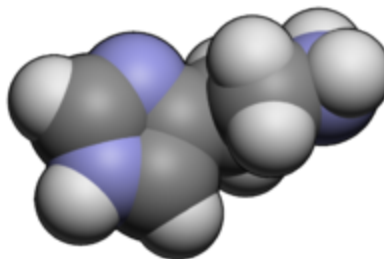
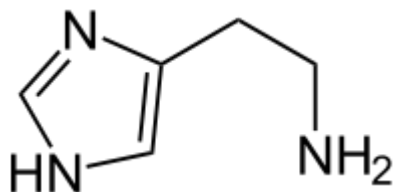


ANTI-HISTAMÍNICOS: ANTAGONISTAS DOS RECEPTORES H1 e H2 agentes anti-alérgicos e agentes anti-úlceras

Profa. Mônica T. Pupo
Química Farmacêutica I



Bibliografia



C. R. GANELLIN, S. M. ROBBERS (eds) – Medicinal Chemistry – The role of organic chemistry in drug research, 2nd. ed., Academic Press, **1993**, p. 227-255. (Cap. 12: *Discovery of Cimetidine, Ranitidine and other H₂-Receptor Histamine Antagonists*). **Antagonistas H2**

G. L. PATRICK – An Introduction to Medicinal Chemistry, 4th ed., Oxford University Press, **2009**, p.653-682 (Cap. 25: *Antiulcer agents*). **Antagonistas H2**

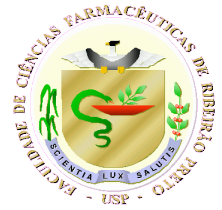
G. L. PATRICK – An Introduction to Medicinal Chemistry, 5th ed., Oxford University Press, **2013**, p.659-688 (Cap. 25: *Antiulcer agents*). **Antagonistas H2**

T. N. RILEY, J. DeRUITER *Histamine and Antihistaminic Agents*. In: J. N. DELGADO e W. A. REMERS (eds.) - Wilson and Gisvold's Textbook of Organic Medicinal and Pharmaceutical Chemistry, 10^a. ed., J. B. Lippincott, New York, 1998, p. 657-685.

A. GRINGAUZ – Introduction to Medicinal Chemistry. Drugs: How drugs act and why. VCH Pub, 1997, p. 621-653 (Cap. 13: *Histamine Antagonists and Local Anesthetics*).

D. A. WILLIAMS, T. L. LEMKE, Eds. Foye's Principles of Medicinal Chemistry, 7th Ed., Lippincott Williams & Wilkins, **2013**, p. 1045-1072 (Cap. 32: NELSON, W.L., *Antihistamines and Related Antiallergic and Antiulcer Agents*). **Antagonistas H1 e H2**

D. A. WILLIAMS, T. L. LEMKE, Eds. Foye's Principles of Medicinal Chemistry, 6th Ed., Lippincott Williams & Wilkins, **2008**, p. 1004-1027 (Cap. 37: NELSON, W.L., *Antihistamines and Related Antiallergic and Antiulcer Agents*).



RECEPTORES

- H₁** **Mediação da contração da musculatura lisa, aumento da permeabilidade vascular, prurido, geração de prostaglandinas, diminuição da condução atrioventricular acompanhada de taquicardia, ativação dos reflexos vagais.**
Alvo para anti-alérgicos.
- H₂** **Mediação das ações da histamina na secreção de ácido gástrico.**
Alvo para fármacos anti-úlceras.
- H₃** **Autorreceptor pré-sináptico.**
Modula a síntese e liberação de histamina no SNC e tecidos periféricos
Potencial alvo para fármacos contra rinite alérgica
- H₄** **Expresso nos mastócitos, eosinófilos e outras linhagens de células hematopoiéticas (basófilos, células T). Descoberto mais recentemente – função fisiológica ainda desconhecida. Potencial alvo para anti-inflamatórios e anti-alérgicos em desordens autoimunes (artrite reumatóide, asma, rinite alérgica)**



Biossíntese de histamina

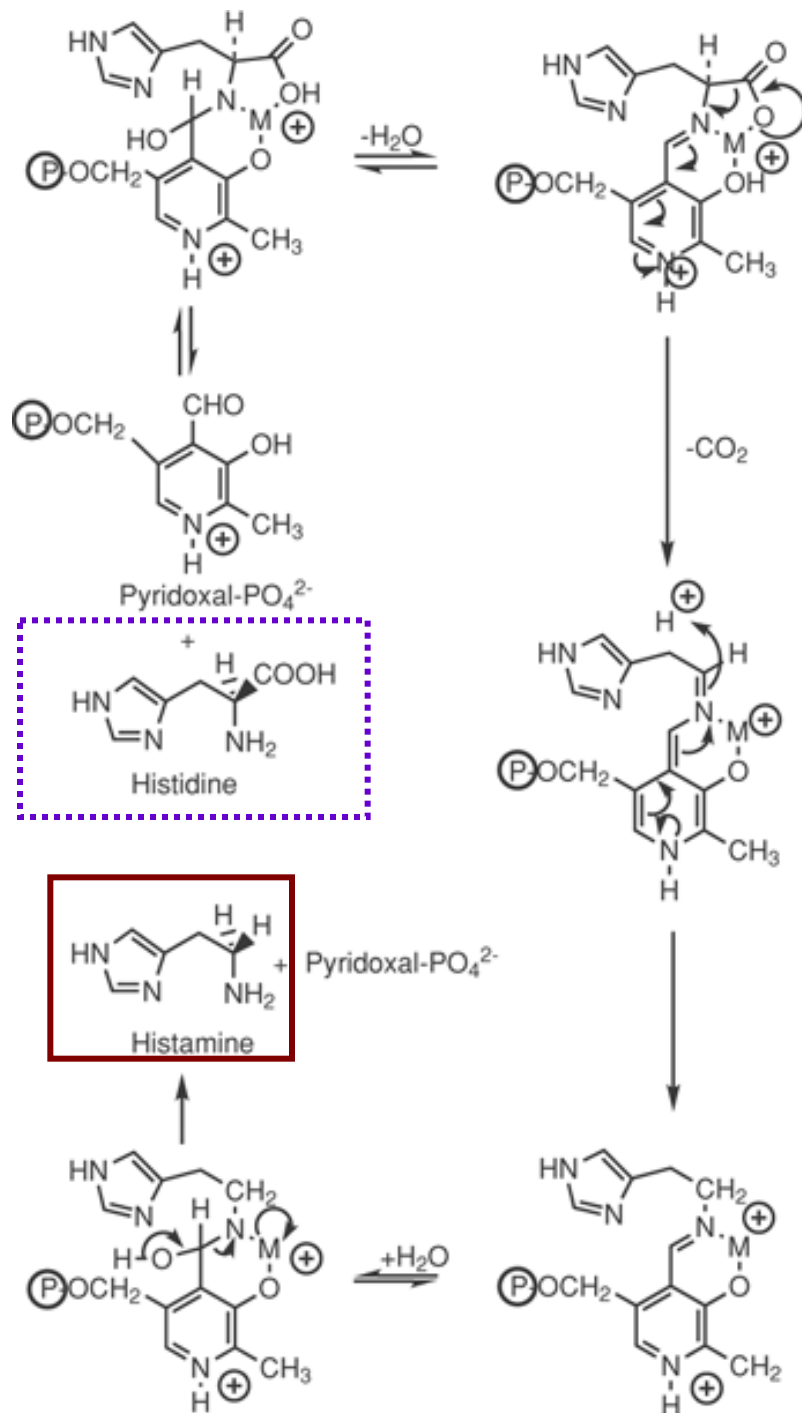
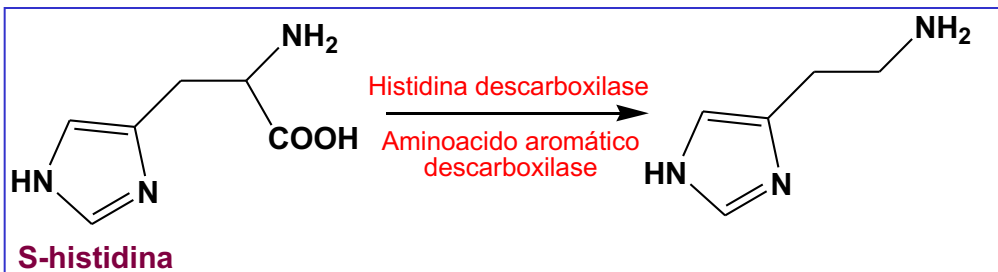


Aparelho de golgi de mastócitos e basófilos pela descarboxilação de histidina

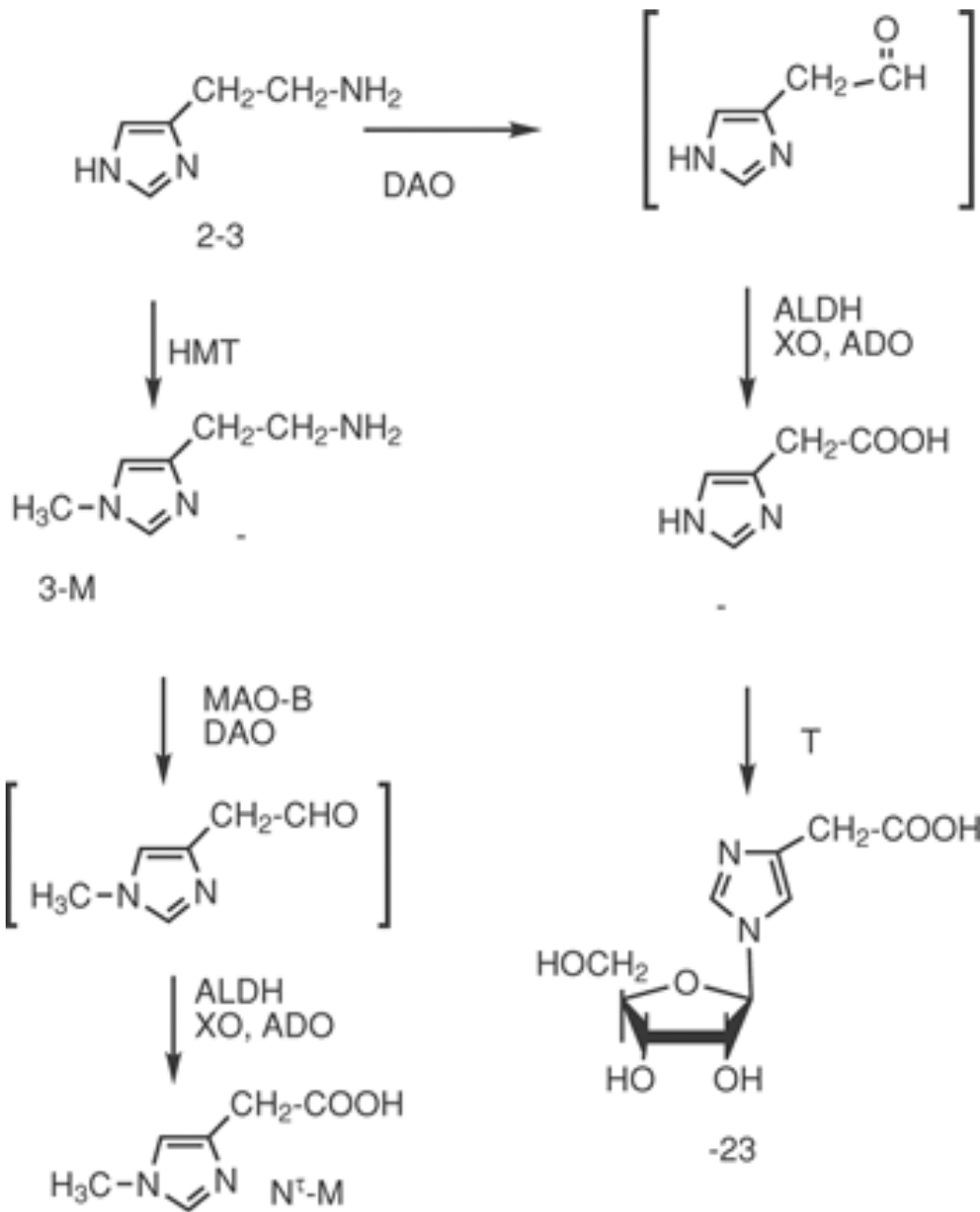
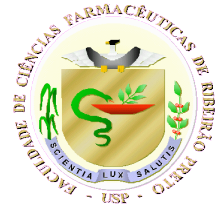


Mecanismo molecular

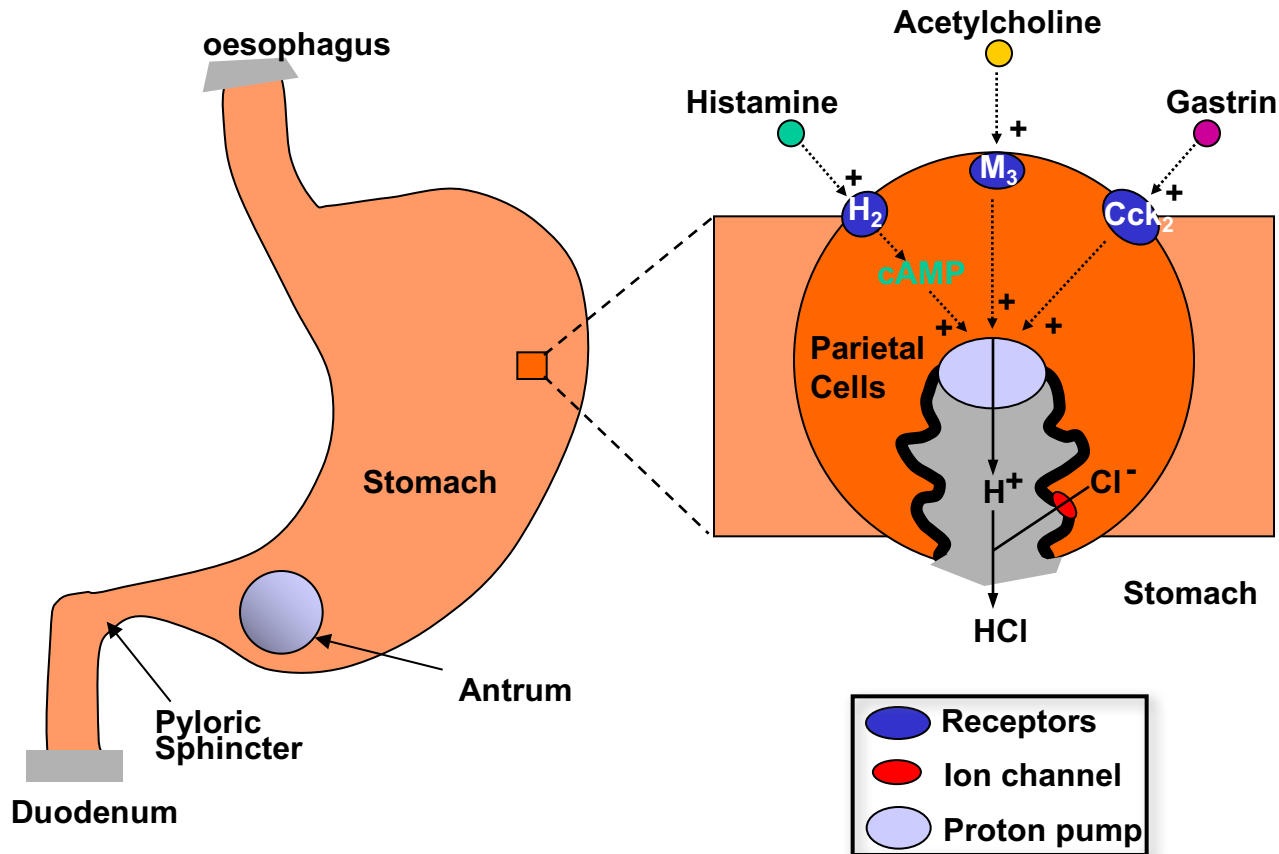
descarboxilação de histidina realizada pela enzima **L-histidina-descarboxilase** e piridoxal fosfato como cofator



Metabolismo de histamina: metilação e oxidação



Células Parietais e liberação de ácido gástrico

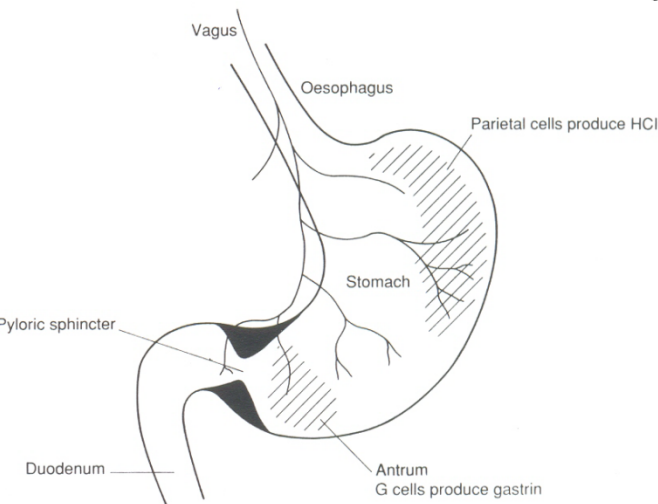
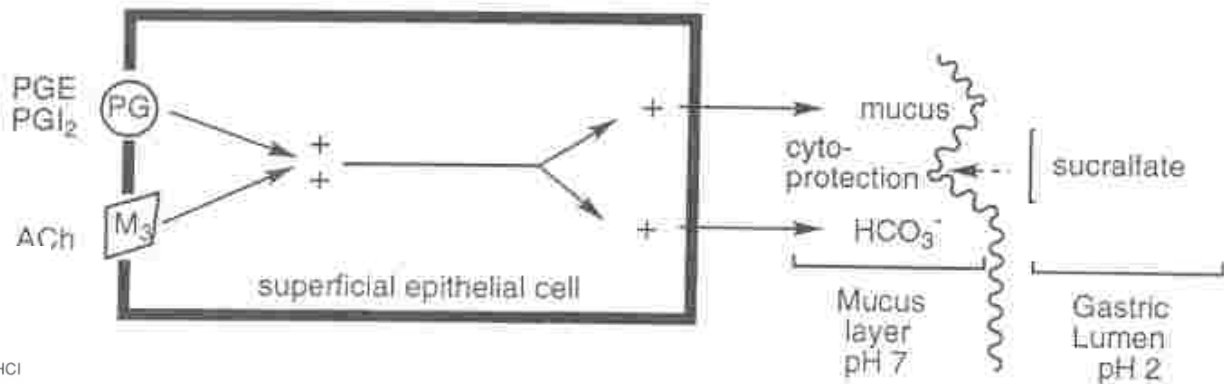
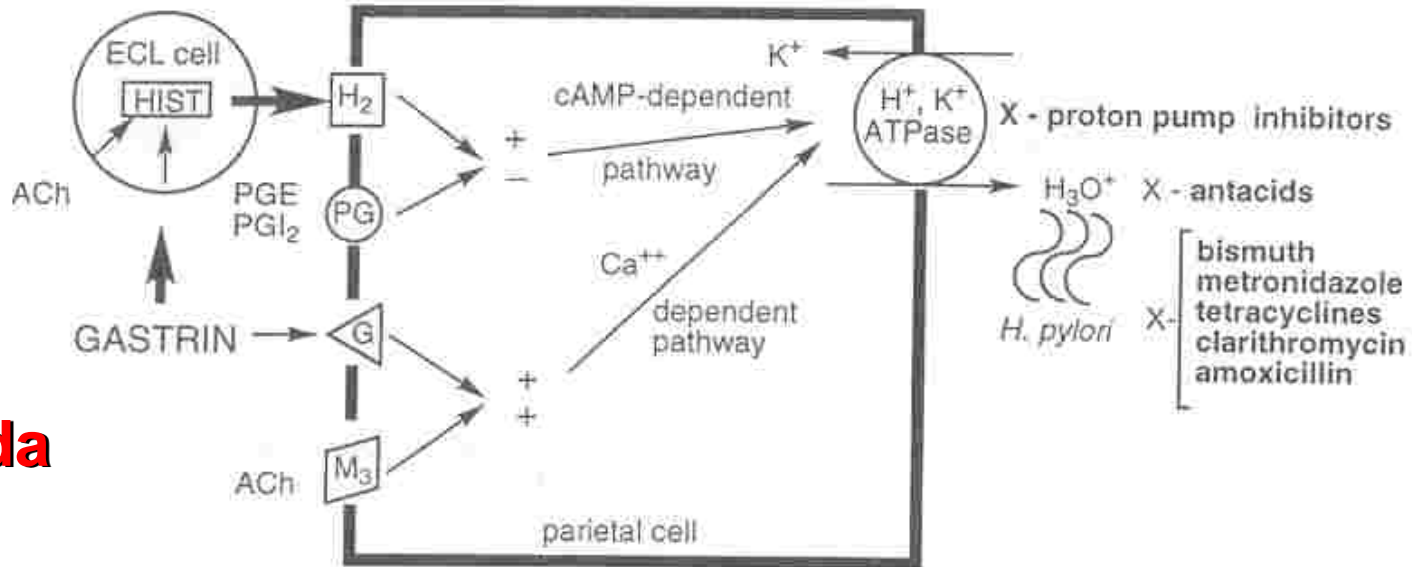


• Liberação de ácido gástrico é promovida por acetilcolina, gastrina e histamina



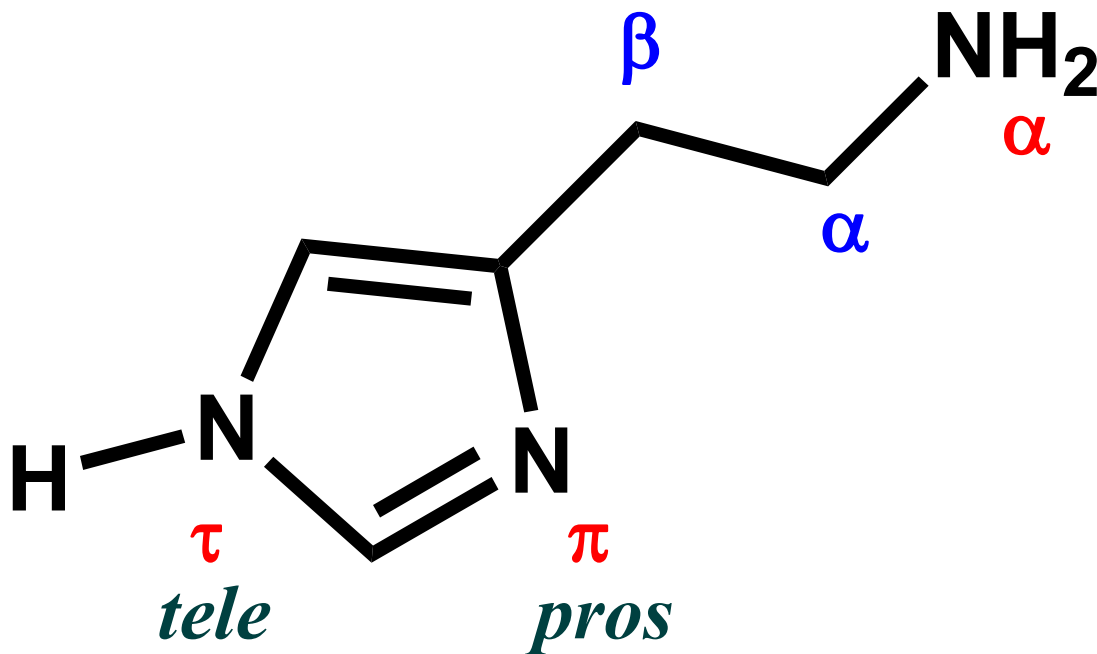
Liberação da secreção ácida estomacal

Receptores H2

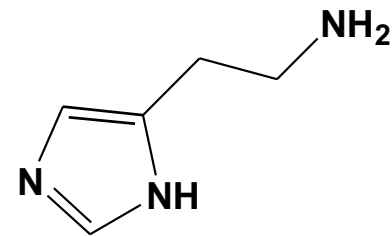
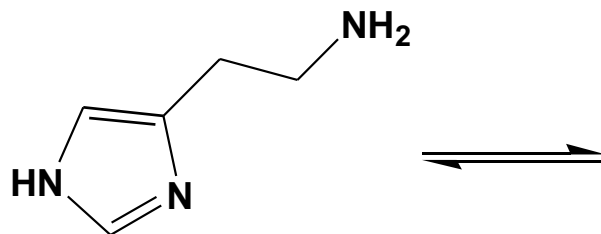




pKa = 9,8
(grupo amino terminal)



pKa = 5,74
(anel imidazólico)



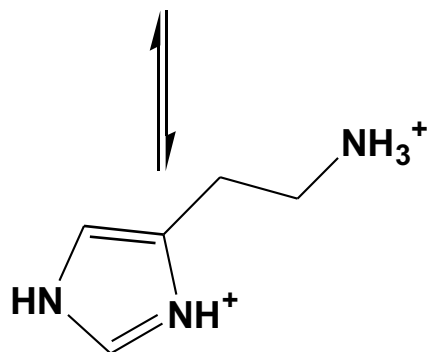
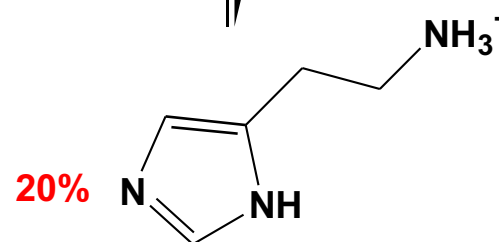
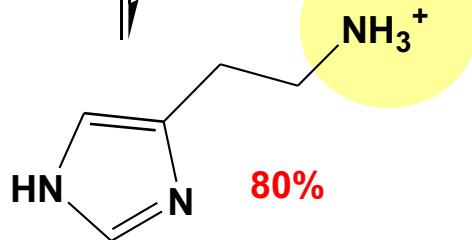
N^τ - tautômero

N^π - tautômero

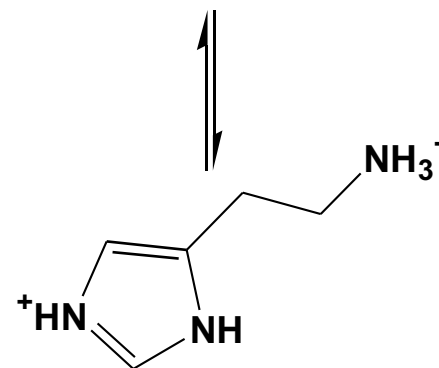
Forma dominante em pH 13,0

Importante para atividade biológica

Monocátions
99,6% das formas no plasma (pH 7,4)

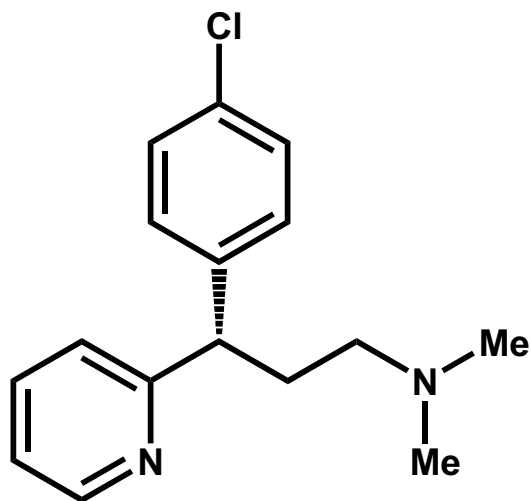


Dicátions

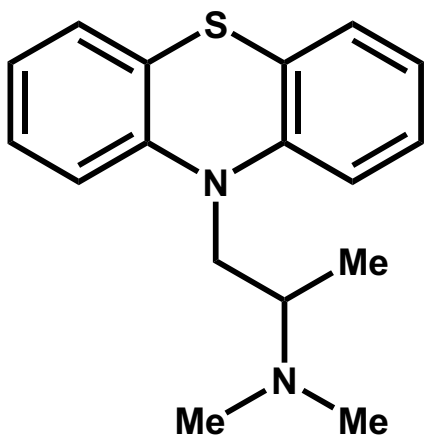


Forma dominante em pH 2,0

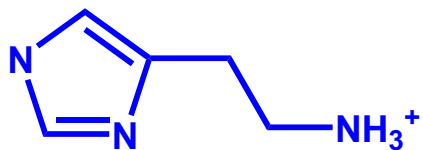
Antagonistas H1



Dexclorfeniramina
(polaramine)



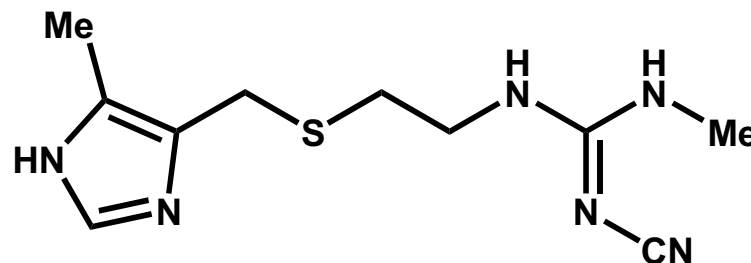
Prometazina
(fenergan)



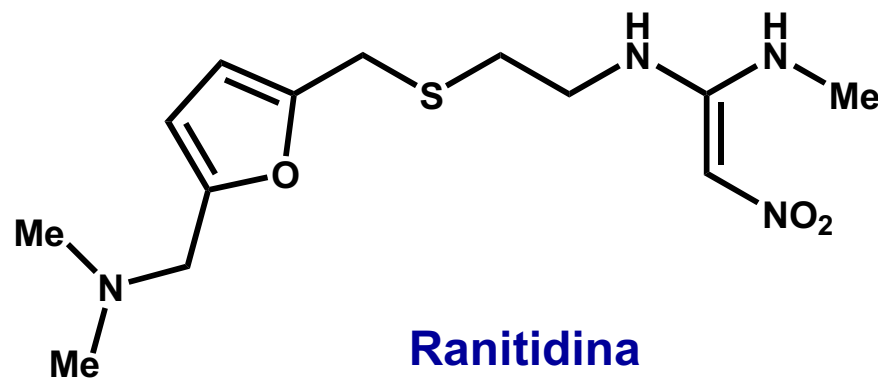
histamina



Antagonistas H2



Cimetidina
(tagamet)



Ranitidina
(antak)

Antagonistas de histamina liberada no processo alérgico



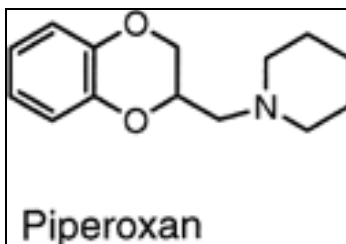
Primeira geração de anti-histamínicos H1

- ✓ etilenodiaminas
- ✓ etanolaminas
- ✓ alquilaminas
- ✓ piperazinas
- ✓ tricíclicos

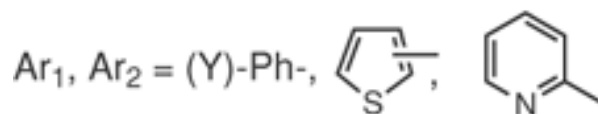
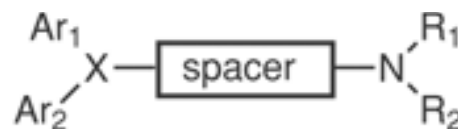
Segunda geração de anti-histamínicos H1

Antagonistas de histamina liberada no processo alérgico

Afetam receptores colinérgicos, adrenérgicos, dopaminérgicos e serotoninérgicos

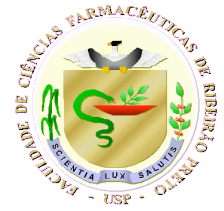


Relação estrutura-atividade:

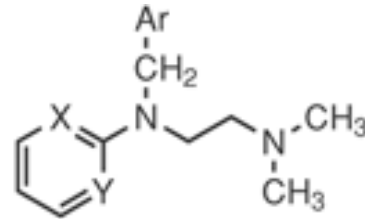


Etilenodiaminas	→	X = N	R ₁ = R ₂ = CH ₃	Spacer = -(CH ₂) _n - (n = 2 or 3, usually 2)
Etanolamina	→	X = CHO	R ₁ - R ₂ = (CH ₂) ₄₋₆	
Alquilamina	→	X = CH	R ₁ = CH ₃ (H), R ₂ = CH ₂ Ar	

Primeira geração de anti-histamínicos H-1

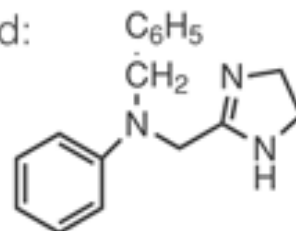


Etilenodiaminas



Drugs	X	Y	Ar
Phenbenzamine	CH	CH	
Tripelennamine (pyribenzamine)	N	CH	
Methapyrilene	N	CH	
Thonzylamine	N	N	

Related compound:



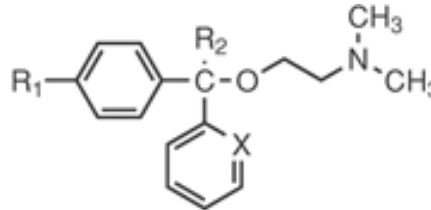
Antazoline

Primeira geração de anti-histamínicos H-1



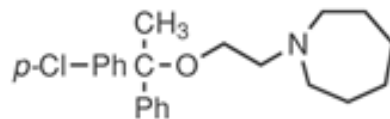
Éteres de etanolamina

Usada no tratamento de Parkinson devido à sua ação central anti-colinérgica

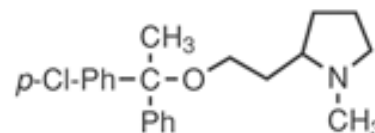


Drugs	Trade Name	R ₁	R ₂	X
Diphenhydramine	Benadryl	H	H	CH
Dimenhydrinate	Dramamine	H	H	CH
Bromodiphenhydramine		Br	H	CH
Chlorodiphenhydramine		Cl	H	CH
Carbinoxamine	Colistin	Cl	H	N
Doxylamine	Decapryn Unisom	H	CH ₃	N

Related compounds:



Setastine (Loderix)



Clemastine (Tavist)

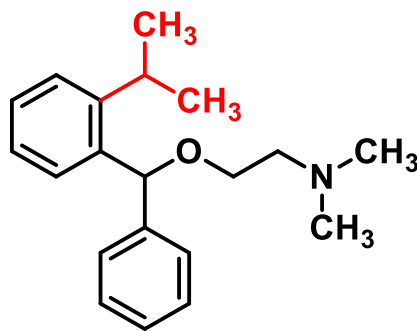
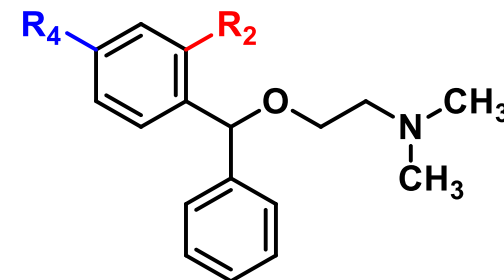
Maior seletividade para receptores H1 em relação a receptores muscarínicos

Atividade anti-histamínica x anticolinérgica

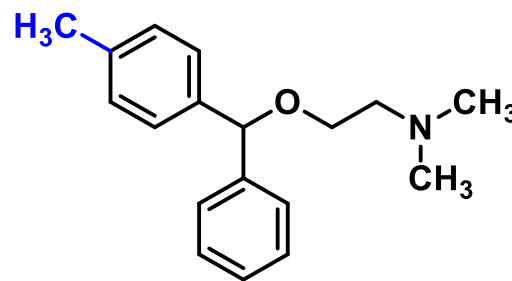


Substituintes alquílicos em R2 (Me, Et, iPr, tBu):
diminuem ação anti-histamínica e aumentam anticolinérgica

Substituintes alquílicos em R4 (Me, Et, iPr, tBu):
diminuem ação anti-colinérgica e aumentam levemente anti-histamínica



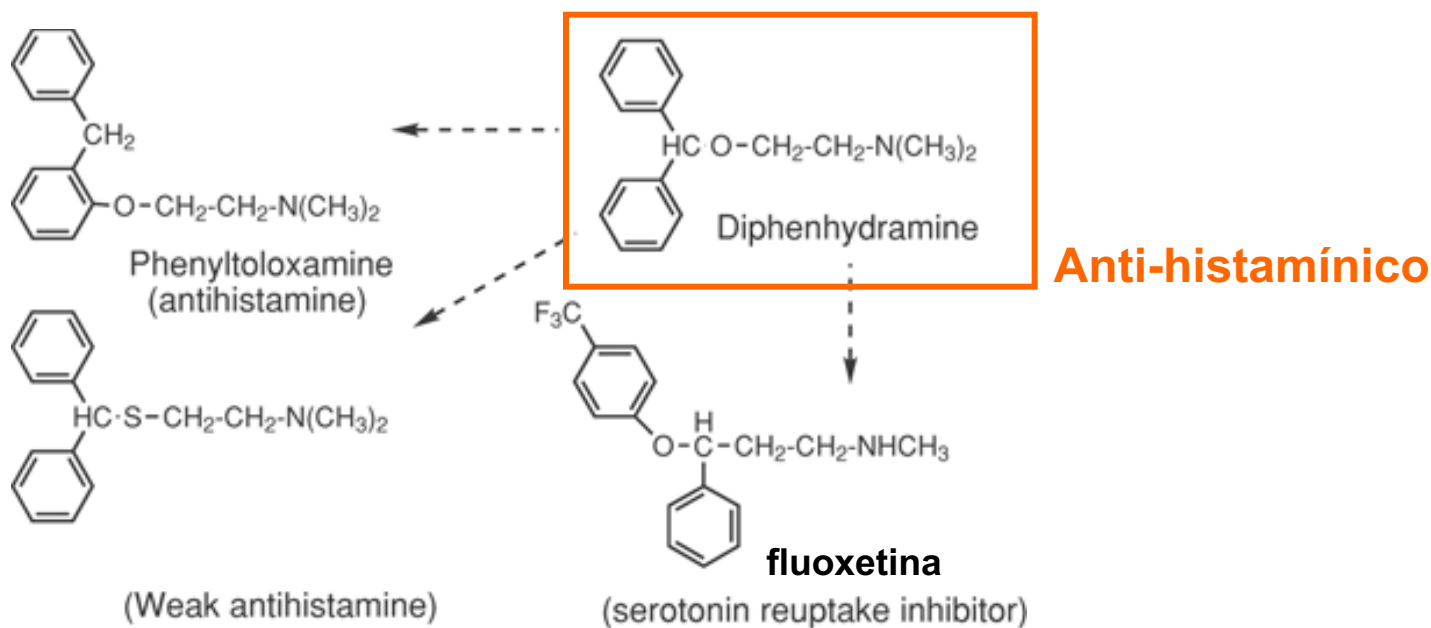
Maior ação anticolinérgica



Maior ação anti-histamínica

Enantiômeros com configuração *S* são geralmente mais potentes

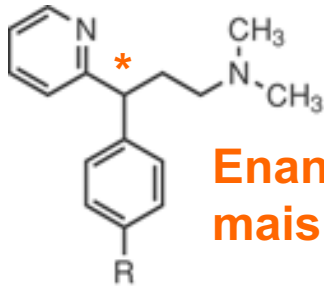
Semelhança estrutural de difenidramina com outros agentes ativos



Primeira geração de anti-histamínicos H-1



Alquilaminas

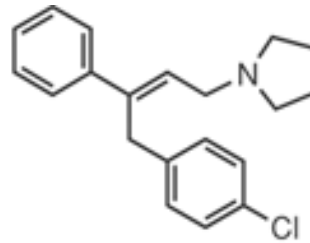


**Enantiômeros S
mais ativos**

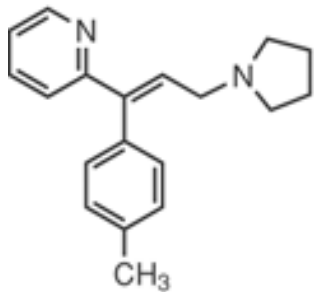
R = H; Pheniramine

R = Cl; Chlorpheniramine (Chlortrimeton)
Dexchlorpheniramine (Polaramine)

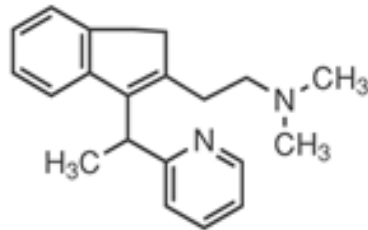
R = Br; Brompheniramine (Dimetane)
Dexbrompheniramine (Disomer)



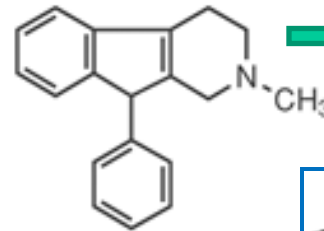
E - Pyrrobutamine
(Pyronil)



Triprolidine
(Actidil)

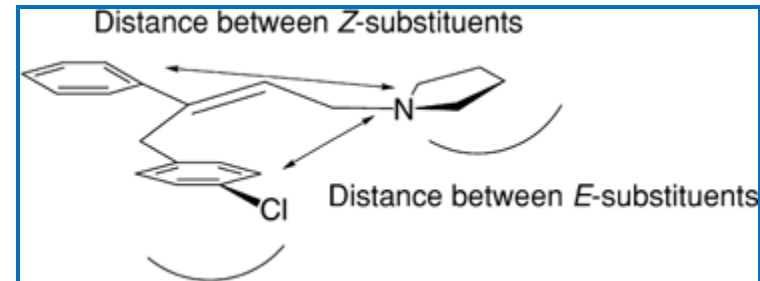


Dimethindene
(Forhista)



Phenindamine
(Nolahist)

Isômeros E mais ativos que Z

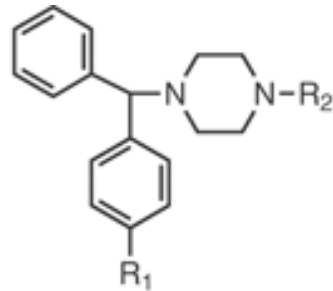


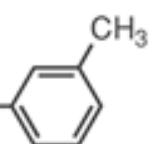

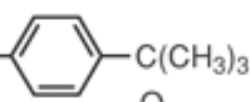
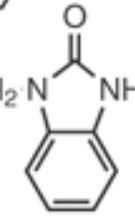
Menor efeito sedativo central comparado aos derivados de etilenodiamina e etanolamina
Maior seletividade para os receptores H1 x muscarínicos

Derivados de Piperazinas

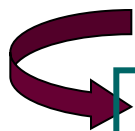


Relacionados à série de etilenodiaminas e éteres etanolaminas



Drugs	Trade name	R ₁	R ₂
Cyclizine	Marezine	H	CH ₃
Chlorcyclizine	Mantadil	Cl	CH ₃ 
Meclizine	Antivert	Cl	H ₂ C- 
Bucizine	Bucladin-S	Cl	H ₂ C-  -C(CH ₃) ₃
Oxatomide	Tinset	H	CH ₂ CH ₂ CH ₂ N 
Hydroxyzine	Atarax	Cl	CH ₂ CH ₂ OCH ₂ CH ₂ OH
Cetirizine	Zyrtec	Cl	CH ₂ CH ₂ OCH ₂ COOH 2^a geração

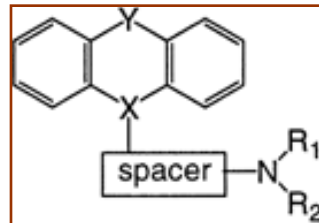
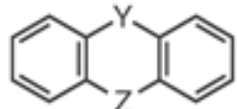
metabolismo



Alguns usados como anti-eméticos, mas possuem significativa atividade anti-colinérgica



Anti-histamínico tricíclico



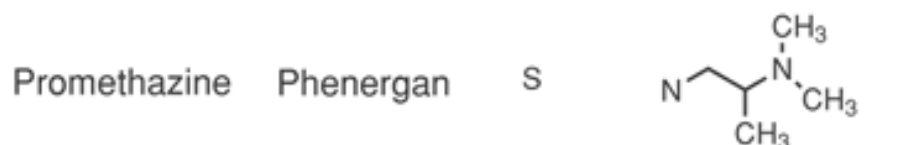
X = C, CH, N, etc.

Y = CH₂, S, O, NH, CH₂O,
CH₂CH₂, CH=CH, etc.

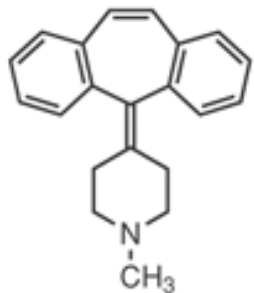
spacer = two or three carbons

R₁, R₂ = Me, or five membered ring

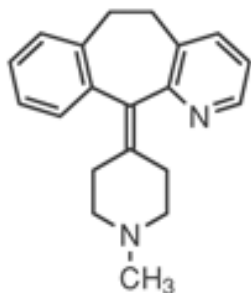
Drugs	Trade name	Y	Z
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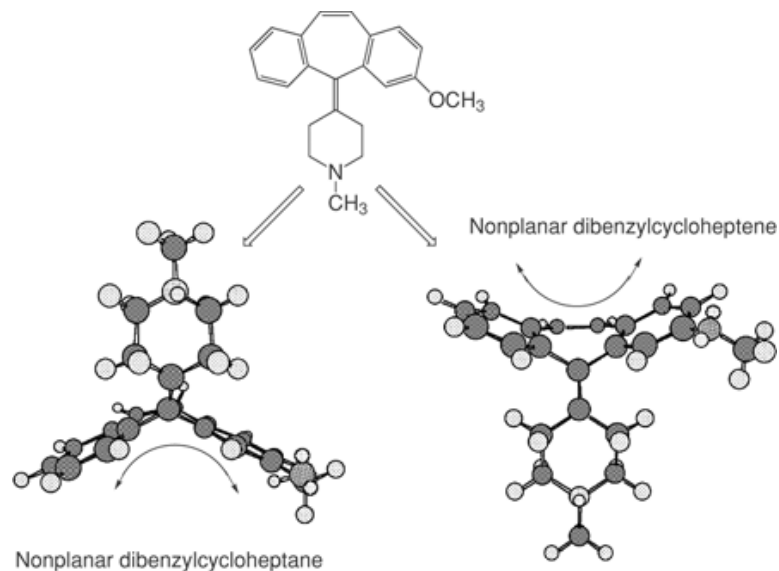
Efeito sedativo pronunciado
Também usados no tratamento
da náusea e vômito

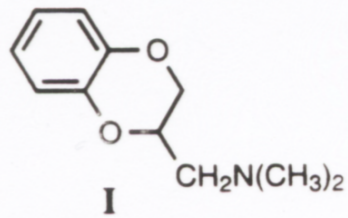


Cyproheptadine (Periactin)

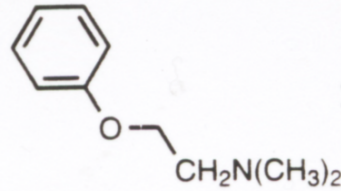


Azatadine (Optimine)

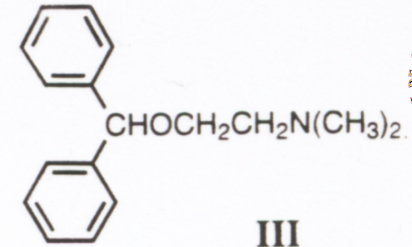




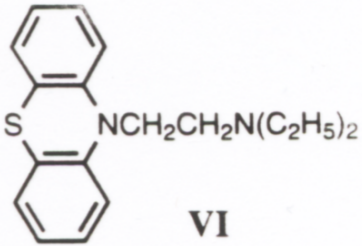
Benzodioxanes
(antihistaminic)



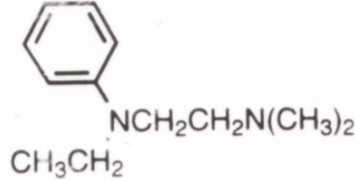
Ethanolamines
(antihistaminic)



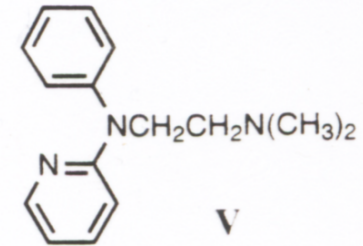
Diphenhydramine
(antihistaminic)



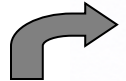
Diethazine
(anti-Parkinson)



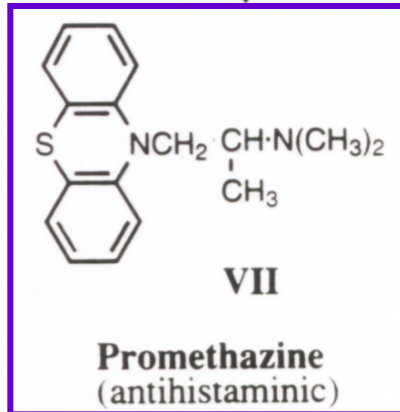
Ethylenediamines
(antihistaminic)



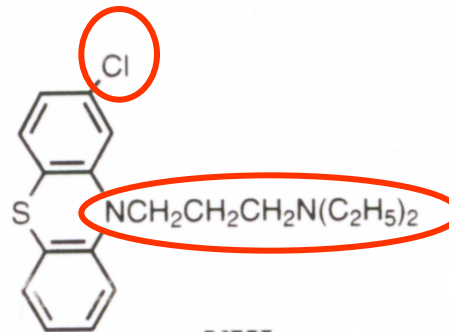
Tripelennamine
(antihistaminic)



Apresenta ação anti-histáminica, mas com forte efeito sedativo
Usado como anti-Parkinson, devido à ação anti-muscarínica



Promethazine
(antihistaminic)



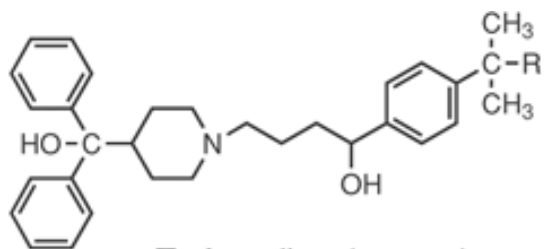
Chlorpromazine
(antipsychotic)

**Desenvolvimento
dos fármacos
Fenotiazínicos**

Segunda geração de anti-histamínicos H-1

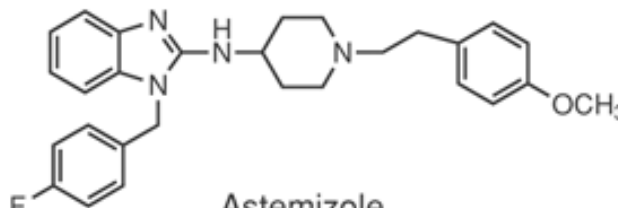


Não causam sedação e apresentam menor efeito anticolinérgico

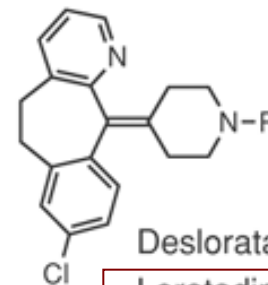


Terfenadine (R = CH₃)

Fexofenadine (R = COOH)

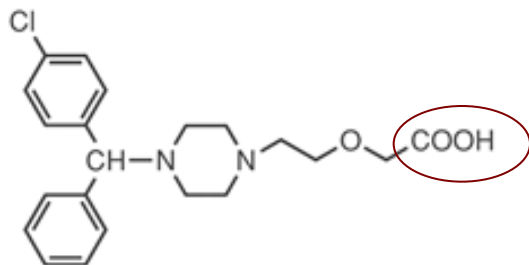


Astemizole

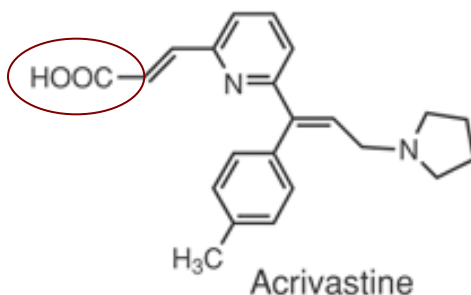


Desloratadine (R = H)

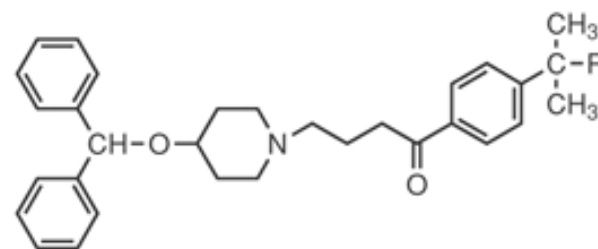
Loratadine (R = COOCH₂CH₃)



Cetirizine

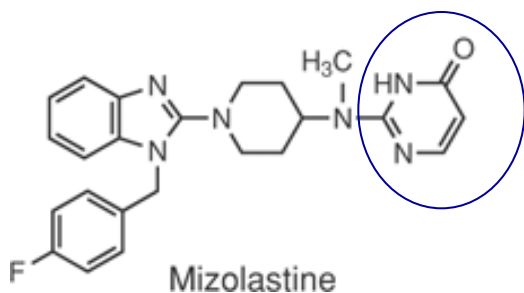


Acrivastine



Ebastine (R = CH₃)

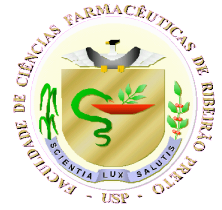
Carebastine (R = COOH)



Mizolastine

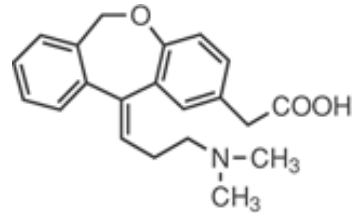
- estruturas mais hidrofílicas (*caráter anfotérico*);
- podem ser substratos para sistemas proteicos de efluxo de drogas;
- maior seletividade H₁

Anti-histamínicos tópicos

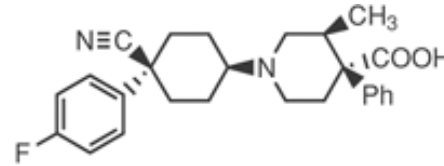


Usos:

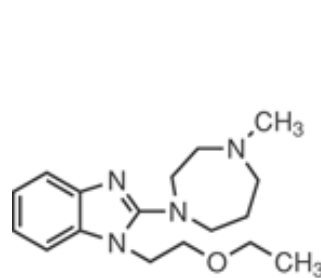
✓ alívio de coceira nos olhos, congestão da conjuntiva e eritema



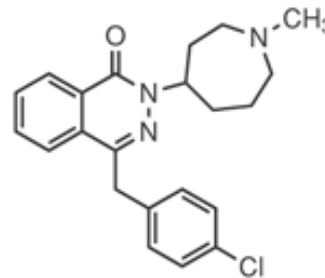
Olopatadine



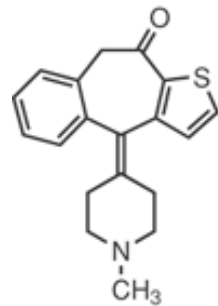
Levocabastine



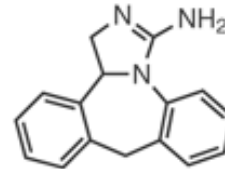
Emedastine



Azelastine

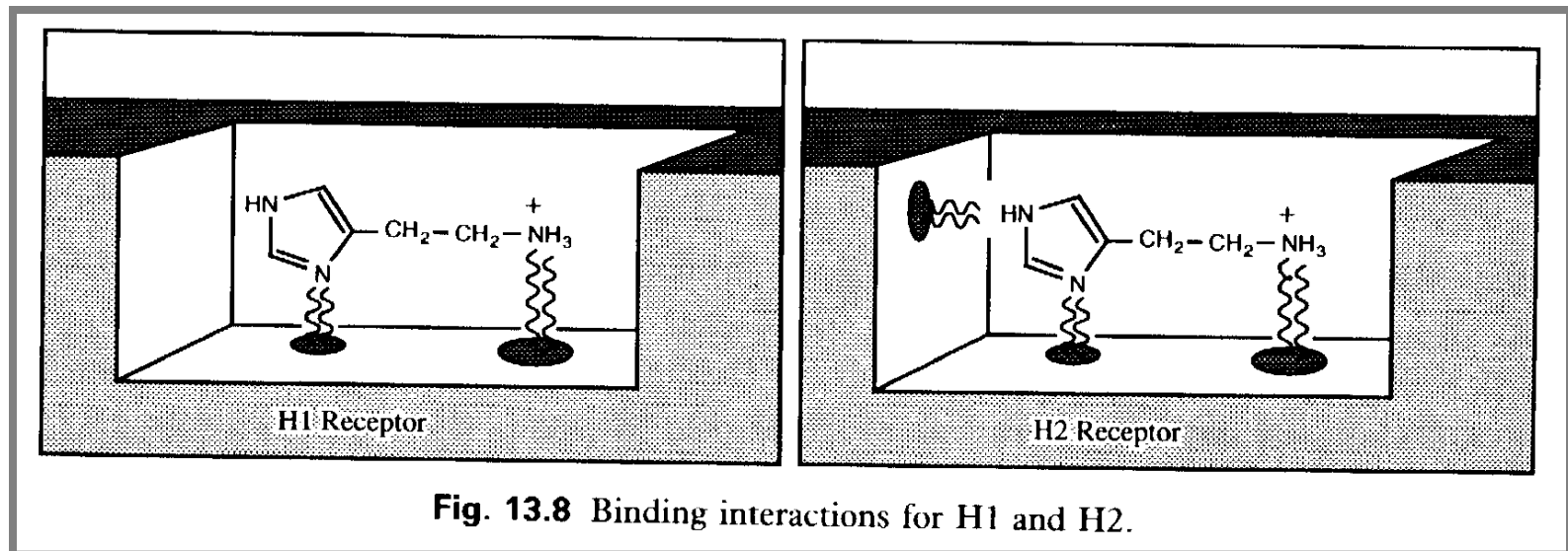


Ketotifen



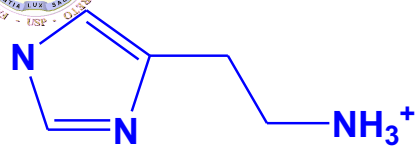
Epinastine

Como introduzir na estrutura características que levariam ao antagonismo H₂ seletivo, sem o conhecimento da estrutura do receptor ???

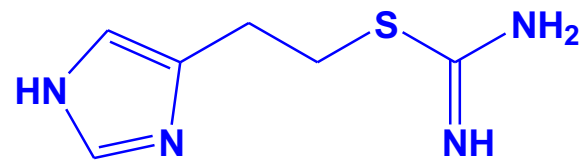
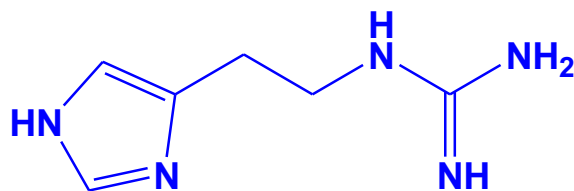




(SK&F) Após o fracasso de mais de 200 compostos...



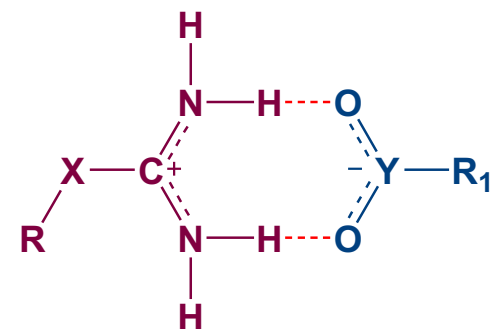
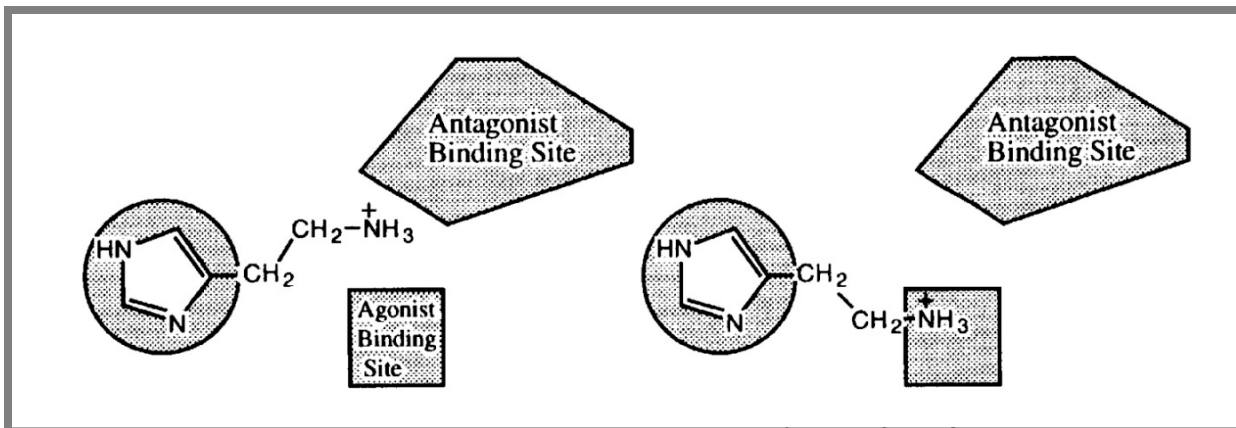
histamina



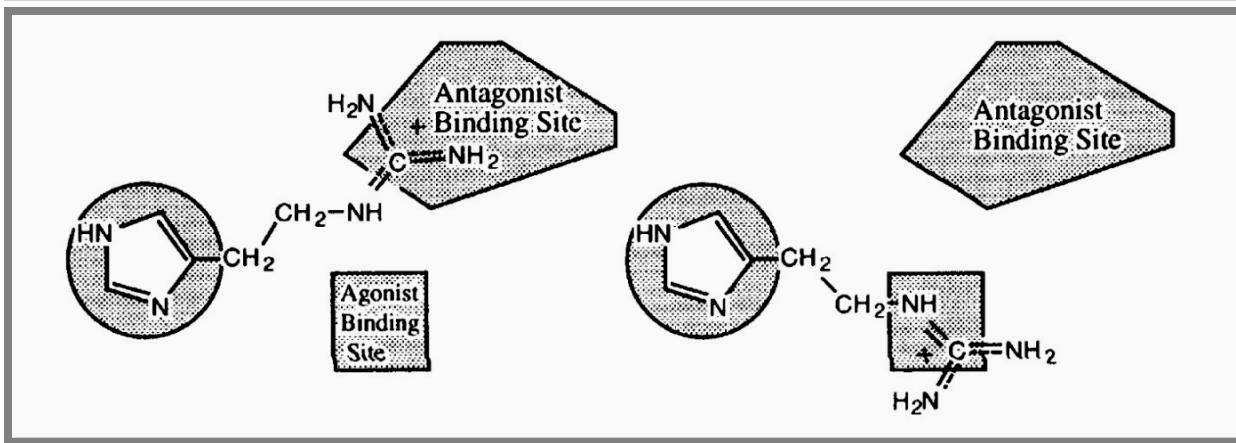
Mais ativo

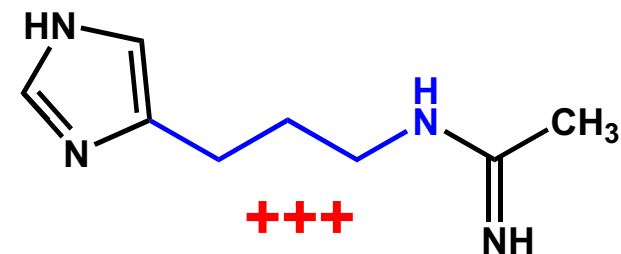
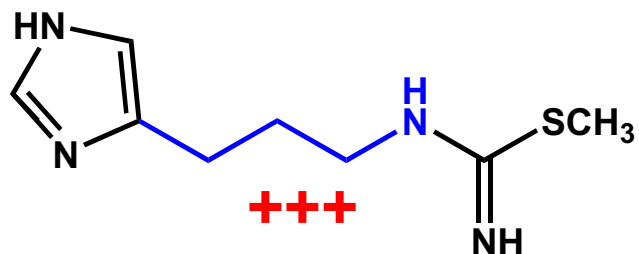
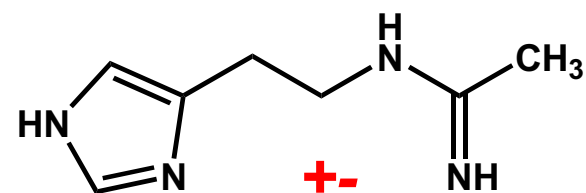
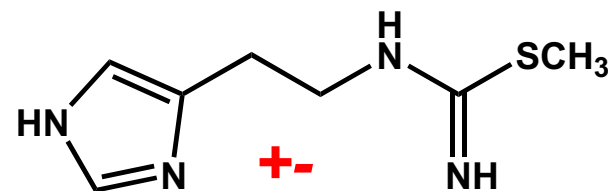
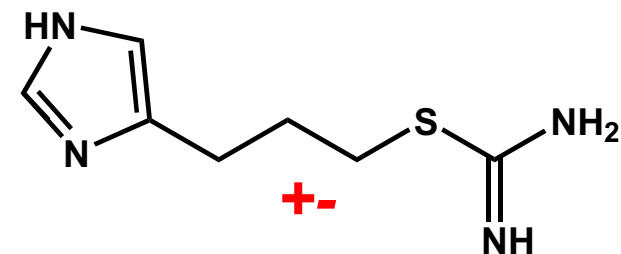
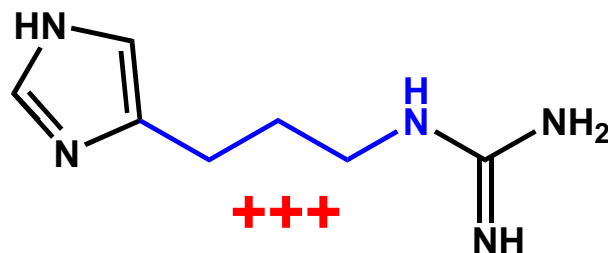
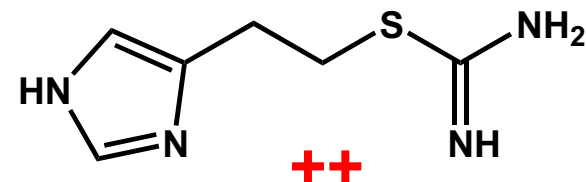
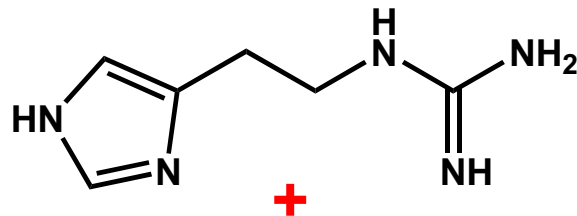
Fraca ação antagonista, mas com ação agonista parcial

Hipóteses para as interações com o receptor H2



amidinas poderiam atuar como antagonistas através de ligação adicional com o receptor (Asp)





Atividade

+ - : detectável

+ : $ID_{50} > 500 \mu\text{mol/kg}$

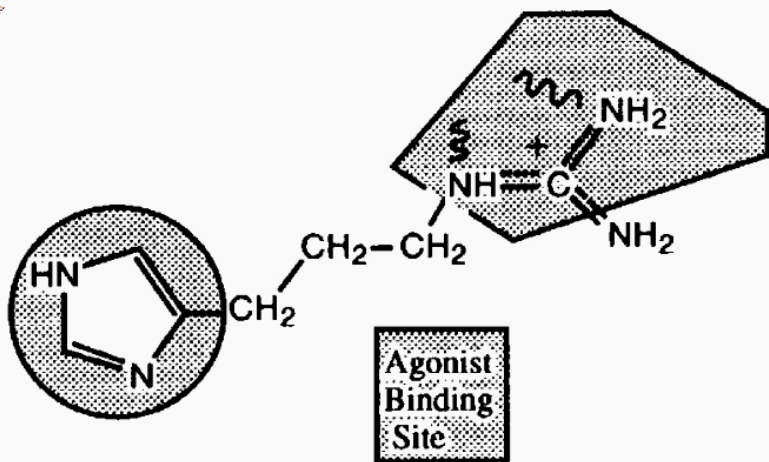
++ : $ID_{50} \sim 200 \mu\text{mol/kg}$

+++ : $ID_{50} = 50-100 \mu\text{mol/kg}$

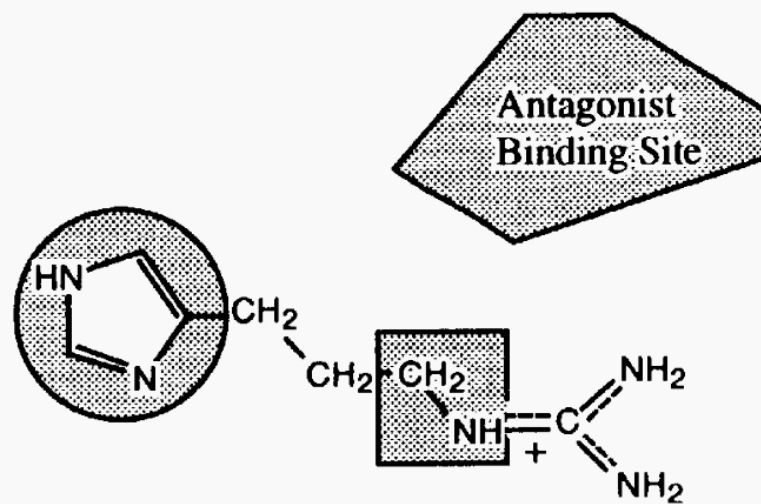
Nas isotiouréias e carboxamidinas reversas a ligação de H com o receptor deveria incluir um NH dentro da cadeia lateral e 3C entre os grupos farmacofóricos



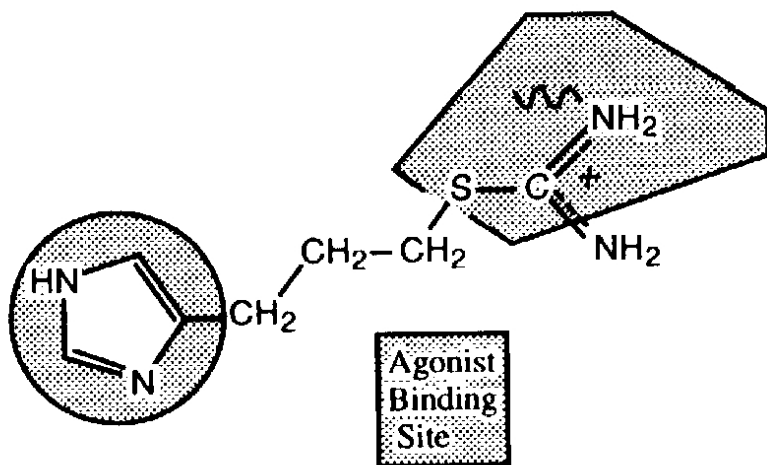
Problema: atuam como agonistas parciais



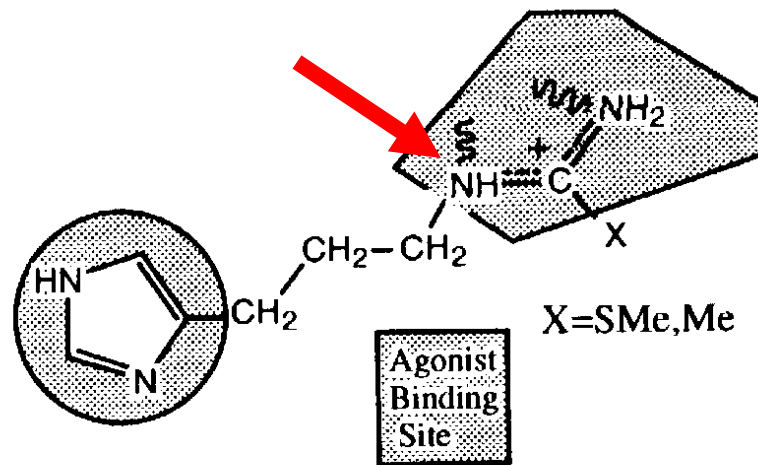
GOOD BINDING AS ANTAGONIST



BINDING AS AGONIST

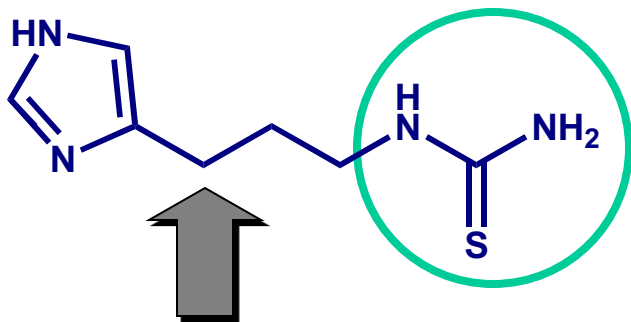


POOR BINDING AS ANTAGONIST



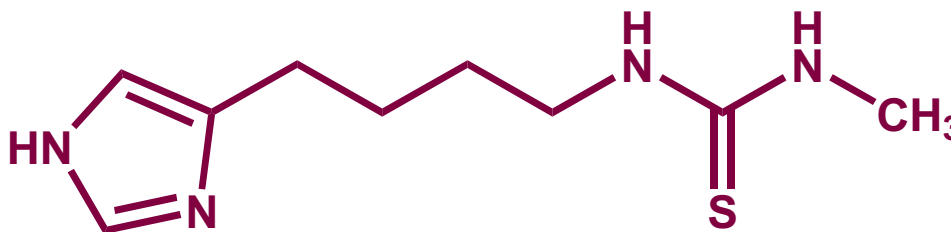
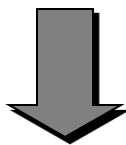
GOOD BINDING AS ANTAGONIST

Alternativa: substituição do grupo guanidina fortemente básico por grupos polares não básicos



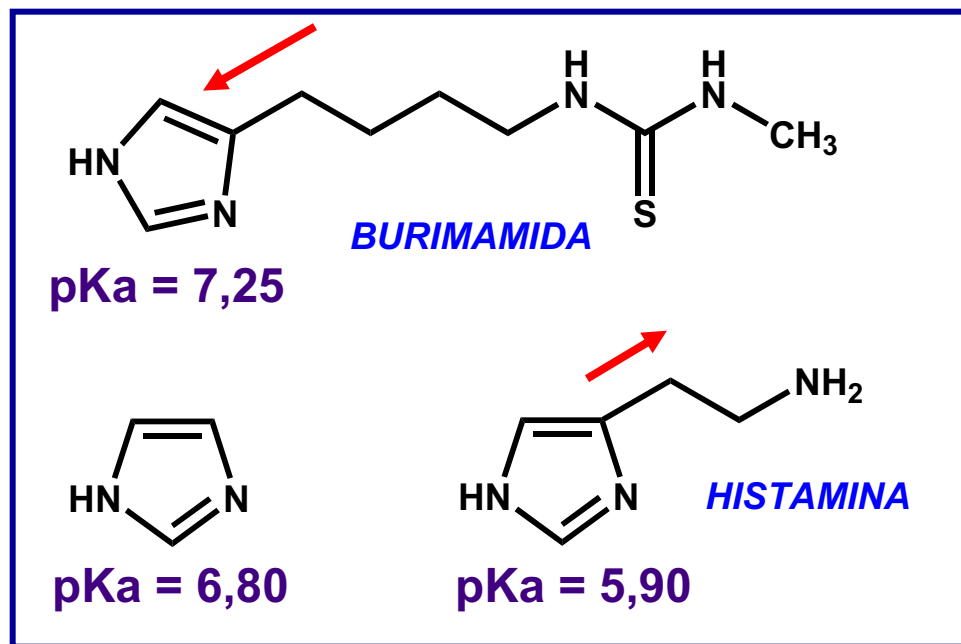
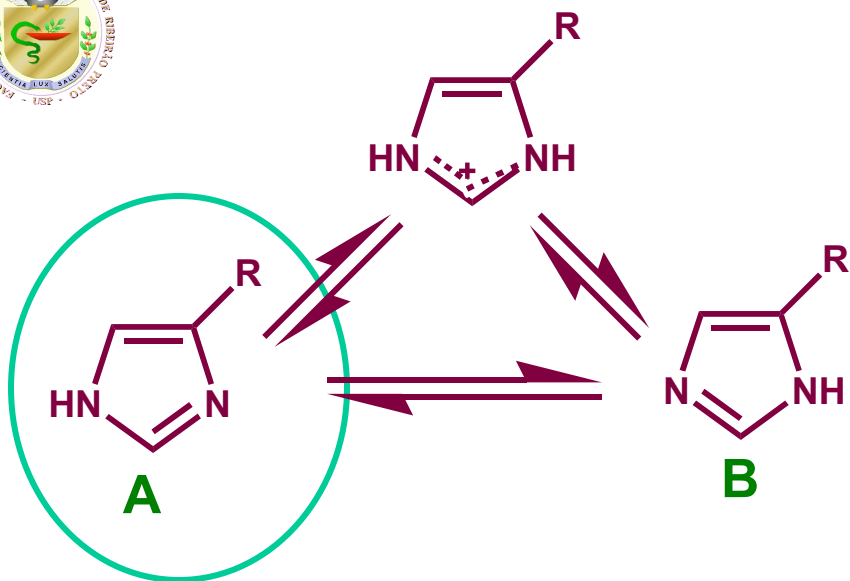
Não atua como agonista parcial
Fracca ação antagonista
Neutra em água

Aumento da cadeia lateral

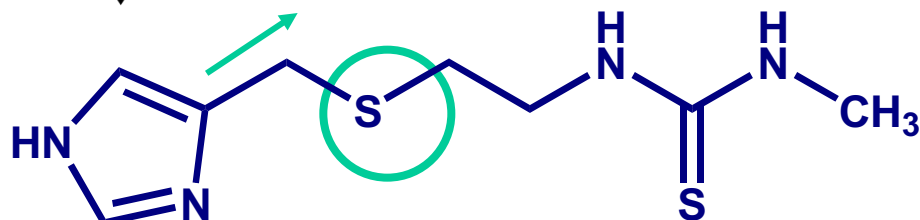


burimamida

Antagonista competitivo puro
Altamente seletivo
Não ativo por via oral



Estabilização do tautômero mais ativo e diminuição do pKa



TIABURIMAMIDA

Mais ativo

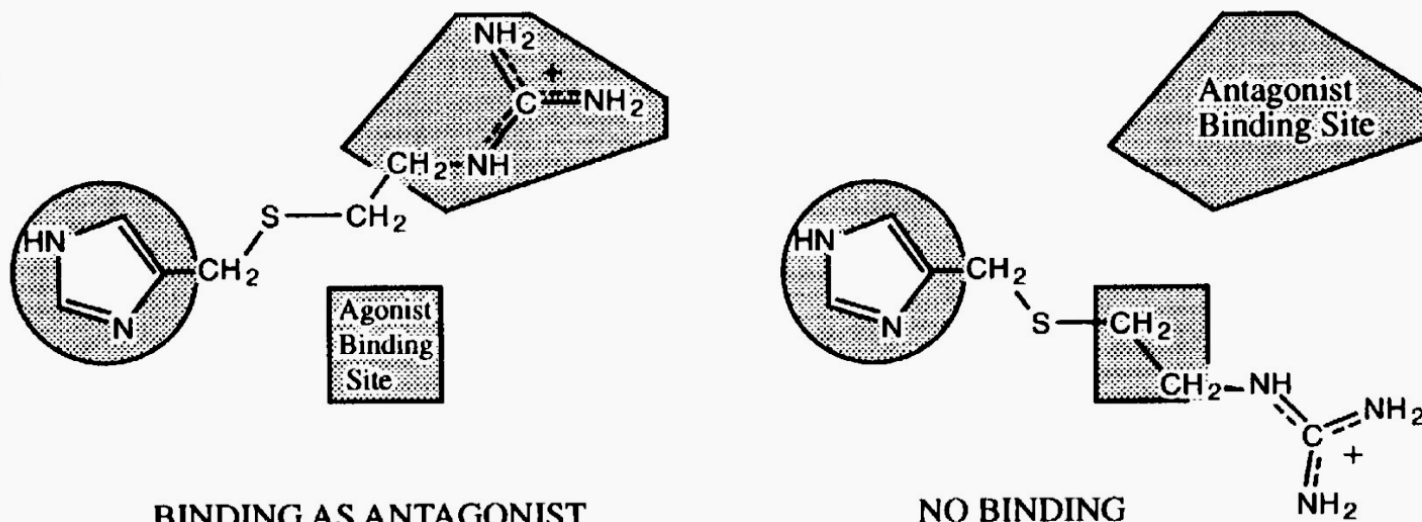


Fig. 13.33 Four-carbon unit chain.

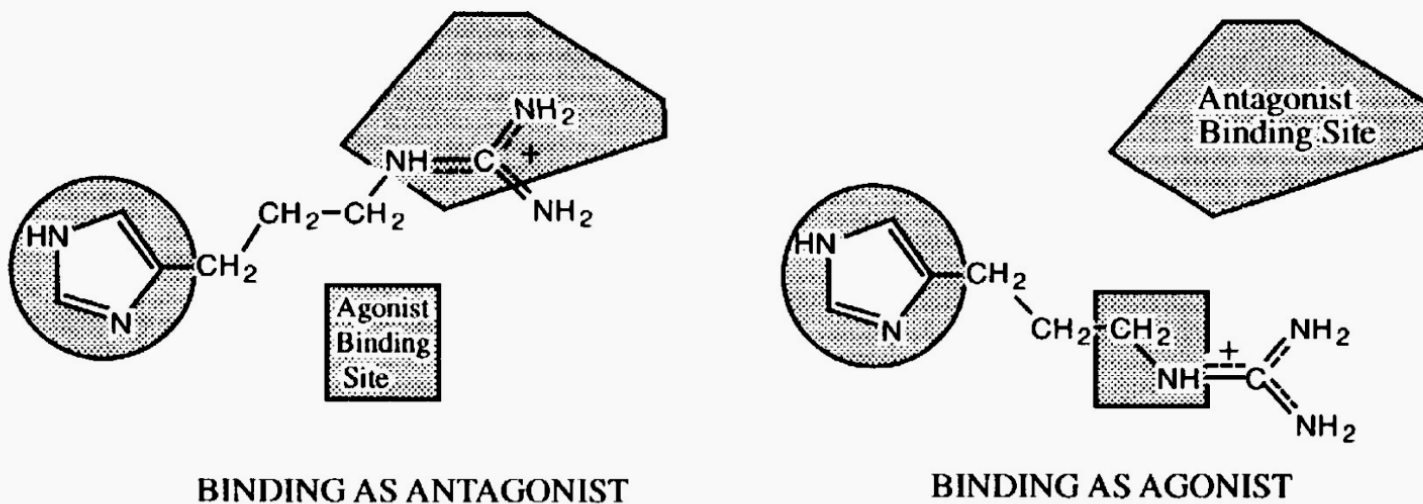


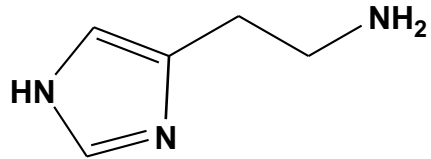
Fig. 13.34 Three-carbon unit chain.

Agonistas Histamínicos

Atividade H₁
relativa a histamina

Atividade H₂
relativa a histamina

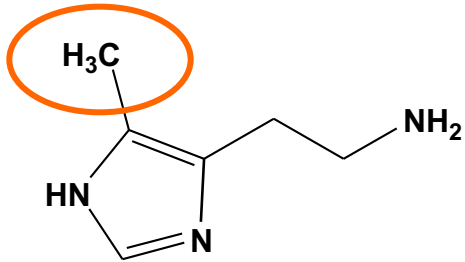
Atividade H₃
relativa a histamina



100,0

100,0

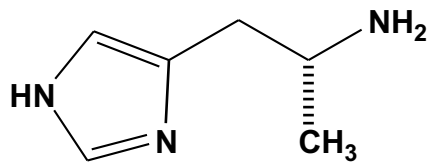
100,0



0,23

39,0

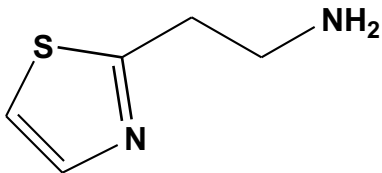
<0,008



0,49

1,0

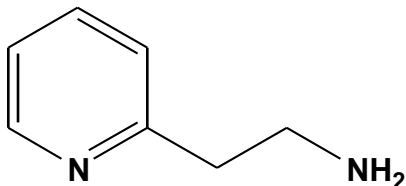
1.550,0



26,0

0,3

<0,008



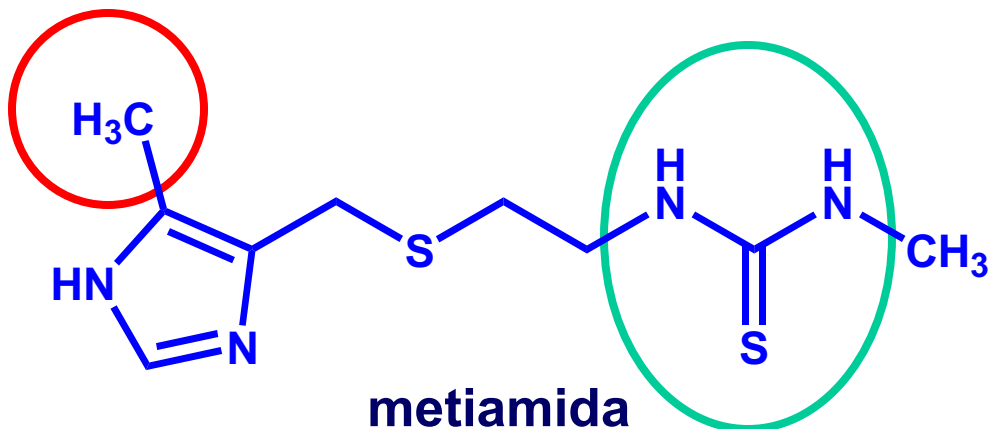
5,6

2,5

<0,06

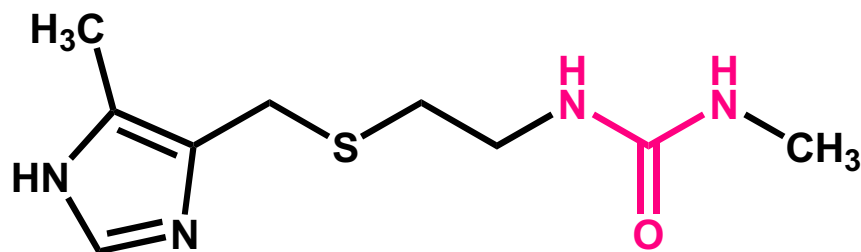
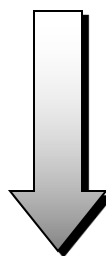
**Estabilização
do tautômero**

**Antagonista
mais potente**

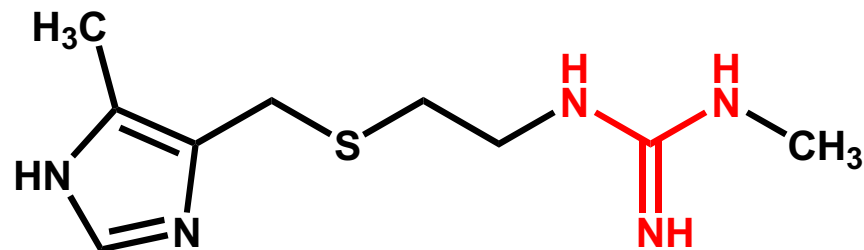


Tiouréia

**Diminuição do número
de leucócitos**



isómero com uréia

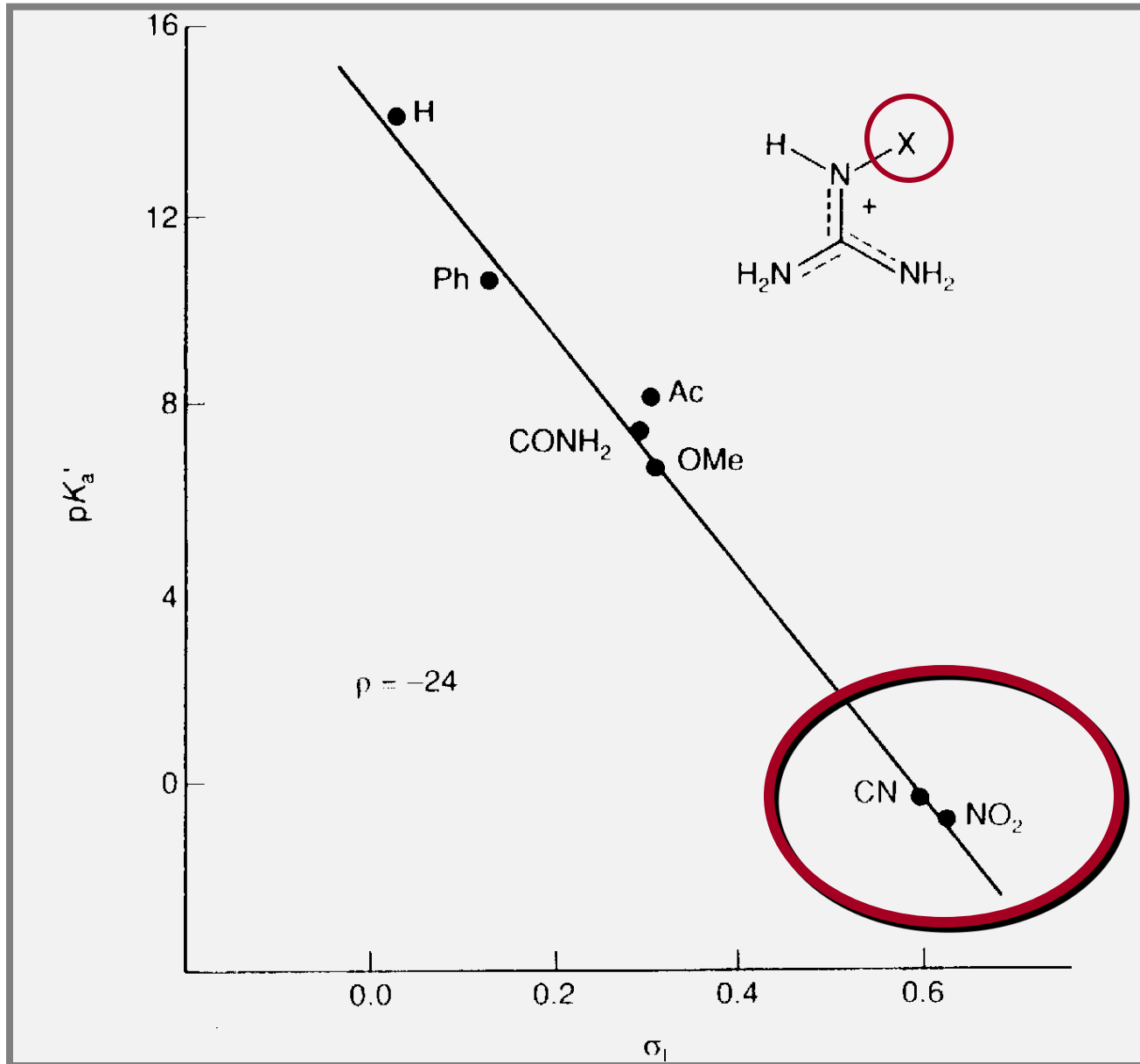


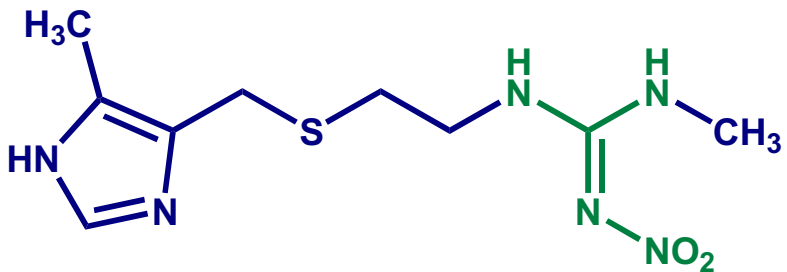
isómero com guanidina

Menos ativos que metiamida



Reduzir a basicidade do grupo guanidina

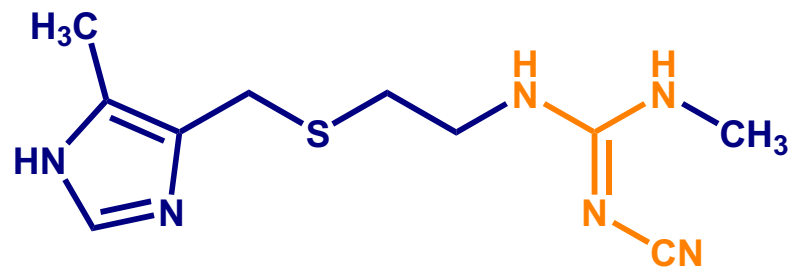




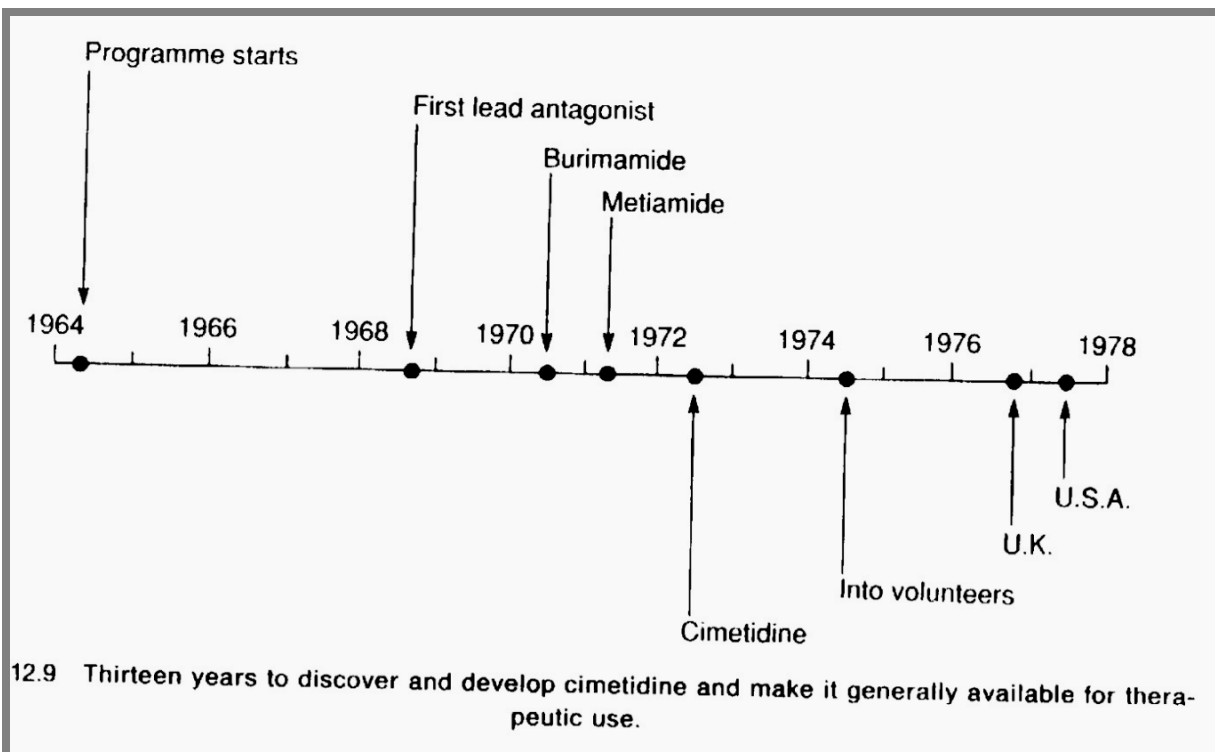
Nitroguanidina - $pK_a = 0,4$

Cianoguanidina - $pK_a = 0,9$

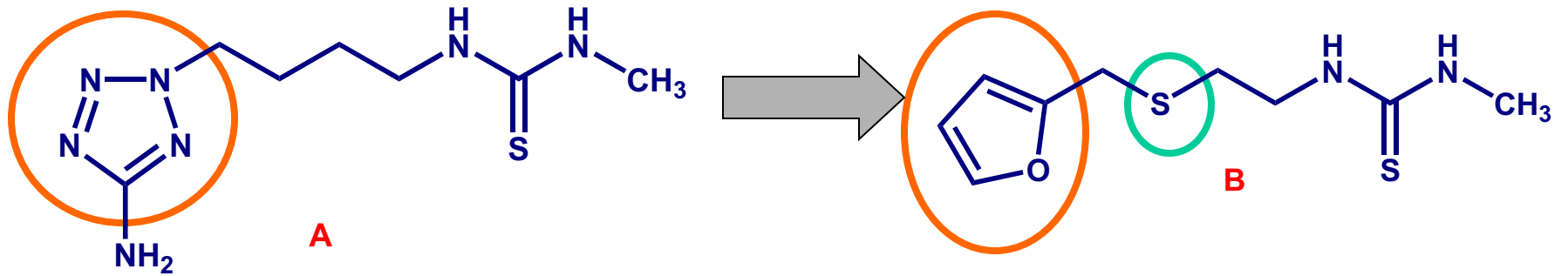
Tiouréia - $pK_a = -1,2$



cimetidina

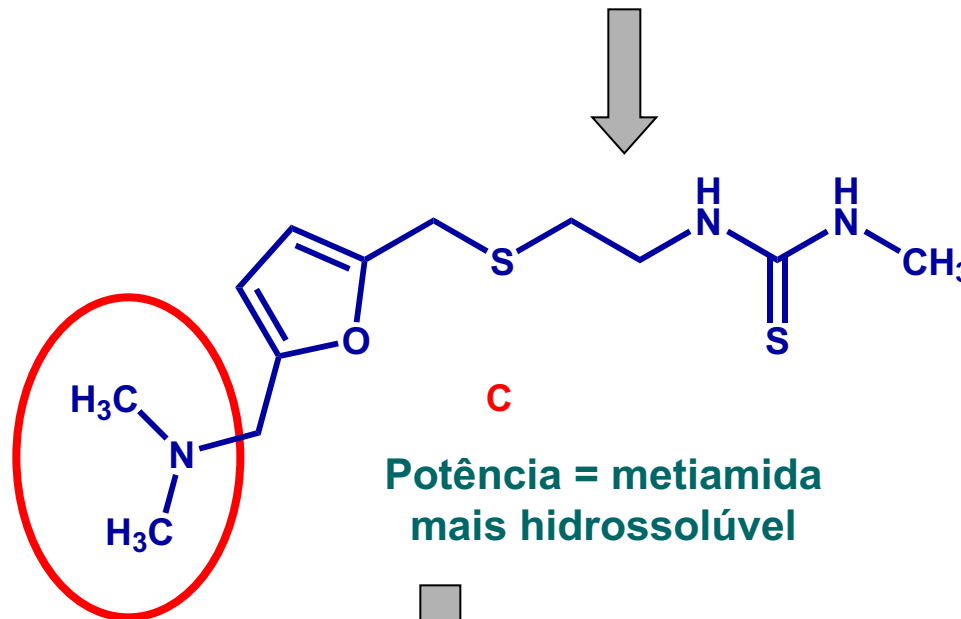


Desenvolvimento da ranitidina (Merck)

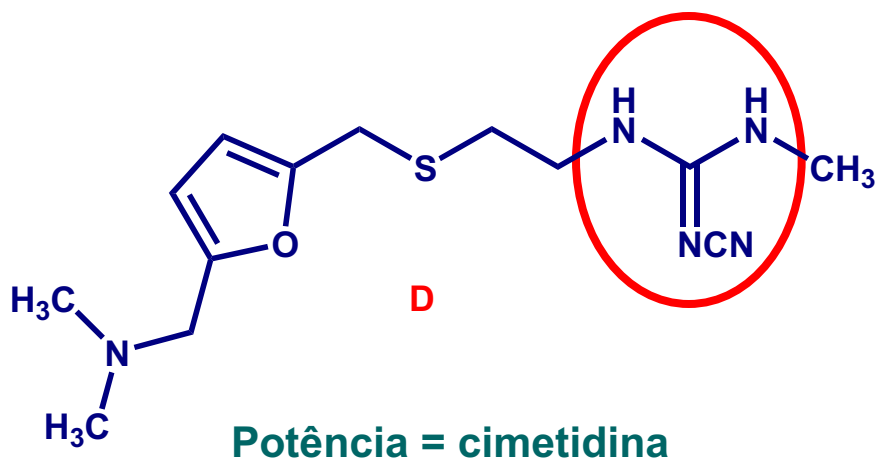


Potência = burimamida

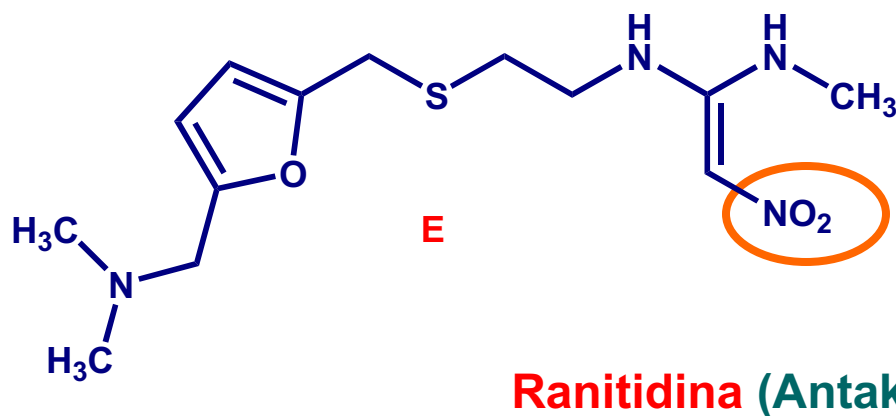
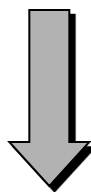
Ativo, mas pouco hidrossolúvel



Potência = metiamida
mais hidrossolúvel



PF e baixa cristalinidade dificultaram desenvolvimento farmacêutico



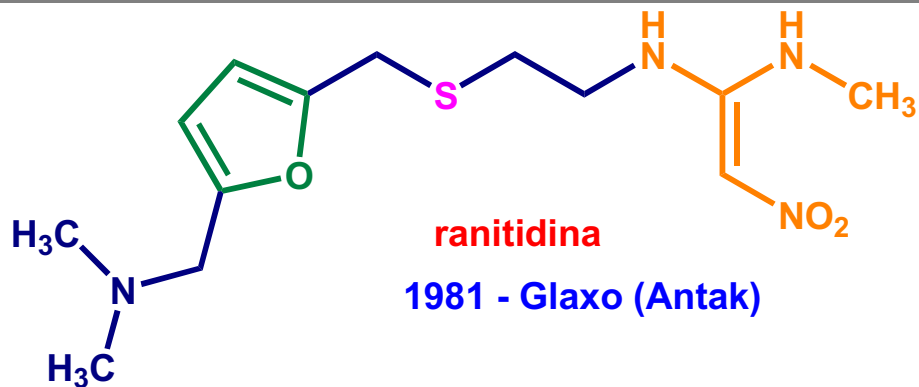
4 a 5 vezes mais potente que cimetidina



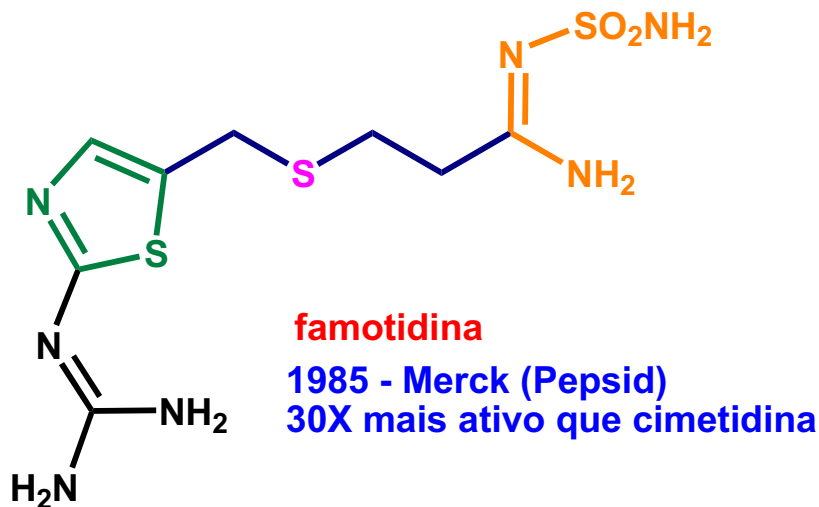
Antagonistas do receptor H2



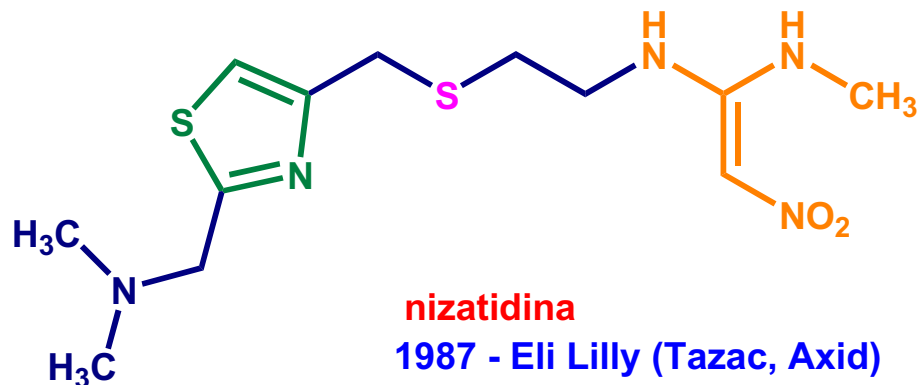
cimetidina
1977 - SK&F (Tagamet)



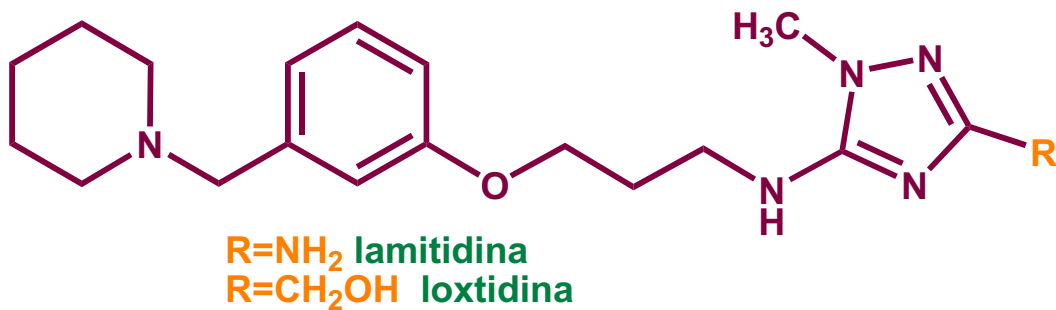
ranitidina
1981 - Glaxo (Antak)



famotidina
1985 - Merck (Pepsid)
30X mais ativo que cimetidina

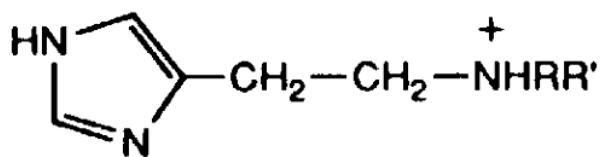


nizatidina
1987 - Eli Lilly (Tazac, Axid)

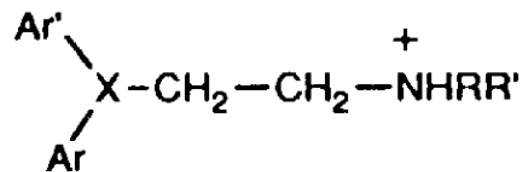


R=NH₂ lamitidina
R=CH₂OH loxtidina

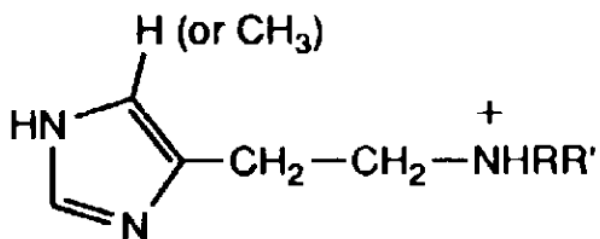
- ✓ Agentes de ação prolongada (5-10X mais potentes que ranitidina, e com duração 3X maior)
- ✓ Foram retirados dos estudos clínicos por apresentarem toxicidade com uso prolongado



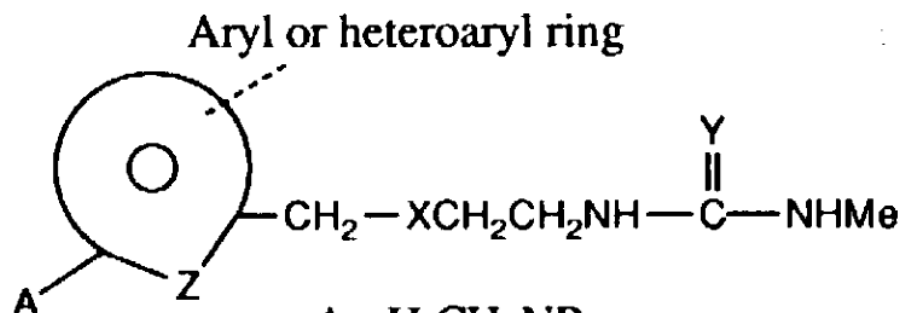
H1 Agonist



H1 Antagonist



H2 Agonist



A = H, CH₂NR₂

X = S, CH₂

Y = S, NCN, CHNO₂

Z = CH, N, O, S

H2 Antagonist

Fig. 13.61 Comparison between H1 and H2 agonists and antagonists.