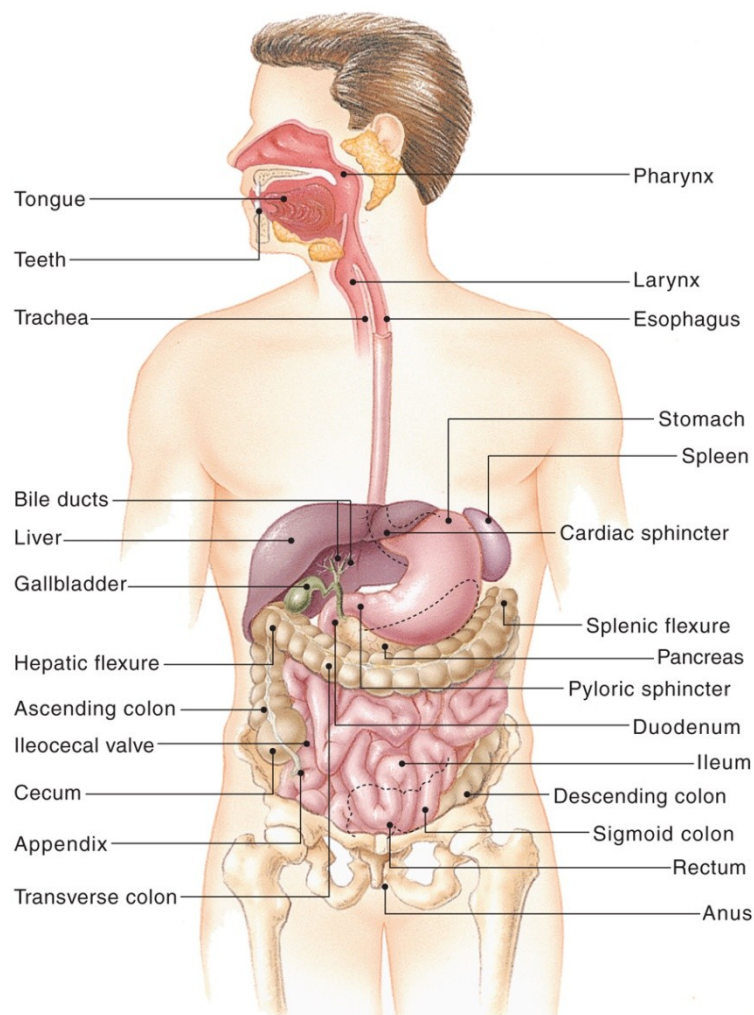


# Gastrointestinal Drugs

**Figure 40.1** The digestive system. Source: Mulvihill, Mary Lou; Zelman, Mark; Holdaway, Paul; Tompary, Elaine; Raymond, Jill; *Human Disease: A Systemic Approach*, 6<sup>th</sup> edition, ©2006, p.276. Reprinted by permission of Pearson Education, Inc., Upper Saddle River, NJ.



# GI drugs

- Drugs used for:
  - ✦ Peptic ulcers and gastroesophageal reflux disease (GERD)
  - ✦ Chemotherapy-induced emesis
  - ✦ Diarrhea
  - ✦ Constipation

# Drugs for Peptic ulcers and GERD

- Causes of peptic ulcer:
  - ✧ Infection with gram-negative *Helicobacter pylori*
  - ✧ Use of nonsteroidal anti-inflammatory drugs (NSAIDs)
  - ✧ Increased hydrochloric acid secretion
  - ✧ Inadequate mucosal defense against gastric acid
  - ✧ Tumors (rare)

# Drugs for Peptic ulcers and GERD

- Treatment of peptic ulcer
  - 1) Eradicating the *H. pylori* infection
  - 2) Reducing secretion of gastric acid with the use of proton pump inhibitors or H<sub>2</sub>-receptor antagonists
  - 3) providing agents that protect the gastric mucosa from damage such as **misoprostol**
  - 4) Neutralizing gastric acid with nonabsorbable antacids

# Drugs for Peptic ulcers and GERD

- Antimicrobials (For *H. pylori*)
- H<sub>2</sub>-receptor antagonists
- Proton pump inhibitors
- Prostaglandins
- Antacids

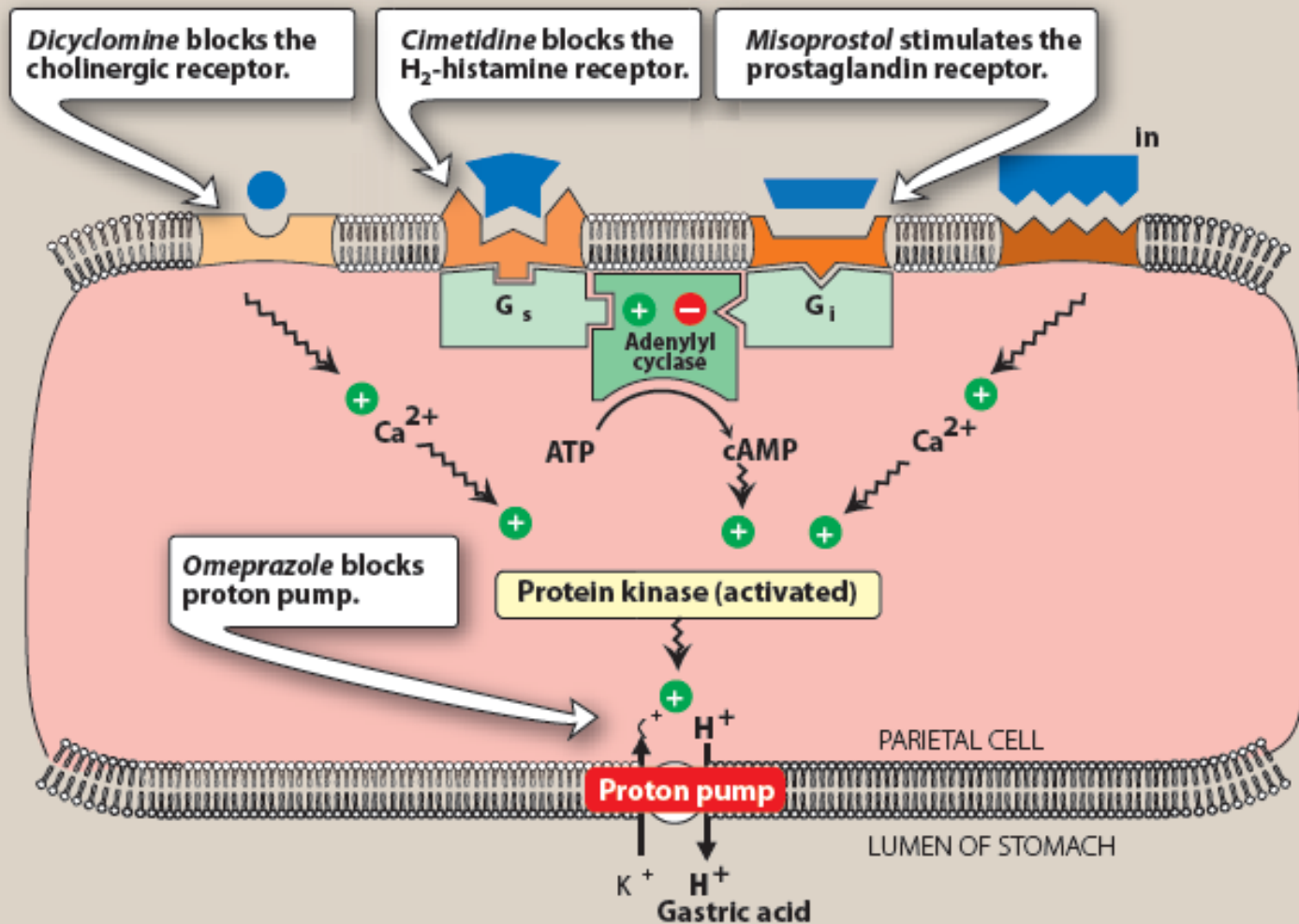
# Drugs for Peptic ulcers

- Antimicrobial agents (For H. pylori)
  - ▣ Metronidazole
  - ▣ Amoxicillin
  - ▣ Clarithromycin
  - ▣ Tetracyclines
  - ▣ Bismuth compounds
- Proton pump inhibitors are also used in this condition

# H<sub>2</sub>-receptor antagonists

- Ranitidine
- Famotidine
  
- Block the binding of histamine to H<sub>2</sub> receptors inhibiting gastric acid secretion
- Therapeutic uses:
  - ✦ Peptic ulcer
  - ✦ GERD
- Their use is being replaced by proton pump inhibitors
- Adverse effects: Dizziness, diarrhea.





# Proton pump inhibitors

- Omeprazole
- Esomeprazole
- Pantoprazole
- Bind to the  $H^+/K^+-ATPase$  enzyme system (proton pump) of the parietal cell and suppress the secretion of hydrogen ions into the gastric lumen, inhibiting gastric acid secretion
- More effective than  $H_2$  antagonists in suppressing gastric acid production and healing peptic ulcers
- Therapeutic uses
  - ✦ Stress ulcer
  - ✦ Peptic ulcer
  - ✦ GERD
  - ✦ Erosive esophagitis

Adverse effects: diarrhea, Nausea, GI disturbance

# Prostaglandins

- Prostaglandin E inhibits secretion of HCl and stimulates secretion of mucus and bicarbonate (cytoprotective effect)
- **Misoprostol** is an analog of prostaglandin E1
- Adverse effects: Diarrhea, nausea
- Contraindicated during pregnancy

# Antacids

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- Aluminum hydroxide
- Magnesium hydroxide
- Calcium carbonate
- Weak bases that react with gastric acid and diminish gastric acidity
- Used for symptomatic relief of peptic ulcer and GERD

# Drugs used to control chemotherapy induced emesis

- Nausea and vomiting may occur in a variety of conditions (motion sickness, pregnancy, and hepatitis) and are always unpleasant for the patient
- The nausea and vomiting produced by many chemotherapeutic agents demands especially effective management
- 70% -80% percent of all patients who undergo chemotherapy experience nausea or vomiting

# Drugs used to control chemotherapy induced emesis

- Several factors influence the incidence and severity of chemotherapy-induced emesis including
  - ▣ The specific chemotherapeutic drug
  - ▣ The dose
  - ▣ Route and schedule of administration
  - ▣ Patient variables
    - Young patients and women are more susceptible than older patients and men

# Drugs used to control chemotherapy induced emesis

- 10% - 40% of patients experience nausea or vomiting in anticipation of their chemotherapy (anticipatory vomiting)
- Emesis not only affects the quality of life but can also lead to rejection of potentially curative antineoplastic treatment
- Uncontrolled vomiting can produce dehydration, profound metabolic imbalances, and nutrient depletion

# Antiemetic drugs

- Antiemetics represent a variety of classes with various efficacies
- Anticholinergic drugs like the muscarinic receptor antagonist scopolamine and H<sub>1</sub>-receptor antagonists, such as dimenhydrinate, meclizine, and cyclizine are very useful in motion sickness



# Antiemetic drugs

## Phenothiazines

- Prochlorperazine
- Act by blocking dopamine receptors
- Effective against low or moderately emetogenic chemotherapeutic agents (e.g. fluorouracil and doxorubicin)
- Side effects:
  - ✦ Hypotension and restlessness (Dose limiting)
  - ✦ Extrapyramidal symptoms
  - ✦ Sedation

# Antiemetic drugs

## 5-HT<sub>3</sub> (serotonin) receptor blockers

- Ondansetron
- Important in treating emesis linked with chemotherapy, because of their longer duration of action
- Can be administered as a single dose prior to chemotherapy (intravenously or orally)
- Efficacious against all grades of emetogenic therapy
- Side Effects:
  - ✧ Headache
  - ✧ Electrocardiographic changes, such as a prolonged QT interval, can occur with dolasetron

# Antiemetic drugs

- Haloperidol
- Act by blocking dopamine receptors
- Moderately effective antiemetics

# Antiemetic drugs

## **Benzodiazepines**

- Lorazepam
- Alprazolam
- The antiemetic potency of lorazepam and alprazolam is low
- Their beneficial effects may be due to their sedative, anxiolytic, and amnesic properties
- These same properties make benzodiazepines useful in treating anticipatory vomiting

# Antiemetic drugs

- Dexamethasone
- Methylprednisolone
- Effective against mildly to moderately emetogenic chemotherapy
- Most frequently used in combination with other agents
- Their antiemetic mechanism is not known
- Can cause insomnia and hyperglycemia in patients with diabetes mellitus

# Constipation

- Common condition caused by
  - ✧ Diminished fluid intake
  - ✧ Slow motility of waste material through large intestine
  - ✧ Certain foods, medications, diseases

# Laxatives and Cathartics

- Treat or prevent constipation
- Prepare bowel for surgery or diagnostic procedures
- Promote emptying of large intestine
- Stimulants and herbal agents
  - ✧ Stimulate peristalsis
- Mineral oil
  - ✧ Lubricates fecal mass

# Types of Laxatives

- Bulk-forming agents absorb water, adding size to fecal mass
- Stool softeners or surfactants cause more water and fat to be absorbed into stools
- Stimulants irritate bowel to increase peristalsis



# Laxatives

- ❑ Psyllium mucilloid
- ❑ Mechanism of action: swells and increases size of fecal mass
- ❑ Used to promote passage of stool

# Laxatives

- Saline or osmotic laxatives are not absorbed in intestine
  - ✧ Example Magnesium hydroxide
  - ✧ Pull water into fecal mass to create more watery stool
- Herbal agents are natural products available OTC
  - ✧ Most commonly used herbal laxative is senna
- Miscellaneous agents include mineral oil
  - ✧ Acts by lubricating stool and colon mucosa

# Diarrhea

- Treatment depends on severity and etiology
- Opioids for severe diarrhea
  - ▣ Most effective
  - ▣ Slow peristalsis

# Antidiarrheals, Opioids

- Diphenoxylate with atropine
- Mechanism of action: slows peristalsis
- Used for moderate to severe diarrhea
- Adverse effects: dizziness and drowsiness

# Medications for Simple Diarrhea

- ❑ Loperamide
- ❑ Bismuth compounds
- ❑ Psyllium preparations
- ❑ Probiotic supplements