Journal of Medicinal Chemistry Letter

Characterization of Novel Selective H₁-Antihistamines for Clinical Evaluation in the Treatment of Insomnia

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> > Received June 24, 2009

Abstract: Analogues of the known H_1 -antihistamine *R*-dimethindene were profiled as potential agents for the treatment of insomnia. Several highly selective compounds were efficacious in rodent sleep models. On the basis of overall profile, indene **1d** and benzothiophene **2a** had pharmacokinetic properties suitable for evaluation in night time dosing. Compound **2a** did not show an in vivo cardiovascular effect from weak hERG channel inhibition.

Current epidemiological data suggest that insomnia is one of the most common central nervous system (CNS^{*a*}) disorders with high prevalence in industrialized nations.¹ Insomnia has a significant economic impact on managed care² with detrimental effects on nations' workforces resulting from higher work absenteeism and decreased job performance.³

The most common treatments for insomnia are pharmacologic agents that act on the benzodiazepine binding site of the γ -aminobutyric acid (GABA_A) receptor and include zolpidem, temazepam, and eszopiclone. These agents provide positive effects in terms of sleep onset and sleep maintenance. However, side effects including daytime sedation, cognitive impairment, and motor effects raise concerns of increased risk of motor vehicle accidents and injuries from falls.^{4,5} Moreover, recent safety labeling changes warn of complex behaviors with amnesia following sedative-hypnotic use.⁶ These agents have also been associated with the potential for abuse and dependence in at-risk populations and are classified as schedule IV controlled substances in the U.S.⁷ Accordingly, there remains significant interest in developing alternative sleep agents that demonstrate sleep onset and maintenance and improved sleep quality throughout the night without next day sedation. Novel hypnotic mechanisms⁸ that have been recently evaluated or are still under investigation include the atypical GABA_A receptor agonist gaboxadol, the recently approved melatonin receptor agonist ramelteon, serotonin 5-HT_{2A} receptor modulators, and orexin receptor antagonists.9

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 a Abbreviations: CNS, central nervous system; GABA_A, γ -aminobutyric acid; QTc, corrected QT interval; EEG, electroencephalography; NREM, nonrapid eye movement; REM, rapid eye movement.

Histamine exerts a number of well documented peripheral effects.¹⁰ In addition histamine is a neurotransmitter that has acknowledged effects on arousal and wakefulness through central action at H₁ and H₃ receptor subtypes.¹¹ Indeed, first generation H₁-antihistamines including diphenhydramine, doxylamine, and chlorpheniramine are sedating and have been used for many years in over-the-counter sleep aids. However, these agents also exhibit functional antagonism of muscarinic receptors,¹² a property thought to contribute to undesirable side effects such as dry mouth, blurred vision, constipation, tachycardia, urinary retention, and memory deficits.¹³ Next-day impairment after bedtime use of these antihistamines is common and has been attributed to long plasma half-lives and protracted CNS exposure,14 suggesting that an improved pharmacokinetic profile would be an important determinant in the selection of novel H1-antihistamines for insomnia. Thus, selective H₁-antihistamines with appropriate duration of CNS exposure may provide an alternative to current medications for the treatment of insomnia, particularly for improved sleep throughout the night and sleep efficiency.¹⁵ These agents would have low potential for abuse and likely would be nonscheduled.

While many first generation H₁-antihistamines are relatively nonselective, some notable exceptions have been reported including a derivative of the substructure 1 (Figure 1), R-dimethindene (1a). 1a is the R enantiomer of the commercially available racemate dimethindene and is highly selective for the H₁ receptor with sedating properties in daytime studies.¹⁶ Single dose studies have indicated sedative effects lasting up to 5 h,¹⁷ consistent with the reported half-life of racemic dimethindene (\sim 5 h).¹⁸ More recently, doxepin, a potent antihistamine with elimination half-life of 18 h,¹⁹ has shown sleep maintenance effects lasting up to 8 h at low doses with no next day residual effects.¹⁵ While **1a** exhibited less than ideal duration of action for the treatment of insomnia, the compound represented an excellent starting point to identify novel analogues for clinical evaluation that retained receptor selectivity with potentially improved pharmacokinetic profile. Since metabolism of 1a occurs primarily via "first pass" metabolic processes, 20 pharmacokinetics of new related compounds could be reasonably modeled from projections of clearance. Subtle modifications around the structure of 1a

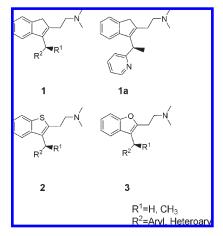
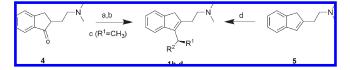


Figure 1. R-Dimethindene 1a and related substructures.

Published on Web 08/07/2009

Scheme 1. Synthesis of Indene Analogues^a



^{*a*} (a) C₄H₃N₂CH₂R¹, LDA, THF, 0 °C; (b) HCl (aq) 100 °C; (c) chiral SFC; (d) *n*-BuLi, *p*-FC₆H₄CH₂Br, THF, -78 °C.

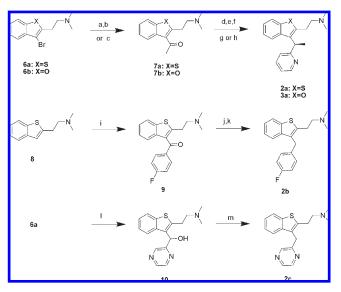
were anticipated to display differences in pharmacokinetic parameters such as clearance and volume of distribution while maintaining the favorable H₁ activity and selectivity profile. On the basis of 1a, three substructures were targeted: 1, benzothiophene (2), and benzofuran (3). Novelty was generated by selected R^1 (methyl or hydrogen) and R^2 (heteroaryl) substitutions of the indene core or more generalized substitution in the benzothiophene or benzofuran structures. This study had two objectives. The first was to identify potent, brain penetrating H₁-antihistamines with selectivity relative to other key targets. Low muscarinic receptor affinity was required to avoid anticholinergic side effects previously noted. Selectivity relative to 5HT_{2A} and H₃ receptors was of interest, since activity at these targets could affect the sleep profile of candidate compounds. hERG potassium channel inhibition was also an important consideration, as a number of antihistamines are potent inhibitors of this channel.²¹ Some of these, such as astemizole, are potent hERG channel inhibitors and are thought to cause QT interval or corrected QT interval (QTc) prolongation leading to potentially fatal cardiac arrhythmias. P450 enzyme selectivity and metabolic stability were other important considerations in primary profile assessment. The second objective was to evaluate in vivo properties of the more selective compounds for utility as sleep agents for efficacy in a rat electroencephalography (EEG) model and projected pharmacokinetic profile in humans.

The synthesis of seven analogues is outlined in Schemes 1 and 2. Indene analogues 1b-d (Scheme 1) were either synthesized in a fashion analogous to that previously reported for 1a,²² through base-mediated coupling of a suitable alkyl pyrazine to indanone 4 and acidic work up (analogues 1c, 1d) or alkylation of the indene 5 (1b). Benzothiophene or benzofuran versions of 1a were synthesized according to one of three approaches outlined in Scheme 2. Direct analogues of 1a were prepared from acetyl intermediates 7a or 7b. Compound 7a was obtained from a Heck coupling with 6a, while 7b was prepared by lithiation of intermediate 6b followed by quenching with acetic anhydride. Final products 2a and 3a were obtained following addition of 2-lithiopyridine to 7a or 7b and stepwise dehydration and reduction. Arene substituted benzothiophene 2b was prepared by Friedel-Crafts acylation of the intermediate 8. Reduction of the ketone 9 afforded 2b. Pyrazine 2c was prepared from lithiation of intermediate 6a and quenching with pyrazine carboxaldehyde. Deoxygenation of the alcohol 10 yielded 2c. Chiral materials were obtained by fractional crystallization or preparative chiral SFC or HPLC of racemate. The chiral products were characterized by chiral SFC and/or optical rotation. Crystallographic data were obtained for one product to confirm absolute stereochemistry.

Initial profile data of **1a** and its analogues are shown in Table 1. No significant inhibition of CYP3A4 was observed

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Scheme 2. Synthesis of Benzothiophene and Benzofuran Analogues^a



^{*a*} (a) *n*-BuOCH=CH₂, Pd(OAc)₂, P(*o*-Tol)₃, Et₃N, CH₃CN, 100 °C; (b) 20% HCl, THF; (c) *n*-BuLi, TMEDA, Ac₂O, toluene, -78 °C; (d) C₅H₄NLi, TMEDA, toluene or DCM, -78 °C; (e) H₂SO₄, TFA; (f) H₂, Pd/C, MeOH; (g) fractional crystallization; (h) chiral HPLC; (i) *p*-FC₆H₄COCl, 1M AlCl₃ in C₆H₅NO₂, C₂H₄Cl₂, 0 °C; (j) LiAlH₄, THF, 0 °C; (k) NaBH₄, TFA; (l) *n*-BuLi, TMEDA, C₄H₃N₂CHO, toluene, -78 °C; (m) HI, HOAc.

in any of the examples. Human microsome stability data displayed sufficient variation in predicted clearance rates, suggesting that it would be possible to identify compounds with varying pharmacokinetic profiles in the analogues prepared. With the exception of 2c, all of the compounds tested were potent binders to the H1 receptor with greater than 100fold selectivity relative to M_1 . Examples 1a-d in the indene series and benzothiophene 2a were greater than 1000-fold selective for this receptor. Data for 1a-d indicated that secondary and tertiary carbon analogues had similar H₁ potency. In the benzothiophene class, arene substitution in **2b** provided a slightly less potent compound. Interestingly, pyrazine analogue 2c was a markedly less potent H1-antihistamine, indicating subtle differences between the indene and benzothiophene classes. Introduction of the p-fluorophenyl substitution to 1b and 2b resulted in significant CYP2D6 inhibition and potent affinity for 5HT_{2A}. In contrast, 1a, 1c, 1d, 2a, and 3a were greater than 1000-fold selective for CYP2D6, highlighting the value of the heterocyclic group for improved drug likeness. Benzofuran 3a was potent in H₁ binding but an order of magnitude less selective for M₁ compared to 1a and benzothiophene 2a. Compound 3a also displayed significant affinity for M_3 ($K_i = 76 \text{ nM}$) that was not observed for the other analogues. Indene 1c was less selective versus $5HT_{2A}$ compared to its chiral analogues 1a and 1d. None of the compounds showed significant affinity for H₃ receptor. hERG channel data for 1c, 1d, 2a, and 3a showed weak inhibition comparable to 1a. Overall these data indicated suitable receptor selectivity profiles for 1c, 1d, and 2a. These compounds were further assessed for effects on sleepwake parameters in rats.

Table 2 summarizes sleep parameters for **1a**, **1c**, **1d**, and **2a**. All the compounds tested exhibited a similar and significant increase in nonrapid eye movement (NREM) sleep. None of the compounds tested showed appreciable effects on latency

Table 1.	In	Vitro	Profile of	R-Dimethindene	Analogues ^{<i>a</i>}
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		1a: X=CH ₂			N SH ₂ ; R ¹ =H SH ₂ : R ¹ =CH.	
		2a: X=S 3a: X=O	1b: X=CH ₂ 2b: X=S		5: R ¹ =H	
compound	$H_{1},$ $K_{i} \pm \text{SEM}^{b} (\text{nM})$	$M_1, K_i \pm \text{SEM}^b (\mu M)$	5HT _{2A} , $K_i \pm \text{SEM}^b (\mu M)$	CYP2D6, IC ₅₀ (µM)	hERG, ^c IC ₅₀ (μM)	human systemic clearance ^d ((mL/min)/kg)
1a	0.4 ± 0.04	2.4 ± 0.2	33% at 10 µM	32.5	0.9	7
1b	0.60 ± 0.03	14% at 10 µM	0.14 ± 0.15	0.3	ND	13
1c	4.0 ± 0.3	19 ± 2	0.60 ± 0.04	6.7	5.5	12
1d	1.3 ± 0.2	20% at 10 µM	32% at 10 µM	50.5	1.4	5
2a	4.0 ± 0.5	5.3 ± 0.3	31% at 10 µM	28.2	1.4	10
2b	11 ± 5	2.0 ± 0.0	0.09 ± 0.04	0.2	ND	16
2c	75 ± 6	ND	ND	ND	ND	ND
3a	0.9 ± 0.2	0.32 ± 0.03	62% at 10 μM	3.3	1.2	10

^{*a*}ND: not determined. ^{*b*}Minimum of 3 experiments. ^{*c*} For comparison, cisapride and the H₁-antihistamines astemizole and diphenhydramine were tested in these cells (IC₅₀ = 36 nM, 10 nM, and 2 μ M, respectively). ^{*d*} Predicted from human liver microsomes.

Table 2. Efficacy Profile of R-Dimethindene Analogues^a

					rat
			latency	plasma	intrinsic
	dose,	NREM	to 1 min	concn (1 h),	clearance, ^c
compound	(mg/kg)	in 4 h^b	NREM ^b	(ng/mL)	((mL/min)/kg)
1a	60	132 ± 7	134 ± 7	ND	2600
1c	60	159 ± 6	79 ± 7	16 ± 13	1500
1d	60	145 ± 5	109 ± 7	86 ± 45	1500
2a	30	142 ± 6	124 ± 12	4.0 ± 0.1	2300
zolpidem	30	220 ± 6	18 ± 2	ND	ND

^{*a*}ND: not determined. ^{*b*}Calculated as a percentage of vehicle. ^{*c*}Predicted from rat liver microsomes.

to NREM or rapid eye movement (REM) sleep parameters. Only **2a** displayed a significant increase in REM sleep (168% of vehicle). Plasma concentrations from surrogate animals for **1c**, **1d**, and **2a** were low despite the large doses employed. While relatively stable in human microsomes, all the compounds were rapidly metabolized by the rat counterpart (Table 2) with observed clearance values at the limit of assay detection. Surrogate PK studies of **2a** at a dose of 30 mg/kg showed brain levels of 29 ng/g at 1 h and 23 ng/g at 4 h. These data indicated that this analogue was brain penetrating and achieved suitable exposure over the course of the EEG experiment despite relatively low plasma concentrations. Overall, these studies were consistent with reported effects of H₁-antihistamines on sleep–wake parameters in rats.²³

From the available data, compounds **1c**, **1d**, and **2a** were selective H_1 -antihistamines with rodent efficacy comparable to **1a**. It was hypothesized that analogues of **1a** with similar or incrementally longer half-lives would represent suitable candidates for further evaluation of dose, exposure, and sedative action. Human microsome stability data indicated that **1c** displayed higher clearance compared to **1a**. In contrast, **1d** and **2a** exhibited predicted systemic clearance values similar to **1a** [7 (mL/min)/kg]. Allometric scaling of these two compounds projected human clearances of approximately 9 (mL/min)/kg,²⁴ a value close to that reported for racemic dimethindene [8.0 (mL/min)/kg],¹⁸ indicating that these were candidates of interest. Both compounds were subsequently assessed in a

human microdose study where measured half-lives for compounds **2a** and **1d** were 6.8 and 12 h, respectively.²⁴ Measured clearance values for **2a** and **1d** were low at 5.2 and 3.3 (mL/min)/kg, respectively.

The absence of specific reports concerning QT effects in the use of dimethindene and the weak hERG inhibition signal observed for these compounds prompted further assessment of the risk for QTc prolongation. A cardiovascular safety study of 2a in conscious monkeys produced a slight decrease in heart rate (16-19%) compared to vehicle control at all doses up to 200 mg/kg, beginning 1 h postdose and returning to near control levels approximately 10 h postdose. Reflective of this decrease, there were slight increases in the electrocardiograph RR and PR intervals, OTc and duration of the QRS complex.²⁵ When QTc interval was corrected for heart rate, there were no notable differences between the test article treated groups and the control group (range of QTc change is -1 to 5 ms) at exposures at least 100-fold higher than those projected for clinically efficacious doses of 2a. This margin was significantly higher than previous guidelines for the assessment of hERG inhibitors²¹ and underscored the importance of an in vivo assessment of 2a to qualify the in vitro findings. From the overall data profile 2a was advanced to clinical trials for further assessment.

In summary, a number of novel, selective H_1 -antihistamines were identified and examined for utility in the treatment of insomnia. A key driver in compound selection focused on pharmacokinetic properties which led to the identification of analogues 1d and 2a that were efficacious in a rat EEG model with suitable clearance profiles. While they are weak inhibitors of the hERG channel, in vivo assessment of 2a in monkeys showed no significant effects on QTc, indicating a large safety margin for this parameter. As such, 2a appears to be a suitable candidate for further assessment as a sleep agent.

Acknowledgment. We thank John Saunders, Paul Conlon, Haig Bozigian, and Wendell Wierenga for support of this work and Tao Hu, Mila Lagman, Chris DeVore, and John Harman for analytical chemistry support.

Supporting Information Available: Experimental procedures, analytical and spectral characterization data, EEG data and crystallographic information in CIF format. This material is available free of charge via the Internet at http://pubs.acs.org.

References

- Ohayon, M. M.; Lemoine, P. Sleep and insomnia markers in the general population. *Encephale* 2004, 30, 135–140.
- (2) Fullerton, D. S. P. The economic impact of insomnia in managed care: a clearer picture emerges. Am. J. Managed Care 2006, 12 (8, Suppl), S246–S252.
- (3) Zammit, G. K.; Weiner, J.; Damato, N.; Sillup, G. P.; McMillan, C. A. Quality of life in people with insomnia. *Sleep* 1999, 22, S379–S385.
- (4) Glass, J.; Lanctot, K. L.; Herrmann, N.; Sproule, B. A.; Busto, U. E. Sedative hypnotics in older people with insomnia: A metaanalysis of risks and benefits. *Br. Med. J.* 2005, *331*, 1169–1175.
- (5) Vermeeren, A. Residual effects of hypnotics. CNS Drugs 2004, 18, 297–328.
- (6) Tsai, M.-J.; Tsai, Y.-H.; Huang, Y.-B. Compulsive activity and anterograde amnesia after zolpidem use. *Clin. Toxicol.* 2007, 45, 179–181.
- (7) Hajak, G.; Muller, W. E.; Wittchen, H. U.; Pittrow, D.; Kirch, W. Abuse and dependence potential for the non-benzodiazepine hypnotics zolpidem and zopiclone: a review of case reports and epidemiological data. *Addiction* 2003, *98*, 1371–1378.
- (8) Navab, P.; Guilleminault, C. Emerging pharmacotherapeutic agents for insomnia: a hypnotic panacea? *Expert Opin. Pharmacother.* 2006, 7, 1731–1738.
- (9) Roecker, A. J.; Coleman, P. J. Orexin receptor antagonists: medicinal chemistry and therapeutic potential. *Curr. Top. Med. Chem.* 2008, 8, 977–987.
- (10) Simons, F. E. R. Advances in H₁-antihistamines. N. Engl. J. Med. 2004, 351, 2203–2217.
- (11) Barbier, A. J.; Bradbury, M. J. Histaminergic control of sleep wake cycles: recent therapeutic advances for sleep and wake disorders. *CNS Neurol. Disord.: Drug Targets* 2007, *6*, 31–43.
- (12) Kubo, N.; Shirakawa, O.; Kuno, T.; Tanaka, C. Antimuscarinic effects of antihistamines: quantitative evaluation by receptor-binding assay. *Jpn. J. Pharmacol.* **1987**, *43*, 277–282.
- (13) Meolie, A. L.; Rosen, C.; Kristo, D.; Kohrman, M.; Gooneratne, N.; Aguillard, R. N.; Fayle, R.; Troell, R.; Townsend, D.; Claman, D.; Hoban, T.; Mahowald, M. Oral nonprescription treatment for insomnia: an evaluation of products with limited evidence. J. Clin. Sleep Med. 2005, 1, 173–187.
- (14) Kay, G. G.; Plotkin, K. E.; Quig, M. B.; Starbuck, V. N.; Yasuda, S. Sedating effects of AM/PM antihistamine dosing with evening chlorpheniramine and morning terfenadine. *Am. J. Managed Care* **1997**, *3*, 1843–1848.

- (15) Roth, T.; Rogowski, R.; Hull, S.; Schwartz, H.; Koshorek, G.; Corser, B.; Seiden, D.; Lankford, A. Efficacy and safety of doxepin 1mg, 3mg, and 6mg in adults with primary insomnia. *Sleep* 2007,
- 30, 1555–1561.
 (16) Nicholson, A. N.; Pascoe, P. A.; Turner, C.; Ganellin, C. R.; Greengrass, P. M.; Casy, A. F.; Mercer, A. D. Sedation and histamine H1-receptor antagonism: studies in man with the enantiomers of chlorpheniramine and dimethindene. *Br. J. Pharmacol.* 1991, 104, 270–276.
- (17) Cicurel, L.; Péchadre, J. C.; Grandjean, E.; Duchêne-Marullaz, P. Comparison of the central and peripheral antihistaminic effects of dimethindene maleate (fenistil) and its enantiomers. *Agents Actions* **1992**, C440–C443.
- (18) Arnera, V.; Wermeille, M.; Wellman, M.; Llull, M.; Althaus, M. A.; Balant, L. P. Pharmacokinetics of dimetindene after intravenous and oral administration to healthy volunteers. *Arzneim*. *Forsch./Drug Res.* **1990**, *40* (II), 1346–1348. Clearance calculations estimated on an average human weight of 60 kg.
- (19) Virtanen, R.; Scheinin, M.; Iisalo, E. Single dose pharmacokinetics of doxepin in healthy volunteers. *Acta Pharmacol. Toxicol.* **1980**, 47, 371–376.
- (20) Prein, D.; Blaschke, G. Studies of the metabolism of the antihistaminic drug dimethindene by high-performance liquid chromatography and capillary electrophoresis including enantioselective aspects. J. Chromatogr., B 1997, 688, 309–318.
- (21) Redfern, W. S.; Carlsson, L.; Davis, A. S.; Lynch, W. G.; MacKenzie, I.; Palethorpe, S.; Siegl, P. K. S.; Strang, I.; Sullivan, A. T.; Wallis, R.; Camm, A. J.; Hammond, T. G. Relationships between preclinical cardiac electrophysiology, clinical QT interval prolongation and torsade de pointes for a broad range of drugs: evidence for a provisional safety margin in drug development. *Cardiovasc. Res.* 2003, *58*, 32–45.
- (22) Böhme, T. M.; Keim, C.; Kreutzmann, K.; Linder, M.; Dingermann, T.; Dannhardt, G.; Mutschler, E.; Lambrecht, G. Structure– activity relationships of dimethindene derivatives as new M2selective muscarinic receptor antagonists. J. Med. Chem. 2003, 46, 856–867.
- (23) Saitou, K.; Kaneko, Y.; Suginoto, Y.; Chen, Z.; Kamei, C. Slow wave sleep-inducing effects of first generation H₁-antagonists. *Biol. Pharm. Bull.* **1999**, *22*, 1079–1082.
- (24) Madan, A.; O'Brien, Z.; Wen, J.; O'Brien, C.; Farber, R. H.; Beaton, G.; Crowe, P. D.; Oosterhuis, B.; Garner, R. C.; Lappin, G.; Bozigian, H. P. A pharmacokinetic evaluation of five H1 antagonists after oral and intravenous microdose to human subjects. *Br. J. Clin. Pharmacol.* **2009**, *67*, 288–298.
- (25) Becker, D. E. Fundamentals of Electrocardiography Interpretation. Anesth. Prog. 2006, 53, 53–64.