



Contents lists available at ScienceDirect

Bioorganic & Medicinal Chemistry Letters

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

Antiviral agents 3. Discovery of a novel small molecule non-nucleoside inhibitor of Hepatitis B Virus (HBV)

Ian T. Crosby^{a,*}, David G. Bourke^a, Eric D. Jones^a, Tyrone P. Jeynes^{a,†}, Susan Cox^{b,‡},
Jonathan A. V. Coates^{b,†}, Alan D. Robertson^{b,§}

^a Medicinal Chemistry and Drug Action, Monash Institute of Pharmaceutical Sciences, Monash University (Parkville Campus), 381 Royal Parade, Parkville, Victoria 3052, Australia

^b AMRAD Operations Pty Ltd, 576 Swan Street, Richmond, Victoria 3121, Australia

ARTICLE INFO

Article history:

Received 9 December 2010

Revised 22 January 2011

Accepted 25 January 2011

Available online 31 January 2011

Keywords:

Conocurvone

Naphthoquinone trimers

Anti-HBV activity

Hepatitis inhibition

AZT resistant HBV

ABSTRACT

The discovery of a small molecule non-nucleoside inhibitor of Hepatitis B Virus is described. During our work on conocurvone derived naphthoquinone 'trimers' for the treatment of HIV, we discovered a potent inhibitor **9** of Hepatitis B Virus in an antiviral screen. During attempts to resynthesis **9** for proof of concept studies, we altered the synthesis in order to attempt to reduced side reactions and difficult to remove by-products. As a result we discovered a small molecule **19** that also was a potent inhibitor of HBV. Importantly, this small molecule inhibitor of Hepatitis B Virus is also an inhibitor of Hepatitis B Virus resistant to 3TC, a bench mark of nucleoside analogues active in the treatment of Hepatitis B Virus. The development of **19** as an agent to treat HBV infections is discussed.

© 2011 Elsevier Ltd. All rights reserved.

Hepatitis B Virus (HBV) is one of the most prevalent viral infections of humans; it attacks the liver and can cause both acute and chronic disease. The WHO estimated 350 million chronic carriers and that about 2 billion people have been infected.¹ An estimated 600,000 to 1.2 million people die each year of HBV associated illnesses.^{2,3} HBV causes a potentially life-threatening liver infection and is a major global health problem and the most serious type of Hepatitis. Twenty-five percentage of adults who were chronically infected with HBV during childhood die from liver cancer or cirrhosis.⁴ HBV is more infectious than HIV and HBV is an important occupational hazard for health workers.⁵ HBV is preventable with a safe and effective vaccine; its effectiveness varies and is dependant on an individual's age.²

Current FDA approved therapies for Hepatitis B viral infections are the biological agents Interferon-alpha (Intron A[®]) and Pegylated Interferon (Pegasys[®]); and the nucleoside analogues Lamivudine (3TC) (Zeffix[®]) (a cytidine analogue), Adefovir dipivoxil (Hepsera[®]) (an adenosine analogue), Entecavir (Baraclude[®]) (a guanine analogue), Telbivudine (Tyzeka[®]) (a thymidine

analogue) and Tenofovir (Viread[®]) (an adenosine analogue).³ There is no small molecule non-nucleoside inhibitor of HBV.

As part of research into naphthoquinone 'trimers' as potential HIV inhibitors^[6–7] a selection of a few of naphthoquinone 'trimers', **1–9**,^{6,7} were screened across a range of viruses. One of these compounds **9**⁷ showed good inhibitory activity in an in vitro HepG2.2.15 cell assay, indicating that it had promising *anti-Hepatitis B Virus* activity. The results of the HepG2.2.15 cell assays for the naphthoquinone 'trimers' are shown in Table 1.

Table 1
Anti-Hepatitis B Virus assay. Inhibitory activity of trimeric naphthoquinones in HepG2.2.15 cells

Compound	EC ₅₀ (μM)	CC ₅₀ (μM)
1	>10	>100
2	>10	14
3	10	1367
4	3.9	1434
5	1.5	466
6	0.154	>300
7	7.9	45
8	0.096	44
9	0.009	279

Values presented were calculated using data combined from all treated cultures. EC₅₀ is the concentration at which a 50% depression of HBV DNA (relative to the average of untreated cultures) was observed; CC₅₀ is the drug concentration at which a 50% depression of neutral red dye uptake (relative to untreated cultures) was observed.⁸

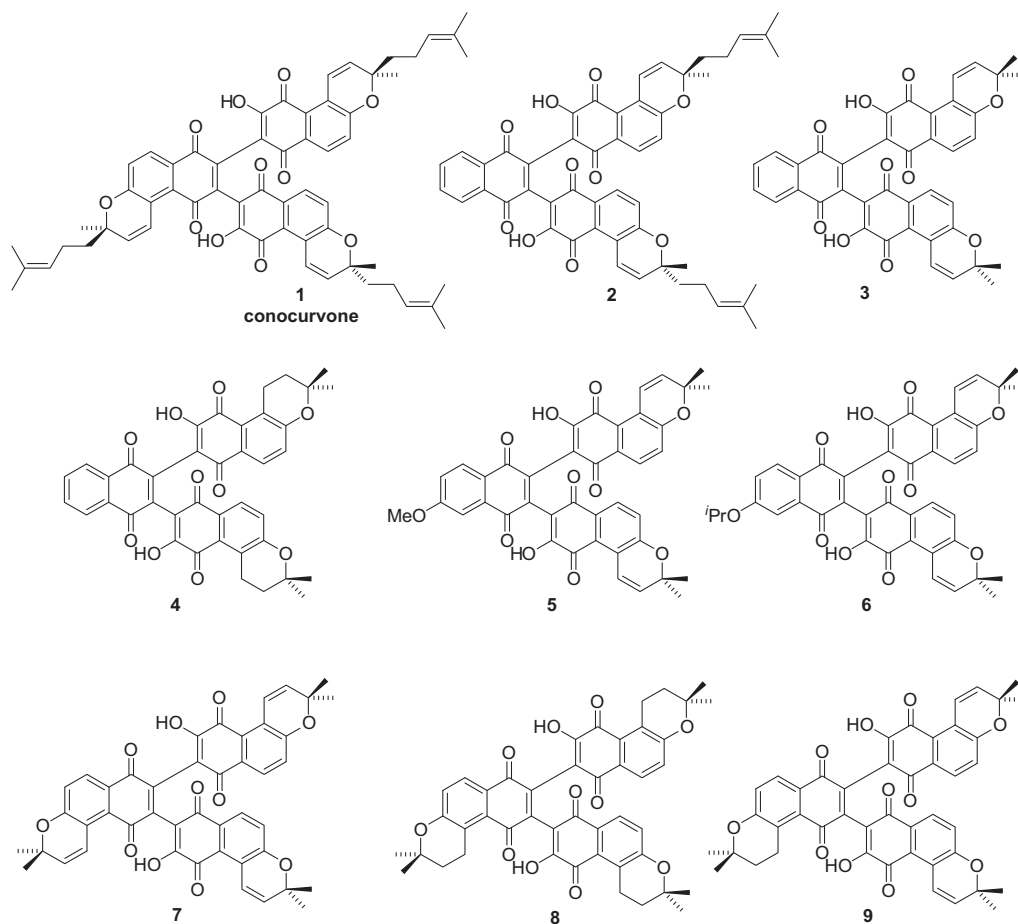
* Corresponding author. Tel.: +61 3 99039636; fax: +61 3 99039582.

E-mail address: ian.crosby@monash.edu (I.T. Crosby).

[†] Present address: Avexa Ltd, 576 Swan Street, Richmond, Victoria 3121, Australia.

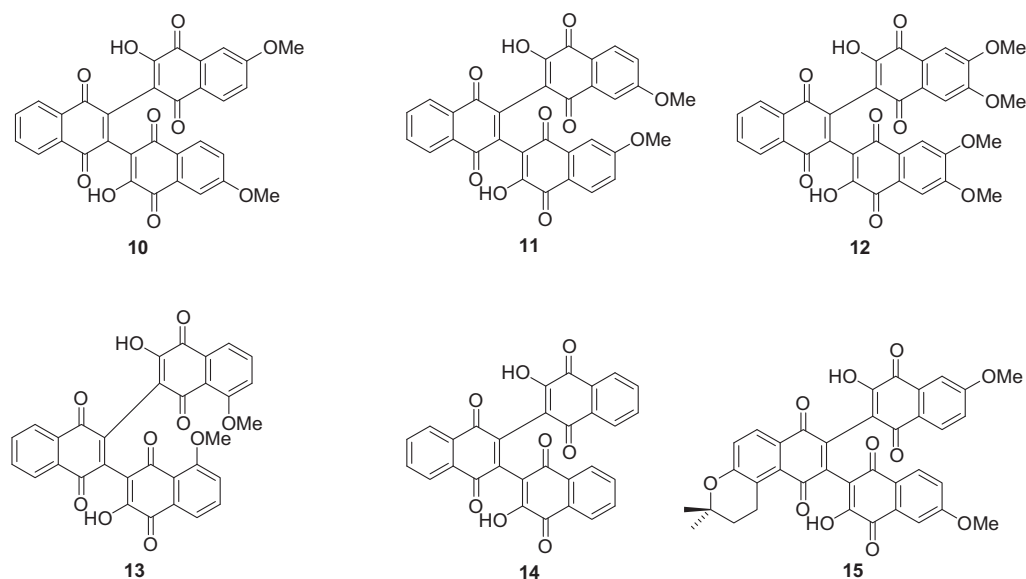
[‡] Present address: Biota Ltd, 10/585 Blackburn Road, Notting Hill, Victoria 3168, Australia.

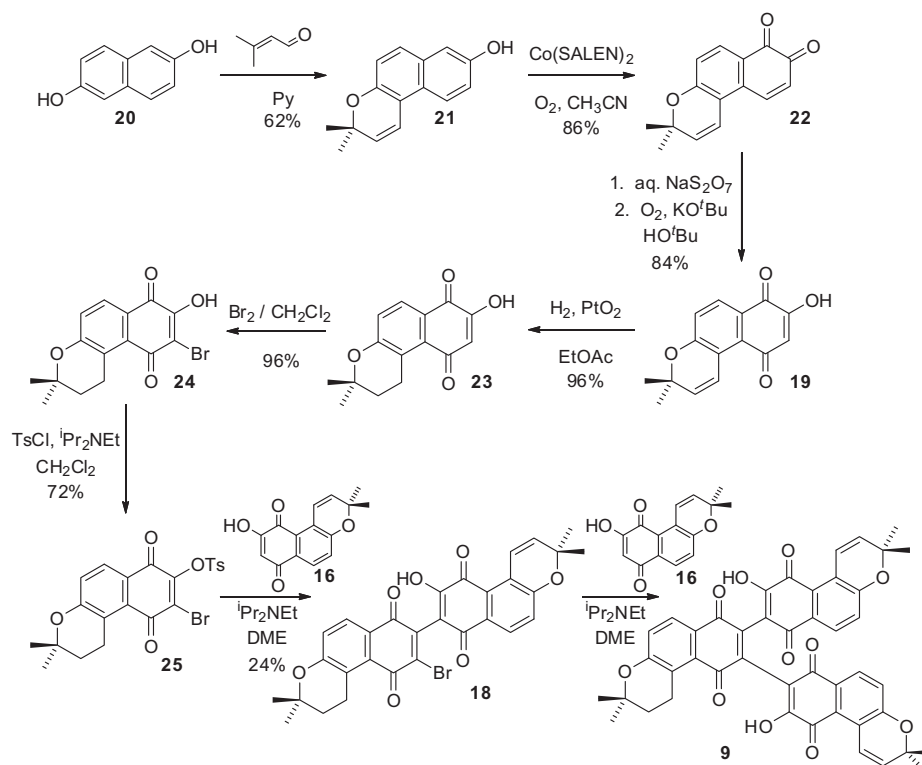
[§] Present address: Pharmaxis Ltd, 2/10 Rodborough Road, Frenchs Forest, New South Wales 2086, Australia.



As compound **9** was the most active in the *anti*-Hepatitis B Virus assay, and the compound had a molecular weight of 750 Da, we were interested if simpler 'trimeric' naphthoquinones would also show good *anti*-Hepatitis B Virus activity. Consequently some 'trimeric'

naphthoquinones were assayed (Table 2), where the pyran/dihydropyran ring(s) were replaced by methoxy groups, or deleted. The compounds screened, **10–15**,⁷ were not as active as compound **9** and it was decided to synthesise larger quantities of **9** for further evaluation.





Scheme 2.

non-nucleoside inhibitor of Hepatitis B Virus in the in vitro HepG2.2.15 cell assay (Table 3).⁹

Importantly, compound **19** was also found to be a potent inhibitor of wild type Hepatitis B viral replication in a transfection assay (Table 4).

Significantly was the activity of compound **19** against Hepatitis B Virus resistant to 3TC, a bench mark of nucleoside analogues active in the treatment of Hepatitis B Virus (Table 5).

As compound **19** is active against 3TC resistant Hepatitis B virus, it is perhaps not surprising that it is not a polymerase inhibitor (Supplementary data, Appendix 1) and apparently has a different mode of inhibition.

Compound **19** is not active in the usual animal models for Hepatitis B Virus (Ducks, Woodchucks) and this resulted in the development of the compound having to be carried out in primates. In a dose range finding studies, the cynomolgus monkeys used did not like the taste of the compound in Tang[®] formulation and plasma levels obtained were barely above the level of assay quantitation. This formulation is necessary for long term administration of the compound to primates which require dosing every few days over a long time.

Table 3
Anti-Hepatitis B Virus assay. Inhibitory activity in HepG2.2.15 cells

Compound	EC ₅₀ (μM)	CC ₅₀ (μM)
19	4.3 (n = 4)	>300 (n = 4)
3TC	0.06 (n = 4)	2128 (n = 4)
Penciclovir	3.4 (n = 3)	552 (n = 3)

Values presented were calculated using data combined from all treated cultures. EC₅₀ is the concentration at which a 50% depression of HBV DNA (relative to the average of untreated cultures) was observed; CC₅₀ is the drug concentration at which a 50% depression of neutral red dye uptake (relative to untreated cultures) was observed.⁸

Table 4
Wild type anti-Hepatitis B Virus assay. Wild type activity in Huh7 cells

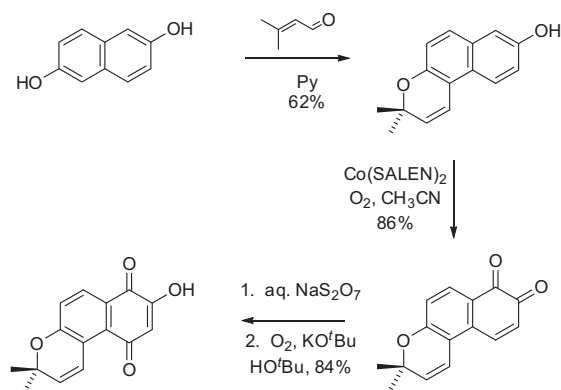
Compound	EC ₅₀ (μM)	CC ₅₀ (μM)
19	2.5–5 (n = 8)	>25 (n = 8)
3TC	0.1 (n = 10)	0.1 (n = 10)

For antiviral and cytotoxicity analyses, confluent cultures of Huh7 cells were transfected with HBV DNA and incubated for 4 h after which the supernatant media were removed and replaced with media containing serial dilutions of the assay compound. 3 days after transfection the supernatant media were again removed and replaced with media containing serial dilutions of the assay compound. 4 days after transfection cells were harvested and intracellular HBV DNA levels analysed by Southern blotting after controlled lysis. Intracellular nucleocapsids were detected by running the cell lysates on non-denaturing polyacrylamide gels and western blotting. Cytotoxicity analyses were undertaken on cells which had not been transfected but which were treated with serial dilutions of the assay compound in the same manner as described for the antiviral evaluation. Uptake of neutral red dye was used to determine toxicity on day 4.

Table 5
Anti-Hepatitis B Virus assay. Activity in HepG2 B1/HepG2 D88 cell assay. 3TC resistant cells

Compound	EC ₅₀ (μM)	CC ₅₀ (μM)
19	1.9 (n = 4)	>25 (n = 4)
3TC	>2.5 (n = 4)	>25 (n = 4)

Confluent monolayers of HepG2 B1 or HepG2 D88 cells were overlaid with serial dilutions of the assay compound and incubated for 3 days. Cell supernatants and cell lysates were then harvested and intracellular HBV DNA levels and extracellular HBV DNA levels were analysed by Southern blotting. Intracellular nucleocapsids and extracellular virions were detected by running the cell lysates and culture supernatants on non-denaturing polyacrylamide gels and western blotting. Cytotoxicity analyses were undertaken on HepG2 B1 or HepG2 D88 cells which had been treated with serial dilutions of the assay compound in the same manner as described for the antiviral evaluation. Neutral red dye uptake was used to determine toxicity on day 3.



Scheme 3.

The synthesis of **19** was scaled up in the laboratory and yields of the reactions improved, 44% overall yield (Scheme 3). Process development of the synthesis to the 100 g scale significantly improved the yield and reduced the cost of the compound.

Ongoing studies into compound **19** and its analogues include determining the mode of inhibition of the compounds of human Hepatitis B virus. Work is also being carried out to improve the

acceptability of the compound, or analogues of it, by primates to allow for sufficient plasma levels of compound to be obtained.

Supplementary data

Supplementary data (synthesis and spectroscopic characterisation of previously unreported compounds **11**, **15**, **21**, **22**, **19**, **23**, **24**, **25** and **18** and Appendix 1) associated with this article can be found, in the online version, at [doi:10.1016/j.bmcl.2011.01.109](https://doi.org/10.1016/j.bmcl.2011.01.109).

References and notes

- WHO. www.who.int/csr/disease/hepatitis/whocdscsrlyo20022/en/index.html (accessed Nov 2010).
- Stein, L. L.; Loomba, R. *Infect. Disord.: Drug Targets* **2009**, 9, 105.
- Hassan, H. A. M. *Curr. Org. Chem.* **2009**, 13, 379.
- Lau, G. K. *Clin. Liver Dis.* **2001**, 5, 361.
- Kubo, N.; Furusyo, N.; Sawayama, Y.; Otaguro, S.; Nabeshima, S.; Sugauchi, F.; Mizokami, M.; Kashiwagi, S.; Hayashi, J. J. *Infect. Chemother.* **2007**, 9, 260.
- Crosby, I. T.; Rose, M. L.; Collis, M. P.; Bruyn, P. J. d.; Keep, P. L. C.; Robertson, A. D. *Aust. J. Chem.* **2008**, 61, 768.
- Crosby, I. T.; Bourke, D. G.; Jones, E. D.; de Bruyn, P. J.; Rhodes, D.; Vandegraaff, N.; Cox, S.; Coates, J. A. V.; Robertson, A. D. *Bioorg. Med. Chem.* **2010**, 18, 6442.
- Korba, B. E.; Gerin, J. L. *Antiviral Res.* **1992**, 19, 55.
- Coates, J. A. V.; Jones, E. D.; Cox, S.; Crosby, I. T.; Bourke, D. G.; Jeynes, T. P. WO2005095376, 2005.