

THIAZIDES

- The thiazide diuretics were discovered in 1957, as a result of efforts to synthesize more potent carbonic anhydrase inhibitors.
- Like carbonic anhydrase inhibitors and three loop diuretics, all of the thiazides have an unsubstituted sulfonamide group
- Thiazides inhibit NaCl reabsorption from the luminal side of epithelial cells in the DCT by blocking the Na^+/Cl^- transporter (NCC). In contrast to the situation in the TAL, in which loop diuretics inhibit Ca^{2+} reabsorption, thiazides actually enhance Ca^{2+} reabsorption.



THIAZIDES DRUGS

thiazide

- Bendroflumethiazide
- Chlorothiazide
- Hydrochlorothiazide
- Hydroflumethiazide
- Methyclothiazide
- Polythiazide
- Trichlormethiazide

Not a thiazide but a sulfonamide qualitatively similar to the thiazides

- Chlorthalidone
- Indapamide
- Metolazone
- Quinethazone

Clinical Indications

- The major indications for thiazide diuretics are
- **hypertension**
- **heart failure**
- **nephrolithiasis** due to idiopathic hypercalciuria
- **nephrogenic diabetes insipidus**



POTASSIUM-SPARING DIURETICS

- Potassium-sparing diuretics prevent K^+ secretion by antagonizing the effects of aldosterone in collecting tubules. Inhibition may occur by direct pharmacologic antagonism of mineralocorticoid receptors (spironolactone, eplerenone)
- or by inhibition of Na^+ influx through ion channels in the luminal membrane blunts Na^+ uptake and Na^+/K^+ -ATPase in collecting tubules and increases GFR through its vascular effects. (amiloride, triamterene)



POTASSIUM-SPARING DIURETICS DRUGS

- **Spirolactone**
- **Eplerenone**
- **Amiloride**
- **Triamterene**



Clinical Indications

- **Edema**
- **Hypokalemia**
- **Heart failure**
- **Resistant hypertension**
- **Polycystic ovary syndrom** spironolactone is often used off lable for treatment of polycystic ovary syndrome it block androgen receptors and inhibits steroid synthesis at high doses>

