# ORIGINAL ARTICLE

# Mimetics of the disulfide bridge between the N- and C-terminal cysteines of the KLK3-stimulating peptide B-2

Miikka Pakkala · Janne Weisell · Can Hekim · Jouko Vepsäläinen · Erik A. A. Wallen · Ulf-Håkan Stenman · Hannu Koistinen · Ale Närvänen

Received: 25 September 2009/Accepted: 18 November 2009/Published online: 5 December 2009 © Springer-Verlag 2009

Abstract Human prostate produces kallikrein-related peptidase 3 (KLK3, also known as prostate specific antigen), which is widely used as a prostate cancer marker. Proteolytically active KLK3 has been shown to inhibit angiogenesis and its expression decreases in poorly differentiated tumors. Thus, it may be possible to control prostate cancer growth with agents that stimulate the proteolytic activity of KLK3. We have earlier developed synthetic peptides, which bind specifically to KLK3 and promote its proteolytic activity. These peptides are cyclic, all containing a disulfide bridge between the N- and C-terminal cysteines. To increase the in vivo stability of the KLK3-stimulating peptide B-2, we made differently cyclized analogues by replacing both terminal cysteines and the disulfide bridge between them. A replacement consisting of  $\gamma$ -amino butyric acid and aspartic acid, where the amino group from the former was linked to the main chain carboxyl group of the latter, was found to be, at high concentrations, more active than the B-2 peptide. Furthermore, as compared to the parent peptide, this analog had an improved stability in plasma and against the enzymatic degradation by KLK3. In addition, the series of analogues also provided valuable information of the structure–activity relationships of the B-2 peptide.

**Keywords** Synthetic peptide · Stability · Prostate cancer · Kallikrein-related peptidase 3 · KLK3 · Prostate specific antigen · PSA

M. Pakkala · J. Weisell · J. Vepsäläinen · A. Närvänen Laboratory of Chemistry, Department of Biosciences

70211 Kuopio, Finland

A. Närvänen (☒)
Department of Biotechnology and Molecular Medicine,
University of Kuopio, P.O. Box 1627,
70211 Kuopio, Finland

and Biocenter Kuopio, University of Kuopio, P.O. Box 1627,

e-mail: ale.narvanen@uku.fi

C. Hekim · U.-H. Stenman · H. Koistinen Department of Clinical Chemistry, Biomedicum, University of Helsinki and Helsinki University Central Hospital, 00014 Helsinki, Finland

E. A. A. Wallen

Division of Pharmaceutical Chemistry, Faculty of Pharmacy, University of Helsinki, 00014 Helsinki, Finland

#### **Abbreviations**

Acm Acetamidomethyl 6-Aminohexanoic acid Ahx All Allyl Aox 8-Aminooctanoic acid **BHP** Benign hyperplasia **DCM** Dichloromethane **DIEA** *N*,*N*-diisopropylethylamine **DMF** N,N'-dimethylformamide **EDT** Ethanedithiol **ESI** Electrospray ionization Fmoc Fluorenylmethoxycarbonyl **GABA** 

GABA γ-Amino butyric acid
 HATU 2-(1H-7-azabenzotriazol-1-yl)-1,1,3,3-tetramethyluronium hexafluorophosphate

HBTU 2-(1H-benzotriazol-1-yl)-1,1,3,3-

tetramethyluronium hexafluorophosphate HLPC High-performance liquid chromatography

HOAt 1-Hydroxy-7-azabenzotriazole HUVEC Umbilical-vein endothelial cells KLK2 Kallikrein-related peptidase 2 KLK3 Kallikrein-related peptidase 3

MALDI Matrix assisted laser desorption ionization



Mtt 4-Methyltrityl

ODmab  $4{N-[1-(4,4-dimethyl-2,6-dioxo-$ 

cyclohexylidene)-3-methylbutyl]-

amino}benzyloxy

PBS Phosphate buffered saline PSA Prostate specific antigen SPPS Solid-phase peptide synthesis

tBuO t-Butoxy

TFA Trifluoroacetic acid TIS Triisopropyl silane

# Introduction

The prostate produces kallikrein-related peptidase 3 (KLK3, also known as prostate specific antigen, PSA), a 28 kDa glycoprotein belonging to the kallikrein family of serine proteases (Yousef and Diamandis 2001). KLK3 is secreted by prostatic glandural epithelium into seminal plasma, where by digesting semenogelins it dissolves the seminal clot formed after ejaculation, and thereby promotes sperm motility (Lilja 1985; Robert et al. 1997). KLK3 is the best currently available cancer marker and it is widely used for detection and monitoring of prostate cancer (Catalona et al. 1991; Stenman et al. 2005). In prostate cancer and some non-malignant conditions, like benign hyperplasia (BHP) and prostatitis, KLK3 leaks into circulation due to altered tissue architecture and thus leads to increased serum concentrations (Stamey et al. 1987; Stenman 1997). Most of the circulating KLK3 is inactivated by protease inhibitors (Christensson et al. 1990; Lilia et al. 1991; Stenman et al. 1991).

Based on in vitro studies, both tumor growth-stimulating and inhibiting properties have been suggested for KLK3 (Borgono and Diamandis 2004; Clements et al. 2004; Williams et al. 2007; Koistinen et al. 2008). Clinical studies have shown that the level of KLK3 is decreased in malignant prostatic epithelium, as compared to normal epithelium, and it is further reduced in poorly differentiated tumors (Abrahamsson et al. 1988; Paju et al. 2007). Furthermore, low tissue concentrations of KLK3 are associated with poor prognosis (Stege et al. 2000) whereas high expression in tumors is associated with low microvessel density (Papadopoulos et al. 2001) suggesting a tumor suppressing role for KLK3. KLK3 has also been shown to exert antiangiogenic properties both in in vitro and in vivo models (Fortier et al. 1999; Fortier et al. 2003). In a cell culture model using umbilical-vein endothelial cells (HUVECs), only enzymatically active isoforms of KLK3 were able to inhibit tube formation, a measure of angiogenic potential of these cells (Mattsson et al. 2008). This study, together with other studies showing that small molecule inhibitors of KLK3 and a KLK3-inhibiting antibody prevents the antiangiogenic activity of KLK3, shows that enzymatic activity of KLK3 is needed for its antiangiogenic activity (Koistinen et al. 2008; Mattsson et al. 2008). Since the active form of KLK3 may suppress tumor growth, it may be possible to control prostate cancer growth by modulating the proteolytic activity of KLK3. Because KLK3 is highly prostate specific, cancer therapy should be possible without serious side effects.

We have used phage-display technology to identify peptides, which specifically bind to KLK3 (Wu et al. 2000). Furthermore, we have shown that synthetic analogues of the peptides promote the proteolytic activity of KLK3 (Pakkala et al. 2004) and are good lead structures for potential therapeutic agents. Strategies to improve in vivo stability and bioavailability of peptides have recently been widely covered in the literature (Adessi and Soto 2002; Sato et al. 2006; Lien and Lowman 2003). These include N- and C-terminal capping, side chain modifications, use of unnatural amino acids and cyclization. In our earlier study, we have shown that most of the amino acid side chains are essential for the promoting activity of KLK3 binding peptide B-2 making the side chain modifications difficult (Pakkala et al. 2004). Furthermore, we have succeeded in increasing the plasma stability of linear KLK2 inhibiting peptide by head-to-tail cyclization (Pakkala et al. 2007). Since the KLK3-stimulating peptides, A-1, B-2 (1) and C-4 are cyclic, containing disulfide bridge between the N- and C-terminal cysteines, peptide C-4 containing also a second internal disulfide bridge (Pakkala et al. 2004) our first step in stabilizing the peptides was to use alternative cyclization methods.

Our earlier attempts to perform head-to-tail cyclization of the two most potent peptides B-2 and C-4 have failed with no detectable amounts of cyclic peptides. Commonly cyclization of peptides is highly dependent on the sequence, amino acid composition and the length of the peptide. Several research groups have published successful cyclization of penta- and hexapeptides, but the head-to-tail cyclization of longer sequences is more challenging as recently discussed by Davies (2003). Of the two most active peptides, B-2 (1) (Fig. 1) was chosen as the lead peptide, as its conformation is less restricted than that of C-4 (Pakkala et al. 2004). The strategy was to use other types of bridge structures connected by amide bonds suitable for automated solid-phase peptide synthesis (SPPS), and to include other linking units than conventional cysteines. The different bridges were planned to replace the N- and C-terminal cysteines and the disulfide bridge between them, and in some cases also one of the valines on either side of the cysteines. We generated a set of differently cyclized peptides with lysine, ornithine,  $\beta$ -alanine or γ-amino butyric acid (GABA) at the N-terminal site and



aspartic acid at the C-terminal site. The C-terminal aspartic acid was linked to the resin via either the backbone or side chain carboxylic group depending on the synthesized bridge structure. In addition, longer linking units such as 6-aminohexanoic acid (Ahx) and 8-aminooctanoic acid (Aox) were also investigated as replacements. Successfully cyclized structures are shown in Fig. 2.

The stimulation of the KLK3 activity was evaluated for the successfully cyclized peptides. The stability in plasma was evaluated for the peptides which significantly stimulated KLK3 activity. As KLK3 cleaves substrates mainly at the C-terminal side of tyrosine and glutamine (Coombs et al. 1998; Malm et al. 2000) it is feasible that the B-2 peptide also acts as a substrate for KLK3. Therefore, the stability against enzymatic degradation by KLK3 was also studied.

## Results and discussion

Synthesis of B-2 variants

Initially, the original B-2 peptide (1) was synthesized with C-terminal amide using Rink Amide AM resin, yielding

peptide 2. The synthesis strategies for alternatively cyclized peptides are represented in Fig. 3. In the first set of alternatively cyclized peptides, the disulfide bridge was replaced with a side chain to side chain bridge, using side chain ODmab-protected aspartic acid at the C-terminus and side chain Mtt-protected lysine or ornithine at the N-terminus. The aspartic acid residue was coupled to Rink Amide AM resin via the carboxyl terminus, leaving after ODmab-deprotection the side chain free for cyclization (10, 11, 12). The length of the modified bridge area (marked with gray background in Fig. 1) was also changed by removing either valine-11 or valine-2 (11, 12). The carboxylic acid group attached to the resin was converted to the corresponding amide using RINK Amide AM resin.

Cyclization of peptides having an N-terminal ornithine was successful, yielding peptides (3–5), but only when the amino group of the N-terminus of the peptides was acetylated. Cyclization of Fmoc-protected peptides was not successful. Cyclization of the peptides having an N-terminal lysine failed, although the  $\alpha$ -amino group was acetylated. Earlier studies with peptide 1 have shown that modification of the N-terminus does not reduce the activity of the peptides (Wu et al. 2004). The peptide with an N-terminal ornithine and C-terminal aspartic acid was also

**Fig. 1** Structure of peptide B-2. Area for replacement studies is shadowed with *gray* 

Peptide B-2, 1



Fig. 2 The structures of the successfully synthesized disulfide bridge replacements

coupled to the resin via the side chain of aspartic acid (13), leaving the C-terminal carboxyl group free for cyclization. Cyclization of this peptide, yielding peptide  $\bf 6$ , was successful although the amino group of the N-terminus was not acetylated. In peptide  $\bf 6$  the length of the bridge replacement was reduced by one  $-CH_2$ – group as compared to peptide  $\bf 3$ .

Peptides 7 and 8 have a bridge where the amino group of the GABA at the N-terminus is coupled to the main chain carboxylic acid group of aspartic acid at the C-terminus. Peptide 1 contains asparagine at position 6, which provides an additional resin binding site. Peptide 7 was synthesized using C-terminal All-protected aspartic acid, conjugated to Rink Amide resin via the side chain producing asparagine-6 in free peptide (14). After completing the synthesis, the peptide was cyclized via the free amino terminus of tyrosine (original position 7) to the deprotected resin-bound

aspartic acid. In peptide **8**, aspartic acid at position 12 was conjugated to Rink Amide resin via the side chain and the bridge was formed via GABA (**16**). Peptide **9** was synthesized with the same method as peptide **7** by attaching asparagine-6 to the resin (**15**). The bridge in peptide **9** was made up using Ahx as a linker.

We also tried to synthesize other bridge structures, presented in Fig. 4, but the cyclization of them failed or gave only extremely low yields and purities. These included a cyclization of an N-terminal  $\beta$ -alanine with the side chain of a C-terminal aspartic acid (17), where the peptide was attached to the resin from the C-terminal carboxylic acid of the aspartic acid. Another unsuccessful trial (18) was the analog of peptide 9 with an Aox linker instead of Ahx. Furthermore, a peptide with a tri-alanine bridge between valines (19), using resin-bound asparagine-6 as a cyclization site, was also unsuccessful.



Fig. 3 Representative solid-phase synthesis of peptides 3-9

Fig. 4 The structures of the unsuccessfully synthesized disulfide bridge replacements

## Determination of activity

The ability of the synthesized peptides 1–9 to stimulate KLK3-activity is shown in Fig. 5. Peptides 3-5 did not show any activity against KLK3. These peptides had side chain to side chain cyclizations between an ornithine at the N-terminus and aspartic acid at the C-terminus, and peptides 4 and 5 were shortened with one valine from either side of the bridge. These results suggest that the structure of the bridge is important for activity, especially the length of the bridge. The B-2 peptide (1) has 14 atoms counting the atoms in the bridge fragment. In peptide 3 the number of atoms is 16. Peptides 4 and 5, on the other hand, have only 13 atoms in the bridge and they lack one of the adjacent valine residues. Peptide 6 stimulated KLK3 activity, but less than peptide 1. Peptide 6 has 15 atoms in the bridge, suggesting again that the length of the bridge is important and the length starts to be closer to the optimal length. In addition, in peptide 6 the configuration of the stereocenter derived from L-aspartic acid is reversed with respect to the main chain in the ring and the carboxylic acid group side chain is one -CH<sub>2</sub>- group further apart as compared to the peptide 1. Peptide 7 was almost as potent as the peptide 1 and peptide 2. Peptide 7 has the same number of atoms in bridge (14) as the peptide 1, again emphasizing the importance of the length of the bridge. Furthermore, peptide 7 clearly shows that the amino group at the N-terminus is not needed for the KLK3-stimulating activity. Peptide 8 differs from peptide 7 only in that the carboxylic acid in the side chain in peptide 7 is an amide in peptide 8. This reduces the activity, which is in agreement with the earlier observation that the free carboxylic acid is preferred over an amide, i.e., peptide 2 is slightly less active than peptide 1. Interestingly, the relative configuration of the stereocenter next to the carboxylic acid group is not important. Peptide 9 showed no activity, indicating



again the importance of a C-terminal carboxyl group. However, peptide 9 is one atom shorter than peptides 7 and 8, having only 13 atoms in the bridge, which might also have an effect on the activity.

# Concentration dependency of KLK3-stimulation by the peptides

The concentration dependency was studied using the most active peptides, i.e., 1, 2 and 7. While these peptides showed a dose-dependent stimulation of KLK3-activity at low concentrations, the original B-2 (1) started to show reduced stimulation at higher concentrations (Fig. 6). Our results suggest that peptide 1 could also act as a substrate for KLK3 (see below), especially at high concentrations at which the activation by peptide 2 reaches its maximum. Preliminary molecular modeling has suggested that while the major binding site of peptide 1, where it is likely to exert its stimulatory effect, is outside of the active center of KLK3, there might be a second binding site at the active site where it could compete with substrate (Henna Härkönen, personal communication). Unlike the peptides 1 and 2, peptide 7 stimulated KLK3 activity dose dependently at all concentrations studied, exceeding the effect of other peptides. This finding together with a lower degradation rate of peptide 7 by KLK3 or plasma proteases (see below) suggest that the binding of peptide 7 to KLK3 is different from that of peptide 1.

# Stability studies

The original peptide **1** and peptide **7** were cleaved by KLK3 at high concentrations. The cleavage rate of peptide 7 was slower than that of peptide 1. Using a ninefold molar excess of peptides and after 2 h incubation, 59% of peptide **1** and 72% of peptide **7** were intact. After 24 h 5.7% (1) and 34% (7) were found intact, respectively (Fig. 7a). Mass spectrometry analysis indicates that the ring opens between

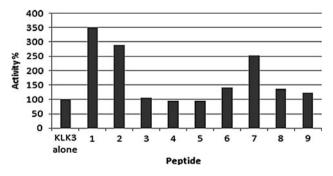
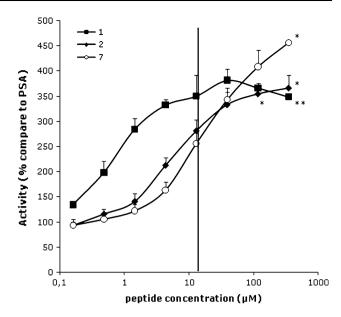
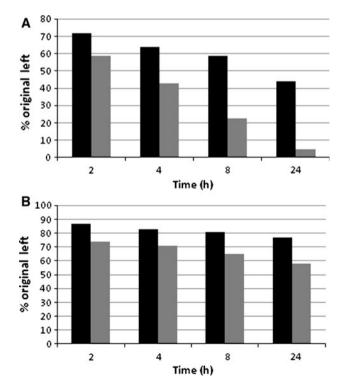


Fig. 5 Effect of the synthetic peptides on KLK3 activity. Stimulation of activity of synthetic peptides as compared to KLK3 without peptides (KLK3 alone is indicated as 100%). Peptide concentration used was  $13~\mu M$ 



**Fig. 6** Concentration dependency of the KLK3 stimulation by peptides 1, 2 and 7. Data represent average + SD of three independent experiments, except for \*n = 2 and \*\*n = 1. Solid line shows the concentration (13  $\mu$ M) used for the data shown in Fig. 5

tyrosine-7 and aspartic acid-8 (data not shown). Although the amino acid sequence of peptide 7 is identical to the original peptide, excluding the bridge, it is more stable against KLK3, suggesting different binding behavior.



**Fig. 7** Stability of peptides 7 (black columns) and 1 (gray columns) over the time **a** with purified KLK3 and **b** in plasma



The original peptide 1 and peptide 7 were tested for plasma stability. During the first 2 h 26% of peptide 1 and 13% of peptide 7 disappeared, either by degradation or binding to plasma proteins. After 2 h the disappearance rate became slower, finally after 24 h 58% of peptide 1 and 73% of peptide 7 were found intact (Fig. 7b). These results suggest that the replacement enhances the stability of the KLK3-stimulating peptides against plasma proteases or decreases binding to plasma proteins.

### Conclusions

Since our earlier studies have shown that tyrosine-7 and aspartic acid-8 are essential for the promoting activity of B-2 peptide (Pakkala et al. 2004), we used the alternative cyclization methods to improve the stability of B-2 peptide instead of side chain modifications. Based on the new analogues of peptide B-2 (1), we conclude that the bridge between the N- and C-termini is highly important for the KLK3-stimulating activity. The number of the atoms in the alternative bridge structure was found to be important. A free carboxylic acid group at the C-terminus was also important for the KLK3-stimulating activity, but there was no difference whether the free carboxylic acid was in side chain or the main chain of L-aspartic acid. The free carboxylic acid could be replaced by an amide group, but this replacement reduced the KLK3-stimulating activity. On the other hand, the amino group at the N-terminus could be removed without affecting the KLK3-simulating activity. Peptide 7 with a cysteine based disulfide bridge mimetic consisting of GABA and aspartic acid, where the amino group from the former was linked to the main chain carboxyl group of the latter, is more stable than peptide 1 and, at high concentrations, the activity exceeds that of peptide 1.

# **Experimental**

# Peptide synthesis

The peptides were synthesized using an Apex 396 DC multiple peptide synthesizer (Advanced ChemTech, Louisville, KY, USA). All amino acids (GLS Biochem) and other reagents (Aldrich, Fluka, Bachem) were purchased in standard qualities and used without further purification. Rink Amide AM resin (50 mg, loading 0.575 mmol/g), purchased from GLS Biochem, was used as solid-phase with Fmoc strategy and HBTU/DIEA as coupling reagent. The side chain protecting groups used in bridge forming residues were Acm for cysteine, OAll for C-terminus and both *t*-BuO and ODmab for side chain

protection of aspartic acid and glutamic acid, Mtt for ornithine and lysine side chain protection. Additional amino acids used for bridge formation were Fmoc-protected  $\beta$ -alanine, GABA, Ahx and Aox. Fmoc group was not removed from peptidyl resins 13–16 after final amino acid coupling. Peptide 1 was obtained from AnaSpec (San Jose, CA, USA) and was >95% pure as detected by HPLC.

Purification and mass spectrometry of peptides

All peptides were cleaved from resin using TFA: TIS: ${\rm H_2O:EDT}$  (94:1:2.5:2.5) and lyophilized. The lyophilized peptides were purified by HPLC (Shimadzu, Kioto, Japan) on a  ${\rm C_{18}}$  reverse phase column (xTERRA, Waters, Milford, MA, USA) using an CH<sub>3</sub>CN gradient (0.1% TFA in  ${\rm H_2O/0-60\%}$  CH<sub>3</sub>CN gradient for 60 min). The purity and degradation rates were determined by analytical HPLC on a 240  $\times$  1.4 mm  ${\rm C_{18}}$  column (xTERRA, Waters) eluted with 0–90% CH<sub>3</sub>CN for 42 min and verified by mass spectrometer using MALDI or ESI interface (Applied Biosystems Inc., Foster City, CA, USA) for disulfide bridge containing sequences. Negative mode was used for the detection of head-to-tail, side chain to tail and side chain to side chain cyclic peptides.

Cyclization of the disulfide bridged peptide

Peptide 2 containing cysteines protected with Acm was cyclized by the standard iodination method in solution. Peptide was cleaved from the Rink Amide AM resin yielding C-terminal amide and lyophilized. Lyophilized peptide was purified by HPLC as described above. Fractions containing crude acyclic peptide were pooled, lyophilized and then dissolved in 50% acetic acid (AcOH) in H<sub>2</sub>O at a concentration of 2 mg/ml. 1 M HCl (0.1 ml/mg of peptide) and 0.1 M iodine solution in 50% AcOH in H<sub>2</sub>O (5 eq/Acm) were added and the resulting solution was stirred vigorously at room temperature for 2 h and the reaction was stopped with 0.1 M sodium thiosulphate. After filtering (0.45 µm) the peptides were purified by HPLC as described above and lyophilized yielding peptide **2**. ESI-MS: (m/z) 1,443.6 [M + H]<sup>+</sup>. HPLC:  $t_R = 15.6$ (purity > 95%).

Cyclization method for alternatively cyclized peptides

Head-to-tail, side chain to tail and side chain to side chain cyclizations were performed on resin using HATU and HOAt as the coupling agent and DIEA as the base (Fig. 3). The yields were not expected to be higher than a few percent due to the long sequences. Furthermore, bulky tyrosine-7 adjacent to the cyclization sites in case of the

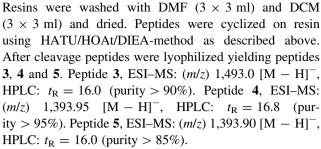


B-2 analogues connected to resin via asparagine 6 (peptides 7 and 9) expected to cause problems in cyclization. Therefore, the coupling step was performed repeatedly and with different solvent concentrations between DMF and DCM because those solvents swell the resin and peptides differently due to their different polarities. Yields of crude peptides after lyophilization varied between 25 and 35 mg and after purification by HPLC between 1 and 3 mg (2–8%) depending on peptide synthesized. Unsuccessfully cyclized peptides yielded no analytical HPLC detectable amounts of pure peptide.

The Kaiser test was performed for all alternatively cyclized peptides before the cyclization step and all tests were found positive indicating a free amino group (Kaiser et al. 1970). Usually the peptidyl resin was swelled for 30 min with the solvent used in the coupling step, the solvent was removed and the coupling agents, HATU (3 equiv), HOAt (3 equiv) and DIEA (4.5 equiv), were added with a small amount of anhydrous solvent achieving a final volume of 3 ml. The mixture was stirred for 2.5 h at room temperature under argon, the solvent was then removed, and the resin was washed with DMF (3 ml,  $3 \times 5$  min) and with anhydrous DCM (3 ml,  $3 \times 5$  min). The Kaiser test was performed to monitor the success in cyclization. If the Kaiser test results turned out to be positive, the cyclization was repeated. Usually the first cycle was performed in DMF, the second in 25% DCM in DMF and the third in 50% DCM in DMF. Higher concentrations of DCM were discarded due to the low solubility of HATU in DCM. When the Kaiser test was negative, the peptides were cleaved from resin and then lyophilized.

Deprotection and characterization of alternatively cyclized peptides

Peptidyl resins 10, 11 and 12 with orn-asp bridge as well as corresponding lysine based peptidyl resins (schemes not shown) from automated SPPS were placed in reaction columns and the free N-terminal amino groups were acetylated manually adding 20% Ac<sub>2</sub>O in DMF (3 ml) and stirring resulting solution 10 min at RT. Treatments were repeated and resins washed with DMF (3 × 3 ml). Side chain Dmab-protection was removed using 2% hydrazine in DMF (3 ml) agitating 10 min at room temperature. The treatment was repeated twice, followed by washing with 20% DIEA in DMF:H<sub>2</sub>O 9:1 (3 ml) to make sure that all traces of Dmab were removed. Resins were washed with DMF  $(3 \times 3 \text{ ml})$  and DCM  $(3 \times 3 \text{ ml})$ . N-terminal Mtt was deprotected using 1% TFA in DCM (3 ml) agitating 10 min at room temperature. Treatment was repeated three times and the deprotection was monitored by disappearance of the orange color characteristic for traces of Mtt.



Peptidyl resin 13 from automated SPPS was placed in reaction column and washed with DCM (3 × 3 ml). C-terminal allyl deprotection was performed using a catalytic amount of Pd(PPh<sub>3</sub>)<sub>4</sub> (0.1 equiv) with PhSiH<sub>3</sub> (10 equiv) as a scavenger in anhydrous DCM (3 ml). The mixture was purged with an argon flow and stirred under argon for 1.5 h. The resin was washed with DMF  $(3 \times 3 \text{ ml})$ , 0.5% DIEA in DMF  $(3 \times 3 \text{ ml})$ , 0.5% sodium diethyldithiocarbamate trihydrate in DMF (3 × 3 ml), DMF  $(3 \times 5 \text{ ml})$  and finally with DCM  $(3 \times 5 \text{ ml})$ . The treatment was repeated to drive the deprotection to completion. Deprotection of side chain Mtt was performed as described in previous chapter. Peptidyl resin 13 was additionally deprotected using 2% TFA in DCM (3 ml) to increase the deprotection rates, although this might also lead to cleavage of the peptides from the Rink-resin (Bourel et al. 2000). Peptide was cyclized on resin using HATU/HOAt/DIEA-method as described above. N-terminal Fmoc deprotection was performed after cyclization using 20% piperidine in DMF (3 ml,  $2 \times 15$  min), followed by washing with DMF (3 ml,  $3 \times 5$  min) and DCM  $(3 \text{ ml}, 3 \times 5 \text{ min})$ . After cleavage peptide was lyophilized yielding peptide 6. ESI-MS: (m/z) 1,451.0 [M - H]<sup>-</sup>, HPLC:  $t_R = 15.5$  (purity > 95%).

Peptidyl resins **14**, **15** and **16** from automated SPPS were placed in reaction columns and washed with DCM (3 × 3 ml). C-terminal allyl deprotection and N-terminal Fmoc deprotection were performed as described in previous chapter. After deprotection peptides were cyclized on resin using HATU/HOAt/DIEA-method as described above. After cleavage peptides were lyophilized yielding peptides **7**, **8** and **9**. Peptide **7**, ESI–MS: (m/z) 1,422.5 [M – H] $^-$ , HPLC:  $t_R = 16.8$  (purity > 95%). Peptide **8**, ESI–MS: (m/z) 1,421.5 [M – H] $^-$ , HPLC:  $t_R = 16.4$  (purity > 85%). Peptide **9**, ESI–MS: (m/z) 1,335.8 [M – H] $^-$ , HPLC:  $t_R = 18.3$  (purity > 90%).

Effect of the peptides on KLK3 activity

Kallikrein-related peptidase 3 activity was measured by using the chromogenic substrate S-2586 (MeO-Suc-Arg-Pro-Tyr-pNA  $\cdot$  HCl) purchased from Chromogenix Instrumentation Laboratory (Milano, Italy). KLK3 (0.3  $\mu$ M) was incubated for 30 min at room temperature with synthetic



peptides (13  $\mu$ M) in 0.05 M Tris buffer, pH 7.7, containing 0.154 M NaCl, 8 mM NaN<sub>3</sub> and 0.1% bovine serum albumin. After the addition of the substrate to a final concentration of 0.2 mM, the absorbance at 405 nm was measured at 5 min intervals for 30 min with a Victor 1420 Multilabel fluorometer (Perkin-Elmer-Wallac, Turku, Finland). The concentration dependency of the activity was determined by measuring the activity of KLK3 in the presence of the synthetic peptides in a series of concentration from 0.16 to 351  $\mu$ M.

## Stability tests

Proteolytic cleavage of selected peptides with KLK3 was followed for 24 h. Peptide (0.18 mM) was incubated with KLK3 (0.02 mM in PBS final concentration) in 150  $\mu$ l volume at +37°C or with PBS as the control. Peptide samples of 35  $\mu$ l were collected at 2, 4, 8 and 24 h time points and KLK3 was removed from the reaction mixture with a Microcon Centrifucal Filter Device (Microcon YM-10, cut off 10 kDa, Millipore, Bedford, MA, USA) by centrifugation at 15,000 rpm with Eppendorf 5415 D centrifuge (Eppendorf, Hamburg, Germany) for 10 min. The filtrates were analyzed by HPLC as described above.

Plasma stability tests for the selected peptides were performed by incubating the peptides with 250  $\mu$ l fresh human EDTA plasma, 125  $\mu$ l PBS and 125  $\mu$ l peptide solution (0.5 mg/ml in H<sub>2</sub>O) for 24 h at +37°C. For controls, the peptides were added to PBS. Peptide samples of 100  $\mu$ l were collected at 2, 4, 8 and 24 h time points. The peptides were separated from plasma proteins on a Microcon Centrifucal Filter Device and analyzed as described above.

Acknowledgments This work was supported by Finnish Funding Agency for Technology and Innovation (TEKES), University of Helsinki, Helsinki University Central Hospital, the Finnish Cancer Foundation, the Academy of Finland (Grant No. 126969), Juselius Foundation, and Finska Läkaresällskapet. We would also like to thank J Rytkönen and A. Uljas for technical assistance.

## References

- Abrahamsson PA, Lilja H, Falkmer S, Wadstrom LB (1988) Immunohistochemical distribution of the three predominant secretory proteins in the parenchyma of hyperplastic and neoplastic prostate glands. Prostate 12:39–46
- Adessi C, Soto C (2002) Converting a peptide into a drug: strategies to improve stability and bioavailability. Curr Med Chem 9:963– 978
- Borgono CA, Diamandis EP (2004) The emerging roles of human tissue kallikreins in cancer. Nat Rev Cancer 4:876–890
- Bourel L, Carion O, Gras-Masse H, Melnyk O (2000) The deprotection of Lys(Mtt) revisited. J Pept Sci 6:264–270
- Catalona WJ, Smith DS, Ratliff TL, Dodds KM, Coplen DE, Yuan JJ, Petros JA, Andriole GL (1991) Measurement of prostate-specific

- antigen in serum as a screening test for prostate cancer. N Engl J Med 324:1156–1161
- Christensson A, Laurell CB, Lilja H (1990) Enzymatic activity of prostate-specific antigen and its reactions with extracellular serine proteinase inhibitors. Eur J Biochem 194:755–763
- Clements JA, Willemsen NM, Myers SA, Dong Y (2004) The tissue kallikrein family of serine proteases: functional roles in human disease and potential as clinical biomarkers. Crit Rev Clin Lab Sci 41:265–312
- Coombs GS, Bergstrom RC, Pellequer JL, Baker SI, Navre M, Smith MM, Tainer JA, Madison EL, Corey DR (1998) Substrate specificity of prostate-specific antigen (PSA). Chem Biol 5:475–488
- Davies JS (2003) The cyclization of peptides and depsipeptides. J Pept Sci 9:471–501
- Fortier AH, Nelson BJ, Grella DK, Holaday JW (1999) Antiangiogenic activity of prostate-specific antigen. J Natl Cancer Inst 91:1635–1640
- Fortier AH, Holaday JW, Liang H, Dey C, Grella DK, Holland-Linn J, Vu H, Plum SM, Nelson BJ (2003) Recombinant prostate specific antigen inhibits angiogenesis in vitro and in vivo. Prostate 56:212–219
- Kaiser E, Colescott RL, Bossinger CD, Cook PI (1970) Color test for detection of free terminal amino groups in the solid-phase synthesis of peptides. Anal Biochem 34:595–598
- Koistinen H, Wohlfahrt G, Mattsson JM, Wu P, Lahdenpera J, Stenman UH (2008) Novel small molecule inhibitors for prostate-specific antigen. Prostate 68:1143–1151
- Lien S, Lowman HB (2003) Therapeutic peptides. Trends Biotechnol 21:556–562
- Lilja H (1985) A kallikrein-like serine protease in prostatic fluid cleaves the predominant seminal vesicle protein. J Clin Invest 76:1899–1903
- Lilja H, Christensson A, Dahlen U, Matikainen MT, Nilsson O, Pettersson K, Lovgren T (1991) Prostate-specific antigen in serum occurs predominantly in complex with alpha 1-antichymotrypsin. Clin Chem 37:1618–1625
- Malm J, Hellman J, Hogg P, Lilja H (2000) Enzymatic action of prostate-specific antigen (PSA or hK3): substrate specificity and regulation by Zn(2+), a tight-binding inhibitor. Prostate 45:132–139
- Mattsson JM, Valmu L, Laakkonen P, Stenman UH, Koistinen H (2008) Structural characterization and anti-angiogenic properties of prostate-specific antigen isoforms in seminal fluid. Prostate 68:945–954
- Paju A, Hotakainen K, Cao Y, Laurila T, Gadaleanu V, Hemminki A, Stenman UH, Bjartell A (2007) Increased expression of tumor-associated trypsin inhibitor, TATI, in prostate cancer and in androgen-independent 22Rv1 cells. Eur Urol 52:1670–1679
- Pakkala M, Jylhasalmi A, Wu P, Leinonen J, Stenman UH, Santa H, Vepsalainen J, Perakyla M, Narvanen A (2004) Conformational and biochemical analysis of the cyclic peptides which modulate serine protease activity. J Pept Sci 10:439–447
- Pakkala M, Hekim C, Soininen P, Leinonen J, Koistinen H, Weisell J, Stenman UH, Vepsalainen J, Narvanen A (2007) Activity and stability of human kallikrein-2-specific linear and cyclic peptide inhibitors. J Pept Sci 13:348–353
- Papadopoulos I, Sivridis E, Giatromanolaki A, Koukourakis MI (2001) Tumor angiogenesis is associated with MUC1 overexpression and loss of prostate-specific antigen expression in prostate cancer. Clin Cancer Res 7:1533–1538
- Robert M, Gibbs BF, Jacobson E, Gagnon C (1997) Characterization of prostate-specific antigen proteolytic activity on its major physiological substrate, the sperm motility inhibitor precursor/semenogelin I. Biochemistry 36:3811–3819



Sato AK, Viswanathan M, Kent RB, Wood CR (2006) Therapeutic peptides: technological advances driving peptides into development. Curr Opin Biotechnol 17:638–642

- Stamey TA, Yang N, Hay AR, McNeal JE, Freiha FS, Redwine E (1987) Prostate-specific antigen as a serum marker for adenocarcinoma of the prostate. N Engl J Med 317:909–916
- Stege R, Grande M, Carlstrom K, Tribukait B, Pousette A (2000) Prognostic significance of tissue prostate-specific antigen in endocrine-treated prostate carcinomas. Clin Cancer Res 6:160– 165
- Stenman UH (1997) Prostate-specific antigen, clinical use and staging: an overview. Br J Urol 79(suppl 1):53–60
- Stenman UH, Leinonen J, Alfthan H, Rannikko S, Tuhkanen K, Alfthan O (1991) A complex between prostate-specific antigen and alpha 1-antichymotrypsin is the major form of prostatespecific antigen in serum of patients with prostatic cancer: assay of the complex improves clinical sensitivity for cancer. Cancer Res 51:222–226

- Stenman UH, Abrahamsson PA, Aus G, Lilja H, Bangma C, Hamdy FC, Boccon-Gibod L, Ekman P (2005) Prognostic value of serum markers for prostate cancer. Scand J Urol Nephrol Suppl 216:64–81
- Williams SA, Singh P, Isaacs JT, Denmeade SR (2007) Does PSA play a role as a promoting agent during the initiation and/or progression of prostate cancer? Prostate 67:312–329
- Wu P, Leinonen J, Koivunen E, Lankinen H, Stenman UH (2000) Identification of novel prostate-specific antigen-binding peptides modulating its enzyme activity. Eur J Biochem 267:6212–6220
- Wu P, Stenman UH, Pakkala M, Narvanen A, Leinonen J (2004) Separation of enzymatically active and inactive prostate-specific antigen (PSA) by peptide affinity chromatography. Prostate 58:345–353
- Yousef GM, Diamandis EP (2001) The new human tissue kallikrein gene family: structure, function, and association to disease. Endocr Rev 22:184–204

