



# Structure–Activity Relationship Investigations of a Potent and Selective Benzodiazepine Oxytocin Antagonist

Paul G. Wyatt,<sup>a,\*</sup> Michael J. Allen,<sup>b</sup> Josie Chilcott,<sup>c</sup> Gwen Hickin,<sup>a</sup> Neil D. Miller<sup>a</sup> and Patrick M. Woollard<sup>c</sup>

 aDepartment of Medicinal Chemistry, GlaxoSmithKline, Medicines Research Centre, Gunnels Wood Road, Stevenage, Herts SG1 2NY, UK
bDepartment of Receptor Pharmacology, GlaxoSmithKline, Medicines Research Centre, Gunnels Wood Road, Stevenage, Herts SG1 2NY, UK
cDepartment of Research Biometabolism, GlaxoSmithKline, Medicines Research Centre, Gunnels Wood Road, Stevenage, Herts SG1 2NY, UK

Received 25 January 2001; revised 9 March 2001; accepted 16 March 2001

**Abstract**—We have investigated the structure–activity relationships of the 1- and 3-substituents and replacements of the 5-phenyl group of GW405212X 1, a potent selective oxytocin antagonist. The effect of these modifications on oxytocin binding antagonism and on pharmacokinetic parameters is reported. © 2001 Elsevier Science Ltd. All rights reserved.

## Introduction

Preterm birth, between 24 and 36 weeks of gestation, affects approximately 10% of all births in the USA and is the main cause of infant morbidity and mortality. Fetal survival rates increase from 15% at 24 weeks gestation to 95% at 32 weeks gestation, so clearly, delaying premature labour could dramatically reduce mortality, morbidity and healthcare costs. At present, there is no satisfactory treatment to prevent premature labour, as lack of efficacy and maternal or neonatal side effects limit the usefulness of the currently used drugs. 2

Oxytocin (OT), a potent contractor of the human uterus, plays an important role in the onset of labour and preterm labour.<sup>3–5</sup> Therefore, the development of orally active OT antagonists should provide a novel

therapy for preterm labour with few side effects. Atosiban, a peptide OT antagonist, shows therapeutic promise, but is not suitable for maintenance of gestation, as it is not orally active.<sup>6</sup> A number of non-peptide OT antagonists have been reported, but none have undergone extensive clinical evaluation.<sup>7</sup>

GW405212X 1 synthesised as part of a Fully Encoded Differential Release Library was active in an OT receptor scintillation proximity assay.<sup>8</sup> Further studies demonstrated 1 to be a potent and selective OT antagonist.<sup>9</sup> However, 1 is not a drug candidate because of its poor pharmacokinetic profile.<sup>9</sup> We have investigated the SAR of the 1- and 3-substituents of 1 (structures 2 and 3) and replacements of the 5-phenyl group (not shown). Using the results from these studies, we reinvestigated the 1-substituent, structure 4. This paper

0960-894X/01/\$ - see front matter © 2001 Elsevier Science Ltd. All rights reserved. P11:  $S\,09\,60-8\,9\,4\,X(0\,1)\,0\,0\,2\,0\,2-5$ 

<sup>\*</sup>Corresponding author. Tel.: +44-1438-764232; fax: +44-1438-763624; e-mail: pw29967@gsk.com

reports the effect of these modifications on OT binding antagonism and on pharmacokinetic parameters.

## Modification of the 1-Substituent

A library of compounds was made to investigate the structure–activity relationship around the 3,4-dichlorobenzyl moiety of 1 using solid-phase FMOC chemistry outlined in Scheme 1.<sup>13</sup> Initial results demonstrated the need for a substituted phenylalanine in the 1-position of 1. Replacement of the 3,4-dichloro-phenyl group of 1 with alkyl or cycloalkyl such as 2a gave compounds that were at least 100-fold less active than 1 (Table 1). Deletion of the chloro-groups (not shown) or replacement with fluorine 2b caused a loss of activity.

Investigations into whether the primary amide could be removed without significant loss of activity required a change in chemical strategy, as it was the point of attachment during the solid-phase synthesis of the initial libraries. To address this, a solution-phase library was made by individually coupling acid 7a (Scheme 1)

with 77 amines and the crude products were tested for OT antagonism at three 10-fold dilutions. Acid 7a was synthesised in good overall yield from benzodiazepine  $6.^{14}$  Some compounds (2c-k, Table 1) were remade and purified for  $pK_i$  determinations and pharmacokinetic investigations. Removal of the primary amide 2c and the 4-chlorine atom 2d gave a modest loss of activity, probably due to an increase in conformational flexibility rather than loss of receptor binding. The des-chloro analogue 2e was significantly less active than 2d as was the 2-chloro derivative 2f. Extending the ethyl chain of 2d to give 2g or attempting to constrain it (2h or 2i) caused a loss of activity. The naphthyl-derivatives 2f and 2k were as potent as 2d.

#### Modification of the 3-Substituent

Deletion of the 3-(5-oxo-hexanoamide) moiety 3,  $R_1 = H$  caused a substantial loss of activity (p $K_i$  5.7), so a series of solid-phase libraries was made from amine 5 (Scheme 1) to investigate amide, sulphonamide, and urea derivatives of amine 3,  $R_1 = NH_2$ . Some examples

**Scheme 1.** (a) *O*-(7-Azabenzotriazol-1-yl)-*N*, *N*, *N'*, *N'*-tetramethyluronium hexafluorophosphate (HATU), *i*Pr<sub>2</sub>EtN, DMF; (b) 20% piperidine, DMF; (c) RCO<sub>2</sub>H, HATU, *i*Pr<sub>2</sub>EtN, DMF or RCOCl, Et<sub>3</sub>N, CH<sub>2</sub>Cl<sub>2</sub>; (d) 95:5 TFA/H<sub>2</sub>O; (e) NaH, *t*-butyl bromoacetate, DMF, 88%; (f) H<sub>2</sub>, Pd/C, ethanol, 100%; (g) RCO<sub>2</sub>H, HATU, *i*Pr<sub>2</sub>EtN, DMF; (h) RCOCl, Et<sub>3</sub>N, CH<sub>2</sub>Cl<sub>2</sub>; (i) 1:1 TFA/DCM.

Table 1. Inhibition of the binding of OT with human OT receptor (hOT): comparison of 1 and 2a-ka

		-						
	R	pK <sub>i</sub> hOT		R	pK <sub>i</sub> hOT		R	pK <sub>i</sub> hOT
1	CI CONH <sub>2</sub>	8.1	2d	CI	7.7	2h		> 5.3
2a	CONH <sub>2</sub>	6.1	<b>2</b> e		6.5	2i	0-N	> 5.5
<b>2</b> b	F_CONH <sub>2</sub>	7.1	2f	Ç <sub>I</sub>	6.7	2j		7.8
2c	CI	7.6	<b>2</b> g	CI	7.0	2k		7.8

<sup>&</sup>lt;sup>a</sup>Displacement of <sup>3</sup>[H]oxytocin from hOT with the test compound.<sup>9</sup>

were resynthesised for accurate  $pK_i$  determination (Table 2). The acetamide 3a proved to be the most active of the amide derivatives. However, the morpholino-acetamide 3b was interesting as it lowered the log D and allowed the formation of salts to increase water solubility. A further library of amino-acetamides was made to investigate this finding, but no compounds of greater potency than 3a were found. The sulphonamide and the urea libraries failed to give significantly active compounds, as illustrated by the methanesulphonamide derivative 3c.

#### Modification of the 5-Substituent

Replacement of the 5-phenyl substituent of 1 with cyclohexyl (p $K_i$  7.5) gave a modest loss of activity. More radical modifications such as methyl (p $K_i$  6.7) or heteroaromatics, such as CH<sub>2</sub>N-imidazole (p $K_i$  6.1), resulted in a more significant reduction of activity. Therefore, the 5-phenyl moiety was retained for further studies.

# Further Investigation of the 1-Substituent

As the acetamide 3a was the best replacement of the 3-substituent of 1, template 4 was used to further investigate the structure—activity relationship of the 1-substituent. The epimer 4a of 3a was synthesised using the solid-phase chemistry outlined in Scheme 1 and it proved to be significantly less active than 3a. The

Table 2. Inhibition of the binding of OT with human OT receptor (hOT): comparison of 1 and  $3a-c^a$ 

	$R_1$	$pK_i$ hOT		$R_1$	$pK_i$ hOT
1	N O O	8.1	3b		7.4
3a	N CH <sub>3</sub>	7.6	3c	Nso <sub>2</sub> CH <sub>3</sub>	6.3

<sup>&</sup>lt;sup>a</sup>Displacement of [<sup>3</sup>H]oxytocin from hOT with the test compound.<sup>9</sup>

phenethyl derivatives 4b-4e were synthesised from acid 7b using the solution-phase chemistry outlined in Scheme 1. The substituted phenethyl derivatives 4b and 4c and naphthyl derivative 4d had potencies equal to the cumulative loss of activity associated with the sequential deletion of the primary amide and the hexanoate moieties. The tertiary amide 4e was over 10-fold less active than 4c, suggesting the compounds bind in the transamide conformation. As the conformation of the 3chlorophenyl group seemed crucial for potent activity, an increase in activity was sought by replacing the flexible N-ethyl-acetamide group with conformationally constrained heteroaromatic linkers. A library of oxadiazoles, synthesised by condensing acid 7b with 78 amidoximes 8 (Scheme 2), was tested without purification, but failed to give any compounds of interest. The oxadiazole 4f (Table 3) was synthesised as a pure compound to confirm the result. Similarly, the thiazoles prepared from the reaction of thioamide 10 (from nitrile  $9^{15}$ ) and a set of  $\alpha$ -bromoketones (Scheme 2) gave no compounds with significant activity (e.g., 4g).

# Pharmacokinetic Profile of Selected Compounds

A selection of compounds was dosed to dogs [intravenous (iv) and orall to investigate the effect of the modifications to 1 on the pharmacokinetic profile of the series (Table 4). Removal of the primary amide from 1 to give 2c and 2d resulted in a substantial decrease of plasma clearance leading to at least a doubling of the iv half-lives, but 2c still had low bioavailability. Replacement of the phenethyl group with a bulky amine to give **2h** resulted in a further dramatic reduction in plasma clearance, suggesting the secondary amide in the 1-substituent is the most metabolically vulnerable position in the molecule. Unfortunately this modification also abolished the activity of the compound. The half-life of the morpholino-acetamide **3b** was 5 times longer than **1**, mainly due a substantial increase in the volume of distribution. Truncation of the hexanoate chain of 2d to give acetamide 4c did not result in an improvement of the pharmacokinetic parameters, indicating that the 3-(5-oxo-hexanoamide)-substituent was not significantly metabolically vulnerable.

Scheme 2. (a) 1-Ethyl-3-(3'-dimethylaminopropyl)carbodiimide HCl, N-hydroxybenzotriazole, DMF; (b) 1,8-diazabicyclo[4.3.0]undec-7-ene, heat; (c) Ph<sub>2</sub>P(S)SH, iPrOH, reflux, 47%; (d) HBr, CH<sub>2</sub>Cl<sub>2</sub>, 64%; (e) AcCl, iPr<sub>2</sub>EtN, CH<sub>2</sub>Cl<sub>2</sub>, 100%; (f) RCOCH<sub>2</sub>Br, DMF, heat.

Table 3. Inhibition of the binding of OT with human OT receptor (hOT): comparison of 3a and 4a-ga

	R	pK <sub>i</sub> hOT		R	pK <sub>i</sub> hOT		R	pK <sub>i</sub> hOT
3a	CI CONH <sub>2</sub>	7.6	4c	CI	7.0	4f	N-0	6.1
4a	CI CONH <sub>2</sub>	6.1	4d	NH	7.0	<b>4</b> g	CI S	> 5.3
4b	CINH	7.0	<b>4</b> e	CI N-CH <sub>3</sub>	5.8			

<sup>&</sup>lt;sup>a</sup>Displacement of [<sup>3</sup>H]oxytocin from hOT with the test compound.<sup>9</sup>

**Table 4.** Dog pharmacokinetic profile of selected compounds<sup>a</sup>

	c log P	iv $t_{1/2}$ (h)	Clearance (mL/min/kg)	Vd (L/kg)	Bioavailability
1	4.1	0.4	62	0.6	> 20
2c	5.2	0.9	4	0.2	12
2d	4.6	1.4	3	0.3	
2h	4.4	8.8	0.3	0.2	
3b	4.9	1.9	33	2.8	
4c	5.0	0.5	6	0.4	

<sup>&</sup>lt;sup>a</sup>See ref 9 for methods.

## Conclusion

Although 1 has potent selective antagonist activity at human OT receptors, it is not a drug candidate because of its high molecular weight and poor pharmacokinetic parameters. Removal of the primary amide and a chlorine atom from the 3,4-dichloro-phenylalaninamide moiety of 1 to give 2d resulted in a slight drop in activity and significant improvement of the pharmacokinetic parameters. Replacement of the 3-(5-oxo-hexanoamide)-substituent of 1 gave at best a modest loss of activity, without giving a significant improvement of the pharmacokinetic parameters. Further modifications to the molecule gave some compounds with improved pharmacokinetic parameters, but invariably led to loss of activity. The problems encountered whilst trying to optimise 1 highlighted the difficulties commonly experienced when compounds of this size and complexity are used as leads. Our experience emphasises the need to design libraries of simple molecules with low molecular weight. Although this approach will in the main give less potent leads, it should be easier to optimise these molecules by increasing size and complexity, rather than to simplify larger molecules.

# References and Notes

- 1. Goldenberg, R. L.; Rouse, D. J. N. Engl. J. Med. 1998, 339, 313.
- 2. Higby, K.; Suiter, C. R. Drugs Safety 1999, 21, 35.

- 3. Kimura, T.; Takemura, M.; Nomura, S.; Nobunaga, T.; Kubota, Y.; Inoue, T.; Hashimoto, K.; Kumazawa, I.; Ito, Y.; Ohashi, K.; Koyama, M.; Azuma, C.; Kitamura, Y.; Saji, F. Endocrinology 1996, 137, 780.
- 4. Keelan, J. A.; Coleman, M.; Mitchell, M. D. Clin. Obstet. Gynecol. 1997, 40, 460.
- 5. Goodwin, T. M.; Zograbyan, A. Clin Perinatol. 1998, 25, 859.
- 6. Bossmar, T. J. Perinat. Med. 1998, 26, 458.
- 7. Pettibone, D. J.; Clineschmidt, B. V.; Guidotti, M. T.; Lis, M. T.; Reiss, D. R.; Woyden, C. J.; Bock, M. G.; Evans, B. E.; Freidinger, R. M.; Hobbs, D. W.; Veber, D. F.; Williams, P. D.; Chiu, S.-H.L.; Thompson, K. L.; Schorn, T. W.; Siegel, P. K. S.; Kaufman, M. J.; Cukierski, M. A.; Haluska, G. J.; Cook, M. J.; Novy, M. J. Drug Devel. Res. 1993, 30, 129. Bell, I. M.; Erb, J. M.; Freidinger, R. M.; Gallicchio, S. N.; Guare, J. P.; Guidotti, M. T.; Halpin, R. A.; Hobbs, D. W.; Homnick, C. F.; Kuo, M. S.; Lis, M. T.; Mathre, D. J.; Michelson, S. R.; Pawluczyk, J. M.; Pettibone, D. J.; Reiss, D. R.; Vickers, S.; Williams, P. D.; Woyden, C. J. J. Med. Chem. 1998, 41, 2146.
- 8. Evans, B.; Pipe, A. J.; Clark, E. A.; Banks, M. Bioorg. Med. Chem. Lett. 2001, 11, 1297.
- 9. Allen, M. J.; Chilcott, J.; Clark E. A.; Evans, B.; Gardner, C. J.; Giles, H.; Miller, N. D.; Perren, M. J.; Pipe, A. J.; Wilson, D. J.; Woollard, P. M.; Wyatt, P. G. Paper submitted for publication. The method for the binding assay in this paper is outlined below. The sequence of the human OT receptor has been published (GenBank Accession Number P30559). 10 Human oxytocin stable cell line was created using internal ribosome entry point transfection into the Chinese hamster ovary (CHO) cell line. 11 Cell lines were maintained in DMEM/ F12 medium (Gibco) containing 10% FCS (Gibco) and 125 μg/mL Geneticin (Sigma). Membranes of CHO cells were prepared by homogenisation in a Waring blender (3×10 s) in ice cold binding buffer (50 mM HEPES, pH 7.4, 10 mM

MgCl<sub>2</sub>) followed by centrifugation (500g, 5 min, 4°C). The pellet was discarded and the supernatant centrifuged (48,000g, 30 min, 4°C). The supernatant was discarded and the membrane pellet resuspended by trituration in ice cold binding buffer and stored at -70 °C at a protein concentration of 1–2 mg/mL. Radioligand binding was determined using scintillation proximity assay (Amersham, UK) in 96-well plates. Each well contained CHO membrane (10 µg protein), 1 mg wheatgerm agglutinin coated SPA beads, 1 nM [3H]oxytocin (130 Ci/mmol, Amersham UK, custom synthesis) in the presence of competing ligands. All reagents were prepared in binding buffer (50 mM HEPES, 10 mM MgCl<sub>2</sub>, pH to 7.4 with KOH) and the total assay volume was 200 µL/well. The plates were incubated for 2-4 h at room temperature before being read in a scintillation counter (Wallac Microbeta). A four parameter logistic fit was used to estimated IC<sub>50</sub> and Hill slope (by nonlinear least squares.  $K_i$  values were calculated using the Cheng-Prussof equation. <sup>12</sup> Oxytocin was obtained as the acetate salt (Sigma, UK).

- 10. Kimura, T.; Tanizawa, O.; Mori, K.; Brownstein, M. J.; Okayama, H. *Nature* **1992**, *356*, 526 [published erratum appears in *Nature* **1992**, *357*, 176].
- 11. Rees, S.; Coote, J.; Stables, J.; Goodson, S.; Harris, S.; Lee, M. G. *Biotechniques* **1996**, *20*, 102.
- 12. Cheng, Y.; Prusoff, W. H. Biochem. Pharmacol. 1973, 22, 3099.
- 13. Solid-phase chemistry was carried out on Tentagel amino High Load 160 micron beads supplied by Rapp Polymere, Rapp Polymere GmbH, Ernst-Simon-Str. 9, D 72072 Tübingen, Germany. (*R*,*S*)-FMOC-3-amino-*N*-1-carboxymethyl-2-oxo-5-phenyl-1,4-benzodiazepine was purchased from Neosystem Laboratoire, 7 Rue de Boulogne, 67100 Strasbourg, France.
- 14. Compound 6 (*R*,*S*)-2-oxo-5-phenyl-3-(phenylmethoxy-carbonylamino)-1,4-benzodiazepine was purchased from Neosystem Laboratoire, 7 Rue de Boulogne, 67100 Strasbourg, France.
- 15. Bock, M. G.; DiPardo, R. M.; Evans, B. E.; Rittle, K. E.; Whitter, W. L. J. Med. Chem. 1993, 36, 4276.