

**SUPERINTENDENCIA DE INDUSTRIA Y COMERCIO
DIRECCIÓN DE NUEVAS CREACIONES**

2020
Bogotá, D.C.,

Abogado
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SUPERINTENDENCIA DE INDUSTRIA Y COMERCIO



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ASUNTO	Radicación	09 133050
	Trámite	011
	Evento	378
	Actuación	519 E.15434
	Oficio	
	Folios	16

Patente de Invención	☒	Patente de Modelo de Utilidad	☐
Vía Nacional	☐		
Vía PCT (fase nacional)	☒	Cap. I	☒ Cap. II ☐

No. Solicitud Internacional PCT/US2008/006563
Fecha de Presentación Internacional 22/Mayo/2008

Como resultado del Examen de Fondo realizado, con fundamento en el Artículo 45 de la Decisión 486 de la Comisión de la Comunidad Andina, se comunica:

1. Documentos estudiados

Descripción:	Folios 94 a 166	23/Noviembre/2009
Reivindicaciones:	Folios 167 a 184	23/Noviembre/2009
	Folios 212 a 226	05/Abril/2010
Prioridad:	US 60/931.458	23/Mayo/2007

2. Análisis de la Prioridad

Se acepta la reivindicación de prioridad porque esta solicitud fue presentada dentro del plazo establecido (Art. 9 D 486) y su contenido técnico corresponde con el de la prioridad reivindicada.

3. Objeto de la Invención

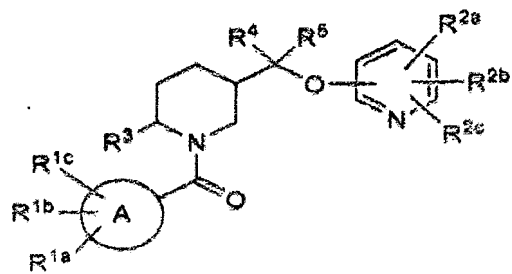
Título de la solicitud: "Antagonistas piridil piperidina del receptor de orexina"

El problema planteado en esta solicitud consiste en la necesidad de suministrar nuevos antagonistas del receptor de orexina OX1R y/o OX2R.

Para resolver este problema técnico la solicitud en estudio proporciona

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compuestos de la fórmula (I) que son antagonistas del receptor de orexina OX1R y/o OX2R.



Fórmula (I)

El objeto de la presente solicitud se relaciona con la Clasificación Internacional de Patentes (CIP): C07D401/12, C07D401/14, C07D413/14, A61K31/4525, A61P25/00, A61K31/454, A61K31/4535, A61K31/506, C07D417/14.

4. De la Solicitud de Patente

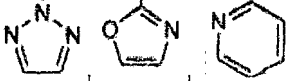
Reivindicaciones (Art 30 D 486, Art 22 PCT)

Las reivindicaciones 2 a 6 no son claras porque no definen los radicales R1a, R1b, R1c, R2a, R2b, R2c, R3, R4 y R5 de las fórmulas estructurales Ia, Ib, Ic, Id y Ie. Adicionalmente se encuentra que la fórmula Ia es igual a la fórmula I. Por lo tanto se sugiere que se realicen las aclaraciones a las que haya lugar.

La reivindicación 6 tiene una falsa dependencia de la reivindicación 5 porque el radical R1a no se encuentra en ninguno de los carbonos adyacentes que divulga la reivindicación 5, es decir, la fórmula estructural de Id y Ie son diferentes. Se le sugiere al solicitante hacer la aclaración a la que haya lugar.

La reivindicación 1 no es concisa, se encuentran definiciones de A, R1a, R1b, R1c, R2a, R2b, R2c, R3, R4 y R5 como heteroarilo, heterociclo y cicloalquilo, los cuales corresponden a grupos funcionales, son ambiguos y no definen de manera inequívoca los sustituyentes de los compuestos reclamados. Por lo tanto se le sugiere al solicitante, en lo posible, restringir el capítulo reivindicatorio de la solicitud a una generalización razonable de las realizaciones preferidas. Adicionalmente se debe establecer el número de carbonos que los conforman, el número y tipo de heteroátomos.

En la definición de los radicales más representativos de la fórmula (I), de acuerdo con lo que se encuentra debidamente sustentado en el capítulo descriptivo, se encuentra que siempre varían entre los siguientes sustituyentes y átomos:

Radical	Soporte en la descripción
R ^{1a}	H, alquilo, hidroxilo, fenilo, 
R ^{1b}	H, alquilo, hidroxilo, F
R ^{1c}	H, alquilo, hidroxilo
A	Fenilo, 
R ³	H, metilo, etilo
R ⁴	H
R ⁵	H
R ^{2a}	H, F, metilo
R ^{2b}	H, F

R ^{2c}	H, F
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Por lo tanto se sugiere al solicitante presentar una generalización razonable y eliminar aquellas definiciones que exceden el sustento descriptivo.

5. Determinación del Estado de la Técnica

El estado de la técnica se determinó con base en la fecha de prioridad (23/Mayo/2007) y se encontraron los siguientes documentos que anticipan el objeto de esta solicitud:

Item	Documento	Título	Fecha de Publicación
D1	WO2006117669	amide resorcinol compounds	09/Noviembre/2006
D2	Handlon Anthony. J. Med. Chem. 2006, 49, 4017-4022	Melanin-Concentrating Hormone-1 Receptor Antagonists for the Treatment of Obesity	16/Junio/2005

D1<http://worldwide.espacenet.com/publicationDetails/originalDocument?CC=WO&NR=2006117669A1&KC=A1&FT=D&ND=&date=20061109&DB=&locale=en> EP Divulga derivados de amidas de resorcinol que poseen actividad inhibitoria de HSP 90 (Pág. 2, 58 y 126).

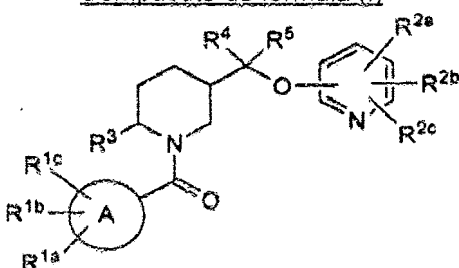
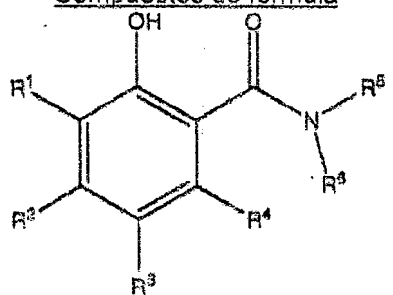
D2http://www.sinab.unal.edu.co:2053/science?_ob=MiamiSearchURL&_method=requestForm&_temp=search.tmpl&_acct=C000055778&_version=1&_urlVersion=1&_userid=1998314&md5=2d18043dcdf8efd08a5548a0eb85e084&searchtype=a Divulga antagonistas de neuropéptidos como: MCH (Melanin-Concentrating Hormone) y orexina para el tratamiento de la obesidad y facilitar así la perdida de peso (Pág. 4019 y 4020).

6. Examen de Patentabilidad (Art 14 D486)

Nivel Inventivo (Art18 D486)

La reivindicación 1 consiste en un compuesto de fórmula (I) en el que: (Fl. 212 a 215 línea 1 a 15)

Comparación de las **características técnicas esenciales**, con las del Estado de la Técnica:

características esenciales	D1
<u>Compuesto de fórmula (I)</u> 	<u>Compuestos de fórmula</u> 
R ^{1a} = H, alquilo, hidroxilo	hidroxilo
R ^{1b} = H, alquilo, hidroxilo, heteroarilo	R ¹ = H, alquilo
R ^{1c} = H, alquilo, hidroxilo	R ² , R ³ , R ⁴ = H, alquilo, hidroxilo,

	heteroarilo
A= fenilo	fenilo
R ³ = H, metilo	R ⁵ y R ⁶ = Junto con el nitrógeno forman un heteroarilo sustituido por un heteroarilo sustituido
R ⁴ = H	
R ⁵ = H	
R ^{2b} = H, F	
R ^{2c} = H, F	
R ^{2c} = H, F	

El documento D1 se considera el estado de la técnica cercano a la invención definida en la reivindicación 1.

D1 divulga derivados de amidas de resorcinol que poseen actividad inhibitoria de HSP 90 (Pág. 2, 58 y 126).

La diferencia entre la invención, definida en la reivindicación 1 y el compuesto de D1 consiste en que la invención tiene los sustituyentes metilo y pirimidina en el fenilo unido al grupo carbonilo y el sustituyente flúor en el anillo de la piridina.

No se evidencia que por el hecho de tener los sustituyentes metilo y pirimidina en el fenilo unido al grupo carbonilo y el sustituyente flúor en el anillo de la piridina, se tenga un efecto técnico inesperado.

Por lo tanto, el Problema Técnico Objetivo que pretende resolver esta invención se puede formular así: "cómo modificar los derivados de amidas de resorcinol que poseen actividad inhibitoria de HSP 90 de D1 para conseguir un compuesto alternativo".

Sin embargo, es bien conocido que el sustituyente metilo es un bioisostero del sustituyente OH y la pirimidina es bioisostero del benceno, ya que según la ley de desplazamiento de Grimm los pseudoátomos presentan las mismas propiedades físicas a los átomos de la columna anterior de la tabla periódica si esta acompañado de hidrógeno; por lo tanto una persona versada en la materia estaría motivada a sustituir el OH y a reemplazar el benceno por una pirimidina, porque el bioisoterismo es una estrategia de la química medicinal para el diseño de nuevos compuestos.¹

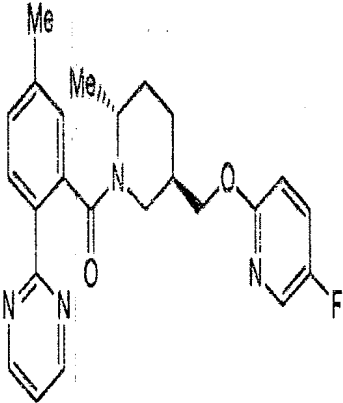
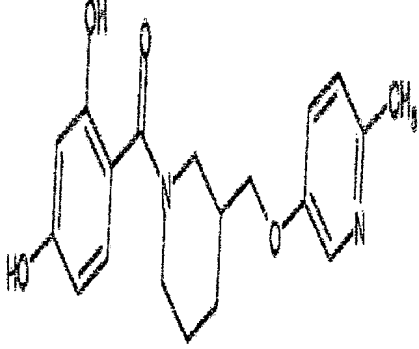
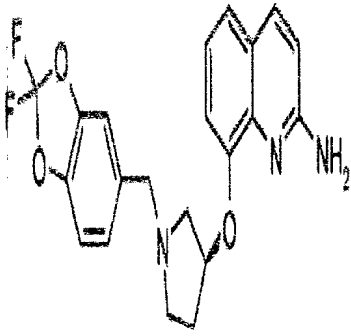
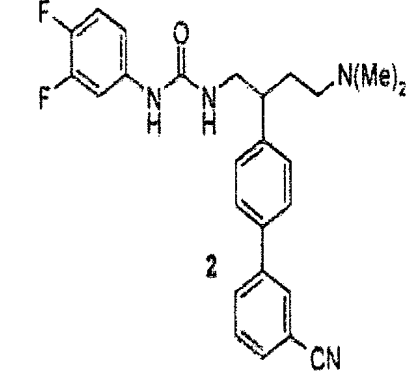
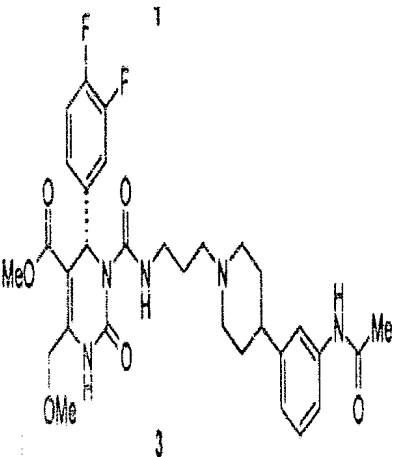
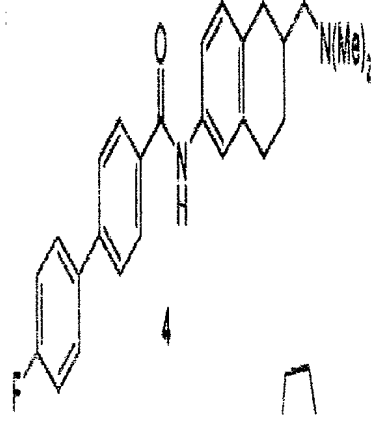
En consecuencia, la persona del oficio normalmente versada en la materia, estaría motivada a emplear los sustituyentes metilo y pirimidina en el fenilo unido al grupo carbonilo y el sustituyente flúor en el anillo de la piridina. Por lo cual se considera obvia.

Conclusión:
La reivindicación 1 no cumple con el requisito de nivel inventivo (Art. 18).

Puesto que las reivindicaciones dependientes 2 a 19 y 21 no mencionan características inventivas adicionales tampoco se pueden considerar inventivas.

1 Lima L. y Barreiro E. "Bioisosterism: A Useful Strategy for Molecular Modification and Drug Design" Current Medicinal Chemistry, 2005. Pág. 23, 24 y 30.
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Comparación de las características técnicas esenciales, con las del Estado de la Técnica:

características esenciales	D1	D2
<u>Compuesto de fórmula (I)</u>  2-{2-[(2R,5R)-5-[(5-fluoropiridin-2-il)oxi]metil]-2-metilpiperidin-1-il)carbonil]-4-metilfenil}pirimidina	<u>Ejemplo 60</u>  4-[(3-)-{[(6metilpiridina-3-il)oxi]metil}piperidin-1-il)carbonil]benceno-1,3-diol	<u>Figura 1</u>  2  3  4 

Los documentos D1 y D2 se consideran el estado de la técnica cercano a la invención definida en la reivindicación 1.

D1 divulga el compuesto 4-[(3-)-{[(6metilpiridina-3-il)oxi]metil}piperidin-1-il)carbonil]benceno-1,3-diol y lo denomina ejemplo 60 (Pág. 58).

D2 compuestos antagonistas de neuropéptidos: orexina y otros (Pág. 4020).

La diferencia entre la invención, definida en la reivindicación 1 y el compuesto de D1 consiste en que la invención tiene los sustituyentes metilo y pirimidina en el fenilo unido al grupo carbonilo y el sustituyente flúor en el anillo de la piridina.

La diferencia entre la invención, definida en la reivindicación 1 y los compuestos de D2 consiste en que la invención tiene el anillo piperidina esta unido a un grupo funcional alcoxi.

No se evidencia que por el hecho de tener los sustituyentes metilo y pirimidina en el fenilo unido al grupo carbonilo y el sustituyente flúor en el anillo de la piridina, se tenga un efecto técnico inesperado.

Por lo tanto, el Problema Técnico Objetivo que pretende resolver esta invención se puede formular así: "cómo modificar 4-[(3-)-{[(6metilpiridina-3-il)oxi]metil}piperidin-1-il)carbonil]benceno-1,3-diol y lo denomina ejemplo 60 de D1 para conseguir un compuesto alternativo".

Sin embargo, es bien conocido que el sustituyente metilo es un bioisostero del sustituyente OH y la pirimidina es bioisostero del benceno, ya que según la ley de desplazamiento de Grimm los pseudoátomos presentan las mismas propiedades físicas a los átomos de la columna anterior de la tabla periódica si esta acompañado de hidrógeno; por lo tanto una persona versada en la materia estaría motivada a sustituir el OH y a reemplazar el benceno por una pirimidina, porque el bioisoterismo es una estrategia de la química medicinal para el diseño de nuevos compuestos.²

En consecuencia, la persona del oficio normalmente versada en la materia, estaría motivada a emplear los sustituyentes metilo y pirimidina en el fenilo unido al grupo carbonilo y el sustituyente flúor en el anillo de la piridina. Por lo cual se considera obvia.

Conclusión:

La reivindicación 20 no cumple con el requisito de nivel inventivo (Art. 18).

2 Lima L. y Barreiro E. "Bioisosterism: A Useful Strategy for Molecular Modification and Drug Design" Current Medicinal Chemistry, 2005. Pág. 23, 24 y 30.

Puesto que las reivindicaciones dependientes 2 a 7 y 13 no mencionan características inventivas adicionales tampoco se pueden considerar inventivas.

7. Conclusión

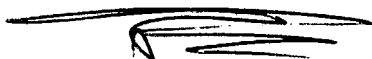
Los requisitos de patentabilidad de la presente solicitud están afectados así:

Item	Documento	Reivindicaciones afectadas	Requisito que afecta
D1	WO2006117669	1 a 21	Nivel inventivo
D2	Handion Anthony. J. Med. Chem. 2006, 49, 4017- 4022	20	Nivel inventivo

En cumplimiento del artículo 45 de la Decisión 486 de la Comisión de la Comunidad Andina, se le indica que debe dar respuesta dentro del término de sesenta (60) días contados a partir de la fecha de notificación de la presente comunicación. En caso de no dar respuesta al presente requerimiento, o si a pesar de la respuesta subsistieran los impedimentos para la concesión, se denegará la patente.

Se invita al solicitante se sirva indicar, si así lo considera, su renuncia al término faltante de sesenta (60) días para dar respuesta a este requerimiento y presentarla por escrito.

Notifíquese el presente oficio conforme a lo dispuesto en el numeral 5.2, literal e), del capítulo quinto del título primero de la Circular Única No. 10 de 2001.



JOSÉ LUIS SALAZAR LÓPEZ
Director de Nuevas Creaciones (C)

El anterior requerimiento fue notificado por fijación en lista, de fecha 10 de set. 2012

Elaborado por: Ruth Angélica Lizarazo Pedraza 
Revisado por: Consuelo Leguizamón Leguizamón 
Aprobado por: José Luis Salazar López

Melanin-Concentrating Hormone-1 Receptor Antagonists for the Treatment of Obesity

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Received June 16, 2005

Introduction

Obesity is one component of a collection of risk factors, termed metabolic syndrome, that is characterized by high blood pressure, insulin resistance, dyslipidemia, and excessive visceral adiposity. Adipose tissue is more than a passive repository of triglycerides. It is also an endocrine gland that produces and excretes the hormone leptin, which serves as a key mediator in the feedback loop linking peripheral adiposity with the central control of feeding and energy expenditure.^{1,2} As fatness increases, more leptin is produced. Under normal physiological conditions, leptin enters the hypothalamus and inhibits the formation of orexigenic neuropeptides such as neuropeptide Y (NPY), melanin-concentrating hormone (MCH), orexin, galanin, and agouti-related protein (AGRP). Hypothalamic leptin simultaneously up-regulates anorectic peptides such as α -melanocyte stimulating hormone (α -MSH), corticotropin-releasing hormone (CRH), and cocaine- and amphetamine-regulated transcript (CART).³ Obesity is characterized by resistance to leptin, the cause of which has been the subject of much investigation, but may result from a failure of leptin receptor signaling in the brain.⁴ Obese patients are found to have high levels of circulating leptin, and administering recombinant leptin as an antiobesity treatment has given mixed results.⁵ Instead, pharmaceutical intervention could be directed toward the orexigenic and anorectic neuropeptide receptors that operate downstream of leptin signaling.

One of the orexigenic neuropeptide receptors that has emerged as an exciting drug target for the treatment of obesity is melanin-concentrating hormone-1 receptor (MCHR-1). In this article we intend to outline the rationale supporting a role for MCH antagonists in the treatment of obesity and to review the progress that has been made to date in the discovery of MCHR-1 antagonists. We will also discuss some of the possible limitations that MCH antagonists may have in the treatment of obesity. For other perspectives in the MCH field, we direct the reader to several excellent reviews that have appeared recently.^{6–10}

MCH was first isolated in 1983 from salmon pituitaries, where it has a role in pigmentation of fish scales. MCH is a cyclic peptide of 19 amino acids with a single disulfide bridge that is identical in all mammals studied so far.⁷ In 1999 two research groups reported simultaneously that MCH binds to and activates the formerly orphan receptor SLC-1 (somatostatin-like receptor, also known as GPR24).^{11,12} The newly identified MCH-1 receptor (MCHR-1) is a member of the 7TM GPCR (seven transmembrane G-protein-coupled receptor) superfamily of receptors. In 2001 a second human MCH receptor was identified (MCHR-2) that shares 38% amino acid identity with MCHR-1.¹³ MCHR-2 is not expressed in rodents, and the lack of animal models has hampered efforts to investigate the role of MCHR-2 in feeding and energy balance.

MCH has no known role in the pigmentation of human skin. In mammals MCH is synthesized predominantly in the brain. For example, in rats, MCH synthesis has been localized to the lateral hypothalamus and zona incerta with lesser amounts in the olfactory tubercle and pons.¹⁴ MCH neurons project widely into other regions of the brain including the cerebral cortex, hippocampus, amygdala, and nucleus of the solitary tract, areas that are thought to control feeding and motivational behavior.¹⁵ The MCH-1 receptor has been localized to areas of the brain that coordinate feeding behavior including the paraventricular nucleus, the dorsomedial, ventromedial, and arcuate nucleus and areas involved in olfaction.¹⁶ In the human brain, MCH binding sites have been found in the cerebral cortex, hypothalamus, thalamus, pons, medulla oblongata, and cerebellum.¹⁷

MCH and the Central Control of Energy Balance

The role of MCH in feeding went unrecognized for many years until it was discovered in 1996 that MCH is up-regulated during fasting in both normal and obese mice. Among fasted animals, MCH mRNA was increased 4-fold in wild type mice and almost 3-fold in leptin-deficient ob/ob mice. Furthermore, it was found that if MCH is directly infused into the intracerebroventricular (icv) region of the rat brain, the consumption of food doubled for the next 6 h.¹⁸ More recently it has been reported that chronic icv infusion of MCH over 14 days to mice on a high-fat diet led to a large increase in caloric intake and body weight. The body weight gains were attributed to gains in fat mass and in liver mass. In addition, the MCH-treated animals showed increases in glucose, insulin, and leptin levels that parallel human metabolic syndrome.¹⁹

Further investigation of the functions of MCH focused on animals in which the MCH gene had been deleted. MCH knockout mice were found to consume fewer calories than control mice and weighed significantly less although they grew normally in every other way. Furthermore, it was found that the MCH knockout animals were resistant to developing obesity when placed on a high-fat diet and they consumed more oxygen, suggesting that they had an enhanced metabolic rate compared to controls.²⁰ The results from the MCH knockout experiments are in sharp contrast to results from corresponding studies that have been carried out for other orexigenic peptides such as NPY, galanin, and β -endorphin, in which the knockout phenotypes were found to exhibit normal feeding behavior, body weight, and metabolism.²¹

Further characterization of MCH utilized mice that were designed to overexpress the MCH gene. The transgenic mice were found to have a 2-fold increase in MCH mRNA. When placed on a high-fat diet, the MCH overexpressers consumed 10% more calories and gained 12% more weight than controls. It was also reported that the MCH overexpressers had high blood glucose and were insulin-resistant, consistent with a prediabetic state.²²

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Investigations of MCH receptor deficient mice have provided additional evidence that MCH has a role in regulation of metabolism and activity levels. MCH-1 receptor knockout mice were found to have high locomotor activity levels and high metabolic rates.²³ As a result, they displayed a lean phenotype, had reduced leptin levels, and were hyperphagic. Furthermore, when placed on a high-fat diet, the MCH-1 receptor knockout mice were found to be resistant to diet-induced obesity (DIO).^{23,24} Most recently, it has been reported that the hyperactivity of the MCH-1 receptor knockout animals may be mediated by the mesolimbic dopamine system. It was found that the receptor knockouts were hyper-responsive to dopamine stimulation. The knockouts had enhanced norepinephrine transport (NET) and significantly up-regulated dopamine D1 and D2 receptors in the mesolimbic regions.²⁵ It is widely recognized that mesolimbic dopamine signaling underlies the reward mechanisms to pleasurable stimuli such as drugs of abuse, smoking, sex, and food intake. This suggests that MCHR-1 antagonists may have a role not only in weight management but also in treating substance abuse, aiding smoking cessation, and treating depression.

MCH and Leptin

Accumulating evidence indicates that MCH is a target of the circulating hormone leptin. MCH receptor is up-regulated in conditions of genetic obesity and during food deprivation, conditions that are characterized by having low or nonexistent levels of circulating leptin. Among *ob/ob* mice that lack leptin it was found that there was a 2-fold increase in MCH mRNA¹⁸ and a 3-fold increase in MCH receptor mRNA.¹⁶ Furthermore, leptin treatment of the *ob/ob* animals resulted in a significant down-regulation of MCH receptor. Diet-induced obese animals also maintain increased levels of MCH tone. A 48 h fasting of mice led to a 7-fold increase in MCH receptor mRNA that was reversed by leptin treatment.¹⁶ Taken together, these results are consistent with a system in which leptin down-regulates MCH hormone and MCH receptor expression in the brain. What are the implications of these results for obese patients? These individuals are resistant to leptin and, on the basis of the animal results, would be expected to have increased levels of MCH tone. Considering the effects of MCH on food intake and weight gain, it seems reasonable to hypothesize that an MCH antagonist could circumvent leptin resistance and be an effective agent in the treatment of obesity.

MCH Receptor Antagonists

The cloning and identification of MCH-1 receptor and the strong association of MCH with feeding and energy balance have prompted many pharmaceutical companies to initiate MCHR-1 antagonist discovery programs. Given the long history that drug companies have had with family A GPCR targets, it is not surprising that numerous organizations have reported finding small-molecule antagonists for the MCH-1 receptor.^{10,26} In the past year alone there have been several disclosures in the patent literature that describe MCHR-1 antagonists, and a few of these are shown in Table 1.

The MCH antagonists that have been described represent diverse structural types. Nevertheless, some commonality exists. The recurring structural motif is a central amide residue with an amino group at one end of the molecule and a lipophilic moiety at the other end. Argenta (Table 1, entry 1) has described a series containing a 6-amidoquinoline core. Synaptic, Yamanouchi, and Banyu (entries 2–4) have exemplified MCHR-1 antagonists that contain a 1,1-diarylacetamide core.

Boehringer Ingelheim (entry 5) eliminated the amide group and incorporated an acetylenic bridge between the amine and the lipophilic group. Taisho and Arena (entry 6) described a *cis*-1,4-cyclohexanediamine series that included various aromatic heterocycles including pyrimidine, quinoline, and tetrahydroquinoline. Schering (entry 7) exemplified a series of 3,4-dihydroisoquinoline acetamides including several with very high potencies.

Scientists from Abbott Laboratories have published a series of papers^{34–36} describing their MCH program in which they utilized high-throughput screening to identify a novel lead series, 2-amino-8-alkoxyquinolines. To optimize the new lead, they took advantage of parallel synthesis techniques that led to compound 1 (Figure 1) that combined high binding affinity, high functional potency, and good central nervous system (CNS) penetration. Scientists from Pharmacia have also utilized high-throughput chemistry to rapidly optimize a series of compounds starting with an initial hit with binding affinity in the low-micromolar range. This effort culminated in the identification of urea 2 (binding $K_i = 0.84$ nM).³⁷

Efficacy in Animal Models of Obesity

Synaptic has reported anorectic and antidepressant effects of an MCH receptor antagonist 3 (SNAP-7941, $K_i = 15$ nM, Figure 1).³⁸ They reported that 3 attenuated MCH-induced food intake when dosed ip at 10 mg/kg to male Wistar rats. At the same dose, 3 caused a 26% weight loss in healthy growing young rats compared to controls. Compound 3 was found to decrease the consumption of highly palatable food (sweetened condensed milk) by 41% at a dose of 10 mg/kg and 59% (30 mg/kg) without affecting conditioned taste aversion. When dosed ip twice daily at 10 mg/kg to diet-induced obese Long-Evans rats, 3 led to significant and sustained weight loss over the 28-day treatment period, resulting in a 26% weight loss compared to controls. In the same experiment, *D*-fenfluramine at 3 mg/kg led to weight loss for the first 14 days but was then followed by rebound weight gain over the next 14 days, culminating in a 14% weight loss over the 28-day treatment period.

Through the screening of a GPCR-directed small-molecule library and subsequent lead optimization, scientists from Takeda discovered an orally active MCHR-1 antagonist 4 (T-226296, $IC_{50} = 5.5$ nM).³⁹ When 4 was dosed orally at 30 mg/kg to male Sprague-Dawley rats followed by injection of MCH (5 μ g) into the lateral ventricle, it was found that 4 obliterated the MCH-induced feeding response. Subsequently, scientists from Schering reported that 4 decreased food intake in diet-induced obese male Sprague-Dawley rats. Through carefully monitoring of animals over a 24-h period, they concluded that 4 at 10 mg/kg reduced food intake by decreasing the size of the meal consumed rather than by decreasing the number of meals consumed. Compound 4 at 10 mg/kg had no effect on locomotor activity in the animals studied, suggesting that the feeding effect is not due to a general malaise.⁴⁰

GlaxoSmithKline has reported that 5 (GW 803430X, $IC_{50} = 0.5$ nM), when administered orally to diet-induced obese AKR mice, gave a robust and continuous weight loss over a 12-day period. At 3 mg/kg orally, 5 gave a 13% weight loss over the course of the study, whereas sibutramine at the same dose gave a 3% weight loss.⁴¹

In 2005, scientists from Neurocrine Biosciences described compound 6 ($K_i = 2.3$ nM) and investigated its effect in a 7-day weight loss study. Animals treated with 6 ate less food than control-treated animals and lost a significant amount of weight. The study included pair-fed animals that were not treated with

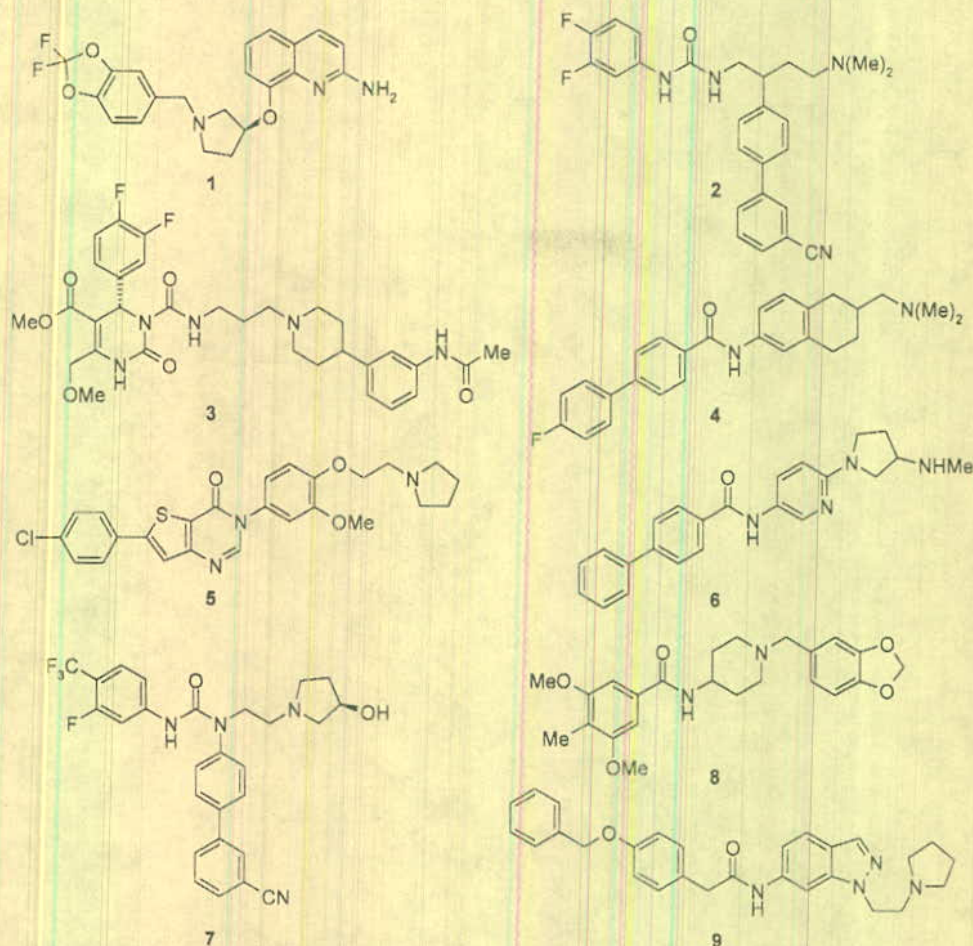


Figure 1. Chemical structures of selected MCH-1 receptor antagonists.

a single orexigenic neuropeptide for a sustained effect. For example, one may need to target NPY, orexin, and AGRP simultaneously to provide adequate weight loss and weight management over a period of time.

The role of MCHR-2 in obesity is unknown. Although MCHR-1 antagonists are effective anorectic agents in rats that possess only a single MCH receptor, it is not clear what the effect will be in humans that possess both MCHR-1 and MCHR-2. It is conceivable that MCHR-2 could functionally compensate when MCHR-1 is inhibited. One may need to inhibit both MCHR-1 and MCHR-2 to get a full effect.

The MCH receptor is widely distributed in the brain, and an antagonist may have unintended effects. MCH-producing neurons project into areas of the brain that control functions other than feeding and appetite. In addition to the hypothalamus, the MCH-1 receptor has been identified in several areas of the rat brain including the cerebral cortex, hippocampus, amygdala, and the olfactory bulb.¹⁵ MCH plays a role in several activities in the CNS including stress, aggression, anxiety, reproduction, and memory retention.⁹ Indeed, MCH antagonists have attracted attention as potential antidepressants and anxiolytic agents.³⁸ The MCH receptor is also expressed in many peripheral tissues including kidney, testis, white adipose tissue, skeletal muscle, and tongue although in lower amounts than in the brain.¹⁶ It is not clear what the effect of an MCH receptor antagonist would be on the function of peripheral organs and tissues.

MCH may participate in other key functions in the hypothalamus, and inhibiting MCH receptor-1 may cause unexpected side effects. For example, a recent study has demonstrated that MCH is involved in the maintenance of bone density in rodents. MCHR-1 knockout mice have high bone turnover and a

reduction in cortical bone mass.⁴⁶ It is not known whether long-term treatment with MCHR-1 antagonists at doses that would be needed to effect weight loss would also lead to complications with osteoporosis.

In rodents MCH is involved in gonadotropin secretion. When MCH (50, 100, and 200 ng) was injected into the medial preoptic area of anesthetized rats, it was found that luteinizing hormone (LH) release was stimulated over a 2-h period in a dose-dependent manner.⁴⁷ The authors of this study concluded that this effect was most likely mediated by the MCH-1 receptor although it is possible that another neuropeptide receptor could have been involved. In another study it was found that MCH increased luteinizing hormone releasing hormone (LHRH) from the median eminence and follicle stimulating hormone (FSH) from the anterior pituitary where MCH receptor mRNA has been detected.⁴⁸ Although there are other systems that are known to control the release of LHRH and FSH, it is conceivable that an MCH antagonist could inhibit the release of gonadotropins. Consequently, it is an open question whether MCH antagonists will affect reproductive health in humans.

If the weight loss that resulted from treatment with an MCH receptor antagonist was derived primarily from an increase in thermal energy output, then one would expect to see a significant effect in rodents but perhaps only a minor effect in man. Rodents and small mammals with active brown adipose tissue (BAT) have robust thermogenesis and respond well to drugs that increase energy expenditure (such as β -3 agonists). The effect of MCH antagonists on obese rodents may be BAT-mediated; hypothalamic MCH neurons project to thermogenic brown adipose tissue in the rat,⁴⁹ and there is evidence that MCH neural pathways regulate thermogenesis in BAT.⁵⁰ If an MCH antago-

nist in obese rodents works through an increase in BAT-mediated energy expenditure, then it is unclear whether one would see a comparable effect in adult humans that lack functional BAT.

For mice that lack both leptin and MCH (double-null mice), leanness was the observed phenotype even though these animals continued to display the hyperphagia consistent with leptin deficiency. The reduction in fat mass was caused by an increase in energy expenditure.⁵¹ If the double-null mouse represents a crude model for a leptin-resistant human undergoing therapy with an MCH antagonist, then it follows that weight reduction would stem predominantly through an increase in energy expenditure rather than through a reduction in food consumption. For many patients and physicians alike, a drug that raises metabolic rate would represent a great advance in obesity therapy. It needs to be demonstrated in the clinic whether an increase in metabolism can be achieved without a concomitant increase in resting heart rate, blood pressure, or internal temperature, which may be considered adverse effects.

Conclusion

Obesity has become the scourge of the developed world, and the need for effective novel therapies has never been greater. With our current knowledge in the area of hypothalamic control of energy balance, it seems a reasonable hypothesis that an MCHR-1 antagonist would represent an efficacious pharmacotherapy for the clinical management of the overweight patient. With so many organizations involved in the discovery of MCHR-1 antagonists, it is likely that one or more of them will select clinical candidate compounds and will test the hypothesis in the clinic. We await the results with great anticipation.

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Biographies

Anthony L. Handlon received his B.A. degree in chemistry from Case Western Reserve University and Ph.D. degree in pharmaceutical chemistry from the University of California, San Francisco. Following postdoctoral research at Duke University under the direction of Bert Fraser-Reid, he joined the Burroughs Wellcome Company in 1993. Currently he is a senior investigator at GlaxoSmithKline, focusing on the discovery of medicines for the treatment of metabolic diseases.

Huiqiang Zhou received his B.S. degree in chemistry and M.S. degree in organic chemistry from Fudan University, Shanghai, China. After several years as a research associate with Professor Hengwen Liu in the Department of Chemistry, University of Minnesota, and with Professor Barry Gold in the Eppley Institute, University of Nebraska Medical Center, he joined GlaxoWellcome Inc. in 1998. Currently, he is a senior scientist working in the metabolic area at GlaxoSmithKline.

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Bioisosterism: A Useful Strategy for Molecular Modification and Drug Design

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Abstract: This review aim to demonstrate the role of bioisosterism in rational drug design as well as in the molecular modification and optimization process aiming to improve pharmacodynamic and pharmacokinetic properties of lead compounds.

1. INTRODUCTION

Bioisosterism is a strategy of Medicinal Chemistry for the rational design of new drugs, applied with a lead compound (LC) as a special process of molecular modification [1]. The LC should be of a completely well known chemical structure and possess an equally well known mechanism of action, if possible at the level of topographic interaction with the receptor, including knowledge of all of its pharmacophoric group. Furthermore, the pathways of metabolic inactivation [2], as well as the main determining structural factors of the physicochemical properties which regulate the bioavailability, and its side effects, whether directly or not, should be known so as to allow for a broad prediction of the definition of the bioisosteric relation to be used.

The success of this strategy in developing new substances which are therapeutically attractive has observed a significant growth in distinct therapeutic classes, being amply used by the pharmaceutical industry to discover new analogs of therapeutic innovations commercially attractive (*me-too*), and also as a tool useful in the molecular modification.

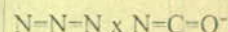
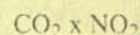
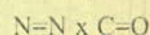
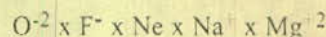
There may be innumerable reasons for the use of bioisosterism to design new drugs, including the necessity to improve pharmacological activity, gain selectivity for a determined receptor or enzymatic isoform subtype - with simultaneous reduction of certain adverse effects -, or even optimize the pharmacokinetics the LC might present.

In this paper, we will discuss bioisosterism as a strategy of molecular modification, showing its importance in building a new series of congeners compounds designed as candidate of new drugs, giving examples of successful cases in distinct therapeutic classes [3-7].

2. BACKGROUND

In 1919, Langmuir [8] studying the chemical behavior and reactivity of determined substances possessing atoms or groups with the same number of valence electrons, *i.e.*

isoelectronic, created the concept of isosterism to define atoms or organic or inorganic molecules which possess the same number and/or arrangement of electrons examples:



In 1925, Grimm [9] formulated the *Hydride Displacement Law*, an empiric rule which states that the addition of a hydrogen atom with a pair of electrons (*i.e.* hydride) to an atom, produces a pseudoatom presenting the same physical properties as those present in the column immediately behind on the Periodic Table of the Elements for the initial atom (Fig. 1), showing that any atom belonging to groups 4A, 5A, 6A, 7A on the Periodic Table change their properties by adding a hydride, becoming isoelectronic pseudoatoms.

In 1932, Erlenmeyer [10] proposed a broadening of the term isosterism, defining isosteres as elements, molecules or ions which present the same number of electrons at the valence level. His contribution includes the proposition that elements of the same column on the Periodic Table are isosteres among themselves (*e.g.* C x Si x Ge) and the creation of a concept of rings electronically equivalent, later broadened to the term ring bioisosterism.

The coining of the term bioisosterism goes back to the pioneer work of Friedman and Thornber during the early 50s. Friedman [11], recognizing the usefulness of the concept *isosterism* to design bioactive molecules, defined bioisosters as compounds which fit the definitions of isosteres and which exercise their biological activity of bioreceptor, whether through agonist or antagonist actions. However, Friedman introduced the term bioisosterism to describe the phenomenon observed between substances structurally related which presented similar or antagonistic biological properties [11]. Later, Thornber [3] proposed a broadening of the term bioisosteres, defining them as sub-units or groups or molecules which possess physicochemical properties of similar biological effects.

Over the years, innumerable bioisosteric relations have been identified in compounds both natural and synthetic. In nature, we have identified many examples of isosterism as a

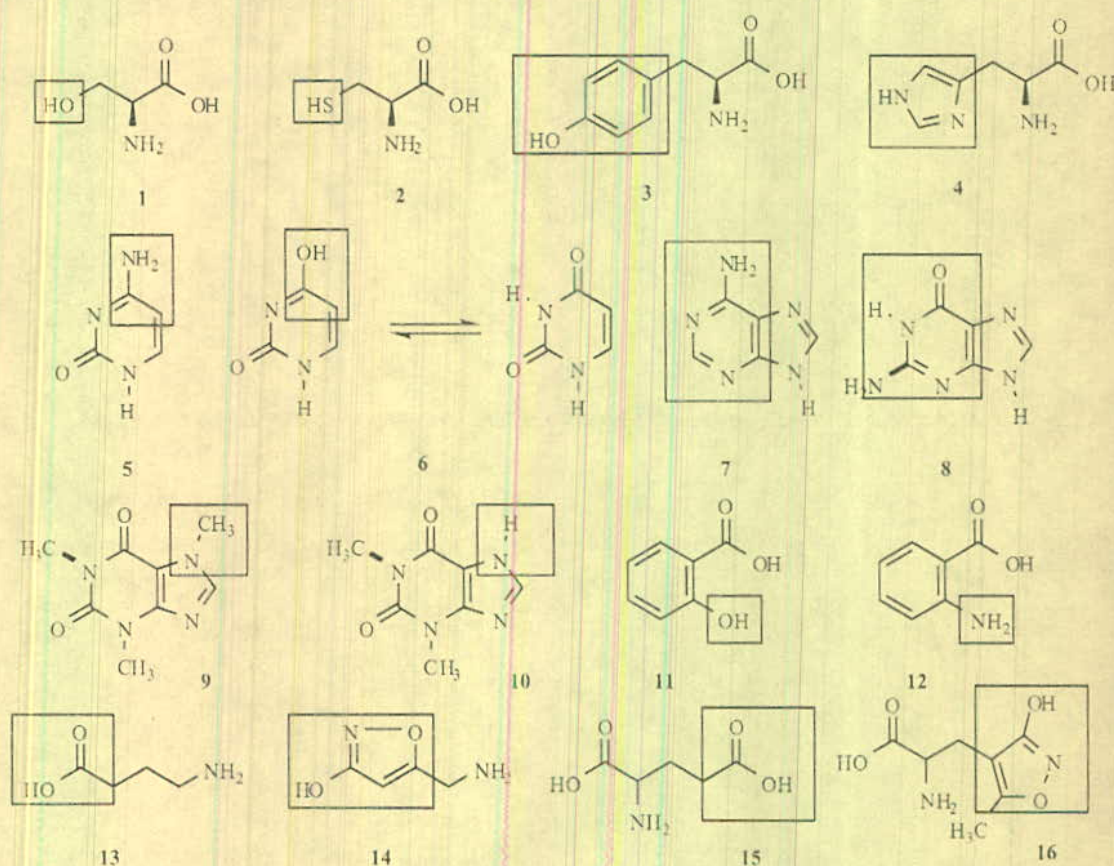
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	Group 4A	Group 5A	Group 6A	Group 7A	Group 8A	
N° of e ⁻	6	7	8	9	10	11
	C	N	O	F	Ne	Na ⁺
H ⁺ L	CH	NH	OH	FH		
	H ⁺ L	CH ₂	NH ₂	OH ₂	FH ₂ ⁺	
		H ⁺ L	CH ₃	NH ₃	OH ₃ ⁺	
			H ⁺ L	CH ₄	NH ₄ ⁺	

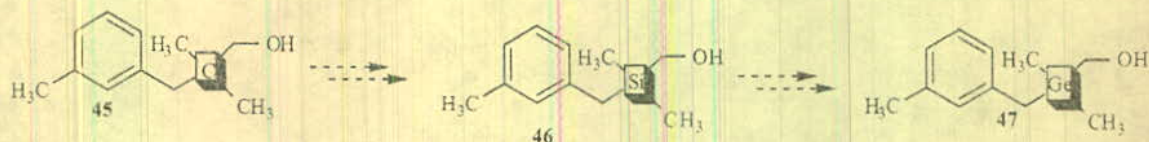
Fig. (1). Grimm's hydride displacement law.

form of broadening chemodiversity (Scheme 1), striking among which are the classic bioisosteric relation existing between the essential amino acids serine (1) and cysteine (2), tyrosine (3) and histidine (4) among the pyrimidine and purine bases cytosine (5) and uracile (6), adenine (7) and guanine (8); among the xanthines caffeine (9) and theophylline (10); and among the salicylic (11) and anthranilic (12) acids, which originated two important

classes of non-steroid anti-inflammatory drugs, e.g. acetylsalicylic acid and mefenamic acids, respectively. Furthermore, examples of the application of non-classic bioisosterism are also found in nature - such as the bioisosteric relationship existing between γ -aminobutyric acid (GABA) (13) and muscimol (14), between the neurotransmitters glutamate (15) and AMPA (16).



Scheme 1.

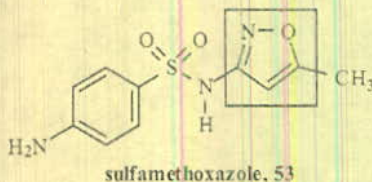
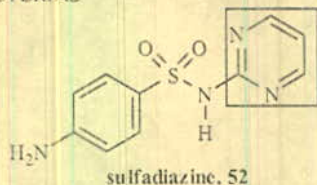


Scheme 12.

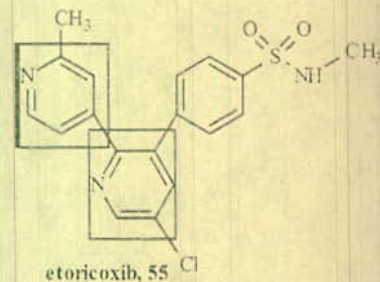
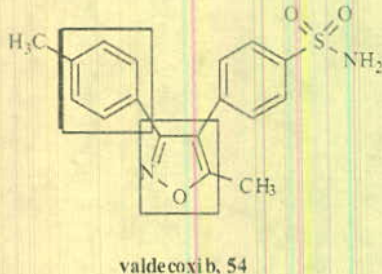
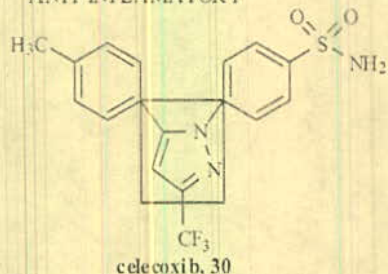
(CLQ IC_{50} = 80 μ M; 41 IC_{50} = 1500 μ M; 42 IC_{50} = >2500 μ M). Hence, the isosteric modifications realized reinforced the hypothesis of the importance of *N*-quinolinic interaction process with hematin, the molecular target of antimalarial action of 4-aminoquinoline drugs.

Zidovudine (AZT, 43), an important chemotherapeutic resource available for the treatment of acquired human immunodeficiency syndrome, was discovered from the properties identified in nucleosides isolated from seaweed. The structural analysis of AZT (43), a powerful inhibitor of

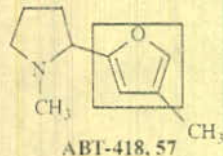
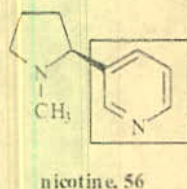
ANTIBACTERIAL



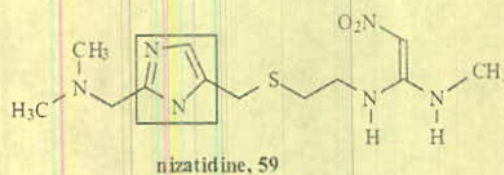
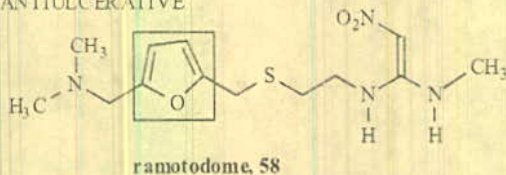
ANTI-INFLAMMATORY



ANALGESIC



ANTIULCERATIVE



MALE ERECTILE DYSFUNCTION

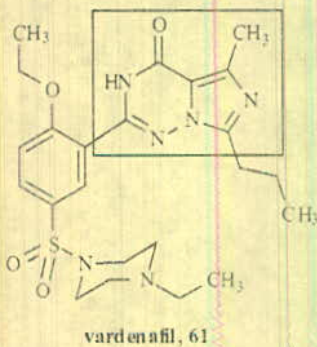
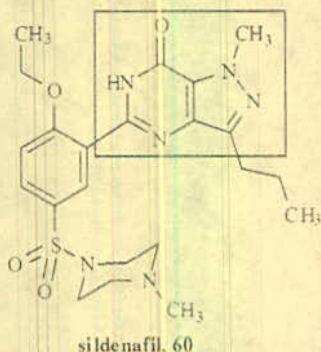


Fig. (2). Examples of ring bioisosterism between drugs belonging to different therapeutic classes.