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# Introduction

This issue is the manual on pharmacology for students` practical training.

All topics in the manual have the similar structure: the name of the topic, the topicality of the subject, the theoretical questions, home tasks, class tasks and tests.

Carrying out the tasks, students learn:

- the nomenclature and classification of drugs;
- the interchangeability of drugs;
- how to find the logic connection between the mechanism of action,

pharmacodynamics and indications; between the side effects, contraindications and principles of rational administration for providing the safe and effective pharmacotherapy.

This manual will assist for mastering the unit and development of pharmacological logic.

# Module II. Drugs affecting the function of executive bodies, the system of blood, methabolism and immunity. Chemotherapeutic drugs. Submodule 4 Drugs affecting the function of executive bodies.

### **CARDIOTONIC MEDICINES**

### **Topicality of the subject**

Normal cardiac activity is a base of normal functions of the whole organism. The disorders of heart activity which are connected with heart failure may be effectively corrected by cardiotonic agents, preferably cardiac glycosides. These drugs are the basic agents for treatment congestive heart failure.

### **Theoretical questions**

1. The classification and nomenclature of cardiotonic agents.

2. The classification and nomenclature of cardiac glycosides depending on their solubility and origin.

3. The mechanism of action of cardiotonic drugs, particularly cardiac glycosides.

4. The pharmacodynamics of cardiotonic agents. The meaning of cardiotonic effect. Cardiac and extracardiac effects of cardiac glycosides.

5. The pharmacokinetics of cardiac glycosides.

6. The indications of cardiotonic drugs. The indications of cardiac glycosides depending on their pharmacokinetics.

7. The side effects and contraindications of cardiotonic agents.

8. The principles of rational administration (particularly dosing) of cardiac glycosides. The symptoms and first aid in case of poisoning with cardiac glycosides.

#### Home tasks

#### Task 1.

Write the following prescriptions:

1. Digitoxin (Digitoxinum) – tabl. 0.0001.

- 2. Celanid (Celanidum) sol. f/i 0.02% 1 ml, amp.
- 3. Strophantin K (Strophanthinum K) sol. f/i 0.05% 1 ml, amp.
- 4. Adonisid (Adonisidum) liquid 15 ml, vial.
- 5. Amrinone (Amrinonum) sol. f/i 0.5% 20 ml, amp.

# Task 2.

Fill in the table concerning the comparative description of Strophantin K and Digitoxin taking into account peculiarities of their pharmacokinetics.

Drug	Route of administration,	Onset of	Duration	Indications
	medicinal form	action	of action	
Strophantin K				
Digitoxin				

What does pharmacokinetics of cardiac glycosides depend on? Give the explanation of cardiotonic effect.

# **Class tasks**

# Task 1.

Classify the cardiotonic agents. Match letters (names of pharmacological groups) with numbers (names of drugs).

# Pharmacological groups

- A. Glycosides from Foxglove plant
  B. Glycosides from Erysimum
  C. Nonglycoside cardiotonics
  E. Glycosides from Lily-of-the-valley
  F. Glycosides from Strophanthus
  G. Glycosides from Adonis
- D. Glycosides from Scilla maritima

# Drugs

1.	Digitoxin*	6.	Adonisid*	11.	Celanid
2.	Strophantin K*	7.	Cardiovalen	12.	Milrinone
3.	Lantozide	8.	Cordigit	13.	Meproscillarin

4. Clift

9. Amrinone\*

14. Strophantin G

5. Corglicon 10. Digoxin

Underline the new drugs. For agents marked with asterisk point out the dosage.

#### Task 2.

Learning the mechanism of action of cardiac glycosides write the elements of this mechanism in a correct order. For this purpose indicate the numbers of parts of mechanism in the correct sequence.

1. Increase of  $Ca^{2+}$  ions content inside the myocardial cells.

2. Inhibition of Na<sup>+</sup>-K<sup>+</sup>-ATPase in myocardium.

3. Myocardial muscles fibers contraction.

4. Increase of  $Na^+$  ions content inside the myocardial cells.

5. Binding of  $Ca^{2+}$  ions to the specific protein (troponine).

6. Actomyosine complex formation.

7. Promotion the conditions for interaction of the contractive proteins (actine and myosine).

What is the difference between the mechanism of action of cardiac glycosides and nonglycoside cardiotonics?

### Task 3.

Give the explanation of pharmacological effects that are included into the term "cardiotonic" effect. Match the meanings with the names of effects.

### Pharmacological effects

A.Positive inotropic effect.

B. Negative chronotropic effect.

C. Positive batmotropic effects.

D.Negative dromotropic effect.

# Meanings

1. Increase of myocardial excitability.

2. Decrease of cardiac conductivity.

3. Strengthening of myocardial contractility, increase of cardiac output, shortening of systole.

4. Prolonging of diastole, bradycardia.

# Task 4.

Learning the pharmacodynamics of cardiac glycosides choose the pharmacological effects that are included into the pharmacodynamics of these drugs.

# Pharmacological effects

1.	Anticholinergic	6.	Normalization of metabolic processes in
			myocardium
2.	Cardiotonic	7.	Improvement of systemic blood circulation
3.	Cardiostimulative	8.	Antipsychotic

- 4. Diuretic 9. Sedative
- 5. Hypotensive 10. Anticonvulsive

# Task 5.

Preparing the information for cardiologists about the pharmacokinetics of cardiac glycosides fill in the table.

Groups of cardiac	Drugs		Douliaritio	of phorma	alzinatio	0
Groups of Cardiac	Drugs	Peculiarities of pharmacokinetics				
glycosides		Absorp-	Ability to	Rapidity	Accu-	Solubi-
(plants)		tion	bind to	of elimi-	mula-	lity
		from	plasma	nation	tion	(water/
		GIT	proteins			lipids)
1.Digitalis						
purpurea						
2.Digitalis lanata,						
ferruginea						
3.Strophanthus						
4.Adonis						
5.Lily-of-the-						
valley						
6.Erysimum						
7.Scilla maritima						

# Task 6.

Tell the patient about side effects and symptoms of poisoning with cardiac glycosides. Point out these side effects and symptoms of poisoning.

- 1. Dyspepsia 6. Disord
- 2. Exacerbation of heart failure
- 3. Extrasystolia
- 4. Atrioventricular blockade
- 5. Syndrome of "post-action"

- 6. Disorders of eyesight
- 7. Hypopotassemia (Hypokalemia)
- 8. Extrapyramidal disorders
- 9. CNS disorders
- 10. Accumulation

# Task 7.

Taking into account the pharmacokinetics of cardiac glycosides make the conclusion about their indications. Fill in the table.

Group of cardiac	Drugs	Indications	Route of	Medicinal
glycosides depending			administration	form
on solubility				
Lipophilic agents				
Lipo-and-hydrophilic				
agents				
Hydrophilic agents				

# Task 8.

Discuss with doctor the questions about combining cardiac glycosides with other drugs. Are following combinations rational or irrational? Why?

Adonizid+Verapamil

- 1. Digitoxin+Potassium chloride 4. Digitoxin+Dichlothiazide
- 2. Strophantinum K+Calcium chloride 5.
- 3. Isolanid+Panangin6. Corglicon+Verospirone

# Task 9.

Answer the doctor's questions:

1. Why do cardiac glycosides cause bradycardia?

2. What is the difference between the cardiotonic and cardiostimulative effect? Give the examples of cardiostimulators.

3. Why do cardiac glycosides increase the diuresis?

4. What is the first aid in case of intoxication with cardiac glycosides?

5. How are cardiac glycosides dosed for treatment chronic heart failure?

6. Name the nonglycoside cardiotonics, peculiarities of their pharmacodynamics and indications.

### Task 10.

Offer the substitution for Digoxin, Celanid, Amrinone:

A – among the other members of pharmacological group;

B – among the trade marks.

# Task 11.

Correct the following prescriptions: 1.Rp.: Strophanthini K 1% - 2ml D.S.: # 2. Rp.: Sol. Digitoxini 0,5% - 1ml D.t.d. in amp. N10. S.: 1 ml by i/v injection # 3. Rp.: Digoxini 0,1 N10

D.S.:

### Tests

Describe the drugs using following schemes:

- 1. Pharmacological group  $\rightarrow$  Interchangeability  $\rightarrow$  Mechanism of action.
- 2. Pharmacological effects  $\rightarrow$  Indications  $\rightarrow$  Dosage.
- 3. Side effects  $\rightarrow$  Contraindications  $\rightarrow$  Rules of rational administration.

# Drugs

- 1. Digitoxin5. Strophantin K\*
- 2. Digoxin\* 6. Corglicon
- 3. Adonizid\* 7. Cardiovalen
- 4. Amrinone

For agents marked with asterisk point out the dosage.

### **ANTIARRHYTHMIC DRUGS**

#### **Topicality of the subject**

Antiarrhythmic drugs are agents that normalize the disorders of heart rate; prevent or eliminate the arrhythmias. The normal cardiac rhythm is very important for normal heart activity and for normal activity of the whole organism. That is why it is useful to know the pharmacological properties of antiarrhythmic drugs that include the representatives of different pharmacological groups.

#### **Theoretical questions**

1. Classification and nomenclature of antiarrhythmic drugs.

2. Mechanism of action of antiarrhythmic drugs.

3.Pharmacodynamics, indications, side effects, contraindications of antiarrhythmic drugs.

4. Comparative description of antiarrhythmic drugs.

#### Home tasks

#### Task 1.

Write the following prescriptions:

1.Procainamide (Procainamidum) – tabl. 0.25.

2.Amiodaron (Amiodaronum) – tabl. 0.02.

3.Quinidine (Chinidinum) – tabl. 0.2.

4. Acebutolol (Acebutololum) – tabl. 0.2.

5. Atropine sulfate (Atropini sulfas) – sol. f/i 0.1% - 1 ml, amp.

6.Verapamil (Verapamilum) – tabl. 0.04.

#### Task 2.

Preparing the information for doctors about the antiarrhythmic drugs name the groups of drugs which may be used for treatment tachyarrhythmias (A) and bradyarrhythmias (B). Give the examples of tachy- and bradyarrhythmias.

### **Class tasks**

### Task 1.

Classify the antiarrhythmic drugs and choose for each subgroup its mechanism of action. Match the letters with numbers. For agents marked with asterisk point out the dosage. Underline the new drugs.

# Drugs

1.Procainamide*	8.Quinidine*	15.Metoprolol*
2.Isoprenalin	9.Atenolol	16.Disopiramide
3.Dobutamine*	10.Amiodaron*	17.Propaphenone
4.Verapamil	11.Praymalin	18.Moracisin
5.Sotalol	12.Acebutolol	19.Phenitoin
6.Propranolol*	13.Lidocaine*	20.Aethacisin
7.Atropine sulfate*	14.Nadolol	21.Potassium and
		Magnesium asparaginate*

### Pharmacological groups

A.Membrane stabilizers	$F.\beta_1+\beta_2$ -adrenomimetics
B.M-cholinoblockers	G.Potassium-containing agents
$C.\beta_1$ -adrenoblockers	H.Calcium canals blockers
$D.\beta_1+\beta_2$ -adrenoblockers	I.Agents prolonging repolarization
$E.\beta_1$ -adrenomimetics	

# Mechanism of action

- a. Prolonging of repolarization due to complex influence on cardiac activity.
- b. Block of  $Ca^{2+}$  ions flow inside the cells through the calcium canals.
- c. Block of  $\beta_1$ -adrenoceptors.
- d. Stimulation of  $\beta_1 + \beta_2$ -adrenoceptors.
- e. Block of  $\beta_1 + \beta_2$ -adrenoceptors.
- f. Stimulation of  $\beta_1$ -adrenoceptors.
- g. Block of M-cholinoceptors.

h. Stabilization of cardiomyocyte cell membranes and decrease of ionic flows through these membranes.

i. Normalization of  $K^+$ -content in heart cells that lead to decrease of cardiac activity.

# Task 2.

Choose for each antiarrhythmic drug its pharmacological effects. Match letters with numbers.

	Drugs	
1.Lidocaine	6.Propranolol	11.Disopiramide
2.Atropine sulfate	7.Phenitoin	12.Moracisin
3.Dobutamine	8.Acebutolol	13.Praymalin
4.Amiodaron	9.Quinidine	14.Isoprenalin
5.Verapamil	10.Procainamide	

# Pharmacological effects

A.Antiarrhythmic	F.Sedative	K.Hypertensive
B.Antianginal	G.Cholinoblocking	L.Uterotonic
C.Antihypertensive	H.Coronarolytic	M.Anticonvulsant
D.Local anesthetic	I.Analgesic	N.Broncholytic
E.Cardiostimulative	J.Antipyretic	O.Uterolytic

### Task 3.

Learning the pharmacological properties of different groups of antiarrhythmic drugs fill in the following table:

Pharmacological group	Indications	Side effects	Contraindications
Membrane stabilizers			
β-adrenoblockers			
Calcium canals blockers			
Agents prolonging repolarization			
K <sup>+</sup> -containing agents			
β-adrenomimetics			
M-cholinoblockers			

### Task 4.

Answer the doctors` questions:

1. What groups of antiarrhythmic drugs act preferably on:

a).conductive heart system;

b).efferent innervation of heart (autonomic nervous system)?

2. What antiarrhythmic drug(s) may be used also for:

- a). treatment of angina pectoris; e). treatment of poisoning with cardiac
- b). treatment of hypertension;
- c). treatment of epilepsy;
- f). emergency (heart stoppage);
- d). treatment of bronchial asthma;

# g). local anesthesia?

glycosides;

# Task 5.

Offer the patient the substitution of Isoprenalin, Dobutamine, Verapamil, Amiodaron, Praymalin, Procainamide, Metoprolol, Potassium and Magnesium asparaginate, Atropine sulfate:

A – among the other members of pharmacological group;

B – among the trade marks.

# Task 6.

Correct the following prescriptions:

1. Rp.: Novocainamidi 0,5

D.S.

#

- 2. Rp.: Tab. Amiodaroni 1,0
  - S.: 1 tablet 3 times a day.

#

3. Rp.: Atropini sulfatis 10% - 1 ml

D.t.d. N 20

D.S. As always.

#

4. Rp.: Diphenini 0,1

D.t.d. in tab. N 10

S.

#

- 5. Rp.: Tab. Anaprilini 0,04 N 10
  - D.S. 1 tablet daily.

# Tests

Describe the drugs using following schemes:

- 4. Pharmacological group  $\rightarrow$  Interchangeability  $\rightarrow$  Mechanism of action.
- 5. Pharmacological effects  $\rightarrow$  Indications  $\rightarrow$  Dosage.
- 6. Side effects  $\rightarrow$  Contraindications  $\rightarrow$  Principles of rational administration.

# Drugs

- 1. Procainamide\*5. Acebutolol
- 2. Quinidine6. Verapamil
- 3. Lidocaine\* 7. Dobutamine
- 4. Amiodaron\* 8. Atropine sulfate\*
  - 9. Potassium and Magnesium asparaginate\*

For agents marked with asterisk point out the dosage.

# ANTIHYPERTENSIVE DRUGS: SELECTIVE AGONISTS OF IMIDAZOLINE RECEPTORS, A-ADRENOBLOCKERS, B-ADRENOBLOCKERS, SYMPATHOLYTICS, GANGLIONIC BLOCKERS, BLOCKERS OF CALCIUM CHANNELS, INHIBITORS OF ACE, ANTAGONISTS OF ANGIOTENSIN II RECEPTORS, PERIPHERAL VASODILATORS ET AL. MEANS. ANTISCLEROTIC MEDICINES. STATINS, FIBRATES, SEQUESTRANTS OF BILE ACIDS, NICOTINIC ACID DRUGS, CORRECTORS OF EPITHELIALDYSFUNCTION. Topicality of the subject.

Hypertension and atherosclerosis are one of the most often diseases of cardiovascular system. They may be dangerous for life and may lead to different complications such as hypertensive crisis, myocardial infarction, etc. For pharmacological correction of these diseases many drug from different pharmacological groups may be used. It is very important to know the pharmacological properties of antihypertensive (hypotensive) and antiatherosclerotic drugs for rational pharmacotherapy of hypertension and atherosclerosis.

### Theoretical questions.

1. Classification and nomenclature of antihypertensive drugs.

2. Mechanism of action of antihypertensive drugs. Mechanism of antihypertensive effect development for different groups of antihypertensive drugs.

3. Pharmacodynamics, indications, side effects, contraindication of antihypertensive drugs.

4. Principles of rational administration of antihypertensive drugs. The drugs of choice for treatment different forms of hypertension and hypertensive crisis.

5. The classifications and of antiatherosclerotic drugs.

6. Mechanism of action, pharmacodynamics, indications of antiatherosclerotic drugs.

7. Side effects, contraindication, principles of rational administration antiatherosclerotic drugs.

8. The comparative description of drugs.

# Home task.

# Task 1.

Write the following prescriptions:

- 1. Dibazol (Dibasolum) sol. f/i 0.5% 1 ml, amp.
- 2. Clonidine (Clonidinum) tabl. 0.000075; sol. f/i 0.01% 1 ml, amp.
- 3. Propranolol (Propranololum) tabl. 0.01.
- 4. Reserpine (Reserpinum) tabl. 0.0001.
- 5. Lovastatin (Lovastatinum) tabl. 0.01.
- 6. Lipoic acid (Acidum lipoicum) tabl. 0.025.

# Task 2.

Answer your colleage's questions:

1. Name the factors or systems (vasoconstrictive and vasodilative) that take part in regulation of vascular tone in human body.

2. What are the main strategies in treatment of hypertension?

3. Name the groups of antiatheroscletic drugs and explain their role in treatment of atherosclerosis.

# Class tasks.

# Task 1.

Classify the antihypertensive drugs. Match letters with members. For agents, marked with asterisk, point out the dosage. Underline the new drugs.

Pharmacological groups.

A. Sympatholytics

- I. ACE inhibitors
- B.  $\alpha_1$  adrenoblockers
- C.  $\alpha_1 + \alpha_2 adrenoblockers$
- D.  $\beta_1$  adrenoblockers
- E.  $\beta_1 + \beta_2 adrenoblockers$
- F. Myotropic spasmolytics
- G. Calcium canals blockers
- H. Diuretics

- J. Antagonists of angiotensin receptors
- K. Central-acting  $\alpha_2$  adrenomimetics
- L. Peripheral vasodilators
- M. Agonists of imidazolin receptors
- N. Ganglionic blockers
- O.  $\alpha + \beta$  adrenoblockers
- P. Combined antihypertensive agents

Drugs.

- 1. Labetalol
- 2. Pirroxan
- 3. Caposide
- 4. Doxasozin\*
- 5. Methyldopa
- 6. Amlodipin
- 7. Metoprolol
- 8. Diazoxide\*
- 9. Reserpine \*
- 10. Ramipril\*
- 11. Captopril
- 12. Clonidine\*
- 13. Propranolol\*
- 14. Hydrochlorthiazide

- 15. Dibazol\*
- 16. Spironolactone
- 17. Valsartan
- 18. Furosemide\*
- 19. Potassium losartan
- 20. Moxonidin
- 21. Isradipine
- 22. Molsidomine
- 23. Acebutolol
- 24. Hexamethonium benzosulfonate\*
- 25. Prasozin
- 26. Adelphan Ezidrex
- 27. Hydralasin

### Task 2.

For understanding the pharmacodynamics of antihypertensive agents learn the mechanism of their action. Choose for each drug its mechanism of action. Match letters with numbers.

### Drugs.

- 1. Clonidine
- 2. Atenolol
- 3. Propranolol
- 4. Doxasozin
- 5. Amlodipin
- 6. Enalapril
- 7. Moxonidin

- 8. Reserpine
- 9. Potassium losartan
- 10. Labetalol
- 11. Hexamethonium benzosulfonate
- 12. Hydralasin
- 13. Drotaverin
- 14. Phentolamine

### Mechanism of action.

- A. Block of  $\beta_1$  adrenoreceptors.
- B. Block of  $\alpha_1$  adrenoreceptors.
- C. Block of  $\beta_1 + \beta_2$  adrenoreceptors.
- D. Stimulation of central  $\alpha_2$  adrenoreceptors.
- E. Block of  $\alpha_1 + \alpha_2$  adrenoreceptors.
- F. Inhibition of ACE
- G. Block of angiotensive receptors
- H. Block of membrane calcium canals
- I. Stimulation of central  $I_2$  receptors.
- J. Decrease of cathecholamines content in presynaptic membrane
- K. Block of  $\alpha + \beta$  adrenoreceptors.
- L. Block of automatic ganglia

M. Inhibition of phosphodiestherase accumulation of cAMP; change of contractive proteins form in smooth muscles

N. Inhibition of phosphodiestherase, accumulation of cAMP; change of carbohydrate metabolism in smooth muscles of blood vessels.

Explain the role of each mechanism of drug action in development of antihypertensive effect.

### Task 3.

Learning the pharmacological properties of antihypertensive agents choose for each drug its:

I. Pharmacological effects and indications;

II. Side effects and contraindications.

Match the letters and numbers with names of drugs.

	Drugs.
Clofelin	Dibazol
Anaprilin	Prasozin
Benzohexonium	Diazoxide
Enap	Amlodipin
Reserpine	

# Pharmacological effects

- A. Antihypertensive
- B. Antianginal
- C. Antiarrythmic
- D. Spasmolytic
- E. Sedative
- F. Immunostimulative
- G. Decrease of IOP
- 1. Glaucoma
- 2. Hypertension
- 3. Hypertensive crisis
- 4. Bronchial asthma
- 5. Angina pectoris
- 6. Momaged hypotension
- A. Orthosthatic hypotension
- B. Dry cough
- C. Depression
- D. Insomnia
- E. Bronchospasm
- F. Spasm of peripheral vessels
- G. Inhibition of CNS
- H. Hypoglycemia
- I. Dry mouth
- J. Bradycardia
- K. Disorders of vision and hearing
- L. AV blockade
- M. Hyperkalemia

- H. Mild neuroleptic
- I. Broncholytic
- J. Potentiative
- K. Decrease of smooth muscles tone of prostatic part of urethra
- L. Hypothermic
- M. Hypnotic
- N. Analgesic

# Indications.

- 7. Pulmonary and brain edema
- 8. Migraine
- 9. Neurosis
- 10. Adenoma of prostate
- 11. Arrhythmia
- 12. Colics

# Side effects.

- N. Water retention
- O. Hyperacidity
- P. Weakness
- Q. Headache
- R. Dizzines
- S. Impotency
- T. Parkinson's syndrome
- U. Frequent urination
- V. Tolerance
- W. Dependence
- X. "Abolition" syndrome
- Y. Heart failure
- Z. Decrease of exocrine glands secretion

Contraindications.

1.	Insomnia	11.	Pregnancy
2.	Bronchial asthma	12.	Lactation
3.	Disorders of peripheral circulation	13.	Epilepsy
4.	Depression	14.	Marked atherosclerosis
5.	Bradycardia	15.	Therapy with insulin
6.	Edema	16.	Hyperkalemia
7.	Peptic ulcer (hyperacidic gastritis)	17.	Cardiogenic shock
8.	Parkinson's disease	18.	Marked hypotension
9.	Heart failure	19.	Renal failure
10.	Alcoholism	20.	Glaucoma

Find the logic connection between pharmacological effects ad indications; side effects and contraindications.

# Task 4.

Classify the antiatherosclerotic drugs. Match the letters with numbers.

1.	Lovastatin*	7.	Ciprofibrate
2.	Hemfibrosil*	8.	Simvastatin
3.	Pyricarbate	9.	Pravastatin
4.	Fluvastatin	10.	Probucol
5.	Cholestiramine*	11.	Ascorbic acid*
6.	Rutin*	12.	Lipoic acid

Pharmacological groups.

A. Statins
B. Fibrates
C. Anion exchange resins
For agents, marked with asterisk point out the dosage.

# Task 5.

Preparing the information for the doctors about antiatherosclerotic drugs fill in the following tables:

Table 1.

Drug	Pharmacological effects	Indications
Lovastatin		
Hemfibrosil		
Cholestiramine		
Tocoferol acetate		
Heparin		

Table 2.

Pharmacological group	Side effects	Contraindications
Statins		
Fibrates		
Anion exchange resins		

# Task 6.

Answer your colleague's questions:

1. What mechanism of action do different groups of hypolipidemic drugs have?

2. What is the role of antioxidants and angioprotectors in antiatherosclerotic effect development?

3. What is the difference between the direct-acting and indirect-acting antioxidants?

4. Is it rational to combine the following agents:

- Enalapril + Hypothiazide;
- Anaprilin + Niphedipine;
- Clonidine + Metoprolol;
- Reserpine + Anaprilin;

- Dihydroergotamine + Anaprilin;
- Dibazol + Papaverin;
- Cholestirol + Digoxin;
- Lovastatin + Nicospan?

Explain your recommendations.

5. What drugs belong to other pharmacological groups; besides antiatherosclerotics?

#### Task 7.

Offer the patient the substitution of Captopril, Ednit, Kozaar, Hemitone, Moxonidin, Amlodipin, Adversuten, Hexamethonium benzosulfonate, Hydralasin, Propranolol, Atenolol, Lovastatin, Parmidine, Ticlopidine, Phenofibrate, Provestatine

Pravastatin:

A – among the other members of pharmacological group;

B – among the trade marks.

### Task 8.

Correct the following prescriptions:

1. Rp.: Anaprilini 0,2

D.t.d. N 10 in tab.

S.: As always.

#

2. Rp.: Tab. Raniteci D.t.d. in tab. N 10 S.:

#

3. Rp.: Tab. Clophelini 0,75 N 20

D. S.: 1 tablet TDS

#

4. Rp.: Sol. Dibazol 5% - 10 ml

D.t.d. in amp. N 5

S.: Subcutaneously 2 times a day

#

5. Rp.: Tab. Lovastatini 0,02 N 20

D.S.:

6. Rp.: Tab. Ac. Ascorbinici 0,5 D.t.d. N 30 S.:

# Tests.

Describe the drugs using following schemes:

- 7. Pharmacological group  $\rightarrow$  Mechanism of action  $\rightarrow$  Interchangeability.
- 8. Pharmacological effects  $\rightarrow$  Indications  $\rightarrow$  Dosage.
- 9. Side effects  $\rightarrow$  Contraindications  $\rightarrow$  Principles of rational administration.

Drugs.

- 1. Clonidine9. Cholestiramine
- 2. Propranolol
- 3. Captopril
- 4. Isradipine
- 5. Prasozin
- 6. Apressin
- 7 Adelfan
- 8 Dibazol

11. Probucol

10. Hemfibrosil

- 12. Lovastatin
- 13. Rutin
- 14. Potassium losartan
- 15. Benzohexonium
- 16. Reserpine

For agents marked with asterisk point out the dosage.

# ANTIANGINAL DRUGS: NITROVASODILATORS, BLOCKERS OF CALCIUM CHANNELS, B-ADRENOBLOCKERS, CARDIOPROTECTORS.

# **Topicality of the subject**

Nowadays there are many drugs for treatment ischemic heart disease, because the latter is one of the most important medical and social problems. For pharmacist it is necessary to know the pharmacological properties of antianginal agents for rational therapy of this disease.

#### **Theoretical questions**

1. The classification and nomenclature of antianginal drugs.

2.Nitrovasodilators: mechanism of action, pharmacodynamics, indications, contraindications, side effects and comparative description of drugs. The role of nitrovasodilators in treatment of angina pectoris.

3.Calcium canals blockers: mechanism of action, pharmacodynamics, indications, contraindications, side effects and comparative description of drugs. The role of calcium canals blockers in treatment of angina pectoris.

4. $\beta$ -adrenoblockers: mechanism of action, pharmacodynamics, indications, contraindications, side effects and comparative description of drugs. The role of  $\beta$ -adrenoblockers in treatment of angina pectoris.

5.Other antianginal drugs: mechanism of action, pharmacodynamics, indications, contraindications, side effects and comparative description of drugs. The role of these agents in treatment of angina pectoris.

#### Home tasks.

#### Task 1.

Write the following prescriptions:

1.Nitroglycerin (Nitroglycerinum) – tabl. 0.0005.

2.Sustac-forte (Sustac-forte) – tabl. 0.0064.

3.Verapamil (Verapamilum) – tabl. 0.04.

4.Carbocromen (Carbocromenum) – tabl. 0.075.

5.Validol (Validolum) – tabl. 0.06.

6.Isosorbid dinitrate (Isosorbidi dinitras) – tabl. 0.02.

### Task 2.

Divide the antianginal drugs into subgroups depending on their ability (way) to cause an antianginal effect. Match letters with numbers.

# Groups

A.Agents decreasing the oxygen consumption by myocardium.

B.Agents increasing the supply of myocardium with oxygen.

C.Agents improving the metabolism in myocardium.

### Drugs

1.Nitroglycerin	7.Panangin	13.Pyridoxin
2.Propranolol	8.Validol	14.Corvalol
3.Dipiridamol	9.Drotaverin	15.Trimethasidin
4.Verapamil	10.Carbocromen	16.Dilthiazem
5.Sustac	11.Papaverin	17.ATP
6.Nandrolone decanoate	12.Folic acid	

#### Class tasks.

### Task 1.

Classify the antianginal drugs into pharmacological groups depending on their mechanism of action. Match the letters with numbers.

Pharmacological groups

- A. Nitrovasodilators C. β-adrenoblockers
- B. Calcium canals blockers D. Agents improving metabolism in myocardium

E. Other antianginal drugs

#### Drugs

1.Amlodipin	8.Acebutolol	15.Papaverin*
2.Anaprilin*	9.Nicardipin	16.Riboxin
3.ATP	10.Isosorbid mononitrate	17.Talinolol
4.Validol	11.Carbocromen	18.Molsidomin
5.Verapamil*	12.Nitroglycerin*	19.Trimethasidin
6.Dipiridamol*	13.Nitrong	20.Dilthiazem
7.Isosorbid dinitrate	14.No-spa	21.Pentaerhythrytyl
		tetranitrate

Indicate the pharmacological groups of drugs that decrease the oxygen consumption by myocardium (a), that increase the supply of myocardium with oxygen (b), that improve the metabolism in myocardium (c).

For agents marked with asterisk point out the dosage. Underline the new drugs.

### Task 2.

Learning the mechanism of antianginal drugs action match the letters (mechanism of action) with numbers (names of drugs).

# Mechanism of action

1. Release of nitrogen oxide (II) that leads to activation of cGMP resulting in decrease of smooth muscles tone and dilation of vessels (especially coronary vessels).

2.Selective block of membrane calcium canals decreasing the ionic flow inside the cells of smooth muscles and cardiomyocytes that results in decrease of myocardial contractility, conductivity, smooth muscles tone, bradycardia.

3.Block of  $\beta$ -adrenoceptors that results in decrease of sympathetic nervous system influence on heart (especially negative inotropic effect).

4.Incompetitive block of  $\alpha$ - and  $\beta$ -adrenoceptors; block of K<sup>+</sup>-, Ca<sup>2+</sup>-, Na<sup>+</sup>-canals, that lead to decrease of heart rate and dilation of coronary vessels.

5.Reflex dilation of coronary vessels because of irritation of receptors in the mouth.

6.Competitive inhibition of phosphodiesterase and adenosindesaminase; increase of adenosin and cATP content in tissues.

7. Normalization of metabolic processes in myocardium.

# Drugs

1.Nitroglycerin	6.Riboxin	11.Dilthiazem
2.ATP	7.Verapamil	12.Amiodaron
3.Isosorbide dinitrate	8.Propranolol	13.Amlodipin
4.Dipirydamol	9.Molsidomin	14.Sustac
5.Validol	10.Talinolol	15.Nitrong
		16.Trimethazidin

# Task 3.

Choose for each pharmacological group (or drug) their pharmacological effects. Match the letters with numbers.

	Pharmacological group (or drug)	
1.Nitrovasodilators	4. β-adrenoblockers	
2.Calcium canals blocker	s 5.Acetylsalicylic acid	
3.Validol	6.Amiodaron	

# Pharmacological effects

1.Antianginal	3.Antiarrhythmic	5.Antiaggregant
2.Hypotensive	4.Sedative	6.Antiinflammatory
		7.Increase of IOP, ICP

#### Task 4.

All listed below drugs may be used for treatment (mono- or/and combined therapy) of ischemic heart disease. But besides this indication, some agents have other ones. Choose for each drug its indications. Match the letters with numbers.

# Drug

1.Nitroglycerin	9. Acetylsalicylic acid	17.Retabolil
2.Verapamil	10.Strophantin	18.Streptokinase
3.Validol	11.ATP	19.Morphin
4.Talinolol	12.Nifedipin	20.Vitamins
5.Papaverin	13.Dilthiazem	21.Heparin
6.Propranolol	14.Molsidomin	22.Nitroglycerin (i/v injection)
7.Nitrong	15.Amiodaron	23.Trimethasidin
8.Acebutolol	16.Dipiridamol	24.Carbocromen

## Indications

A.Angina pectoris	B.Myocardial infarction
a).anginal attack	a).acute infarction
b).prophylaxis of anginal attack	b).reparative period after infarction
C.Tachyarrhythmia	D.Hypertension
E.Syndrome of hypercoagulation	F.Disorders of peripheral circulation
G.Colics	H.Fever
I.Heart failure	J.Strong pain

# Task 5.

Preparing the information for doctors about the antianginal drugs pay your attention to their side effects. Indicate for each antianginal agent its side effects. Match the letters with numbers.

# Side effects

- 1.Reflex tacchycardia
- 2.Increase of ICP
- 3.Tolerance
- 4."Abolition" syndrome
- 5.Bronchospasm
- 6.Bradycardia
- 7.Orthostatic hypotension
- 8.Hypoglycemia
- 9.Decrease of blood flow in ischemic regions
- 10.Disorders of peripheral blood circulation
- 11.Disorders of thyroid function (hypo- or hyperthyroidism)
- 12.Reddening of skin of face and neck.

# Drugs

A. Sustac	E. Talinolol
B. Propranolol	F.Nifedipin
C. Isosorbid dinitrate	G. Dipiridamol

D. Amiodaron

# Task 6.

Answer the doctor's questions:

1. Is it rational to combine  $\beta$ -adrenoblockers (non-selective) with:

- antidiabetic drugs;
- cardiac glycosides;
- drugs obtained from Ergot?

2. What are the principles of rational administration of nitrates?

# Task 7.

Offer the patient the substitution of Propranolol, Verapamil, Norvask, Dipiridamol, Nitroglycerin, Amiodaron, Carbocromen, Nitrosorbid:

A – among the other members of pharmacological group;

B – among the trade marks.

## Task 8.

Correct the following prescriptions:

1. Rp.: Nitroglycerini 0,0005

D.t.d. N 40

S.: As always.

#

2. Rp.: Validoli

D.S.: Use 1-2 drops in each eye.

#

3. Rp.: Dipiridamoli 0,25

D.t.d. N 20

D.S.: Use 1 tablet 3 times a day.

#

4. Rp.: Verapamili 0,02

D.S.

# Tests

Describe the drugs using following schemes:

- 1. Pharmacological group  $\rightarrow$  Interchangeability  $\rightarrow$  Mechanism of action.
- 2. Pharmacological effects  $\rightarrow$  Indications  $\rightarrow$  Dosage.
  - 3. Side effects  $\rightarrow$  Contraindications  $\rightarrow$  Principles of rational administration.

# Drugs

6.

7.

Talinolol

Verapamil

- 1. Nitroglycerin\* 5. Dipiridamol\*
- 2. Validol\*
- 3. Nifedipin
- 4. Propranolol 8. Isosorbid dinitrate

For agents marked with asterisk point out the dosage.

# ANTACIDS, H<sub>2</sub>-BLOCKERS OF RECEPTORS OF HISTAMIN, PROTON PUMP INHIBITORS, M<sub>1</sub>-CHOLINORECEPTORS BLOCKERS, GASTROPROTECTORS, HEPATOPROTECTORS, CHOLERETIC DRUGS, ANTISPASMODICS. LAXATIVES. ANTIDIARRHEA DRUGS

### **Topicality of the subject**

The gastro-intestinal tract diseases, due to their high prevalence, complexity pathogenesis, the propensity to prolonged, recurrent course, require efficient methods of medical treatment.

The problem of choice of optimal combinations of drugs for effective pharmacotherapy of gastro-intestinal tract diseases is relevant to doctors and pharmacists.

#### **Theoretical questions**

- 1. The mechanism of action and indications of bitters.
- 2. Indications of anorectic medicines.
- 3. Comparative pharmacological characteristics and indications of antacids.

4. Medicines that decrease the secretion of HCl (antisecretory medicines). Mechanism of action, indications, contraindications, side effects.

5. Substitutive therapy medicines in low acid-forming function of the gastric glands.

6. Medicines that are used in disorders of exocrine pancreatic function.

7. Pharmacodynamics and indications of cholagogic medicines.

8. Mechanism of action, indications, contraindications and side effects of laxatives'.

#### Home tasks

#### Task 1.

Write the following prescriptions:

1. Gastric juice natural (Succus gastricus) 100 ml in bottles.

- 2. Pancreatine (Pancreatinum) powd. 0.5.
- 3. Allochol («Allocholum») tabl.  $N_{2}$  50.
- 4. Almagel («Almagelum») 170 ml in bottles.
- 5. Castor oil (Oleum Ricini) caps. 1.0.
- 6. Famotidine (Famotidinum) tabl. 0.150.
- 7. Guttalax (Guttalax) -15 ml in bottles.

# Task 2.

Fill the table 1-3.

Table 1

Medicines	Influence on the	Indi-	Conditions of administration		
	pH of gastric	cation	before	during	after
	juice (– or +)	S	meals	meals	meals
A. Substitutive					
therapy medicines					
B. Antacid					
medicines					

Indications: gastritis (hypoacidic -a, hyperacidic -b, anacidic -c, peptic (stomach and duodenal) ulcer -d).

Table 2

Medicines	Indi-	Conditions of administration		
	cations	before meals	during meals	after meals
A. Choleretic				
B. Cholagogic				

Indications: hepatitis – a, cholecystitis – b, cholangitis – d.

Table 3

Medicines	Sou	irce	Indica-	Conditi	ons of administration
	plant	syn-	tions	overnight	in the morning,
	origin	thetic		fasting	afternoon, evening
A. Reflex					
stimulating					
intestinal					
peristalsis					
B. Synthetic					
C. Salt					
laxatives					
D. Oil					
laxatives					
Indications: atony of intestinal in adults - a, in children - b, instrumental					

examination of the GIT - c, food poisonings - d, hemorrhoid and proctitis - e.

# **Class tasks**

# Task 1.

Divide the following drugs into anti-ulcer (A), hepatoprotectores (B), enzymatic medicines (C) and laxatives (D). For agents, marked with asterisk, point out the dosage. Underline the new drugs.

# Drugs.

Festal\* Famotidine 15. 1. 2. Omeprazole 16. Panzinorm Phosphalugel 3. 17. Sennadexin 4. De-nol 18. Guttalax Vaseline oil 5. 19. Castor oil

6.	Gastrocepine *	20.	Plantex
7.	Legalon	21.	Agiolax
8.	Tiqueol	22.	Macrogol
9.	Simepar	23.	Hepasteril B
10.	Essentiale	24.	Catergen
11.	Antral	25.	Carbaldrate
12.	Ornitine	26.	Liquiritonum
13.	Apcosule	27.	Laminarid
14.	Misoprostol	28.	Hepar compositum

### Task 2.

Match the names of medicines with their mechanisms of action and pharmacological effects.

		Drugs:	
1.	Methyluracil	6.	Bilignine
2.	Cimetidine	7.	Erbisol
3.	Omeprazole	8.	Hepasol
4.	Sucralfate	9.	Thiotriazoline
5.	Alumag	10.	Gastropharm

# Mechanism of action

I.Formation of albuminates (protection of the gastric mucous membrane).

- II. Block of  $H^+/K^+$ -ATPase enzyme.
- III. Stimulation of regenerative processes in stomach.
- IV. Stabilization of hepatocytes cell membranes.
- V. Neutralization of hydro-chloric acid in the stomach
- VI. Covering of the stomach mucous membrane
- VII. Decrease of free radical oxidation processes in hepatocytes.
- VIII. Normalization of metabolic processes in hepatocytes

# Pharmacological effects

- A. Hepatoprotective
- B. Cholagogic
- C. Antitoxic
- D. Antioxidant
- E. Membrane-stabilizing
- F. Regenerative
- G. Antacid

- H. Astringent
- I. Antibacterial
- J. Covering
- K. Cardioprotective
- L. Anabolic
- M. Antisecretory

### Task 3.

Divide the following laxatives into groups using task 1:

- 1. Combined drugs
- 2. Drugs softing feces
- 3. Drugs with osmotic properties
- 4. Drugs reflex stimulating intestinal peristalsis
- 5. Drugs increasing volume of intestinal contents

# Task 4.

Match the names of medicines with their indications and contraindications.

	Medicines	Indications
1.	Ranitidine	A.Peptic ulcer
2.	Gastrocepine	B. Hyperacid gastritis
3.	Omeprazole	C. Hypoacid gastritis
4.	De-nol	D.Gastroesophageal reflux,
5.	Plantaglucidum	E. Zollinger – Ellison's syndrome
6.	Metronidazole	F. Hepatic cirrhosis
7.	Ademethionine	G.Chronic hepatitis
8.	Carsil	H. Acute hepatitis
9.	Bisacodyl	I. Cholecystitis

10.	Magnesium sulphate	J. Hepatic coma			
11.	Laminarid	K.Preparation for surgeries, instrumental and			
		X-ray examinations			
12.	Panzinorm	L. Constipations			
13.	Contrycal	M. Diarrhea			
14.	Ursofalk	N.Biliary dyskinesia			
15.	Allocholum	O. Acute pancreatitis			
16.	Solizymum	P. Chronic pancreatitis			
17.	Loperamide				
18.	Hepasteril B				
		Contraindications			
I.	Hypoacid gastritis				
II.	Acute pancreatitis				
III.	Cholecystitis				
IV.	Hepatitis				
V.	Individual intolerance of medicine				
VI.	Intestinal obstruction				
VII.	chronic renal insufficiency				

# Task 5.

Answer the questions:

1. What is the mechanism of action of Misoprostol?

2. Why it should be taken with caution in patients with bronchial asthma,

pregnant women?

3. Is it possible to use De-nol a long period of time?

# Task 6

Describe the drugs using following schemes:

4. Pharmacological group  $\rightarrow$  Interchangeability  $\rightarrow$  Mechanism of action  $\rightarrow$  Spectrum of action.

- 5. Pharmacological effects  $\rightarrow$  Type of action  $\rightarrow$  Indications  $\rightarrow$  Dosage.
- 6. Side effects  $\rightarrow$  Contraindications  $\rightarrow$  Rules of rational administration.

# Drugs:

1.	Methyluracil	6.	Bilignine
2.	Cimetidine	7.	Essentiale*
3.	Omeprazole*	8.	Hepasol
4.	Sucralfate	9.	Thiotriazoline
5.	Alumag	10.	Gastropharm

For agents, marked with asterisk, point out the dosage.

### Task 7.

Correct the following prescriptions:

Rp.: Siliborum 0,1 1. D.t.d. N 10 S.: 1 tabl. 2 times a day # 2. Rp.: Famothidini 0,01 D.t.d. № in tab. S. 1 tabl. a day # Rp.: Sol. Magnii sulfas 25% - 10 ml 3. D.t.d. No 10 in amp S.: As always. # Rp.: Tab. Olei ricini 1,0 № 10 4. D.S. 1 caps. 3 times a day # Rp.:Dragee «Festali» № 100 5. D.S. 2 dragee before meals

# DIURETIC DRUGS. ANTIGOUTY MEDICINES. UTEROTROPHIC DRUGS.

#### **Topicality of the subject**

In many diseases the amount of sodium chloride reabsorbed by the kidney tubules is abnormally high. This leads to the retention of water, an increase in blood volume, expansion of the extravascular fluid compartment, resulting in edema of the tissues. For pharmacological correction of such states the diuretic drugs that increase urine flow and elimination are used. Diuretics are also widely used as components of therapy of cardiovascular system; renal and hepatic disorders.

#### **Theoretical questions**

- 1. The classification and nomenclature of diuretic drugs.
- 2. The mechanism of action, pharmacodynamics and indications of diuretics.
- 3. Side effects and contraindications of diuretics.
- 4. The comparative description of diuretics.

#### Home tasks

#### Task 1.

Write the following prescriptions:

- 1. Furosemide (Furosemidum) sol. f/i 1% 1 ml, amp.
- 2. Hydrochlorthiazide (Hydrochlorthiazidum) tabl. 0.05.
- 3. Spironolactone (Spironolactonum) tabl. 0.25.
- 4. Ethacrynic acid (Acidum Aethacrynicum) tabl. 0.05.
- 5. Acetazolamide (Acetazolamidum) tabl. 0.25.

#### Task 2.

Classify the following diuretics. Match the name of drug with name of pharmacological group.

# Drugs

1.	Hydrochlorthiazide	6.	Urea	11.	Mannitol
2.	Acetazolamide	7.	Cyclomethiazide	12.	Theophyllin
3.	Triamteren	8.	Bearberry leaves	13.	Lespenephril
4.	Ethacrynic acid	9.	Spironolactone	14.	Clopamide
5.	Potassium acetate	10.	Furosemide	15.	Aminophyllin

# Pharmacological groups

A.	Carboanhydrase inhibitors	E.	Xanthine diuretics
B.	Plant origin diuretics	F.	Osmotic diuretics
C.	Thiazide diuretics	G.	Potassium-saving (Potassium-sparing)
D.	Loop diuretics		diuretics

# **Class tasks**

# Task 1.

Divide the following diuretics into subgroups filling in the table. For agents marked with asterisk point out the dosage.

Thiazide	Loop	Osmotic	Potassium-	Carboan-	Xanthine	Plant
diuretics	diuretics	diuretics	sparing	hydrase	diuretics	origin
			diuretics	inhibitors		diuretics

# Drugs

1.	Hydrochlorthiazide	10.	Spironolactone*	19.	Potassium acetate
2.	Bumetanide	11.	Acetazolamide*	20.	Verospirone
3.	Indapamide	12.	Amilorid	21.	Dichlothiazide
4.	Theobromin	13.	Orthosiphone leaves	22.	Cowberry leaves
5.	Lespenephril	14.	Urea	23.	Horse-tail herb

6. Furosemide\*
7. Mannitol
8. Bearberry leaves
9. Cyclomethiazide
15. Ethacrynic acid
16. Chlorthalidone
17. Lazix
18. Aminophyllin

### Task 2.

Choose for each group of diuretics the correct mechanism of action. Match letters with numbers.

Groups of diviretics

Oloups of	uluiclics
A.Potassium-sparing diuretics:	D.Carbonic anhydrase inhibitors
a)Spironolactone	E.Osmotic diuretics
b)Triamteren, Amilorid	F.Xanthine diuretics
B.Loop diuretics	G.Plant origin diuretics
C.Thiazides	

# Mechanism of action

1.Block of aldosterone receptors that leads to decrease of distal canals` membranes permeability for  $Na^+$ ,  $Cl^-$  ions (increase of their elimination) and retention of  $K^+$  ions.

2.Increase of the osmotic pressure of blood and the primary urine that results in decrease of water and  $Na^+$  ions reabsorption along the whole renal canal.

3.Inhibition of reabsorption of  $Na^+$ ,  $K^+$ ,  $Cl^-$  ions and water preferably in distal canals of nephron.

4. Decrease of distal canals` membranes permeability for  $Na^+$ ,  $Cl^-$  ions and retention of K<sup>+</sup> ions due to block of membrane Na-canals.

5.Inhibition of reabsorption of Na<sup>+</sup>, K<sup>+</sup>, Cl<sup>-</sup> ions and water in loop of Henle.

6.Dilation of renal blood vessels (particularly due to inhibition of phosphodiestherase) and improvement of glomerular filtration; inhibition of reabsorption.

7.Inhibition of carbonic anhydrase enzyme in proximal canals of nephron that leads to increase of  $Na^+$  and  $HCO_3^-$  ions elimination.

8. Increase of glomerular filtration due to improvement of renal blood circulation.

# Task 3.

Comparing the pharmacological effects of different groups of diuretics, find the differences and similarities in their pharmacodynamics. Choose for each group of diuretics its pharmacological effects and fill in the table.

Pharmaco-	Thiazi-	Loop	Potassium	Carbonic	Osmo-	Plant	Xant
logical	de diu-	diure	-sparing	anhydra-	tic diu-	origin	hine
effects	retics	-tics	diuretics	se inhi-	retics	diure-	diure
				bitors		tics	tics
Diuretic:							
- potent							
-moderate							
-mild							
Hypoten-							
sive							
Antiepilep-							
tic							
↓ IOP							
↓ ICP							
Anti-							
inflam-							
matory							
Antiseptic							
Spasmoly-							
tic							

Antiulcer						
Broncho-						
lytic						
Notel The ef	ffaction	agant (	"+" obsort	دد دد		

Note! The effect is: present – "+"; absent – "-".

### Task 4.

Choose for each diuretic drug its indications. Match letters with numbers.

## Drugs

1. Spironolactone	5. Mannitol
2. Hydrochlorthiazide	6. Furosemide
3. Bearberry leaves	7. Acetazolamide
4. Aminophyllin	8. Lespenephril

# Indications

A. Inflammatory diseases of kidneys	I. Hypopotassemia caused by
and urinary tract	administration of agents that eliminate
	K <sup>+</sup> ions
B. Pulmonary edema	J. Hypertension
C. Brain edema	K. Edema caused by hepatic failure
D. Glaucoma	L. Edema caused by renal failure
E. Hypertensive crisis	M. High level of nitrogen in blood
F. Epilepsy	N. Primary hyperaldosteronism
G. Edema caused by heart failure	O. Disorders of brain blood circulation
H. Intoxication caused by water-	
soluble poisons	

# Task 5.

Learning the side effects and contraindications of diuretics fill in the following table.

Group of diuretics	Side effects	Contraindications
Thiazide diuretics		
Loop diuretics		
Carbonic anhydrase inhibitors		
Potassium-sparing diuretics		
Osmotic diuretics		
Plant origin diuretics		
Xanthine diuretics		

#### Task 6.

Answer your colleague`s questions:

1. Why is Verospirone contraindicated in Addison's disease?

2. What diuretic drugs may cause the disorders of hearing?

3.Is combination of antidiabetic drugs with thiazides or loop diuretics rational?

4. Is combination of thiazides or loop diuretics with cardiac glycosides rational?

5. Is combination of Lazix with Dichlothiazide rational?

6.Can NSAIDs influence on diuretic effect of diuretic drugs in case of their combined administration?

7.What other pharmacological groups (besides diuretics) do xanthine derivatives belong to?

#### Task 7.

Offer the substitution of Furosemide, Acetazolamide, Dichlothiazide, Mannit, Cowberry leaves, Ethacrynic acid, Amilorid, Euphyllin, Verospirone, Indapamide:

A – among the other members of pharmacological group;

B – among the trade marks.

Task 8.

1. Rp.:	Diacarbi D.t.d. № 20 in tab. S. 1 tabl. 3 TDS; 5 days.	3. Rp.:	Furosemidi D.t.d. № 30 S. 1 tabl. 2 times a day; 5
	#		days.
			#
2. Rp.:	Aldactoni 0,025	4. Rp.:	Dichlothiazidi
	D.t.d. in tab. № 50		D.t.d. № 20 in amp.
	S.		S.1 tabl. 4 times a day; 10
	#		days
			#

## Tests

Describe the drugs using following schemes:

- 1. Pharmacological group  $\rightarrow$  Interchangeability  $\rightarrow$  Mechanism of action.
- 2. Pharmacological effects  $\rightarrow$  Indications  $\rightarrow$  Dosage.
- 3. Side effects  $\rightarrow$  Contraindications  $\rightarrow$  Principles of rational administration.

# Drugs

1.Hydrochlorthiazide*	4.Triamteren	7.Theobromin
2.Mannitol	5.Verospirone	8.Lespenephril
3.Furosemide*	6.Acetazolamide*	

For agents, marked with asterisk, point out the dosage.

### Submodule 5 Drugs affecting the system of blood, methabolism and immunity.

# DIRECT-ACTING AND INDIRECT-ACTING ANTICOAGULANTS. ANTIAGGREGANTS. FIBRINOLYTICS. HEMOSTATICS. COAGULANTS OF THE SYNTHETIC, ANIMAL, PLANT ORIGIN.

### **Topicality of the subject.**

The disorders of blood coagulation in the body (imbalance between the systems increasing and decreasing of blood-clotting time) lead to bleedings (on the one hand) or thromboses (on the other hand).

These pathologic states (caused by different reasons) may be dangerous for life. That's why both bleedings and thromboses require the pharmacological correction by drugs affecting blood coagulation.

#### Theoretical questions.

- 1. The physiologic mechanism of blood coagulation.
- 2. The classification of drugs affecting blood coagulation.
- 3. The pharmacological description of drugs decreasing blood-clotting time.
- 4. The pharmacological description of drugs increasing blood-clotting time.

#### Home tasks.

#### Task 1.

Write the following prescriptions:

- 1. Heparin (Heparinum) lioph. powd. f/i, 5 ml, vial.
- 2. Dipyridamol (Dipyridamolum) tabl. 0.075.
- 3. Calcium chloride (Calcii chloridum) sol. f/i 10% 10 ml, amp.
- 4. Aminocapronic acid (Acidum aminocapronicum) sol. f/i 5% 100 ml, vial.
- 5. Fibrinogen (Fibrinogenum) powd. f/i 1,0 250 ml, vial.
- 6. Phenindion (Phenindionum) tabl. 0.03.

## Task 2.

Learning the classification of drugs affecting blood coagulation fill in the table:

Pharmacological group	Drugs
1. Anticoagulants	
2. Fibrinolytics	
3. Hemostatic agents of plant origin	
4. Antiaggregants	
5. Fibrinolysis inhibitors	

# Task 3.

Fill in the table concerning the indications for drugs affecting blood coagulation:

Indications	Drugs
1. Thrombosis	
2. Myocardial infarction	
3. Bleedings caused by fibrinogen deficiency	
4. Trophic ulcers of legs	
5. Uterine bleedings	

# Class tasks.

# Task 1.

Divide the drugs affecting blood coagulation into following groups: directacting anticoagulants (A), indirect-acting anticoagulants (B), fibrinolytics (C), fibrinolysis inhibitors (D), coagulants (E), antiaggregants (F), aggregants (G), plant origin hemostatic agents (H). Match letters with numbers. Point out the dosage for drugs marked with asterisk. Underline the new drugs.

## Drugs

- 1. Fraxyparin
- 2. Ticlid
- 3. Etamsylate
- 4. Acenocumarol
- 5. Clexan
- 6. Urokinase
- 7. Aminobenzoic acid
- 8. Phenindion\*
- 9. Dipyridamol
- 10. Streptokinase
- 11. Heparin\*
- 12. Fibrinogen\*

- 13. Sincumar\*
- 14. Thrombin
- 15. Gelatinol
- 16. Nettle herb
- 17. Calcium chloride
- 18. Vicasol\*
- 19. Aminocapronic acid\*
- 20. Water pepper herb
- 21. Acetylsalicylic acid\*
- 22. Fibrinolysin
- 23. Heparin ointment
- 24. Alteplase

#### Task 2.

Choose the correct mechanism of action for each group of drugs affecting blood coagulation. Match the letters with numbers.

#### Pharmacological groups

- A. Direct-acting anticoagulants D. Antiaggregants
- B. Indirect-acting anticoagulants E. Fibrinolysis inhibitors
- C. Fibrinolytics F. Plant origin hemostatics

Mechanism of action

- 1. Inhibition of biosynthesis of coagulation system factors in liver.
- 2. Inhibition of platelet aggregation.

3. Interaction of negative charged drugs with positive charged proteins of blood coagulation system that leads to inhibition of blood coagulation at different phases.

- 4. Decrease of vascular wall permeability.
- 5. Activation of fibrinolysis.

6. Inhibition of fibrinolysis due to block of plasminogen activation and plasmin function.

### Task 3.

For understanding pharmacological properties and clinical usage of drugs affecting blood coagulation point out for each drug its pharmacological effects, indications, side effects, contraindications and find the logic connections between them describing each drug according to following scheme: drug $\rightarrow$ pharmacological effects $\rightarrow$ indications and drug $\rightarrow$ side effects $\rightarrow$ contraindications. Fill in the tables.

Table 1.

Drug	Pharmacological effects	Indications
1. Nadroparin		
2. Thrombin		
3. Vicasol		
4. Acenocumarol		
5. Aminocapronic acid		
6. Streptokinase		
7. Acetylsalicylic acid		
8. Heparin ointment		
9. Nettle herb		
10.Calcium chloride		

Table 2.

Drug	Side effects	Contraindications
1. Nadroparin		
2. Thrombin		
3. Vicasol		
4. Acenocumarol		
5. Aminocapronic acid		

6. Streptokinase	
7. Acetylsalicylic acid	
8. Heparin ointment	
9. Nettle herb	
10.Calcium chloride	

#### Task 4.

Offer the substitution of Nadroparin, Heparin ointment, Phenylin, Aspirin, Dipyridamol, Amicar, Amben, Etamsylate, Ticlid, Streptokinase, Acenocumarol: A – among the other members of pharmacological group;

B – among the trade marks.

#### Task 5.

Answer your colleague's questions:

1. Why indirect-acting anticoagulants are incompatible with the salicylates, barbiturates, antiaggregants?

2. What is the reason of bleedings caused by indirect-acting anticoagulants?

3. What pharmacological effects does Heparin have, besides the anticoagulant effect?

4. In what pharmacological group (besides antiaggregants) does Aspirin belong to?

5. What advantage does Vicasol have in comparison to the oil solution of Vitamin K?

6. What is "steal syndrome" caused by Dipyridamol?

7. What drugs (among agents affecting blood coagulation) decrease the lipid content in blood?

### Task 6.

Correct the following prescriptions:

- 1. Rp.: Sincumar 0,4
  - D.S.: 1 tablet TDS.

#

2. Rp.: Extr. Urticae fluidi 30 ml

D.S.:

#

3. Rp.: Ac. aminocapronici 5%-100 ml

D. t. N 2

S.:

### Tests.

Describe the drugs using following schemes:

- 1. Pharmacological group  $\rightarrow$  Interchangeability  $\rightarrow$  Mechanism of action.
- 2. Pharmacological effects  $\rightarrow$  Indications  $\rightarrow$  Dosage.
- 3. Side effects  $\rightarrow$  Contraindications  $\rightarrow$  Principles of rational administration.

#### Drugs

- 1. Fraxyparin5. Acenocumarol\*
- 2. Phenindion6. Dipyridamol\*
- 3. Streptokinase7. Aminocapronic acid\*
- 4. Heparin\* 8. Fibrinolysin

For agents, marked with asterisk, point out the dosage.

# CORRECTORS OF ERYTHROPOIESIS. PHARMACOLOGY OF IRON-CONTAINING DRUGS. LEUKOPOIESIS STIMULANTS.

### Topicality of the subject.

Disorders of hemopoiesis take one of the leading places among the others internal diseases. Nowadays there are new data concerning the pathogenesis of hypo- and hyperchromic anemias, leukopenias, leukemias; that's why the number of drugs affecting hemopoiesis increases. The correct usage of information about pharmacological properties of such drugs is the base for effective and safe therapy of hemopoietic disorders.

### Theoretical questions.

- 1. Physiological regulation of iron, cyanocobalamin, folic acid metabolism in the body. The kinds of pathologic disorders of hemopoiesis.
- 2. The main principles of pharmacotherapy of hemopoietic disorders.
- 3. The classification, nomenclature and pharmacodynamics of drugs affecting hemopoiesis.
- 4. The indications, side effects and contraindications.
- 5. The comparative description of drugs affecting erythro- and leukopoiesis.

#### Home tasks.

#### Task 1.

Write the following prescriptions:

- 1. Cyanocobalamin (Cyanocobalaminum) sol. f/i 0,01% 1 ml, amp.
- 2. Folic acid (Acidum folicum) tabl. 0.001.
- 3. Fercoven (Fercovenum) sol. f/i 5 ml, amp.
- 4. Ferrum-Lek (Ferrum-Lek) powd. 0.03.
- 5. Pentoxyl (Pentoxylum) tabl. 0.2.
- 6. Iron lactate (Ferri lactas) powd. 1.0.

7. Leukogen (Leukogenum) – tabl. 0.02.

# Task 2.

Divide the drugs affecting hemopoiesis into drugs for treatment irondeficiency anemia (A), hyperchromic anemia (B), leukopenia (C), erythremia (D). Match the letters with numbers.

# Drugs

1.	Ferroplex	7.	Vitohepat
2.	Pentoxyl	8.	Ferrocal
3.	Ferrum-Lek	9.	Methyluracil
4.	Cyanocobalamin	10.	Sodium nucleinate
5.	Folic acid	11.	Filgrastim
6.	Leukogen	12.	Sodium phosphate (P <sup>32</sup> )

## Class tasks.

# Task 1.

Classify the drugs affecting hemopoiesis and fill in the following table:

Stimulation of			Inhibition of		
e	rythropoiesis	leukopoiesis	e	rythropoiesis	Leukopoiesis
		Ι	Drugs		
1.	Cyanocobalam	nin*	15.	Methyl-oxyme	thyluracyl
2.	Ethyl-carboxy	phenylthiazolidin-	16.	16. Sodium phosphate marked with	
	acetate			$P^{32}$	
3.	Jectofer		17.	Iron saccharate	;
4.	Riboflavin		18.	Tocopherol	
5.	Ferroplex		19.	Hemofer	
6.	Coamid		20.	Fercoven	
7.	Folic acid*		21.	Ferrum-Lek	
8.	Filgrastim		22.	Ferbitol	

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# 9. Ferro-gradumet

- 10. Human erythropoietin
- 11. Molgramostim
- 12. Ascorbic acid\*

14. Copper sulfate

- 13. Magnesium sulfate
  - Point out the dosage for drugs marked with asterisk.

### Task 2.

Divide the drugs affecting hemopoiesis into iron-containing agents (A), colony-stimulating factors (B), erythropoietins (C) and leukopoiesis stimulants (D). Match the letters with numbers.

### Drugs

- 1. Tardiferon5. Ferbitol2. Epomax6. Molgramostim3. Sodium nucleinate7. Hemastimulin
- 4. Methyl-oxymethyluracyl

### Task 3.

Learning the mechanism of action of drugs affecting hemopoiesis choose the correct mechanism for each drug. Match letters with numbers.

## Drugs

- 1. Human erythropoietin
- 2. Molgramostim
- 3. Cyanocobalamin
- 4. Mercaptopurin
- 5. Folic acid

- 6. Iron saccharate
- 7. Iron sulfate
- 8. Methyl-oxymethyluracyl
- 9. Pentoxyl
- 10. Myelosan

- 23. Pyridoxin\*
- 24. Sodium nucleinate
- 25. Myelosan
- 26. Mercaptopurin
- 27. Dopan

# Mechanism of action

- 1. Stimulation of proliferation and differentiation of blood cells precursors that leads to different groups of leukocytes formation.
- 2. Inhibition of leukocytes formation.
- 3. Stimulation of nucleic acid synthesis.
- 4. Stimulation of hemoglobin synthesis.
- 5. Participation in nucleic acid synthesis and stimulation of normoblast formation and maturation.
- 6. Stimulation of proliferation and differentiation of erythrocytes.

### Task 4.

Describe the drugs affecting hemopoiesis according to following scheme: drug $\rightarrow$ pharmacodynamics $\rightarrow$ indications $\rightarrow$ side effects $\rightarrow$ contraindications. Fill in the table. Find the logic connection between the positive and negative effects of drugs and their indications and contraindications.

Drug	Pharmaco-	Indications	Side	Contra-
	dynamics		effects	indications
1. Cyanocobalamin				
2. Iron sulfate				
3. Human erythropoietin				
4. Filgrastim				
5. Folic acid				
6. Tardiferon				
7. Methyl-oxymethyluracyl				

# Task 5.

Answer the doctor's questions:

1. When is it correctly to administrate the iron-containing drugs: after or before meals?

- 2. How long does the course of therapy in iron-deficiency anemia last (by ironcontaining drugs)?
- 3. How long must patient administrate the iron-containing drugs after the normalization of blood characteristics? What should be their dosage?
- 4. Why is cyanocobalamin or folic acid not indicated for treatment of irondeficiency anemia?
- 5. What food contains iron?
- 6. What food or drugs can alter the iron absorption from gastrointestinal tract?
- 7. What are the symptoms of iron-containing drugs overdose?

#### Task 6.

Offer the substitution of Iron sulfate, Ferrum-Lek, Cyanocobalamin,

Filgrastim, Leukogen:

- A among the other members of pharmacological group;
- B among the trade marks.

### Task 7.

Correct the following prescriptions:

1. Rp.: "Ferroplexi" 100,0

D.S.: 2 tablets in the morning before meals

#

2. Rp.: Pentoxyli

D. t. d. N 12 in tab.

S.: 1 tablet a day during 5-7 days

#

3. Rp.: Acidi folici 0,01

D. t. d. N 20 in tab.

S. 1 tablet three times a day.

# Tests.

Describe the drugs using following schemes:

10.Pharmacological group  $\rightarrow$  Interchangeability  $\rightarrow$  Mechanism of action.

11.Pharmacological effects  $\rightarrow$  Indications  $\rightarrow$  Dosage.

12.Side effects  $\rightarrow$  Contraindications  $\rightarrow$  Principles of rational administration.

## Drugs

1.	Ferrum-Lek	5.	Folic acid
2.	Human erythropoietin	6.	Ferbitol
3.	Leukomax	7.	Ferroplex
4.	Cyanocobalamin*	8.	Filgrastim

For agents, marked with asterisk, point out the dosage.

# HORMONAL DRUGS OF HYPOTHALAMUS, PITUITARY GLAND, THYROID AND PARATHYROID GLANDS, PANCREAS. ORAL HYPOGLYCEMIC DRUGS.

### Topicality of the subject.

Nowadays the number of patients with endocrine disorders increases. The diabetes mellitus, hypothyroidism, hyperthyroidism are the most widespread endocrine diseases. There are many hormonal drugs which are used clinically, that's why it's necessary for pharmacist to know the pharmacology of these drugs.

### Theoretical questions.

1. The nomenclature, classification and indications of drugs affecting the production of pituitary gland hormones.

2. The classification and nomenclature of drugs that mimic the activity of pituitary gland hormones.

3. The pharmacodynamics of hormonal drugs of pituitary gland and hypothalamus.

4. The pharmacological effects and indications of thyroidal drugs.

5. The mechanism of antithyroidal drugs action.

6. The indications and side effects of antithyroidal drugs.

7. The parathyroidal drugs. Their pharmacological effects and indications.

8. The classification of insulins (depending on the origin, duration of action,

etc.), their mechanism of action, pharmacodynamics and indications.

9. Oral hypoglycemic agents. Classification, nomenclature, mechanism of action.

10. The peculiarities of pharmacodynamics of sulfonylurea derivatives and biguanide derivatives. The indications of oral hypoglycemic drugs.

## Home tasks.

### Task 1.

Write the following prescriptions:

- 1. Corticotropin (Corticotropinum) 1ml (20U), vial.
- 2. Pituitrin (Pituitrinum) 1 ml (5U), vial.
- 3. Thyroidine (Thyreoidinum) powd. 0.02, vial.
- 4. Thiamazol (Thiamazolum) tabl. 0.005
- 5. Parathyroidine (Parathyreoidinum) 1 ml, vial.

# Task 2.

Before preparing the report for endocrinologists, please, recollect:

- the structure of pituitary gland and its role in the body;
- the names of hormones which are produced by pituitary gland, thyroid gland, parathyroid glands and pancreas;
- the classification of hormonal drugs.

# Class tasks.

# Task 1.

Classify the hormonal and antihormonal drugs. Match the letters with numbers.

Pharmacological groups

- A- drugs affecting the secretion of pituitary gland hormones;
- B- hormonal drugs of pituitary gland;
- C- hormonal drugs of thyroid gland;
- D- hormonal drugs of parathyroid glands and agents regulating phosphoric and calcium metabolism;
- E- insulins;
- F- oral hypoglycemic agents;
- G- antithyroidal drugs.

## Drugs

1.Somatoliberin	11. Glyclaside	21. Parathyroidine*
2. Somatotropin	12. Glybenclamide	22. Bromocryptin
3. Levothyroxine sodium	13. Thyroidine*	23. Gonadorelin
4. Calcitonin	14. Lactin	24. Lysproinsulin
5. Adiurecrin	15. Oxytocin*	25. Amorphous insulin
6. Thyreocomb	16. Thiamazol*	Zinc suspension
7. Corticotropin*	17. Dihydrotachisterol	26.Menopausal
8. Prothyrelin	18. Danazol	gonadotropin
9. Intermedin	19. Acarbose	
10.Synthetic salmon	20. Human insulin for	
calcitonin	injections	

Write the dosage for drugs marked with asterisk. Underline the new drugs.

# Task 2.

Drugo

Divide the following drugs into such groups:

I. Thyroidal drugs (A - monocomponent agents, B - combined agents);

II. Antithyroidal drugs;

III. Oral hypoglycemic drugs (A- sulfonylurea derivatives, B – biguanide derivatives).

	Drugs
1.Methformine	6. Glyclaside
2. Propylthiouracyl	7. Thiamazol
3. Thyreocomb	8. Glybenclamide
4. Tolbutamide	9. Buformine
5. Thyroidine	10. Levothyroxine sodium

# Task 3.

After learning the mechanism of action of hormonal drugs, match the pharmacological groups with their mechanism of action.

# Pharmacological groups

A-	Insulins;		
B-	Oral hypoglycemic agents (sulfonylurea derivatives);		
C-	Oral hypoglycemic agents (biguanide derivatives).		
	Mechanism of action		
1.	Stimulation of insulin production by $\beta$ -cells of Langerhands islands.		
2.	Partisipation in carbohydrate metabolism: improvement of gluco		
utilization by tissues due to increase of cell membrane permeability for glucose.			
3	Inhibition of gluconeogenesis in the liver stimulation of glycolysis		

3. Inhibition of gluconeogenesis in the liver, stimulation of glycolysis in peripheral tissues, increase of the binding to insulin receptors, decrease of the glucose absorption in GIT, inhibition of insulin inactivation.

## Task 4.

Choose for each drug its pharmacological effects and indications and describe the drugs according to following scheme: drug  $\rightarrow$  pharmacodynamics  $\rightarrow$  indications.

Drugs

I. Human insulin for injections	VI. Oxytocin
II. Methformine	VII. Thiamazol
III. Corticotropin	VIII. Thyroidine
IV. Danazol	IX. Calcitonin
V. Somatotropin	X. Parathyroidine

# Pharmacological effects

1. Inhibition of gonadotropic hormones (follicle-stimulating and luteinizing hormones) secretion.

- 2. Hypoglycemic effect.
- 3. Anabolic effect.
- 4. Anorexigenic effect.
- 5. Antiallergic effect.
- 6. Increase of milk production.

glucose

- 7. Fibrinolytic effect.
- 8. Antiinflammatory effect.
- 9. Increase of tissue growth and differentiation.
- 10. Increase of uterine contractions.
- 11. Immunosuppressive effect.
- 12. Increase of the functional activity of nervous and cardiovascular systems.
- 13. Inhibition of thyroid gland activity.
- 14. Increase of phosphorus and calcium concentration in blood.
- 15. Increase of phosphorus and calcium content in bones.
- 16. Inhibition of basal metabolism.

# Indications

A. Hypophysis dwarfism	K. Osteoporosis
B. Insulin-independent diabetes	L. Endometriosis
C. Postnatal uterine bleedings	M. Spasmophilia
D. Hyperglycemic coma	N. Hypercalcemia
E. Labor induction	O. Tetany
F. Insulin-dependent diabetes	P. First type diabetes combined with
G. Hypogalactia	obesity
H. Hypothyroidism	Q. Secondary hypofunction of the adrenal
I. Hyperthyroidism	gland cortex
J. Benign tumor of mammary gland	

#### Task 5.

Answer the questions:

1. What drug is used for diagnostics of endocrinopathies?

2. What is the principle of rational administration for Corticotropin avoiding the "abolition" syndrome?

- 3. What drugs have to be used together with Insulin for decrease of insulin dose?
- 4. What Thyroidine side effects are dangerous for patient's life?
- 5. Give the pharmacological description of Lactin, Acarbose, Pituitrin, Isodibute.

#### Task 6.

Offer the substitution of Gonadotropin menopausal, Danazol, Thiamazol,

Calcitonin, Human insulin for injections, Tolbutamide:

- A among the other members of the pharmacological group;
- B among the trade marks.

#### Task 7.

Correct the following prescriptions:

Rp.: Thyreoidini 0,5
 D.S. 1 tablet 3 times a day
 #

- 2. Rp.: Insulinum 10 ml
  D.t.d. N 5 in flaconis
  S. To introduce s/c.
  #
- Rp.: Tab. Mercazolili 0,05
   D.S. 1 tablet a day.
- 4. Rp.: Methformini 0,005D.t.d. N 100S. As always

#### Tests.

Describe the drugs using following schemes:

- 1. Pharmacological group Interchangeability Mechanism of action.
- 2. Pharmacological effects Indications Dosage.\*
- 3. Side effects Contraindications Principles of rational administration.

Drugs

1. Glybenclamide\*

5. Oxytocin

- 2. Human insulin for injections
- 3. Thyreoidine
- 4. Thiamazol

- 7. Menopausal gonadotropin
- 8. Somatoliberin

6. Methformine

For agents, marked with asterisk, point out the dosage.

# HORMONAL DRUGS OF ADRENAL GLAND CORTEX AND GONADS. ANABOLIC STEROIDS. CONTRACEPTIVES. DRUGS AFFECTING MYOMETRIUM (UTEROTONICS AND UTEROLYTICS).

#### Topicality of the subject.

There are great number of inflammatory and allergic diseases that are treated using the hormonal drugs of adrenal gland cortex. Their immunosuppressive effect is useful for transplantation of organs. The usage of hormonal drugs of gonads results in sterility treatment and contraception.

#### Theoretical questions.

1. The classification and nomenclature of hormonal drugs of adrenal gland cortex.

2. What pharmacological effects and mechanism of action results in usage of glucocorticoids for:

- treatment of inflammatory diseases;

- treatment of allergic reactions;

- transplantation of tissues and organs;

- treatment of shock.

3. The indications and side effects of gluco- and mineralcorticoids.

4. The classification and mechanism of action of drugs with activity of female sex hormones.

5. The differences between pharmacodynamics of estrogens and gestogens.

6. The indications and side effects of drugs of female sex hormones.

7. The pharmacological description of contraceptives.

8. Drugs affecting myometrium (classification, mechanism of action, pharmacodynamics, indications, side effects, contraindications).

9. The pharmacological description of anabolics and androgens. The differences and similarities between androgens and anabolics.

### Home tasks.

#### Task 1.

Write the following prescriptions:

- 1. Prednisolon (Prednisolonum) tabl. 0.005.
- 2. Hydrocortison (Hydrocortisonum) sol. f/i 2.5% 5 ml, vial.
- 3. Locacorten (Locacortenum) oint. 0.02% 15.0.
- 4. Dexamethason (Dexamethasonum) tabl. 0.005.
- 5. Estron (Oestronum) oil sol. f/i 0,1% 1 ml, amp.
- 6. Testosteron propionate (Testosteroni propionas) sol. f/i 1% 1 ml, amp.

#### Task 2.

Answer the questions:

1. What is the reason of death in case of adrenal cortex excision (adrenectomy)?

**2.** What is the classification of female sex hormones? What are their physiological functions in the body?

#### Task 3.

Divide the following hormonal drugs into: hormonal drugs of adrenal cortex (A); female sex hormones (B); drugs affecting the myometrium (C).

#### Drugs

- 1. Oxytocin
- 2. Betamethason
- 3. Prednisolon
- 4. Progesteron
- 5. Pregnin
- 6. Hexoprenalin
- 7. Dinoprost
- 8. Ergotamin
- 9. Synestrol

- 10. Dexamethason
- 11. Triamcinolon
- 12. Estron
- 13. Phenoterol
- 14. Pituitrin
- 15. Testenate
- 16. Estradiol
- 17. Allylestrenol
- 18. Methyltestosteron

# Task 4.

Choose for each group of hormonal drugs the pharmacological effects. Match letters with numbers.

# Pharmacological groups

- A. Hormonal drugs of adrenal gland cortex.
- B. Hormonal drugs of estrogens.
- C. Hormonal drugs of gestagens.
- D. Hormonal drugs of androgens.

# Pharmacological effects

- 1. Inhibition of proliferation of connective tissue and T-lymphocytes.
- 2. Uterotonic effect.
- 3. Inhibition of ovulation.
- 4. Retention of sodium ions and water; elimination of potassium ions from the body.
- 5. Uterolityc effect.
- 6. Androgenic effect.
- 7. Estrogenic effect.
- 8. Gestagenic effect.
- 9. Decrease of vascular permeability.
- 10. Increase of vascular sensitivity to adrenaline.
- 11. Antiinflammatory effect.
- 12. Stimulation of protein synthesis.
- 13. Immunosuppressive effect.
- 14. Antitoxic effect.
- 15. Antishock effect.

### Class tasks.

## Task 1.

Classify the hormonal drugs. Match the letters with numbers.

Pharmacological groups

- A. Hormonal drugs of female sex hormones:
- a. gestagens;
- b. estrogens.
- B. Hormonal drugs of male sex hormones (androgens);
- C. Anabolic steroids.
- D. Hormonal drugs of adrenal corticosteroids:
- a. glucocorticoids;
- b. mineralcorticoids.

Underline the new drugs. Point out the dosage for drugs marked with asterisk.

### Drugs

- 1. Ethynylestradiol
- 2. Testosteron propionate\*
- 3. Silabolin
- 4. Budesonid
- 5. Desoxicorticosteron acetate
- 6. Dexamethason
- 7. Allylestrenol
- 8. Tetrasteron
- 9. Pregnin
- 10. Prednisolon\*
- 11. Triamcinolon
- 12. Synestrol
- 13. Progesteron\*
- 14. Beclomethason

- 15. Estron
- 16. Methylandrostendiol
- 17. Hydrocortison
- 18. Methyltestosteron
- 19. Dimestrol
- 20. Nadrolon decanoate
- 21. Estriol
- 22. Testenate
- 23. Flunisolid
- 24. Acetomepregenol
- 25. Norethysteron
- 26. Phenobolin
- 27. Betamethason
- 28. Methandrostenolon

#### Task 2.

Classify the contraceptives into following groups:

- A monophasic combined estrogen–gestagen agents;
- B diphasic combined estrogen-gestagen agents;
- C-triphasic combined estrogen-gestagen agents;
- D-microdoses of gestagens;
- E postcoital agents;
- G vaginal contraceptives (spermicidal agents).

Match the names of groups (letters) with names of drugs (numbers).

#### Drugs

1.	Continuin	10.	Norgestrel
2.	Tri-regol	11.	Triquilar
3.	Anteovin	12.	Milvane
4.	Postinor	13.	Phemoden
5.	Nonoxinol	14.	Benzalkonium chloride
6.	Microlute	15.	Minizistone
7.	Medroxyprogesterone acetate	16.	Diane-35
8.	Levonorgestrel	17.	Non–Ovlon
9.	Marvelone	18.	Rigevidone

Pay the attention on mechanism of action of different groups of contraceptives.

Match the names of drugs (arabic numerals) with their mechanism of action (roman numerals).

### Mechanism of action

- I.Inhibition of the hypothalamus–hypophysis system (inhibition of FSH, LH production).
- II. Damage of the spermatozoon's cell membrane resulting in fragmentation and death of spermatozoons.

- III. Change of the normal secretory phase of the menstrual cycle; induction of the temporary atrophic changes in the ovaries.
- IV. Decrease of the cervical mucosa production and change of its physical and chemical properties; inhibition of endometrium proliferation; inhibition of the uterine tubes motility.
- V. Inhibition of the of FSH, LH production; suppression of the ovulation; increase of the cervical mucosa viscosity; interruption of the fetal ovum implantation; prevention of the spermatozoons movement.

## Task 3.

Divide the drugs affecting myometrium into uterotonics (A) and uterolytics (B). Match the letters with numbers. Point out the dosage for agents marked by asterisk.

### Drugs

1. Oxytocin\* 10. Gynepral Phenoterol\* 2 11. Ergotal 12. Methyloxytocin 3. Turinal 4. Cotarnine chloride 13. Prostenon 5. Estron 14. Salbupart Shepherd's purse herb 15. Ritodrin 6. 7. Pituitrin 16. Dinoproston\* 8. Dinoprost 17. Estradiol dipropionate Sigetin 9.

### Task 4.

Learning the pharmacological properties of estrogens match their pharmacological effects with indications and contraindications.

Pharmacological effects

- 1. Proliferation of endometrium.
- 2. Stimulation of uterus and secondary sexual characters development.

- 3. Stimulation of uterine contractions.
- 4. Dilation of brain and peripheral blood vessels.
- 5. Decrease of smooth muscles tone.
- 6. Proliferation of gastric and intestinal mucous membrane.
- 7. Inhibition of gonadotropic hormones secretion.

### Indications

- 1. Sterility.6. Inhibition of lactation.
- Infantilism.
   Infantilism.
   Hormone-dependent tumors of male reproductive system and female reproductive system among the elderly women (after menopause).
   Climacteric period.
   Peptic ulcer.
- 4. Spasm of peripheral blood 9. Cholecystitis(gallbladdervessels.inflammation).
- 5. Hypoplasia of mammary glands. 10. Labor induction.

Contraindications

- 1. Uterine bleeding.
- 2. Predisposition to malignant tumors.
- 3. Pregnancy.

### Task 5.

Chose for hormonal drugs of androgens (A), mineralcorticoids (B); anabolic steroids (C) their pharmacological effects. Match letters with numbers.

### Pharmacological effects

- 1. Causing of the positive nitrogen balance.
- 2. Increase of the protein content in organs and tissues.
- 3. Development of secondary male sexual characters.
- 4. Vasodilatation.
- 5. Stimulation of spermatogenesis.

6. Suppression of tumor growth in female reproductive system (among young women).

- 7. Improvement of myocardial trophism.
- 8. Retention of sodium ions and water in the body.
- 9. Increase of skeletal muscles tone.
- 10. Hypopotassemia.

#### Task 6.

Leaning the pharmacodynamics of glucocorticoids divide the pharmacological effects of these drugs into positive (therapeutic) (A) and negative (side) (B). Match the letters with numbers.

#### Pharmacological effects

- 1. Anti-inflammatory effect. 7. Mental disorders (euphoria, hallucinations).
- 2. Ulcerogenic effect. 8. Immunosupressive effect.
- Disorders of water-salt 9. Exacerbation of chronic infectious disease. metabolism.
- 4. Antiallergic effect. 10. Antitoxic effect.
- 5. Inhibition of ACTH 11. Hyperglycemia. secretion.
- 6. Antishock effect. 12. Increase of BP.

#### Task 7.

Choose for glucocorticoids (A), mineralcorticoids (B), androgens (C), anabolic steroids (D) their indications. Match letters with numbers.

#### Indications

9.

- 1. Rheumatoid arthritis. 8. Hypoadrenocorticism.
- 2. Impotency.
- 3. Dystrophy, cachexia.
- 10. Transplantation of organs.

Myasthenia.

- 4. Myocardial infarction.
- 11. Acute leukemia.

- Tumors of mammary gland 12. Addison's disease (chronic (among young women).
   adrenocortical insufficiency).
- 6. Shock.
- 7. Bronchial asthma.

- 13. Male sterility.
- 14. Chronic infections.

Nausea, vomiting.

Hypertension.

Libido decrease.

Gastro-intestinal disorders.

#### Task 8.

Preparing the report about side effects of contraceptives divide them into estrogen– dependent (A) and gestagen–dependent (B) ones. Match letters with numbers.

#### Side effects

6.

7.

8.

9.

- 1. Headache.
- 2. Increase of body weight.
- 3. Depression.
- 4. Thrombophlebitis.
- 5. Intermenstrual bleedings.

Answer the question: Why are contraceptives incompatible with laxatives, activated charcoal, inductors of microsomal liver enzymes?

#### Task 9.

Offer the substitution for Benzalkonium chloride, Rigevidone, Masipredone, Hydrocortison, Oxytocin, Pregnin, Tetrasteron, Nadrolon decanoate, Dinoprost, Partusisten:

- A among the other members of pharmacological group;
- B among the trade marks.

#### Task 10.

Recommend for the patient the correct dosing regimen for each drug. Match letters with numbers.

#### Drugs

- 1. Norplant
- 2. Depo-Provera
- 3. Methandrostenolon

- 4. Phenabolin
- 5. Retabolil
- 6. Methandrostendiol

# Dosing regimens

- 1. Before meals.
- 2. After meals.
- 3. Subcutaneously in forearm for 5 years.
- 4. Intramusculary 1 time every three months.
- 5. Subcutaneously 1 time a month.
- 6. Intramusculary 1 time every 7-15 days.
- 7. Intramusculary 1 time every 2-3 weeks.
- 8. 1 tablet 3 times a day orally.
- 9. 1 tablet 2 times a day sublingually.

# Task 11.

Answer the doctor's questions:

1. Why are Fenoterol with calcium-containing drugs and vitamin D; estrogens with indirect- acting anticoagulants; Prednisolon with anticoagulants and salicylates incompatible?

- 2. What are the chronopharmacological peculiarities of glucocorticoids dosing?
- 3. Why does danger occur in such cases:
- A. Uncontrolled administration of glucocorticoids;
- B. Long-term administration of anabolic steroids;
- C. Abrupt discontinuation of glucocorticoid therapy;
- D. Administration of estrogens for abortion?

Task 12.

Correct the following prescriptions:

1. Rp.: Testosteroni propionates 1% - 1 ml

D.S.: I/m.

#

2. Rp.: Oxytocini 1 ml

D. t. d. N 10 in amp.

 $S.: I\!/\!v$ 

#

3. Rp.: Progesteroni oleosae 5% - 1 ml

D. t. d. N 10 in amp.

S. I/v.

### Tests.

Describe the drugs using following schemes:

- 4. Pharmacological group  $\rightarrow$  Interchangeability  $\rightarrow$  Mechanism of action.
- 5. Pharmacological effects  $\rightarrow$  Indications  $\rightarrow$  Dosage.
- 6. Side effects  $\rightarrow$  Contraindications  $\rightarrow$  Principles of rational administration.

### Drugs

1.	Retabolil	6.	Oxytocin*
2.	Testosteron propionate*	7.	Phenoterol
3.	Allylestrenol	8.	Tri-regol
4.	Progesteron*	9.	Ovidone
5.	Estron	10.	Anteovin

For agents, marked with asterisk, point out the dosage.

#### Submodule 6 Chemotherapeutic drugs.

# ANTIBIOTICS: PENICILLINS, CEPHALOSPORINS, CARBAPENEMS, MONOBACTAMS, MACROLIDES, TETRACYCLINES.

#### **Topicality of the subject**

Even now infectious diseases occupy a leading position in human pathology. In this connection from year to year the arsenal of antibiotics that effectively suppress the infectious process are increased. According to WHO, antibiotics take first place in the world for mass use. The widespread use of antibiotics in medicine requires from the pharmacist deep knowledge of their mechanism and antibacterial spectrum, in creative collaboration with a physician will provide efficacy and safety of antibiotic treatment.

#### **Theoretical questions**

- 1. Classification and the rational use of antibiotics.
- 2. Routes of administration of antibiotics.
- 3. Requirements to antibiotics.
- The group of penicillin antibiotics natural and semi-synthetic.
   Classification and the mechanism of action of penicillins.
- 5. The spectrum and the type of antimicrobal action of penicillins.
- 6. Pharmacodynamics and indications of penicillins, side effects and measures to prevent them.
- 7. Classification and the mechanism, the spectrum and the type of antimicrobal action of cephalosporins.
- 8. Pharmacodynamics and indications of cephalosporins, side effects and measures to prevent them.
- 9. Classification and the mechanism, the spectrum and the type of antimicrobal action of carbapenems and monobactams.

- 10. Pharmacodynamics and indications of carbapenems and monobactams, side effects and measures to prevent them.
- 11. Classification and the mechanism, the spectrum and the type of antimicrobal action of tetracyclins.
- 12. Pharmacodynamics and indications of tetracyclins, side effects and measures to prevent them.
- 13. Classification and the mechanism, the spectrum and the type of antimicrobal action of macrolides and azalides.
- 14. Pharmacodynamics and indications of macrolides and azalides, side effects and measures to prevent them.
- 15. The mechanism, and the spectrum of action of antifungal antibiotics.
- 16. Indications of antifungal antibiotics.

# Home tasks

# Task 1.

Write the following prescriptions:

- 1. Benzylpenicillin sodium salts (Benzylpenicillinum natrium) pwd. for inj. 1000000 U
- 2. Tienam (Tienam) pwd. for inj. 0.5
- 3. Cephazolin(Cephazolinum) pwd. for inj. 0.5
- 4. Roxythromycine (Roxythromycin) tabl. 0.1
- 5. Tetracyline(Tetracylinum) eyes ointmant 3%
- 6. Erythromycine (Erythromycinum) tabl. 0.25
- 7. Doxycycline (Doxycycline hydrochloridum) caps. 0.1
- 8. Ampicillin (Ampicillinum) tabl. 0.5
- 9. Nistatin (nistatinum) tabl. 500000 U

# Task 2.

Preparing the information for therapists about the antibiotics of the following group: penicillins, cephalosporins, carbapenems and monobactams, tetracyclins,

macrolides and azalides. Fill in the table, use "+" if the corresponding index is present.

The group of	The spectrum of antimicrobal			The type of antimicrobal		
antibiotics	action			action		
	broad	moderate	narrow	Bactericidal	Bacteriostatic	
Amoxicillin						
Cephazolin						
Tetracyline						
Tienam						
Aztreonam						
Azythromycine						
Cephtriaxone						

### Task 3.

Upon the sale of drugs answer to the patient's questions:

- 1. Why pregnant women shouldn't be used tetracyclines?
- 2. How to prevent the development of dysbiosis while taking antibiotics with a broad-spectrum of action?
- 3. Why is unacceptable introduction of penicillin less 4 times a day?
- 4. Can be use semi-syntetic penicillins, if the natural one occur nettle-rash?
- 5. Explained to the mother why the penicillins and cephalosporins are most often used in pediatric practice?

6. Explain to the patient receiving tablets of tetracycline, what has caused the emergence of loss an appetite, nausea, vomiting, bloating, diarrhea?

### Class tasks

### Task 1.

Classify the antibiotic drugs. Match the letters with numbers. Point out the dosage for drugs marked with asterisk.

# Pharmacological groups

A. Natural penicillins	F. Tetracyclins
B. Aminopenicillins	G. Cephalosporins
C. Antistaphylococcal penicillins	H. Macrolides
D. Antipseudomonal penicillins	I. Azalides
E. Monobactams	J. Carbapenems
	K. Antifungal antibiotics

### Drugs

1. Benzylpenicillin sodium salts	16.Methacycline
2. Oxacillin sodium salts	17.Amphotericyne B
3. Dicloxacillin	18.Levorine
4. Bicillin-1	19.Tienam*
5. Tetracycline*	20.Doxycycline
6. Bicillin-5	21.Azlocillin
7. Phenoxymethylpenicillin	22.Cefuroxime
8. Cephepim	23.Cefotaxime
9. Aztreonam	24.Azythromycine
10.Amoxiclav*	25.Cephtriaxone
11.Ampicillin	26.Roxythromycine
12.Amoxicillin	27.Spiramycine
13.Cephazolin	28.Midecamycin
14.Carbenicillin	29.Piperacillin
15.Cephpirom	30.Cephaclor

### Task 2.

Learning the mechanism of different group of antibiotic, match the letters (mechanism of action) with numbers (names of antibiotics group).

The group of antibiotic

A. Penicillins

B. Cephalosporins

C. Tetracyclins

D. Macrolides

L. Azalides

M. Monobactams

- N. Carbapenems
- O. Antifungal antibiotics

### Mechanism of action

- 1. Inhibitors of synthesis of a microbic wall components.
- 2. Inhibitors of protein synthesis.
- 3. Inhibitors of cytoplasmatic membrane permeability.

### Task 3.

Prepare the information material for doctors on the theme: "Pharmacological characteristic of  $\beta$ -lactams, macrolides and tetracyclines", fill in the table:

tic		cillins		Ceph spori		Tetra lines	cyc-	Car- bape- nems	Mono- bac- tams	Macro lides	-
Pharmacoogical characteristic	Benzylpenicillin sodium salts	Phenoxymethylpenicillin	Bicillin-5	Cephalaxim	Cephtriaxone	Tetracycline	Doxycycline	Tienam	Aztreonam	Erythromycine	Roxythromycine

- 1. single dose for adults.
- 2. resistance to penitsilinase
- 3. the acid resistance

- 4. the route of administration
- 5. regimen of use
- 6. duration of use
- 7. ability to penetrate through the BBB
- 8. ability to penetrate through the placenta

#### Task 4.

Consult managers who access you to connection with the purchase of antibioticson on the following questions:

- 1. The difference between the spectrum of antimicrobial activity of natural penicillins from aminopenicillins, antistaphylococcal and antipseudomonal.
- 2. The difference between the spectrum of action of IV-genaration of cephalosporins from each other.
- 3. The advantages of semi-synthetic macrolides in comparison with erythromycin.
- 4. Features of the spectrum of antimicrobial action of tetracyclines.
- 5. The difference between the spectrum of action of azalides from monobactams and carbapenems.

#### Task 5.

Match the names of medicines with their indications.

#### Drugs

1. Benzylpenicillin sodium salts	8. Azlocillin
2. Erythromycine	9. Spiramycine
3. Doxycycline	10.Cefotaxime
4. Aztreonam	11.Cephopirasone
5. Ampicillin	12.Nistatin
6. Amoxicillin	13.Clocsacillin
7. Tienam	14.Azythromycine
	15.Bicillin-1

### Indications

A. prevention of infections after surgery	H. legionelas disease
B. blue pus (pseudomonal) infection	I. meningitis
C. candidomycoses of the skin and mucous	J. sepsis
D. peptic ulcer disease	K. rickettsioses
E. infections caused by Staphylococci	L. syphilis
F. diphtheria	M. brucellosis
G. lymphadenitis granulematous, trachoma	N. dysentery
	O. rheumathism

### Task 6.

Preparing the information for doctors about the antifungal antibiotics. Fill in the table.

Fungous diseases	Antibiotics	Mechanism of	Routes of
		action	administration
candidomycoses			
of the soft tissues			
dermatomycoses			
General mycoses			

# Task 7.

Choose side effects for penicillins (A), cephalosporins (B), tetracyclins (C). Match letters with numbers.

Side effects:

- 1. Allergic reaction
- 2. Photodermatitis
- 3. Dispeptices disorders
- 4. Hepatotoxicity
- 5. Nephrotoxicity
- 6. Neurotoxicity

- 7. Disbacteriosis, superinfections
- 8. Toxicity action to the blood system
- 9. Teratogenecity
- 10.Anti-anabolic action (decrease of the body weight, increase the excreature of azot with the urine)
- 11.Pain on intramuscular administration, the occurrence of phlebitis, thrombophlebitis when injected into a vein)

#### Task 8.

After learning the contraindications of penicillins, cephalosporins,

tetracyclins, macrolides match their names with their contraindications:

Antibiotics:

- 1.Penicillins3.Tetracyclins
- Cephalosporins
   Contraindications:
   Macrolides
  - 1. allergic reaction to  $\beta$ -lactams
  - 2. age under 8
  - 3. disfunction of the kidneys
  - 4. pregnancy, lactation
  - 5. severe diseases of the liver

#### Task 9.

Answer patient's questions:

- 1. Which antibiotics have postantibiotic effect?
- 2. What are the differences between cephalosporins of different generations?
- 3. What are the main general side effects for antibiotic therapy?
- 4. What is the differences between Tienam and Meronem?
- 5. What are the main princeples of correct antibiotic therapy?
- 6. What group of antibiotic provoked convulsions?

7. What mechanism of action is connected preferably to bacteriostatic and bacteriocidal effects?

8. What antibiotics are used for treatment syphilis?

9. Why in case of allergy to penicillins patient may have allergy to cephalosporins?

10. What antibiotics are traditionally widely used in pediatrics? Why?

# Task 10.

Correct the following prescriptions:

1. Rp.: tab. "Amoxiclav" №15

D.S.: 1 tablet 6 times a day

#

2. Rp.: Tetracyclini

D.t.d. №15

S.: 1 tabl. 6 times a day

#

3. Rp.: Cephazolini D.t.d. №9

S.:

# Tests

Describe the drugs using following schemes:

- 1. Pharmacological group  $\rightarrow$  Interchangeability  $\rightarrow$  Mechanism of action.
- 2. Spectrum of action  $\rightarrow$  Type of action  $\rightarrow$  Indications.
- 3. Side effects  $\rightarrow$  Contraindications  $\rightarrow$  Rules of rational administration.

# Drugs.

- 1. Amoxicillin\*4. Tienam\*
- 2. Roxythromycine 5. Cefotaxime
- 3. Nistatin

For agents, marked with asterisk, point out the dosage.

# ANTIBIOTICS OF DIFFERENT GROUPS: AMINOGLYCOSIDES, GLYCOPEPTIDES, LINCOSAMIDES, PHOSPHOMYCINES, FUSIDINES, POLYMYXINES, CHLORAMPHENICOLS, RIFAMYCINES. FLUOROQUINOLONES

#### **Topicality of the subject**

The widespread use of antibiotics in medicine requires from the pharmacist deep knowledge of their mechanism and antibacterial spectrum, in creative collaboration with a physician will provide efficacy and safety of antibiotic treatment.

#### **Theoretical questions**

- Classification and nomenclature, mechanism, spectrum and the type of action, pharmacodynamics, indications, side effects, contraindications and medicinal forms of aminoglicosides.
- 2. Classification and nomenclature, mechanism, spectrum and the type of action, pharmacodynamics, indications, side effects, contraindications and medicinal forms of glycopeptides.
- 3. Classification and nomenclature, mechanism, spectrum and the type of action, pharmacodynamics, indications, side effects, contraindications and medicinal forms of lincosamides.
- 4. Classification and nomenclature, mechanism, spectrum and the type of action, pharmacodynamics, indications, side effects, contraindications and medicinal forms of phosphomycines.
- Classification and nomenclature, mechanism, spectrum and type of action, pharmacodynamics, indications, side effects, contraindications and medicinal forms of fusidines.
- Classification and nomenclature, mechanism, spectrum and type of action, pharmacodynamics, indications, side effects, contraindications and medicinal forms of polymyxines.

- Classification and nomenclature, mechanism, spectrum and type of action, pharmacodynamics, indications, side effects, contraindications and medicinal forms of chloramphenicols.
- Classification and nomenclature, mechanism, spectrum and type of action, pharmacodynamics, indications, side effects, contraindications and medicinal forms of rifamycines.
- Classification and nomenclature, mechanism, spectrum and type of action, pharmacodynamics, indications, side effects, contraindications and medicinal forms of fluoroquinolones.
- 10. Rational combinations of those antibiotics.

# Home tasks

# Task 1.

Write the following prescriptions:

- 1. Levomycetine (Laevomycetinm) tabl. 0.5, sol. 3 %
- 2. Gentamycine (Gentamycini sulfas) 4% 2 ml in amp.
- 3. Streptomycine (Streptomycini sulfas) pwd. for inj. 0.5
- 4. Polymyxine B sulphate (Polymyxini B sulphas) pwd. for inj. 0.05
- 5. Amycacine (Amycacin sulfate) sol. for inj. 5 %
- 6. Lincomycine (Lincomycini hydrochloridum) sol. for inj. 30 %
- 7. Rifampicine (Rifampicinum) caps. 0.6
- 8. Cyprofloxacine (Cyprofloxacin) tabl. 0.25

### Task 2.

Prepare the information for doctors about antibiotics. Fill the table.

Pharma-	Amino-	Polymyxines	Chloram-	Fluoro-
cological	glicosides		phenicols	quinolones
characteristics				
the spectrum				
of antimicro-				

bal action		
the type of		
antimicrobal		
action		
Absorption		
from gastro-		
intestinal tract		
ability to pene-		
trate through		
the placenta		
ability to pene-		
trate through		
the BBB		

# Task 3.

Distribute the antibiotics over the spectrum of action. Fill in the table.

Drugs are active aga	inst G <sup>+</sup> microorga-	Drugs with a broad spectrum of action		
nisms and G <sup>-</sup> cocci				
bactericidal bacteriostatic		bactericidal	bacteriostatic	
action	action	action	action	

### **Class tasks**

# Task 1.

Classify the antibiotics into following groups:

- A. Aminoglicosides
- B. Chloramphenicols
- C. Glycopeptides
- D. Fluoroquinolones
- E. Antibiotics of different group

	Drugs
1. Neomycine	12.Norfloxacine
2. Syntomycine	13.Rifampicine
3. Fusidine natrium	14. Ristomycina sulfas
4. Chloramphenicol*	15. Vancomycine
5. Clindamycine	16. Amycacine
6. Lomefloxacine	17. Ofloxacine
7. Canamycine	18.Gentamycine
8. Pefloxacine	19.Polymyxine B sulphate
9. Gramycidine	20.Cyprofloxacine
10.Lincomicina hydrochloride	21.Streptomycine
11.Tobramycine	22.Netilmycine

Drugs

#### Task 2.

Learning the mechanism of action antibiotics of different group match the letters (mechanism of action) with numbers (names of group).

Group of antibiotics

1.	Aminoglicosides	4. Glycopeptides
	6	

- 2. Lincosamides 5. Fluoroquinolones
- 3. Chloramphenicols6. PolymyxinesMechanism of action:

A. Antibiotics disturb the synthesis of bacterial proteins

- B. Antibiotics break the structure and function of cytoplasmatic membranes
- C. Antibiotics suppress the synthesis of the cellular wall peptidoglycane
- D. Antibiotics inhibit DNA-gyrase (topoisomerase) of bacteria and it leads to disturbance of biosynthesis of DNA, RNA.

#### Task 3.

Point out the spectrum and the type of action with antibiotics. Antibiotics

- 2. Lincosamides
- 3. Chloramphenicols
- 4. Rifampicine

The spectrum of action

A. – broad

B. – narrow

C. – moderate

- 5. Glycopeptides
- 6. Fluoroquinolones
- 7. Polymyxines
- 8. Fusidine

The type of antimicrobal action

- a). bactericidal
- b). bacteriostatic

### Task 4.

Match the names of medicines with their indications.

Antibiotics

- 1. Aminoglicosides
- 2. Lincosamides
- 3. Chloramphenicols
- 4. Rifampicine

### Indications

- 1. Pseudomembranous colitis
- 2. Pseudomonas infection
- 3. infections of skin, soft tissues
- 4. abdominal and pelvis infections
- 5. severe wound infections
- 6. staphylococcal infections

7. Polymyxines

6. Fluoroquinolones

5. Glycopeptides

- 8. Fusidine
- 7. intestinal infections
- 8. tuberculoses
- 9. osteomyelitis
- 10.sepsis
- 11.typhoid fever
- 12.rickettsioses
- 13.meningitis

# Task 5.

Answer your college's questions:

### Task 6.

Tell your colleague about side effects of antibiotics. Match the most characteristic side effects using «+». Point out antibiotics with side effects.

Antibiotics	allergic reactions	inhibition of renal function	inhibition of hematopoiesis	inhibition of VIII pairs of cranial nerves	dysbiosis, superinfection	teratogenecity	non-depolarizing effect	Neurotoxicity	dysplasia of cartilage tissue among children	pseudomembranous colitis
Aminoglicosides										
Chloramphenicol										
Polymyxines										
Fluoroquinolones										
Lincosamides										

Contraindications

- A. allergic reactions
- B. pathogen resistance
- C. inhibition of VIII pairs of cranial
- D. miasthenia
- E. pregnancy
- F. dysfunction of the kidneys
- G. inhibition of hematopoiesis
- H. dysfunction of the liver
- I. psoriasis, eczema
- J. simultaneous use with nephrotoxic drugs
- K. first months of life
- L. age under 8
- M. lactation
- N. age under 16

#### Task 7.

Analyze the combinations of antibiotics that are represented in sheets of appointments: the rational (A) or irrational (B).

- 1. Penicillins+Streptomycine
- 2. Streptomycine+Canamycine
- 3. Carbenicillin+Gentamycine
- 4. Cephalosporins+ Aminoglicosides
- 5. Levomycetine+ Gentamycine
- 6. Levomycetine+Sulphanilamides

#### Task 8.

Correct the following prescriptions:

 Rp.: Gentamycini sulfatis – 2 ml D.t.d. №20 in amp.

S.: i/m

#

2. Rp.: Levomycetini

D.t.d. Nº6 in tab.

S.

#### #

3. Rp.: Ristomycini sulfatis 500000 ED

D.t.d. №5 in amp.

S.: i/m

#

4. Rp.: Ciprofloxacini

D.t.d. No20 in tab.

S.

### 5. Rp.: Rifampicini

D.t.d. №30

S.

### Tests

Describe the drugs using following schemes:

1. Pharmacological group  $\rightarrow$  Interchangeability  $\rightarrow$  Mechanism of action  $\rightarrow$  Spectrum of action.

- 2. Pharmacological effects  $\rightarrow$  Type of action  $\rightarrow$  Indications  $\rightarrow$  Dosage.
- 3. Side effects  $\rightarrow$  Contraindications  $\rightarrow$  Rules of rational administration.

# Drugs.

1. Ampicillin*	5. Cephasoline*
2. Tetracycline*	6. Norfloxacine
3. Chloramphenicol*	7. Polymyxine
4. Erythromycine	8. Lincomicine

For agents, marked with asterisk, point out the dosage.

#### SULFONAMIDES. ANTITUBERCULOUS MEDICINES

#### **Topicality of the subject**

Sulfonamides are the oldest group of chemotherapeutic agents used clinically. Now sulfonamides are still widely used for treatment different infections. But they may cause serious side effects. That's why it's important to know the pharmacology of sulfonamides.

The tuberculosis is one of the most dangerous infectious diseases, because of its contagiosity. It's necessary to know the principles of effective therapy of tuberculosis.

#### **Theoretical questions**

- 1. Classification and nomenclature of sulfonamides.
- 2. Pharmacokinetics of sulfonamides.
- 3. Mechanism and type of action of sulfonamides. What does type of action depend on?
- 4. Pharmacodynamics of different groups of sulfonamides.
- 5. Spectrum of action and indications of sulfonamides.
- 6. Side effects, contraindications, principles of rational administration of sulfonamides.

#### Home tasks

#### Task 1.

Write the following prescriptions:

- 1. Sulfacetamide (Sulfacetamidum) sol. 30% 10 ml, eye drops.
- 2. Streptocide (Streptocidum) lin. 10% 50.0.
- 3. Sulfalen (Sulfalenum) tabl. 0.2.
- 4. Streptomycin sulfate (Streptomycini sulfas) tabl. 0.2.
- 5. Rifampicin (Rifampicinum) caps. 0.15.

- 6. Co-trimoxazole (Co-trimoxazolum) tabl. N 20.
- 7. Ethambutol (Ethambutolum) tabl. 0.1.

#### Task 2.

Answer your colleague's questions:

- 1. Name the resorbtive-acting sulfonamides.
- 2. What sulfonamides are used for treatment of GIT infections?
- 3. What sulfonamides are used for treatment of urinary tract infections?
- 4. Why does Co-trimoxazole have bactericidal effect?
- 5. What is difference between the drugs for tuberculosis treatment of first- and second– line therapy?
- 6. What are principles of tuberculosis treatment?

#### **Class tasks**

#### Task 1.

Divide the following drugs into sulfonamides (A) and agents for treatment tuberculosis (B). What agents belong to "first line" (I) and "second line" (II) therapy of tuberculosis? For agents, marked with asterisk, point out the dosage. Underline the new drugs.

Drugs.

- 1. Ethionamide
- 2. Isoniasid
- 3. Salazopiridazin
- 4. Ethazol
- 5. Cycloserine\*
- 6. Phthalazol\*
- 7. Sulfadimetoxin
- 8. Streptomycin
- 9. Rifampin

- 13. Bactrim\*
  - 14. Saluzid
  - 15. Prothionamide
  - 16. Pirazinamide
  - 17. Ethambutol
  - 18. Urosulfan
  - 19. Sulfaguanidine
  - 20. Lidaprim
  - 21. Mafenide\*

- 10. Pasomycin
- 11. Sulfacetamide
- 12. Sulfatone

- 22. Algimafe
- 23. Silver sulfadiazine
- 24. Capastat

### Task 2.

Classify the resorbtive-acting sulfonamides. Match letters with numbers. Pharmacological groups.

- A. Short-acting sulfonamides.
- B. Long-acting sulfonamides.
- C. Superlong-acting sulfonamides.
- D. Sulfonamides combined with trimethoprim.
- E. Derivatives of sulfonamides and salicylic acid.

### Drugs.

1.	Streptocide	9.	Sulfadimetoxin
2.	Urosulfan	10.	Salazodimetoxin
3.	Sulfaethidol	11.	Ditrim
4.	Sulfamonomethoxin	12.	Sulfadiazine
5.	Co-trimoxazole	13.	Norsulfazole
6.	Sulfathiazole	14.	Sulfapiridazin
7.	Sulfadimidin	15.	Potesetta
8.	Sulfalen	16.	Salazopiridazin

### Task 3.

Describe the pharmacological properties of different sulfonamides filling in the table:

Drug	Mechanism of	Type of action	Pharmacological
	action		effects
Sulfonamide			
Sulfamonomethoxin			

Sulfadiazine		
Silver sulfadiazine		
Mafenide		
Co-trimoxazole		
Phthalylsulfathiazole		
Salazodimetoxin		
Sulfacetamide		
Sulfatone		

#### Task 4.

Learning the pharmacology of sulfonamides pay your attention at the spectrum of their action. Divide the following microorganisms into very sensitive (A), sensitive (B), resistant (C) ones.

3.41	•
Macroor	ganisms.
11101001	Samonio.

1.	Staphylococcus	10.	Protozoa
2.	Spirochete	11.	Filterable virus
3.	Pneumococcus	12.	Cholera bacillus
4.	Proteus	13.	Salmonella
5.	Enterococcus	14.	Streptococcus
6.	Gonococcus	15.	Meningococcus
7.	Dysenteric ameba	16.	Big viruses
8.	Mycobacterium tuberculosis	17.	Colon bacillus (E.coli)
9.	Blue pus bacillus (Pseudomonas		
	aeruginosa)		

# Task 5.

Arrange the following antituberculous drugs depending on their antituberculous activity from the most effective to the least effective one. For agents, marked with asterisk, point out the mechanism of action, type of action, pharmacological effects, indications.

Drugs.

		$\mathcal{C}$	
1.	Lomefloxacin*	8.	Cycloserine*
2.	Florimycin sulfate	9.	Thioacetazone
3.	Streptomycin*	10.	Rifampin*
4.	Prothionamide*	11.	Ethionamide
5.	Isoniazid*	12.	Saluzid
6.	Pirazinamide	13.	Paraaminosalicylic acid*
7.	Kanamycin	14.	Ethambutol

#### Task 6.

Preparing the information for doctors fill in the table concerning the dosing regimens of several groups of sulfonamides that are connected with their pharmacokinetics.

Groups of	Half-live time	Loading	Maintaining	Interval between
drugs	(period)	dose	dose	drug intake
Short-acting				
drugs				
Long-acting				
drugs				
Superlong-				
acting drugs				

# Task 7.

Tell your colleague about the indications and side effects of sulfonamides (A) and drugs for tuberculosis treatment (B). Choose for each group of drugs their indications and side effects. Match the letters with numbers.

#### Indications.

- 1. Bronchitis, pneumonia
- 2. Leishmaniasis
- 3. Cystitis, urethritis
- 4. Malaria
- 5. Cholecystitis
- 6. Mycoses
- 7. Burns, bedsores
- 8. Non-specific ulcer colitis
- 9. Dysentery, salmonellosis
- 10. Tuberculosis
- 11. Grippe (influenza)
- 12. Conjunctivitis, blepharitis
- 13. Leprosy

Side effects

- I. Dyspepsia (nausea, vomiting, absence of appetite)
- II. Allergy
- III. Hypertension
- IV. Crystalluria
- V. Edemas
- VI. Disorders of hemopoiesis (especially agranulocytosis)
- VII. Intravascular hemolysis of erythrocytes
- VIII. Disorders of hearing
- IX. Disorders of CNS
- X. Hepatotoxicity
- XI. Decrease of smooth muscles tone
- XII. Disorders of bones development (especially in children)

#### Task 8.

Inform the patient about the principles of rational administration of

sulfonamides. Choose from the following list the rules of correct administration of sulfonamides.

Principles of rational administration (rules of correct administration).

- A. In the very beginning the loading dose, then maintaining dose has to be given.
- B. The equal doses of drug have to be given during the whole course of therapy.
- C. Course of therapy is not more than 7 days.
- D. Course of therapy is not less than 7 days.

- E. It is necessary to drink the alkaline drinks after the administration of sulfonamides.
- F. It is rational to take drug after meals.
- G. It is rational to take drug between meals (2 hours after meals).

#### Task 9.

Offer the patient the substitution of Co-trimoxazole, Silver sulfadiazine, Salazosulfapirydin, Sulfadimetoxin, Pirazinamide, Viomycin, Rifampin, Capreomycin sulfate, Isoniazid:

A – among the other members of pharmacological group;

B – among the trade marks.

#### **Task 10.**

Correct the following prescriptions:

1. Rp.: Phthalazoli 0,2

D.t.d. N 10 in tab.

S.: 1 tabl. 3 times a day

#

2. Rp.: Ethambutoli 0,1

D.S.: 1 tabl. daily

#

3. Rp.: Tab. Sulfasalazini 0,5 N10

D.S.: As always.

#### Tests

Describe the drugs using following schemes:

- Pharmacological group → Interchangeability → Mechanism of action → Spectrum of action.
- 2. Pharmacological effects  $\rightarrow$  Type of action  $\rightarrow$  Indications  $\rightarrow$  Dosage.

3. Side effects  $\rightarrow$  Contraindications  $\rightarrow$  Rules of rational administration.

Drugs.

- Co-trimoxazole
   Capreomycin sulfate
   Sulfacetamide
- 3. Salazosulfapirydin\* 7. Ethambutol
- 4. Phthalazole\* 8. Algimafe

For agents, marked with asterisk, point out the dosage.

### ANTIHELMINTHIC, ANTIFUNGAL, ANTIVIRAL MEDICINES

#### **Topicality of the subject**

Antihelminthic, antifungal, antiviral are chemotherapeutic drugs realizing their action inside the body. Antihelminthic medicines are used to treat and prevent helminthiases (helmintic invasions). Antifungal are the preparations for the treatment of infections caused by pathogenous fungi (mycoses). Antiviral drugs are preparations for the treatment of viral infections.

#### **Theoretical questions**

- 1. Classification and nomenclature of antihelminthic drugs.
- 2. Mechanism of action of antihelminthic drugs.
- 3. Pharmacodynamics and indications of antihelminthic drugs.
- 4. Classification and nomenclature of antifungal drugs.
- 5. Mechanism of action of antifungal drugs.
- 6. Pharmacodynamics and indications of antifungal drugs.
- 7. Classification and nomenclature of antiviral drugs.
- 8. Mechanism of action of antiviral drugs.
- 9. Pharmacodynamics and indications of antiviral drugs.
- 10. Side effects, contraindications of antihelminthic, antifungal, antiviral drugs.
- 11.Principles of rational administration of antihelminthic, antifungal, antiviral drugs.

#### Home tasks

#### Task 1.

Write the following prescriptions:

- 1. Pyrantel (Pirantelum) tabl. 0.25
- 2. Mebendazole (Mebendazolum) tabl. 0.1
- 3. Levamisole (Levamisolum) tabl. 0.025; 0.05

- 4. Natamycine (Natamicinum) tabl. 0.1
- 5. Griseofulvin (Griseofulvinum) tabl. 0.5
- 6. Clotrimazole (Clotrimazole) sol. 1%
- 7. Amixin (Amixinum) tabl. 0.125
- 8. Gancyclovir (Gancyclovirum) caps. 0.25
- 9. Oxolin (Oxolinum) ointment 3%.

### Task 2.

Answer your colleague's questions:

- 7. What drugs are used for treatment children helminthiases?
- 8. What drugs are effective against different groups of helminths?
- 9. Side effects of antihelminthic drugs.
- 10. Terms of rational use of antihelminthic drugs.

# Task 3.

Prepare the information for doctors about antifungal drugs. Fill the table.

Drugs for system	mic treatment	Drugs for loca	l treatment
Drug	Form of drug	Drug	Form of drug

### Class tasks

### Task 1.

Divide the following drugs into the groups:

Group	Drugs
Antihelminthic	
Antifungal	
a) antibiotics	
b) azoles	
c) undecylenic acid derivatives	

Antiviral	
d) anomalous nucleosides	
f) adamantine derivatives	
j) pyrophosphate analogues	

		Drugs.	
1.	Nystatin	8.	Zincundan
2.	Miconazole	9.	Mebendazole
3.	Natamycine	10.	Levamisole
4.	Griseofulvin	11.	Prasiquantel
5.	Pyrantel	12.	Ribavirine
6.	Pirazinamide	13.	Sodium foscarnet
7.	Gancyclovir	14.	Remantadine

#### Task 2.

Learning the mechanism of antihelminthic, antifungal, antiviral drugs action match the letters (mechanism of action) with numbers (names of drugs).

		Drugs	
1.	Pyrantel	9.	Prasiquantel
2.	Ethylene tetrachloride	10.	Remantadine
3.	Levamisol	11.	Albendazole
4.	Ribavirine	12.	Interferon- α-1
5.	Cycloferon	13.	Mebendazole
6.	Fluconazole	14.	Clion D
7.	Aminoacrichine	15.	Famcyclovir
8.	Natamycine	16.	Amixin

# Mechanism of action

A. Disturb the neuromuscular system functions in helminths.

B. Increase of helminths muscular tone turning into spastic paralysis.

C. Increases calcium ion permeability of cell membranes of helminths promoting the increase of their muscular tone turning into spastic paralysis.

D. Disturb metabolic processes in helminths

E. Inhibit viral RNA release from protein, altering RNA penetration into cell nucleus.

F.	Inhibit viral RNA and DNA synthesis.
G.	Block viral-specific protein synthesis.
H.	Stimulate synthesis of endogenous interferon in human body.
I.	Inhibition of ergosterol synthesis.

### Task 3.

For a deeper understanding the pharmacodynamics of antifungal drugs fill the table.

Pharmacological effects	Drugs
1. Fungicidal	
2. Fungistatic	
3. Antibacterial	

# Task 4.

Preparing the information for the doctors about antihelminthic drugs indications, fill the table using «+», if the effect is present and «–» if it's absent.

Drugs	Indications				
	Ancylo	Cesto-	Trichoce	Enterobia	Ascaria-
	stomiasis	doses	phaliasis	sis	sis
Levamisole					
Prasiquantel					
Albendazole					

Pyrantel			
Mebendazole			
Aminoacrichine			

#### Task 5.

Tell your colleague about side effects of antifungal drugs. Choose from the list the most characteristic side effects.

1. Allergy	6. Disorders of CNS
2. Crystalluria	7. Nephrotoxicity
3. Hepatotoxicity	8. Thrombophlebitis
4. Anemia	9. Dyspepsia
5. The withdrawal syndrome	10. Skin rash

### Task 6.

Preparing the information for the doctors about side effects of antihelminthic drugs, fill the table using «+», if the effect is present and «–» if it's absent.

Side effects	Drugs		
	Mebendazole	Levamisole	Prasiquantel
The teratogenic			
effect			
Leukopenia			
Disorders of CNS			
Dyspepsia			

### Task 7.

From the proposed list of side effects match the letters (drugs) with numbers (names of side effects).

A. Interferons	C. Acyclovir
B. Zidovudine	D. Remantadine

#### Side effects

1.Hallucinations	6. Bone marrow suppression
2. Myalgia	7. Fever
3. Nephrotoxicity	8. Headache
4. Nausea, vomitig	9. Hepatitis and cholestasis
5. Heart failure	10. Insomnia

# Task 8.

Inform the patient about the principles of rational administration of antihelminthic, antifungal, antiviral drugs.

Choose from the following list the rules of correct administration of this groups. Combine the indexes of numbers with the letters

Principles of rational administration (rules of correct administration).

H. The equal doses of drug have to be given during the whole course of therapy.

I. It is necessary to requires special diet, administration of laxatives.

- J. Does not require special diet, administration of laxatives.
- K. It is rational to take drug after meals.
- L. It is rational to take drug between meals (2 hours after meals).

#### Drugs

2. Mebendazole

1. Pyrantel

3. Nystatin

- 9. Aminoacrichine
- 10. Tansy flowers
- 11. Acyclovir

4. Ketoconazole

12. Ethylene tetrachloride

#### Task 9.

Correct the following prescriptions:

6. Rp.: Suppos. Nistatini 500 000 IU D.S.:

#

7. Rp.: Tabul. Mebendasoli 1,0 N10

D.S.: 1 tabl. daily

#

8. Rp.: Caps. Fluconasoli 0,5 N 20

D.S.: As always.

#

9. Rp.: Acycloviri 0,4 N10

D.S.: 1 tabl. daily

#### Tests

Describe the drugs using following schemes:

4. Pharmacological group  $\rightarrow$  Interchangeability  $\rightarrow$  Mechanism of action  $\rightarrow$  Spectrum of action.

5. Pharmacological effects  $\rightarrow$  Type of action  $\rightarrow$  Indications  $\rightarrow$  Dosage.

6. Side effects  $\rightarrow$  Contraindications  $\rightarrow$  Rules of rational administration.

#### Drugs.

Nystatin Natamycine 1. 5. Prasiquantel 2. Mebendazole\* 6. Acyclovir\* 3. Levamisole 7. Cycloferon 4. Ketoconazole\* 8.

For agents, marked with asterisk, point out the dosage.