



Univerzita Komenského v Bratislave  
Prírodovedecká fakulta, Katedra organickej chémie

# Prečo chemici púšťajú zlúčeniny žilou?

ΣΤΙΛΛΟΥΜΕΝΑ ΣΤΙΣ ΠΛΗΡΕΙΣ

Bratislava, 7.11.2008

Andrej Boháč

# Organická chémia

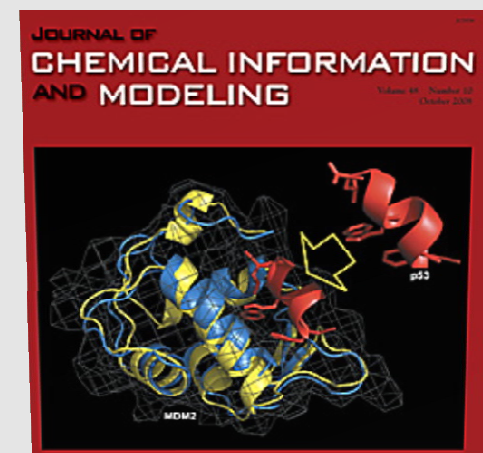
- ž náuka o spôsobe **ako pripraviť nové zlúčeniny** s novou kvalitou a vlastnosťami
- ž > 11 000 000 org zlúčenín (Beilstein)
- > 36 500 000 chem zlúčenín (SciFinder)
- ž **chemical space** >  $10^{60}$  (možné a stabilné molekuly)

SI prefixes

$1000^m$	$10^n$	Prefix	Symbol	Since <sup>[1]</sup>	Short scale	Long scale	Decimal
$1000^8$	$10^{24}$	yotta-	Y	1991	Septillion	Quadrillion	1 000 000 000 000 000 000 000 000
$1000^7$	$10^{21}$	zetta-	Z	1991	Sextillion	Trilliard	1 000 000 000 000 000 000 000
$1000^6$	$10^{18}$	exa-	E	1975	Quintillion	Trillion	1 000 000 000 000 000 000
$1000^5$	$10^{15}$	peta-	P	1975	Quadrillion	Billiard	1 000 000 000 000 000
$1000^4$	$10^{12}$	tera-	T	1960	Trillion	Billion	1 000 000 000 000
$1000^3$	$10^9$	giga-	G	1960	Billion	Milliard	1 000 000 000
$1000^2$	$10^6$	mega-	M	1960	Million		1 000 000
$1000^1$	$10^3$	kilo-	k	1795	Thousand		1 000



ž *Reymond J-L et al J. Chem. Inf. Model. 47 2007 342. 11 Atoms of C, N, O, F: Assembly of 26.4 Million Structures (110.9 Million Stereoisomers)...".*



\*?1564 +1616

To be or not to be?

Aké zlúčeniny pripravovať?

# Trhová ekonomika a veda

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- ž diktuje praktický výstup –  
interdisciplinárny charakter výskumu
- ž **materiálová chémia**  
(chémia – fyzika – matematika)
- ž bioorganická chémia, medicínska chémia  
(chémia – biológia – medicína)

# Medicínska chémia

ž vývoj a výskum liečiv

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ž Na čo majú nové zlúčeniny slúžiť?  
(medicína, molekulárna biológia)

ž Aká je ich správna štruktúra?  
(medicínska chémia)

ž Ako ich pripraviť? (organická syntéza)

ž Sú to tie správne zlúčeniny?  
(biológia, medicína)

ž Ako ich chrániť na trhu? (právo)

# Vývoj nových liečiv

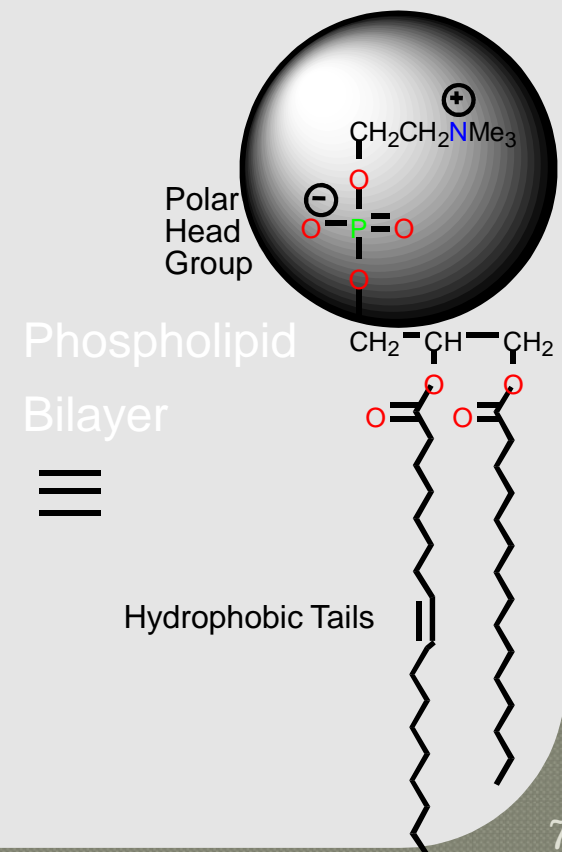
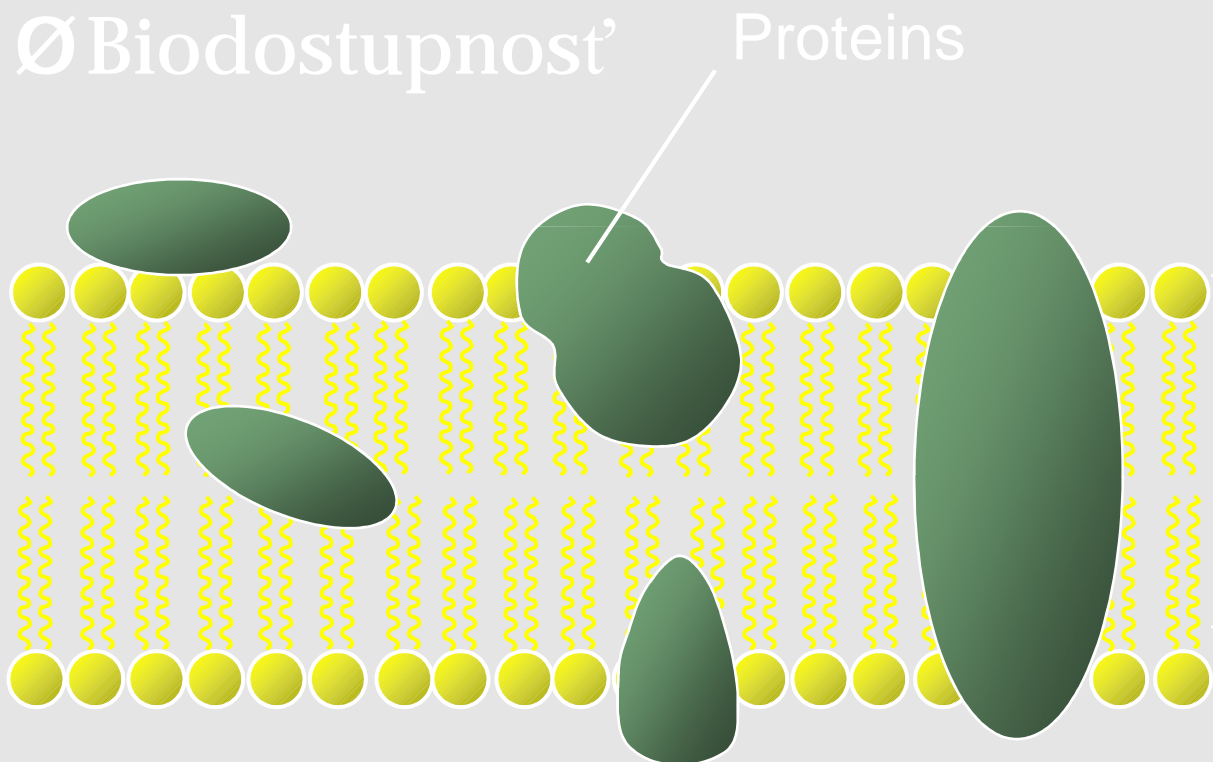
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ž vysoko interdisciplinárny a časovo náročný proces vyžadujúci **ca 10 rokov a náklady ca 800 000 000 USD**

ž **ročne** len **ca 26 nových liekov**  
(2005: 26, 2004: 24, 2006: 26, 2002: 28)

# Čo musí splniť liečivo?

- Ø Aktivita (stereoelektronická kompatibilita)
- Ø Nízka toxicita
- Ø Biodostupnosť



# Drug-like properties (druglikeness)

most drugs are relatively **small and lipophilic molecules**

## Lipinski's rule of five: (1997)

FW < 500 g/mol

< 5 H-bond donor groups (HO-, HN-, HS-...)

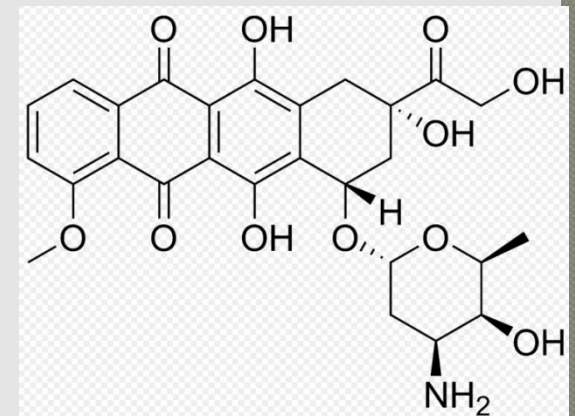
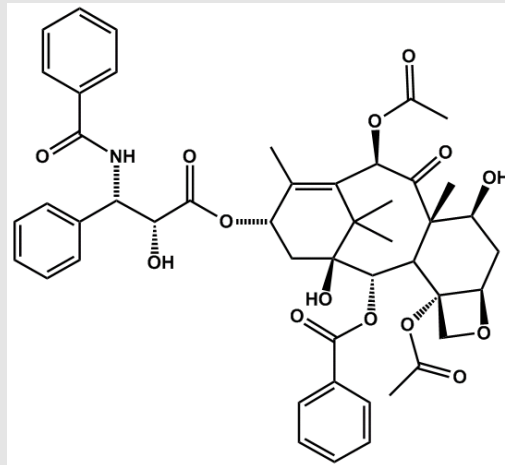
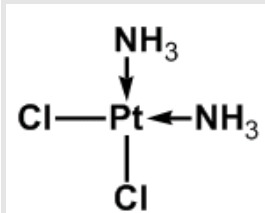
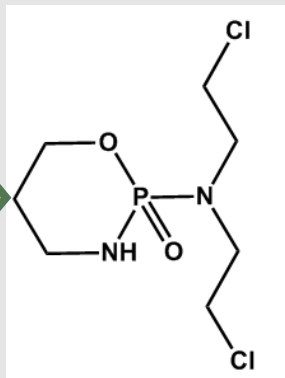
< 10 H-bond acceptor groups (-O-, -N-, -C=O...)

log P < +5

1. výber ochorenia
2. poznatie molekulárneho mechanizmu
3. selekcia biologického cieľa (proteín..., „target“)
4. predklinické testy (*in vitro*, *in vivo*)
5. design, nosná štruktúra (In Silico design, Click chemistry, drug like, toxicology, ADME)
6. syntéza a optimalizácia aktivity a selektivity
7. klinické testy (PhI-III, IV)
8. priemyselná optimalizácia výroby
9. patentovanie
10. administratívne schválenie (FDA, ŠUKL)
11. klinická prax

# Liečba onkologických ochorení

- ž Chirurgická
- ž Rádioterapia
- ž Chemoterapia (cyklofosamid, cis-platina, taxol, doxorubicín...vincristín...)



- ž **Antiangiogénna liečba (2004/2005/2006)**  
(bevacizumab, sorafenib tozylát, sunitinib malát)

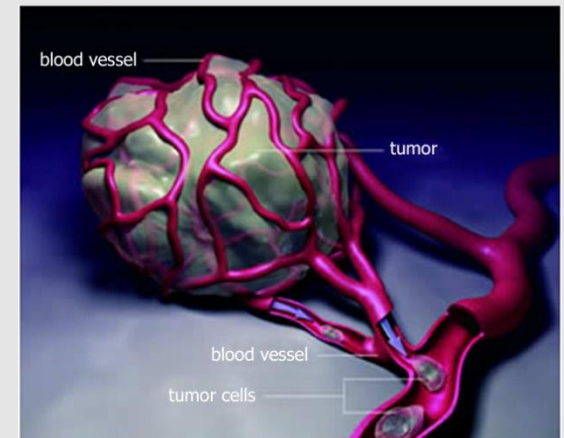
# ANGIOGENÉZA

ž novotvorba ciev z existujúcich ciev

ž 1971 **J. Folkman** hypotéza ⇒  
tumory sú angiogénne závislé

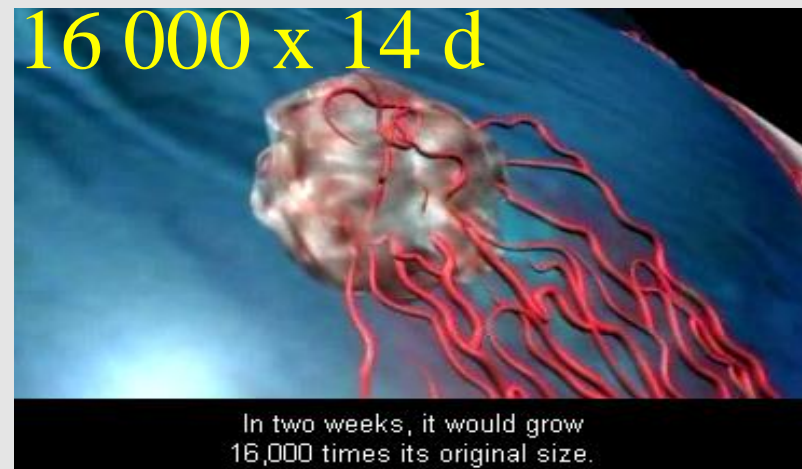
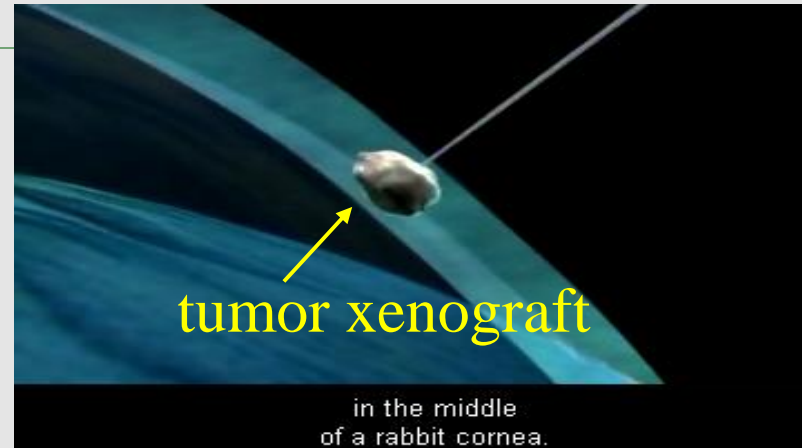
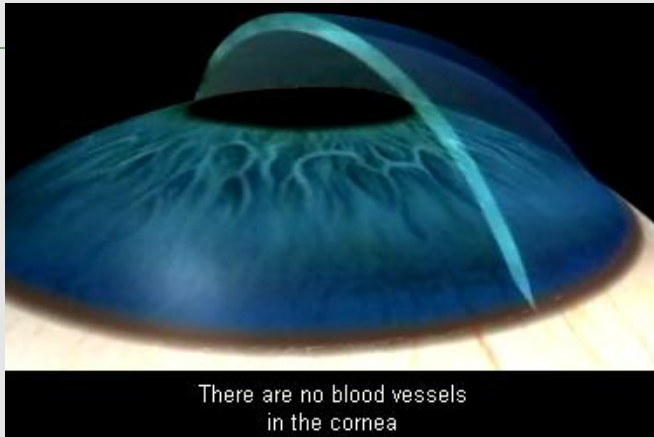


**Dr. Judah Folkman 1933 – 2008**



*.....“Angiogenesis research  
will probably change the face of  
medicine in the next decades.....”*

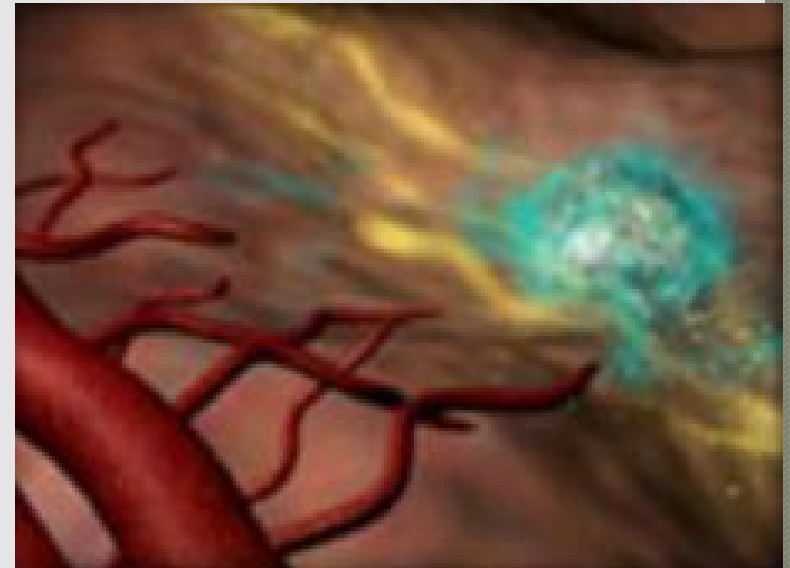
# Experimentálny dôkaz



tumor produkuje promotory angiogenézy

# Evolúcia tumoru a angiogenéza

- ž prekanceróza
- ž tumor „*in situ*“ 0.2-2mm  
( $10^6$  imortalizovaných buniek), rovnováha  
(proliferácia / nekróza, apoptóza)
- ž angiogénny fenotyp  
(„angiogenic switch“)
- ž neovaskularizácia tumoru
- ž progres, metastázy



# Blood-Vessels

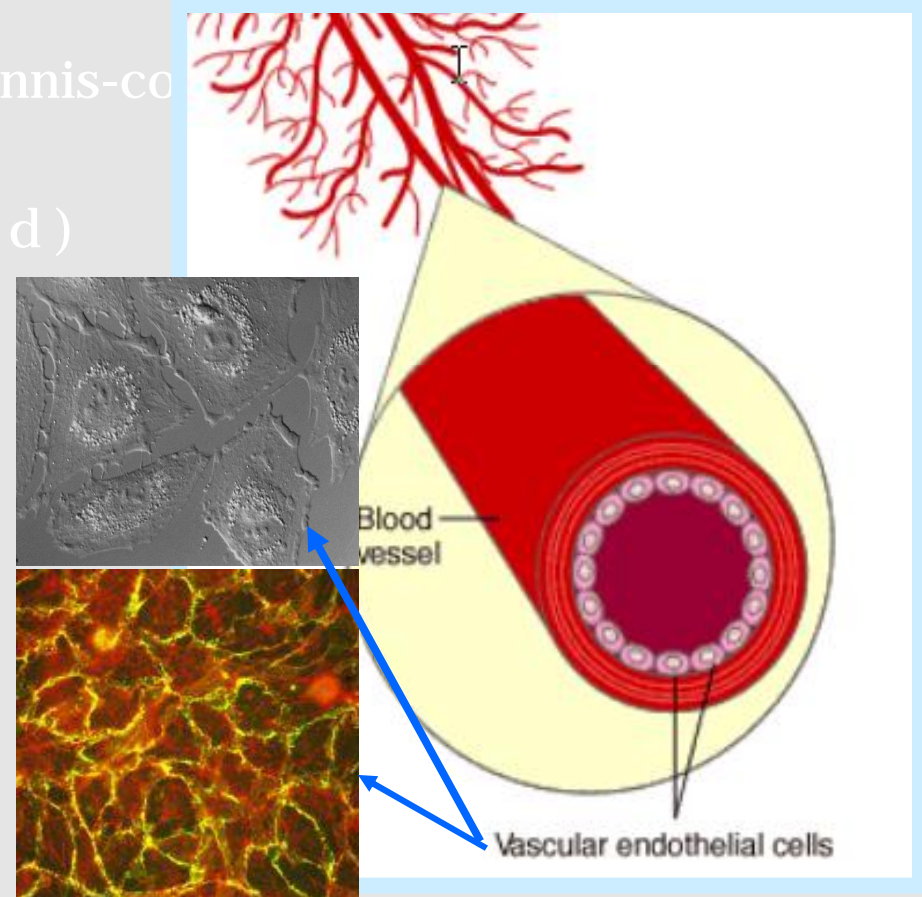
## ž Endothelial Cells (EC)

- endothelium ca 1 000 m<sup>2</sup> ≈ tennis-court
- flat cells, tile shape
- divide a'2-3 years (tumor a'2 d )

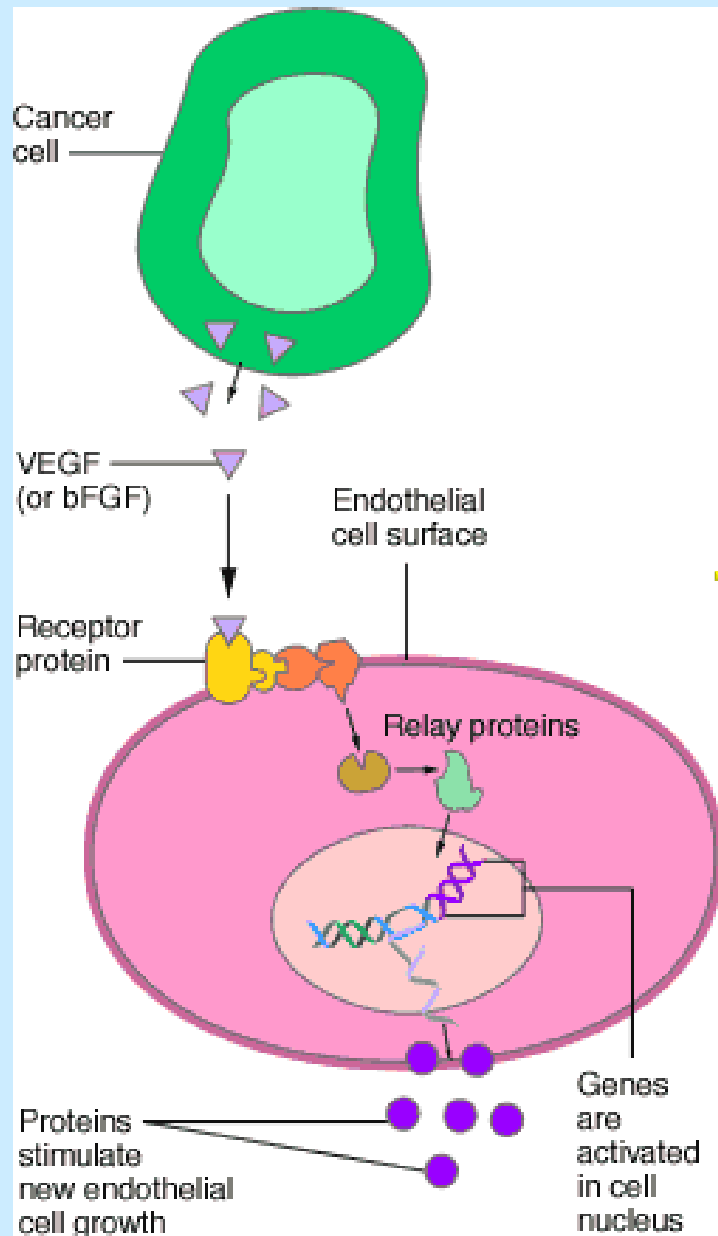
## ž Basement Membrane

## ž Smooth Muscle Cells

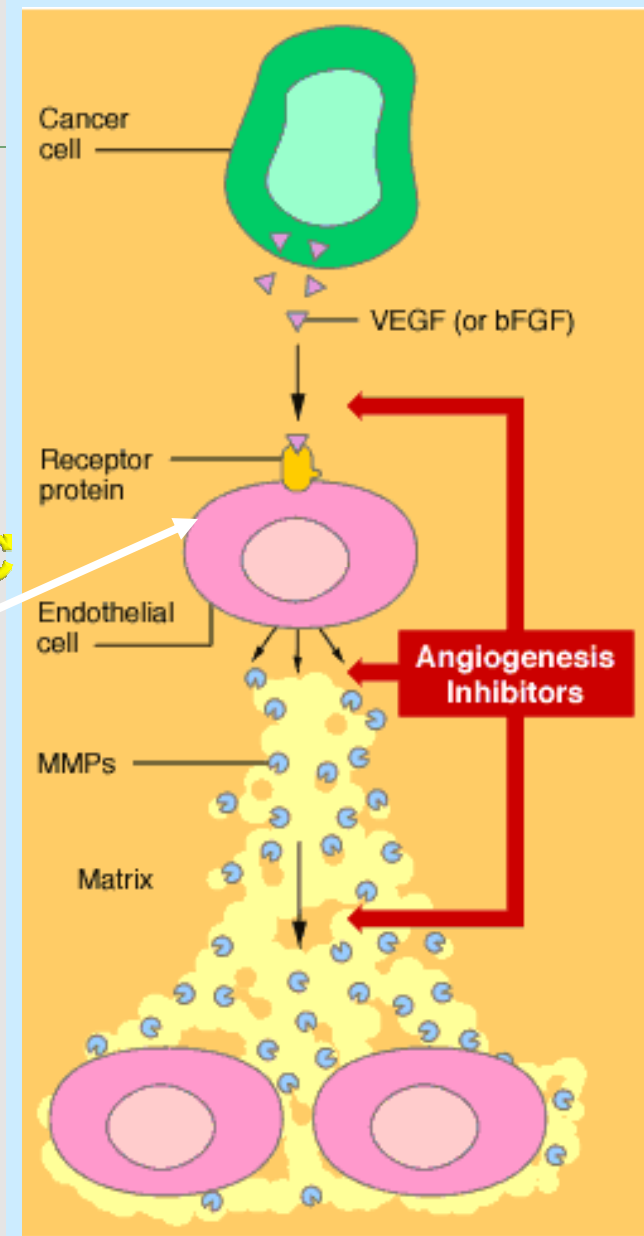
## ž Pericytes



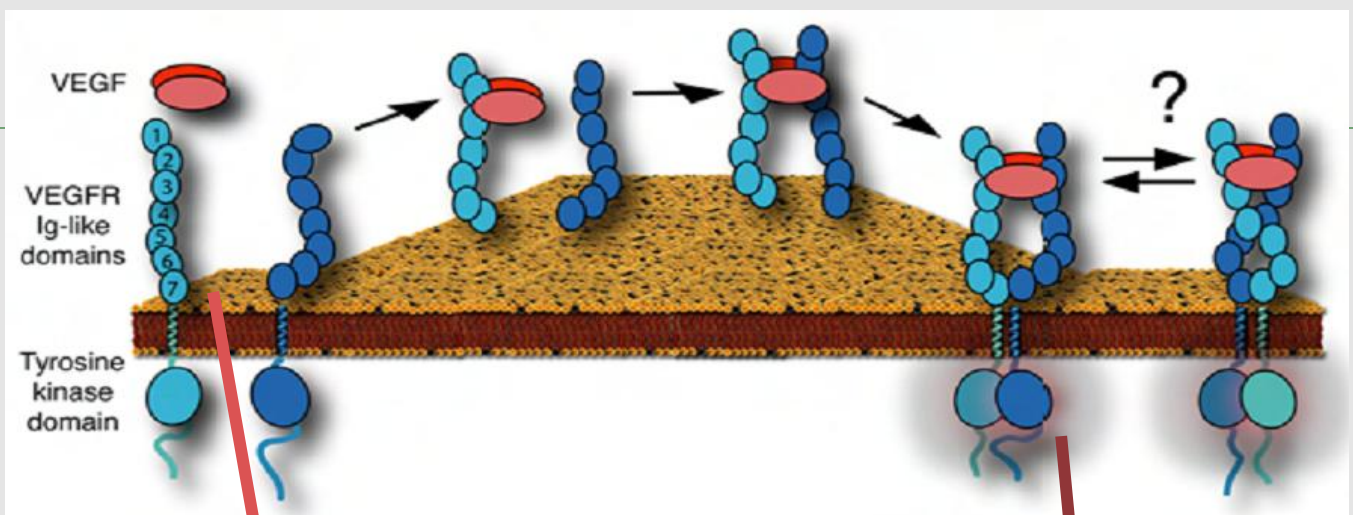
# Selekcia biologického cieľa



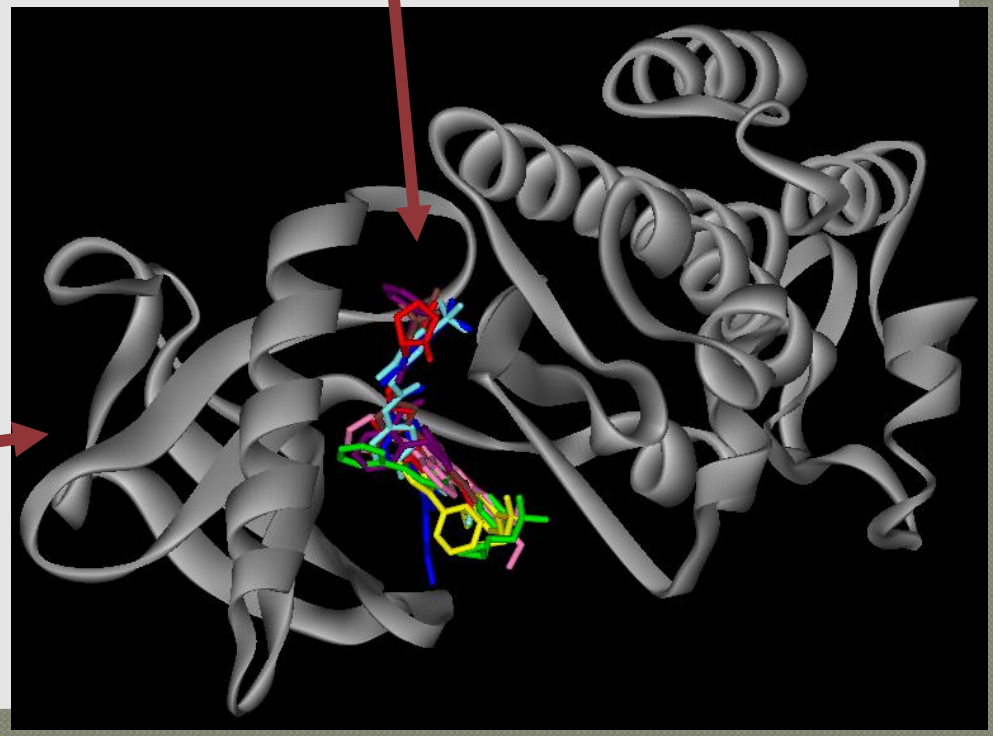
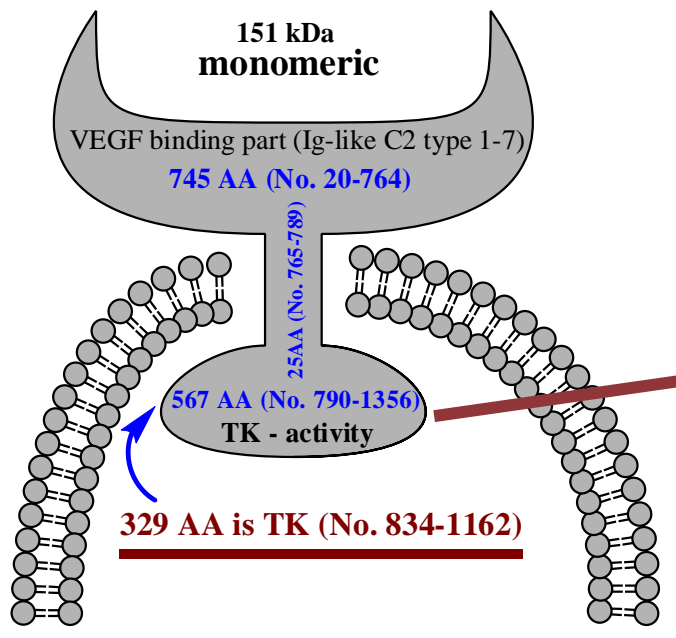
Aktivácia EC



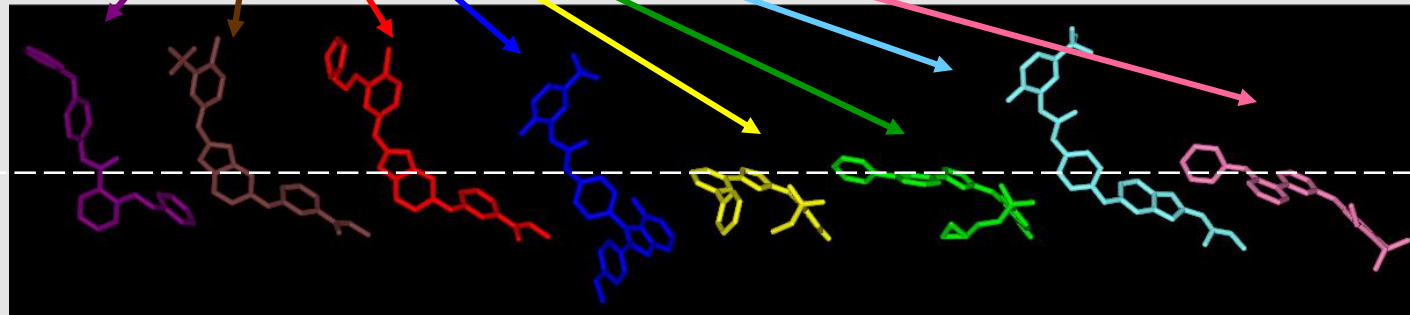
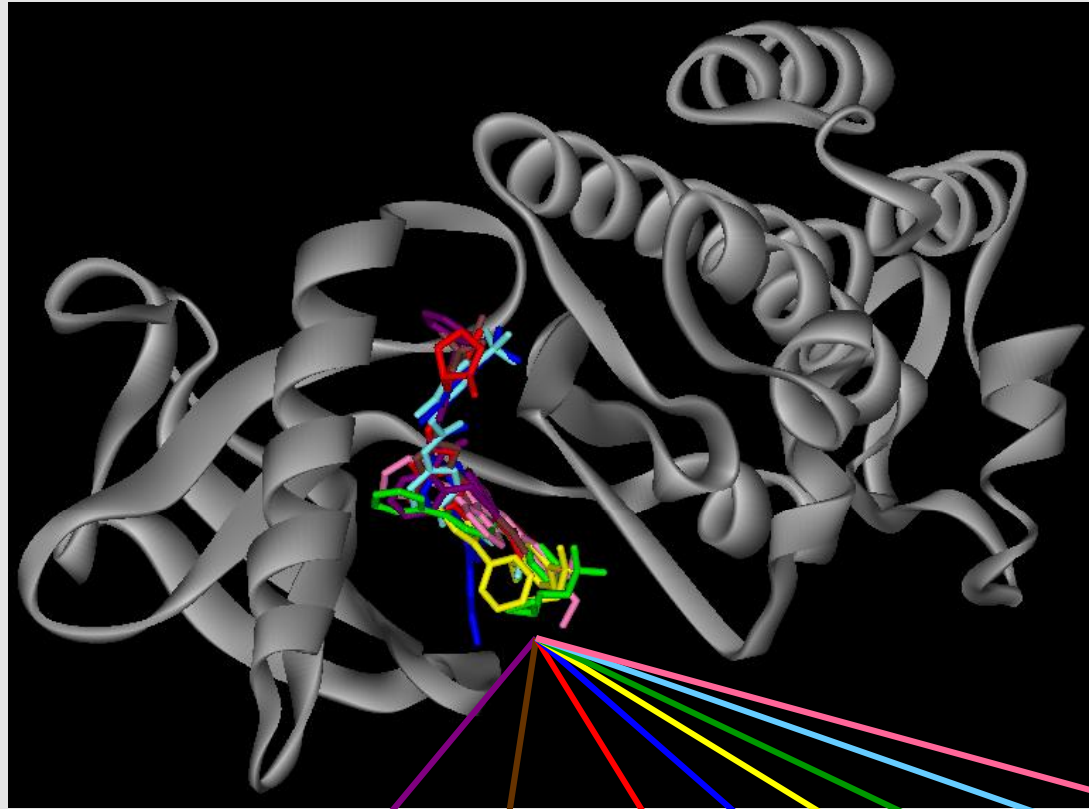
# VEGFR-2 (KDR, Flk-1)



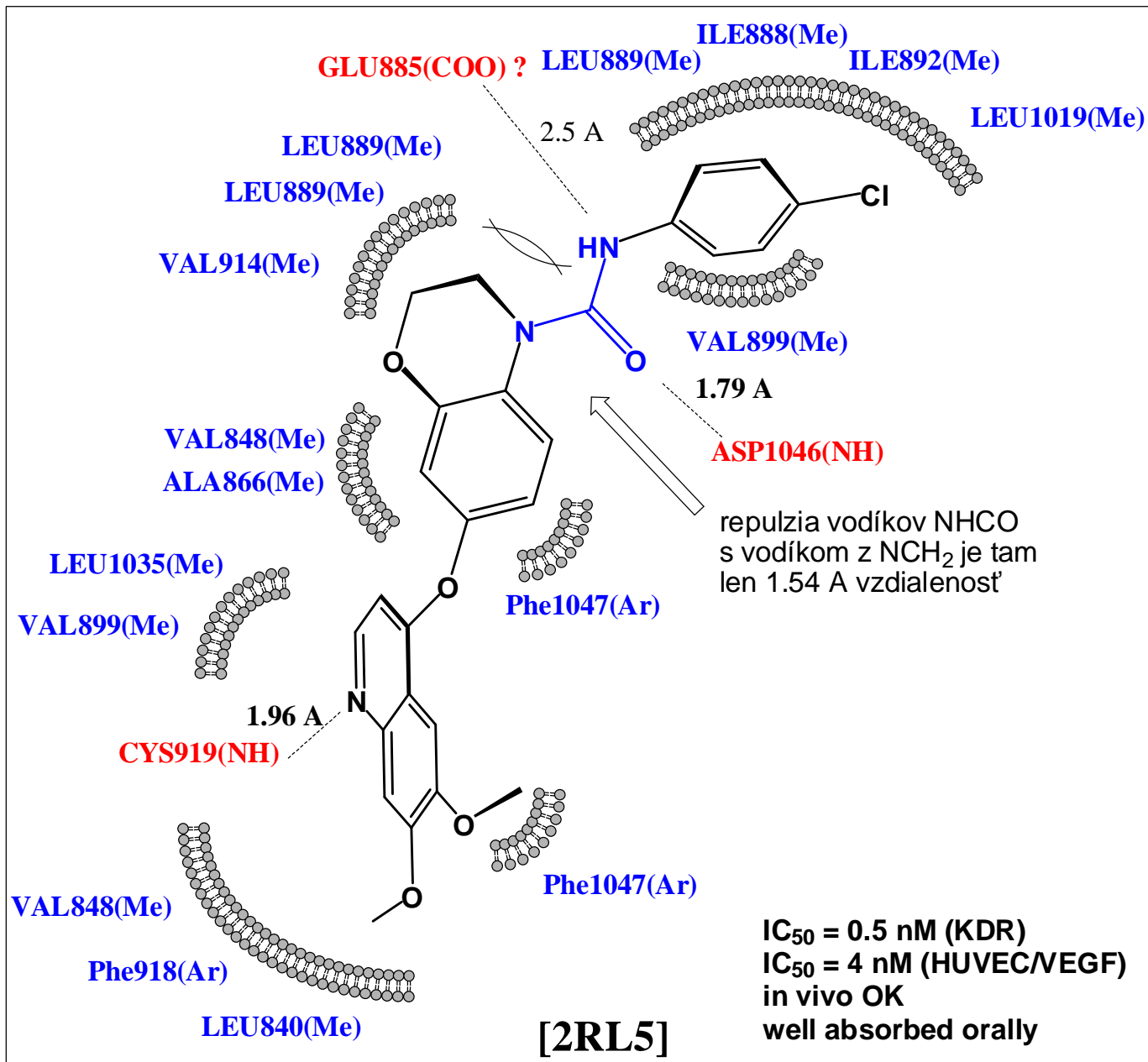
**KDR (VEGFR-2, Flk-1) 1337AA (No. 20-1356)**



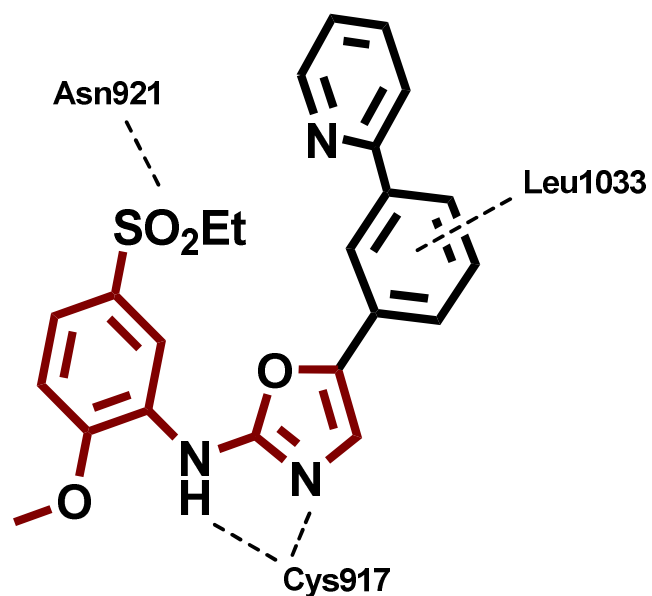
# X-ray analysis



ATP b. place

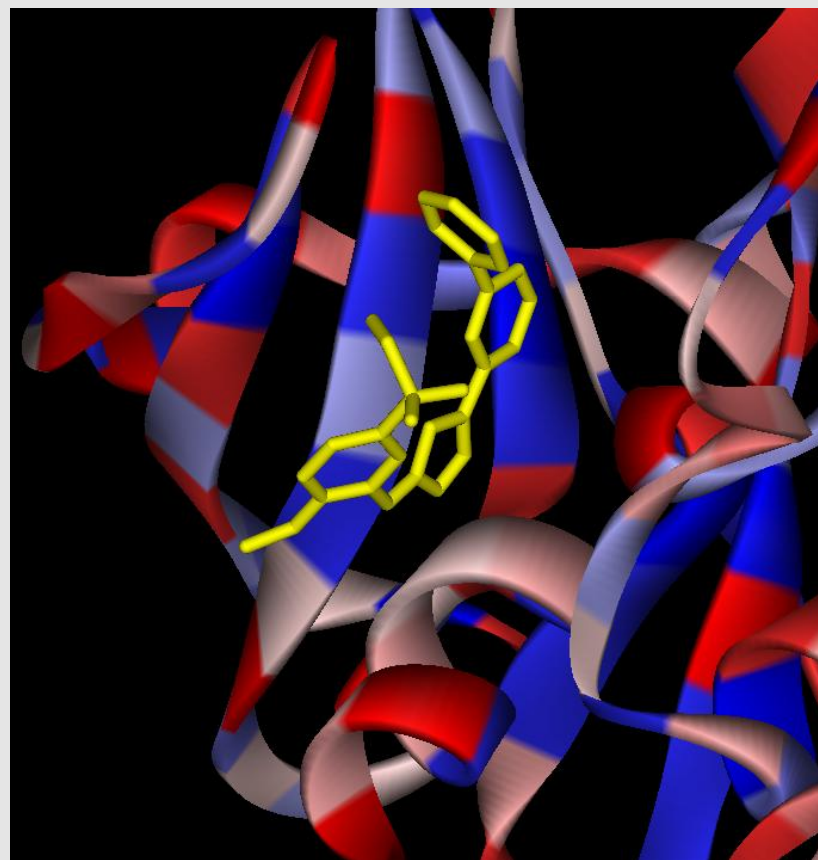


# KDR inhibidor ( 1 mg / 100 L)



IC<sub>50</sub> = 22 nM (KDR)

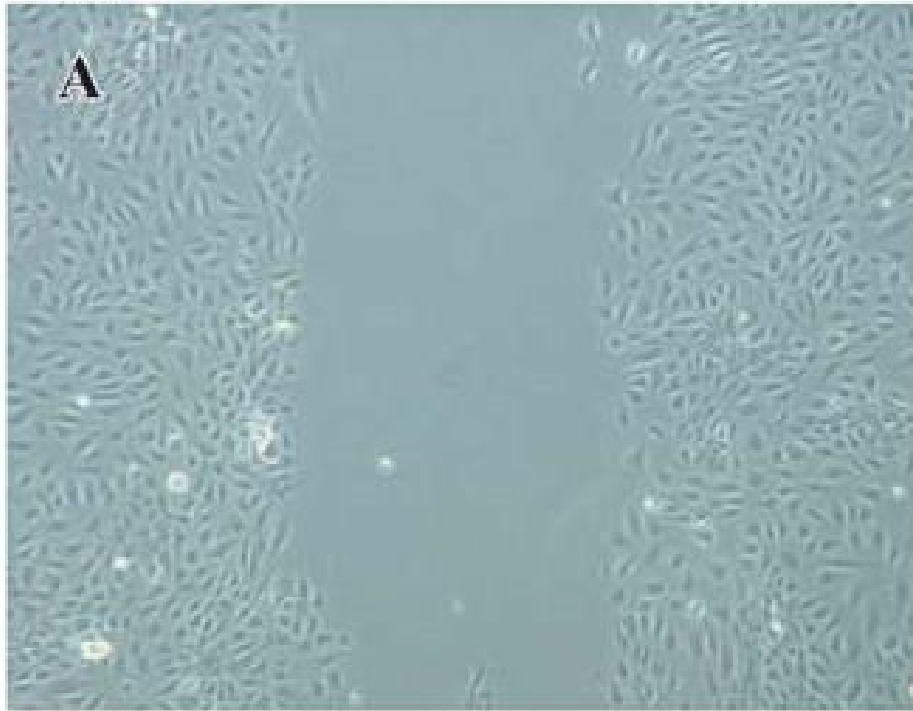
*J. Med. Chem.* 48, **2005**, 1610 - 1619.



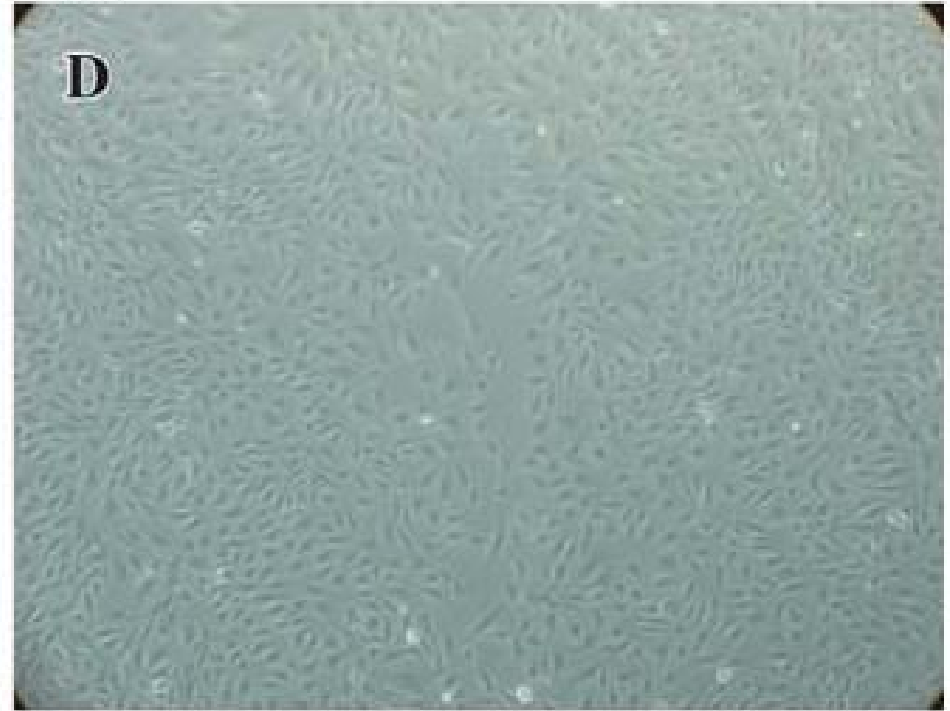
# HUVEC

(Human Umbilical Endothelial Cells)

0 h

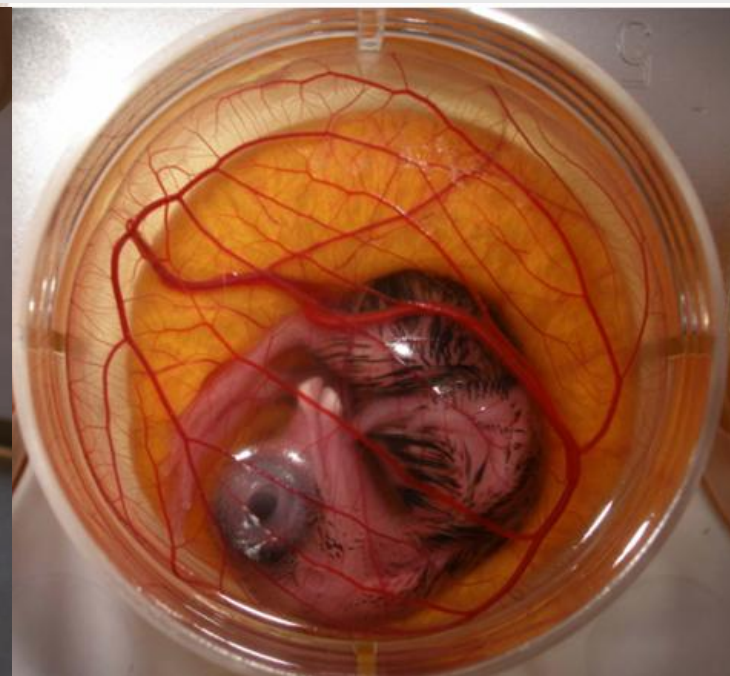
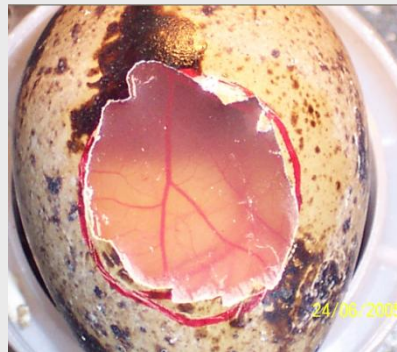


8 h

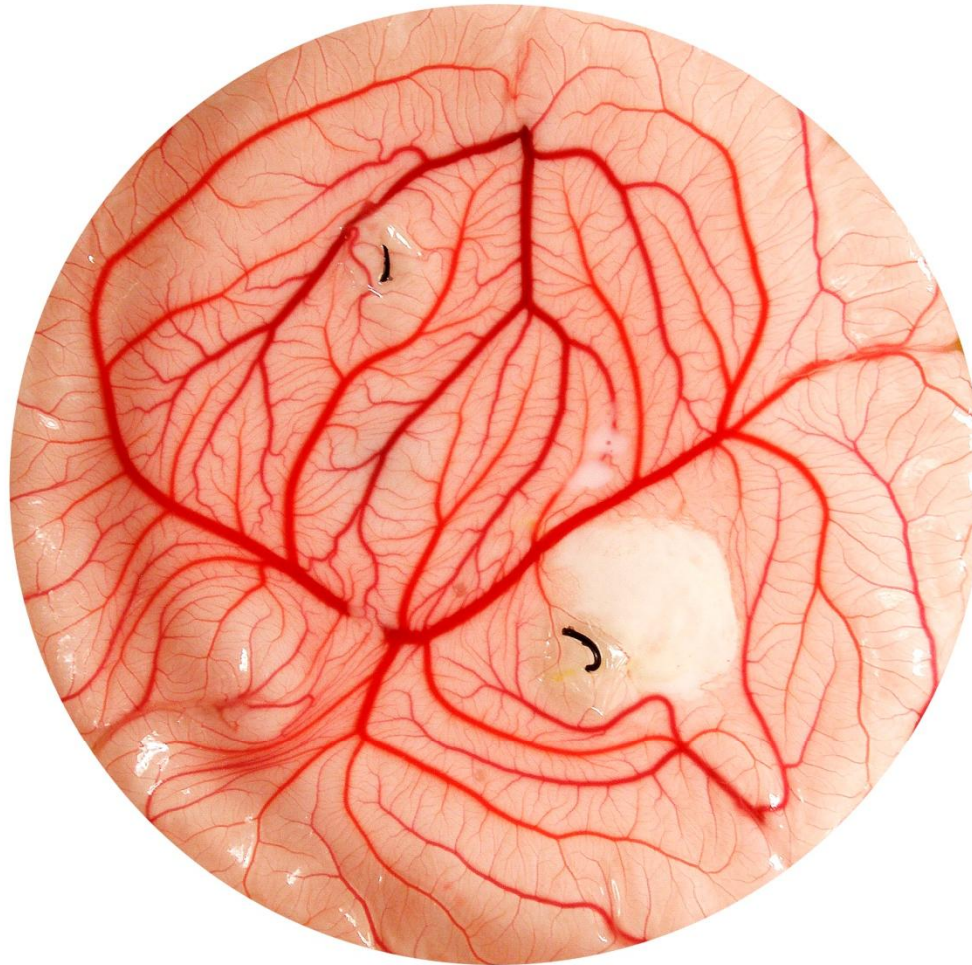


# Predklinické testy (*in vivo*)

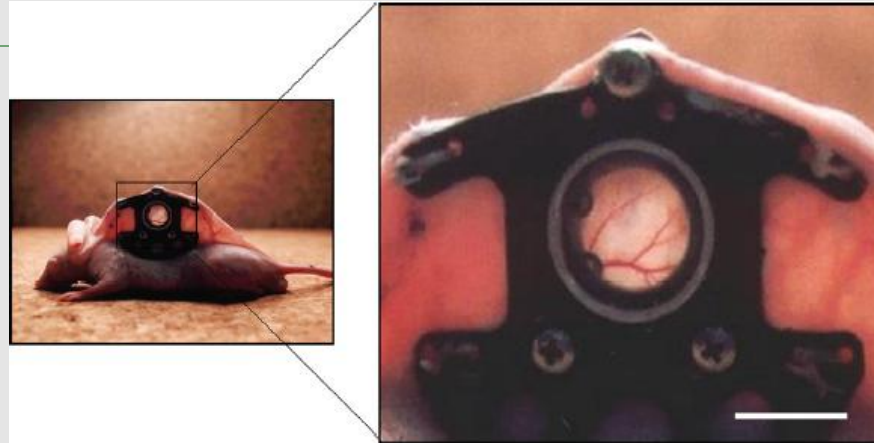
(Chick Chorioallantoic Membrane Model)



# CAM



## ž Dorsal skinfold window chamber model



## ž Zebrafish embryo model



*Aequorea victoria*

Zebra danio, *Brachydanio rerio*



# Súčasný stav antiangiogénnej liečby

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- ž od 2004 zavedené 3 klinické liečivá
- ž kombinácia s chemoterapiou
- ž molekulové liečivá → nízka toxicita
- ž klinické pokusy ⇒ nové liečivá

# AVASTIN® (Bevacizumab)

Humanised monoclonal VEGF antibody

FDA / 26.2.2004

Genentech, Roche

metastatic colorectal CCC, lung ca NSCLC,  
and breast cancer BC

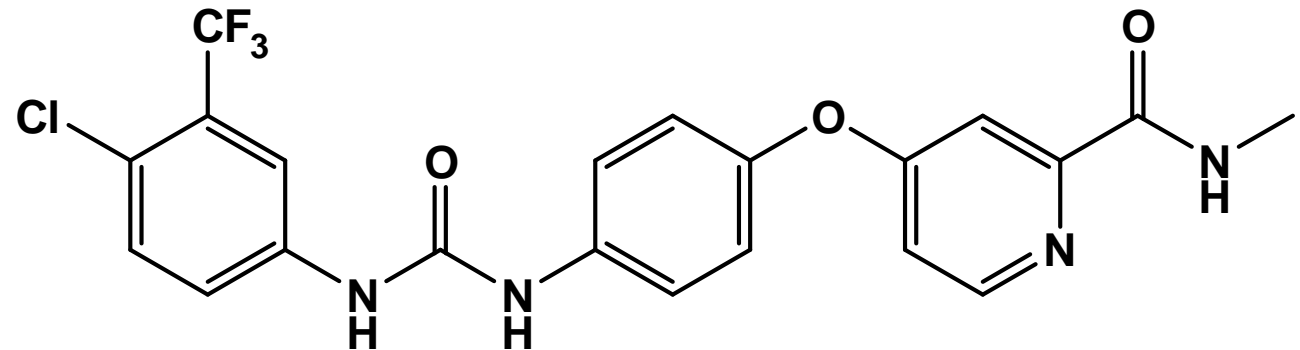
**4 230 Euro / g**

**121 Euro / day**

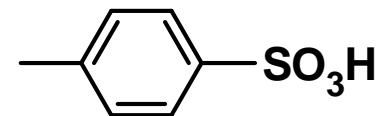
[1] Hurwitz H. et al. *N Engl J Med* 350, 2004, 2335-42.

# NEXAVAR<sup>®</sup> (Sorafenib tosylate)

- FDA 20.12.2005, Bayer/Onyx
- advanced renal cell ca (RCC)



**NEXAVAR**  
(Bay 43-9006)



picolinamide

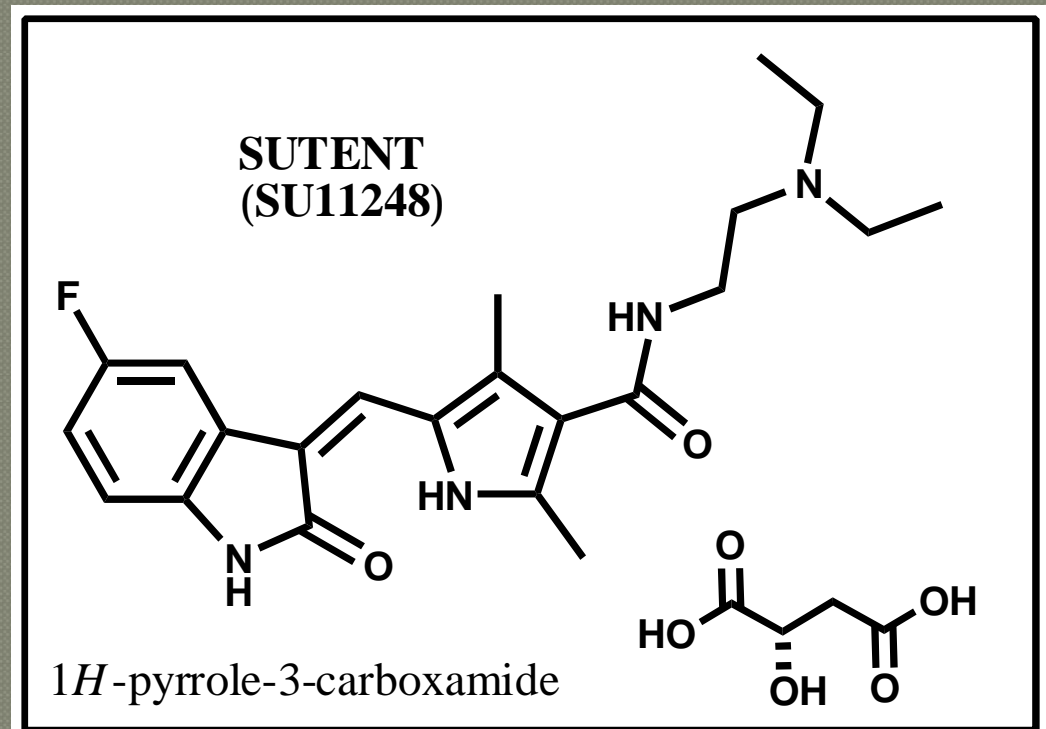
**212 Euro/g**

**170 Euro/day**

# SUTENT<sup>®</sup> (Sunitinib L-malate)

- FDA 26.1.2006 , Pfizer, Inc.  
GIST and advanced renal cell carcinoma
- VEGFR multi TK inhibitor oral drug

**4 437 Euro / g**  
**151 Euro / day**

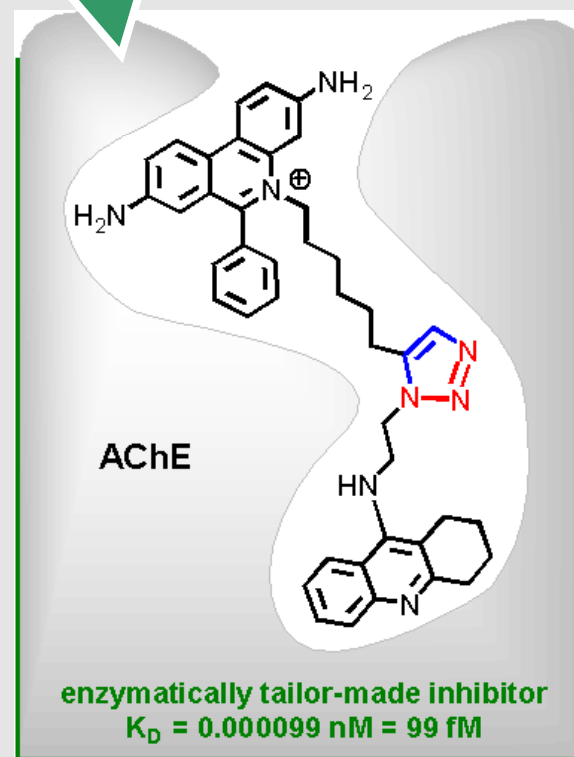
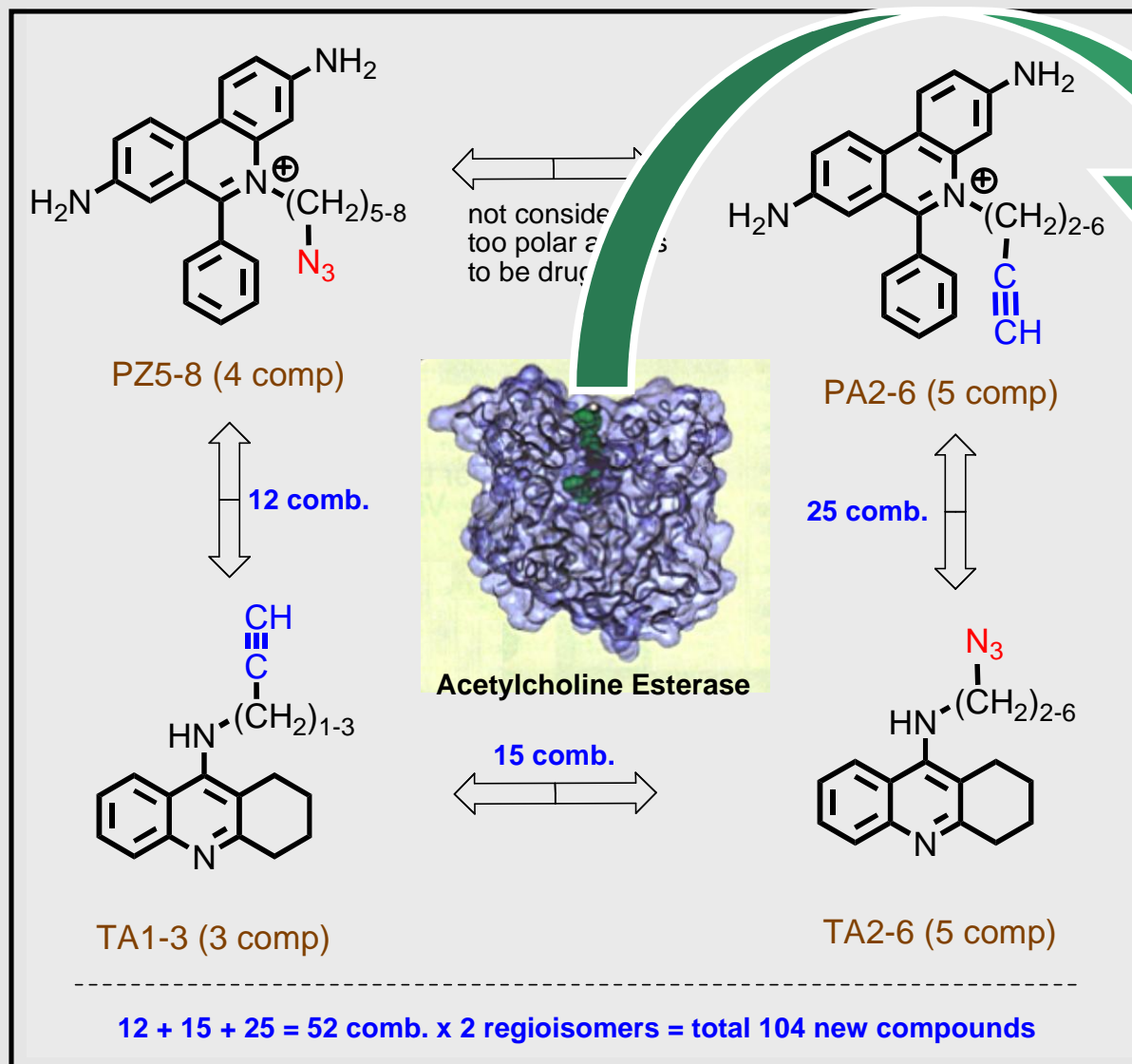


# Orthogonal In Situ Click Chemistry

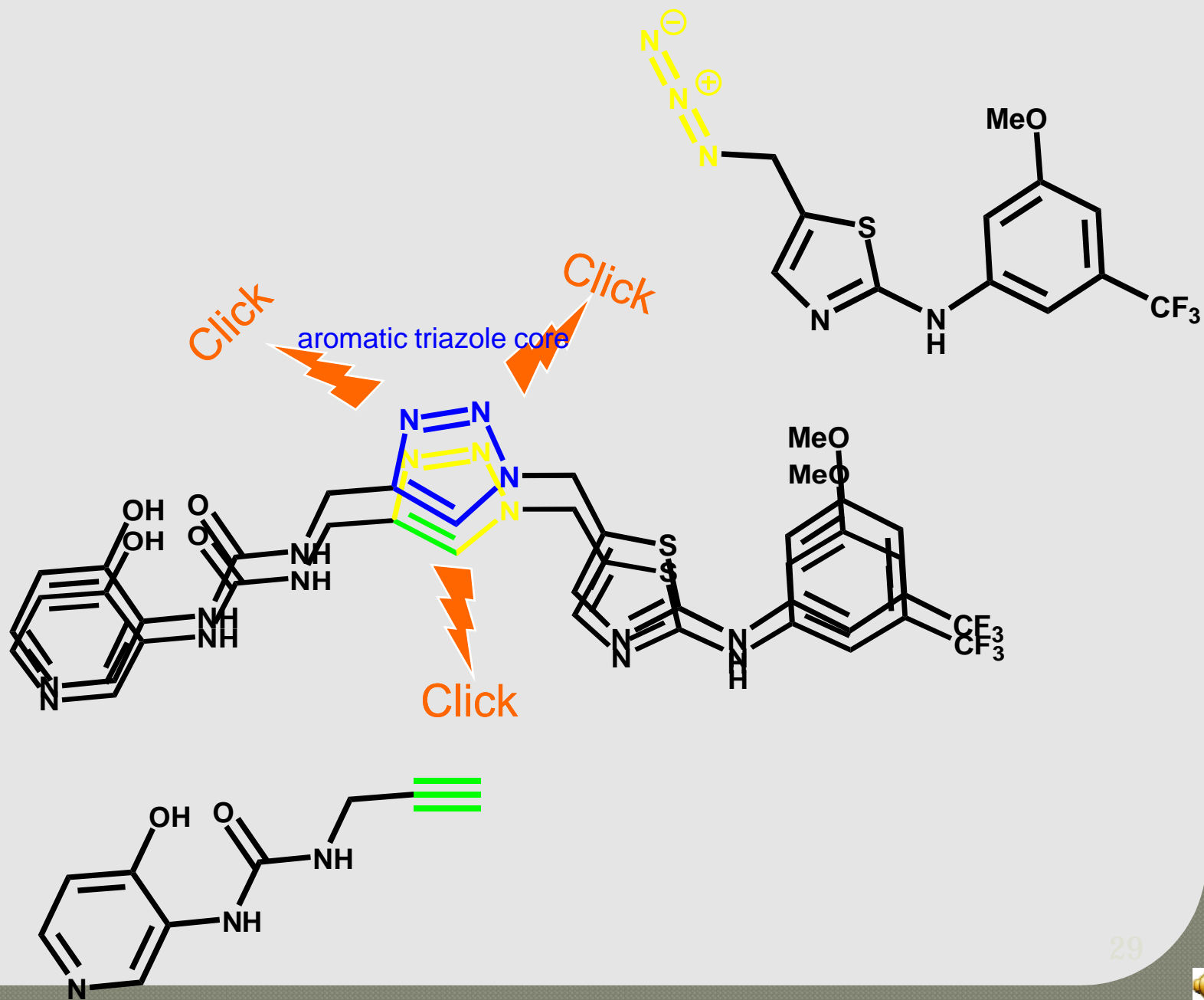
The enzyme AChE catalyzes the formation of its own femtomolar inhibitor.



K.B. Sharpless



# Irreversible Ligation by Click [3+2] Cycloaddition



# COST CM 0602 (2007-2011)

Inhibitors of angiogenesis: design, synthesis and  
biological exploitation

<http://www.cost.esf.org>  
[www.angiokem.org](http://www.angiokem.org)

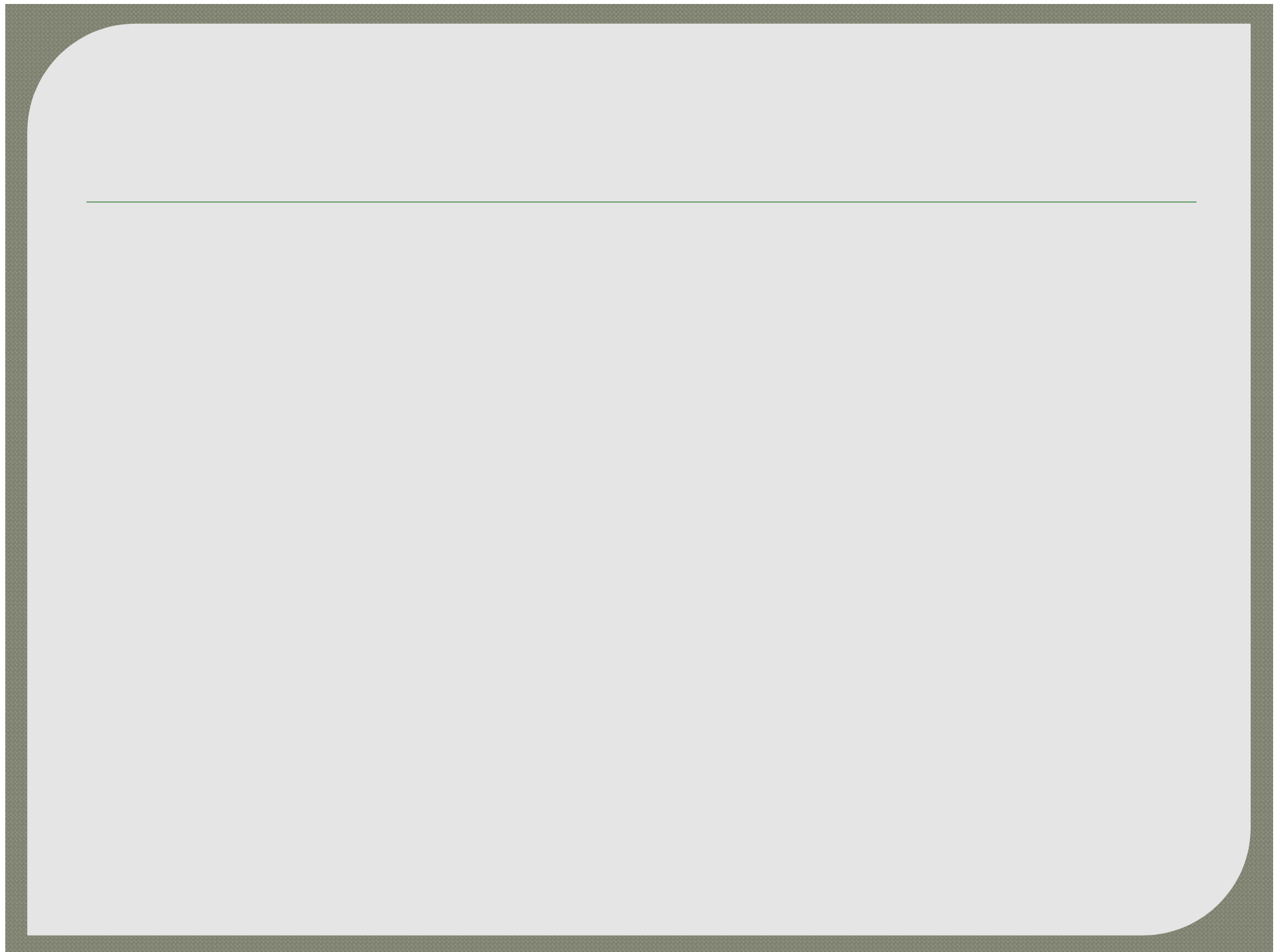


ž Ďakujem za pozornosť

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**NATURE IS EXCITING**





# biological assays

## ž *In vitro* / cultured EC

- proliferation (MTT), migration (Boyden chamber, Wound healing), tube formation models (differentiation, Matrix assay)
- culture organ model (Rat aortic ring assay, mimics *in vivo* model, different cells + extracellular matrix, no tumor cells)

## ž *In vivo* (complexity, biological)

pericytes, smooth muscle cells, fibroblasts, extracellular matrix, mesenchymal cells, immune cells, tumor cells

- Subcutaneous model (sponge / Matrigel + cells/ inhibitor → amount of haemoglobin)
- Corneal angiogenic assay
- Dorsal air sac model (ca cells in chamber with f
- Different tumor models (xenograft / imunodef. survival, tumor cells produce GFP, vessels are dark)

