

# Steroidal Hormone Endocrine Pharmacology (Part 2)

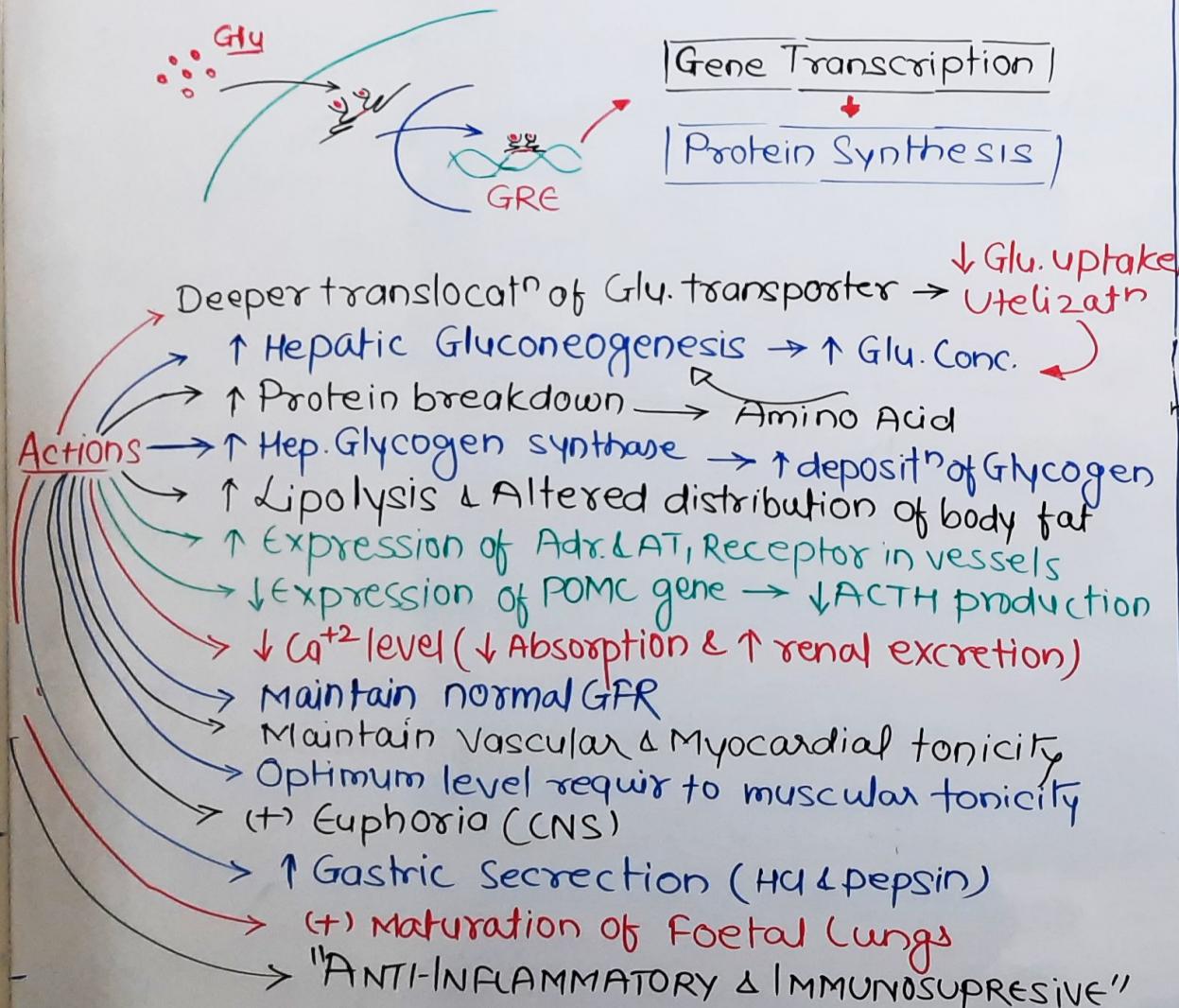
Pharmacology 2



## GLUCOCORTICOID

- Glucocorticoid is a part of Corticosteroids, which release from adrenal cortex (Z fasciculata).
- Synthesized from **Cholesterol**.  
Cholesterol → Pregnenolone → Glu/Mineralocorticoids

### MOA OF GLUCOCORTICOIDS



### # Anti-inflammatory Action →

- (+) Annexins → ↓ PLA<sub>2</sub> → ↓ PGs, LTs & PAF
- (-) regulat'n of COX → ↓ PG
- (-) regulat'n of CK gene → ↓ ILs, TNFα, Inf → ↓ T-cells
- ↓ collagenase → ↓ Tissue destruction

### # DRUGS →

- Short Acting - Hydrocortisone
- Intermediate → Prednisolone, me-prednisolone  
DeFlazacort, Triamcinolone
- Long → Dexamethasone, Betamethasone

### # Uses -

HRT = Adrenal Insufficiency, Addison's disease, Adreno-genital syndrome

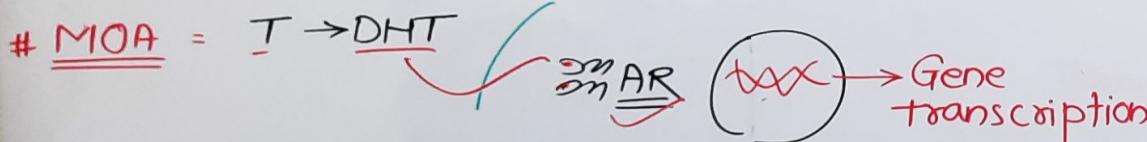
Pharmacotherapy → Arthritis, Collagen disease, Anaphylaxis, Autoimmune disease, Asthma, Infective disease, Eye/Skin disease, Organ transplantation, Septic shock, Thyroid storm.

ADR → Cushing's habitus, Hyperglycemia, myopathy, Secondary infection, Delayed healing, Ulcer, Osteoporosis, Cataract, Growth retardat'n, Glaucoma, Foetal Abnormalities, Psychiatric disturbance,

Contraindicat'n → Diabetes, HTN, Ulcer, RF, Osteoporosis, Viral/Fungal/TB infection, CHF, Psychosis.

## ANDROGENS

- ↳ Male sex hormone, which causes  $2^{\circ}$  sex characters in castrated male.
- ↳ Testosterone (testicular hormone) is the prime male hormone, produce 5-12 mg daily.
- ↳ Its endocrine functn was stabilised in 1849 by Berthold. Synthetically - 1935
- # Cholesterol → "Testosterone" → Dihydro testo → Ad. Cortex S- $\alpha$ -Redutase (More Active)
- ↳ Dihydroepiandrosterone 0.25-0.5 mg/day
- Androstanedione Weak Androgen
- Testo. → Androsterone ( $\frac{1}{10}$  activity) → Urine



AR,  $\Delta AR_2 \Rightarrow$  Genital & Muscle & Bone ( $\uparrow S\alpha R_1$ )  
 $\downarrow S\alpha R_2 \star$  Finasteride

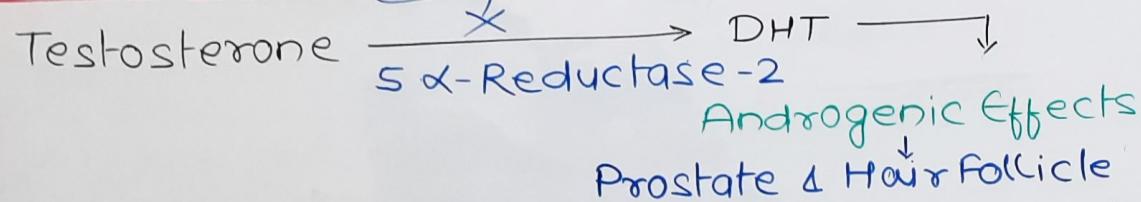
### Biological Actions →

- A) Androgenic Action → All changes during puberty
- ↳ Growth of Genital parts
  - ↳ Hair distribution
  - ↳ Development of  $2^{\circ}$  sex characters

- B) Testes → At normal → Spermatogenesis & maturatn of spermatozoa  
At High dose → testicular Atrophy (due to  $\downarrow$  Gn release)
- C) Skeletal Muscle/ Bone → Growth & Strength  
↳ Anabolic function
- D) Erythropoiesis →  $\uparrow$  Erythropoietin production
- P'kinetics = Orally inactive (High 1st pass metabolism)  
Duration of action - short after im injection, so slowly absorbed ester salt are used by this route
- ↳ Metabolite are excreted through urine
  - ↳ 98% protein binding (SHB Globulin)
  - Uses - HRT (Hypogonadism)
  - ↳ Testicular failure
  - ↳ AIDS Related muscle wasting
  - ↳ Male infertility
  - ADR ↳ In female → Male like characters
  - ↳ Oligozoospermia - testicular Atrophy
  - ↳ Salt Retention & Oedema
  - ↳ Hepatic carcinoma & jaundice
  - ↳ Gynecomastia in children & Liver failure patient due to peripheral conversion → Oestrogen

## ANTI ANDROGENS

### FINASTERIDE



- ↳ It decreases the prostate size & ↑ urine flowrate in 50% of patients with BHP
- ↳ Beneficial effects on BHP - 6 months (5mg)
- ↳ withdrawal of drug → Regrowth of prostate so continue the therapy - maintain for 3 years
- ↳ But lesser effective as compared to surgery &  $\alpha_1$  blockers
- ↳ Finasteride - ↓ static component of obstructive  $\alpha$ -blockers - ↓ Dynamic component combination → Greater symptomatic relief
- ↳ Also useful in male pattern Baldness, though hair follicle have  $5\alpha$  reductase type 1, in such subjects promote hair growth & prevent hair loss

P'kinetic: → Orally effective, Metabolized by liver, excreted through urine & faeces

ADR - Impotency, Gynaecomastia

### FLUTAMIDE

- ↳ Non-steroidal AR Antagonist with no other hormonal activity
- ↳ flutamide → 2-hydroxy FL → AR on accessory sex organ & pituitary  $\rightarrow$  ↑ LH Secretn
- ↳ Monotherapy  $\sim$  ↑ plasma testosterone level so used only in conjunctn with GnRH Agonist to suppress the LH & testosterone secretn or used along with "Combined Androgen blockade (CAB) therapy" - for metastatic carcinoma of prostate

BICALUTAMIDE: - More potent & longer duration than "Flutamide"

- Use → Prostate Cancer, as a part of CAB

ADR - Hot Flashes, Chills, Oedema, Loose stool but better tolerated & less hepatotoxic than Flutamide

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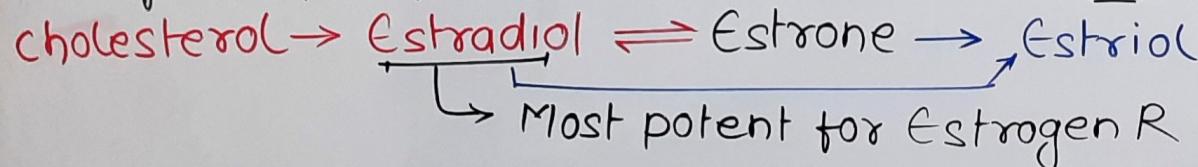
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## ESTROGENS

- ↳ Female Sex Hormone, release from Ovaries
- ↳ In 1900, it was established that Ovaries control the reproductive function through hormonal mech.
- ↳ Allen & Doisy (1923) - found that alc. extract of ovaries can induce estrus in rodent
- ↳ 1929 - pure active Estradiol

Natural Estrogen - "Estradiol" - synthesized in graafian

follicle, corpus luteum & placenta from Chol.



- In female - 10-100 µg/day depends on phase
- In Male - 2-20 µg/day from extra-gonadal tissue

# Mode of Action: → Through Estrogen Receptor

↓  
Gene Transcription

# Location: → Female reproductive Organs, breast, Liver, Pituitary, bone, BV, Heart, CNS & hormone responsive breast carcinoma cells

# ER<sub>α</sub> → Uterus, Vagina, breast, bone, BV, hypothalamus

# ER<sub>β</sub> → Prostate glands & Ovaries

↳ Estradiol → have equal affinity to both ER<sub>α</sub> & ER<sub>β</sub>

- 1) **Sex Organ** → Development of female sex organ - Vagina, uterus, & fallopian tube.  
 → Proliferation of Endometrium; at modest dose it may cause endometrium hypertrophy & delayed menstruation  
 → It augment rhythmic contractn of the f. tube & uterus & induce watery alkaline sec. from cervix (this is favorable to sperm penetration).

2) 2° sex character in female

- 3) **Metabolic Effects** - Anabolic effects (lesser than testost.)  
 → Important in maintaining bone mass  
 → Na<sup>+</sup>/water Retention → ↑ BP in long term  
 → ↓ LDL & ↑ HDL & TG → ↑ blood Coagulatn (II, VII, IX, X)  
 → + NO synthase & PG<sub>I<sub>2</sub></sub> Productn → Vasodilation

# Uses = HRT Birth Control Pills, Vaginitis, Hypogonadism in female, Dysmenorrhoea, Acne, Prostate Carcinoma,

# ADR - Loss of libido, Gynaecomastia, irregular menstrual cycle after menopause, ↑ incidence of breast cancer, Gallstone, Migraine, epilepsy

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## ANTI ESTROGEN

# CLOMIPHENE CITRATE - Bind into both  $ER\alpha$  &  $ER\beta$

↳ Trans - Enclomiphene  $\rightarrow$  pure ER Antagonist

↳ Cis  $\rightarrow$  Zucloimiphene & Rac.  $\rightarrow$  Weak Agonistic Action

↳ Clomiphene  $\rightarrow$  block FBS  $\rightarrow$  ↑ GnRH  $\rightsquigarrow$  ↑ GnH (FSH/LH)

### Ovulation

USES - used in infertility (50mg OD, after 5<sup>th</sup> Day)

$\rightarrow$  to aid in vitro fertilization

$\rightarrow$  In men, used in Oligozoospermia

# Selective Estrogen Receptor Downregulator

↳ FLUVESTRANT "SERDs" - Antagonist

Use - Treatment of Locally advance or metastatic ER positive breast cancer in post menopausal women. (Not responding to tamoxifen)

MOA  $\rightarrow$  Inhibits ER dimerization & prevent the interactn with DNA & Receptor degradatn in enhanced.

# Selective Estrogen Receptor Modulators (SERMs)

↳ TEMOXIFEN CITRATE

$\hookrightarrow$  chemically related to clomiphene

Action - 1) Potent ER Antagonist in breast carcinoma cells, blood vessels & at peripheral cells

2) Partial Agonist in uterus, bone, liver & pituitary

$\hookrightarrow$  ↓ breast cancer cells

$\hookrightarrow$  (+) Endometrial proliferatn, ↓ Gn & prolectin level in post menopausal women

$\hookrightarrow$  Improve the bone density

$\hookrightarrow$  ↓ TC & LDL (No effect on HDL & TG)

$\hookrightarrow$  ↑ the risk of Deep vein thrombosis

# Aromatase Inhibitor

↳ LETROZOLE

Androstandione

Testosterone

Anastrozole

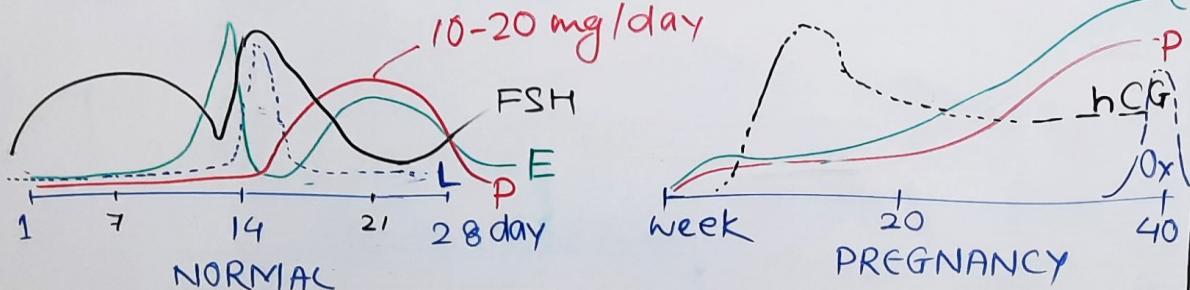
Estrone

Estradiol

Use - In breast cancer

## PROGESTINS

- These are substances which convert the estrogen primed proliferative endometrium to secretory & maintain pregnancy after conception.
- Progesterone was isolated in 1929 & clinically - 1950s
- Natural progestin, secreted by corpus luteum



MODE OF ACTION : (+) Progesterone Receptor (PR-A & PR-B)

↳ Female genital tract, breast, CNS, Pituitary

BIOLOGICAL ACTIONS - Major function - preparatn of uterus for nidation & maintenance of pregnancy,

↳ ↓ Uterine motility

↳ ↓ T-cell mediated immunity, prevent reject'

1) Uterus → Bring the secretory changes in estrogen primed endometrium :- hypermia, torticity & ↑ Secretn

Continued Actn - bring about decidual changes in endometrium :- stroma enlarge, spongy, glands atrophy & ↓ sensitivity of myometrium to oxytocin

- 2) Cervix - watery to viscid to prevent sperm penetration
- 3) Vagina - change in vaginal mucosa in pregnancy
- 4) Breast - (+) proliferation of Acini in the mammary glands
- 5) CNS - Sedation & Mood changes
- 6) Body temp - slightly rise ( $0.5^{\circ}\text{C}$ )
- 7) Respiratn - (+) Respiration
- 8) Metabolism - impaired Glucose tolerance
- 9) Pituitary - Administratn of progesterone during follicula phase  $\rightarrow \downarrow \downarrow$  ovulation

Uses - # Oral Contraceptive

- # HRT
- # Dysfunctional uterine bleeding
- # Endometriosis
- # Endometrial carcinoma
- # Threatened abortion

P'kinetic  $\rightarrow$  Orally inactive due to high 1<sup>st</sup>-pass metabolism

- sm (For orally special formulation), im. oily solutn
- t1/2 = 5-7 min, completely metabolized in liver
- pregnanediol  $\rightarrow$  Excreted through urine
- # Micronized oily suspension - Gelatin capsule  $\rightarrow$  Abs through lymphatic system.

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## OXYTOCIN

# UTERINE STIMULANTS - OXYTOCICS, ABROFACIENTS

→ Drugs → "Oxytocin," Desamino-Oxytocin

→ Ergot alkaloids, PGs (PGE<sub>2</sub>, PGF<sub>2α</sub>), Quinine

↳ They increase the uterine motility, especially at term

# Oxytocin → Nonapeptide posterior pituitary hormone

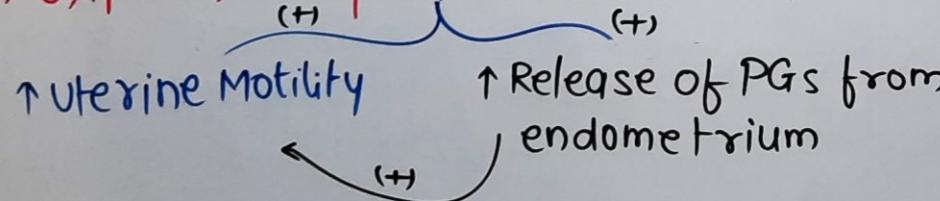
↳ 1909 - Pituitary Extract → used in Labour

↳ 1953, Vigneaud → Separated - ADH & Oxytocin

↳ Arg-Vasopressin (AVP; ADH) & Oxytocin - Synthesized in Hypothalamic nerve cell bodies (supraoptic & paraventricular nuclei) ↗ transported down the axon & stored in nerve ending within Neurohypophysis

MOA : → (+) Oxytocin Receptor (GqPCR) on Myometrium

# UTERUS



# BREAST - Contracts the myoepithelium of mammary alveoli and force milk to ejection

# CVS = Higher dose - Vasodilation, Fall in BP, - Reflex Tachy Cardia

# Kidney - At higher dose → ADH like action

BIOLOGICAL ROLE - ↳ Labour  
↳ Milk ejection Reflex  
↳ Peptide neurotransmitter

P'KINETIC = Orally inactive, Adm via I.M. or I.V.  
Rapidly degraded in Liver & Kidney, t<sub>1/2</sub> = 6-12 min  
in pregnant placenta produce Oxytocinase to metabolize the Oxytocin

USES ⇒ ↳ Induction of labour  
↳ Uterine inertia  
↳ Postpartum haemorrhage in hypertensive women  
↳ Breast engorgement

ADR - ↳ Maternal & Foetal soft tissue injury  
↳ Water intoxication (ADH like action)

# DESAMINO-OXYTOCIN"

↳ Buccal formulation

↳ Similar as Oxytocin

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