

Perspective: the potential of pyrazole-based compounds in medicine

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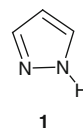
Abstract Pyrazoles are widely used as core motifs for a large number of compounds for various applications such as catalysis, agro-chemicals, building blocks of other compounds and in medicine. The attractiveness of pyrazole and its derivatives is their versatility that allows for synthesis of a series of analogues with different moieties in them, thus affecting the electronics and by extension the properties of the resultant compounds. In medicine pyrazole is found as a pharmacophore in some of the active biological molecules. While pyrazole derivatives have been extensively studied for many applications including anticancer, antimicrobial, anti-inflammatory, antidiabetic, anti-allergy and antiviral, much less has been reported on their metal counterparts in spite of the fact that metals have been shown to impart activity to ligands. Thus this perspective is intended to demonstrate the potential of pyrazole and pyrazolyl metal complexes in the areas of drug discovery and development. Several examples, that include palladium, platinum, copper, gold, zinc, cobalt, nickel,

iron, copper, silver and gallium complexes, are used to bolster the above point. For the purposes of this review three areas are discussed, that is pyrazole metal complexes as: (i) anticancer, (ii) antibacterial/parasitic and (iii) antiviral agents.

Keywords Pyrazole · Metal complexes · Anticancer · Antibacterial · Antiparasitic · Antiviral

Introduction

Over the years increasing attention has been paid to pyrazoles in drug and related research since the initial reports on their properties as inhibitors of alcohol dehydrogenase (Pereira et al. 1992), potential anti-allergic agents (Vitolo et al. 1978; Di Parsia et al. 1981), analgesic agents (Takabatake et al. 1970) and even as anti-inflammatory agents (Hirschmann et al. 1964) appeared in the literature nearly 40 years ago. Subsequently a number of seminal papers have given leads to different areas of potential applications of pyrazole and pyrazole complexes in medicine. These lead papers are briefly highlighted below to indicate the extent of potential areas of applications.



There has been ample evidence that pyrazoles possess therapeutic properties for quite some time. The first

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documented evidence dates back to the 1960 s where pyrazoles were shown to inhibit the action of horse liver alcohol dehydrogenase (LADH) (Theorell and Yonetani 1963; Theorell et al. 1969; Li and Theorell 1969). In addition, research published by Blomstrand (1972) and Blomstrand et al. (1979) suggested that methylpyrazole could be used to treat methanol poisoning. This is after it was demonstrated that methylpyrazole inhibits alcohol dehydrogenase (Theorell and Yonetani 1963) even though its parent compound, pyrazole (**1**), was found to be toxic. In related experiments, Eklund et al. (1976, 1982) and Dahlbom et al. (1974) demonstrated that pyrazoles and their derivatives are good ADH inhibitors. For instance, 4-ethylpyrazole, a less toxic derivative of pyrazole, is even a stronger inhibitor of LADH, with K_I of 0.007 μ M. It is even more interesting that it was suggested to offer a solution to alcoholism.

Since the discovery that 3-methylpyrazole and 4-ethylpyrazole have potential medicinal value, there has been a rapid growth in synthesizing new derivatives of pyrazole as anticancer (Manfredini et al. 1992; Komeda et al. 2000; Gamage et al. 2002; Moukha-Chafiq et al. 2002; Rostom et al. 2003; Duivenvoorden et al. 2005; Park et al. 2005; Keter et al. 2009a), antibacterial (Jungheim 1989; Aiello et al. 2000; Genin et al. 2000a; Kucukguzel et al. 2000; El-Gaby et al. 2000; Farghaly et al. 2001; Moukha-Chafiq et al. 2002; Haque et al. 2002; Kaymakcioglu and Rollas 2002; Panda et al. 2002; Adnan and Abdel-Aziem 2004; Tanitame et al. 2004; Akbas and Berber 2005; Bekhit et al. 2005; Bildirici et al. 2007; Abunada et al. 2008; Radi et al. 2010), antiparasitic (Garg et al. 1973; Rathelot et al. 2002), antiviral (Comber et al. 1991; Manfredini et al. 1992; Storer et al. 1999; Johansson et al. 2002; Rostom et al. 2003; Sweeney et al. 2008), analgesics (Menozzi et al. 1997; Pinto et al. 1999) antiglycemic agents (Bauer et al. 1968; Kees et al. 1996; Bebernitz et al. 2001) and even as anti-inflammatory agents (Bekhit et al. 2003; Bekhit et al. 2005; Bekhit et al. 2006; Burguete et al. 2007).

Some of the specific examples include curcumin-derived pyrazoles, which inhibit secretion of amyloid β ($A\beta$) responsible for Alzheimers disease (Narlawar et al. 2007, 2008). Others are *N*-acetyl pyrazole and pyrazolothiazolone as antivirals (Shen et al. 2004a; El-Sabbagh et al. 2009), pyrazol-thioketone and aryl/cyclohexyl-thio substituted pyrazoles as antimicrobials (Chande et al. 1999; Manikannan et al. 2010) and *o*-hydroxy-phenylpyrazoles as analgesics (Pinto et al.

1999). Further examples are triarylpyrazoles (Stauffer et al. 2000, 2001) and pyrazolopyrimidines (Zhou et al. 2007) reported as estrogen receptor (ER) antagonists.

With pyrazoles showing therapeutic properties as briefly mentioned above, and with examples of metals complexes having therapeutic value such as *cis*-dichlorodiammineplatinum(II) (cisplatin) used to treat various cancers, it was not long before pyrazole-based complexes were also prepared and investigated for their therapeutic values. One of the first pyrazole complexes to be investigated was *cis*-dichlorobis(pyrazole)platinum(II) (**2**) that showed anticancer properties (Sakai et al. 2000). Several pyrazole and pyrazolyl complexes have since been prepared and probed for their therapeutic action across a spectrum of diseases such as cancer (Komeda et al. 2000; Al-Allaf and Rashan 2001; Wheate et al. 2001; Sakai et al. 2000; Pettinari et al. 2006; Keter et al. 2008; Casas et al. 2008; Segapelo et al. 2009; Zhang et al. 2010; Mosoarca et al. 2011), antimicrobials and antifungal (Al-Allaf et al. 1993; Nomiya et al. 2000; Mahmud et al. 2001; Fang et al. 2003; Tharmaraj et al. 2009; Sharma et al. 2009; Negm et al. 2010; Kulkarni and Revankar 2011) and as anti-viral agents (Kratz et al. 1992; Fonteh et al. 2009). For these reasons there is growing pharmacological interest in pyrazole-derived compounds given that the pyrazole motif makes up the core structure of numerous biologically active compounds (Elguero et al. 2002).

This mini-review is therefore meant to demonstrate that complexes of pyrazole-based ligands hold promise in medicine. Suffice it to say that complexes of nitrogen-donor ligands in general have shown interesting or potential biological activities for different ailments ranging from cancer to bacterial and parasitic infections. It has been amply demonstrated that a metal fragment tend to add value to an already active organic fragment (ligand). This, no doubt, is due to the ability of metals to influence the electronics of the resultant complexes when bound to such organic fragments; thereby improving the therapeutic value of the overall compound. Compared to other nitrogen-donor metal complexes, pyrazole and pyrazolyl metal complexes have been less extensively used in medicine. The following sections would be used to illustrate the growth in the use of pyrazole-based complexes as anticancer, antibacterials & antiparasitic and anti-viral agents; and hence the potential that pyrazoles and their derivatives, either by themselves or on complexes have in medical applications.

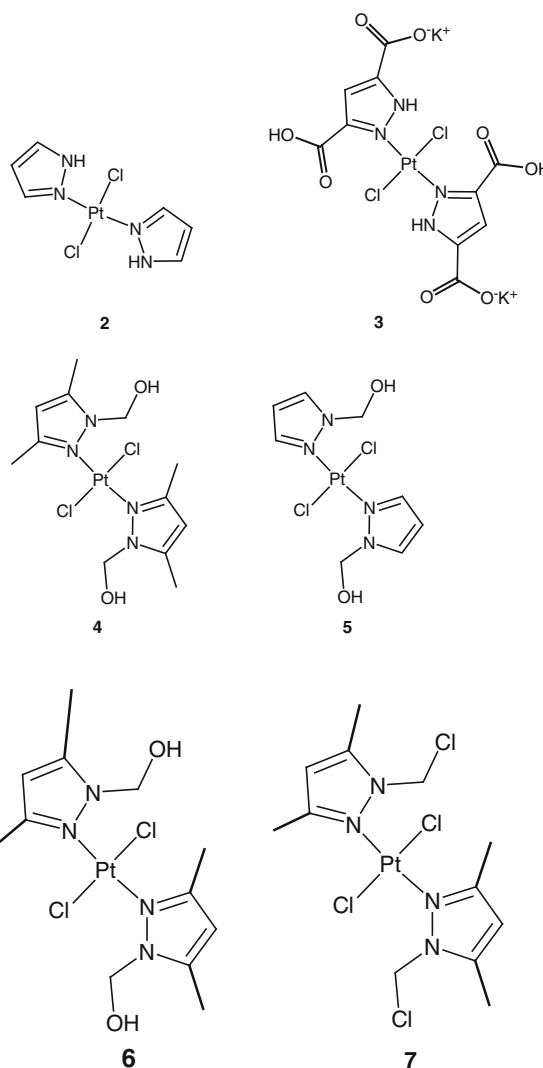
Pyrazole complexes in medicine

Cancer

Interest in complexes in cancer can be traced back to the serendipitous discovery of cisplatin by Rosenberg et al. (1965, 1969) as an anticancer agent. In spite of its excellent activity against various cancers, its toxicity is a constant worry. For this reason researchers continue to look for better compounds that are less toxic. As such many second generation compounds, mimics to cisplatin, have been prepared. They include carboplatin (Harrap 1985; Kelland et al. 1999), iproplatin (Braddock et al. 1975; Tobe and Khokhar 1977) and oxaliplatin (Kidani et al. 1980; Graham et al. 2004). Sadly these compounds, too, show some toxicity; hence the search continues.

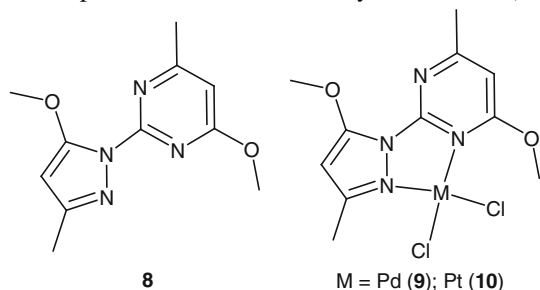
Pyrazoles in cancer were first introduced by Sakai et al. (2000) when they reported anticancer activities of dichloro-bis(pyrazole)platinum(II), $\text{PtCl}_2(\text{pzH})_2$ (**2**), and dichloro-bis(pyrazoledicarboxylic-acid)platinum(II) dipotassium salt, $\text{PtCl}_2(3\text{-CO}_2\text{H}, 5\text{-CO}_2\text{KpzH})_2$ (**3**) against human colorectal cell lines (DLD-1, HCT15, HT29) and a human gastric cell line (AGS). While compound **3** was ineffective, **2** was active against the four cell lines mentioned above. The activity of **2** (IC_{50} values: DLD-1, 2.76 μM ; HCT15, 6.5 μM ; HT29, 2.1 μM ; AGS, 2.84 μM) was similar to that of cisplatin (DLD-1, 2.31 μM ; HCT15, 2.5 μM ; HT29, 1.2 μM ; AGS, 2.13 μM) (Sakai et al. 2000). Compound **2** was also tested against L1210 murine leukemia cells with an IC_{50} of 4.6 μM compared to cisplatin (1.2 μM) and carboplatin (11.2 μM) (Ciesielska et al. 2006). We have also tested **2** and $\text{PtCl}_2(3,5\text{-Me}_2\text{pzH})_2$ (**4**) against human cervical epitheloid carcinoma (HeLa and CaSki) and leukemia (Jurkat) cells and found that they induce caspase-3 and DNA fragmentation (Keter et al. 2008). Other closely related compounds that have anticancer activity: are *cis*-dichloro-bis-(*N*-hydroxymethylpyrazole- κN^2)platinum(II), $\text{PtCl}_2(\text{Hmpz})_2$ (**5**), *cis*-dichloro-bis-(*N*-hydroxymethyl-3,5-dimethylpyrazole- κN^2)platinum(II), $\text{PtCl}_2(\text{HM-3,5-dmpz})_2$ (**6**) and *cis*-dichloro-bis-(*N*-chloromethyl-3,5-dimethylpyrazole- κN^2)platinum(II), $\text{PtCl}_2(\text{Clmpz})_2$ (**7**) that are cytotoxic to L1210 murine leukemia cells (Ciesielska et al. 2006). The recorded ED_{50} values are 4.1, 3.5 and 4.4 μM for compounds **5**, **6** and **7** respectively. These activities are lower compared to cisplatin (1.2 μM) but better than carboplatin (11.2 μM) on the same cell line (Ciesielska et al. 2006). Interest in this class of pyrazolyl

complexes, though, lies in the way they act against cancer cell lines. Whereas their cytotoxicities are similar, **2**, **5** and **6** induce DNA laddering after a 3 h drug exposure period and after 24 h post-drug incubation; while **7** and cisplatin only induce the laddering after a total of 48 h post-drug incubation. Given that DNA fragmentation is the hallmark of apoptosis, it therefore follows that **2**, **5** and **6** induce apoptosis earlier than **7** and cisplatin (Ciesielska et al. 2006).

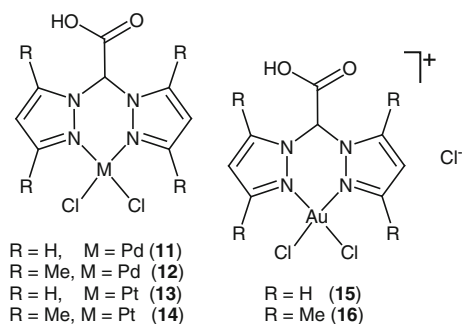


Mepirizole (**8**), an active pyrimidino pyrazole, used as an analgesic and anti-inflammatory agent (Takabatake et al. 1970), has also been used to prepare palladium(II) (**9**) and platinum(II) (**10**) complexes by Onoa et al. (1999). It is clear that these researchers took advantage of mepirizole's biological property by using

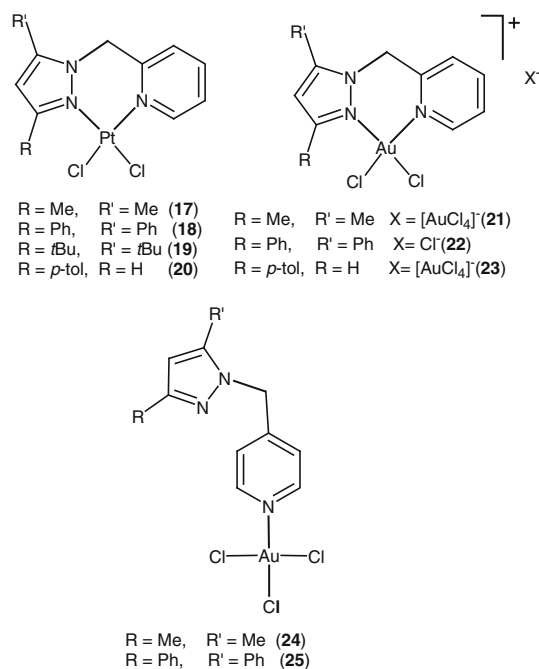
it to make **9** and **10** as cisplatin mimics. However, **9** and **10** were inactive against cervical cancer cells, HeLa (Onoa et al. 1999). A series of studies involving quantification of non-bound and bound metal pointed to the inability of **9** and **10** to cross the cell membrane, hence poor activities observed by Onoa et al. (1999).



Another set of compounds are the bis(pyrazolyl)-palladium(II) (**11** and **12**), platinum(II) (**13** and **14**) and gold(III) complexes (**15** and **16**) reported by us (Keter et al. 2009b). The appeal of gold complexes comes from recent indication of their potential as anticancer agents. However, gold(III) complexes as anticancer agents are much less investigated owing to its instability and tendency to readily undergo reduction in physiological conditions. It is believed that strongly binding ligands; preferably those featuring hard base donors are needed to make gold(III) anticancer agents. Thus, our choice of bis(pyrazolyl)acetic compounds as ligands to make gold(III) complexes was based on this believe. Unfortunately **11**–**16** were between 14 and 71 times less active (1.1–5.1 mM) than cisplatin (0.07 mM) when tested against Chinese hamster ovary (CHO) cells (Keter et al. 2009b). One similarity drawn from our work (Keter et al. 2009b) and that reported by Sakai et al. (2000) is that the carboxylic group of the bis(pyrazolyl)acetic ligand reduce the activities of these complexes. It has been suggested that the bulkiness of the carboxylic moiety and its contribution to the overall reduction of the electron density of the pyrazole may be responsible for the low activity (Ciesielska et al. 2006).

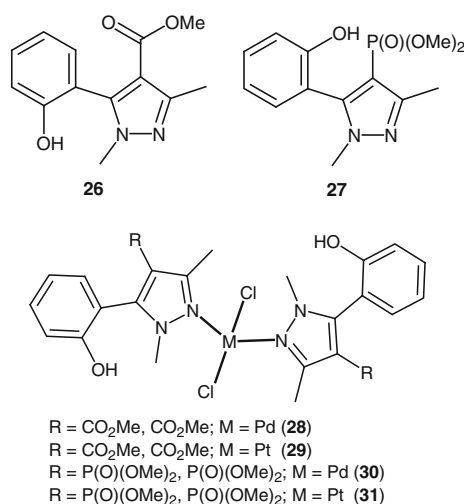


Noteworthy is the fact that the bis(pyrazolyl) acetic acid are able to stabilize palladium(II) and platinum(II) complexes long enough to allow for the study of their substitution reactions with cysteine. Whereas the same is true for their gold(III) analogues, the resultant substitution products undergo facile reduction (Keter et al. 2009b). This is probably one of the reasons for lack of activity of the bis(pyrazolyl)gold(III) complexes, even though there was no correlation between the kinetics and the biological data (Keter et al. 2009b). Further efforts to try and explore pyrazoles as stabilizing ligands, particularly for gold(III), led to isolation of platinum(II) and gold(III) complexes of (pyrazolylmethyl)pyridines (**17**–**25**) (Segapelo et al. 2009). The multidentate nature of these pyrazolyl compounds offers plausible route to preparing stable complexes and also lead to square planar geometries. In this group of complexes, **23** and **25** had relatively good activities against HeLa cells (3.8–8.9 μ M). However, they were found to be toxic to normal cells pointing to indiscriminate killing of cells by these compounds (Segapelo et al. 2009).



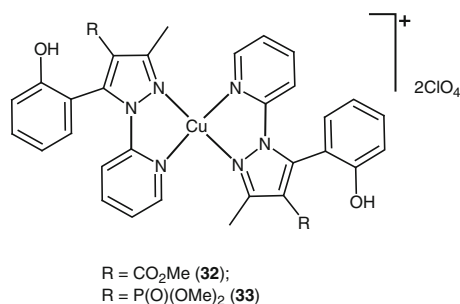
In another study Budzisz et al. (2004a) reported the use of phosphonic-based pyrazoles, 5-(2-hydroxyphenyl)-1,3-dimethyl-4-(dimethoxy)phosphonyl-1H-pyrazole (**26**) and 5-(2-hydroxyphenyl)-1,3-dimethyl-4-methoxycarbonyl-1H-2-pyrazole (**27**), to prepare palladium(II), platinum(II) and copper(II)

complexes (**28–33**). Complexes **28–33** were investigated for their potential anticancer activities. The phosphonyl moieties in the **28–33** were intended to impart alkylating ability to the complexes, whilst the pyrazole moiety were meant to offer selectivity. The complexes were obtained by reacting **26** and **27** with K_2PtCl_4 or $PdCl_2(PhCN)_2$. Even though no solid state structure was given, the spectroscopic data pointed to isolation of the *cis*- and *trans*-complexes.



It is evident from the preussman test results, a tool to investigate the alkylating abilities, that compound **29** was more alkylating than the reference compound, cisplatin (Budzisz et al. 2004b). Disappointingly though, is the fact that all these phosphonic-based pyrazoles complexes were less active than cisplatin ($0.8 \mu M$) in leukemia HL-60 and NALM-6 cells, where the best activity was shown by compound **29** (8.9 and $25.7 \mu M$ for NALM-6 and HL-60 cells, respectively). Nevertheless, **28–33** induced caspase-3 at different rates; and binds DNA preferentially at the GC sequence, but with low affinity. More importantly is the fact that these compounds, **29** in particular, were not toxic to non-cancerogenic HUVEC cells ($IC_{50} = 708.7 \mu M$) compared to cisplatin ($IC_{50} = 96.1 \mu M$) indicating its potential non-toxicity to normal cells (Budzisz et al. 2004b). Other examples include the trigonal bipyramidal copper complexes of pyrazole-phosphonic ligands such as copper complexes of 5-(2-hydroxyphenyl)-3-methyl-1-(2-pyridyl)-1H-pyrazole-4-carboxylic acid methyl ester (**32**) and 5-(2-hydroxyphenyl)-3-methyl-1-(2-pyridyl)-1H-pyrazole-4-phosphonic acid (**33**) (Budzisz et al. 2009). Complex **32** exhibited better

activity against leukemia and melanoma, respectively ($\sim 6.5 \mu M$ in HL60 cells and $\sim 8 \mu M$ in WM-115 cells) than its analogues **28** ($\sim 134 \mu M$ in HL60 cells; $\sim 484 \mu M$ in WM cells) and **29** ($\sim 58 \mu M$ in HL60 cells; $\sim 77 \mu M$ in WM cells). However, **32** was no better than carboplatin ($4.3 \mu M$) and cisplatin ($0.8 \mu M$) in HL60 cells, albeit better than the two in melanoma WM cells (carboplatin, $422.2 \mu M$; cisplatin, $18.2 \mu M$) (Budzisz et al. 2009).

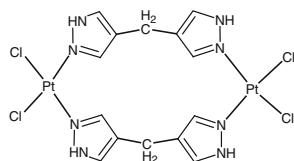


Other relevant compounds include the dipyrazolylmethane-based (dpzm) platinum(II) complex, β -[PtCl $_2$ (μ -dpzm) $_2$ PtCl $_2$] (**34**), reported by Broomhead et al. (1992). Apart from the DNA binding abilities of **34**, it showed activity against P338 murine leukemia cells (Broomhead et al. 1993); and unlike mononuclear complexes such as *cis*- and *trans*-platin, **34** is thought to form unique types of Pt-DNA adducts. Later on Broomhead et al. (1998) used dpzm to prepare several complexes of general formulae [MCl $_2$ (dpzm) $_n$] ($M = Zn, Cu$) (**35–36**) and [MCl $_2$ (dpzm) $_2$] $_n$ ($M = Mn, Fe, Co, Ni, Cu$) (**37–41**) of which **40** and **41** showed activity against P338 murine leukemia and DNA binding abilities. Furthermore, dpzm ligands have been used to modify cisplatin to give cationic multinuclear platinum complexes *trans*-[Pt(NH $_3$) $_2$ Cl] $_2$ - μ -dpzm]Cl $_2$ (**42**) and *trans*-[*trans*-{Pt(NH $_3$) $_2$ Cl} $_2$ {*trans*-[Pt(NH $_3$) $_2$ (μ -dpzm) $_2$]}]Cl $_4$ (**43**) (Wheate et al. 2001). Both complexes show activity in L1210 murine leukaemia cells ($IC_{50} = 3.8$ and $2.5 \mu M$, respectively) and form very high levels of DNA interstrand cross-links in vitro; a factor adduced to the rigid nature of dpzm linking ligand that inhibits formation of intra-strand adducts observed for cisplatin (Wheate et al. 2001). Wheate and Collins (2003) have authored an excellent review on multinuclear platinum complexes based on dpzm and the reader is encouraged to refer to it.

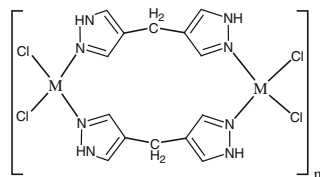
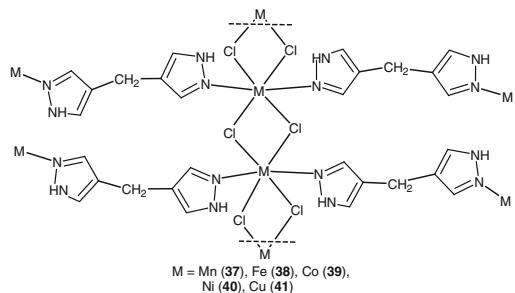
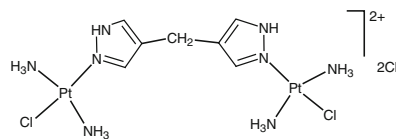
New Schiff-based pyrazolyl copper(II) complexes, chloro[*N*-(2-hydroxy-3,5-dichloride-benzyl)-2-pyrazo

lethyl)iminate]copper(II) (**44**) and chloro[*N*-(2-hydroxy-3,5-diiodine-benzyl-2-pyrazolethyl)iminate]copper(II) (**45**) complexes were recently reported (Gama et al. 2011) to have shown therapeutic action against prostate (PC-3), breast (MCF-7) and ovarian (A2780 and A2780cisR) cancer cells. The IC₅₀ values of **44** (PC-3, 45 μM; MCF-7, 31 μM; A2780, 20 μM; A2780cisR, 28 μM) and **45** (PC-3, 39 μM; MCF-7, 26 μM; A2780, 13 μM; A2780cisR, 18 μM) were comparable to those of cisplatin (PC-3, 51 μM; MCF-

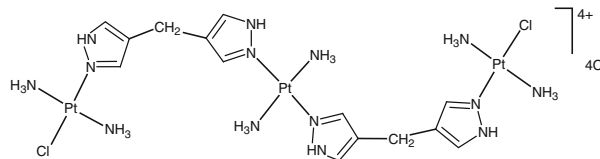
date, cisplatin (Platinol®), carboplatin (Paraplatin®) and oxaliplatin (Eloxatin®), remain the most commonly used anticancer drugs. Platinol and Paraplatin are known to be effective against ovarian, bladder, lung, esophageal, breast, and cervical cancers amongst many other cancers. On the other hand, Eloxatin is used in combination with other drugs, such as fluorouracil, to treat metastatic rectal cancer. They remain useful drugs in the market despite their toxicity levels.



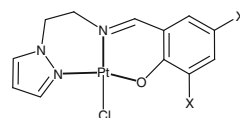
34

M = Zn (**35**), Cu (**36**)M = Mn (**37**), Fe (**38**), Co (**39**), Ni (**40**), Cu (**41**)

42



43

X = Cl (**44**), I (**45**)

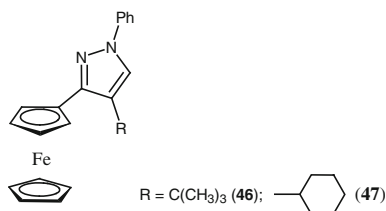
7, 28 μM; A2780cisR, 17 μM) after 72 h of treatment, except in the case of A2780 cells (1.9 μM). In addition, **44** and **45** induced DNA cleavage in the presence of ascorbic acid. Overall, **45** was more active than **44** and is attributed to its enhanced stabilization as a result of Cu(II)/Cu(I) redox potential presumably imparted by the halogen substituent groups because of their π-donating effect (Gama et al. 2011).

It is worth mentioning that despite all the attempts to find new drugs such efforts have not been very successful, however considerable gains have been made that has led to better understanding of the functionality of this class of compounds. As such, to

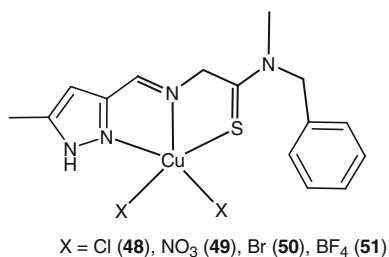
Antiparasites and antibacterials

It is no doubt that in the 21st century we have seen signs of strains that are developing resistance to existing antibacterial concoctions, e.g. ciprofloxacin, nobobio-cin and counamins. These strains include *Staphylococcus aureas*, *Streptococcus pneumonia* and *Enterococci*. Thus efforts to find alternative antibacterial agents to overcome the growing resistance problems are necessary. Amongst the compounds reported as a result of these efforts are the ferrocenyl-pyrazoles that show superb antibacterial activity against Gram positive bacteria (Damljanovic et al.

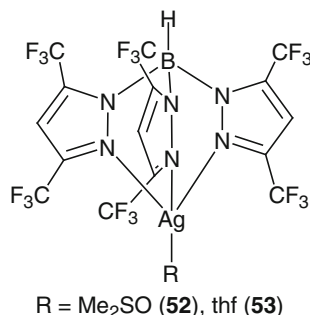
2009). By coupling pyrazoles, which are known to have antimicrobial activity (Kucukguzel et al. 2000; Genin et al. 2000b; Adnan and Abdel-Aziem 2004; Bekhit et al. 2005) with ferrocene moieties known for its advantage to cross the cell membrane (Dombrowski et al. 1986), compounds **46** and **47** were isolated and shown to be active against an array of bacteria. The activities of **46** and **47** compare well with the reference compounds tetracycline and nistatine. Design of such compounds was buoyed by positive results obtained when ferrocene was derivatised with chloroquine to form ferrochloroquine, which is active against the chloroquine-resistant strain of *Plasmodium falciparum* (Biot et al. 1997). These ferrocenyl pyrazoles were prepared by condensation of acetylferrocene with phenylhydrazine. Cyclization process completes the process to form the end product, **46** and **47**.



Interestingly in an attempt to improve antibacterial activities of thiosemicarbazone-based compounds, pyrazole moieties have been incorporated. A classical example are complexes of the general formula [Cu(HMPz₄BM)X₂] (X = Cl, NO₃, Br, BF₄) (**48–51**) reported by Sau et al. (2003). Two of these compounds, **48** and **49**, showed antibacterial activity against Gram-positive *Staphylococcus aureus* with 97 and 96% growth inhibitions, respectively at 500 µg/ml. The lack of activities for **50** and **51** was attributed to their ease of solvolysis compared to **48** and **49**; and is supported by high cathodic peak potentials, which is associated with an irreversible process (Sau et al. 2003).

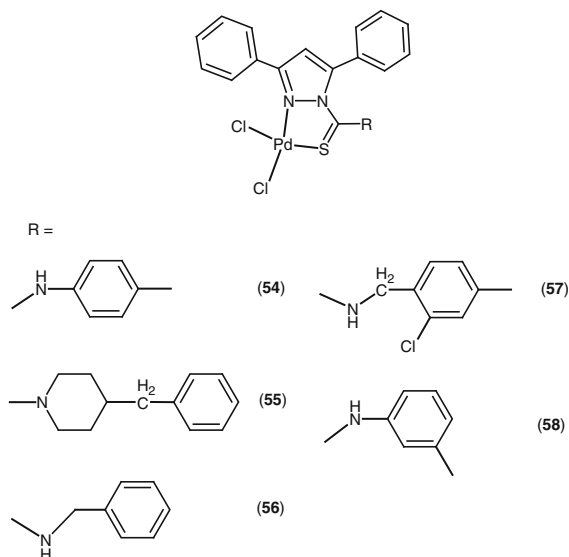


Silver(I) pyrazolyl compounds have also been reported because of their attractiveness as antimicrobial agents. Silver compounds are generally known to have antimicrobial properties and exert their activities through interaction with DNA, reacting with thiol groups in proteins and interfering with electron transport (Russell and Hugo 1994). The highly fluorinated tris(pyrazolyl)borate silver complexes, [HB(3,5-(CF₃)₂pz)₃]Ag(OSMe₂)] (**52**) and [HB(3,5-(CF₃)₂pz)₃]Ag(thf)] (**53**) were reported by Dias et al. (2006) to show activities against *Staphylococcus aureus* with minimum inhibitory concentrations of approximately six times less than the reference compound Ag(I) sulfadiazine (16 µg/ml). The authors postulated that the activities are due to the ability of HB(3,5-(CF₃)₂pz)₃ to make bioavailability of silver ions optimal. This is probably true owing to the highly electron deficient nature of HB(3,5-(CF₃)₂pz)₃ brought about by the presence of CF₃ groups; which in turn creates a highly electrophilic silver complex, hence silver remaining in an optimal ion state for microbial activity.



Another area of medicinal application for pyrazole and pyrazolyl compounds is as antiparasitics. Budakoti et al. (2007) reported a series of pyrazolyl palladium(II) complexes that exhibit antiamoebic activity. It is believed that amoeba infection comes third in the ranking of parasitic infections, thereby posing a great danger to the human populace. It is against this backdrop that new antiparasitic therapies are sought after. In their study Budakoti et al. (2007) described the syntheses of palladium compounds based on a series of 1-*N* substituted thiocarbonyl-3,5-diphenyl-2-pyrazolines, of which five (**54–58**) had good activities. Coordination of the ligands to palladium(II) ion led to improved efficacy, with IC₅₀ values of 0.05, 0.4, 0.7, 1.24 and 1.82 µM for **54–58**, respectively compared to the corresponding ligands (IC₅₀ = 0.38, 1.6, 2.8, 11 and 10.7 µM). Notably, the palladium precursor used,

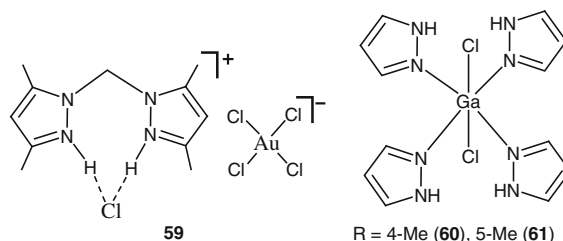
[PdCl₂(dmsO)₂], had low activity (8.15 μM); pointing to the synergistic effect of the pyrazolyl ligands and palladium in complexes **54–58**.



Antiviral agents

Whereas there are several examples of pyrazole-derived organic compounds reported to have anti-viral action, as exemplified by a number of registered patents and research papers (Carabateas and Diana 1980; Pancic et al. 1981; Ding et al. 1989; Manfredini et al. 1992; La Colla et al. 1996; Shen et al. 2004b; Bravi et al. 2005; Shipps Jr et al. 2006a; Shipps Jr et al. 2006b; Ouyang et al. 2008; Li et al. 2010, 2011; Shih et al. 2010; Wu et al. 2011), there are few examples of their pyrazolyl metallo-antivirals. One of the few known metallo-antivirals is tetra-chloro-bis(3,5-dimethylpyrazolyl)methanegold(III) chloride, [3,5-Me₂bpzaH₂][AuCl₄]Cl, (**59**) reported by us (Fonteh et al. 2009). Compound **59** showed activity against HIV-1 reverse transcriptase (RT) and protease (PR). This compound is a salt containing a doubly protonated pyrazolyl unit, [3,5-Me₂bpzaH₂], with AuCl₄[−] and Cl[−] as the counterions. What is remarkable about this complex is that it inhibits both RT and PR enzymes at concentration between 5 and 250 μM, and was non-toxic to normal cells at its inhibitory concentrations (Fonteh et al. 2009). Given that PR and RT are both targets for anti-HIV regimens, the ability of this compound to target both indicated dual

functionality. Furthermore, the fact that HAuCl₄·4H₂O, used to prepare the gold complexes, was not active confirmed that the dual activity is because of the effect of the bis(pyrazolyl)methane on tetrachloroaurate.



Another metal that forms pyrazolyl metallodrugs is gallium. Gallium compounds, known in medicine for both diagnostic and therapeutic properties, have also been investigated as antivirals. For example [GaCl₂(4-MepzH)₄][GaCl₄] (**60**) and [GaCl₂(5-MepzH)₄][GaCl₄] (**61**) (4-MepzH = 4-methylpyrazole, 5-MepzH = 5-methylpyrazole) are known to have anti-HIV activity (Kratz et al. 1992). These octahedral compounds were obtained by reacting chlorogallate salts with the respective pyrazoles. The anti-HIV analysis showed that compounds **60** and **61** had moderate activities, 108 and 231 μM, respectively on CEM cell line. However, their low therapeutic indices, 1.11 and 1.52 for **60** and **61**, respectively suggested poor selectivity compared to AZT, which has a therapeutic index of 1027 (Kratz et al. 1992).

Summary

The main objective of this perspective is to bring attention to pyrazole-based metal complexes and their potential in drug development and medicine in general. It is evident that pyrazole derivatives have been investigated for a number of ailments as highlighted in the first section of this review. This is not only due to the fact that pyrazole is similar to imidazole, a biologically relevant compound, but also that pyrazoles are relatively easy to synthesize and can be fine-tuned to achieve desired electronic and steric effects. Thus, pyrazole and pyrazolyl compounds are gaining attention, inter alia, as antiviral, anticancer and antimicrobial agents. However, the same cannot be said about pyrazole and pyrazolyl metal complexes and thus the need to pursue this further. Such efforts

could include isolating complexes of known therapeutic pyrazole and pyrazolyl ligands.

There is no doubt that investigation of pyrazole-based metal complexes for their therapeutic properties is in its infancy and will continue to grow. It would be interesting to see how this area of metallodrugs discovery will be like 10 years from now if continued attention is given to this group of compounds.

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