



We will begin momentarily at 2pm ET



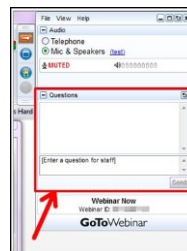
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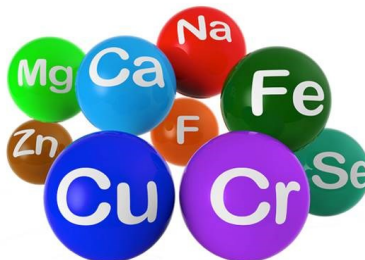
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- Optimizing Peptide-Based Therapeutic Properties During Drug Discovery
- Integrating In-Silico Toxicology and ADME Tools for Robust Drug Candidate Selection
- In Vivo Imaging of Receptor Occupancy: A Critical Tool for Targeted Therapy Development
- Optimized Approaches to a Successful Preclinical Formulation Development
- Getting Clearance for Takeoff: Options to Assess Drug CL Before FHD
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2016 Drug Design and Delivery Symposium

I - Time: The Fourth Dimension in Drug Discovery	
January 28	The Importance of Drug-Target Kinetics in Drug Design Robert Copeland - Epizyme, Inc. Dan Erlanson - Carmot Therapeutics
February 25	Long-Acting Injectable Medications: Strategies and Mechanistic Considerations Jules Remenar - Alkermes Annette Bak - Merck
March 31	Modified Release Formulations for Solubility Starved Compounds Mingwei Hu - Merck John Morrison - BMS
April 28	The Medicinal Chemist of Tomorrow (Special Topic) Joel Barrish - Achillion Ravi Nangund - Merck Molly Schmid - Tech Coast Angels
II - Beyond Traditional Small Molecules	
May 19	Design of Deliverable Macrocycles Scott Lokey - UC Santa Cruz Nicholas Meanwell - BMS
June 23	Dreaming Big and Thinking Small: Applying Medicinal Chemistry Strategy to Antibody-Drug-Conjugates L. Nathan Tunney - Pfizer Peter Sender - Seattle Genetics
July 28	Nucleic Acids Therapeutics: Making Sense of Antisense Oligonucleotides Punit Seth - Ionis Richard Olson - BMS
August 18	Crystallography as a Drug Design and Delivery Tool (Special Topic) Robert Wenslow - Crystal Pharmatech Vincent Stall - Abbvie Andrew Brunskill - Merck
III - Pharmacology Revisited	
September 29	Dealing with Reactive Drug Metabolites in Drug Discovery: Can We Predict Toxicities of Drug Candidates that Form Reactive Metabolites? Deepak Gulati - Pfizer Frederick Peter Guengerich - Vanderbilt University
October 27	Rational Design of Small Molecules Targeting RNA Matt Disney - Scripps RI Florida Amanda Garner - University of Michigan



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Treating Cancer with Nanoparticles Powered by the Sound of Light

Justin Harris, Lead Research Scientist, NanoHybrids

Mark Jones, Executive External Strategy and Communications Fellow, Dow Chemical

Thursday, October 13, 2016



Failure: Why Science Is So Successful

Stuart Firestein, Author and Professor of Neuroscience, Columbia University

Darren Griffin, Professor of Genetics, University of Kent

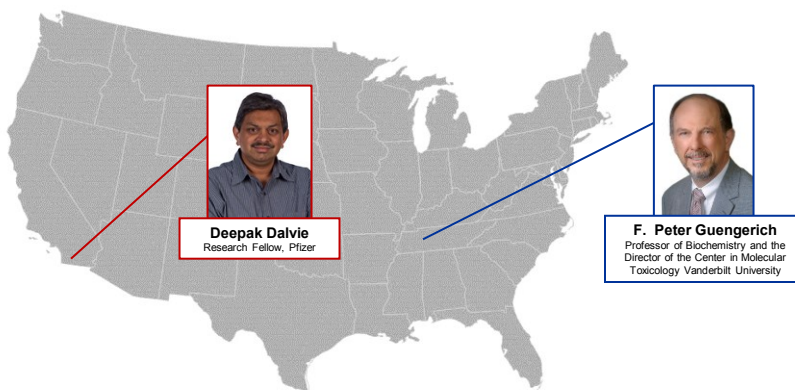
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2016 Drug Design and Delivery Symposium

"Dealing with Reactive Drug Metabolites in Drug Discovery"



Slides available now! Recordings are an exclusive ACS member benefit.

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The 2016 DDDS is co-produced with ACS Division of Medicinal Chemistry and the AAPS 14

Dealing with Reactive Metabolites in Drug Discovery:

Can we Predict Toxicities of Drug Candidates that form Reactive
Metabolites?

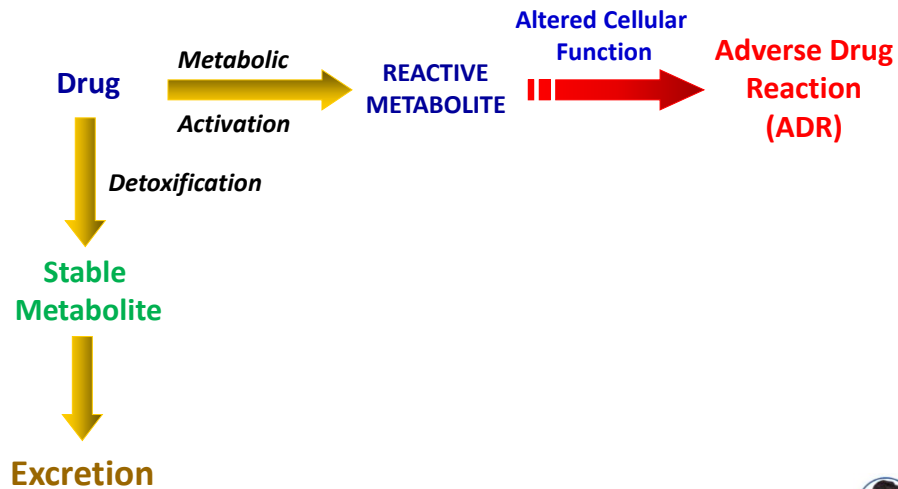
Deepak Dalvie

Pharmacokinetics, Dynamics and Metabolism Department
Pfizer

Addressing **Reactive Metabolites** in drug
discovery has become regular routine



**Circumstantial evidence links
reactive metabolites to adverse drug reactions**



**Predicting Toxicity of Reactive
Metabolites can be Challenging**

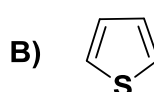
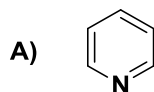


Audience Survey Question

ANSWER THE QUESTION ON BLUE SCREEN IN ONE MOMENT



Which of these groups are considered to be “structural alerts” in medicinal chemistry?



- A
- B
- Both
- Neither

Agenda

★ Background

- Idiosyncratic Adverse Drug Reactions (IADRs)
- Reactive metabolites
- Reactive Metabolite Assays

★ Discuss why predicting toxicity of RM-positive compounds can be challenging?

★ Approaches to deal with reactive metabolites from a DM-PK perspective



Adverse Drug Reactions

A Leading Cause of Candidate Attrition and Drug Recalls

Idiosyncratic Drug Reactions (IADRs) A Major Problem

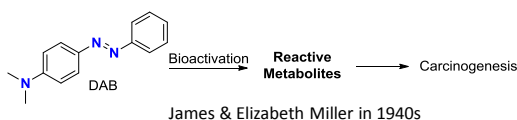
- ★ Unpredictable
- ★ Not easy to study
- ★ The underlying mechanism is not clear
- ★ Believed to be immune mediated!



Reactive Metabolites A Major Risk Factor in Toxicity

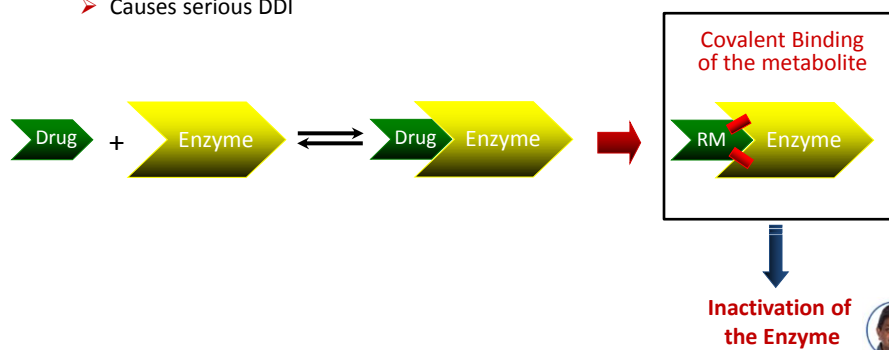
★ Carcinogenic

- Modify DNA
- ☐ Genotoxicity

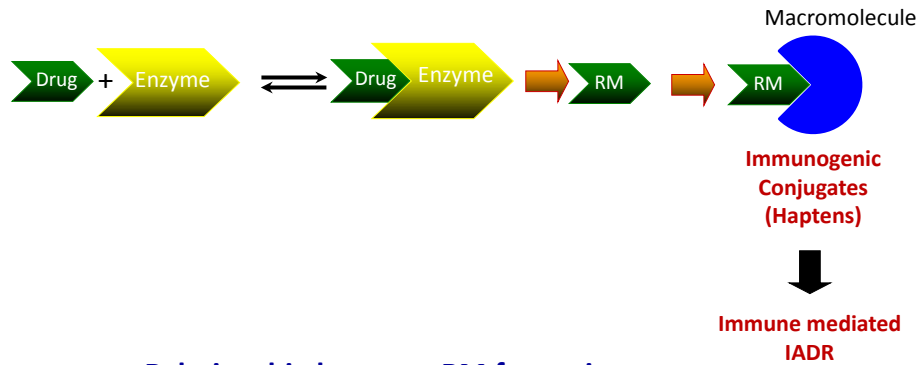


★ RM also associated with inhibition of enzymes – mainly P450

- Covalently bind to the heme or apoprotein
- Results in inactivation of enzyme
- Causes serious DDI



Reactive Metabolites & Idiosyncratic Adverse Drug Reactions (IADR)



Relationship between RM formation
and IADR is not well understood



★ **Basic Premise:**

Molecules that do not produce **Reactive Metabolites**
will not cause IADRs



Basic Tactic Used By Pharma Industry “Avoid Reactive Metabolites”

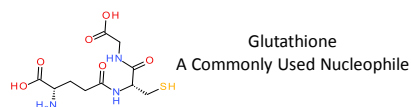
- ★ Two approaches frequently adopted:
- ★ Exclude chemical functionalities undergoing **metabolic activation**
 - So called “**Structural Alerts**” or *known toxicophores*
- ★ Screen for Reactive Metabolite Formation (RM Assays)

Commonly Used Methods

Covalent Binding Method

- ★ Uses Radiolabel
- ★ Most definitive

Trapping Electrophilic Species With Nucleophilic Reagents



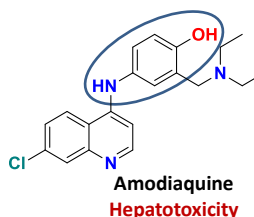
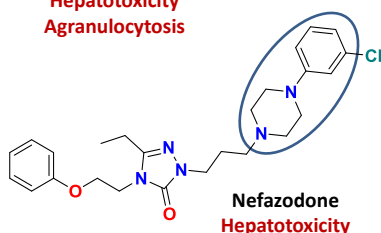
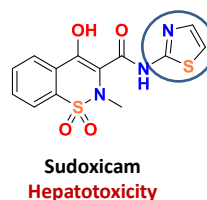
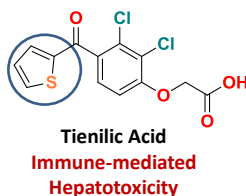
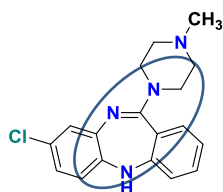
- ✦ Most popular in a discovery setting
- ✦ Acts as a surrogate of covalent binding

Evans D. C. et. al. *Chem. Res. Toxicol.* 2004

★ **Ultimate Goal: Eliminate the liability of RM formation**



Drugs that Possess a Structural Alert can be Toxic!

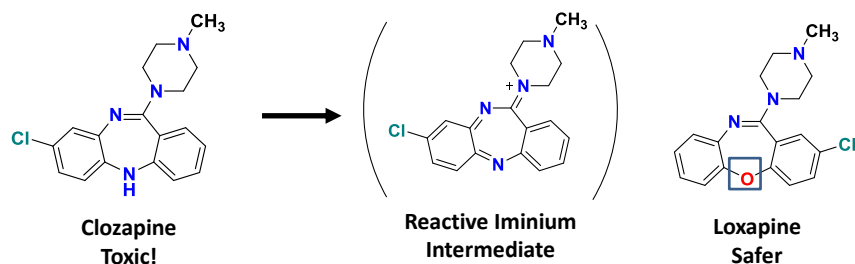


~ 80 % of the drugs associated with IADR
contain structural alerts and form reactive metabolites

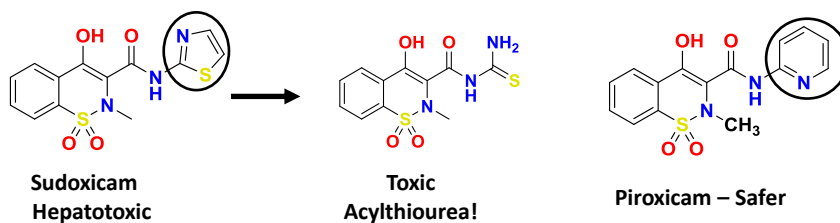
Stefan, A. et. al. 2011 *Chem. Res. Toxicol.* 24:1345-1410



Absence of Structural Alerts Improves Safety Profile of Drugs



Utrecht et. al. 1997, Chem-Bio Interactions 104:117



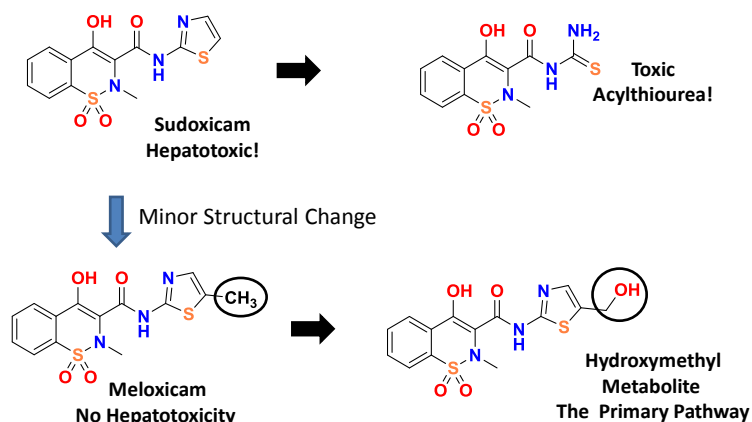
**Definitely a good idea to replace motifs
that form reactive metabolites!**



Not that Straightforward



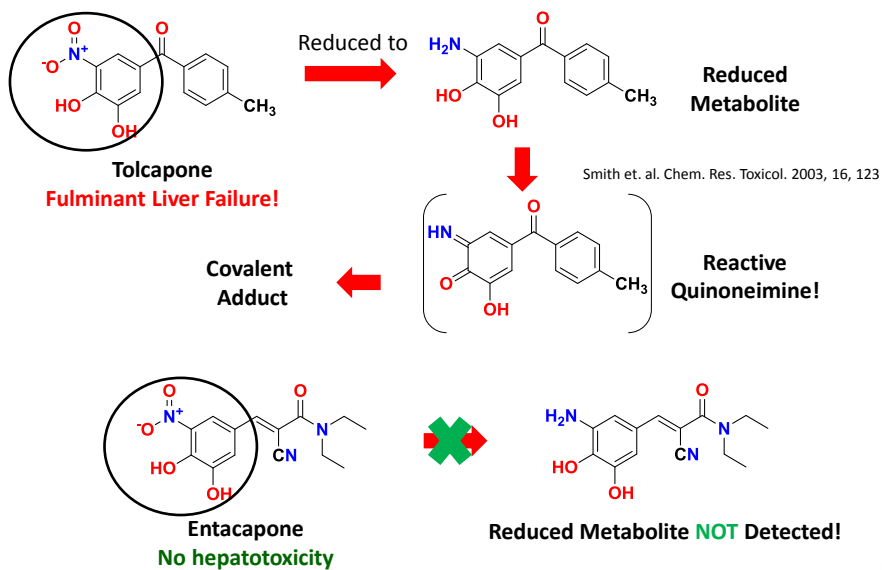
All Molecules with Structural Alerts Are Not Bioactivated!



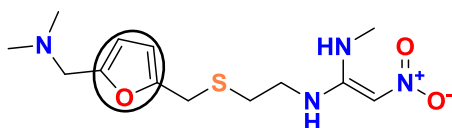
Introduction of **methyl** group **dramatically** alters the metabolic profile

Obach et.al. CRT 2008 21:1890

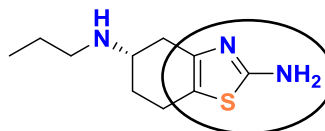
Tolcapone versus Entacapone



Some Molecules Contain A Structural Alert BUT the Clearance Mechanism is Different



Ranitidine
SA - Furan

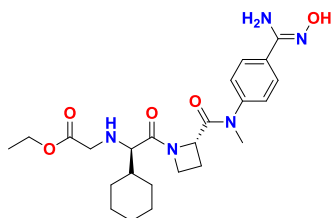


Pramipexole
SA - Aminothiazole

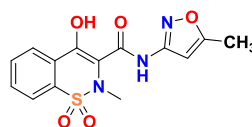
Both drugs are renally excreted!



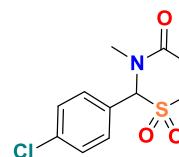
Some Molecules Devoid of SA Are Toxic



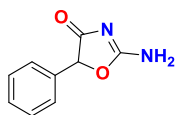
Ximelagatran



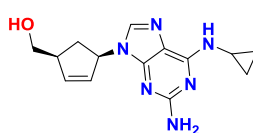
Isoxicam



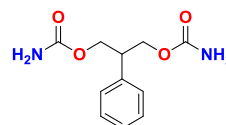
Chlormezanone



Pemoline



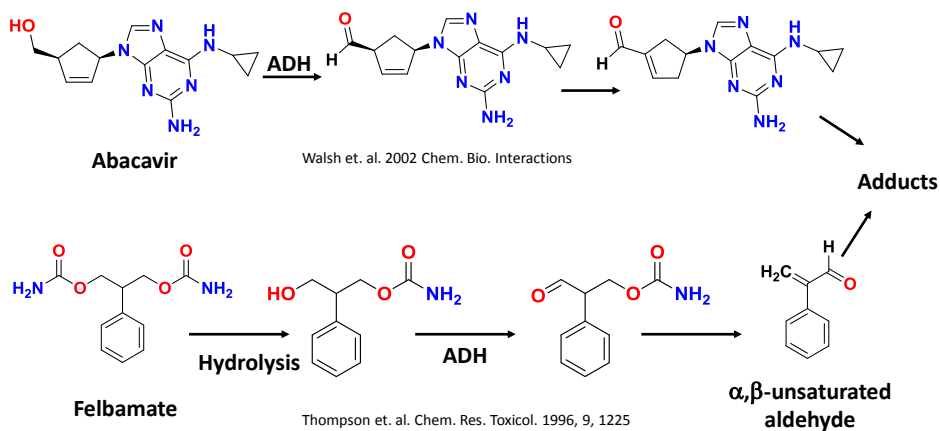
Abacavir



Felbamate



Felbamate and Abacavir – No Typical SA But Bioactivated!



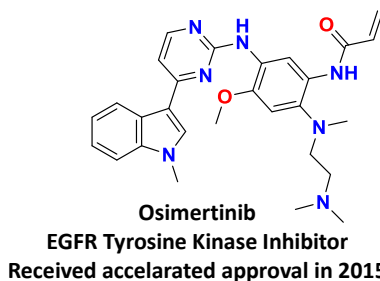
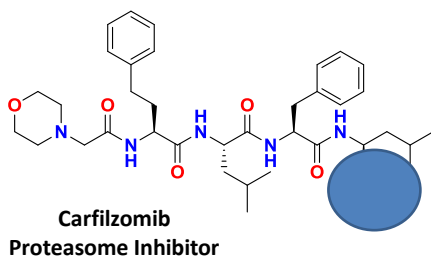
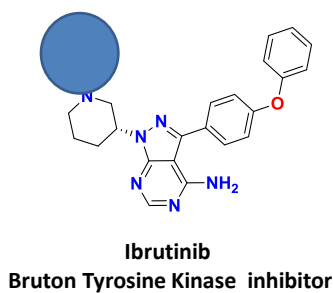
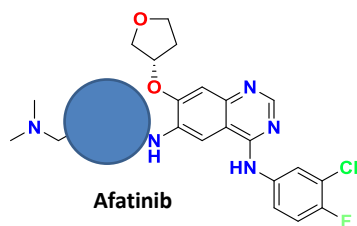
Relying on structural alert database alone may not be the right thing!

As new motifs are introduced – new structural alerts may surface

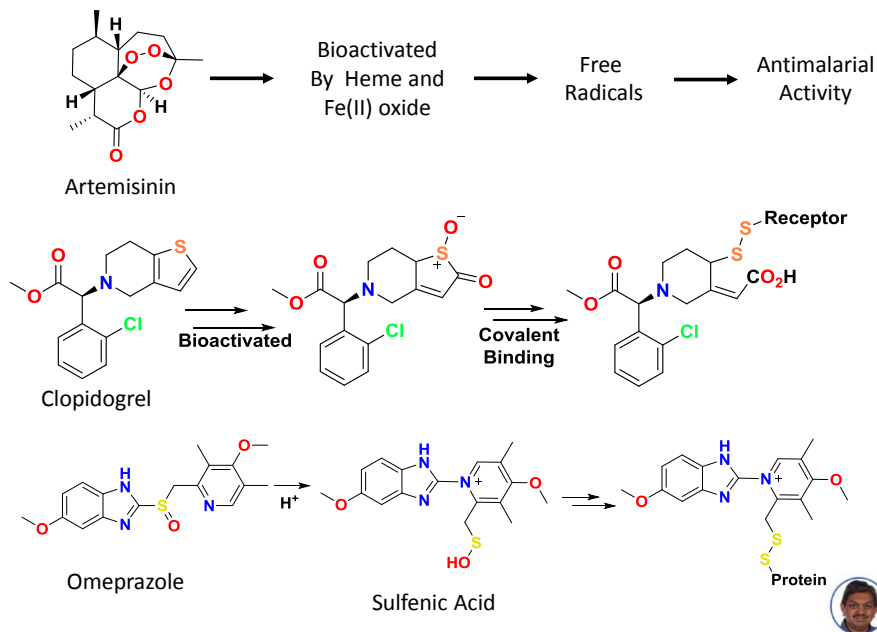


Recently Approved
Irreversible Inhibitors

Structural Alerts Are Back!!

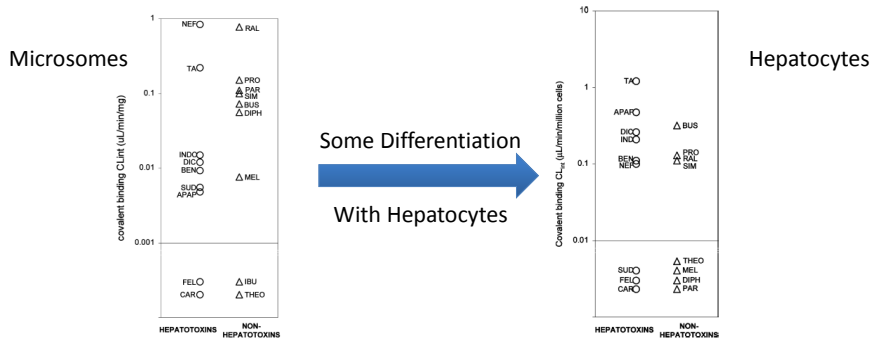


Some Compounds Need Bioactivation to Exert Action



What About Reactive Metabolite Assays?

Data Generated By Obach and his Colleagues



★ Overlap observed between hepatotoxins and non-hepatotoxins

Bauman *Chem. Res. Toxicol.* 2009, 22, 332-340
Obach *Chem. Res. Toxicol.* 2008, 21, 1814-1822

Covalent Binding or GSH adduct formation only suggests the presence of an electrophilic intermediate!

★ Lack of Covalent Binding or GSH Adduct formation does not guarantee safety



What Does This Tell Us?

★ Avoiding SA and eliminating RM formation– makes sense

- Avoids Risks

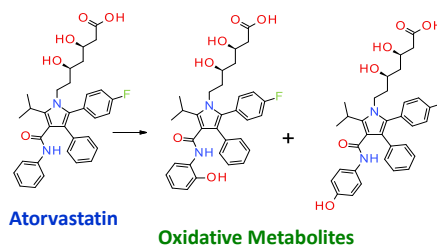
★ Reactive Metabolite formation **does not** predict toxicity

- No guarantee that **elimination of reactive metabolites** will make a safe drug
- Presence of a **structural alert** will **not** make the molecule **toxic**!

★ Several widely prescribed drugs form reactive metabolites

□ Stefan, A. et. al. 2011 *Chem. Res. Toxicol.* 24:1345-1410

Even a #1 Blockbuster drug
contains SA
and can form potential RMs



Bottomline

**NO ASSAY OR KNOWLEDGE BASED SYSTEMS
CAN PREDICT THE POTENTIAL OF A DRUG TO CAUSE IADR !**

More to it than just bioactivation!



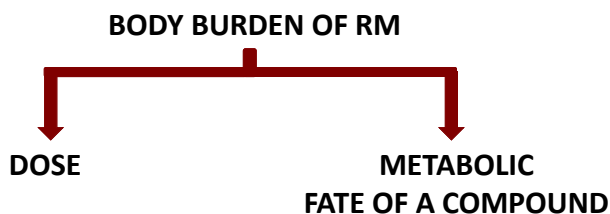
Why is there a Disconnect?

- ★ Several factors influence toxicity
 - Bioactivation is a part of it
- ★ Some other factors that may result in IADRs
 - Direct association with Human Leukocyte Antigen (HLA)
 - Examples:
 - ❖ Abacavir
 - ❖ Allopurinol
 - ❖ Carbamazepine
 - ❖ Flucloxacillin
 - Transporters – Inhibition of the Bile Salt Export Pump (BSEP)
 - Examples
 - ❖ Bosentan
 - ❖ Imatinib
 - It is multi-factorial most of the times
 - Troglitazone



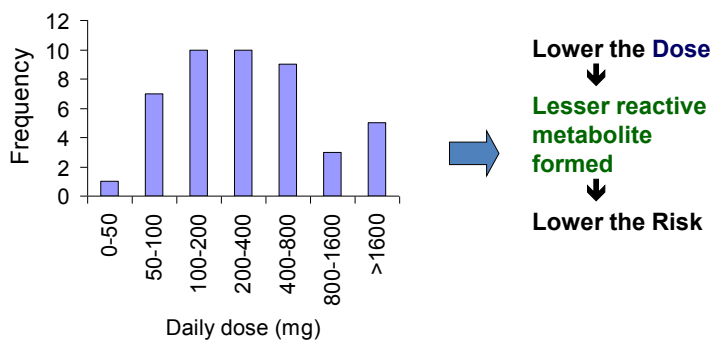
What is the Path Forward?

- ★ Body Burden of a Reactive Metabolite can influence IADR
- ★ One Strategy - Reduce the body burden of the electrophilic intermediate



Impact of DOSE – Now a Well Known Concept!

★ Low dose reduces the risk of IADRs



Kalgutkar, A. et. al. 2005, *Curr. Drug Metab.* 6:161:225

Uetrecht, J. 1999 *Chem. Res. Toxicol.* 12:387-95

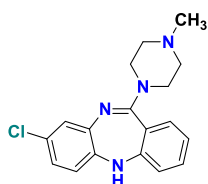
Lammert, C. et. al. 2008, *Hepatology* 47:2003-2009

Stefan, A. et. al. 2011 *Chem. Res. Toxicol.* 24:1345-1410

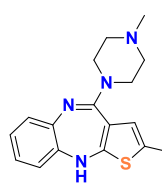


Impact of Dose on Toxicity

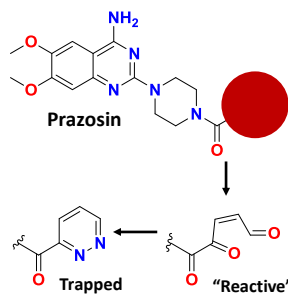
Mol Pharmacol 1998 53:999



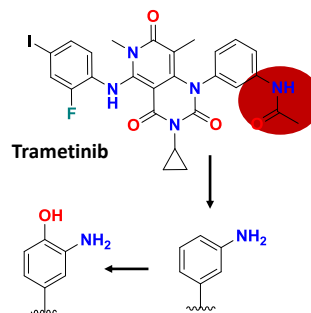
Clozapine
Dose: 300-900 mg



Olanzapine
Dose: 10 mg



Erve et. al. DMD 2007 35:908



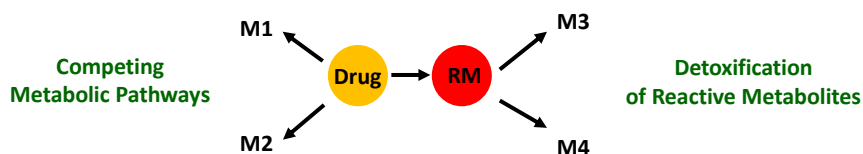
Both Are Structural Alerts!



Other Driver of RM Body Burden – Metabolic Fate

★ Amount of a Reactive Metabolite Formed depends on:

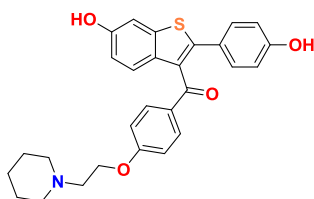
- Contribution of competing metabolic routes
- Contribution of pathways that detoxify the reactive metabolite



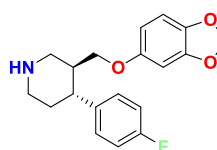
More the pathways \Rightarrow lesser the amount of RM



Raloxifene & Paroxetine



Raloxifene



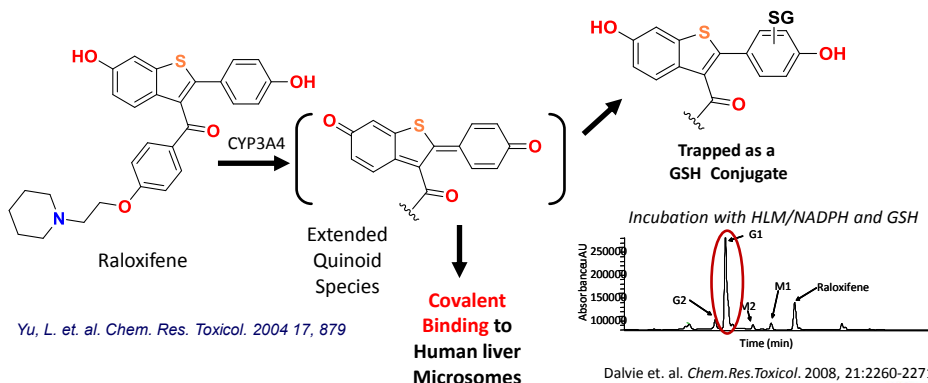
Paroxetine

Two cases that illustrate influence of metabolic pathways on RM body burden



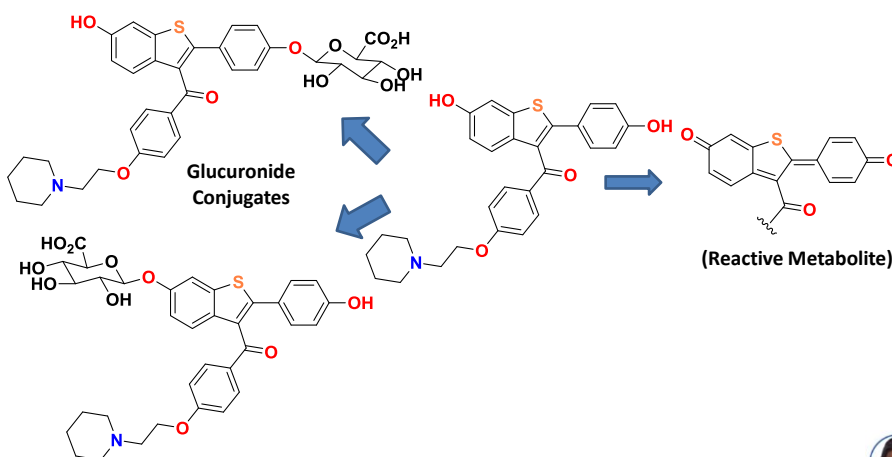
The Raloxifene Case

- ★ Raloxifene - A selective estrogen receptor modulator (SERM)
- ★ Bioactivated by CYP3A4 to quinoid intermediates
- ★ A mechanism-based inhibitor of CYP3A4 – covalently binds to Cys residue in CYP3A4 (CRT 2007)
- ★ No IADRs or DDIs reported



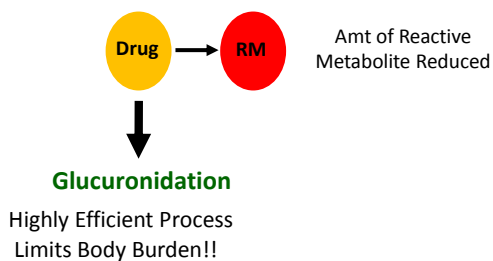
Why is Raloxifene is Devoid of any IADRs or DDI ?

- ★ Primary route of raloxifene metabolism – Glucuronidation
- ★ Highly efficient glucuronidation pathway competes with oxidation



Competing Pathways Make A Difference

- ★ Glucuronidation limits the amount of raloxifene undergoing bioactivation



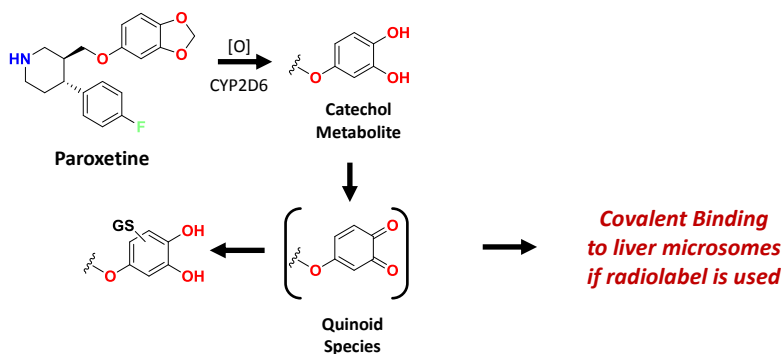
Dalvie et.al., (2008) *Chem. Res. Toxicol.* 21, 2260.

- ★ Dose may also influence (Dose of raloxifene – 60 mg QD)



Paroxetine Case

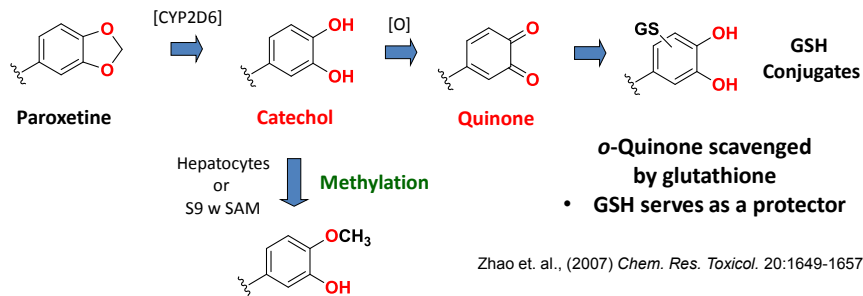
- ★ Paroxetine – a widely used antidepressant
- ★ Undergoes metabolic activation
- ★ But Paroxetine is not a hepatotoxin!



Zhao et. al., (2007) *Chem. Res. Toxicol.* 20:1649-1657.



Detoxification of Reactive Metabolite and its Precursor Influences its Body Burden



★ **Methylation limits the amount of catechol being oxidized**

★ **Dose may contribute:**

- **Paroxetine - Low daily dose (20 mg QD)**
- **Reactive metabolite burden is readily handled by endogenous glutathione pool**

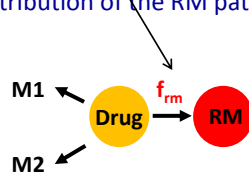


What did we learn from this ?

★ **It is all about Body Burden!**

★ **RM Body Burden is dependent on**

- **Dose**
- **Contribution of the RM pathway**



★ **Knowledge of the complete metabolite profile is important**

- **Important to use integrated tissue systems**
- **Liver S9 w co-factors or hepatocytes** rather than liver microsomes



Take Home Message!

★ Predicting toxicity of RM-Positive compounds is challenging

★ Good to avoid **Structural Alerts**

- Replace if a bioisotere is available
 - If there is no loss of pharmacological activity
- Avoids unnecessary risk assessment

★ If the **Structural Alert** is necessary for activity

- Demonstrate if the SA is prone to RM using met ID

★ RM Assays are good “Gate Keepers”

- A “flag” to trigger additional studies
- GSH adducts provide a mechanistic understanding of bioactivation
- **Results** need to be put in right context



Take Home Message!

★ Keeping the dose low is important

- Exposure to RM is tolerated

★ Estimation of RM Body Burden could be useful

- A more positive step towards prediction of IADR Risks

B.K. Park et. al. *Nature Drug Discovery* 10, 292-309 (2011) – A seminal paper!



ANSWER THE QUESTION ON BLUE SCREEN IN ONE MOMENT

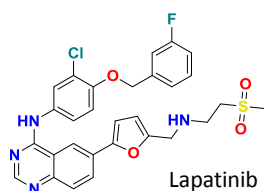


- Indication
- Route of Administration
- Target Population
- pH
- Medical need

Never Forget Other Factors!

★ Level of Risk also depends on factors such as

- Indication
- Medical need
- Target population ...



High Dose – 1250 mg
Black box warning
Metabolites – contain SA
Indication – ONCOLOGY

★ These factors will influence the avoidance strategy



Acknowledgements



Amit Kalgutkar – Cambridge Site

Scott Obach – Groton Site

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Kalgutkar, A.S., Dalvie, D.K., Obach R.S., Smith D.A.

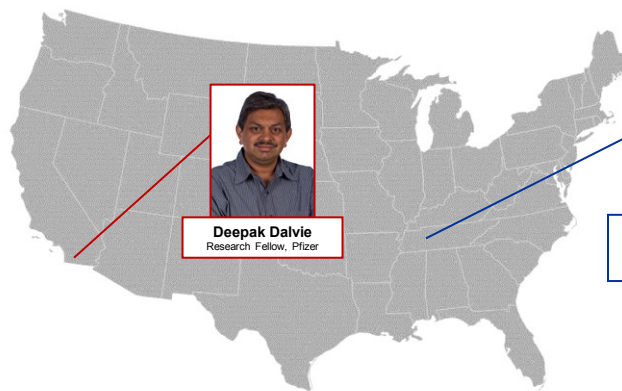




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Deepak Dalvie
Research Fellow, Pfizer



F. Peter Guengerich
Professor of Biochemistry and the
Director of the Center in Molecular
Toxicology Vanderbilt University

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February 25	Long-Acting Injectable Medications: Strategies and Mechanistic Considerations Jules Remenar - Alkermes Annette Bak - Merck
March 31	Modified Release Formulations for Solubility Starved Compounds Mengwei Hu - Merck John Morrison - BMS
April 28	The Medicinal Chemist of Tomorrow (Special Topic) Joel Barrish - Achillion Ravi Nangund - Merck Molly Schmid - Tech Coast Angels
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Darren Griffin, Professor of Genetics, University of Kent

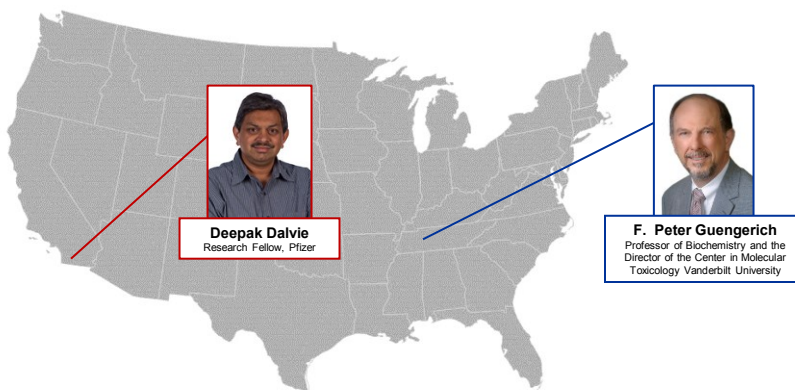
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