

Immuno Stimulant (Immuno Modulator)

The agent enhance the immunological and nonspecific defence. Such agent may act by

1. ↑ the humoral antibody responses.
2. Enhancing the phagocytic activity, of macrophage
3. Modifying the cell mediated immune response.

Thymosin → Hormone obtain from Bovine thymus extract
use → Lupus erythematosus, Rheumatism, cancer.

Interferon / (interferon inducer) → use:- Myeloma, Lymphoma.

Interleukin-II → enhance H1A1 in AIDS.

immunosulbins → use in thrombocytopenia, hepatitis

Livamysole (L-tetramysole) → it is antineoplastic drug also possess immunotropic.

MOA → it act by modulating, cell mediated immune response. it enhances cell mediated immunity.

- it alter intracellular c-AMP OR G-AMP ratio.
- it restore cutaneous defect hyper sensitivity rxn. in Allergic (state of immunologic deficiency) patients & cancer. like BCG and cyclophosphamide

use → use only levo. form.
Rhe Arth, Hodgkins - dia.

Thalidomide \rightarrow Chemically related to Barbiturates,
(Anti-Angiogenic) used as a hypnotic and anti-emetic,
immuno-modulator.

MoA \rightarrow Inhibit production of ~~T α~~ TNF- α
(Tumor Necrosis Factor)
and interferon, has stimulatory effects on IGF-1
(Insulin like Growth Factor)
and IL-6. It also inhibits the induction of COX-2,
and biosynthesis of Prostaglandin E₂, needed for
Angiogenesis (Anti
Use \rightarrow needed for Angiogenesis)

\rightarrow It reduces phagocytosis by neutrophils
and enhances CMI (cell mediated immunity)
by interfering τ T-cell. Thus exhibiting anti-inflammatory,
immunomodulator and anti-angiogenesis.

Adverse. \rightarrow Teratogenic, Peripheral neuropathy
Hypothyroidism.

Transfer Factor \rightarrow Small RNA molecule derived
(TFR) from Human lymphoid cell.

TFR immunological specific for given antigen,

Use \rightarrow Mucocutaneous candidiasis, Leprosy

BCG vaccine \rightarrow It is attenuated strains
of Bovine tubercle bacilli.
Employed as non-specific immuno stimulant. (adjuvant)
in cancer therapy.

Glatiramer acetate → it is a synthetic co-polymer
with some immunological similarity
to myelin basic protein, which is used in sclerosis. act as an
immuno-modulator.

Immuno-Suppressant

Classification →

1. Specific T-cell inhibitors →

(a) Calcineurin inhib → Tacrolimus, Cyclosporine
Sildenafil → Sildenafil (Revlimid)
→ (Macrolide antibiotic)

2. Cytotoxic drug → Anti proliferative drug:

Azathioprine, cyclophosphamide
Methotrexate, chlorambucil
Mycophenolate, mofetil (MF)

3. Glucocorticoid → Prednisolone

4. Antibodies → Muromona CD3, Antithymocyte
Globulin
(ATG)
Rho immune globulin

Cyclosporine → cyclic poly peptide obtain from
fungus 'Trichoderma reesei'.
Contains 11 amino acid residue, 9 carbon
amino acid in position 1.

MOA → inhibit T-cell activation by binding
to cytosolic protein 'calcophilin'.

The drug-cyclophilin complex stably associate
with calcineurin and inhibit serine/threonine
phosphatase. Activity of this Ca^{++} dependent
phosphatase thus inhibits activation of lymphokine expression.

Toxicity \rightarrow Myelo suppression, Nephrotoxic

Tacrolimus \rightarrow * Soil micro-org., Streptomyces tsukubensis

Tacrolimus was previously known as FK506, inhibits T-cell activation by binding to cytosolic protein FKBP-506 binding protein. The drug-FKBP complex associates with calcineurin with the inhibition of the enzyme or serine phosphatase, so the activation of lymphokine expression is not take place thus Apoptosis and de-granulation observed.

(dyspepsia)
Adverse \rightarrow GI, Cardomyopathy, Nephrotoxicity
Hepatic dysfunction, Neurotoxic.

Sitagliptin (Rapamycin) \rightarrow Macrolid antibiotic, obtain from Streptomyces hygroscopicus
it has synergistic effect \rightarrow cyclosporin

Azathioprine \rightarrow Purin anti metabolite a prodrug of 6-MP. Cleaved to 6-MP by action of nucleoside at (Glutathione), converted to 6MP nucleotide.

inhibits (De novo protein syn)
or analogue to thio-IMP, thio-IMP converted to thio-gmp, gets incorporated into DNA. It inhibits (guanine) Delete hypersensitive. (cell mediated immunity)

Metabolism \rightarrow Partially metabolized in the body by xanthin oxidase if xanthine inhibitor) allopurinol is prescribed an equivalent dose reduction is required.

Adverse effect → Myelosuppression

Use → transplant-reduction, Auto-immune and collagen auto.

cyclophosphamide → nitrogen mustard alkylating agent.

MOA → A prodrug cyclophosphamide give active drug than alkylate DNA in proliferating as well as non proliferating cells, affected B-cells predominantly and T-cell least significant.

Adverse effect → Myelosuppression, Alopecia, Sterility in man (azotemia).

mycophenolate mophatide → 2-morpholino ethyl ester

of mycophenolic acid.

MOA → This prodrug give mycophenolic acid in vivo which inhibit inosine monophosphate dehydrogenase (an Enz essential for de novo sy. of purine) so suppression lymphocyte proliferation and antibody formation by B-cells, deplete leucocyte guanine nucleotide hence inhibit recruitment of leucocyte to inflammatory cells or site. inhibit glyco-glycosylation of lymphocyte glycoprotein involved in adhesion to endothelial cell.

Anti-bodies → Anti-body reagent like anti thymocyte globulin muramono C D₃, Rho(D) immunoglobulin, bind to lymphocyte or thioocyte.

Glucocorticoid → Adreno-corticoid steroid such as prednisolone inhibition of T-cell proliferation, T-cell dependent immunity and the expression of gene encoding cytokines (especially transcription of interleukin-2 gene) also act as a anti-inflammatory anti-adhesion.

Methotrexate, Thalidomide → Myelosuppression

Thalidomide → Sedative and hypnotic effect during pregnancy used in Erythema nodosum leprosum, bone marrow transplantation

MOA → it changes the pattern of T-cell responses to antigen and mitogen.

Antilymphocyte globulin → Anti-lymphocyte Globulin

after iv, ALG become attached to lymphocyte and disappear from circulation within 6-12 hrs.

Adverse eff → Serum sickness, Anaphylactic shock, Hypotension

AUTO-immune diso

1. Addison's diso → Destruction of adrenal gland's cells that produce corticoid hormones.
2. Auto immune haemolytic anemia → Synthesis of antibody against own R.B.C
3. Insulin dependent diabetes mellitus → Destruction of Pancreatic islet's cells that produce hormone and insulin.
4. Graves diso → Binding of Antibodies to Receptor for thyroid stimulate hormone lead to binding over activity of thyroid activity.
5. Myasthenia gravis → Blockage of Acetyl choline receptor prevents transmission of nerve signals.
6. Rheumatoid Arthritis → Inflammation of joints due to deposition of complexes of Ig and anti-immunoglobulin-G₁.
7. Rheumatic fever → Antibodies produced against streptococcal infection are also capable of reacting to antigenic determinants site on their heart muscle cells.
8. Systemic lupus erythematosus → Antigen-antibody complexes (including antibody against RNA, immunoglobulin-G₁, Rcd.B.C, Platelets, triggering inflammation and chromophore) are deposited in many location

Complexes, containing antibody to DNA are often deposited in kidney.

9. idiopathic thrombocytopenia purpura → Destruction of Platelets.

10. Good Pasture syndrome → Damage to basement-membrane but most symptoms result from attack on glomeruli of kidney.

Note → The body is normally able to distinguish its own Antigen (self) from all other (non self) and does not mount an immunological attack against them, this phenomenon is called as Tolerance. Some times the body loses its ability to distinguish b/w self and non self antigen, this autoimmunity is a response by antibody or sensitized-T cell against a person on tissue antigen.