# Introduction to Drug Design and Discovery



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# Learning Outcomes

- At the end of this lesson students will be able to
  - Outline the entire process involved in the drug
     discovery and drug design.
- Describe molecular modelling techniques in drug design.
- Describe the ligand-based drug design and the structurebased drug design in new drug discovery.
- Explain the lead compound, its modification and combinatorial chemistry principles.
- Explain the basic concepts in receptors, drug-receptor interactions, enzymes and enzyme inhibitors.
- Explain the pre-clinical and clinical trials in drug discovery process.

#### Major steps involved in any drug discovery process



**Regulatory Approval** 

# Molecular Modeling Techniques in Drug Design

**1. Quantum Mechanics** 

**2. Molecular Mechanics** 

**3. Molecular Dynamics** 

#### **Drug Design Strategies Based on Molecular Mechanics**





- Target (structure)-based drug design
- Receptor structure is known
- Mechanism is known
- Ligands and their biological activities are known/

unknown

Molecular docking



- Ligand (analog)-based drug design
- Receptor structure is unknown
- Mechanism is known/ unknown
- Ligands and their biological activities are known.
- QSAR,
- Pharmacophore modelling

**Structure-based (target-based) Drug Design** 

It is used to design a new drug molecule using the knowledge of three-dimensional (3D) structure of the biological target.



# **Ligand-based Drug Design**

- Here the crystal structure of the target enzyme or receptor is not available.
- But their ligands are well defined and characterized.
- This method not involves molecular docking or homology modeling methods.
- This method works based on the concept of 'similar chemical structures have similar chemical activity'.

#### QSAR (Quantitative Structure-Activity Relationship)

•QSAR is a mathematical relationship between a **biological activity** of a molecular system and its **geometric and chemical characteristics**.

A general formula for a quantitative structure-activity relationship
 (QSAR) can be given by the following equation:
 Activity = f (molecular or fragmental properties)

•QSAR attempts to find consistent relationship between biological activity and molecular properties, so that these "rules" can be used to evaluate the activity of new compounds.



### **Pharmacophore Modeling**



A pharmacophore is the ensemble of steric and electronic features that is necessary to ensure the optimal molecular interactions with a specific biological target and to trigger (or block) its biological response

> The location constraint specifies the 3D coordinates of the features and defines the spatial relationship of the features to each other





**Negatively Ionizable** 

**Positively Ionizable** 

**Negative Charge** 

**Positive Charge** 

#### **Molecular Dynamics**

**Molecular dynamics (MD)** is a form of computer simulation in which atoms and molecules are allowed to interact for a period of time by approximations of known physics, giving a view of the motion of the particles.

This kind of simulation is frequently used in the study of proteins and biomolecules and described as a "virtual microscope" with high temporal and spatial resolution.



added.

Example of MD with time scale

Molecular Dynamics (MD) Simulation helps to determine where the drug binds to receptor/enzyme



MD helps to determine



- ✓ Drug binding
- ✓ Change in arrangement of atoms
- $\checkmark$  To alter the structure of drug
- $\checkmark$  To obtain desired activity

0.00 us



# Lead compound or Lead

**The lead** is a prototype compound that has a number of attractive characteristics, including the desired biological or pharmacological activity. **Undesirable characteristics of lead are:** 

- High toxicity
- Other biological activities
- Absorption difficulties
- Solubility problems
- Metabolism problems

**The lead optimization** is to modify the chemical structure of the lead compound in order to improve the desired properties and trying to minimize the unwanted ones.

Lead modification is done to improve the Pharmacological activity.

- **1. Identification of the active part: PHARMACOPHORE**
- **2. Functional group modification**
- **3. Structure-Activity Relationship (SAR)**
- 4. Structure modification to increase potency and therapeutic index
- 5. Structure modification to increase oral bioavailability
  - Lipophilicity.
  - Effect of ionization.

#### Structure modification to increase potency and

#### therapeutic index

#### A. Homologation

A homologous series is a group of compounds that differ by a constant unit, generally a  $CH_2$  (Methylene) group.



- Chain length up to 9 carbon atom....tolerable (optimum lipophilicity and water solubility.
- ✓ Chain length more than 9 carbon atoms... low water solubility... low bioavailability.

#### **B.** Chain branching

- □ Chain branching lowers the potency because the branched alkyl chain is less lipophilic than the straight alkyl chain.
- □ Chain branching may interfere with the receptor binding due to larger molar volume and shape.



#### **C. Ring chain transformation**

Affects both lipophilicity (increase) and drug metabolism (decrease). Arecoline is more effective *in vivo*.



#### **D. Bioisosterism**

- \* Bioisosterism is an important lead modification approach.
- Sioisosteres are groups or substituents that have chemical or physical similarities, and which produce broadly similar biological properties.

**Importance or the use of Bioisosteres** 

- > Attenuate toxicity.
- > Modify the activity of a lead.
- > Alter the pharmacokinetics of lead.
- > Potentiate activity.

**Two types of Bioisosteres** 

**Classical Bioisosteres.** 

Non-classical Bioisosteres.

#### **Properties Influencing Oral Bioavailability**

"Lipinski's rule of five" to improve oral bioavailability during lead modification.

The rule of five states that the orally administered drug **must not have:** 

□ A molecular weight > 500 Dalton

 $\Box$  LogP > 5

□ H-bond donor > 5 (expressed as the sum of OH and NH)

□ H-bond acceptor > 10 (expressed as the sum of O and N)

#### **Exception of the rule of five:**

- Antibiotics
- Antifungals
- Vitamins
- Cardiac glycosides

Reason for exception: These drugs have active transporters to carry them across membrane.



- Reactions can be driven to completion.
- / Intermediates do not need to be purified.
- ✓ Final compounds are cleaved from the beads and purified by HPLC as necessary.
- Some procedures can be machine automated.



### **Combinatorial Chemistry**

Any modular structure can be combinatorialized



• A fully combinatorial library includes all possible combinations of building blocks



# Receptors

- Receptors are mostly membrane-bound proteins that selectively bind small molecules called ligands which results in physiological response.
- They are difficult to isolate because they exist in tiny amount and if isolated it will be difficult to purify.
- Receptors contain a binding site (hollow or cleft in the receptor surface) that is recognized by the chemical messenger.
- Binding of the messenger involves intermolecular bonds.

# Affinity, efficacy, and potency

- Affinity: how strongly the drug binds to the receptor; It depends on the molecular complementarily of drug and receptor.
- **Efficacy:** the maximum biological effect the drug can produce. A compound with high affinity does not necessarily have high efficacy (e.g. antagonists).
- **Potency:** the amount of drug needed to achieve a defined biological effect. The smaller the dose required, the more potent the drug.

# **Receptor's agonist**

- Agonists mimic the natural messenger of a receptor.
- Agonists bind reversibly to the bindingsite and produce the same induced fit as the natural messenger - receptor is activated.
- Similar intermolecular bonds formed as with natural messenger.
- Agonists are often similar in structure to the natural messenger.



### **Receptor's antagonist**

Antagonism by the 'umbrella' effect: Here the drug will bind to a region close to binding site, once bound, part of its structure (tail) will cover the opening of the binding site....preventing the normal messenger from accessing the binding site.



**Competitive Antagonists:** Compete with agonist for receptor binding => Agonist appears less potent, but can still achieve 100% effect but at higher concentrations.

**Non-competitive Antagonists:** Bind to receptor at different site and either prevent agonist binding or the agonist effect => maximal achievable response reduced.



Enzymes

Enzymes are soluble proteins, floating in interstitial or extrastitial fluids, cell cytosol and blood.

- Enzymes are produced by different cells of humans, animals, plants and microorganisms, which accelerate the rate of chemical reactions in living organisms.
- Enzyme can recognize the substrate and catalyzesa chemical reaction with it to release the product.

#### Enzyme-catalyzed reaction

Enzymes function by lowering transition state energies and energetic intermediates and raising the ground state energy level.



**Enzyme** Catalysis It is characterized by two features: (1) Reaction specificity. (2) Rate acceleration. **Binding Specificity:-**(i) Very specific, Absolute: One type of substrate can fit into the active-site. Examples: carboxyesterase, COMT, Acetylcholinesterase. (ii) Non-specific, Broad: More than one substrate can bind and converted into product. **Example:** Cytochrome  $P_{450}$ 

### **Enzyme inhibition**

Enzyme inhibitors in contrast to receptor antagonists, are closely similar in structure to enzyme natural substrate.

- They should bind strongly to active-site of enzyme and prevent the binding of normal substrate.
- Ideal enzyme inhibitor should:
  - be specific for one target enzyme.
  - target essential enzymes in essential metabolic pathway (antibacterials).
  - selectively inhibits essential enzymes in non human cells that are unique, does not exist in human cells (penicillins).

# Competitive/reversible Inhibition

Compete with the substrate for the active-site of enzyme.

The overall effect of competitive inhibition is that the enzyme cannot bind with substrate when the inhibitor is present.



Competitive inhibition can be relieved by increasing the substrate concentration (the substrate "outcompetes" the inhibitor).
Examples: captopril, enalapril, lisinopril and oral antihypertensives (ACE Inhibitors).

#### **Non competitive Inhibition**

Non competitive or mixed inhibitors bind at a site distinct from the substrate active site (allosteric binding-site) on the enzyme, but will bind to either E or ES.



#### **Uncompetitive inhibition**



Binds at a site distinct from the substrate binding-site but only in the ES complex.



77 **Classification of am** 

# High throughput Screening (HTS)

 Identification of one or more positive candidates extracted from the pool of possible candidates based on specific criteria.
 HTS provides a practical method to investigate large numbers of synthetic compounds in miniaturized *in vitro* assays to identify those capable of modulating the biological target.

#### Assay technology in HTS

- 1. Cell Growth tests
- 2. Tissue-response Cell-based Assay
- 3. Enzyme tests

Advantages of High throughput Screening (HTS)

- 1. High sensitivity
- 2. High speed by Automation
- 3. Minimum amount of sample can be used
- 4. Low background signal
- 5. Clear results
- 6. Good reproducibility
- 7. Fast data processing
- 8. Acceptable cost



#### **Preclinical Studies**



Vaccination; challenge

experiment

Safety studies

assessment

and risk

Immunogenicity

### **Clinical trials-Different Phases**

Phase-I (lasts for 1 month -1 year): Evaluation of the safety, tolerability, pharmacokinetic and pharmacological activity of drugs on 20-100 volunteers.

Phase-II (lasts for 1-3 years): further assess the efficacy, safety of drugs in addition to dosing regimen in 300-600 patients.

- Phase-III (last for 2-6 years): covers several thousands of patients in clinics or hospitals; study the activity and possible side effects on the long term.
- Phase-IV: Post marketing feedback, after prescribing drugs to the out patients.

Pre-Clinical	IND	Clinical	NDA	After-Market
Preformulation Synthesis Toxicology Initial Formulation Method Development & Validation Stability & Degradation Studies	Investigational New Drug Application	Formulation Modification Final Formulation Method Development & Validation Stability & Degradation Studies Extractables/ Leachables Manufacturer Validation	New Drug Application	Production Risk Mitigation Counterfeit Analysis Contamination ID Failure Analysis Post Approval Changes Litigation Support

#### **Recommended Books**



- I. The organic chemistry of drug design by Richard B. Silverman. Second edition, Elsevier, 2004.
- 2. An introduction to Medicinal Chemistry by Graham L. Patrick. Fourth edition, Oxford, 2009.

