open.michigan

Author(s): Aken Desai, Michael Mathis, 2008

License: Unless otherwise noted, this material is made available under the terms of the Creative Commons Attribution – Share Alike 3.0

License: http://creativecommons.org/licenses/by-sa/3.0/

We have reviewed this material in accordance with U.S. Copyright Law and have tried to maximize your ability to use, share, and adapt it.

Copyright holders of content included in this material should contact **open.michigan@umich.edu** with any questions, corrections, or clarification regarding the use of content.

For more information about **how to cite** these materials visit http://open.umich.edu/education/about/terms-of-use.

Student works are presented **as is** and may be an interpretation of faculty members' lectures or assignments. These student works are **not a product of faculty members**. Faculty do not guarantee the accuracy of student work nor endorse them in any way.

Any **medical information** in this material is intended to inform and educate and is **not a tool for self-diagnosis** or a replacement for medical evaluation, advice, diagnosis or treatment by a healthcare professional. Please speak to your physician if you have questions about your medical condition.

Viewer discretion is advised: Some medical content is graphic and may not be suitable for all viewers.





Drug Absorption and Distribution

Friday, January 18, 2008 10:00 AM

- 1. Define absorption and distribution.
 - a. Absorption: passage of drugs from site of administration to the blood
 - b. Distribution: delivery of drugs to tissue
- 2. Describe the mechanisms that are responsible for transport of drugs across membranes.
 - a. Diffusion: concentration gradient driven; unionized form
 - b. Filtration and bulk flow through pores
 - c. Endocytosis
 - d. Ion-pair
 - e. Faciliated diffusion or active transport
 - i. Carrier mediated
 - ii. Saturable
 - iii. Selective
 - iv. Competition
- 3. Define lipid-water partition coefficient.
 - a. Amount of drug in organic phase/amount of drug in aqueous phase
 - b. A high coefficient means high lipid solubility
 - c. No ideal solvent to mimic cell membrane
- 4. What functional groups alter the lipophilicity of drugs?
 - a. Non-polar groups: alkyls, aromatics, hexanes, ethers, ketones, esters, amides, halogens
 - b. Polar: O, nitrate, carboxylic acids, hydroxyls, sulfates, ammonium
- 5. Calculate the ionization of drugs with the use of the Henderson-Hasselbalch equation.
 - a. Acid: pH-pKa = log ([ionized]/[non-ionized])
 - b. Base: pH-pKa = log ([non-ionized]/[ionized])
- 6. Describe how the ionization and lipophilicity of drugs affect the absorption and distribution of drugs.
 - a. Non-ionization increases absorption and distribution (easier to cross blood-brain barrier)
 - b. Increased lipophlicity also increases absorption/distribution
- 7. Define "ion trapping"
 - a. Drugs get stuck in compartments due to a high proportion being ionized due to pH changes
 - b. Example is diazepem; pKa = 3.3 so in stomach is almost completely ionized and none enters plasma; acetaminophen is a weak acid so it is almost completely unionized in the stomach and crosses into plasma
- 8. Describe how drug-drug interactions occur through drug transporters.
 - a. Because drug transporters often handle multiple substrates there is competition for the transporter
 - b. St. John's Wort for example induces the P-glycoprotein transporters to send the drug back out into the intestinal lumen, so St. John's Wort results in decreased drug absorption; grapefruit juice inhibits the transporter so it increases absorption
- 9. Describe how binding to plasma proteins can affect distribution of a drug.
 - a. Alters free drug concentration; binds to drug and decreases amount available to tissues
 - b. Some drugs are almost completely bound at their therapeutic concentration
 - c. Must account for amount bound; so some drugs plasma concentrations rapidly jump once plasma protein is all used up