



Physical Chemistry; A Medicinal Chemist's Perspective

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Discovery Medicinal Chemistry,
Stevenage

Physical Chemistry: A Medicinal Chemist's Perspective

- What regard to medicinal chemists pay to physical properties of their molecules?
 - Current landscape of drug discovery molecules
- Size and Hydrophobicity: key physical measures
 - Zolmitriptan: an old but salient story
 - Predictive modelling
- Case Studies: Factor Xa programme
- Solubility
- Impact of pKa: iNOS programme
- Key Concepts for medicinal chemistry

Physical Chemistry to most Medicinal Chemists?

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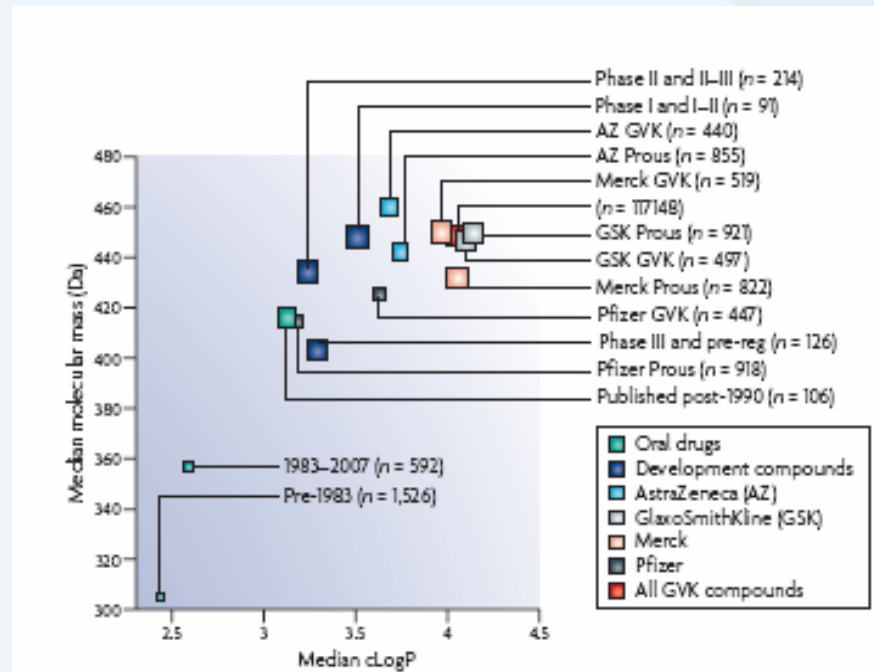


The influence of dark forces?

- Recent literature would suggest that the Med Chem community is not paying good attention to physical constraints
 - Hydrophobicity, Size and (by implication) Solubility...
- Trend towards bigger/more lipophilic molecules
 - Leeson & Springthorpe, *nature reviews drug discovery* 2007 6 881
 - Greater risks & attrition of such molecules
- Simple ADMET rules of thumb
 - Gleeson, *J Med Chem* 2008, 51(4), 817-834.
 - Highlights the implications of poor physical make-up

The Bigger Fatter Generation

- Analyses of trends in drug discovery highlight increase in the size and hydrophobicity of drug candidates
- L&S implicate resulting increased promiscuity in high attrition rate of compounds
- Even if average weight of drugs has increased, there is barely a shift in hydrophobicity



From Leeson & Springthorpe,
nature reviews drug discovery 2007 6 881

Have we seen this kind of analysis before?

- Profiling compounds using logD and cmr as a size surrogate
 - GI Absorption - Alan Hill c1989...
 - Work that led to the GSK logD/cmr absorption model

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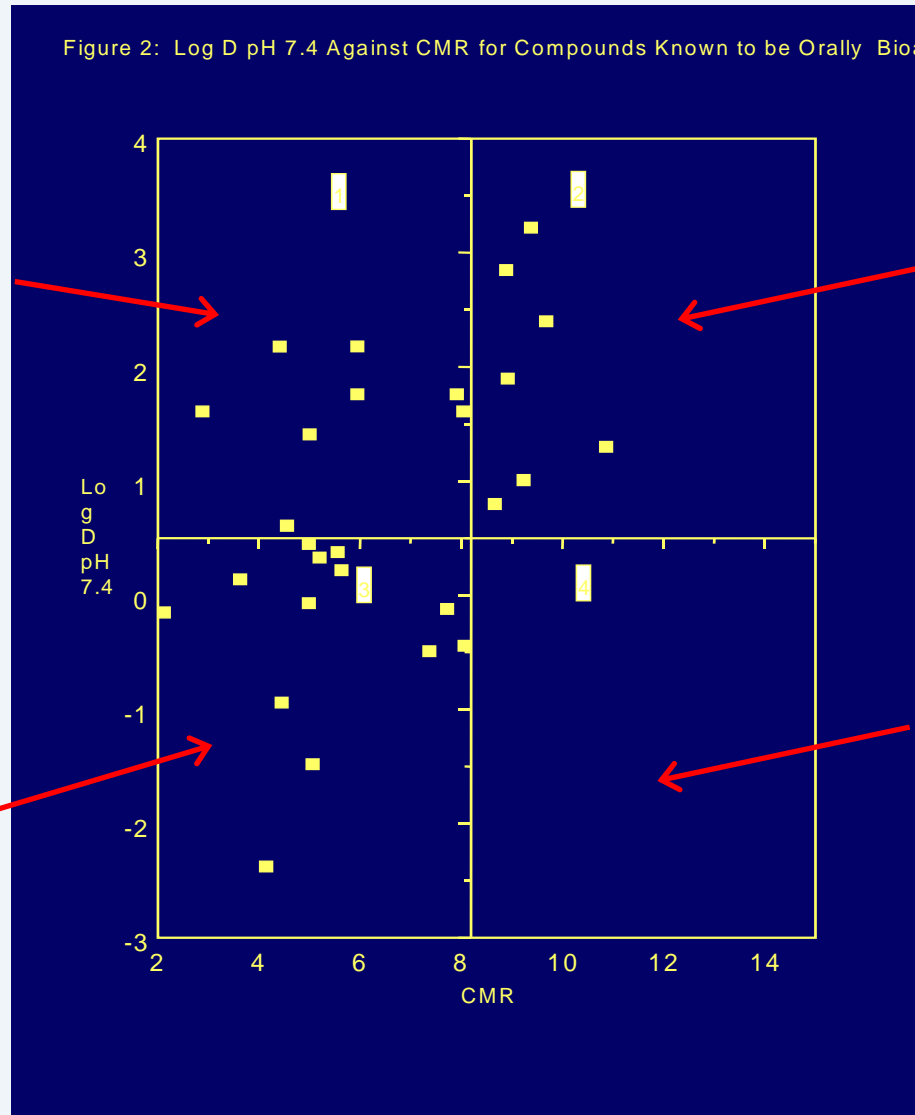
- Profiling compounds using logD and cmr as a size surrogate
 - GI Absorption - Alan Hill c1989...
 - Work that led to the GSK logD/cmr absorption model
- Considered the two main routes of absorption from GI tract:
 - Transcellular - hydrophobicity dependent
 - Paracellular - size dependent
- Properties chosen to model these processes:
 - logD pH 7.4
 - CMR (calculated molar refractivity)

4 box model for absorption

Bioavailable
Compounds
(Literature)

Either?

Likely
paracellular



Likely
transcellular

Likely
poor

Project data

Modelling Early Wellcome Compounds

A.P.Hill et al,

Headache 1994, 34, 308.

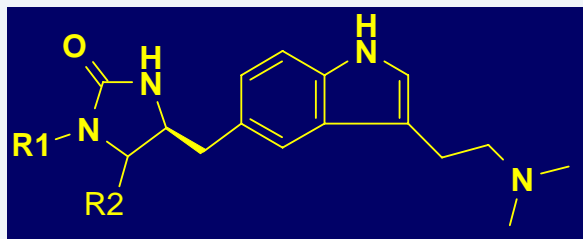
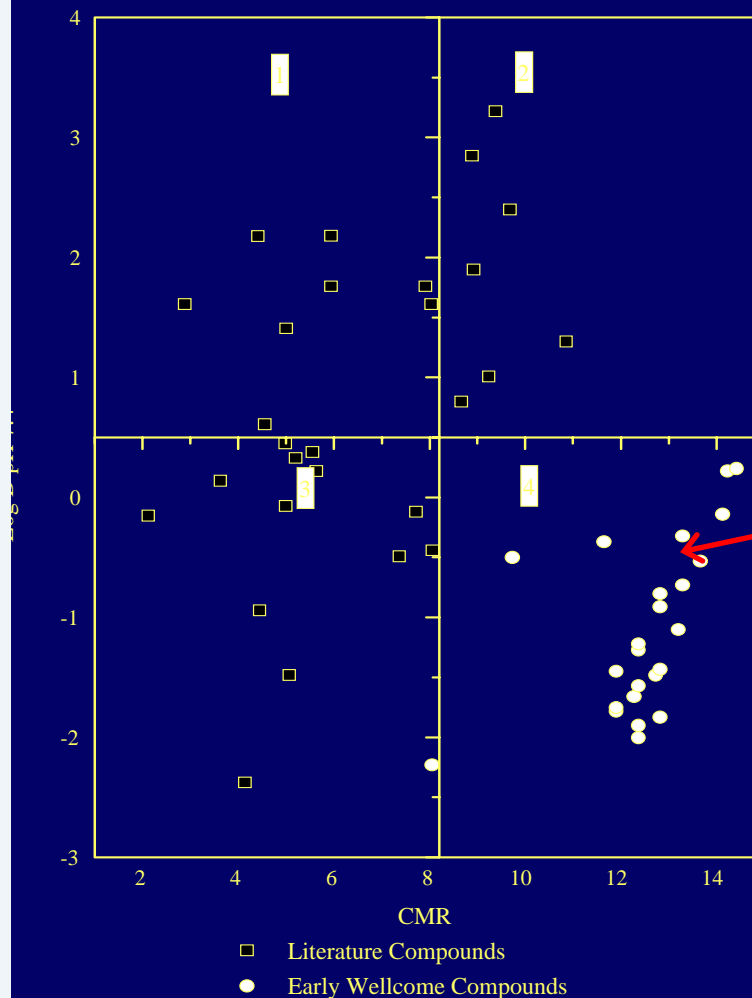


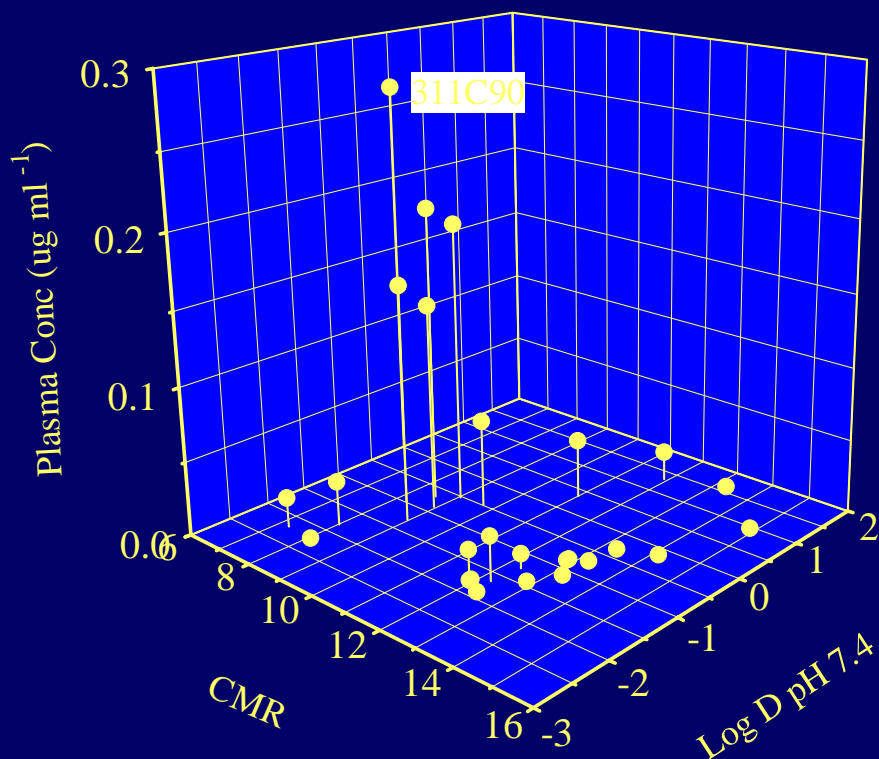
Figure 3: Log D pH 7.4 Against CMR for Compounds Known to be Orally Bioavailable and Early Wellcome Compounds



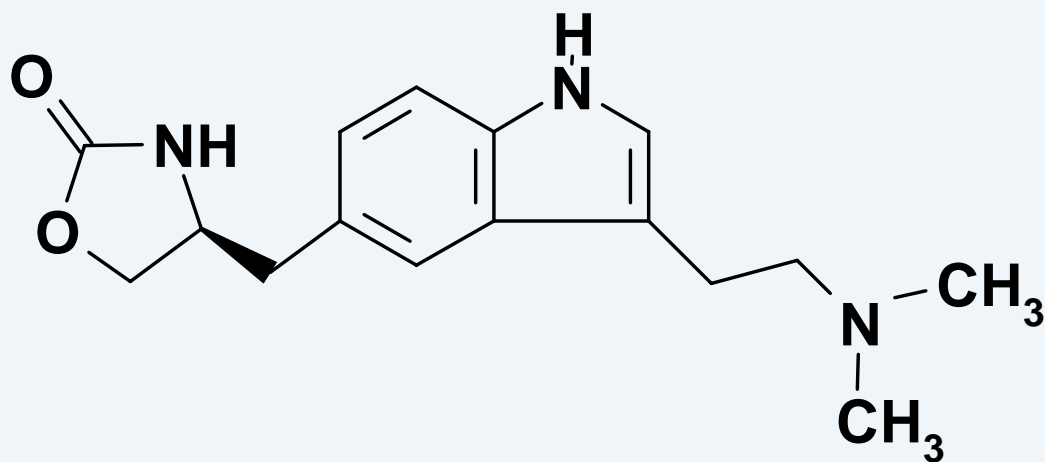
Likely poor

Plasma levels vs PC properties: new series

Figure 4: Plasma Concentration at 2 Hrs. After Administration of 10mg kg^{-1} p.o



The Final compound - *zolmitriptan*



311C90

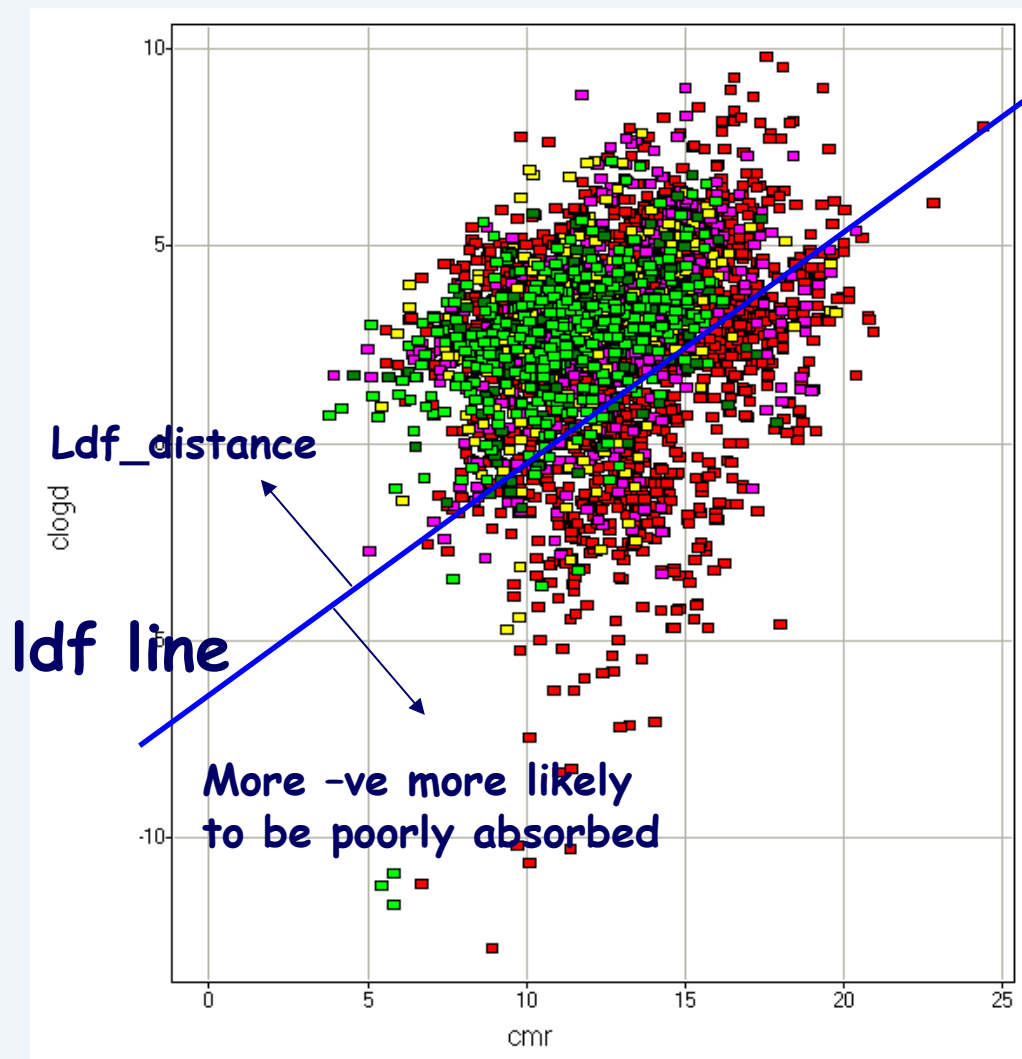
(S)-4[[3-[2-(dimethylamino)ethyl]-1H-indol-5-yl]methyl]-2-oxazolidinone

Log D_{pH 7.4} = -1.00

CMR = 8.27

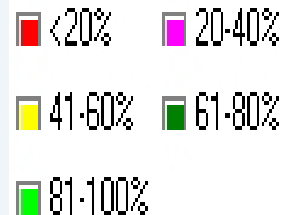
J. Med. Chem. **1995**, *38*(18), 3566-3580.

ADAMANTIS Permeation Model



- Compounds below line likely to have poor absorption
- Low F% above the line: probably due to high first pass metabolism

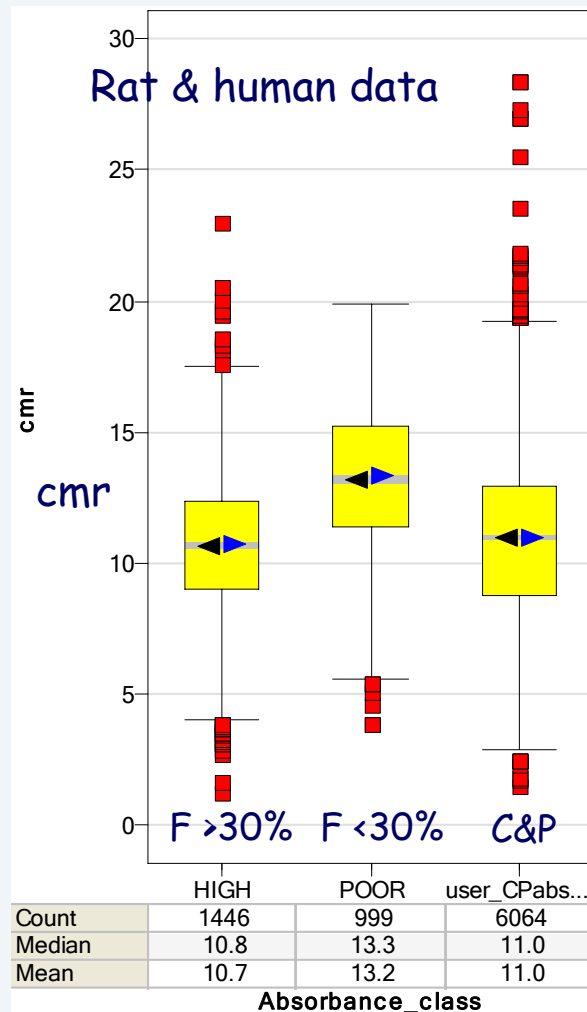
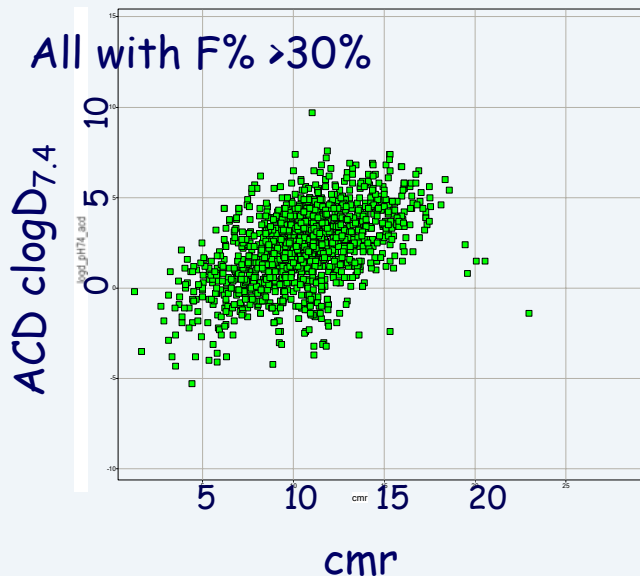
Color by Bioavailability_Class



Measured Rat F% Data

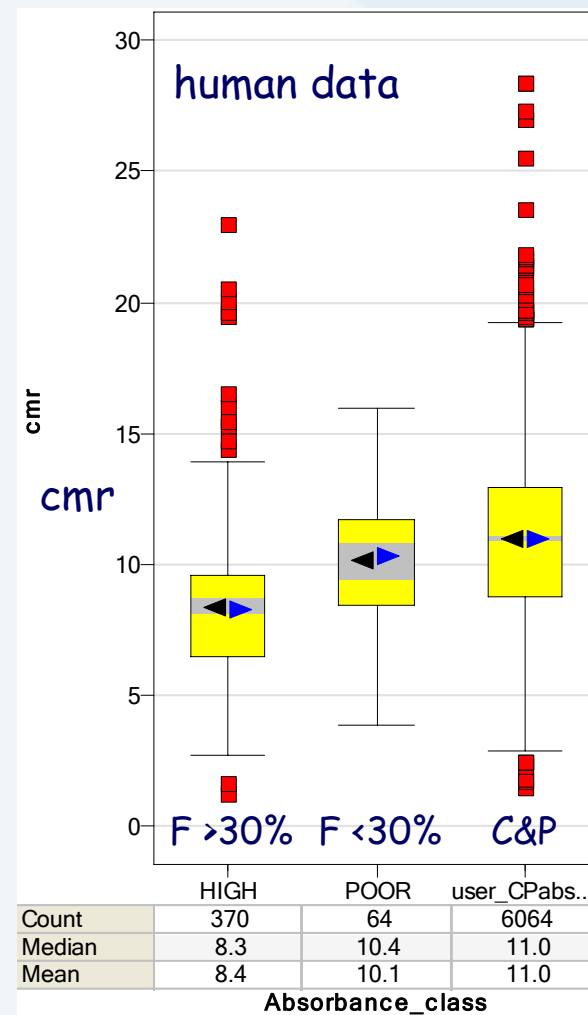
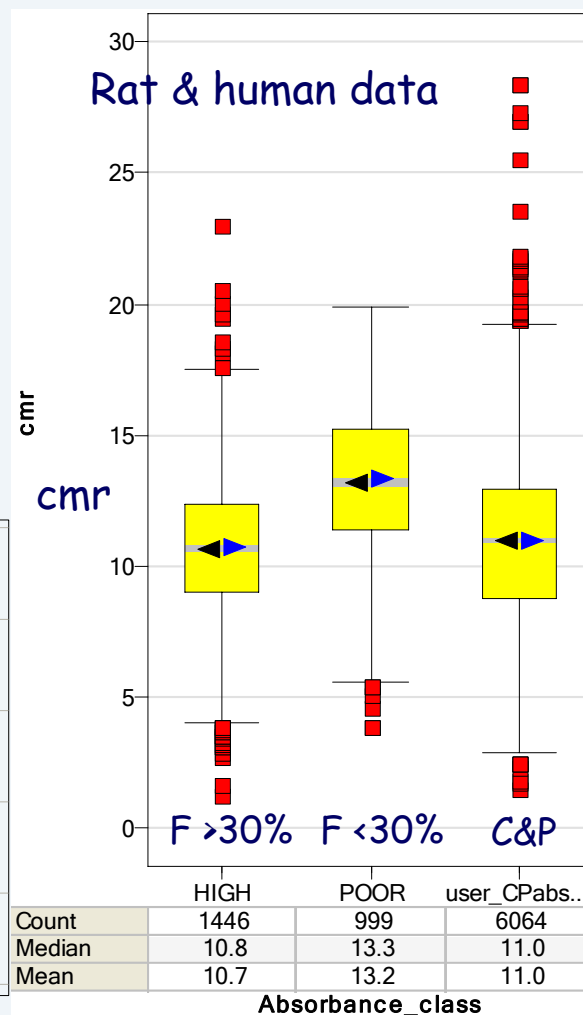
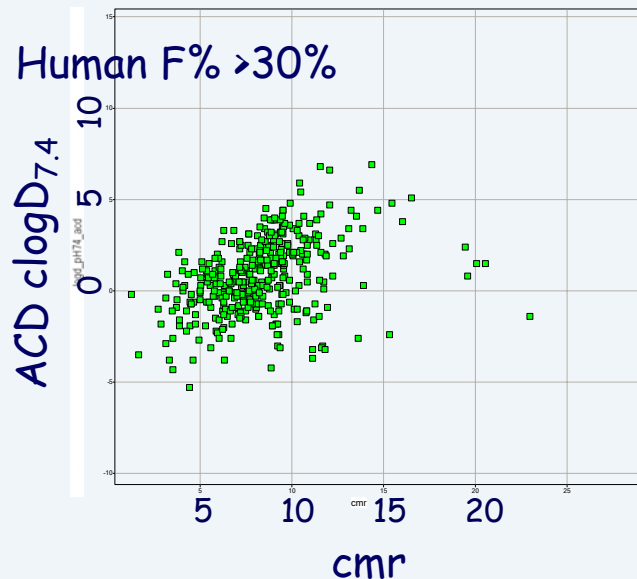
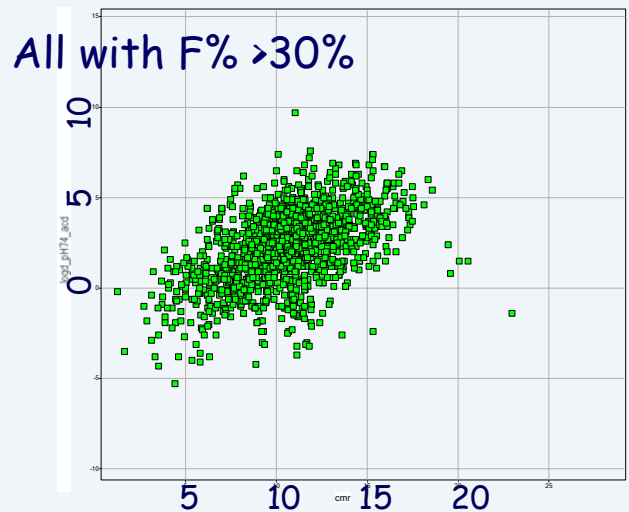
N.B. This figure was more predictive of good F% than Caco data in "Clon"

Size and logD - for orally bioavailable molecules



C&P = Screening set being profiled

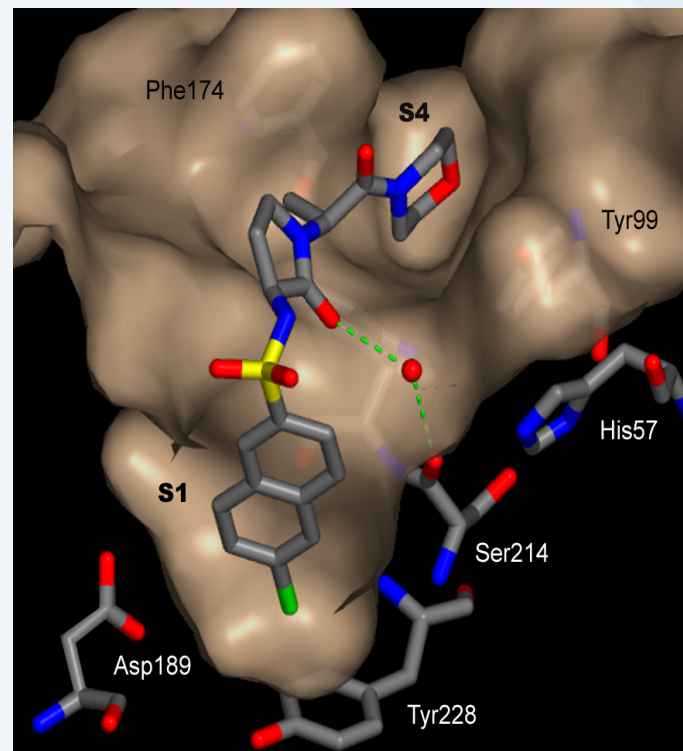
Size and logD - for orally bioavailable molecules



Human (Oral) Mean $\text{clogD}_{7.4} = 0.8$

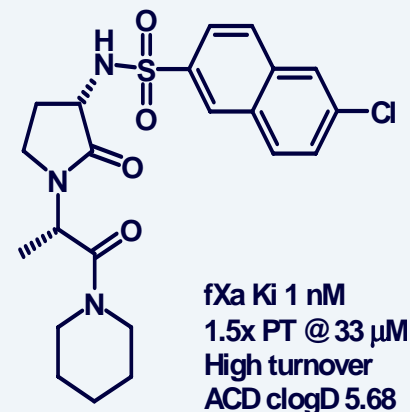
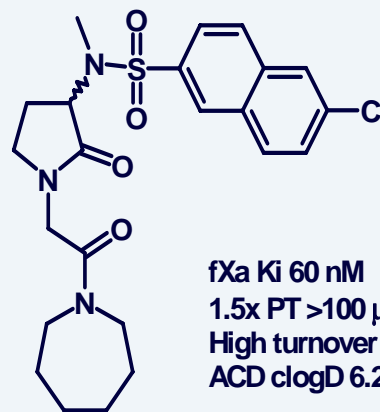
Factor Xa as a target for oral therapy

- Pivotal role in coagulation cascade
 - Prothrombin to thrombin cleavage
- Trypsin-like serine protease
 - Recognises basic AA in S1
- Many potent, basic, inhibitors reported
 - Poor oral DMPK profile
- Our goal: oral therapy (uid?)
 - Predictable/reliable DMPK profile
 - Good absorption, low metabolism; minimise risk of drug interactions
 - Avoid highly basic compounds



Factor Xa "Hit to Lead" work: early days

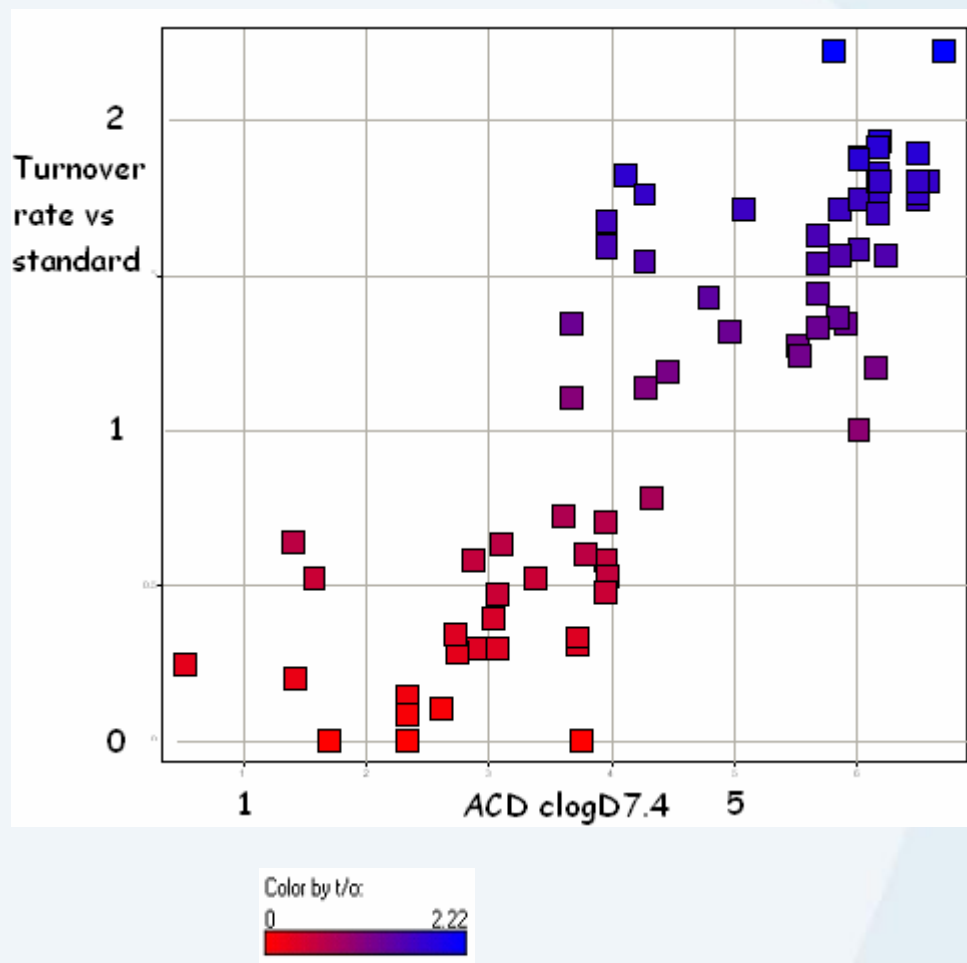
- Racemic Azepine-amide from exploratory array chemistry
- Changing Gly to Ala linker gave increased potency
- 3*S*-Stereochemistry preferred for pyrrolidinone substituent
- Numerous Ala-cyclic amides highly potent vs fXa
- BUT - poor translation into anticoagulant activity (PT assay) & high in vitro metabolic turnover



BMCL, 2006, 16, 3784

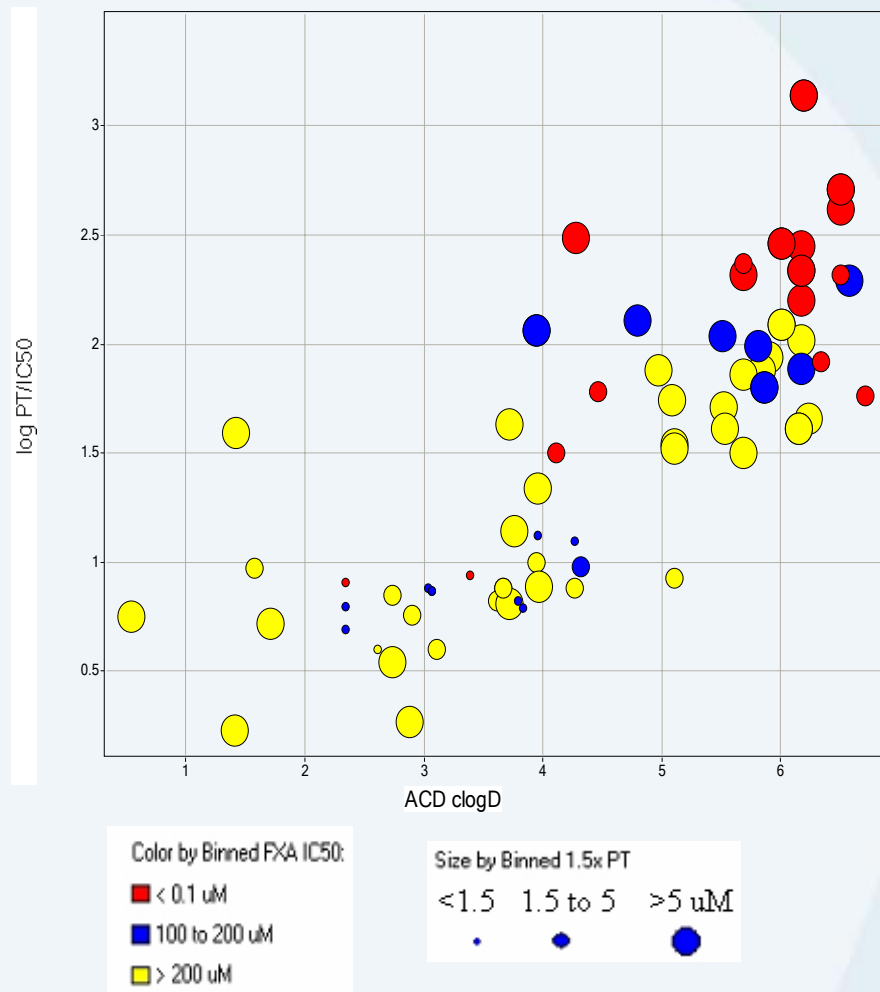
Impact of hydrophobicity on metabolism

- Part of a broad data review
- Analysis clearly showed benefit of reduced hydrophobicity on lowering metabolism
 - From HT microsome assay; relative turnover vs verapamil
- Established $ACDlogD_{7.4}$ as best hydrophobicity predictor
 - Correlation: $mlogD/CHI$ & experimental observations



Impact of hydrophobicity: Anticoagulant activity

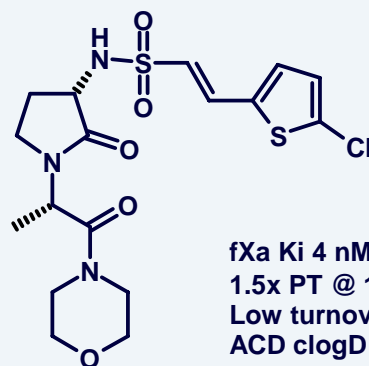
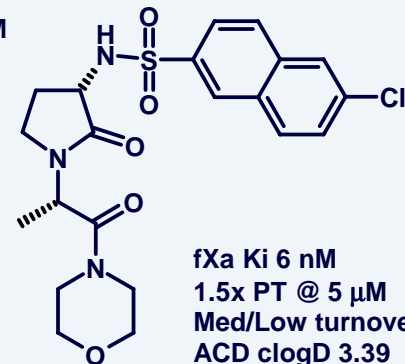
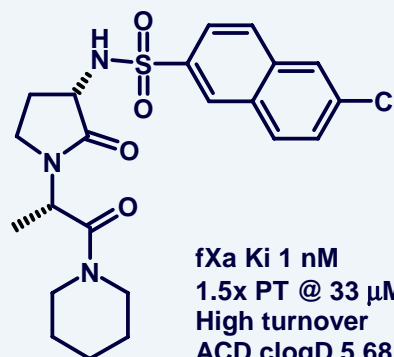
- Most active compounds generally the most hydrophobic
 - A common trend...
- Very few anywhere near target levels for anticoagulant activity
- Clear that potency translated into better anticoagulant effect with more hydrophilic molecules
- Compound design: $ACDclogD_{7.4} < 4$



N.B. data from older assays

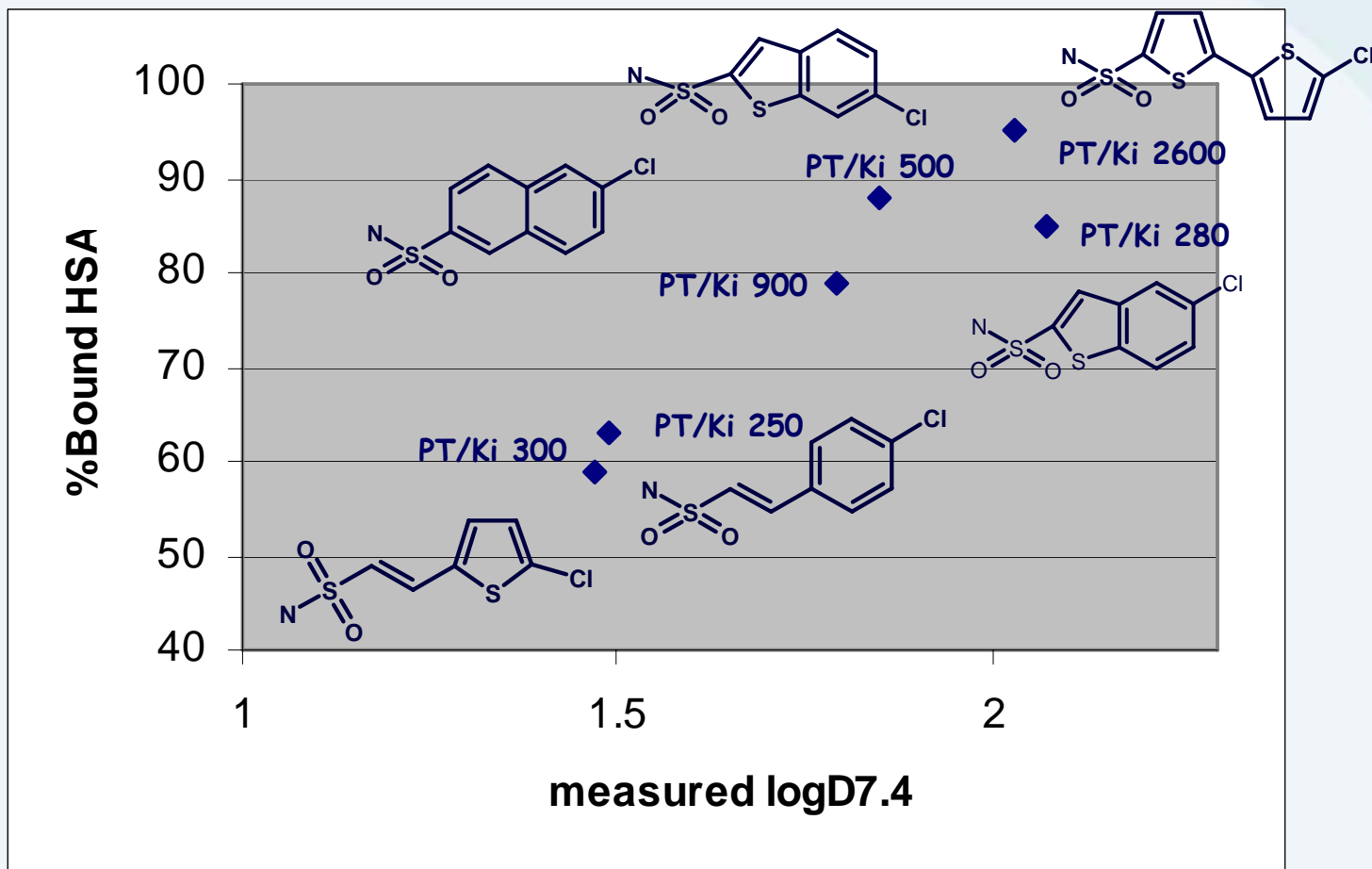
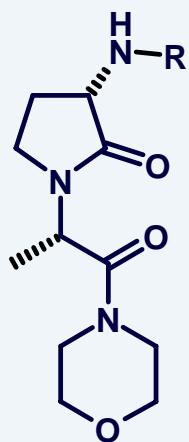
FXa Lead Optimisation: first candidate

- Piperidine to morpholine switch reduced fXa potency
- BUT enhanced anticoagulant activity (as predicted) as logD reduced
 - Turnover also reduced
- Further reductions in hydrophobicity through variation of sulphonamide
- Gave overall profile appropriate for further progression with *bid* dosing
 - Active in Rat Venous Thrombosis model (EC_{50} 2.1 μ M)
 - No bleeding liability



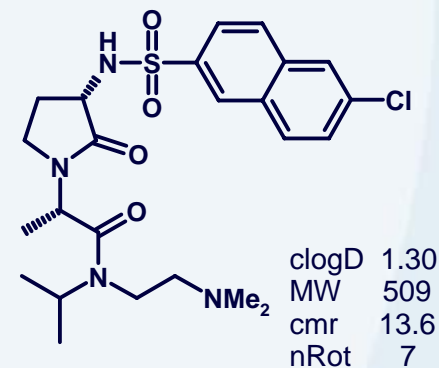
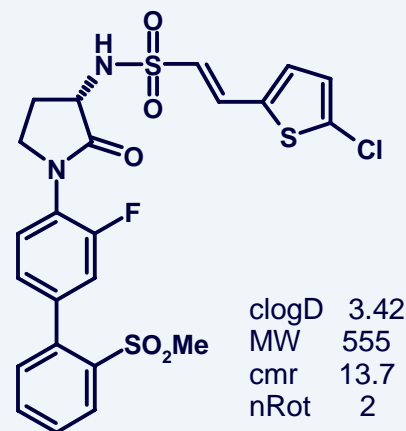
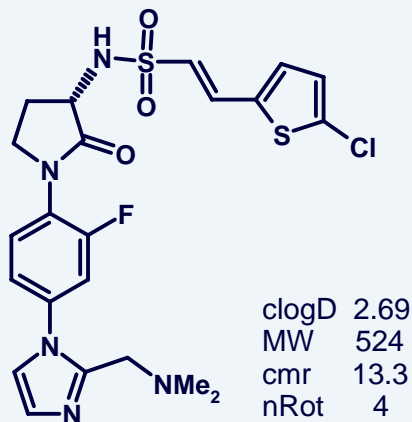
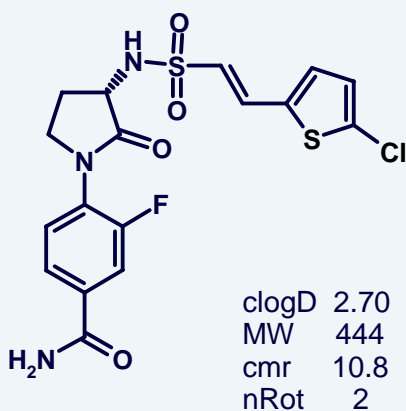
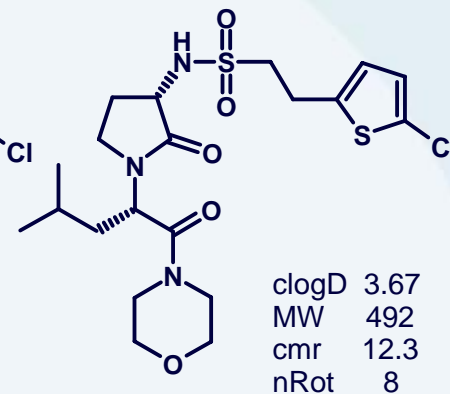
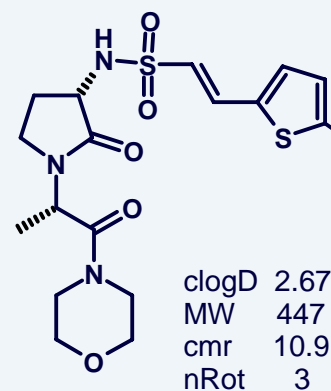
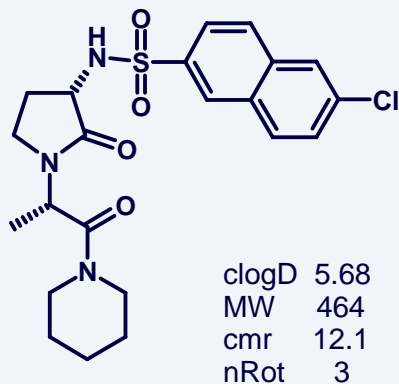
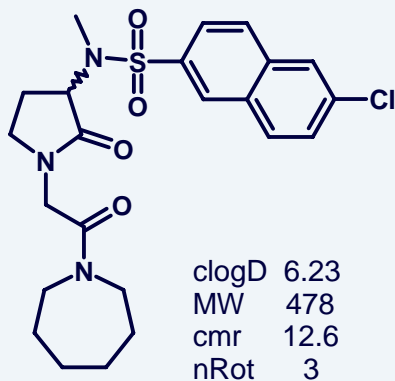
J Med Chem, 2007, 50, 1546

Plasma Protein Binding and logD



- Reducing logD had tangible effect on PPB, which was a likely influence on anticoagulant activity.

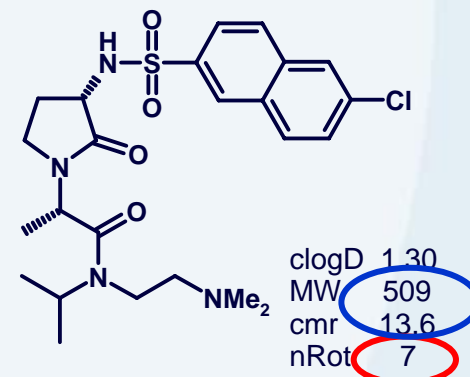
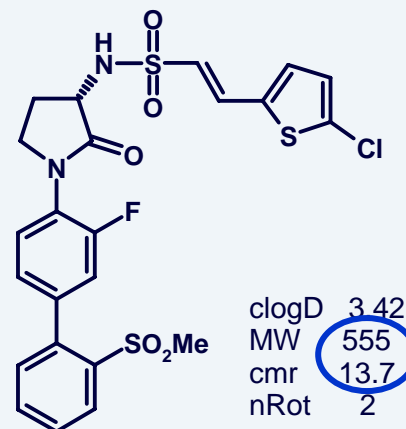
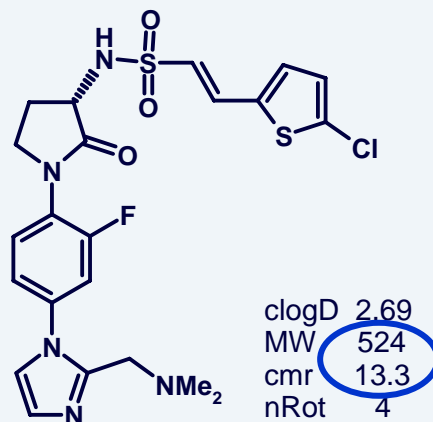
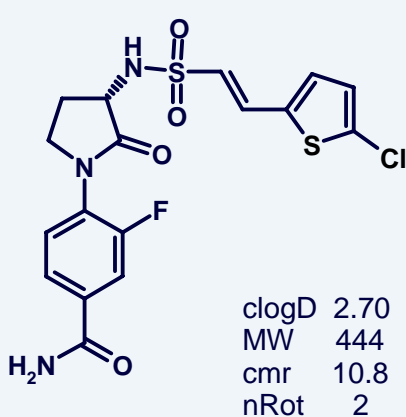
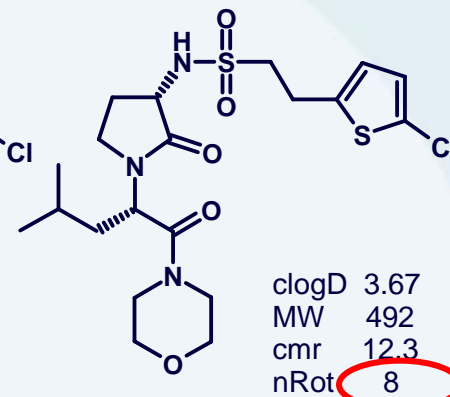
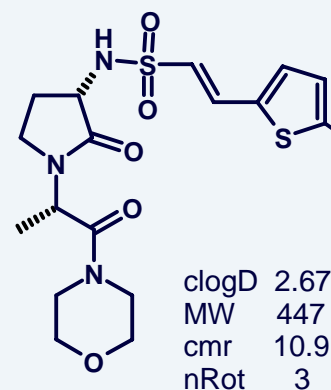
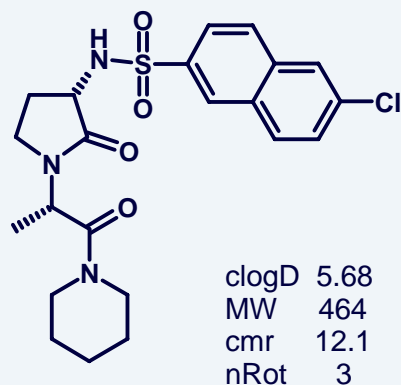
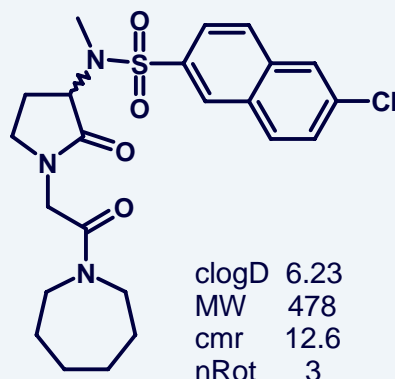
Molecular evolution towards a second candidate



- Highlighting key drivers of structure-property relationships

BMCL, 2007, 17, 2927
BMCL, 2006, 16, 5953
BMCL, 2008, 18, 23 & 28

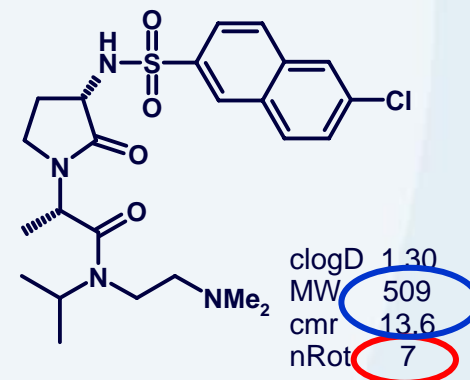
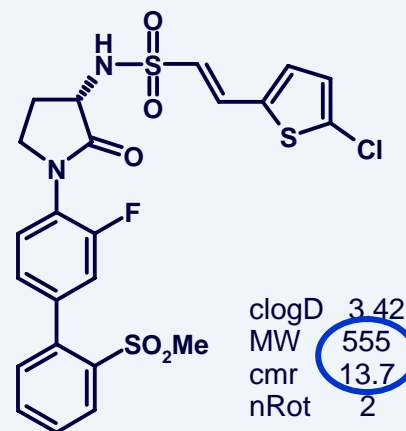
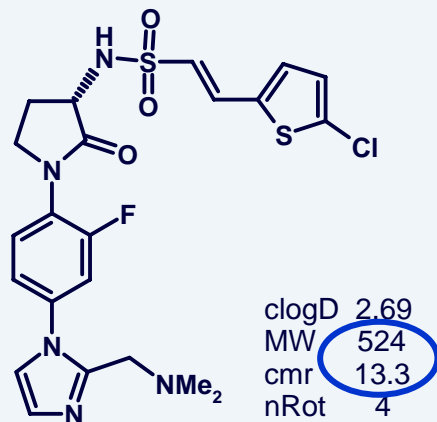
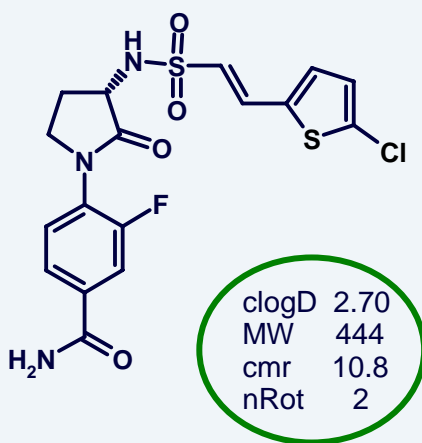
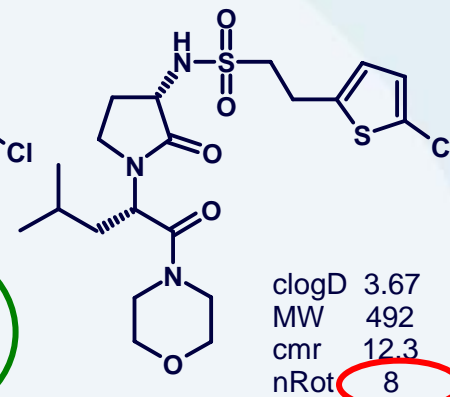
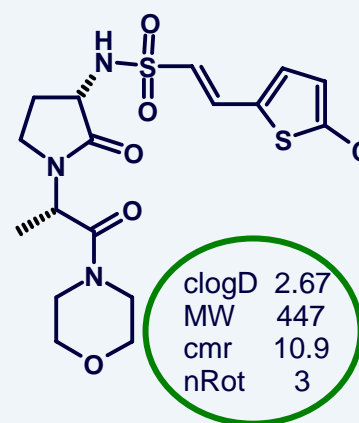
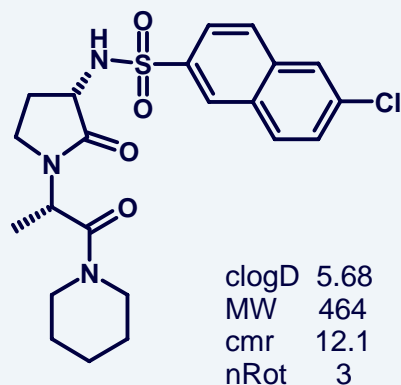
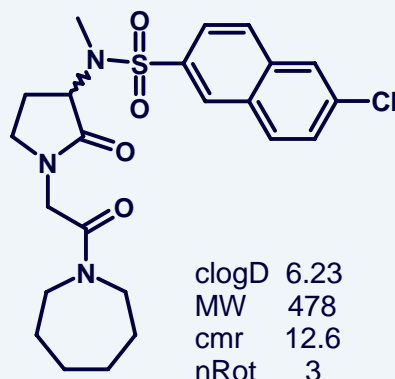
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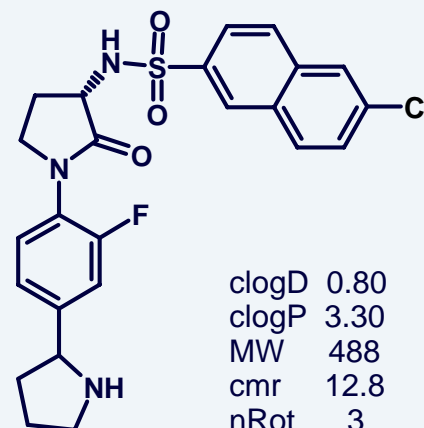
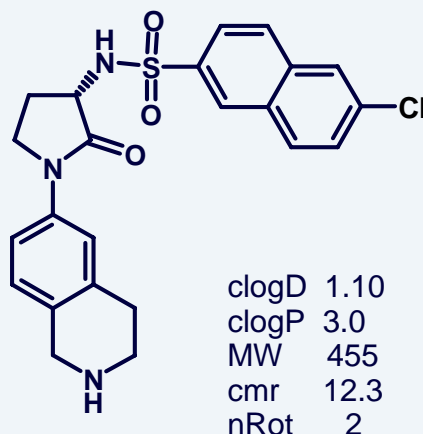
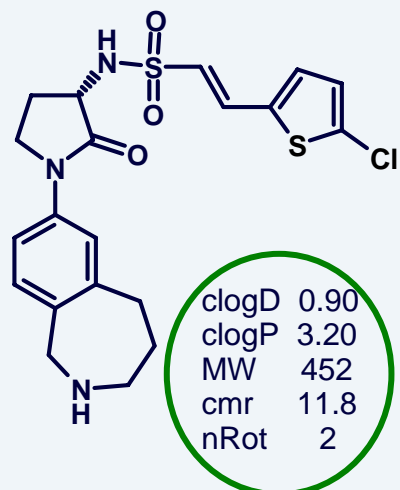
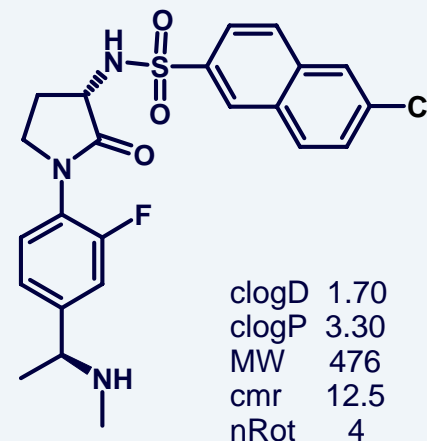
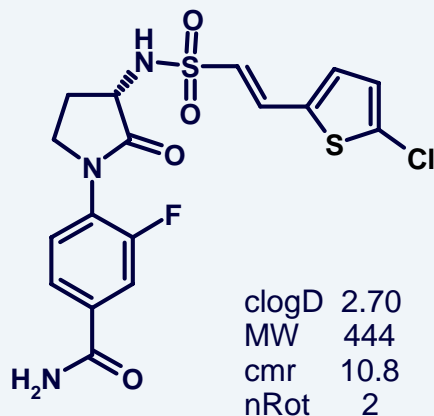
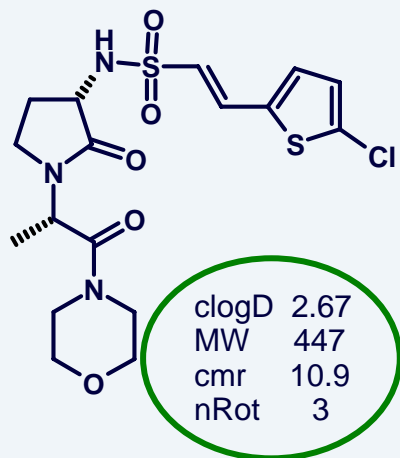
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Fine tuning the process for a second candidate



• Leeson review. Post 1990, oral drugs median values: clogP 3.2, MW 420

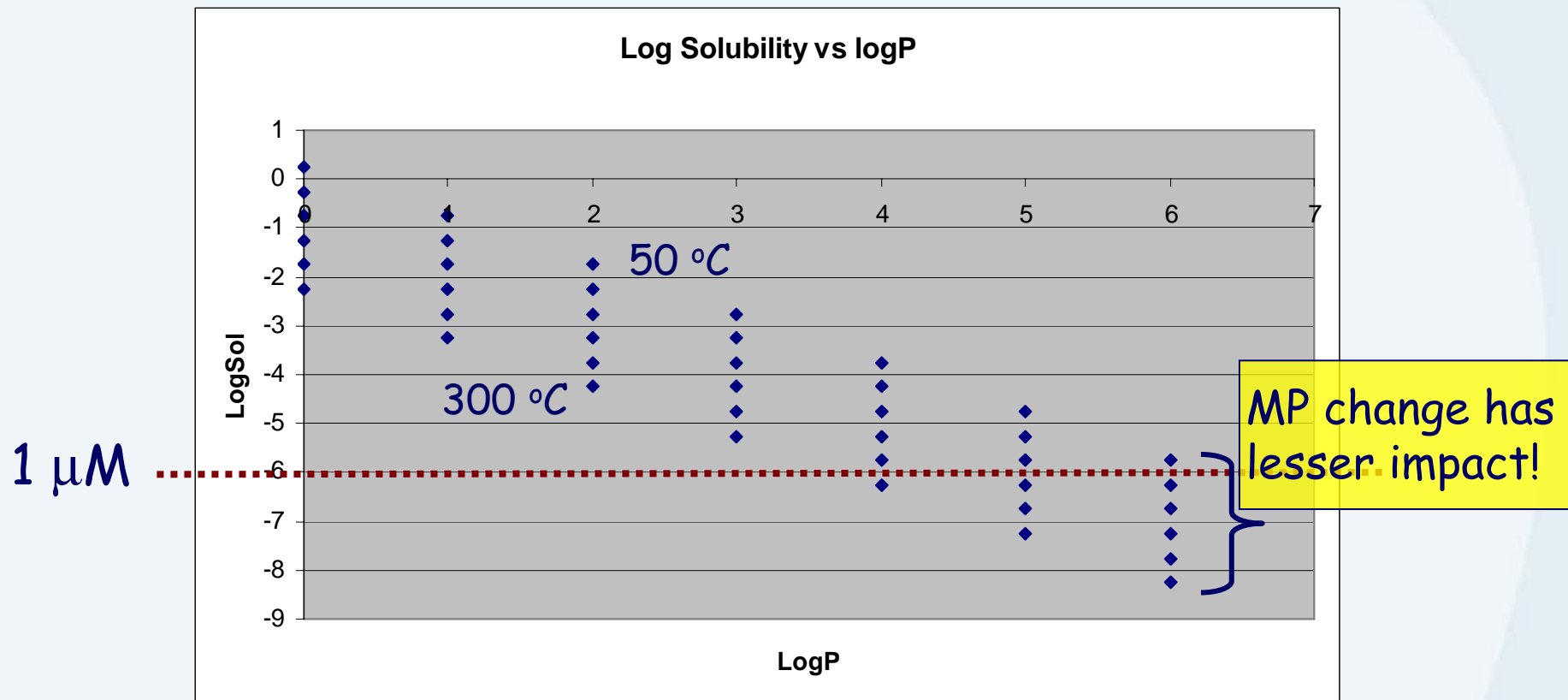
Solubility: Yalkowsky Equation

- $\text{Log Sol} = 0.5 - 0.01(\text{MP} - 25) - \text{LogP}$
 - *J.Chem. Inf. Comput. Sci.* 2001, 41, 354
- Log of Solubility (Molar)
 - MP = Melting Point (Celsius)
 - LogP = log(Partition coefficient, Oct:H₂O)

Solubility: Yalkowsky Equation

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- Log of Solubility (Molar)
 - MP = Melting Point (Celsius)
 - LogP = log(Partition coefficient, Oct:H₂O)
- How can the implications of this be visualised?
 - Simple means of understanding what it tells us!
- Used Excel to input MP 50 to 300 °C with LogP values of 0 to 7 in following graphs...

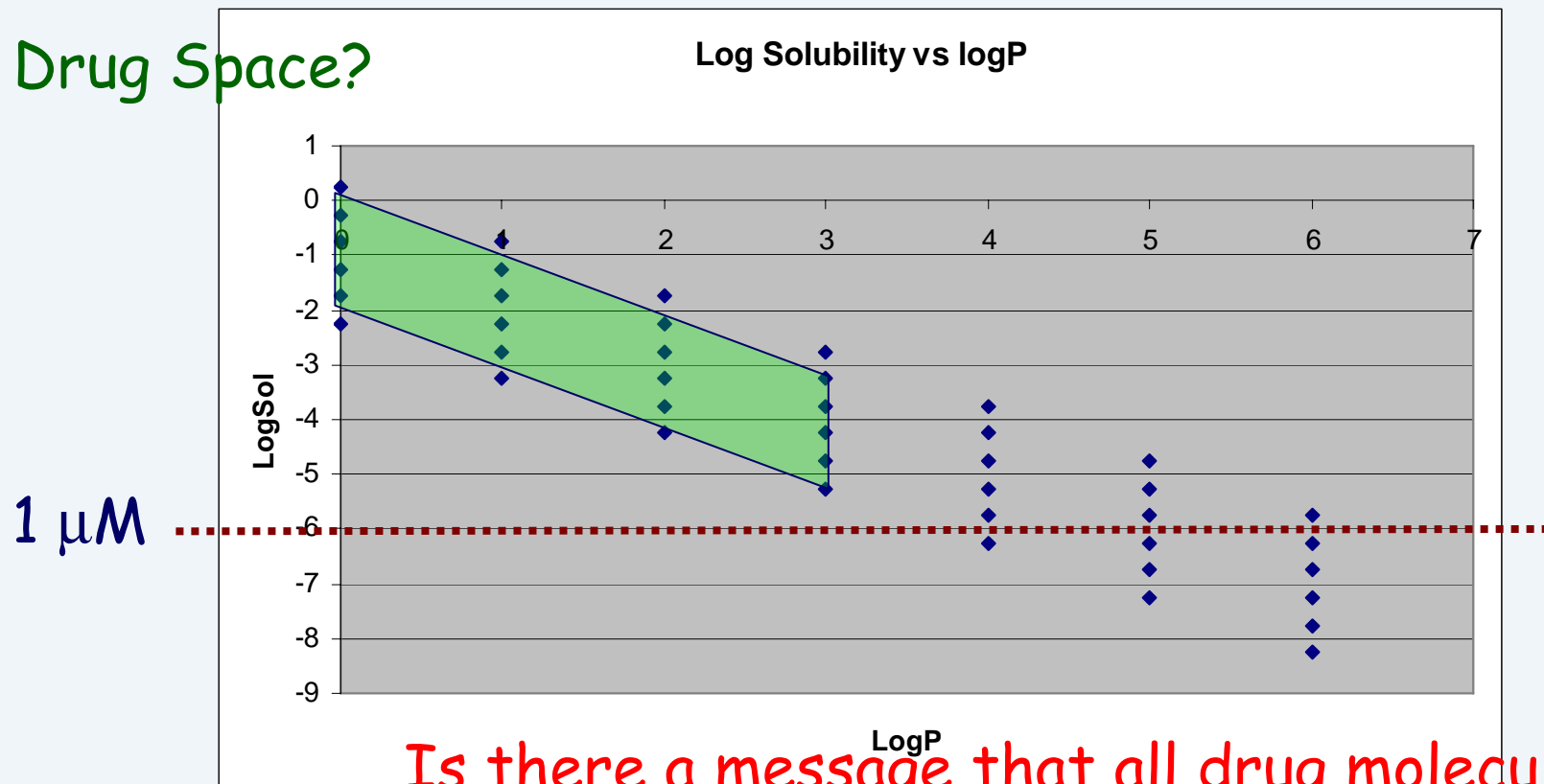
Calculated Solubility vs LogP



At a given logP, points are MP = 50 to 300

If average drug has $\text{clogP} < 3...$

Drug Space?



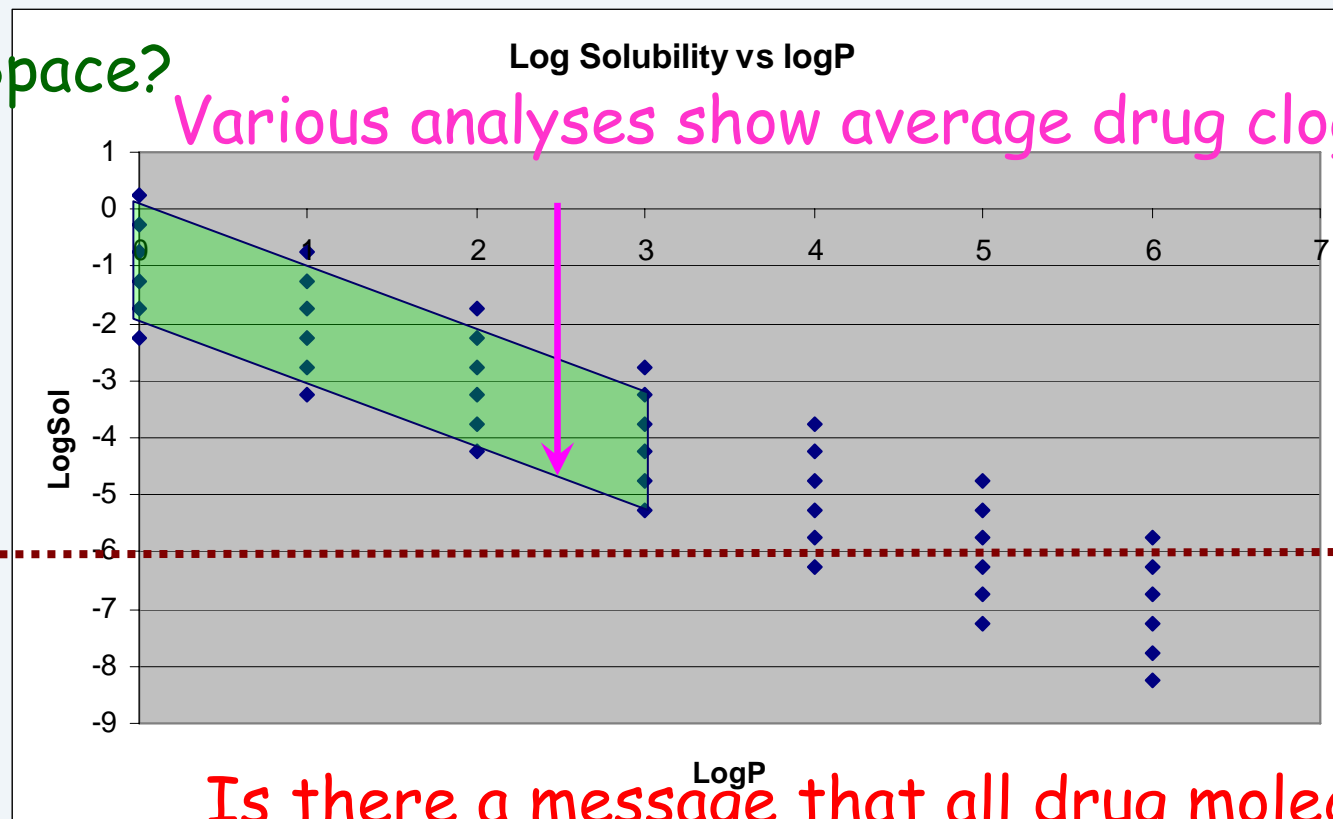
Is there a message that all drug molecules should at least have $>10 \mu\text{M}$ solubility?

If average drug has $\text{clogP} < 3$...

Drug Space?

Various analyses show average drug clogP is ~ 2.5

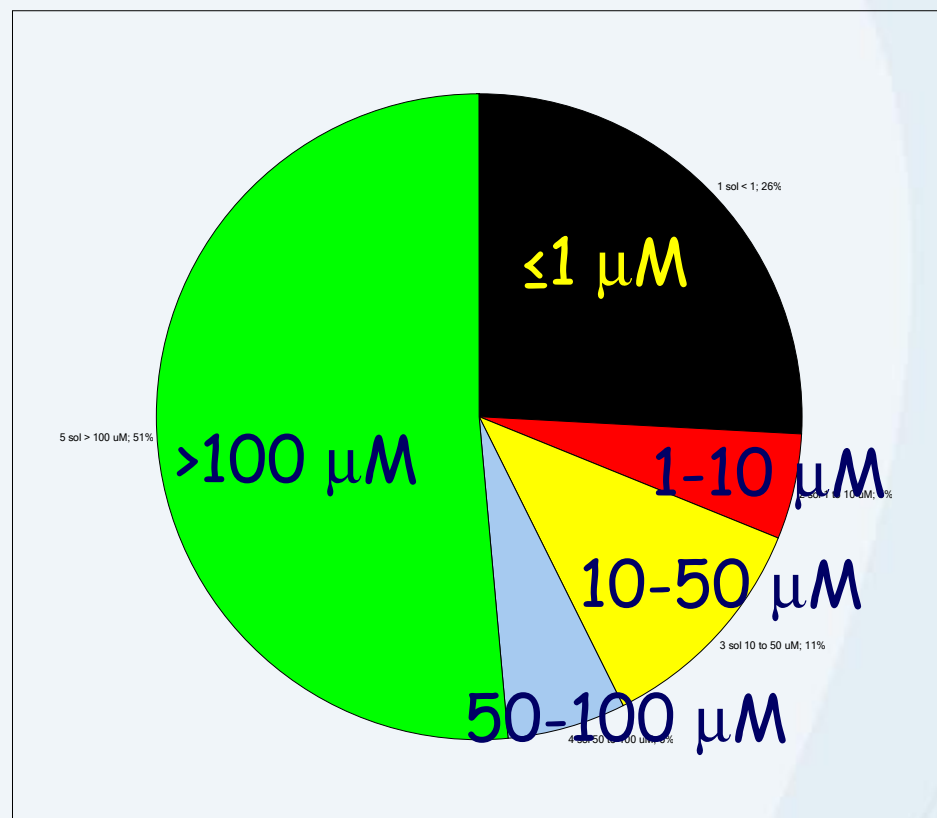
$1 \mu\text{M}$



Is there a message that all drug molecules should at least have $>10 \mu\text{M}$ solubility? Perhaps even $>50 \mu\text{M}$?

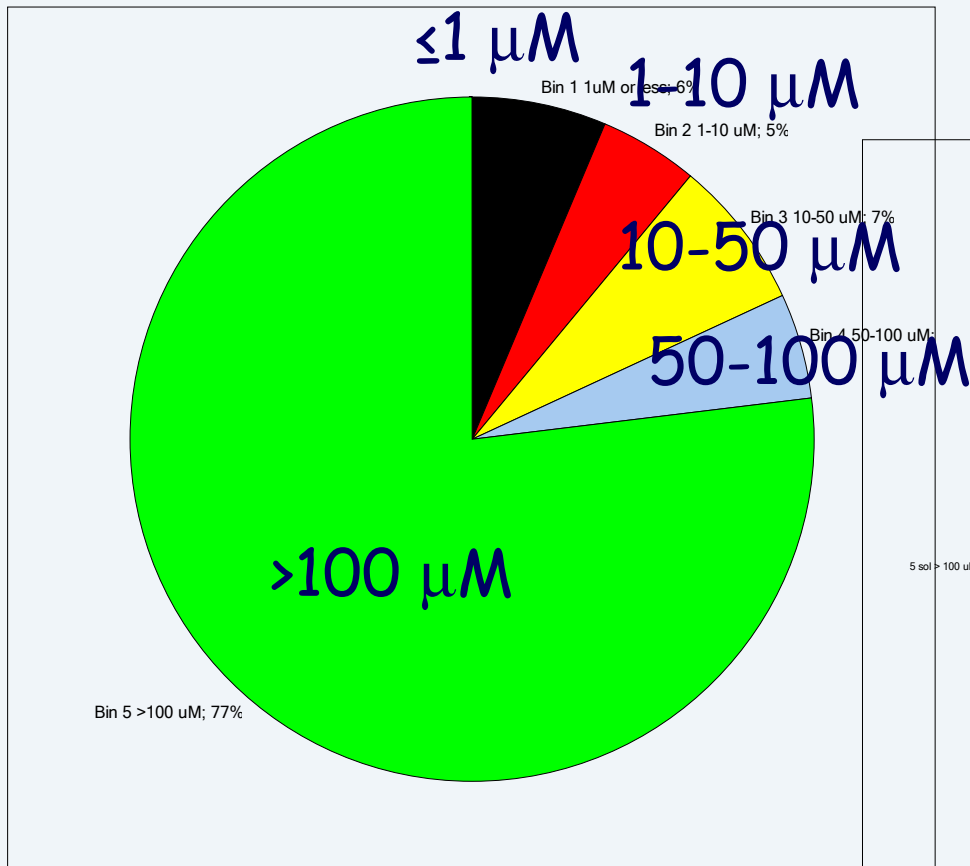
Impact on solubility of keeping logD in check

- Distribution of GSK measured solubility in ~2001 - 2005
 - Timeframe of fXa project
- Stevenage assay
 - From 10mM DMSO stock; 5% final [DMSO]
 - HPLC area comparison
- Is $>50 \mu\text{M}$ a good solubility target for a drug?

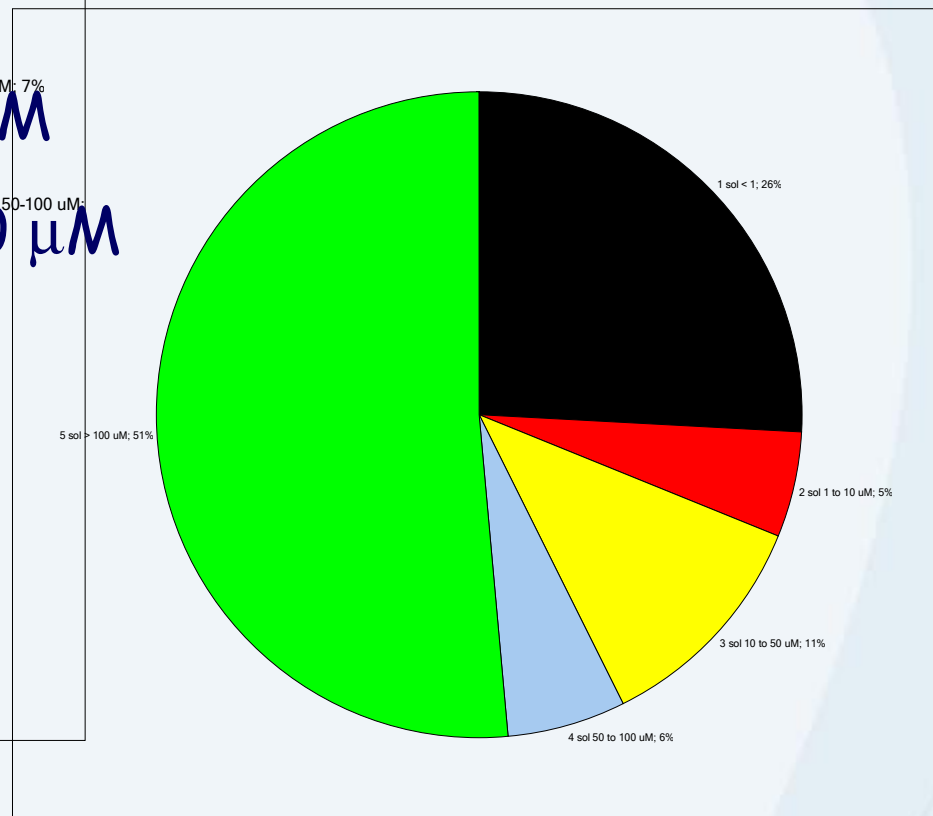


Impact on solubility of keeping logD in check

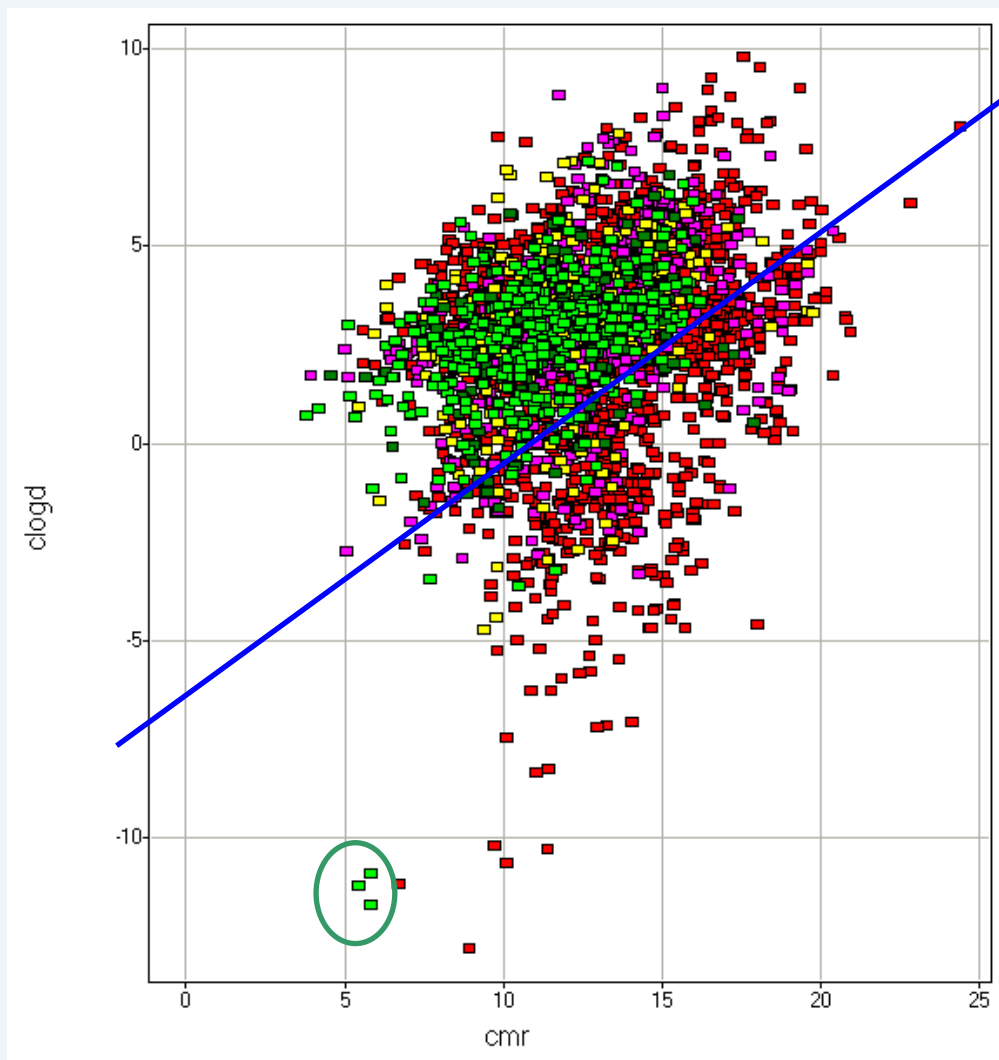
- Factor Xa programme



- Representative GSK set

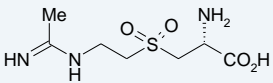
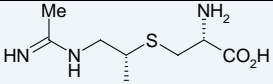
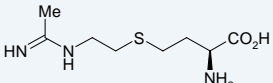
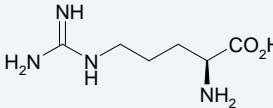


Working with Mother Nature



- Responsibility taken for the outliers in this graph!
- iNOS programme: Mimics of L-Arg

Importance of pKa values

Compound	Structure	Rat		pKa		
		F (%)	t _{1/2} (h)	acid	amine	amidine
Cys sulphone		<5	0.6	1.6	7.1	11.0
Cys sulphide		100	~ 2	2.0	8.4	11.4
hCys sulphide		100	4.3	2.1	8.9	11.4
Arginine		-	-	1.9	9.0	12.5

- Half-life and F% in the series showed importance of ionization of the molecules; compounds shown to be actively transported

To summarise; for the enlightened ones?

Are these key concepts in Medicinal Chemistry?

- Structure Property Relationships are more important than Structure Activity Relationships in Lead Optimisation
- Recognising the value and impact of physical measurements and predictions in compound profiling and design
 - Having a proper understanding of the meaning, implications and impact of parameters such as $\log P$, $\log D_{pH}$, pK_a , solubility, PPB
 - AND knowing how to modulate them
- Use this physical knowledge to Hypothesise, Measure, Model, then Predict an expedient way forward in a lead optimisation programme?

Above all...

- Good drug molecules: a balance of size, weight and, particularly, lipophilicity

Acknowledgements

- Physical Chemistry
 - Alan Hill
 - Klara Valko; Pat McDonough; Chris Bevan; Shenaz Nunhuck
- In Silico Modelling
 - Sandeep Modi, Anne Hersey, Chris Luscombe
- Alan Hill, Alan Robertson 311C programme team members
- Nigel Watson and very many in the Factor Xa Project team
- Richard Knowles and very many in the iNOS project team

Acknowledgements

- Physical Chemistry
 - Alan Hill
 - Klara Valko; Pat McDonough; Chris Bevan; Shenaz Nunhuck
- In Silico Modelling
 - Sandeep Modi, Anne Hersey, Chris Luscombe
- Alan Hill, Alan Robertson 311C programme team members
- Nigel Watson and very many in the Factor Xa Project team
- Richard Knowles and very many in the iNOS project team

Remember:

- Physical Chemists are very much our allies...

Better caricature of a Physical Chemist

