#### J Stephen Dickson MRPharmS Superintendent Pharmacist

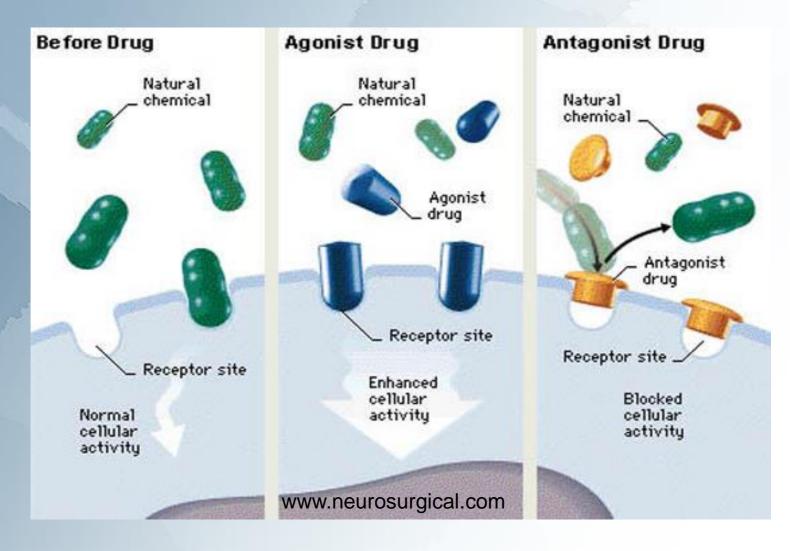
All discussion in this presentation is from a personal viewpoint and should not be taken as general medical advice without referring to a registered medical professional.

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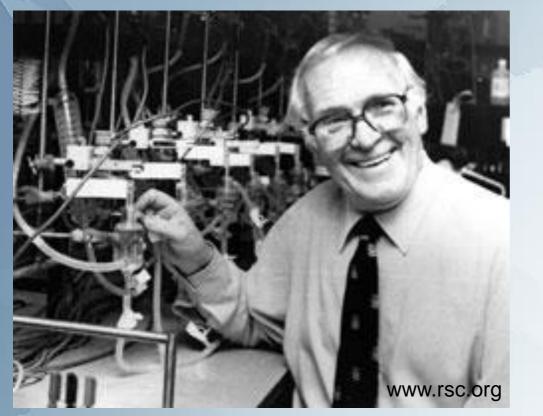
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#### **Agonists and Antagonists**



#### **Antagonists Discovery**



Sir James Black at the Rayne Institute in London, following the announcement that he was the joint winner of the Nobel prize in medicine © Associated Press

- Sir James W Black (1964)
- Adrenergic blocking drugs
- Important to be able to modify biological systems
- Discovery of proproanolol
- Nobel Prize 1988
- Millions of lives saved

#### **History and Pharmacology of LDN** Scientific excitement! What other drugs Receptors exist and Do we know about can reliably treat Now we know how That might use Disease! To experimentally **Receptors**? Study receptors! **OPIATES!** Worldwide escalation in research

#### Where our story begins!



Presently she cast a drug into the wine of which they drank to lull all pain and anger and bring forgetfulness of every sorrow."

"Homer's Odyssey" 9th Century BC.

#### Or does it?



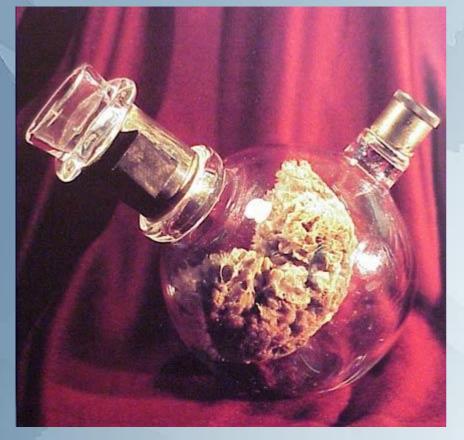
The Archaic or Early Dynastic Period of Egypt immediately follows the unification of Lower and Upper Egypt c. 3100 BC. It is generally taken to include the First and Second Dynasties, lasting from the Protodynastic Period of Egypt until 2686 BC, or the beginning of the Old Kingdom.

#### Laudanum / Papaverine



- In 1527 Paracelus (Swiss/German Doctor) alcoholic extract of opium.
- 1660 Dr Thomas Sydenham – widespread use by 1680.
- Every disease was "cured" by Laudanum.... and why not!

#### **Big problems**



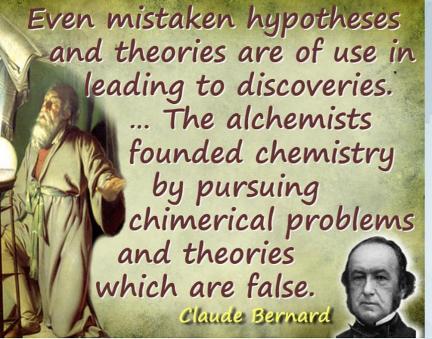
- Overdose:
  - Breathing suppression
  - Death
- Spongica Somniferum
  - Ineffective
  - Too effecitve
  - Complications
  - Used until modern era

#### Science progressed 1740-1830s



- Distillation
  - One "active principal"
  - More powerful?
  - Fewer side effects?
- Friedrich Serturner Papaverine
  - Renamed morphine in 1806
  - Stronger, more reliable, standardised

#### Claude Bernard 1850



More science quotes at Today in Science History todayinsci.com

- Animal experiments
  - Chloroform PLUS morphine was superior and safer
- Practice adopted worldwide
  - Over next 50 years still saw side effects and overdose problems.

#### Modern big pharma begins! (1874)

Am. J. Ph.] 7 [December, 1901 BAYER Pharmaceutical Products HEROIN—HYDROCHLORIDE is pre-eminently adapted for the manufacture of cough elixirs, cough balsams, cough drops, cough lozenges, and cough medicines of any kind. Price in 1 oz. packages, \$4.85 per ounce; less in larger quantities. The efficient dose being very small (t-48 to t-24 gr.), it is The Cheapest Specific for the Relief of Coughs

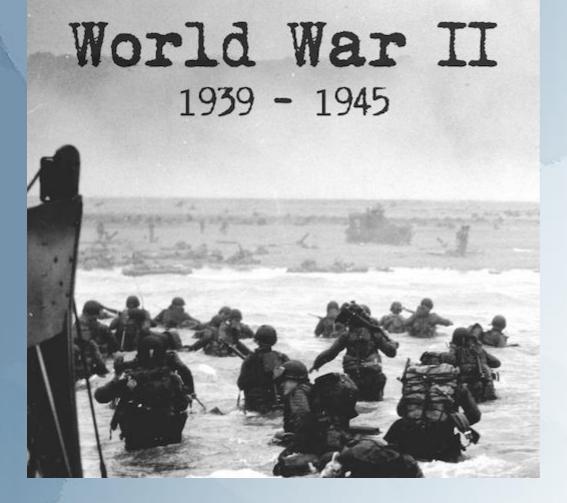
(In bronchitis, phthisis, whooping cough, etc., etc.)

FARBENFABRIKEN OF ELBERFELD COMPANY SELLING AGENTS P. O. Box 2160 40 Stone Street, NEW YORK

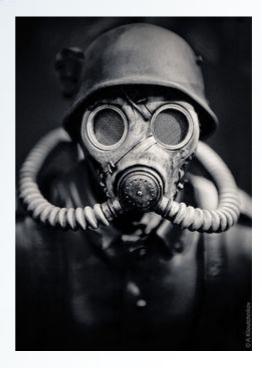
- Charles Romley Alder Wright
  - Variations on morphine made chemically, by adding acetyl groups.
  - The "New Morphine!"
  - "Safer" "More effective" "Cheaper" (all used to hearing these terms!)
  - Clearly incorrect!
  - Morphine and diamorphine widely used.



- World War 1 Disrupted trade & prevented sufficient supplies of morphine.
  - Research began into chemical synthesis (SLOW)



 By the start of WWII – no progress, but scientists had a new problem.

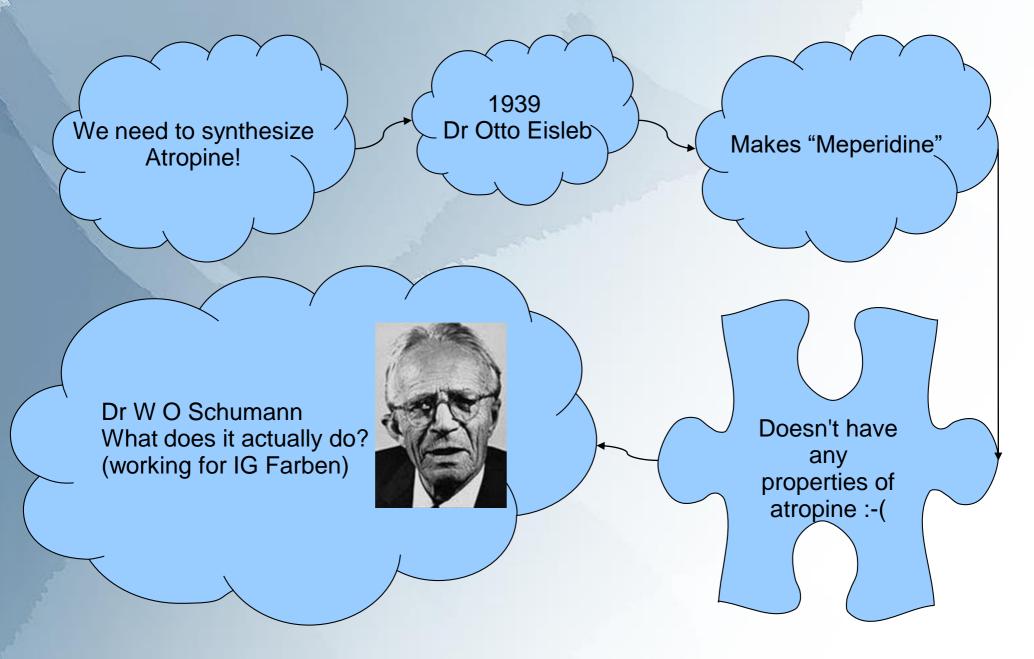


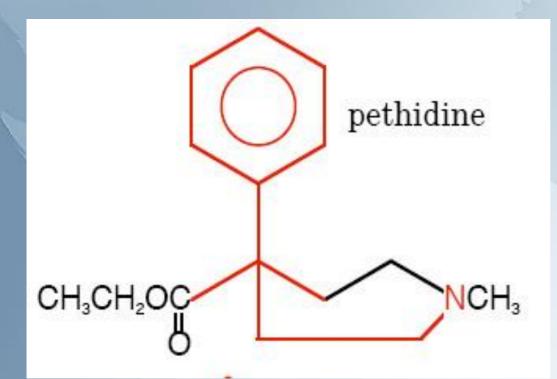


Giant Pupil Man Eating Babies!

# Atropa-Belladonna







•Meperidine turned out to be a very potent AGONIST of the opiate receptor (more potent than morphine).

- Renamed Pethidine
- Still used today

Structural similarities to Morphine – but different effects, and synthetic!

Serendipity – in trying to solve one problem, they solved another by accident.



# Big pharma goldrush

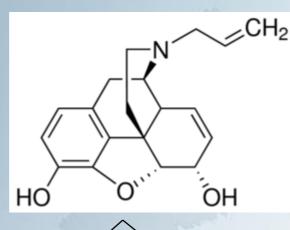


 $H_3C \sim M \sim CH_3$ 

- 1940-46
- 1,1-diphenyl-1 (dimethylaminoisopropyl butanone-2

Methadone

- 1-methyl-4-phenyl-4-propionoxypiperidine (MPPP) Desmethylprodine
- N-allyInormorphine Weijlard and Erikson (Merck & co) → unusual properties. (nalorphine)



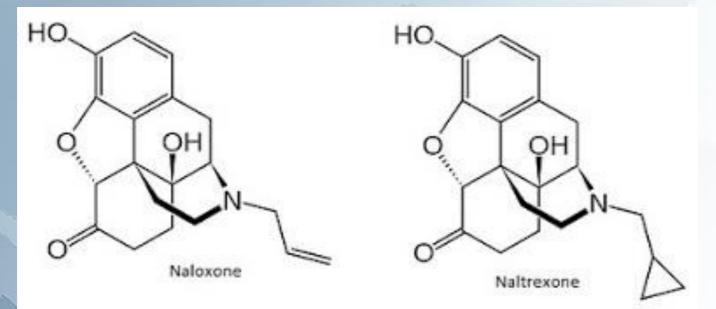
Nalorphine

Slight analgesic action in animals

Some effects attributable to morphine effects

Given to an animal overdosed with morphine it **reversed** the effects!

Realisation that this is USEFUL



First patent for opiate blocking drug was for Naloxone in 1966.

WHO list of essential medicines – still there 50 years later

Its orally more active analog Naltrexone shown on the right.



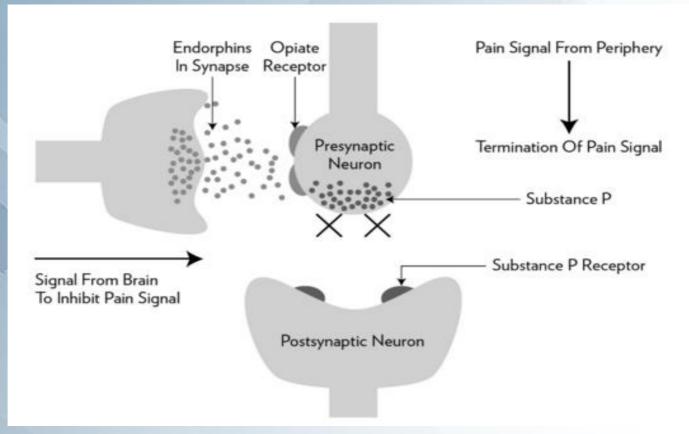
It's time to WAKE UP

#### **History and Pharmacology of LDN** Called "Endorphins" **OPIATES** Synthesised in anterior Mimic natrual Or synthethic **Pituitary Gland** neuro peptides opiates From precursors Released due to **Biological stimuli Negative Feedback** Loop

Multiple systems

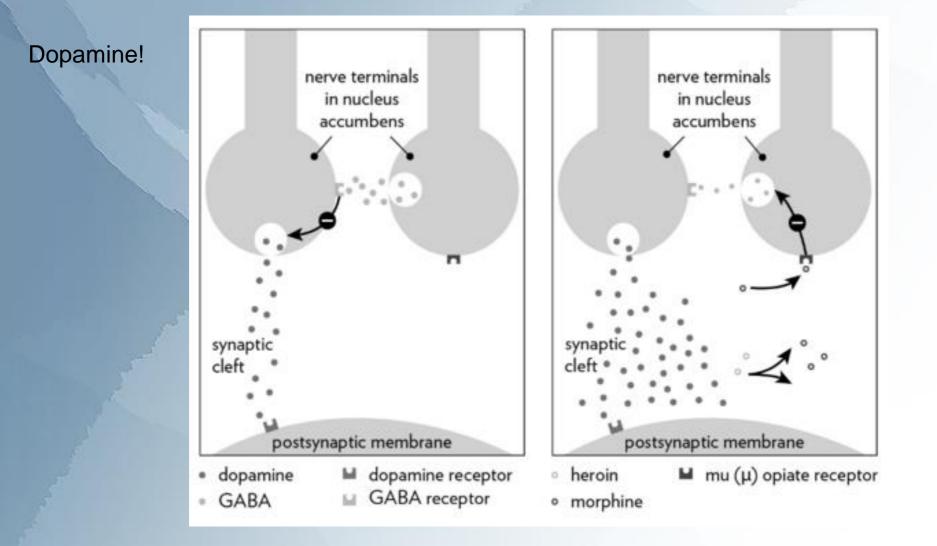
Various classes -Analgesic action: Beta-Endorphins

#### History and Pharmacology of LDN BETA Endorphins in the peripheral nervous system

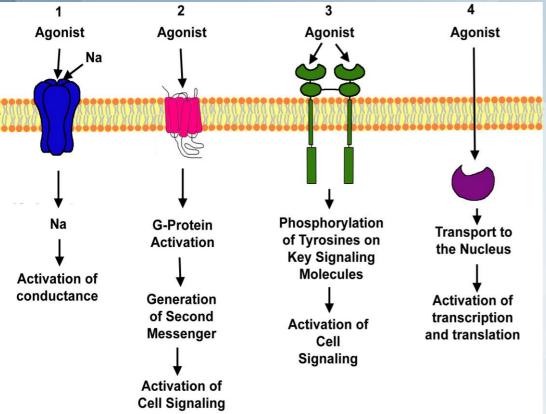


Range of neurotransmitters in addition to Substance P. Different opiate receptors. Mu is most common in this pathway.

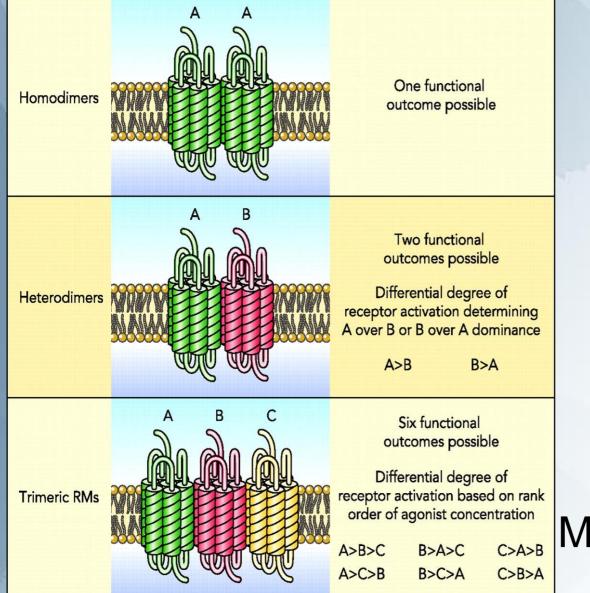
# **History and Pharmacology of LDN** BETA Endorphins in the central nervous system



#### Receptors



- Theorised in 1960s
- Discovered in 1970s, via radioisotope labelling.
- Opiate receptors are in a family of similar receptors – GProtein Activated
- Four broad groups now known



G-Protein Family Opiates Somatostatin TLR Glucagon Beta-Adrenergic

Etc (generally inhibitory when activated)

Multitude of outcomes

**Opiate receptors in specific** 

AGONIST Fits and Activates (Variable)

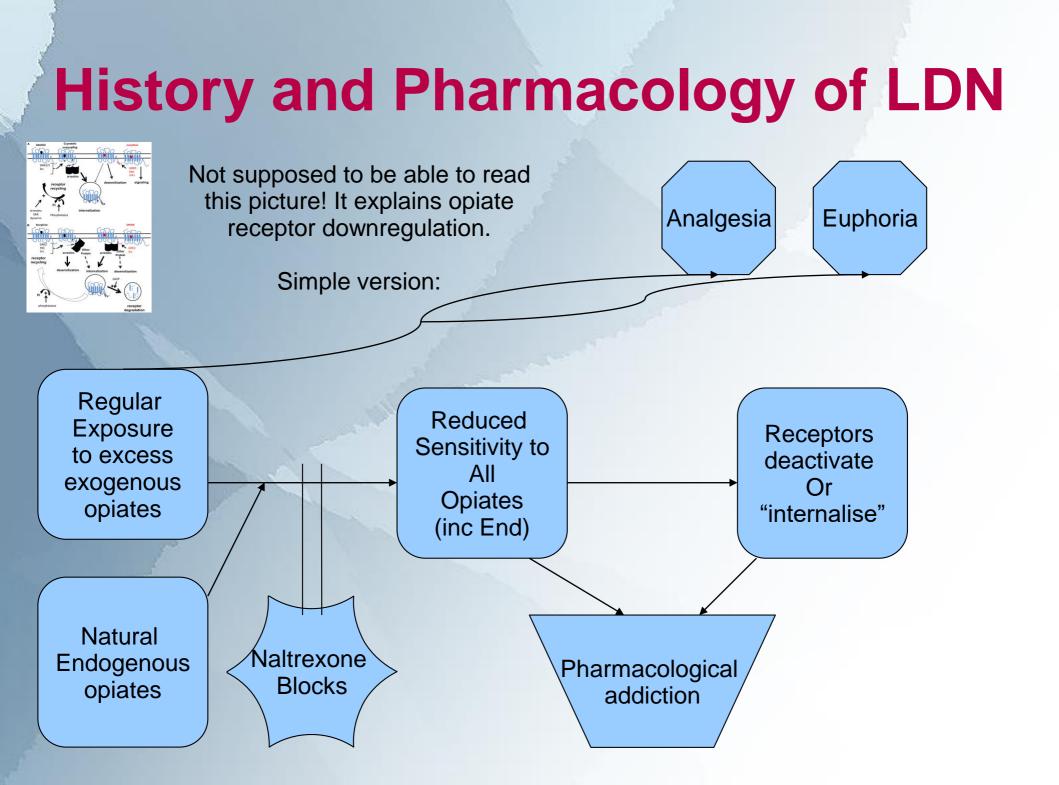
Partial agonist -fits but doesnt fully activate

Antagonist Blocks

#### Recap

Endogenous endorphins, such as the beta endorphin discussed earlier, are agonists;: these are mimicked by opiate drugs such as morphine and diamorphine. Naltrexone and naloxone are antagonists; keys which that fit the same door, but stop the receptor from being activated by an agonist. It has since been discovered that these receptors are fluid and can become more or less sensitive to agonists and can increase and decrease in active number depending on circumstances.

> Extract from The LDN Book Chapter 1



Use of naltrexone as therapy for addiction

50-300mg daily Licensed

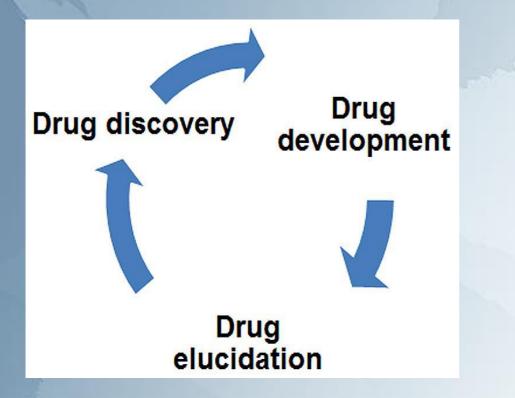
Very successful – blocked all euphoric effects of heroin etc.

Short acting, so compliance often poor

Blocked natural endorphins, lead to dysphoria in some patients.

Recent resurgence in opiate antagonists for alcoholism Licensed

#### Naltrexone Immunological effects



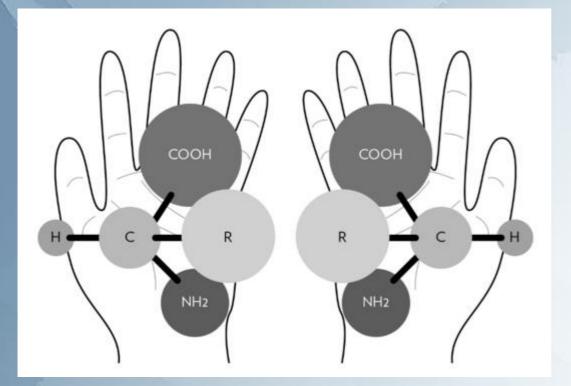
Drugs are rarely 100% selective

Often after launch, drugs undergo an elucidation period where previously unknown effects are found.

Science often improves – which assists this process.

Drugs which affect homeostasis can have different results in higher and lower doses

#### Naltrexone Immunological effects

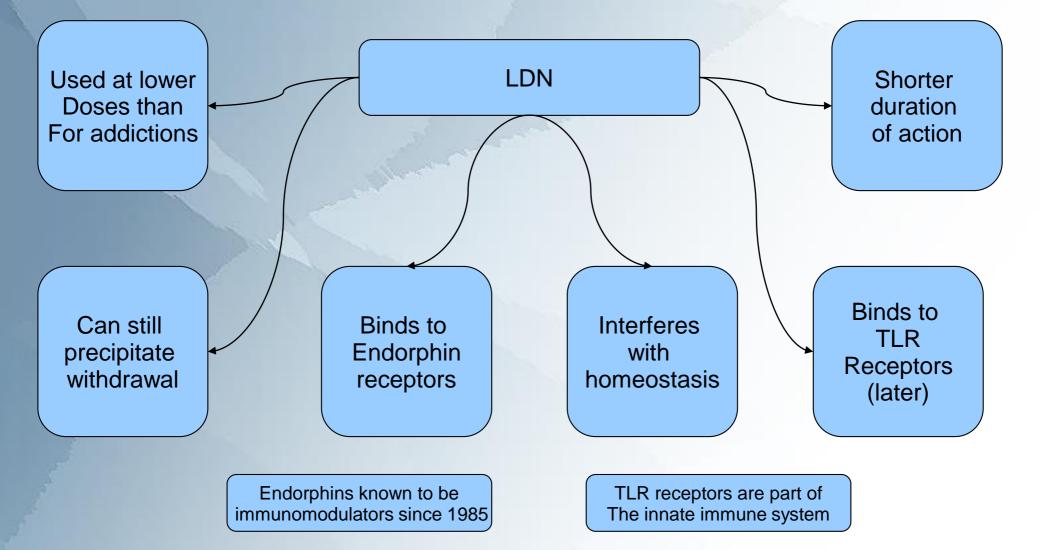


Drugs are three dimensional. (Chiral)

Usually synthesised in 50:50 raecemic mixture of L and R isomers.

Different ISOMERS can have different pharmacological targets

#### Naltrexone Immunological effects



#### Naltrexone Immunological effects 1986 -> now Dr Ian Zagon



Endorphin receptors are present on vast array of immune cells

Endorphin receptors are coded in the mRNA of immune cells, important in regulating the biological response to infection and mutagens.

~30 years of research and ~300 papers the science is irrefutable

#### Naltrexone Immunological effects Zagon research summary

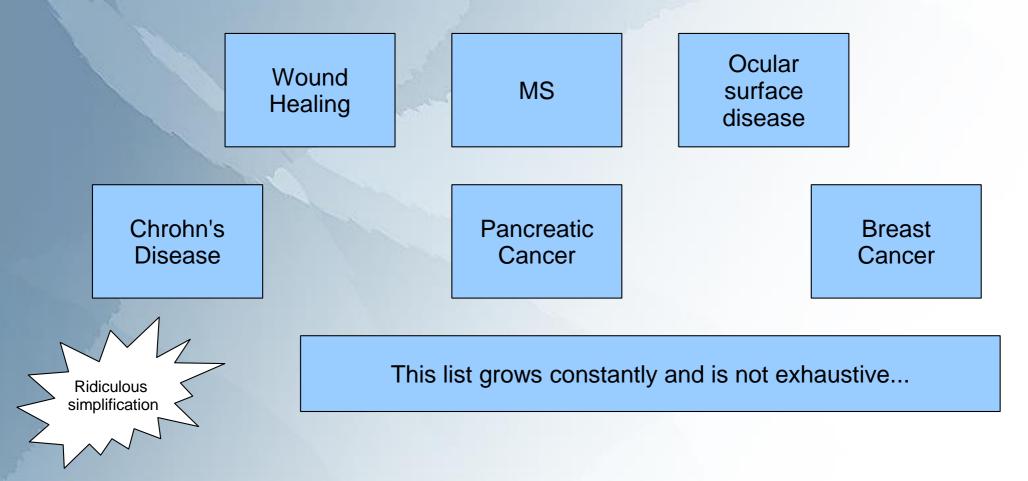


Many outward diseases Are expressions of Malfunctioning immune system

Blocking opiate receptors briefly using naltrexone causes an up-regulation in the production of endorphins, which can act in an immunomodulatory way to correct immune system malfunction The immune system is regulated by Endorphins - acting primarily on Opiate receptors

Cell proliferation is mediated by a subtype of endorphins. Important in cancer?

#### Naltrexone Immunological effects Experimental Models



#### Naltrexone Immunological effects Toll Like Receptors



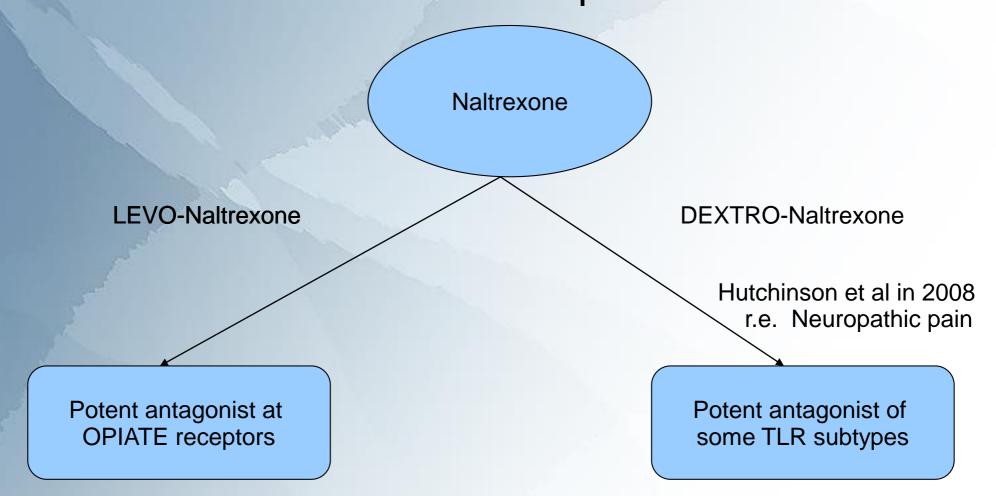
Demonstrated first in 1985 by Christiane Nüsslein-Volhard.

Present on immune cells all over the body, macrophages, dendritic cells, neutrophils, blymphocytes, mast cells, monocytes, and on various internal organs.

First line defense against invasion from bacteria and other pathogens

Can produce NF-Kappa-B as part of the signaling mechanism.

#### Naltrexone Immunological effects Toll Like Receptors



#### Naltrexone Effects Summary

