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# Diploma in Pharmacy 2nd Year Pharmacology Important Questions

### **Chapter 12: Chemotherapeutic Agents**

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### Chapter 12 Chemotherapeutic Agents IMPORTANT Questions

# Q1. What are Chemotherapeutic Agents? Ans.

### **Chemotherapeutic Agents**

- I. The Chemical substances ( Drugs ) used for treatment of diseases caused by microorganism and tumor Cell are called Chemotherapeutic Agents.
- II. Nowadays it refers to treatment of cancer usually .
- III. The Chemical substances used as Chemotherapeutic agents are also called antibiotics and anti-neoplastic Agents.
- IV. Now antibiotics can further classified into Bactericidal (kil ls the Bacteria) and Bacteriostatic (Prevents the growth of Bacteria).
- V. Even though Antibiotics are referred to bactericidal and Bacteriostatic, But antiviral, antifungal anthelmintic, antiprotozoal are also called antibiotics.
- VI. The Chemotherapeutic agents that are used to treat infection and infestation may be other than antibiotics also.

# Q2. Write the Basic Principles of Chemotherapy of Infection and Infestations.

Ans.

# Basic Principle of Chemotherapy of Infections and Infestations

- ➤ **Diagnosis**: Before Chemotherapy diagnosis should be performed for determination of type of microorganism and site of infection.
- > **Selection of drug**: Drug should be select according to the type of pathogen, and should consider which is required whether Narrow or broad spectrum.
- > Frequency and duration of administration: low dose can develop resistance, intermediate dose may not cure infection, so optimum dose should be used.
- Continue therapy: Acute infection treated for 5-10 days, but some takes a long time like Tuberculosis, thyroid.
- Prophylactic Chemotherapy: Chemotherapy is also used as prophylaxis to avoid surgical site infection.



### Q3. Write the classification of Chemotherapeutic Agents.

### Ans.

### Classification of Chemotherapeutic agents

### 1) Antibiotics

- a) B-Lactam Antibiotics: Penicillins. Monobactams, Cephalosporins, Carbapenems etc.
- b) Aminoglycosides: Streptomycin, Gentamycin, Framycetin, Neomycin, etc.
- c) Macrolides: Erythromycine, Roxithromycin, Erythromycin, Clarithromycin,
- d) Tetracyclines: Oxytetracycline, Doxycycline, Minocycline, etc.
- e) Nitrobenzene Derivatives: Chloramphenicol, etc.
- f) Polypeptide Antibiotics: Polymyxin-B, Colistin, Bacitracin, Tyrothricin, etc
- g) Polyene Antibiotics: Nystatin, Hamycin, Amphotericin-B, etc.
- h) **Miscellaneous Agents**: Rifampicin, Lincomycin, Vancomycin, Fusidic acid, Cycloserine, Viomycin, Griseofulvin, etc.

### 2) Chemotherapeutic Agents other than Antibiotics :

- a) Sulphonamides and Related Agents: Sulfadiazine, Sulfamethoxazole, Sulfones (Dapsone), Para aminosalicylic acid (PAS), etc.
- b) **Diaminopyrimidines**: Pyrimethamine.
- c) **Quinolones and Fluoroquinolones :** Nalidixic acid, Norfloxacin, Ciprofloxacin, ofloxacin, etc.
- d) Nitrofuran Derivatives: Nitrofurantoin, Furazolidone, etc.
- e) Nitroimidazoles: Metronidazole, Tinidazole etc.
- f) Imidazole Derivatives: Miconazole, Clotrimazole, Ketoconazole, Fluconazole, etc.
- g) Nicotinic Acid Derivatives: Isoniazid, Pyrazinamide, Ethionamide, etc.
- h) Miscellaneous Agents: Ethambutol, Thiacetazone, Clofazimine, etc.

# 3) According to the Types of Organisms Against which they are Primarily Active:

- a. **Antibacterial**: Penicillins, Aminoglycosides (Streptomycin, Gentamycin, Framycetin, Neomycin), Erythromycin, etc.
- b. Antifungal: Griseofulvin, Amphotericin B, Ketoconazole, etc.
- c. Antiviral: Acyclovir, Amantadine, Zidovudine, etc
- d. **Antiprotozoal :** Chloroquine, Pyrimethamine, Metronidazole, Diloxanide, etc. v) Anthelmintic: Mebendazole, Niclosamide, Diethylcarbamazine, etc.

## 4) Classification of Chemotherapeutic Agents According to their Range of Action:

- I. **Broad Spectrum Antibiotics :** Those effective against Gram +ve, Gram -ve, rickettsia and chlamydia. For example, Tetracycline, Chloramphenicol etc.
- II. Narrow Spectrum Antibiotics
  - a. Those effective only against gram +ve bacteria, e.g., Penicillin, Erythromycin group, Vancomycin.
  - b. Those effective only against gram -ve bacteria, e.g., Streptomycin and other aminoglycoside antibiotics, Colistin, Polymyxin-B.
- III. **Relative Broad Spectrum Antibiotics :** Those effective against +ve and gramve bacteria. For example, Ampicillin group, Cephalosporins, Rifamycins, etc.

# Q4. Define the Term. Write the Classification, Indications, Contraindication, Dose of

- Penicillins
- Cephalosporins
- Aminoglycosides
- Fluoroquinolones
- Macrolides
- Tetracyclines
- Sulphonamides
- Anti-tubercular drugs
- Anti-fungal drugs
- Anti-viral drugs
- Anti-amoebic agents
- Anthelmintics
- Anti-malarial agents
- Anti-neoplastic agents

### Ans.

### **Penicillin**

- → Penicillin is the first antibiotics which was clinically used in 1941 firstly it was obtained from fungus penicillium notatum, but presently it is obtained from P. Chrysogenum
- → Penicillins work by preventing the bacteria from forming a cell wall, which is essential for their survival. This causes the bacteria to burst and die.

### Classification

- **Penicillin G :** Penicillin G (Benzyl Penicillin ) , Procaine Penicillin G , Benzathine penicillin G.
- > Acid resistant penicillin : Phenoxymethylpenicillin ( Penicillin V)
- **Penicillin With ß lactamse inhibitor :** Amoxycilin , Clavulanic acid .
- Penicillin effective against Gram + and gram Negative Organism : Ampicillin , Talampicillin .

### **Indications**

- Upper respiratory infections
- Otitis media
- Pneumonia
- Rheumatic fever
- Erysipelas
- Skin and soft-tissue infections
- Gonorrhea



### **Contraindications**

- ♣ Previous history of allergic reactions
- ▲ In Stevens johnson syndrome
- ▲ In lactation

### **Dose**

✓ Penicillin G : 0.5-5 MU im/iv

### **Cephalosporins**

- → Cephalosporins are largest group of Beta lactam antibiotics ,
- → Five generation of cephalosporin are available .
- → It is a broad spectrum antimicrobial agent and used to treat infection gram positive and gram negative bacteria .

### Classification

- 1) First Generation Cephalosporins
  - Cefazolin,
  - Cephalexin,
- 2) Second Generation Cephalosporins
  - Cefuroxime,
  - Cefaclor,
- 3) Third Generation Cephalosporins
  - Ceftriaxone,
  - Cefotaxime
- 4) Fourth Generation Cephalosporins
  - Cefepime
  - Cefpirome
- 5) Fifth Generation Cephalosporins
  - Ceftaroline
  - Ceftobiprole

### **Indications**

- Skin or soft tissue infections.
- Urinary tract infections (UTIs)
- Strep throat.
- Ear infections.
- Pneumonia.

### **Contraindications**

▲ Allergic reaction history

- ✓ **Ampicillin**: 250-500 mg / 6 hours
- ✓ **Cefexime :** 400 mg /d



### Aminoglycosides

- → Aminoglycosides have a broad spectrum of activity against Gram negative and mycobacterium
- $\rightarrow$  It is used to treat serious infection . aminoglycocides are called Bactericidal antibiotics .

### Classifications

- First generation: Streptomycin, kanamycin, Neomycin.
- **Second generation :** Gentamicin , tobramicin .
- > Third generation : Amikacin , sisomicin .

### **Indications**

They are used in the treatment of severe infections of the abdomen, urinary tract, skin and soft tissue, bone, cervix, blood, eye ear, lungs, and heart. tuberculosis, UTIs, gonorrhoea, etc.

### **Contraindications**

- ▲ Renal and Hepatic diseases
- ▲ Pregnancy

- ✓ Streptomycin: 1-2 g /d
- ✓ **Amikacin** : different according to infections

### Fluoroquinolones

- → Fluoroquinolones are highly effective antibiotics with many advantageous pharmacokinetic properties including high oral bioavailability, large volume of distribution, and broad-spectrum antimicrobial activity. With widespread use, antimicrobial resistance to fluoroquinolones has grown.
- → Fluoroquinolones are active against a wide range of aerobic gram positive and gram negative organism . They are commonly used to treat respiratory and urinary tract infections

### Classification

- First generation: Nalidixic acid, Cinoxacin
- > Second generation: Norfloxacin, Ofloxacin, ciprofloxacin
- > Third generation: Levofloxacin, Sparfloxacin.
- **Fourth generation**: Trovafloxacin.

### **Indications**

- Urinary tract infections (UTIs)
- Throat infection .
- Ear infections.
- Pneumonia.
- Sinus infections.
- Meningitis.
- Gonorrhea.

### Contraindication

- ▲ In lactation
- ▲ In Hypersensitivity

- ✓ Ofloxacin: 250-750 / BD
- ✓ **Levofloxacin**: 250 -500 /d



### **Macrolides**

→ Macrolides are naturally occurring compounds , they have broad spectrum activity against gram positive and gram negative bacteria . these are used in patients who were allergic to penicillin or whose infections were penicillin resistant .

### Classification

### 1) Macrolides

- Erythromycin
- Clarithromycin
- Azithromycin
- Roxithromycin
- Spiramycin

### 2) Ketolides

• Telithromycin

### **Indications**

- Pneumonia
- Inflammation of nasal cavity
- Pertussis (Respiratory tract infection )
- Diphtheria ( inflammation of mucus membrane of throat )
- Pharyngitis
- Covid-19
- Syphilis and Gonorrhoea
- Tetanus
- Skin infection ointment.

### **Contraindications**

- ▲ Hypersensitivity
- ▲ Liver or kidney disease
- ▲ Myasthenia gravis
- ▲ Pregnancy and breastfeeding

- ✓ Erythromycin: 250 mg /d
- ✓ **Azithromycin**: 500-1500 mg/d



### **Tetracyclines**

- → Tetracycline is used to treat infections caused by bacteria including pneumonia and other respiratory tract infections; ; certain infections of skin, eye, lymphatic, intestinal, genital and urinary systems; and certain other infections that are spread by ticks, lice, mites, and infected animals.
- → It is also used along with other medications to treat acne.
- → Tetracycline will not work for colds, flu, or other viral infections.

### Classification

- ➤ Short acting (6 hours half life): Chlortetracycline, Oxytetracycline
- ➤ Intermediate Acting (16 hours half life): Demeclocycline.
- long acting (18-24 hours): Doxycycline, minocycline.

### **Indications**

- Acne
- Chlamydia
- Non-gonococcal urethritis
- Trachoma
- Lymphogranuloma venereum
- Plague
- Respiratory tract infections
- Certain infections of skin
- Eye
- Lymphatic
- Intestinal, genital and urinary system

### **Contraindications**

- ▲ Pregnancy and lactation
- ▲ Hypersensitivity
- ▲ In renal and hepatic failure

- ✓ Chlortetracycline: 250 mg /6 h
- ✓ Doxycycline : 100 -200 mg /d



### **Sulphonamides**

- → Sulphonamides were the first antimicrobial agents ( AMAs) , they are also known as Sulfa Drugs .
- → Sulfonamides (sulphonamides) are a group of man-made (synthetic) medicines that contain the sulfonamide chemical group .
- → They are bacteriostatic .
- → Many people use the term sulfonamide only for antibiotics However, there are several nonantibiotic sulfonamides that have been developed by observations These are used for a range of conditions such as diabetes and pain relief.

### Classification

- **Short acting ( 4-8 hours ) :** Sulfadiazine .
- ➤ Intermediate acting (8-12 hours) : Sulfamethoxaole, Sulfamoxole.
- Long acting (7 days): Sulfadoxine, sulfamethopyrazine.

### **Indications**

- **Bacterial infections :** eg, sulfamethoxazole / trimethoprim, sulfisoxazole
- Crohn's disease : eg, sulfasalazine
- Diabetes : eg, glyburide, tolbutamide
- Fluid retention : eg, chlorothiazide, furosemide, hydrochlorothiazide
- Gout : eg, probenecid
- **High blood pressure :** eg, chlorothiazide, hydrochlorothiazide
- Pain and inflammation : eg, celecoxib
- **Rheumatoid arthritis :** eg, sulfasalazine
- **Ulcerative colitis :** eg, sulfasalazine.

### **Contraindications**

- ♣ Pregnancy and lactation
- ▲ Hypersensitivity

- ✓ Sulfamethoxazole / trimethoprim : 800 mg 160 mg / d
- ✓ **Sulfones (Dapsone) :** 50-100 mg /d



### **Anti-Tubercular Drugs**

→ Anti-tubercular drugs are a group of medications used in the treatment of tuberculosis (TB), a bacterial infection caused by Mycobacterium tuberculosis.

### Classification

- 1) First Line Drugs
  - Isoniazid (H), Rifampin (R), Pyrazinamide (Z),
  - Ethambutol (E), Streptomycin (S).
- 2) Second Line Drugs
  - Thiacetazone (Tzn), Paraaminosalicylic acid (PAS),
  - Ethionamide (Etm), Cycloserine (Cys),
  - Kanamycin (Kmc), Capreomycin (Cpr). Amikacin (Am),
- 3) Newer Drugs
  - Ciprofloxacin, Ofloxacin, Clarithromycin,
  - Rifabutin. Azithromycin,

### **Indications**

- Tuberculosis
- Gaucher's disease
- Mycobacterium avium

### **Contraindications**

- ▲ Hypersensitivity,
- ▲ Acute and chronic alcoholism,
- ▲ Acute liver disease,
- ▲ People above 35 years,
- ▲ Seizure disorders,
- ▲ Lactating women
- ▲ Patients with kidney disorders,
- **▲** Pregnancy
- ▲ Hepatitis

- ✓ Isoniazid (INH):
  - Adult dose: 5 mg/kg to 15 mg/kg of body weight, up to a maximum of 300 mg per day
  - Pediatric dose: 10 mg/kg to 20 mg/kg of body weight, up to a maximum of 300 mg per day
- ✓ Rifampin (RIF):
  - Adult dose: 10 mg/kg to 20 mg/kg of body weight, up to a maximum of 600 mg per day
  - Pediatric dose: 10 mg/kg to 20 mg/kg of body weight, up to a maximum of 600 mg per day

### **Anti Fungal Drugs**

- $\rightarrow$  The drugs are used to treat Fungal Infections are called antifungal drugs .
- → Fungi most commonly affect Skin, hair and nails.
- → Fungi are neither plants nor animals, and are classified as their own kingdom.
- → Fungi grow either as yeasts (single round cells) or as moulds (many cells forming long, thin threads called hyphae).
- → Some fungi even go through both the forms during their life cycle. Many fungi, including bread moulds and mushrooms, can be seen with the naked eye.
- → Fungal infections are often caused by fungi present in the environment.
- → Most fungi are not dangerous, but some of them can be harmful.

### Classification

- I. Antibiotics: (Systemic)
  - **Polyenes**: Amphotericin B (AMB), Nystatin, Hamycin, and Natamycin (Pimaricin).
  - Heterocyclic Benzofuran : Griseofulvin.
- II. Antimetabolite: Flucytosine (5-FC).
- III. Azoles:
  - Imidazoles (Topical): Clotrimazole, Econazole, and Miconazole. (Systemic): Ketoconazole.
  - Triazoles (Systemic): Fluconazole, Itraconazole.
  - Allylamine: Terbinafine.

### **Indications**

- Fungal infections
- Onychomycosis
- Tinea capitis
- Cryptococcosis
- Prophylaxis

### **Contraindication:**

- **▲** Hypersensitivity
- ▲ Hepatic dysfunction
- ▲ Endocrine or fertility problems

- ✓ Fluconazole: 150-400 mg orally once daily
- ✓ Itraconazole: 200-400 mg
- ✓ Posaconazole : 300 mg orally twice daily
- $\checkmark$  **Amphotericin B :** Given intravenously, and the dose can range from 0.3-1.5 mg/kg/day.
- ✓ **Caspofungin**: 70 mg intravenously once on the first day.



### **Anti-Viral Drugs**

- → The drugs are used to treat viral infections are called antiviral drugs. Viruses are tiny capsules (smaller than bacteria) containing genetic material.
- → They cause common infectious diseases like common cold, flu, and warts; while they may also cause severe illnesses such as HIV/AIDS, smallpox, and haemorrhagic.
- → Viruses invade (enter, attack and take control of) the living, normal cells of an individual, and use them to multiply.
- → This ultimately kills the cells, and the individual becomes sick.
- → Since the viruses live inside the body's cells, treatment of viral diseases is hard.
- → Antibiotics cannot cure viral diseases, and a few antiviral drugs are available.
- → However, vaccines can prevent the occurrence of many viral diseases.

### Classification

- 1. **Anti-Herpes Virus :** Idoxuridine, Acyclovir, Triflu<mark>ridine, Ganciclovir, and Fosc</mark>arnet. Famciclovir, Valacyclovir, Penciclovir, Docosanol,
- 2. Anti-Retrovirus
  - Nucleoside Reverse Transcriptase Inhibitors (NRTIs): Zidovudine (AZT), Stavudine, Lamivudine, and Abacavir.
  - Non-Nucleoside Reverse Transcriptase Inhibitors (NNRTIs): Nevirapine, Efavirenz, and Delavirdine.
  - Retroviral Protease Inhibitors: Ritonavir, Indinavir, Nelfinavir, Saquinavir, Amprenavir, and Lopinavir.
- 3. Anti-Influenza Virus: Amantadine, and Rimantadine.
- 4. Non -Selective Anti Viral drugs : Ribavirin , Lamivudine,

### **Indications**

- Influenza A viruses, Herpes viruses
- Cytomegalovirus (CMV) Infection, HIV Infection
- Hepatitis B and C viruses, Some viruses cause warts and Eye infections.

### **Contraindications**

- ▲ Previous history of allergy to the drug, Renal impairment
- ▲ Pregnancy and lactation,
- ▲ Severe CNS disorders
- ▲ Hepatic dysfunction, Bone marrow suppression

- ✓ **Acyclovir**: Adults is 200 mg five times daily or 400 mg three times daily for 5-10 days.
- ✓ **Oseltamivir**: Adults and adolescents weighing 40 kg or more is 75 mg twice daily for 5 days.
- ✓ **Ribavirin**: Oral dose for adults is 600 mg twice daily for 3-7 days.



### **Anti- Amoebic Agents**

- → The drugs are used to treat Amoebiasis Infection are called Anti- Amoebic agent.
- → Amoeba is a Parasite which affects intestine and extraintestinal parts of the body including lungs , liver and brain.

### Classification

- 1) Tissue amoebicides
  - a. For intestinal and Extraintestinal amoebiasis:
    - NItroimidazoles: \*Metronidazole, Tinidazole, Ornidazole.
    - Alkaloids: \*Emetine and Dehyroemetine.
  - b. For extraintestinal Aboebiasis only: \*Chloroquine.
- 2) Luminal Amoebicides:
  - a. Amides: Diloxanide furomate, Nitazoxanide.
  - b. Antibiotics: Tetracycline, Paramomycin.

### Indication

- Amoebiasis
- Giardiasis
- Trichomoniasis (sexually T.D.)
- Anaerobic bacterial Infection
- H. Pylory Infection

### Contraindication

▲ Individuals who have encountered certain blood disorders, pregnant women, and alcoholics are advised against consuming antiamoebic agents

- ✓ Metronidazole: Adults—500 or 750 milligrams (mg) 3 times a day for 5 to 10 days
- ✓ IV: 15 mg/kg
- ✓ Capsule: 375mg

### **Anthelmintic Drugs**

- → Anthelmintics are a type of medicine that kills helminths. Helminths are worm-like parasites such as flukes, roundworms, and tapeworms.
- → It is important that anthelmintics are selectively toxic to the parasite and not the host.
- → Some work by inhibiting metabolic processes that are vital to the parasite but absent or not vital in the host.

### Classification

- **Benzimidazoles**: Albendazole, Mebendazole. Flubendazole.
- > Hetrocyclics : Oxamniquine .
- **Piperazine derivatives :** Piperazine citrate.
- > Amides : Niclosamide
- > Natural Product : Ivermectin

### **Indications**

- Hookworm
- Roundworm
- Pinworm
- Liver Fluke
- Tapeworm

### **Contraindications**

- ▲ Pregnancy
- **▲** Breastfeeding
- ▲ Severe diarrhea
- ▲ Malnourishment
- ▲ Hepatic or renal diseases

- ✓ Albendazole 400 mg taken once daily for 1-3 days for most types of infections.
- ✓ Mebendazole is 100 mg taken twice daily for 3 days for most types of infections. For whipworm infections
- ✓ Pyrantel is 11 mg/kg (up to a maximum of 1 g) taken as a single dose for most types of infection

### **Anti- Malarial Agents**

- → The drugs are used to treat malaria are called anti- malarial drugs .
- → Malaria is a life-threatening disease, transmitted through the bite of an infected female Anopheles mosquito, carrying the Plasmodium parasite.
- → The infected mosquito releases the parasite in the blood by biting an individual

### Classification

- **4-Aminoquinolines :** Chloroquine, Amodiaquine, and Piperaquine.
- **Quinoline-Methanol**: Mefloquine.
- **Cinchona Alkaloid :** Quinine and Quinidine.
- **Biguanides**: Proguanil (Chloroguanide) and Chloroproguanil.
- Diaminopyrimidines: Pyrimethamine.
- 8-Aminoquinolines : Primaquine and Bulaquine.
- > Sulfonamides and Sulfone: Sulfadoxine, Sulfamethopyrazine, and Dapsone.
- **Tetracyclines**: Tetracycline and Doxycycline.
- > **Sesquiterpene Lactones**: Artesunate, Artemether, and Arteether.
- > Amino Alcohols : Halfofantrine and Lumefantrine.

### **Indications**

- Malaria
- Chloroquine is used with metronidazole in amoebiasis.
- It is used in giardiasis
- Chloroquine is used in Arrhythmias
- In rheumatoid arthritis

### Contraindication

- ▲ Nausea and vomiting
- ▲ Headache
- ▲ Dizziness
- ▲ Fatigue
- ▲ Malaise (feeling of discomfort)
- ▲ Muscular pain (Myalgia)
- ▲ Diarrhea, Cough, Fever and chills

- ✓ **Chloroquine :** Adults- 500 mg once a week for malaria.
- ✓ **Quinine :** Adults- 600 mg every 8 hours for 7 to 10 days for treatment of malaria.
- ✓ Mefloquine : Adults- 250 mg once a week.



### **Anti -Neoplastic Agents**

→ The drugs are used to treat cancer are called anti-neoplastic agents . Cancer is a disease characterised by abnormal and uncontrolled cell division attacking the surrounding tissues and organs, and also the other body parts by circulating with blood and lymph

### Classification

### 1) Alkylating agents

- Nitrogen mustards: Mechlorethamine (Mustine HCI), Ifosfamide, Cyclophosphamide, Chlorambucil, and Melphalan
- Ethylenimine: Thio-TEPA
- Alkyl sulfonate : Busulfan
- Nitrosoureas : Carmustine (BCNU) and Lomustine (CCNU)
- Triazine : Dacarbazine (DTIC)

### 2) Antimetabolites

- Folate antagonist : Methotrexate (Mtx)
- Purine antagonist : 6-Mercaptopurine (6-MP), 6-Thioguanine (6-TG), and Azathioprine
- Pyrimidine antagonist : 5-Fluorouracil (5-FU) and Cytarabine (cytosine arabinoside)

### 3) Natural Products

- Vinca alkaloids: Vincristine (Oncovin) and Vinblastine
- Taxanes : Paclitaxel and Docetaxel
- Epipodophyllo toxin : Etoposide
- Camptothecin analogues: Topotecan and Irinotecan
- 4) **Antibiotics:** Actinomycin D, Dactinomycin, Doxorubicin, Daunorubicin, Rubidomycin, Mitoxantrone, Bleomycin, Mitomycin C, and Mithramycin
- 5) Enzymes: Asparaginase
- 6) Miscellaneous: Hydroxyurea, Procarbazine ,L-Asparaginase, Cisplatin, and Carboplatin
- **7) Hormone** Balance altering gents
  - Glucocorticoids : Prednisolone
  - Estrogens : Fosfestrol and Ethinylestradiol
  - Antiestrogen : Tamoxifen
  - Antiandrogen : Flutamide
  - 5- $\alpha$  reductase inhibitor : Finasteride
  - GnRH (Gonadotropin Releasing Hormone) analogues: Nafarelin and Goserelin
- 8. Radioactive Isotopes: Sodium phosphate, Sodium iodide, and Radio gold solution



### **Indications**

- Breast Cancer
- Ovarian cancer
- Cervical cancer
- Blood cancer
- Neck carcinomas ( cancer of epithelia tissues )
- Certain lymphomas
- Bladder cancer
- Mechlorethamine is used in Bone Marrow Cancer Like Polycythemia , Leukemia Thrombocythemia .
- Cyclophosphamide is mostly used for treating different cancers .
- Vinblastine sulphate is used to treat neuroblastoma (cancer of adrenal gland), testicular cancer, kapsosi's sarcoma (cancer of soft tissues with lesions)

### **Contraindications**

- ▲ Previous history of allergy
- ▲ Pregnancy and lactation
- ▲ Bone marrow suppression
- ▲ Renal and hepatic disorders
- ▲ GI ulceration

### **Doses**

- ✓ Cisplatin : 20mg/m² I.V
- ✓ Tamoxifen: 20-40 mg/day
- ✓ Doxorubicin 50 mg/m² I.V 4 Weeks

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