

# ANTIFUNGAL DRUGS

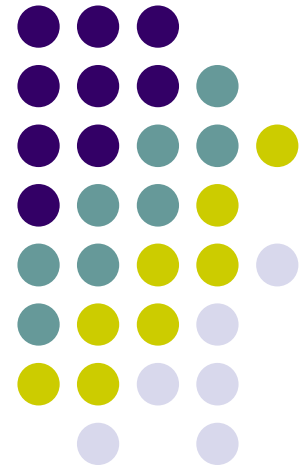
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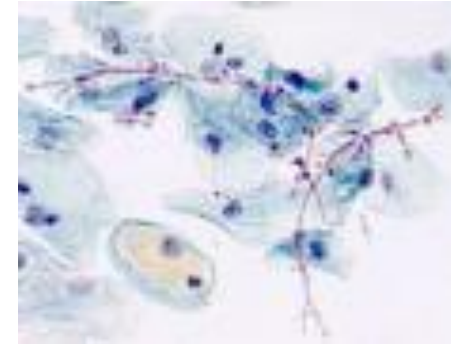
Faculty of Medicine

Department of Pharmacology

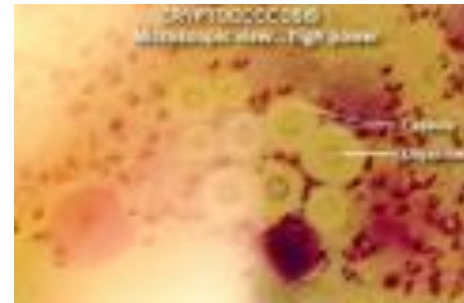
Košice



# Fungal infections



***Candida albicans***



***Cryptococcosis***

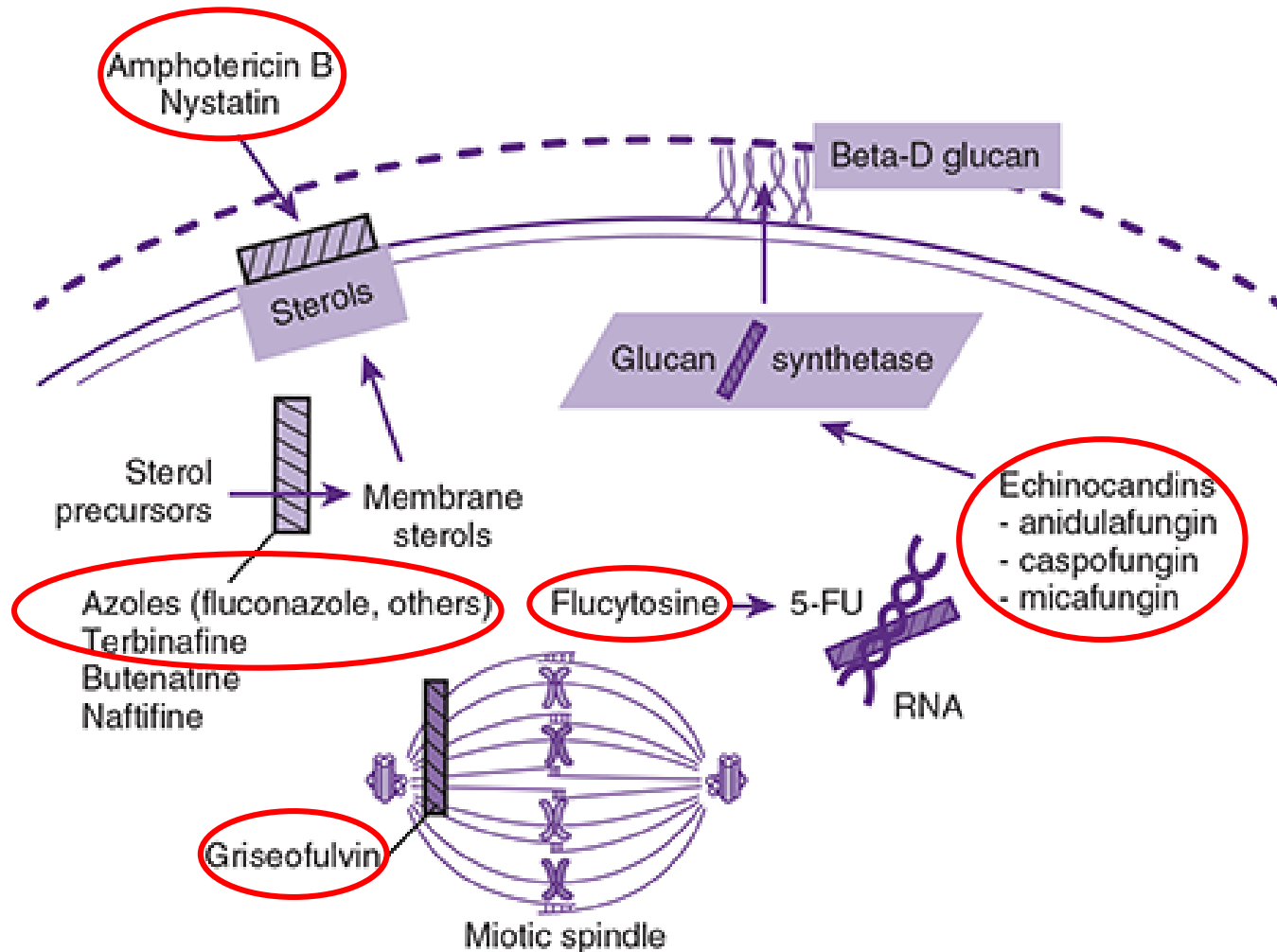
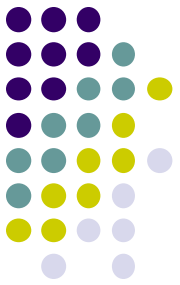
# ANTIFUNGAL DRUGS



Group	Substance
POLYENES	<i>Amphotericin B</i> <i>Nystatin</i>
AZOLES	<i>Clotrimazole</i> <i>Miconazole</i> <i>Ketoconazole</i> <i>Fluconazole</i> <i>Itraconazole</i>
ECHINOCANDINS	<i>Anidulafungin</i> <i>Caspofungin</i> <i>Micafungin</i>
ALLYLAMINES	<i>Terbinafine</i>
OTHER	<i>Flucytosine</i> <i>Griseofulvin</i>

# ANTIFUNGALS

## General MOA



Source: Charles D. Ciccone: *Pharmacology in Rehabilitation*, 5<sup>th</sup> Edition:

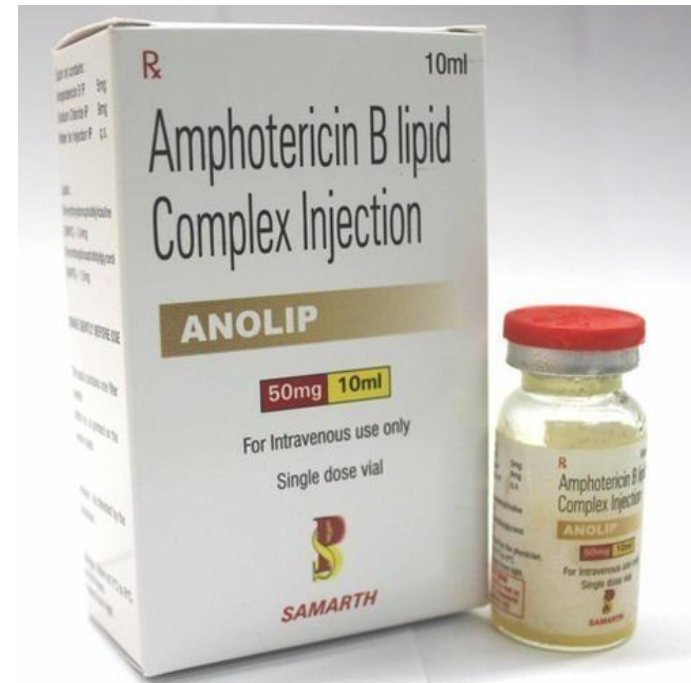
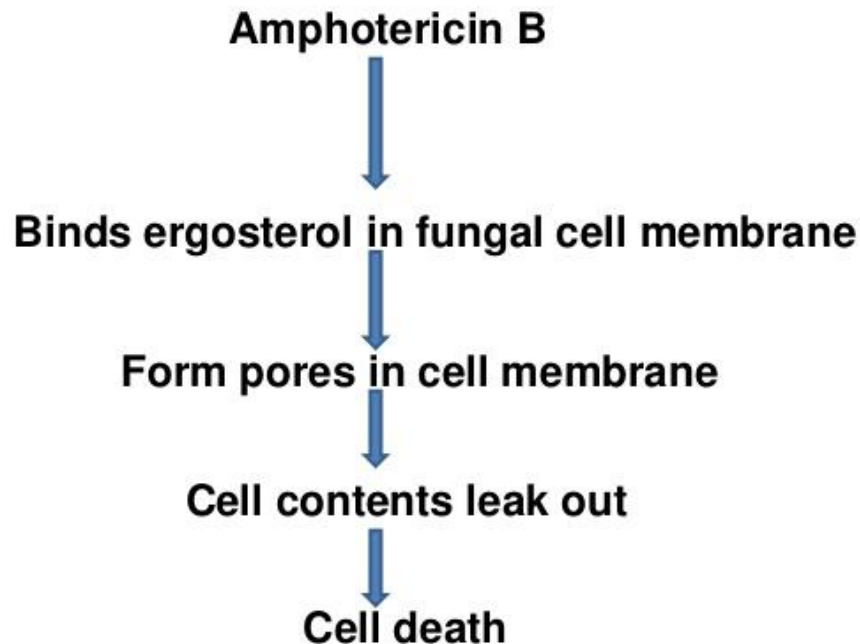
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# POLYENES



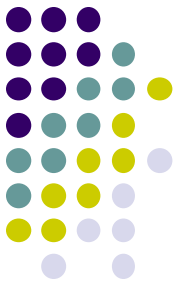
## Mechanism of action



- **ergosterol** (basic component of fungal membrane)
- permeates into ergosterol-rich membranes & produces a **detergent-like effect** (micropores)

# POLYENES

## PK



***Amphotericin B*** – p.o., i.v., intrathecal

- **poor GI absorption**
- **bad CNS penetration** (intrathecal route)
- **oral absorption ↑ with milk, fat ingestion**
- **concentration in skin, hair, nails**

***Nystatin*** – oral, vaginal, topical

# POLYENES

## Indications



### **AMPHOTERICIN**

- **generalised fungal infections**

*(Candida; Aspergillus; Histoplasma; Cryptococcus; Rhizopus; Sporothrix)*

### **NYSTATIN**

- **oral in GI mycosis**
- **local:**
  - + **skin, mucosa**
  - + **vaginal mycosis**



# POLYENES

## SE



### ***AMPHOTERICIN B***

- **nephrotoxicity** (major dose-limiting adverse effect)
- ↓↓ glomerular filtration; renal tubular acidosis
- hypokalemia, hypomagnesemia
- **i.v. infusion: fever, chills, rigors, hypotension** („shake & bake“ reaction)
- **anaemia** (via ↓ erythropoietin)

### ***NYSTATIN***

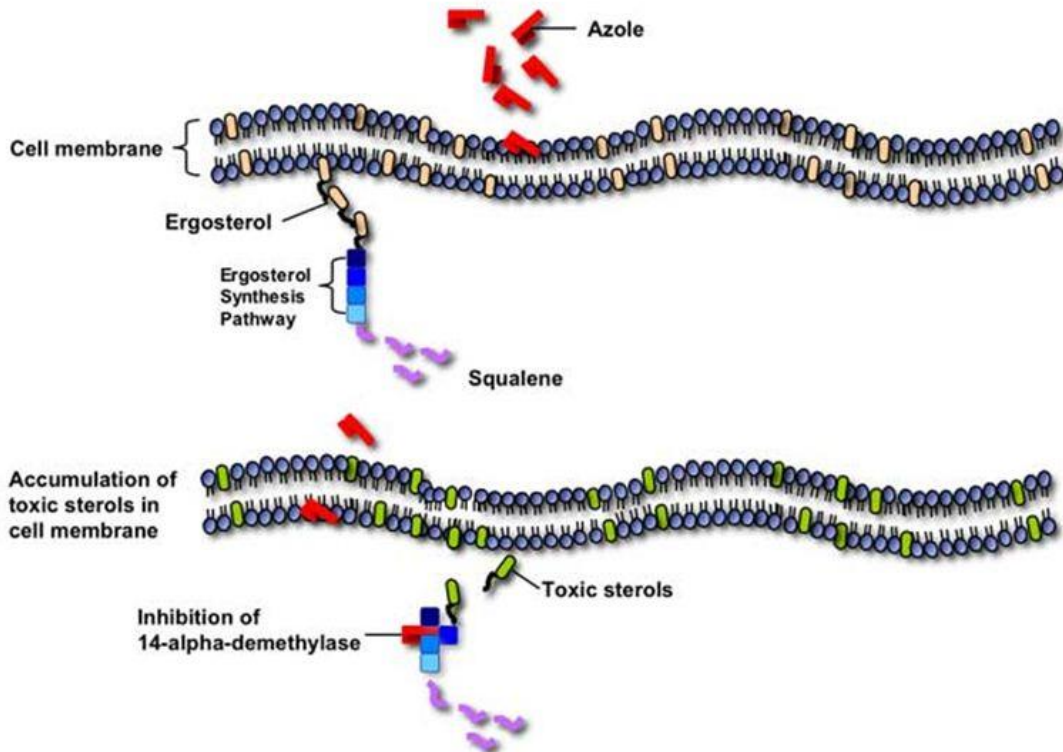
- **oral & local: no side effects**



# AZOLES



## MECHANISM OF ACTION FOR AZOLES



Prevent ergosterol synthesis from lanosterol by:

- ↓↓ fungal CYP450-dependent 14- $\alpha$ -demethylation



# AZOLES

## PK



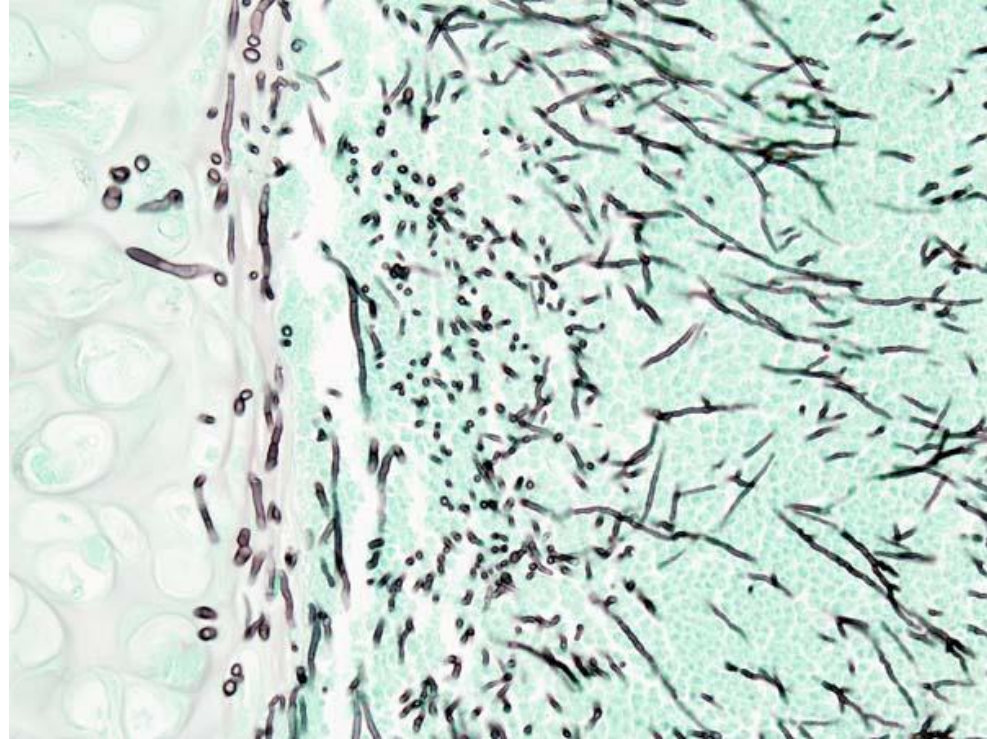
- **Oral absorption** ↓↓ by **alkalinization** of gastric pH

*(ketoconazole + antacids)*

- **Oral absorption** ↑↑ with **acidic** beverages

(containing phosphoric or citric acids - Coca-Cola; Pepsi-Cola)

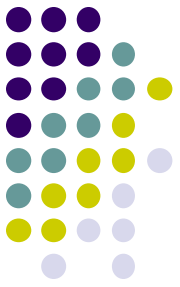
- **Good tissue diffusion**



Pulmonary invasive aspergillosis

# AZOLES

## Indications



### Drugs of choice in:

#### ***FLUCONAZOLE***

- mucocutaneous candidiasis
- coccidioidomycosis
- cryptococcal meningitis (prevention & treatment)

#### ***ITRACONAZOLE***

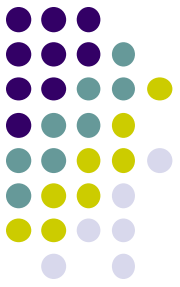
- sporotrichoses
- blastomycoses

#### ***KETOCONAZOLE***

- paracoccidioides
- dermatophytosis of the scalp (tinea capitis – shampoo)

# OTHER AZOLES

## Indications



**Mainly for local** (topical) **use:**

### ***MICONAZOLE***

- **mucocutaneous candidiasis** as oral gel, ointment
- **vaginal mycoses** - cream, tbl.

### ***CLOTRIMAZOLE***

- to treat & prevent ***Candida*** (yeast) infections of the mouth & throat or other skin or mucosal areas
- in a form of **troches, vaginal tbl.** (suppositories), **ointment, cream, gel**

# AZOLES

## SE



### All azoles:

- **elevated liver function tests** (hepatotoxicity)
- rare GI problems; nausea
- skin intolerance
- headache

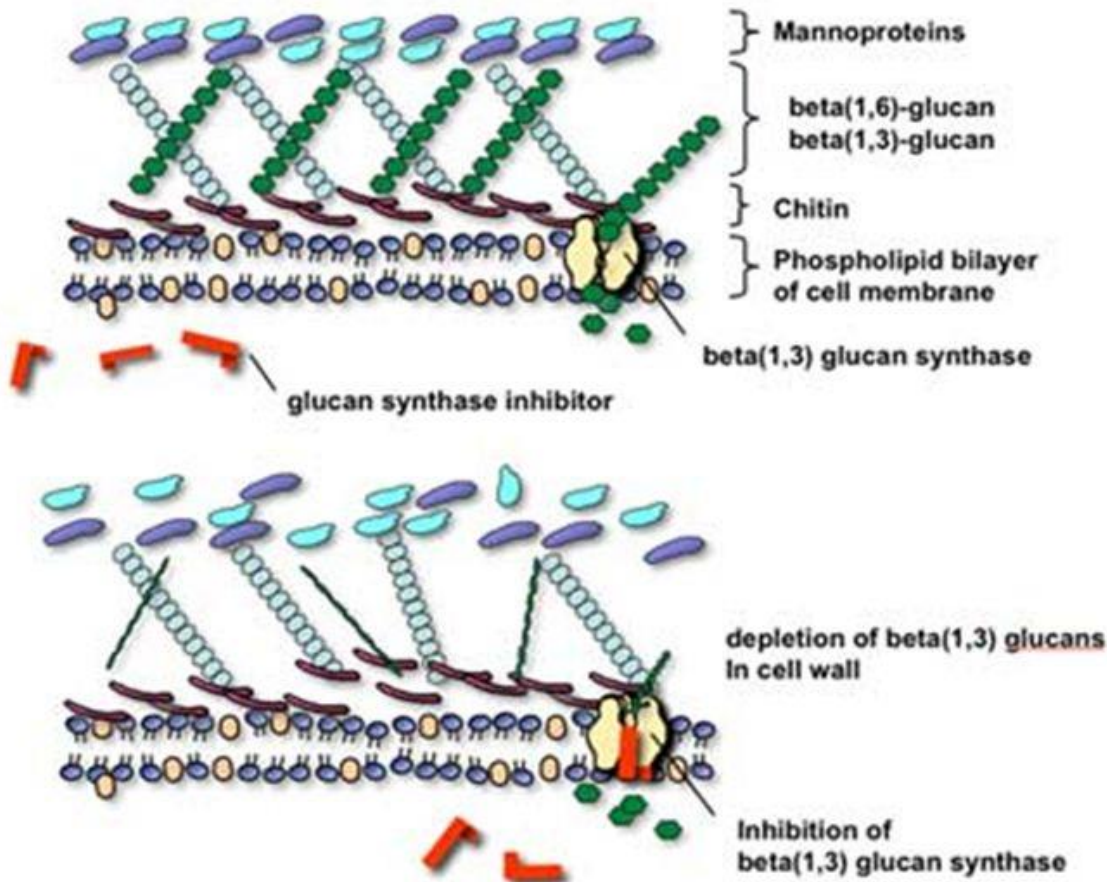
### ***KETOCONAZOLE***

- **gynecomastia** (via ↓ of androgen synthesis)
- ↓↓ glucocorticoid synthesis

# ECHINOCANDINS

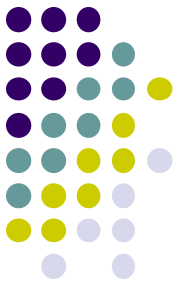


## MECHANISM OF ACTION FOR ECHINOCANDINS



# ECHINOCANDINS

## PK



### *Anidulafungin*

- **i.v. only** (infusion)
- strong protein binding (> 99%)
- slow chemical degradation (no inhibition or induction of CYP450)
- partial feces elimination (no urinary elimination)

### *Micafungin*

- **slow i.v. infusion**
- strong protein binding (> 99%)
- fast tissue distribution
- several metabolites (with no therapeutic effect)

### *Caspofungin*

- **slow i.v. infusion**
- strong protein binding
- tissue distribution (92% in 2 days)
- spontaneous degradation (no CYP450 inhibition)



# ECHINOCANDINS

## Indications



### *Anidulafungin* (only in adults)

- treatment of **invasive candidiasis**

### *Caspofungin* (both in adult & pediatric patients)

- treatment of **invasive candidiasis**
- treatment of **invasive aspergilosis** in patients refractory to *amphotericine B*
- **empirical** treatment of possible mycotic infections in febrile, neutropenic patients

### *Micafungin* (adults & $\geq 16$ y)

- treatment of **invasive candidiasis**
- treatment of **esophageal candidiasis**
- **prophylaxis of candidiasis** in patients with allogenic transplantation of hematopoietic stem cells

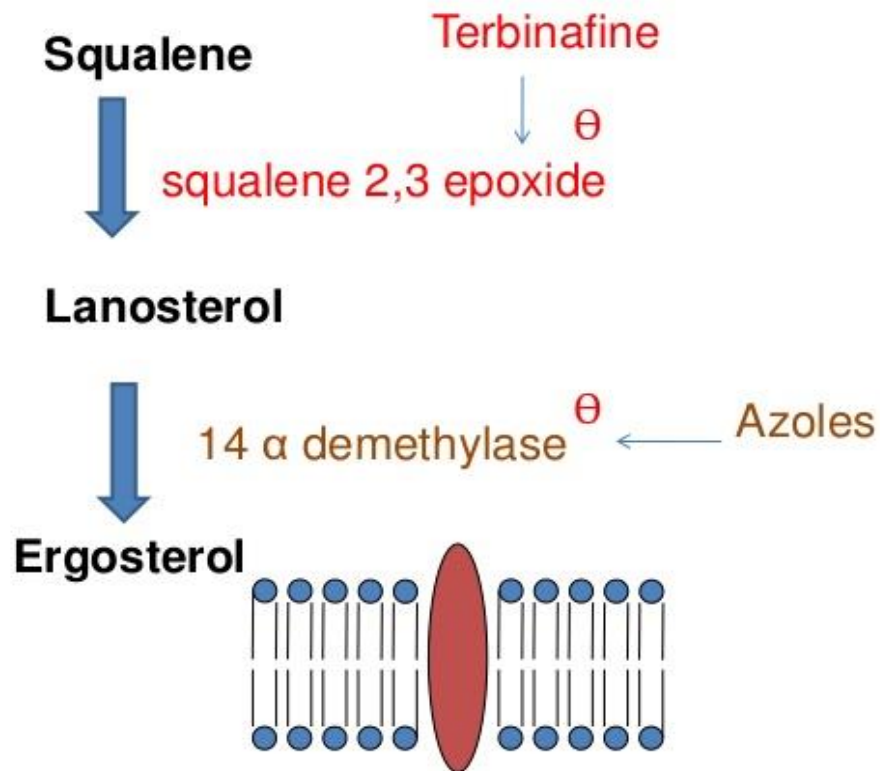


# ALLYLAMINES

## TERBINAFINE



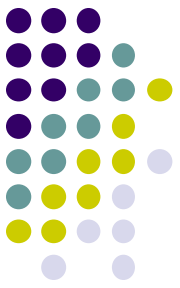
### Mechanism of action:



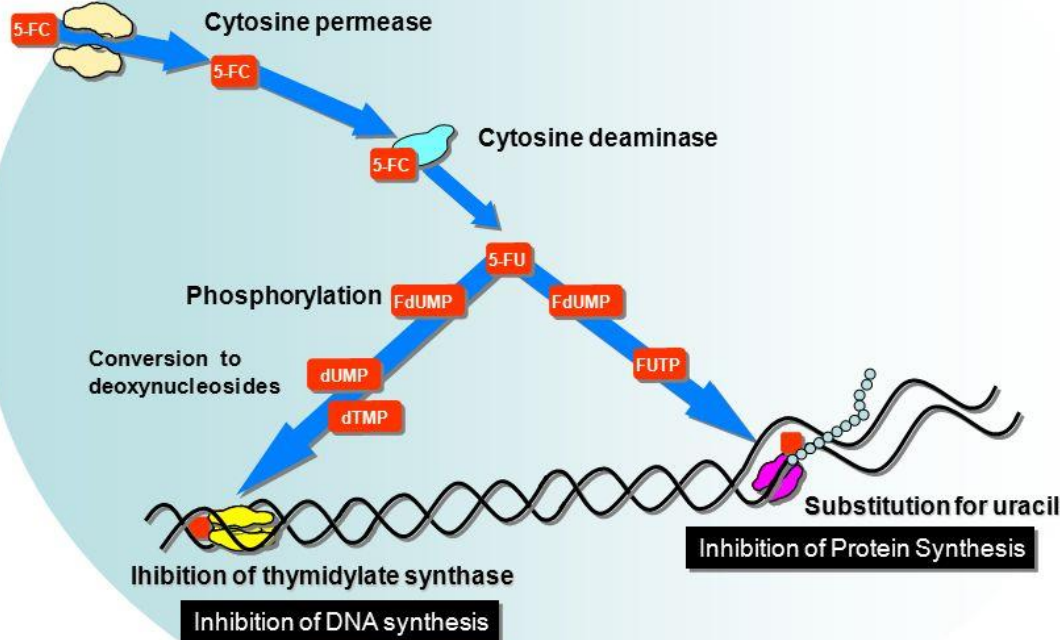
- **↓ ergosterol synthesis** by *squalene epoxidase* ↓
- **oral application** (or topical)
- **useful in dermatophytic infections; specific types** (onychomycosis of the toenail & fingernail)
- **hepatotoxicity** (major dose-limiting adverse reaction)

# OTHER ANTIFUNGAL DRUGS

## FLUCYTOSINE



### Flucytosine : Mechanism of action



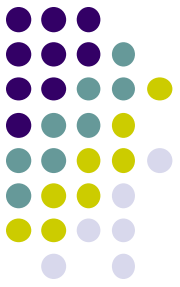
5-FC, 5-fluorocytosine; 5-FU, 5-fluorouracil; FdUMP, 5-fluorodeoxyuridine; FUMP, 5-fluorouridine monophosphate; FUDP, 5-fluorouridine diphosphate; FUTP, 5-fluorouridine triphosphate; dUMP, deoxyuridine monophosphate; dTMP, deoxythymidine monophosphate

- converted to **5-FU** (fungal cytosine deaminase - mammalian cells cannot convert it)
- ↓ **DNA & RNA synthesis**
- synergistic with **amphotericin B** (*Candida*; *Cryptococcus*)
- **useful as systemic antifungal drug**



# OTHER ANTIFUNGAL DRUGS

PK



## ***FLUCYTOSINE***

- good absorption
- good CNS penetration (75%)
- renal elimination in unchanged form



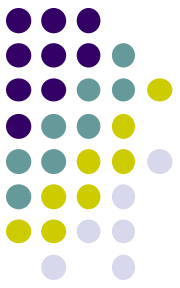
## ***GRISEOFULVIN***

- high-fat meals enhance GI absorption
- eliminated by urine (up to 50%) & feces



# OTHER ANTIFUNGAL DRUGS

## Indication & SE



### ***FLUCYTOSINE***

- **systemic candidiasis**
- **septicemias**

#### **Side effects:**

- **GIT**
- **haematologic**
- **hepatal**

### ***GRISEOFULVIN***

- **only** against **dermatophytes**

#### **Side effects:**

- **hepatotoxicity** (dose-limiting adverse effect)
- **contraindicated** in **acute intermittent porphyria**



