General Pharmacology Learning Objectives

- 1. Define receptors
- 2. Know what agonists and antagonists do when they bind the receptors
- 3. Differentiate receptor and inert binding sites from each other
- 4. Know which part of the receptor competitive inhibitors, allosteric activators and allosteric inhibitors bind and what is the result of binding
- 5. Know the meaning of permeation
- 6. Understand the concepts of aqueous diffusion, lipid diffusion, transport by special carriers and endocytosis/exocytosis
- 7. Understand the Fick's law of diffusion _ be able to identify which values increase and which one's decrease the rate of drug absorption;
- 8. Differentiate charged and uncharged molecules in terms of aqueous and lipid solubility;
- 9. Understand the Henderson-Hasselbach equation: what it can be used for and how;
- 10. Know how protonation/deprotonation affects ionization of weak acids and bases;
- 11. Clinically correlate ionization of weak acids and basis with renal excretion of drugs;
- 12. Know which factors influence the absorption of drugs;
- 13. Understand the concept of bioavailability;
- 14. Know the common routes of administration;
- 15. Recall which route of administration has the optimal bioavailability;
- 16. Recall which route of administration is associated with first pass metabolism;
- 17. Understand the concept of first-pass metabolism;
- 18. Know the determinants of drug distribution;
- 19. Understand the concept of volume of distribution;
- 20. Calculate the volume of distribution;
- 21. Know the percentages of total body water, intracellular water and extracellular water;
- 22. Understand the concept of metabolism;
- 23. Know the difference between excretion and elimination;
- 24. Understand what are the effects that metabolism can have on different drugs;
- 25. Differentiate first-order kinetics from zero order kinetics: understand what is the difference between their rates of elimination and half-lives;
- 26. Identify the graphs of zero-order vs. first order kinetics;
- 27. Recall the drugs that have zero-order kinetics;
- 28. Distinguish distribution and elimination phases;
- 29. Know which drugs need acute toxicity testing;
- 30. Know types of animal tests;
- 31. Know the categories of drug safety in pregnancy be able to identify how safe the drug is based on its category;
- 32. Understand the terms: mutagenic, carcinogenic, teratogenic;
- 33. Understand the terms: single-blind study, double blind study;
- 34. Know what Ames test is and what it is used for;
- 35. Know what dominant lethal test is;

- 36. Know all four phases of clinical trials: purpose of each phase, approximate amounts of participants, target groups.
- 37. Understand the concept of adaptive clinical trials.
- 38. Know the meaning of orphan drugs.
- **39**. Understand the dose-response relationships; be able to identify EC50 and Emax on curves;
- 40. Understand the concepts of efficacy and potency; be sure to know the pattern of their association with EC50 and Emax values;
- 41. Know the effect of competitive antagonist in presence of full agonist; Be able to recall the shift on a dose-response curve; be able to recall the effect of a noncompetitive antagonist on EC50 and/or Emax and therefore on potency and/or efficacy;
- 42. Know the effect of competitive antagonist in presence of full agonist; Be able to recall the shift on a dose-response curve; be able to recall the effect of a noncompetitive antagonist on EC50 and/or Emax and therefore on potency and/or efficacy;
- 43. Know the concepts of inverse agonist, full agonist, partial agonist, neutral antagonist and there Log Dose activity curves;
- 44. Understand the concepts of biased agonist, competitive antagonist, irreversible antagonist, physiologic antagonist, chemical antagonist;
- 45. Know the meaning of constitutive activity;
- 46. Understand the concepts of median effective, median toxic and median lethal doses.
- 47. Read the quantal dose-response plots and bell-shaped curves and identify ED50 and LD50 on it.
- **48**. Know what is a therapeutic window and what it means clinically to have a wide or narrow therapeutic window;
- 49. Know what is therapeutic index and what it means to have a high or low therapeutic index;
- 50. Know 5 types of signaling mechanisms; Be able to identify which type of receptor is used by steroids, vitamin D, nitric oxide, insulin, EGF.
- 51. Know the concepts of tachyphylaxis and receptor upregulation and downregulation; Be able to identify which ones of them are long-term/short-term.
- 52. Know the meaning of an effective drug concentration;
- 53. Understand volume of distribution; be able to recall formula and calculate accordingely;
- 54. Understand how the Vd changes in case of liver disease and kidney disease.
- 55. Know the effect of plasma protein binding or tissue protein binding on Vd.
- 56. Understand the concept of clearance; be able to recall the formula and calculate accordingely;
- 57. Understand the concept of half-life; be-able to recall the formula and calculate accordingely; be able to calculate the dose patient took or current plasma concentration of the drug using the udnerstanding of half-life;
- 58. Understand the concept of steady state; be able to name the amount of half-lives needed tor each a steady state;
- 59. Understand the concept of bioavailability;
- 60. Know which route of administration has the optimal bioavailability;

- 61. Know the factors that influence bioavailability;
- 62. Understand the concept of area under the curve;
- 63. Understand the concept of extraction ratio;
- 64. Recall loading dose formula and calculate accordingely;
- 65. Recall maintenance dose formula and calculate accordingely;
- 66. Understand the concept of therapeutic window; Know how its width correlates with drug safety;
- 67. Know the formula of corected dosage in patients with altered clearance in case of renal impairment;
- 68. Understand different effects of biotransformation on drugs;
- 69. Name Phase I reactions; Know what are the characteristics of metabolites made by these reactions;
- 70. Name phase II reactions; Know what are the characteristics of metabolites made by these reactions;
- 71. Know what are important sites of drug metabolism;
- 72. Name the determinants of biotransformation rate;
- 73. define suicide inhibitors;
- 74. Know what are MDR-1 proteins and where they are commonly seen;
- 75. Know high yield CYP correlations; Be able to identify which drugs are CYP inhibitors or CYP inducers and which ones are metabolised by CYP enzymes;
- 76. Understand the concept of toxic metabolism using an example of acetaminophen;
- 77. Understand the concept of personalized medicine;
- 78. Understand how gene polymorphisms may effect the drug metabolism;
- 79. Recall the information given on table 5-1, columns 1 and 3;
- 80. Unerstand the importance of HLA polymorphisms;
- 81. Know the importance of P-glycoprotein;
- 82. Name the drugs that are contraindicated in enhanced metabolizers of the HLA-B*57:01 type.
- 83. Recall anatomic divisions (Parasympathetic, sympathetic, enteric), location of ganglia and characteristics of Autonomic nervous system (difference in terms of length of pre and postganglionic nerves)
- 84. Name the cranial nerves that are part of parasympathetic nervous system
- 85. Recall which receptors respond to autonomic transmitters and drugs but receive no innervation
- 86. Name primary neurotransmitters of parasympathetic and sympathetic nervous system and recall exceptions (thermoregulatory sweat glands)
- 87. List steps of Acetylcholine synthesis, storage and release with corresponding drugs that block this steps.
- 88. Understand process of docking and recall proteins that mediate it
- **89**. Understand process of termination of action of acetylcholine and know the name of enzyme that cleaves it.
- **90**. List steps of Norepinephrine synthesis, storage and release with corresponding drugs that block this steps.

- 91. Differentiate between process of termination of action of Acetylcholine and Norepinephrine
- 92. Name cotransmitters released together with primary neurotransmitters
- **93**. Recall types of cholinoreceptors, Adrenoreceptors and Dopaminergic receptors, their location, secondary messenger systems that they use for signal transmission and effects of their activation/inhibition
 - a. Predict effects of these inhibitors on the function of major organ systems (cardiovascular, respiratory, GI, GU, reproductive, exocrine, endocrine, CNS, skeletal muscle)
- 94. Have general understanding of what nonadrenergic, noncholinergic transmission means
- 95. Recall substances that inhibit transmitter release, transmitter uptake after release
 - a. describe the action of several toxins that affect nerve function: tetrodotoxin, saxitoxin, botulinum toxin and Iatrotoxin
- 96. Describe the control of blood pressure
 - a. Baroreceptor neural reflex
 - b. Renin-Aldosterone-Angiotensin hormonal response
- 97. Describe baroreceptor response for the following conditions
 - a. blood loss
 - b. administration of vasodilator
 - c. a vasoconstrictor
 - d. a cardiac stimulant
 - e. cardiac depressant
- 98. Recall effects of Ganglion blockade
- **99**. Name different receptors and response to their activation/inhibition in parts of an eye: accommodation, pupil size changes
- 100. Differentiate between actions of direct and indirect cholinomimetic agonists
- 101. Know which cholinomimetic agents have shortest/longest duration of action
- 102. Name Direct-acting cholinomimetic agents and
 - a. their spectrum of action (muscarinic,nicotinic or activation of both receptors)
 - b. their clinical use
 - c. key pharmacokinetic functions (short./long acting, can cross Blood-Brain Barrier or not, degraded by cholinesterase or not)
 - d. mechanism of action
 - 103. Name Indirect acting cholinomimetic agents and
 - a. their spectrum of action (muscarinic,nicotinic or activation of both receptors)
 - b. their clinical use
 - c. key pharmacokinetic functions (short./long acting, can cross Blood-Brain Barrier or not)
 - d. mechanism of action
 - 104. List cholinergic receptors
 - a. their second messenger systems
 - 105. Understand why and how the tissue and organ level effects of nicotinic ganglionic stimulation depend on the autonomic innervation of the organ
 - 106. Understand mechanism of vasodilation and sweat gland activation

- 107. Describe all symptoms of cholinergic toxicity
 - a. Differentiate between muscarinic and nicotinic toxicity
 - b. Name drug used to reverse muscarinic toxicity and drug that reverses nicotinic effects
- 108. Describe mechanism of action of Pralidoxime and meaning of enzyme "Aging"
- 109. Recall drug used for diagnosis of Myasthenia
 - a. used for differentiating Myasthenic and Cholinergic crises
- 110. Describe Difference between Malathion and Parathion, clinical use of malathion
- 111. Name antimuscarinic drugs
 - a. their relative selectivity to specific receptors
 - b. which organ systems do they affect
 - c. clinical use
- 112. Name antinicotinic agents
- a. whether they block ganglion or neuromuscular junction signal transmittion
- b. clinical use
- 113. Name cholinesterase regenerator, its mechanism of action and clinical use
- 114. Describe effects of muscarinic blocking drugs on CNS, Eye, Bronchi, GI and GU tracts, Heart, Blood vessels, Glands and skeletal muscle and which receptors are blocked
- 115. Student must know all predictable and other toxicities associated with Atropine (anticholinergic) toxicity
- 116. Recall treatment of atropine toxicity
- 117. Name contraindications to the use of antimuscarinic agents
- 118. Name ganglion blocking drugs and their effect on major organ systems.
- 119. Neuromuscular blocking drugs
- 120. Know the difference between mechanis of action of Depolirizing and Nondepolirizing neuromuscular blockers from the standpoint of tetanic and post-tetanic twitch strength.
- 121. Recall prototype drug for depolirizing NM blockers
 - a. Its pharmacokinetic properties
 - b. mechanism of action
 - c. Describe phase 1 and phase 2 of blockade
 - d. Name which of this phases can be overcome by increased acetylcholine levels and which can become worse
 - e. Its effects on cardiac muscarinic receptors, autonomic ganglia and histamine release
 - f. Specific effects of succinylcholine in specific groups of patients (burn victims, peripheral nerve dysfunction, muscular dystrophy, spinal cord injury)
 - g. possible aspiration of gastric contents
 - h. Interaction of succinylcholine with other medications
- 122. List nondepolarizind agents
 - a. Describe what phase of blockade does it have
 - b. whether blockade can be reversed by increasing acetylcholine level or not
 - c. mechanism of action
 - d. Name which of these agent affects cardiac muscarinic receptors and how
 - e. Name which of them is not used anymore because of toxic metabolite

- 123. Effects of aging and disease on nondepolarizing and depolarizing NM blocker action
- 124. Spasmolytic drugs
- 125. Student should be able to name drugs used for chronic spasms
 - a. Their mechanism of action
 - b. Specific clinical application
 - c. side effects
- 126. Describe which electrolyte abnormality characterizes malignant hyperthermia
 - a. Agent used to treat malignant hyperthermia
 - b. Its mechanism of action

127. Name the types of adrenoreceptors; Know their mechanism of action; Know which tissues they are in (Table 9-1)

128. Know the difference between concepts of direct and indirect acting sympathomimetics;

129. Name examples of indirect acting sympathomimetics and explain their mechanism of action;

- 130. Know how catecholamines are metabolized;
- 131. Know which route of administration is optimal for direct adrenoreceptor agonists;
- 132. Know which route of administration is optimal for amphetamines;
- 133. Explain how tyramine interacts with MAO inhibitors;
- 134. Associate each type of adrenoreceptor with appropriate second messenger system;
- 135. Associate each type of dopamine receptor with appropriate second messenger system;
- 136. Know CNS effects of sympathomimetic drugs;
- 137. Understand effects of sympathomimetic drugs on eyes;
- 138. Understand effects of sympathomimetic drugs on bronchi;
- 139. Understand effects of sympathomimetic drugs on GI tract;
- 140. Understand effects of sympathomimetic drugs on GU tract;
- 141. Location of different sympathetic receptors in vascular beds;
- 142. Understand effects of sympathomimetic drugs on heart;
- 143. Understand net cardiovascular actions of sympathomimetic drugs;
- 144. Understand Figure 9-1; be able to identify a drug based on a figure;
- 145. Metabolic and hormonal effects of sympathomimetic drugs;
- 146. Know the treatment of anaphylaxis;
- 147. Know the CNS indications of sympathomimetic drugs;
- 148. Know the eye related indications of sympathomimetic drugs;
- 149. Name short-acting and long-acting symptahomimetics used for asthma treatment;
- 150. Know cardiovascular indications of sympathomimetic drugs;
- 151. Know indications and side effects of beta2 agonists in pregnant women;
- 152. Know GU indications of sympathomimetic drugs;
- 153. Understand toxicity of sympathomimetic drugs
- 154. Name primary subgroups of Adrenoreceptor antagonists
- 155. Name nonselective alpha receptor blockers
 - a. Compare reversible and irreversible alpha blockers
 - b. Clinical use
- c. List selective alpha 1 receptor blockers, most common clinical application

- 156. Describe Toxicity of selective and nonselective alpha receptor blockers
- 157. Explain most common cardiovascular effects of nonselective alpha blockers
- 158. Explain "Epinephrine reversal" in a patient who has received an alpha blocker
 - a. Compare to phenylephrine effect
- 159. Name beta 1 receptor blockers
 - a. mechanism of action
 - b. clinical application
- 160. Name nonselective beta receptor blockers
 - a. mechanism of action
 - b. clinical application
- 161. Name beta blockers who have inverse agonist action
- 162. Recall which beta blockers are short acting and which are long acting
- 163. List drugs that have both, alpha and beta receptor blocking effect
- 164. Recall toxicity of beta blockers
- 165. Name drugs used in glaucoma
 - a. Mechanism of action
 - b. Method of administration
- 166. List the major organ system effects of histamine and serotonin.
- 167. Describe the pharmacology of the 3 subgroups of H1 antihistamins, list prototypical agents for each subgroup
- 168. Describe the pharmacology of the H2 antihistamines; name 2 members of this group.
- 169. Describe the action and indication for the use of "triptans" such as sumatriptan.
- 170. Describe one 5-HT2 and one 5-HT3 antagonist and their major applications.
- 171. List 3 drugs currently approved for the treatment or prevention of obesity.
- 172. List the major organ system effects of the ergot alkaloids.
- 173. Describe the major clinical applications and toxicities of the ergot drugs.
- 174. List 3 important hyperthermic syndromes.
- 175. Name an antagonist of angiotensin II at its receptor and at least 2 drugs that reduce the formation of ANG II.
- 176. Outline the major effects of bradykinin and brain natriuretic peptide.
- 177. Describe the functions of converting enzyme (peptidyl dipeptidase, kininase II).
- 178. List 2 potent vasoconstrictor peptides.
- 179. Describe the effects of vasoactive intestinal peptide and substance P.
- 180. Describe the clinical applications of bosentan and aprepitant.
- 181. Describe the effects of NSAIDs on prostaglandin synthesis.
- 182. Contrast the functions of COX-1 and COX-2.
- 183. Compare the actions and toxicity of aspirin, the older nonselective NSAIDs, and the COX-2-selective drugs.
- 184. Explain why several of the highly selective COX-2 inhibitors have been withdrawn from the market.
- 185. Describe the toxic effects of aspirin.
- 186. Describe the effects and the major toxicity of acetaminophen.
- 187. Name 5 disease-modifying antirheumatic drugs (DMARDs) and describe their toxicity.

- 188. Explain why patients need to be screened for tuberculosis prior to initiating anti-TNFalpha-therapy.
- 189. Describe the major naturally occurring glucocorticosteroid and its actions.
- 190. List several synthetic glucocorticoids, and describe differences between these agents and the naturally occurring hormone.
- **191.** Describe the actions of the naturally occurring mineralocorticoid and 1 synthetic agent in this subgroup.
- 192. List the indications for the use of corticosteroids in adrenal and nonadrenal disorders.
- 193. Name 3 drugs that interfere with the action or synthesis of corticosteroids, and, for each, describe its mechanism of action.
- 194. Describe strategies of asthma and COPD therapy.
- 195. List the major classes of drugs used in asthma and COPD.
- 196. Describe the mechanisms of action of these drug groups.
- 197. List the major adverse effects of the prototype drugs used in airways disease.
- 198. Sketch the biochemical pathway for thyroid hormone synthesis and release and indicate the sites of action of antithyroid drugs.
- 199. List the principal drugs for the treatment of hypothyroidism.
- 200. List the principal drugs for the treatment of hyperthyroidism and compare the onset and duration of their action.
- 201. Describe the major toxicities of thyroxine and the antithyroid drugs.
- 202. Describe the effects of insulin on hepatocytes, muscle, and adipose tissue.
- 203. List the types of insulin preparations and their durations of action.
- 204. Describe the major hazards of insulin therapy.
- 205. List the prototypes and describe the mechanisms of action, key pharmacokinetic features, and toxicities of the major classes of agents used to treat type 2 diabetes.
- 206. Give 3 examples of rational drug combinations for treatment of type 2 diabetes mellitus.
- 207. Describe the clinical uses of glucagon.
- 208. Describe the primary features of cell-mediated and humoral immunity
- 209. Name 7 immunosuppressants and, for each, describe the mechanism of action, clinical uses, and toxicities
- 210. Describe the mechanisms of action, clinical uses, and toxicities of antibodies used as immunosuppressants.
- 211. Identify the major cytokines and other immunomodulating agents and know their clinical applications.
- 212. Describe the different types of allergic reactions to drugs.