
Discovery of potent trifluoromethyl acrylamide warhead-containing inhibitors against a cysteine-based enzyme

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研究主題

Development of selective histone deacetylase inhibitors
Design of kinase inhibitors targeting idiopathic pulmonary fibrosis
Natural product-inspired drug development

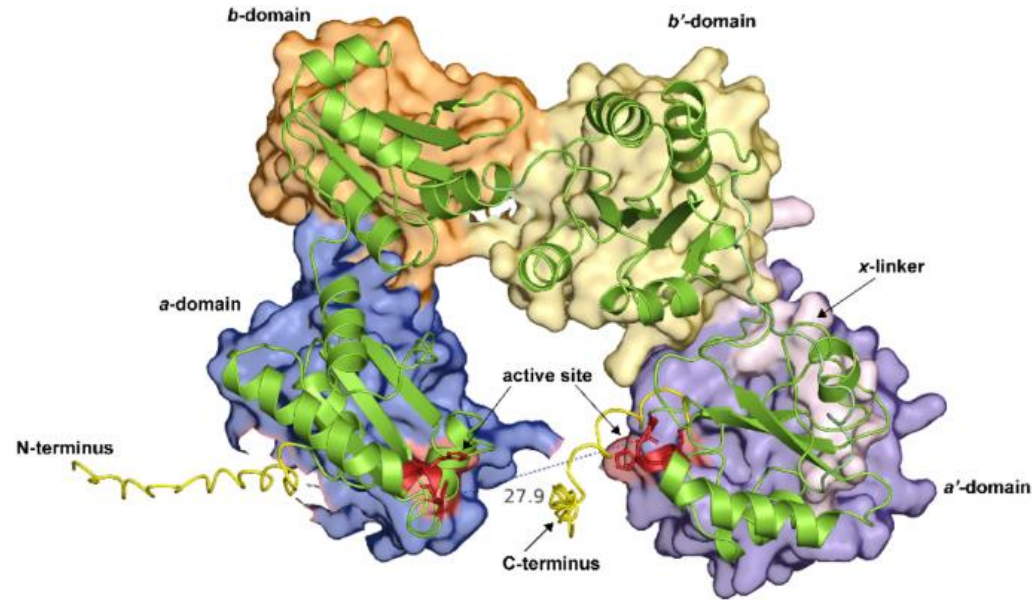
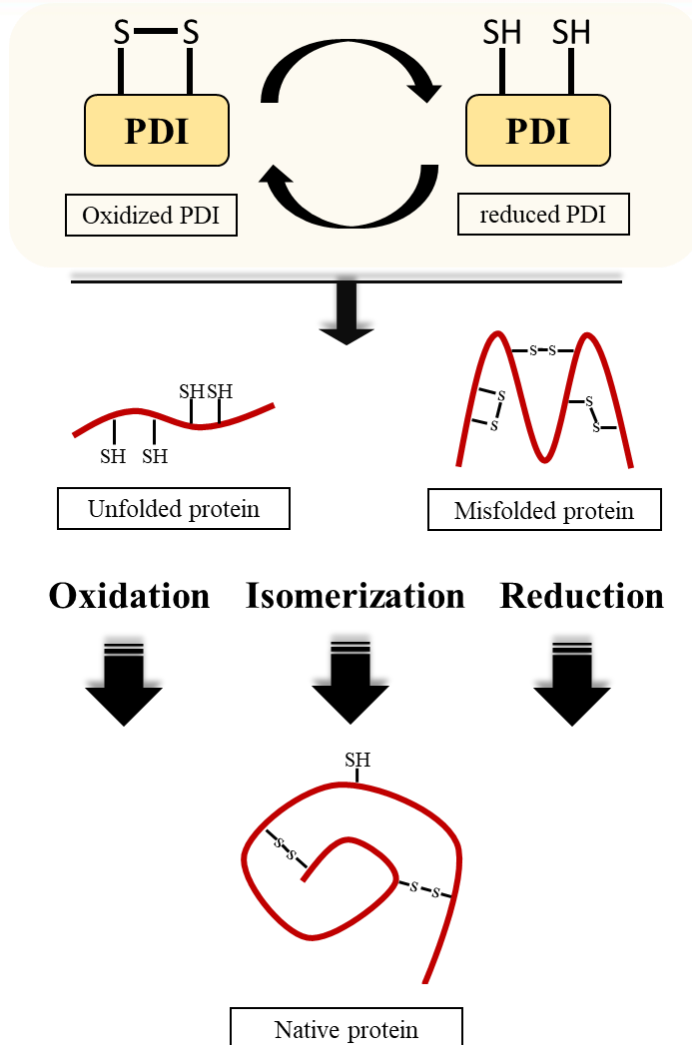
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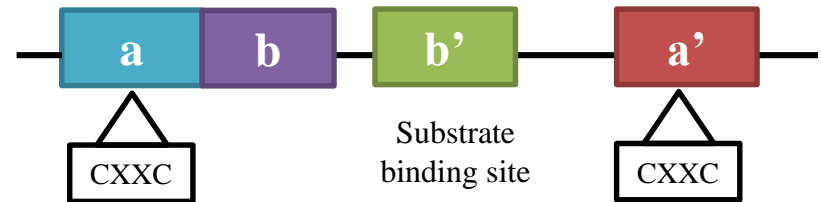
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Protein disulfide isomerases (PDIs)

















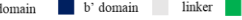


Cell & Bioscience (2022) 12:129



Classification of PDIs

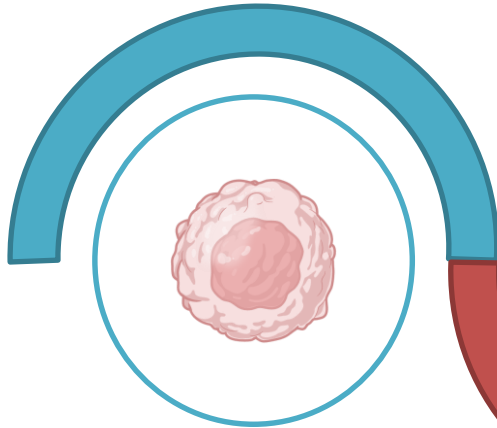
- The 21 members of PDI family regulate multiple biological function in various tissue due to difference of **localization**, **structure**, **enzyme property** and **substrate specificity**.

Protein name	Domain composition	Subcellular location	Amino acids
PDIA1		Endoplasmic reticulum Extracellular space Plasma membrane Cytosol	508
PDIA2		Endoplasmic reticulum	525
PDIA3		Endoplasmic reticulum Extracellular space Nucleus	505
PDIA4		Endoplasmic reticulum Extracellular space	645
PDIA5		Endoplasmic reticulum	519
PDIA6		Endoplasmic reticulum Extracellular space Plasma membrane Cytosol	440
PDIA7		Endoplasmic reticulum	584
PDIA8		Endoplasmic reticulum	273
PDIA9		Endoplasmic reticulum	261
PDIA10		Endoplasmic reticulum Extracellular space	406
PDIA11		Endoplasmic reticulum	280
PDIA12		Endoplasmic reticulum Mitochondrion	296
PDIA13		Endoplasmic reticulum Plasma membrane	454
PDIA14		Endoplasmic reticulum Nucleus	349
PDIA15		Endoplasmic reticulum Extracellular space Lysosome	432
PDIA16		Endoplasmic reticulum	172
PDIA17		Endoplasmic reticulum Extracellular space	175
PDIA18		Endoplasmic reticulum	166
PDIA19		Endoplasmic reticulum	793
PDIB1		Endoplasmic reticulum Mitochondrion	396
PDIB2		Endoplasmic reticulum	399

Overexpression of PDIs in various disease

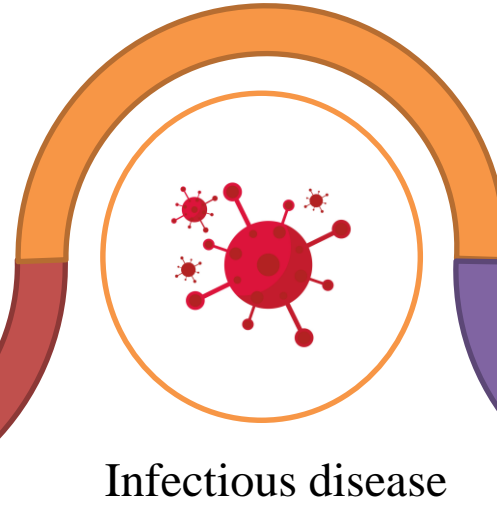
Cardiovascular disease

- **Thrombosis**
- Atherogenesis



Cancer

- Breast cancer
- Multiple myeloma
- Ovarian cancer
- **Glioblastoma multiforme**

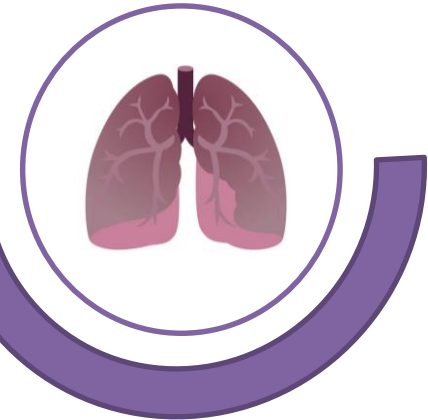


Infectious disease

- Influenza A and B virus
- Human immunodeficiency virus 1 (HIV-1)
- Dengue virus (DENV)

Fibrosis-related disease

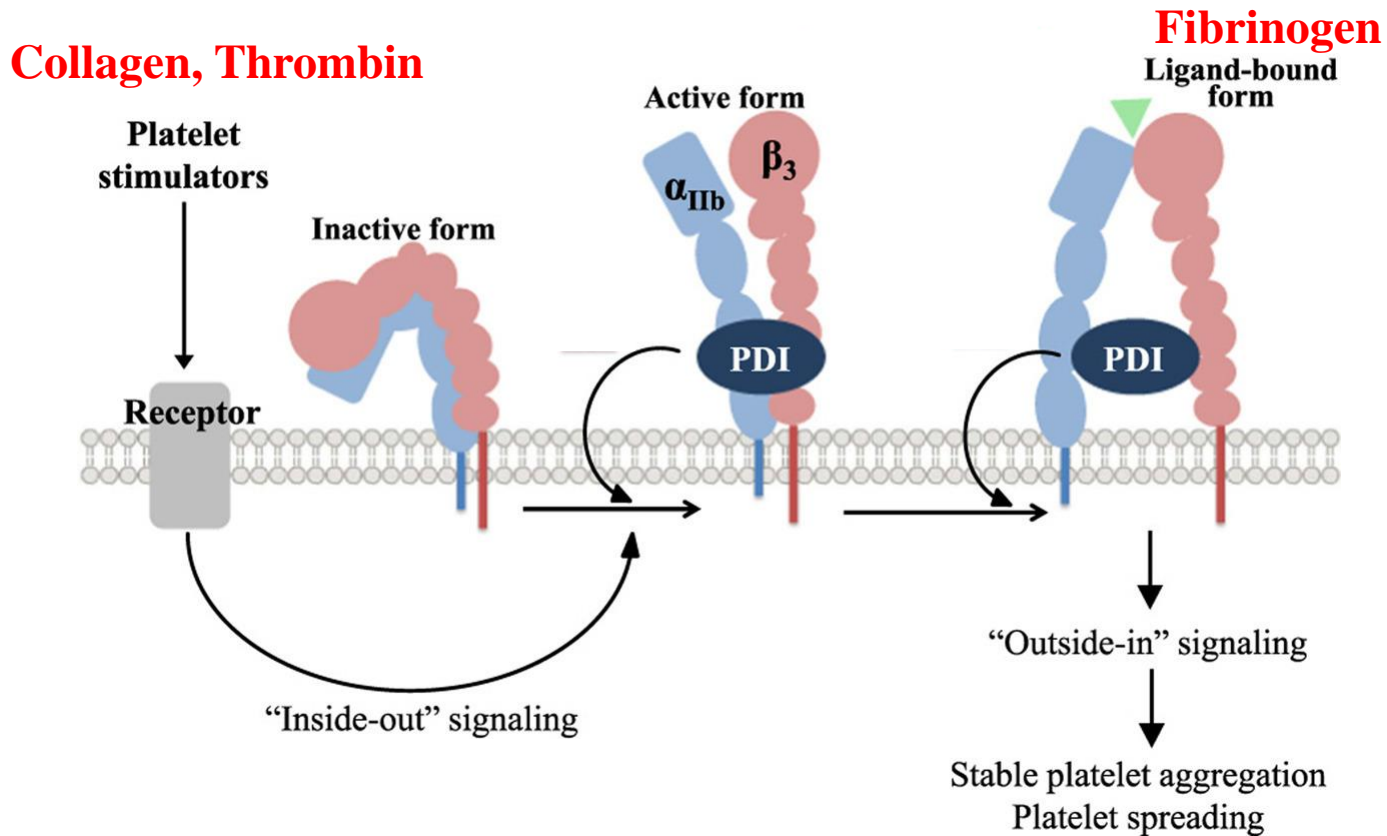
- Lung fibrosis
- Kidney fibrosis
- Heart fibrosis
- Liver fibrosis



The role of PDI in thrombus

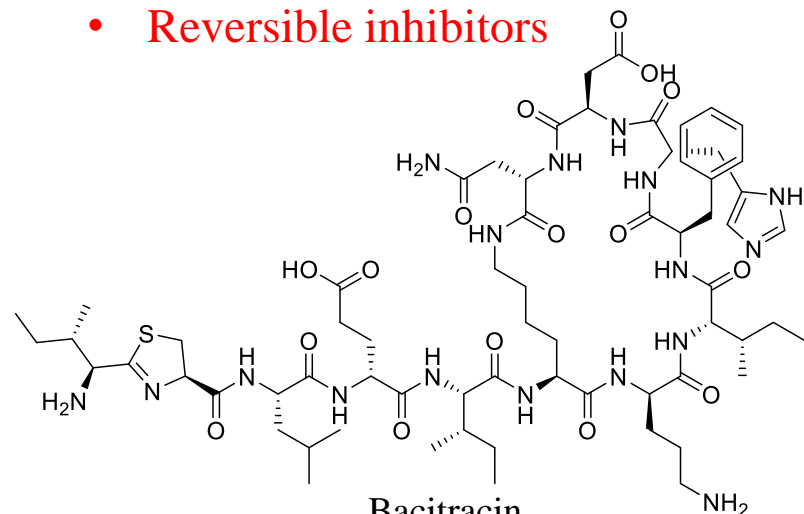
- **Inhibition of PDI decreases platelet thrombus and fibrin formation** in a mouse model of laser-induced cremaster arteriolar injury. *J Clin Invest* 2008, 118, 1123-31
- Loss of platelet PDI in megakaryocyte-specific PDI CKO mice leads to weak activation of $\alpha\text{IIb}\beta\text{3}$ integrin after agonist stimulation, resulting in **reduced platelet thrombus formation** in vivo. *J Clin Invest* 2015, 125, 4391-406
- Tail bleeding time and blood loss did not significantly increase in platelet-specific PDI-deficient mice, compared with control mice. *Blood*. 2013 Aug 8; 122(6): 1052–1061.
- Mice treated with myricetin displayed similar bleeding time when compared to vehicle control. *Front. Pharmacol.*, 31 January 2020

Platelet aggregation

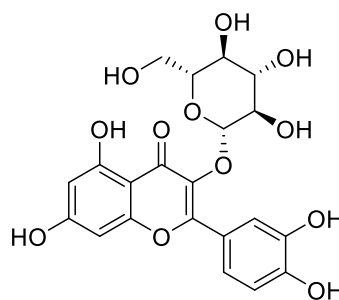


PDI inhibitors

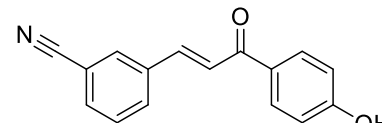
- Reversible inhibitors



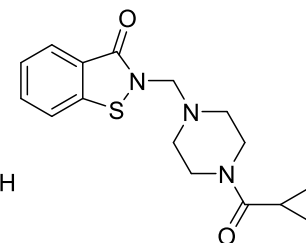
PDI = 150-200 μM



PDI = 6 μM

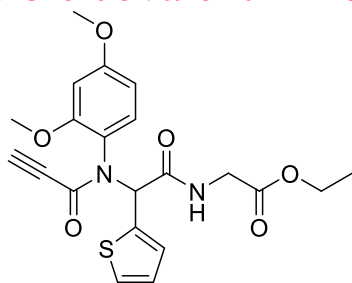


PDI = 0.9 μM

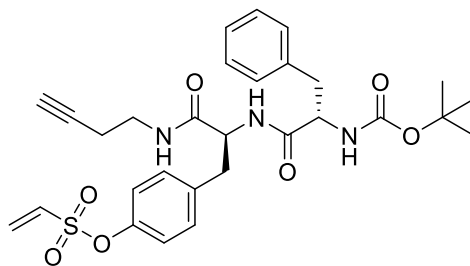


PDI = 5 μM

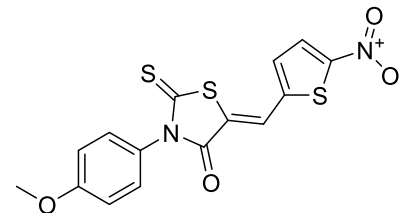
- Irreversible covalent inhibitors



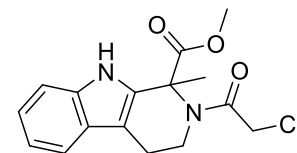
PDI = 30.2 μM



PDI = 1.7 μM

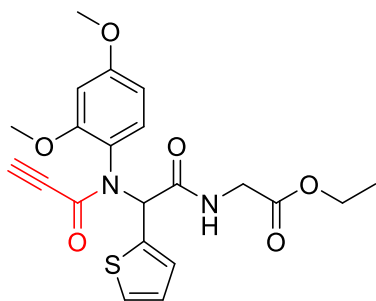


PDI = 2.9 μM

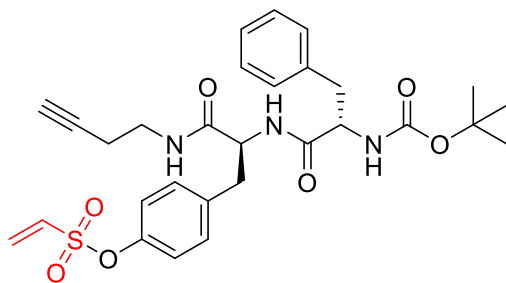


PDI = 70 μM

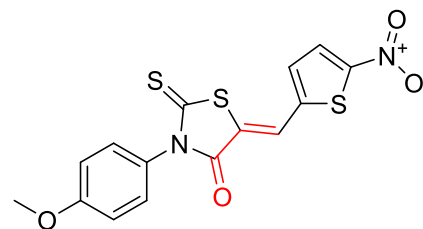
Covalent inhibitor



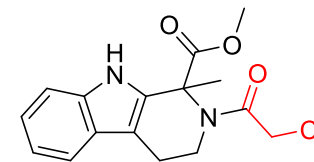
PACMA31



P1

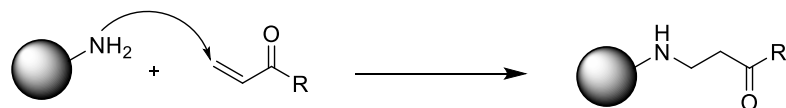
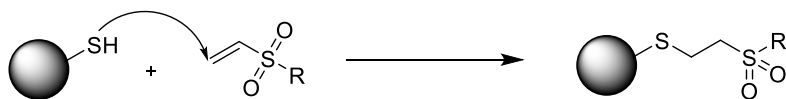
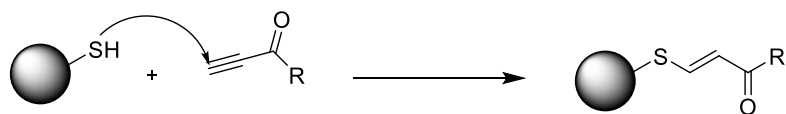


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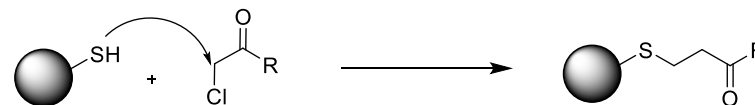


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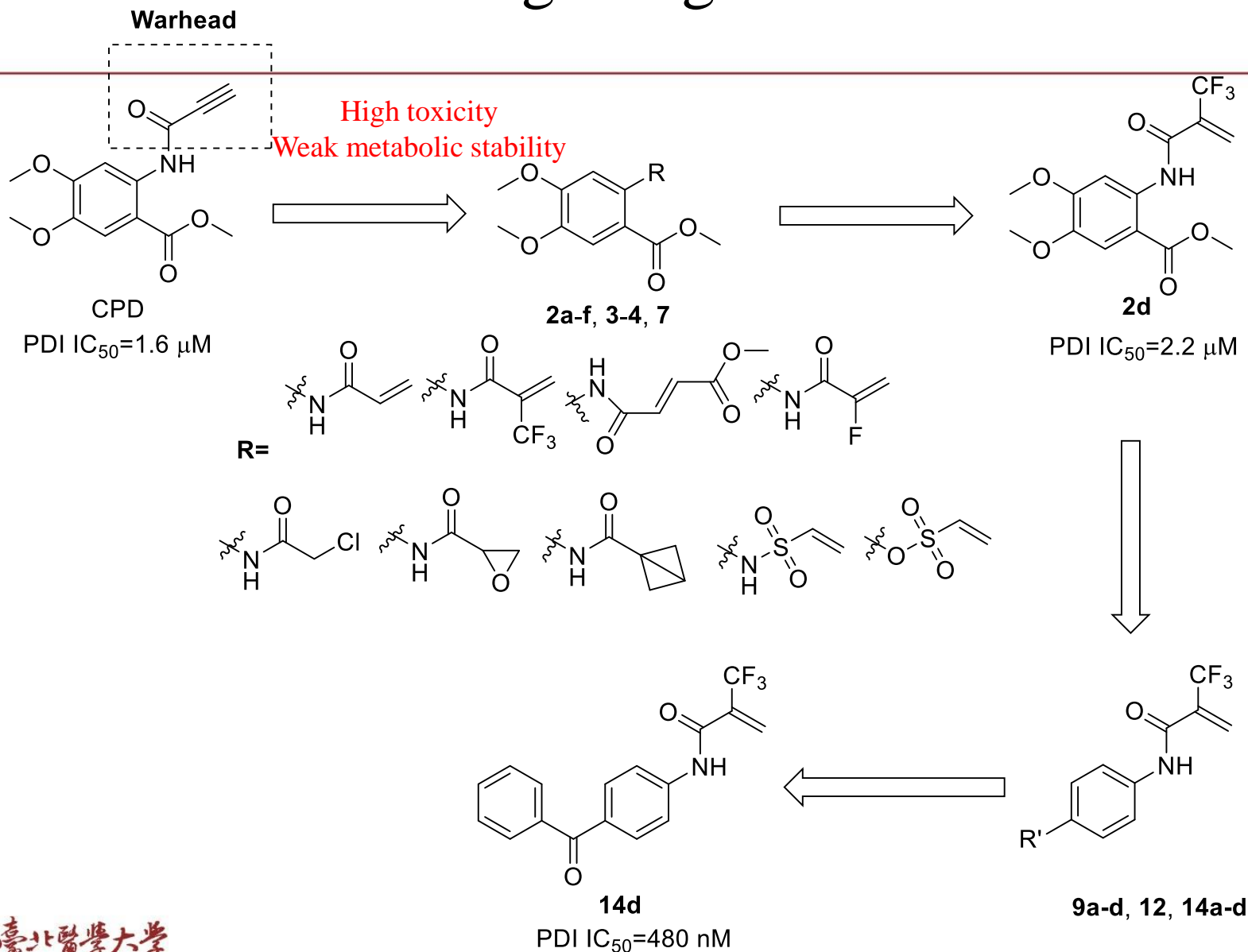
Michael addition



Nucleophilic substitution



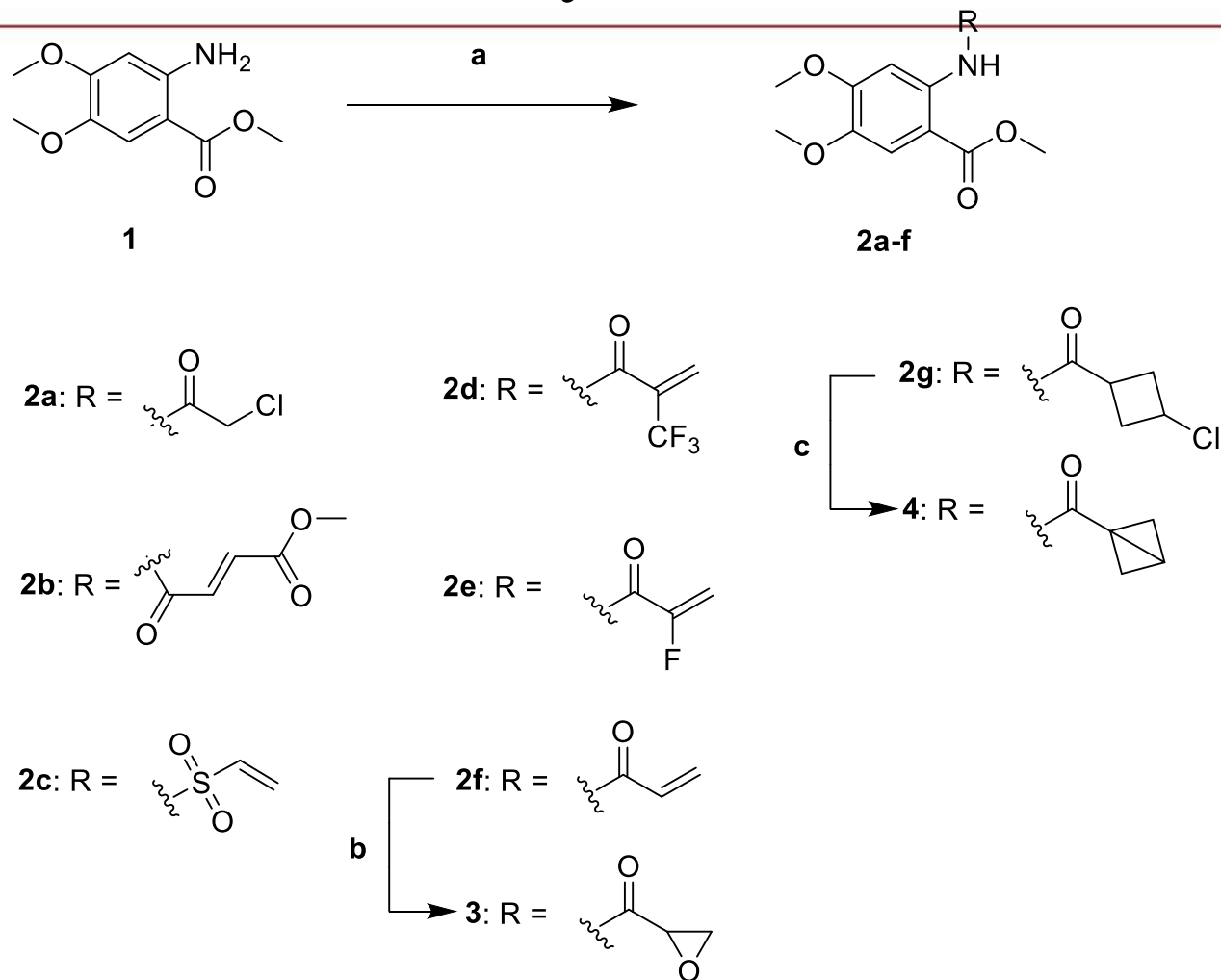
Drug design



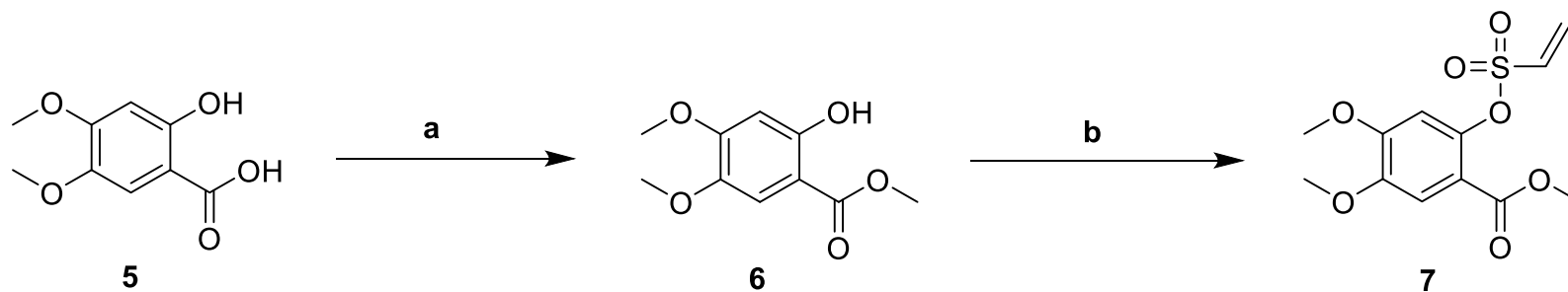


Results and discussion

Chemistry

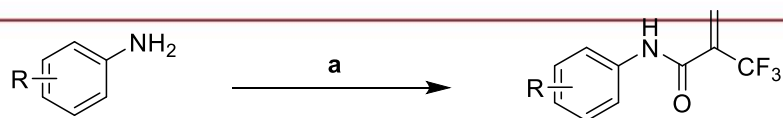


Chemistry



Reagents and conditions: (a) H_2SO_4 , MeOH, Δ ; (b) 2-chloroethane-1-sulfonyl chloride, Et_3N , CH_2Cl_2

Chemistry



8a: R = 3,4-DiOMe

8b: R = 3,4,5-TriOMe

8c: R = 4-CF₃

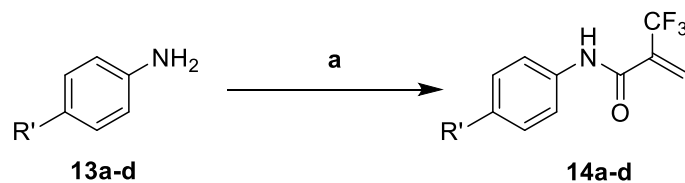
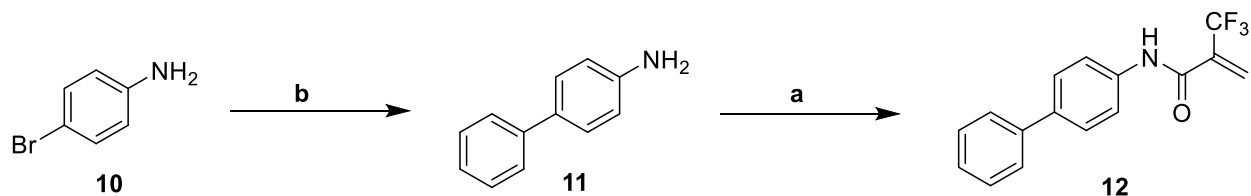
8d: R = 4-*t*-butyl

9a: R = 3,4-DiOMe

9b: R = 3,4,5-TriOMe

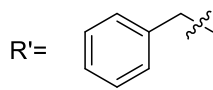
9c: R = 4-CF₃

9d: R = 4-*t*-butyl

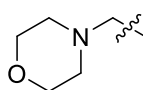


13a-d

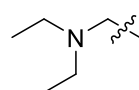
14a-d



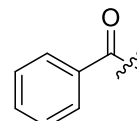
a



b

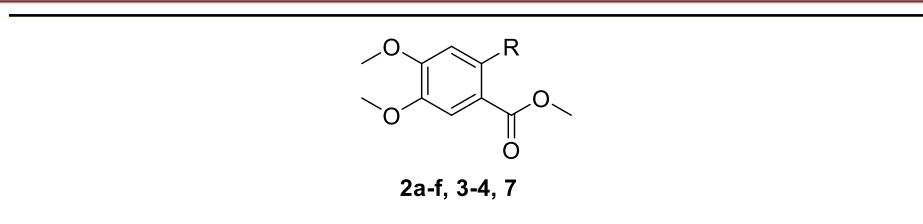


c



d

Table 1. IC₅₀ values (nM) of enzyme inhibition of compounds **2a-f**, **3-4**, **7** against PDIA1



Compound	IC ₅₀
2a	>40000
2b	>40000
2c	18800
2d	2200
2e	>40000
2f	>40000
3	>40000
4	>40000
7	1100
CPD	1600

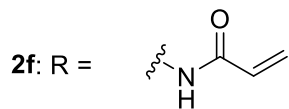
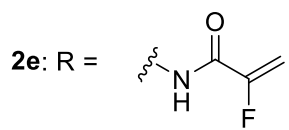
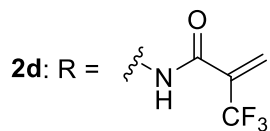
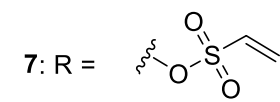
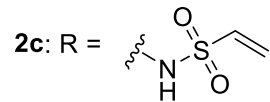
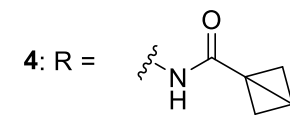
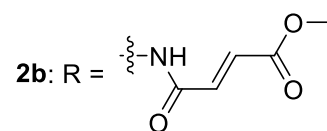
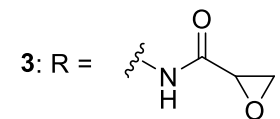
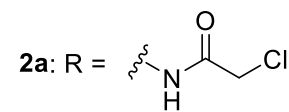
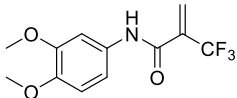
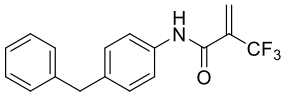
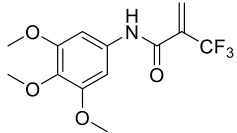
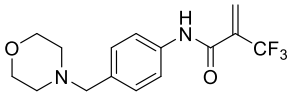
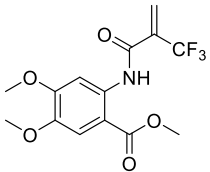
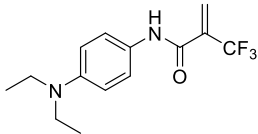
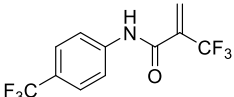
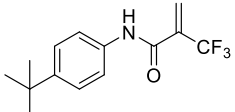
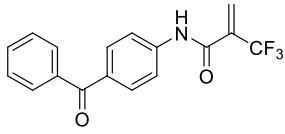
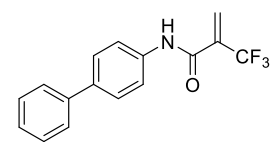


Table 2. IC₅₀^a values (nM) of enzyme inhibition of compounds **9a-d**, **12** and **14a-d** against PDIA1

Compound	IC ₅₀		
9a	3000 ₋ 500		
9b	580 ± 57		
9c	680 ± 21		
9d	870 ± 16		
12	1630 ± 280		
14a	560 ± 16		
14b	1210 ± 48		
14c	840 ± 45		
14d	480 ± 4		



12

16

^a Data are provided from three independent experiments.

Compound **14d** is identified as a reversible covalent PDI inhibitor

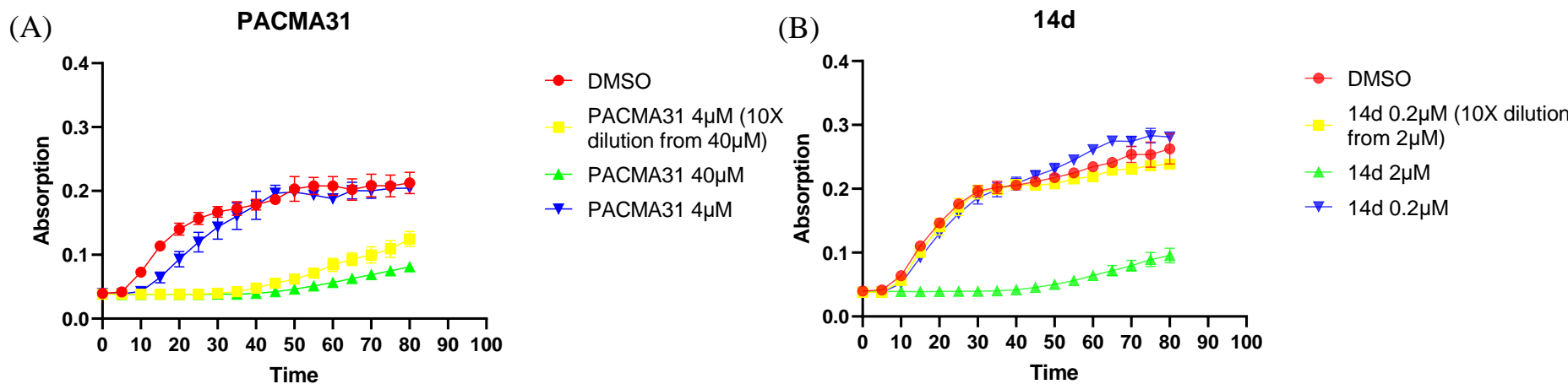
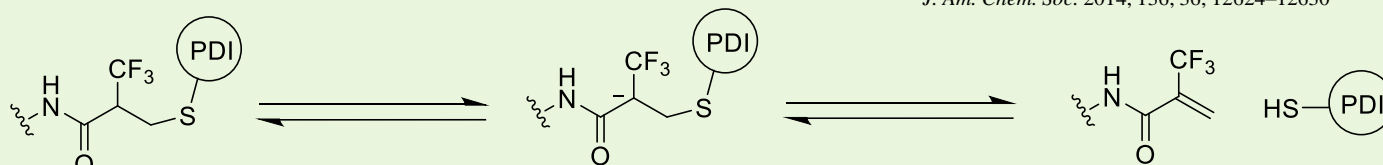


Figure 1. Reversibility of compound **14d** inhibition of PDI (A) Pre-incubation of PCAMA 31 (40 μM) with recombinant PDI were diluted 10-fold with buffer (yellow). The PDI inhibitory activity was determined to compare with samples containing PDI in the absence (red) or presence of 4 μM (green) or 40 μM (blue) PACMA31. (B) Pre-incubation of **14d** (2 μM) with recombinant PDI were diluted 10-fold with buffer (yellow). The PDI inhibitory activity was determined to compare with samples containing PDI in the absence (red) or presence of 0.2 μM (green) or 2 μM (blue) **14d**.

- The computed proton affinity of the corresponding carbanions, suggesting that the acidity of the proton at the α -position of the adduct provides the driving-force for the β -elimination.



Molecular modeling analysis of compound **14d** against PDIA1

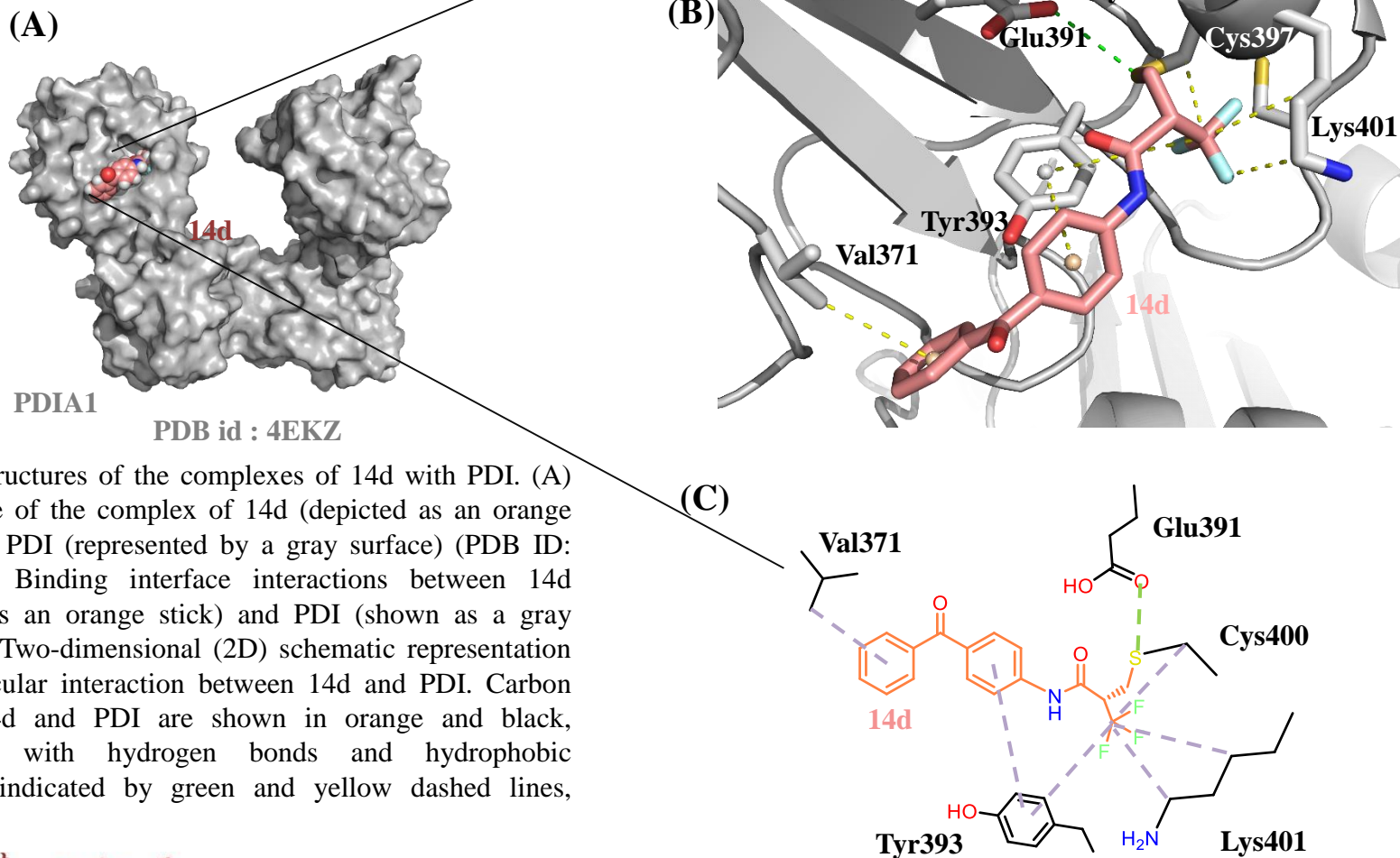
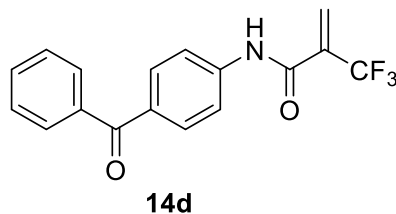


Figure 2. Structures of the complexes of 14d with PDI. (A) The structure of the complex of 14d (depicted as an orange sphere) with PDI (represented by a gray surface) (PDB ID: 4EKZ). (B) Binding interface interactions between 14d (illustrated as an orange stick) and PDI (shown as a gray ribbon). (C) Two-dimensional (2D) schematic representation of the molecular interaction between 14d and PDI. Carbon atoms in 14d and PDI are shown in orange and black, respectively, with hydrogen bonds and hydrophobic interactions indicated by green and yellow dashed lines, respectively.

Compound **14d** exhibited PDIA1 selectivity over other isoform enzymes

Table 3. IC₅₀^a values (μM) of enzyme inhibition of compounds **14d** and PACMA31 against PDIA3 and PDIA6



Compound	PDIA1 (PDI)	PDIA3 (ERp57)	PDIA6 (ERp5)
12g	0.48 ± 0.004	1.52 ± 0.01	7.10 ± 2.21
PACMA31	12.4	28.09 ± 1.94	>40

^a Data are provided from three independent experiments.

Compound **14d** significantly inhibited platelet aggregation

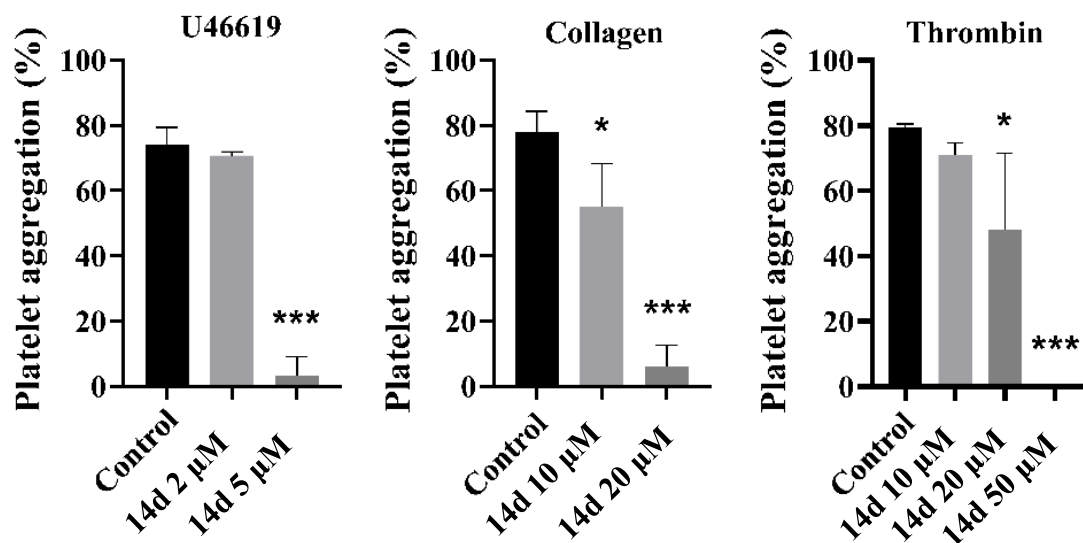


Figure 3. Effects of **14d** on human platelet aggregation. Washed human platelets were incubated with DMSO or **14d** (2 – 50 μM) for 3 min, and then platelet aggregation was induced by U46619 (1 μM), collagen (5 μg/ml) or thrombin (0.05 U/ml). Results were obtained in three independent experiments (mean ± SEM). *P < 0.05 or ***p < 0.001 as compared with control.

Table 4. IC₅₀^a values (μM) of anti-platelet aggregation of compounds **14d**

	U46619	Collagen	Thrombin
14d	3.5 ± 0.1	13.0 ± 1.4	25.5 ± 6.8

^a Data are provided from three independent experiments.

Compound **14d** remarkably inhibited GPIIb/IIIa activation and P-selectin expression

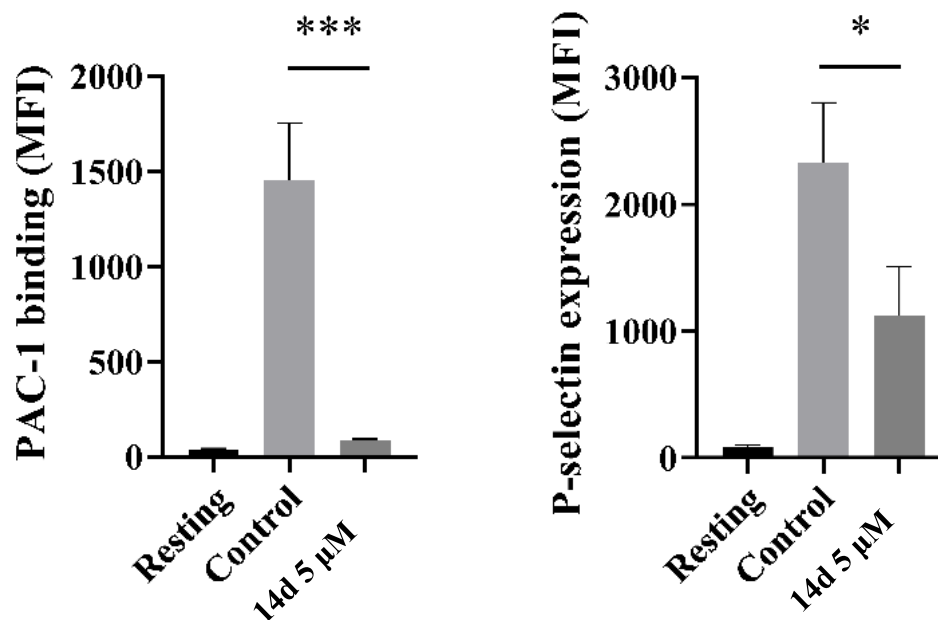


Figure 4. Effects of **14d** on GPIIb/IIIa activation and P-selectin expression. Washed human platelets were incubated with DMSO or **14d** (5 μM) for 3 min, and then stimulated with U46619 (1 μM) for another min. The expressions of active form of GPIIb/IIIa (A) and P-selectin (B) on the cell surface of platelets were determined using flow cytometry with PAC-1-FITC and anti-CD62P-PE antibodies respectively. Results were obtained in three independent experiments (mean ± SEM). * $P < 0.05$ or *** $p < 0.001$ as compared with control.

Compound **14d** significantly reduced *in vitro* thrombus formation

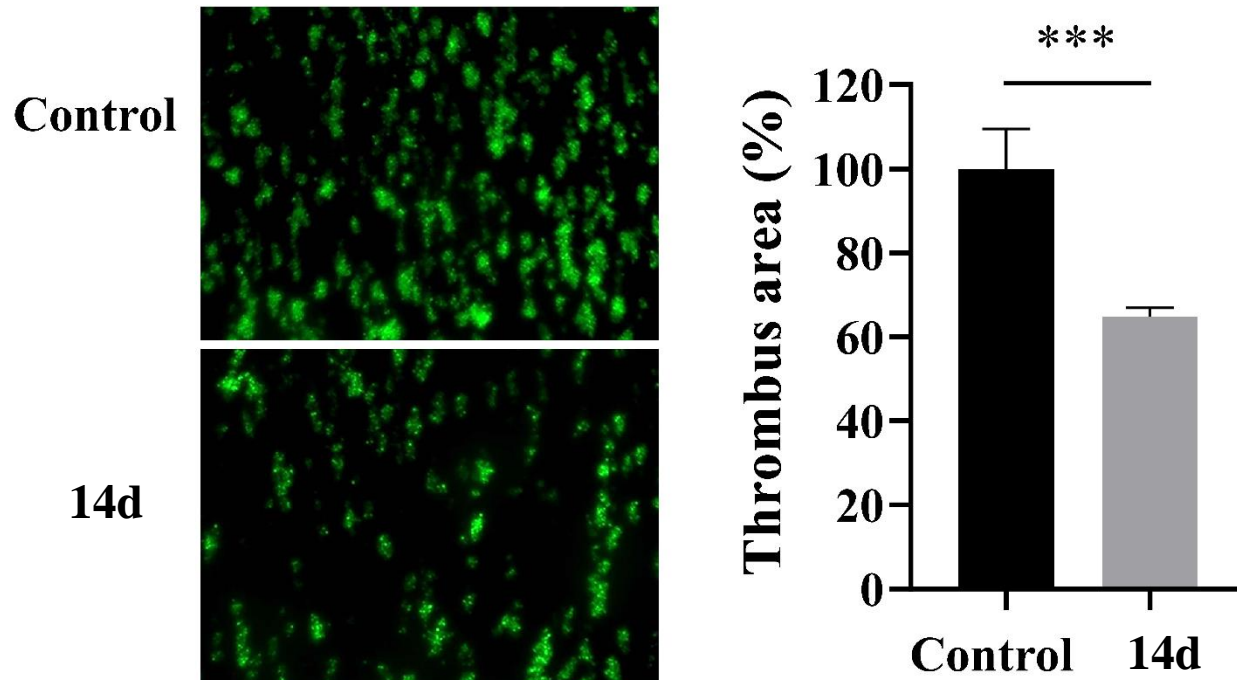


Figure 5. Effects of **14d** on *in vitro* thrombus formation. Human whole blood was incubated with DMSO or **14d** (5 μ M) in the presence of DiOC6(3) (1 μ M), and then perfused through a collagen-coated flow chamber at a shear rate of 1500 s⁻¹ for 4 min. The coverage areas of thrombi on the collagen-coated surfaces are presented as percentage of control values (n = 3). ***P < 0.001 as compared with control.

Compound **14d** exhibited low cytotoxicity

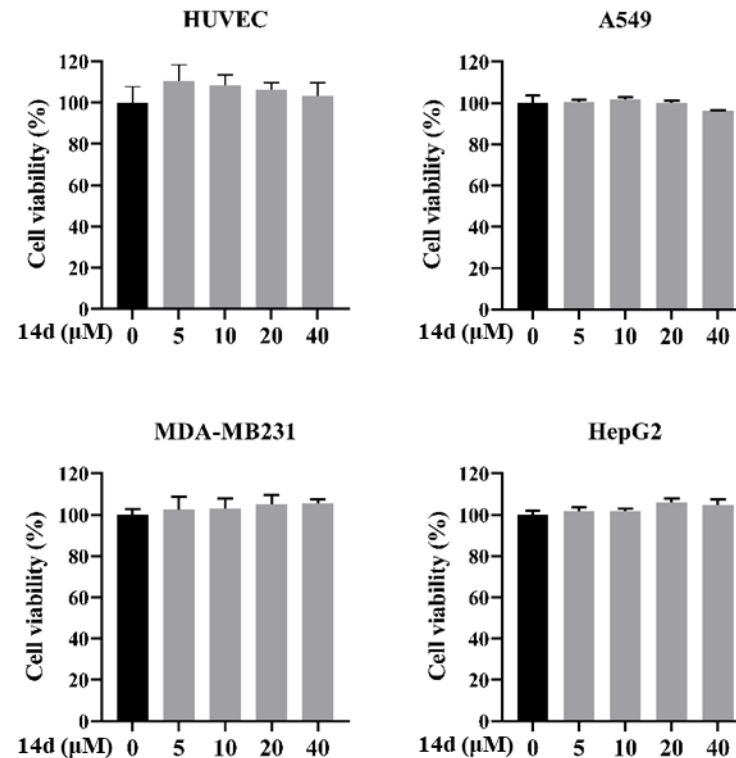
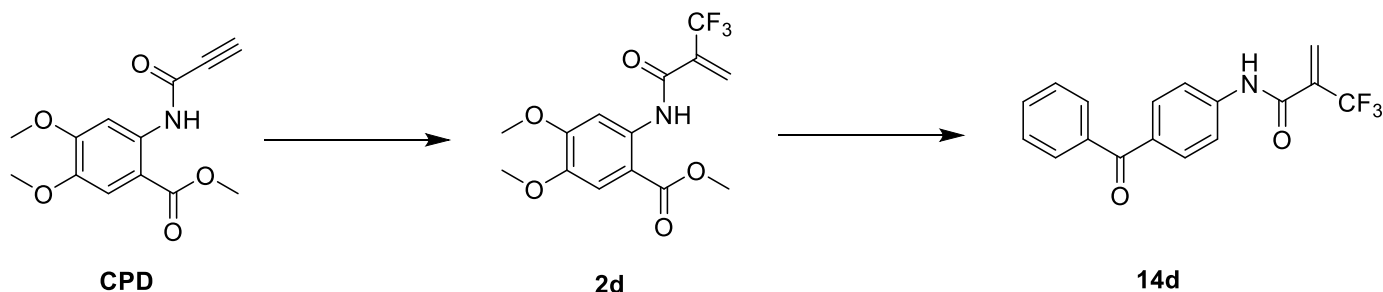


Figure 6. Cytotoxicity assay of **14d**. HUVECs or cancer cells (A549, MDA-MB- 231, and HepG2) were incubated with DMSO or **14d** (5 – 40 μM) for 24 h, and then cell viability was determined using MTT assay. Results were obtained in at least three independent experiments (mean ± SEM).

Conclusion



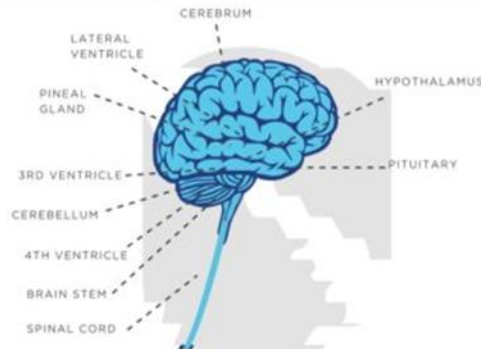
- Trifluoromethyl-acrylamide was an acceptable Michael acceptor for the design of PDI inhibitors.
- Compound **14d** showed considerable PDI inhibitory activity with an IC_{50} value of 480 ± 4 nM.
- The reversibility assay revealed that compound **14d** reversed the formation of the covalent bond with PDIA1, which was presumed to be due to retro-Michael addition.
- Compound **14d** remarkably reduced platelet aggregation and thrombus formation via inhibiting activation of GPIIb/IIIa.
- Compound **14d** show extremely weak cytotoxicity against HUVECs and three human cancer cell lines

Glioblastoma multiforme (GBM)

GLIOBLASTOMA AT-A-GLANCE

GLIOBLASTOMA MULTIFORME (GBM), A TYPE OF CENTRAL NERVOUS SYSTEM CANCER, IS THE MOST COMMON AND MOST AGGRESSIVE FORM OF PRIMARY BRAIN CANCER.

GBM IS GENERALLY FOUND IN THE CEREBRAL HEMISPHERES OF THE BRAIN, BUT CAN BE FOUND ANYWHERE IN THE BRAIN.



GLOBALLY, OVER 241,000 PEOPLE DIE EACH YEAR AS A RESULT OF BRAIN OR NERVOUS SYSTEM CANCER, WITH GBM BEING THE MOST COMMON FORM OF THE DISEASE

MEDIAN AGE

58 AT DIAGNOSIS | **65** AT DEATH

SOURCE: NCI SEER U.S. 2011-2015

GBM RELATIVE SURVIVAL RATES



GBM SURVIVAL RATES BY AGE GROUP



BRAIN AND NERVOUS SYSTEM CANCERS GLOBALLY

ESTIMATED NUMBERS OF ANNUAL NEW BRAIN AND NERVOUS SYSTEM CANCER CASES IN KEY MARKETS



- AFRICA: 17,000
- ASIA: 156,000
- EUROPE: 64,600
- NORTH AMERICA: 27,000
- SOUTH AMERICA: 22, 900

SOURCE: GLOBOCAN 2018

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Bristol-Myers Squibb

Glioblastoma multiforme (GBM)

GLIOBLASTOMA AT-A-GLANCE

GLIOBLASTOMA MULTIFORME (GBM), A TYPE OF CENTRAL NERVOUS SYSTEM CANCER, IS THE MOST COMMON AND MOST AGGRESSIVE FORM OF PRIMARY BRAIN CANCER.

COMMON BRAIN CANCER RISK FACTORS



RADIATION EXPOSURE



FAMILY HISTORY



SOME GENETICALLY INHERITED SYNDROMES



MALE GENDER



ADULTS AGES 45-65

SIGNS & SYMPTOMS

THE SIGNS AND SYMPTOMS OF GBM CAN VARY DEPENDING ON THE SIZE AND LOCATION OF THE TUMOR IN THE BRAIN. THE FOLLOWING ARE COMMON SYMPTOMS:



- HEADACHE
- BLURRED VISION
- BALANCE PROBLEMS
- SEIZURES
- NAUSEA
- VOMITING
- DROWSINESS
- WEAKNESS ON ONE SIDE OF THE BODY
- MEMORY AND/OR SPEECH DIFFICULTIES

POTENTIAL & AVAILABLE TREATMENT OPTIONS

TREATMENT OPTIONS FOR GBM VARY DEPENDING ON A NUMBER OF FACTORS—TUMOR SIZE, POSITION, WHETHER IT HAS SPREAD TO OTHER REGIONS OF THE BRAIN AND THE OVERALL HEALTH OF THE PATIENT. SEVERAL TYPES OF TREATMENT MAY BE CONSIDERED BY A HEALTH PROFESSIONAL TO TREAT THIS TYPE OF CANCER, INCLUDING:



SURGERY



RADIATION THERAPY



CHEMOTHERAPY



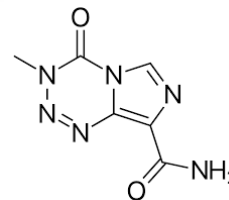
TARGETED THERAPY



IMMUNOTHERAPY

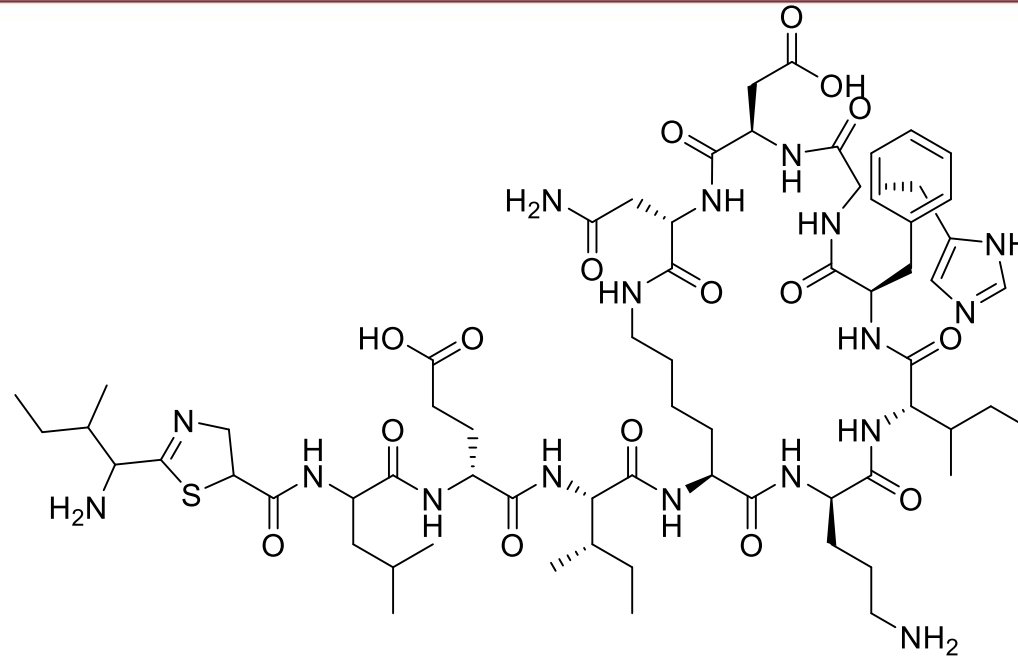
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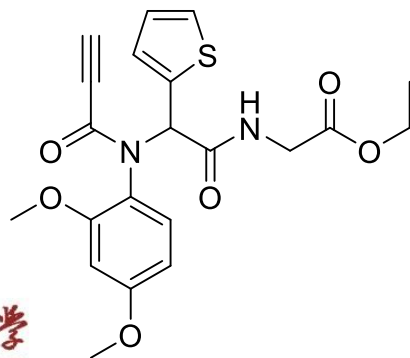


Temolozomide (TMZ)

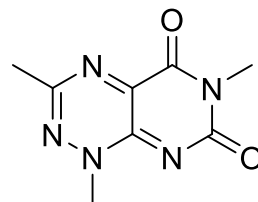
PDI inhibitors with anti-GBM activity



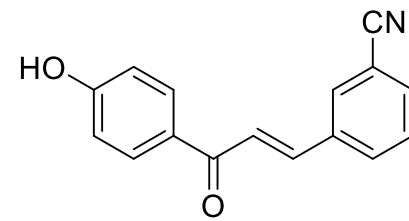
Bacitracin



PACMA31

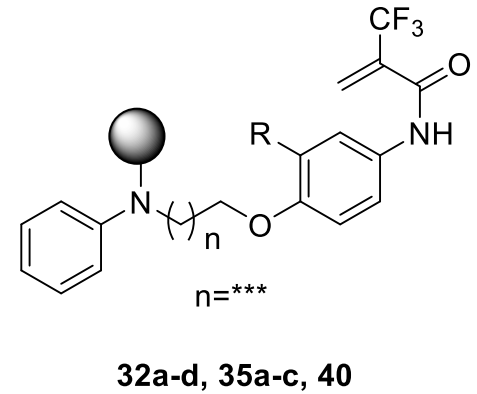
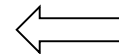
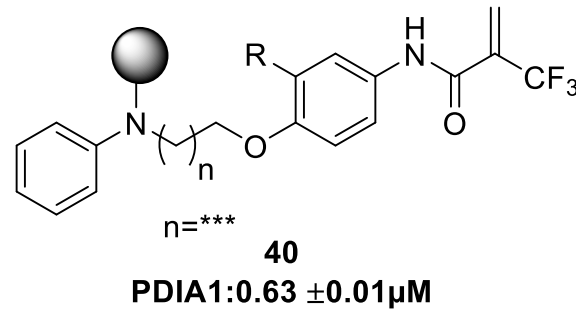
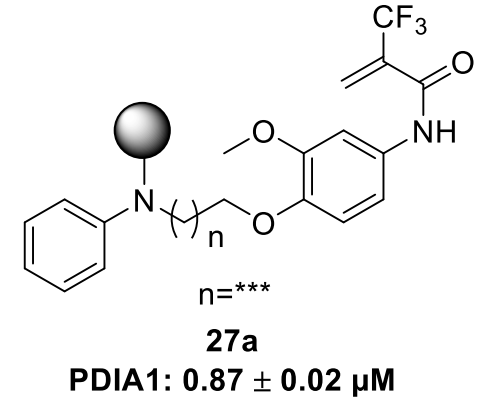
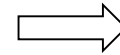
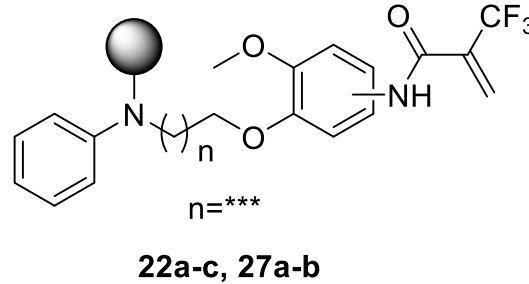
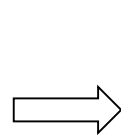
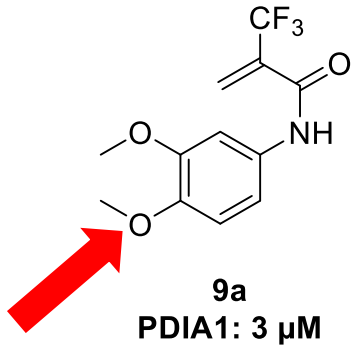


35G8



BAP2

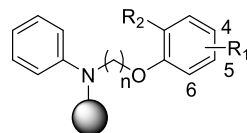
Drug design





Results and discussion

Table 5. The IC₅₀^a values (μM) of enzyme inhibition of compound **22a-c**, **27a-b**, **30a-d**, **35a-c**, **40** and PACMA31 against PDI



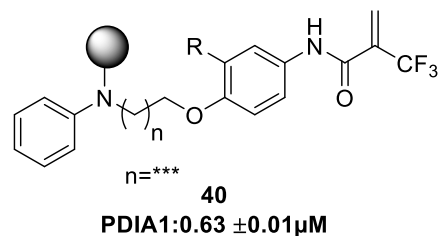
22a-c, 27a-b, 30a-d, 35a-c, 40

R₁ = 2-(trifluoromethyl)acrylamide (E)

Compound	n	R ₁	R ₂	PDI
22a	*	4-E	***	0.94 ± 0.04
22b	*	5-E	***	1.00 ± 0.13
22c	*	6-E	***	1.82 ± 0.00
27a	*	4-E	***	0.87 ± 0.02
27b	*	4-E	***	0.98 ± 0.13
30a	*	4-E	***	0.91 ± 0.30
30b	*	4-E	***	1.29 ± 0.03
30c	*	4-E	***	1.56 ± 0.13
30d	*	4-E	***	0.94 ± 0.01
35a	*	4-E	***	0.90 ± 0.02
35b	*	4-E	***	0.98 ± 0.38
35c	*	4-E	***	0.80 ± 0.09
40	*	4-E	***	0.63 ± 0.01
PACMA31				8.10 ± 0.90

^a Data are provided from three independent experiments.

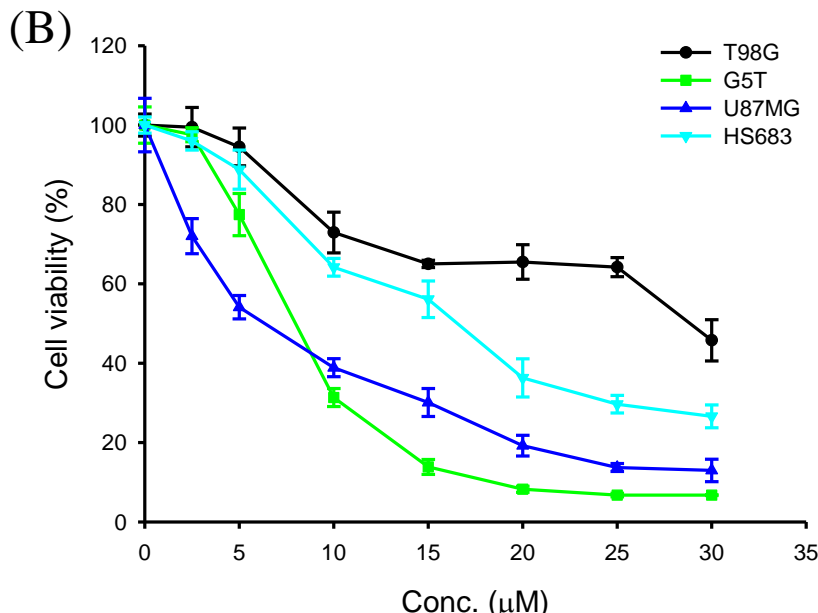
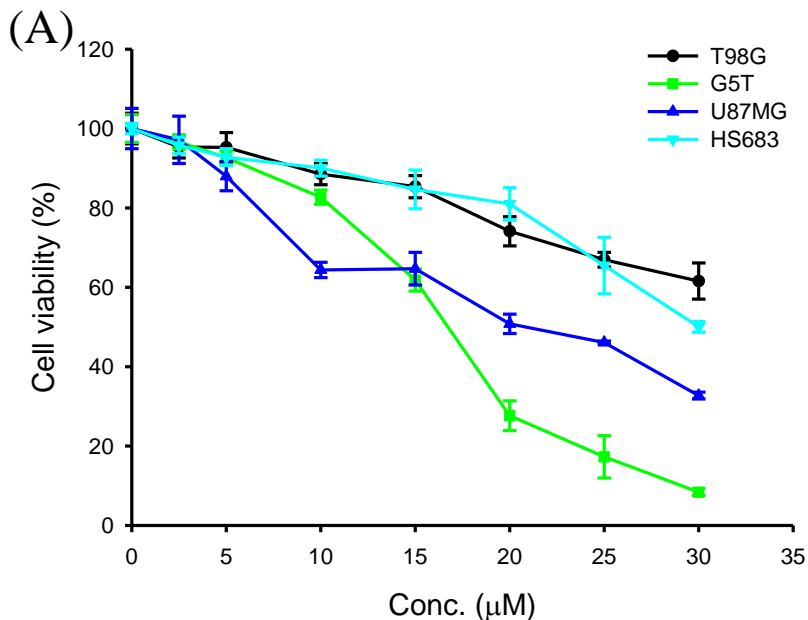
Table 6. IC₅₀^a values (μM) of enzyme inhibition of compounds **39** and PACMA31 against PDIA3 and PDIA6



Compound	PDIA1 (PDI)	PDIA3 (ERp57)	PDIA6 (ERp5)
40	0.63 ± 0.01	1.13 ± 0.25	5.17 ± 0.31
PACMA31	8.10 ± 0.90	28.09 ± 1.94	>40

^aData are provided from three independent experiments.

Compound **40** exhibited potent cytotoxicity against GBM cells



(C)

Compound	Cell lines (IC ₅₀ , μM)			
	T98G	G5T	U87-MG	HS683
27a	>30	16.7	21.6	>30
40	28.4	10.6 ± 1.2	10.0 ± 0.8	17.9
TMZ	ND	630.1 ± 18.2	627.2 ± 80.9	ND

Figure 7. Glioma cells were seeded in 24 well for 24 h, and then treated with 0~30 μM **27a** (A) or **40** (B) for 72 h. The cell viability were analyzed using MTT assay. The IC₅₀ of each cell line were calculated (C).

Compound 40 induced cell apoptosis in GBM cell lines

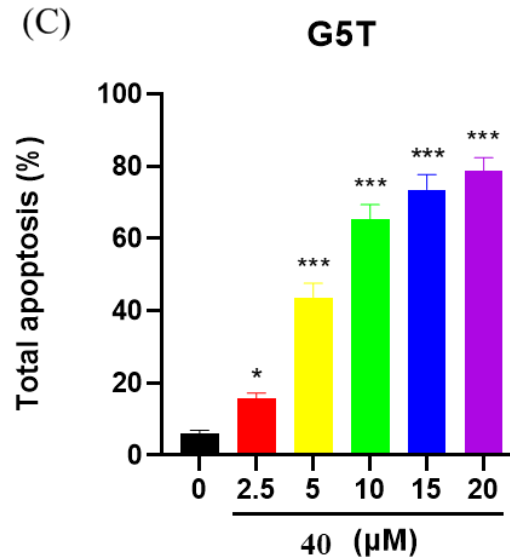
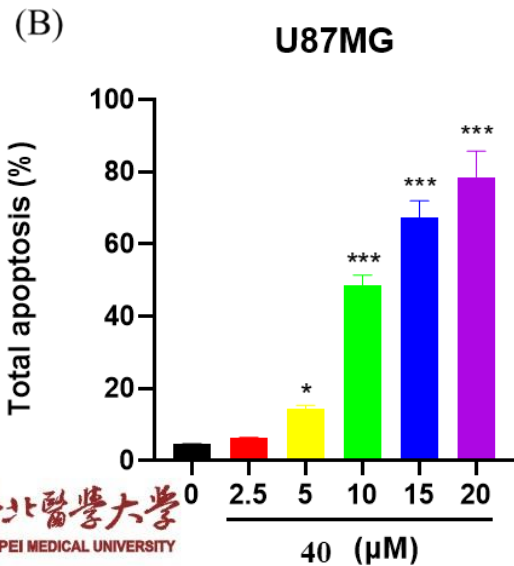
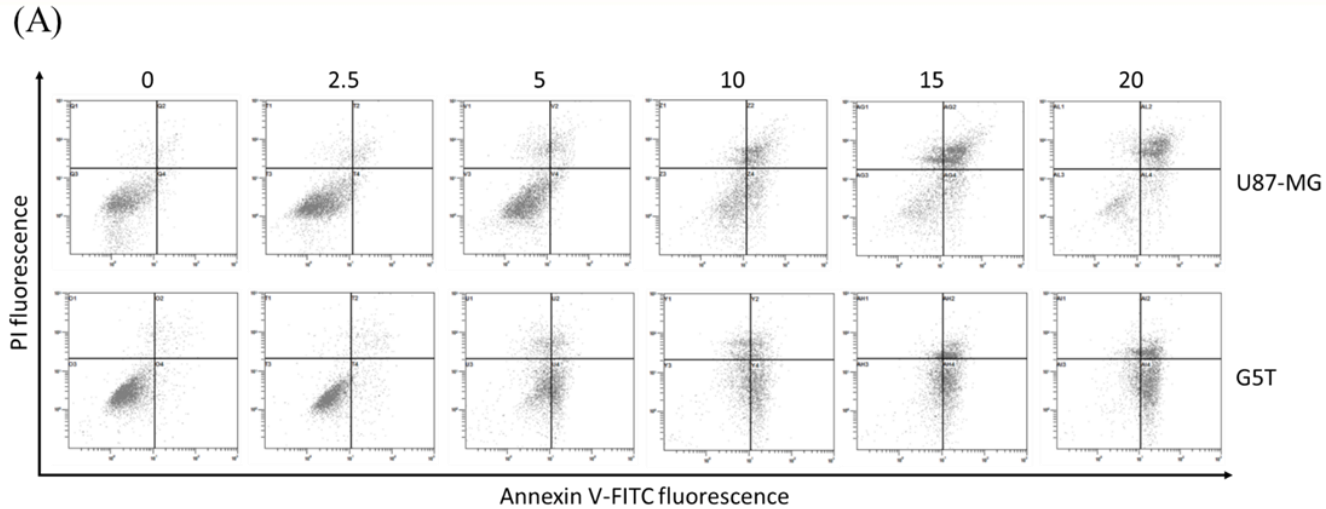


Figure 8. The effect of compound **40** induced cell apoptosis and accumulation of cell cycle in subG1 phase against U87MG and G5T glioma cell lines. (A) Both U87MG and G5T cell lines were treated with compound **40** at 0, 2.5, 5, 10 15, 20 and 25 μM for analyzing the total apoptosis rate by flow cytometry. (B, C) The statistical analysis of total apoptosis rate for U87MG (B) and G5T (C) cell lines after treating various dose of compound **40**. * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$ vs. control.

Compound 40 induced cell apoptosis and accumulation of cell cycle in subG1 phase against U87MG and G5T glioma cell lines

(D)

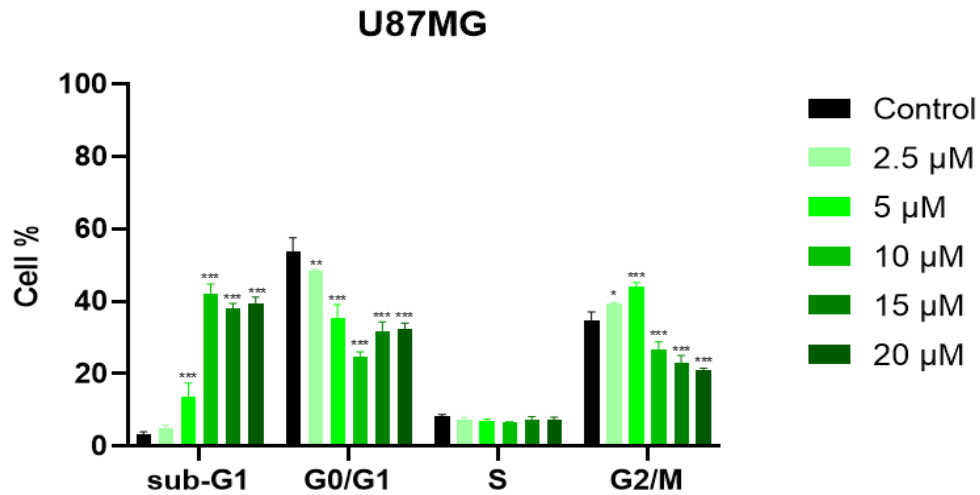
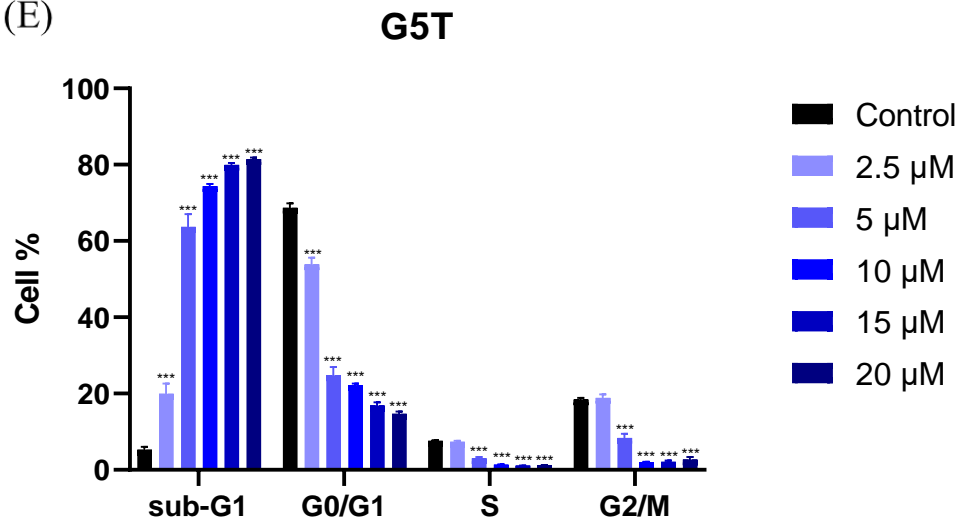


Figure 8. The effect of compound 40 induced cell apoptosis and accumulation of cell cycle in subG1 phase against U87MG and G5T glioma cell lines. (E, F) The statistical analysis of cell cycle distribution for U87MG (E) and G5T (F) cell lines after treating various dose of compound 40. The data were obtained from three experiments. * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$ vs. control.

(E)



Compound **40** increased ROS generation in GBM cell lines

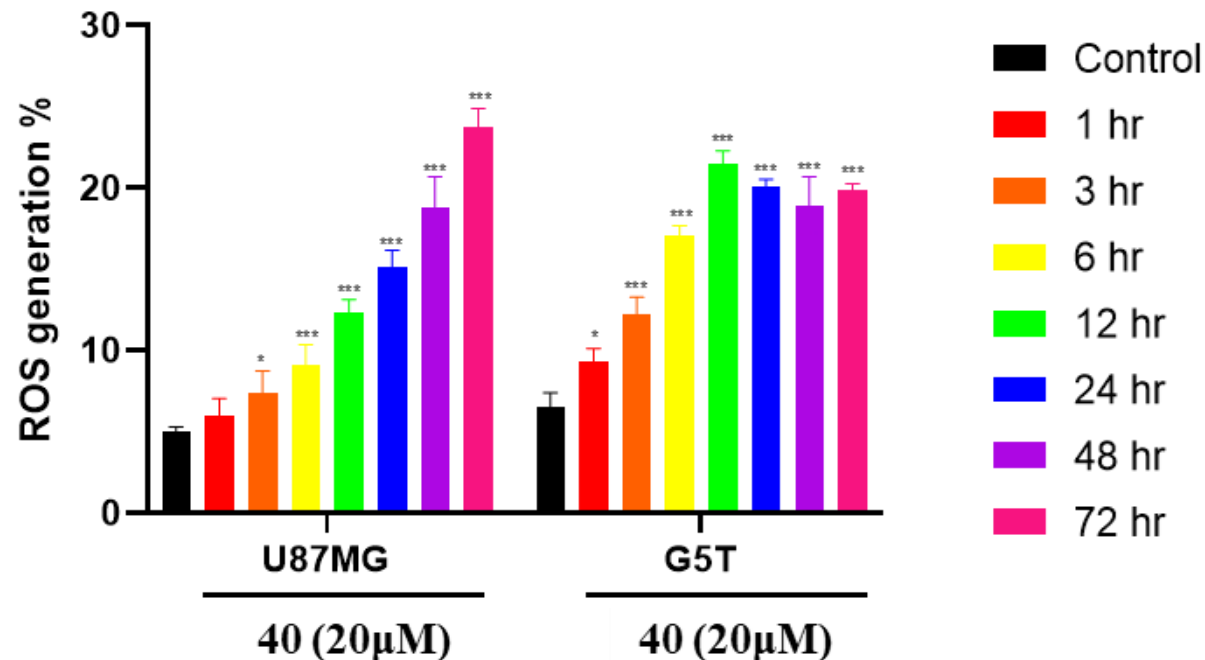
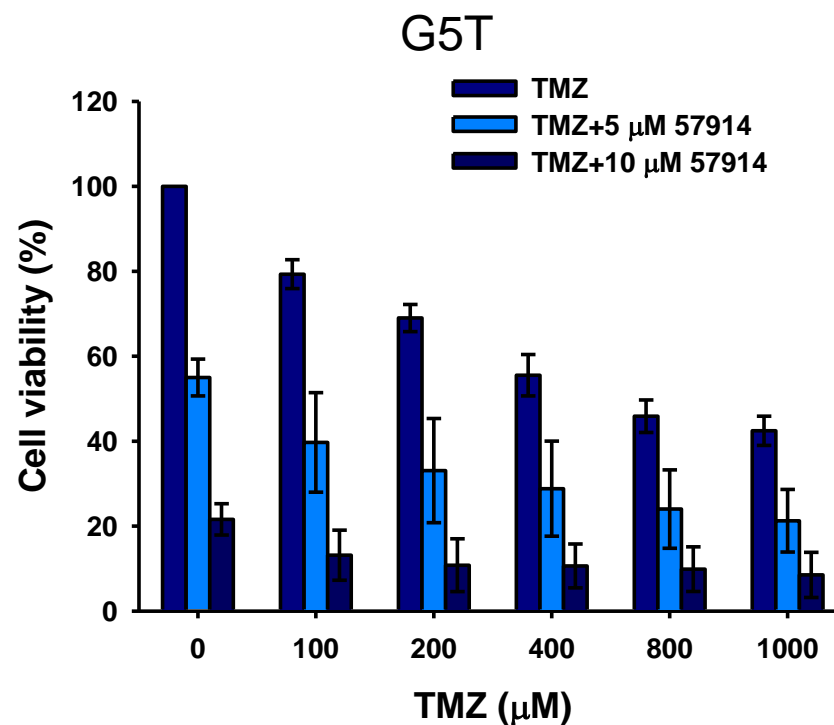
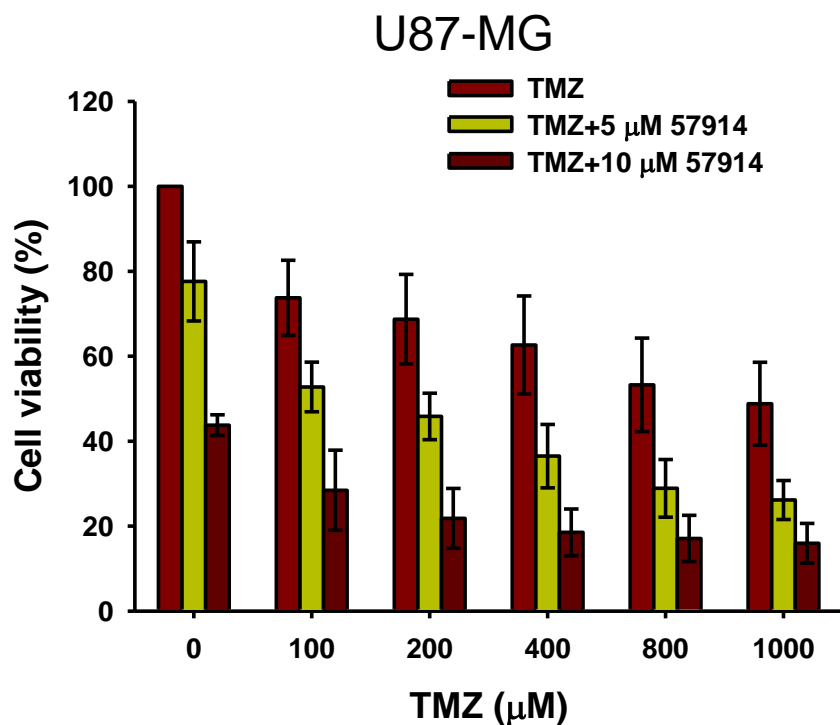
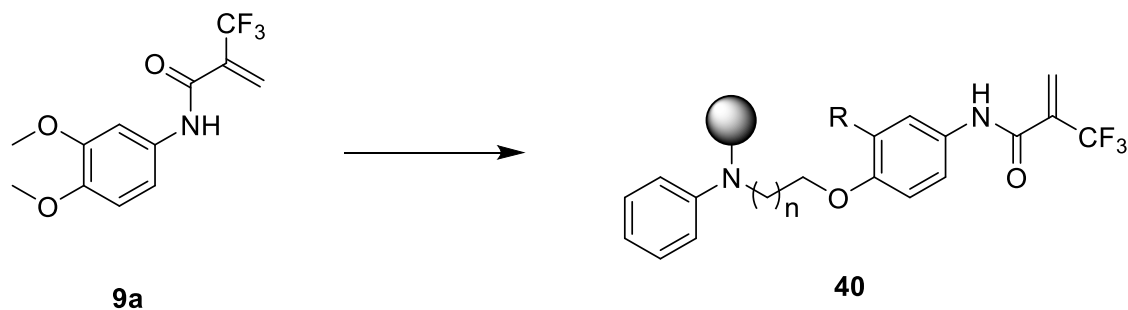


Figure 9. The effect of compound **40** enhanced ROS production in U87MG and G5T cells. The statistical analysis of ROS production for cells staining with the ROS probe. The data were obtained from three experiments. * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$ vs. control.

Compound **40**, combined with TMZ, displayed a synergistic effect against GBM cells



Conclusion



- Compound **40** exhibited potent inhibition of PDIA1 with an IC_{50} value of $0.63 \pm 0.01 \mu\text{M}$.
- Compound **40** inhibited cell proliferation against U87MG and G5T glioma cell lines with an IC_{50} value of $10.0 \pm 0.8 \mu\text{M}$ and $10.6 \pm 1.2 \mu\text{M}$, respectively.
- Compound **40** induced apoptosis and increased ROS generation in U87MG and G5T glioma cell lines.
- Compound **40** produced synergistic effect with TMZ, resulting in enhancing cytotoxicity of TMZ against GBM cell lines.

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Thank you for your attention

