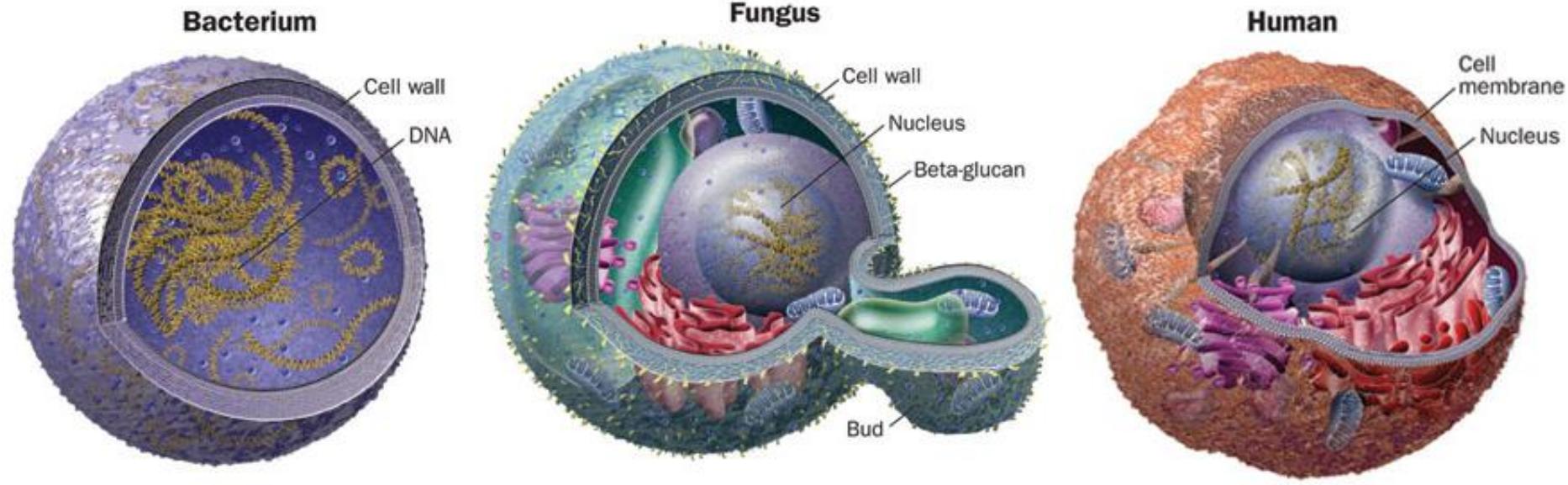


MUNI
MED

ANTIMYCOTICS



MYCOSES

immunodeficiency, HIV, ...

DM

radiotherapy, chemotherapy, neutropenic patients

Classification:

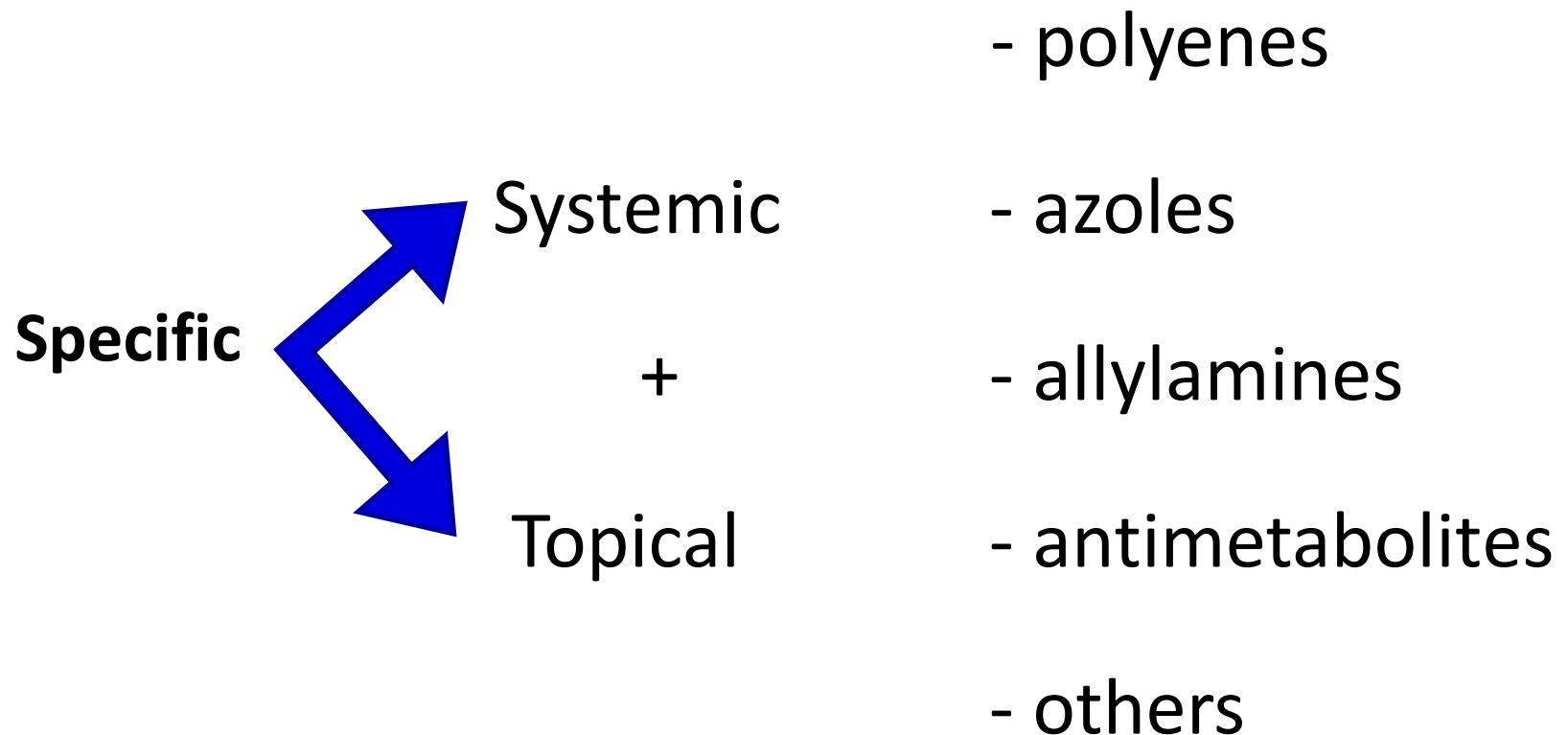
pathogen: candidosis
aspergillosis
cryptococcosis
zygomycosis

localization: systemic
organ
mucosal
skin

Monitoring of disease progression - determination of serum

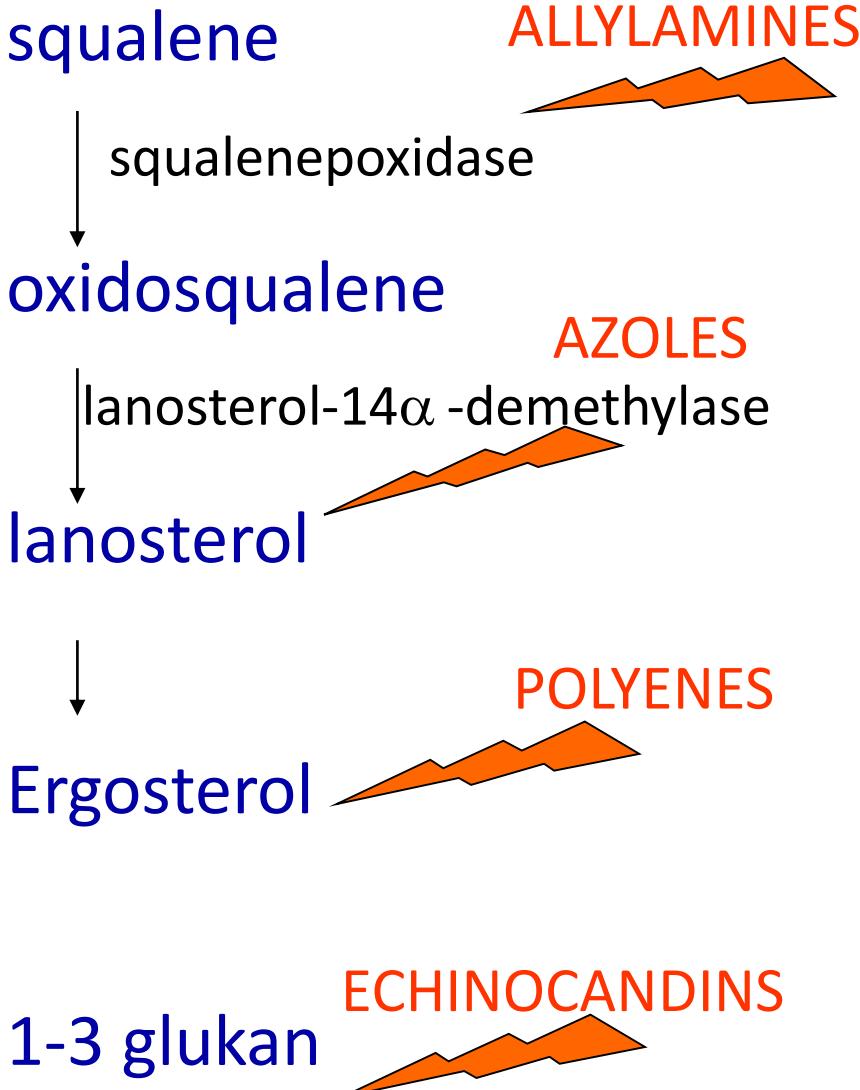
- Panfungal (1 → 3) - β-D-Glucan
- Galactomannan (aspergillus inf.)

ANTIMYCOTICS



ANTIMYCOTICS

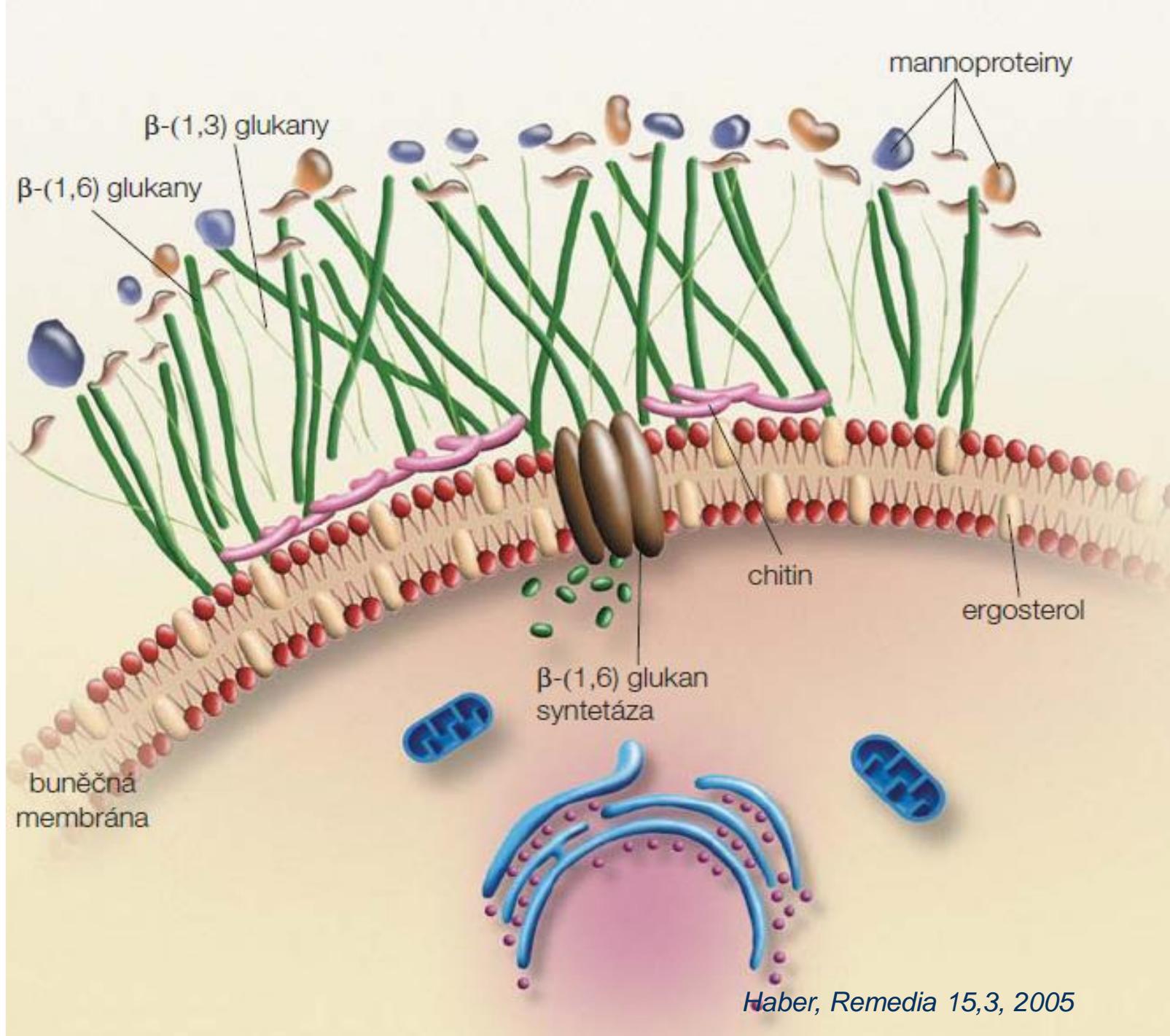
Synthesis of cell wall components



IMPAIRMENT OF MYCOTIC CELL METABOLISM

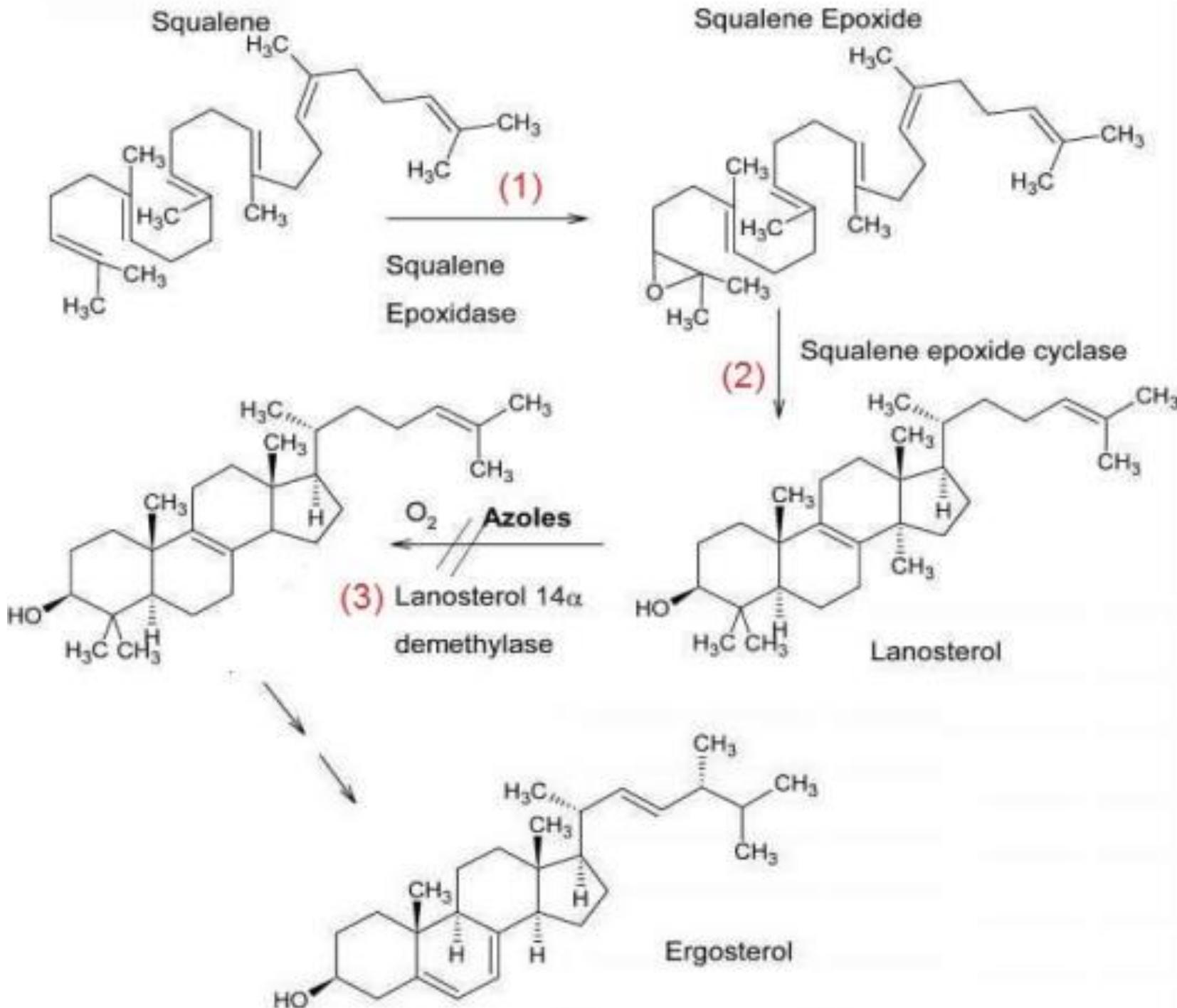
HYDROXYPYRIDONE
DERRIVATIVE
ENZYME ACTIVITY
REDOX STABILITY
GENETIC INFORMATION

Ciclopirox



Overview of antimycotics

Polyenes	systemic	<i>amphotericin B</i>
	topical	<i>nystatin</i> <i>natamycin</i>
Antimetabolites		<i>flucytosin</i>
Azoles	systemic	<i>ketoconazole, miconazole, fluconazole, itraconazole</i>
	topical	<i>econazole, clotrimazole, terconazole</i>
Allylamines	systemic	<i>terbinafin, naftifin</i>
others	systemic	<i>griseofulvin, caspofungin</i>
	topical	<i>ciclopiroxolamin, tolnaftate</i>



POLYENE ANTIMICOTICS

Amphotericin B

- Broadest spectrum, lowest resistance
- Quite highly toxic, most of patients perceive some grade of toxicity/AE
- Drug of choice in aspergilloses

MA: binding to ergosterol in cell wall

Pharmacokinetics: poor GIT bioavailability, administered i.v.- lipidic complex (ABLC)

Toxicity

Acute manifestations: fever, chills, rigor, nausea, vomiting, headache, muscle pain, joint pain, allergies, thrombophlebitis

Chronic manifestations: nephrotoxicity (total dose reversibility) followed by electrolyte imbalance, normocytic normochromic anemia (therapy: erythropoietin)

TOPICAL POLYENE

Nystatin (*Streptomyces noursei*)

- against yeasts
- p.o. candidosis in GIT

Natamycin (*Streptomyces natalensis*)

- against candidoses and *Trichomonas* infections

ANTIMETABOLITES

Flucytosine (5-fluorocytosine)

MA: inhibition of nucleic acid synthesis

- narrow spectrum – candida, cryptococcus
- amphotericine combined treatment = spectrum widening

AE: granulocytopenia, GIT intolerance

AZOLES

MA: inhibition of C-14- α -demethylase (CYP450)

IT: CYP and Pgp inhibition !!!

Classification:

topical / systemic

imidazoles / triazoles

AZOLES

Systemic

Imidazoles:

Miconazole - block of tromboxansynthetase

Ketoconazole - steroidogenesis inhibition

Triazols:

Itraconazole – immunomodulative

Fluconazole

Voriconazole

AZOLES

topical

Econazol

- also efficient against some bacteria

Clotrimazol

- depo in *stratum corneum*
- hepatic metabolism after absorption

Fenticonazol

Tioconazol

	CYP1A2	CYP2C9	CYP2C8	CYP2C19	CYP2D6	CYP3A4	PgP
Fluconazole	0/?	↓	0/?	↓	0/?	S/↓	0
Itraconazole	0/↑CYP1A1	↓	0	0	0	S/↓	↓
Voriconazole	0	S/↓	0	S/↓	0	S/↓	?
Posaconazole	0	0	0	0	0	↓	S
Ketoconazole	0/?	↓	0/?	↓	0/?	S/↓	S/↓

ECHINOCANDINS

= lipopeptides

Caspofungin

MA: inhibition of β -1,3-D-glucan synthesis
(cell wall component of many fungi and yeasts)

- parenteral administration
- synergism when combined with azoles or polyenes
- not metabolized via CYP

I: alternative therapies for severe mycoses (aspergillosis)

Allylamines

Systemic – Terbinafine

MofA: block of squalenepoxidase

- administered orally
- cummulation in the adipose tissue and skin
- synergistic effect with ketoconazole

AE: dyspepsia, loss of apetite

Griseofulvin

Narrow spectrum, fungistatic

MA: interaction with microtubules – mitotic poison

- administered orally
- cummulation in stratum corneum, hair, nails
- local effect on skin
- I: dermatomycoses

AE: GIT irritation, alergy, leucopenia, hepatotoxicity, nerologic disorders

Ciclopirox-olamine

topical fungicidal antimycotic agent

+ G+/G- bacteria, mycoplasms, trichomonades

MA: chelates Fe³⁺ (→ metaloproteins function abrupton)

- cytochrom – blocks energy metabolism of the mycotic cell
- catalase, peroxidase – block antioxidative protection

Cytoplasmatic membrane – block of transporters

- deplete essent. AA (Leu), nukleotides, ..

antioxidant - scavenger ROS (OH•)

inhibitor AA → inh. Synthesis a LT in human PMN cells

antiinflammatory aktivity in vivo - 2,5 % hydrokortison