

Design and discovery of neuropeptide Y₁ receptor antagonists

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Neuropeptide Y (NPY) has been the focus of much attention since its discovery as the most abundant peptide in mammalian brain. It has been implicated in many roles in both the periphery and the CNS. The first cloned receptor subtype, Y₁, has been identified as an important mediator for many of these effects. Potent, selective Y₁ receptor antagonists have been developed and have certainly helped clarify the peripheral roles of NPY and the receptors involved. However, there is still a need for Y₁ antagonists that can be administered peripherally, even orally, and penetrate the CNS. Such compounds would help define the roles of NPY and Y₁ receptors in the CNS, an area rich in potential for novel drug therapy.

Neuropeptide Y (NPY) is a 36-amino-acid polypeptide that was isolated in 1982 from porcine brain¹. It is a member of the pancreatic polypeptide (PP) family of peptides and shares high structural similarity and sequence homology with PP and peptide YY (PYY)². The amino acid sequence of porcine NPY is shown in Figure 1.

There is evidence that NPY can exist as a dimer in solution³. The secondary structure is characterized by a polyproline helix comprising residues 1–10, a tight hairpin bend comprising residues 11–14, and an α -helix comprising residues 15–26 (Ref. 4). The C-terminus was originally

thought to be undefined in solution; now evidence shows that the helical nature extends all the way to residue 36 (Ref. 5). It was also believed that both the C- and N-termini of NPY were necessary for Y₁ receptor binding⁶ and that the helices and bend served to orientate these termini. These observations show a good correlation with the model of avian PP suggested by Allen⁷.

The physiological effects of NPY

Neuropeptide Y is present in a highly conserved manner across species^{8,9} and is abundant in mammalian brain and peripheral nervous system. Accordingly, NPY is involved in a variety of peripheral and central processes. It is a potent vasoconstrictor at coronary and cerebral arteries and can potentiate the effects of other vasoconstrictors such as nor-adrenaline. It is also involved in many central effects, including analgesia, anxiolysis and feeding regulation¹⁰ (for reviews see Refs 11,12).

NPY receptor subtypes

Differential effects of NPY analogs suggested the existence of Y₁, Y₂ and Y₃ receptor subtypes (see Table 1)^{13–15}. The Y₁ receptor was cloned in 1992 (Ref. 16) and the Y₂ receptor^{17,18} and the Y₄/PP₁ receptor in 1995 (Ref. 19). Very recently, two Y₅ receptors have been reported. The first of these, reported by Synaptic²⁰, seems to be associated with the feeding effects of NPY and may be the long-awaited 'feeding receptor'. The second, reported by Merck²¹, appears to be distinct from the first, thus these receptors may have to be given separate designations. Bayer have cloned a mouse receptor that is highly homologous to the

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Neuropeptide Y	Tyr-Pro-Ser-Lys-Pro-Asp-Asn-Pro-Gly-Glu-Asp-Ala-Pro-Ala-Glu-Asp-Leu-Ala-Arg-Tyr-Tyr-Ser-Ala-Leu-Arg-His-Tyr-Ile-Asn-Leu-Ile-Thr-Arg-Gln-Arg-Tyr-NH ₂
PYX-1	Tyr(2,6-dichlorobenzyl)-Ile-Asn-Leu-Ile-DThr-Arg-Gln-Arg-Tyr-NH ₂
PYX-2	Tyr(2,6-dichlorobenzyl)-Ile-Asn-Leu-Ile-DThr-Arg-Gln-Arg-Tyr-(2,6-dichlorobenzyl)-NH ₂

Figure 1. Amino acid sequence of neuropeptide Y (NPY), PYX-1 and PYX-2.

Y₄/PP₁ receptor, and is currently labelled Y_{R-D} (Ref. 22). The activity of NPY analogs at some of these cloned receptors agrees with the historical assignments (see Table 2). Use of these selective analogs suggested that the Y₁ receptor was the mediator of several of the important effects of NPY, especially cardiovascular effects. The Y₁ receptor has received the most attention during the past years, although the availability of other cloned NPY receptors should change this. This review outlines the progress towards potent, selective Y₁ receptor antagonists as pharmacological tools and ultimately drug development candidates. The potential roles of Y₁ receptors are also discussed.

Early non-receptor-mediated antagonists

PP-56

Several functional antagonists of NPY-induced effects have been reported. These compounds do not interact with known NPY receptors and are believed to exert their actions elsewhere. PP-56 (D-*myo*-inositol 1,2,6-trisphosphate; α -trinositol) blocks NPY-induced contraction of the guinea pig basilar artery^{23,24}. In addition, PP-56 is a selective antagonist of NPY-induced pressor responses in the pithed rat²⁵. However, PP-56 does not affect [¹²⁵I]NPY binding to Y₁ receptors²⁶, or to Y₂ receptors²⁷, ruling out possible antagonist effects at known Y₁ or Y₂ receptors.

Table 1. Historical (pre-1995) rank order of potency of NPY family analogs on various NPY effects and the receptor subtype assignment

Receptor	Rank order of potency
Y ₁	[Pro34]NPY = NPY = PYY >> NPY ₁₃₋₃₆ >> PP
Y ₂	PYY ≥ NPY > NPY ₃₋₃₆ >> [Pro34]NPY, PP
Y ₃	NPY ≥ [Pro34]NPY ≥ NPY ₃₋₃₆ >> PYY, PP

NPY, neuropeptide Y; PP, pancreatic polypeptide; PYY, peptide YY.

PYX-1 and PYX-2

Tatemoto and coworkers introduced two novel NPY antagonists obtained by screening mixtures of NPY analogs²⁸. These compounds, designated PYX-1 and PYX-2 (Figure 1), displaced [³H]NPY from rat brain membranes. PYX-2 was later shown to block both normal and NPY-induced feeding in rats after injection into the paraventricular nucleus²⁹. However, in a subsequent study, PYX-2 failed to decrease overeating in obese Zucker rats³⁰. Although protocol differences may explain these apparently conflicting results, the later report assigns the lack of effect to the weak affinity of PYX-2 for Y₁ receptors. PYX-2 does not inhibit Y₂ receptors in the isolated rat prostatic vas deferens³¹. While PYX-1 and PYX-2 appear to exert their effects at NPY receptors, the exact subtype(s) involved has not been reported, although Wieland and coworkers also concluded that PYX-2 has weak affinity for Y₁ receptors³².

The first nonpeptide Y₁ antagonists

Benextramine and CC2137

Benextramine (Figure 2), an irreversible α_1 -adrenoceptor ligand, was one of the first nonpeptide compounds found to possess weak NPY receptor antagonist activity³³. Benextramine also binds irreversibly to NPY receptors, suggesting that covalent bonds are formed between the ligand and the receptor. While later studies suggested that benextramine bound selectively to Y₁ receptors³⁴, a close analog was a selective, competitive antagonist at Y₂ receptors in rat femoral artery³⁵. Benextramine has been overshadowed by much more potent Y₁ antagonists, but it has served to raise the question of Y₁ receptor heterogeneity. The Y₁-selective agonist [Leu31,Pro34]NPY contracts rabbit saphenous vein and inhibits electrically stimulated twitching in rabbit vas deferens³⁶. Benextramine blocks the first effect but not the second. The Y₂-selective agonist NPY₈₋₃₆ has similar effects in both tests

Table 2. Potency (EC_{50}) of PP family and analogs on forskolin-stimulated cAMP accumulation in LMTK- cells transfected with rat Y_1 , Y_2 or Y_4 receptors, or 293 cells transfected with rat Y_5 receptors²⁰

	EC_{50} (nM)			
	Y_1	Y_2	Y_4/PP_1	Y_5
Human NPY	0.14	1.2	>1000	0.96
Porcine [Leu31,Pro34]NPY	0.15	>1000	7.1	1.2
Human PYY	0.70	0.58	>1000	1.0
Human PYY ₃₋₃₆	>1000	0.64	>1000	4.2
Human [Pro34]PYY	0.37	>1000	6.0	1.3
Human PP	150	>1000	0.037	1.4
Porcine NPY ₁₃₋₃₆	300	2.2	>1000	20

NPY, neuropeptide Y; PP, pancreatic polypeptide; PYY, peptide YY.

but benextramine does not block either effect. These results suggest that the two preparations contain Y_2 receptors and different Y_1 receptor subtypes and that benextramine is discriminating between them. However, recent binding data reveal that benextramine has a K_i of 2 μ M at cloned human Y_1 and Y_4 receptors while being a little weaker at Y_2 receptors (K_i = 7.5 μ M)³⁷. Benextramine also has sub-micromolar affinity for α -adrenoceptors and dopamine receptors, which limits its use as an NPY ligand *in vivo*. An analog of benextramine, CC2137 (Figure 2), has an approximately tenfold greater affinity for NPY receptors *in vitro*, but again this compound has significant affinity for α -adrenoceptors and dopamine and serotonin receptors. CC2137 binds reversibly to NPY receptors, suggesting that the disulfide link of benextramine is responsible for its irreversible binding.

Arpromidine

A second early series of nonpeptide antagonists was derived from the histamine H_2 agonist arpromidine (Figure 2)³⁸. This compound binds weakly to Y_1 receptors. Studies revealed that it was possible to separate Y_1 receptor activity from histamine activity, although the most potent, selective compounds from this series still had micromolar affinity for Y_1 receptors and comparable H_1 antagonist activity. The weak, non-selective activity displayed by these early compounds has undoubtedly fuelled the search for more potent and selective nonpeptide Y_1 antagonists.

The rational design of NPY antagonists from NPY

Early studies identified [Leu31,Pro34]NPY as a selective Y_1 agonist and NPY₃₋₃₆ as a selective Y_2 agonist. Minor modifications of NPY have also produced NPY receptor antagonists.

For example, replacement of the Thr in NPY position 32 with D-Trp ([DTrp32]NPY) gave an NPY antagonist. [DTrp32]NPY inhibited [¹²⁵I]NPY binding to rat hypothalamic membranes and shifted the dose-response curve of NPY on isoproterenol-stimulated rat hypothalamic membrane adenylate cyclase activity to the right³⁹. [DTrp32]NPY can competitively antagonize NPY-induced feeding in rats but did not bind to Y_1 receptors. These large peptides are likely to have short half-lives and do not penetrate the

blood-brain barrier, limiting their use as tools and making them unlikely drug candidates. Many large endogenous peptides and enzyme substrates have been reduced to small active 'fragments'. These may be as little as a 3- or 4-amino-acid portion of the original substrate. However, it has not been as easy to find a small, active fragment of NPY. Indeed, the smallest non-substituted fragment of NPY found to have potent receptor activity is NPY₈₋₃₆, a selective Y_2 receptor antagonist⁴⁰. The extensive NPY fragmentation and substitution studies have been reviewed⁴¹, and it was concluded that the C-terminus of NPY is necessary for NPY receptor binding. For example, individual

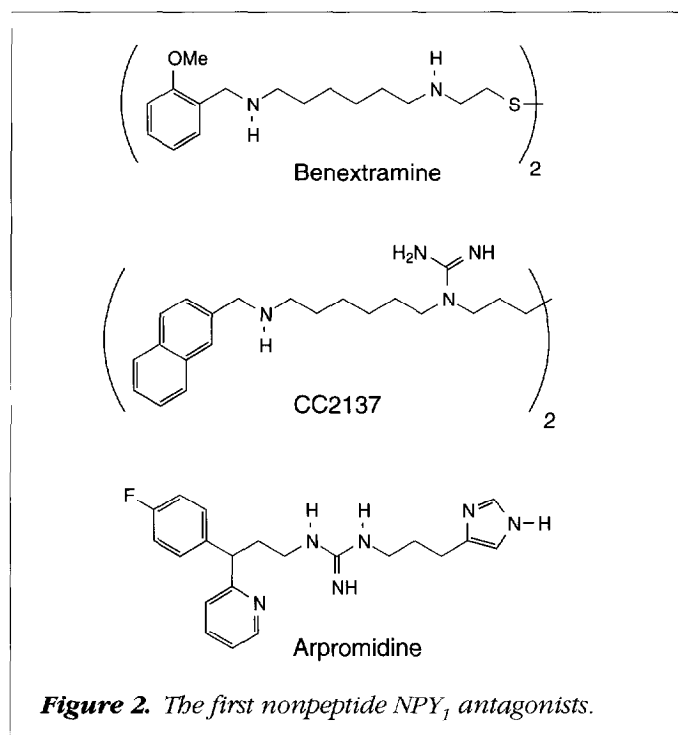
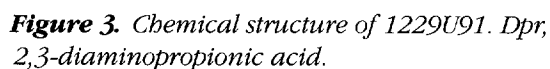


Figure 2. The first nonpeptide NPY₁ antagonists.



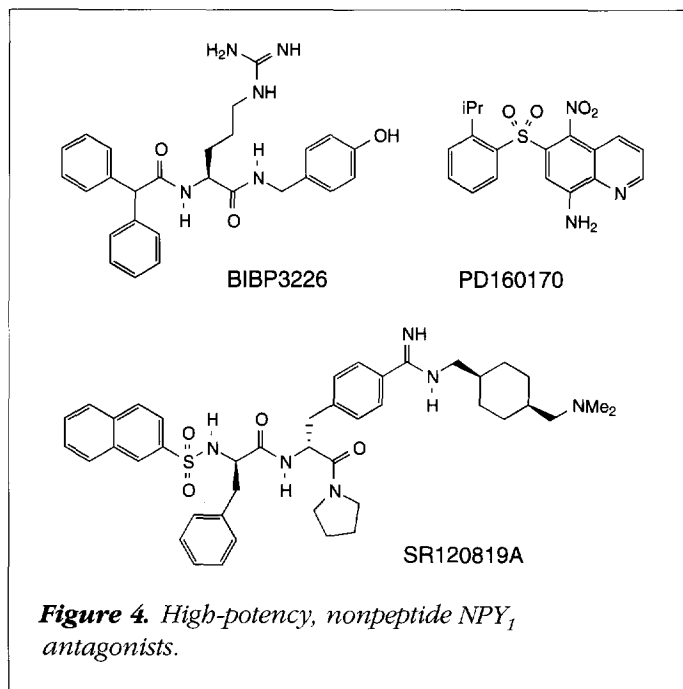
Glaxo-Wellcome 1229U91/GW1229

had disappointing Y₁ receptor affinities but the dimeric by-products were extremely potent Y₁ ligands. One dimer, code name 1229U91 (Figure 3), has subnanomolar affinity for Y₁ receptors and micromolar affinity for Y₂ receptors⁴⁷. As a demonstration of Y₁ receptor antagonist ability, 1229U91 inhibits NPY-induced increase in cytosolic calcium in human erythroleukemia (HEL) cells with an IC₅₀ of 0.3 nM and blocks NPY-induced constriction of the isolated rat kidney. *In vivo*, 1229U91 produced dose-dependent

The move towards high potency, nonpeptide Y₁ antagonists

BIBP3226

The Karl Thomae company has reported a modified peptide as a Y₁ antagonist⁵². This compound, code name BIBP3226 (Figure 4), was derived from the C-terminal region of NPY. BIBP3226 contains D-Arg, believed to overlap with Arg33 of NPY. Indeed, comparison of NPY and BIBP3226 binding to various mutated Y₁ receptors indicates that NPY and BIBP3226 share an overlapping binding site⁵³. BIBP3226 displaced [¹²⁵I]NPY with a K_i of 7.2 nM from human neuroblastoma (SK-N-MC) cells, which intrinsically express the Y₁ receptor (for a review of the pharmacology of BIBP3226, see Doods and coworkers⁵⁴). The structural requirements for activity were very stringent. For example, the (S)-enantiomer, BIBP3435, was essentially inactive at Y₁ receptors (K_i > 10,000 nM)⁵⁵. Replacement of diphenylacetic acid with phenylacetic acid reduced activity over 40-fold. BIBP3226 did not have any effect on blood pressure in pithed rats but blocked the NPY-induced rise in blood pressure. BIBP3226 also blocked NPY-induced vasoconstriction in human cerebral arteries^{56,57}. That [Leu31,Pro34]NPY (Y₁-selective agonist) had much greater effects than the Y₂-selective agonist, NPY₃₋₃₆, in this paradigm suggests that the effect is Y₁-mediated and that BIBP3226 can behave as a Y₁ receptor antagonist *in vivo*.



BIBP3226 did not reduce blood pressure in normal or spontaneously hypertensive rats, but inhibited the blood pressure increase produced by subjecting rats to stress. While BIBP3226 is a very important milestone in Y₁ receptor antagonist discovery, it has a short half-life *in vivo*. Thus it may still be too peptide-like for uses other than as a pharmacological tool.

Sanofi SR120819A/SR120107A

One of the first orally active Y₁ antagonists to be reported is Sanofi's SR120819A (Figure 4)⁵⁸. This compound has (*R,R*) stereochemistry; the (*S,R*)-isomer (SR120107A) is slightly less potent⁵⁹. SR120819A was supposedly designed as a mimic of the C-terminus of NPY. SR120819A is not quite as potent as the peptide ligands (for Y₁, $K_i = 15$ nM), but it is highly selective versus Y₂ and Y₃ receptor affinity. *In vivo*, SR120819A displays typical Y₁ receptor antagonist activity. After oral administration, it blocks the pressor response of [Leu31,Pro34]NPY in guinea pigs. To date, no bioavailability data have been reported. Malmström's group have reported that the isomer, SR120107A, has a variety of Y₁ receptor-mediated effects in pigs^{60,61}. For example, it potently inhibits PYY-induced vasoconstriction in the kidney. These workers noted that SR120107A and BIBP3226 have largely similar effects, but that SR120107A has a longer duration of action.

Parke-Davis PD160170

A series of moderately potent, selective Y₁ antagonists was introduced recently by Parke-Davis⁶². These compounds are

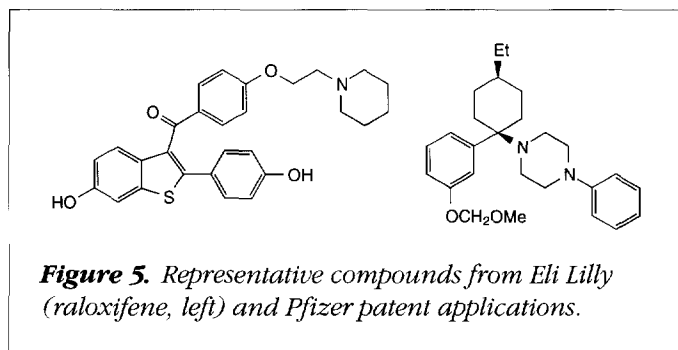
unique in structure as they were discovered via random screening and are not obviously related to the structure of any portion of NPY. A representative compound, PD160170 (Figure 4), bound to Y₁ receptors with a K_i of 48 nM and had no affinity for Y₂ receptors up to 10,000 nM. These compounds blocked the inhibition by NPY of adenylate cyclase activity in SK-N-MC cells, demonstrating antagonist activity. Unfortunately, the compounds are highly crystalline; the resulting low solubility is likely to limit their use as NPY receptor tools or drugs.

Recent patent applications

A number of recent patent applications have described novel NPY antagonists. However, without supporting publications, it is often not clear what the most potent and selective compounds are. Eli Lilly^{63,64} and Pfizer⁶⁵ have filed patents claiming novel nonpeptide Y₁ antagonists; representative compounds (IC₅₀ approx. 10 μ M and 39 nM, respectively) are shown in Figure 5.

So, what are Y₁ antagonists good for?

There are several reports that Y₁ receptor antagonists block NPY-induced hypertension but have no effect on blood pressure in normal or hypertensive rats. This may limit one of the more promising uses of Y₁ antagonists, as antihypertensive agents – an area already well charted by effective drugs. There have been conflicting reports in the literature about whether the Y₁ receptor mediates the feeding response seen with NPY. No-one has yet reported blockade of feeding effects after peripheral administration of Y₁ antagonists; in all the positive reports so far, compounds have been administered centrally. Thus it is difficult to determine whether the blockade of NPY-induced feeding is a genuine Y₁ effect or is a more general disruption of CNS processes. In addition, the evidence is mounting that the Y₅ receptor is responsible for the feeding effect. More seriously, a recent report



describes NPY-knockout mice as having normal feeding behavior⁶⁶. Thus NPY may not be *necessary* for normal feeding behavior, and it is possible that other systems may compensate for the lack of NPY. Several systems (e.g. galanin, leptin, NPY) may need to be modulated simultaneously to have robust, long-lasting anti-feeding, and ultimately anti-obesity, effects. In support of studies suggesting that NPY regulates neuronal state⁶⁷, the NPY-deficient mice showed a tendency towards spontaneous seizures and an increased susceptibility towards GABA-antagonist-induced seizures. Y₂ receptors are believed to be responsible for this effect.

Conclusions

NPY has important, but not yet fully understood, roles in the CNS. Effects at central NPY receptors are likely to afford new opportunities for drug therapy. The past several years have seen the advent of several potent Y₁-selective receptor antagonists, which are helping to clarify the roles of NPY receptors in the various effects of NPY. The most potent of these new compounds are peptide or peptide-like. Unfortunately, there is still a need for compounds that can be administered peripherally and show central activity. The conversion of these compounds to nonpeptides – compounds with usually more favorable physicochemical characteristics – is a difficult, but not impossible, task. The search for non-peptide antagonists is just starting to uncover potent, selective compounds. The advent of new NPY receptors will undoubtedly expand interest beyond the Y₁ receptor.

REFERENCES

- Tatemoto, K. (1982) *Proc. Natl. Acad. Sci. U. S. A.* 79, 5485–5489
- Tatemoto, K., Carlquist, M. and Mutt, V. (1982) *Nature* 296, 659–661
- Cowley, D.J. *et al.* (1992) *Eur. J. Biochem.* 205, 1099–1106
- Darbon, H. *et al.* (1992) *Eur. J. Biochem.* 209, 765–771
- Saudek, V. and Pelton, J.T. (1990) *Biochemistry* 29, 4509–4515
- Schwartz, T.W. *et al.* (1990) *Ann. New York Acad. Sci.* 611, 35–47
- Allen, J.M. (1990) *Ann. New York Acad. Sci.* 611, 86–98
- Larhammar, D., Blomqvist, A.G. and Soderberg, C. (1993) *Comp. Biochem. Physiol.* 106C, 743–752
- Larhammar, D. (1996) *Regul. Pept.* 62, 1–11
- Grundemar, L. and Håkanson, R. (1994) *Trends Pharmacol. Sci.* 15, 153–159
- Dhanoa, D.S. (1995) *Exp. Opin. Ther. Patents* 5, 391–396
- Wettstein, J.G., Earley, B. and Junien, J.L. (1995) *Pharmacol. Ther.* 65, 397–414
- Beck-Sickinger, A.G. and Jung, G. (1995) *Biopolymers* 37, 123–142
- Michel, M.C. (1991) *Trends Pharmacol. Sci.* 12, 389–394
- Wahlstedt, C. and Reis, D.J. (1993) *Annu. Rev. Pharmacol. Toxicol.* 33, 309–352
- Herzog, H. *et al.* (1992) *Proc. Natl. Acad. Sci. U. S. A.* 89, 5794–5798
- Gerald, C. *et al.* (1995) *J. Biol. Chem.* 270, 26758–26761
- Gehlert, D.R. *et al.* (1996) *Mol. Pharmacol.* 49, 224–228
- Bard, J.A. *et al.* (1995) *J. Biol. Chem.* 270, 26762–26765
- Gerald, C. *et al.* (1996) *Nature* 382, 168–171
- Weinberg, D.H. *et al.* (1996) *J. Biol. Chem.* 271, 16435–16438
- Gregor, P. *et al.* (1996) *FEBS Lett.* 381, 58–62
- Edvinsson, L. *et al.* (1990) *Neuropeptides* 17, 99–105
- Sun, X. *et al.* (1996) *J. Pharm. Pharmacol.* 48, 77–84
- Sun, X. *et al.* (1991) *Eur. J. Pharmacol.* 204, 281–286
- Feth, F. *et al.* (1993) *Life Sci.* 52, 1835–1844
- Heilig, M. *et al.* (1991) *Eur. J. Pharmacol.* 204, 27–32
- Tatemoto, K. *et al.* (1992) *Proc. Natl. Acad. Sci. U. S. A.* 89, 1174–1178
- Leibowitz, S.F. *et al.* (1992) *NeuroReport* 3, 1023–1026
- Beck, B. *et al.* (1994) *Neurosci. Lett.* 181, 126–128
- Palea, S. *et al.* (1995) *Br. J. Pharmacol.* 116, 2401–2406
- Wieland, H.A. *et al.* (1995) *J. Pharmacol. Exp. Ther.* 275, 143–149
- Doughty, M.B. *et al.* (1990) *Eur. J. Pharmacol.* 185, 113–114
- Tessel, R.E. *et al.* (1993) *J. Pharmacol. Exp. Ther.* 265, 172–177
- Chaurasia, C. *et al.* (1994) *J. Med. Chem.* 37, 2242–2248
- Palea, S. *et al.* (1995) *Br. J. Pharmacol.* 115, 3–10
- Dhanoa, D.S. *et al.* (1995) Data presented at ACS National Meeting, 20–24 August, Chicago
- Knies, S. *et al.* (1995) *Bioorg. Med. Chem. Lett.* 5, 2065–2070
- Balasubramanian, A. *et al.* (1994) *J. Med. Chem.* 37(6), 811–815
- Balasubramanian, A. *et al.* (1990) *J. Biol. Chem.* 265, 14724–14727
- Beck-Sickinger, A.G. and Jung, G. (1995) *Biopolymers* 37, 123–142
- Kirby, D.A. *et al.* (1993) *J. Med. Chem.* 36, 3802–3808
- Beck, A. *et al.* (1989) *FEBS Lett.* 1, 119–122
- Balasubramanian, A. *et al.* (1996) *J. Med. Chem.* 39, 1142–1147
- Balasubramanian, A. *et al.* (1996) *J. Med. Chem.* 39, 811–813
- Heyer, D. (1996) Data presented at ACS National Meeting, March, New Orleans
- Daniels, A.J. *et al.* (1995) *Proc. Natl. Acad. Sci. U. S. A.* 92, 9067–9071
- Hegde, S.S. *et al.* (1995) *J. Pharmacol. Exp. Ther.* 275, 1261–1266
- Lew, M.J. *et al.* (1996) *Br. J. Pharmacol.* 117, 1768–1772
- Ihara, M. *et al.* (1995) *Physiologist* 38, A251
- Kanatani, A. *et al.* (1996) *Endocrinology* 137, 3177–3182
- Rudolf, K. *et al.* (1994) *Eur. J. Pharmacol.* 271, R11–R13
- Sautel, M. *et al.* (1996) *Mol. Pharmacol.* 50, 285–292
- Doods, H.N. *et al.* (1996) *Regul. Pept.* 65, 71–77
- Wieland, H.A. *et al.* (1995) *J. Pharmacol. Exp. Ther.* 275, 143–149
- Abounader, R. *et al.* (1995) *Br. J. Pharmacol.* 116, 2245–2250
- Nilsson, T. *et al.* (1996) *Neurosci. Lett.* 204, 145–148
- Serradeil-Le Gal, C. *et al.* (1995) *FEBS Lett.* 362, 192–196
- Serradeil-Le Gal, C. *et al.* (1994) *Soc. Neurosci. Abstr.* 376.14
- Malmström, R.E., Modin, A. and Lundberg, J.M. (1996) *Eur. J. Pharmacol.* 305, 145–154
- Malmström, R.E. and Lundberg, J.M. (1995) *Acta Physiol. Scand.* 155, 329–330
- Wright, J.L. *et al.* (1996) *Bioorg. Med. Chem. Lett.* 6, 1809–1814
- Bruns, R. *et al.* (1996) WO 96/12489, 96/12490
- Bruns, R. *et al.* (1996) US Patent 5,504,094
- Peterson, J.M. *et al.* (1996) WO 96/14307
- Erickson, J.C. *et al.* (1996) *Nature* 381, 415–418
- Colmers, W.F. and Bleakman, D. (1994) *Trends Neurosci.* 17, 373–379