

# Sulfa Drugs Are the Leader of Drug Discovery via Its Side Effects

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## Abstract

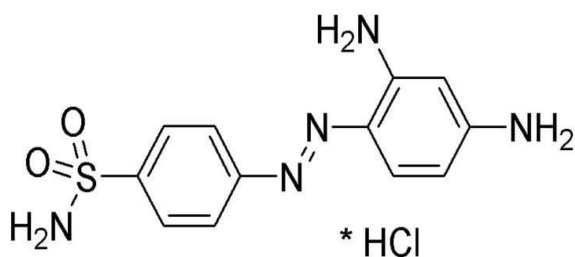
The sulfa drugs are bacteriostatic when used side effects appear as a decrease in blood glucose level which led us to oral hypoglycemics (Sulfonylurea drugs), and diuretic action which led us to diuretics (Thiazide drugs), these side effects attention us to the discovery of diuretics and oral hypoglycemics. Sulfonamides are synthetic antibacterial which were the first antibacterial compounds till the presence of Penicillins, the sulfonamides are used as urinary tract infection treatment and treatment of certain forms of malaria and prevent infection of burns, the sulfa drugs act via inhibition of di hydro folate reductase enzyme (DHFR), they act by interfering with synthesis of folic acid which is vitamin B<sub>9</sub> (Member of Vit. B complex) which required by all living cells.

**Keywords:** sulfa drugs, oral hypoglycemics, diuretics, di hydro folate reductase inhibitor, (DHFR)

## 1. Introduction

In 1932, the German Bacteriologist Gerhard Domagk noted the effect of the red dye Prontosil is effective in vivo, but inactive in vitro due to the azo reductase enzyme which hydrolyzes the prontosil to liberate the sulfanilamide (the first member of sulfa drug), the sulfonamides are widely used through the world war before the discovery of penicillin, all sulfa drugs to Para Amino Benzoic Acid (PABA) which used in the

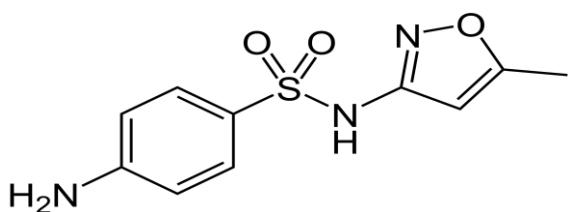
synthesis of folic acid, hence the sulfonamide compete with PABA and inhibit the synthesis of folic acid.



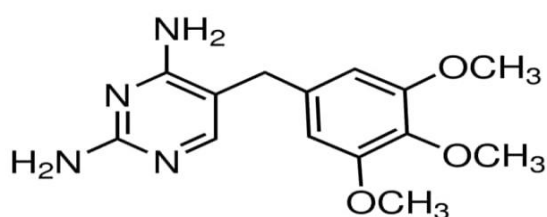
Prontosil

## 2. Pharmacology and Chemistry

Sulfamethoxazole



Trimethoprim



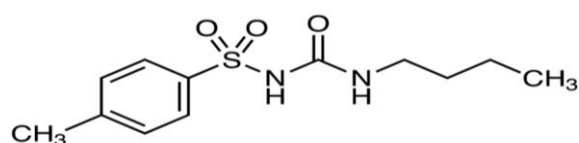
The combination of trimethoprim and sulfamethoxazole worldwide is used in medicine systemically (oral use).

The sulfamethoxazole inhibits DHFR and trimethoprim (non-sulfa) inhibits tetra hydro folate reductase.

The combination of sulfamethoxazole and trimethoprim gives full inhibition of folic acid synthesis which is required for microorganisms but not essential for humans due to the takes the folic acid from diet source.

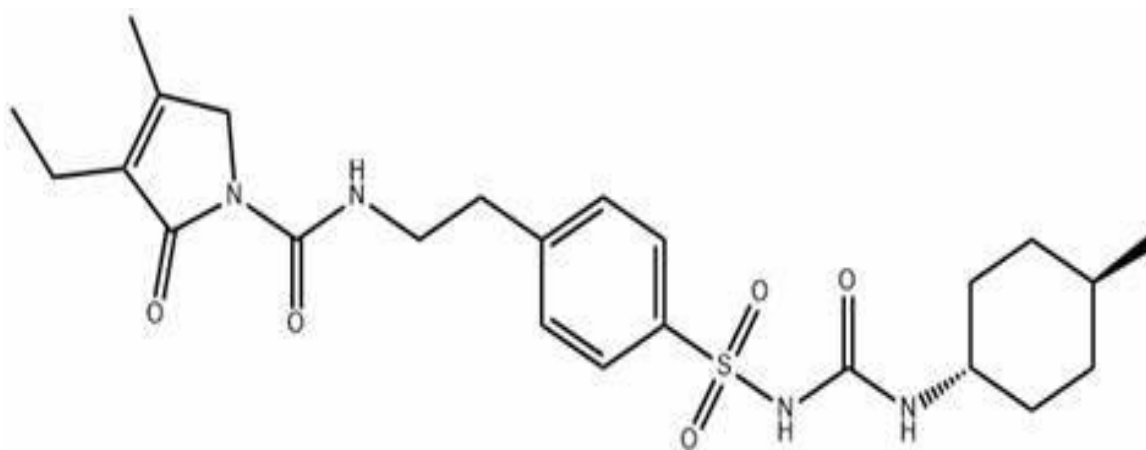
The observation of blood glucose levels during the treatment with sulfa we discover the sulfonylurea drugs.

Tolbutamide



Tolbutamide is the first compound of oral hypoglycemic which is developed.

Glimepiride

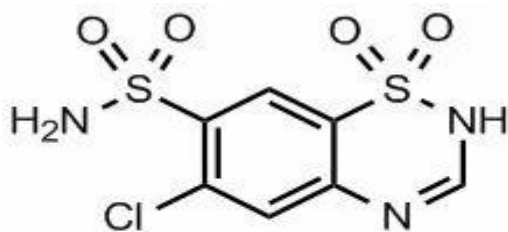


The mechanism of action of sulfonylurea differs from the sulfonamides as bacteriostatic, where sulfonylurea acts through the close ATP-sensitive K channel in the  $\beta$ -cell of Pancreas which secrete insulin from islets of Langerhans.

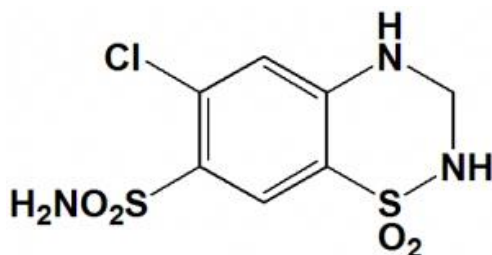
The side effects of lowering blood glucose levels have led us to discover oral hypoglycemics.

Thiazides (Chlorothiazide,

Hydrochlorothiazide)



**chlorothiazide**



**Hydrochlorothiazide**

The sulfonamides when used as bacteriostatic, noted the diuresis of the patient, which led us to the thiazide diuretics discovery.

The thiazides are sulfa drugs like sulfonylurea and usual sulfonamides.

The mechanism of action of thiazide inhibition of Na/Cl cotransporter (NCC) in the renal distal convoluted tubule, where NCC facilitates the absorption of sodium from the distal convoluted tubules back to the interstitial.

Mechanism of action of three groups of sulfa drugs sulfonamides as bacteriostatic, sulfonylurea as oral hypoglycemics, and thiazides as diuretic, they are completely different in their action.

The first sulfa drugs as bacteriostatic are the leader of drug discovery depending on their side effects the lowering of blood glucose levels and diuresis actions and led us to know the mechanism of action of oral hypoglycemics and diuretic of the sulfa compounds.

N.B. The sulfa drugs it is the compounds that contain the sulfamoyl group (SO<sub>2</sub>, NH<sub>2</sub>), either free (side chain) as sulfonylurea or sulfonamide all in the ring as thiazides.

### 3. Conclusion

In conclusion, the discovery of sulfa drugs, specifically sulfonamides, played a significant role in the development of oral hypoglycemics

and diuretics. Initially used as bacteriostatic agents, the side effects of sulfa drugs, such as a decrease in blood glucose levels and diuretic action, prompted further exploration into their potential therapeutic applications. This led to the discovery of sulfonylurea drugs, which act by regulating insulin secretion in the pancreas and are used for the treatment of diabetes. Additionally, the observation of diuresis in patients treated with sulfa drugs led to the discovery of thiazide diuretics, which inhibit the Na/Cl cotransporter in the renal tubules, resulting in increased urine production.

The mechanism of action of sulfa drugs, oral hypoglycemics, and diuretics differs significantly. Sulfa drugs act by inhibiting dihydrofolate reductase (DHFR) and interfering with the synthesis of folic acid, which is essential for the growth of microorganisms. Oral hypoglycemics, such as sulfonylurea drugs, exert their effects by modulating ATP-sensitive potassium channels in pancreatic beta cells, leading to increased insulin secretion. Thiazide diuretics, on the other hand, inhibit the Na/Cl cotransporter in the renal tubules, reducing sodium reabsorption and promoting diuresis.

Overall, the discovery of sulfa drugs and their subsequent exploration for different therapeutic purposes not only revolutionized the field of antibacterial agents but also paved the way for the development of oral hypoglycemics and diuretics. By understanding the diverse mechanisms of action of these compounds, healthcare professionals have been able to utilize them effectively in the treatment of various conditions, improving patient outcomes and quality of life.

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