

Kalcijevi kanalčki, zaviralci kalcijevih kanalčkov (kalcijevi antagonisti)

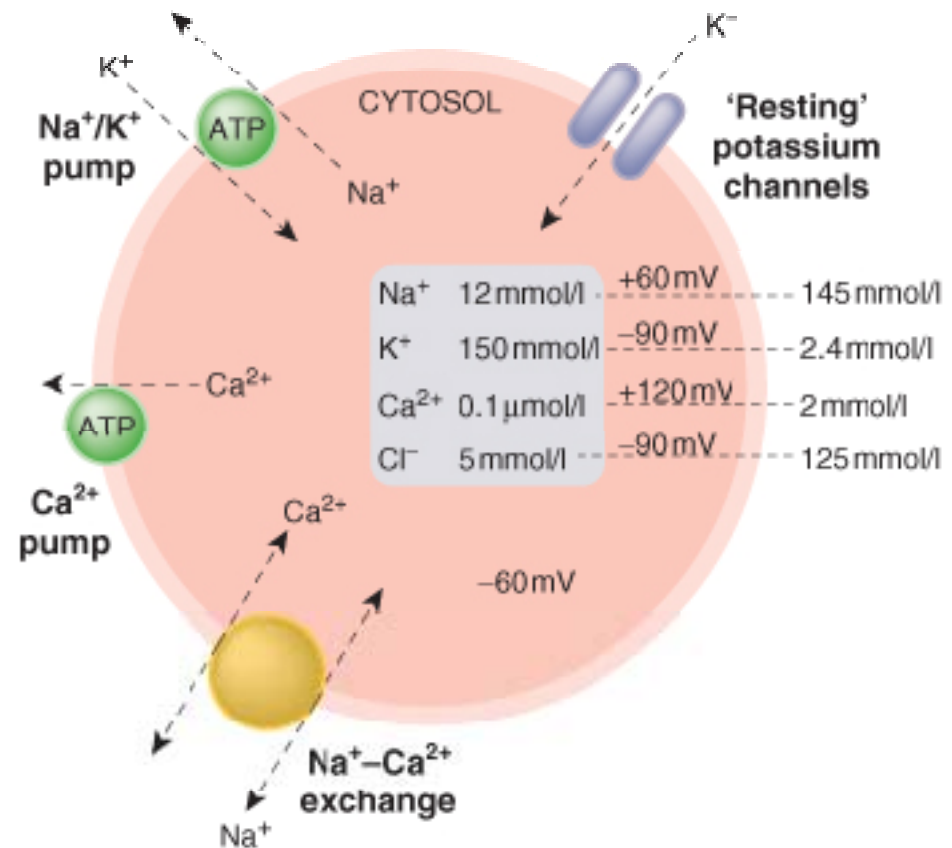
izr. prof. dr. Marko Anderluh

21. maj 2013

Ca²⁺ - kalcijevi ioni

- Izjemno nizka koncentracija v “nedejavni” celici (~10⁻⁷ mmol/L)
- Izjemno pomembni izven/znotrajcelični prenašalci
- Shranjeni v celičnih organelih (endoplazemski, sarkoplazemski retikulum), v intersticijski tekočini (~2,4 mmol/L)

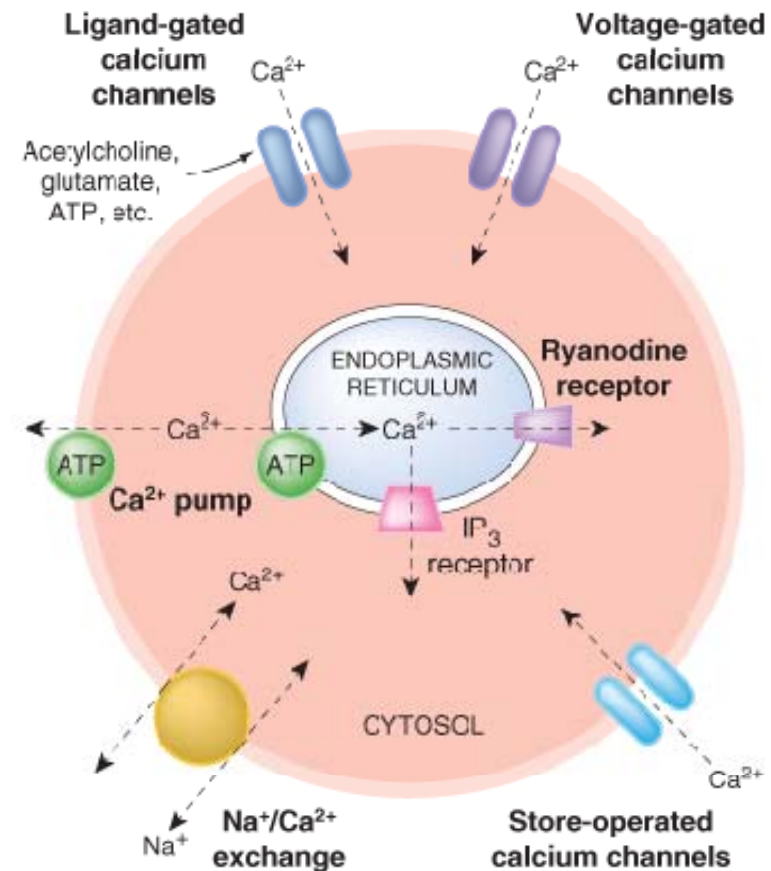
EKSCITATORNI IONI!



Ca²⁺ - kalcijevi ioni

Vnos Ca²⁺:

- Napetostno odvisni Ca²⁺ kanali (L, N, T, Q/P, R)
- Od liganda odvisni Ca²⁺ kanali (AcCh, glutamat-NMDA)
- “Od zalog odvisni” Ca²⁺ kanali
- Na⁺-Ca²⁺ izmenjava



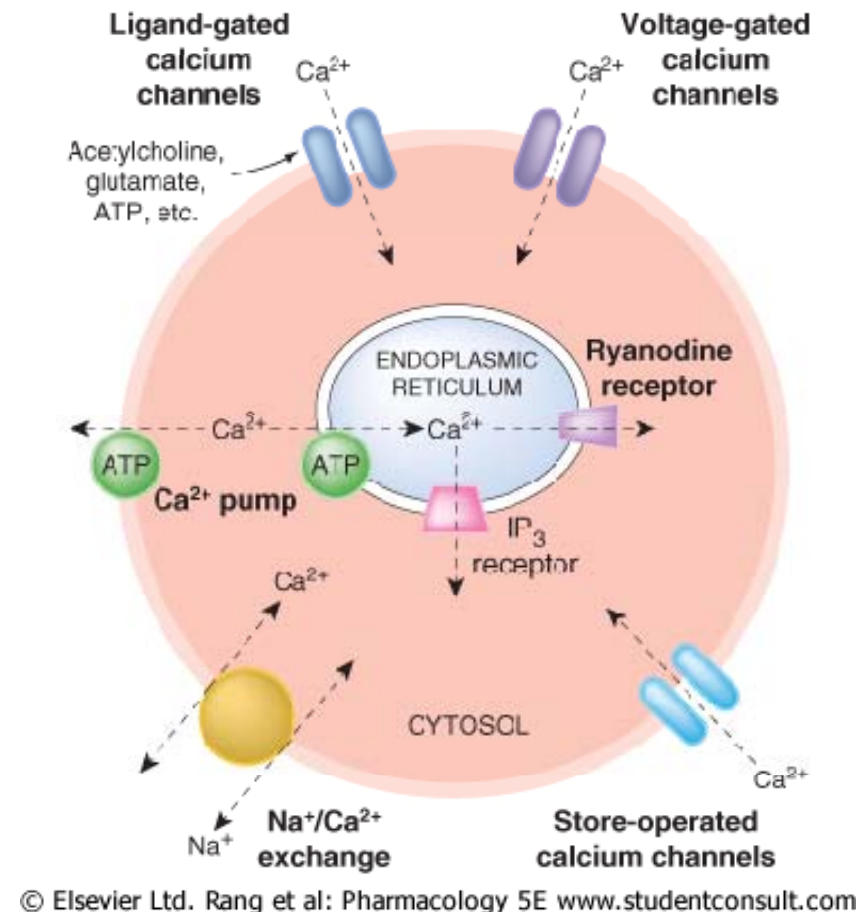
Ca²⁺ - kalcijevi ioni

Sproščanje Ca²⁺ iz ER/SR:

- Inozitol-trifosfatni (IP₃) “receptor” – aktivira ga IP₃, tvorba z GPCR
- Rianodinski receptor – sprožitev z visokimi konc. intracel. Ca²⁺ (+ povratna zanka)

Izločanje Ca²⁺ iz celice:

- Ca²⁺-odvisna ATP-aza
- Na⁺-Ca²⁺ izmenjava



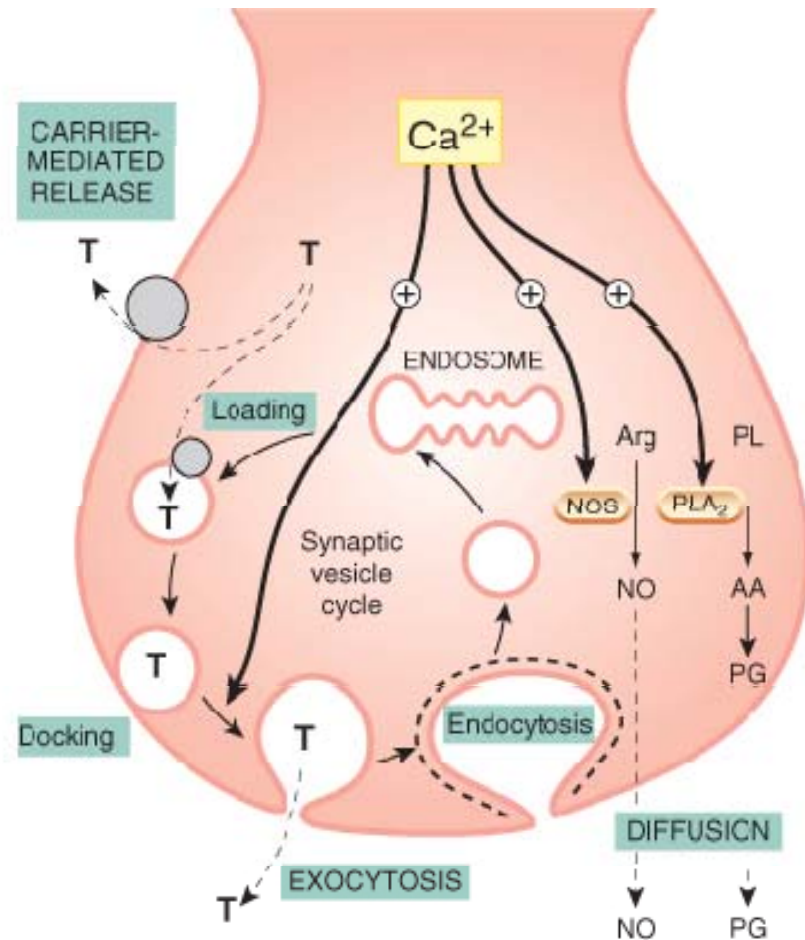
Ca²⁺ - modulacija prenosa

Epilepsija

- etosuksimid inhibira T-tip Ca²⁺ kanalov v CŽS

Eksocitoza transmitorjev

- N-tip Ca²⁺ kanalov v živčnih končičih, inhibicija: ω-konotoksin



Ca²⁺ - kalcijevi ioni - funkcija

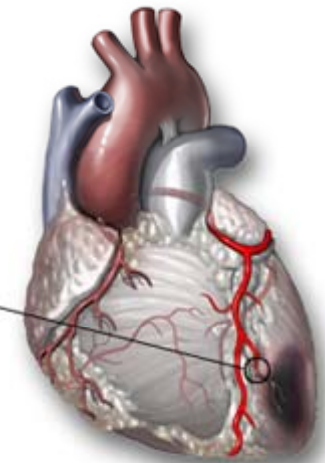
Funkcija – EKSCITACIJA!

- prevajanje impulza – vzdrževanje/proženje/ojačanje depolarizacije
- kontrakcija gladke, srčne in prečnoprogaste muskulature
- eksocitoza (npr. iz živčnih končičev) nevrotansmitorjev in hormonov
- kontrola encimov preko kalmodulina (najmanj 40 različnih encimov, npr. MLCK)
- strjevanje krvi (izvencelično)
- pri gibljivosti/adheziji celic

Angina pectoris?



Blocked Lumen in Branch
of Left Coronary Artery



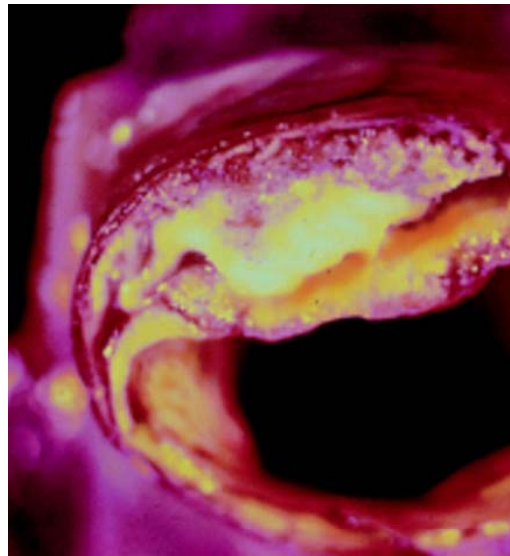
Anterior infarct

Angina pectoris?

napad hude bolečine v prsnem košu za prsnico, ki pogosto izžareva v levi zgornji ud ali vrat ter je često povezana z občutkom dušenja in smrtnega strahu, pojavi se ob naporu ali razburjenju; sin. angina pectoris, koronarna bolečina, sindrom angine pectoris, stenocardia, stenokardična bolečina, stenokardija; prim. ishemična bolečina, stenokardični napad

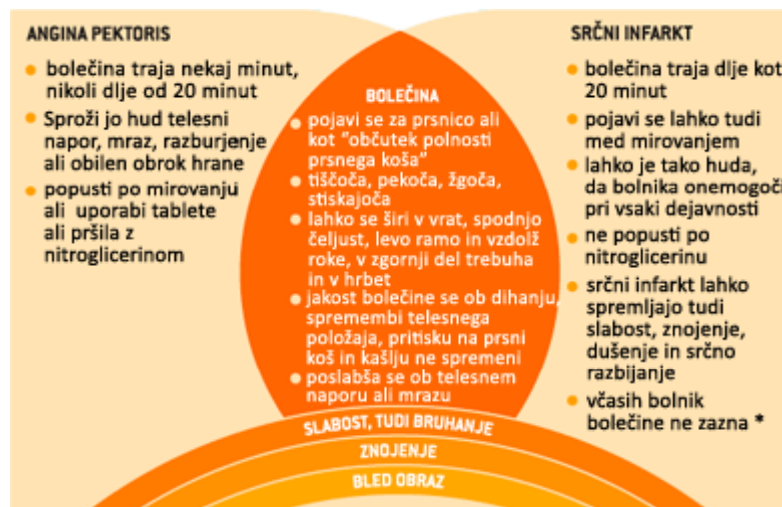
Angina pectoris?

- Bolezen?
- Bolezen: koronarna srčna bolezen
- Vzroki za koronarno srčno bolezen?



Angina pectoris?

- Angina pectoris vs. Srčni infarkt?
- Nestabilna angina?



Terapija koronarne srčne bolezni/angine p.

Vazodilatorji

- Glicerol trinitrat = nitroglicerin
- Alkil nitriti

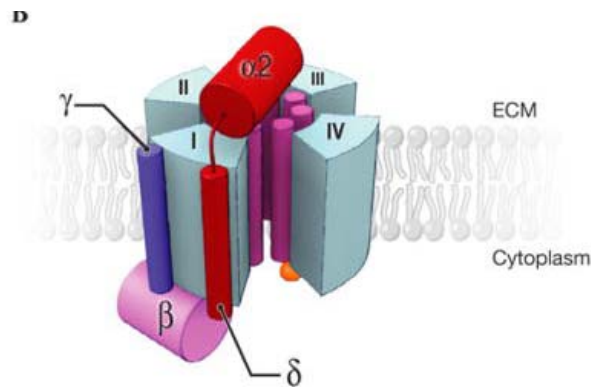
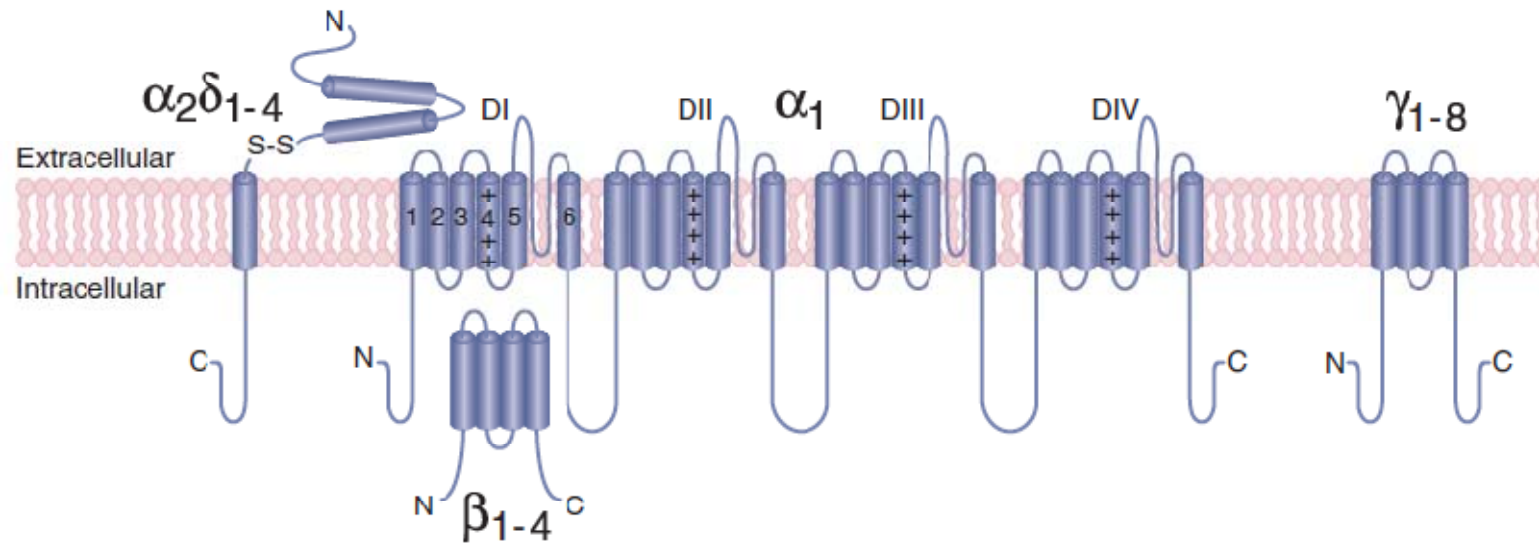


Terapija koronarne srčne bolezni/angine p.

Zmanjšanje srčne obremenitve

- Antagonisti adrenergičnih β 1-receptorjev
- Antagonisti Ca^{2+} kanalčkov
- Zaviralci ACE

Napetostno odvisni Ca^{2+} kanali

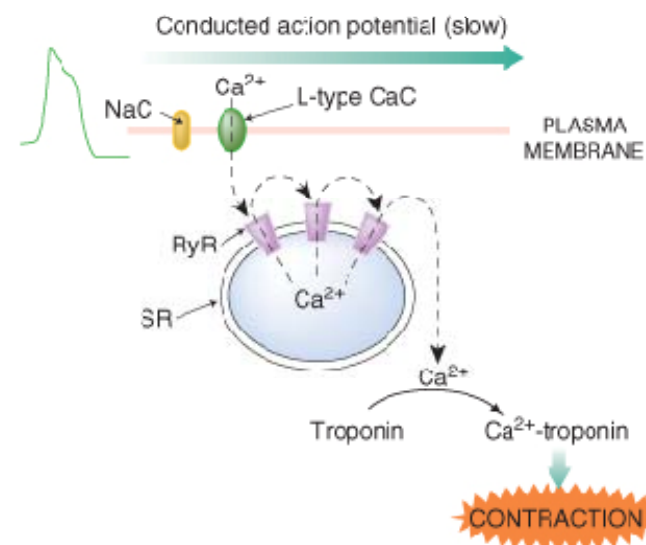


Ca²⁺ antagonisti

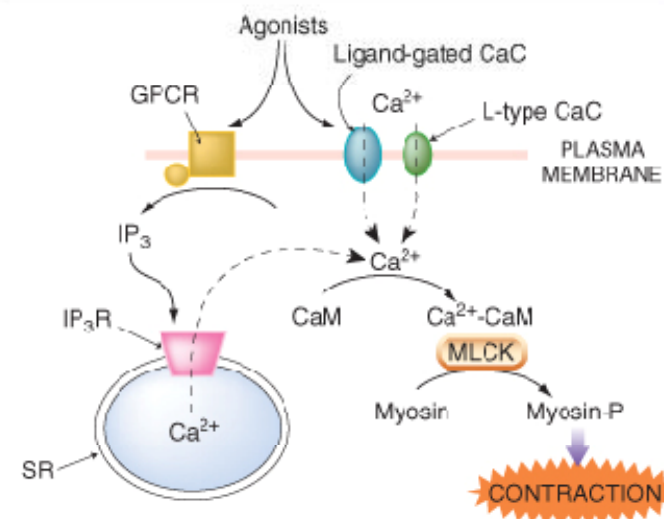
Ca²⁺ antagonisti – inhibicija kalcijevih kanalov

- L- tip Ca²⁺ kanalov: signal za kontrakcijo srčne in gladke mišice (žilni endotelij)
- Posledica: povišan krvni tlak, dis(a)ritmija srca, tahikardija
- Ca²⁺ antagonisti zavirajo napetostno, manj od liganda odvisne Ca²⁺ kanale (ATP receptorji ali P_{2x})
- Indikacije: aritmije, angina pectoris, hipertenzija

B Cardiac muscle



C Smooth muscle



Ca²⁺ antagonisti

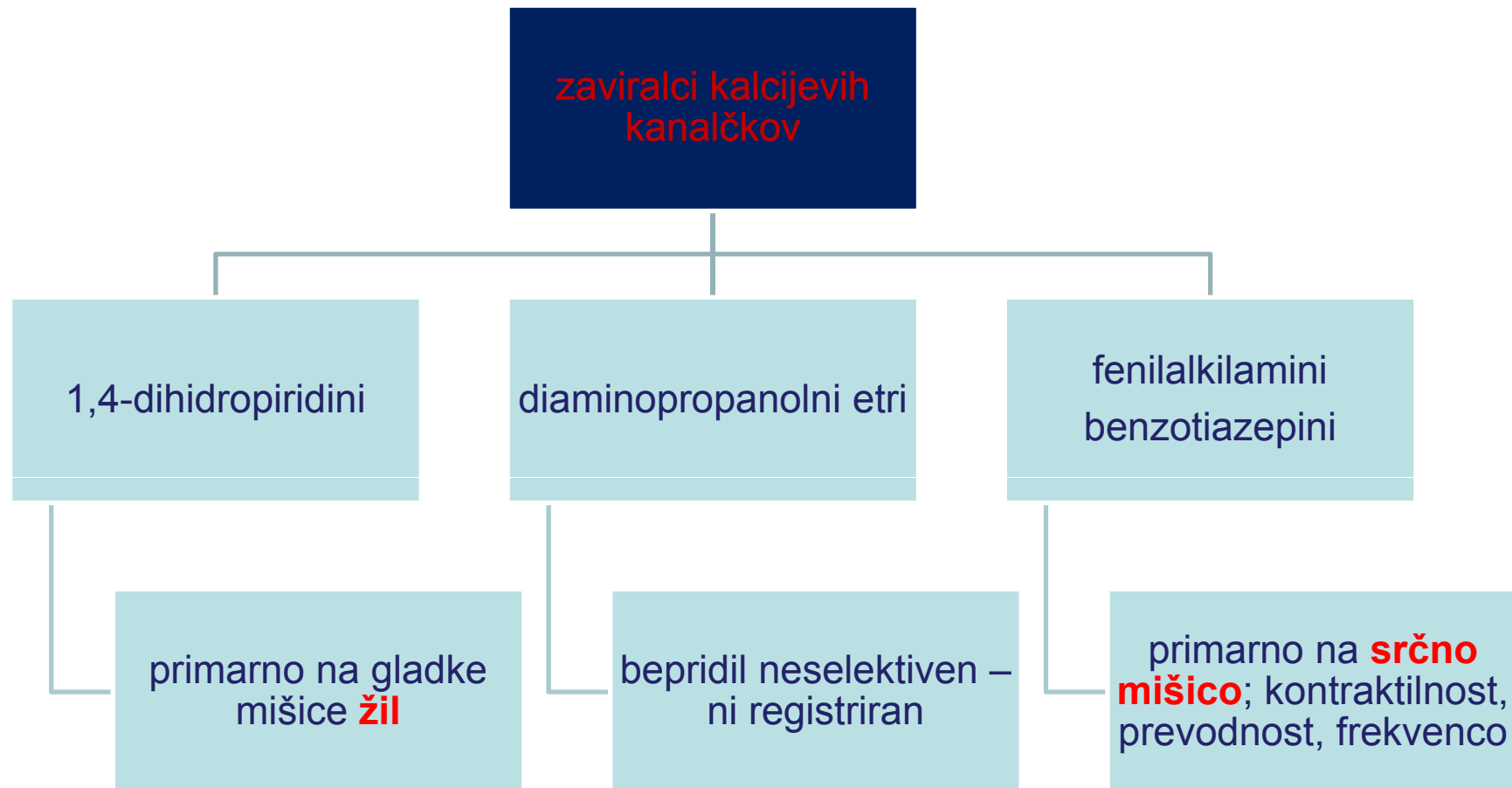
= Zaviralci kalcijevih kanalčkov

- delujejo samo na L tip kalcijevih kanalov
- Zmanjšanje konstrikcije arterij – zniža se pritisk, zmanjša se srčno breme
- Povečan pretok krvi skozi koronarke

Ca²⁺ antagonisti - tipi

- 1,4-Dihidropiridini – nifedipin in analogi
- Fenilalkilamini – verapamil
- Benzotiazepini – diltiazem
- Diaminopropanolni etri – bepridil

Ca²⁺ antagonisti - selektivnost



Ca²⁺ antagonisti - selektivnost

Table 28.10. Comparison of the Cardiovascular Effects of Verapamil, Diltiazem, and Nifedipine

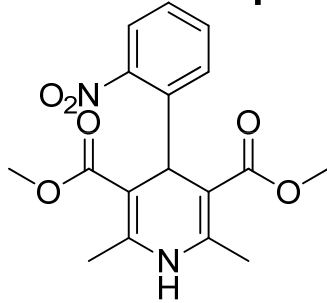
Cardiovascular Effect	Verapamil	Diltiazem	Nifedipine (a 1,4-DHP)
Peripheral vasodilation	∞	○	○○○
Blood pressure	●	●	●
Heart rate	Variable	●	∞
Coronary vascular resistance	●	●	●
Coronary blood flow	∞	∞	○○○
Atrioventricular node conduction	●●	●	NE
Contractility	●	NE/●	NE/○

The number of circles represents the magnitude of response: ○, = increase; ●, decrease; NE = no effect.

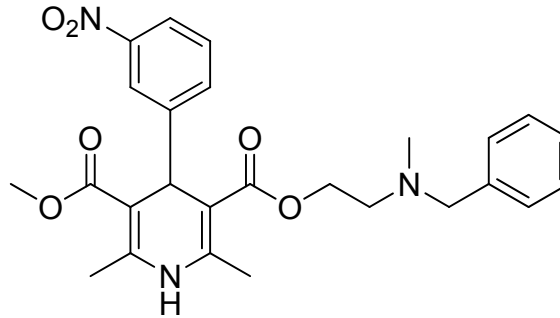
Adapted from Swamy VC, Triggle DJ. Calcium channel blockers. In: Craig CR, Stitzel RE, eds. *Modern Pharmacology with Clinical Applications*, 5th Ed. Boston: Little, Brown, 1997:229–234 and Triggle DJ. Drugs acting on ion channels and membranes. In: Hansch C, Sammes PG, Taylor JB, eds. *Comprehensive Medicinal Chemistry*, vol 3. Oxford, UK: Pergamon Press, 1990:1047–1099; with permission.

1,4-dihidropiridini

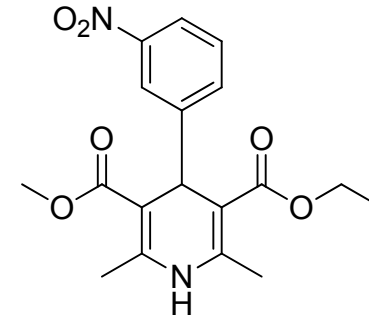
nifedipin



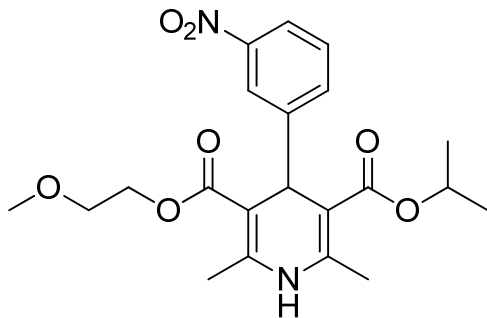
nikardipin



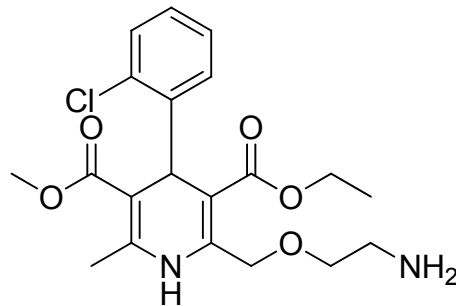
nitrendipin



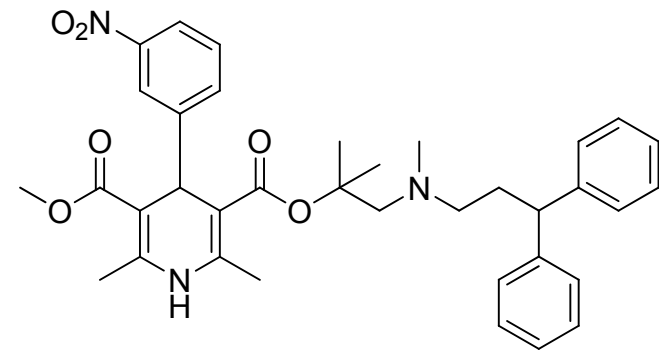
nimodipin



amlodipin

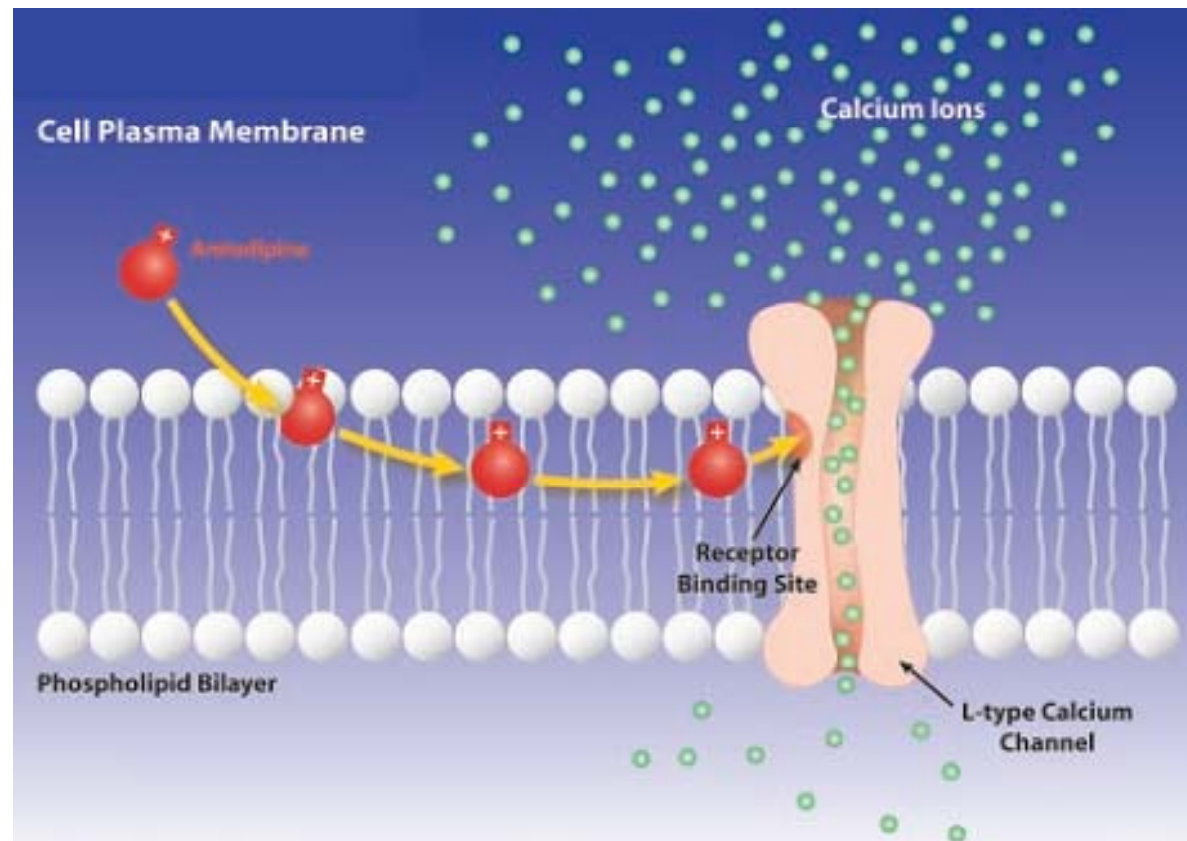


lerkanidipin

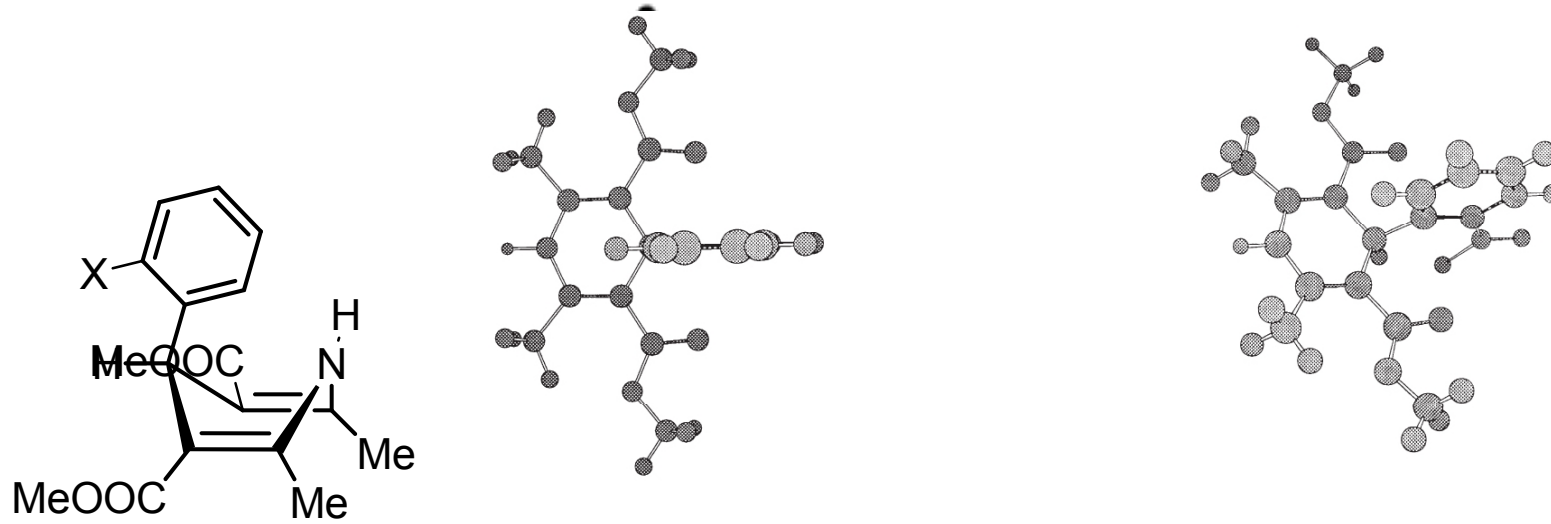


1,4-dihidropiridini

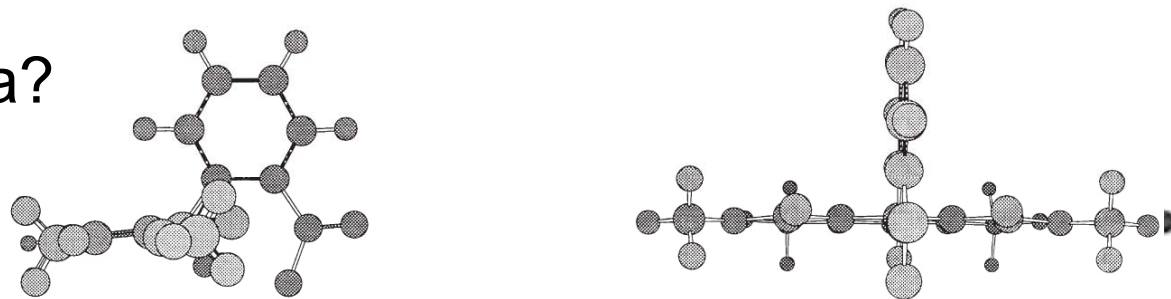
- Fiziološki ligandi za Ca^{2+} kanalčke?
- Lipofilne spojine



1,4-dihidropiridini



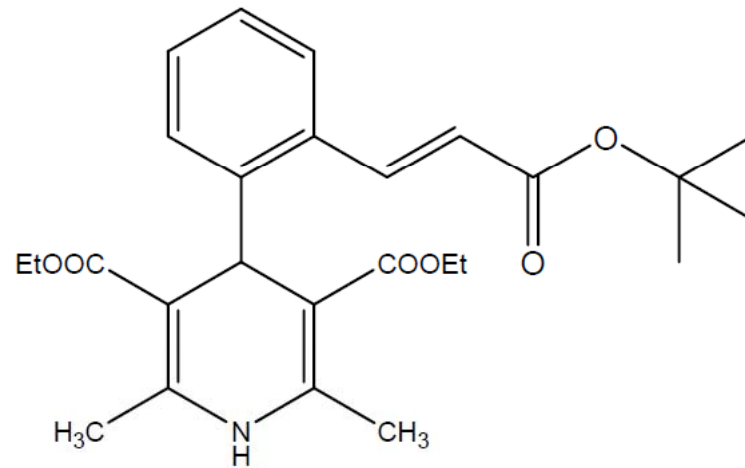
Sinperiplanarna
Antiperiplanarna lega?



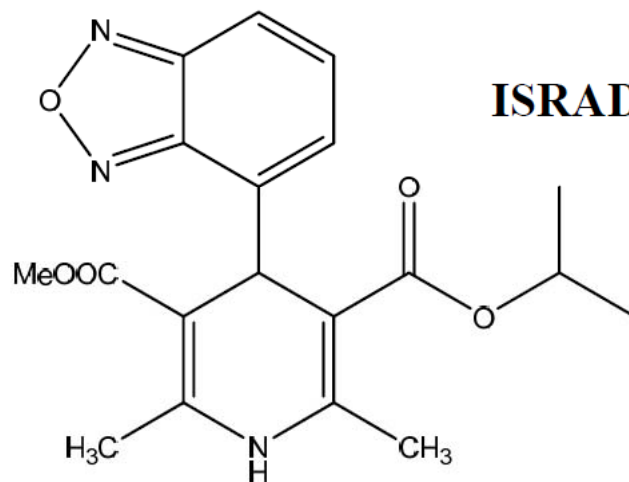
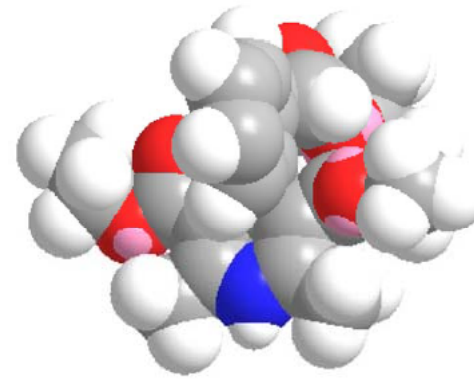
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Fig. 28.23. Molecular models of nifedipine. The ortho-nitro group of nifedipine provides steric bulk and ensures that the required perpendicular nature of the phenyl and dihydropyridine rings is maintained.

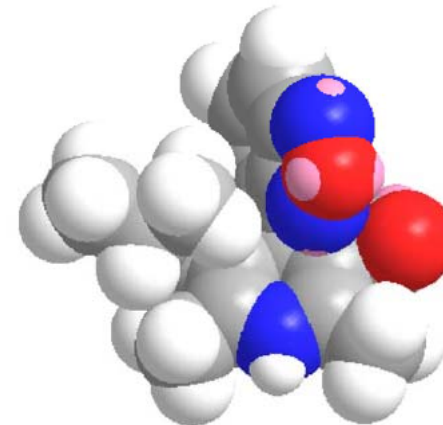
1,4-dihidropiridini



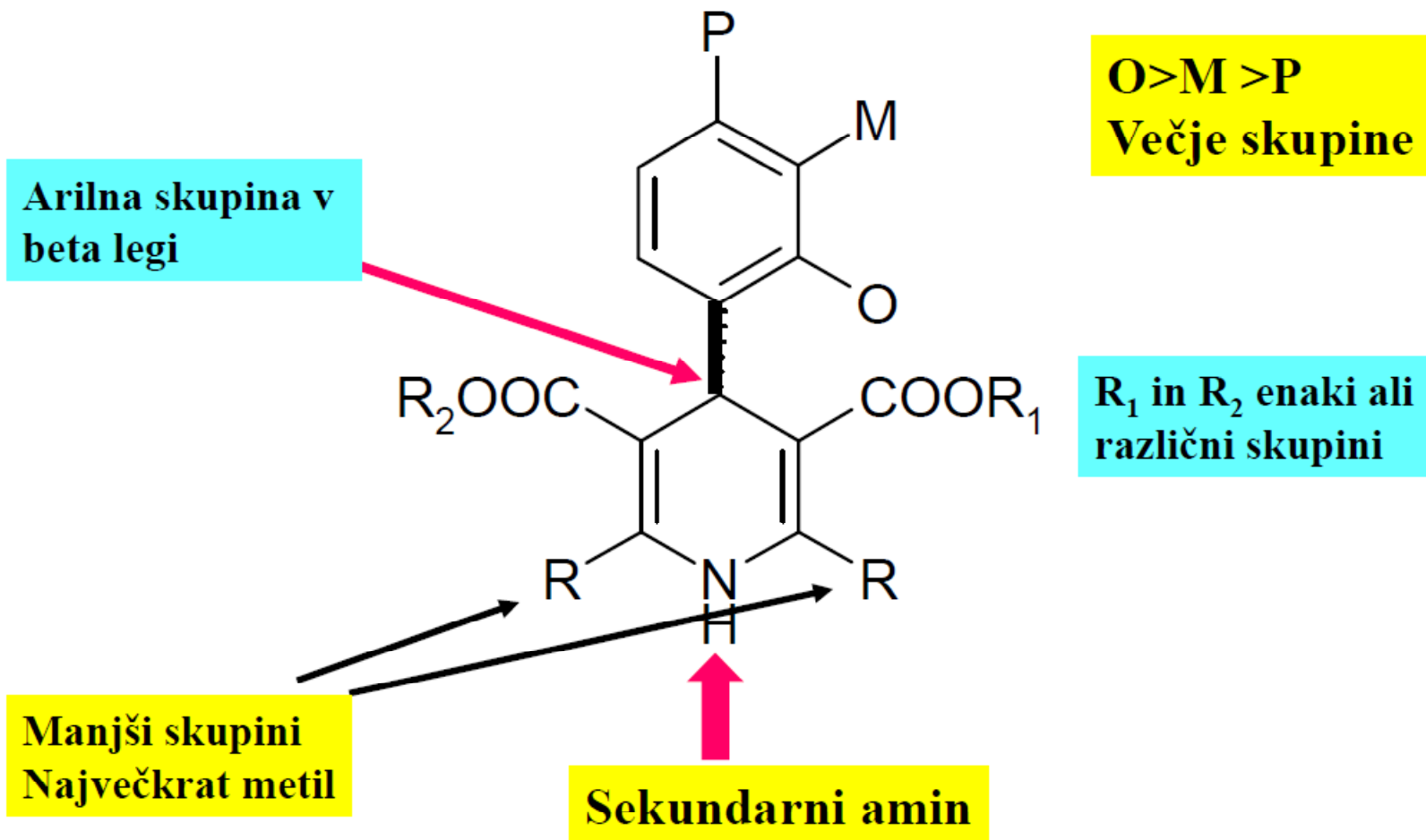
LACIDIPIN



ISRADIPIN



SAR pri 1,4-dihidropiridinskih antagonistih



1,4-dihidropiridini - SAR

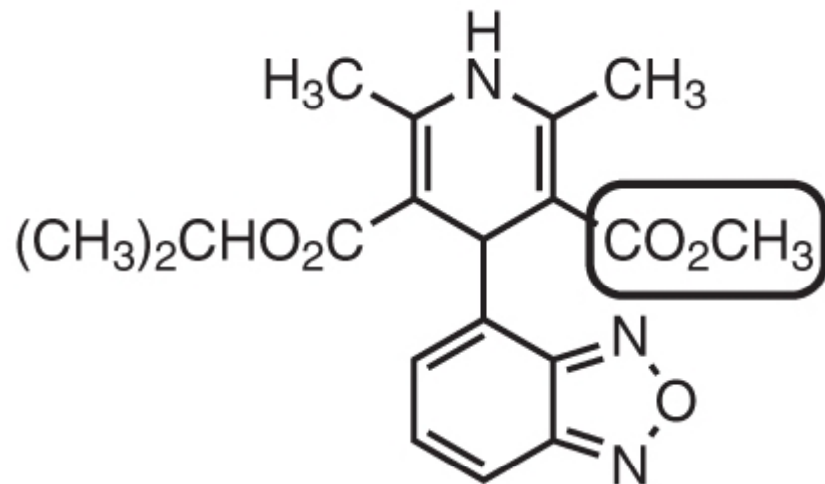
- 1,4-dihidropiridin, piridin NE!
- Neionizirani pri fiziol. pH, razen nikardipina in amlodipina
- **Mesti 2,6** – kratki alkilni verigi – Me, redkeje Et
- **Mesti 3,5** – optimalna estra:
 - **Simetrična estra:** ohranjeno šibko delovanje na srčno mišico (+ inotropi)
 - **Nesimetrična estra:** ni inotropnega učinka

1,4-dihidropiridini - SAR

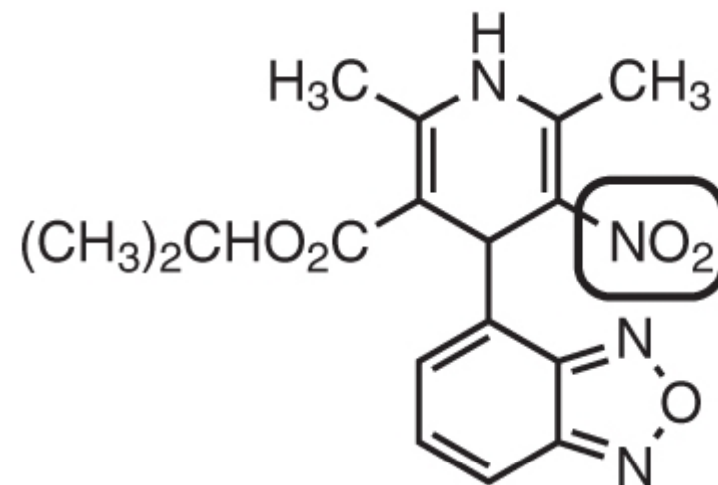
- **Mesto 4** – Ph substituent, *o* ali *m*-substituiran: -NO₂, -Cl
- **asimetričnost**: v primeru nesimetričnih estrov stereogeni center, učinkovit R enantiomer

1,4-dihidropiridini

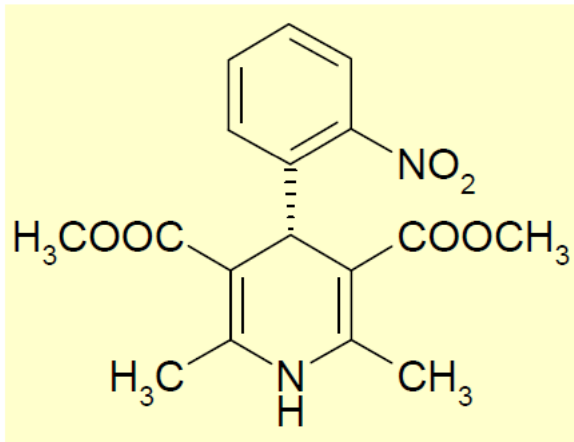
- Zamenjava estrske skupine z NO_2 ali laktonom → **AGONISTI**



Isradipine
(Calcium channel blocker)



PN 202.791
(Calcium channel activator)

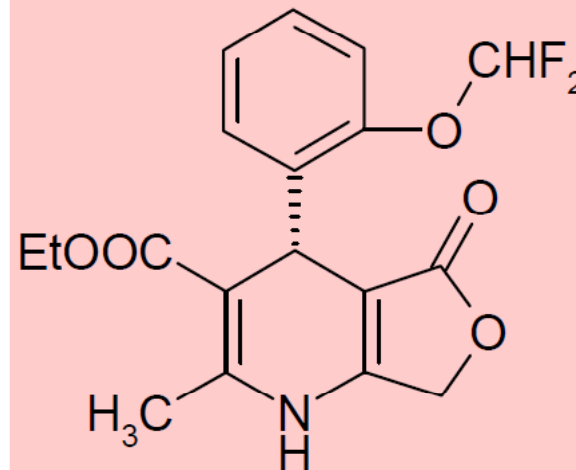


NIFEDIPIN

Inhibira prehod Ca²⁺

CGP 28-392

Stimulira prehod Ca²⁺



Alosterično povezana vezavna mesta za kalcijeve antagoniste

/vezava na različna mesta na α podenoti L kanala/

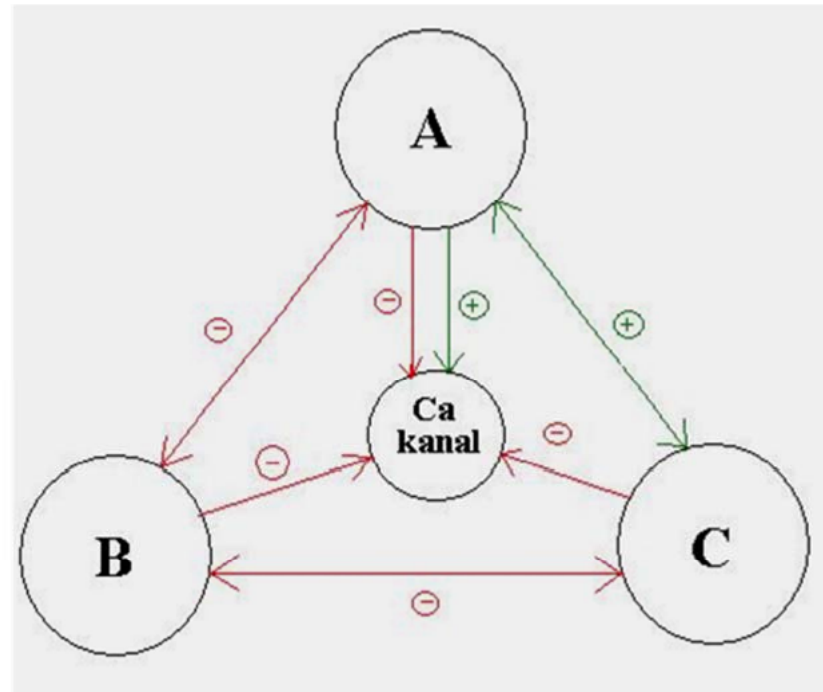
A: 1,4-dihidropiridini

B: fenilalkilamini

C: benzotiazepini

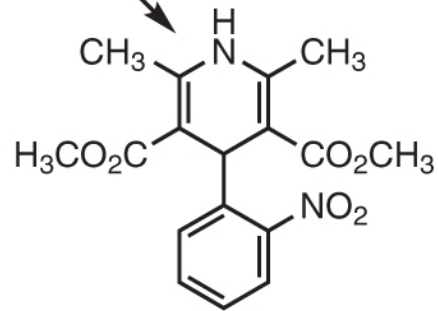
⊖ Alosterično
izključevanje

⊕ Alosterično
dopolnjevanje



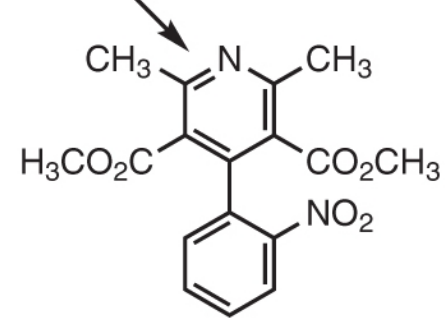
Metabolizem 1,4-dihidropiridinov

1,4-Dihydropyridine ring



Nifedipine
(active)

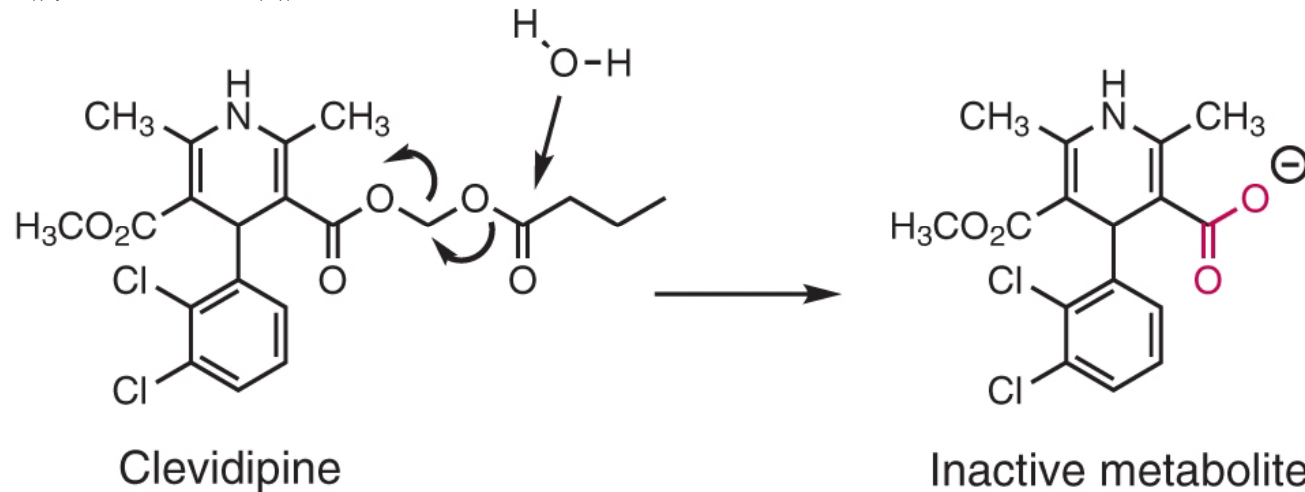
Pyridine ring



Oxidized analog
(inactive)

CYP3A4

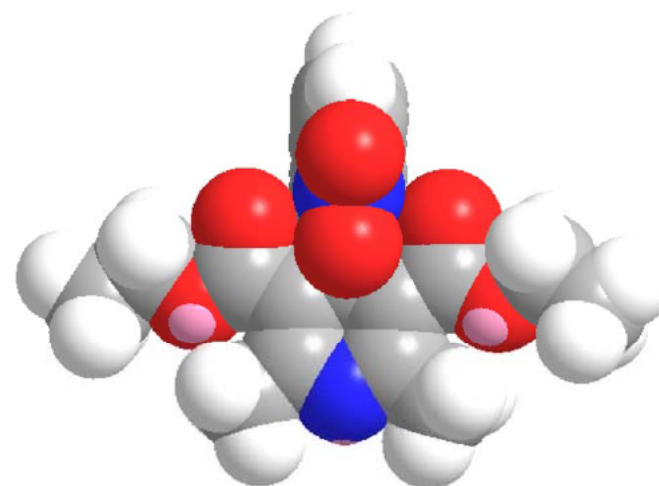
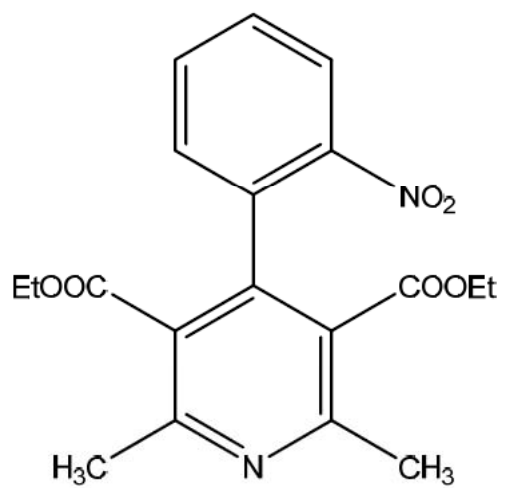
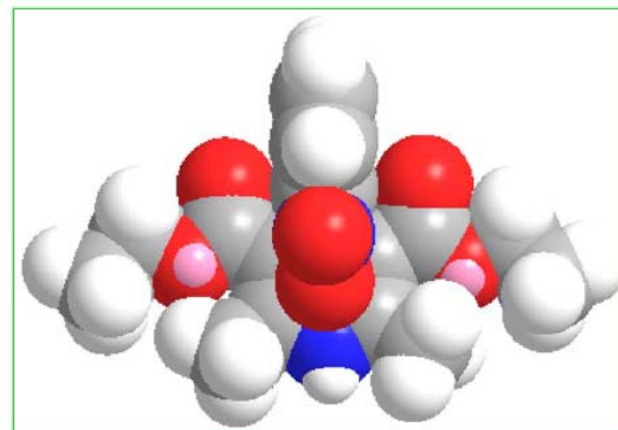
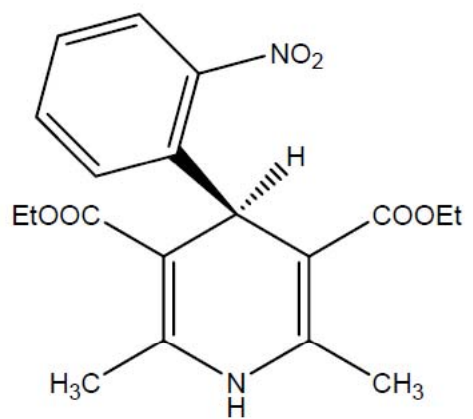
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Clevidipine

Inactive metabolite

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Primerjava FK lastnosti

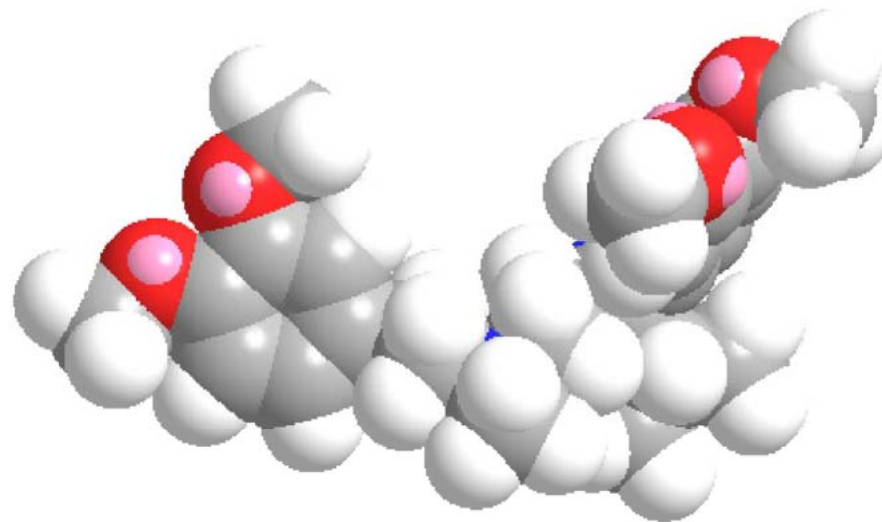
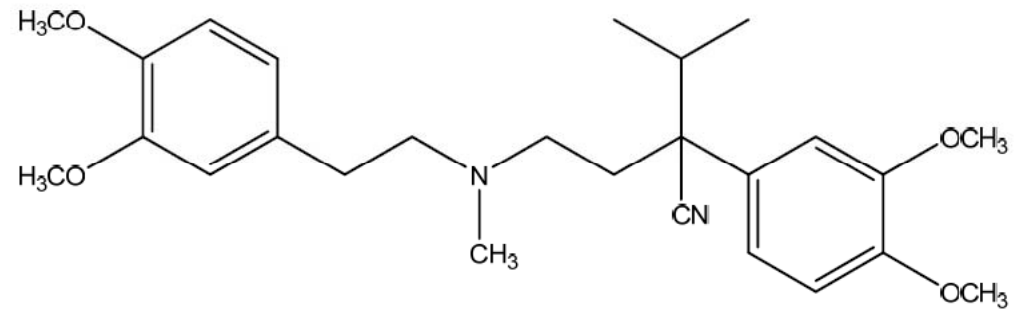
- FK parametri

Drug	Calculated LogP	Oral Bioavailability (%)	Effect of Food on Absorption	Active Metabolite	Protein Binding (%)	T _{max} (hours)	Elimination Half-Life (hours)	Major Route(s) of Elimination
1,4-Dihydropyridines								
Amlodipine	2.76	64–90	None	None	93–97	6–12	35–50	Renal (60%) Fecal (20%–25%)
Clevidipine	2.96	NA	NA	None	>99	2–4 (min)	0.15	Renal (63%–74%) Fecal (7%–22%)
Felodipine	4.69	10–25	Increase	None	>99	2.5–5.0	11–16	Renal (70%) Fecal (10%)
Isradipine	3.19	15–24	Reduced rate, same extent	None	95	7–18 (CR)	8	Renal (60%–65%) Fecal (25%–30%)
Nicardipine	4.27	35	Reduced	None	>95	0.5–2.0 (IR) 1–4 (SR)	2–4	Renal (60%) Fecal (35%)
Nifedipine	2.40	45–70 86 (SR)	None	None	92–98	0.5 (IR) 6 (SR)	2–5 (IR) 7 (SR)	Renal (60%–80%) Biliary/fecal (15%)
Nimodipine	3.14	13	Reduced	None	>95	1	8–9	Renal
Nisoldipine	3.86	5	High-fat meal increases immediate release but lowers overall amount	Hydroxylated analog	>99	6–12	7–12	Renal (70%–75%) Fecal (6%–12%)
Phenalkylamines								
Verapamil	3.53	20–35	Reduced (SR form only)	Norverapamil	90	1–2 (IR) 7–11 (SR) 0.1–0.2 (IV)	3–7 (IR) 12 (SR)	Renal (70%) Fecal (16%)
Benzothiazepines								
Diltiazem	3.55	40–60	None	Deacetyl-diltiazem	70–80	2–4 (IR) 6–14 (SR)	3.0–4.5 (IR) 4.0–9.5 (SR) 3.4 (IV)	Renal (35%) Fecal (60%–65%)

CR, controlled-release product; IR, immediate-release product; IV, intravenous administration; NA, not applicable; SR, sustained-release product; T_{max}, time to maximum blood concentration.

Fenilalkilamini

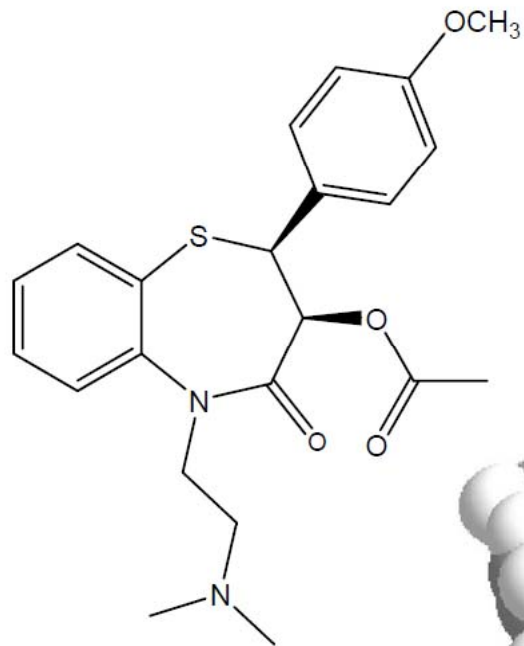
Verapamil



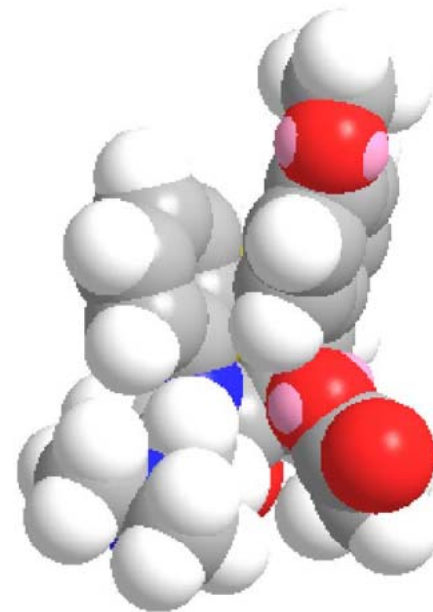
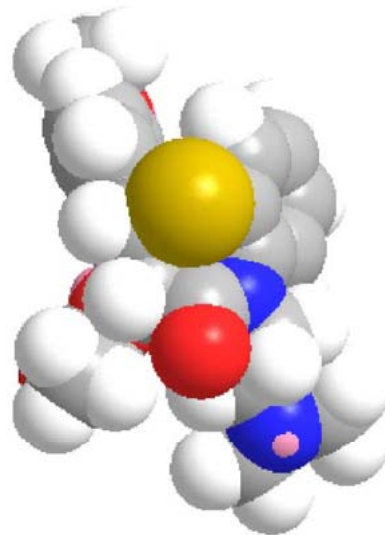
Fenilalkilamini

- Dva aromatska obroča, substituirana z –Ome
- terciarni amin
- Distančnik: 2C + 3C
- Stereogeni center – učinkoviti S enantiomeri
- Substituent na distančniku: -CN + alkil (3-12 C atomov)
- pKa = 8,9 (verapamil)

Benzotiazepini



Diltiazem

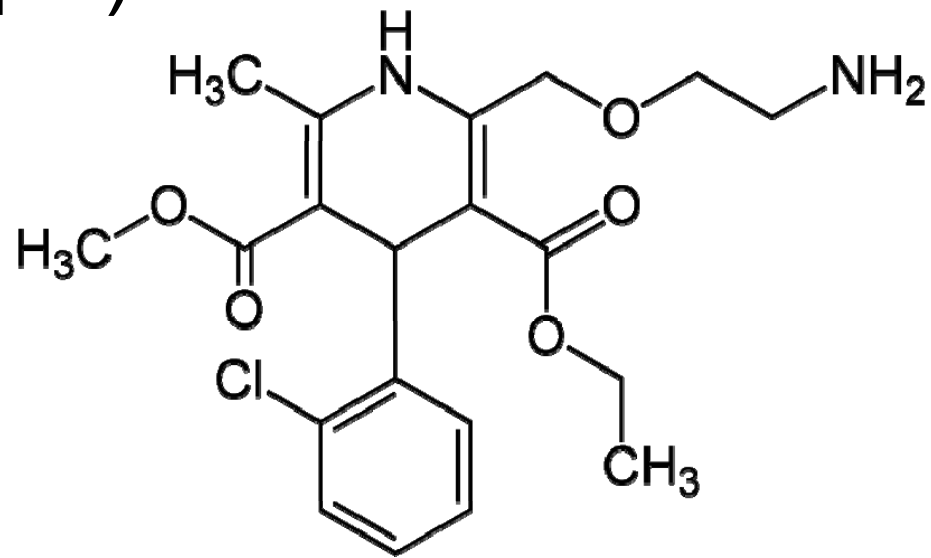


Benzotiazepini

- Učinek in strukturni elementi podobni kot pri fenilaklilaminih:
 - 2 Ar obroča
 - Ustrezna razdalja: **distančnik**
 - **Terciarni amin**
- Zamenjava S→N: benzodiazepini, šibkejši učinek, sedacija
- pKa = 7,7 (diltiazem)

Primerjava fiz.-kem. lastnosti

- Bazičnost: diltiazem, verapamil – bazi, 1,4-DHP zelo šibke baze (vinilogni karbamati)
- 1,4-DHP bazični amini v stranski verigi (npr. amlodipin)



Primerjava FK lastnosti

- FK parametri

TABLE 23.11 Pharmacokinetic Parameters of Calcium Channel Blockers								
Drug	Calculated LogP	Oral Bioavailability (%)	Effect of Food on Absorption	Active Metabolite	Protein Binding (%)	T _{max} (hours)	Elimination Half-Life (hours)	Major Route(s) of Elimination
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Literatura predavanj

Foye's Principles of Medicinal Chemistry, 6.
izdaja:

- 26., 28. poglavje