- Cholinergic agonists
- Classify & describe cholinergic agonists including actions, therapeutic uses & adverse reactions.
- Describe myaesthenia gravis & its management
- Explain Organophosphorous poisoning & treatment
- Cholinergic agonist- Classification

## **Direct Acting Cholinergic Drug**

- Acetylcholine
- Bethanechol.
- Pilocarpine.
- Methacholine

# Indirect Acting Cholinergic Drugs (Cholinesterase ors)

• Reversible: water soluble-Neostigmine, Edrophonium

## Pyridostigmine,

Lipid soluble- Physostigmine,

Donepezil, Tacrine,

Gallantamine

Irreversible.- Organophosphorous
 Compounds, Echothiophate,
 malathion, parathion, tabun

## Reactivation of acetylcholinesterase-

Pralidoxime

## • Actions of acetylcholine

## **Muscurinic actions:**

*Heart:* it decreases the heart rate and cardiac output.

**Blood vessels:** it causes vasodilatation and decreases BP.

*GIT*: It increases the salivary & intestinal secretion.

Increases intestinal motility and relaxes sphincters

**Respiratory system:** bronchoconstriction & Increased secretions.

Eyes: it causes:

- Miosis.
- Accommodation of near vision.

• Decrease the IOP due to increase in the out flow of aqueous humor.

#### **Genitourinary tract:** it causes:

- Urination.
- Erection of genital in male.
- *CNS*: it causes excitatory effect and effect on the learning, short term memory and arousal.

#### • The nicotinic actions:

**NMJ:** contraction of skeletal muscles.

- Stimulates both sympathetic and parasympathetic ganglia.
- Stimulates the release of adrenaline from the adrenal medulla and chromoffin.
- **In CNS**: stimulates the release of ADH at the hypothalamus.

## Therapeutic uses:

• Uses as eye drop to produce rapid and complete miosis after cataract surgery.

#### • BETHANECHOL

- Not hydrolyzed by acetylcholinesterase but it is hydrolyzed by other esterase.
- It has no nicotinic actions.
- It is longer duration of action than acetylcholine.

## • Therapeutic uses:

- Post operative non-abstractive urinary retention.
- Post-operative ileus.

#### • PILOCARPINE

It is natural alkaloid, not hydrolyzed by acetylcholinesterase.

It has marked muscarinic actions.

#### Actions:

- Eye: loss of accommodation, miosis and lowering the intraocular pressure (IOP).
- Other actions: it stimulates the secretary glands and causes sweating, salivation and lacrimation.

## Therapeutic uses of pilocarpine:

- In the treatment of GLAUCOMA.
- To reverse cycloplagic and mydriatic effect of atropine.

## Side effects:

- CNS disturbance because it is crossing the BBB.
- Sweating and salivation.

#### • PHYSOSTIGMINE:

- It is an alkaloid.
- Well absorbed and penetrate the BBB.

## Therapeutic uses:

- Glaucoma.
- Atropine poisoning
- Alzheimer s disease.

## Side effects:

- CNS: convulsions.
- Heart: bradycardia.
- Paralysis of skeletal muscles which it is rare seen in the therapeutic dose.
- Lid muscles twitching.
  - It is synthetic anticholinergic drug.
  - It is poorly absorbed.
  - It is polar compound and so that not cross to the CNS.

### Therapeutic uses:

- As antidote for tubocurarine poisoning
- Management of Mysthenia Gravis:

it is an a autoimmune disorder due to antibodies against Ach receptor,

- . Organophosphorous compounds
- They are irreversible anticholinesterase:
- They are insecticides and nerve gases.

- They include: parathion, malthion, and sarin.
- They are highly lipid soluble compounds. So that they cross the BBB.
- Management of myaesthenia gravis
- Management of myaesthenia gravis(contd.)
- <u>Toxicity / poisoning of</u> <u>organophosphorous compounds:</u>
- Mechanism of toxicity:
- They inactivate enzyme ACHE irreversibly and increase the level of acetylcholine.

#### Actions:

- Acute toxicity: paralysis of respiratory muscle and excessive bronchial secretion.
- Chronic toxicity: neuropathy and demyelination of axons.

## • Treatment of organophosphate poisoning

- Maintenance of vital signs: aspiration of bronchial secretions, endotracheal intubations and artificial respiration.
- **Decontamination:** to prevent further absorption, removal of the contaminated clothes and washing the skin, gastric lavage if need.
- atropine:
- Cholinesterase reactivator Examples: pralidoxime (PAM).
- Diazepam.

## References

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- Basic & clinical pharmacology, Bertram G katzung-12<sup>th</sup> edition
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- Internet resource