

## A simple question...

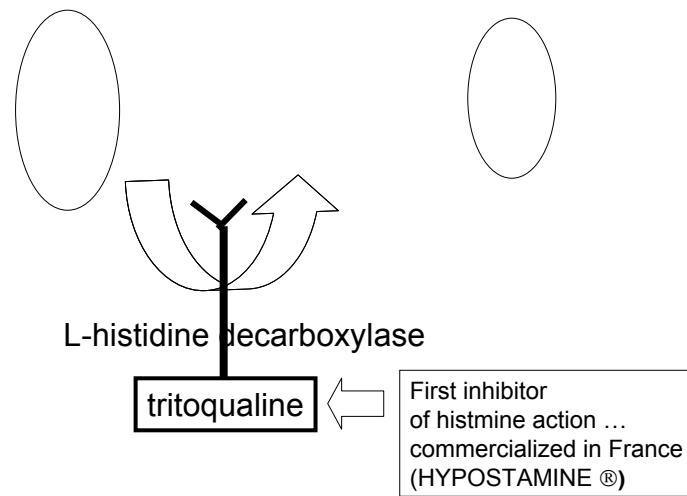
### How was histamine discovered ?

- by chemical synthesis ...
- from the analysis of plant extracts  
(ergot fungus *Claviceps purpurea*)
- from the analysis of animal tissues extracts
- through none of these approaches

## Histamine ...

- ➔ obtained by synthetic chemist in 1907 ...as a chemical curiosity ...
  - detection of an identical compound in an extract from ergot fungus ... and shown to cause a marked vasodilatation
  - a similar effect is seen with tissues extracts
    - produces a similar picture as a very severe allergic reaction
      - ➔ recognized as a "biological" molecule (and not a product from putrefaction in 1927 ...)

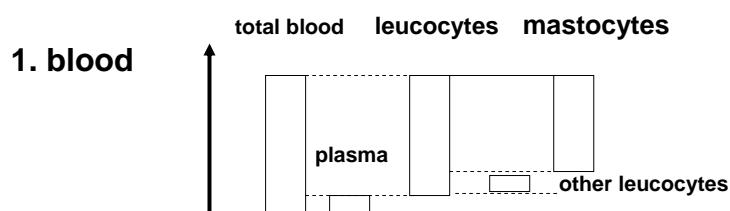
## From histidine to histamine ...



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## Localization of histamine



2. tissues ... the word comes from *ἱστος* ("histos" = tissue !!)

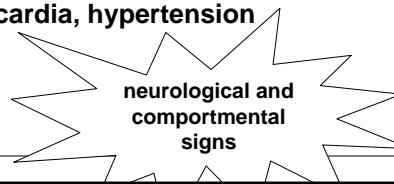
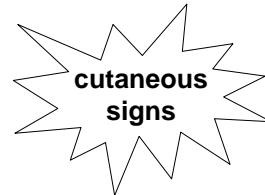
- skin
- lung
- gastrointestinal tract
- central nervous system

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## Actions of histamine

- ↑ of capillary permeability and vasodilatation
  - rednesses
  - inflammation
- bronchoconstriction  
important with the guinea-pig but under H<sub>2</sub> retrocontrol in man
- ↑ of HCl secretion  
(parietal cells of the stomach)
- neurotransmission
  - awakening reactions, tachycardia, hypertension
  - nausea, vomiting
  - migraines



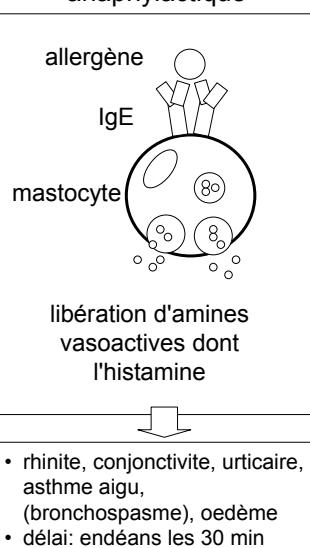
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## Rappel: les 4 types de réactions d'hypersensibilité

### Réaction de type I anaphylactique



### Réaction de type II: cytotoxique

- médiée par les IgG et/ou les IgM
- action directe sur une cellule cible
- implique le complément
- lyse, phagocytose (anémie hémolytique, agranulocytose, thrombopénie)
- délai: 5-12h

### Réaction de type III: formation de complexes immuns

- dépôts dans les tissus avec réaction inflammatoire disséminée
- activation du complément et libération de toxines des leucocytes
- agrégation plaquettaire, microthromboses...
- délai: 3-8h

### Réaction de type IV : cellulaire

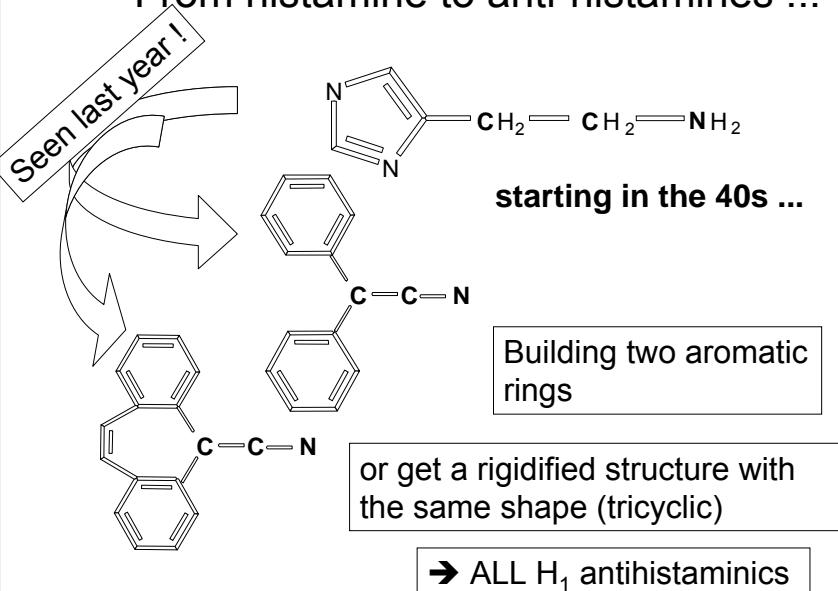
- activation directe des cellules T
- libération de cytokines et de TNFα
- induit typiquement des manifestations cutanées (dermatite de contact, exanthèmes, eczema, ...)
- délai: 24 à 48h

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## From histamine to anti-histamines ...



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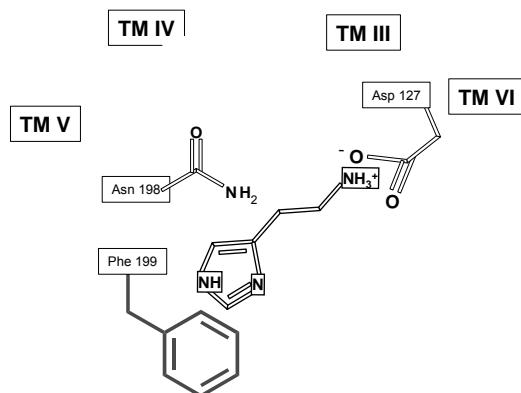
## Rationalization through a deep understanding of the receptor

- H<sub>1</sub> receptor
    - CNS
    - périphérie
  - H<sub>2</sub> receptor
    - stomach
    - lung
    - CNS
  - H<sub>3</sub> receptor
    - CNS
- action mediated by the phosphoinositides
- action mediated by cyclic AMP

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## Binding of histamine to H1 receptor

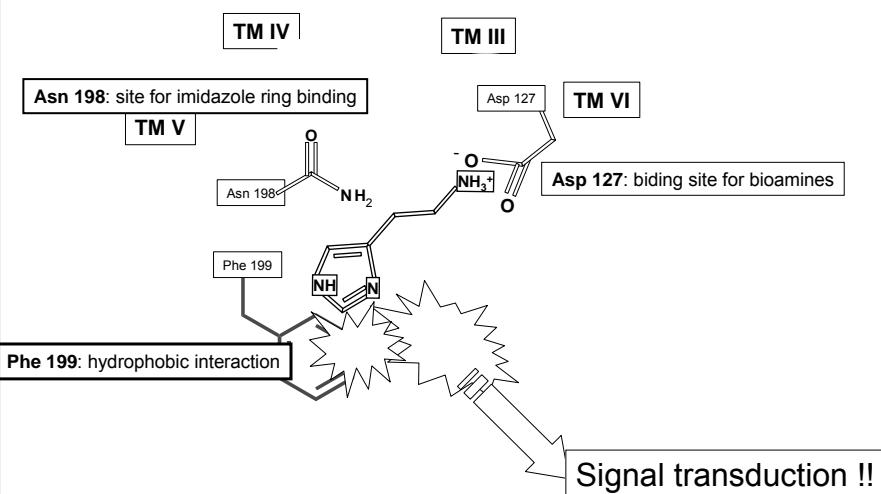


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## Binding of histamine to H1 receptor

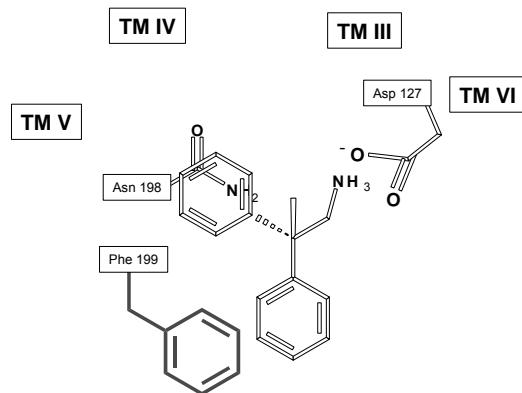


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## Binding of an antagonist ...

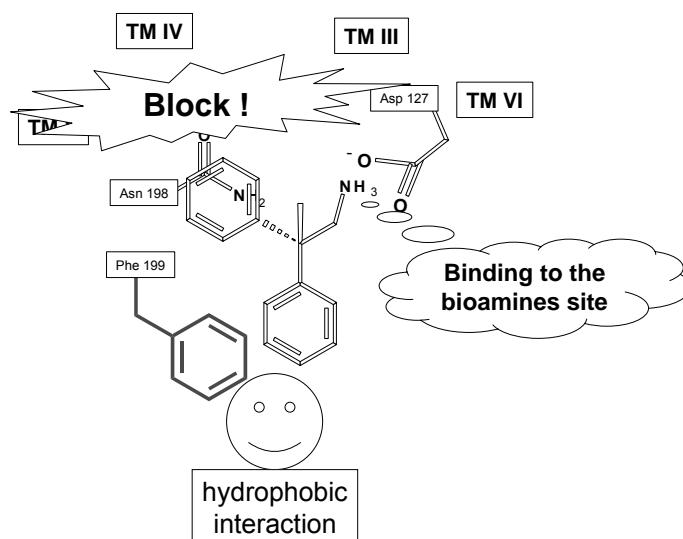


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## Binding of an antagonist ...



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## Une famille d'antagonistes H1....

Nom DCI

nom commercial en Belgique \*

- alimémazine THERALENE
- prométhazine PHENERGAN
- dimenhydrinate PARANAUSINE / VAGOMIN
- diphenhydramine BENYLIN
- dexchlrorphéniramine POLARAMINE
- ciproheptadine PERIACTIN
- dimétindène FENISTIL
- méclozine AGYRAX / POSTAFENE
- cetirizine ZYRTEC / REACTINE / ....
- loratadine CLARITINE / SANELOR
- fexofenadine TELFAST

et plus récemment

- lévocetirizine Xyzal
- desloratadine AERIUS

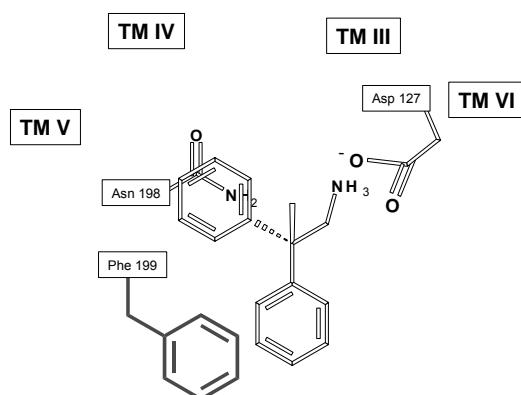
\* liste non limitative...

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Binding of an antagonist: what can you modify ?

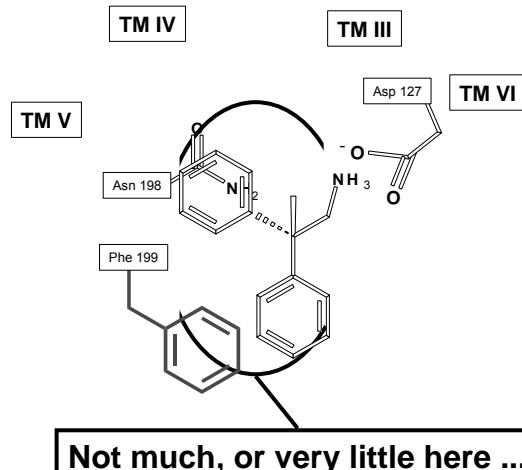


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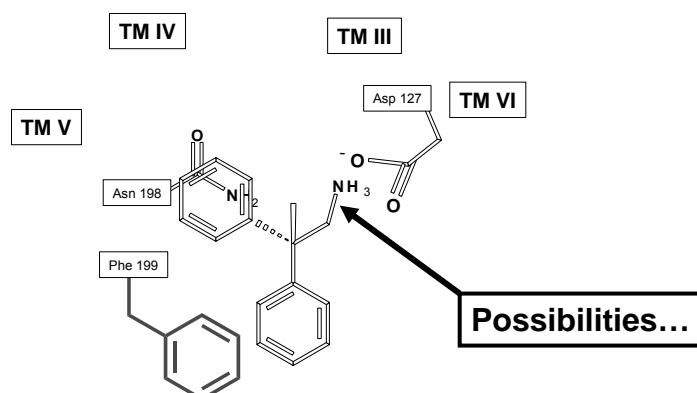
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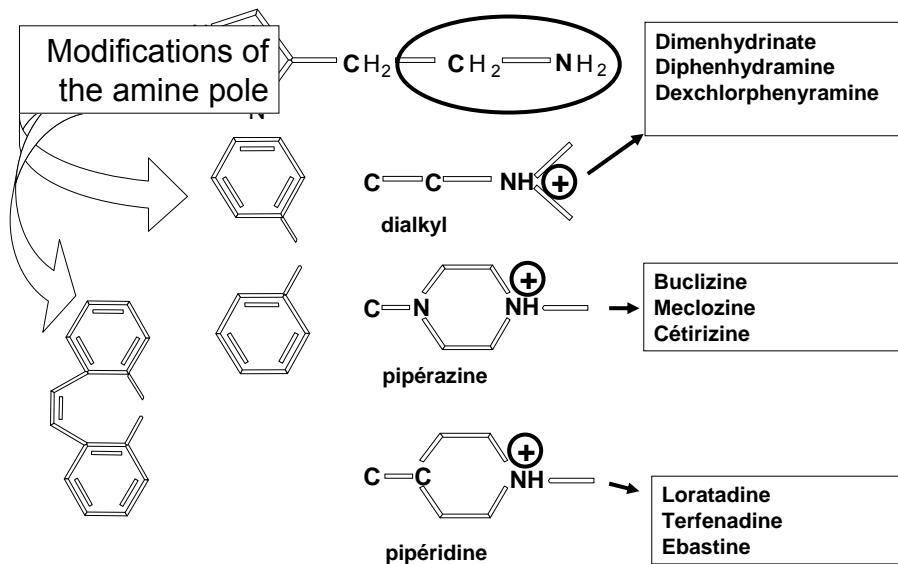
## Binding of an antagonist: what can you modify ?



## Binding of an antagonist: what can you modify ?



## Variations among antihistamines....



## The ideal antihistaminic drug for the treatment of allergy

What is your "wish list" ?

- Low sedation activity \*
- No or little anticholinergic effects \*\*
- Getting a rapid and prolonged action \*\*\*

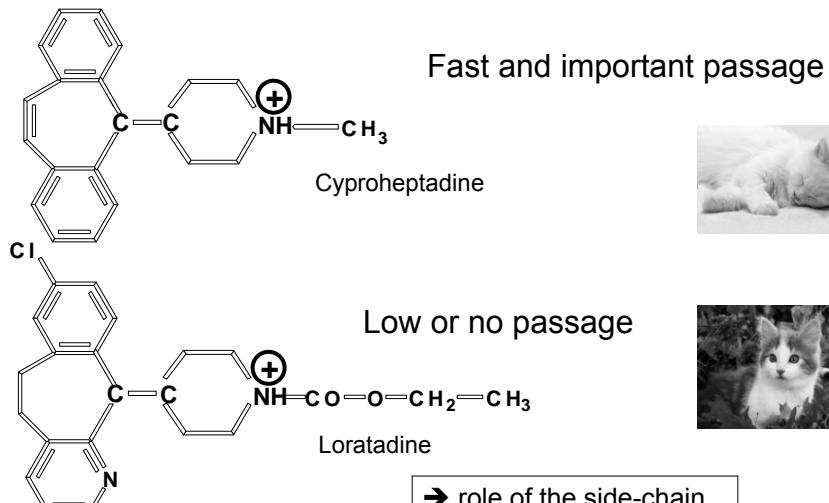
\* most "old" antihistamines make you to fall asleep...

\*\* because their structure is reminiscent of atropine

\*\*\* I want a fast relief, and not needing taking pills every hour...

## Low sedation activity ...

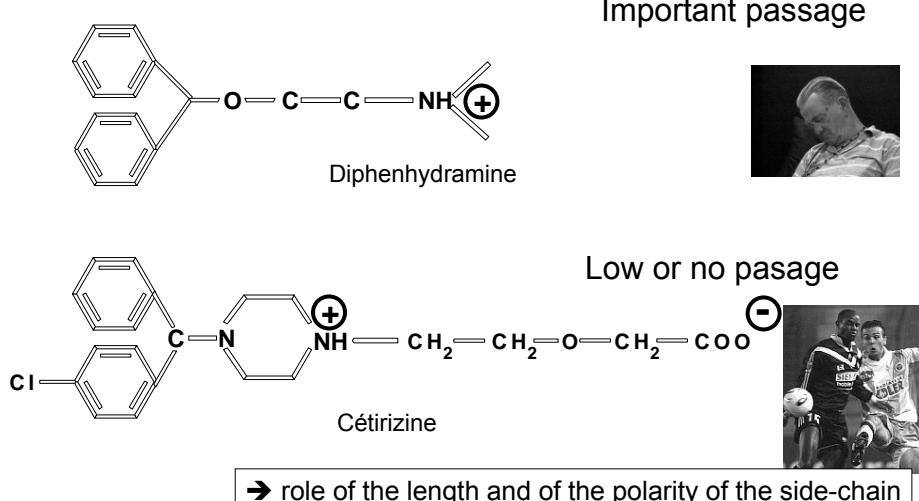
→ Modulation of the hematoencephalic barrier passage...



→ role of the side-chain...

## Low sedation activity ...

Another example...



→ role of the length and of the polarity of the side-chain

## Molécules à passage hémato-méningé important et causant de la sédation ...

Nom DCI	sédation	OTC
alimémazine	+++	oui (partiel.)
prométhazine	+++	oui
dimenhydrinate	+++	oui
	+++	oui
diphenhydramine	+++	oui
oxomémazine	++	non
dexchlorphéniramine	++	oui
ciproheptadine	++	oui
dimétindène	+	oui
méclozine	+	oui
	+	oui

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The antihistaminic and the sedative actions of the "old" antihistaminics go side by side

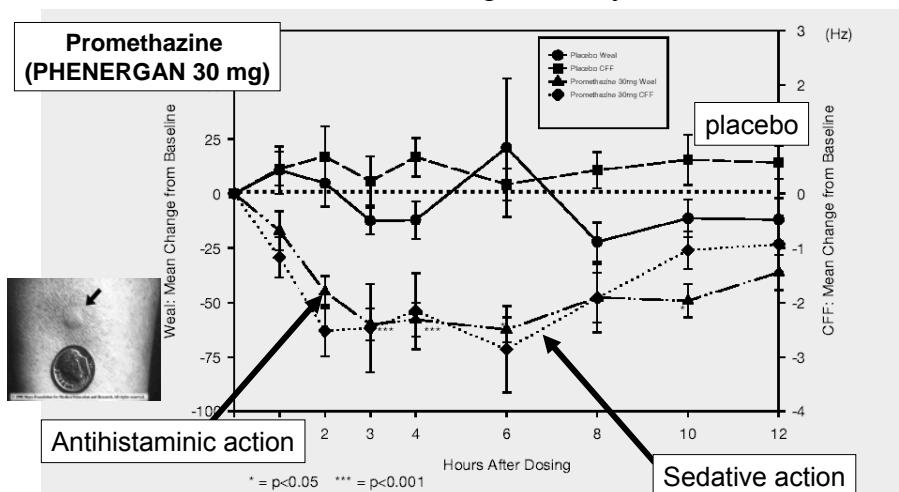


Figure 3. Change from baseline: peripheral antihistaminic suppression (weal) with respect to CFF threshold: acute dose promethazine 30 mg, day 1

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Hindmarch et al., Curr. Med. Res. Opin., 17:241-255, 2001

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## First molecules with low level of passage through the hemato-encephalic barrier

- astémisole
- terfénadine

{

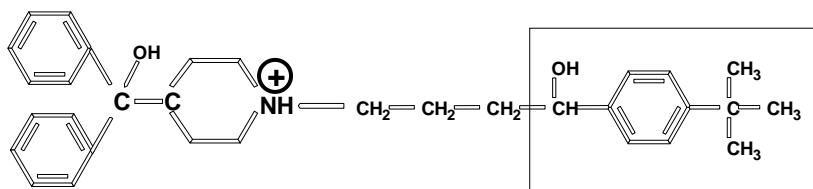
withdrawn because of cardiac toxicity  
*Torsades de pointe !!!*

- fexofénadine

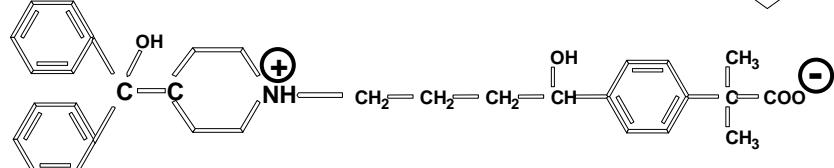
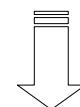
Active metabolite of terfenadine

## The problem of terfanadine...

- terfenadine was a pro-drug

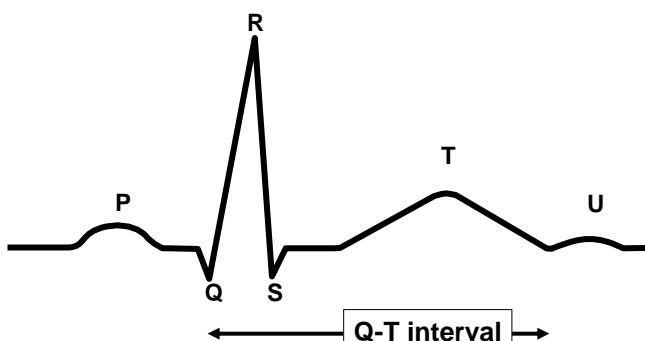


- which underwent a "first pass" liver metabolism that released fexofenadine, the active product



## Le problème de la terfénadine ...

- si la terfénadine circule, elle provoque un allongement de l'intervalle Q-T de l'electrocardiogramme pouvant mener à des arythmies mortelles ...

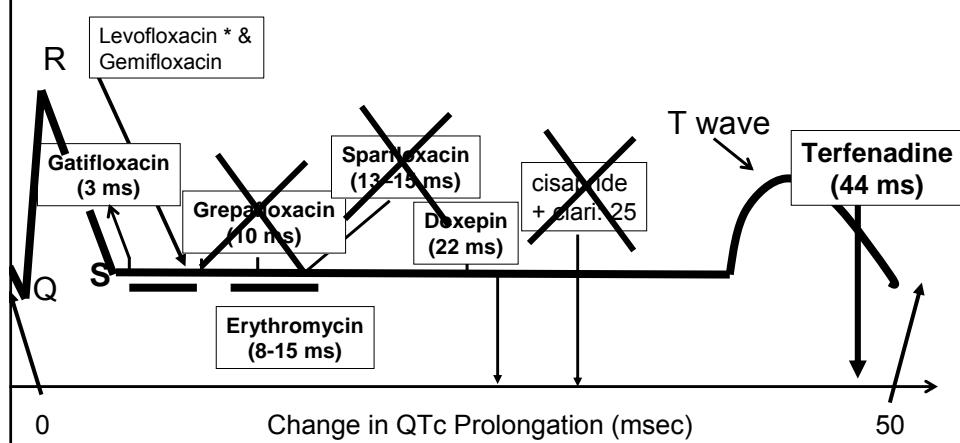


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## Le problème de la terfénadine ...



Adapted from Oberg and Bauman, 1995; Baker et al, 1997; van Haarst et al, 1998.

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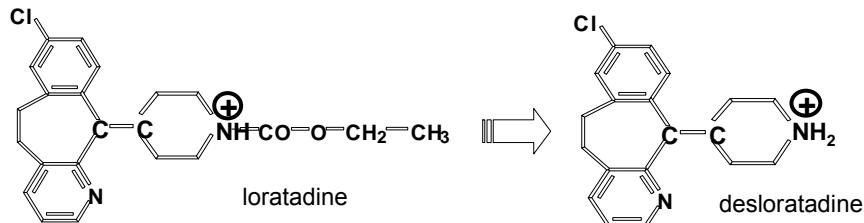
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## Molecules with a weak hemato-encephalic passage ...

- loratadine

must be metabolized into desloratadine



- ebastin

- cetirizine

not very sedative and acting as such

## Dissociation of the antihistaminic and the sedative activities

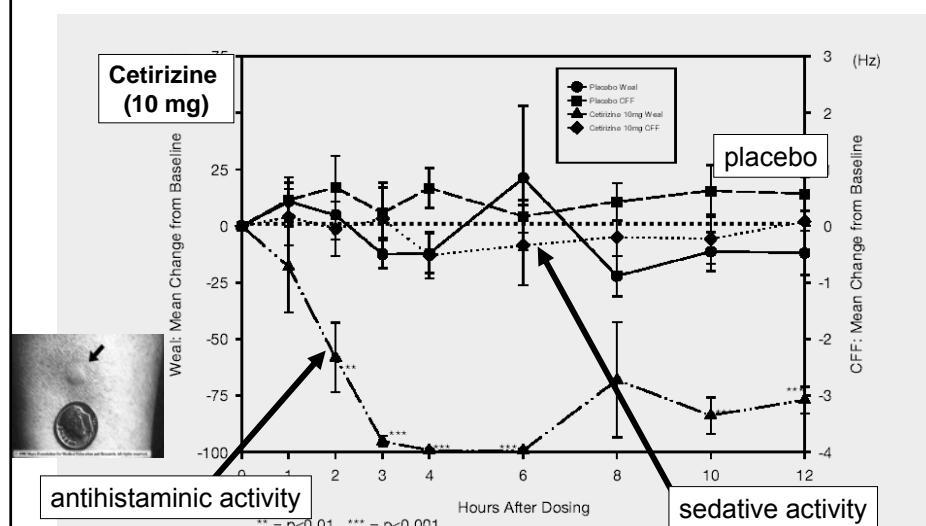


Figure 5. Change from baseline: peripheral antihistaminic suppression (weal) with respect to CFF threshold: acute dose cetirizine 10 mg, day 1

Dissociation des activités antihistaminique et sédative ...

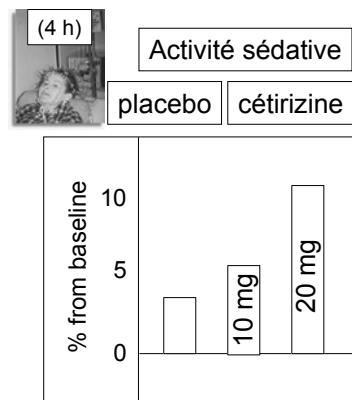
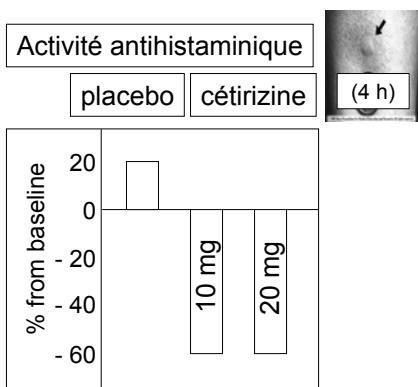
Mais, attention:



tout est une question de dose...

Dissociation des activités antihistaminique et sédative ...

Mais, attention,  
tout est une question de dose...



## L' antihistaminique H1 idéal dans le traitement de l'allergie....

### Cahier de charges

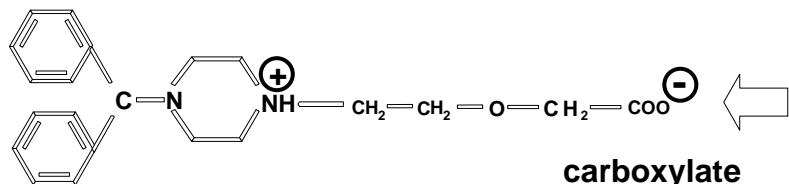
- Pouvoir de sédation faible
- **Eviter les effets anticholinergiques**
  - élevé à moyen pour les anciennes molécules  
➔ troubles de la vue, rétention urinaire ...
  - faible à nul pour les nouvelles molécules  
(loratadine,fexofénadine, cétirizine)
- Obtenir une action rapide et prolongée

## L' antihistaminique H1 idéal dans le traitement de l'allergie....

### Cahier de charges

- Pouvoir de sédation faible
- Eviter les effets anticholinergiques
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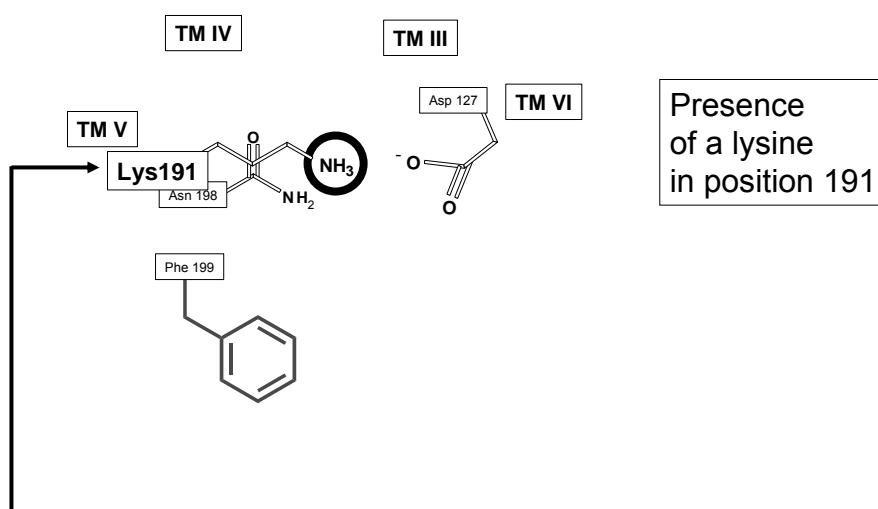
## Propriétés moléculaires de la cétirizine



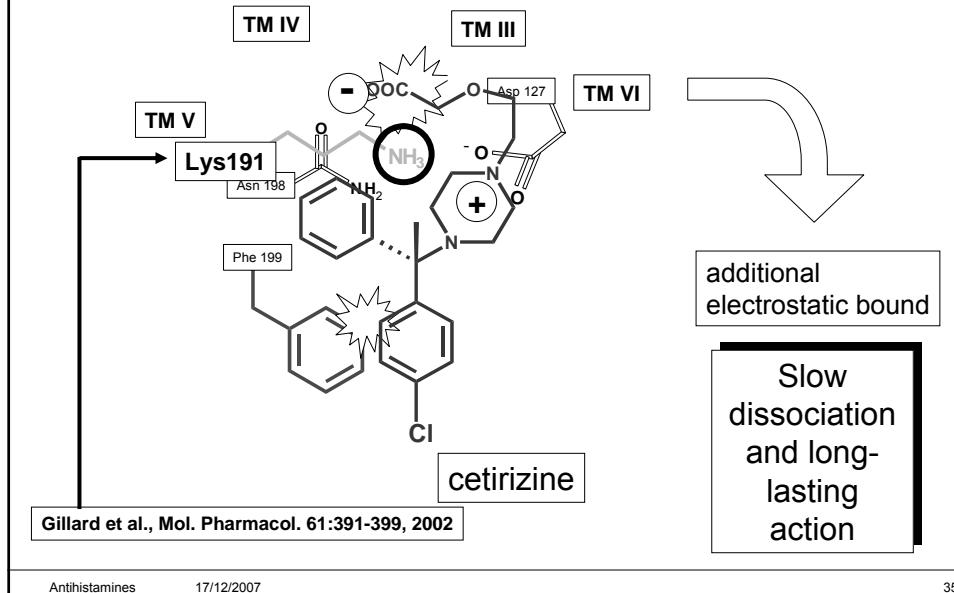
carboxylate

- action directe car pas de nécessité de métabolisme activateur ( $><$  terfénadine, loratadine...)
- pas ou peu de passage de la barrière hémato méningée
- **longue durée d'occupation du récepteur ....**

## Binding of an $\text{H}_1$ antagonist to the receptor...



## Slow release of an antagonist ...



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## Prolonged action ...

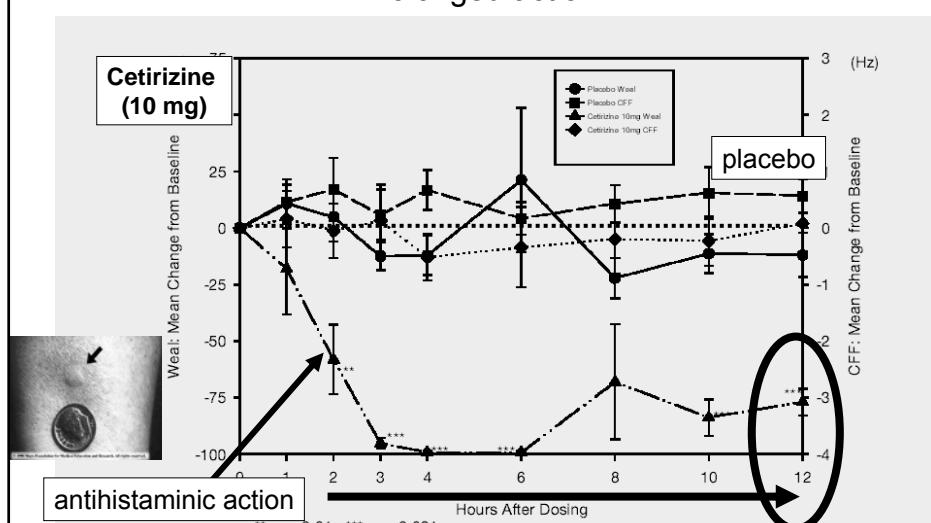


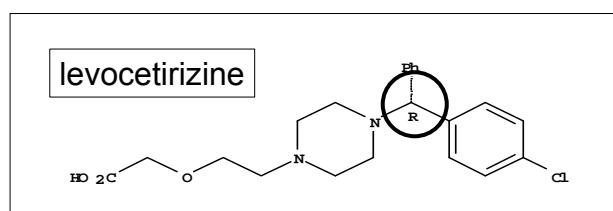
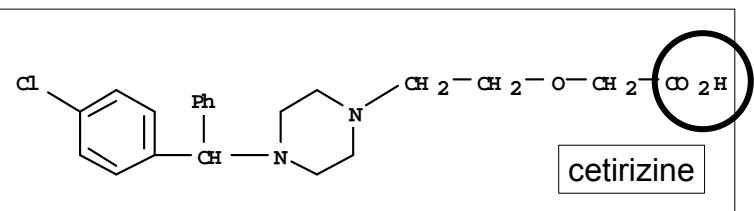
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Hindmarch et al., Curr. Med. Res. Opin., 17:241-255, 2001

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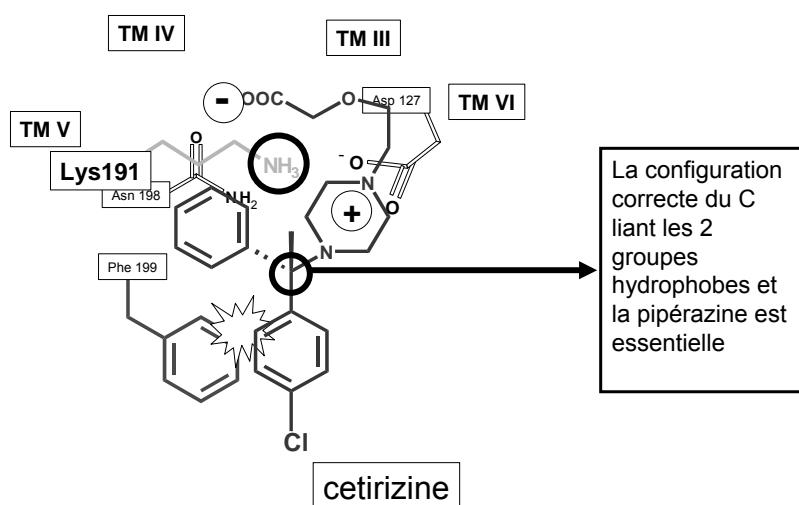
## Cetirizine and levocetirizine....



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## Optic isomers and binding to the receptor ...



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## Do you speak English in Braine l'Alleud or Gosselies ?

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### Binding Characteristics of Cetirizine and Levocetirizine to Human H<sub>1</sub> Histamine Receptors: Contribution of Lys<sup>191</sup> and Thr<sup>194</sup>

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This paper is available online at <http://molpharm.aspetjournals.org>

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## Une longue histoire, mais ...

**Sur base de ce que vous avez appris jusqu'ici, quel est, à votre avis, le conseil le plus essentiel à donner au patient lors de la délivrance d'un antihistaminique de type cétérizine, loratadine ...**

- faire attention aux autres médicaments**
- ne pas abuser du produit  
(ne pas reprendre trop rapidement)**
- attention à l'alcool !**
- respecter la posologie**
- attention à la somnolence**

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## Et pour la suite ...

Sur quel point, selon vous, le pharmacien doit-il être particulièrement bien informé par la firme XXX à propos de YYY qui est en vente sans prescription ?

- les propriétés de base du produit
- les indications
- la posologie
- les effets indésirables
- les interactions médicamenteuses

## Et pour la vraie suite ...

Quelle est la différence entre A et B ... ?

**Cetirizine UCB (UCB)**  
[cétirizine dichlorhydrate]  
compr. (séc.)  
20 x 10 mg  
40 x 10 mg

**A**

C9	€ 7,00
C9	€ 12,00

Générique,  
donc sans  
supplément au  
ticket  
modérateur et  
en catégorie  
bon marché

**Zytec (UCB)**  
[cétirizine dichlorhydrate]  
compr. (séc.)  
7 x 10 mg  
20 x 10 mg  
40 x 10 mg

**B**

C9	€ 5,21
C9	€ 9,99
C9	€ 10,29

**C**

Rx	€ 5,21
Rx	€ 9,99
Rx	€ 10,29

Medicament  
original avec  
supplément au  
ticket  
modérateur,  
donc **pas** en  
catégorie bon  
marché

Et pourquoi C est-il sous prescription ?

Et voyons les applications ...

