

Recent Advances in Antifungal Drug Development

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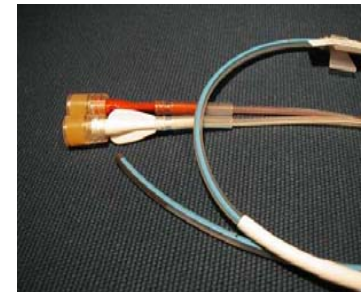
Outline

- History
- Marketed Drug Classes
 - Polyenes
 - Azoles
 - Echinocandins
- Future Targets
- Conclusions



Dramatic Increase

- 300% as many hospital-acquired fungal infections
 - Increase in immunocompromised population (HIV/AIDS)
 - Changes in medical practice
 - Immunosuppressive drugs
 - Harsh chemotherapy
 - Indwelling catheters
 - Indiscriminate use of broad spectrum antibiotics



Types of Fungal Infections



- Candidiasis – *Candida albicans*
 - Impaired immunity, receiving broad-spectrum antibiotic treatment
 - 80% of hospital-acquired infections
 - Mortality rate ~ 40%

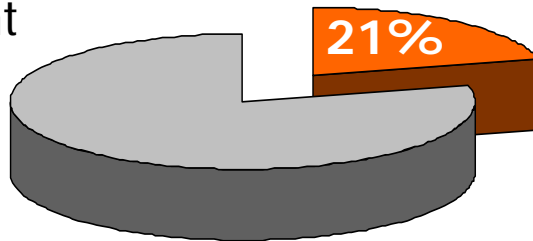


- Aspergillosis – *Aspergillus* spp.
 - Impaired immunity, corticosteroid recipients
 - 1/3 infected – never received antifungal therapy
 - Mortality rate ~ 80%

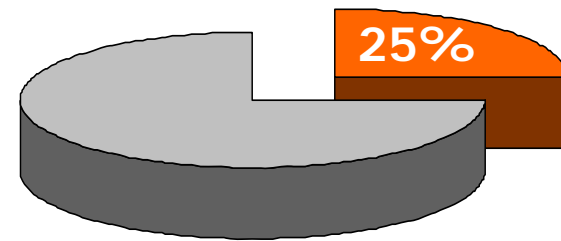
Impact of Infections



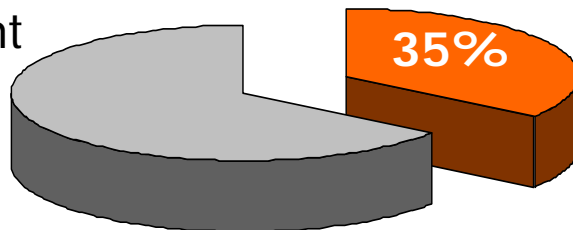
Heart transplant patients die of invasive aspergillosis



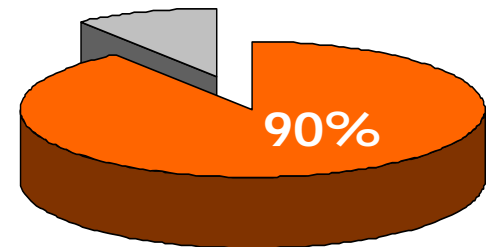
Infection-related deaths in leukemia patients



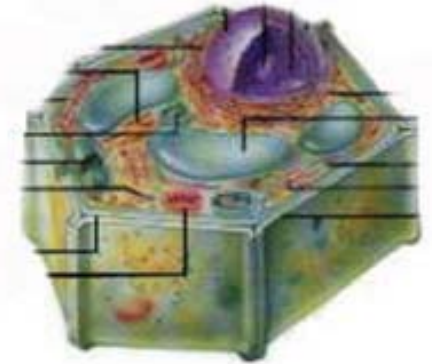
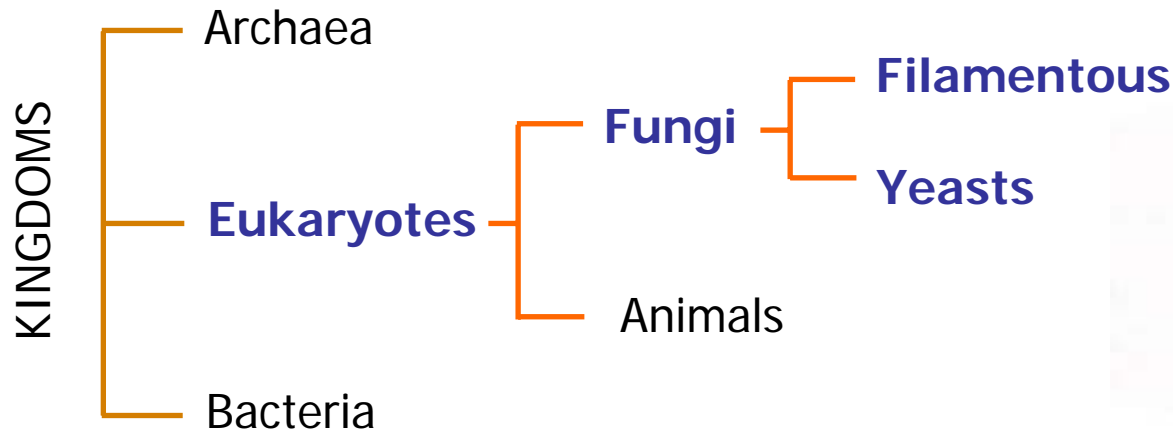
Lung transplant patients die of invasive aspergillosis



HIV/AIDS patients will contract fungal infections



Fungi Challenging to Target



- Cellular similarities
 - Complicates target identification
- Diversity of structure
- Diversity of metabolic targets



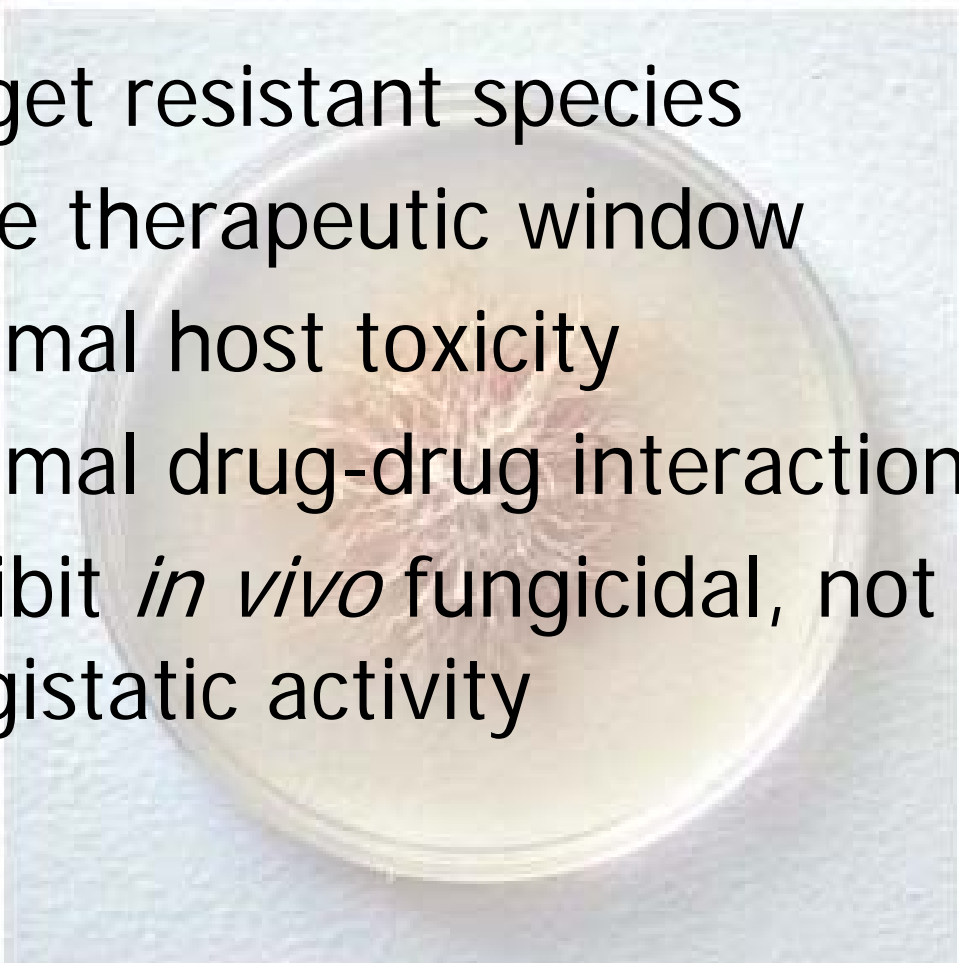


Too Few Antifungals

- Genetic tools unavailable
 - Down-played for many decades
 - Far fewer infections (until 1980s)
 - Inhibitory cost
 - 200 patents from 1998–2000
 - 10–12 years to clinic
- 
- A petri dish containing a culture of fungi, showing a dense, radial, branching pattern of growth in the center, likely representing a mold or yeast colony.



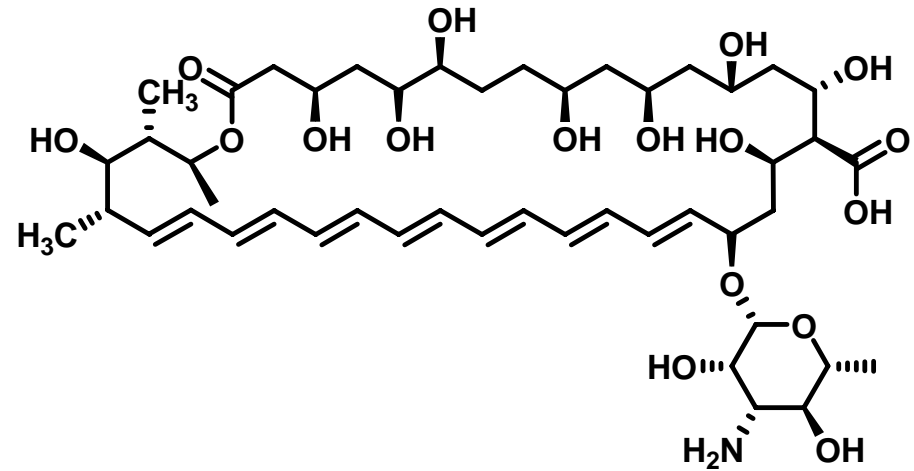
Necessary Characteristics

- Target resistant species
 - Wide therapeutic window
 - Minimal host toxicity
 - Minimal drug-drug interactions
 - Exhibit *in vivo* fungicidal, not fungistatic activity
- 



Antifungal Classes

- | | |
|--|------------------------------|
| ■ Polyenes | bind ergosterol |
| ■ Azoles | inhibit ergosterol synthesis |
| ■ Echinocandins | inhibit glucan synthase |
| ■ Allylamines | inhibit squalene epoxidase |
| ■ Nikkomycins | chitin synthesis inhibitors |
| ■ Sodarins | inhibit protein synthesis |
| ■ <i>N</i> -Myristoyl transferase inhibitors | |
| ■ Sphingolipid synthesis inhibitors | |

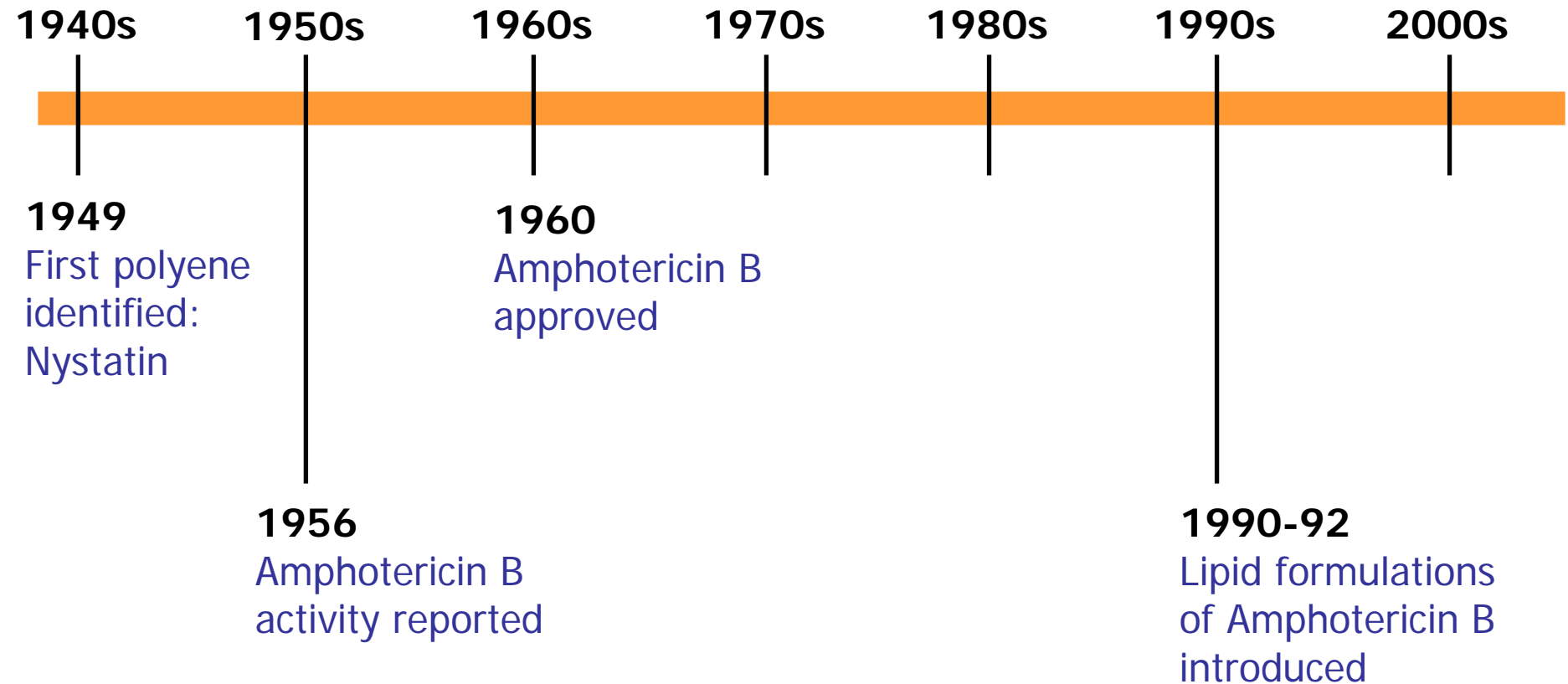


Polyenes

Binding ergosterol

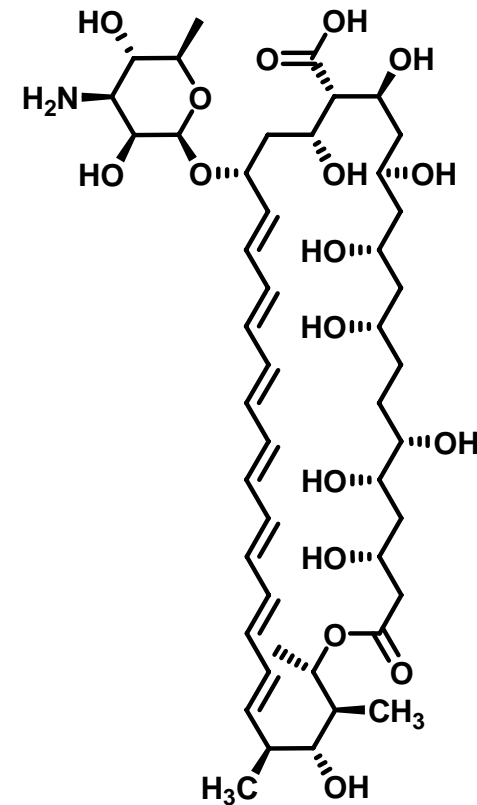


Key Events in Polyene History

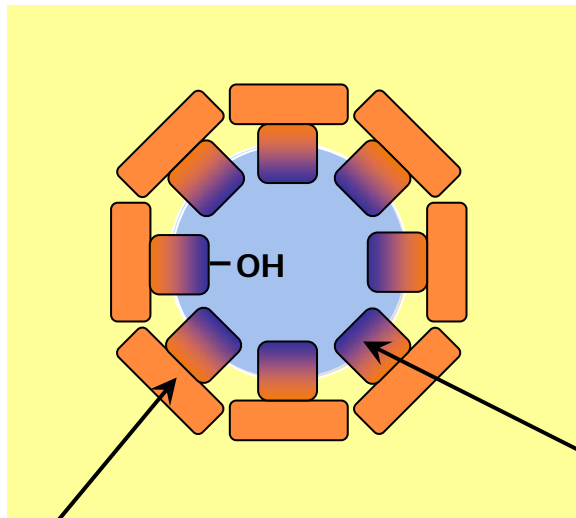


Amphotericin B

- Isolated from bacteria in 1956
 - *Streptomyces noursei*
- The gold standard
 - Most effective antifungal for over three decades
 - Fungicidal
 - Limited to fungi that contain sterols

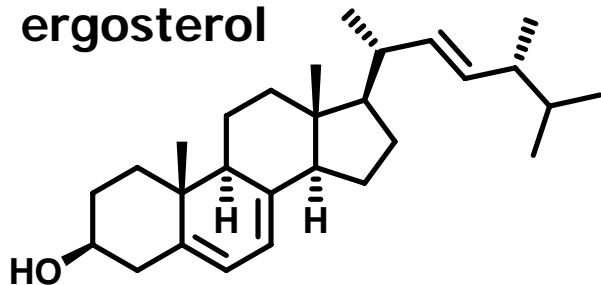


Mechanism of Action

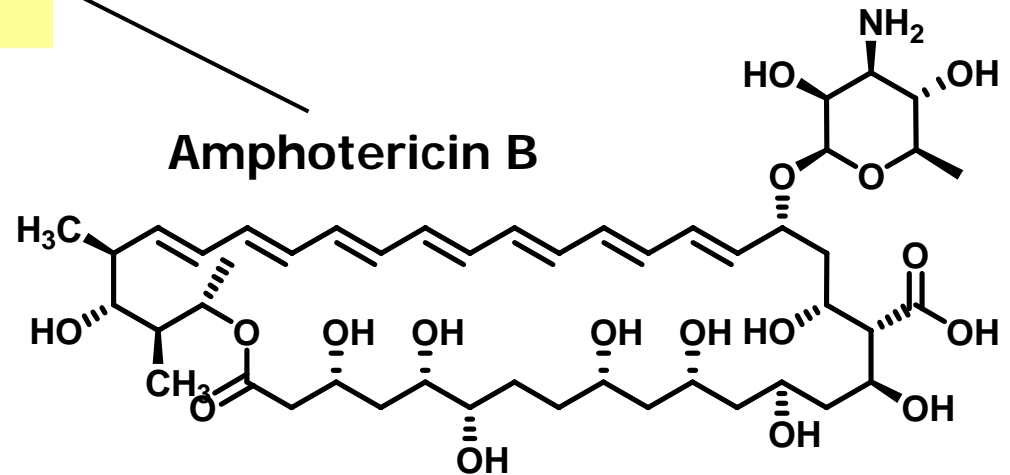


- Amphotericin B binds to ergosterol in cell membrane
- Alters permeability of membrane

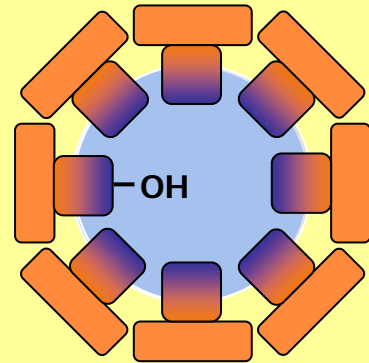
ergosterol



Amphotericin B

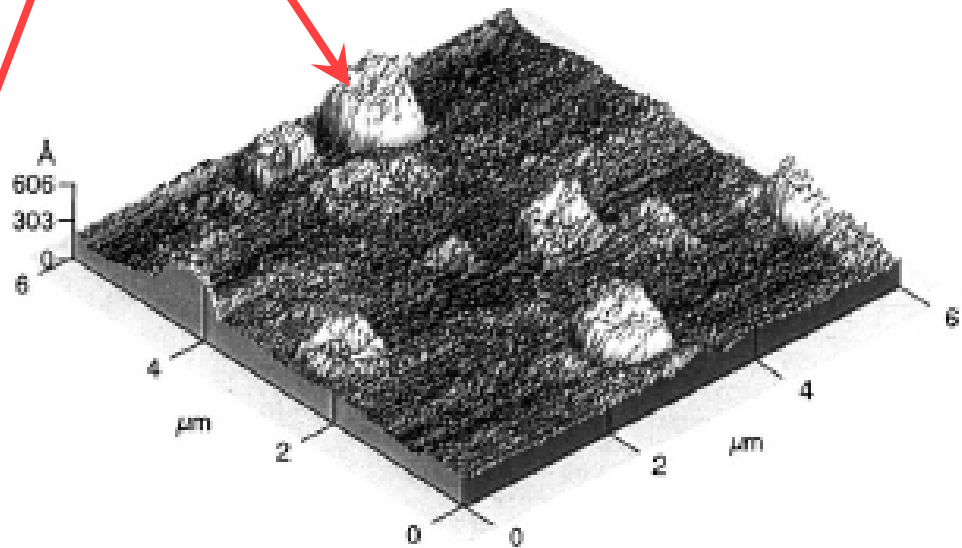
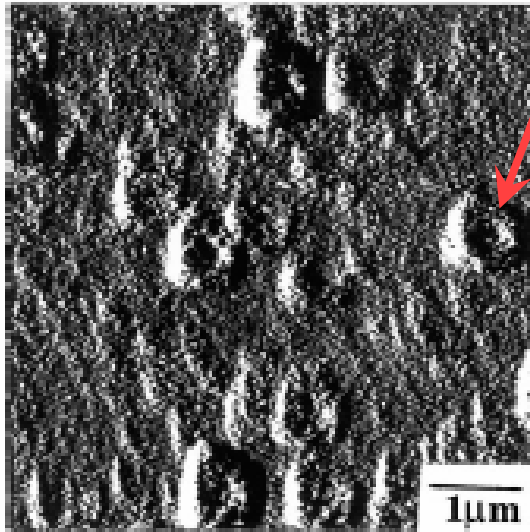


Mechanism of Action



← aggregates

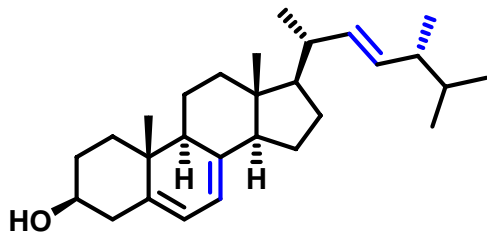
Aqueous pores
cause leakage of
vital cytoplasmic
components



Limitations of Amphotericin B

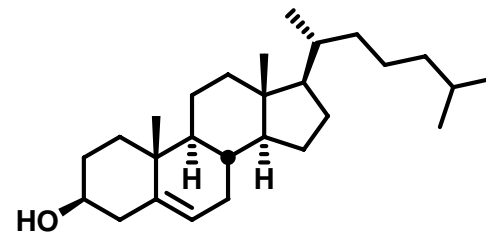
- Drug of last resort – highly toxic

FUNGAL



Ergosterol

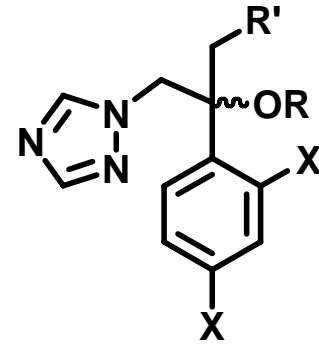
MAMMALIAN



Cholesterol

vs.

- Resistance has been reported
 - Fungi alter membrane composition



Azoles

Blocking ergosterol synthesis



Key Events in Azole History

1940s

1944

First antifungal
azole reported

1950s

1958

First azole antifungal
marketed:
Ketoconazole

1990s

1990-92

Fluconazole &
Itraconazole
introduced

1993-95

Second generation
triazoles reported

2000s

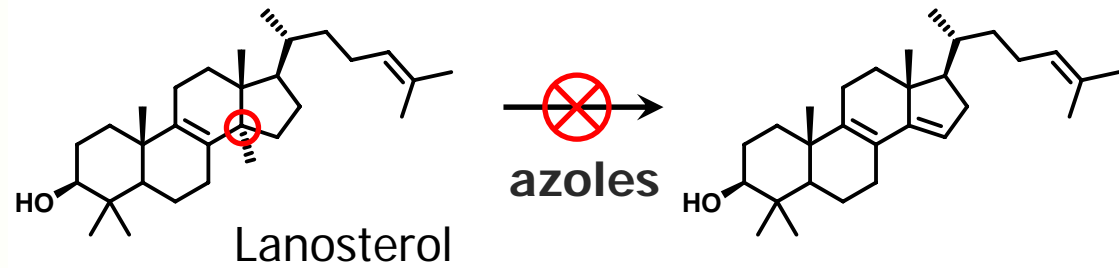
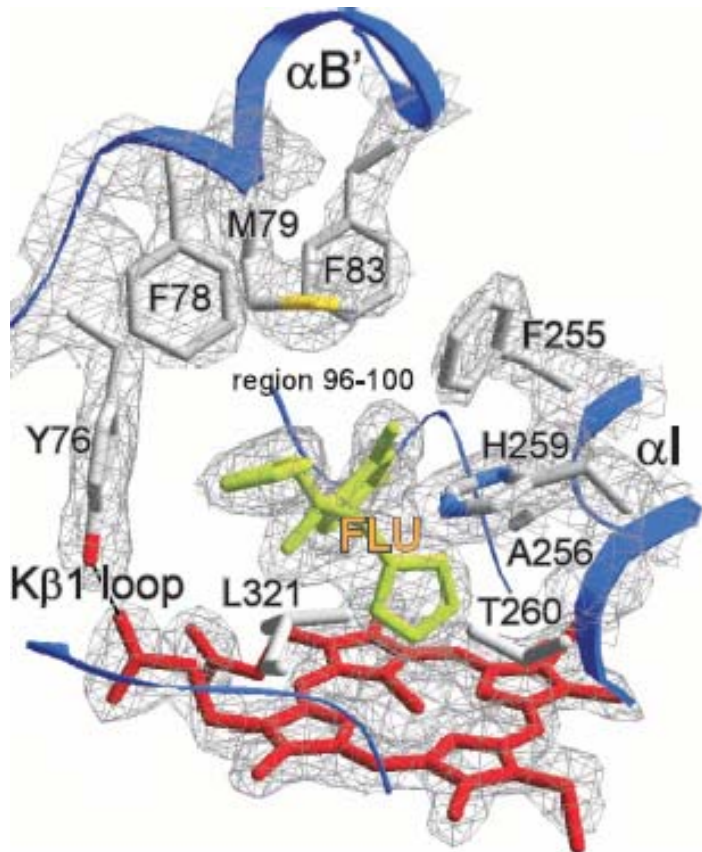
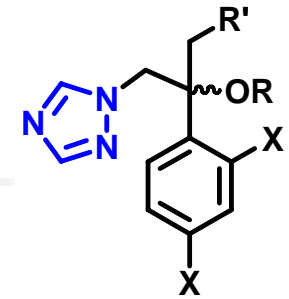
2002

Voriconazole
(Pfizer)
approved

2005

Posaconazole
(Schering)
approved

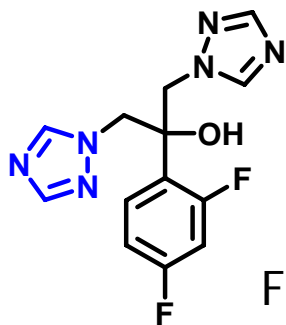
Mechanism of Action



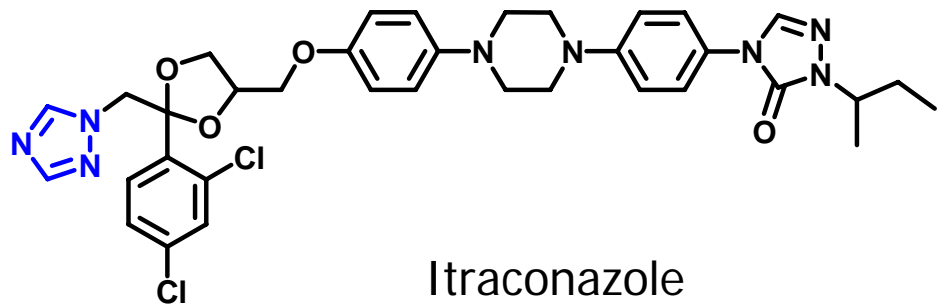
- Inhibits cytochrome P450 14α-demethylase
- Fungistatic, not fungicidal

1st Generation Triazoles

- Major impact on management of fungal infections in 1990s
- Broad spectrum of activity
 - Yeasts and filamentous fungi
- 1999: >15 marketed azoles worldwide

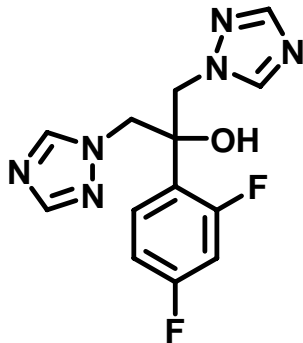


Fluconazole

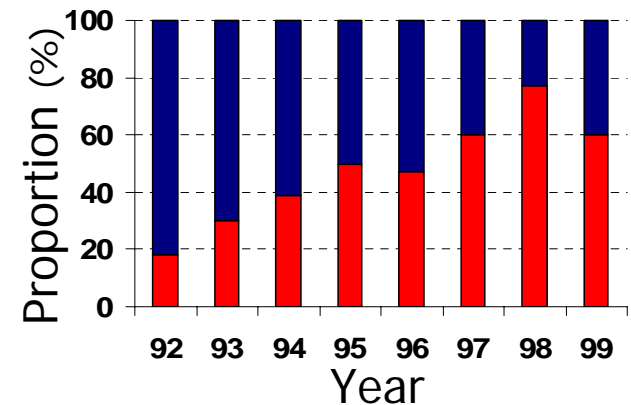
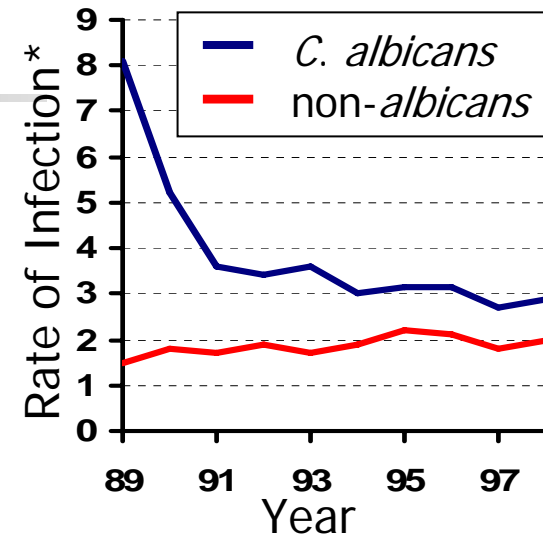


Itraconazole

Fluconazole



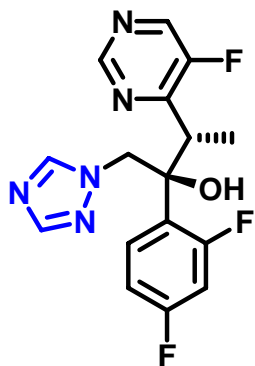
- High safety profile – extensive use
- Not active against *Aspergillus* spp.
- Increasing reports of antifungal resistance



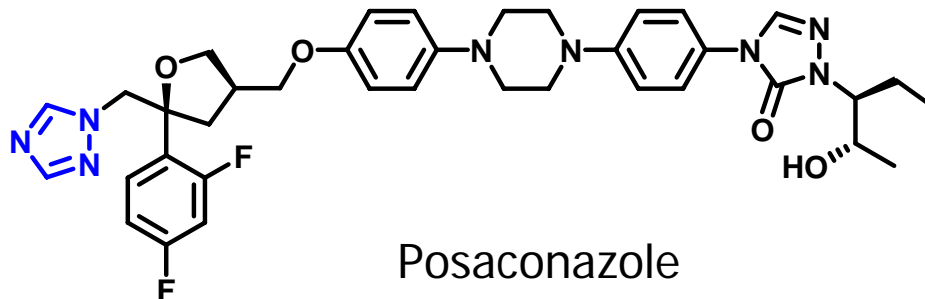
*blood stream infections/
10,000 central venous catheter days

2nd Generation Triazoles

- Enhanced potency (10–500x) over 1st generation
- Broad-spectrum activity: yeasts, molds, *Aspergillus*
- Excellent central nervous system penetration
- Greatly reduced toxicity



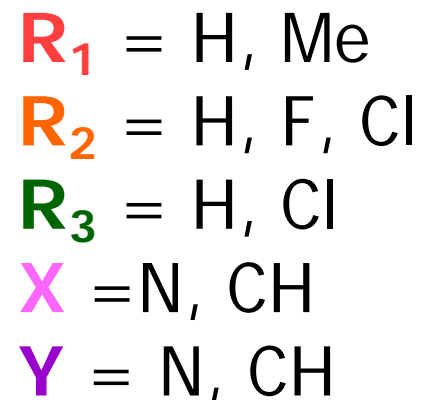
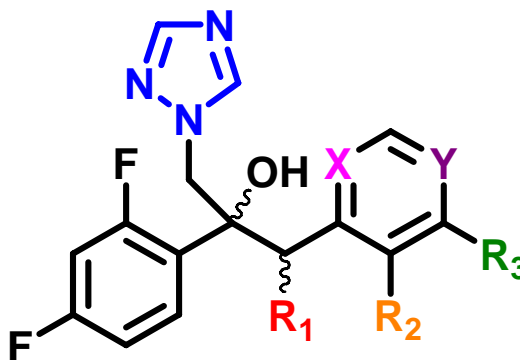
Voriconazole



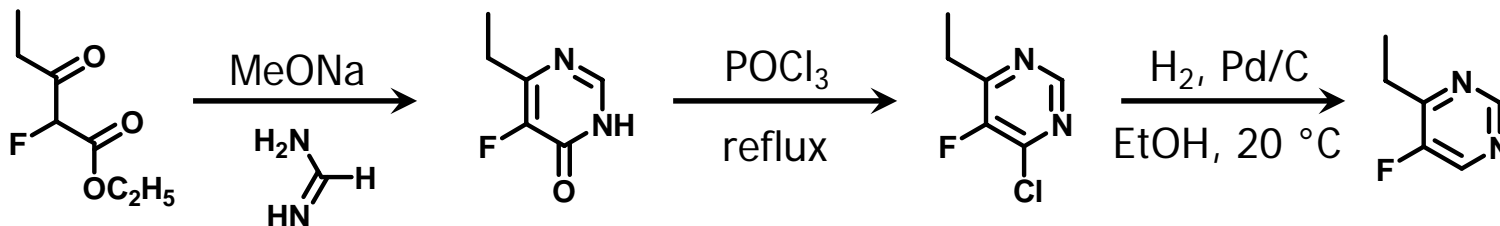
Posaconazole

Derivatives of Fluconazole

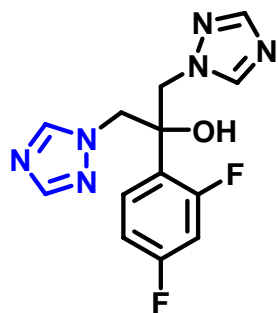
Wanted to increase spectrum of activity to include *Aspergillus* spp.



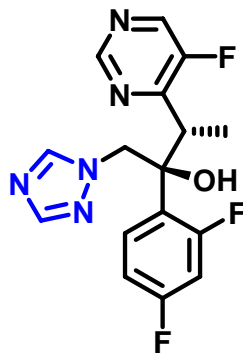
Synthesis of fluoropyrimidine



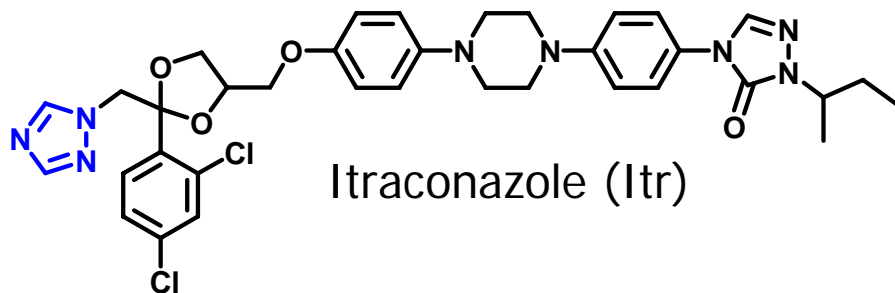
In vitro Activity of Azoles



Fluconazole (Flu)



Voriconazole (Vor)



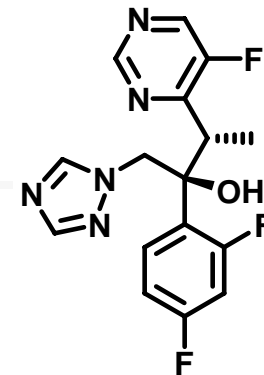
Itraconazole (Itr)

MIC ($\mu\text{g/mL}$)*

	Flu	Itr	Vor
<i>Aspergillus fumigatus</i>	>50	0.39	0.09
<i>Candida albicans</i>	1.00	0.12	0.03
<i>Candida krusei</i>	>25	0.05	0.24
<i>Candida glabrata</i>	1.90	0.19	0.19
<i>Cryptococcus neoformans</i>	9.6	0.39	0.39

*minimum inhibitory concentration

Voriconazole



- α -CH₃ gives a marked increase in activity
- Pyrimidine ring expands therapeutic window
- Side effects
- Multiple drug-drug interactions



Drug-Drug Interactions

Rifampin

Rifabutin

Phenytoin

HIV Protease Inhibitors

NNRTIs

Cisapride

Quinidine

Cyclosporine

Tacrolimus

Omeprazole

Vinca Alkaloids

HMG-CoA Reductase Inhibitors

Sulfonylurea Oral Hypoglycemics

Dihydropyridine Calcium Channel Blockers

Efavirenz

Barbiturates

Terfenadine

Astemizole

Sirolimus

Pimozide

Ergot Alkaloids

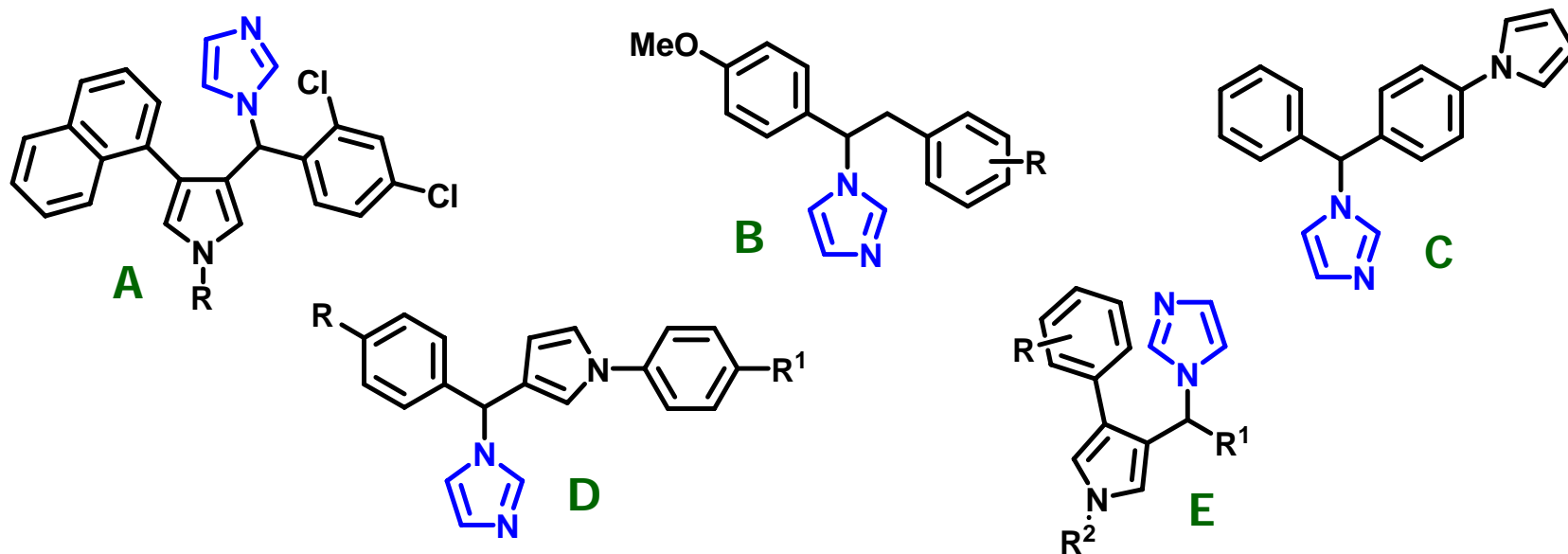
Methadone

Warfarin

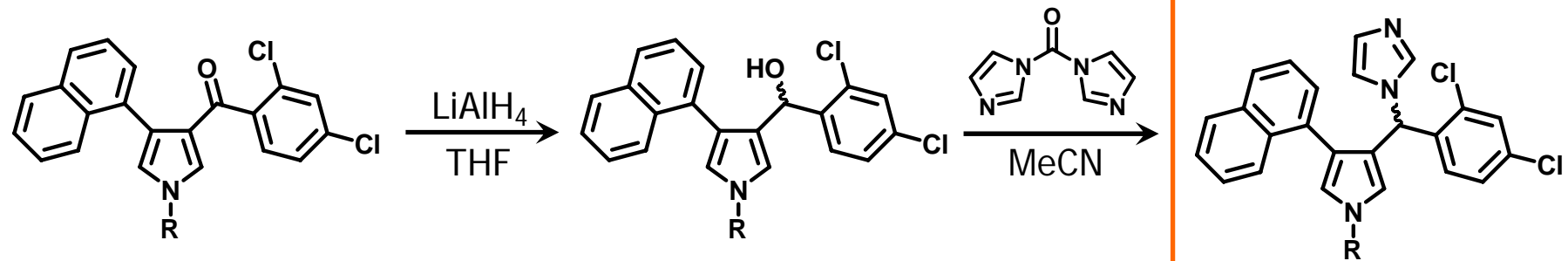
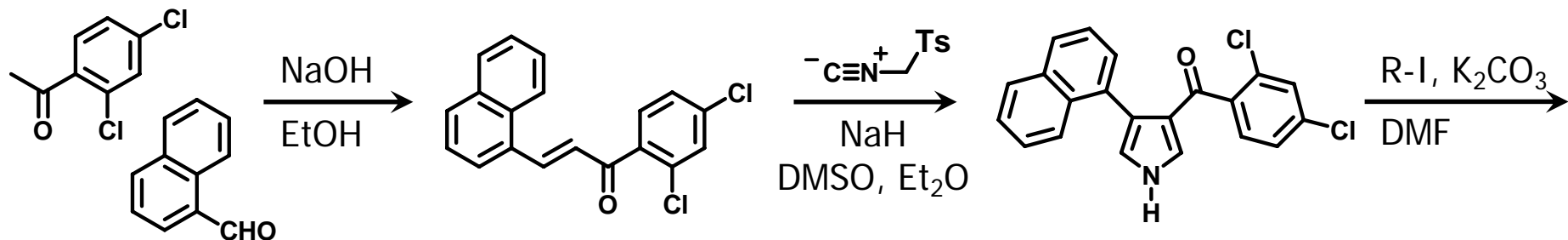
Benzodiazepine

Quantitative SAR Study

- No 3-D structural data available in *Candida*
- Homology and pharmacophore modeling
- 5 structure classes: A–E

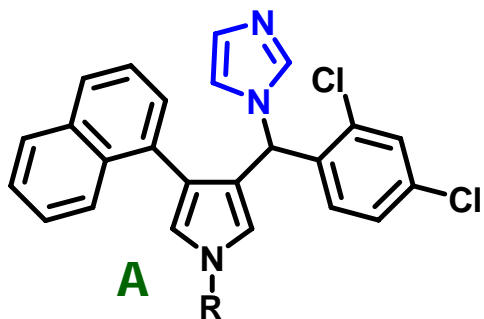


Synthesis of Class A

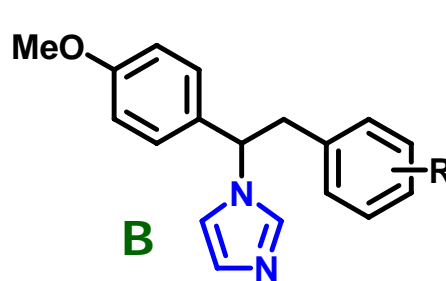


In Vitro Anti-*Candida* Activity

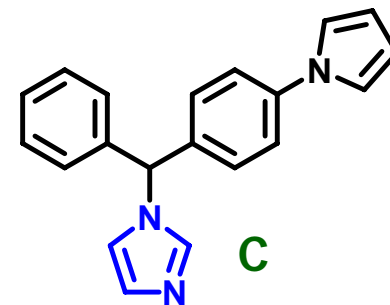
- Tested in 12 *Candida albicans* strains



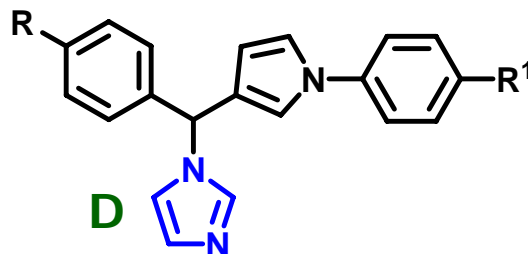
MIC = 0.74–3.9 $\mu\text{g/mL}$



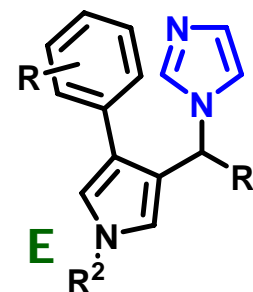
3.5–340 $\mu\text{g/mL}$



24 $\mu\text{g/mL}$



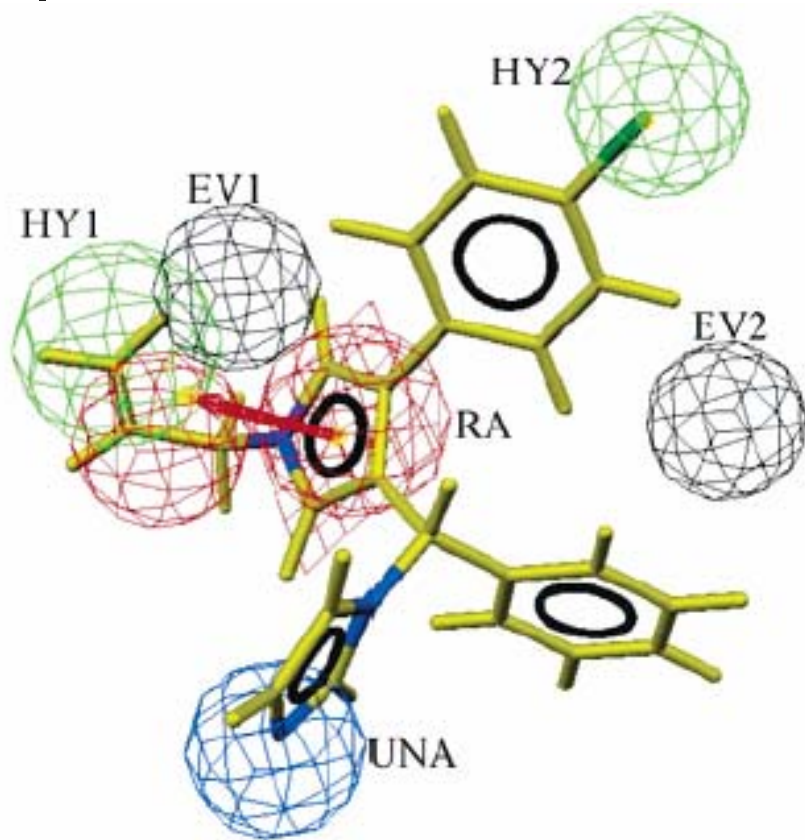
2.5–26 $\mu\text{g/mL}$



0.07–220 $\mu\text{g/mL}$

Fluconazole
0.24 $\mu\text{g/mL}$

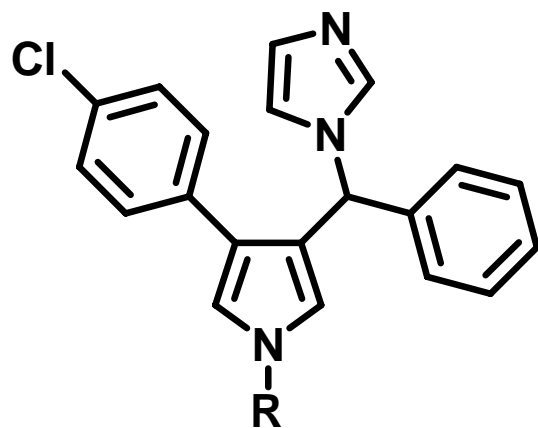
Pharmacophore Generation



- Training set: Classes A–E activities spanned 4 orders of magnitude ($n=24$, $r^2=0.93$)
- Whole set ($n = 64$, $r^2 = 0.73$)
- The most active compounds matched all pharmacophore features
 - All from Class E
- Fluconazole matched 3 of 4

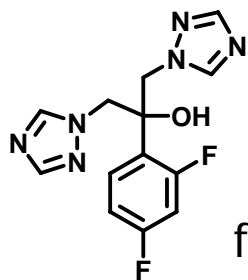
UNA = unsubstituted Ar N **EV** = excluded volumes
HY = hydrophobic **RA** = aromatic ring

Activity Prediction

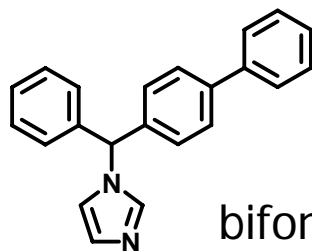


Class E

Cmpd	X	Expt	Calc	Error
1	CH ₃	0.025	0.13	5.1
2	C ₃ H ₇	0.023	0.0064	-3.6
3	CH ₂ -C ₃ H ₅	0.025	0.052	2.1
4	CH=CH ₂	0.031	0.26	8.3
5	CH ₂ CH=CH ₂	0.019	0.0076	-2.5
6	CH ₂ CH=(CH ₃) ₂	0.043	0.063	1.5
Flu		0.069	0.59	8.6



fluconazole



bifonazole

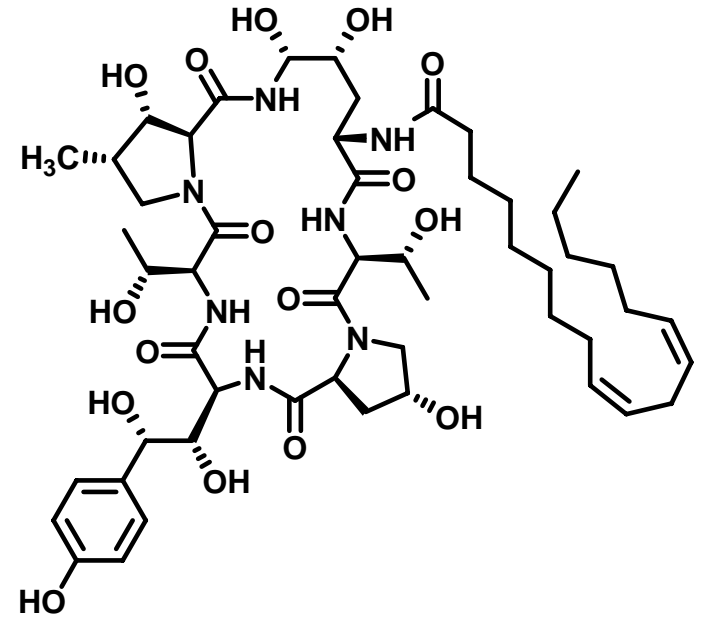
Values expressed
as MIC_{cmpd}/MIC_{bif}

Calc/
Expt

Azole Summary

- 2nd generation targets resistant strains
- Broad spectrum activity
- Far less toxic than amphotericin B
- Multiple drug-drug interactions
- Fungistatic



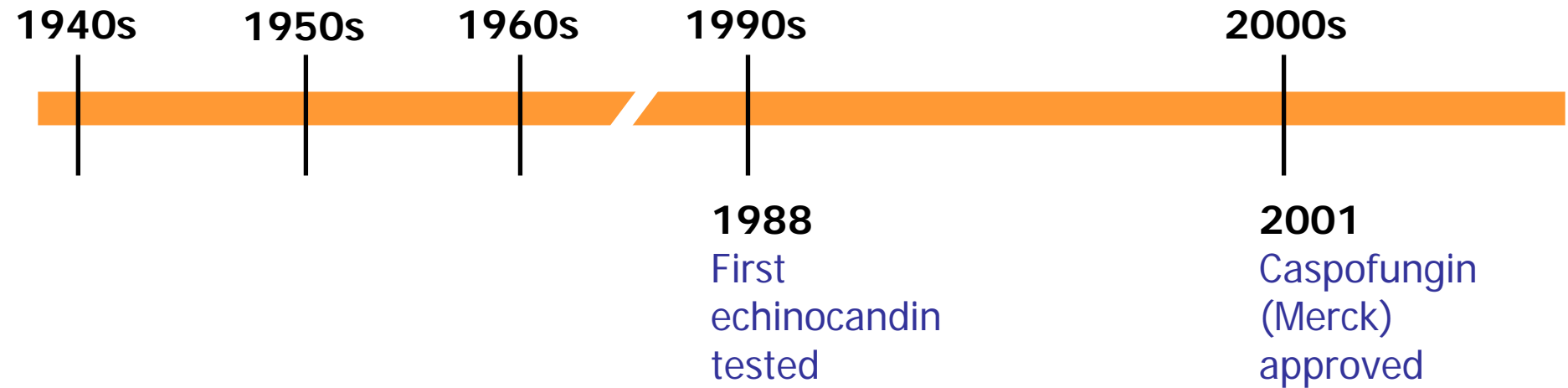


Echinocandins

Targeting the fungal cell wall

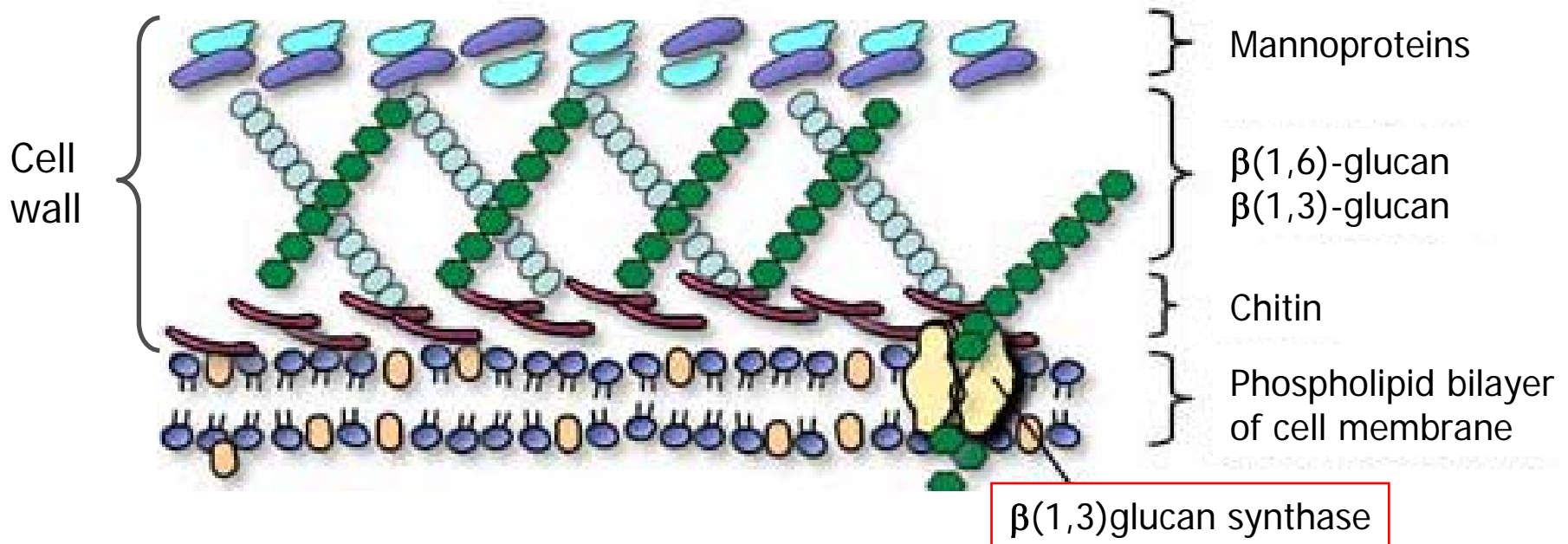
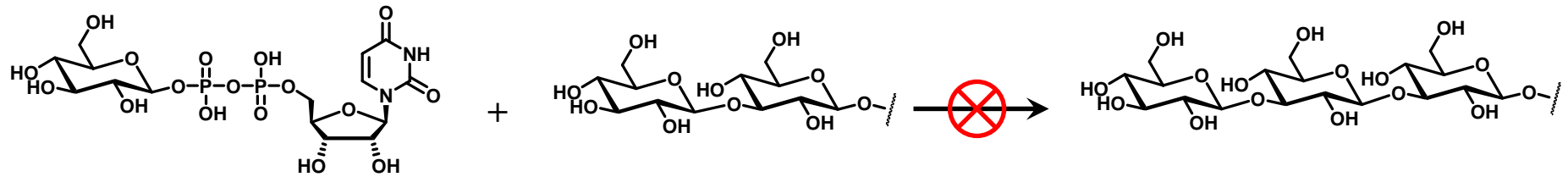


Key Events for Echinocandins

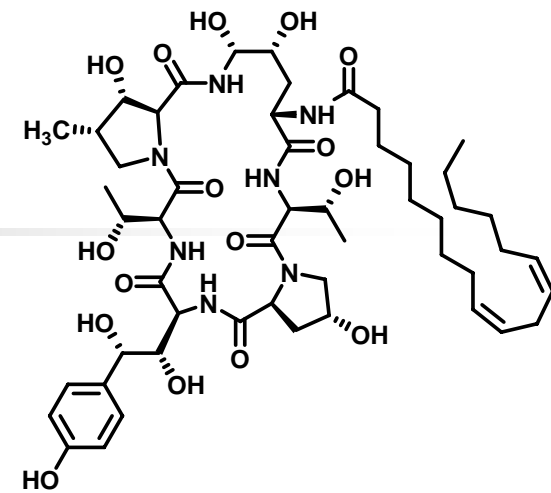


Mechanism of Action

- Non-competitive inhibitors of $\beta(1,3)$ -glucan synthase

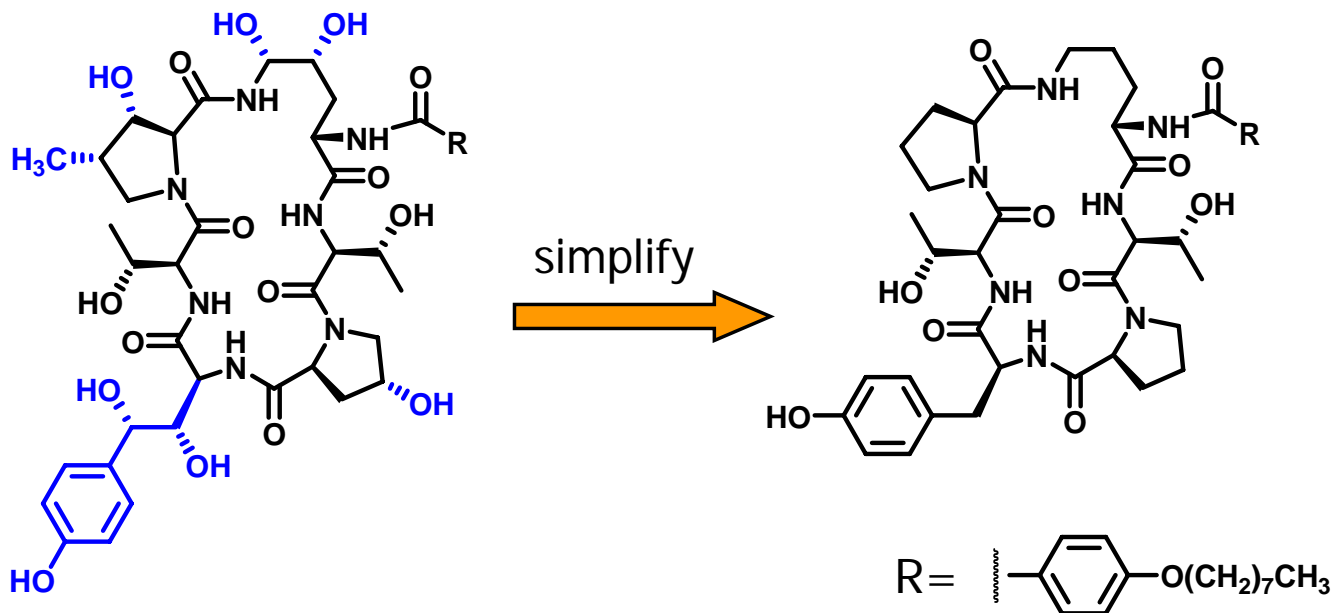


Echinocandins



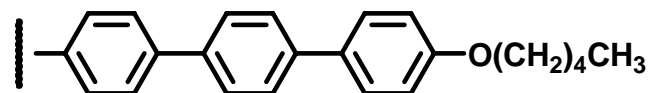
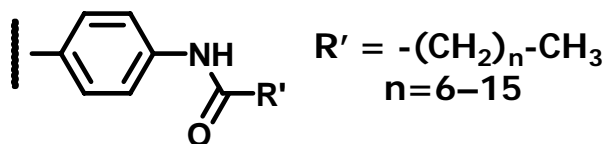
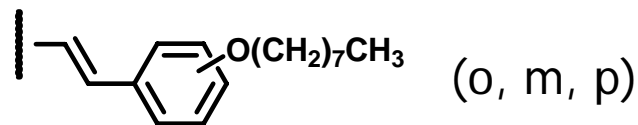
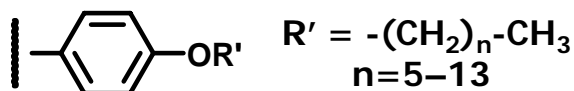
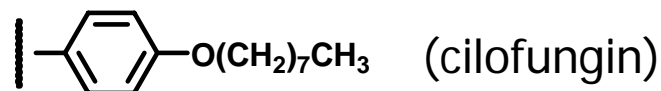
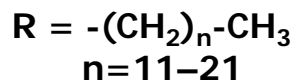
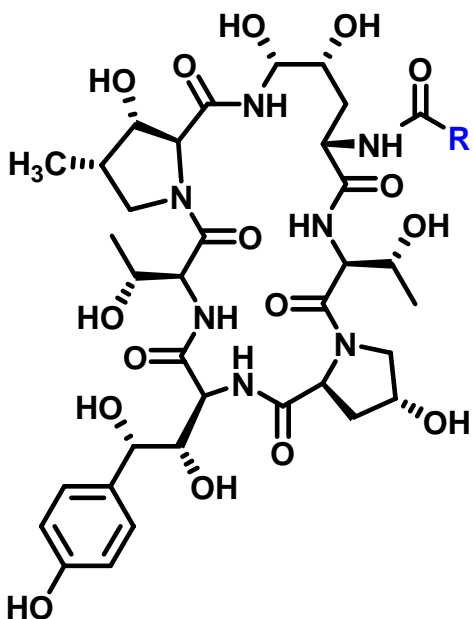
- Fungicidal
 - Causes rapid lysis in growing cells
- *Candida* & *Pneumocystis carinii* activity
- Fewer drug-drug interactions
- Three in clinical development:
 - Caspofungin, micafungin, anidulafungin

SAR of Simplified Analogs



- Replaced unusual amino acids
 - L-homotyrosine crucial for antifungal activity
 - L-threonine could replace 3-hydroxy-4-methyl proline

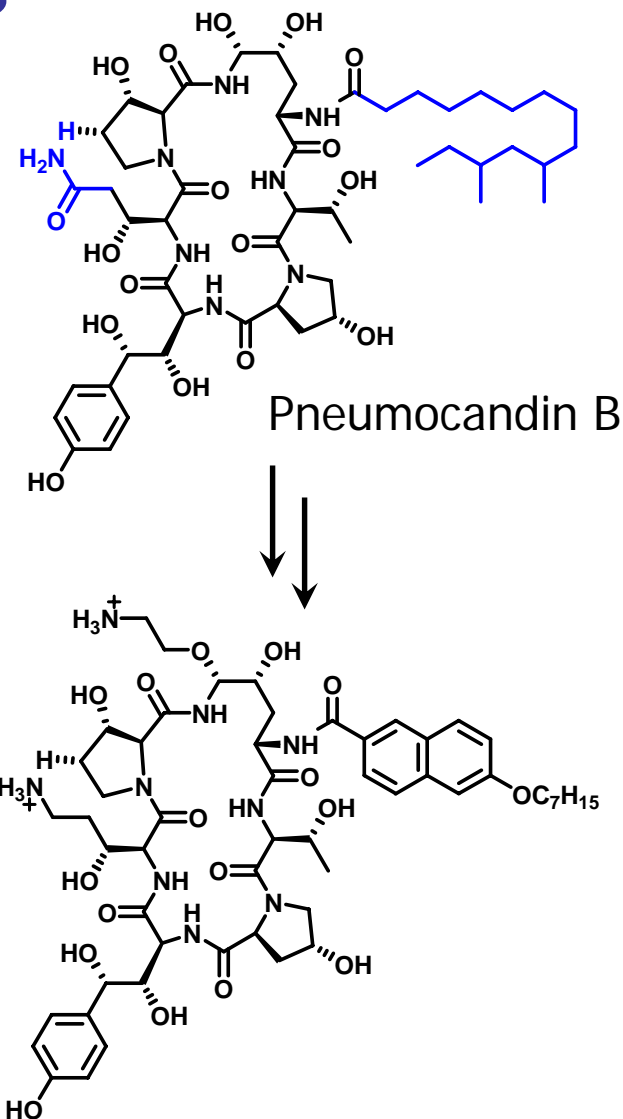
Sidechain SAR Study



- Too long: hemolytic *in vitro*
- Too short: no antifungal activity
- $C \log P > 3.5 =$ antifungal

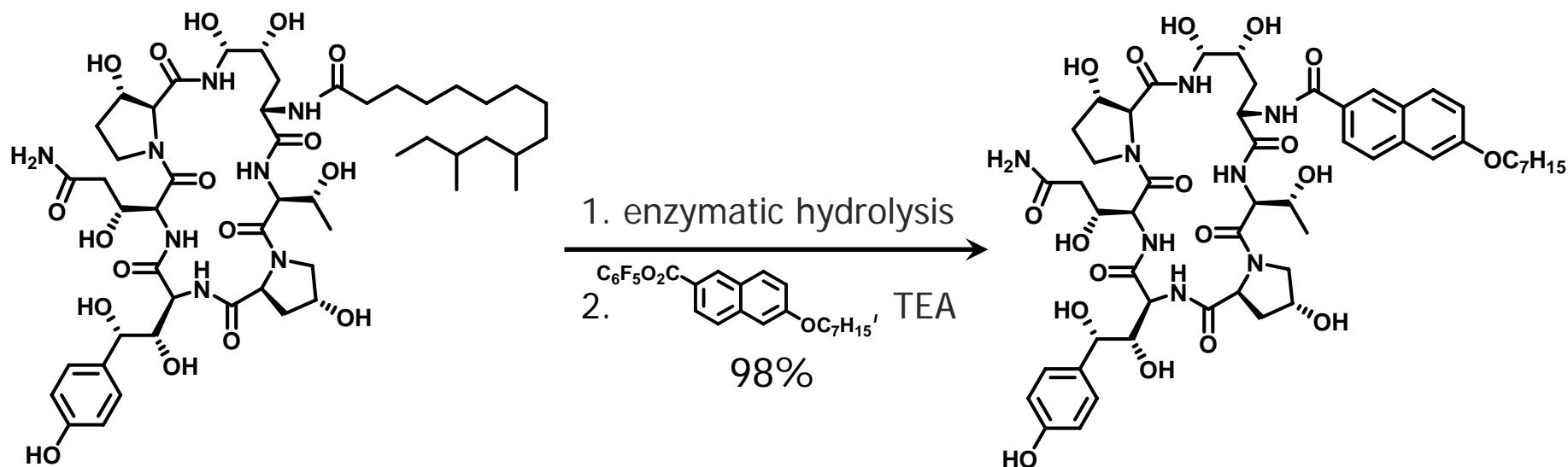
Cationic Derivatives

- Cilofungin withdrawn due to toxicity of solubilizing agent
- Increase water solubility
- Unique regio-, chemo-, and stereoselective synthesis from core
 - 4 linear steps
 - 83% yield



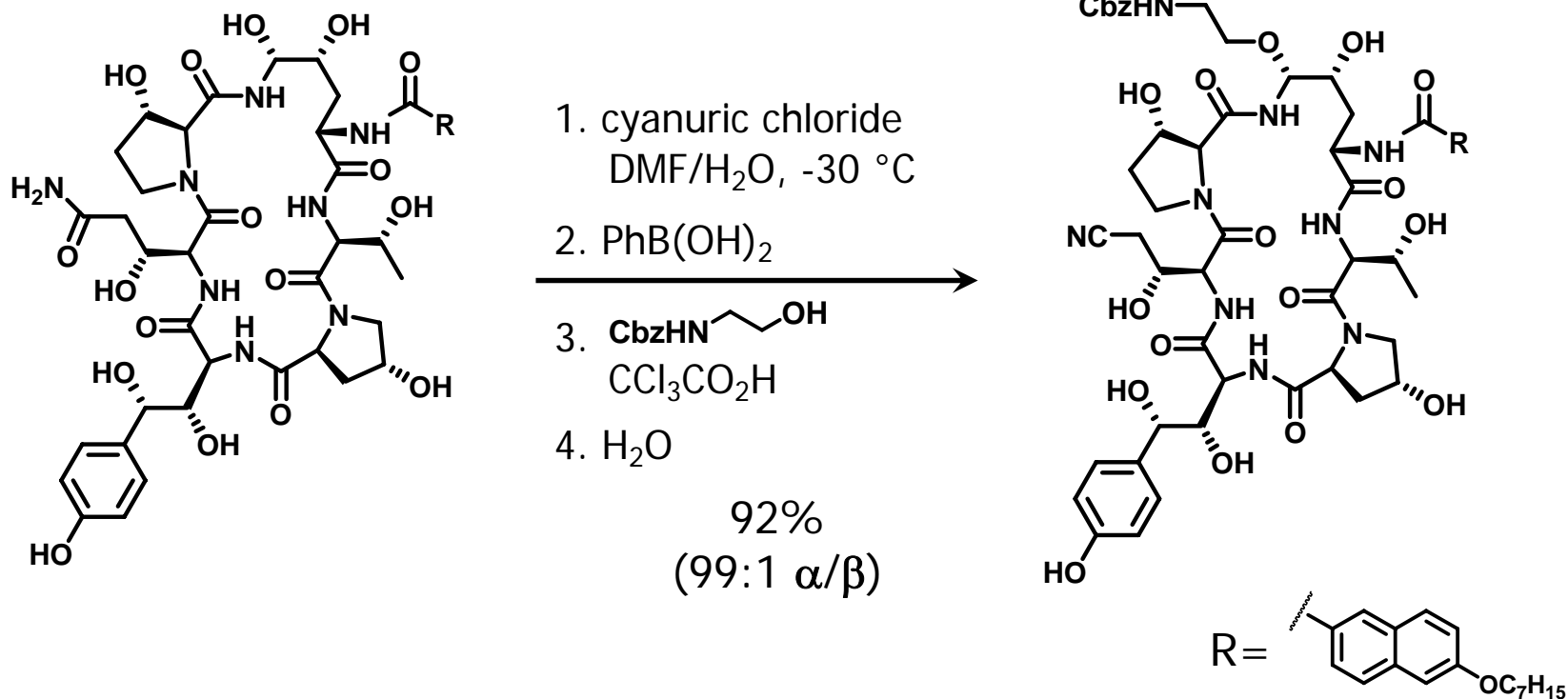
Pneumocandin Semi-Synthesis

- Pneumocandin B₀ isolated from *Glarea lozoyensis*
- Most efficient route began with acylation of amine



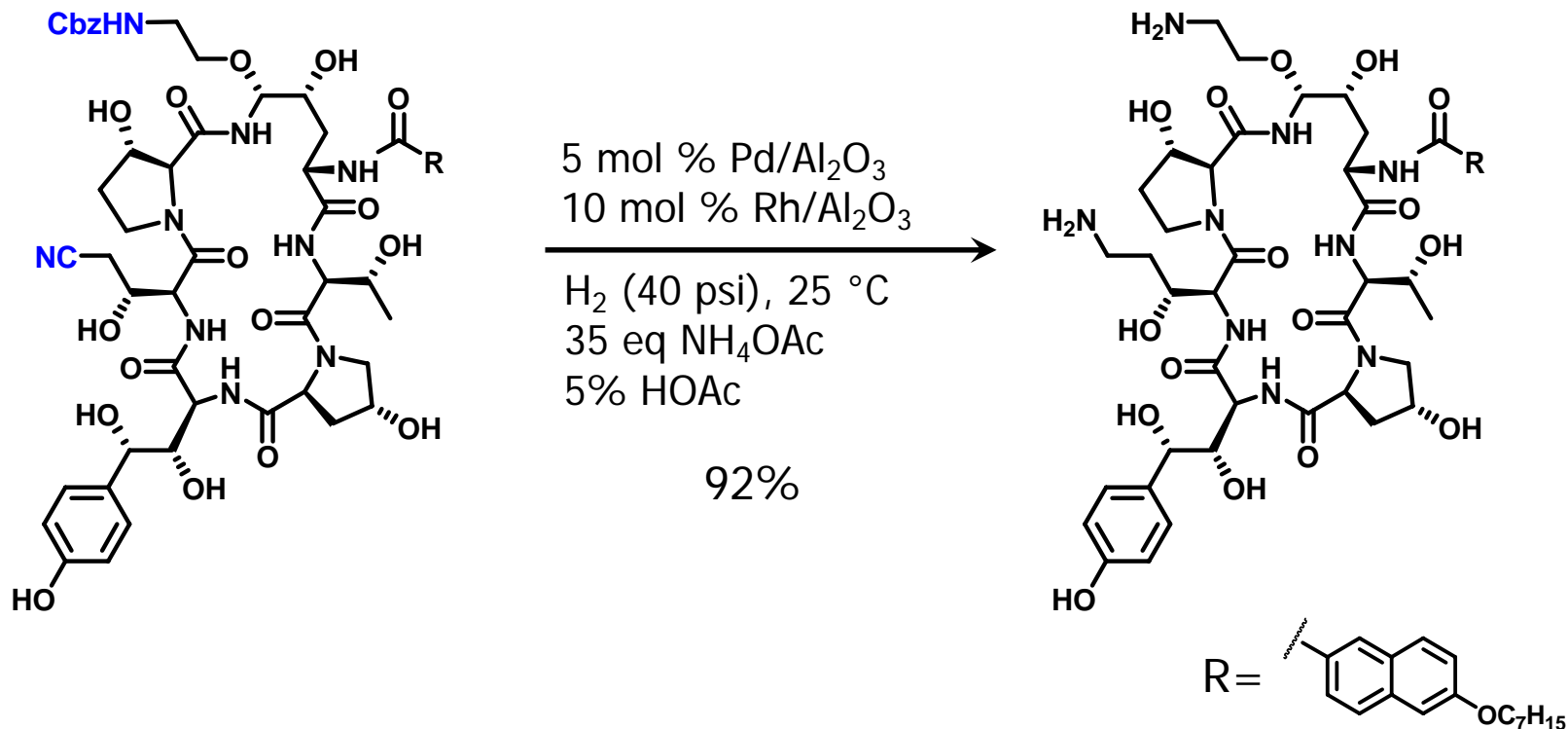
Dehydration and Etherification

- Direct reduction of amide gave mixture of products
- Protection of benzylic alcohol required



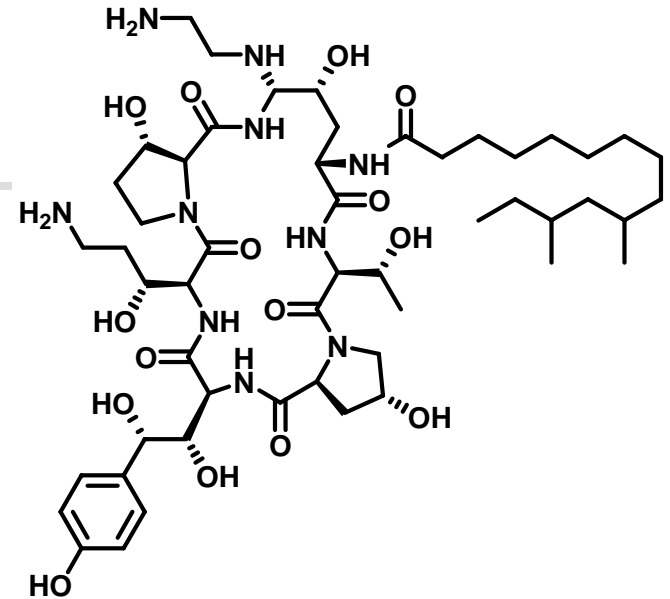
One Pot Hydrogenation

- Hydrogenation of nitrile
- Deprotection of Cbz-protected amine



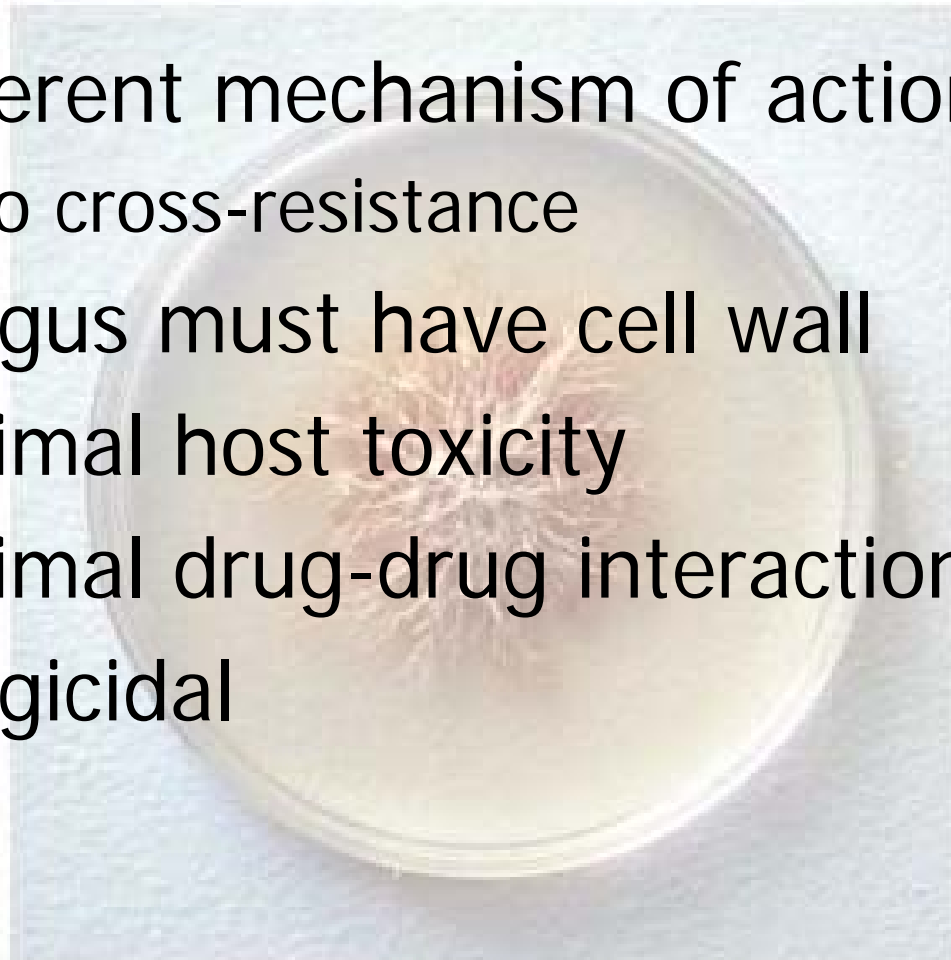
Caspofungin

- Semi-synthetic, fungal fermentation product
 - *Glarea lozoyensis*
- Approved in 2001 for invasive aspergillosis
 - Resistant to amphotericin B or triazole failure
 - Synergy: weakens cell wall and allows passage of amphotericin B or fluconazole
- 2002 for esophageal candidiasis



Echinocandin Summary

- Different mechanism of action
 - No cross-resistance
- Fungus must have cell wall
- Minimal host toxicity
- Minimal drug-drug interactions
- Fungicidal

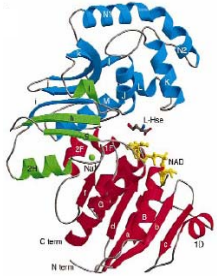




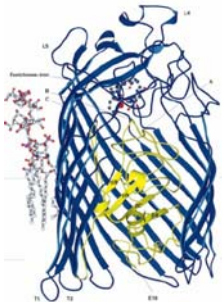
Future Targets

Moving into the cell

Promising Future Targets

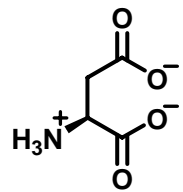


- Aspartate pathway
 - Fungi must synthesize Met, Ile, Thr

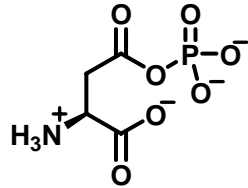
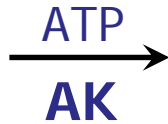


- Siderophore biosynthesis
 - Iron importation mechanism

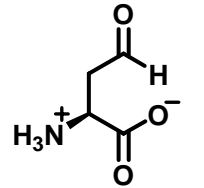
Aspartate Pathway



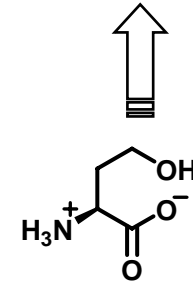
Aspartate



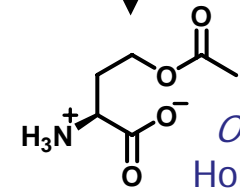
Aspartyl-4-Phosphate



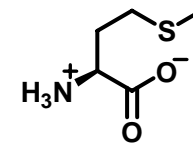
Aspartate-4-Semialdehyde



Homoserine



O-Acetyl-Homoserine

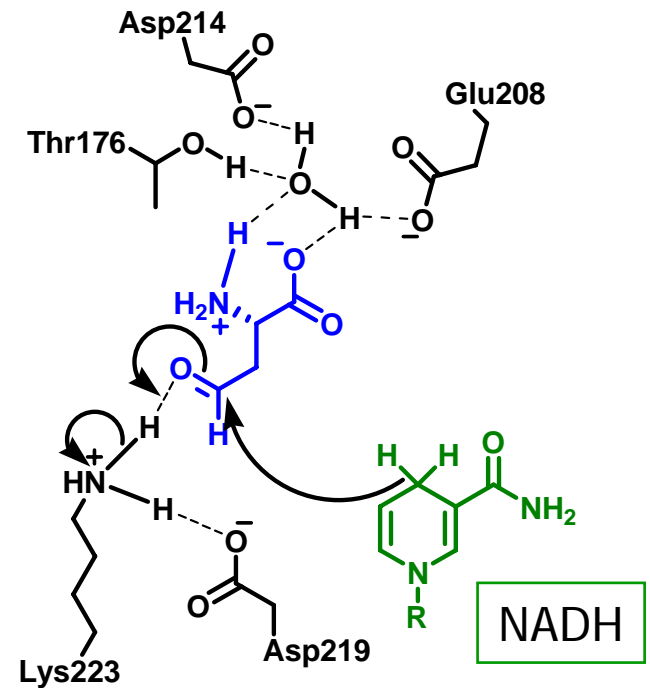
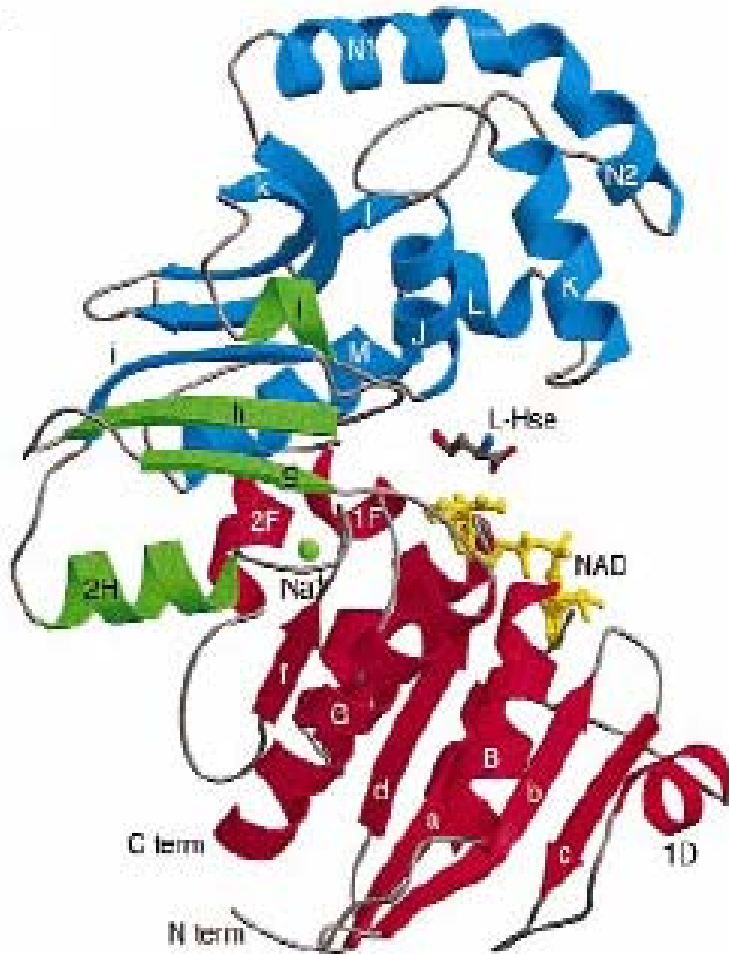


Methionine

Threonine
Isoleucine

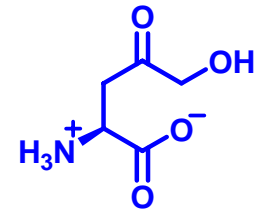
AK = Aspartate Kinase
ASD = Aspartate Semialdehyde Dehydrogenase
HSD = Homoserine Dehydrogenase
HSAT = Homoserine *O*-Acetyl Transferase

Homoserine Dehydrogenase

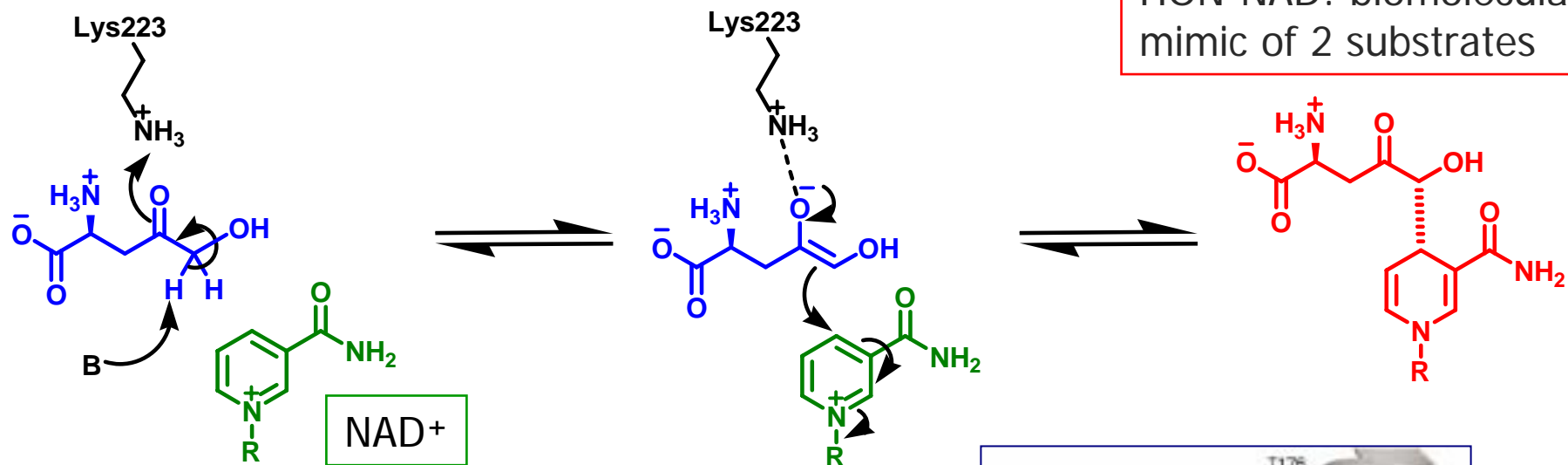


Natural Product Inhibitor

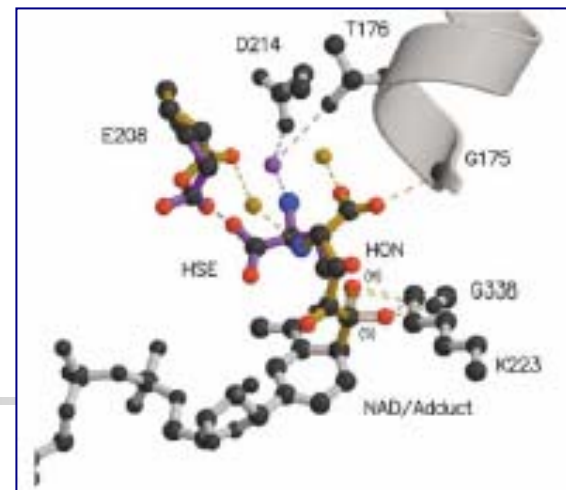
- Promising antifungal: 5-hydroxy-4-oxonorvaline (HON)
 - Isolated from *Streptomyces* over 40 yrs ago
 - Active against *Cryptococcus* and *Candida*
 - 100% survival in rats, no toxicity
- $K_i = 2 \text{ mM}$; yet capable of arresting cell growth (irreversible)



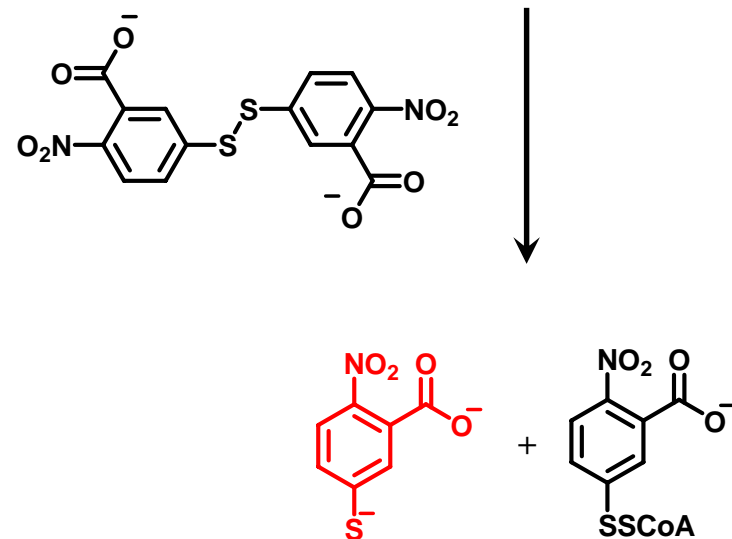
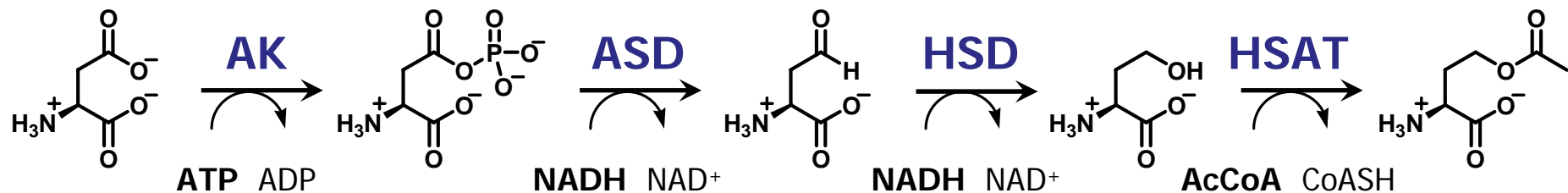
Mechanism of Inhibition



Jacques S. L. *et al. Chem. Biol.* **2003**, *10*, 989.



Coupled Assay

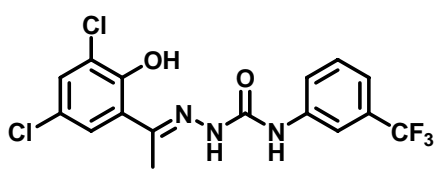
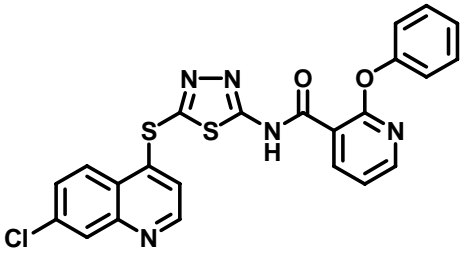
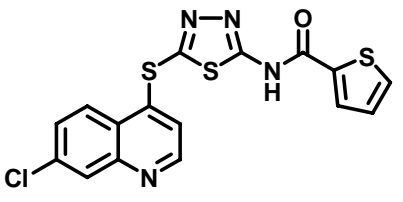
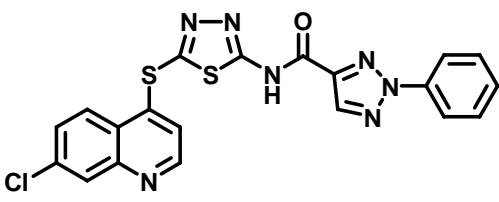


AK = Aspartate Kinase
ASD = Aspartate Semialdehyde Dehydrogenase
HSD = Homoserine Dehydrogenase
HSAT = Homoserine *O*-Acetyl Transferase

$$\lambda_{\text{max}} = 412 \text{ nm}$$

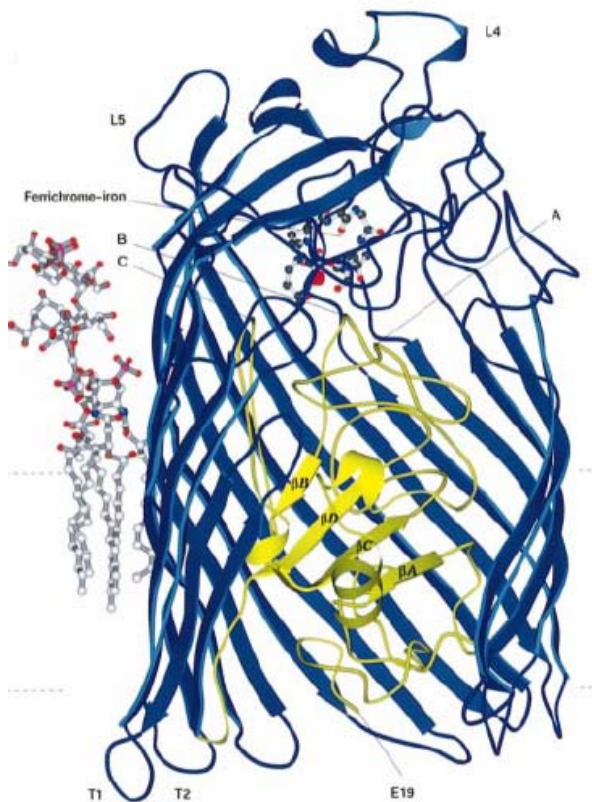
$$\epsilon = 13600 \text{ M}^{-1} \text{ cm}^{-1}$$

Novel Inhibitors of AK

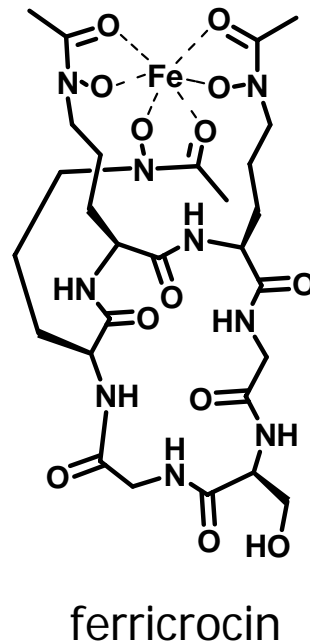
	<u>IC₅₀ (μM)</u>
	1 18 ± 3.7
	2 3.1 ± 0.8
<hr/>	
	2a 3.6 ± 0.8
	2b 1.6 ± 0.7

- Reversible inhibitors
- First non-amino acid inhibitors of fungal AK
- Leads to new compound development
- No effect on growth of *Candida* species
 - Membrane transport or efflux problems

Siderophore Function



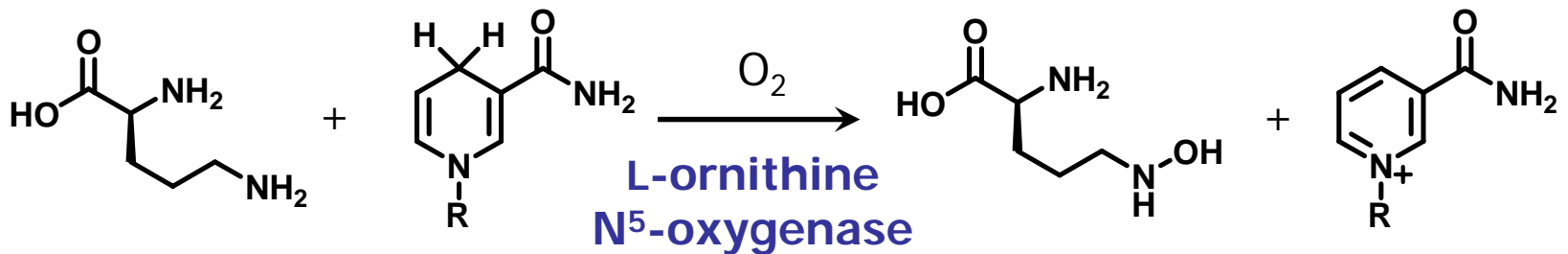
Ferric-hydroxamate uptake (FhuA) protein



- Fungi must scavenge for iron inside host
- Siderophores bind soluble iron with high affinity
- Actively transported through cell wall
- Couple antifungals to iron-binding motif

sidA Required for Virulence

- *sidA* encodes first committed step in hydroxamate siderophore biosynthesis
- $\Delta sidA$: no growth in serum, no virulence in animal model
- Minimal host toxicity





Conclusions

- Invasive fungal infections remain a complication of modern medicine
- Urgent need exists for improved antifungal agents
- Extensive work is being done to validate new targets and develop new drugs





Acknowledgments

- Helen E. Blackwell
- Blackwell group members
- Practice talk attendees
 - Megan Jacobson
 - Katie Alfare
 - Jamie P. Ellis
- Sarah Campbell
- Jesse O'Neill



Allergic fungal sinusitis

Curvularae lunata

August 2002

1 week on amphotericin B

kidney failure

potassium levels

11 months on voriconazole



Fig 1. Numerous solar lentigines and ephelides on face 4 weeks after discontinuation of voriconazole treatment.



Fig 2. Solar elastosis and lentigines on back of left hand immediately after discontinuation of voriconazole treatment.