

Rational Drug Design lecture 4

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Molecular target

- ▶ **Molecular target** – The macromolecule in the living organism that interacts with the drug and the desired therapeutic effect is the result of this interaction.
- ▶ Types:
 - ▶ Proteins:
 - ▶ Enzymes,
 - ▶ Receptors,
 - ▶ Ion channels,
 - ▶ Structural proteins,
 - ▶ Membrane proteins,
 - ▶ Nucleic acids



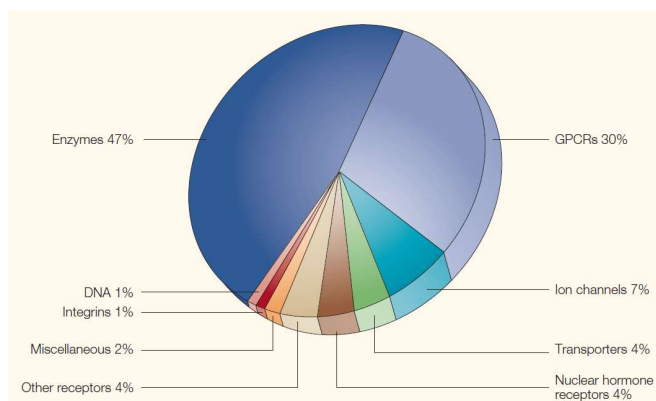
Molecular target

- ▶ Interactions drug-target can be:
 - ▶ noncovalent,
 - ▶ Covalent reversible,
 - ▶ Covalent irreversible.
- ▶ Ligand may cause:
 - ▶ Inhibition of function of molecular target without changing the conformation (inhibition of an enzyme, receptor antagonism, ion channel blockage)
 - ▶ Change of molecular target function by modification of its conformation (enzyme activation, noncompetitive inhibition of an enzyme, receptor activation, etc.)



Classes of molecular targets

- ▶ Main classes are:
 - ▶ G protein coupled receptors (GPCR),
 - ▶ kinases
 - ▶ peptidases

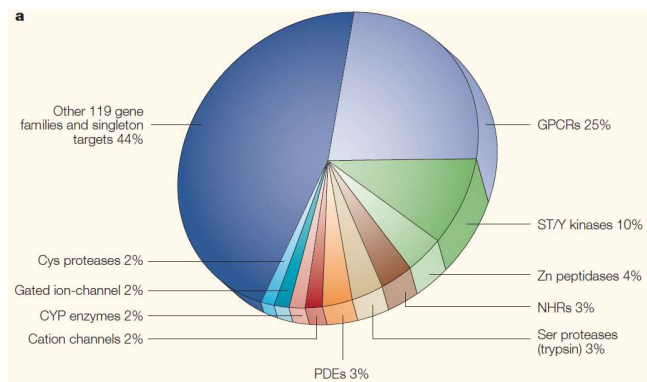


CYP – cytochrome P450, NHR – nuclear hormone-binding receptors, PDE - phosphodiesterases



Classes of molecular targets

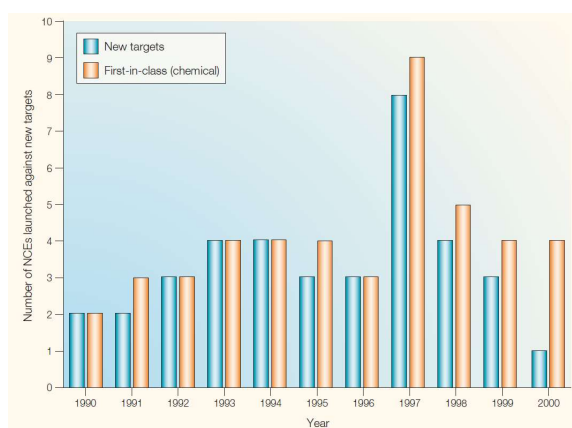
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CYP – cytochrome P450, NHR – nuclear hormone-binding receptors, PDE - phosphodiesterases

New drugs – new targets

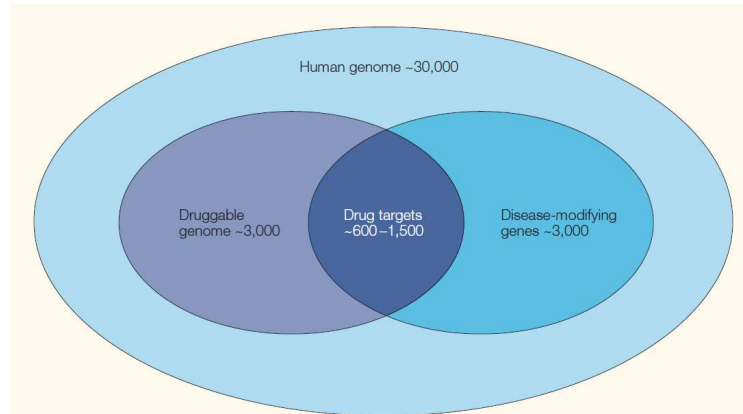
- ▶ New targets are continuously explored.



NCE – nowy związek chemiczny

Druggable target

- ▶ **'Druggable target'** – molecular target which can interact with the drug.



Evaluation of molecular target

- ▶ **Expression** of mRNA transcript in pathogenic states.
- ▶ Protein found in **the research** on disease.
- ▶ Protein **directly related** to the disease.
- ▶ Chemical compounds interacting with the target in **clinical trials**.
- ▶ Chemical compounds interacting with the target as registered drugs.

Evaluation of molecular target – proof of concept

- ▶ It has to be proven that the **change of activity** of the target is directly related to **therapeutic effect**.
 - ▶ Molecular target should be studied at as many levels as possible (studies *in vitro*, cell lines, tissue cultures and *in vivo*).
 - ▶ Transgenic animal models (gene knockout) are very helpful.
 - ▶ **Effectiveness of potential therapy** could be estimated using model compound, antibodies, antisense RNA.
-



Evaluation of molecular target

- ▶ Information on molecular target important for design and studies of drugs:
 - ▶ **Function** (ligands, substrates, cofactors, products, catalyzed reaction, interactions with other macromolecules)
 - ▶ **Synthesis/isolation/ occurrence** (how to effectively obtain appropriate amount of the protein)
 - ▶ **Physicochemical properties** (solubility, stability, molecular mass, etc.)
 - ▶ **Structure!!!**
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HIV

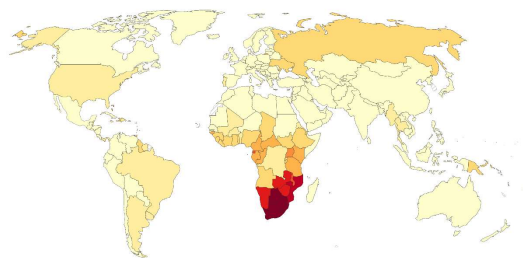
- ▶ Human immunodeficiency virus;
- ▶ 1983, isolated by Luc Montagnier (Nobel prize 2008) and independently by Robert Gallo
- ▶ First specific anti-HIV drugs in the middle of 90-ies of XX c.
- ▶ Due to high evolutionary change of the virus cocktails of three drugs are used.



HIV

- ▶ HIV is currently very serious problem of many countries.
- ▶ Therapies inhibiting the development of infection are available.

Share of the population infected with HIV, 2019
The share of people aged 15 to 49 years old who are infected with HIV.



No data 0% 0.5% 1% 2.5% 5% 7.5% 10% 12.5% 15% 17.5%

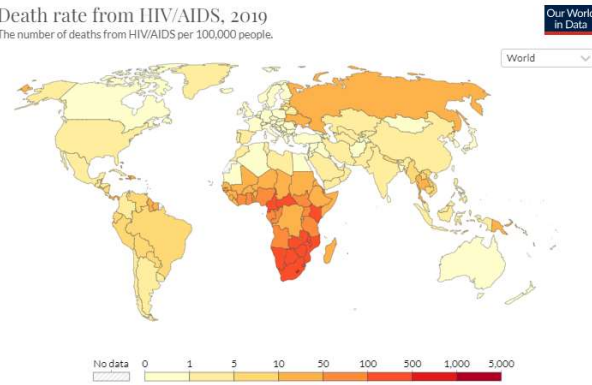
Source: IHME, Global Burden of Disease (2019)

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HIV

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Death rate from HIV/AIDS, 2019
The number of deaths from HIV/AIDS per 100,000 people.



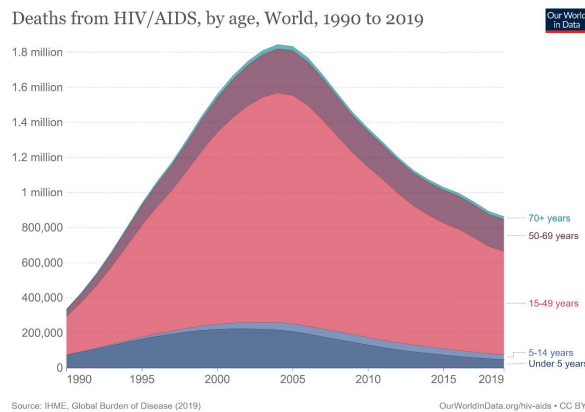
Source: IHME, Global Burden of Disease (2019)
Note: To allow comparisons between countries and over time this metric is age-standardized.
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▶ 1990 ◯ 2019

HIV

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Deaths from HIV/AIDS, by age, World, 1990 to 2019



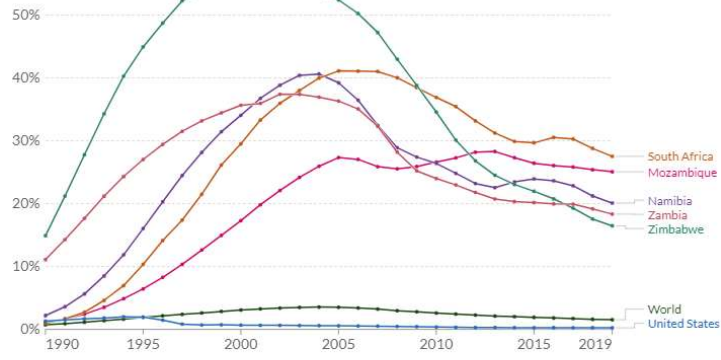
Source: IHME, Global Burden of Disease (2019)
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HIV/AIDS

Share of deaths from HIV/AIDS, 1990 to 2019

Our World in Data

+ Add country



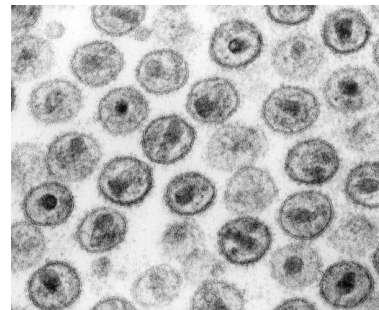
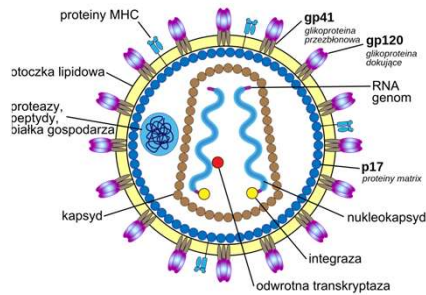
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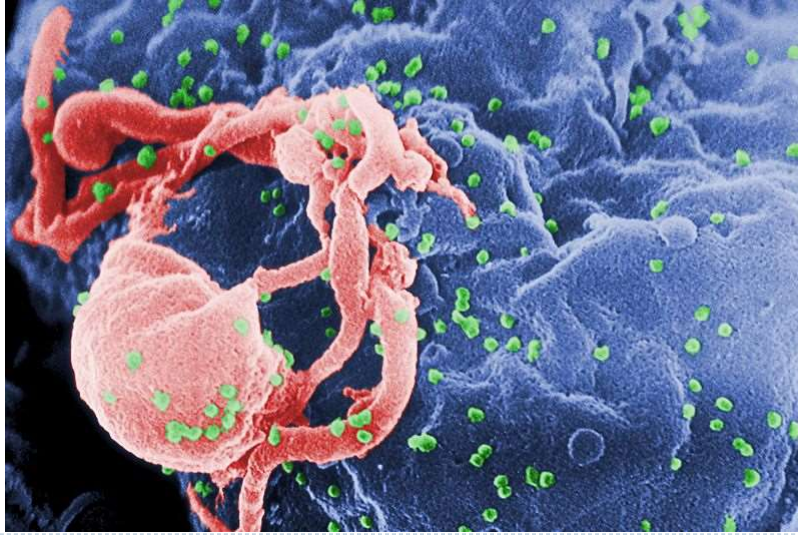
▶ 1990 ◯ 2019

HIV - construction

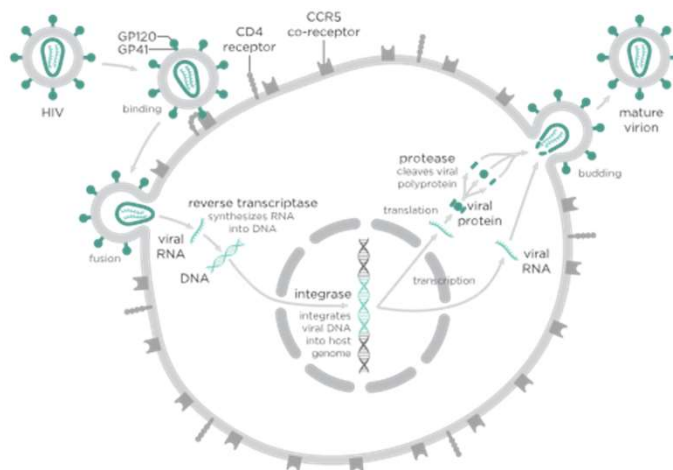
- ▶ retrovirus
- ▶ Ball-shaped
- ▶ diameter 120 nm



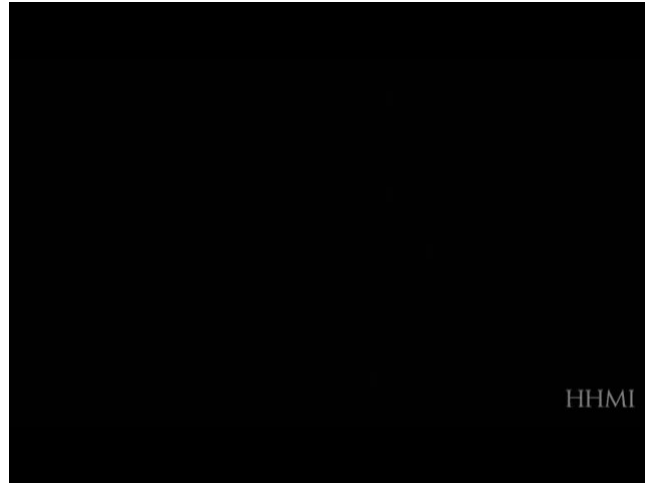
HIV – limphocyte T



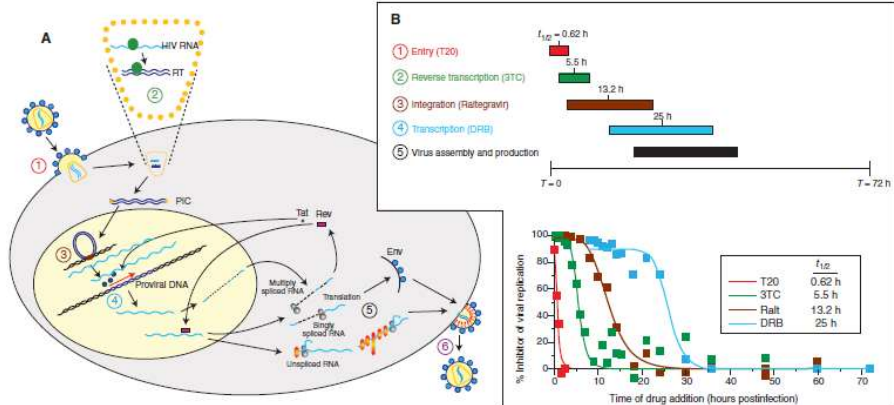
Replication cycle



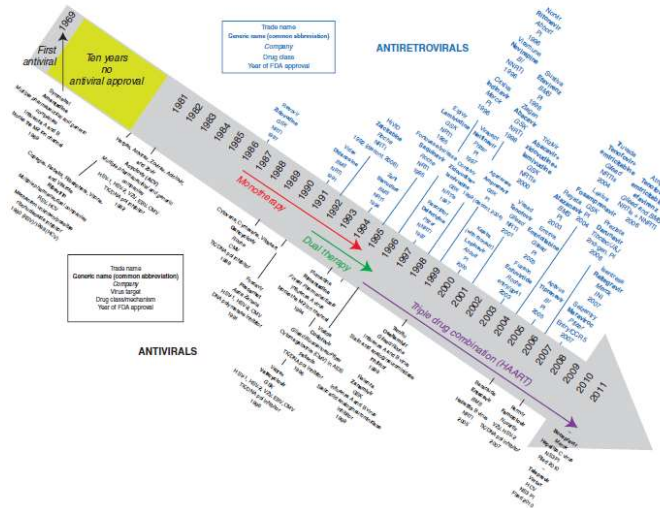
Replication cycle



Replication cycle and molecular targets

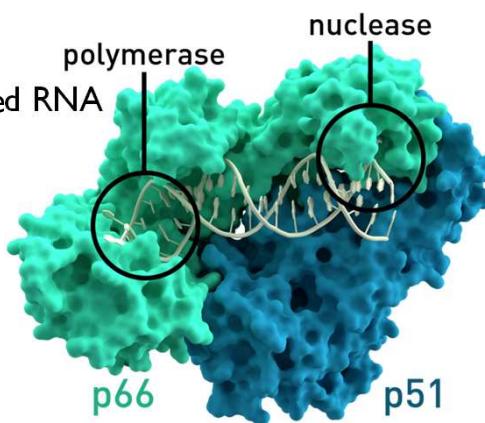


Introduction of anti-HIV drugs



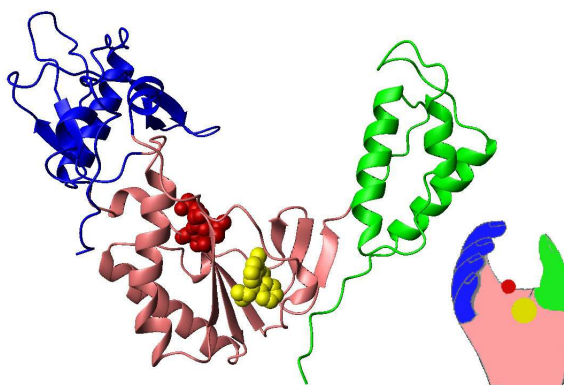
HIV reverse transcriptase

- ▶ Synthesis of complementary DNA strand on the basis of RNA (reverse transcription)
- ▶ Double-stranded DNA is obtained from one-stranded RNA
- ▶ RNA is hydrolyzed
- ▶ Enzyme has two subunits: p66 (560 aa), p51 (440 aa).
- ▶ P66 subunit contains active sites (polymerase and nuclease).



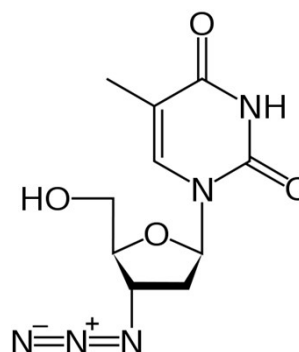
HIV reverse transcriptase

- ▶ The structure of P66 subunit is analogous to hand.
- ▶ Active site is located in the center part (in red)
- ▶ Non-nucleotide inhibitors bind to the region marked in yellow



HIV reverse transcriptase

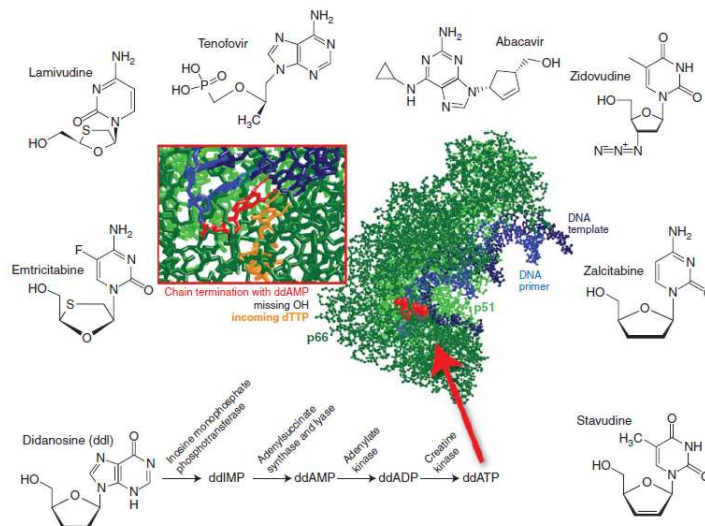
- ▶ HIV reverse transcriptase was the first molecular target for anti-HIV drugs.
- ▶ Inhibitors of reverse transcriptase are important anti-HIV drugs
- ▶ Retrovir (azidothymidine, AZT) was the first anti-HIV drug.
- ▶ Introduced to the market in 1987 as a result of accelerated procedure (25 months).
- ▶ AZT is converted to triphosphate, which is used by reverse transcriptase and inhibits the polymerase reaction.



Dallas Buyers Club

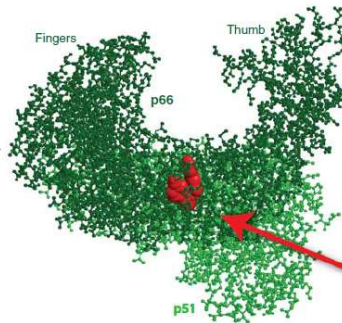


Nucleotide inhibitors of reverse transcriptase



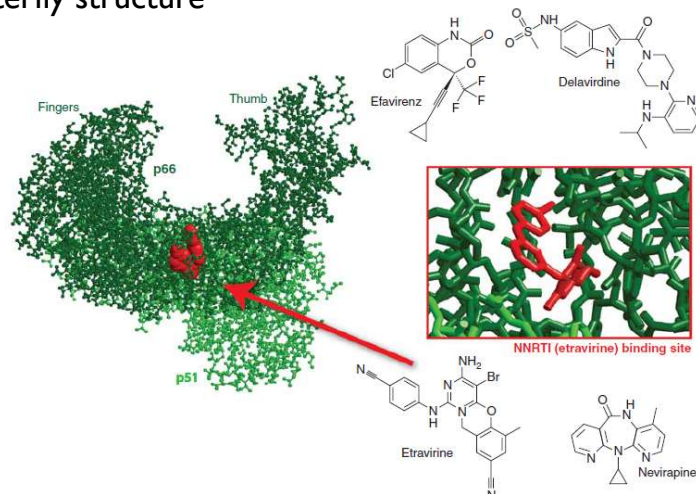
Inhibitors of reverse transcriptase

- ▶ First Non-Nucleotide Inhibitors of Reverse Transcriptase (NNRTI) was introduced to the market in 1996.
- ▶ All NNRTI binds to the same place – ca. 10 Å from active site.
- ▶ Inhibitor binding causes conformational changes of the enzyme.



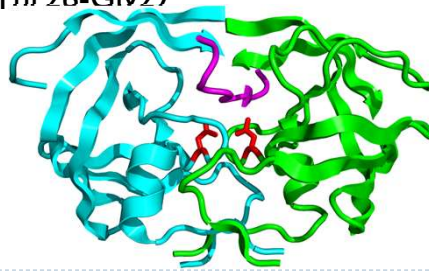
Inhibitors of reverse transcriptase

- ▶ Butterfly structure

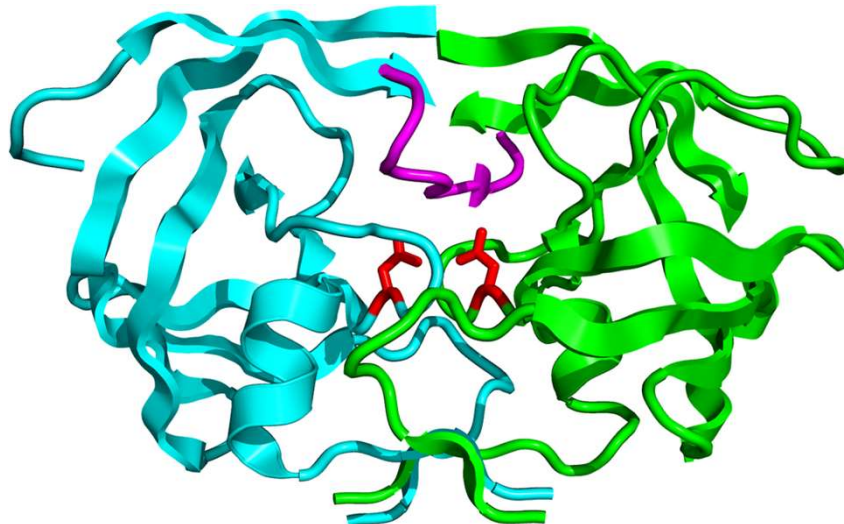


HIV protease

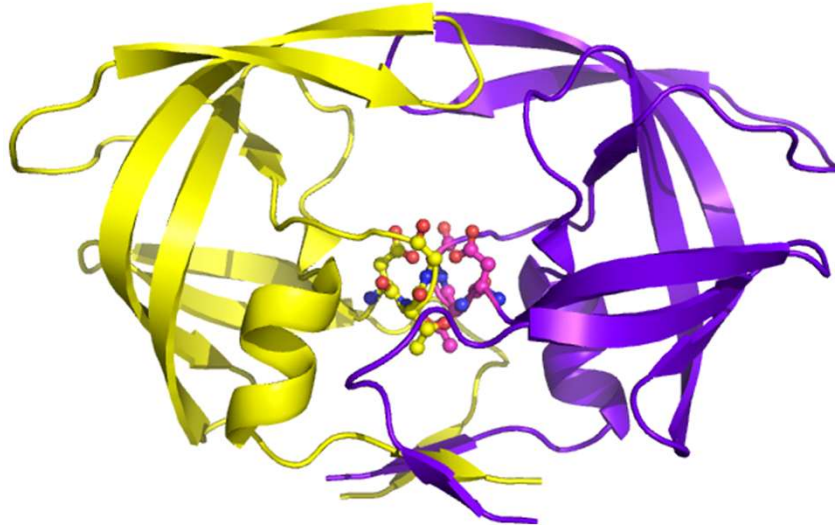
- ▶ Aspartate protease
- ▶ It cleaves polypeptide chain in order to obtain proteins necessary to construction of mature virus.
- ▶ Dimer, two chains 99 amino acid residues
- ▶ C_2 symmetry
- ▶ Two catalytic triads Asp25-Thr26-Glv27
- ▶ Most effectively cleaves Phe-Pro or Tyr-Pro



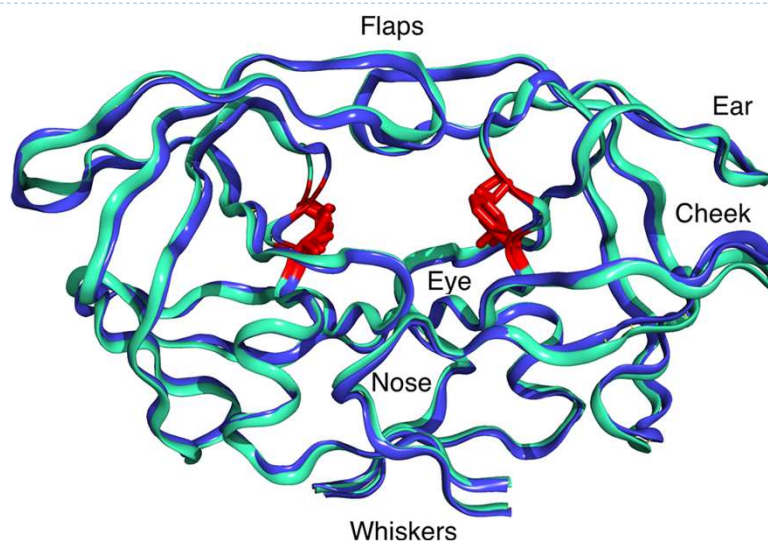
HIV protease – active site



HIV protease – active site

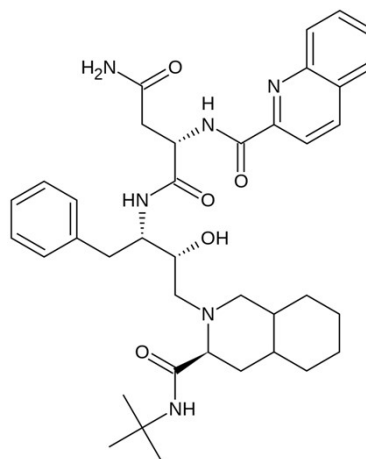


HIV protease – active site

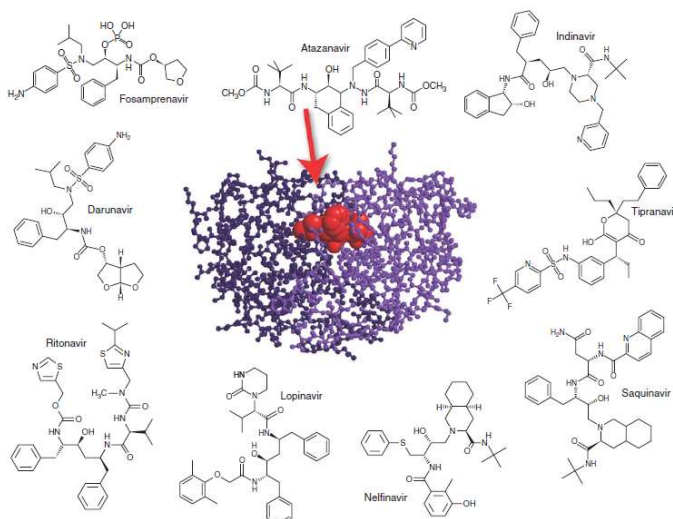


HIV protease inhibitors

- ▶ HIV protease is one of the most explored molecular targets for drugs.
- ▶ PDB database contains ca. 470 crystal structures with various ligands and mutants, while PubMed database contains ca. 17000 articles on this protein.
- ▶ First HIV protease inhibitor - saquinavir was introduced to the market in 1995.
- ▶ Saquinavir considerably enhanced the anti-HIV therapy.

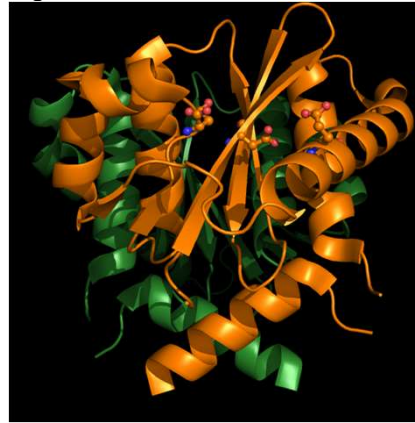


HIV protease inhibitors



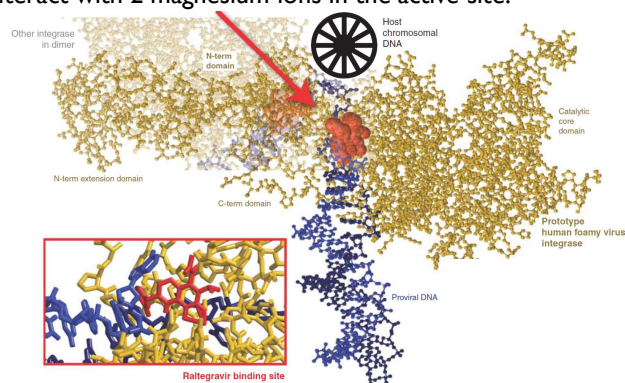
Integrase

- ▶ Enzyme integrating genetic material of virus with host DNA.
- ▶ Integrase is also very good molecular target for anti-HIV drugs.
- ▶ First integrase inhibitor was introduced to the market in 2007 (Raltegravir).



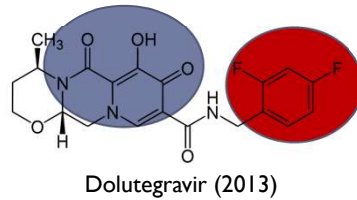
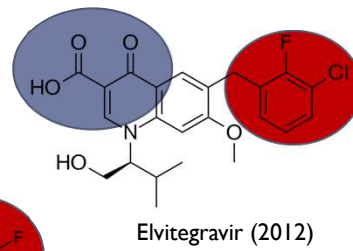
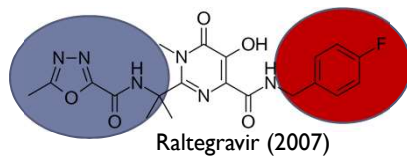
Integrase

- ▶ Known integrase inhibitors inhibit transfer of DNA strand (integrase *strand transfer inhibitors, InSTI*).
- ▶ Inhibitors bind exclusively to integrase- virial DNA complex
- ▶ Inhibitors interact with 2 magnesium ions in the active site.



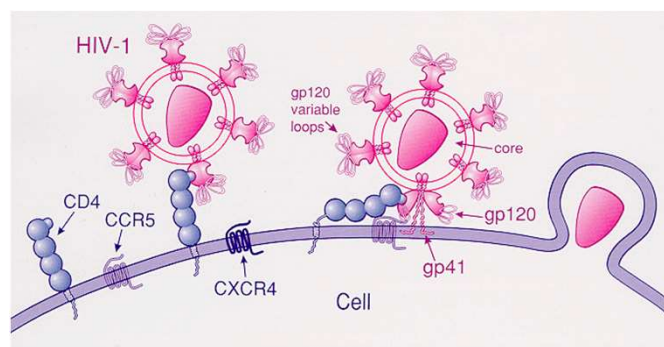
Integrase Inhibitors

- ▶ Integrase Inhibitors consist from two parts:
 - ▶ Metal binding domain
 - ▶ Aromatic group (DNA intercalating)



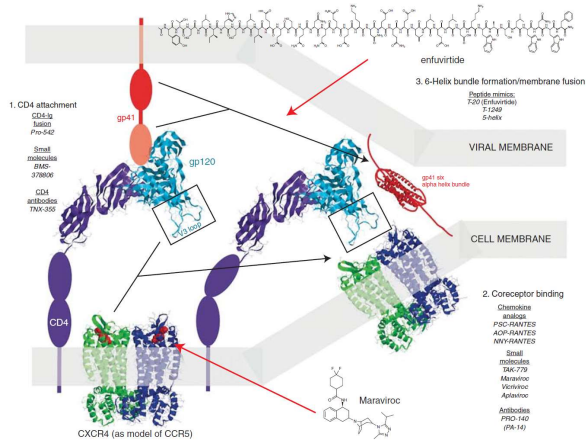
entry inhibitors

- ▶ Compounds inhibiting interaction between HIV and lymphocytes T and block virus entry to the cell.
- ▶ Inhibitors can interact with proteins on virus surface (gp41 and gp120) as well as on host cell surface (CD4 i CCR5)



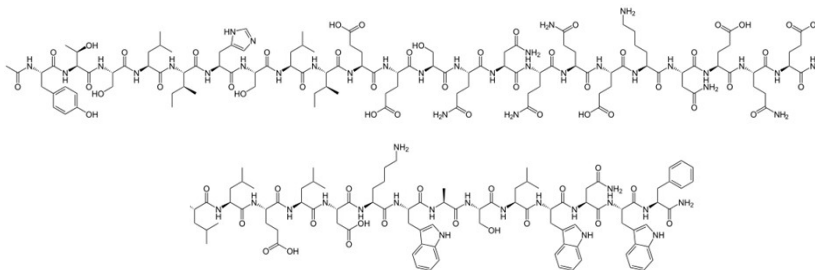
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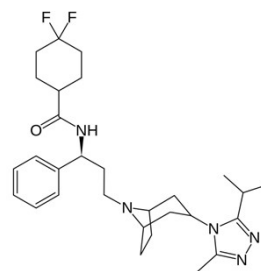
Entry inhibitors

- ▶ **Fuzeon**, peptide entry inhibitor (36 aa) binding to gp41 protein.
- ▶ Used in the case of failure of other therapies.
- ▶ High cost of the therapy (ca. 25 000 USD).



Entry inhibitors

- ▶ **Malaviroc**, CCR5 receptor antagonist. It inhibits CCR5 - gp120 interaction.
- ▶ Binds to hydrophobic cleft of CCR5 and changes the conformation extracellular loop.
- ▶ Tropism – some viruses are using CCR5 receptors (R5 viruses), while others CXCR4 (X4 viruses), or both (X4R5 viruses).



Malaviroc

Variability of the HIV

- ▶ Infected human has ca. 10 000 – 100 000 viruses /mL
- ▶ 1 mutation for 1 000 – 10 000 nucleotides
- ▶ HIV genome contains 10 000 nucleotides.
- ▶ Each replication cycle can produce 1-10 mutations!!!
- ▶ There could be many virus mutants (also in one patient) with various drug resistance.

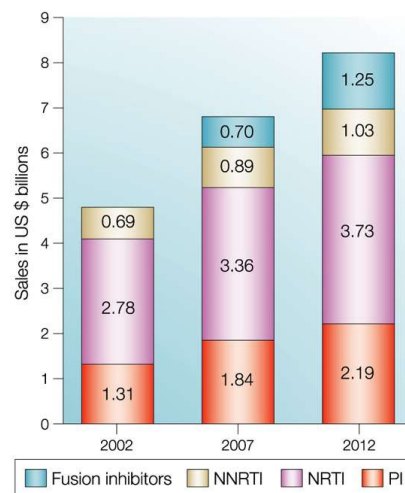
HAART

- ▶ Typically, a combination of 3 drugs is used to counter virus mutants at a similar level.
- ▶ *HAART - highly active antiretroviral therapy*
- ▶ Typically, a mixture of two nucleoside reverse transcriptase inhibitors and a non-nucleoside RTI or protease inhibitor is used.
- ▶ Monotherapy results in the selection of drug resistant viruses.
- ▶ HAART allows replication to be inhibited to undetectable levels and rebuilding of T cells.



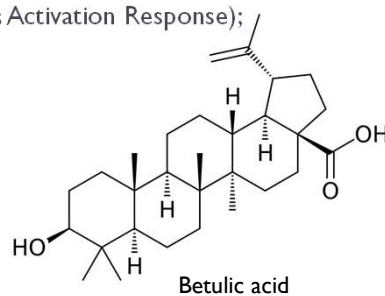
Revenue

- ▶ Revenue from HIV medicines continues to grow.



Summary HIV

- ▶ Anti-HIV drugs are directly related to the different phases of virus replication :
 - ▶ Entry inhibitors;
 - ▶ Reverse transcriptase;
 - ▶ integrase;
 - ▶ Interaction of regulatory protein Tat (Trans-activator of transcription) with RNA – TAR (Trans Activation Response);
 - ▶ protease;
 - ▶ Maturation inhibitors.



Summary

- ▶ Choosing a molecular target is a key element to the success of a pharmaceutical project.
- ▶ Basic research on molecular targets dramatically increases the potential for drug design.
- ▶ The combination of several drugs with different molecular targets gives you the ability to treat pathogens with high variability.