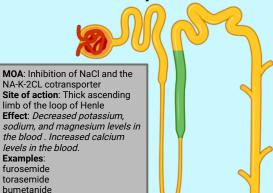
# **Diuretics**

### **Loop diuretics**



# **Carbonic anhydrase inhibitors**



MOA: Interferes with the sodiumpotassium exchange, and competitively binds to aldosterone receptors blocking reabsorption of sodium and water. Potassium is prevented from entering the tubule resulting in the excretion of sodium and water.

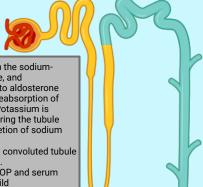
Site of action: Distal convoluted tubule and collecting ducts.

Effect: Increase in UOP and serum potassium levels. Mild

antihypertensive.

Examples: amiloride

spironolactone triamterene



MOA: Inhibition of carbonic anhydrase

Site of action: Proximal convoluted tubule

Effect: Decreased potassium and sodium levels in the blood. Increased bicarbonate excretion in the urine causing a decrease in blood pH.

**Examples:** 

acetazolamide dorzolamide methazolamide dichlorphenamide

## **Osmotic diuretics**



MOA: Inhibition of water and sodium reabsorption by increasing the osmolarity of the blood and renal filtrate.

Site of action: Proximal convoluted tubule and the descending limb of the loop of Henle.

Effect: Increase in urine output with a relatively small loss of sodium.

Examples: mannitol

isosorbide

Examples:

furosemide

torasemide

bumetanide

#### Thiazide diuretics



MOA: Inhibition of NaCl cotransport

Site of action: Distal convoluted tubule

Effect: Decreases in potassium, sodium, and magnesium in the blood. Increased calcium and uric acid levels in the blood.

Examples:

HCTZ chlorthalidone amiloride clopamide indapamide

