

Adrenergic

Alpha		Beta							
Agonists	Antagonists (A-1)	Agonists B-1	Agonist B-2	Antagonist B-1 Specific	Antagonist B-2	Antagonist Nonspecific B	Antagonist B w/ ISA	Antagonist A + B	
Therapeutic indications or results									
Pressors (raise BP) Or as Decongestants	Hypertension & Urinary retention in benign prostatic hypertrophy	Increase HR Increase Contraction strength	Dilate bronchioles Stop preterm labor.	B Blockers in general: Angina, Hypertension, Cardiac Dys, Myocardial Inf., Stage fright, Glaucoma					
				Cardioselective				Hypertension Heart failure	
Phenylephrine Oxymetazoline Pseudoephedrine (Sudafed®)	Prazosin Terazosin Doxazosin	Isoproterenol, dobutamine	Terbutaline Ritodrine Albuterol (4 asthma)	Metoprolol		Proprandol		labetolol carvedilol	
	AE: Orthostatic Hypotension Reflex tachycardia due to baroreceptor activation Nasal congestion Inhibition of ejaculation			AE: -Symptomatic bradycardia Heart block Exacerbate heart failure Lower BP b/c renin decrease AV Heart block. Rebound cardiac excitation. Lower aldosterone b/c “	AE: May worsen asthma b/c bronchoconstriction. Inhibition of glycogen breakdown				
				Not absolute. May cause bronchospasms.		More likely to cause ← than B-1 specific.	Partial agonists. Little affect on output and HR.		