

## Pharmacology Drug Chart

<b>Cholinergic Agonists</b>			
<b>Drug Name</b>	<b>Receptor</b>	<b>Therapeutic Uses</b>	<b>Adverse Effects</b>
<b>Acetylcholine</b>	Muscarinic	↓ HR, CO and BP ↑ Salivary Secretions ↑ Secretions and Motility in the GIT ↑ Bronchiolar Secretions Miosis (Constriction of the Pupil)	
<b>Bethanechol</b>	Muscarinic	Stimulates the detrusor while relaxing the trigone and sphincter causing urination in Nonobstructive retention i.e. postoperative and postpartum	Sweating, Salivation, Flushing, ↓ BP, Nausea, Abdominal Pain, Diarrhea, and Bronchospasam
<b>Carbachol</b>	Muscarinic	Similar to Bethanechol to treat urinary retention Used on the Eye to cause Miosis ↓ Intraocular Pressure to treat Glaucoma	When used to treat Glaucoma there are little to no side effects b/c of direct administration
<b>Pilocarpine</b>	Muscarinic	Miosis ↓ Intraocular Pressure in BOTH Narrow and Wide angle Glaucoma	Can enter the brain and cause CNS disturbances ↑ Sweating ↑ Salivation

<b>Anticholinesterases - Irreversible</b>			
<b>Drug Name</b>	<b>Receptor</b>	<b>Therapeutic Uses</b>	<b>Adverse Effects</b>
<b>Organophosphates</b>	Covalently bonds to AChase	Chronic treatment of Open-angle Glaucoma	Death ☹️

<b>Anticholinesterases - Reversible</b>			
<b>Drug Name</b>	<b>Receptor</b>	<b>Therapeutic Uses</b>	<b>Adverse Effects</b>
<b>Physostigmine</b>	Competitive Inhibitor of AChase	↑ Intestinal Motility ↑ Bladder Motility Miosis ↓ Intraocular Pressure Used to treat an overdose of Atropine	Bradycardia Can enter the CNS and high doses may cause convulsions
<b>Neostigmine</b>	Competitive Inhibitor of AChase	↑ Intestinal Motility ↑ Bladder Motility Antidote for Tubocurarine Treatment of Myasthenia Gravis	Sweating, Salivation, Flushing, ↓ BP, Nausea, Abdominal Pain, Diarrhea, and Bronchospasam

<b>Cholinergic Antagonists</b>			
<b>Drug Name</b>	<b>Receptor</b>	<b>Therapeutic Uses</b>	<b>Adverse Effects</b>
<b>Atropine</b>	Non-specific Muscarinic Blocker via Competitive Binding	Mydriasis (Dilation of the Pupil) Relaxes the GIT Antispasmodic activity in the Bladder Treatment of Organophosphate overdose by blocking the effects of excess ACh caused by Anti-AChase Blocks secretions of the upper and lower respiratory tract	Dry Mouth Blurred Vision Tachycardia Constipation ↑ Intraocular Pressure (Bad for Glaucoma) Enters the CNS to cause Confusion, Hallucinations, Depression and collapse of the Circulatory and Respiratory systems

<b>Ganglionic and Neuromuscular Blockers</b>			
<b>Drug Name</b>	<b>Receptor</b>	<b>Therapeutic Uses</b>	<b>Adverse Effects</b>
<b>Nicotine</b>		Low Dose - Ganglionic stimulation by depolarization High Dose - Ganglionic blockade Sympathetic Stimulation followed by paralysis of the ganglia	Irritability and Tremors Intestinal Cramps and Diarrhea ↑ HR ↑ BP ↑ Rate of Metabolism of other drugs - Induction
<b>Hexamethonium (Trimethaphan)</b>	Competitive Nicotinic Ganglionic Blocker	Used for the emergency lowering of BP	
<b>Tubocurarine</b>	Nondepolarizing NM Blocker	Low Dose - Nicotinic Receptor and competitively blocks the binding of ACh High Dose - blocks the Ion Channels of the End Plate Used to relax skeletal muscle during surgery	Histamine Release Ganglionic Blockade ↓ BP
<b>Succinylcholine</b>	Depolarizing NM Blocker	Rapid endothelial intubations	Hyperthermia Apnea due to the paralysis of the Diaphragm

Direct Acting Adrenergic Agonists			
Drug Name	Receptor	Therapeutic Uses	Adverse Effects
<b>Epinephrine -</b> FIGHT OR FLIGHT	Low Dose $\beta$ Med Dose D High Dose $\alpha$	<p><b><u>ACTIONS</u></b></p> <p>Positive Inotropic <math>\beta</math>1 Positive Chronotropic <math>\beta</math>1 <math>\uparrow</math> CO <math>\downarrow</math> TPR Vasoconstriction in Skin and Viscera <math>\alpha</math>1 Vasodilation in Liver and Skeletal Muscle <math>\beta</math>2 <math>\downarrow</math> Renal blood flow <math>\uparrow</math> Systolic Pressure <math>\downarrow</math> Diastolic Pressure Bronchodilation <math>\beta</math>2 <math>\uparrow</math> Glycogenolysis in Liver <math>\beta</math>2 <math>\uparrow</math> Release of Glucagon <math>\beta</math>2 <math>\downarrow</math> Release of Insulin <math>\alpha</math>2 <math>\uparrow</math> Lipolysis - <math>\beta</math>1 Receptors in Adipose Tissue</p> <p><b><u>THERAPEUTIC USES</u></b></p> <p><math>\downarrow</math> Intraocular Pressure (<math>\downarrow</math> Aqueous Humor) Used to treat Anaphylactic Shock Used to treat acute Asthma</p>	CNS Disturbances Hemorrhage Cardiac Arrhythmias Pulmonary Edema
<b>Norepinephrine</b>	Mostly $\alpha$ 1, $\alpha$ 2 are for Negative Feedback $\beta$ 1	$\uparrow$ TPR $\uparrow$ BP	Reflex Bradycardia

<b>Isoproterenol / Isoprenaline</b>	$\beta 1$ and $\beta 2$ Decreased Uptake	Positive Inotropic Positive Chronotropic Vasodilation of Skeletal Muscle Bronchodilation	CNS Disturbances Hemorrhage Cardiac Arrhythmias Pulmonary Edema
<b>Dopamine</b>	High Dose $\alpha$ Med Dose $\beta$ Low Dose D	$\uparrow$ TPR $\uparrow$ CO $\downarrow$ TPR Drug of choice for shock because it $\uparrow$ Renal and Splanchnic blood flow Treatment of CHF	Sympathetic Stimulation Nausea Hypertension Arrhythmias
<b>Dobutamine</b>	$\beta 1$	$\uparrow$ CO Treatment of CHF	Use with caution in Atrial Fibrillation because the drug $\uparrow$ atrioventricular conduction
<b>Phenylephrine</b>	$\alpha 1$ and $\alpha 2$ but mostly $\alpha 1$	Resistant to COMT Vasoconstriction $\uparrow$ Systolic Pressure $\uparrow$ Diastolic Pressure Mydriasis	Reflex Bradycardia Hypertensive Headache Cardiac Irregularities
<b>Clonidine</b>	$\alpha 2$	$\downarrow$ BP due to its action on the CNS Treatment of Hypertension Treatment for the withdrawal from Opiates and Benzodiazepines	
<b>Salbutamol</b>	$\beta 2$	Bronchodilation Treatment of Asthma	Reflex Tachycardia
<b><math>\alpha</math>-Methyldopa</b>	$\alpha 2$ Agonist	Treatment of Hypertension $\downarrow$ TPR $\downarrow$ BP Organ Blood Flow is NOT Reduced	Sedation Drowsiness

<b>Indirect Acting Adrenergic Agonists</b>			
<b>Drug Name</b>	<b>Receptor</b>	<b>Therapeutic Uses</b>	<b>Adverse Effects</b>
<b>Amphetamine</b>	$\alpha$ , $\beta$ , CNS	CNS stimulant in the treatment of children with ADD Also used in the treatment of Depression, Narcolepsy and Appetite Control	$\uparrow$ BP $\uparrow$ HR

<b>Mixed Acting Adrenergic Agonists</b>			
<b>Drug Name</b>	<b>Receptor</b>	<b>Therapeutic Uses</b>	<b>Adverse Effects</b>
<b>Ephedrine</b>	$\alpha$ , $\beta$ , CNS	Resistant to COMT and MAO Treatment of Asthma Nasal Decongestant $\downarrow$ Fatigue $\uparrow$ Athletic Performance	$\uparrow$ BP $\uparrow$ HR

<b><math>\alpha</math> Adrenergic Antagonists</b>			
<b>Drug Name</b>	<b>Receptor</b>	<b>Therapeutic Uses</b>	<b>Adverse Effects</b>
<b>Phenoxybenzamine</b>	$\alpha 1$ and $\alpha 2$ Irreversible and Noncompetitive	Treatment of Pheochromocytoma - a catecholamine secreting tumor	Postural Hypotension Epinephrine Reversal Nasal Congestion Nausea Vomiting May induce Tachycardia Inhibits Ejaculation

<b>Phentolamine</b>	$\alpha 1$ and $\alpha 2$ Competitive	Used in the diagnosis of Pheochromocytoma	Postural Hypotension Tachycardia Cardiac Stimulation Epinephrine Reversal Anginal Pain Arrhythmias
<b>Prazosin</b>	$\alpha 1$ Competitive	Treatment of Hypertension ↓ TPR Alternative to surgery in benign Prostatic Hypertrophy thus improving urine flow	First Dose Effect Syncope Postural Hypotension Lack of Energy Nasal Congestion Headache

<b><math>\beta</math> Adrenergic Antagonists</b>			
<b>Drug Name</b>	<b>Receptor</b>	<b>Therapeutic Uses</b>	<b>Adverse Effects</b>
<b>Propranolol</b>	$\beta 1$ and $\beta 2$ Nonselective	↓ Intraocular Pressure ↓ Aqueous Humor Treatment of Migraine Curbing the effects of Hyperthyroidism Treatment of STABLE Angina (NOT ACUTE) Can aid in the prevention a Second MI	Bronchoconstriction Arrhythmias Sexual Impairment (unclear as to why) ↓ Glycogenolysis ↓ Glucagon - Adverse of Insulin dependent diabetics
<b>Atenolol</b>	$\beta 1$ Selective Cardioselective	Treatment of Hypertension ↓ BP Treatment of Angina Treatment of Atrial and Ventricular Arrhythmia Treatment of Tachycardia	May compromise respiratory activity in Asthmatics

<b>Labetalol</b>	$\alpha$ 1 Antagonist $\beta$ 1 Antagonist $\beta$ 2 Partial Agonist	Vasodilation ↓ BP ↓ HR Treatment of Hypertension - Especially useful for patients with Asthma and Diabetics due to the $\beta$ 2 partial agonist effect	Postural Hypotension $\alpha$ 1 Dizziness $\alpha$ 1
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<b>Drugs Affecting Neurotransmitter Release</b>			
<b>Drug Name</b>	<b>Receptor</b>	<b>Therapeutic Uses</b>	<b>Adverse Effects</b>
<b>Reserpine</b>	$Mg^{2+}$ / ATP Dependent Transporter	<b><u>ACTION</u></b> Blocks the $Mg^{2+}$ / ATP Dependent transporter from transporting Norepinephrine, Dopamine and Serotonin from the cytoplasm into the storage vesicles <b><u>THERAPEUTIC USES</u></b> Treatment of Hypertension	Causes the ultimate depletion of Norepinephrine in the adrenergic neuron Sympathetic function is greatly impaired May cause Bradycardia
<b>Guanethidine</b>		Mechanism 1 - Displaces Norepinephrine from storage vesicles Mechanism 2 - Blocks the release of stored Norepinephrine Treatment of Hypertension (Rarely Used) ↓ BP ↓ HR	Postural Hypotension Male sexual function interference Hypertensive Crisis in patients with Pheochromocytoma due to a supersensitivity to Norepinephrine
<b>Cocaine</b>	$Na^+$ / $K^+$ ATPase	Inhibits reuptake 1 of Norepinephrine from the synaptic cleft by blocking Na/K ATPase	Causes the accumulation of Norepinephrine in the synaptic space Causes an enhancement of Sympathetic activity



<b>Antiarrhythmic Drugs</b>			
<b>Drug Name</b>	<b>Receptor</b>	<b>Therapeutic Uses</b>	<b>Adverse Effects</b>
<b>Quinidine</b> Class IA Na <sup>+</sup> Channel Blocker	Binds to Open and Inactive Na Channels to Prevent Influx	Slows Phase 0 Depolarization Treatment of Atrial, AV, and Ventricular Arrhythmias	May cause SA and AV Block Asystole May induce ventricular Tachycardia
<b>Lidocaine</b> Class IB Na <sup>+</sup> Channel Blocker	Binds to Open and Inactive Na Channels to Prevent Influx	Shortens Phase 3 Repolarization Suppresses arrhythmias caused by abnormal automaticity within the cells Treatment of Ventricular Arrhythmias during MI Drug of choice for the emergency treatment of Cardiac Arrhythmias - Wide therapeutic to toxic ratio	Drowsiness Slurred Speech Agitation Confusion Convulsions Ventricular Arrhythmias Does not slow down conduction therefore it is not useful for AV junction arrhythmias
<b>Flecainide</b> Class IC Na <sup>+</sup> Channel Blocker	Binds to Open and Inactive Na Channels to Prevent Influx	Markedly Slows Phase 0 Depolarization Treatment of Refractory Ventricular Arrhythmias	Negative Inotropic Can aggravate CHF Ventricular Tachycardia Dizziness Blurred Vision

<p><b>Propranolol</b> Class II <math>\beta</math> Adrenoreceptor Blocker REPEAT</p>	<p><math>\beta 1</math> and <math>\beta 2</math> Nonselective</p>	<p>Suppresses Phase 4 Depolarization <math>\downarrow</math> cAMP causes <math>\downarrow</math> <math>Ca^{2+}</math> Influx in Cardiac Tissue which leads to <math>\downarrow</math>CO <math>\downarrow</math> HR <math>\downarrow</math> Intraocular Pressure <math>\downarrow</math> Aqueous Humor Treatment of Migraine Curbing the effects of Hyperthyroidism Treatment of STABLE Angina (NOT ACUTE) Treatment of arrhythmias caused by <math>\uparrow</math> sympathetic activity Can aid in the prevention of a Second MI</p>	<p>Bronchoconstriction Arrhythmias Sexual Impairment (unclear as to why) <math>\downarrow</math> Glycogenolysis <math>\downarrow</math> Glucagon</p>
<p><b>Amiodarone</b> Class III <math>K^+</math> Channel Blocker</p>	<p>Binds to K Channels to Diminish Outward Current During Repolarization</p>	<p>Prolongs Phase 3 Repolarization Treatment of severe Supraventricular and Ventricular Tachycardia Has Class I, II, III, IV Effects</p>	<p>Interstitial Pulmonary Fibrosis GI Intolerance Hyper or Hypothyroidism Liver Toxicity Neuropathy Muscle Weakness Blue Skin (Iodine accumulation)</p>
<p><b>Verapamil</b> Class IV <math>Ca^{2+}</math> Channel Blocker</p>	<p>Binds to Voltage Gated <math>Ca</math> Channels to Decrease the Inward Current</p>	<p>Shortens Action Potential Greater effect on the heart than on vascular smooth muscle Treatment of Atrial Dysrhythmias Treatment of Reentrant Supraventricular Tachycardia Reduction in Atrial Flutter Treatment of Hypertension</p>	<p>Negative Inotropic <math>\downarrow</math> BP due to peripheral vasodilation</p>

<b>Diltiazem</b> Class IV Ca <sup>2+</sup> Channel Blocker	Binds to Voltage Gated Ca Channels to Decrease the Inward Current	Shortens Action Potential Greater effect on the heart than on vascular smooth muscle Treatment of Atrial Dysrhythmias Treatment of Reentrant Supraventricular Tachycardia Reduction in Atrial Flutter Treatment of Hypertension	Negative Inotropic ↓ BP due to peripheral vasodilation
<b>Digoxin</b>	Blocks Na/K Channels and Reverses Ca/Na Antiport to ↑ Intracellular Ca	Shortens the refractory period in both the atria and the ventricles while prolonging the effective refractory period and decreasing the conduction velocity	Can cause Ectopic ventricular beats Ventricular Tachycardia or Fibrillation
<b>Adenosine</b>	Inhibits cAMP Dependent Ca and ↑ K Conduction (Hyperpolarization)	Slows AV Nodal Conduction Treatment of Supraventricular Tachycardia	Flushing Shortness of Breath AV Block
<b>Mg<sup>2+</sup></b>	Unknown	Treatment of Digitalis Induced Arrhythmias Treatment of Ventricular Tachycardia	

<b>Cardiac Glycosides</b>			
<b>Drug Name</b>	<b>Receptor</b>	<b>Therapeutic Uses</b>	<b>Adverse Effects</b>
<b>Digitalis</b> <b>Digoxin</b> <b>Digitoxin</b>	Reversibly Binds with the Na/K ATPase	Digoxin is used in the treatment of severe left ventricular systolic dysfunction Positive Inotropic - improved circulation leads to ↓ TPR and eventually ↓ HR Negative Chronotropic	Progressively more severe Dysrhythmia Supraventricular Tachycardia Ventricular Fibrillation Complete Heart Block Small therapeutic level before Digitalis Toxicity - Ca overload together with diuretics Hyperkalemia Anorexia, Nausea and Vomiting Headache, Fatigue, Confusion, Blurred Vision, Alteration of Color Perception and Haloes

<b>Phosphodiesterase Inhibitors</b>			
<b>Drug Name</b>	<b>Receptor</b>	<b>Therapeutic Uses</b>	<b>Adverse Effects</b>
<b>Milrinone / Amrinone</b>	Inhibits Phosphodiesterase Enzyme	↑ cAMP causes ↑ Ca <sup>2+</sup> Influx in Cardiac Tissue which leads to ↑ CO ↑ Vasodilation Treatment of CHF	Toxicity and Death ☹️

<b>Antihypertensive Drugs</b>			
<b>Drug Name</b>	<b>Receptor</b>	<b>Therapeutic Uses</b>	<b>Adverse Effects</b>
<b>Thiazide Diuretics</b> <b>Bendrofluazide</b>	Mechanism Unknown	Treatment of Hypertension ↑ Water and Na Excretion ↓ BP ↓ TPR ↓ CO ↓ [Ca <sup>2+</sup> ] in the Urine	Induce Hypokalemia and Hyperuricemia Can induce Hyperglycemia Gout Diabetics Mellitus
<b>Loop Diuretics</b>		Cause ↓ Renal Vascular Resistance and ↑ Renal Blood Flow ↑ [Ca <sup>2+</sup> ] in the Urine Used on patients with poor renal function rather than the Thiazide Diuretics	
<b>Propranolol</b> REPEAT	β1 and β2 Nonselective	↓ Intraocular Pressure ↓ Aqueous Humor Treatment of Migraine Curbing the effects of Hyperthyroidism Treatment of STABLE Angina (NOT ACUTE) Can aid in the prevention of a Second MI	Bronchoconstriction Arrhythmias Sexual Impairment (unclear as to why) ↓ Glycogenolysis ↓ Glucagon
<b>Atenolol</b> REPEAT	β1 Selective Cardioselective	Treatment of Hypertension ↓ BP Treatment of Angina Treatment of Atrial and Ventricular Arrhythmia Treatment of Tachycardia	May compromise respiratory activity in Asthmatics

<b>Labetalol</b> REPEAT	$\alpha$ 1 Antagonist $\beta$ 1 Antagonist $\beta$ 2 Partial Agonist	Vasodilation ↓ BP ↓ HR Treatment of Hypertension - Especially useful for patients with Asthma and Diabetics due to the $\beta$ 2 partial agonist effect	Postural Hypotension $\alpha$ 1 Dizziness $\alpha$ 1
<b>ACE Inhibitors</b> <b>Captopril</b>	Blocks the ACE enzyme	↓ Peripheral Vascular Resistance without affecting CO, HR or Contractility Treatment of Hypertension	Dry Cough due to a diminished rate of Bradykinin Inactivation Renal Damage Rashes Fever First Dose Effect Syncope
<b>Angiotensin II Antagonists:</b> <b>Losartan</b>	Highly Selective Angiotensin II Receptor Blocker ( $AT_1$ Subtype)	Similar to ACE Inhibitors Vasodilation Blocks Aldosterone Secretion No Dry cough because Bradykinin is not affected	Improved of ACE Inhibitors Fetotoxic
<b>Prazosin</b> REPEAT	$\alpha$ 1 Competitive	Treatment of Hypertension ↓ TPR Alternative to surgery in benign Prostatic Hypertrophy thus improving urine flow	First Dose Effect Syncope Postural Hypotension Lack of Energy Nasal Congestion Headache

<b>Verapamil</b> Class IV Ca <sup>2+</sup> Channel Blocker REPEAT	Binds to Ca Channels to Decrease the Inward Current	Shortens Action Potential Greater effect on the heart than on vascular smooth muscle Treatment of Atrial Dysrhythmias Treatment of Reentrant Supraventricular Tachycardia Reduction in Atrial Flutter Treatment of Hypertension	Negative Inotropic ↓ BP due to peripheral vasodilation
<b>Diltiazem</b> Class IV Ca <sup>2+</sup> Channel Blocker REPEAT	Binds to Ca Channels to Decrease the Inward Current	Shortens Action Potential Greater effect on the heart than on vascular smooth muscle Treatment of Atrial Dysrhythmias Treatment of Reentrant Supraventricular Tachycardia Reduction in Atrial Flutter Treatment of Hypertension	Negative Inotropic ↓ BP due to peripheral vasodilation
<b>Clonidine</b> REPEAT	α <sub>2</sub> Agonist	↓ BP due to its action on the CNS Treatment of Hypertension Treatment for the withdrawal from Opiates and Benzodiazepines	
<b>α-Methyldopa</b> REPEAT	α <sub>2</sub> Agonist	Treatment of Hypertension ↓ TPR ↓ BP Organ Blood Flow is NOT Reduced	Sedation Drowsiness

<b>Reserpine</b> REPEAT	$Mg^{2+}$ / ATP Dependent Transporter	<p><b><u>ACTION</u></b></p> Blocks the $Mg^{2+}$ / ATP Dependent transporter from transporting Norepinephrine, Dopamine and Serotonin from the cytoplasm into the storage vesicles <p><b><u>THERAPEUTIC USES</u></b></p> Treatment of Hypertension	Causes the ultimate depletion of Norepinephrine in the adrenergic neuron Sympathetic function is greatly impaired May cause Bradycardia
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Vasodilators			
Drug Name	Receptor	Therapeutic Uses	Adverse Effects
<b>Hydralizine</b>		Atrial Dilation ↓ TPR Treatment of Hypertension	Tachycardia GI discomfort Hirsutism
<b>Minoxidil</b>		Atrial Dilation ↓ TPR Treatment of Hypertension	Tachycardia GI discomfort Hirsutism

K <sup>+</sup> Sparing Diuretics			
Drug Name	Receptor	Therapeutic Uses	Adverse Effects
<b>Spirolactene</b>	Competes with Aldosterone Receptors	Leads to Na Secretion and K Retention Weak Diuretic	Hyperkalemia



<b>Autacoids</b>			
<b>Drug Name</b>	<b>Receptor</b>	<b>Therapeutic Uses</b>	<b>Adverse Effects</b>
<b>Prostaglandins</b>		Abortion Peptic Ulcers Inhibits the secretion of HCl in the stomach Erectile Dysfunction (Alprostadil)	With Alprostadil there is pain at the site of injection
<b>Histamine</b>	H <sub>1</sub>  H <sub>2</sub> H <sub>1</sub> and H <sub>2</sub>	Bronchial and Intestinal Smooth Muscle Contraction ↑ NO ↑ Production of Nasal and Bronchial Mucus Stimulates Itch and Pain and Sensory Nerve Endings ↑ Gastric HCl secretion ↓ Systemic BP ↓ Peripheral Resistance Positive Inotropic (H <sub>1</sub> and H <sub>2</sub> ) Positive Chronotropic (H <sub>2</sub> ) Capillary Permeability Vasodilation Triple Response - Wheal Formation, Reddening and Halo	Respiratory Symptoms ↓ Lung Capacity Intestinal Cramps Diarrhea

<b>Antihistamines</b>			
<b>Drug Name</b>	<b>Receptor</b>	<b>Therapeutic Uses</b>	<b>Adverse Effects</b>
<b>H<sub>1</sub> Receptor Blockers</b> <b>Chlorpheniramine</b>	H <sub>1</sub> Receptor Competitive	Treatment of Allergic Conditions CANNOT treat Bronchial Asthma Motion Sickness and Nausea Treatment of Insomnia	Sedation Dry Mouth Drug Interactions (MAO Inhibitors) Overdose in Children Tremor Vertigo
<b>H<sub>2</sub> Receptor Blockers</b> <b>Cimetidine</b>	H <sub>2</sub> Receptor Competitive	Treatment of Peptic Ulcers ↓ Gastric HCl Secretion	