

Pharm D. Heba Al-jamal





- ▶ Is a combination between <u>first-order</u> and <u>zero-order</u>.
- If we try to draw *nonlinear pharmacokinetics* on both <u>normal</u> and <u>semi-log papers</u> we would have two areas **linear** area and **curved** area:
- Here we have nonlinear pharmacokinetics drawn on *semi log paper* notice that we have:
 - Curved nonlinear area at the beginning which represents zero order kinetics.
 - At the end we have *linear area* which represents <u>first-order</u> <u>kinetics</u> (all three lines have the same slope).

• How to know if we have zero order or first order?

- > Plot it on normal paper:
 - ✓ If you had *linear* relation then it is *zero order*.
 - ✓ If you didn't have *linear* relation then: plot it on <u>semi log paper</u>, if you had *linear* relation then it is *first order*.

Linear PK	Nonlinear PK
1-Known as dose-independent or concentraton-independent PK.	1-Known as dose-dependent or concentration-dependent PK.
2-The absorption, distribution and elimination of the drug follow first-order kinetics	2-At least one of the PK processes (absorption, distribution or elimination) is saturable.
3-The pharmacokinetic parameters such as the half-life, total body clearance and volume of distribution are constant and do not depend on the drug conc.	3-The pharmacokinetic parameters such as the half-life, total body clearance and volume of distribution are conc- dependant
4-The change in drug dose results in proportional change in the drug concentration.	4-The change in drug dose results in more than proportional or less than proportional change in the drug conc.
Cono	

The relationship between concentration and dose is linear; if I want to double the concentration, I simply double the dose, and everything works as expected!



The relationship between concentration and dose is not linear! If I want to double the concentration, I can't just double the dose. There's no proportionality between dose and conc.



Compartmental PK

- It is common and useful practice to *divide objects* of scientific interest into smaller conceptual units until the underlying mechanisms become apparent.
 - For the understanding of pharmacological phenomena a certain class of conceptual unit was developed, the so-called compartments.
 - The organism to which the drug is administered is thought of as a system of interconnected pools, the compartments.
- These compartments are *conceptual* or *hypothetical* and are <u>not related to the anatomy or physiology</u> of the body at all.
 - For example: we don't say the heart is compartment or the hands are a compartment. It has nothing to do with anatomy, but rather with *how the drug moves and distributes* in the body.



- If the drug moves freely throughout the entire body without any barriers and has the same affinity for all compartments, we consider the body as a *single unit* or *compartment*.
- In the case of *two compartments*, the drug divides the body into two distinct parts, with a membrane or barrier between them, affecting how the drug moves between these parts.
- For *three compartments*, the drug divides the body into three separate parts and moves between them.





- This is one compartment model immediately after administration the drug is *distributed* all around the body and *equilibrium* with blood is reached. We are <u>not able to see distribution</u> process because it happens in very short period.
- This is two compartments model immediately after administration of drug is *distributed* to certain organs (mostly perfused organs) <u>With time</u> the drug *distributes* to other organs. Then we have equilibrium with the blood (it turns into one compartment model at the end).
- Properties of Classical Pharmacokinetic Compartment:
 - Kinetic homogeneity. A compartment contains *tissues* that can be grouped according to similar kinetic properties to the drug allowing for rapid distribution between tissues.
 - Although tissues within a compartment are kinetically homogeneous, drug *concentrations* within a *compartment* may have *different* concentrations of drug <u>depending</u> on the *partitioning* and *binding properties* of the drug.
 - > Within each compartment, distribution is immediate and rapidly reversible.
 - Compartments are interconnected by <u>first-order</u> rate constants. Input rate constants may be <u>zero</u> <u>order</u>.



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