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# 5-Substituted isophthalamides as insulin receptor sensitizers

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#### ARTICLE INFO

# ABSTRACT

A novel series of 5-substituted isophthalamides and their structure-activity relationship as insulin receptor sensitizers is discussed.

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Type 2, or non-insulin dependent, diabetes mellitus occurs in an estimated 6% of adults in the industrialized nations.<sup>1</sup> It is characterized by a deficiency in insulin secretion and an insensitivity of target tissues to the actions of insulin (insulin resistance).<sup>2–4</sup> Taken together these two defects result in the inability of the body to maintain glucose homeostasis leading to overt hyperglycemia.

The insulin receptor is a ligand-activated tyrosine protein kinase. It is tetrameric consisting of two identical extracellular  $\alpha$ -subunits that bind the hormone and two transmembrane  $\beta$ -subunits possessing tyrosine kinase activity.<sup>4-7</sup> On ligand binding rapid autophosphorylation of several tyrosine residues on the β-subunits occurs resulting in activation of the IR tyrosine kinase toward exogenous substrates. A cascade of signaling events then ensue, one of which results in the translocation of the glucose transporter, GLUT4, to the cell surface leading to cellular uptake of glucose.<sup>8</sup> Several steps in this pathway including autophosphorvlation of the IR tyrosine kinase in response to insulin binding have been shown to be impaired in insulin-resistant tissue and cells.<sup>8</sup> Therefore, small molecules that enhance IR function would be useful in the treatment of type 2 diabetes. Indeed, recently such a molecule has been disclosed by researchers at Merck. The quinone, L-783,281 (Fig. 1) is reported to be an orally active IR activator showing antidiabetic action in two mouse models of type 2 diabetes.<sup>9,10</sup>

Using our target-related affinity profiling (TRAP) technology,<sup>11</sup> TLK 16998 (**1**) was discovered (Fig. 1). This compound acts as an IR sensitizer in vitro and in vivo,<sup>12</sup> however, it does require the

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presence of insulin to exert any effect. In our primary screen, the effect of test compounds on the insulin-stimulated glucose uptake

HC

L-783,281

OH

HO<sub>2</sub>S

OН



Figure 1. Structures of L-783,281 and TLK 16998.



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SO<sub>3</sub>H



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Scheme 1. Synthesis of trimesic acid triamide 2.

in 3T3-L1 adipocytes was evaluated and  $EC_{50}$  values were calculated with respect to the activity of 100 nM insulin. In this assay compound **1** had an  $EC_{50}$  of 90  $\mu$ M.

From a medicinal chemistry point of view, compound **1** is unattractive as a lead structure: it possesses six sulfonic acid groups as well as four azo linkages and has a molecular weight greater than 1200. We envisaged a simpler, but still fairly rigid, structure which maintained some of the acidic groups of the parent compound. Therefore, a series of nine symmetrical trimesic acid amides were prepared by reaction of 1,3,5-benzenetricarbonyl trichloride with aminonaphthalene-monosulfonic acids. The 5-aminonaphthalene-2-sulfonic acid derived triamide **2** (Scheme 1) was the only compound in this series to show activity. It was very weakly active, having an EC<sub>50</sub> value of 135  $\mu$ M.

A more promising series arose from 5-substituted isophthalamides (Table 1). Again the 5-aminonaphthalene-2-sulfonic acid-derived diamides were superior to other aminonaphthalenesulfonic acid isomers. Compounds in this series were prepared by the route shown in Scheme 2. Briefly, starting from 5-nitroisophthalic acid amidation was followed by reduction of the nitro group with subsequent functionalization of the aniline.

For the derivatives containing a substituted phenylcarbonylamino group at C-5, substituents *meta* to the linker were preferably to those *para* to the linker as illustrated by the chloro pairs **3** and **4** (EC<sub>50</sub>S 5.7  $\mu$ M and 72.8  $\mu$ M, respectively). The *meta* fluoro derivative **5** also shows good activity whilst the *meta* nitro-substituted compound **7** shows diminished activity. Replacement of the amide linkage at C5 of the isophthalamide scaffold with either urea or sulfonamide linkers produced compounds that were inactive (**9** and **10**) as did addition of an extra carbon to that amide (**11**). *N*-Methylation of the isophthalamide functionality also produced a compound devoid in activity (data not shown) indicating that this functionality is necessary for activity.

## Table 1

Glucose uptake data for compounds 3-11



Compound	Х	R	EC <sub>50</sub> <sup>a</sup> (μM)
3	СО	3-Cl	5.7 <sup>b</sup>
4	CO	4-Cl	72.8 <sup>c</sup>
5	CO	3-F	19.4 <sup>d</sup>
6	CO	4-F	78.5 <sup>e</sup>
7	CO	3-NO <sub>2</sub>	44.5 <sup>f</sup>
8	CO	4-NO <sub>2</sub>	NA
9	SO <sub>2</sub>	4-F	NA
10	CONH	3-Cl	NA
11	COCH <sub>2</sub>	3-Cl	NA

*p*-value is the probability associated with a Student's *t*-test (two-tailed distribution, two-sample unequal variance). NA, not active.

<sup>a</sup> Values are means of three experiments. Average *p*-values.

- <sup>c</sup> 0.38.
- <sup>d</sup> 0 0.04.
- e 0.36.

 $^{\rm f}$  0.08

Having established the C-5 amide linker as an essential requirement (compare **3** and **6** with **9–11**), we next investigated the effect of various heterocyclic and extended aromatic replacements for the *meta* chloro phenyl of compound **2** 



Scheme 2. Reagents: (i) a-SOCl<sub>2</sub>, pyridine; b-5-aminonaphthalene-2-sulfonic acid, pyridine; (ii) SnCl<sub>2</sub>, concd HCl.

<sup>&</sup>lt;sup>b</sup> 0.02.

#### Table 2

Glucose uptake data for compounds **3**, **12–18** 



Compound     R <sup>1</sup> EC <sub>50</sub> <sup>a</sup> (μM)       3     3-Cl-phenyl     5.7 <sup>b</sup> 12     2-Naphthayl     3.7 <sup>c</sup> 13     1-Naphthyl     12.8 <sup>d</sup> 14     Cyclohexyl     NA       15     2-Furyl     NA       16     4-Pyridyl     NA       17     3-Pyridyl     NA       18     2-Quinoxyl     NA			
3     3-Cl-phenyl     5.7 <sup>b</sup> 12     2-Naphthayl     3.7 <sup>c</sup> 13     1-Naphthyl     12.8 <sup>d</sup> 14     Cyclohexyl     NA       15     2-Furyl     NA       16     4-Pyridyl     NA       17     3-Pyridyl     NA       18     2-Quinoxyl     NA	Compound	R <sup>1</sup>	EC <sub>50</sub> <sup>a</sup> (μM)
12 2-Naphthayl 3.7 <sup>c</sup> 13 1-Naphthyl 12.8 <sup>d</sup> 14 Cyclohexyl NA   15 2-Furyl NA   16 4-Pyridyl NA   17 3-Pyridyl NA   18 2-Quinoxyl NA	3	3-Cl-phenyl	5.7 <sup>b</sup>
13 1-Naphthyl 12.8 <sup>d</sup> 14 Cyclohexyl NA   15 2-Furyl NA   16 4-Pyridyl NA   17 3-Pyridyl NA   18 2-Quinoxyl NA	12	2-Naphthayl	3.7 <sup>c</sup>
14 Cyclohexyl NA   15 2-Furyl NA   16 4-Pyridyl NA   17 3-Pyridyl NA   18 2-Quinoxyl NA	13	1-Naphthyl	12.8 <sup>d</sup>
15 2-Furyl NA   16 4-Pyridyl NA   17 3-Pyridyl NA   18 2-Quinoxyl NA	14	Cyclohexyl	NA
16     4-Pyridyl     NA       17     3-Pyridyl     NA       18     2-Quinoxyl     NA	15	2-Furyl	NA
17     3-Pyridyl     NA       18     2-Quinoxyl     NA	16	4-Pyridyl	NA
18 2-Quinoxyl NA	17	3-Pyridyl	NA
	18	2-Quinoxyl	NA

*p*-value is the probability associated with a Student's *t*-test (two-tailed distribution, two-sample unequal variance). NA, not active.

- <sup>a</sup> Values are means of three experiments. Average *p*-values.
- <sup>b</sup> 0.02.
- <sup>c</sup> 0.01.
- <sup>d</sup> 0.41.

#### Table 3

Glucose uptake data for compounds 2, 19, and 20



R <sup>2</sup>	EC <sub>50</sub> <sup>a</sup> (μM)	
SO <sub>3</sub> ₋	5.7 <sup>b</sup>	
Н	66.5 <sup>c</sup>	
OH	61.7 <sup>d</sup>	
	R <sup>2</sup> SO <sub>3</sub> - H OH	

*p*-value is the probability associated with a Student's *t*-test (two-tailed distribution, two-sample unequal variance). NA, not active.

<sup>a</sup> Values are means of three experiments. Average *p*-values.

- <sup>b</sup> 0.02.
- ° 0.23.
- <sup>d</sup> 0.16.

(Table 2). All the aromatic heterocycles tried gave compounds with no activity (**15**, **16**, **17**, and **18**). However, the 2-naphthyl derivative **12** showed excellent activity having an  $EC_{50}$  of 3.7  $\mu$ M with the 1-naphthyl analog **13** exhibiting slightly diminished activity.

Finally, the need for two sulfonic acid groups was explored (Table 3). Two asymmetric derivatives were prepared in which the one sulfonic acid moiety was exchanged for either a proton **19** or a hydroxyl **20**. Both derivatives are ten times less active than the parent. The symmetrical derivative containing two carboxylic acids instead of two sulfonic acids was inactive. These data suggest that at least one sulfonic acid group is a necessity for activity but the presence of two such groups increases potency.

In summary, a series of isophthalamides that enhance glucose transport have been disclosed. Unlike L-783,281, the compounds reported herein are inactive in the absence of insulin. Of course, such insulin-dependent activity may offer unique advantages in the control of hyperglycemia by modulation of their effects as insulin levels change in response to physiological stimuli.

## **References and notes**

- 1. Moller, D. E. Nature (London) 2001, 414, 821.
- Bennet, P. H. In Diabetes Mellitus: A Fundamental and Clinical Text; LeRoith, D., Taylor, S. I., Olefsky, J. M., Eds., 2nd ed.; Lippincott Wlliams & Wilkins: Philadelphia, 2000; pp 544–548.
- 3. Taylor, S. I. Cell **1999**, 97, 9.
- Kahn, C. R.; Shechter, Y. In *Goodman and Gilman's The the Pharmacological Basis* of *Therapeutics*; Goodman Gilman, A., Rall, T. W., Nies, A. S., Taylor, P., Eds., 8th ed.; Pergamon: New York, 1990; pp 1468–1475.
- 5. Hubbard, S. R.; Wei, L.; Ellis, L.; Hendrickson, W. A. *Nature (London)* **1994**, 372, 746.
- 6. Goldfine, I. D. Endocr. Rev. 1987, 8, 235.
- Acilli, D.; Nakae, J.; Flier, J. S. In Diabetes Mellitus: A Fundamental and Clinical Text; LeRoith, D., Taylor, S. I., Olefsky, J. M., Eds., 2nd ed.; Lippincott Wlliams & Wilkins: Philadelphia, 2000; pp 192–199.
- 8. Virkamaki, A.; Urki, K.; Kahn, C. R. J. Clin. Invest. 1999, 103, 931.
- Zhang, B.; Salituro, G.; Szalkowski, D.; Li, Z.; Zhang, Y.; Royo, I.; Vilella, D.; Diez, M. T.; Pelaez, F.; Ruby, C.; Kendall, R. L.; Mao, X.; Griffin, P.; Calaycay, J.; Zierath, J. R.; Heck, J. V.; Smith, R. G.; Moller, D. E. Science (Washington, DC) 1999, 284, 974.
- Liu, K.; Xu, L.; Szalkowski, D.; Li, Z.; Ding, V.; Kwei, G.; Huskey, S.; Moller, D. E.; Hwck, J. V.; Jones, A. B. J. Med. Chem. 2000, 43, 3447.
- 11. Beroza, P.; Damodaran, K.; Lum, R. T. Curr. Top. Med. Chem. 2005, 5, 371.
- Manchem, Vara Prasad; Goldfine, I. D.; Kohanski, R. A.; Cristibal, C. P.; Lum, R. T.; Schow, S. R.; Shi, S.; Spevak, W. R.; Laborde, E.; Tovas, D. K.; Villar, H. O.; Wick, M. M.; Kozlowski, M. R. *Diabetes* **2001**, *50*, 824.