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Biphenylsulfonyl-thiophene-carboxamidine inhibitors of the complement component C1s

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Abstract—Complement activation has been implicated in disease states such as hereditary angioedema, ischemia-reperfusion injury, acute respiratory distress syndrome, and acute transplant rejection. Even though the complement cascade provides several protein targets for potential therapeutic intervention only two complement inhibitors have been approved so far for clinical use including anti-C5 antibodies for the treatment of paroxysmal nocturnal hemoglobinuria and purified C1-esterase inhibitor replacement therapy for the control of hereditary angioedema flares. In the present study, optimization of potency and physicochemical properties of a series of thiophene amidine-based C1s inhibitors with potential utility as intravenous agents for the inhibition of the classical pathway of complement is described.

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The complement cascade is a major component of the innate immune system in mammals and other vertebrate species. It plays a major role in the destruction of invading microorganisms and the clearance of immune complexes. However, unregulated complement activation leading to acute inflammation and tissue damage has been implicated in the pathology of many disease states.² Activation of the classical pathway has been implicated in humorally-mediated graft rejection,³ ischemia-reperfusion injury (IRI),⁴ hereditary angioedema (HAE),⁵ vascular leak syndrome,⁶ and acute respiratory distress syndrome (ARDS).7 C1-esterase inhibitor (C1-Inh) has been used for many years as a replacement therapy for patients with hereditary angioedema caused by a deficiency of C1-Inh.⁸ Although C1 esterase inhibitor has been the only complement inhibitor approved for clinical use, a humanized monoclonal antibody (eculizumab) against terminal complement protein C5 has recently been approved for the treatment of patients with paroxysmal nocturnal hemoglobinuria (PNH).9

Small-molecule complement inhibitors have yet to enter the marketplace. Compstatin, a synthetic 13 amino acid cyclic peptide that blocks all three known complement activation pathways, is currently undergoing clinical development for the treatment of age-related macular degeneration (ARMD).¹⁰ We have previously reported the discovery of a novel series of arylsulfonylthiophene-2-carboxamidine inhibitors¹¹ of the complement component C1s, a trypsin-like serine protease that is present as a proenzyme within the first component of complement in the classical pathway.¹² We have continued to optimize the potency and physicochemical properties of these compounds in order to identify a candidate compound suitable for dosing as an intravenous agent for the treatment of acute complement mediated diseases such as IRI and ARDS.

Our previous work identified compound 1, which has a K_i of 0.36 μ M for C1s.¹¹ Further substitution at the 3-position of the phenyl ring provided compound 3 with

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a K_i of 0.26 μ M. This observation led to more extensive exploration of the structure–activity relationship (SAR) at the 3-position of the phenyl ring. Molecular modeling studies using the published C1s structure^{13,14} suggested two possible binding modes for substituents originating from the 3-position of the phenyl ring A (Fig. 1). To further explore the SAR at this position, a small library of biaryl compounds was synthesized via parallel synthesis (Table 1). 15 Compound 1 was treated with tert-butyloxycarbonyl anhydride in THF to protect the amidine moiety. The protected amidine 2 (Scheme 1) was coupled to a series of aryl and heteroaryl boronic acids using Suzuki coupling conditions to give compounds 3-18.16 Compound 19 was prepared by treating compound 1 with 3-methyl-2-pyridylzinc bromide. Replacement of bromo with phenyl to give compound 3 provides only a marginal improvement in activity. Further substitution on compound 3 involving the introduction of small hydrophobic or hydrophilic groups at the 3-position (5, 8, 11) or the 4-position (6, 9, 12) of the distal aryl ring (ring B) did not have a significant effect on activity. However, addition of small hydrophobic groups at the 2-position of ring B generated compounds with significantly improved potency. For example, as shown in Table 1, when R¹ is 2-methyl (7) or 2-chloro (14) there is approximately 9- and 7-fold enhancement in activity, respectively, in comparison to compound 3.

Molecular modeling suggests a preference for binding conformations in which ring B is orthogonal to the proximal aryl ring (ring A), and this applies to both possible binding modes (Fig. 1). The improved potency observed with compounds 7 and 14 is likely due to both a conformational effect and enhanced binding contacts. Having a substituent at the *ortho* position of ring B (4, 7, 10, 13, and 14) can result in the biphenyl dihedral being closer to the predicted bound conformation than in the unsubstituted case, 3. In either of the plausible binding modes the *ortho* substituent could be directed toward the protein surface, or away from it and out toward solvent (Fig. 1). Modeling studies also suggested that a small hydrophobic residue at the 2-position can

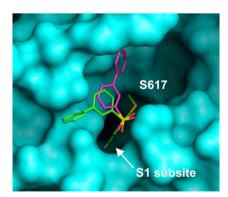


Figure 1. Binding models of **2** in the active site of C1s. These models are derived from the crystal structure of an analog of **2** bound to a C1s homolog (unpublished results), which shows that the thiophene amidine occupies the S1 subsite. The C1s crystal structure ¹⁴ is depicted with a Connolly surface ¹⁹ (cyan) and the two binding models with green and magenta carbons, respectively. The figure was prepared with PyMOL. ²⁰

Table 1. SAR from Suzuki coupling library

Compound	Z	\mathbb{R}^1	\mathbb{R}^2	K _i ^a (nM)
3	С	Н	Н	260
4	C	2-OCH_3	H	610
5	C	3-OCH ₃	H	490
6	C	4-OCH ₃	H	350
7	C	$2-CH_3$	Н	30
8	C	3-CH ₃	H	1850
9	C	$4-CH_3$	H	250
10	C	2-OH	Н	460
11	C	3-OH	H	150
12	C	4-OH	Н	190
13	C	2-CH ₂ OH	H	120
14	C	2-C1	Н	40
15	C	2-CHCH ₂	H	140
16	C	2-CH ₃	6-CH ₂ OH	50
17	C	2-CH ₃	6-CO ₂ H	150
18	C	$2-CH_3$	NH_2	20
19	N	2-CH ₃	_	40

^a K_i values were determined as described in Ref. 11. Between-run coefficient of variation was <24%.</p>

Scheme 1. Reagents and conditions: (a) R³B(OH)₂, Pd(PPh₃)₄, 2 M Na₂CO₃, EtOH, toluene, 80 °C, 12 h or R³ZnBr, Pd(PPh₃)₄, THF, 80 °C, 1 h; (b) 50% TFA/DCM.

make a favorable interaction with the protein surface and this is consistent with the improved potency observed with compounds 7 and 14, compared to the unsubstituted compound 3. However, larger hydrophobic residues would make this an unfavorable binding conformation due to steric-clash with the protein surface. Introducing larger hydrophobic residues (4 and 15) or hydrophilic residues (10 and 13) at this position has little effect on activity, fully consistent with a binding mode in which these substituents can be directed toward the solvent.

Compounds 3–15 did not have sufficient aqueous solubility at physiological pH to be evaluated as potential intravenous agents. To mitigate the poor aqueous solubility of compound 7, the most potent in the series, a pyridyl ring was introduced instead of the phenyl ring to give compound 19. While compound 19 had the required solubility properties, it had poor pharmacokinetic properties, a poor in vitro safety profile, ¹⁷ and potent hERG K channel blocking in the patch-clamp assay¹⁸ (Table 2). In an alternative approach, 7 was further substituted with hydrophilic residues at the

Table 2. Amine substituted derivatives of compound 18: potency, solubility, and in vitro safety

Compound	R ⁵	Z	K_{i}^{a} (nM)	Aqueous solubility (μM)	Activity in SEP (% inhibition at 10 μ M) ^b	Inhibition of hERG (% inhibition at 10 μM) ¹⁸
19	Н	N	45	22	A = 69; B = 74; C = 95; D = 76; E = 83	66.0
30	*-N +OH	C	42	40	A = 2; $B = 1$; $C = 9$; $D = 11$; $E = 17$	0.5
31	*-N H O O O O	C	22	39	A = 0; $B = 15$; $C = 0$; $D = 26$; $E = 5$	5.8
32	$\begin{array}{c} H \\ \star - N \\ O \end{array} \begin{array}{c} H \\ N \\ 2 \\ N \end{array} \begin{array}{c} N = N \\ N \\ N \end{array}$		64	_	A = 7; $B = 5$; $C = 9$; $D = 21$; $E = 11$	1.0
33	*-N	C	12	43	A = 23; $B = 47$; $C = 31$; $D = 51$; $E = 73$	0.9
34	*-N 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	C	14	35	A = 9; $B = 28$; $C = 40$; $D = 54$; $E = 53$	18.0

NovaScreen uses a criteria of 50% inhibition or greater to qualify a compound as active. A = adrenergic, alpha 1, non-selective; B = dopamine transporter; C = muscarinic, non-selective, peripheral; D = opiate, non-selective; E = sodium, site 2.

6-position of the phenyl ring B. Since the 6-position appeared to be solvent-exposed this was a reasonable strategy to follow. While introduction of 6-hydroxymethyl (16) and 6-carboxy (17) groups reduced potency 2- and 6-fold, respectively, 6-amino (18) substitution did not change potency. The 6-amino group was further substituted with a series of hydrophilic groups (Table 2) with the hope of improving solubility as well as the pharmacologic side-effect profile.

The *tert*-butyloxycarbonyl-protected scaffold, **20** was synthesized according to Scheme 1 and functionalized according to Scheme 2 to give compounds **30–34**. ¹⁵ Compound **20** was treated with 5-chlorocarbonyl-pentanoic acid methyl ester in the presence of base to give the ester **21**. The ester **21** was hydrolyzed to give the acid **26** which was deprotected with 50% TFA in DCM to give the final amidine **30**. Compound **20** was treated with 6-isocyanato-hexanoic acid ethyl ester in the presence

Scheme 2. Reagents and conditions: (a) MeO₂C(CH₂)₄COCl, DIEA; (b) EtO₂C(CH₂)₅NCO, TEA, DCM, 3 h; (c) i—*p*-nitrophenyl chloroformate, pyridine, DCM, 4 h; ii—NC(CH₂)₃NH₂, DCM, 48 h; (d) BrCH₂COBr, DIEA, CHCl₃; (e) CH₃(O)₂S(CH₂)₃COCl, DIEA; (f) LiOH, 60 °C, 12 h; (g) 1 N NaOH, 2 h; (h) (CH₃)₃SiN₃, dibutyltin oxide, toluene, 70 °C, 16 h, 80 °C 4 h; (i) CH₃SO₂Na, EtOH, 16 h.

of base to give 22. The ester 22 was hydrolyzed to the acid 27, which was deprotected with TFA to give targeted compound 31. Compound 20 was treated with 4-nitrophenyl chloroformate and pyridine to give the 4-nitrophenyl carbamate which was reacted with 3-aminopropionitrile to give the urea 23. Compound 23 was treated with azidotrimethylsilane and dibutyltin oxide to give the tetrazole 28, which was converted to the amidine 32 with TFA. Compound 20 was reacted with bromoacetylbromide to give the amide 24, which was treated with sodium methanesulfinate to give the sulfone 29. The sulfone 29 was deprotected with TFA to give the amidine 33. Compound 20 was treated with 4-methanesulfonyl-butyrylchloride to give the sulfone 25, which was converted to the amidine 34 with TFA.

Incorporating either the carboxylic acid or the sulfone moiety (30, 31, 33, and 34) provided compounds with acceptable aqueous solubility. Compound 19 was tested in a 'side-effect' profile panel of 54 target assays from NovaScreen. The compound showed significant activity at 5 receptor targets (Table 2). In contrast, compounds 30, 31, and 32 proved to be completely inactive in these assays. Incorporating sulfone moieties provided compounds that had some activity in 2 out of 54 assays. Compounds 30–33 were completely devoid of any hERG activity, while compound 34 had weak potency.

Compounds 19, 31, and 34 were dosed intravenously in rat pharmacokinetic studies and proved to have very high clearances (2- to 4-fold rat hepatic blood flow) and short half-lives (Table 3).

In summary, we have discovered a novel series of potent and selective C1s inhibitors. These are among the most potent compounds reported to date. More lipophilic compounds in this series such as 19 exhibit significant hERG channel binding activity while more hydrophilic

^a K_i values were determined as described in Ref. 11. Between-run coefficient of variation was <24%.

^b Compounds were tested in the NovaScreen General Side Effect Profile (SEP). ¹⁷

Table 3. Rat pharmacokinetic properties for selected compounds^a

Compound	$T_{1/2}$ (h)	$V_{\rm d}$ (L/kg)	Cl (mL/min/kg)
19	2.0	15	283.0
31	0.2	2.65	228.5
34	1.8	2.03	129.6

^a Three animals were used for each dosing group. The rats were dosed 2 mg/kg intravenous.

compounds such as 30 are devoid of significant hERG activity. Incorporating hydrophilic residues also improved selectivity against the NovaScreen SEP panel. However, these compounds have poor in vivo pharmacokinetic properties. Further structural modifications to improve in vivo pharmacokinetic properties are in progress.

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