International Union of Pharmacology Committee on Receptor Nomenclature and Drug Classification. XXXVIII. Update on Terms and Symbols in Quantitative Pharmacology

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I. Introduction

This update was undertaken to incorporate new information about multiple receptor conformational states and the recognition that multiple distinct agonist responses may result that have different pharmacological properties (Kenakin, 1995). Nomenclature concerning the actions of allosteric (allotopic) ligands is presented based on recent literature (Christopoulos and Kenakin, 2002). The implications of high receptor numbers in heterologous expression systems for interpretation of agonist function are discussed. Additional changes address the fact that many receptors are not single mac-
romolecules but are made up of multiple subunits. Finally, there are new recommendations regarding nomenclature for equilibrium constants.

II. Working Definition of a Receptor

A cellular macromolecule, or an assembly of macromolecules, that is concerned directly and specifically in chemical signaling between and within cells. Combination of a hormone, neurotransmitter, drug, or intracellular messenger with its receptor(s) initiates a change in cell function. Thus NC-IUPHAR does not classify simple binding sites, without function (although truncated proteins without signaling function may be designated as such, to avoid confusion). Furthermore, a receptor may consist of several proteins, called subunits. In some cases the large number of combinatorial possibilities for assembly of multiple subunits may require NC-IUPHAR to use an interim nomenclature based on the individual subunits (Spedding et al., 2002). Nevertheless, the ultimate goal is to define the multi-subunit assemblies that occur in vivo.

The regions of the receptor macromolecule to which ligands bind are referred to collectively as the recognition site(s) of the receptor. Those at which the endogenous agonist binds are termed primary or orthosteric sites whereas other ligands may act through allosteric sites (see Table 1).

III. Use of Drugs in Definition of Receptors or of Signaling Pathways

When using drugs to define receptors or signaling pathways, it would be desirable to use a drug that acts only on the receptor or biological site of interest at all concentrations and doesn't interact with others at any achievable concentration. Unfortunately, there are very few or no drugs with this ideal property. Fortunately, there are numerous drugs with a detectable potency difference (in exceptional cases >103-fold but usually much less) between their primary target and other related receptors. Because these differences are not absolute, claims for the involvement of a particular receptor, or signaling protein, based on the use of such agents should be backed up by testing with multiple agents, and wherever possible, full concentration-response curves should be obtained for the definition of responses in in vitro experiments. Full dose-response curves should also be obtained in in vivo experiments, if ethical considerations allow.

A. The Expression of Amount of Drug: Concentration and Dose

1. Concentration. It is recommended that the molar concentration of substance X be denoted by either [X] or \( c_X \), with the former preferred. Decimal multipliers should be indicated by the use of either Le Système International d’Unités (International System of Units) prefixes (e.g., \( \mu M, nM \)) or by powers of ten (e.g., \( 3 \times 10^{-8} M \), with the former preferred.

2. Dose. In some circumstances (e.g., in therapeutics and clinical pharmacology, in in vivo experiments, and when tissues are perfused in vitro and exposed to a bolus application of drug), absolute drug concentrations are uncertain, and it becomes more appropriate to specify the quantity of drug administered. This may be done in terms of either mass or molar quantity. Units and routes of administration should be specified. In the case of in vivo experiments with animals, the quantity of drug is to be expressed per unit of animal mass (e.g., \( \text{mol/kg, mg/kg} \)). In therapeutics, milligrams per kilogram will normally be appropriate. Negative indices should be used where confusion otherwise arises (e.g., \( \text{mg min}^{-1} \text{kg}^{-1} \)).

B. General Terms Used to Describe Drug Action

Table 1.

C. Experimental Measures of Drug Action

1. General Measures. Table 2.
2. Agonists. Table 3.
3. Antagonists. Table 4.

D. Terms and Procedures Used in the Analysis of Drug Action

1. The Quantification of Ligand-Receptor Interactions. Table 5.
3. Action of Antagonists. Table 7.

IV. Appendix

A. Microscopic and Macroscopic Equilibrium Constants

Microscopic and macroscopic equilibrium constants should be distinguished when describing complex equilibria, which occur with all agonists. The latter refers to a single constant describing the overall equilibrium (i.e., the value that would be obtained in a ligand binding experiment), whereas the former refers to each individual constant that describes each reaction step within the equilibrium. For the scheme

\[
L + R \rightleftharpoons LR \rightleftharpoons LR^*
\]

the macroscopic equilibrium dissociation constant (denoted here as \( K_{\text{app}} \) for “\( K_{\text{apparent}} \)”) is given by

\[
K_{\text{app}} = \frac{K_1 K_2}{1 + K_2}
\]

Here \( K_1 \) and \( K_2 \) are the microscopic equilibrium constants for the first and second reactions, respectively. Note that in this scheme, saturation radioligand binding assays and Furchgott’s (1966) irreversible antagonist method for determining the equilibrium dissociation
**TABLE 1**

<table>
<thead>
<tr>
<th>Term</th>
<th>Suggested Usage</th>
<th>Notes</th>
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<tbody>
<tr>
<td><strong>Agonist</strong></td>
<td>A ligand that binds to a receptor and alters the receptor state resulting in a biological response. Conventional agonists increase receptor activity, whereas inverse agonists (see Table 6) reduce it.</td>
<td>“Receptor activity” may be determined by: the proportion of receptor in an active conformation (e.g., R* vs. R), post-translational modifications (e.g., phosphorylation), or some other mechanism such as subcellular targeting. Agonists may act by combining either with the same site(s) as the endogenous agonist (primary or orthosteric site) or, less commonly, with a different region of the receptor macromolecule (allosteric or allotopic site). Agonists in the second category are sometimes referred to as allosteric (allostERIC) activators or allosteric (allostropic) agonists. Some agonists (e.g., glutamate) may only be effective in the presence of another ligand (e.g., glycine in the case of glutamate) that binds to a different site on the receptor macromolecule. Under these circumstances, glutamate is referred to as the primary agonist and glycine as a co-agonist.</td>
</tr>
<tr>
<td><strong>Antagonist</strong></td>
<td>A drug that reduces the action of another drug, generally an agonist. Many antagonists act at the same receptor macromolecule as the agonist. (see Table 7 for more details). Antagonism may also result from combination with the substance being antagonized (chemical antagonism). Functional antagonism occurs at cellular sites distinct from the receptor mediating the agonist response.</td>
<td>Functional antagonism may include mechanisms such as: indirect antagonism, which is competition by the inhibitor for the binding site of an intermediate macromolecule that links the binding of the administered agonist to the effect observed (e.g., adrenoceptor antagonist blockade of the actions of tyramine or protein kinase A inhibitors blocking β adrenoceptor agonist effects) or physiological antagonism in which the action of one agonist exerts an opposite effect to that of the original agonist—usually through a different receptor (e.g., muscarinic agonist inhibition of β adrenoceptor-stimulated adenylyl cyclase activity in the heart).</td>
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<tr>
<td><strong>Allosteric (allostropic) modulator</strong></td>
<td>A ligand that increases or decreases the action of an (primary or orthosteric) agonist or antagonist by combining with a distinct (allostERIC or allotopic) site on the receptor macromolecule.</td>
<td>AllostERIC (allostropic) enhancers are modulators that enhance orthostERIC ligand affinity and/or agonist efficacy while having no effect on their own. AllostERIC (allostropic) antagonists are modulators that reduce orthostERIC ligand affinity and/or agonist efficacy. AllostERIC (allostropic) agonists or activators are ligands that are able to mediate receptor activation in their own right by binding to a recognition domain on the receptor macromolecule that is distinct from the primary (orthostERIC) site. Neutral allostERIC (allostropic) ligands bind to an allostERIC site without affecting the binding or function of orthostERIC ligands but can still block the action of other allostERIC modulators that act via the same allostERIC site.</td>
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<tr>
<td><strong>Syntopic interaction</strong></td>
<td>An interaction between ligands that bind to the same recognition site, or to recognition sites that overlap, on the receptor macromolecule.</td>
<td>This term is most commonly associated with the description of competitive interactions between ligands that bind to the primary (orthostERIC) site on a receptor, but need not be restricted to this specific situation. A syntopic interaction can also occur between different ligands that share a similar recognition domain (e.g., a common allostERIC site) anywhere on the receptor macromolecule.</td>
</tr>
<tr>
<td><strong>AllostERIC (allostropic) interaction</strong></td>
<td>An interaction between ligands that bind to distinct, non-overlapping, recognition sites on the receptor macromolecule.</td>
<td>The terms syntopic and allotropic are recommended to distinguish between interactions that occur at a common (same) site versus interactions that occur between different sites, respectively. Accordingly, the term allotropic can be used interchangeably with the term allostERIC when describing cross-interactions between different sites on a receptor macromolecule. The term syntopic should be confined to defining interactions at a common site and should not be used interchangeably with the term orthostERIC; the latter term specifically refers to the primary (endogenous agonist-binding) recognition site on the receptor.</td>
</tr>
<tr>
<td><strong>AllostERIC transition</strong></td>
<td>The isomerization of a receptor macromolecule between multiple conformational states.</td>
<td>Different authors have used the term, allostERIC, in different ways (see Colquhou, 1998; Christopoulos and Kenakin, 2002). One common use of the term is to describe any mechanism that involves the isomerization of a receptor between two or more conformational states that can each display a different affinity for a given ligand. A second common use of the term is to explicitly describe an interaction between two topographically distinct recognition sites on a receptor macromolecule in a given conformational state. In order to accommodate both uses, it is recommended that the term allostERIC transition be used when describing receptor isomerization mechanisms, and the term allostERIC (or allotropic) interaction, be used when explicitly describing a cross-interaction between multiple ligands concomitantly bound to a receptor macromolecule.</td>
</tr>
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</table>

Constant for an agonist would each provide an estimate of $K_{app}$ rather than $K_1$. This distinction is also important when considering those receptors (e.g., ligand-gated ion channels) that have more than one binding site for the agonist.

**B. Schild Equation and Plot—Further Detail**

The Schild equation is based on the assumptions that (a) agonist and antagonist combine with the receptor macromolecule in a freely reversible but mutually exclusive manner, (b) equilibrium has been reached and that
The relationship between concentration and effect: Hill equation

In the following, drug action is expressed in terms of the effect, $E$, produced when an agonist, $A$, is applied at a concentration $[A]$. The relationship between $E$ and $[A]$ can often be described empirically by the Hill equation, which has the form:

$$E = \frac{[A]^{n_H}}{H + [A]^{n_H}}$$

where $E_{\text{max}}$ is the maximal action of $A$, $n_H$ is the Hill coefficient, and $[A]_{50}$ is the concentration that produces an effect that is 50% of $E_{\text{max}}$.

Potency

An expression of the activity of a drug, in terms of the concentration or amount needed to produce a defined effect; an imprecise term that should always be further defined (see EC$_{50}$, IC$_{50}$, etc.). Drug potency depends on both receptor (affinity, efficacy) and tissue (receptor numbers, drug accessibility) parameters. The term is sometimes, incorrectly, used to refer to the maximum effect attainable.

**TABLE 2**

Experimental measures of drug action: general

<table>
<thead>
<tr>
<th>Term</th>
<th>Suggested Usage</th>
<th>Notes</th>
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</thead>
<tbody>
<tr>
<td>EC$<em>{50}$ or $[A]</em>{50}$</td>
<td>The molar concentration of an agonist that produces 50% of the maximal possible effect of that agonist. Other percentage values (EC$<em>{20}$, EC$</em>{40}$ etc.) can be specified. The action of the agonist may be stimulatory or inhibitory.</td>
<td>The mass concentration (g/l) should be used if the molecular weight of the test substance is unknown.</td>
</tr>
<tr>
<td>ED$_{50}$</td>
<td>Either the dose of a drug that produces, on average, a specified all-or-none response in 50% of a test population or, if the response is graded, the dose that produces 50% of the maximal response to that drug.</td>
<td>The choice between $[A]<em>{50}$ and $K</em>{\text{max}}$ by $x$. The choice between $[A]<em>{50}$ and $K</em>{\text{max}}$ by $x$. The choice between $[A]<em>{50}$ and $K</em>{\text{max}}$ by $x$.</td>
</tr>
<tr>
<td>pEC$<em>{50}$ or $p[\text{Al}]</em>{50}$</td>
<td>The negative logarithm to base 10 of the EC$_{50}$ of an agonist.</td>
<td>The term EC$<em>{50}$ is sometimes used interchangeably with EC$</em>{10}$, but the former term is best reserved for in vivo use where actual doses, as opposed to concentrations, are used.</td>
</tr>
<tr>
<td>Maximal agonist effect</td>
<td>The maximal effect that an agonist, whether conventional or inverse, can elicit in a given tissue under particular experimental conditions. It is best expressed as a fraction of the effect produced by a full agonist of the same type acting through the same receptors under the same conditions.</td>
<td>In some circumstances, the maximum response will be unknown. This will often be so in clinical pharmacology, for considerations of safety. The ED terminology is to be used for such measurements, the appropriate units must be included (e.g., ED$<em>{0.5}$, or ED$</em>{\text{min}}$) to avoid confusion with EC$<em>{50}$ or $[A]</em>{50}$ as here defined.</td>
</tr>
<tr>
<td>EMR</td>
<td>Equi-effective molar concentration ratio; the ratio of the molar concentrations of test and reference substances that produce the same biological effect (whether activation or inhibition).</td>
<td>Also referred to historically as intrinsic activity and designated as $a$. The term EMR is to be used in this context, the appropriate units must be included (e.g., EMR$<em>{\text{max}}$, or EMR$</em>{\text{min}}$) to avoid confusion with EC$<em>{50}$ or $[A]</em>{50}$ as here defined.</td>
</tr>
<tr>
<td>EDR</td>
<td>Equi-effective dose ratio, as above, but used when doses rather than concentrations are compared, as in vivo work.</td>
<td>Should be specified only if the log concentration-effect curves for the substances being compared are parallel.</td>
</tr>
</tbody>
</table>

**TABLE 3**

Experimental measures of drug action: agonists

<table>
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<tr>
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<tbody>
<tr>
<td>EC$<em>{50}$ or $[A]</em>{50}$</td>
<td>The molar concentration of an agonist that produces 50% of the maximal possible effect of that agonist. Other percentage values (EC$<em>{20}$, EC$</em>{40}$ etc.) can be specified. The action of the agonist may be stimulatory or inhibitory.</td>
<td>The mass concentration (g/l) should be used if the molecular weight of the test substance is unknown.</td>
</tr>
<tr>
<td>ED$_{50}$</td>
<td>Either the dose of a drug that produces, on average, a specified all-or-none response in 50% of a test population or, if the response is graded, the dose that produces 50% of the maximal response to that drug.</td>
<td>The choice between $[A]<em>{50}$ and $K</em>{\text{max}}$ by $x$. The choice between $[A]<em>{50}$ and $K</em>{\text{max}}$ by $x$. The choice between $[A]<em>{50}$ and $K</em>{\text{max}}$ by $x$.</td>
</tr>
<tr>
<td>pEC$<em>{50}$ or $p[\text{Al}]</em>{50}$</td>
<td>The negative logarithm to base 10 of the EC$_{50}$ of an agonist.</td>
<td>The term EMR has also been used, particularly in the earlier literature.</td>
</tr>
<tr>
<td>Maximal agonist effect</td>
<td>The maximal effect that an agonist, whether conventional or inverse, can elicit in a given tissue under particular experimental conditions. It is best expressed as a fraction of the effect produced by a full agonist of the same type acting through the same receptors under the same conditions.</td>
<td>Also referred to historically as intrinsic activity and designated as $a$. The term EMR is to be used in this context, the appropriate units must be included (e.g., EMR$<em>{\text{max}}$, or EMR$</em>{\text{min}}$) to avoid confusion with EC$<em>{50}$ or $[A]</em>{50}$ as here defined.</td>
</tr>
<tr>
<td>EMR</td>
<td>Equi-effective molar concentration ratio; the ratio of the molar concentrations of test and reference substances that produce the same biological effect (whether activation or inhibition).</td>
<td>Should be specified only if the log concentration-effect curves for the substances being compared are parallel.</td>
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<tr>
<td>EDR</td>
<td>Equi-effective dose ratio, as above, but used when doses rather than concentrations are compared, as in vivo work.</td>
<td>Should be specified only if the log concentration-effect curves for the substances being compared are parallel.</td>
</tr>
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</table>

EMR, equi-effective molar concentration ratio; EDR, equi-effective dose ratio.
the law of mass action can be applied, (c) a particular level of response is associated with a unique degree of occupancy or activation of the receptors by the agonist, (d) the response observed is mediated by a uniform population of receptors, and (e) the antagonist has no other relevant actions, e.g., on the relationship between receptor and response. Under these circumstances, the slope of the Schild plot should be 1 and the resulting estimate of the pA2 should be equal to the pK (negative logarithm of the antagonist equilibrium dissociation constant).

For an antagonist to be classified as reversible and competitive on the basis of experiments in which a biological response is measured, the following criteria must hold:

1. In the presence of the antagonist, the log agonist concentration-effect curve should be shifted to the right in a parallel fashion.
2. The relationship between the extent of the shift (as measured by the concentration ratio) and the concentration of the antagonist should follow the Schild equation over as wide a range of antagonist concentrations as practicable. Usually, the data are presented in the form of the Schild plot, and adherence to the Schild equation is judged by the finding of a linear plot with unit slope (see Note 2 below). Nonlinearity and slopes other than unity can result from many causes. For example, a slope greater than 1 may reflect incomplete equilibration with the antagonist or depletion of a potent antagonist from the medium, as a consequence either of binding to receptors or to other structures. A slope that is significantly less than 1 may indicate removal of agonist by a saturable uptake process, or it may arise because the agonist is acting at more than one receptor (the Schild plot may then be nonlinear). See Kenakin (1997) for a detailed account.

Note 1: The finding that the Schild equation is obeyed over a wide range of concentrations does not prove that the agonist and antagonist act at the same site. All that may be concluded is that the results are in keeping with the hypothesis of mutually exclusive binding, which may of course result from competition for the same site but can also arise in other ways (see Allosteric Modulators in Table 1 and Competitive Antagonism in Table 7).

Note 2: Traditional Schild analysis is based on the use of linear regression. Nowadays, with the almost ubiquitous availability of computers in most research environments, a more accurate approach to performing Schild analysis is to use computerized nonlinear regression to directly fit agonist/antagonist concentration-response data to the Gaddum/Schild equations. The advantages of this approach over traditional Schild analysis are described elsewhere (Waud, 1975; Black et al., 1985; Lew and Angus, 1995). One simple
Terms and procedures used in the analysis of drug action: the quantification of ligand-receptor interactions

<table>
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<tr>
<th>Term</th>
<th>Suggested Usage</th>
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<tr>
<td>&quot;Concentration&quot; of receptors</td>
<td>$[R]$ for notional concentration of ligand-free receptors; $[R]<em>2$ or $[R]</em>{tot}$ for total receptors.</td>
<td>Proportional to the quantity $B_{max}$ (the maximal specific binding of a ligand, often expressed in units of mol ligand/mg protein, or ligands bound/cell) measured in radioligand binding studies, in the absence of complications. The relationship between $B_{max}$ and $N$ is influenced by the number of ligand binding sites possessed by each receptor. For ligand-gated ion channels, this is generally greater than one. Also referred to as receptor density.</td>
</tr>
<tr>
<td>Number of receptors, $N$</td>
<td>The total number of receptors, expressed in terms of unit area of membrane, or per cell, or per unit mass of protein.</td>
<td>Units to be specified (M$^{-1}$).</td>
</tr>
<tr>
<td>Proportion of receptors in specified states</td>
<td>$p_{LR}$ for proportion (fraction) of receptors or binding sites free of ligand, $p_{LR}$ for the proportion of receptors or binding sites occupied by the ligand $L$. If a distinction is made between inactive and active states of the receptor, then $p_{LR}$ refers to the inactive state, $p_{LR}$ for the proportion of receptors in which $L$ occupies its binding site(s) and which are in an active state. $p_{LR}$ for the proportion of receptors in which $L$ occupies its binding site(s) and which are in a distinct ($R'$) state that differs from both the inactive and the fully active states. This may exhibit some classical signaling activity or it may differ from $R$ or $R'$ in another property such as activation of different effectors, rates of internalization, or cellular trafficking (Berg et al, 1998; Kenakin and Onaran, 2002).</td>
<td></td>
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<tr>
<td>Rate constants for the binding of a ligand</td>
<td>$k_{+1}$ for the association (forward) rate constant, and $k_{-1}$ for the dissociation (backward) rate constant, in the reaction $L + R \rightleftharpoons LR$ Here, $L$ represents a ligand and $R$ the unoccupied binding site.</td>
<td>$K$ can be used in combination with subscripts for clarity. Lowercase letter subscripts are used to designate the type of experimental approach used to determine the constant (e.g., $K_\alpha$, $K_\beta$, $K_\gamma$—see below) and uppercase letter subscripts designate the compound to which the constant refers (e.g., $K_A$, $K_B$, or $K_{AA}$, $K_{BB}$, for compounds $A$ and $B$, respectively). The choice of lowercase subscript that is used in combination with $K$ is based on the following conventions: (i) $K_\alpha$ refers to the equilibrium dissociation constant of a ligand determined directly in a binding assay using a labeled form of the ligand. (ii) $K_\beta$ refers to the equilibrium dissociation constant of a ligand determined in inhibition studies. The $K_\beta$ for a given ligand is typically (but not necessarily) determined in a competitive radioligand binding study by measuring the inhibition of the binding of a reference radioligand by the competing ligand of interest under equilibrium conditions. (iii) $K_\gamma$ refers to the equilibrium dissociation constant of a ligand (traditionally, a competitive antagonist) determined by means of a functional assay.</td>
</tr>
<tr>
<td>Equilibrium dissociation constant for ligand-receptor interactions, $K$</td>
<td>In the simple scheme below, $K$ is numerically equal to the ratio of dissociation to association rate constants ($k_{-1}/k_{+1}$), and has the dimension M (mol/l).</td>
<td>When a subscript indicates the type of method used, $K_\alpha$, $K_\beta$, and $K_\gamma$ should be used in preference to $K_\alpha$, $K_\beta$, and $K_\gamma$, respectively. Uppercase subscripts (either alphabetical, e.g., $K_A$, numerical, e.g., $K_\alpha$, or a combination of the two, e.g., $K_{AB}$) are recommended only to identify the particular ligands and equilibria under consideration, especially when dealing with more complicated schemes involving several steps such as binding followed by isomerization. Two alternative examples of such a scheme are shown below:</td>
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$L + R \rightleftharpoons LR$  
$L + R \rightleftharpoons LR^*$

Note: The reciprocal of the equilibrium dissociation constant (the equilibrium association constant or affinity constant, in units of M$^{-1}$) can also be used, although this is not preferred.
The concept and numerical term introduced by Stephenson (1956) to express the degree to which different agonists produce varying responses, even when occupying the same proportion of receptors. (See also Maximal agonist effect, Table 3).

In Stephenson’s formulation (1956), combination of an agonist with its receptors is considered to result in a signal or “stimulus” S, which is equated to the product of the efficacy of the agonist A and the proportion of receptors occupied: $S_A = e_A[R]_B$.

When the response of a tissue is half-maximal, $S$ is assigned the value unity. Hence, a partial agonist that when occupying all the receptors produces a maximal response that is half that of a full agonist (under the same experimental conditions), has an efficacy of unity. Efficacy is both agonist- and tissue-dependent.

The expression intrinsic efficacy, $e$, was introduced by Furchgott (1966) to denote the notional efficacy associated with a single receptor: $e = \alpha[R]_B$ in which $[R]_B$ indicates the total concentration of receptors. This term is now also used in a wider sense (see below). Black and Leff (1983) provided another description of differences in the ability of agonists to produce a maximal effect. They defined the term $\tau$ (tau) as $[R]_B/K_D$ in which $K_D$ is the midpoint parameter of an explicit function relating receptor occupancy to the response of a tissue. Recent advances in the understanding of receptor function have identified the importance of distinguishing between the occupation of a receptor by an agonist and the activation of that receptor. This distinction was not considered in the earlier work. More detailed models of receptor action are therefore required, and these provide a better framework for expressing, and explaining, differences in the ability of agonists to activate receptors. The term intrinsic efficacy is now often used when discussing the agonist, rather than the tissue-dependent component of efficacy in such schemes (e.g., the isomerization model of del Castillo and Katz (1957), also Colquhoun (1987); the ternary model of DeLean et al. (1980), also Samama et al. (1990)). However, Stephenson’s efficacy, and Black and Leff’s $\tau$, can still serve as useful comparative measures of the activity of agonists on intact tissues.

continued
Terms and procedures used in the analysis of drug action: agonists

<table>
<thead>
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<tbody>
<tr>
<td>Full agonist</td>
<td>When the receptor stimulus induced by an agonist reaches the maximal response capability of the system (tissue), then it will produce the system maximal response and be a full agonist in that system. If the maximum tissue response is reached at less than full receptor occupancy it results in a so-called a spare receptor situation (see below). Several agonists may thus elicit the same maximal response, albeit at different receptor occupancies. They are all full agonists in that experimental system but have different efficacies. This designation of full vs. partial agonist is system-dependent, and a full agonist for one tissue or measurement may be a partial agonist in another.</td>
<td>An inverse agonist may combine either with the same site as a conventional agonist, or with a different site on the receptor macromolecule (see Table 1).</td>
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<tr>
<td>Spare receptors</td>
<td>A pharmacological system has spare receptors if a full agonist can cause a maximum response when occupying only a fraction of the total receptor population. Thus not all of the receptors in the tissue are required to achieve a maximal response with some high efficacy agonists. This has been amply demonstrated experimentally by Furchgott (1966) and others in that irreversible chemical inactivation of some receptors results in a decrease in agonist potency without a decreased maximal response. At sufficiently high degrees of receptor inactivation, the maximum response even to full agonists is finally reduced.</td>
<td>The term spare receptors is widely misunderstood with some readers thinking that the &quot;spare&quot; receptors are nonfunctional. The phrase receptor reserve means essentially the same thing and may help avoid this confusion though it is less frequently used in the literature. Although all receptors may not be needed for a maximal response, all receptors contribute to the measured responses, thus the potency of full agonists (and often the physiological agonists) is enhanced by the presence of the spare receptors.</td>
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</tbody>
</table>
| Inverse agonist    | A ligand that by binding to receptors reduces the fraction of them in an active conformation (see also agonist, Table 1). This can occur if some of the receptors are in the active form (R*), in the absence of a conventional agonist:  

\[
R = R^* \\
(\text{inactive}) \quad (\text{active})
\]

If the ligand \( L \) combines preferentially with inactive receptors, it will reduce the fraction in the active state:  

\[
LR = L + R = R^* \\
(\text{inactive}) \quad (\text{inactive}) \quad (\text{active})
\]

| Intrinsic efficacy | See Efficacy (above in this table). | As noted for Full agonist above, the designation partial agonist is system-dependent and a partial agonist in one experimental system may be a full agonist in another (e.g., one in which there were more receptors expressed). Recent advances make it clear that the inability of a particular agonist to produce a maximal response can have several explanations. Perhaps the most important is that not enough of the receptors occupied by the agonist convert to an active form, and the term partial agonist is now sometimes applied to this situation alone. The distinction between such usages can be illustrated by the action of decamethonium at the neuromuscular junction. Decamethonium cannot match the conductance increase caused by acetylcholine. However, this is not because decamethonium is less able to cause the receptors to isomerize to an active form: rather, the smaller maximal response is largely a consequence of the greater tendency of decamethonium to block the ion channel that is intrinsic to the nicotinic receptor. Hence, decamethonium would not be regarded as a partial agonist with respect to receptor conformational equilibria defined above but would be in the broader sense of the term. |
| Partial agonist    | An agonist that in a given tissue, under specified conditions, cannot elicit as large an effect (even when applied at high concentration, so that all the receptors should be occupied) as can another agonist acting through the same receptors in the same tissue (see also Full agonist and Efficacy, above in this table, and Maximal agonist effect, Table 3). | |

The method is to fit agonist EC\(_{50}\) data, determined in the absence and presence of antagonist, to the following equation:

\[
pEC_{50} = -\log([B]^{S} + 10^{-pA_2^{S}}) - \log c
\]

where pEC\(_{50}\) and pA\(_2\) are as defined previously in Tables 3 and 4, respectively, \([B]\) denotes the antagonist concentration, \( S \) is a logistic slope factor analogous to the Schild slope and \( c \) is a fitting constant (Motulsky and Christopoulos, 2003). This equation is based on a modification of the original Gaddum/Schild equations that results in more statistically reliable parameter estimates than those obtained using the original equations for nonlinear regression (Waud and Lipkowitz, 1980).
The Schild plot A graph of log \( r / H_{11002} \) against log antagonist concentration, where \( r \) is the concentration ratio (see Table 4). This should yield a straight line of unit slope if the Schild equation is obeyed (Arunlakshana and Schild, 1959). The linearity and slope provide information about the nature of the antagonism. In practice, it is preferable to analyze agonist/antagonist interaction data by direct curve fitting to the Gaddum or Schild equations using computer-assisted nonlinear regression, but the Schild plot remains a useful graphical aid (see Section IV. B.).
C. The Relationship between the Hill and Logistic Equation

The logistic function is defined by the equation

\[ y = \frac{1}{1 + e^{-a+bz}} \]

where \( a \) and \( b \) are constants. If \( a \) is redefined as \(-\log_e(K_b)\), and \( x \) as \( \log_e z \), then

\[ y = \frac{z^b}{K^b + z^b} \]

which has the same form as the Hill equation.

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References

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