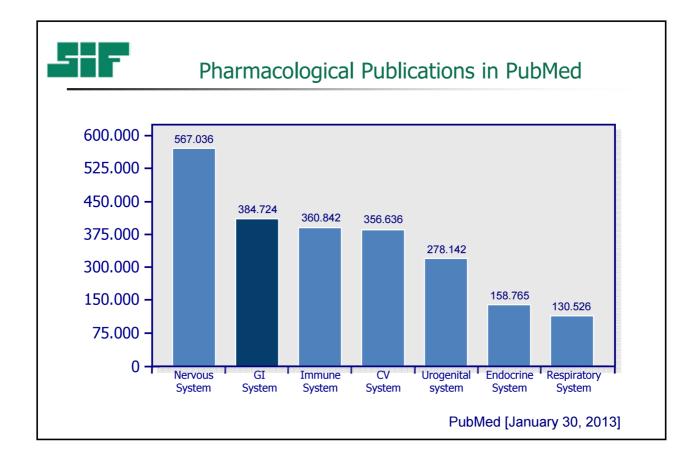




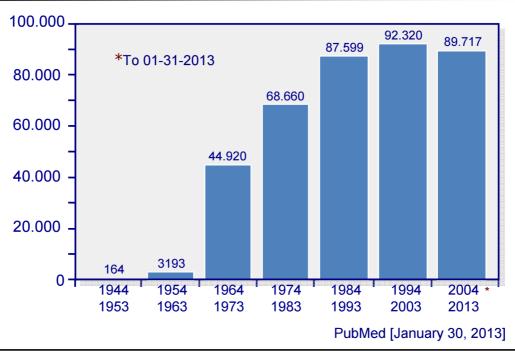
Working Group Digestive Pharmacology

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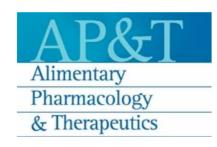


GI Pharmacological Publication in PubMed





1987: Launch of Alimentary Pharmacology & Therapeutics

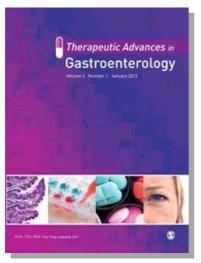


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 - 49/261 Pharmacology & Pharmacy

http://onlinelibrary.wiley.com/journal/10.1111/(ISSN)1365-2036



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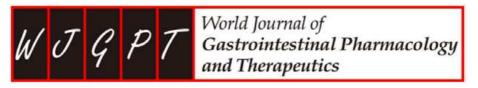
Therapeutic Advances in Gastroenterology delivers the highest quality peer-reviewed articles, reviews, and scholarly comment on pioneering efforts and innovative studies across all areas of gastroenterology



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http://www.wjgnet.com/2150-5349/index.htm



Le Malattie Digestive in Italia

- Il 40% della popolazione soffre dei cosiddetti "disturbi funzionali" dell'apparato digerente quali, ad esempio, i disturbi digestivi e la sindrome dell'intestino irritabile, affezioni non gravi ma mediamente non curabili e caratterizzate da un alto tasso di cronicità.
- Questi disturbi funzionali incidono sulla qualità di vita ed hanno rilevanti implicazioni sociali ed economiche quali costi per la ricerca diagnostica al fine di escludere patologia organica, elevata inappropriatezza nella richiesta e nell'esecuzione di metodiche diagnostiche, perdita di giornate lavorative, prescrizioni farmacologiche.
- Ogni anno, inoltre, il 15% degli Italiani viene visitato dal Medico di Medicina generale per malattie digestive, che sono la causa di 1 ricovero ospedaliero su 12.

Quaderni del Ministero della Salutie, N. 9 – Maggio-Giugno 2011 http://www.salute.gov.it/dettaglio/phPrimoPianoNew.jsp?id=320



Antisecretory Drugs: What's in the Current GI Pipeline?

- Many of the existing drugs are in a mature stage of their life cycle and some of the leading compounds in the GI market have been or are close to patent expiration
- Unfortunately,few companies currently retain a specific gastrointestinal research programme
- Notwithstanding, the upper GI pipeline is small with only 33 products across all stages of development. The majority of them are in phase II with only 3 drugs in phase III

[Data Monitor. Pipeline Insight: Upper GI disorders. London, 2007]



Drugs Affecting Intestinal Fluid Secretion: Clinical Development

Drug	Mechanism(s) of Action	Stage of Development	Company	
Lubiprostone (Amitiza®)	CIC Activator	Marketed in USA	Sucampo Pharmaceuticals	USA
			Takeda Pharmaceuticals NA	USA
Linaclotide	Guanylate Cyclase Activator	Phase III-II	Ironwood Pharmaceuticals	USA
			Forest Laboratories	USA
			Almira l l	Europe
Plecanatide ¹ (SP-304)	Guanylate Cyclase Activator	Phase III	Phase III Synergy Pharmaceuticals	

¹Originally known as Guanilib

[PharmaProjects Data Base, Accessed on November 9, 2011]



Prokinetic Agents without Activity on 5-HT Receptors: Clinical Development

Drugs	Mechanism(s) of Action	Stage of Development	Company	
Itopride (Ganaton®)	D ₂ Antagonism Inhibition of AchE Release of Motilin	Phase II-III Marketed in India	Aptalis	USA
			Abbott	India
Mitemcinal (GM-611)	Motilin Receptor Agonism	Phase II (China)	Chugai Pharma (Hoffmann-La Roche)	Japan
Dronabinol* $(\Delta^9$ -tetrahydro-cannabinol)	Non Selective Cannabinoid Agonism	Phase II	Abbott Pharmaceuticals	USA

^{*}Marinol®, already on the market for prevention and treatment of CINV and for the treatment of AIDS-related anorexia associated with weight loss

[PharmaProjects Data Base, Accessed on November 9, 2011]



Inhibitors of Intestinal Motility: Clinical Development

Drugs	Mechanism(s) of Action	Stage of Development	Company	
Ramosetron	5-HT ₃ -receptor Antagonism	Marketed in India & Japan	Astellas Pharma	Japan
DDP-225	5-HT ₃ -receptor Antagonism NA-reuptake Inhibition	Phase II	Edusa Pharmaceuticals	USA
Dextofisopam	Benzodiazepine <i>Atipic</i> Receptor Agonism	Phase IIb	Pharmos Corporation	USA
Nepadutant	NK ₂ -receptor Antagonism	Phase II	Menarini	Italy
Ibodutant	NK ₂ -receptor Antagonism	Phase II	Menarini	Italy
Talnetant (SB-222, 412)	NK ₃ -receptor Antagonism	Phase II	GlaxoSmithKline	UK

[PharmaProjects Data Base, Accessed on November 9, 2011]



Drugs Affecting TLESRs: Clinical Development

Drug	Mechanism of Action	Stage of Development	Company	
Arbaclofen (XP-19986)	GABA-B Receptor Agonism	Phase II (GERD)	Astrazeneca	UK, USA
AZD-9343	GABA-B Receptor Agonism	Suspended in Phase I (GERD) in 2006	Astrazeneca	UK, USA
Lesogaberan (AZD-3355)	GABA-B Receptor Agonism	Suspended in Phase II (GERD) in 2010	Astrazeneca	UK, USA
ADX-10059	Glutamate mGluR5 Receptor Allosteric Modulator	Suspended in Phase II (GERD, Migraine) in 2009	Addex Pharmaceuticals	Switzerland
AZD-2516	Glutamate mGluR5 Receptor Agonism	Suspended in Phase II (GERD) in 2010	Astrazeneca	UK, USA



Working Group of Digestive Pharmacology Primary Aim



- The main goal of this Working Group is to create a large network of scientists and clinicians engaged in both research and education in the field of GI Pharmacology as well Therapy of Digestive Diseases
- Anyone with interest in these fields and willing to contribute is welcome!



Working Group of Digestive Pharmacology Additional Aims



- To draw a map of academic and industry labs doing GI reasearch, making at the same time an inventory of instrumentations available and methodologies adopted
- To express proposals for builing-up "research consortia", able to get access to important national and international funds (PRIN, MinSan, UE).
- To educate the young generations of pharmacologists, transmitting them the interest for and methodology of Digestive Pharmacology



Working Group of Digestive Pharmacology Additional Aims





- To interact with Scientific Organizations with similar interests (like, for instance, the Italian Society of Gastroenterology, the Italian Society of Digestive Endoscopy, the Italian Association of Hospital Gastroenterologists, etc.) to exchange knowledge, offering them our expertise for the development of Guidelines, Position Papers, Expert Opinions, Joint Meetings, etc.
- To make available for the Italian Society of Pharmacology our scientific background and clinical expertise in order to allow our Society to soundly interact with regulatory bodies (Min San, AIFA, Regions) and with the Pharmaceutical Industry



Special Thanks to:



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