



Istraživanje i razvoj lijekova - od ideje do tržišta!

SAJAM IDEJA 2017

Dr. sc. Ines Vujasinović, dipl. kem. ing.

FKIT, Marulićev trg 19, Zagreb
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Discovery of new drug!

Long and highly risky road!



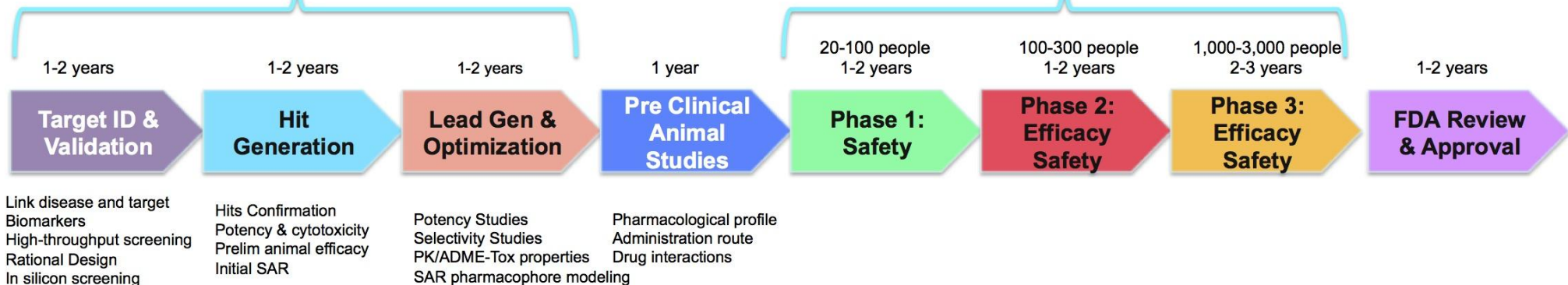
How to decide what to work on?

Drug discovery & development process



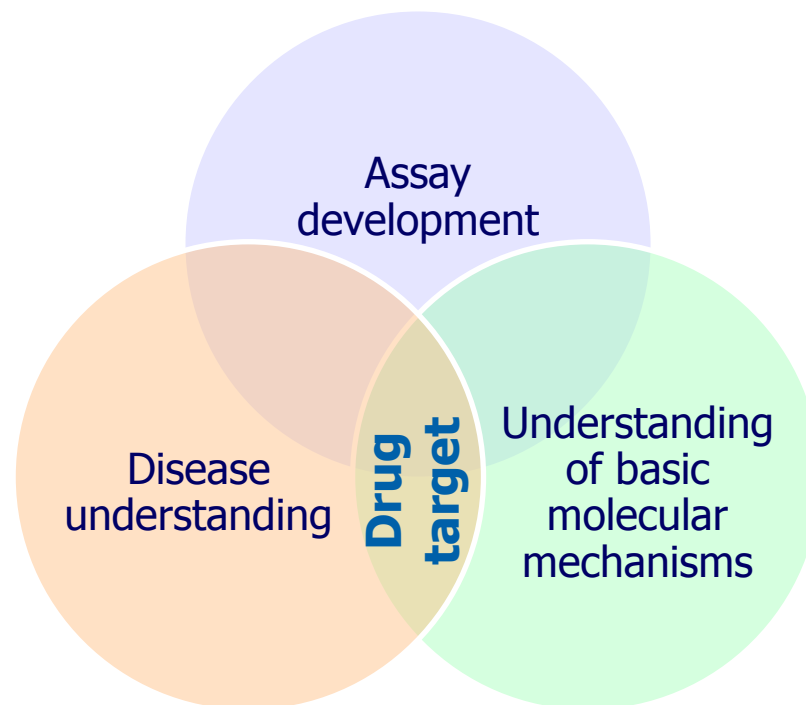
Drug R&D

Clinical Trials



Target identification and validation

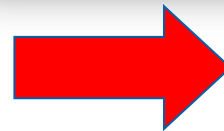
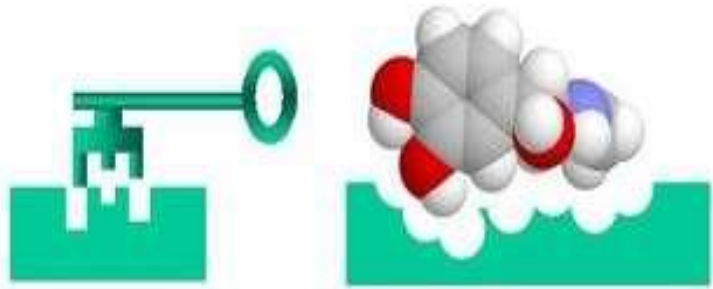
- Target identification: to identify molecular targets that are involved in disease progression
- Target validation: to prove that manipulating the molecular target can provide therapeutic benefit for patients (biochemical, cellular, or animal models)
- A target is never fully validated until a drug acting on it works on patient!



- Common receptors include proteins and enzymes
- Current drug therapies addresses around 500 biological targets.
- HG contains 12000-14000 encoding secreted proteins.

What is a drug?

- Any biologically active chemical that does not occur naturally in the human body that causes a physiological change in the body.
- Drugs are used for the treatment, prevention or alleviating the symptoms of disease.



CELLULAR/BIOLOGICAL RESPONSE

Searching for Compounds – HIT finding

- After target validation, next step is to find a chemicals that might modify the target or targets
- This sophisticated process can be divided into three distinct steps:

development and maintenance of large compound libraries



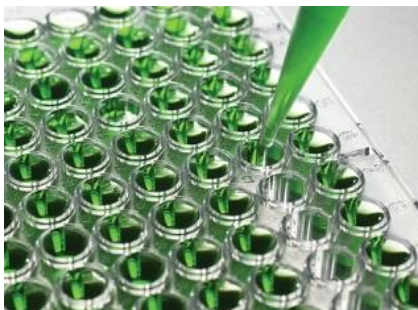
specific assay development



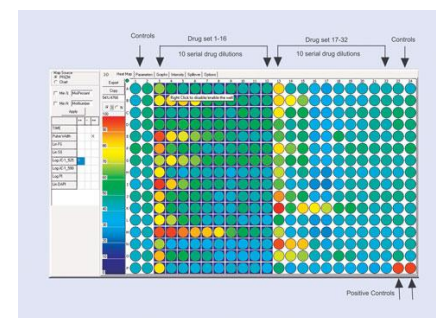
high-throughput screening (automated system)



- All compounds are stored in coded vials and organized in central bank so that they could be used on different biological targets.
- Some contains more than 5 million chemicals including products from natural sources.



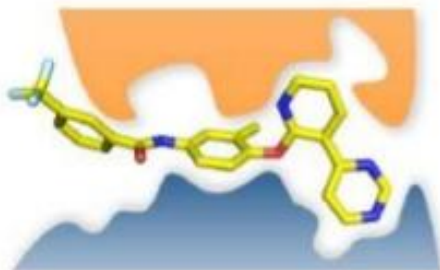
- Assays are analyses that quantify the interaction of the biological target and the compound.
- They also might measure how the presence of the compound changes the way in which the biological target behaves.



- Identification of compounds with activity against biological targets.
- Fast and reproducible capable to perform screen on >1000 compounds per day.
- The purpose of this chemistry stage is to refine the compound.

Fragment-Based Drug Discovery

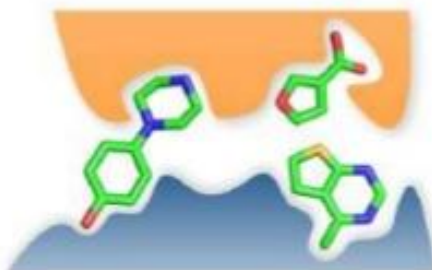
Alternative to HTS: Fragment-Based Drug Discovery (FBDD)



Typical compound hit from HTS screen

- Large molecule (MW between 250 – 600)
- Broad surface contact with no high quality interactions in key pockets
- May contain functional groups that contribute poorly to protein binding
- Emphasis on potency (30 μ M – nM hit activity)

The idea that large molecules can be considered combinations of two or more individual fragments is a fundamental principle of fragment-based drug discovery



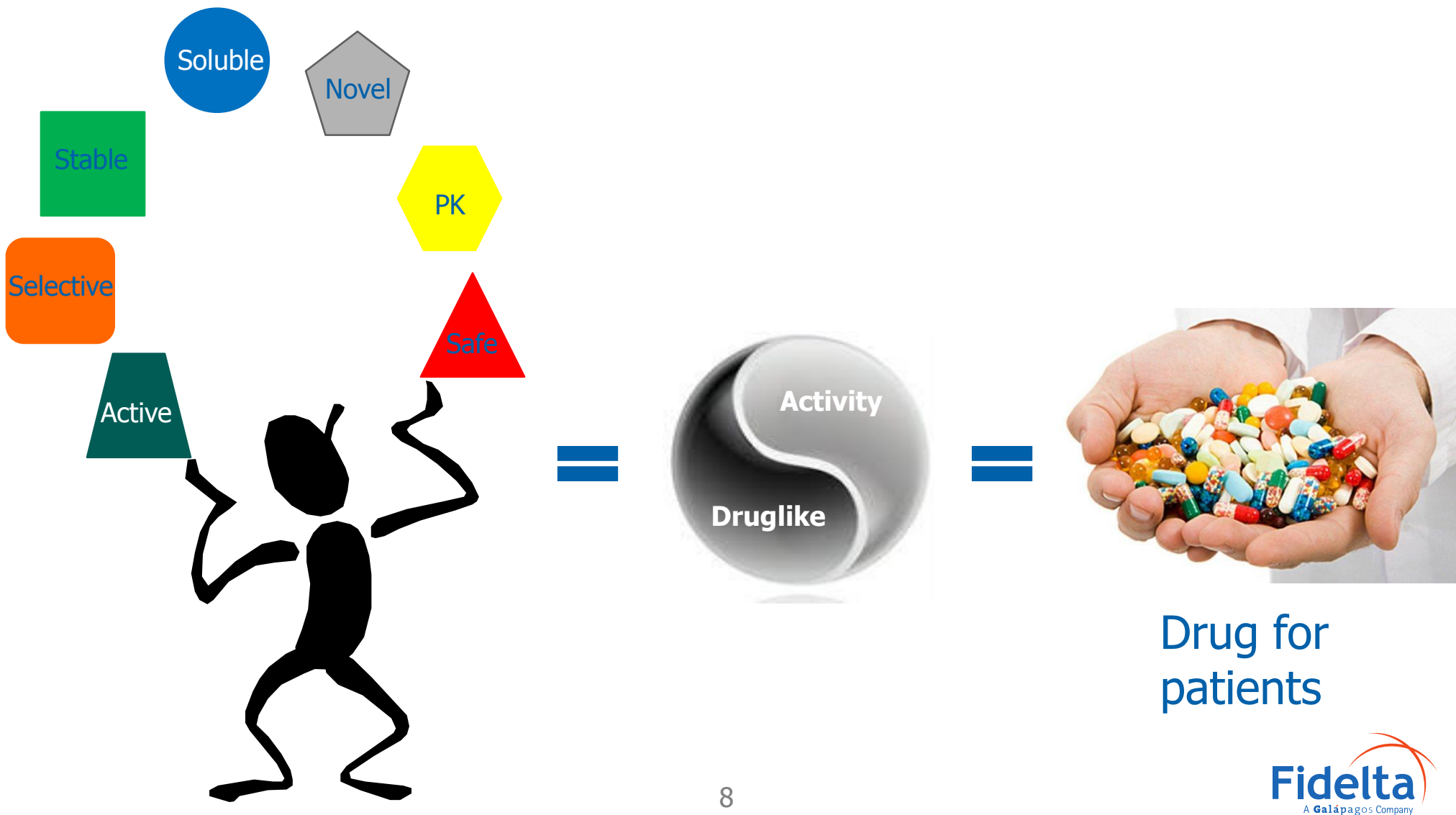
Typical compound hits from FBDD

- Smaller molecule (MW between 150 – 300)
- High proportion of the functional groups involved in binding
- Clearly interacts with pockets
- Potency in the range of mM to 30 μ M
- Emphasis on efficiency and design

Rees, D.C.; Congreve, M.; Murray, C.W.; Carr, R. *Nature* **2004**, 3, 660.
Scott, D.E.; Coyne, A.G.; Hudson, S.A.; Abell, C. *Biochemistry* **2012**, 51, 4990.

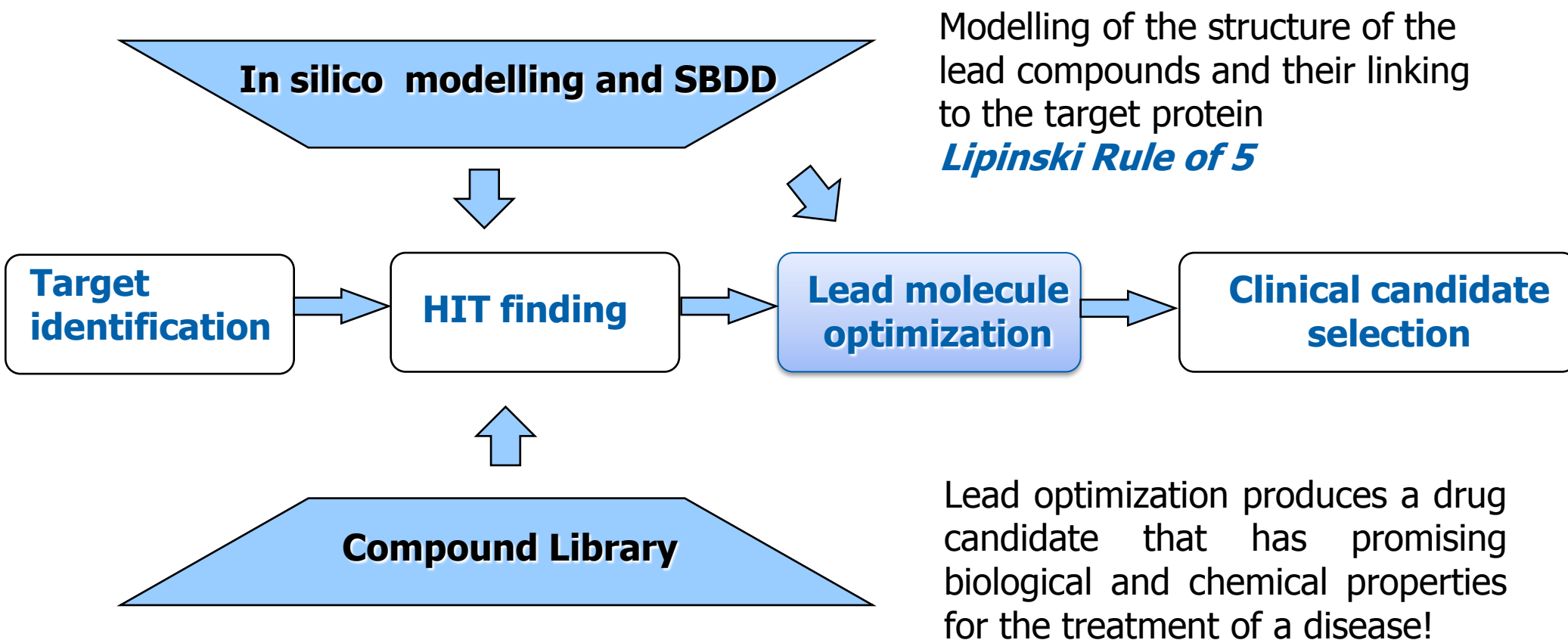
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What when we found hit molecule?



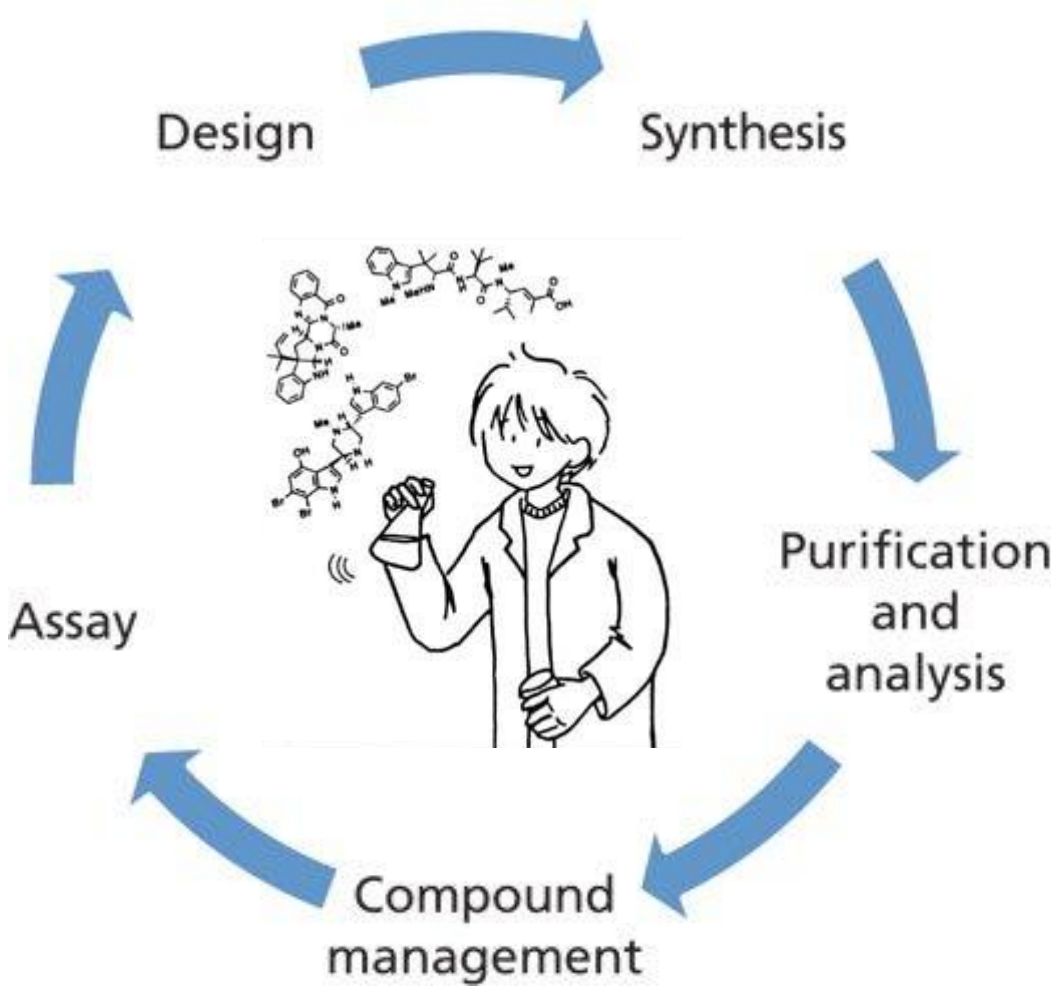
Drug for patients

Modern rational approach

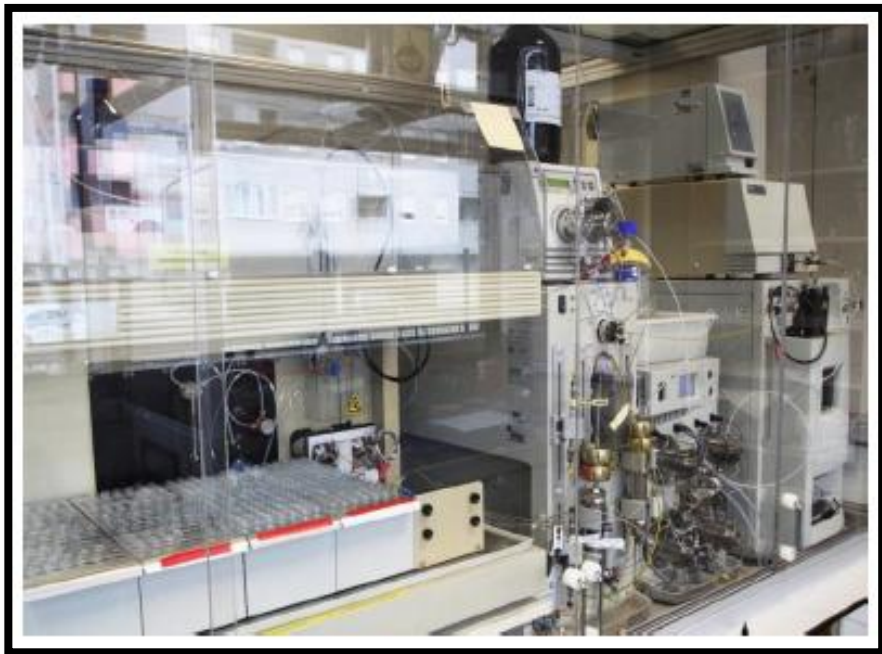




Drug discovery cycles in Fidelta



Synthetic and medicinal chemistry



- Synthesis (traditional, flow, libraries, MW, scale up)
- Purification
- Identification and structure, characterization



Biological activity



- Biochemical assays on various protein classes delivered by different screening technologies (absorbance, radioactivity, luminescence and fluorescence) supported by assay development, optimization and validation

- Disease relevant *in vitro* assays

(in biochemistry, cell biology, microbiology, molecular biology)

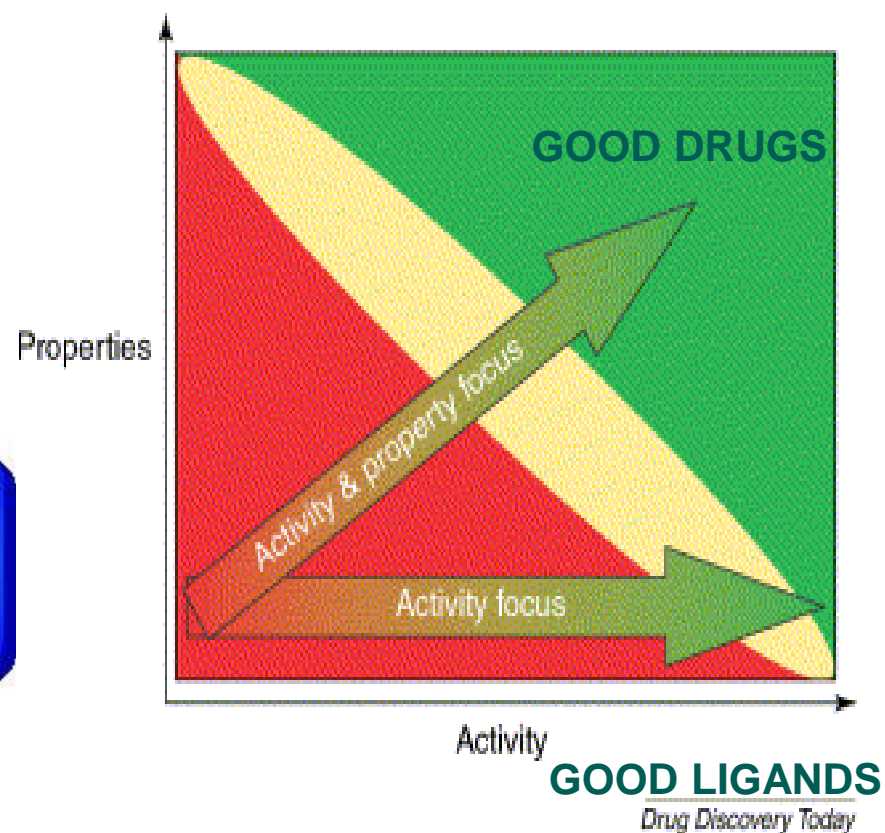
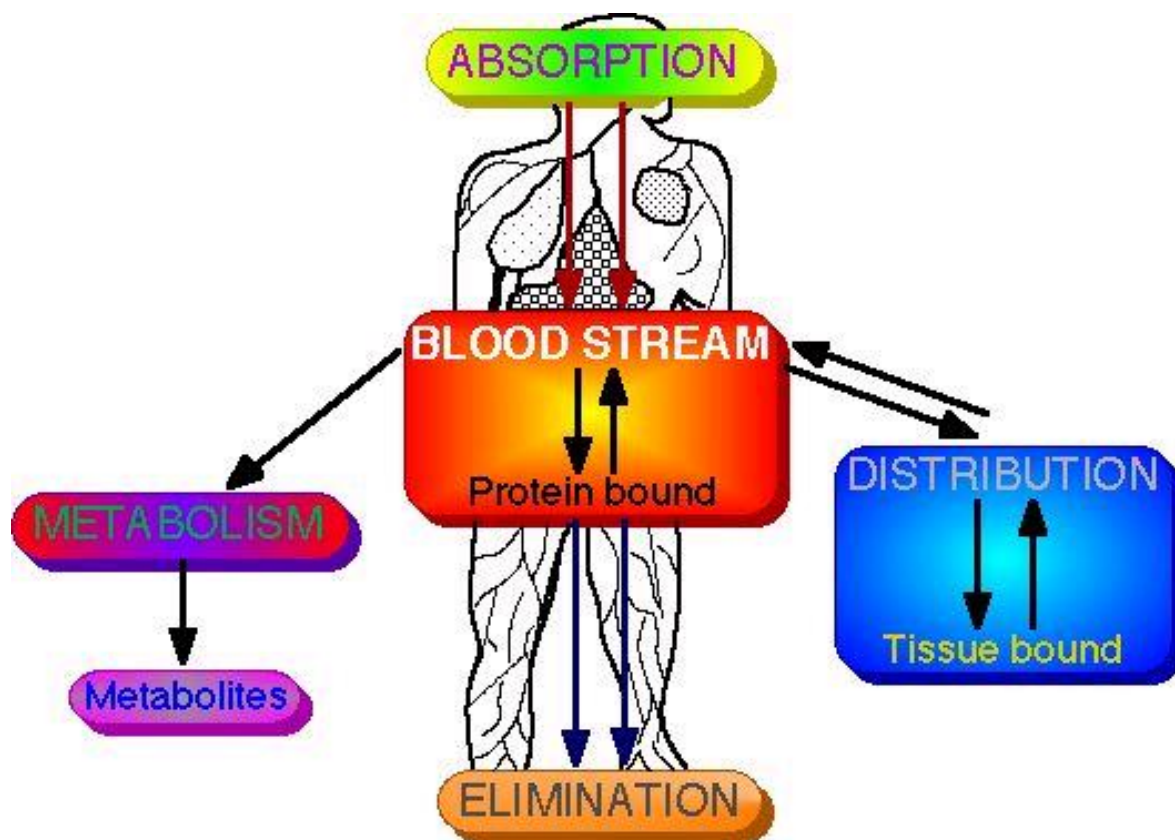


- Access to and assays in human disease tissue
- *In vivo* animal models (models of inflammation, infection, metabolic diseases and oncology)
- Translational approaches and biomarker discovery and evaluation.



Pharmacokinetics

What is ADME? Where it happens?



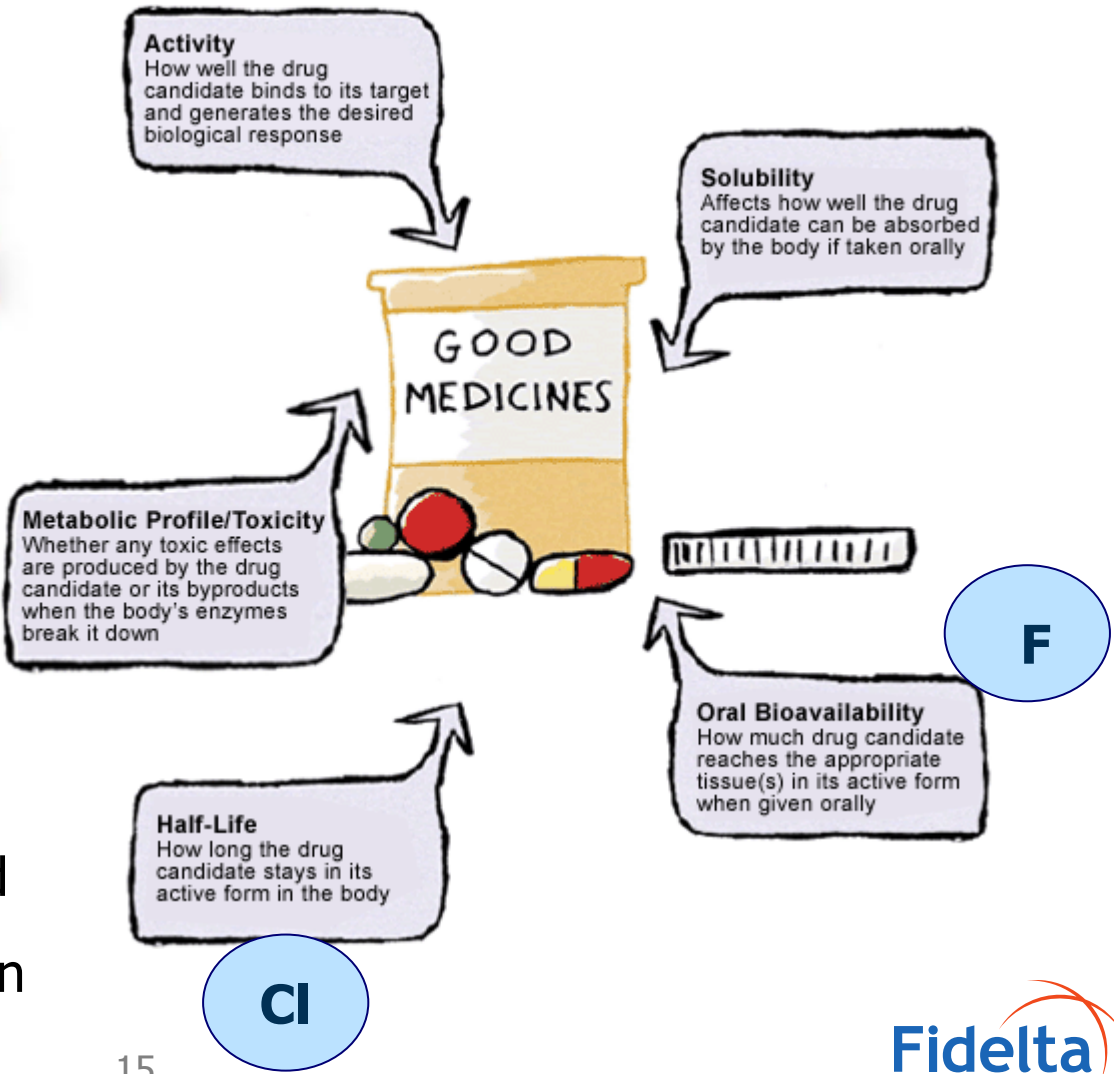
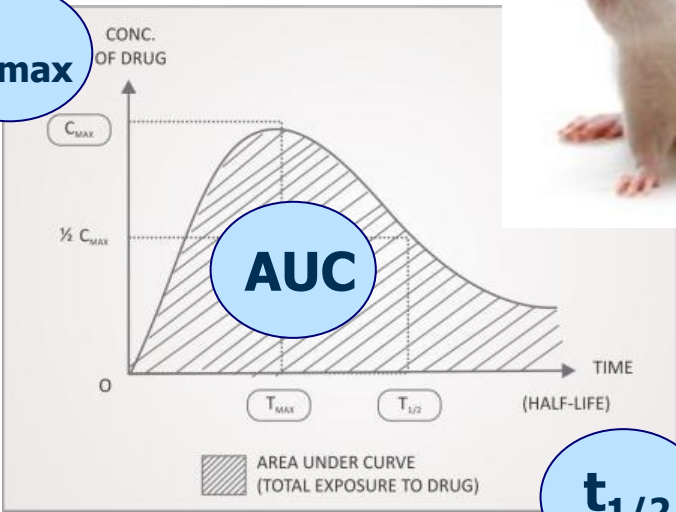
In vitro ADME



| Permeability | Binding | DDI |
|--|---|--|
| <ul style="list-style-type: none">➤ Cellular permeability<ul style="list-style-type: none">• MDCK, MDCK-MDR1• Caco-2➤ Artificial membranes<ul style="list-style-type: none">• PAMPA• Skin PAMPA | <ul style="list-style-type: none">➤ Plasma protein binding<ul style="list-style-type: none">• Equilibrium Dialysis• Ultrafiltration➤ Blood Partitioning➤ Tissue Binding➤ Microsomal binding | <ul style="list-style-type: none">➤ Inhibition<ul style="list-style-type: none">• CYP450 direct inhibition & MDI (recombinant, HLM)➤ Reactive metabolites<ul style="list-style-type: none">➤ Glutathione trapping |
| Solubility | Metabolic Stability | Metabolite Profiling & ID |
| <ul style="list-style-type: none">➤ Kinetic solubility➤ Thermodynamic solubility<ul style="list-style-type: none">• pH• SGF, FeSSIF | <ul style="list-style-type: none">➤ Microsomes, S9, Hepatocytes➤ Recombinant enzymes➤ Plasma and blood➤ SGF, FeSSIF | <ul style="list-style-type: none">➤ Aldehyde Oxidase➤ Reaction Phenotyping➤ Metabolite Identification<ul style="list-style-type: none">• Interspecies Profiling |



In vivo pharmacokinetics



- In house:
 - >50 *in vivo* models established
 - various routes of administration

CI

Preclinical development



- Usual time duration: 1.5 years
- Performed on animal models
- The aims of preclinical testing:
 - to evaluate a drug's safety, efficacy, and potential toxicity in animal models
 - to prove that a drug is not carcinogenic, mutagenic or teratogenic
 - result of work at this stage is a pharmacological profile of the drug
 - PK / PD model
 - Formulation

Clinical development



Phase 1

Years

1-1.5

Test population

20-80 healthy volunteers

Purpose

Determine safety and dosage

Phase 2

2

100-300 patients

Evaluate effectiveness, look for side effects

Phase 3

3-3.5

1000-3000 patients

Confirm effectiveness, monitor adverse reaction for long term use

Regulatory approval

- Usual time duration: 1-2 years
- Submission of full data and review by regulatory agencies



Finally

How to decide what to work on?

Differentiate your product

Differentiated positioning begins on factors established in clinical trials

- **Efficacy** and **safety**
- **Unmet needs** (no effective therapy available, current drugs sub-optimal)
- **Target patient population** (personalised medicine, gene therapy)

