ANTIHISTAMINES

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An Allergic Reaction

• Early phase reaction:

occurs within minutes of exposure to an allergen and lasts for 30-90 minutes

• Late phase reaction:

begins 4-8 hours later and can last for several days, often leading to chronic inflammatory disease

Common Allergens

- Tree Pollen and Grass
- Pet Danders
- Mold
- Dust Mites
- Foods



Symptoms

- Allergic Rhinitis
- Conjunctivitis
- Bronchoconstriction
- Urticaria
- Atopic Dermatitis
- Anaphylaxis



Histamine



- One of the key mediators released from mast cells and basophils
- Histamine is an important chemical mediator of hypersensitivity
- Plays a major role in the pathophysiology of allergic diseases,
- Histamine exerts its effects through its interaction with one of four distinct receptors (HI, H2, H3, H4).



Histamine

- Signal involved in local immune response, also a neurotransmitter
- synthesized by the decarboxylation of histidine
- Either stored or quickly inactivated by histamine-N-methyltransferase and diamine oxidase
- Release of histamine from mast cells is stimulated by IgE antibodies which respond to foreign antigens in the body

Histamine Receptors

- HI histamine receptor
 - Found on smooth muscle, endothelium, and central nervous system tissue
 - Activation results in vasodilatation, bronchoconstriction, smooth muscle activation
- H2 histamine receptor
 - Found on parietal cells
 - Regulates gastric acid secretion
- H3 histamine receptor
 - Found in the central nervous system
 - Regulates the release of other neurotransmitters
- H4 histamine receptor
 - Recently discovered in different parts of the body including organs of the digestive tract, basophils, and bone marrow cells



An Overview of Antihistamines

- Antihistamine historically refers to drugs that antagonize the actions of histamine at H₁ receptors.
- Block the binding of Histamine to its receptors
- Three generations of Antihistamines
 - Each generation improved on the previous one
 - Share general characteristics and properties

Classes of first generation H₁ receptor antagonist antihistamines

- Small, lipophilic molecules that could cross the BBB
- Not specific to the HI receptor
- Ethylenediamines
- Ethanolamines
- Alkylamines
- Piperazines
- Tricyclics



- 2 aromatic rings, connected to a central carbon, nitrogen, or oxygen
- Spacer between central atom and the amine, usually 2-3 carbons in length. (Can be linear, ring, branched, saturated or unsaturated)
- The amine is substituted with small alkyl groups
- Chirality at X increases potency of the drug
- For maximum potency, the two aromatic rings should be orientated in different planes

Ethylenediamines



These were the first group of clinically effective H_1 -antihistamines

Compound	Ar ₁	Ar ₂
Phenbenzamine (N,N-dimethyl-N'-benzyl-N'phenylethylenediamine)	\bigcirc	_сн ₂ —
Tripelennamine		СН2—СН2—
Mepyramine (Pyrilamine) (N,N-dimethyl-N'-(4-metoxybenzyl)-N'-(2- piridil)ethylenediamine)		H_00 - CH CH
Metaphenylene (N,N-dimethyl-N'-(2-tienilmethyl)-N'- phenylethylenediamine	\bigcirc	СН2
Metafurilene (N,N-dimethyl-N'-(2-furilmethyl)-N'-(2- pyridil)ethylenediamine)	\bigcirc	Сн ₂ —



Synthesis





Ethanolamines

• This class has significant anticholinergic side effects and sedation, however reduced the gastroinestnal side effects



Compound	Ar ¹	Ar ²	R
Diphenhydramine (Benedryl) 2-(Diphenylmethoxy)-N,N-dimethylethanamine	\bigcirc	\bigcirc	Н
Medrylamine 2-[(4-Methoxyphenyl)phenylmethoxy]-N,N- dimethylethanamine HCl	\bigcirc	HJCO -	Н
Carbinox amine (Clistine) 2-[(4-chlorophenyl)-pyridin-2-yl-methoxy]-N,N- dimethyl-ethanamine	$\bigcirc \mathbb{N}$	ci	Н
Chlorphenoxamine 2-[1-(4-chlorophenyl)-1- phenylethoxy]ethyl}dimethylamine	\bigcirc	ci —	CH3
Doxylamine N.N-dimethyl-2- (1-phenyl-1-pyridin-2-yl- ethoxy)- ethanamine		\frown	CH3



- Oldest and most effective antihistamine on the market
- Available over the counter
- Because it induces sedation, it's used in nonprescription sleep aids such as Tylenol.

Clemastine (Tavist)



2-(2-(1-(4-chlorophenyl)-1-phenyle thoxy) ethyl)-1-methyl pyrrolidine

- Exhibits fewer side effects than most antihistamines
- Widely used as an antiprurtic (stops itching)



Synthesis





Alkylamines



- Isomerism is an important factor in this class of drugs, which is due to the positioning and fit of the molecules in the HI-receptor binding site
- These drugs have fewer sedative and GI adverse effects, but a greater incidence of CNS stimulation
- These drugs lack the "spacer molecule" (which is usually a nitrogen or oxygen) between the two aromatic rings
- At least one of the rings has nitrogen included in the aromatic system



Compound	Ar ₁	Ar ₂
Pheniramine (Avil) N,N-dimethyl-3-phenyl-3-pyridin-2- yl-propan-1-amine		
Brompheniramine (±) 3-(4-bromophenyl)-N,N-dimethyl-3- pyridin-2-yl-propan-1-amine		Br
Cholorpheniramine (±) 3-(4-chlorophenyl)- <i>N</i> , <i>N</i> -dimethyl- 3-pyridin-2-yl-propan-1-amine		ci



Synthesis





Compound	Arı	Ar ₂
Pyrrobutamine 1-[(2E)-4-(4-chlorophenyl)-3-phenylbut- 2-en-1-yl]pyrrolidine		а-{сн,-
Triprolidine (2-[(E)-1-(4-methylphenyl)-3-pyrrolidin- 1-yl-prop-1-enyl]pyridine		ңс-



Piperazines

- Structurally related to the ethylenediamines and the ethanolamines and thus produce significant anti-cholinergic effects
- Used most often to treat motion sickness, vertigo, nausea and vomiting



Compound	Ar ₁	Ar ₂	R
Cyclizine 1-difenilmetil-4-metilpiperazin	\bigcirc	\bigcirc	-CH ₃
Meclizine 1-[(4-chlorophenyl)(phenyl)methyl]-4- (3-methylbenzyl)piperazine	\bigcirc		сн
Buclizine 1-[(4-chlorophenyl)- phenyl-methyl]- 4- [(4-tert-butylphenyl) methyl] piperazine	\bigcirc	°	H ₃ C - CH ₂ - CH ₂ - CH ₂
Cinnarizine 1-benzhydryl-4-cinnamyl-piperazine	\bigcirc	\bigcirc	С—он—он—сн _г —
Hydroxyzine 2-(2-{4-[(4-chlorophenyl)- phenylmethyl]piperazin-1- yl}ethoxy)ethanol	\bigcirc		но—сңоң2—о—сң2сң2—



Synthesis



Meclizine;

•It is most commonly used to inhibit nausea and vomiting as well as vertigo, however it does cause drowsiness

•Cyclizine;

•Nausea, vomiting and dizziness associated with motion sickness, vertigo and post-operatively following administration of general anaesthesia and opioids

Hydrozine;

•In addition to treating itches and irritations, its an antiemetic, a weak analgesic and an anxiolytic (treat anxiety)



Tricyclics

• These drugs are structurally related to tricyclic antidepressants, which explains why they have cholinergic side effects

Promethazine (Phenegran)



•This drug has extremely strong anticholinergic and sedative effects

•lt was originally used as an antipsychotic, however now it is most commonly used as a sedative or antinausea drug (also severe morning sickness) and requires a prescription

10-(2-N,N-dimetilamino)propilfenotiyazin



Tricyclics

Cyproheptadine



5-(1-metil-4-piperidiniliden)-5Hdibenzo[a,d]siklohepten

•This drug both an antihistamine and an antiserotonergic agent

•It is a 5-HT2 receptor antagonist and also blocks calcium channels

•Used to treat hay fever and also to stimulate appetite in people with anorexia





4,9-Dihidro-4-(1-metil-4-piperidiniliden)-10Hbenzo[4,5]siklohepta[1,2-b]tiyofen-10-on

•This drug is available in two forms: an ophthalmic form used to treat allergic conjunctivitis or itchy red eyes and an oral form used to prevent asthma attacks

•It has several adverse side effects including drowsiness, weight gain, dry mouth, irritability and increased nosebleeds



Tricyclics

Alimemazine (Vallergan)



•This drug is used to treat itchiness and hives that results from allergies

•Since it causes drowsiness, it is useful for rashes that itch worse at night time

•lt is also used to sedate young children before operations

<u>Azatadine</u> <u>(Optimine or Trinalin)</u>



•This drug is used to treat symptoms of allergies and the common cold such as sneezing, runny nose, itchy watery eyes, itching, hives and rashes

Second generation H₁-receptor antagonists

- These are the newer drugs and they are much more selective for the peripheral HI-receptors involved in allergies as opposed to the HI-receptors in the CNS
- Therefore, these drugs provide the same relief with many fewer adverse side effects
- The structure of these drugs varies and there are no common structural features associated with them
- They are however bulkier and less lipophilic than the first generation drugs, therefore they do not cross the BBB as readily
- Recent studies have also showed that these drugs also have antiinflammatory activity and therefore, would be helpful in the management of inflammation in allergic airways disease.



Acrivastine (Semprex-D)



• This drug relieves itchy rashes and hives (EE)-3-to-{&-(p-toin)-3-(t-pirolidinii)-1-propenil}-2-piridinii]-2-propenoik asit • It is non-sedating because it does not cross the BBB

The activity of E-isomer is great higher than that of Z-isomer.

Astemizole (Hismantol)



- •This drug has a long duration of action
- •lt suppresses the formation of edema and puritus
- •lt doesn't cross the BBB
- •It has been taken off the market in most countries because of adverse interactions with erythromycin and grapefruit juice



Synthesis of Acrivastine







4-(8-kloro-5,6-dihidro-11Hbenzo[5,6]silohepta[1,2-b]piridin-11-iliden)-1piperidinkarboksilik asit etil ester

Strong selective HI receptor antagonist, but no anticholinergic activity and central nerve system inhibition,

•It has long lasting effects and does not cause drowsiness because it does not cross the BBB



1-(4-Tert-butilfenil)-4-[4-(hidroksidifenilmetil)-1piperidil]butan-1-ol

•lt was formerly used to treat allergic conditions

•In the 1990's it was removed from the market due to the increased risk of cardiac arrythmias

Cetirizine

• This drug treats indoor and outdoor allergies and is safe to use in children as young as 2



2-(2-(4-((4-chlorophenyl)(phenyl)methyl)piperazin-1-yl)ethoxy)acetic acid



<u>Azelastine</u> (Astelin or Optivar)



•lt is a mast cell stablilizer

•Available as a nasal spray (Astelin) or eye drops for pink eye (Optivar) <u>Levocabastine</u> (<u>Livostin)</u>







•Both of these drugs are used as eye drops to treat allergic conjunctivitis

Third generation H₁-receptor antagonists

- These drugs are derived from second generation antihistamines
- They are either the active enantiomer or metabolite of the second generation drug designed to have increased efficacy and fewer side effects



Levocetirizine (Zyzal)

•This drug is the active enantiomer of cetirizine and is believed to be more effective and have fewer adverse side effects.

•It does not cross the BBB and does not cause significant drowsiness

•It has been shown to reduce asthma attacks by 70% in children



Deslortadine (Clarinex)



Fexofenadine (Allegra)



•lt is the active metabolite of Lortadine

•Even though it is thought to be more effective, there is no concrete evidence to prove this •It was developed as an alternative to Terfenadine

•Fexofenadine was proven to be more effective and safe

Side Effects

- First Generation Drugs:
 - Anticholinergic CNS interactions
 - Gastrointestinal reactions
 - Common side effects: sedation, dizziness, tinnitus, blurred vision, euphoria, lack of coordination, anxiety, insomnia, tremor, nausea and vomiting, constipation, diarrhea, dry mouth, and dry cough
- Second Generation Drugs:
 - Common side effects: drowsiness, fatigue, headache, nausea and dry mouth
- Side effects are far less common in Second Generation drugs