ELSEVIER

Contents lists available at ScienceDirect

Bioorganic & Medicinal Chemistry Letters

journal homepage: www.elsevier.com/locate/bmcl



Modification at the acidic domain of RXR agonists has little effect on permissive RXR-heterodimer activation

Shuji Fujii ^a, Fuminori Ohsawa ^{a,b}, Shoya Yamada ^a, Ryosuke Shinozaki ^a, Ryosuke Fukai ^a, Makoto Makishima ^c, Shuichi Enomoto ^{a,b}, Akihiro Tai ^d, Hiroki Kakuta ^{a,*}

- ^a Division of Pharmaceutical Sciences, Okayama University, Graduate School of Medicine, Dentistry and Pharmaceutical Sciences, 1-1-1, Tsushima-Naka, Okayama 700-8530, Japan
- b Multiple Molecular Imaging Research Laboratory, RIKEN Center for Molecular Imaging Science, Minatojima-minamimachi 6-7-3, Chuo-ku, Kobe, Hyogo 650-0047, Japan
- CDivision of Biochemistry, Department of Biomedical Sciences, Nihon University School of Medicine, Itabashi-ku, Tokyo 173-8610, Japan

ARTICLE INFO

Article history: Received 23 May 2010 Revised 25 June 2010 Accepted 6 July 2010 Available online 8 July 2010

Keywords:
RXR agonists
Permissive heterodimers
PPAR
LXR
Carboxylic analogues
Docking simulation

ABSTRACT

Retinoid X receptors (RXRs) function as homo- or heterodimers with other nuclear receptors, such as peroxisome proliferator-activated receptors (PPARs), which are targets for treatment of hyperlipidemia and type 2 diabetes, or liver X receptors (LXRs), which are involved in glucose/lipid metabolism. PPAR/RXR or LXR/RXR are known as permissive RXR-heterodimers because they are activated by RXR agonists alone. Interestingly, the pattern of RXR-heterodimer activation is different depending on the RXR agonist structure, but the structure-activity relationship has not been reported. Here we show that modification or replacement of the carboxyl group in the acidic domain of RXR agonists has little or no effect on permissive RXR-heterodimer activation. Phosphonic acid (9), tetrazole (10), and hydroxamic acid (12) analogues were synthesized from the common bromo intermediate 7. Except for 9, these compounds showed RXR full-agonistic activities in the concentration range of 1–10 μ M. The order of agonistic activity toward both PPAR γ /RXR α and LXR α /RXR α was the same as it was for RXR, that is, 11 > 10 > 12. These results should be useful for the development of RXR agonists with improved bioavailability.

© 2010 Elsevier Ltd. All rights reserved.

Retinoid X receptors (RXRs)^{1,2} function as transcription factors either alone or as heterodimers with receptors such as PPARγ (the molecular target of thiazolidinediones, which are clinically used to treat insulin resistance),³ and liver X receptors (LXRs; involved in glucose/lipid metabolism).^{4,5} PPAR/RXR and LXR/RXR are activated by PPAR and LXR agonists, respectively, but the agonistic potency can be synergistically activated by RXR agonists.⁶ Interestingly, RXR agonists alone can also activate these heterodimers (permissive heterodimers).⁷ Focusing on this permissive mechanism, RXR agonists are expected to show comprehensive therapeutic efficacy against insulin resistance or impaired glucose metabolism in type 2 diabetes by modulating various RXR heterodimers, such as PPAR/RXR and LXR/RXR. Thus, RXR agonists, including LGD1069 (1) (Targretin®) (Fig. 1),⁸⁻¹⁰ which is used in the USA to treat cutaneous T-cell lymphoma, are candidates for the treatment of complex disorders such as metabolic syndrome.¹¹

However, RXR agonists often cause side effects, such as weight gain, plasma triglyceride elevation, and hypothyroidism. ^{12–14} Among them, triglyceride elevation is reported to be based on the transactivation of SREBP-1c by LXR/RXR. ¹⁵ It is important to note that the RXR agonists HX630 (2) and PA024 (3) (Fig. 1) show

different patterns of activation of PPAR/RXR and LXR/RXR.¹⁶ Therefore, we hypothesized that appropriate structural modification of RXRs would eliminate the side effects. In addition, most RXR agonists are lipophilic molecules, and their absorption, distribution, metabolism, and excretion (ADME) characteristics are not optimal. But, structural modification at the carboxylic moiety might alter the pattern of permissive RXR-heterodimer activation.

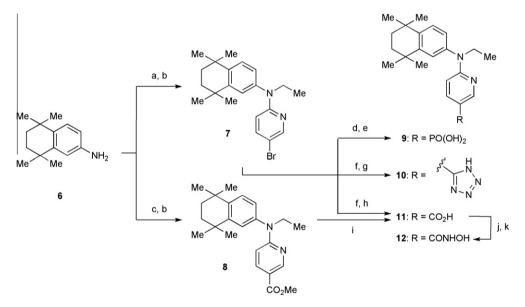
Structural modifications at the carboxylic moiety of RAR agonists have been reported. ^{17,18} However, no structure–activity relationship (SAR) study of RXR agonists for activity toward permissive heterodimers has been reported. RXR agonists generally consist of a lipophilic domain, such as a 5,5,8,8-tetramethyl-5,6,7,8-tetrahydronaphthyl moiety, an acidic domain, such as benzoic acid or nicotinic acid, and a linking domain. Although there have been SAR studies on the linking domain (2 and 3) and on the lipophilic domain (NEt-3IP, 4a) (Fig. 1), ¹⁹ modification of the acidic domain has been limited to TZ335 (5) (Fig. 1), which has a thiazolidinedione acidic group. ²⁰ Thus, modification of the acidic domain in RXR agonists seemed worthy of investigation.

Therefore, we synthesized RXR agonists possessing tetrazole, hydroxamic acid, and phosphonic acid at the acidic domain from a common bromo intermediate, and evaluated their RXR agonistic activity and pattern of RXR-heterodimer activation activities toward PPAR γ /RXR and LXR α /RXR.

^d Faculty of Life and Environmental Sciences, Prefectural University of Hiroshima, 562 Nanatsuka, Shobara, Hiroshima 727-0023, Japan

^{*} Corresponding author. Tel./fax: +81 (0)86 251 7963. E-mail address: kakuta@pharm.okayama-u.ac.jp (H. Kakuta).

Figure 1. Chemical structures of known RXR agonists.



Scheme 1. Reagents and conditions: (a) 2,5-dibromopyridine, *p*-TsOH, KI, dioxane, reflux, 60%; (b) EtI, NaH, DMF, 0 °C, q.y; (c) methyl 6-chloronicotinate, *p*-TsOH, dioxane, reflux, 80%; (d) diethyl phosphite, Pd(PPh₃)₄, Cs₂CO₃, THF, microwave irradiation (140 °C), 61%; (e) Me₃SiBr, CH₂Cl₂, rt 76%; (f) CuCN, DMF, reflux, 88%; (g) NaN₃, NH₄Cl, DMF, reflux, 43%; (h) NaOH aq, EtOH, reflux, 92%; (i) NaOH aq, MeOH, THF, 60 °C, 98%; (j) *O*-benzylhydroxylamine, HOBt, EDC, TEA, DMF, rt 82%; (k) H₂, 10% Pd-C, EtOAc, rt 76%.

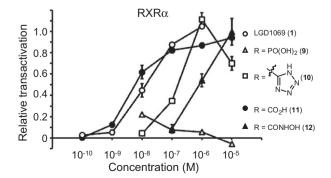


Figure 2. Transactivation dose-response curves of $\mathbf{1}(\bigcirc)$, $\mathbf{9}(\triangle)$, $\mathbf{10}(\square)$, $\mathbf{11}(\bullet)$, and $\mathbf{12}(\blacktriangle)$ against RXR α in COS-1 cells. The vertical scale is normalized with respect to 1 μ M $\mathbf{1}$, taken as 1.0. The assays were carried out in triplicate at least three times.

As shown in Scheme 1, after coupling reaction of 5,5,8,8-tetramethyl-5,6,7,8-tetrahydronaphthylamine ($\mathbf{6}$)²¹ and 2,5-dibromopyridine or methyl 6-chloronicotinate in the presence of a catalytic amount of p-toluenesulfonic acid, N-ethylation of the linking nitrogen was performed to afford the common intermediates $\mathbf{7}$ and $\mathbf{8}$. Compound $\mathbf{7}$ was reacted with diethyl phosphite in the presence of a palladium catalyst and cesium carbonate in THF under microwave irradiation at $140\,^{\circ}\mathrm{C}$, 22 and then deprotection of the esters with trimethylsilyl bromide in methylene chloride gave the phosphonic derivative $\mathbf{9}$. The bromo atom of $\mathbf{7}$ was substituted to a cyano group by coupling reaction of intermediate $\mathbf{7}$ and copper cyanide in DMF, 24 and then [3+2] cycloaddition reaction was performed with sodium azide to give tetrazolyl derivative $\mathbf{10}$. Carboxy derivative $\mathbf{11}$ was synthesized by hydrolysis of the cyanide derivative or ester $\mathbf{8}$. Hydroxamic acid $\mathbf{12}$ was

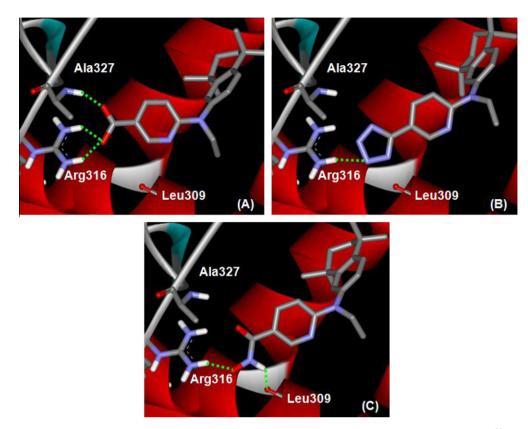


Figure 3. Proposed structures of RXR agonists 11 (A), 10 (B), and 12 (C) bound to the RXR α LBD (pdb code: 1mvc), calculated with AutoDock 4.0.²⁹ Green broken lines indicate hydrogen bonds.

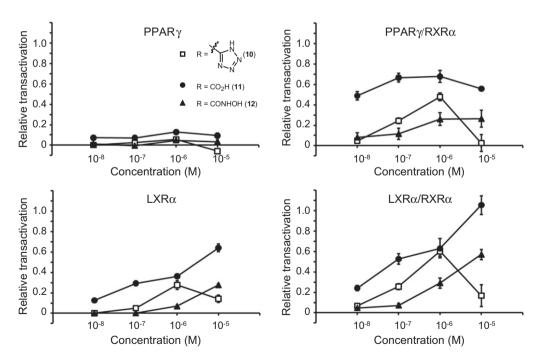


Figure 4. Relative transactivation data of 10 (\bigcirc), 11 (\bigcirc), and 12 (\blacktriangle) toward PPARγ, PPARγ/RXRα, LXRα and LXRα/RXRα. One micromolar TIPP-703 (PPAR-pan agonist) and carba-T0901317 (LXR-pan agonist) were used as positive controls for PPARγ and PPARγ/RXRα, and LXRα/RXRα, respectively.

produced by coupling of **11** and *O*-benzylhydroxylamine, followed by deprotection.

RXR α and RAR α activities of compounds **9–12** were evaluated by reporter gene assay in COS-1 cells. All of them did not show

RAR α activities even at 10 μ M (data shown in Supplementary data). Figure 2 shows dose–response curves of transactivation activity against RXR α compared to that of 1 μ M 1 as a positive control.

RXR-agonistic activity of compound **11** possessing a carboxy group reached a plateau at 0.1 μ M, and **11** (EC₅₀ = 5.28 \pm 1.23 nM) was as potent as **1** (EC₅₀ = 19.8 \pm 3.4 nM). Phosphonic acid **9** did not show RXR-agonist activity up to 10 μ M. Tetrazole **10** (EC₅₀ = 205 \pm 22 nM) and hydroxamic acid **12** showed RXR full-agonistic activity, though they were less potent than **11**. The reason why **10** and **12** show RXR-agonist activities may be the planarity of their acidic moieties. On the other hand, the lower potency of **12** as compared with **10** may reflect the acidic character: the p K_a values of phenyltetrazole and benzohydroxamic acid are 4.5²⁶ and 8.8, ^{27,28} respectively. Docking simulation of **10**, **11**, and **12** with RXR α showed that **10** and **12** do not hydrogen bond to Ala327 of RXR α , whereas **11** does form a hydrogen bond (Fig. 3 and 4(B)).

Although there are differences of RXR-agonistic activities between **10**, **11**, and **12**, these compounds showed similar permissive RXR- heterodimer activation behavior. Transactivation assay with PPAR γ and PPAR γ /RXR α showed that while PPAR γ was not activated, PPAR γ /RXR α was activated by all of the compounds, indicating that the latter activity is based on permissive activation by **10**, **11**, and **12**. Maximum PPAR γ /RXR α transactivations of **10**, **11**, and **12** amounted to about 40%, 60%, and 20% of the positive control, respectively.

On the other hand, LXR α was weakly activated by **10**, **11**, and **12**, indicating that their common 5,5,8,8-tetramethyl-5,6,7,8-tetrahydronaphthyl moiety possesses LXR α activity. Maximum LXR α /RXR α heterodimer activation by **10** and **11** was about 60% and that by **12** was about 50% of the positive control. Since each compound also weakly activates LXR α , LXR α /RXR α heterodimer activation by these compounds may be based on both RXR permissive activation and synergistic activation.

The carboxy derivative **11** was the most potent among the compounds examined. At a concentration of more than 1 μ M, at which all the compounds showed more than 80% activation of RXR, the order of activity of the compounds was **11** > **10** > **12** for both PPAR γ /RXR α and LXR α /RXR α , indicating that the acidic moiety has little influence on RXR permissive heterodimer activation. $c \log P$ values³⁰ of **11** and **10** are 5.55 ± 1.07 and 5.06 ± 0.85 , respectively. Although the tetrazole derivative **10** is less potent than **11**, tetrazolyl-type RXR agonists seem to be attractive candidate agents from the viewpoint of bioavailability.

RXR agonists possessing tetrazole, hydroxamic acid, and phosphonic acid as the acidic domain were prepared from a common bromo intermediate. Evaluation of their RXR agonistic activity and RXR- heterodimer activation activities toward PPAR γ/RXR and LXR α/RXR indicated that modification of the acidic domain of RXR agonists has little influence on permissive RXR-heterodimer activation. This information may be useful for the creation of RXR agonists with superior bioavailability.

Acknowledgments

The authors are grateful to the staff of the SC-NMR Laboratory of Okayama University for performing the NMR experiments. The authors are also grateful to Professor Miyachi for presenting TIPP-703 and carba-T0901317. This work was partially supported by a Grant-in-Aid for Scientific Research on Priority Areas from the Ministry of Education, Science, Culture and Sports of Japan.

The authors are grateful to Ms. Mariko Nakayama and Mr. Kohei Kawata for helpful discussions during the preparation of this manuscript.

Supplementary data

Supplementary data associated with this article can be found, in the online version, at doi:10.1016/j.bmcl.2010.07.012.

References and notes

- Svensson, S.; Ostberg, T.; Jacobsson, M.; Norstrom, C.; Stefansson, K.; HalleÂn, D.; Johansson, I. C.; Zachrisson, K.; Jendeberg, D. O. L. EMBO J. 2003, 22, 4625.
- de Lera, A. R.; Bourguet, W.; Altucci, L.; Gronemeyer, H. Nat. Rev. Drug Disc. 2007, 6, 811.
- Kanda, S.; Nakashima, R.; Takahashi, K.; Tanaka, J.; Ogawa, J.; Ogata, T.; Yachi, M.; Araki, K.; Ohsumi, J. J. Pharm. Sci. 2009, 111, 155.
- Mitro, N.; Mak, P. A.; Vargas, L.; Godio, C.; Hampton, E.; Molteni, V.; Kreusch, A.; Saez, E. Nature 2007, 445, 219.
- Schultz, J. R.; Tu, H.; Luk, A.; Repa, J. J.; Medina, J. C.; Li, L.; Schwendner, S.; Wang, S.; Thoolen, M.; Mangelsdorf, D. J.; Lustig, K. D.; Shan, B. Gene Dev. 2000, 14, 2831.
- Ohta, K.; Kawachi, E.; Inoue, N.; Fukasawa, H.; Hashimoto, Y.; Itai, A.; Kagechika, H. Chem. Pharm. Bull. 2000, 48, 1504.
- Shulman, A. I.; Larson, C.; Mangelsdorf, D. J.; Ranganathan, R. Cell 2004, 116, 417.
- 8. Gottardis, M. M.; Bischoff, E. D.; Shirley, M. A.; Wagoner, M. A.; Lamph, W. W.; Heyman, R. A. *Cancer Res.* **1996**, *56*, 5566.
- 9. Rizvi, N. A.; Marshall, J. L.; Dahut, W.; Ness, E.; Truglia, J. A.; Loewen, G.; Gill, G. M.; Ulm, E. H.; Geiser, R.; Jaunakais, D.; Hawkins, M. J. Clin. Cancer Res. 1999, 5, 1658
- Cohen, M. H.; Hirschfeld, S.; Honig, S. F.; Ibrahim, A.; Johnson, J. R.; O'Leary, J. J.;
 White, R. M.; Williams, G. A.; Pazdur, R. Oncologist 2001, 6, 4.
- 11. Pinaire, J. A.; Reifel-Miller, A. PPAR Res. 2007, 94156. 12.
- Davies, P. J. A.; Berry, S. A.; Shipley, G. L.; Eckel, R. H.; Hennuyer, N.; Crombie, D. L.; Ogilvie, K. M.; Peinado-Onsurbe, J.; Fievet, C.; Leibowitz, M. D.; Heyman, R. A.; Auwerx, J. Mol. Pharmacol. 2001, 59, 170.
- Li, X.; Hansen, P. A.; Xi, L.; Chandraratna, R. A. S.; Burant, C. F. J. Biol. Chem. 2005, 46, 38317.
- Liu, S.; Ogilvie, K. M.; Klausing, K.; Lawson, M. A.; Jolley, D.; Li, D.; Bilakovics, J.;
 Pascual, B.; Hein, N.; Urcan, M.; Leibowitz, M. D. Endocrinology 2002, 143, 2880.
- Yoshikawa, T.; Shimano, H.; Amemiya-Kudo, M.; Yahagi, N.; Hasty, A. H.; Matsuzaka, T.; Okazaki, H.; Tamura, Y.; Iizuka, Y.; Ohashi, K.; Osuga, J.; Harada, K.; Gotoda, T.; Kimura, S.; Ishibashi, S.; Yamada, N. Mol. Cell Biol. 2001, 21, 2991.
- Nishimaki-Mogami, T.; Tamehiro, N.; Sato, Y.; Okuhira, K.; Sai, K.; Kagechika, H.; Shudo, K.; Abe-Dohmae, S.; Yokoyama, S.; Ohno, Y.; Inoue, K.; Sawada, J. Biochem. Pharmacol. 2008, 76, 1006.
- 17. Charton, J.; Deprez-Poulain, R.; Hennuyer, N.; Tailleux, A.; Staels, B.; Deprez, B. Bioorg. Med. Chem. Lett. 2009, 19, 489.
- Ebisawa, M.; Ohta, K.; Kawachi, E.; Fukasawa, H.; Hashimoto, Y.; Kagechika, H. Chem. Pharm. Bull. 2001, 49, 501.
- Takamatsu, K.; Takano, A.; Yakushiji, N.; Morohashi, K.; Morishita, K.; Matsuura, N.; Makishima, M.; Tai, A.; Sasaki, K.; Kakuta, H. ChemMedChem 2008, 3, 780.
- Ebisawa, M.; Kawachi, E.; Fukasawa, H.; Hashimoto, Y.; Itai, A.; Shudo, K.; Kagechika, H. Biol. Pharm. Bull. 1998, 21, 547.
- Kagechika, H.; Kawachi, E.; Hashimoto, Y.; Himi, T.; Shudo, K. J. Med. Chem. 1988, 31, 2182.
- 22. Kalek, M.; Ziadi, A.; Stawinski, J. Org. Lett. **2008**, *10*, 4637.
- 23. Belabassi, Y.; Alzghari, S.; Montchamp, J. L. J. Organomet. Chem. 2008, 693, 3171.
- 24. Mal, P.; Lourderaj, U.; Parveen; Venugopalan, P.; Moorthy, J. N.; Sathyamurthy, N. J. Org. Chem. 2003, 68, 3446.
- 25. Holland, G. F.; Pereira, J. N. J. Med. Chem. 1967, 10, 149.
- 26. Franz, R. G. AAPS PharmSci. 2001, 3, 1.
- 27. Brink, C. P.; Crumbliss, A. L. J. Org. Chem. 1982, 47, 1171.
- 28. Brink, C. P.; Fish, L.; Crumbliss, A. L. J. Org. Chem. 1985, 50, 2277.
- Morris, G. M.; Huey, R.; Lindstrom, W.; Sanner, M. F.; Belew, R. K.; Goodsell, D. S.; Olson, A. J. J. Comput. Chem. 2009, 30, 2785.
- 30. *c* Log *P* values were calculated using the web site, http://www.vcclab.org/lab/alogps/start.html.