

# The characteristics of the different routes of drug administration

# What Are the Different Routes of Administration?

- Oral
- Buccal
- Colonic
- Rectal
- Nasal
- Pulmonary
- Transdermal/ dermal
- Intravenous
- Subcutaneous
- Intramuscular

# Drug administration may be divided into major categories

## Enteral

- Drugs administered by way of the GIT

## Parenteral

- Drugs not administered via the GIT and are mostly given by injection (intra-arterial, intrathecal, intramuscular, etc...

## Others

- Topical: Drugs applied on the skin to any accessible epithelial membranes.

# Application 1 (15 min)

## Routes of drug Administration

- Discuss how the ORAL , compared to IV route of administration affects
  - The drug bioavailability
  - The onset of action

Give examples when possible

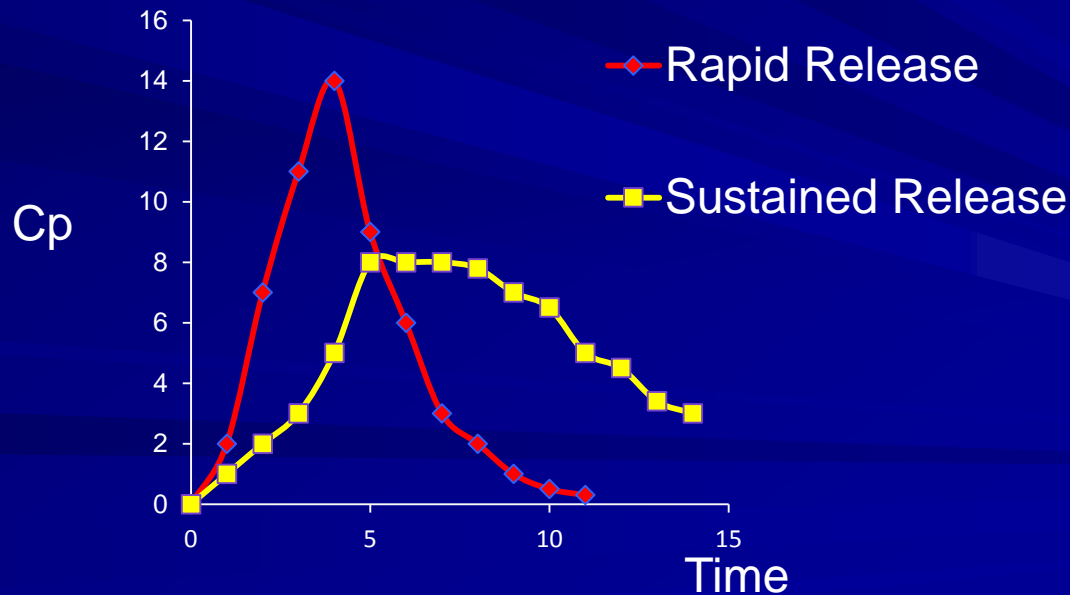
# Application 2 (15 min)

## Routes of drug Administration

- In designing a product in a specific route of administration, the following are important (explain with routes of administration examples).
  - Size of dose
  - Anatomic and physiologic characteristics of the administration site ( hint: blood flow and membrane permeability).
  - Physicochemical properties of the site (pH, physiological fluids)

# Extravascular Administration

- Same drug can be formulated in multiple dosage forms (same route of administration)



# Intravenous Injection

- Direct injection into a peripheral vein.
- Volume of injection: 1-100 ml
- IV infusion: large volume of fluid (100-1000ml)

Discuss the following in 10 minutes

- Precision of the dose.
- Onset of action
- Delivery of water insoluble drugs
- Delivery of suspensions

Discuss the following in 10 minutes

- The risks of IV



# Intra-arterial injection

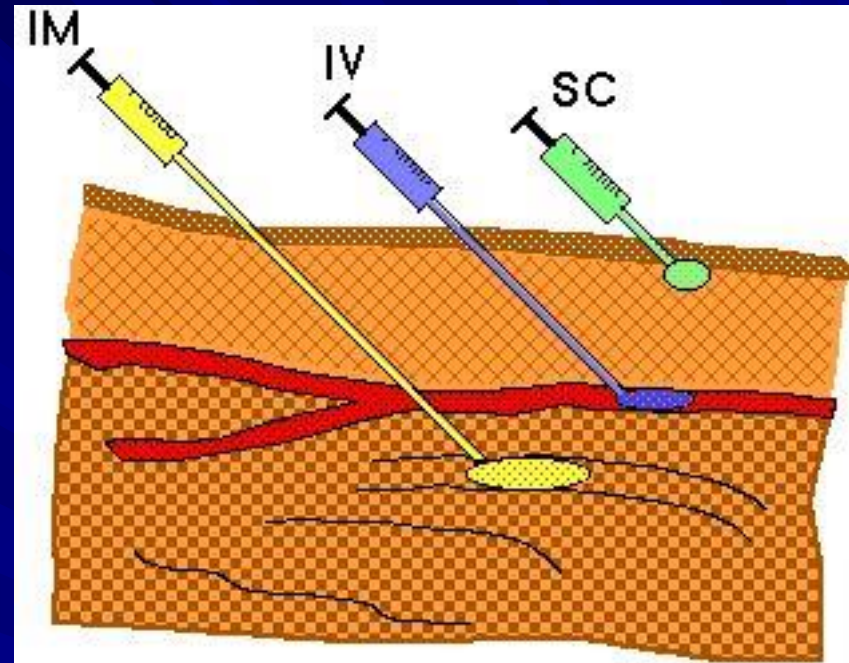
- Direct injection into the artery.
- Useful in .....?
- More caution is required to avoid overdose.

Can you think of another risk?



# Subcutaneous Administration

- Injection into a layer of fat immediately under the Dermis
  - Ex. ....-most important drug administered SC.
- Useful when (slow/fast?) and continuous absorption is required.
  - The formulation must be isotonic and at physiological pH. Why?

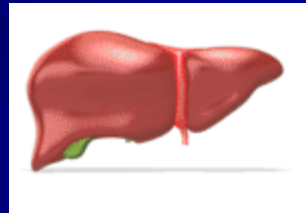


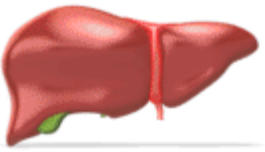
# Subcutaneous Administration

- Certain drugs are irritating and can cause severe injection site pain and tissue necrosis, so it is common practice to alternate between injection sites.
- The rate of distribution of the drug is largely dependent on blood flow **and can therefore be slowed by including a vasoconstrictor**. Warming or vigorous massage of the injection site will increase distribution of medication.
- **The rate of drug absorption is controlled by the blood flow and the site of drug administration.**

# Intramuscular injection

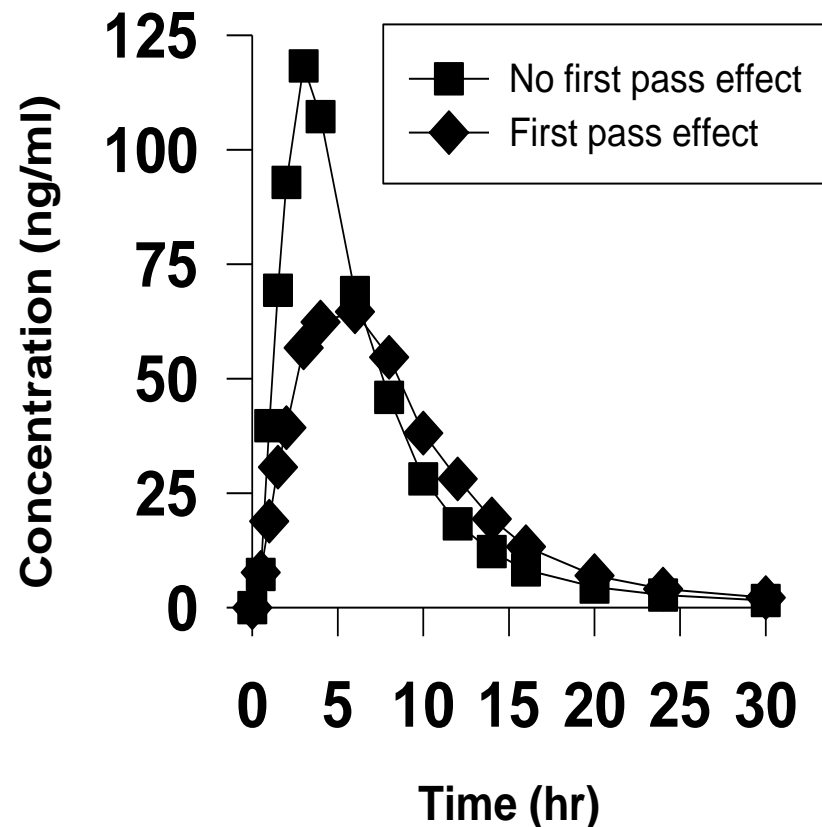
- Injection into the striated muscle fiber under the subcutaneous layer (pain at injection sites for certain drugs).
- Relatively (fast/slow?) rate of achieving therapeutic drug levels but depends on
- Absorption depends on (mention 2 factors)
- How about





# First Pass Metabolism

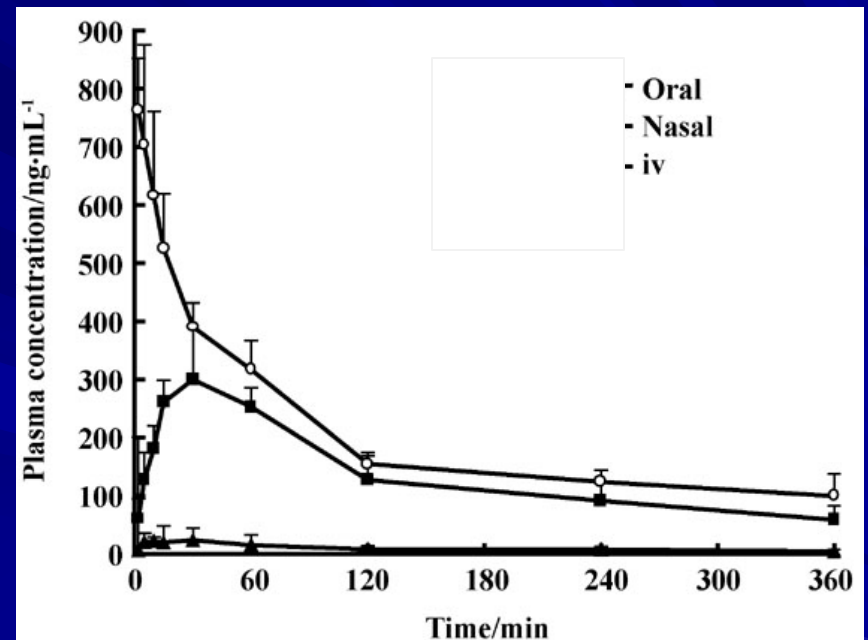
- The net effect of first pass effect is displayed in the following figure
- This figure depicts the effect of first pass metabolism **if** it was possible to turn the effect off and on.



# Case study

## (Application 3, 10 min)

- Nimodipine's oral bioavailability is relatively low due to.....
- Identify the profile corresponding to each of the three routes of administration (oral, nasal, or IV)



Distribution of nimodipine in brain following intranasal administration in rats



# Buccal or Sublingual Administration (Application 4, 15 min)

- Buccal: positioning the tablet in the cheek pouch
- Sublingual: positioning the tablet beneath the tongue.
- Discuss the first pass effect
- Is the absorption rapid or slow?
- What are other factors that may affect the bioavailability?
- Can you think of few disadvantages?

# Oral Administration

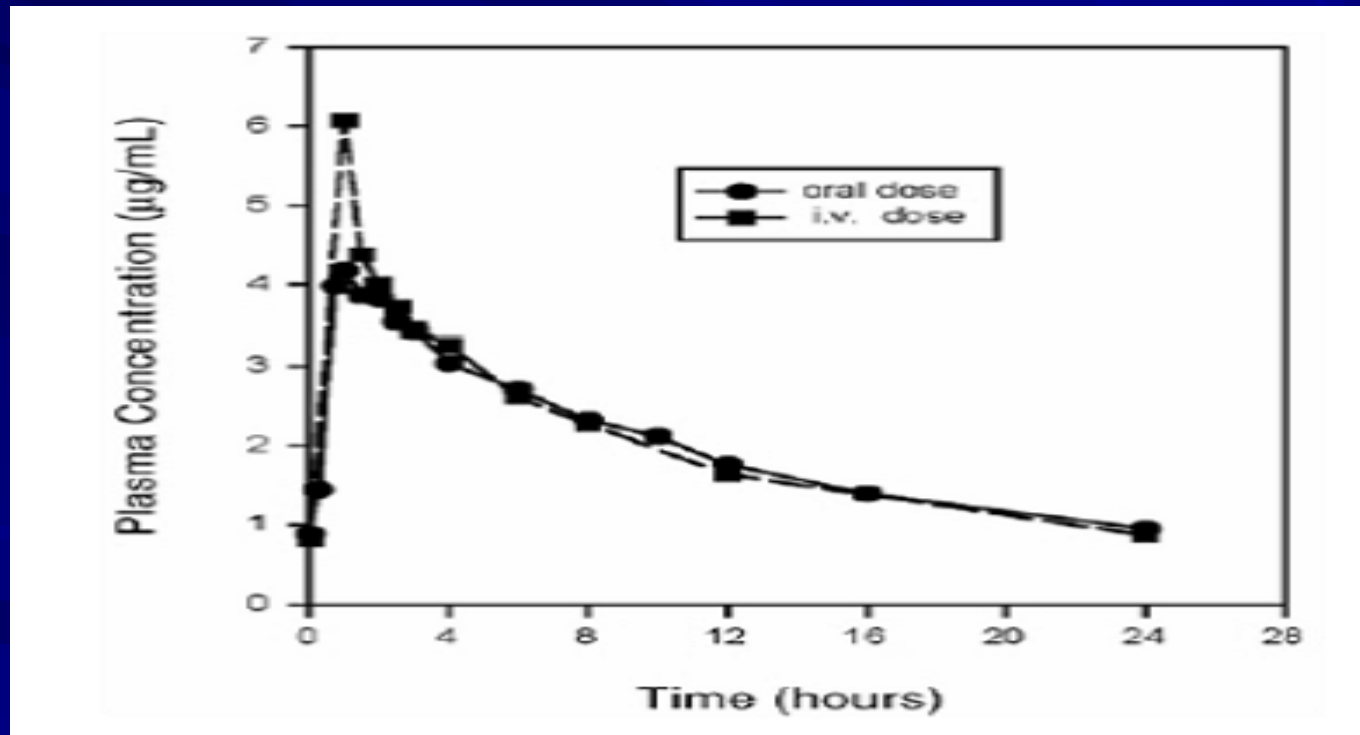
## Application 5, 15 min

- What are the advantages and disadvantages of oral administration



# Application 6, 10 minutes

## Find the possible errors in the figure



# Topical administration

- Dermatological or external use.
- Topical application to any accessible epithelial membranes (rectal lining, vaginal mucosa, nasal mucosa).

Application 7, 5 minutes	Dermal	Transdermal
Application		
Effect: systemic/ local		
		

# Rectal Administration

## Application 8, 15 min

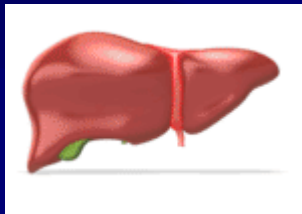
### ■ Discuss :

- Which patient would benefit from such dosage form?
- Are they good for specific drugs?
- Are they used for systemic, local or both effects?
- first pass metabolism

# Compare Pulmonary with Nasal delivery

## Application 9, 15 min

- systemic/ local
- onset of action
- drug absorption/ surface area of absorption



# Summary

- Comparison is the way to go
  - What can an elderly patient take?
  - What can a child take?
  - Which routes are good for an extensively liver metabolized drugs?