



Fragment Based Druggability (Ligandability) Screening to Predict Lead Discovery Success

FBLD case story – Non-covalent inhibitors
of rhinovirus 3C protease: Pursuing the
needle in the haystack

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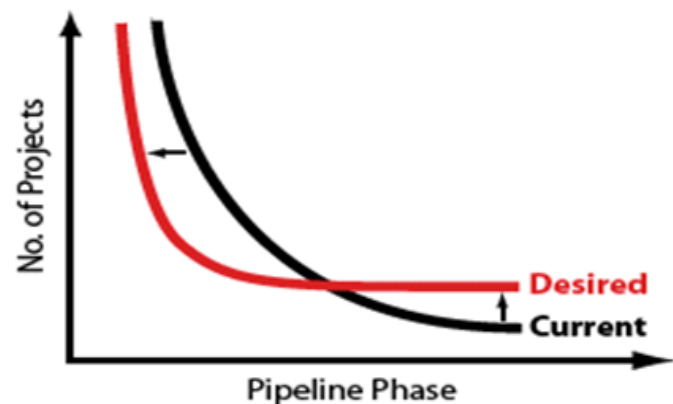


- Fragment based approaches alive and well within AstraZeneca!
 - Structure driven FBLD
 - Often run in parallel with HTS
 - Fragment assisted approaches gaining in importance – structure support not required
- Either Biophysical or Biochemical fragment screening – or both
- Large fragment library (~20k compounds)
- Large corporate collection – mine for rapid follow-up

Increasingly more difficult playing field for Pharma industry



- Only ~1% of drug discovery projects make it to market industry-wide
- Lead discovery success rates only at ~50%
- Late stage failure more costly
- High volume - high attrition models not successful
- Modest HTS success rates
- Few new targets successfully addressed with small molecule drugs each year
- Increased regulatory pressures
- Novel mechanisms sought
- What to do?



More informed target selection – pick winners early on



- “**Druggability**” usually refers to the likelihood of finding orally bioavailable small molecules that bind to a particular target in a disease-modifying way
- Useful to distinguish ability of a target to bind small molecules from more complex pharmacokinetic and -dynamic mechanisms
- Term “**ligandability**” refers just to ability of a target to bind small molecules
- Accurate predictions of ligandability has potential to greatly influence both selection of targets & lead discovery strategy
- A number of computational methods described
 - Ligand based – requires prior ligand knowledge
 - Structure based – requires 3D protein structure

Fragment based druggability screening

- Experimental method introduced by Abbott Laboratories in 2005
- Fragments sample chemical space more efficiently than large drug-like molecules
- NMR fragment screening hit rate correlates with presence of high affinity ligand
- Fragment screens appear to be predictive of small molecule druggability/ligandability

Table 1. Targets, Binding Sites, and Hit Rate Data Derived from Heteronuclear-NMR-Based Screening against 23 Protein Targets

protein no.	pocket no.	target ^a	binding site ^b	no. tested ^c	no. hits ^d	no. series ^e	hit rate	K _D range (μM) ^f	high-affinity ligand? ^g	log(HR)	
										expt ^h	pred ⁱ
1	1	AK	adenosine	4600	10	9	0.22	80–5000	yes	–0.66	–0.42
2	2	Akt-PH	IP3	8090	1	1	0.01	–		–1.91	–1.98
3	3	Bcl-xL	Bak	9373	73	59	0.78	10–5000	yes	–0.11	–0.64
4	4	bir3	peptide	8640	8	8	0.09	600–2600		–1.03	–0.72
5	5	CMPK	CMP	8090	6	3	0.07	30–240		–1.13	–0.81
5	6	CMPK	other ^b	8090	4	3	0.05	30–440		–1.31	–1.27
6	7	E2-31	DNA	1532	3	3	0.20	1000–4200		–0.71	–0.72
6	8	E2-31	other ^b	1532	3	3	0.20	30–2300		–0.71	–0.42
7	9	ErmAM	SAH	7233	7	7	0.10	50–3800		–1.01	–0.87
8	10	FBP	DNA	8090	2	2	0.02	200–1700		–1.61	–1.04
9	11	FKBP	FK506	6950	65	60	0.94	10–5000	yes	–0.03	–0.24
9	12	FKBP	other ^b	6950	4	1	0.06	100–2100		–1.24	–1.22
10	13	HL-0065	ADP	8640	13	10	0.15	10–2500		–0.82	–1.28
11	14	LCK	pTyr	6953	43	38	0.62	200–5000	yes	–0.21	–1.07
12	15	LFA	IDAS	11029	44	23	0.40	10–1000	yes	–0.40	–0.35
13	16	MDM2	p53	8640	28	14	0.32	10–420	yes	–0.49	–0.35
14	17	MurA	UDPNAG	9600	4	2	0.04	30–600		–1.38	–1.44
15	18	MurI	Glu	8640	1	1	0.01	2000		–1.93	–2.00
16	19	PAK4	ATP	11450	19	17	0.17	20–1000		–0.78	–0.63
17	20	Pin1	peptide	7842	9	9	0.11	50–1900		–0.94	–1.49
18	21	PSD95	peptide	11759	0	0	0.00	–		–2.00	–1.99
19	22	PTP1B	catalytic pTyr	11892	25	20	0.21	50–5000	yes	–0.68	–1.15
19	23	PTP1B	noncatalytic pTyr	11892	2	2	0.02	1000–5000		–1.77	–1.66
20	24	SARS	RNA	8440	1	1	0.01	1000		–1.93	–1.92
21	25	SCD	substrate	622	5	5	0.80	20–5000	yes	–0.09	–0.55
22	26	survivin	Bir3	9370	1	1	0.01	130		–1.97	–1.99
22	27	survivin	other ^b	9370	33	30	0.35	10–5000	yes	–0.45	–0.35
23	28	UK	peptide	1252	5	5	0.40	10–240	yes	–0.40	–0.81
total hits at known sites:				375							
total hits at all sites:				419							
percent of all hits at known sites:				89.5							

From: Hajduk *et al.*, J. Med. Chem. (2005) **48**, 2518

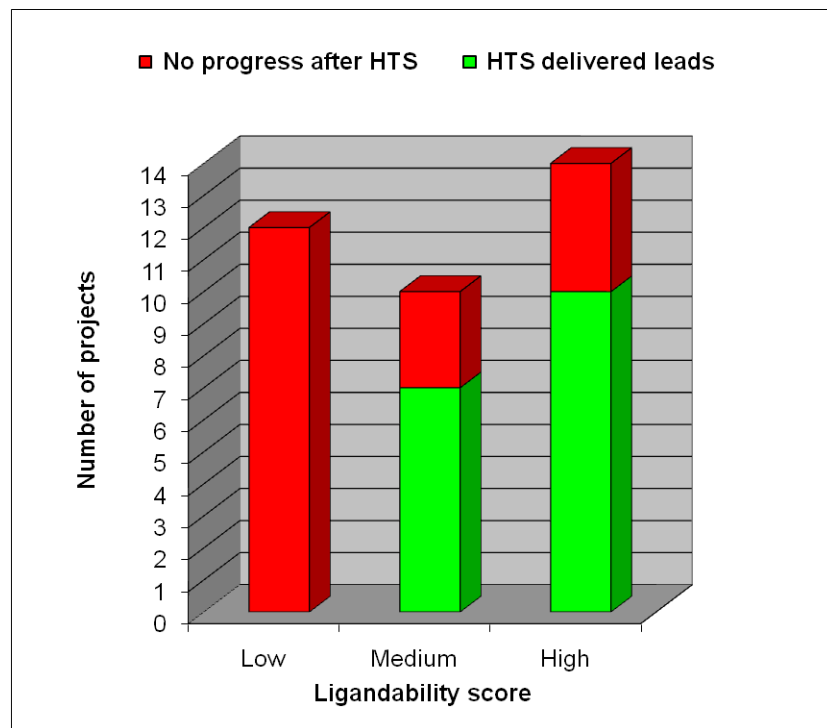


- 36 drug discovery projects from 2001-2008 analyzed
 - Both conventional HTS & fragment screening by NMR conducted
 - Overall Lead Discovery success rate 50% - agrees well with AstraZeneca HTS success rate for same period
 - Mix of kinases, proteases, nuclear receptors & bacterial enzymes – but a clear bias towards soluble targets
 - Library size – 768-2000 fragments
- AstraZeneca ligandability scoring definition
 - Not simply hit rates
 - **Low** – no or few fragment hits, best affinity generally $>1\text{mM}$, low/no diversity
 - **Medium** – numerous hits with best affinity $0.1\text{-}1\text{mM}$,
 - **High** – high fragment hit rate with best affinity $<0.1\text{mM}$, high level of diversity
- Projects binned according HTS success rate and overall Lead Discovery success rate

Ligandability score versus HTS outcome

- Comparison between fragment screens and project success based on HTS output
- When ligandability score was **low** the HTS always failed to deliver
- When the ligandability score was **medium** or **high** the HTS success rate was ~70%
- Low ligandability score predictive of failure

Results from 36 fragment screening projects



Ligandability Score Definitions:

Low – no or few fragment hits, best affinity generally >1mM

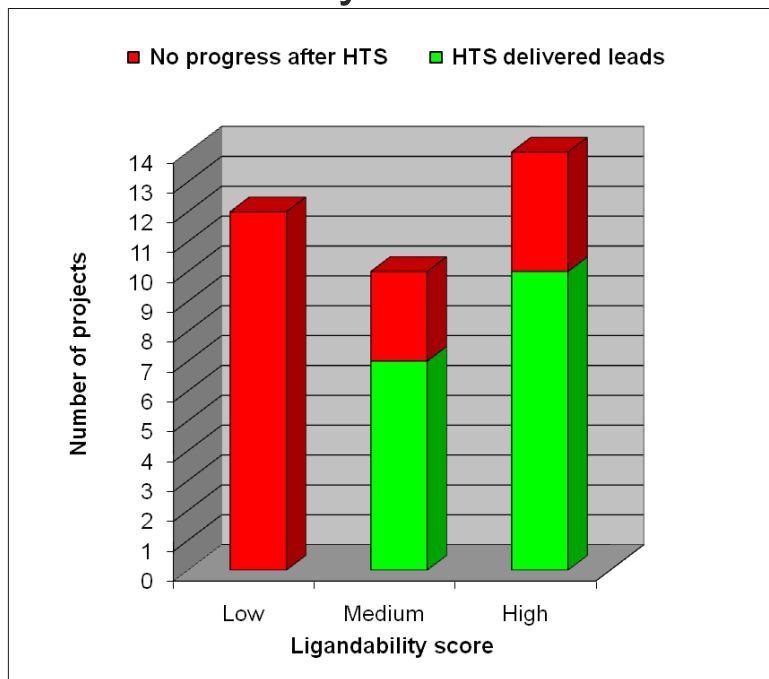
Medium – numerous hits with best affinity 100uM-1mM

High – high fragment hit rate with best affinity <100uM

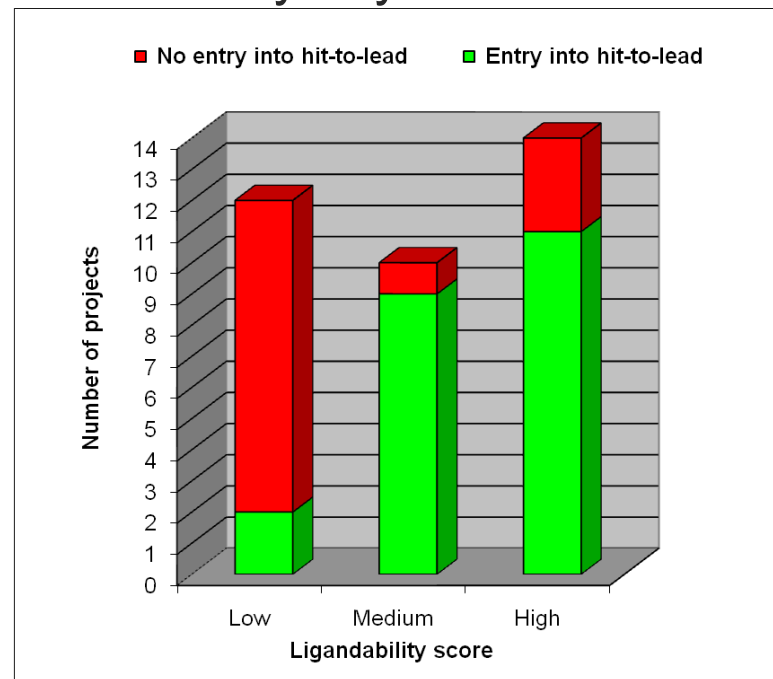
Ligandability score versus entry into hit-to-lead program

- Alternate lead generation strategies (e.g. FBLD, fast follower) increase success rates
- High/medium ligandability targets should be successful with appropriate strategy - could be HTS, FBLG, FF or mix thereof)
- It may be possible to succeed with low ligandability targets – but it will be extremely difficult

By HTS

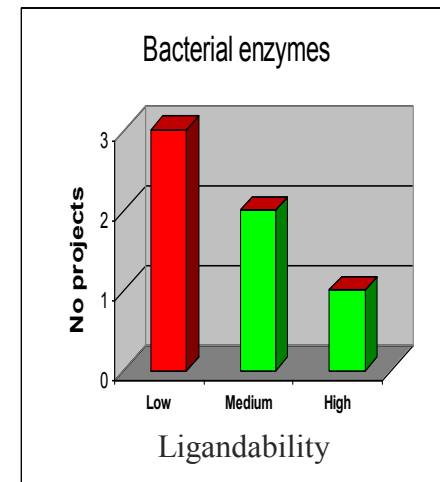
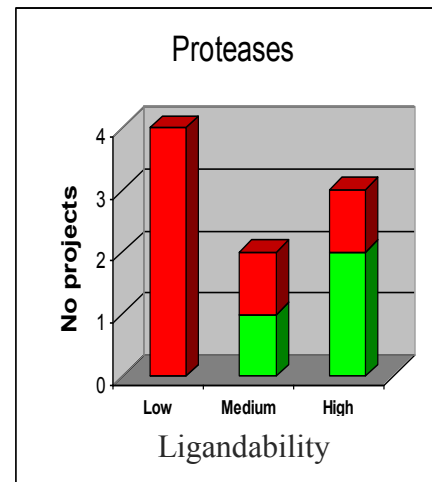
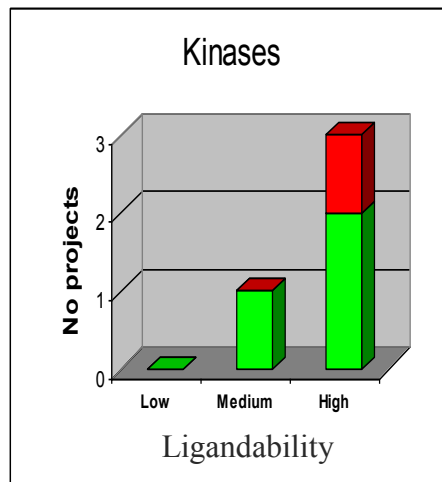
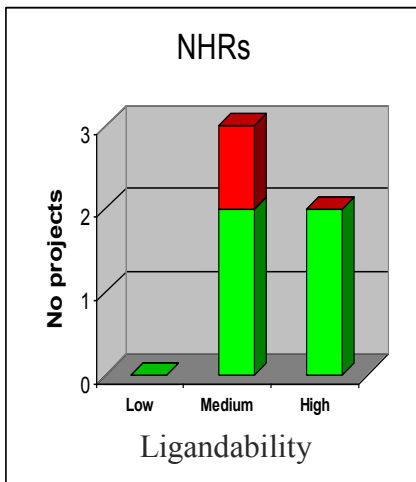


By any means

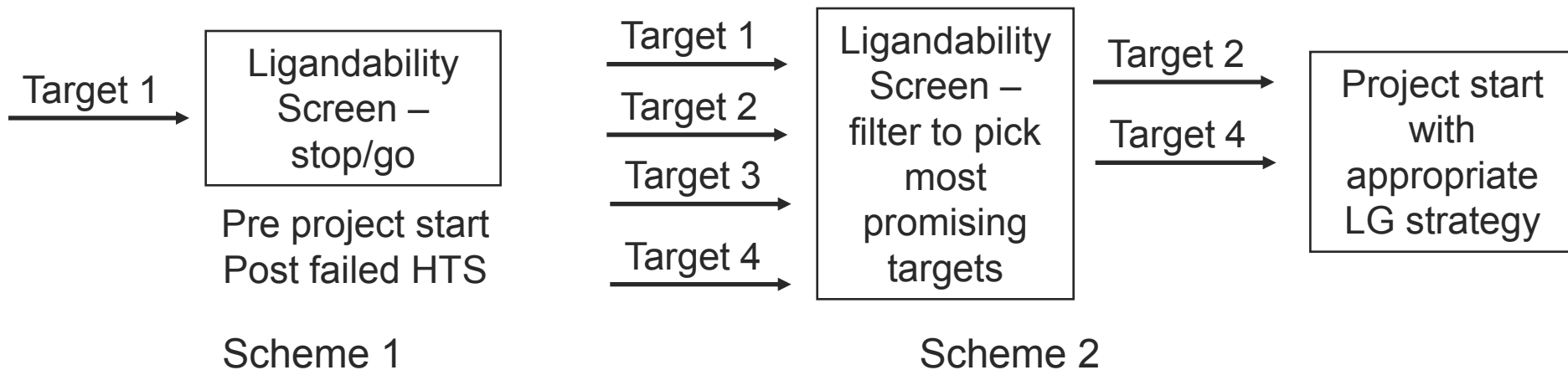


Target class view

- Some target classes clearly more druggable/ligandable than others – reflected in fragment screening data
 - NHRs & kinases are generally druggable
 - Proteases and bacterial enzymes tend to be more difficult
- Reality check
 - Estrogen receptor β (ER β) – medium ligandability & drugs on the market
 - Protein tyrosine phosphatase 1B (PTP1B) – low ligandability, extremely challenging target, no drugs on market in spite of considerable efforts



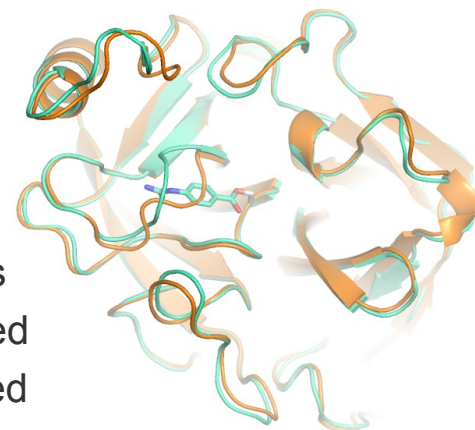
Recommended ways of using Ligandability screening



- Information needs to be considered as part of an overall tractability assessment
- Most value for unprecedented / novel / previously intractable targets
- Early access to ligand information - ‘fingerprint’ for downstream phys-chem. property space
- Establish feasibility of FBLD approach
- Requires robust & reliable screening method - NMR & SPR
- Critical to avoid false positives & false negatives

Ligandability screening example – Ser-protease example

- **Target:** trypsin-like serine protease
- **Indication:** Chronic obstructive pulmonary disease (COPD)
- **Prior knowledge:**
 - Crystal structures with non-specific covalent Ser-protease inhibitors
 - Low nM specific covalent & reversible peptide-like inhibitors reported
 - Asp-residue at bottom of S1-pocket but access to S1-pocket blocked
 - Competitor claims their HTS failed to yield any viable leads
- **Question asked: Is target really ligandable?**
- **Type of screen:** 1D NMR screen with competition
- **Outcome:**
 - Low hit rate (0.4%); classic amide, amidine, guanidine fragments do not bind competitively; fragment hits show no resemblance to classic Ser-protease binders
- **Ligandability score: low**
- **Conclusions & comments :**
 - Druggability score delivered prior to project launch
 - Information used to devise strategy for project - FBLD initially planned put on-hold
 - Limited initial scoping including synthesis & pre-screen yielded nothing
 - HTS has gone ahead – output is looking meager

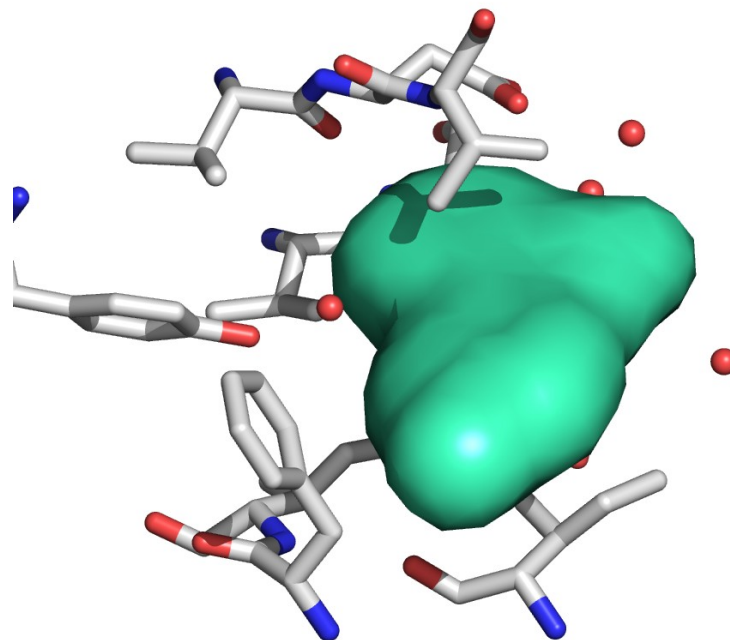


Apo vs complexed protein showing collapsed S1-pocket

Ligandability screening – dehydrogenase example

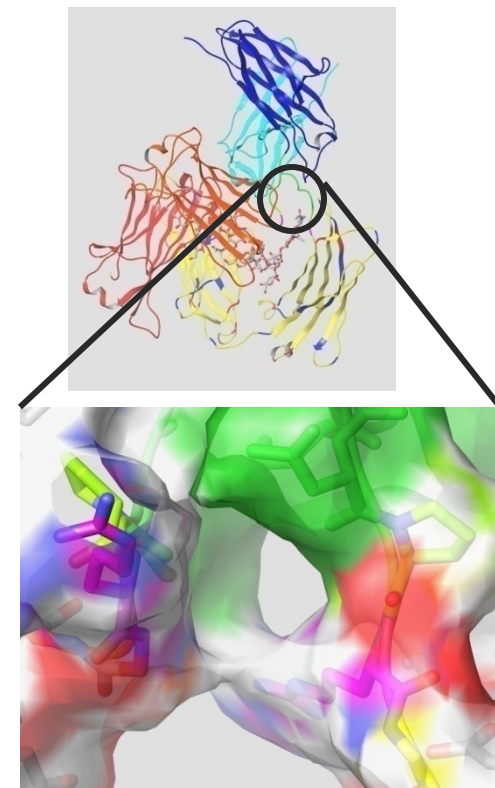
- **Target class:** NADH dependent dehydrogenase
- **Indication:** Oncology
- **Prior knowledge:**
 - no hits from HTS (turnover assay)
 - binders known for NADH pocket
 - too weak to show inhibition
 - druggability for NADH pocket unknown
- **Type of screen:** 1D NMR, NADH competition to confirm binding site, 2D characterization
- **Outcome:**

3.5 % hit rate; ~40 fragment hits; affinity <1mM;
several clusters with drug like structures; soaking of fragment hit gave a crystal structure
- **Ligandability score: medium**
- **Conclusions & comments:**
 - Fragments interesting but weak -> not active in enzyme assay
 - Project restarted as FBLG campaign using fragments as start points
- Fragment linking has generated cell active, sub μ M tool compounds



Ligandability screening example - immunoglobulin E (IgE)

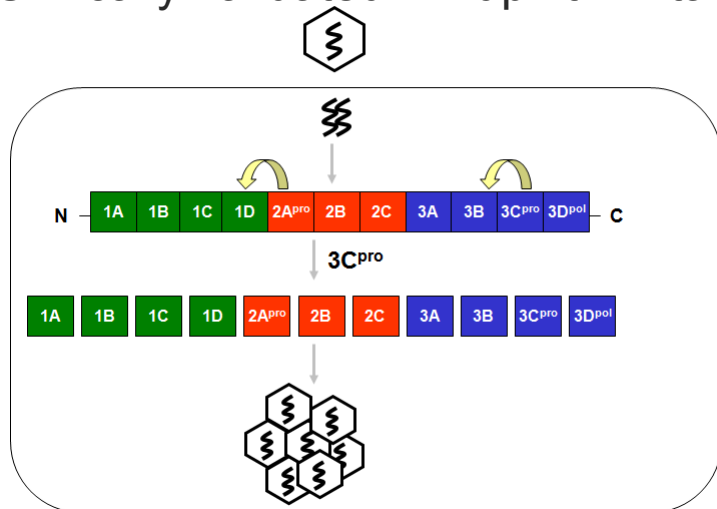
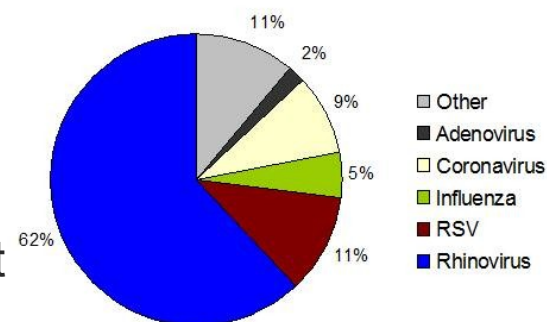
- **Target:** immunoglobulin E (IgE)
- **Indication:** inflammation, validated target – anti-inflammatory antibody therapies on market
- **Prior knowledge:**
 - Antibodies and peptide vaccines with epitopes outside receptor binding interface
 - Crystal structures suggest conformational change required for receptor binding
 - Potentially ligandable cavity in hinge region between domains
- **Question asked:** Can this target be addressed with small molecules?
- **Type of screen:** 1D NMR with cross-wise competition of binders
- **Outcome:**
 - Low hit rate; hits not cross-wise competitive
- **Ligandability score: low**
- **Conclusions & comments:**
 - No evidence for distinct binding site (hot spot)
 - Ligandability score combined with other negative data (VS based pre-screen)
– **no project start-up**



Structure of IgE with postulated binding site in hinge region

Pursuing the needle in the haystack – RV3CP

- Human rhinovirus (HRV) triggers respiratory infections & related diseases
- 75% of chronic obstructive pulmonary disease (COPD) and asthma exacerbations triggered upper respiratory virus infection – HRV accounts for 2/3rds
- Stop the virus – stop the exacerbation
- Several rhinovirus inhibitors in clinic – none on the market
- Rhinovirus 3C protease (RV3CP) involved in processing of viral polypeptide
- Clinically validated – Rupintrivir taken to phase II trials



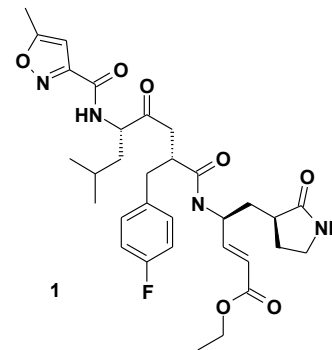
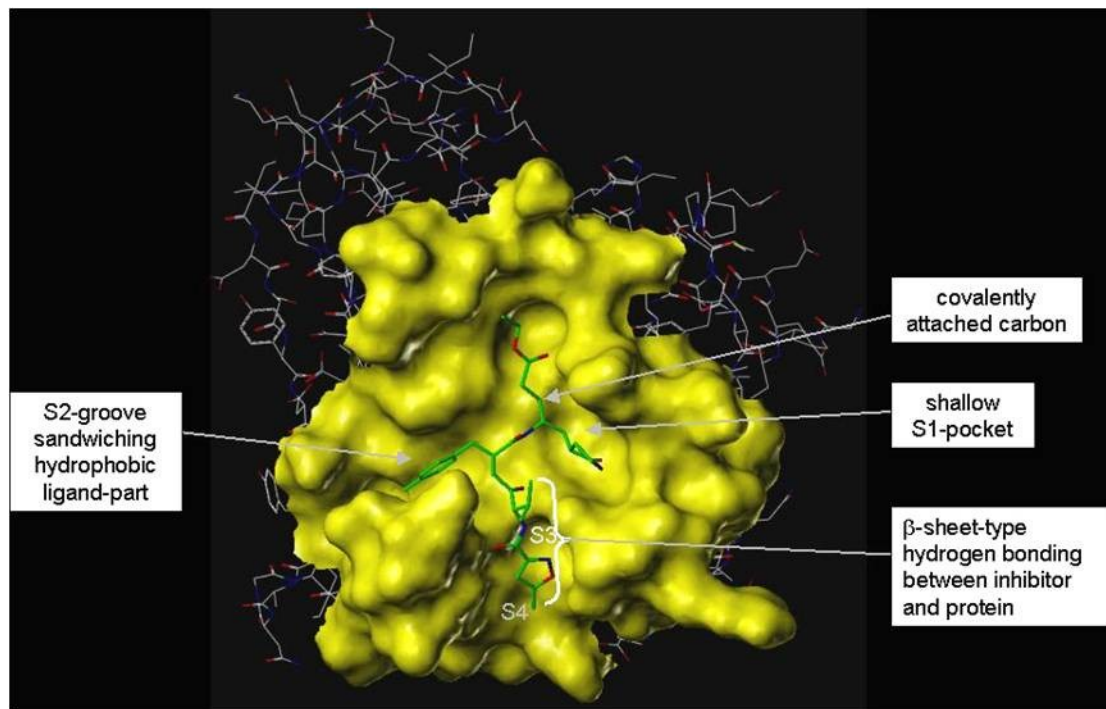
3C^{pro} performs **8/10** essential cleavages

No mammalian homolog

- Active site Cysteine
- Trypsin-like serine structure
- Cleaves Glu-Gly (unusual)

Crystal structure of RV3CP

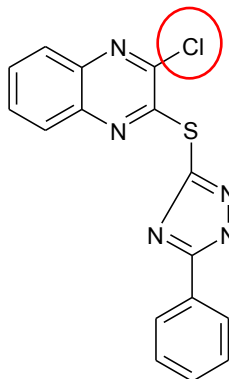
- All reported potent 3C protease inhibitors contain reactive groups that bind covalently to active site cysteine
- Reactive groups lead to unfavorable DMPK properties of compounds and result in serious side effects in patients - non-covalent inhibitors highly desirable
- Based on published crystal structure hit-finding predicted to be very challenging
- Binding pockets in the active site are shallow and affinity is very much driven by the reactive group – high chemical risk



Rupintrivir
Covalent 3CP inhibitor
Pfizer/Agouron
Stopped in Phase II
Developed through SBDD
J. Med. Chem. 41, 2806

High Throughput Screening (HTS) output

- Straight forward biochemical assay – monitor cleavage of fluorescent substrate
- Corporate collection screened (at 10 μ M)
- Basically no tractable non-covalent starting points identified
- Potentially interesting series turned out to be covalent inhibitors
 - Quinoxaline series – covalent attachment with irreversible loss of Cl (mass spectrometry)



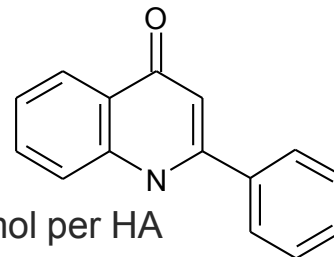
- 20k fragment library screened as part of HTS (at 100 μ M)
- Handful of compounds showing some inhibition of RV3CP

Initial quinolone structure activity relationship

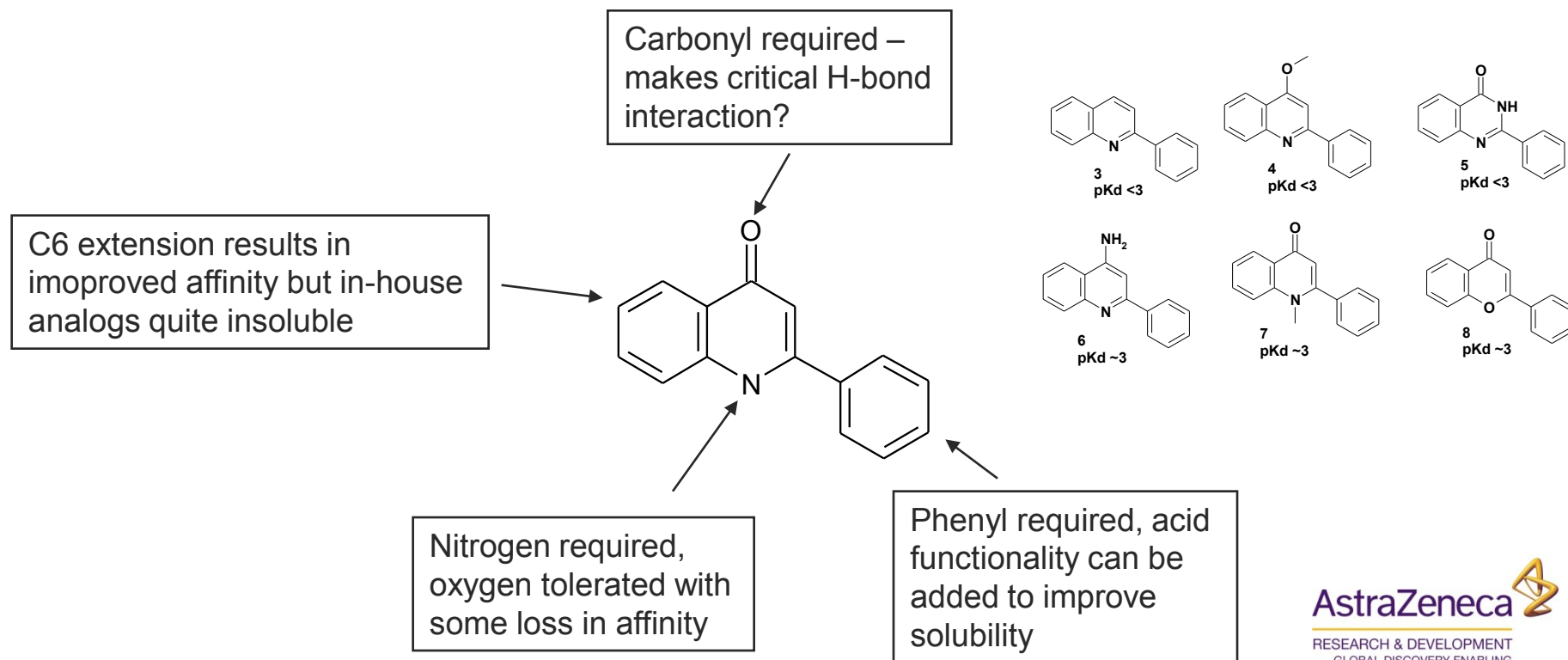
- 2D NMR binding assay used to confirm compound binding, generate Kds, binding site information & to drive fragment evolution
- Quinolone – only confirmed fragment

NMR pKd = 3.7

Ligand Efficiency = 0.30 kcal/mol per HA

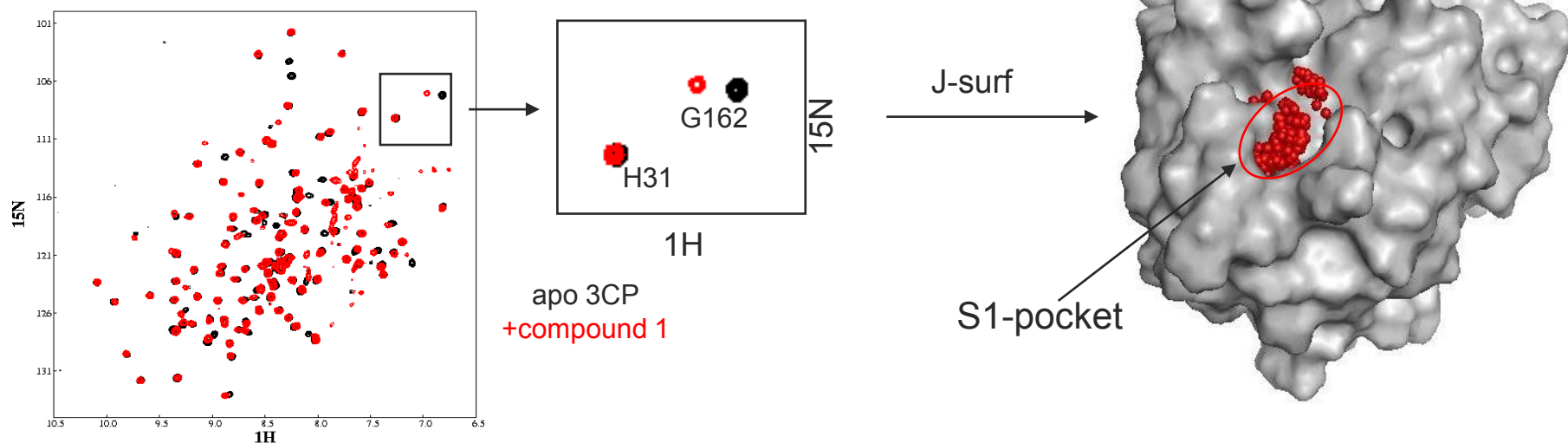


- Initial SAR by NMR from in-house analogs



Quinolone binding mode

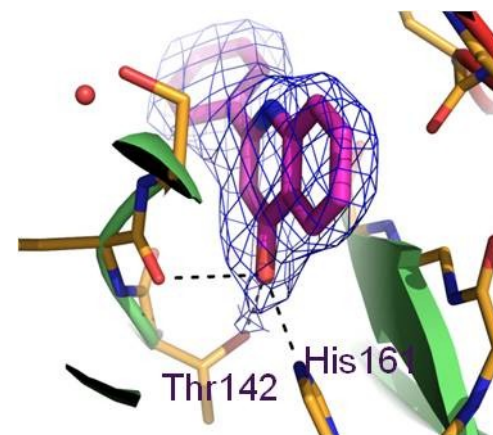
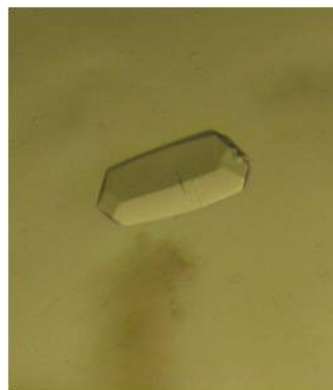
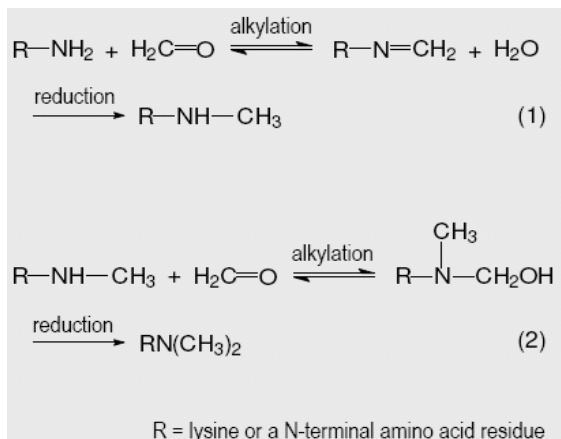
- Chemical shift mapping
- Program J-surf (JACS, 124, 11758-63) used to calculate most probably location of ligand
- Binding site most likely S1-pocket



- Additional NMR fragment screening
 - 1600 general fragments screened at 1mM
 - Low hit rate – 0.2%
 - No useful hits – only three chemically unappealing fragments identified

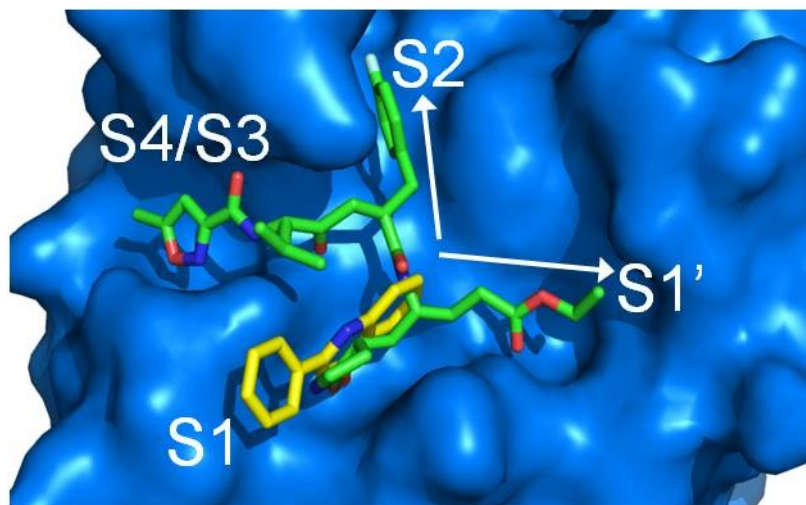
Crystal structure with quinolone fragment

- Extremely challenging system – small flexible protein
- Large peptidic inhibitors stabilize active site & sub-pockets
- Extensive work: >2 years, >20 constructs, exhaustive screening
- System never iterative – only one structure determined
- Quinolone fragment crystallized using reductive methylation
- Quinolone binds in S1-pocket – carbonyl makes hydrogen bonding interactions with His161 & Thr142



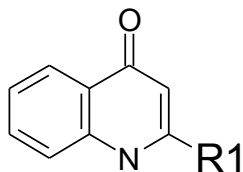
2.4 Å resolution at synchrotron

- Published structure with Rupintrivir
 - Peptidic inhibitor covers entire binding site
 - Binding driven by covalent attachment in S1'
- The in-house quinolone structure
 - Fragment provides an optimal starting point in S1-pocket
 - Extend in direction of S1' or S2
 - Difficult to reach S3/S4

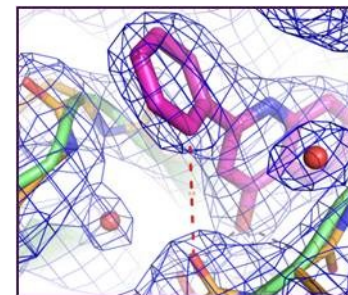
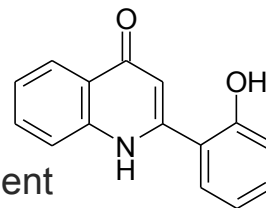


Quinolone fragment evolution – S1 pocket

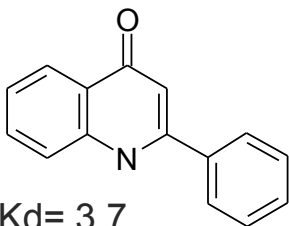
- Vary C2-phenyl in S1 pocket – opportunities to gain affinity based on structure



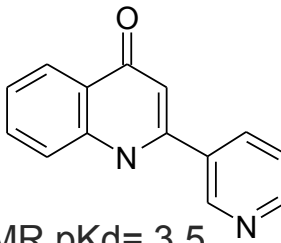
NMR pKd= 3
No improvement



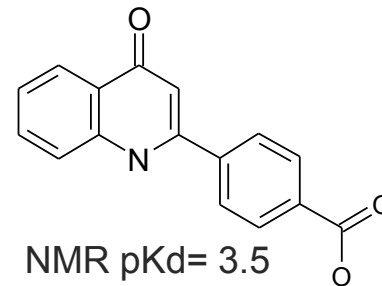
- No improvement in potency achieved but solubilizing groups can be added – phenyl optimal (makes stacking interaction)



NMR pKd= 3.7
Ligand Efficiency= 0.30 kcal/mol per HA
ACD log D= 4.3



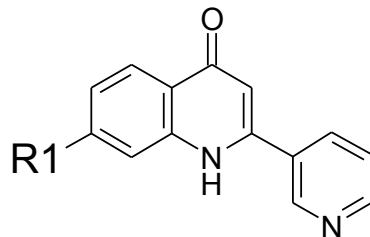
NMR pKd= 3.5
LE= 0.28
ACD log D= 3.4



NMR pKd= 3.5
LE= 0.24
ACD log D= 1.3

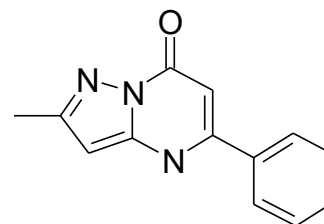
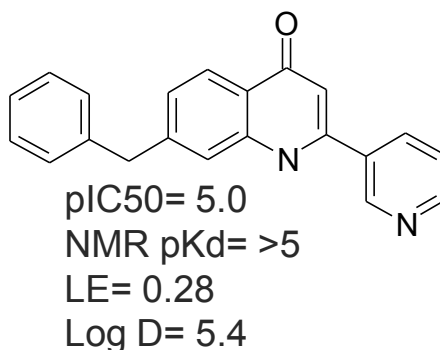
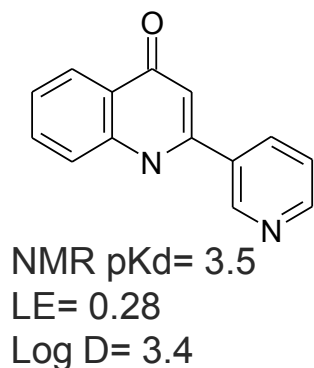
Quinolone fragment evolution – S2 pocket

- Extend from C7 to access S2 and/or S1' pockets – should be most optimal based on crystal structure



Compd	R1	% effect @ 100uM	pIC50
9	H	35	NA
10	Me	40	NA
11	MeO	<10	NA
12	CONHMe	40	NA
13	CH2CONHMe	45	NA
14	CH2Ph	100	5
15	(+/-)CH(OH)Ph	80	4.7

- 30-fold improvement in potency with maintained ligand efficiency achieved with only three different linkers tested



NMR pK_d= 3.3
LE= 0.26
log D= 1.7

- Success in developing non-covalent low uM inhibitors for further development
- Prospects for improving affinity through SBDD & solubility

- RV3CP – significant progress on a difficult target with only a single fragment hit and a single crystal structure to guide design
- Druggability/Ligandability screening appears to be predictive of project success based on analysis of historical data
- Ligandability data currently used in truly predictive way

Acknowledgements



Druggability work

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Loredana Spadola

Cristian Johansson

Karl Edman

Andrew Baxter

Sarah King

Adrian Freeman

Phil Rawlins

Nicola Williams

Mark Chambers, BioFocus

Herve Van de Poel, BioFocus