## SYNTHESIS OF REVERSED HYDROXAMIC ACIDS OF INDOMETHACIN: DUAL INHIBITORS OF CYCLOOXYGENASE AND 5-LIPOXYGENASE

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**Abstract:** Replacement of the carboxylic acid function of indomethacin with reversed hydroxamic acids converted this selective cyclooxygenase (CO) inhibitor into dual inhibitors of CO and 5-lipoxygenase (5-LO).

Prostaglandins and leukotrienes are potent mediators of inflammation<sup>1,2</sup> that are derived from arachidonic acid (AA) via the CO and 5-LO metabolic pathways respectively. Nonsteroidal antiinflammatory drugs (NSAIDs) inhibit the CO pathway.<sup>1,3</sup> The long-term use of NSAIDs often results in gastrointestinal ulcerations. Although the mechanism by which these side effects arise is not fully understood, decreased production of antisecretory and cytoprotective prostaglandins and increased production of pro-inflammatory leukotrienes have been implicated.<sup>4</sup> Dual inhibitors of CO and 5-LO are predicted to exhibit a profile featuring improved efficacy and reduced gastrointestinal side effects.<sup>5</sup> This paper describes the conversion of the NSAID indomethacin la into dual inhibitors of CO and 5-LO by incorporating 5-LO inhibiting pharmacophores into its structure.

la: X = OH = indomethacin lb: X = NHOH = hydroxamic acid

 $R = H, CH_3$ X = O, S

Y = CH3, NH2, NHCH3

Stimulated by Corey's<sup>6</sup> initial account that the hydroxamic acid analog of AA is a potent selective 5-LO inhibitor, our laboratories converted various NSAIDs to their corresponding hydroxamic acids.<sup>7</sup> This work revealed that via this transformation, indomethacin **la** could be converted to a dual inhibitor. However, it was clearly demonstrated that hydroxamic acids of this structural type are readily and completely metabolized to the parent carboxylic acid<sup>8</sup>.

- a) DMF, POCl<sub>3</sub>, 95% b) (1) NaH, DMF (2) 4-chlorobenzoyl chloride, 82% c) H<sub>2</sub>NOH-HCl, NaOAc, THF, 68%
- d) 4 eq NaCNBH3, AcOH e) AcCl, NaOAc, dioxane/H2O, 47% f) NaOCN, 1N HCl, dioxane/H2O, 53%
- g) CH<sub>3</sub>NCS, dioxane/H<sub>2</sub>O, 54% from 4

The reversal of the hydroxamic acid moiety in various selective 5-LO inhibitors was shown to greatly reduce the metabolic degradation while maintaining potent 5-LO inhibitory activity. 
Metabolic stability was further enhanced by the substitution of a methyl group on the carbon adjacent to the hydroxamic acid nitrogen. 
In light of these observation, it was our goal to prepare a variety of metabolically stable reversed hydroxamates of indomethacin (structure II) and determine their potencies as dual inhibitors.

The route used to prepare reversed hydroxamates 6, 7, and 8 is shown in Scheme I. 5-Methoxy-2-methylindole 1 was formylated under Vilsmeier-Haack<sup>11</sup> conditions. Benzoylation<sup>12</sup> of the indole nitrogen of 2 afforded compound 3. The base-labile benzoyl group tolerated the mild oximation conditions to give 4. Reduction of the aldoxime with sodium cyanoborohydride in acetic acid<sup>13</sup> provided the key intermediate hydroxylamine 5. Acylation of 5 with acetyl chloride, sodium cyanate, and methyl isothiocyanate gave the desired reversed hydroxamates 6, 7, and 8.

a) dimethylacetamide, POCl $_3$ , 65% b) H2NOTHP, pyr-HCl, pyridine, 92% c) (1) NaH, DMF (2) 4-chlorobenzoyl chloride, 79% d) conc. HCl, MeOH, 70% e) (1) NaH, DMF (2) 4-chlorobenzoyl chloride, 85% f) BH $_3$ /THF, 85% g) CH $_3$ Ti(OiPr) $_3$ , THF, 90% h) (1) 0.33 eq PB $_5$ , CH $_2$ Cl $_2$  (2) excess THPONH $_2$ , 78% i) AcCl, pyridine, CH $_2$ Cl $_2$  j) conc. HCl, EtOH, 58% from 14

Initial attempts to synthesize the  $\alpha$ -methyl analogs 16, 18, and 19 were problematic. As shown in Scheme II, 1 was acylated under Vilsmeier-Haack<sup>14</sup> conditions to provide 9. While the ketoxime 10 was readily prepared from 9, reduction of 10 did not proceed to our satisfaction. Therefore, a new route was designed utilizing 13 as the key intermediate. Compound 13 was prepared by either of two methods. Methylation of 3 using CH<sub>3</sub>Ti(OiPr)<sub>3</sub>15 gave 13 in 90% yield. Alternatively, 9 was benzoylated<sup>12</sup> to give 12. The ketone 12 was reduced to 13 using BH<sub>3</sub>/THF.

## Scheme III

a) (1) TMSBr, CH $_2$ Cl $_2$  (2) t-BDPSiONH $_2$ , b) aq 48% HF, CH $_3$ CN, 77% from 13 c) NaOCN, 1N HCl, THF/H $_2$ O, 44% d) CH $_3$ NCS, THF, 82%

A cold solution of **13** was converted to the unstable bromide using PBr<sub>3</sub>, and a large excess of tetrahydropyranyl hydroxylamine <sup>16</sup> was added to provide **14**. Acylation of **14** with acetyl chloride and deprotection afforded **16**.

In analogy to the sequence depicted in Scheme I, acylation of 14 with sodium cyanate gave the desired product. It was not possible to cleanly remove the tetrahydropyranyl (THP) group from this acylated derivative. We also could not obtain 11 via deprotection of 14. To circumvent this obstacle we replaced the THP group with the *t*-butyldiphenylsilyl (*t*-BDPSi) protecting group. As shown in Scheme III, 13 was treated sequentially with bromotrimethylsilane followed by O-*t*-butyldiphenylsilyl hydroxylamine 17 (2 equiv.). The crude mixture was treated with aqueous 48% HF to provide 11. The hydroxylamine was acylated with sodium cyanate and methyl isothiocyanate converting 11 to 18 and 19 respectively.

The reversed hydroxamates were evaluated for inhibition of CO (ARBC) and 5-LO (ARBL) in calcium-stimulated rat basophilic leukemia cells (RBL-1).7 The results shown in Table I indicate that the carboxylic acid group of indomethacin can be replaced by reversed hydroxamates to give potent dual inhibitors of CO and 5-LO.

Table I

Compound No.	B	X	Y	ARBL*	ARBC*
la "				>100	0.50
lb				7.5	1.1
6	Н	0	CH₃	1.4	15
7	Н	0	NH <sub>2</sub>	0.34	>20
8	Н	S	NHCH <sub>3</sub>	0.40	7.1
16	CH <sub>3</sub>	0	СН3	0.83	2.4
18	CH <sub>3</sub>	0	$NH_2$	1.4	0.89
19	CH <sub>3</sub>	S	NHCH <sub>3</sub>	0.57	7.0

<sup>\*</sup>IC50 (µM) from regression analysis of percent inhibition vs. inhibitor concentration

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## References and Notes:

- 1 Review of nonsteroidal antiinflammatory drugs: Lombardino, J.G. Nonsteroidal Antiinflammatory Drugs; Wiley-Interscience, John Wiley & Sons: New York, 1985.
- 2 Samuelsson, B. *Prog. Lipid Res.* 1986, 25, 13.
- 3 Vane, J. R. Nature New Biology 1971, 231, 232.
- a) Schoen, R.T.; Vender, R.J. Am. J. Med. 1989, 86, 449.
  b) Wallace, J.L.; Granger, D.N. TIPS
  1992, 13, 129.
  c) Vaananen, P.M.; Keenan, C.M.; Grisham, M.B.; Wallace, J.L. Inflammation 1992,
  16, 227.
  d) Konturek, S.J.; Brzozowski, T.; Drozdowicz, D.; Beck, G. Dig. Dis. Sci. 1988, 33, 806.
- 5 Review of dual inhibitors: Carty, T.J.; Marfat, A.; Masamune, H. *Annual Reports in Med. Chem.* 1988, 23, 181.
- 6 Corey, E.J.; Cashman, J.R.; Kantner, S.S.; Wright, S.W. J. Am. Chem. Soc. 1984, 106, 1503.

- 7 Flynn, D.L.; Capiris, T.; Cetenko, W.J.; Connor, D.T.; Dyer, R.D.; Kostlan, C.R.; Nies, D.E.; Schrier, D.J.; Sircar, J.C. *J. Med. Chem.* **1990**, *33*, 2070.
- a) Summers, J.B.; Gunn, B.P.; Mazdiyasni, H.; Goetze, A.M.; Young, P.R.; Bouska, J.B.; Dyer, R.D.; Brooks, D.W.; Carter, G.W. J. Med. Chem. 1987, 30, 2121. b) Summers, J.B.; Mazdiyasni, H.; Holms, J.H.; Ratajczyk, J.D.; Dyer, R.D.; Carter, G.W. J. Med. Chem. 1987, 30, 574.
- a) Summers, J.B.; Gunn, B.P.; Martin, J.G.; Mazdiyasni, H.; Stewart, A.O.; Young, P.R.; Goetze, A.M.;
  Bouska, J.B.; Dyer, R.D.; Brooks, D.W.; Carter, G.W. J. Med. Chem. 1988, 31, 3. b) Summers, J.B.;
  Gunn, B.P.; Martin, J.G.; Martin, M.B.; Mazdiyasni, H.; Stewart, A.O.; Young, P.R.; Bouska, J.B.;
  Goetze, A.M.; Dyer, R.D.; Brooks, D.W.; Carter, G.W. J. Med. Chem. 1988, 31, 1960.
- Salmon, J.A.; Jackson, W.P.; Garland, L.G. *Therapeutic Approaches to Inflammatory Diseases*; Lewis, A.J.; Doherty, N.S.; Ackerman, N.R., Ed.; Elsevier Science: Amsterdam, 1989; p. 137.
- James, P.N.; Snyder, H.R. Organic Syntheses; Rabjohn, N., Ed.; John Wiley & Sons, Inc.: New York, 1963; Coll Vol 4, p. 539.
- 12 Itahara, T. Synthesis 1979, 151.
- 13 Jackson, W.P.; Islip, P.J.; Kneen, G.; Pugh, A.; Wates, P.J. J. Med. Chem. 1988, 31, 499.
- 14 Buchmann, G.; Rossner, D. J. Prakt, Chem. 1964, 117.
- Preparation of (iPrO)<sub>3</sub>TiCI: Holloway, H. *Chem. and Ind.* **1962**, 214. The preparation and utilization of (iPrO)<sub>3</sub>TiCH<sub>3</sub> is a modification of Weidmann, B.; Seebach, D. *Helv. Chim. Acta* **1980**, *63*, 2451.
- Warrener, R.N.; Cain, E.N. Angew. Chem., Int. Ed. Engl. 1966, 5, 511.
   10-15 equiv. of tetrahydropyranyl hydroxylamine were necessary to avoid dialkylation.
- 17 Stewart, A.O.; Martin, J.G. J. Org. Chem. 1989, 54, 1221.