

SERMs

Selective Estrogen Receptor Modulator

→ A group of drugs which are synthetic, non steroid with tissue selective estrogenic & Antiestrogenic Action (Agonist or Antagonist at Estrogen Receptors)

→ Drugs - Tamoxifen, Raloxifen, Toremifene

TAMOXIFEN:

- HDA:

- competitive Inhibitor of estradiol binding to estrogen Receptors. This will induce conformational change in Receptor, HSP dissociate, Inhibit ER dimerization.

⇒ Potent ER Antagonist at - Breast, blood vessel.

⇒ Potent ER Agonist - uterus, bone

Pharmacological ~~estrogen~~ Action

1) Antiestrogenic effect

- Inhibit breast cancer cell
- Hot flashes.

2) Estrogenic effect

→ ↑ bone mass density

- Reduce LPL, total
- venous.

PK - oral, long duration of action.
Biphasic half: 10 hours, 7 days.

Uses:

- Pre & postmenopausal breast cancer
- Proliferation of breast cancer is high risk factor female
- Postmenopausal osteoporosis.
- Met. infusing (Alternative to clomiphene)
- UCAID.

ADR:

- Hot flashes, vaginal bleed, menstrual irregularities, venous thromboembolism, depression

RALOXIFENE

Disrupted for Rx of proliferation of postmenopausal osteoporosis, later for breast cancer.

Estrogenic → bone, CVS.

- Antiestrogenic ⇒ breast, endometrium
- Has distinct DNA

11/10/20

→ Osteoporosis

→ Rx of prevention of skeletal fracture fractures.

→ Prevention of breast cancer

SERD

- Selective estrogen Receptor Down Regulator

- Fulvestrant

- Pure estrogen Antagonist

AROMATASE INHIBITORS:

- Anastrozole, Letrozole, Exemestane

MOA

→ Aromatisation of 'A Ring of testosterone of Androstenedione by Aromatase enzyme is the first key step of estrogen synthesis in body. This is imp in breast cancer

- Aromatase Inhibitor Reversibly Aromatisation allow in body, Resulting in total estrogen deprivation.

- Prevention of estrogen dependent breast cancer cell survival

→ 5th drug Revenues of early breast cancer

→ No Role of endocrine in hormone therapy, chemotherapy

Comparison

Tamoxifen Leuprorelide

- selective Action is tissue
 - Not used
 - Not used
 - Not used
- ✓ → Used in premenopausal breast
 - Not used
 - Not used
 - Not used
- Less effective in ER Receptor
 - More effective
 - Absent
 - Absent
- delaying disease progression
 - Acceleration
 - Acceleration
 - Acceleration
- Androgenic side effects, VTE Risk
 - No effect - Acceleration
 - No effect - Acceleration
 - No effect - Acceleration
- No bone loss
 - No effect - Acceleration
 - No effect - Acceleration
 - No effect - Acceleration
- Improve lipid profile
 - No effect - Acceleration
 - No effect - Acceleration
 - No effect - Acceleration

• Tamoxifen: Tamoxifen drug
• Chemopreventive agent, breast cancer (SMER) Analogue
(Antagonist of Agonist).

ANTI-PROGESTINS - Anti-progesterone

- Progesterone Receptor Modulators
- A 19 non-steroidal with potent Anti-progesterone,
Anti-glucocorticoid, Anti-androgenic Activity.

MAA:

- Partial Agonist And competitive Antagonist at
Progesterone Receptor.
- In follicular phase, it slows down follicle development

→ Cause decidua breakdown, detachment of the placenta and cervical softening

→ PG levels rise, At present anchoring changes.

→ Progesterone levels rise, it stimulates uterine contraction induce menstruation, thus induce Abortion.

PK → Oral, live metabolism, highly excretion.

Side Effects

1 → MTP upto 7 week with misoprostol, induction of labor.

2 → cervical Ripening - 24-30 hrs before surgical Abortion.

3 → Post-coital contraceptive. - 600mg of gem.

4 → one a month contraceptive.

5 → Induction of labor

6 → Lethargy syndrome - Due to Anticholinergic Activity.

7 → Endometriosis, Fibroid.

8 → Menorrhagia

9 → Breast cancer.

MTP → GI, bleeding, uterine cramps, failed Abortion

Name one pure Progesterone Antagonist

⇒ Mifepristone