

# ANALGETICI

## VRSTE BOLA

Nociceptivni

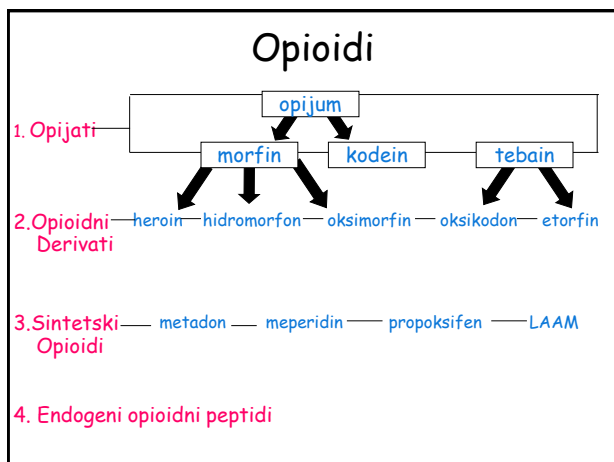
Neuropatski

Somatski    Visceralni



- Opioidni analgetici
- Nesteroidni antiinflamatorni lekovi






### Opioidni analgetici:

- ❖ morfin i derivati (polusintetski),
- ❖ morfinani,
- ❖ dimetilbenzomorfani,
- ❖ fenilpiperidini,
- ❖ fenilpropilamini (metadoni)
- ❖ oripavini i
- ❖ opioidi različitih struktura.

} sintetski



### Opijati deluju na više mesta u mozgu i nervnom sistemu



Opijati izazivaju depresiju disanja

Opijati menjaju limbički sistem, povećavaju osećaj zadovoljstva

Opijati blokiraju puteve prenosa bola

## Opioidni receptori

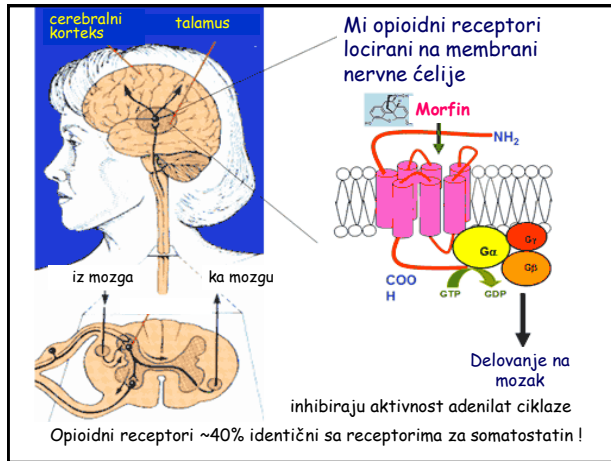
U mozgu, kičmenoj moždini i perifernim tkivima.

Centralna i periferna distribucija receptora je kompleksna.

Četiri (pet?) tipova opioidnih receptora:

- ❖  $\mu$ - (mi),
- ❖  $\kappa$ - (kapa),
- ❖  $\delta$ - (delta)
- ❖  $\sigma$ - (sigma)

**Periferni** opioidni receptori dokazani su u ileumu i odgovorni su za antidijaroično dejstvo opioida.



## Stimulacija receptora

**Mi (OP3)**- mesto delovanja **endogenih peptida**, većine klinički značajnih opioida: morfin, derivati morfinana, benzomorfan, anilidopiperidini i derivati difenilheptana

- Fizička zavisnost
- Euforija
- Analgezija
- Respiratorna depresija
- Smanjuju motilitet GIT

**Kapa (OP2)**-specifični za peptide ekogi na položaju 6 sadrže aminokiselinu arginin, tj specifično vezuju **dinorfine** ali i **salvinorin**.

- Sedacija
- Analgezija
- Mioza
- kapa agonisti ne izazivaju respiratornu depresiju, konstipaciju i fizičku zavisnost

### Delta (OP1)

- Analgezija
- Mesto delovanja **enkefalina** i derivata (DA<sup>2</sup>DLE<sup>5</sup>; DSLET)
- Oslobadja hormon rasta

### Orfan opioidni receptori

- Endogeni heptadekapeptid (nociceptin; orfanin FQ)

### Sigma

- Disforija
- Halucinacije** (i vizuelne i auditorne)
- Respiratorna i vazomotorna stimulacija
- Midrijaza

### Opioidni analgetici:

- razvijaju toleranciju i zavisnost!
- sedativni efekat - zato ih nazivamo i narkotici!
- poboljšavaju raspoloženje (euforični efekat)
- u većoj meri izazivaju halucinacije
- inhibiraju disanje i kašalj (npr. kodein i folkodin)

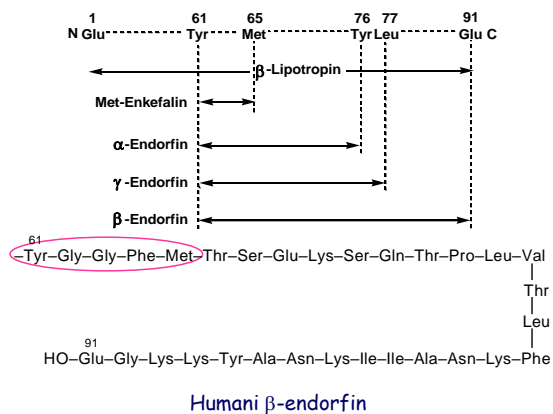
Tolerancija

Fizička  
zavisnost

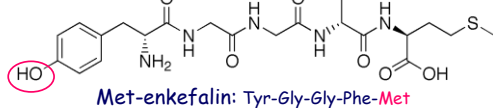


Psihicka  
zavisnost

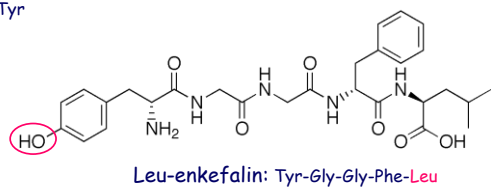
### Endogeni opiodi POMC-241 ak



### Enkefalini

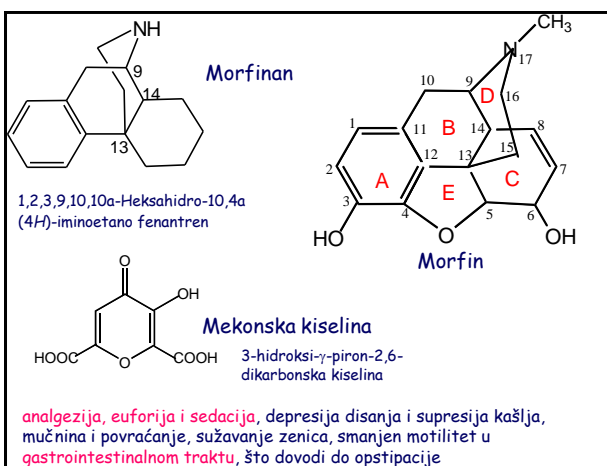


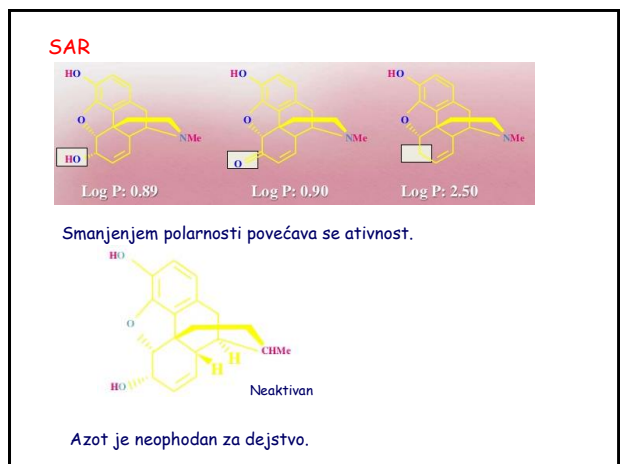
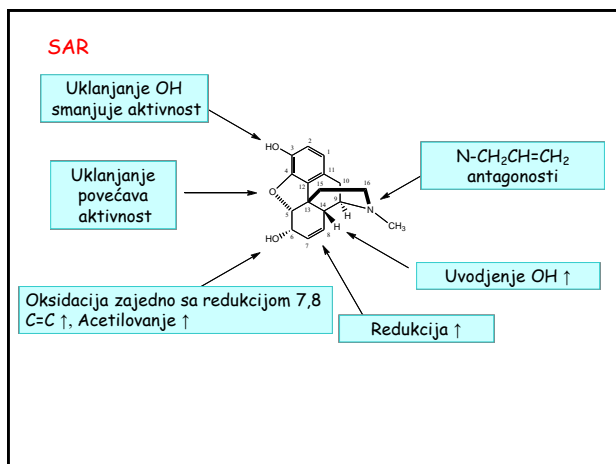
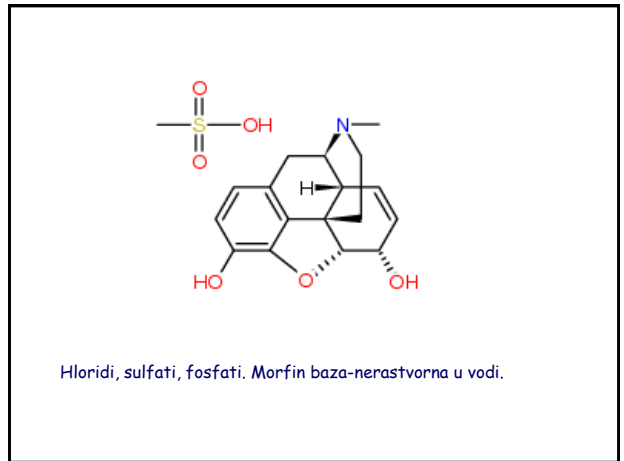
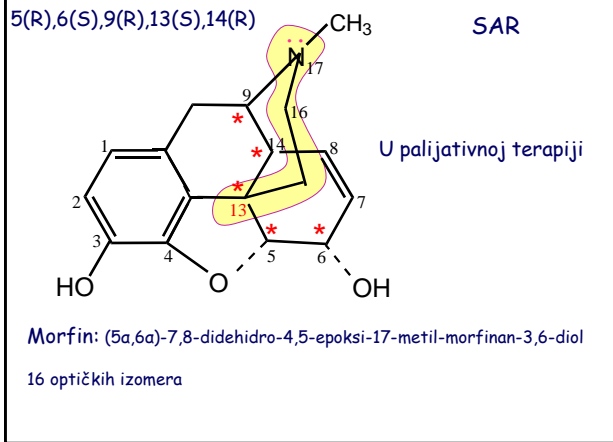
Tyr

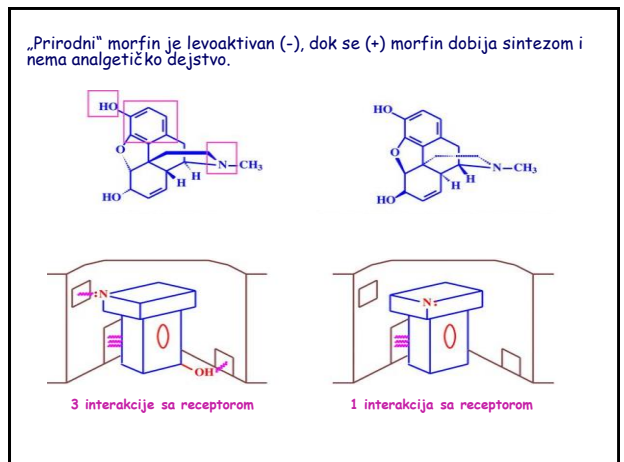
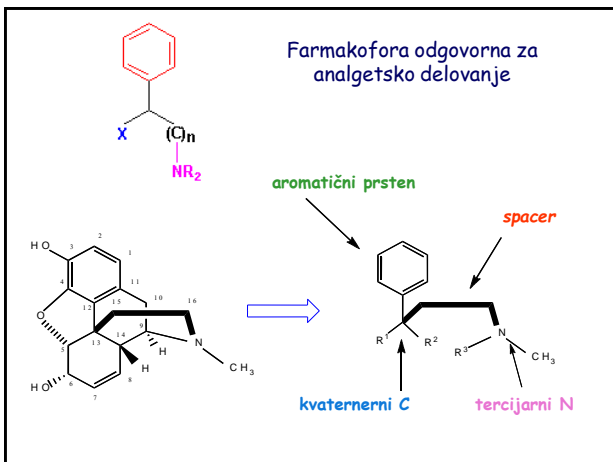
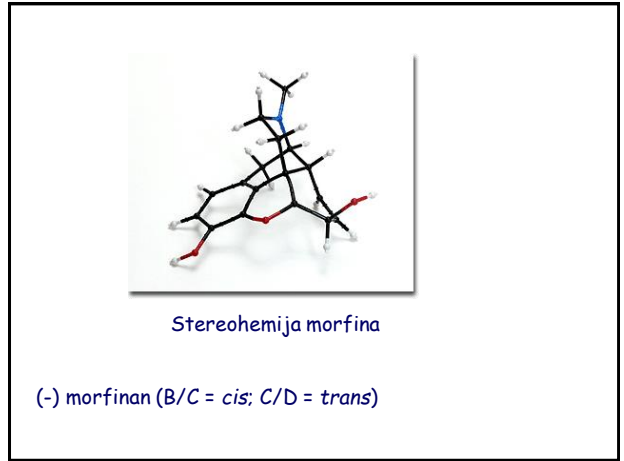
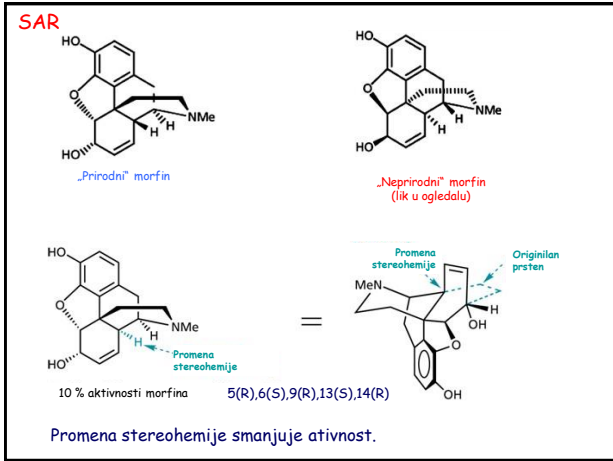


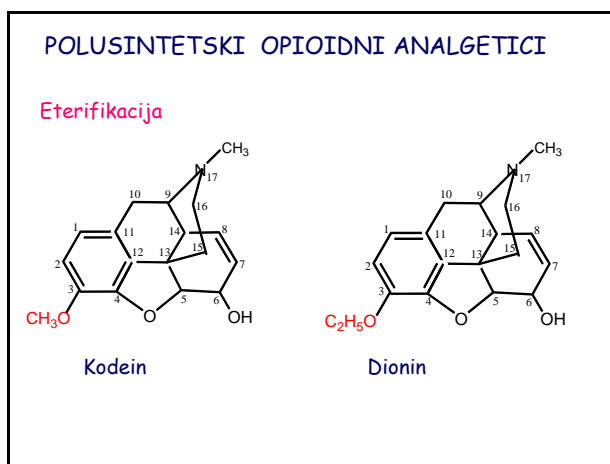
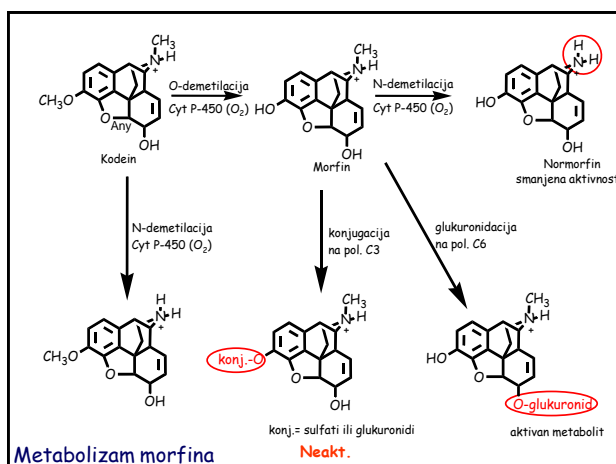
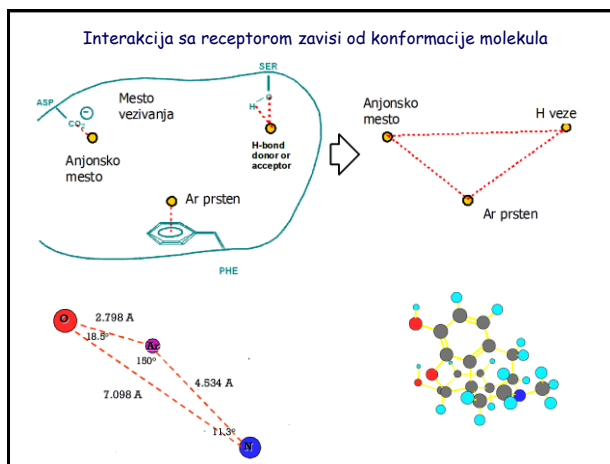
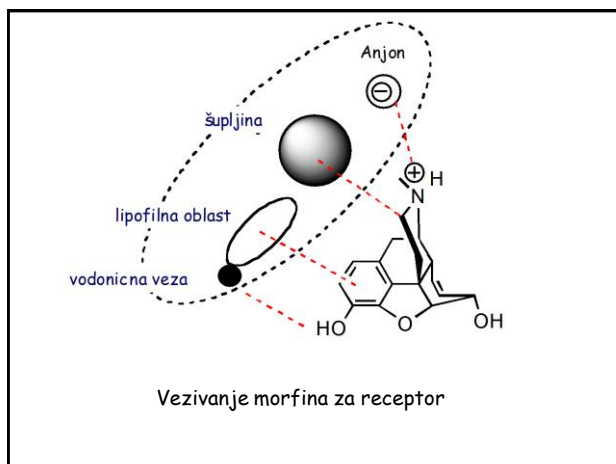
"specifični" endorfini, 1975, pentapeptidi.

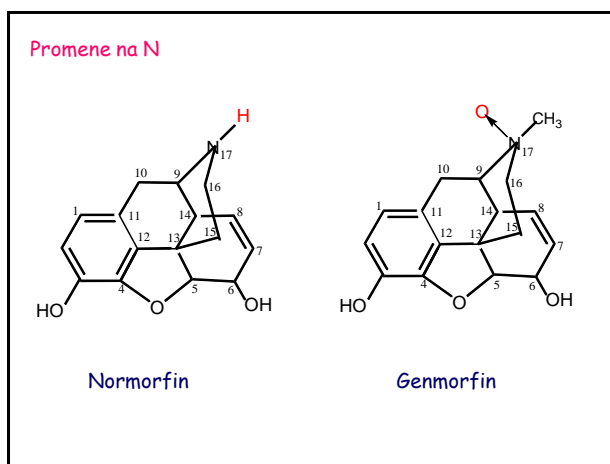
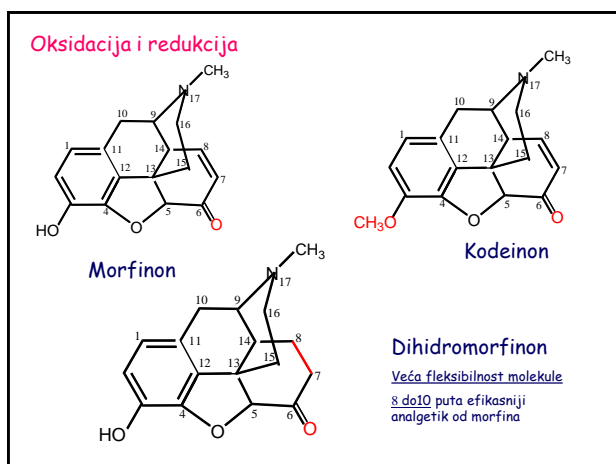
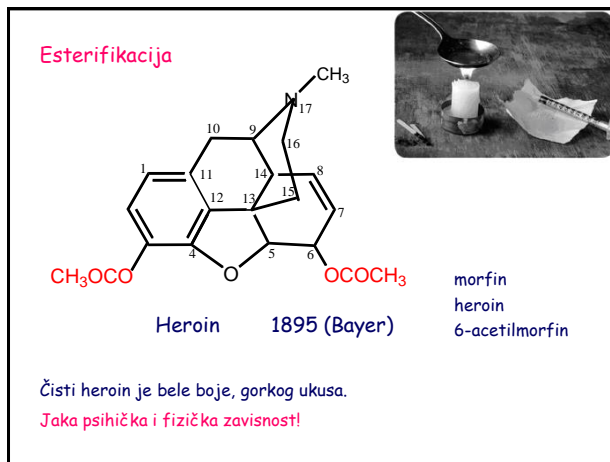
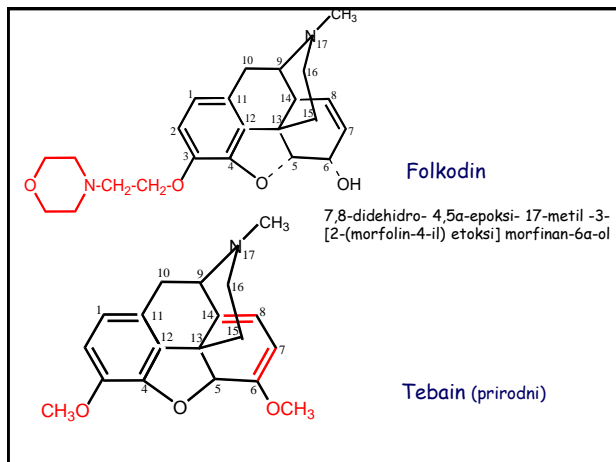
Dinorfini-iz prodinorfina (32 ak): A i B



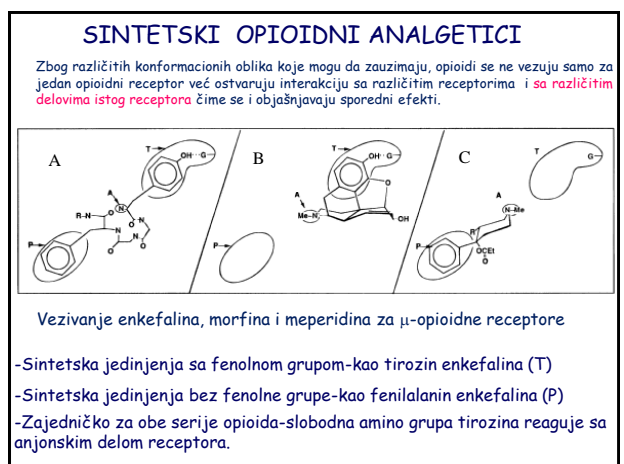
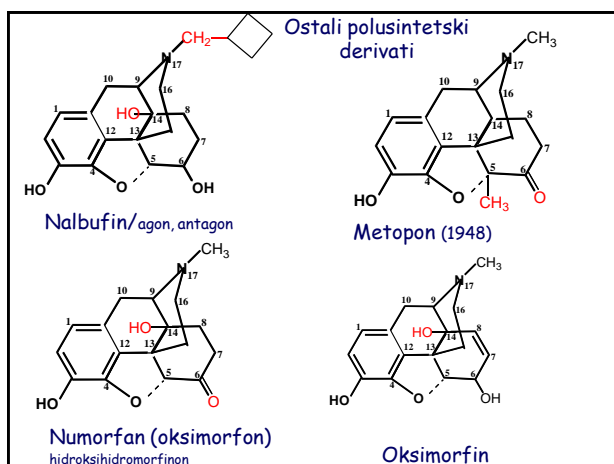
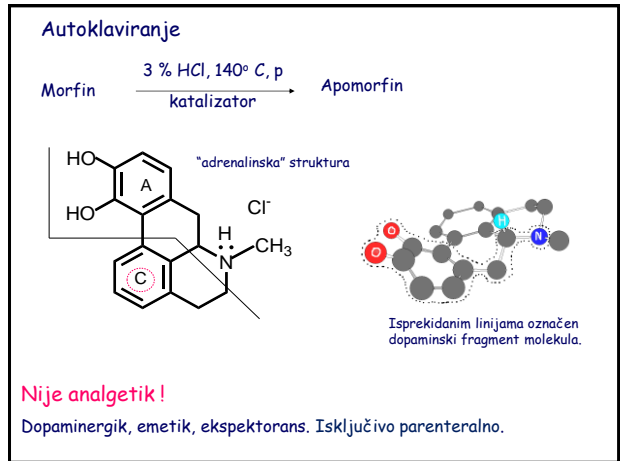
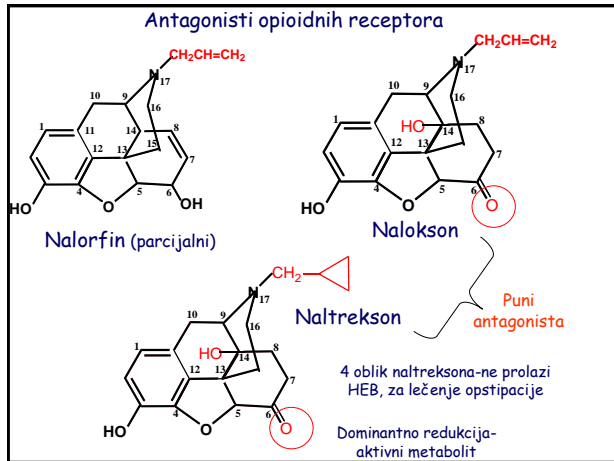


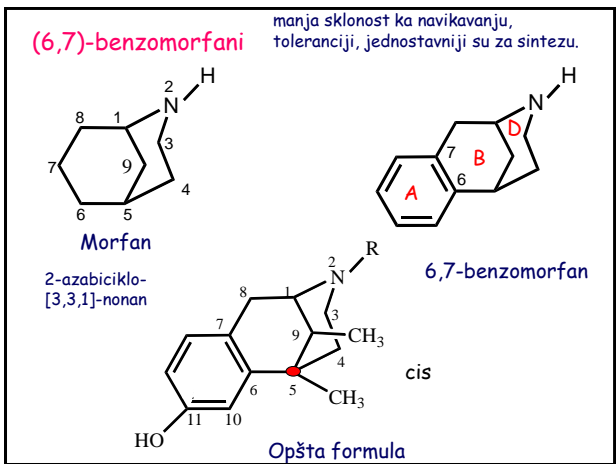
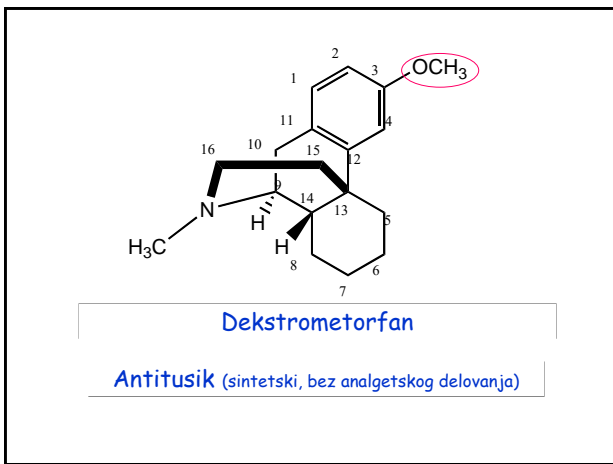
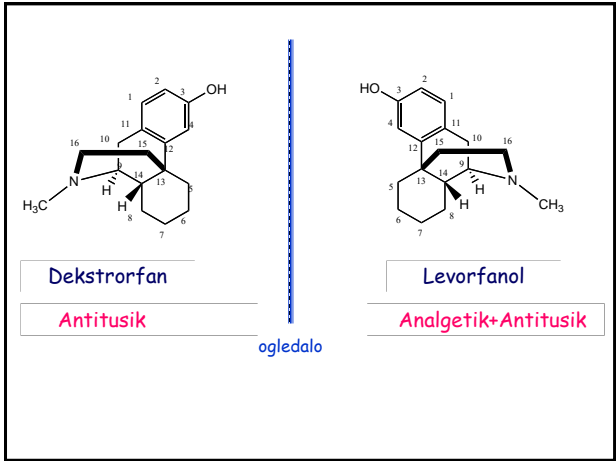
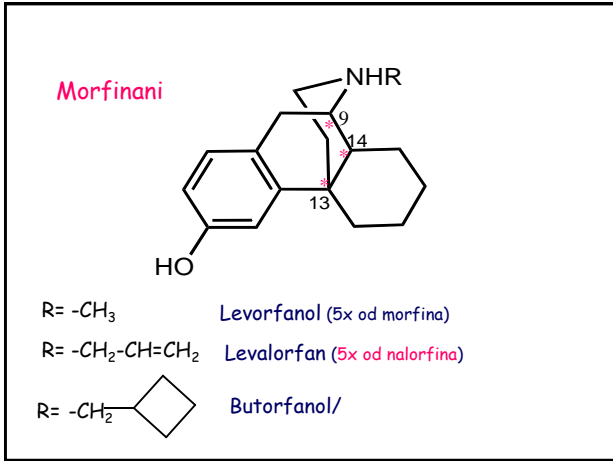


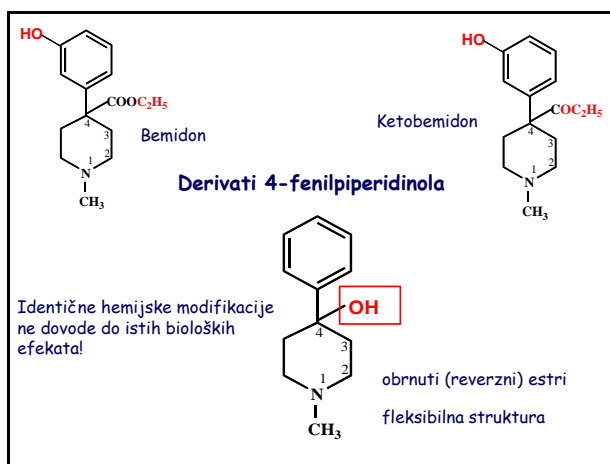
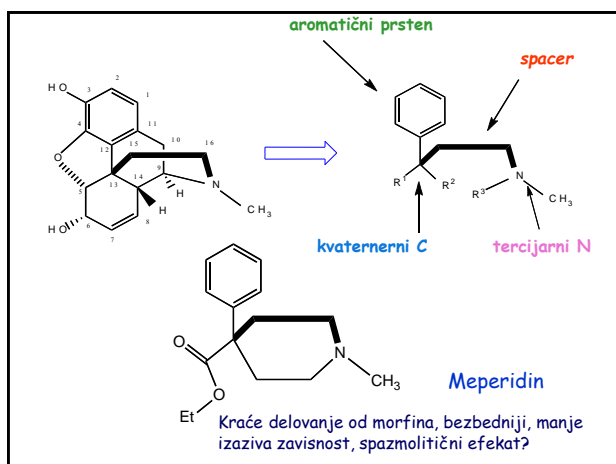
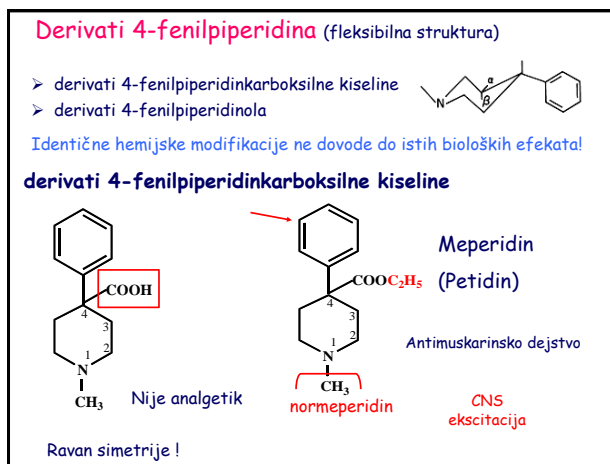
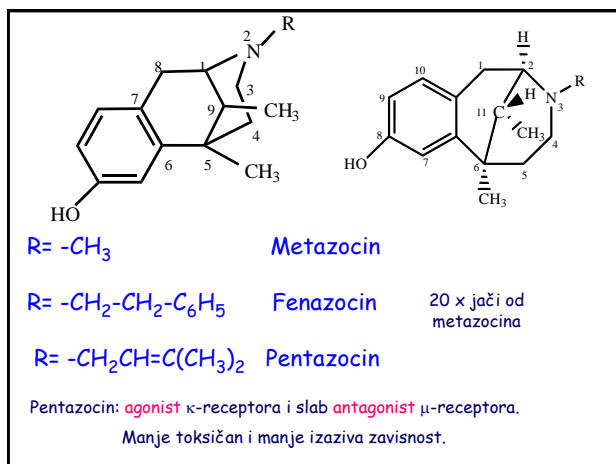




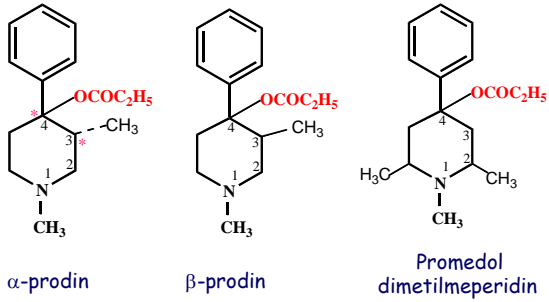






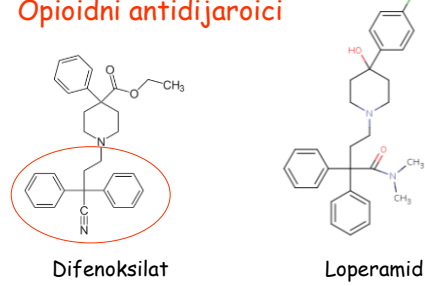


Homoloji reverzних estara petidina:



Nemaju kvaternerni C-atom !

Opioidni antidijsaroi

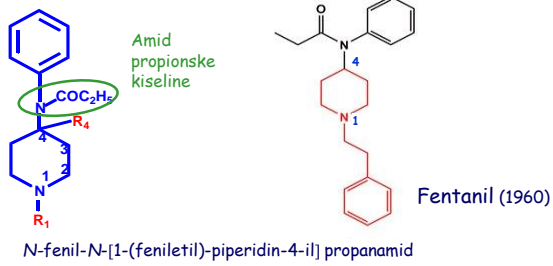


Derivat petidina, u malim dozama ne prolazi HEB, ne dovodi do opioidnog efekta

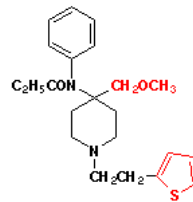
derivat 4-fenilpiperidinola

Da bi se sprečilo uzimanje većih doza i zloupotreba leka, često se koriste sa atropinom, antiholinergikom koji proizvodi slabost i mučninu u prevelikim dozama.

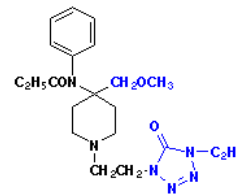
Derivati 4-anilidopiperidina (analozii fentanila)



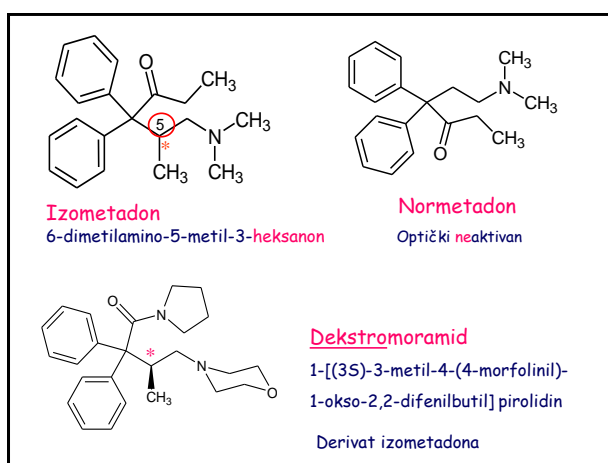
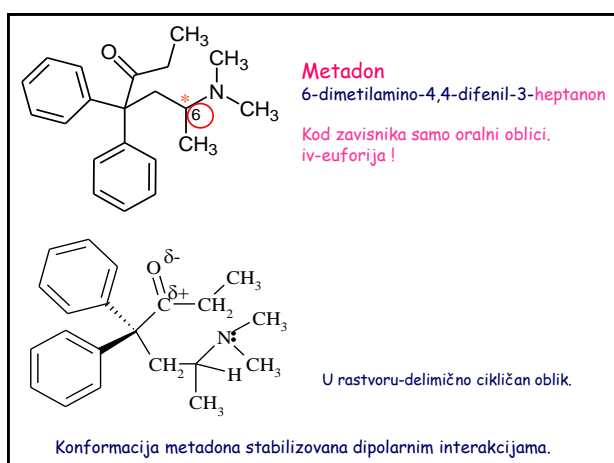
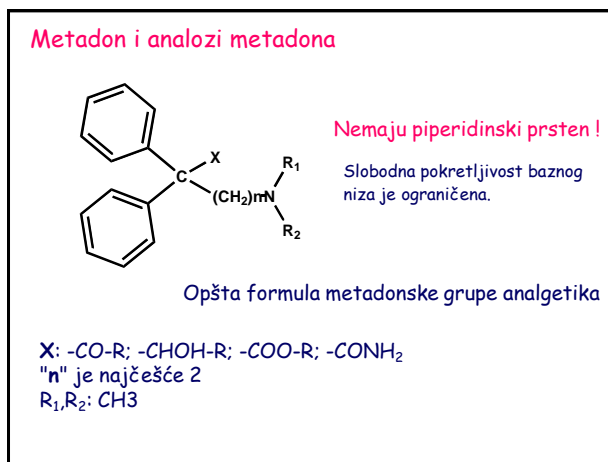
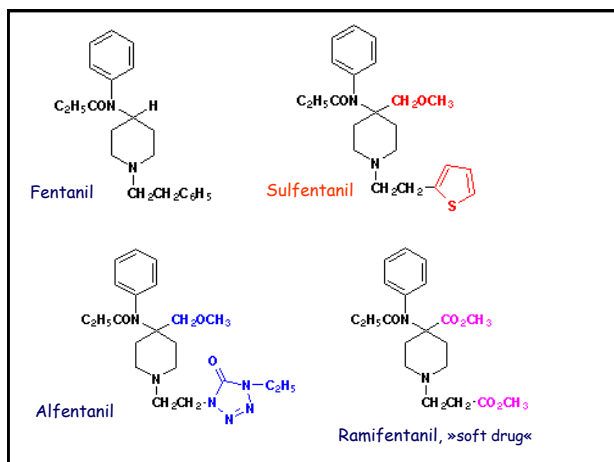
Jedan od najjačih opioidnih analgetika (80x (μ), 30 min).  
 Manje neželjenih efekata, transdermalno (72 sata), anestezija i analgezija.  
 0,3-0,4 mg iv (sa npr droperidolom)- neuroleptanalgezija

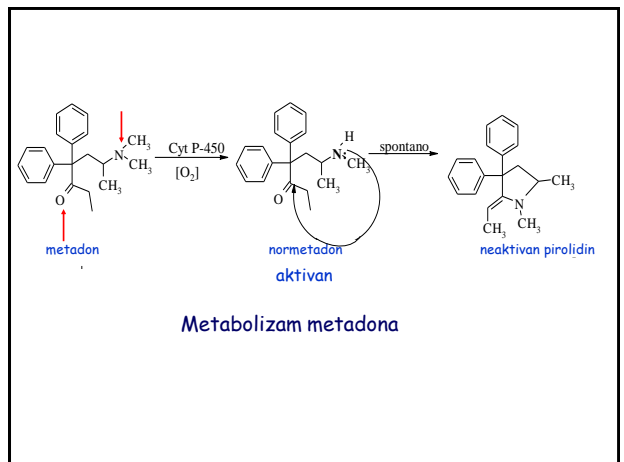
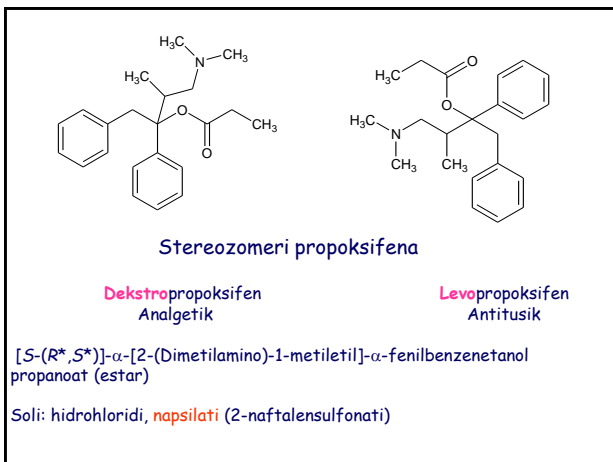
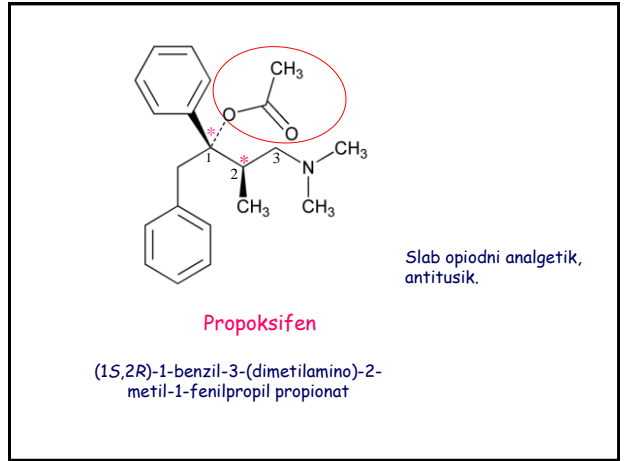
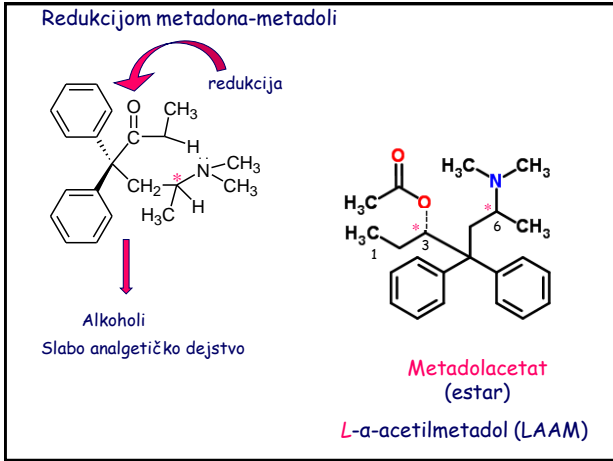


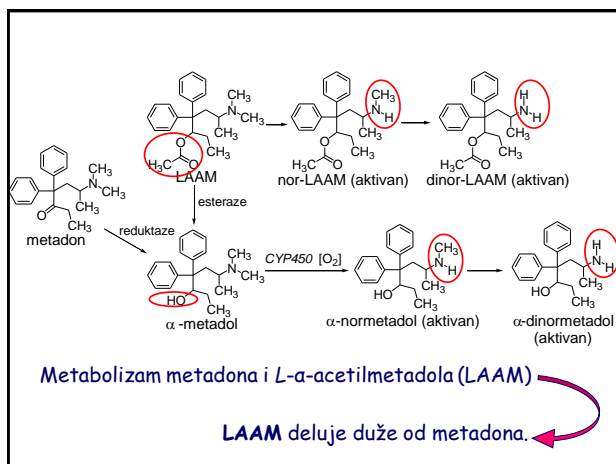
Jako lipofilan, brzo i kratko delovanje.  
 Manje izražena respiratorna depresija.



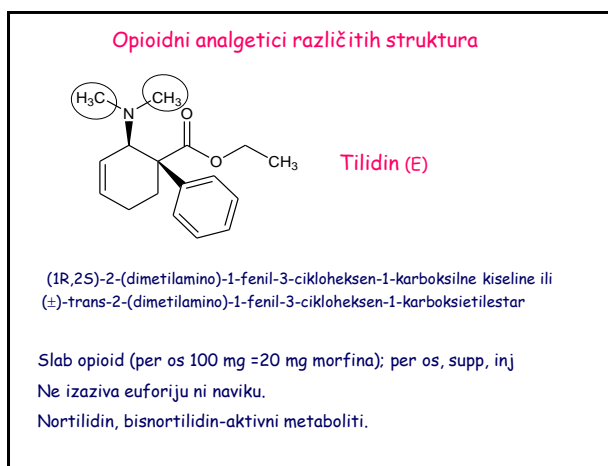
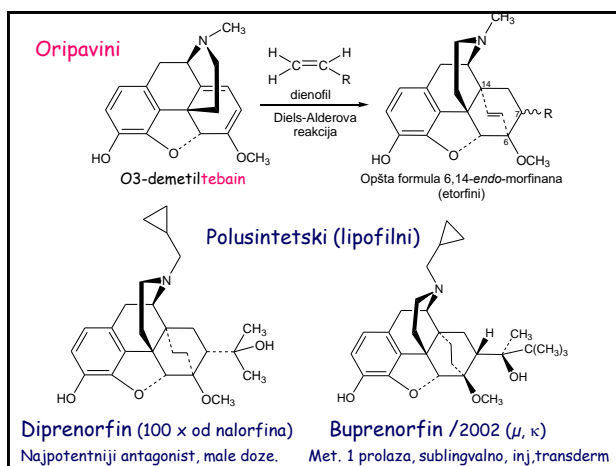
25 puta slabiji od morfina  
 Niža pKa, manje jonizovan, lakše prolazi kroz HEB.

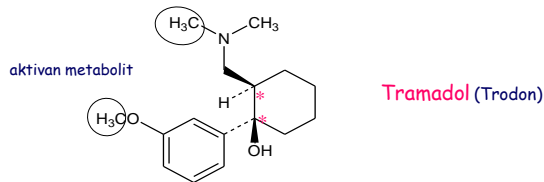






Naziv	R <sub>1</sub>	R <sub>2</sub>	opioidna aktivnost
Metadon	-C <sub>2</sub> H <sub>5</sub>	-CH <sub>2</sub> CH <sub>2</sub> N(CH <sub>3</sub> ) <sub>2</sub>	1,0
Levanon	-C <sub>2</sub> H <sub>5</sub>	-CH <sub>2</sub> CH <sub>2</sub> N(CH <sub>3</sub> ) <sub>2</sub>	1,9
Izometadon	-C <sub>2</sub> H <sub>5</sub>	-CH <sub>2</sub> CH <sub>2</sub> N(CH <sub>3</sub> ) <sub>2</sub>	0,65
Normetadon	-C <sub>2</sub> H <sub>5</sub>	-CH <sub>2</sub> CH <sub>2</sub> N(CH <sub>3</sub> ) <sub>2</sub>	0,44
Dipanon	-C <sub>2</sub> H <sub>5</sub>	-CH <sub>2</sub> CH <sub>2</sub> -N	0,80
Heksalgon	-C <sub>2</sub> H <sub>5</sub>	-CH <sub>2</sub> CH <sub>2</sub> -N	0,5
Fenadokson	-C <sub>2</sub> H <sub>5</sub>	-CH <sub>2</sub> CH <sub>2</sub> -N	1,4
alfacetilmetadol	-C <sub>2</sub> H <sub>5</sub> -C <sub>2</sub> H <sub>5</sub>	-CH <sub>2</sub> CH <sub>2</sub> N(CH <sub>3</sub> ) <sub>2</sub>	1,3
betacetilmetadol	-C <sub>2</sub> H <sub>5</sub> -C <sub>2</sub> H <sub>5</sub>	-CH <sub>2</sub> CH <sub>2</sub> N(CH <sub>3</sub> ) <sub>2</sub>	2,3
dioksifenilbutira	-COOC <sub>2</sub> H <sub>5</sub>	-CH <sub>2</sub> CH <sub>2</sub> -N	0,25
racemoramid	-C <sub>2</sub> H <sub>5</sub>	-CH <sub>2</sub> CH <sub>2</sub> -N	0,36
dekstromoramid	-C <sub>2</sub> H <sub>5</sub>	-CH <sub>2</sub> CH <sub>2</sub> -N	13





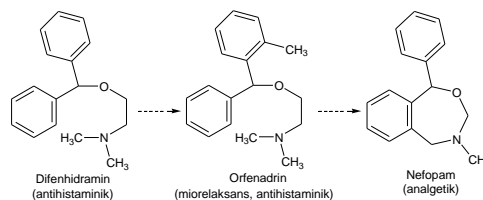
(1*R*,2*R*)-2-[(dimetilamino)metil]-1-(3-metoksifenil) cikloheksanol ili  
 (±)-*trans*-2[(dimetilamino)metil]-1-(3-metoksifenil)cikloheksanol

U obliku racemata: (+) izomer-opioidno ( $\mu$ ); (-) izomer-inhibitor preuzimanja NOR, Ser

Kombinuje se sa paracetamolom.

Metabolizam: CYP 3A4 i CYP2D6. Interakcija sa TCA, SSRI;

**Nefopam: centralno delujući neopioidni analgetik**



Ciklizacije antihistaminika i prevođenje u rigidniju strukturu nefopama

**Nefopam: (3,4,5,6-tetrahidro-5-metil-1-fenil-1*H*-2,5-benzoksazocin)**

Umereno jak analgetik **bez afiniteta za opioidne receptore**, povećava hepatotoksičnost paracetamola.

# ANTITUSICI

Mehanizam delovanja:

**Centralno**, povišenjem praga nadražaja neurona koji se nalaze u centru za kašalj u CNS.

**Periferno**, smanjenjem nadražaja ili čak i blokadom receptora za kašalj koji se nalaze u plućima.

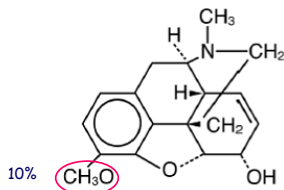
### Centralni antitusici

**Opioidni antitusici** (morfin, kodein, etilmorfin, dihidrokodein, hidrokodon, dekstrometorfan, folkodin, noskapin)

**Neopioidni antitusici** (butamirat, pentoksiverin, pipazetat)



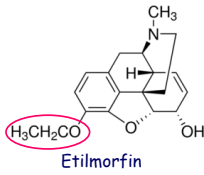
**Centralni antitusici sa opioidnim delovanjem**



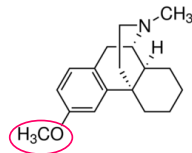
Kodein (fosfat): 15-20 mg

tablete, kapsule, sirup

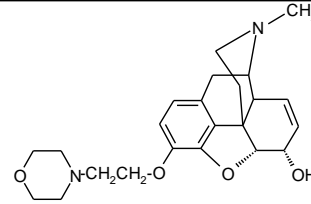
Plivadon, Caffetin



Etilmorfin



Dekstrometorfan



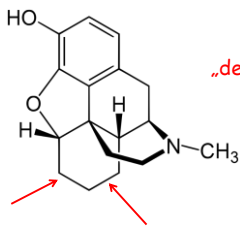
**Folkodin**

(+)-3-metoksi-17-metil-9α,13α,14α-morfinan

Nije analgetik, ne povećava spazam u GIT, ne deprimira disanje, ne stvara se tolerancija;

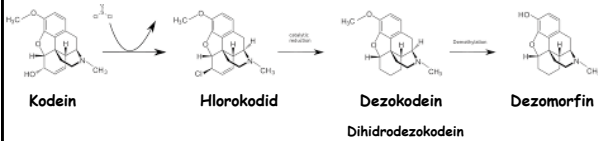
Odnos antitusičkog i sedativno-opioidnog delovanja zavisi od doze.

Metabolizam: oksidacija i konjugacija, najvažniji metabolit-konjugovani morfin (+ rezultati na opioide u urinu!)



"krokodil," "crocodile",  
„desomorphine", "desoxymorphine"

Tionil-hlorid

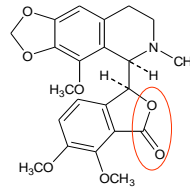


Kodein

Hlorokadid

Dezokodein  
Dihidrodezekodein

Dezomorfin

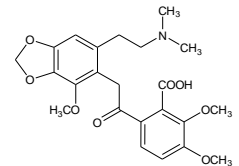


**Noskapiin**

Prirodni proizvod, izolovan iz opijuma (11%).

[5-(R\*,S\*)]-6,7-dimetoksi-3-(5,6,7,8-tetrahydro-4-metoksi-6-metil-1,3-dioksolo[4,5-g]zohinolin-5-il)-1(3H)-izobenzofuranon

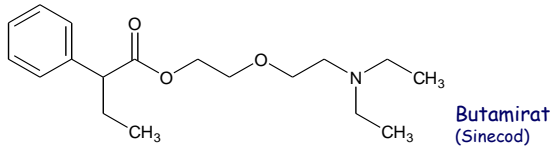
Za razliku od kodeina ne stvara naviku, ne deluje depresivno na CNS, disanje i peristaltiku creva.



**Narcein**

Polusintetski antitusik

### Sintetski antitusici (bazni estri i etri)

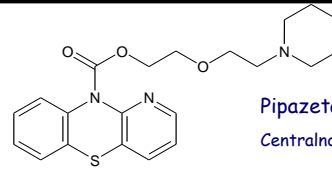


2-[(2-dietil amino)etoksi] etilestar- $\alpha$ -etilfenil-sirćetne kiseline (fenilbuterne kiseline)

Sintetski **neopioidni antitusik**, blokira centar za kašalj u produženoj moždini, najprepisivaniji lek.

Kod jakog akutnog i hroničnog suvog kašlja, za pre- i postoperativno smirivanje kašlja kod hirurških zahvata i bronhoskopija.

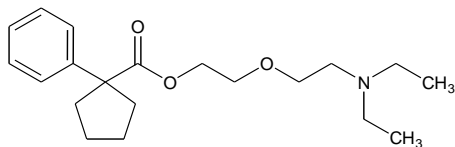
Bezbedniji od kodeina, ne izaziva zavisnost.



Pipazetat (azafenotiazin)  
Centralno i periferno

### Prednost neopioidnih centralnih antitusika:

- selektivno deluju na centar za kašalj - ne deluju depresivno na CNS i centar za disanje;
- ne deluju na opioidne receptore i ne dovode do stvaranja zavisnosti;
- ne deluju na tonus glatkih mišića GIT i ne dovode do opstipacije;
- imaju veliku terapijsku širinu;
- dobro se resorbuju iz GIT-a;
- ne stupaju u interakciju sa drugim lekovima.



Karbetapentan (pentoksiverin)

Periferni antitusik.

Mehanizam nije dovoljno objašnjen:

Antagonista M<sub>1</sub>, agonista  $\sigma$ ;

Citrat, hidrohlorid

Kao antitusici koriste se i neke druge grupe lekova:

- > Antihistaminici
- > Simpatomimetici
- > Parasimpatolitici
- > Ekspektoransi

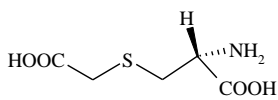
# EKSPEKTORANSI

➤ **Sekretolitici** (pojačavaju bronhijalnu sekreciju vode, stimulišu aferentna parasimpatikusna vlakna ili direktno deluju na ćelije koje stvaraju mukus)-NH<sub>4</sub>Cl, KJ...

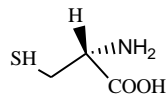
➤ **Sekretomotorici** (povećavaju pokretljivost sekreta i njihovo izbacivanje putem kašlja).

➤ **Mukolitici** (smanjuju viskozitet mukusa)

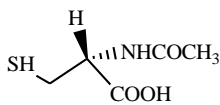
kidažu disulfidne veze (karbocistein, acetilcistein),  
enzimski (proteolitički enzimi-tripsin i himotripsin)



**Karbocistein:** S-(karboksimetil)-L-cystein



L-Cystein



**Acetilcistein:** N-acetil-L-cystein

Može se primeniti i parenteralno, za razliku od karbocisteina.

