ANALEPTICS

Analeptics are general CNS stimulants; they stimulate vitally important centers (respiratory and vasomotor) of the brain.

CLASSIFICATION OF ANALEPTICS UNDER THE MECHANISM OF ACTION:

1.DIRECT-ACTING drugs, which stimulate centers of the medulla oblongata:

Bemegridum, Aethymizolum, Coffeinum

2. *REFLECTORY-ACTING:* cause reflectory timulation of the respiratory center due to H-cholinoreceptors of the sinus caroticus stimulation.

Cytitonum, Lobelinum

3. *MIX-ACTION ANALEPTICS:* They act as directly on the respiratory and vaso-motor centres, as reflectory on the chemoreceptors of vessels.

Cordiaminum, Camphora, Sulfocaphocainum

CLASSIFICATION UNDER THE INFLUENCE ON THE DIFFERENT PARTS OF THE CNS:

- >Analeptics, act mainly on the cortex of the brain: Caffeine
- ➤ Analeptics, act mainly on the subcortex centers: Bemegride, Aethymizole, Cytitonum, Lobelinum, Cordiamine, Camphor, Sulfocaphocaine
- >Analeptics, act mainly on the spinal cord: Strychninum

INDICATIONS FOR USE OF ANALEPTICS:

- Hypoxias, respiratory failure
- Overdosing or poisoning with narcotic drugs, general anesthetics, alcohol, hypnotic drugs
- > To speed up awakening action after narcosis
- Asphyxia of newborns;
- Shocks, collapses
- Prophylaxis of lung atelectasis and pneumonia

SIDE EFFECTS

- Nausea, vomiting
- **Seizures**
- Increasing of reflex excitation
- **Hyperventilation**
- Cardiac arrhythmia

Bemegridum - amp. 0,5% - 10 ml

Aethimizolum - tab. 0,1; amp. 1-1,5% - 3-5 ml

Camphora - bottles 10-20% - 30 ml alcohol solutions for external use

Sulfocamphocainum - amp. 10% - 2 ml

Cordiaminum - amp. 1-2 ml, bottles 30-40 ml (for internal use)

PSYCHOSTIMULANTS (PSYCHOMOTOR STIMULANTS)

- Derivatives of purine Caffeine
- Phenilalkilamines Phenamine
 - (Amphetamine)
- Phenilalkilsydnonimins Sydnocarb

PROPERTIES OF PSYCHOMOTOR STIMULANTS

- Stimulate intellectual activity, speed up thinking processes, temporarily eliminate tiredness, somnolence
- □Eliminate such manifestations of neurosis as: subdepression, fatigue, retardness
- □Aren't able to eliminate endogen

INDICATIONS FOR USE:

- ✓ To increase mental and physical workabilities.
- ✓ Psychiatria, neurologia narcolepsy, depressions, apathy, asthenia.
- Depressions of CNS after neuroleptics, tranquilizers, hypnotics usage.
- ✓ In case of poisoning with alcohol
- Chronic alcoholism with fatigue, depression, weakness
- As analeptics in case of collapse states,

Coffeinum-natrii bensoas - tab. 0,1-0,2; amp. 10-20% - 1-2 ml

Phenaminum - tab. 0,01

Sydnocarbum – tab. 0,005 - 0,01 - 0,025.

Theobrominum – tab. 0,25.

Theophyllinum – supp. 0,2

CAFFEINE Mechanism of action

- Binding with adenosine ("purine")
 receptors in brain (endogen ligand of these
 receptors adenosine decreases
 processes of excitation in CNS)
- Inhibiting of phosphodiesterase, which leads to accumulation of cAMP and stimulation of many physiological processes and metabolism

Pharmacological properties of Caffeine

Vessels

- Stimulation of vasomotor center contraction of vessels, increasing of BP
- Peripheral myotropic spasmolytic action dilation of vessels, decreasing of BP

Heart

- Central action (increasing of n. vagus tone) bradycardia
- Peripheral action (direct influence on heart) tachycardia, possible extrasystolia

Diuretic effect

It has a mild diuretic action that increases urinary output of sodium, chloride and potassium

Gastric mucosa

Since all methylxantines stimulate secretion of hydrochloric acid (HCI) from the gastric mucosa, individuals with peptic ulcers should avoid beverages containing methylxantines

INFLUENCE OF CAFFEINE ON CARDIO-VASCULAR SYSTEM

- Contraction of brain vessels
- Dilation of kidney vessels, increasing of diuresis
- Dilation of coronary vessels
- In case of depression of centers of brain stem (medulla oblongata) caffeine shows stimulating properties, increases blood pressure, stimulates breathing analeptic action

SIDE EFFECTS OF CAFFEINE

- If administered regularly psychological addiction theism, which is accompanied by development of abstinent syndrome (headache, retardness, fatigue, somnolence, depression)
- Insomnia, anxiety, agitation
- Acute poisoning in case of overdosing (lethal dose – 10g for caffeine – about 100 cups)

NOOTROPIC DRUGS (NEUROMETABOLIC CEREBROPROTECTORS)

CLASSIFICATION

- Derivatives of pyrrolidone Pyracetam (Nootropil)
- Derivatives of GABA Aminalon, Sodium oxybutyrate
- Neuropeptides Melatonin, Sinacten-depo
- Cerebrovascular drugs Sermion (Nicergoline), Cavinton (Vinpocetine), Stugeron (Cinnarisine), Pentoxyphylline (Trental), Xantinoli nicotinas
- Derivatives of piridoxine Piritinol (Encephabol)
- Antioxidants Mexidol, Tocopherole acetate
- Other Cerebrolysine, Actovegin, Solkoseryl, plant preparations

PROPERTIES OF NOOTROPIC DRUGS

- Improvement of brain blood circulation, promotion of collaterals development
- Psychostimulating effect, antiasthenic action
- Sedative, antidepressive action
- Antiepileptic, antiparkinsonic action
- Nootropic action
- Mnemotropic action
- Vasovegetative action
- Antihypoxic action

INDICATIONS FOR USE OF NOOTROPIC DRUGS

- Atherosclerosis of brain, vascular parkinsonism, Alzheimer's disease
- Disorders of brain blood circulation in case of traumas and intoxications, vascular diseases of brain
- Diseases of CNS, accompanied by decreasing of intellect, memory
- Disorders of psychology (in elderly with schizophrenia, depressions)
- To decrease manifestations of abstinence (alcoholism, drug addiction)
- In neurology (neurasthenia, migraine, neuralgias, radiculitis)
- In pediatrics in case if mental insufficiency

PYRACETAMUM, (NOOTROPIL)- tab. 0,4-0,8; caps. 0,4; amp. 20% - 5 ml

AMINALONUM, (GAMMALON) - tab. 0,25.

NATRII OXYBUTYRAS - amp. 20% - 10 ml