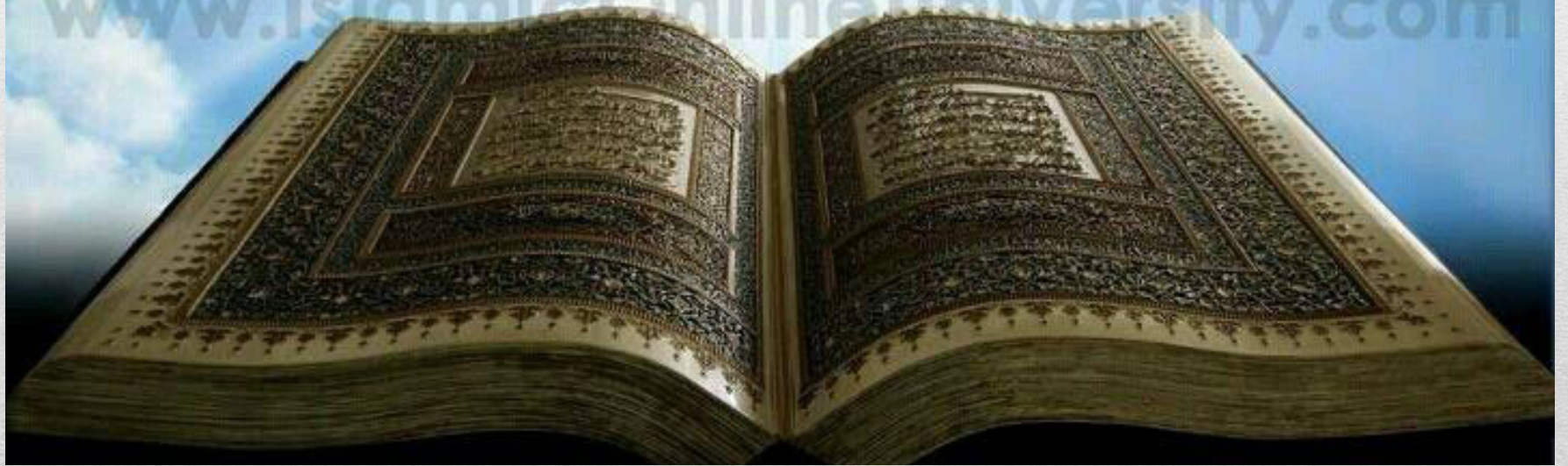


اللَّهُمَّ إِنِّي أَسْأَلُكَ عِلْمًا نَافِعًا

*"O Allaah,
I ask You for knowledge
that is of benefit"*

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Ovulation Inducing Agents

Anti Androgens

Male Contraception

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Endocrine & Reproduction-II Module
Theme-5; infertility & pregnancy
4th Year MBBS

By end of this presentation you would be able to

- Describe ovulation inducing agent
- Classify Anti-androgens
- Describe their clinical uses, and adverse effects
- Male Contraception
 - Enlist the drugs used for male contraception
 - Describe the role of gossypol as male contraceptive agent

Aims And Objectives

Clomiphene Citrate

Clomiphene citrate, a partial estrogen agonist

- Nonsteroidal, Synthetic Compound, Triphenylethylene Derivative
 - Structural Similarity To Estrogen
 - Antiestrogenic Effect
 - This Compound Is Well Absorbed When Taken Orally.
 - It Has A Half-life Of 5–7 Days
 - Excreted Primarily In The Urine.
 - It Exhibits Significant Protein Binding And Enterohepatic Circulation
 - Distributed To Adipose Tissues.
-

- Binds To Er Alpha, Er Beta
- Act As Pure Estrogen Antagonist In All Human Tissues
- Action At The Hypothalamic Level
- The Amount Of LH/FSH Released In Each Secretary Phase Is Increased

Mechanisms of Action

Clomiphene - MoA

Binds to hypothalamic and pituitary estrogen receptors



Blocks inhibitory feedback of estrogen



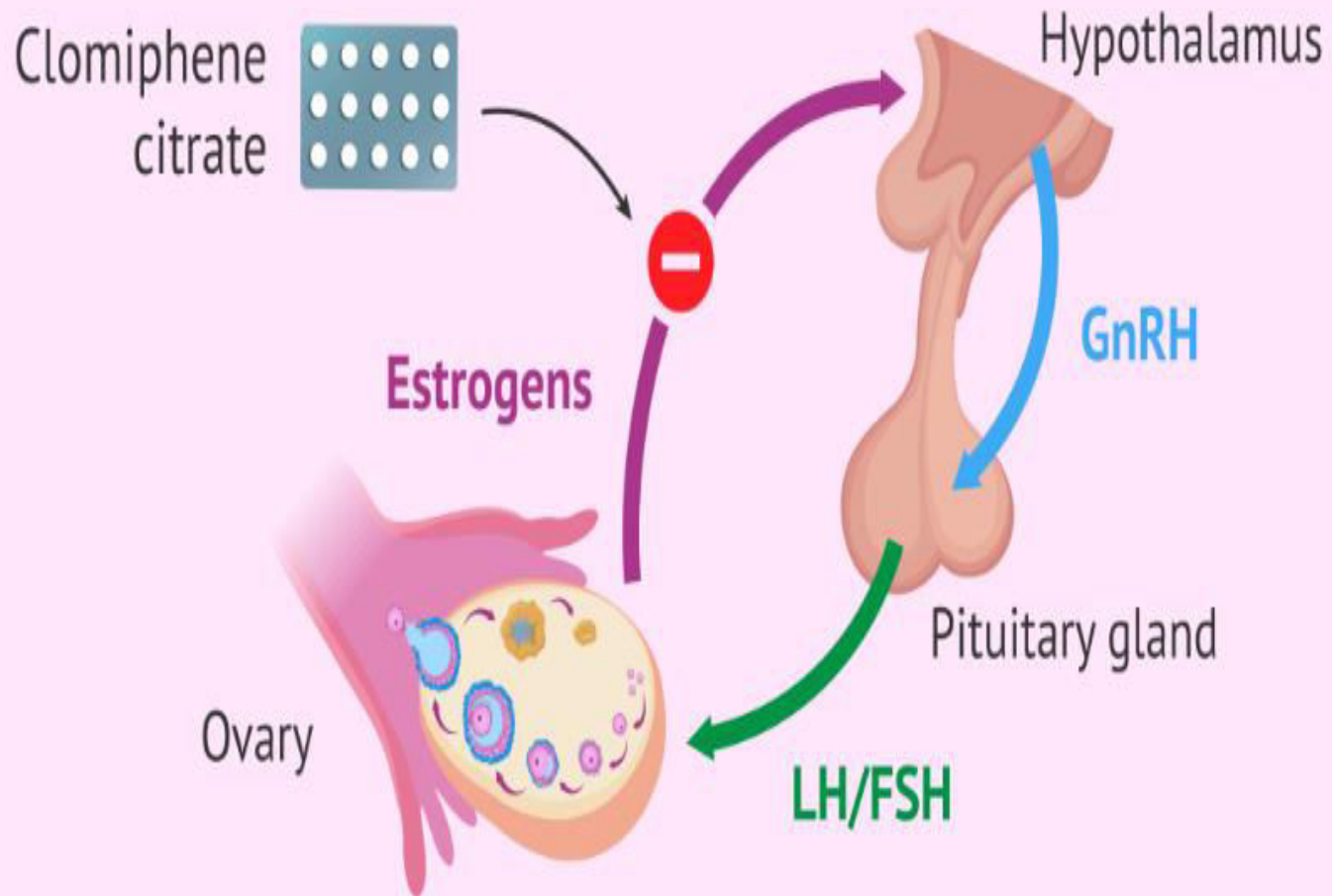
Increased release of GnRH



Increased FSH and LH



Ovulation occurs





- Infertility due to anovulation.
 - 50-100mg per day od for 5 days
 - Starts on 3rd day of cycle
 - Cyclical therapy is recommended but not more than 6 cycle as increase chances of ovarian cancer.
- Male infertility for
 - oligospermia promote Spermatogenesis
 - Testosterone Secretion
- Assisted reproduction therapy (ART) & gametes intrafallopian transfer technique (GIFT).

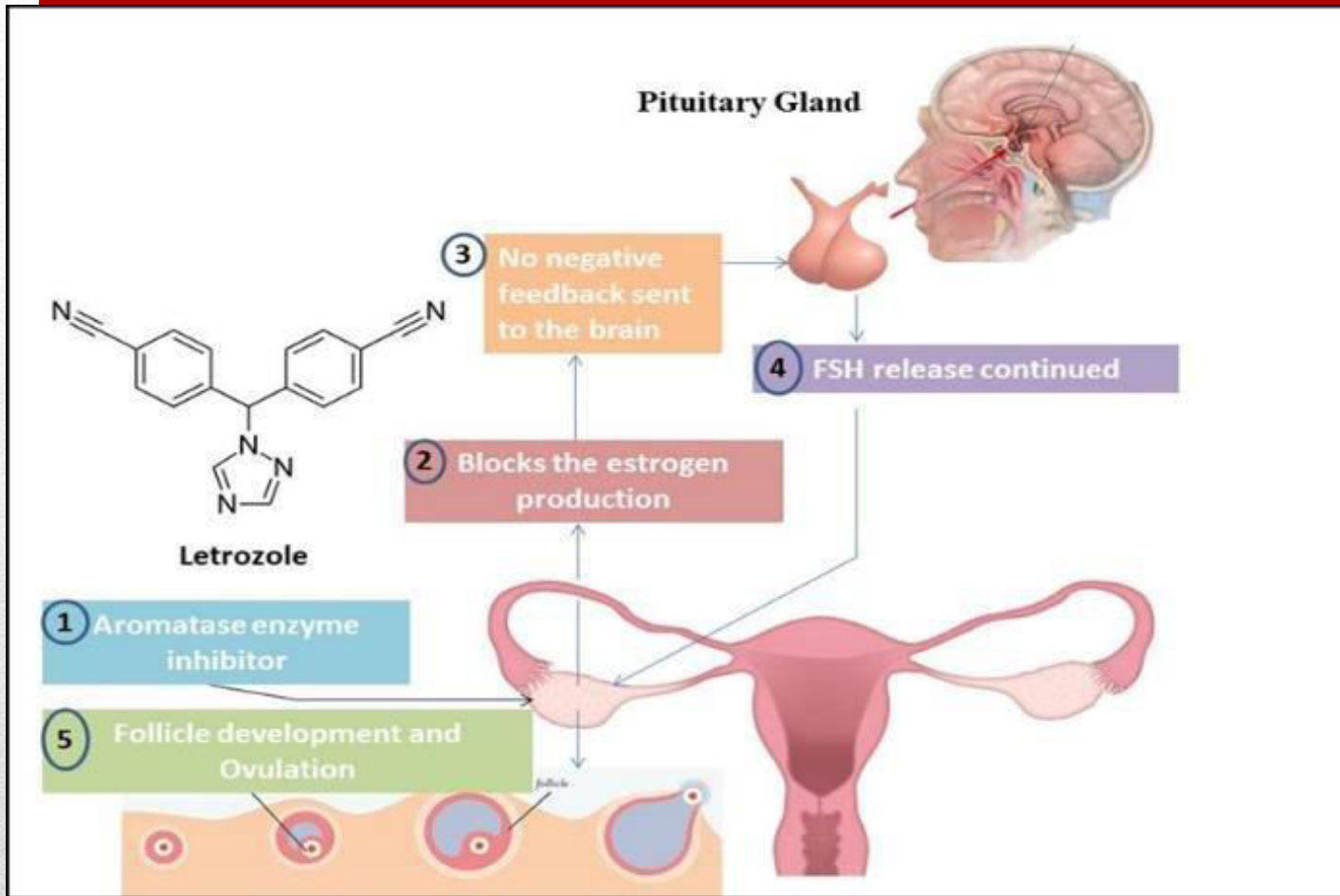
Clinical uses

- DOSE
 - 50mg/day starting from day 3-7 for 2 months
 - then double the dose 50mg BD for 3 months
 - maximum 200mg/day can be given
- Addition Of Hcg Inj On Day 13 Or 14 Improves Success Rate
- IN OLIGOSPERMIA DOSE IS
 - 25mg/day for 24 days in a month, 6 days rest up to 6 months

Clomiphene

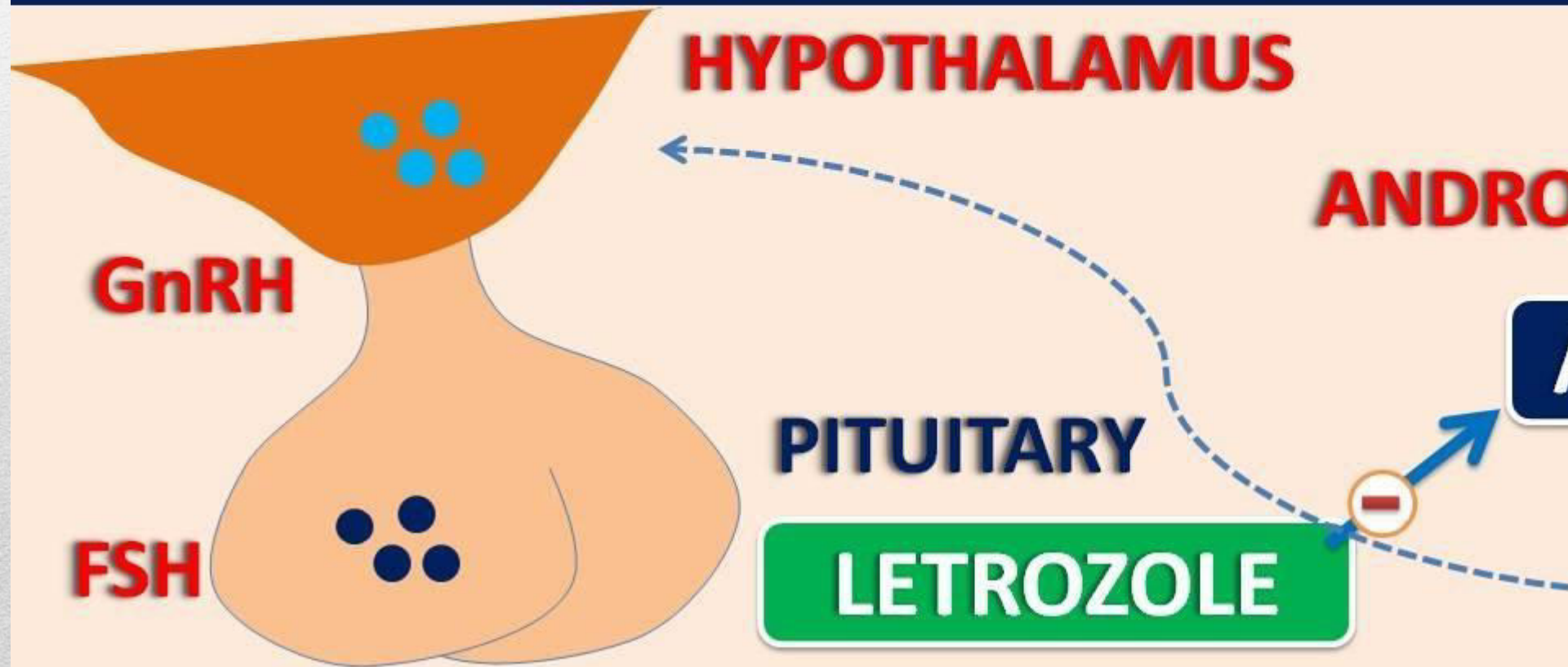
- Hot Flashes (Antagonism Of Peripheral Actions Of Estrogen)
- Gastric Upsets nausea vomiting
- Hyperstimulation syndrome. Polycystic Ovaries
- Multiple Pregnancy
- Ovarian cysts
- Allergic Dermatitis
- Risk Of Ovarion Tumours
- Weight gain breasts discomfort

Adverse Effects



letrozole

LETROZOLO





ANTI-ANDROGENS

Male Contraception

- Steroid Synthesis Inhibitors
 - Ketoconazole
- Conversion of Steroid Precursors of Androgens
 - Abiraterone
 - Finasteride
 - Dutasteride
- Receptor Inhibitors
 - Cyproterone and cyproterone acetate
 - Flutamide, Bicalutamide and nilutamide
- Spironolactone

Anti-androgens list

- **Ketokonazole**
 - Antifungal
 - inhibitor of adrenal and gonadal steroid synthesis
 - Not clinically useful in women with increased androgen levels bc of the toxicity with prolong use
 - Not useful in prostatic carcinoma

Antiandrogens

CONVERSION OF STEROID PRECURSORS TO ANDROGENS

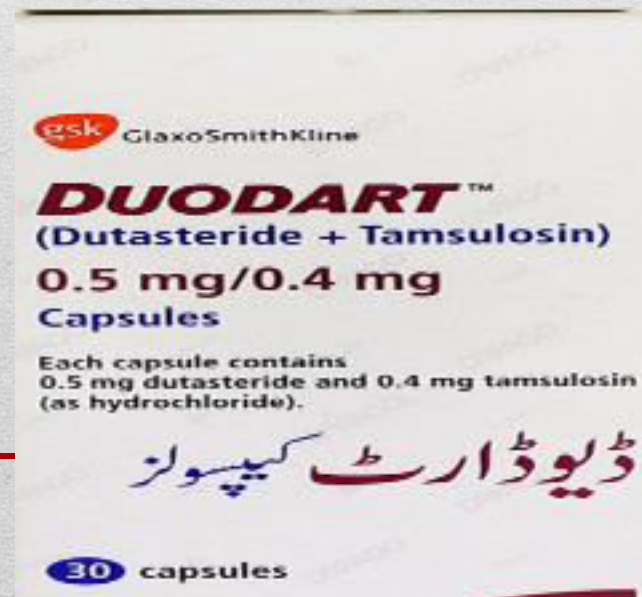
- **Finasteride**, inhibitor of 5 α reductase enzyme,
 - orally active and causes a reduction in DHT levels
 - begins within 8 hours after administration
 - lasts 24 hours
 - Effective in reducing prostate size BPH
 - The dosage is 5 mg/d.
 - Also successfully in the Rx of HIRSUTISM in women
 - And early male pattern baldness in men.



CONVERSION OF STEROID PRECURSORS TO ANDROGENS

Dutasteride

- orally a much longer half-life than finasteride.
- dosage is 0.5 mg daily.
- These drugs are not approved for women or children,



- **Abiraterone**

- a newer 17-hydroxylase inhibitor, may prove to be clinically successful
- Used in prostate cancers



**CONVERSION OF STEROID
PRECURSORS TO ANDROGENS**

- **Cyproterone**

- Effective anti-androgens
- Inhibit the action of androgens at the target organ.
- Suppresses the feedback enhancement of LH & FSH,
- In combination with estrogen, for the therapy of severe acne and hirsutism in females.
- In men to decrease excessive sexual drive
- Palliative in prostatic carcinoma,



Receptor Inhibitors

Receptor Inhibitors

- **Flutamide,**

- is a potent antiandrogen
- Non-steroid, a competitive antagonist at the androgen receptor.
- mild gynecomastia (probably by & mild reversible hepatic toxicity.
- used in the treatment of prostatic carcinoma.
- management of excess androgen effect in women



- **Bicalutamide and nilutamide**

- potent orally active antiandrogens
- single daily dose
- used in patients with metastatic carcinoma of the prostate.
- Bicalutamide in combination with a GnRH analog to reduce tumor flare



- **Spironolactone,**

- Competitive inhibitor of Aldosterone
- Also competes with dihydrotestosterone receptors in target tissues.



- It also reduces 17α -hydroxylase activity, lowering plasma levels of testosterone and androstenedione.
- 50–200 mg/d is used the for hirsutism in women.
- As effective as Finasteride, Flutamide, Or Cyproterone in this condition

Receptor Inhibitors

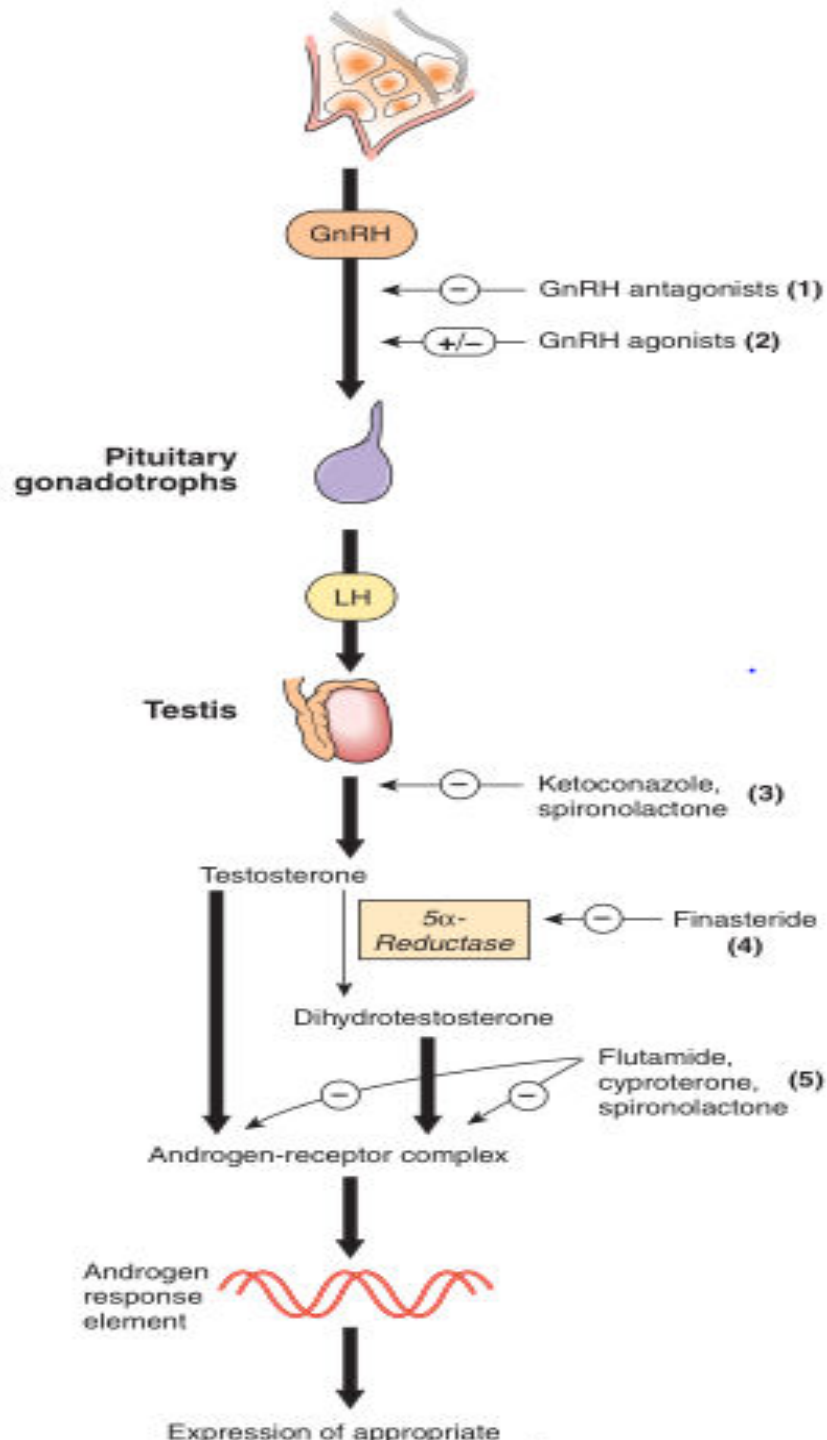


FIGURE 40-6 Control of androgen secretion and activity and some sites of action of antiandrogens: (1) competitive inhibition of GnRH receptors; (2) stimulation (+, pulsatile administration) or inhibition via desensitization of GnRH receptors (-, continuous administration); (3) decreased synthesis of testosterone in the testis; (4) decreased synthesis of dihydrotestosterone by inhibition of 5 α -reductase; (5) competition for binding to cytosol androgen receptors.

To Summarize

- No effective oral contraceptive for men.
- e.g , various androgens, i.e. testosterone & testosterone enanthate, 400 mg per month, produced azoospermia in $< \frac{1}{2}$ of cases treated.
- Minor adverse reactions, including gynecomastia and acne.
- Testosterone in combination with danazol was well tolerated but no more effective than testosterone alone

CHEMICAL CONTRACEPTION IN MEN

- cotton seed derivative
- Trial conducted in china
- This compound destroys elements of the seminiferous epithelium but does not significantly alter the endocrine function of the testis.
- 20 mg/d of gossypol or gossypol acetic acid for 2 months, followed by a maintenance dosage of 60 mg/wk.
- On this regimen,99% of men developed sperm counts below 4 million/mL.

GOSSYPOL

- Hypokalemia is the major adverse effect and may lead to transient paralysis
- gossypol has been abandoned as a candidate male contraceptive.

GOSSYPOL



THANK YOU!
