

高 α_1 -acid glycoprotein血漿モデル（テレビン油投与ラット）におけるquinidineの体内動態

杉原成美、喜多典子、古野浩二、村上照夫*、矢田 登*

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The Influence of Increased Plasma Protein Binding on the Disposition of Quinidine in Turpentine-Treated Rats

Narumi Sugihara, Koji Furuno, Noriko Kita,
Teruo Murakami* and Noboru Yata*

Abstract The effect of the increased plasma protein binding of quinidine on its disposition was investigated in turpentine-treated rats, since turatment is known to increase the plasma concentration of α_1 -acid glycoprotein which preferentially binds basic drugs. The plasma free fraction of quinidine 16 and 48h after turpentine treatment was decreased by 30 and 76%, respectively, compared to the control value. The treatment did not cause live injury nor alter the hepatic blood flow. The disappearance of quinidine in plqasma after an intravenous injection (3.0, 7.0, 12.5 mg/kg) was analyzed by a two-compartment open model in both control and turpentine-treated rats. The blood total body clearance (CL_b) of quinidine at 48 h after the treatment was decreased by 30 to 65% in a dose-dependent manner, compared to that in control rats. The distribution volume (V_{ds}) of quinidine (12.5mg/kg) at 16 and 48 after turpentine treatment was decreased by 30 and 79%, respectively.

Hepatic extraction ratio (HER) of quinidine, which was determined at steady state blood concentrations from 0.5 to 2.3 μ g/ml, was decreased from 0.8 to 0.35 with an increase in the quinidine concentration in control rats. The HER value 48 h after turpentine treatment was consistently reduced by 15 to 40% in a concentration-dependent manner compared to the corresponding control value. These findings indicate that the increased plasma binding of quinidine caused a reduction of HER of the drug, and the reduced HER resulted in the decrease in CL_b

in turpentine-treated rats.

Tissue-to-plasma partition coefficient (K_p) for the lung, kidney, spleen, liver and heart, which was determined at a steady state plasma concentration ($1 \mu\text{g/ml}$), was decreased after the turpentine treatment to the same extent as the decrease in V_{dss} (16 h, 28–39%; 48 h, 76–81%). The k_p value in each tissue was proportional to free fraction of quinidine in the plasma. These results suggest that V_{dss} and K_p were reduced due to the increase in the plasma protein binding of quinidine in turpentine-treated rats.

テレピン油の投与は、肝障害を伴わず、その血漿 α_1 -acid glycoprotein 濃度のみを著しく上昇した。Control 及びテレピン油投与ラットの間に於いて、血漿 α_1 -acid glycoprotein 濃度と quinidine の血漿蛋白質結合は、相関係数 $r=0.987$ という非常に高い相関性を示した。従って、テレピン油投与ラットは、quinidine の血漿蛋白質結合率増加による本薬物の体内動態の変化を説明する上で、有用な高 α_1 -acid glycoprotein 血漿モデルであることが示された。高 α_1 -acid glycoprotein 血漿モデルにおいて、quinidine の血漿消失を調べたところ、quinidine の CL_b が、dose-dependent に control 群の CL_b に比べ著しく減少した。このことは、高 α_1 -acid glycoprotein 血漿モデルにおける quinidine の肝抽出率が control 群のそれに比べて明らかに減少することからも実証された。

高 α_1 -acid glycoprotein 血漿モデルでは、quinidine の plasma free fraction (f_p) の減少に伴い、 K_p 値も減少し、また control ラット及び同モデル間における quinidine の f_p と K_p 値の間には、高い相関性が認められた。以上の結果から、血漿 α_1 -acid glycoprotein 濃度の増加に基づく quinidine の血漿蛋白質結合率増加は、quinidine の V_{dss} の減少のみならず CL_b や肝抽出率の減少にも寄与することが証明された。

* Hiroshima University School of Medicine 広島大・総合薬*