Drugs Acting On Autonomic Nervous System (ANS)

0



What are the differences between the somatic and the autonomic nervous system?

Somatic N.S Control skeletal muscles Voluntary Somatic nerve is one fiber

Autonomic N.S Control internal viscera Involuntary autonomic nerve is two fibers (*Preganglionic & Postganglionic*)



Division of Autonomic Nervous System

- Sympathetic nervous system.
- Parasympathetic nervous system.
- Enteric nervous system.

Parasympathetic Nervous System



Neurotransmitters

Neurotransmitter in parasympathetic nervous system or cholinergic system is acetylcholine and nerves are called cholinergic nerves



Cholinergic transmission

The release of neurotransmitter Ach from cholinergic nerves include the following steps:

- 1) Synthesis of Ach
- 2) Storage of Ach in storage vesicles
- 3) Release of Ach
- 4) Binding of Ach to postsynaptic receptors to give actions

Cholinergic transmission



Cholinergic transmission



Cholinergic or parasympathetic receptors

Nicotinic receptors (N) = central receptors.

Muscarinic receptors (M)= peripheral receptors





Neurotransmitters

- Sympathetic: noradrenaline (norepinephrine)
- Parasympathetic : acetylcholine



Rest-and-digest: Parasympathetic activity dominates. Fight-or-flight: Sympathetic activity dominates.

Cholinergic receptors

Muscarinic: M₁ - M₅
 Activated by <u>muscarine</u>
 Nicotinic: N_M, N_N
 Activated by <u>nicotine</u>



 Acetylcholine – major neurotransmitter of PNS

Characteristics	M _I (neuronal)	M ₂ (cardiac)	M ₃ (glandular)
<section-header></section-header>			

Characteristics	M _I	M ₂	M ₃
	(neuronal)	(cardiac)	(glandular)
<section-header></section-header>	• Ganglia – impulse transmission		

Characteristics	M _I	M ₂	M ₃
	(neuronal)	(cardiac)	(glandular)
<section-header></section-header>	• Ganglia – impulse transmission	 SA node - Decreased rate of impulse generation AV node – decreased conduction velocity Atrium, ventricle- decreased contractility 	

Characteristics	M _I	M₂	M₃
	(neuronal)	(cardiac)	(glandular)
<section-header></section-header>	• Ganglia – impulse transmission	 SA node - Decreased rate of impulse generation AV node – decreased conduction velocity Atrium, ventricle- decreased contractility 	 Exocrine glands (salivary, sweat) - secretion Visceral smooth Muscle (bronchus, bladder, GIT) – contraction

Characteristics	N _M (muscle type)	N _N (neuronal type)
Location & Function	Skeletal neuromuscular junction (NMJ) – contraction	• Autonomic ganglia– impulse transmission

Actions of ACh on eye

<u>Muscarinic:</u>

- Eye:
- -Circular muscle of iris (M_3) contractionmiosis
- -Ciliary muscle (M₃) contraction- eye's focus is accomodated for near vision – <u>spasm of accomodation</u>
- -Better drainage of aqueous humor reduced intraocular pressure
- -Lacrimal glands (M_3) lacrimation

Acetylcholine

- No therapeutic use because
- i) Ultra short action: rapidly hydrolyzed by cholinesterases
- ii) Widespread and nonselective activity: act on all receptors

 Drugs which mimic the actions of Ach are called as cholinergic drugs or parasympathomimetic drugs or cholinomimetic or cholinergic agonists

A. Pharmacologically: by their **spectrum of action**.

- 1. Muscarinic agonists: Bethanechol, methacholine, pilocarpine.
- 2. Nicotinic agonists: nicotine

Cholinergic Agonists



B. mode of action

I. <u>Direct-acting</u>: bind directly to and activate muscarinic or nicotinic receptors,

Also subdivided chemically:

- I. <u>Esters of choline</u> (including acetylcholine, bethanechol, methacholine and carbachol)
- 2. <u>Alkaloids</u> (such as muscarine, pilocarpine, nicotine and cevimeline).

2. Indirect-acting:

by inhibiting the hydrolysis of endogenous acetylcholine. also subdivided to

- reversible
- irreversible



a. Indirect acting (reversible): eg., neostigmine, physostigmine.

b. Indirect acting (irreversible):

e.g., echothiophate, isoflurophate

Indirect and direct

Some quaternary cholinesterase inhibitors also have a modest **DIRECT** action as well,

eg, **neostigmine**, which activates neuromuscular nicotinic cholinoceptors directly in addition to blocking cholinesterase.



• Inhibit acetylcholinesterase (AChE) enzyme



• Accumulation of Ach \rightarrow Action

Adverse effects of cholinergic

drugs: The adverse effects result from

excessive generalized cholinergic stimulation **DUMBLES**.

- Diarrhea and decreased BP,
- Urination,
- **M**iosis,
- Bronchoconstriction,
- Lacrimation
- Excitation of skeletal muscle,
- Salivation and Sweating

Miosis

Nausea







Pilocarpine (an alkaloid)

- The pilocarpine is a tertiary amine, and is stable not hydrolyzed by AchE.
- It is far less potent compared with Ach and its derivatives.
- Pilocarpine exhibits muscarinic activity and is used primarily in ophthalmology and dentistry.

Pilocarpine actions:

 topically produces a rapid miosis and contraction of the ciliary muscle; a spasm of accommodation; the vision is fixed at some particular distance, making it impossible to focus.



Normal: Ciliary Muscle Relaxed Suspensory Ligaments Under Tension Lens is Flattened Focus on Distant Objects Accommodation: Ciliary Muscle Contracts Reduced Tension on Suspensory Ligaments Lens becomes Round Focus on Near Objects

Pilocarpine actions:

- Pilocarpine is one of the most potent stimulators of secretions such as sweat, tears, and saliva,
- but its lack of selectivity (adverse effects) limited its use:

- I. can enter the brain and causes CNS disturbances.
- 2. It stimulates profuse sweating and salivation.

Sjogren syndrome

Sjogren syndrome, immunologic disorder with destruction of the exocrine glands leading to the mucosal dryness (dry mouth and lack of tears)

• is usually treated with cevimeline, a cholinergic drug that also has the drawback of being nonspecific.

• Recent studies have shown that mouth sprays of Pilocarpine are beneficial in promoting salivation in patients with Xerostomia (dryness of the mouth).



is extremely effective in opening the trabecular meshwork around Schlemm canal result in an increased drainage of aqueous humor