

## Galenic phase

*"Today we study the Liberation Phase—often called the Pharmaceutic or Galenic Phase. This is the critical moment where the drug is freed from its vehicle to become a bioavailable molecule"*

### Introduction

This phase can take different names according to the context of use:

#### A. "The Pharmaceutic Phase" (The Categorical Term)

This is the most common term used to create a clear "3-Step" map of drug action:

1. Pharmaceutic Phase (Disintegration/Dissolution)
2. Pharmacokinetic Phase (ADME)
3. Pharmacodynamic Phase (Effect)

- **Verdict: Great for teaching flow and organization, but a bit general.**

#### B. "The Liberation Phase" (The Kinetic Term)

In modern research and industrial pharmacology, this is the most relevant term because it completes the LADME acronym.

- Scientific weight: Very high. It treats the release of the drug as a measurable kinetic event.

- **Verdict: Best for 3rd-year students who are learning about the "Life of the Drug" in the body.**

#### C. "Biopharmaceutics" (The Discipline Term)

If you are speaking to researchers or industrial pharmacists, they will use this term. It is the study of how the physical/chemical properties of the drug affect its biological performance.

- **Verdict: Use this to sound the most "advanced" or "academic."**

### Comparison Table: Which should you use?

Term	Used by...	Best for...
Pharmaceutic Phase	Textbooks (Nursing/Med)	Distinguishing the "pill" part from the "body" part.

<b>Term</b>	<b>Used by...</b>	<b>Best for...</b>
<b>Liberation (L in LADME)</b>	<b>Pharmacokineticists</b>	<b>Describing the first step of drug movement.</b>
<b>Galenic Phase</b>	<b>Academics (French/Euro influence)</b>	<b>Highlighting the "art" and science of drug formulation.</b>
<b>Dissolution/Disintegration</b>	<b>Researchers/Lab</b>	<b>Describing the actual physical chemistry occurring.</b>

**In many textbooks, this is called the Galenic Phase because it depends entirely on how the drug was manufactured.**

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### **1. Definition:**

Liberation is the process by which the Active Pharmaceutical Ingredient (API) is released from its Dosage Form (the vehicle/excipient).

If the drug doesn't leave its "packaging" (the pill or capsule), it can never be absorbed. It is the "Rate-Limiting Step"—if liberation is slow, the therapeutic effect will be slow.

### **2. The Three Steps (The "3 Ds")**

For a solid oral drug (like a tablet), liberation follows a specific biological sequence:

1. Disintegration: The tablet breaks into smaller granules.
2. Disaggregation: The granules break into fine particles.
3. Dissolution: The particles dissolve in the gastric or intestinal fluids.

**Key Biological Point:** A drug must be in solution (a liquid state) to cross a biological membrane. You know from cell biology that molecules move via diffusion; a solid chunk of powder cannot diffuse!

### 3. Factors Affecting Liberation: *Physicochemical and Biological factors*

#### A. The Galenic Formulation

- **Excipients:** Some help the drug dissolve faster (disintegrants), while others (like lubricants or binders) can slow it down.
- **Coatings:** Enteric coatings are designed *not* to liberate the drug in the acidic pH of the stomach, but only when they reach the neutral pH of the intestine.

#### B. The Environment

- **pH:** ionized form of a drug is highly water-soluble, which drastically increases its saturation solubility ( $C_s$ ) and accelerates its liberation/dissolution rate (per the Noyes-Whitney equation).
  - ✓ *Weak bases* dissolve preferentially in the highly acidic environment of the stomach where they are ionized.
  - ✓ *Weak acids* exhibit poor solubility in the stomach but liberate efficiently in the near-neutral pH of the duodenum as they transition into their ionized state.
- **Gastric Motility:** How fast the stomach "churns" and empties into the intestine.

### 4. Modified Release (Advanced Biotech Concept)

For Biotechnology students, this is the most interesting part. We can "engineer" liberation:

- **Immediate Release (IR):** The drug is released all at once.
- **Sustained Release (SR/Extend):** The drug is released slowly over 12–24 hours. This reduces the number of times a patient has to take the pill and maintains a steady concentration in the blood ( $C_{ss}$ ).
- **Delayed Release:** Like the enteric coating mentioned above.

### 5. "Check-Point" Question

*"If a patient crushes a Sustained Release (SR) tablet to make it easier to swallow, what happens to the Liberation phase?"*

**Answer for you:** The "engineering" is destroyed. The entire 24-hour dose is liberated at once (this is called "dose dumping"), which can lead to toxicity!

### Summary Table for the Board

<b>Stage</b>	<b>Action</b>	<b>Result</b>
<b>Disintegration</b>	<b>Physical breakdown.</b>	<b>High surface area.</b>
<b>Dissolution</b>	<b>Molecular mixing with fluid.</b>	<b>Drug is ready for Absorption.</b>
<b>Vehicles</b>	<b>Excipients/Coating.</b>	<b>Controls the Speed of release.</b>