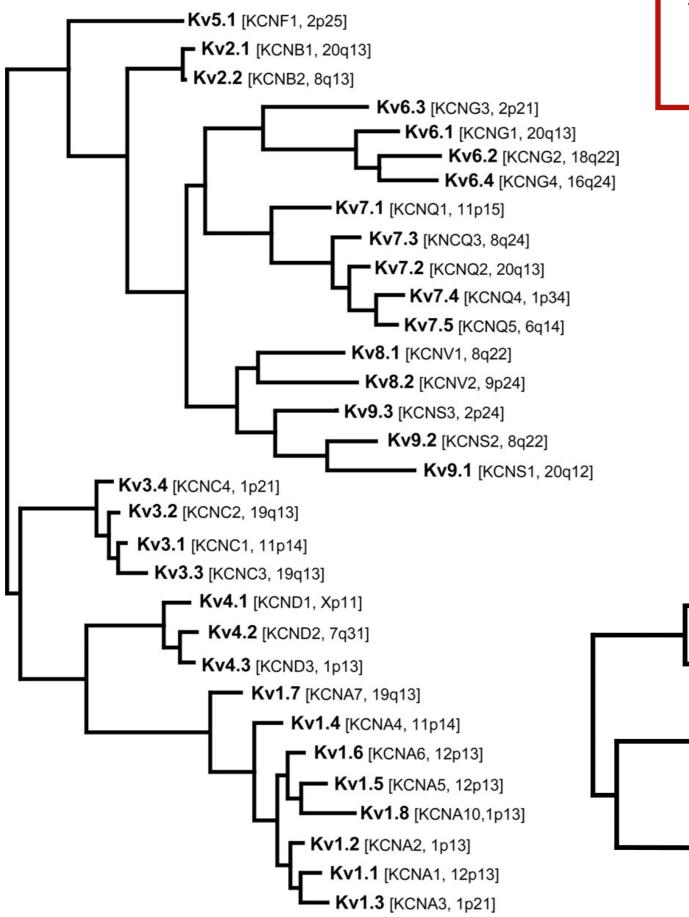


Bufotoxin: cardioactive steriod 5MeO-DMT and bufotenin: family of hallucinogenic tryptamines (LSD)

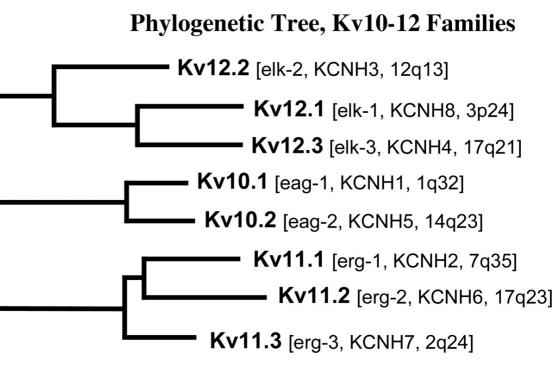
VOLTAGE-DEPENDENT Ca2+ CHANNELS

α_1 subunit	Subunit (type of current)	Localization	Main function	Drugs	Toxins
Ca _v 1 (HVA current, long- lasting kinetics of inactivation)	Ca _v 1.1 (L-type)	Skeletal muscle			
	Ca _V 1.2 (L-type)	Cardiac muscle Endocrine cells Neurons Smooth muscle	Initiation of contraction and secretion	calcium channel blockers-	
	Ca _v 1.3 (L-type)	Endocrine cells Neurons	secretion	sensitive	
	Ca _v 1.4 (L-type)	Retina			
Ca _v 2 (HVA current, long- lasting kinetics of inactivation)	Ca _v 2.1 (P/Q-type)	Nerve terminals Dendrites	Initiation of	calcium channel blockers- insensitive	ω-agatoxin-IVA, ω-conotoxin MVIIC
	Ca _v 2.2 (N-type)	Nerve terminals Dendrites	Initiation of neurotransmission at most fast		ω-conotoxin GVIA ω-conotoxin MVIIC
	Ca _v 2.3 (R-type)	Cell bodies Dendrites Nerve terminals	synapses		SNX-482
Ca _v 3 (LVA current, transient kinetics of inactivation)	Ca _v 3.1 (T-type)	Cardiac muscle Skeletal muscle Neurons	Involvement in shaping the action potential and controlling patterns of repetitive firing	calcium channel	
	Ca _v 3.2 (T-type)	Cardiac muscle Neurons		blockers-	
	Ca _v 3.3 (T-type)	Neurons		insensitive	

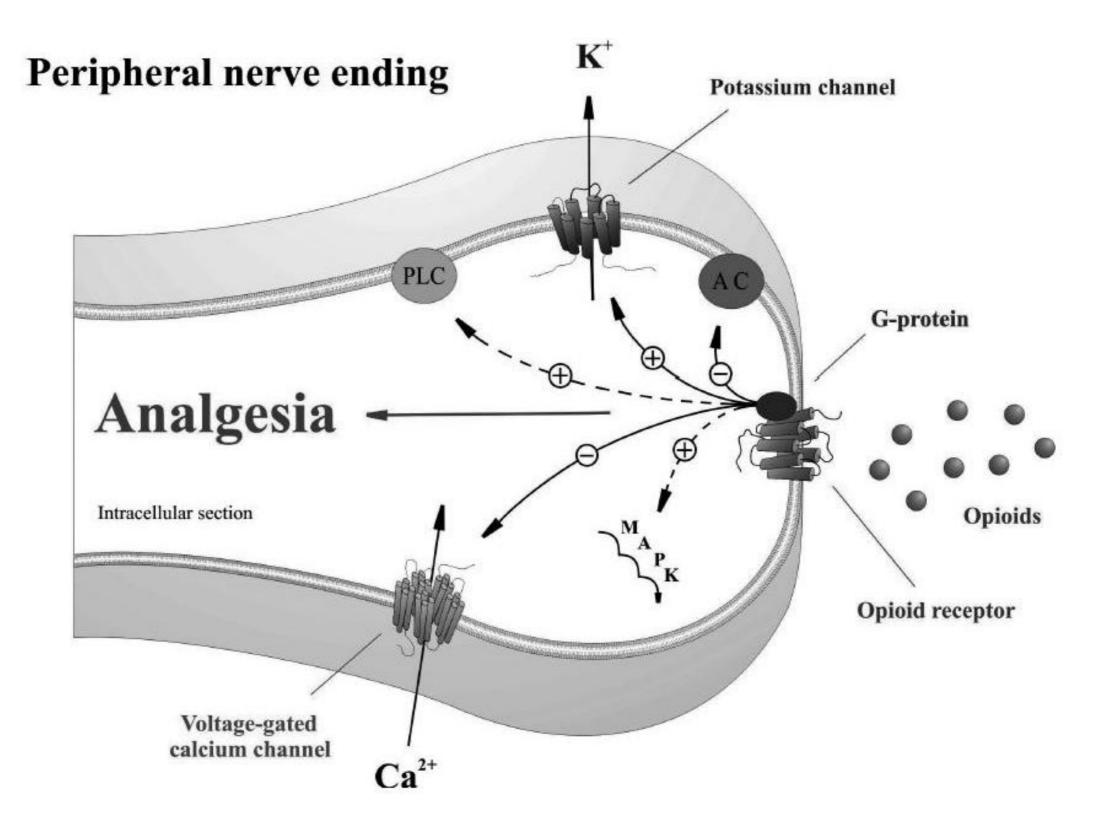
Phylogenetic Tree, Kv1-9 Families



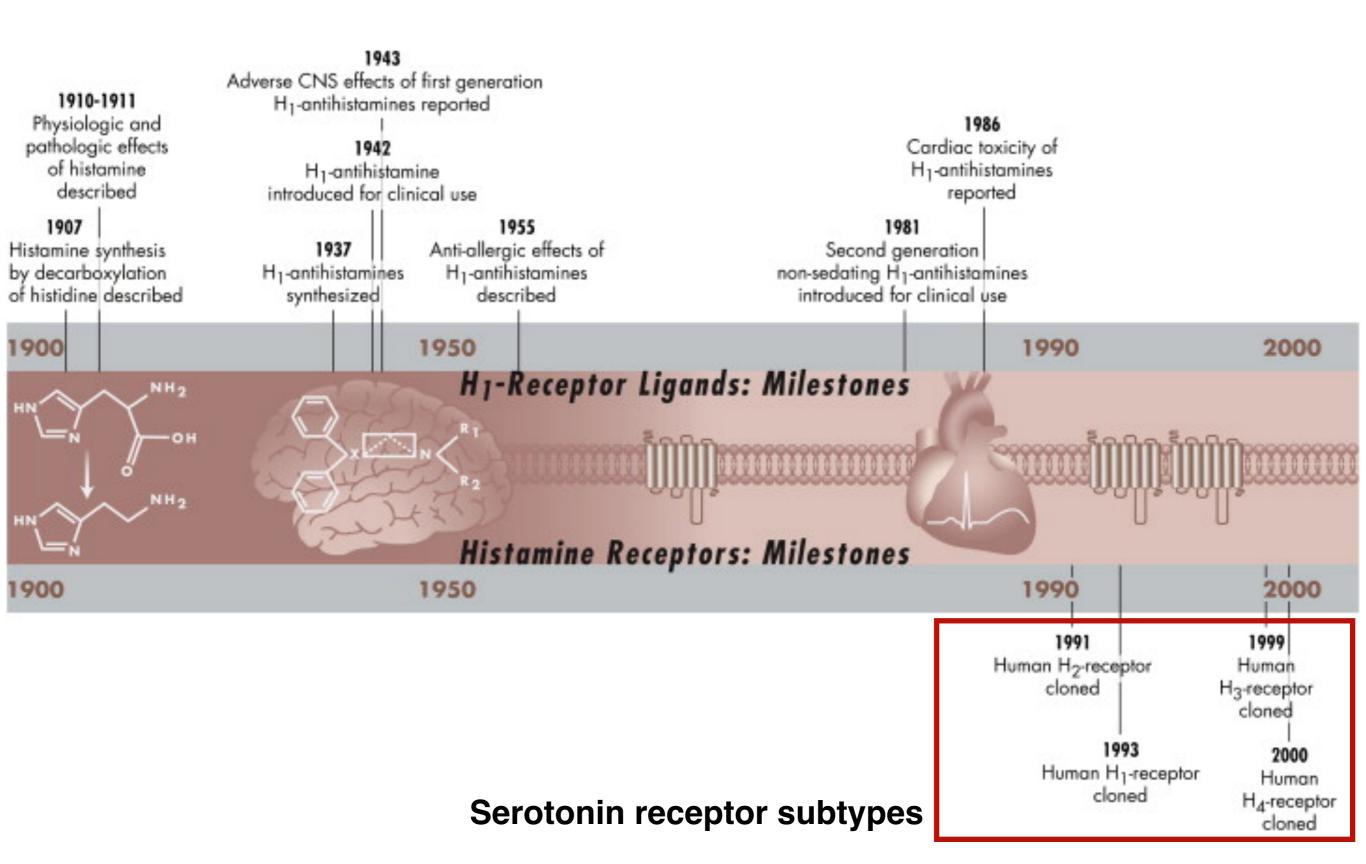
VOLTAGE-GATED K+ CHANNELS



Proposed model for opioid receptor-mediated analgesia at perpheral terminals of primary sensory neurones



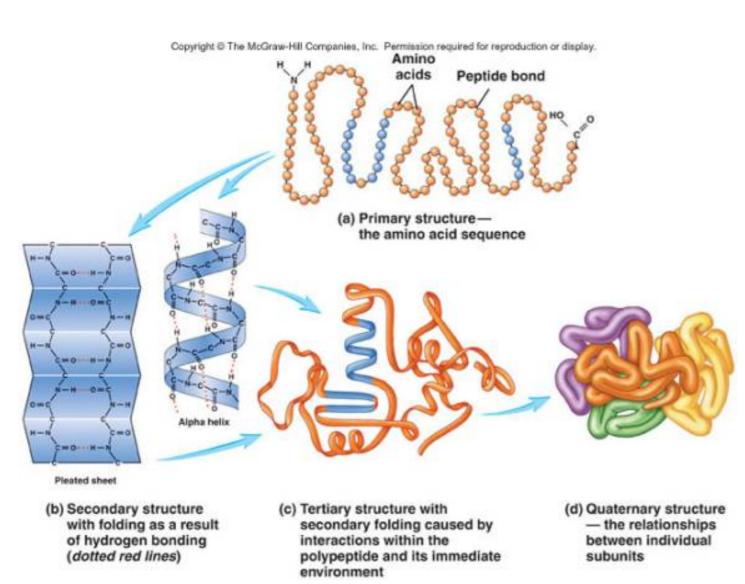
1. RECEPTORS

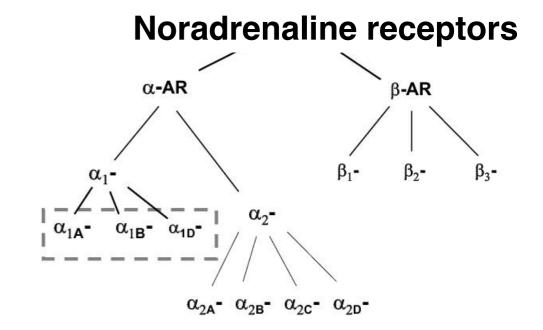


RECEPTOR HETEROGENITY AND SUBTYPES

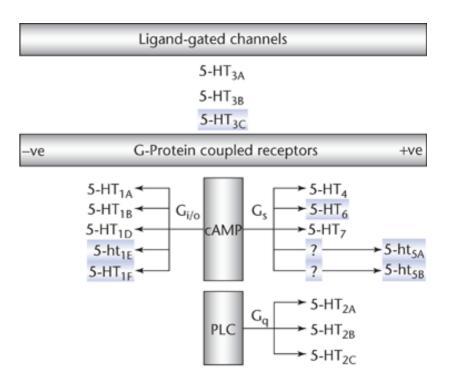
Receptors within a family generally occur in several subtypes with similar structure but significant differences in their

- 1) aminoacidic sequences
- 2) pharmacological properties
- 3) tissue distribution
- 4) regulatory mechanisms



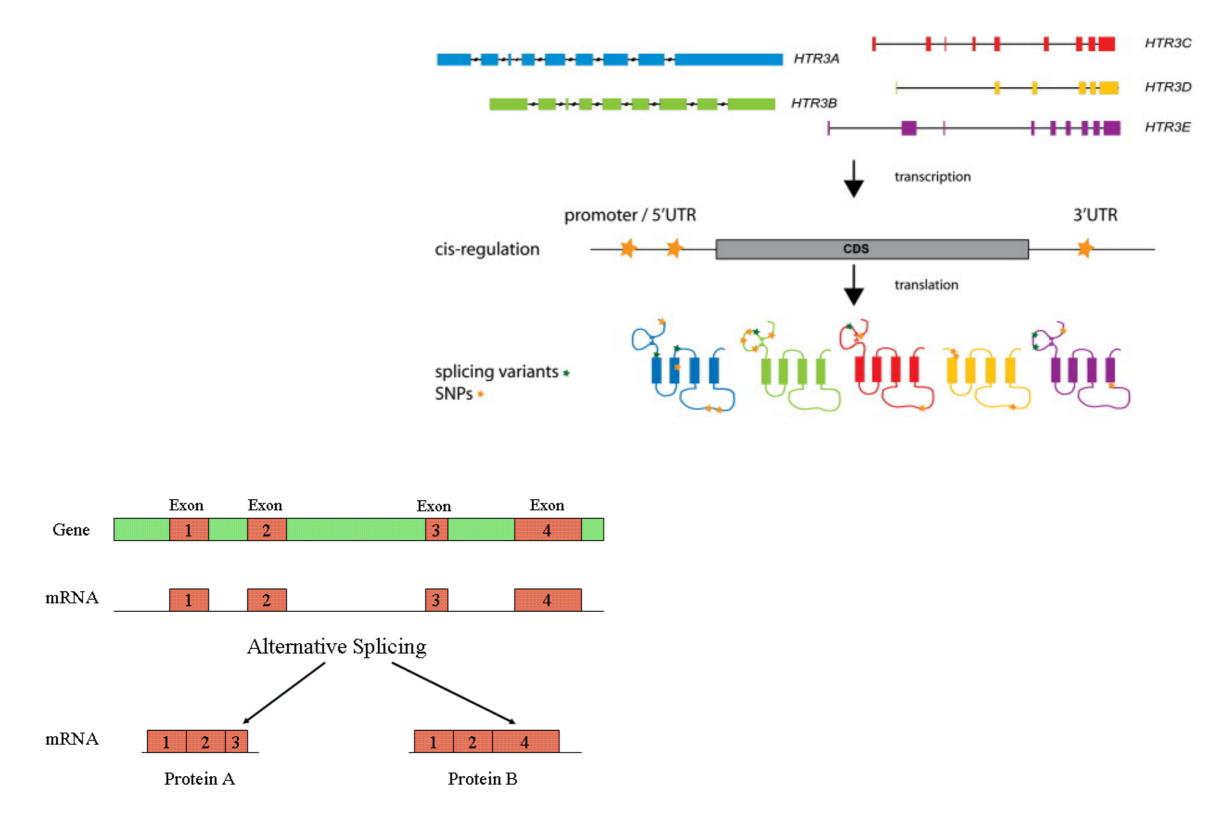


Serotonin receptors



RECEPTOR HETEROGENITY AND SUBTYPES

Sequence variations arise at the genomic level (different genes), from alternative mRNA splicing or mRNA editing



CLASSIFICATION OF RECEPTORS (sensu stricto)

1. Ligand-gated channels

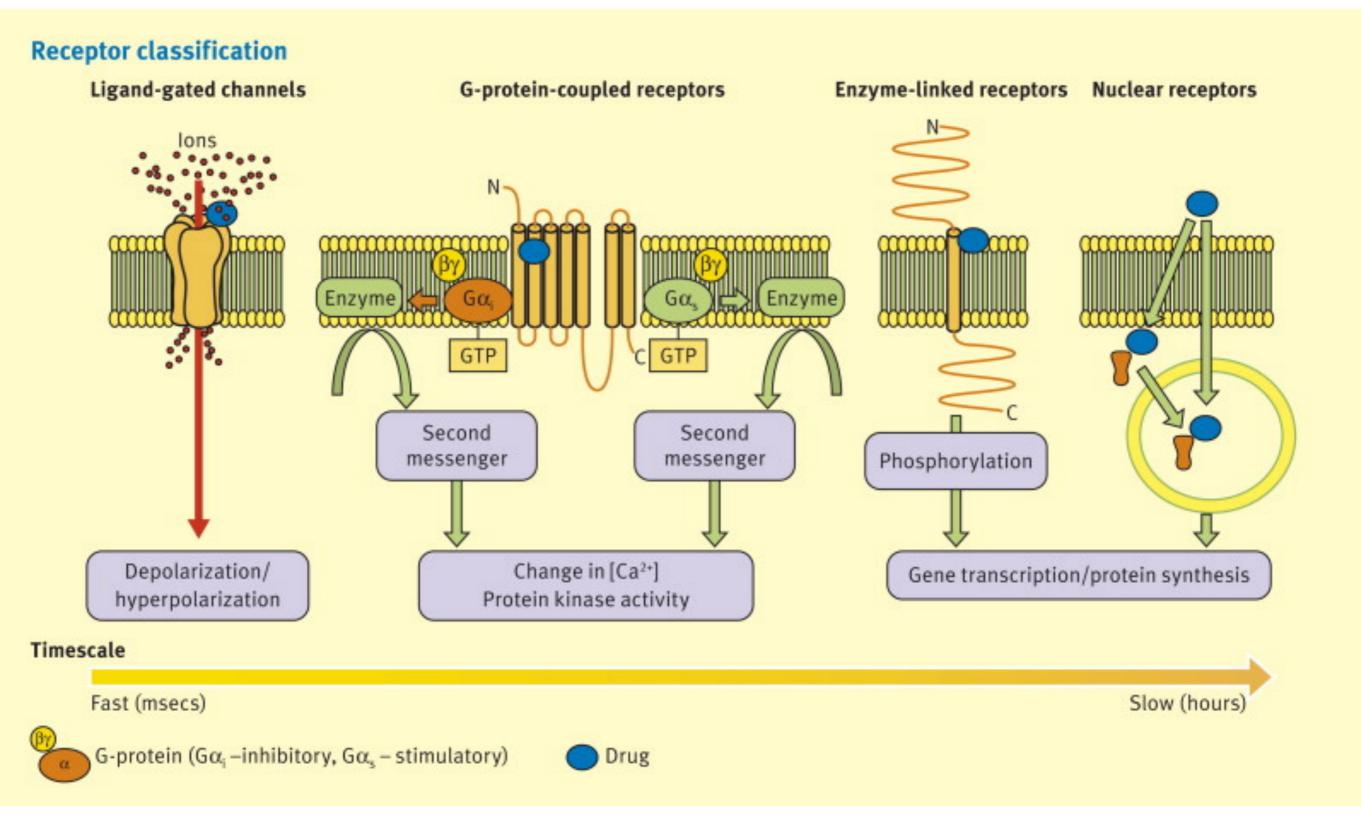
2. G-protein coupled receptors

3. Enzyme-linked receptors

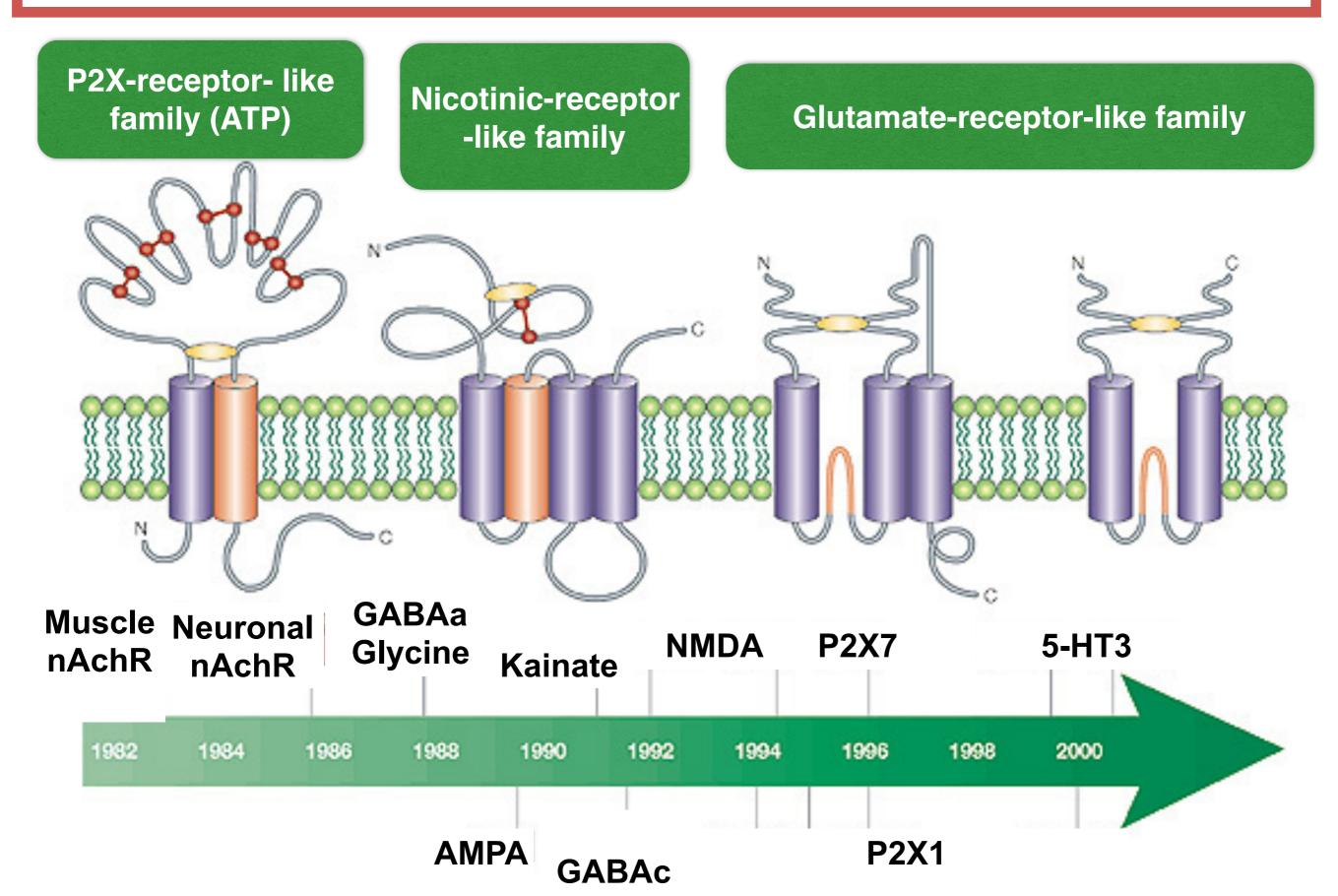
4. Nuclear receptors

This classification is primarily based on receptor structure

CLASSIFICATION OF RECEPTORS

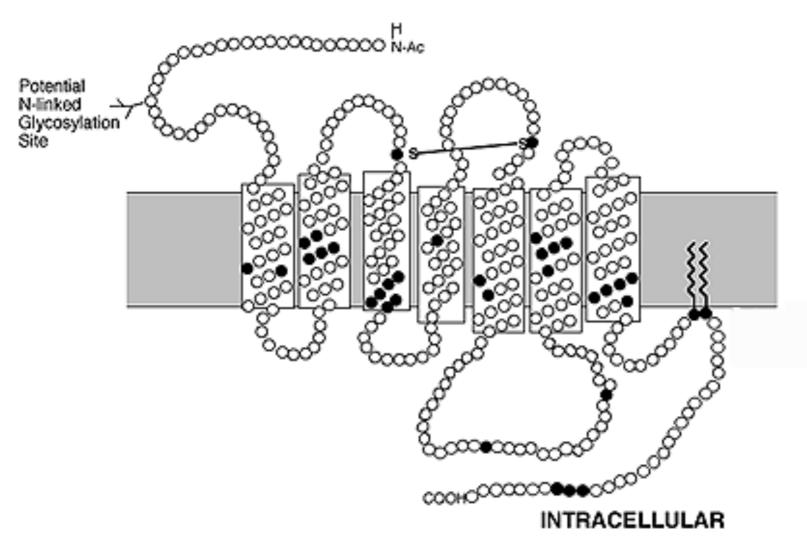


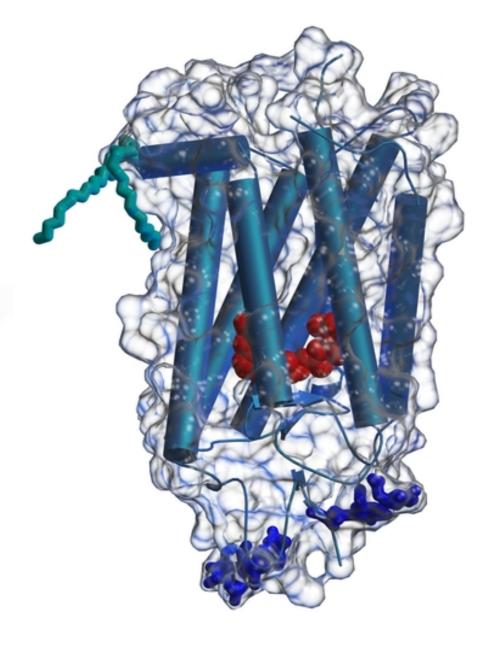
1. LIGAND-GATED CHANNELS (IONOTROPIC RECEPTORS or RECEPTOR OPERATED CHANNELS)



2. G PROTEIN COUPLED RECEPTORS (METABOTROPIC RECEPTORS or 7 TM RECEPTORS)

EXTRACELLULAR





β -adrenergic receptor

Target class

Number of proteins

and see here and been

9
2
9
2
1
2
7



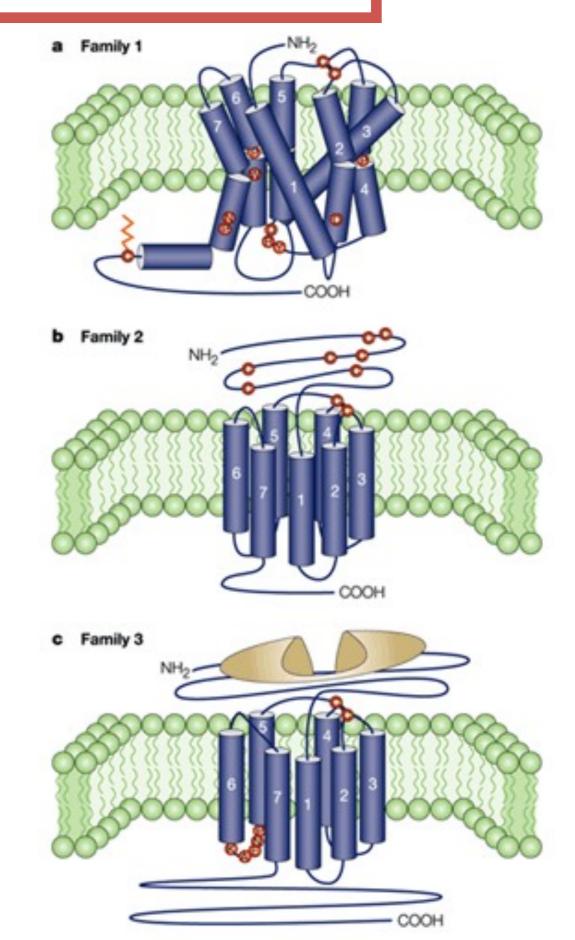
Most common therapeutic actions	Number of drugs
Antihypertensive, anti-allergic	563
Antihypertensive, anti-allergic	357
Hypnotic and sedative, anticonvulsant	84
Antineoplastic, vasodilator	22
Immunomodulatory, antineoplastic	28
Immunomodulatory, platelet aggregation	11
Antineoplastic, hormone replacement	76

2. G PROTEIN COUPLED RECEPTORS

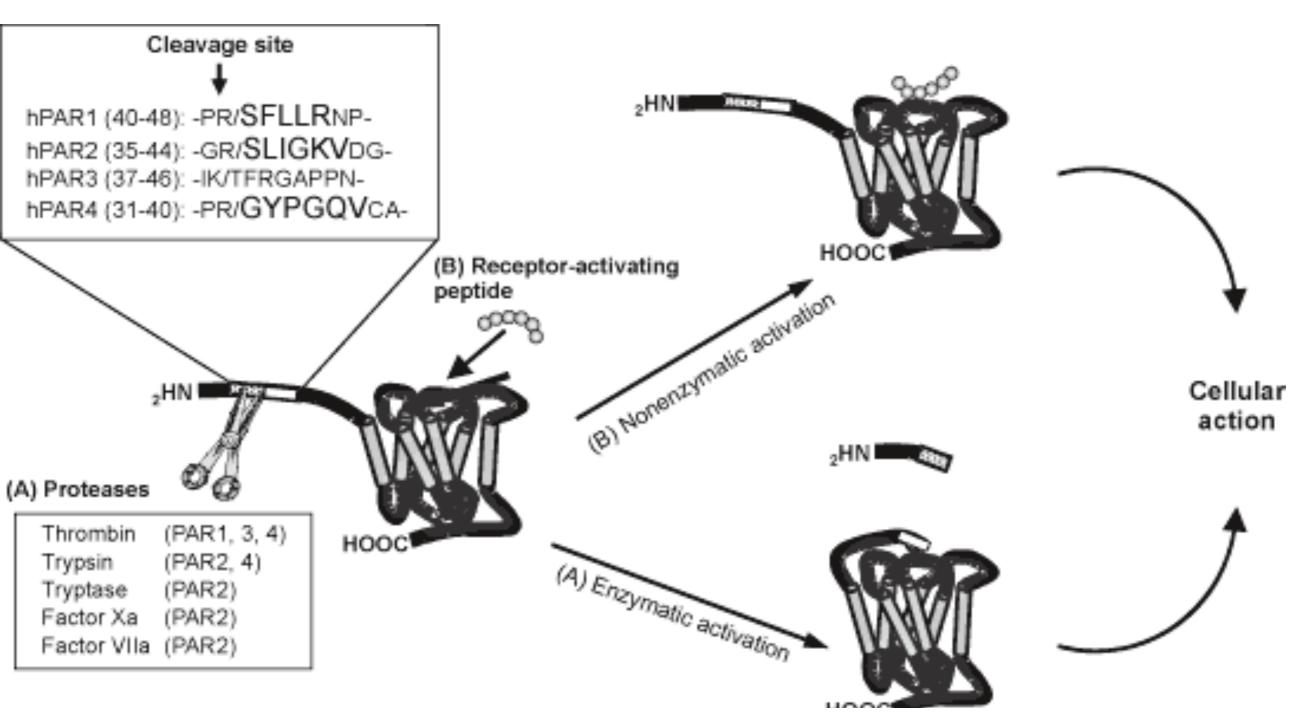
Family 1 (or A or rhodopsin-like family): odorants, small molecules such as catecholamines, some peptides and glycoprotein hormones receptors

Family 2: Secretin/Glucagon receptors

Family 3: metabotropic glutamate, the Ca2+-sensing and gamma-aminobutyric acid (GABA)B receptors



PROTEASE ACTIVATED RECEPTORS - PAR



PAR2 receptors expressed at the stomach level stimulate mucus secretion reduce acidic gastric secretion increase mucosal perfusion modulate smooth muscle activity

General regions of interaction of GPCR with other cellular proteins

different G proteins (Gi, Gs)

PDZ-, SH2- and SH3-DOMAIN proteins

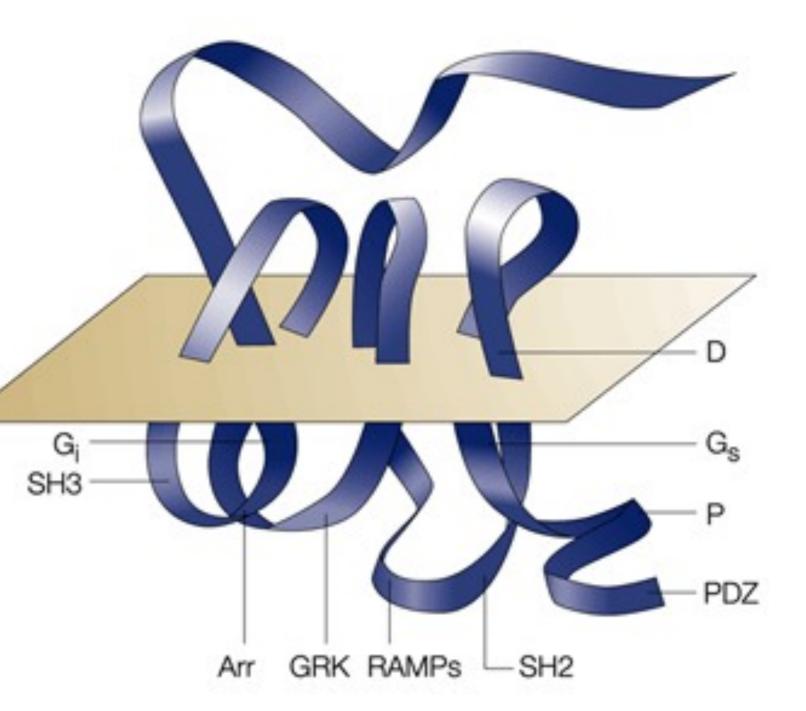
receptor-activity-modifying proteins (RAMPs)

sites for dimerization with other GPCRs (D)

arrestin (Arr)

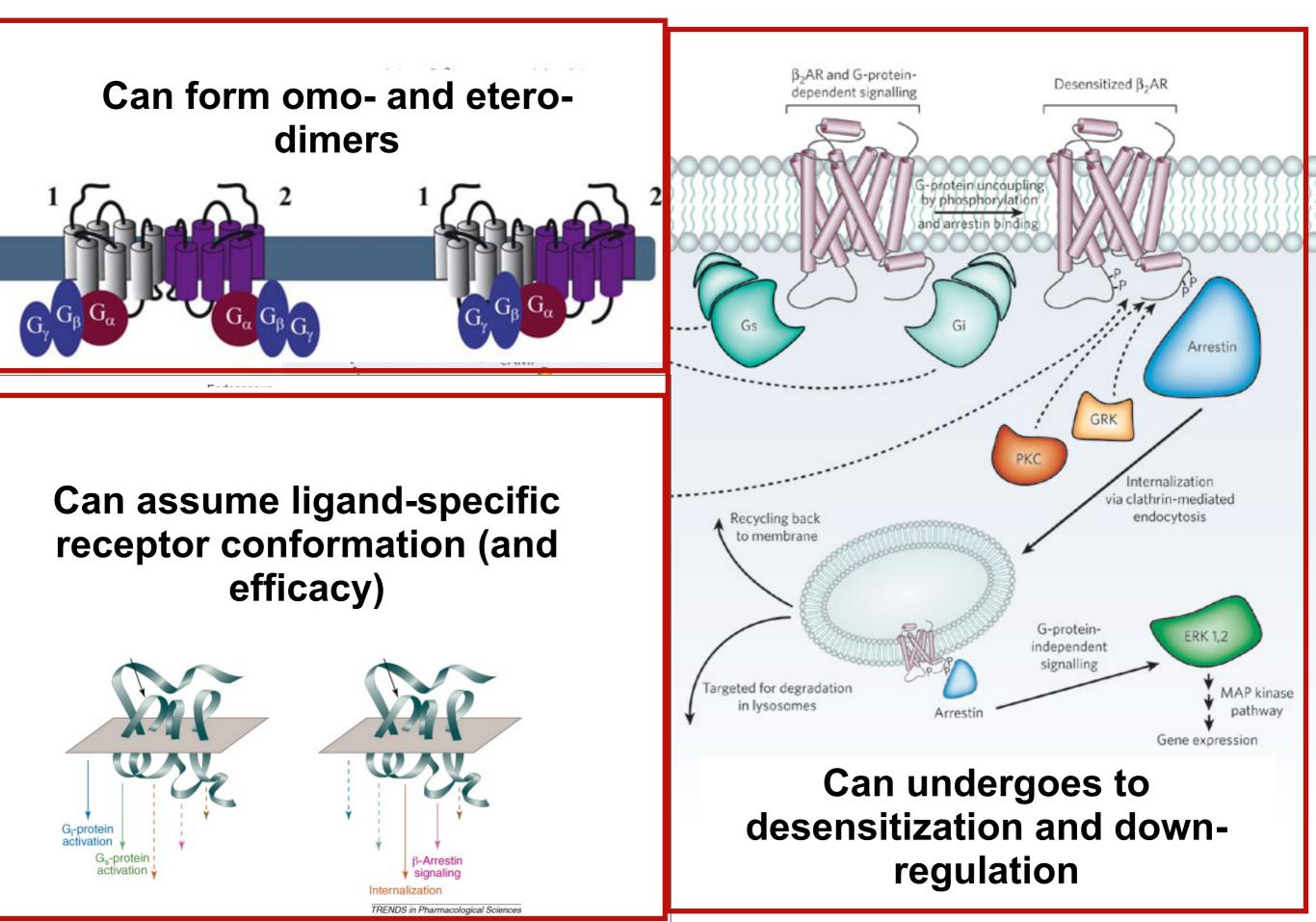
G-protein-coupled receptor kinase (GRK)

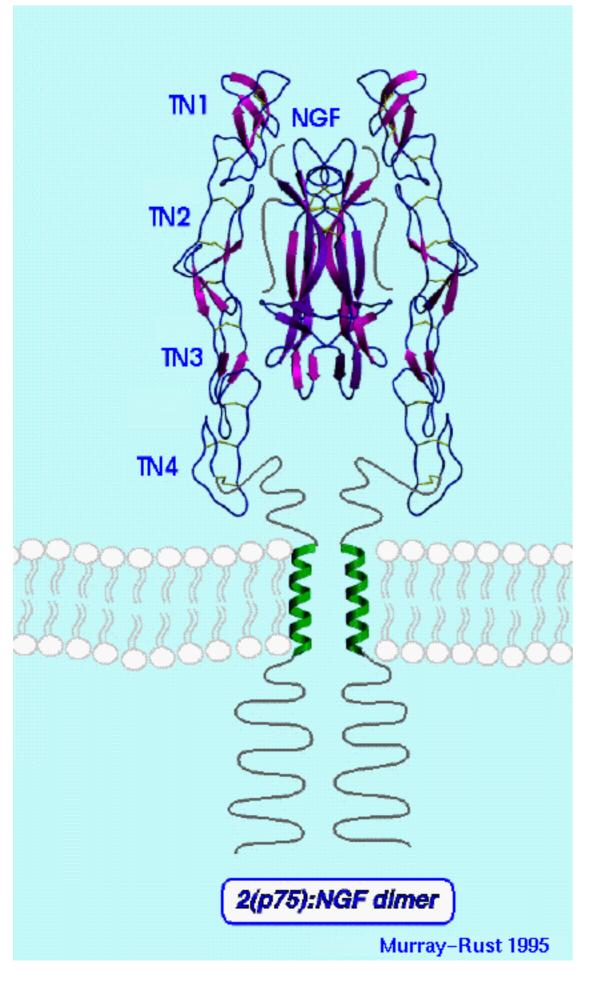
phosphorylation sites for uncoupling and internalization (P)



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G PROTEIN-COUPLED RECEPTORS - GPCR



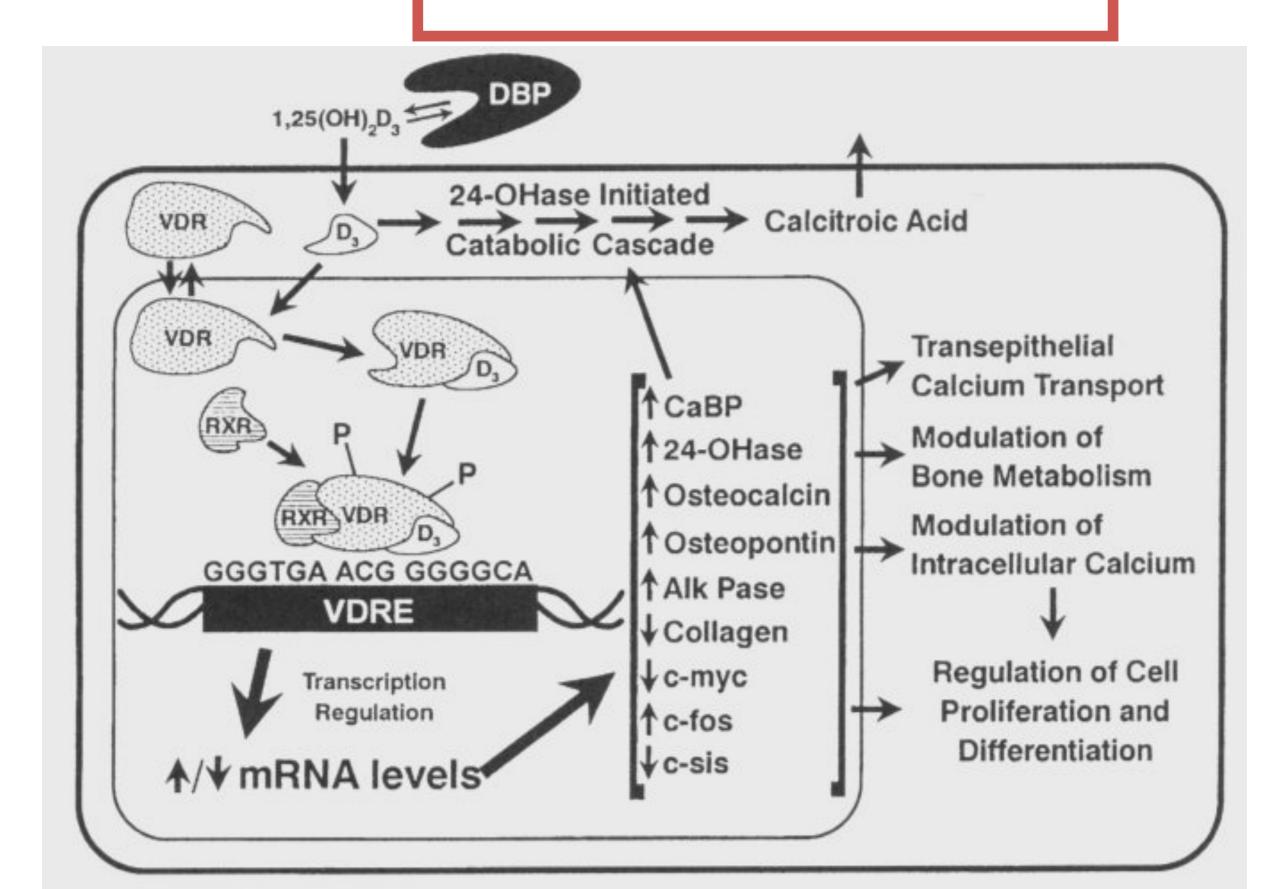


3. ENZYME-LINKED RECEPTORS

Insulin receptor Growth factors receptors (NGF, PDGF): Tyrosine Kinase activity

Atrial Natriuretic Peptide (ANP) receptors: Guanylate Cyclase activity

4. NUCLEAR RECEPTORS



Cell compartmentalizationwith a glance outside the walls

