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DVM 722 Department of Veterinary Medicine

Veterinary Pharmacology
The course is designed to address the following areas:

Offered Fall

4 Credit

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Specify now students will be evaluated, what factors will be included, their relative value, and they will be tabulated into
GRADES (On a curve, absolute scores, etc.) Publicize UAF regulations with regard to the grades of "C" and below as applicable to this course. (Not required in the syllabus, but is a convenient way to publicize this.) Link to PDF summary of grading policy for "C": <a href="http://www.uaf.edu/files/uafgov/Info-to-Publicize-C_Grading-Policy-UPDATED-May-2013.pdf">http://www.uaf.edu/files/uafgov/Info-to-Publicize-C_Grading-Policy-UPDATED-May-2013.pdf</a>
11. Supraid Services:  Describe the student support services such as theoring (local and/or regional) appropriate for the course.
12. Disabilities Services: Note that the phone# and location have been updated. <a href="http://www.uaf.edu/disability/">http://www.uaf.edu/disability/</a> the Office of Disabilities Services implements the Americans with Disabilities Act (ADR), and ensures that UAF students have equal access to the campus and course materials.
State that you will work with the Office of Disabilities Services (208 WHITAKER BLDG, 474-5655) to provide reasonable accommodation to students with disabilities.
F/21/2002

5/21/2013

# **DVM 722 VETERINARY PHARMACOLOGY**

## SYLLABUS - Fall Year 2

# Department of Veterinary Medicine, University of Alaska Fairbanks

1. Course Information:

Title:

Veterinary Pharmacology

Number:

DVM 722

Credit:

4

Prerequisites:

Successful Completion of First Year Veterinary Medical Program

Location:

TBC

Meeting time:

TBD

2. Instructor Contact Information:

Name:

Dr. Todd O'Hara

Office Location:

182 Arctic Health Research Building

Office Hours:

By appointment

Office Phone:

474-1838

Email:

tmohara@alaska.edu

Email is the best way to reach the instructor. You should receive a response to your email within 24 hours when it is received. If you do not receive a reply within this time frame, assume that the email was not received and please resend your message.

3. Course Reading/Materials:

Reading: None required. Reading and study material will be provided by the instructor, such as selected articles.

Recommended

- Veterinary Pharmacology and Therapeutics. Riviere and Papch. 9th edition. Wiley-Blackwell.
   2009. ISBN: 978-0-8138-2061-3
- *Plumb's Veterinary Drug Handbook.* Plumb, Donald C. 7th edition. Wiley-Blackwell. 2011. ISBN: 978-0-4709-5964-0

### Course Description:

DVM 722 The course is designed to address the following areas:

- Basic principles of pharmacology: Pharmacokinetics, pharmacodynamics, characteristics of selected classes of drugs and their basic mechanisms of action, etc. Individual agents will be introduced to provide examples, but providing highly detailed information on specific agents such as doses is not our objective.
- **Proper and effective use of drugs:** This will introduce the basics of veterinary clinical therapeutics for selected classes of agents including selected species differences in drug response,

side effects, toxicity, contraindications, interactions, and selected areas of pathophysiology.

#### 5. Course Goals:

The goals of this course are to provide students with information on major drug classes and their action as they apply to veterinary medicine. The students will learn about drug effects, drug uptake distribution and elimination of drugs, and drug toxicity of major drugs used in veterinary medicine.

### 6. Learning outcomes

At the end of the course the Students will:

### Drug effects

- 1. Be able to describe the important characteristics of a receptor.
- 2. Be able to describe the relationship between [drug], binding to receptors and effect using a dose-response curve.
- 3. Be able to compare & contrast potency and efficacy.
- 4. Be able to compare & contrast agonists and antagonists.
- 5. Be able to describe classes of simple signal transduction pathways.
- 6. Be able to describe three situations where binding of drugs to receptors is not proportional to drug effect.

### Drug effects 2

- 1. Be able to contrast the effects of competitive and noncompetitive antagonists on the doseresponse curve of an agonist.
- 2. Be able to explain the effects of partial agonists, inverse agonists etc. using a receptor model where active and inactive receptors are in equilibrium.
- 3. Be able to describe how the ED50 may be lower than the Kd for a drug in the case of spare receptors.
- 4. Be able to explain how a cumulative distribution curve (quantal, population) may be used to explain the effects of different doses of a drug in a population.
- 5. Be able to define therapeutic index and compare the safety of drugs with different therapeutic indexes.
- 6. Be able to define the therapeutic window of a drug using dose-response and toxicity curves.
- 7. Be able to define down regulation, tolerance, and tachyphylaxis.

### Uptake & distribution

- 1. Be able to describe the general characteristics/advantages of each of the following routes of administration: i.v. bolus, i.v. infusion, subcutaneous, intramuscular, intraperitoneal, pulmonary and oral.
- 2. Be able to describe which processes (uptake, elimination) predominate in regions of a curve describing the blood levels of a single dose of drug given orally.
- 3. Be able to describe which processes (uptake, elimination) predominate in regions of a curve describing the blood levels of multiple doses of drug given orally.
- 4. Be able to define bioavailability.
- 5. Be able to describe the characteristics of a drug that allow it to penetrate a biological membrane/epithelium.
- 6. Be able to describe how changes in pH affect movements of acidic and basic drugs across membranes.
- 7. Be able to define:
  - a. "First pass" effect of the liver on drugs.
  - b. Volume of distribution
  - c. Central & peripheral compartments

8. Be able to describe the effect of the binding of drugs to plasma proteins on the binding of drugs to receptors.

#### Elimination

- 1. Be able to describe how Phase I and Phase II reactions by the liver may decrease the concentration of a drug in the body. Be able to recognize some of the typical types of reactions that occur in each phase.
- 2. Be able to describe how excretion of drugs by the kidney and liver may decrease the concentration of a drug in the body.
- 3. Be able to compare and contrast the mechanisms by which filtration and secretion move drugs from the blood into the urine.
- 4. Be able to define the 3 measures of elimination (half-life, clearance, and the rate constant of elimination). How are they related?
- 5. Be able to use half-life and clearance to predict changes in drug concentration.

#### Blood concentrations

- 1. Be able to describe in approximate terms how blood levels of a drug will vary over time if the drug is given by i.v. bolus or by continuous rate of infusion.
- 2. Be able to describe how the steady state blood concentrations are related to the half-life of a drug.
- 3. Be able to describe the effect of increasing the dose rate on the steady state plasma concentration.
- 4. Be able to describe how giving repeated doses rather than continuous infusion affects the steady state levels of a drug.
- 5. Be able to describe/calculate the effects of the following on steady state concentrations:
  - a. Dosage
  - b. Dose interval
  - c. Bioavailability
  - d. Clearance (or half-life or rate constant of elimination)
- 6. Be able to describe/calculate the effects of the following on the fluctuations induced by repeated doses at steady state:
  - a. Dose interval
  - b. Half-life (or clearance or rate constant of elimination)
  - c. Slow absorption
- 7. Be able to define a loading dose and describe why it is useful.

### Variance & transporters

- 1. Be able to list three factors whose variations contribute to the typical 9-fold range in blood-levels (pharmacokinetics) seen in many drugs.
- 2. Be able to explain using a population dose-response curve and a dose-toxicity curve how variation may contribute to adverse effects.
- 3. Be able to describe how changes in receptor number or prior changes in the activity of signal transduction pathways can lead to pharmacodynamic variability.
- 4. Be able to contrast the types of molecules that move across membranes without transporters with those that may be carried across membranes by transporters. Which type is saturable?
- 5. Be able to list important drugs transported by the p glycoprotein and explain how variations in p glycoprotein expression contribute to toxicities.
- 6. Describe where in the kidney transporters are important for drug secretion.

### Adverse drug reactions

- 1. Be able to distinguish between the different types of adverse drug reactions.
- 2. Be able to use a population dose-response curve to estimate what fraction of animals remains unresponsive at any dose and explain how this may contribute to ineffective drug therapy.
- 3. Be able to describe the mechanisms by which a drug could produce atopy (rash), anaphylactic shock, cytotoxicity and other types of hypersensitivity.
- 4. Be able to define a therapeutic ratio. If you are given a dose-response curve and a dose-toxicity curve, at a given dose be able to estimate what fraction of animals are responding to the drug and what fraction of animals are showing a toxic reaction.

### Special populations

- 1. Be able to describe qualitatively the most accurate way to adjust drug dosage for differences in animal size. Predict whether large/small animals are under/overdosed if drug doses are calculated using the weight of the animal.
- 2. Be able to describe how liver disease may alter drug levels through changes in:
  - a. metabolic rate
  - b. blood protein binding
  - c. secretion of drug in bile

At what level does liver damage cause clinically significant changes in drug levels?

- 3. Be able to describe how renal disease may alter drug elimination. What clinical test(s) give you a good estimate of renal function?
- 4. Be able to describe how drug levels and responses may be altered in neonates and old animals.

### **Toxicity**

- 1. Be able to describe receptor mediated and non-receptor mediated toxicities.
- 2. Be able to describe excitotoxicity and acetaminophen toxicities.
- 3. Be able to contrast pharmacology and toxicology.

### Autonomic drugs

- Be able to diagram the autonomic nervous system.
  - general synaptic organization, major receptors and neurotransmitters
- · Understand basic autonomic neurotransmitter metabolism.
  - acetylcholine, norepinephrine/epinephrine
- · Understand general receptor signal transduction mechanisms.
  - nicotinic, muscarinic, cholinergic, adrenergic receptors
- Know autonomic effects at target organs.
  - heart, blood vessels, lungs, gastrointestinal, urinary bladder, eye
- For specific autonomic drugs know:
  - generic name and drug class (i.e. what receptors they influence)
  - target organ effects (desired and undesired)
  - general clinical considerations (emphasize critical care)
- Specific autonomic drugs:

adrenergic agonists	adrenergic antagonists		
epinephrine (α1, β1, β2; endogenous)	phenoxybenzamine (α1, α2; non-competitive)		
norepinephrine (α1, β1; endogenous)	phentolamine (α1, α2; competitive)		
dopamine (D1, β1, (α1); endogenous)	prazosin (α1)		
dobutamine (β1)	atipamezole (α2)		
albuterol (β2)	propranolol (β1, β2)		
clenbuterol (β2)	timolol (β1, β2; ocular for glaucoma)		

phenylephrine (α1)	atenolol (β1)
medetomidine (a2)	

cholinergic agonists	cholinergic antagonists		
acetylcholine (direct; endogenous)	atropine		
muscarine (direct)	scopolamine		
pilocarpine (direct)	ipratropium		
bethanechol (direct; some M3 selectivity)	glycopyrrolate		
physostigmine (AChE inhibitor; indirect)	tropicamide		
neostigmine (AChE inhibitor; indirect)	propantheline		

### Neuromuscular junction blockers (one lecture)

- Understand the basic functional components of the neuromuscular junction.
  - acetylcholine, nicotinic receptor, acetylcholinesterase
- Understand the mechanistic differences between depolarizing and non-depolarizing NMJ blocking drugs.
  - nicotinic receptor agonists (depolarizing) vs. competitive antagonists (non-depolarizing)
- Know general clinical considerations of NMJ blocking drugs:
  - clinical uses
  - monitoring of NMJ block (e.g. train-of-four)
  - toxicity (histamine release, ganglionic blockade, anticholinergic activity, malignant hyperthermia, hyperkalemia)
  - problem with monitoring depth of anesthesia during NMJ block
- Understand reversal of NMJ blockade
  - depolarizing vs. non-depolarizing NMJ blocking drugs
- For specific NMJ blocking drugs know:
  - general duration of action (short, long, etc.)
  - metabolism and elimination (also factors which with these processes)
  - drug-specific degrees of toxicity (ganglionic blockade, etc.)
- Specific NMJ blocking drugs:

depolarizing NMJ blockers	nondepolarizing NMJ blockers	
succinylcholine (short lasting)	pancuronium (long lasting)	
	atracurium (intermediate)	
	mivacurium (short lasting)	

### 7. Instructional Methods:

The course is designed based on the scientific teaching method. This method includes active learning and group activities as well as formative assessments. The students are expected to read assigned material ahead of class so that class time can be spend on discussion of assigned reading, problem solving as well as other active learning activities. Formative assessment will be used throughout the course to help students judge their learning progress and help identify areas in need of focused attention.

This course will use Blackboard (classes.uaf.edu) to make additional information available. All information associated with this course will be posted there, including lecture notes, slides, handouts, or study guides etc.

#### 8. Course Calendar:

See tentative lecture schedule at end of syllabus.

#### 9. Course Policies:

### Attendance:

Students are expected to attend all classes. Exams will draw on lecture material and students that do not attend class will likely not to do well in exams.

### Classroom Behavior:

Any type of behavior in the classroom that is disruptive, distracting, or disrespectful to the instructor or to your fellow students will not be tolerated and will result in dismissal from the classroom. This includes, but is not limited to, disrespectful comments, and the use of tobacco products. All cell phones or other such devices must silenced while in the classroom. Do not browse the Internet, text message or IM while in the classroom. You can use such devices for note taking or other class related activities.

### Plagiarism:

Plagiarism is the overt or covert use of other people's work or ideas without acknowledgement of the source. This includes using ideas or data from a classmate or colleague without permission and acknowledgement, including sentences from journal articles in your writing without citing the author, or copying parts of a website into your essay. Plagiarism and cheating are serious offenses that violate the student code of conduct which may result in an "F" in the course and/or referral to the university disciplinary committee.

### 10. Evaluation:

The evaluation will be based on 4 exams. That are weighted equally.

### Grades will be calculated on a 100-point scale.

A+	96-100	%
Α	92-95.9	%
Α-	88-91.9	%
B+	84-87.9	%
В	80-83.9	%
B-	76-79.9	%
C+	72-75.9	%
С	68-71.9	%
C-	64-67.9	%
D	60-63.9	%
F	<60	%

All exams must be taken at the scheduled time. Exams cannot be taken before or after the scheduled date/time. If you miss an exam, you will receive a zero as your grade.

\*Note: If you have a conflict due to a university-sponsored event, you must notify me prior to the exam with a confirmation letter from University authority. If you miss an exam for medical reasons you need to inform the instructor as soon as possible and provide a statement from a licensed physician.

### 11. Support Services:

If you require more assistance than can be provided in class, and office hours, you may want to contact Student Support Services (<a href="http://www.uaf.edu/sssp/">http://www.uaf.edu/sssp/</a>) or the Department of Veterinary Medicine for assistance.

#### 12. Disability Services:

All students, including those with disabilities, are welcome in this course, and we are committed to providing equal access to this course for all students. If you have a disability (including learning disabilities) please inform us during the first week of class so that we can accommodate your specific needs. If you have not already done so, you will also need to contact UAF's Office of Disabilities Services (474-5655). Everyone should have the opportunity to participate fully in the course and to complete assignments and exams to the best of their ability. If accommodations are needed to enable you to do so, we will gladly work with you to provide them.

### **Tentative Lecture Schedule**

DATE: TOPIC

August TBD Capstone Exam at CSU

Week 1 Drug Effects

Uptake & Distribution

Week 2 Elimination

Blood concentrations Variability & transport Adverse drug reactions

Week 3 Drug toxicities

Special patient populations

Exotic populations

Week 4 EXAM 1

Introduction to autonomic pharmacology Cholinergic agonists & antagonists Neuromuscular junction blockers

Week 5 Adrenergic agonists

Adrenergic antagonists

Autonomic drugs & critical care

Week 6 Cardiac electrophysiology

**Antiarrhythmics** 

Modulators of cardiac contraction

Week 7 Opioids

Phenothiazines & alpha-2 agonists

Injectable anesthetics

Week 8 Anticonvulsants

Inhalation anesthetics Local anesthetics

Week 9 Exam 2

Cancer chemotherapy

Antimicrobial pharmacokinetics/pharmacodynamics

Week 10 Quinolones, flexible dosing & package inserts

Antiparasitics

Week 11 Penicillins & cephalosporins

Tetracyclines, choloramphenicol & aminoglycosides

Sulfonamides (& trimethoprim) & macrolides

Miscellaneous antibacterial drugs

Week12 EXAM 3

Gastrointestinal therapeutics Antifungals & antivirals

Week 13 Antimicrobial review / summary

Capstone cases

Week 14 Capstone cases

EXAM 4 As scheduled by University