

Anti-tubercular drugs
OR
ANTI MYCOBACTERIAL DRUGS



Tuberculosis :

- Tuberculosis is a kind of *communicable chronic disease* caused by *M.tuberculosis* which can invade various *tissues* and organs of the whole body.
- The mycobacteria are *slow-growing intracellular bacilli* that cause tuberculosis.



Symptoms and Signs:

1. Malaise
2. Anorexia
3. Weight loss
4. Fever
5. Night sweats
6. Chronic cough, blood with sputum
7. Rarely, dyspnea



ANTI-TUBERCULOUS DRUGS

First-line

- Isoniazid
- Rifampicin
- Ethambutol
- Pyrazinamide
- Streptomycin

Second line drugs

- Thiacetazone (Tzn)
- Paraaminosalicylic acid (PAS)
- Ethionamide (Etm)
- Cycloserine (Cys)
- Kanamycin (Kmc)
- Amikacin (Am)
- Capreomycin (Cpr)



Newer drugs :

Ciprofloxacin

Ofloxacin

Clarithromycin

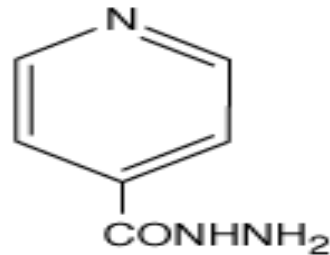
Azithromycin

Rifabutin

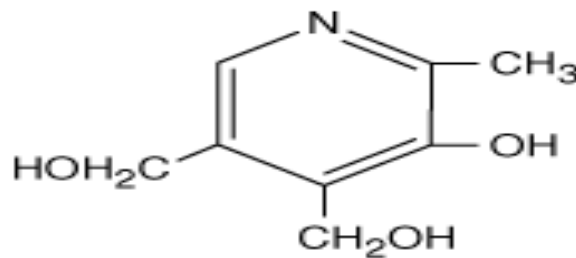


Isoniazid (INH)

- Most active drug
- Water soluble
- Similar to pyridoxine (Vit.B6)
- Good penetration to phagocytic cells



Isoniazid



Pyridoxine

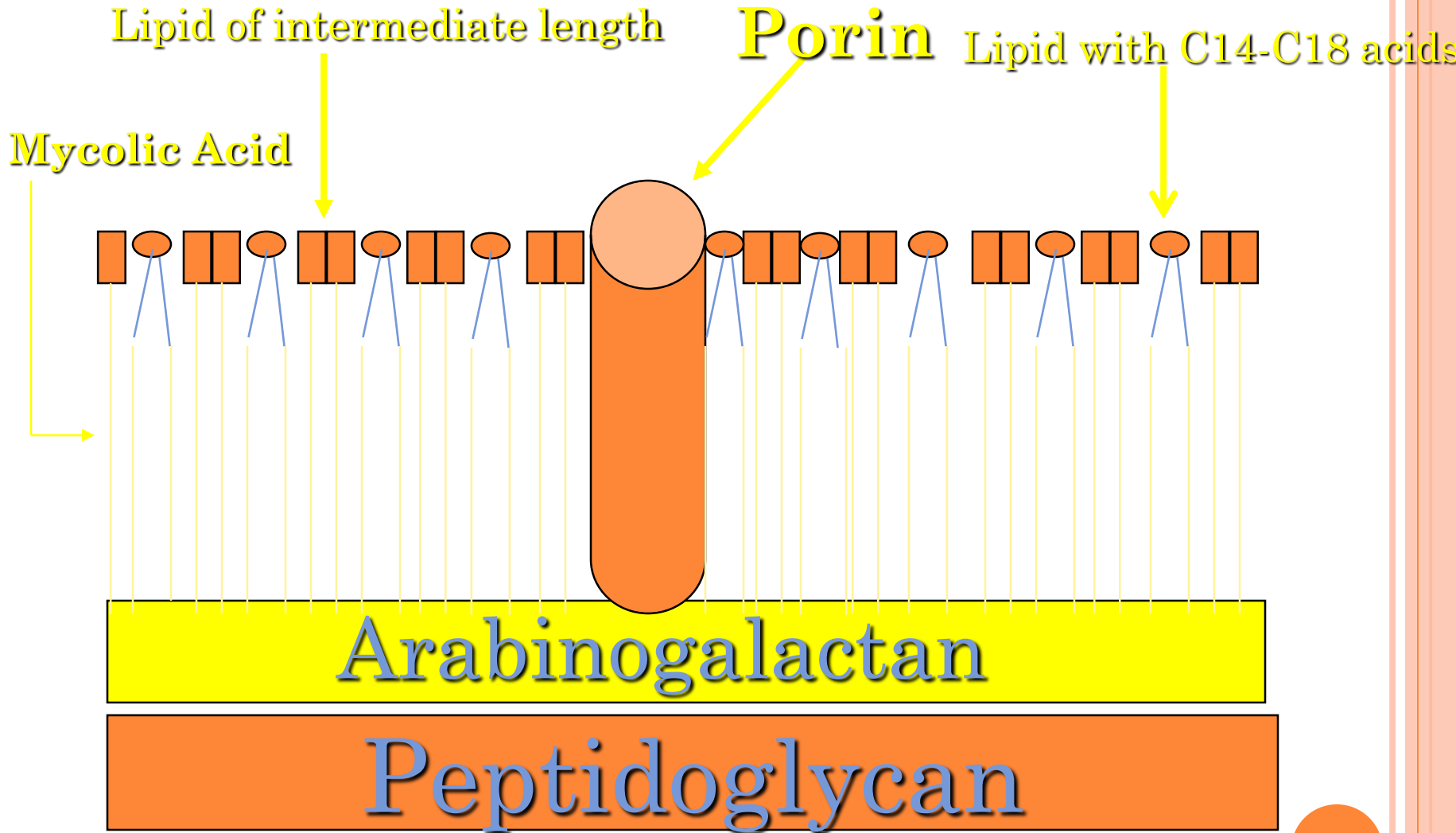


Isoniazid (INH): Mechanism of Action

- Prodrug: activated by KatG (Catalase peroxidase)
- Active form binds to Acyl carrier protein (AcpM), and KasA (beta-ketoacyl carrier protein synthase), covalently
- Inhibits synthesis of **mycolic acid** (unique to mycobacterial cell wall)
- Mycolate depleted cell walls are structurally weak.



MYCOBACTERIAL CELL WALL



**Isoniazid
(Prodrug)**

katG

Catalase/Peroxidase

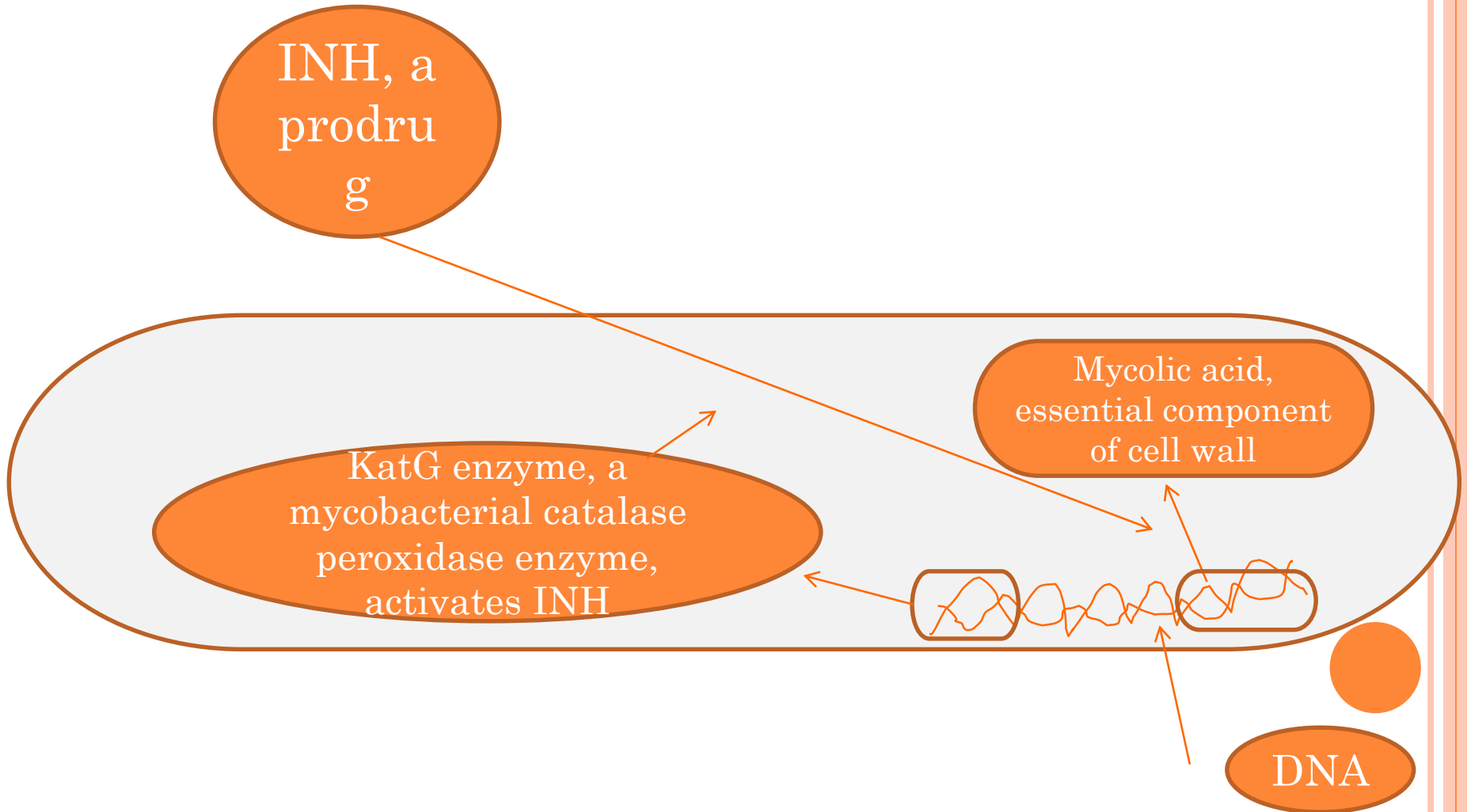
**Active
Form**

INH, a
prodrug

KatG enzyme, a
mycobacterial catalase
peroxidase enzyme,
activates INH

Mycolic acid,
essential component
of cell wall

DNA

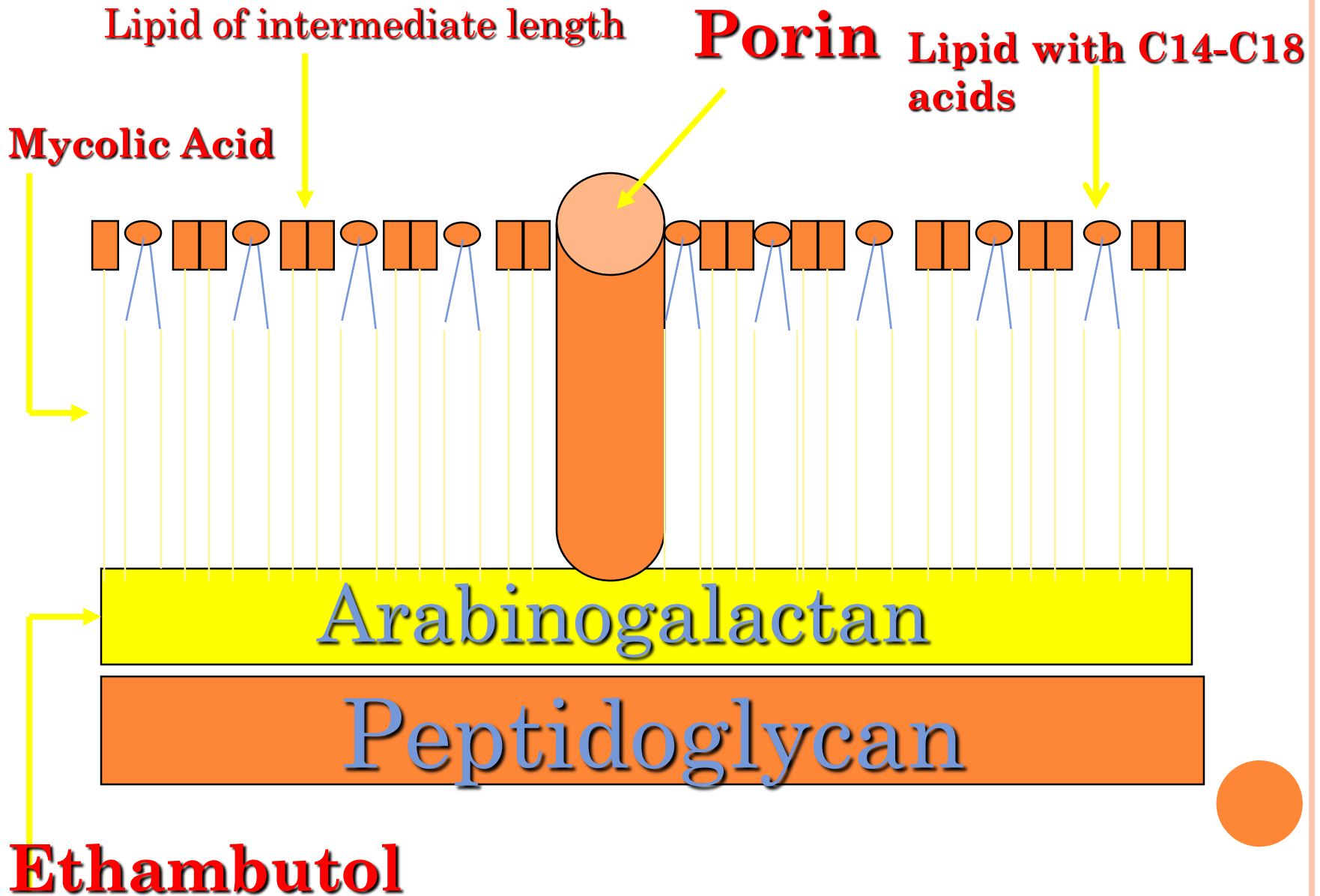


ETHAMBUTOL- MECHANISM OF ACTION

- It is not bactericidal.
- *Ethambutol* inhibits mycobacterial *arabinosyl transferases*.
- Arabinosyl transferases are involved in the polymerization reaction of *arabinoglycan*, an essential component of the mycobacterial cell wall.



MYCOBACTERIAL CELL WALL



PYRAZINAMIDE

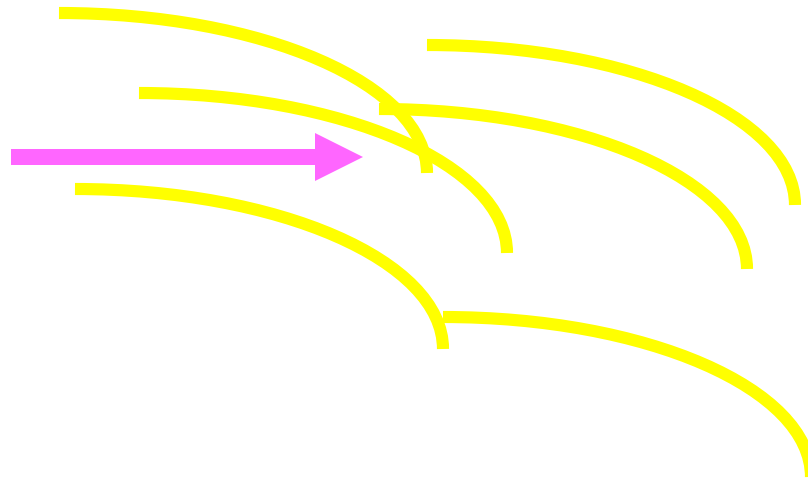
MECHANISM OF ACTION



- Inhibits *fatty acid synthetase I* of *Mycobacterium tuberculosis*.



Pyrazinamide



Short chain fatty acid precursors



STREPTOMYCIN

Streptomycin was isolated from a strain of *Streptomyces griseus*.

Mechanism of action:

- Like all Aminoglycosides, streptomycin irreversibly inhibits bacterial **protein synthesis**. Protein synthesis is inhibited in at least **three ways**:

1. interference with the initiation complex of **peptide** formation.
2. **Misreading of mRNA**, which causes incorporation of incorrect aminoacids into the peptide, resulting in a nonfunctional or toxic protein.
3. Breakup of polysomes into nonfunctional monosomes.

Note : **Polyribosomes** (or **polysomes**) also known as **ergosomes** are a cluster of ribosomes, bound to a mRNA molecule



MECHANISM OF ACTION:

Ethionamide blocks synthesis of *mycolic acids* in susceptible organisms.

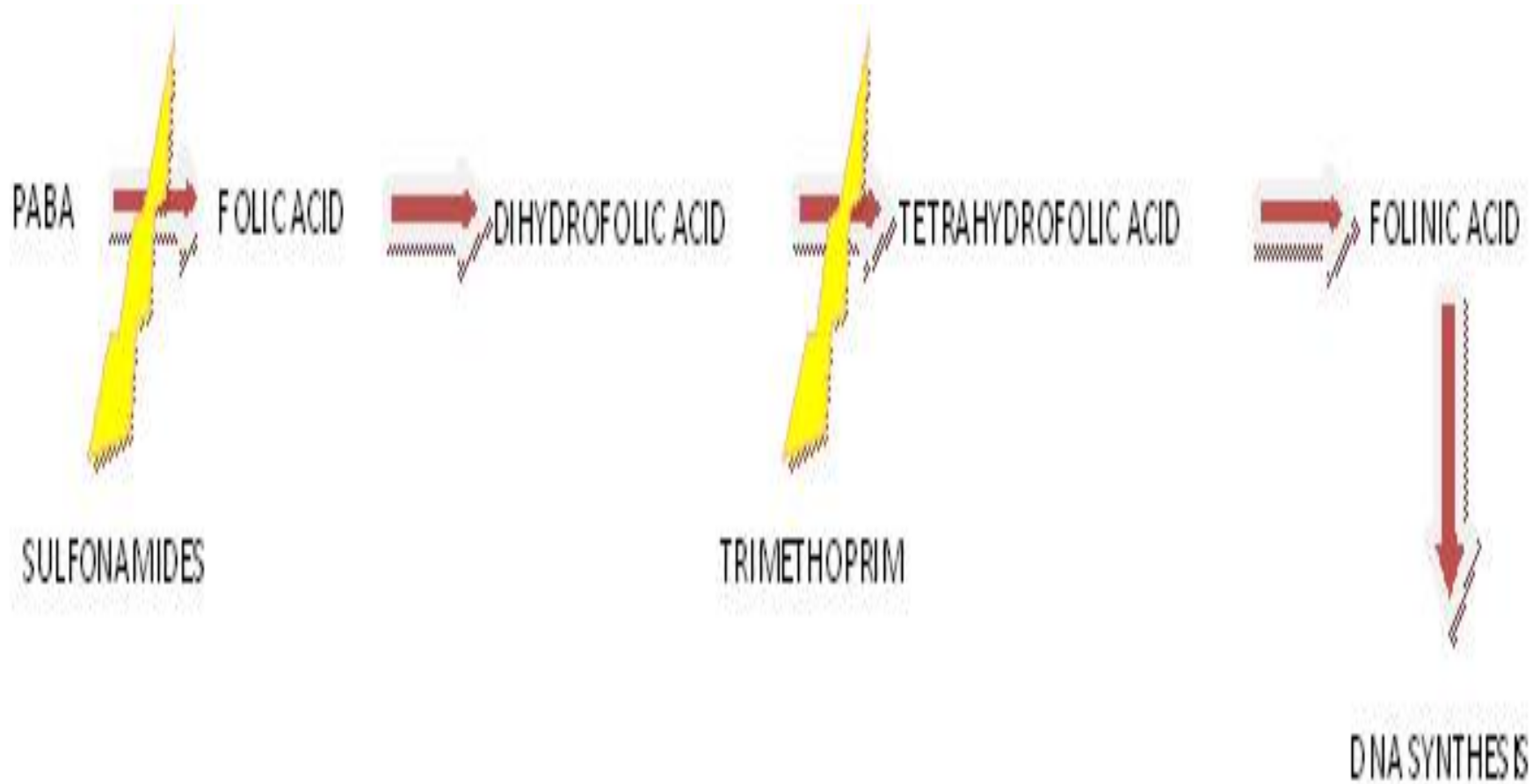


AMINOSALICYLIC ACID (PAS)

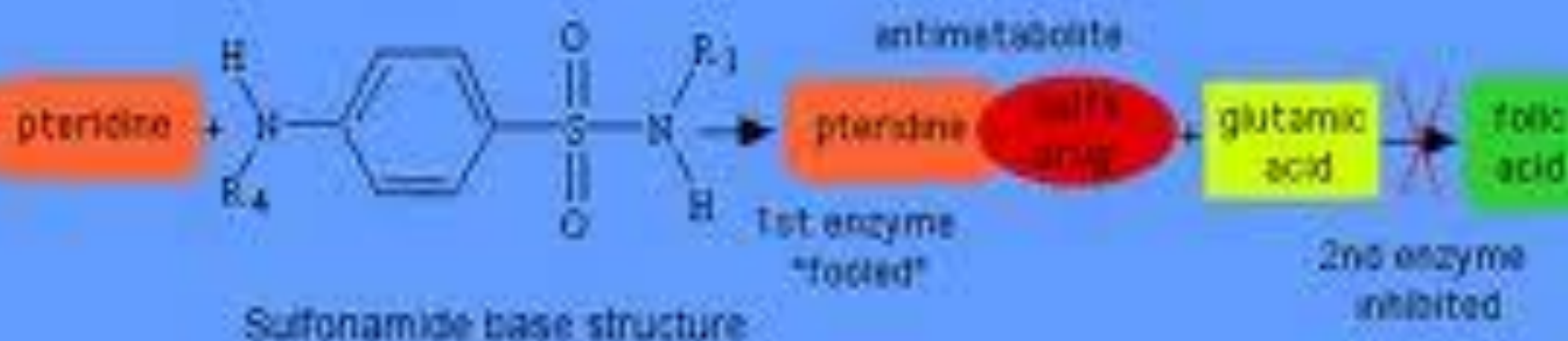
Aminosalicylic acid is a folate synthesis antagonist that is active almost exclusively against mycobacterium tuberculosis.

- it is structurally similar to p-aminobenzoic acid(PABA) and the sulfonamides.





Sulfa Drug - Antimetabolite



p-aminobenzoic acid + Pteridine

Sulfonamides

**Pteridine
synthetase**

Dihydropteroic acid

**Dihydrofolate
synthetase**

Dihydrofolic acid

Trimethoprim

**Dihydrofolate
reductase**

Tetrahydrofolic acid

Thymidine

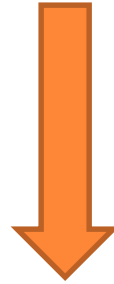
Purines

Methionine



Rifampicin :

RFP binds strongly to the β -subunit of *DNA-dependent RNA polymerase* and thereby inhibits *RNA synthesis*.



Inhibit protein synthesis





Thank you