Drug dosage forms and routes of administration
 Information about drugs
 Drug legislation in CZ



What is a dosage form?



It is a final form, in which the drug is given to the patient.

Dosage Form

- Mixture of substances with therapeutical effect and excipients
 - Excipients: antioxidants, fillers, p ointment bases, solvents etc.
 - No pharmacological effect
 - Allergies (parabens), intolerance
- Shape and characteristics of a
- Adjusted to the route of adminis
- Influence pharmacokinetics of a

Generations of dosage forms:

1st = classic dosage forms2nd = controlled release3rd = controlled biodistribution



Excipients of AERIUS tablets:

Core: calcium hydrogen phosphate dihydrate, microcrystalline cellulose, maize starch, talc. Coating: lactose monohydrate, hypromellose, titanium dioxide,

macrogol 400, indigotin, carnauba wax, white wax.

Classification of Dosage Forms



According to the consistency:

- solid
- semi-solid
- liquid
- gaseous

According to the usage:

- for internal use (Ad usum internum, e.g. Peroralia, Parenteralia)
- for other use (Ad usum alium, e.g. Ocularia, Nasalia, Unguenta).

Liquid Dosage Forms

a) For internal use:

- 1. (Per)oral liquids
- solutions, suspension, emulsion for per os administration
- tinctures, drops, syrups
 - 2. Parenteral liquids
- injections
- infusions



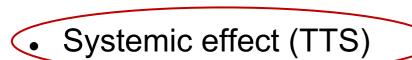


b) For external use:

- eye drops, ocular waters, ear drops, nasal drops
- liquids for cutaneous use, for compresses
- liquids applied to the mucosa (douche irrigation, gargle)

Semi-solid Dosage Forms

- Applied on the skin or mucosa
 - Local effect (dermatology)







- Ointment (unguent)
- Creme
- Gel (jelly)
- Paste
- Transdermal patch (TTS, *Emplastra*)





Solid Dosage Forms

Specific in shape:

- Tablet
- Suppository
- Vaginal pessary (suppository)
- Capsule
- Lozenge (pastilles)







Non-specific in shape:

- Dusting powder
- Herbal mixture
- Peroral powder:
 - Classic
 - Grained
 - Effervescent



Tablets and Capsules

Tablets:

- Uncoated
- Coated
- Gastro-resistant
- Effervescent
- Tablets disperged in the mouth
- Chewable
- Sublingual
- etc.



Capsules: Hard Soft Gastro-res



Gastro-resistant With modified release etc.



Gaseous Dosage Forms = Aerodispersions

Topical

• ear, nasal, oral, sublingual and cutaneous spray

Preparations for inhalation

- liquids (scattering of liquid drops)
- powders (particle size determines the place of absorption)

Foams

cutaneous, rectal, vaginal foams





Making of an aerodispersion:

- Mechanically by a nebulizer (spray)
- By liquefied/compressed gas (pressure container)

https://www.youtube.com/watch?v=9VXdBprFlwc

https://www.youtube.com/watch?v=3FqBBQJsl2o

How could a drug be administered?



Routes of administration

Systemic administration = drug is absorbed into the circulation \rightarrow it influences all the body

Local (topical) administration = drug is NOT absorbed into the circulation \rightarrow it affects only the place of application

- enteral
- parenteral

- skin, mucosa, e.g. conjunctiva
- GIT, but the drug in not absorbed from GIT

Systemic administration – enteral

(**Per)oral** (*per os*, p.o.) *Enteron* (ancient greek) = intestine

- Onset of effect depends on phys-chem. properties of the medical substance and excipients
- Possibility of lower bioavailability: first-pass effect (liver)

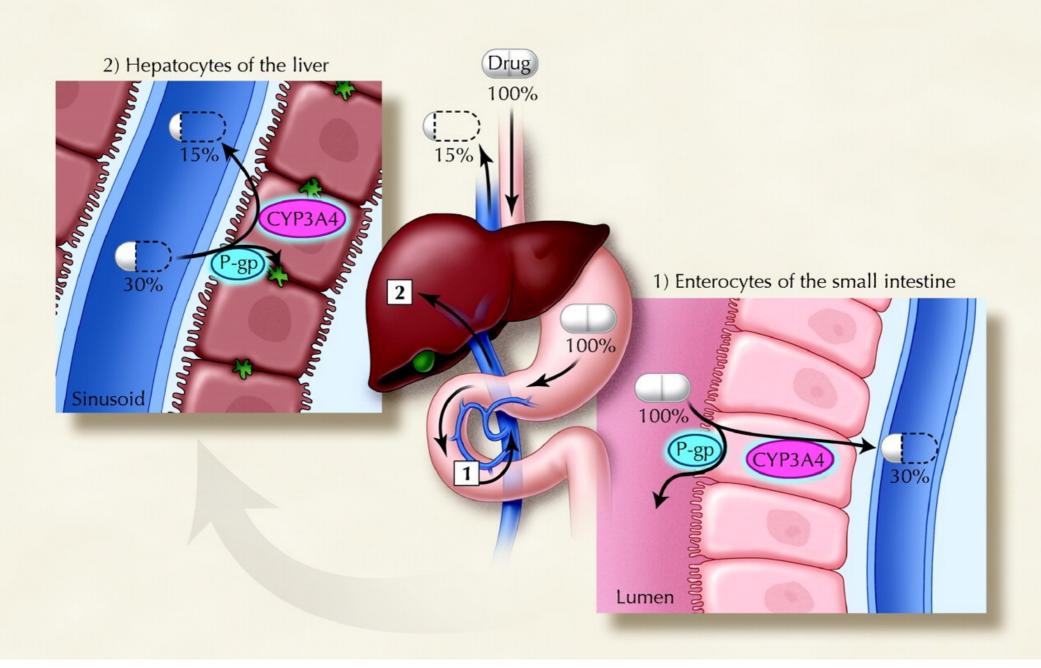




Rectal (per rectum)

- Do not irritate stomach, do not cause nausea
- Lower bioavailability lesser surface of rectum walls
- Sooner onset of effect plexus venosus rectalis flows into vena cava inferior ("bypass of the liver")

"First pass" effect



Systemic administration – parenteral

Para enteron (ancient greek) = out of the intestine

1. Non-injection (non-invasive)

a) oral

- Absorption by oral mucosa (e.g. subligual)
- Lipophilic substances quick absorption (2 mins), e.g. nitroglycerin

b) inhalation

- Gases, vapours nebo small particles
- Respiratory diseases (asthma, COPD...)

c) transdermal

- TTS = transdermal therapeutic system (controlled release)
- E.g. hormonal contraception patch, nicotine patch, analgesic patch d) transnasal
- Good perfusion of nasal mucosa
- Substances could irritate it, or impair cilia function
- E.g. calcitonin, antimigraine drugs

e) vaginal – e.g. hormonal contraception ring







Systemic administration – parenteral

2. Injection (invasive)

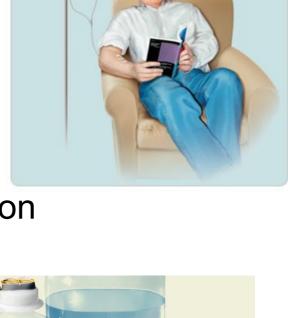
- non-physiological

a) injection

- small volume of liquid
- i.v. administration quick onset of effect
- i.m., s.c. gradual absorption into circulation

b) infusion

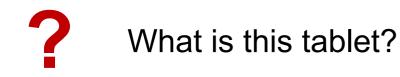
- larger volume of liquid
- parenteral nutrition, minerals, glucose, ATBs, cytostatics etc.







Could this drug influence the effect of other drugs?



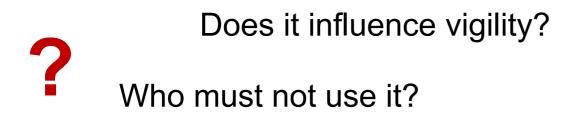
How frequently should I use it?

What is this drug used for?



What are possible adverse effects?

What is an appropriate dose?



Information about Drugs

PIL & SPC

- PIL = patient information leaflet = package leaflet for patients
- SPC = summary of product characteristics = information for medical specialists (physicians, pharmacists, nurses etc.)
- EMA European Medicine Agency (ema.europa.eu)
- Database of RMPs granted central authorisation by EC/EMA
- Reports concerning drugs' safety alerts
- List of newly authorized drugs

SUKL – State Institute for Drug Control (sukl.eu)

- Database of RMP authorized in CZ
- Free access to all PILs and SPCs (in czech)

European Pharmacopoeia = european standard for the quality of drugs (**Czech Pharmacopoeia** = text from EP + czech specialities) **Computer databases of medical preparations**

• **AISLP** (czech↔english, in most pharmacies and doctor's offices)

Pharmacopoeia

- Purpose: to guarantee safe, effective and quality drugs
- Information about medical substances, excipients, dosage forms
- Instructions for production, preparation, control, storage of drugs
- Used mostly in pharma industry

What could we found there?

- Analytical and instrumental examination methods
- Materials for drug containers and cases
- Instructions to ensure **sterility** of medical preparations
- Instructions concerning radiopharmaceuticals, vaccines etc.
- Monographs of specific substances
- Tables with usual **dosage of drugs** in adults, children, animals
- etc.

NO: mechanism of actions, adverse effects, pharmacokinetics, contraindications, pregnancy safety etc.!

Basic Drug Legislation in CZ

Act No. 378/2007 Coll., on pharmaceuticals

- Research
- Authorization of new drugs ("registration")
- Production, preparation and distribution
- Prescribing and dispense of medical preparations
- Destroying of unusable drugs
- Pharmacy duties
- **Pharmacovigilance** = drug safety service
- Controls and sanctions



Medical Prescription (Rx) in CZ

Validity:

- classic Rx: 14 days
- Rx for ATBs: 5 days
- Rx for local ATBs: 14 days
- Drugs of abuse and psychotropic substances (special Rx form): 14 days
- Rx for repeated use: 6 months, max. 1 year
- Rx from ED: day after the day of making up (= max. 48 h)

Příjr	není a jméno)	Zbořil Roman		
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			Budovatelská 4804 , 760 05 2		
		TT	0146034		
Popl.	Diagnóza *)	Sk.	Kód	Započ. dopl.	Úhrada
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	POR TBL F EXP. ORIG. D.S. 0 – 0 – Diagnóza *) MAGNOSOL POR GRA S EXP. ORIG.	LM 60x2(No.II / D 1 Sk. V OL 30 No.I / DL	00 MG DUAS / 00665555 Kód	Započ. dopl.	Úhrada h Ru

Legislation – Drugs of Abuse

Act No. 167/1998 Coll. on Dependency Producing Substances & Order of the Government 463/2013 Coll. regarding the lists of dependency producing substances

Specified narcotic and psychotropic drugs should be strictly monitored:

- Keeping files of accepting and dispensing – "Opiates Book"
- SUKL require this information
- Special Rx form with oblique blue strip
- Medical preparations and Rx forms should be stored in a safe or vault!

Kód zdravotní pojišťovny	Recept na léčh obsahující oma a psychotropní	mné látky sk. l	00000 Série AA				
Jméno a příjmení							
klentifikační číslo pojištěnce		Dat	um narození				
Adresa							
Rp.			Úhrada pojišťovnou Kč				
		Kód	ΛT				
Datum							
Daitum		Raziko poskyvovatele Jmenovka" a podpis předeplaujicho tékaře	Celkern Kö				
		 jestiže poskytovalek je právnická osoba 					
Pfijel:	Připravil:	Vydal:	Poř. č.				

Classification of narcotics

Group 1 \rightarrow Rx with blue strip

- Highly addictive
- E.g. strong opioid analgesics
 - morphine
 - oxycodone
 - fentanyl etc.

Group 2

- Lower risk of addiction
- Classic Rx form
- E.g. codeine

Group 3 = "forbidden substances"

- No therapeutic use
- Misused
- Sometimes used in the research
- E.g. hashish, heroin etc..





Classification of psychotropic drugs

Group 1 = "forbidden substances"

- Hallucinogens, psychostimulants
- E.g. MDMA (exstasy)
- Group 2 \rightarrow Rx with blue strip
- Misused psychostimulants, addictive
 - E.g. methamphetamine and other amphetamins
- Therapeutically used: e.g. methylphenidate, buprenorphine **Group 3**
- Barbiturates, risk of addiction, limited therapeutic use
- E.g. pentobarbital

Group 4

- Benzodiazepines, barbiturates and other potentially addictive drugs
- Classic Rx. form
- Hypnotics, sedatives, antiepileptics etc.
- E.g. diazepam, oxazepam, phenobarbital...





Precursors

= substances used in the production of addictive and psychotropic substances

- classic Rx (except pseudoephedrine)
- ephedrine nasal drops in sinusitis
- pseudoephedrine medical preparation for cold treatment \rightarrow OTC with restriction
- ergotamine antimigraine suppositories
- ergometrine obstetrics

