

Antimicrobial Agents.....	1
A. DEFINITIONS.....	1
B. HISTORY	1
C. IMPACT OF ANTIMICROBIALS ON HEALTH CARE.....	1
D. PRODUCTION, ISOLATION, AND PURIFICATION.....	1
E. NECESSARY INFORMATION	2
Mechanisms of Action of Antimicrobial Agents.....	3
I. INHIBITORS OF BACTERIAL CELL WALL BIOSYNTHESIS	5
II. INHIBITION OF PROTEIN BIOSYNTHESIS.....	7
III. INHIBITION OF NUCLEIC ACID BIOSYNTHESIS.....	8
IV. ALTERATION OF CELL MEMBRANE FUNCTION	8
V. INHIBITION OF CELL METABOLISM (ANTIMETABOLITES).....	8
Mechanisms of Antibiotic Resistance	9
I. PROBLEM OF RESISTANCE.....	9
II. MOLECULAR GENETICS OF ANTIBIOTIC RESISTANCE.....	9
III. SPECIFIC MECHANISMS OF RESISTANCE.....	11
IV. CONTROL OF RESISTANCE	12
The Pathogens	14
Table 5. Major Bacterial Pathogens	14
Table 6. Top Notifiable Bacterial Diseases in U.S.....	15
Table 7. Bacteria Associated with Human Disease.....	16
IDENTIFICATION AND CLASSIFICATION OF BACTERIA.....	18
GRAM POSITIVE BACTERIA.....	21
GRAM NEGATIVE BACTERIA.....	22
Host Factors in Antimicrobial Treatment	23
I. NON-SPECIFIC HOST DEFENCE MECHANISMS	23
II. NON-SPECIFIC IMMUNITY.....	23
III. ACQUIRED OR ADAPTIVE IMMUNITY	23
IV. HOST-IMMUNE RESPONSES	24
V. OTHER HOST FACTORS ASSOCIATED WITH TREATMENT	26
The Penicillins	28
I. CHEMISTRY AND MECHANISM OF ACTION.....	28
II. CLASSIFICATION OF THE PENICILLINS	30
III. MECHANISMS OF RESISTANCE	31
IV. SPECTRUM & USES	33
V. ABSORPTION, DISPOSITION, AND METABOLISM.....	40
VI. ADVERSE EFFECTS	41
VII. DRUG INTERACTIONS.....	42
VII. PRODUCTS and DOSAGES.....	43
The Cephalosporins	46
I. CHEMISTRY AND MECHANISM OF ACTION.....	46
II. CLASSIFICATION OF THE CEPHALOSPORINS	48
III. MECHANISMS OF RESISTANCE	48
IV. SPECTRUM & USES	49
V. ABSORPTION, DISPOSITION, AND METABOLISM.....	54
VI. ADVERSE REACTIONS.....	56
VII. DRUG INTERACTIONS.....	57
VII. PRODUCTS AND DOSING.....	57
Carbapenem and Monobactam Antibiotics	62
Imipenem-Cilastatin & Meropenem.....	62
Aztreonam.....	66
ACQUISITION COSTS OF PARENTERAL ANTIBIOTICS	68
Macrolides	69
I. HISTORY AND STRUCTURAL FEATURES.....	69
II. MECHANISM OF ACTION	69
III. SPECTRUM	71
IV. USES.....	73
V. RESISTANCE.....	74
VI. DISPOSITION, METABOLISM, AND EXCRETION.....	74

VII. ADVERSE REACTIONS	77
VIII. PRODUCTS and DOSING	78
Sulfonamides.....	80
Trimethoprim.....	82
Other Urinary Tract Anti-infective Agents	84
Nitrofurantoin	84
Methenamine	85
Fosfomycin.....	86
Cost Comparisons of Antimicrobial Agents.....	87
The Quinolones.....	89
I. STRUCTURE AND MECHANISM OF ACTION	89
II. MECHANISMS OF RESISTANCE.....	89
III. SPECTRUM	91
IV. USES.....	93
Aminoglycosides.....	98
I. HISTORY AND STRUCTURAL CHARACTERISTICS.....	98
II. MECHANISM OF ACTION	98
III. SPECTRUM	98
IV. USES.....	100
V. RESISTANCE.....	100
VI. DISPOSITION, METABOLISM, AND EXCRETION.....	101
VII. ADVERSE REACTIONS	103
VIII. INTRAVENOUS PRODUCTS	103
IX. TOPICAL PRODUCTS.....	104
Tetracyclines.....	105
I. HISTORY AND MECHANISM OF ACTION.....	105
II. STRUCTURAL CHARACTERISTICS.....	106
III. SPECTRUM	107
IV. USES.....	107
V. RESISTANCE.....	107
VI. DISPOSITION, EXCRETION, AND METABOLISM.....	107
VII. ADVERSE EFFECTS.....	108
VIII.PRODUCTS.....	109
Chloramphenicol.....	110
Vancomycin.....	112
Quinupristin/Dalfopristin.....	117
Bacitracin and Polymyxins.....	120
Mupirocin.....	122
Clindamycin.....	123
Metronidazole	125
Opportunistic Fungal Infections	128
Systemic Antifungal Agents.....	129
Polyenes - Amphotericin B and Nystatin.....	129
Flucytosine (5-Fluorocytosine).....	131
Imidazoles and Triazoles.....	133
Terbinafine.....	140
Griseofulvin.....	141
Topical Antifungal Agents.....	142
Polyenes	142
Imidazole Antifungals (Topical).....	143
Tolnaftate.....	144
Undecylenic acid.....	144
Cicloprox olamine.....	145
Haloprinol.....	146
Naftifine and Terbinafine.....	146
Butenafine	
Triacetin.....	146
Antimycobacterial Agents	147
Mycobacterial Infections.....	147

Isoniazid	148
Rifampin and Rifabutin.....	149
Ethambutol.....	151
Pyrazinamide	152
Dapsone.....	153
Clofazamine	154
Antiparasitic Agents	155
Mebendazole & Albendazole.....	155
Pyrantel Pamoate	156
Praziquantel	158
Niclosamide	159
Drugs for <i>Pneumocystis carinii</i> pneumonia.....	159
Atovaquone.....	160
Pentamidine Isethionate	161
Drugs for Toxoplasmosis.....	163
Pyrimethamine	164
Drugs for <i>Cryptosporidium</i> sp.....	165
Antimalarial Drugs.....	167
Choroquine.....	169
Mefloquine	170
Primaquine.....	171
Other Antimalarial Drugs.....	172

Antimicrobial Agents

INTRODUCTION

A. DEFINITIONS

1. Antimicrobial vs. Anti-infective vs. Antibacterial vs. Antibiotic
2. Bactericidal vs. Bacteriostatic

B. HISTORY

500 B.C. - China

1877 - Pasteur

1876-90 - Koch

1929 - Fleming

1930's - Domagk (Bayer)

1939-41 - Florey & Chain

C. IMPACT OF ANTIMICROBIALS ON HEALTH CARE

1. Infectious disease - first drugs to actually result in a "cure"
2. Usage & Market share
3. Cost/Benefit ratio - complex issue

D. PRODUCTION, ISOLATION, AND PURIFICATION

1. Natural Antibiotics - produced by fermentation
2. Semi-Synthetic
3. Synthetic

E. NECESSARY INFORMATION

To fully understand antimicrobial therapy and provide the best pharmaceutical care to our patients, pharmacists and physicians need to be able to answer several questions to select the most appropriate drug for treatment of infection. Selection of the optimal antibiotic also requires a fundamental basis in medical microbiology in order to identify the most likely causative agent of infection.

Table 1. What Do we Need to Know about Antimicrobials?

What is it ?	Chemical structure and class natural or synthetic product
How does it work ?	Target site Mechanism of action
When is it used ?	Spectrum of activity and important clinical uses
What are the problems ?	Side Effects/Toxicity Microbial Resistance
Where does it go ?	Absorption, Distribution, Metabolism, & Excretion
How do we get it there ?	Route of administration Product formulation
How much does it cost ?	Cost effectiveness

Adapted from Mims, Playfair, Roitt, Wakelin, & Williams, *Medical Microbiology*, Mosby Europe Ltd., London, 1993.

F. EMPIRIC VS. DEFINITIVE THERAPY

1. Empiric therapy - based on treatment of most likely organisms for a specific infection

2. Definitive therapy - after organism is identified. May or may not have information on susceptibility & resistance.

Mechanisms of Action of Antimicrobial Agents

Antimicrobial agents take advantage of the differences between animal cells and bacteria (prokaryotes), fungi, or protozoa. The goal is to have highly selective toxicity towards these microbes with minimal or no toxicity in humans. Table 2 shows the basic differences between eukaryotes and prokaryotes.

Table 2. Characteristics of Eukaryotes and Prokaryotes

Characteristic	Eukaryotes	Prokaryotes
Major Groups	Algae, Fungi, Protozoa, Plants, Animals	Bacteria
Size (approximate)	5 μm	0.5 - 3.0 μm
Nuclear Structure		
Nucleus	Classic nuclear membrane	No nuclear membrane
Chromosomes	Double Stranded DNA arranged in multiple chromosomes	Single, closed strand of genomic DNA. Additional DNA found in plasmids
Cytoplasmic Structures		
Mitochondria	Present	Absent
Golgi bodies	Present	Absent
Endoplasmic reticulum	Present	Absent
Ribosomes (sedimentation coefficient)	80S (60S and 40S subunits)	70S (50S and 30S subunits)
Cytoplasmic membrane	Contains sterols. In animals, membranes contain cholesterol. Ergosterol present in fungal membranes.	No sterols present*
Cell Wall	Absent or composed of cellulose (plants) or chitin (insects, fungi)	Complex structure containing lipids, proteins, and peptidoglycan
Reproduction	Sexual and asexual	Binary fission (asexual)
Movement	Usually none. If present, flagella are complex	Simple flagella, if present
Respiration	via mitochondria	via cytoplasmic membrane

* except in *Mycoplasma sp.*

Adapted from Murray, Kobayashi, Pfaller, & Rosenthal, *Medical Microbiology*, 2nd ed., Mosby, St. Louis, 1994.

The most common targets for antimicrobial drug actions fall into 5 basic categories:

- A. Inhibition of Cell Wall Synthesis
- B. Inhibition of Protein Synthesis
- C. Inhibition of Nucleic Acid Synthesis
- D. Effects on cell membrane sterols (antifungal agents)
- E. Inhibition of unique metabolic steps

Table 3. Specific Mechanism of Action of Antimicrobial Agents

<i>Mechanism of Action</i>	<i>Drugs</i>
Inhibition of Cell Wall Synthesis	
Inhibit cross-linking of peptidoglycan by inactivating transpeptidases (PBPs)	Penicillins, Cephalosporins, Aztreonam, Imipenem
Bind to terminal D-ala-D-ala & prevent incorporation into growing peptidoglycan	Vancomycin, Teicoplanin
Inhibition of transglycosylation	Oritavancin, Teicoplanin, lipophilic vancomycin analogs, ramiplanin
Inhibit dephosphorylation of phospholipid carrier in peptidoglycan structure	Bacitracin
Prevents incorporation of D-alanine into peptidoglycan	Cycloserine
Inhibition of Protein Synthesis	
Bind to 50S ribosomal subunit	Macrolides, Chloramphenicol, Clindamycin
Bind to 30S ribosomal subunit	Aminoglycosides, Tetracyclines
Inhibition of Nucleic acid synthesis	
Inhibition of DNA gyrase & topoisomerase	Quinolones
Inhibition of nucleic acid biosynthesis	Flucytosine, Griseofulvin
Inhibition of mRNA synthesis	Rifampin, Rifabutin, Rifapentine
Alteration of Cell Membrane Function	
Inhibition of ergosterol biosynthesis	Imidazole antifungals
Bind to membrane sterols	Polymyxins, Amphotericin B, Nystatin
Alteration of Cell Metabolism	
Inhibition of tetrahydrofolic acid production (cofactor for nucleotide synthesis)	Sulfonamides, Trimethoprim, Trimetrexate Pyrimethamine
Inhibition of mycolic acid biosynthesis	Isoniazid
Interference with ubiquinone biosynthesis & cell respiration	Atovaquone
Bind to macromolecules	Metronidazole, Nitrofurantoin

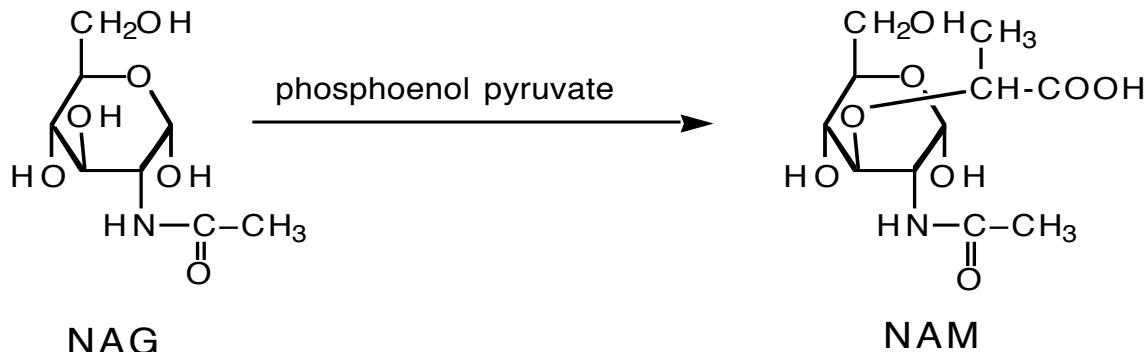
I. INHIBITORS OF BACTERIAL CELL WALL BIOSYNTHESIS

e.g. Penicillins, Cephalosporins, Vancomycin, Bacitracin, Fosfomycin

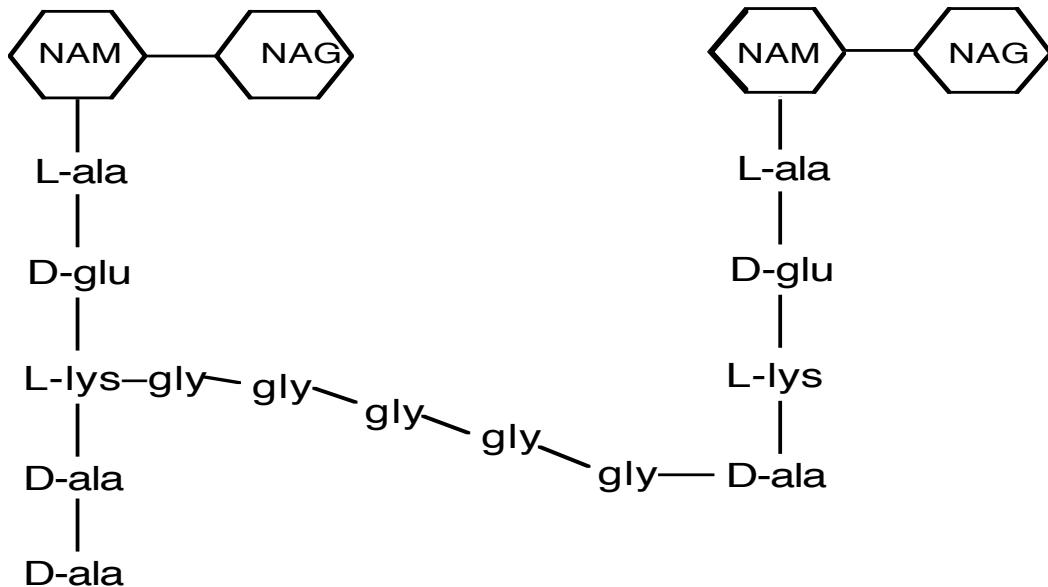
A. CELL WALL BIOSYNTHESIS

1. Peptidoglycan layer -Basic Building Blocks of

a. N-acetyl glucosamine (NAG) and N-acetyl muramic acid (NAM)



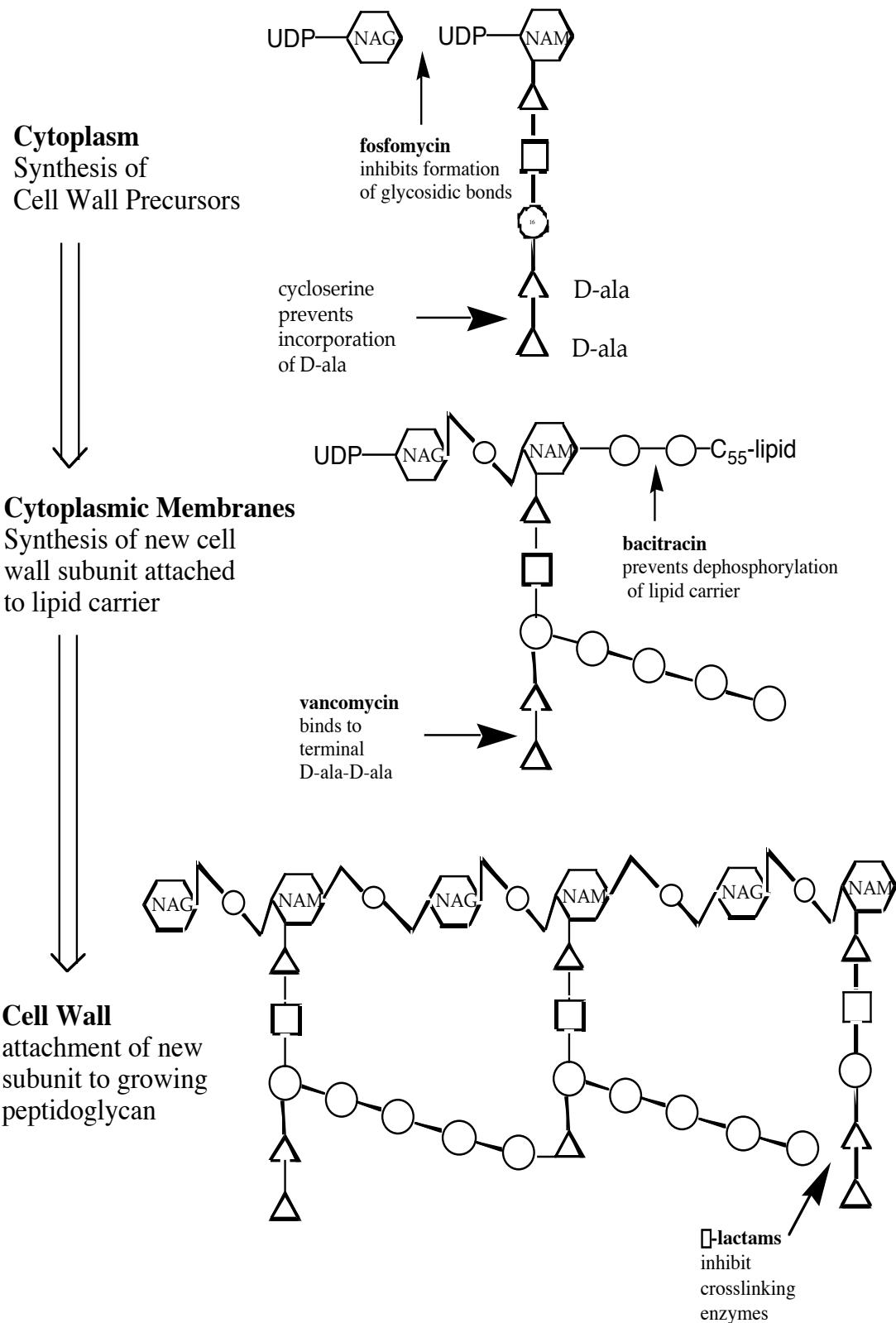
- b.) Transglycosylation – attachment of sugars to pentapeptide and membrane. C55-phospholipid - (Lipid A intermediate) involved in anchorage of peptidoglycan to membrane by connection through NAG via a pyrophosphate bond.
- c.) Transpeptidation. Crosslinking of Amino-acid pentapeptide



Peptidoglycan of *Staph. aureus*

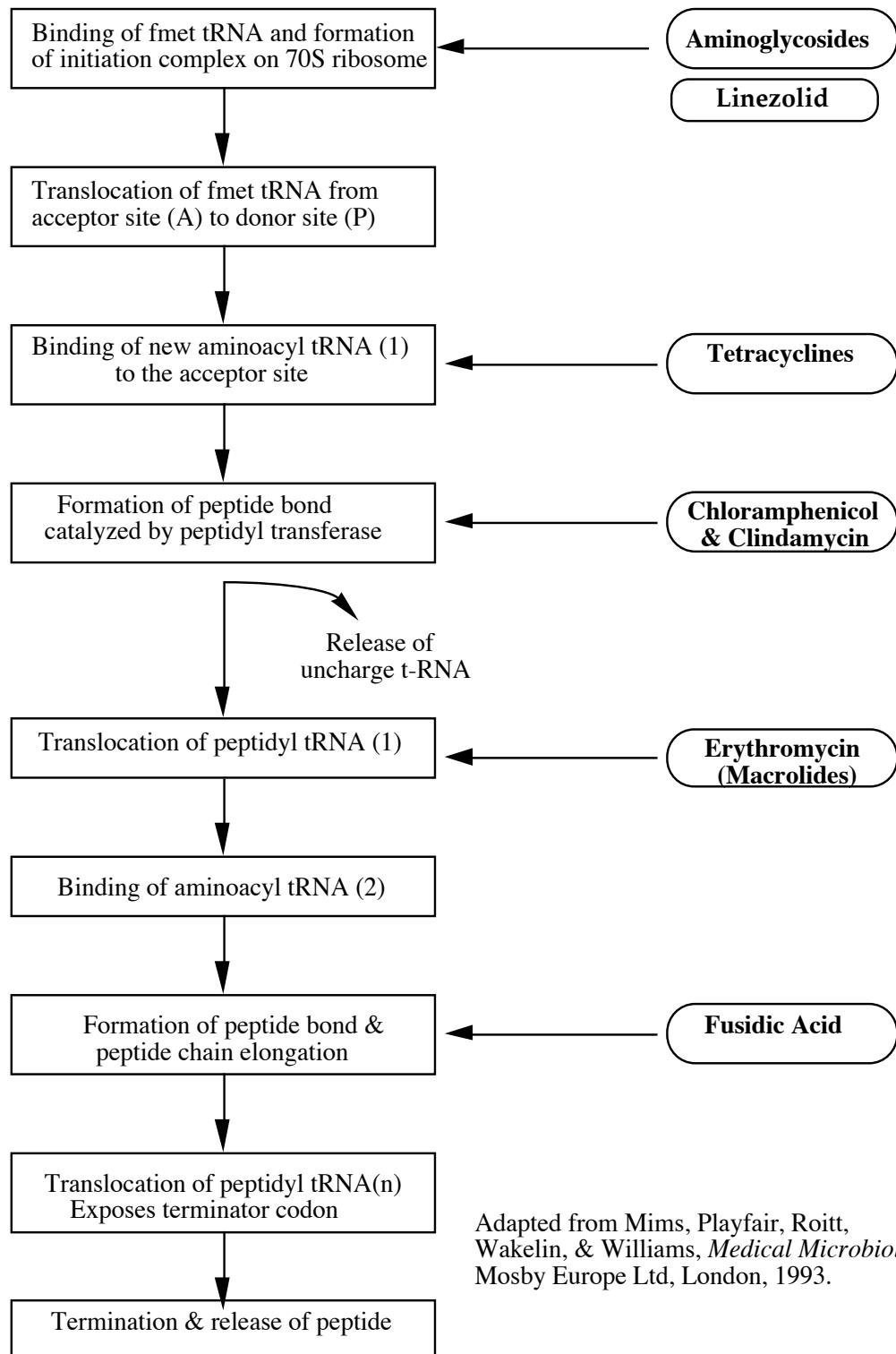
- i. Composition of amino acids may vary from one bacterium to another
- ii. Unusual D-amino acids are present. D-alanine and diaminopipelic acid are unique to bacteria.

Bacterial Cell Wall Biosynthesis and the Steps blocked by Antibiotics



II. INHIBITION OF PROTEIN BIOSYNTHESIS

- A. Interaction with 30S ribosomal subunit - Aminoglycosides & Tetracyclines
- B. Interaction with 50S ribosomal subunit - Chloramphenicol, Macrolides, Clindamycin



Adapted from Mims, Playfair, Roitt, Wakelin, & Williams, *Medical Microbiology*, Mosby Europe Ltd, London, 1993.

III. INHIBITION OF NUCLEIC ACID BIOSYNTHESIS

- A. **Quinolones** - inhibit DNA gyrase & topoisomerase
- B. **Flucytosine** - converted to 5-Fluorouracil in fungi. 5-FU inhibits thymidylate synthetase. Incorporated into fungal RNA.
- C. **Griseofulvin** - binds to RNA of actively growing fungi
- D. **Rifampin & Rifabutin** - inhibition of DNA dependent RNA polymerase

IV. ALTERATION OF CELL MEMBRANE FUNCTION

- A. **Amphotericin B, Nystatin, Polymyxin B** - bind avidly to membrane sterols. Higher affinity for ergosterol (present in fungal membranes) than for cholesterol (in mammalian membranes).
- B. **Imidazole antifungals** e.g. ketoconazole, fluconazole - inhibit 14-demethylation of lanosterol to ergosterol (essential component of fungal membranes).

V. INHIBITION OF CELL METABOLISM (ANTIMETABOLITES)

- A. **Sulfonamides** - p-aminobenzoic acid (PABA) analogs that competitively inhibit incorporation of tetrahydropteroic acid, an initial step in the synthesis of folic acid.
- B. **Trimethoprim, Trimetrexate, Pyrimethamine** - inhibitors of dihydrofolate reductase in bacteria (trimethoprim) or protozoa (pyrimethamine, trimetrexate).
- C. **Atovaquone** - inhibits ubiquinone biosynthesis & cell respiration in protozoa
- D. **Isoniazid, Ethionamide** - inhibit mycolic acid biosynthesis in *Mycobacterium* sp.
- E. **Metronidazole, Nitrofurantoin** - reduced to highly reactive metabolites. Bind to cell macromolecules.