ADRENERGIC AND ANTI-ADRENERGIC AGENTS AND THEIR RECENT ADVANCES

Presented by,

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AIM AND OBJECTIVE

Aim: Systematic study of adrenergic and anti-adrenergic agents and the recent advances.

Objective:

- The study of adrenergic and anti-adrenergic agents including their classification, mechanism of action, structure – activity relationship, synthesis of drugs, therapeutic uses and adverse effects.
- Recent advances of adrenergic agonists and antagonists.
- Marketed adrenergic agonists and antagonists.

INTRODUCTION

- Adrenergic agents / Adrenergic agonists: Adrenergic agents are defined as, "the drugs that produce similar effects to those produced by sympathetic nervous system", also known as sympathomimetic agents.
- Adrenergic drugs act on effector cells through adrenoceptors that normally are activated by the neurotransmitter norepinephrine (noradrenaline), thus producing "fight or flight" response.
- Anti- Adrenergic agents / Adrenergic antagonists: These are defined as, "the drugs which antagonize the receptor action of adrenaline and related drugs".
- Adrenergic receptors: They are membrane bound G-protein coupled receptors and classified as α (alpha) and β (beta) adrenoceptors. The α (alpha) receptor are further classified into α₁ and α₂. The β receptors are further subdivided into three subtypes and distributed in the body, that is, β₁ (heart), β₂ (bronchi, smooth muscles), and β₃ (adipose tissue).

FIGHT

FLIGHT

Biosynthesis of norepinephrine and epinephrine

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ADRENERGIC AGENTS

Based on the Chemical Structure the adrenergic agents are classified as follows:

1) Catecholamines:

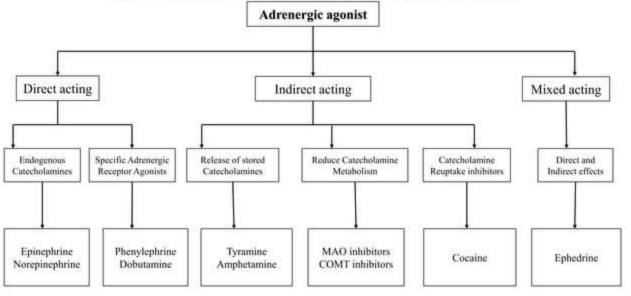
Compounds with hydroxyl (-OH) substitution in the third and fourth position of the benzene ring are termed as catecholamines.

2) Non-catecholamines:

Those compounds that lack the hydroxyl at third and fourth position of the benzene ring are non-catecholamines.

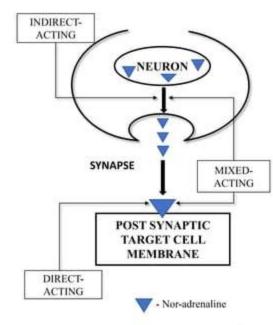
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Based on their mechanism, they are also classified as follows:



Mechanism of action

- Direct acting agents: Drugs such as phenylephrine, isoprenaline act directly as agonists on both α (alpha) and β (beta) adrenoceptors.
- Indirect acting agents: Drugs such as tyramine, amphetamine act on adrenergic neuron to release non-adrenaline, which then acts on adrenoceptors.
- Mixed acting agents: Drugs like ephedrine, dopamine, act both directly as well as indirectly.



Structure- activity relationship

Aromatic substitutions

 3^{1} , 4^{1} -diOH for both α and β agonist activity

- metabolized by COMT short oral activity and short DOA
- hydrophilic poor CNS activity

31,51-diOH (e.g., metaproterenol)

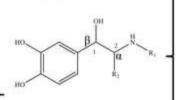
31-CH2OH, 41- OH (e.g., albuterol)

- β activity
- -↓ degradation by COMT → † absorption, oral activity, and DOA
- 4¹- OH is more important for β activity 3¹- OH is more important for α activity (e.g., phenylephrine: α-agonist)

No phenolic substitution \downarrow in both α and β activity Direct or indirect activity

Structure required for activity:

- β- phenylethylamine
- 1R- (OH)



R₁ Substitution on N

- size of R₁
- † β- activity
- · | a- activity

t- butyl: β₃- activity ↓ in degradation by MAO

R₂ substitution on C₂ Small alkyl groups (Me, Et) tolerated

Et group:

- α >> β (more β- selective, e.g., ethyl norepinephrine)
- † CNS activity
- † Oral activity and DOA

(2S)methyl group: † α2 activity

Synthesis

1. Catecholamine: e.g., Dobutamine

N-[1-methyl-3-(4-hydroxy phenyl)propyl]3,4-dihydroxy phenyl ethylamine

$$\begin{array}{c} \text{HO} \\ \text{HO} \\ \text{Dopamine} \end{array} + \begin{array}{c} \begin{array}{c} \text{H}_2 \text{ H}_2 \\ \text{O=C-C-C-C} \\ \text{CH}_3 \end{array} \\ \begin{array}{c} \text{OCH}_3 \\ \text{CH}_3 \end{array} \\ \begin{array}{c} \text{PdC}_2 \text{H}_5 \\ \text{Reductive} \\ \text{amination} \end{array} \\ \begin{array}{c} \text{Demethylation} \\ \text{Alc. KOH} \end{array} \\ \begin{array}{c} \text{Demethylation} \\ \text{Alc. KOH} \end{array}$$

Dobutamine

2. Non-catecholamine: e.g., Terbutaline

5-(2-(tert-butyl amino)-1-hydroxyethyl)benzene-1,3-diol

$$\begin{array}{c} \text{HO} \\ \text{HO} \\ \text{HO} \\ \text{Resorcinol} \end{array} + \begin{array}{c} O \\ H_2 \\ \text{CI-C-C-C-CI} \\ \text{2-chloro acetyl} \\ \text{chloride} \end{array} \xrightarrow{\text{HO}} \begin{array}{c} O \\ H_2 \\ \text{CI-C-C-CI} \end{array} \xrightarrow{\text{CI-H}_2 \text{CI-C}_{G} \text{H}_3} \\ \text{II} \end{array} \xrightarrow{\text{CI-C-C-CI}} \begin{array}{c} O \\ C_1 \\ C_2 \\ C_3 \end{array} \xrightarrow{\text{H}_3 \text{C-C-C}_1} \begin{array}{c} O \\ C_2 \\ C_3 \end{array} \xrightarrow{\text{H}_3 \text{C-C}_2 \text{H}_3} \end{array} \xrightarrow{\text{CI-C}_2 \text{CI-C}_3 \text{CI-C}_3 \text{CI-C}_3 \text{CI-C}_3} \xrightarrow{\text{CI-C}_3 \text{CI-C}_3 \text{CI-C}_3 \text{CI-C}_3 \text{CI-C}_3} \xrightarrow{\text{CI-C-C}_3 \text{CI-C}_3 \text{CI-C}_3 \text{CI-C}_3} \xrightarrow{\text{CI-C-C}_3 \text{CI-C}_3 \text{CI-C}_3} \xrightarrow{\text{CI-C-C}_3 \text{CI-C}_3 \text{CI-C}_3} \xrightarrow{\text{CI-C-C}_3 \text{CI-C}_3 \text{CI-C}_3} \xrightarrow{\text{CI-C-C}_3 \text{CI-C}_3 \text{CI-C}_3 \text{CI-C}_3} \xrightarrow{\text{CI-C-C}_3 \text{CI-C}_3 \text{CI-C}_3 \text{CI-C}_3} \xrightarrow{\text{CI-C-C}_3 \text{CI-C}_3 \text{CI-C}_3 \text{CI-C}_3} \xrightarrow{\text{CI-C-C}_3 \text{CI-C}_3 \text{CI-C}_3} \xrightarrow{\text{CI-C-C}_3 \text{CI-C}_3 \text{CI-C}_3} \xrightarrow{\text{CI-C-C}_3 \text{CI-C-C}_3} \xrightarrow{\text{CI-C-C}_3 \text{CI-C}_3} \xrightarrow{\text{CI-C-C}_3 \text{CI-C}_3} \xrightarrow{\text{CI-C-C}_3 \text{CI-C}_3} \xrightarrow{\text{CI-C-C}_3 \text{CI-C-C}_3} \xrightarrow{\text{CI-C-C}_3 \text{CI$$

Terbutaline

Therapeutic uses

- Vascular uses: Hypotensive state, with local anaesthetics, control of local bleeding, nasal decongestant, peripheral vascular diseases like Raynaud's phenomena, gangrene.
- 2. Cardiac uses: Cardiac arrest, Partial or complete A-V block, Congestive heart failure.
- 3. Bronchial asthma
- 4. Allergic disorders
- 5. Obesity
- 6. Nocturnal enuresis in children and urinary incontinence
- 7. Uterine relaxant
- 8. Insulin hypoglycaemia

Adverse effects

- Anxiety, fear, tension, headache, and tremor
- Haemorrhage
- Cardiac Arrythmia
- Pulmonary oedema
- Hyperthyroidism

Recent advances

Azi -medetomidine: Synthesis Novel α2 Adrenergic Photoaffinity Ligand

- Photoaffinity ligands have been used with great success to reveal binding locations, configurations, and even identify previously unknown molecular binding targets by making permanent the natively ephemeral ligand-receptor interaction.
- Azi-medetomidine competes with the α₂ agonist clonidine at α_{2A} adrenergic receptors, which is potentiated by photolabeling, and azi-medetomidine labels moieties on the α_{2A} adrenergic receptor which is determined by mass spectrometry.
- > The synthesis is accomplished by a recent modification in the synthesis of medetomidine as follows:

Reference: Azi-medetomidine: Synthesis and Characterization of a Novel #2 Adrenergic Photoaffinity Ligand-ACS Chemical Neuroscience, 2019, DOI: 10.1021/acschemneuro.9b00484

New potential β_1 adrenergic agonists with β -phenylethylamine structure, synthesized for the treatment of Dyslipidemia and Obesity

- β₁ adrenergic receptors have important physiological implications, being expressed in many places in the body, including brown adipose tissue. In this study, 13 newly synthesized compounds of βphenylethylamine structure and reference BRL 37344 were investigated in order to identify a potential affinity for β_x adrenergic receptors. The antidiabetic and hypolipemiant effects were investigated on a rat model of alloxan-induced diabetes.
- The results demonstrated that new β-phenylethylamine derivatives produced marked biological activity over lipid profile. All compounds have markedly decreased the values of total cholesterol, LDL cholesterol, and triglycerides and also have increased the values of antiatherogenic HDL cholesterol. The effects were significantly more intense than the reference substance BRL 37344.

$$X = H, \text{ alkoxy, halogen, dihalogen}$$

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$$Y = 4\text{-carbopropoxy-phenoxy,}$$

$$4\text{-carbomethoxymethylene-pheno}$$

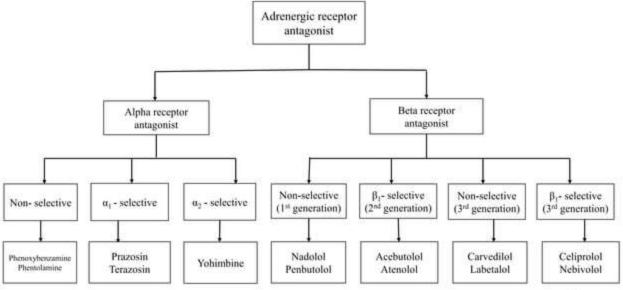
$$4\text{-carbomethoxyethylene-pheno}$$

4-carbomethoxymethylene-phenoxy,

4-carbomethoxyethylene-phenoxy.

Reference: New Potential Beta-3 Adrenergic Agonists with Beta-Phenylethylamine Structure, Synthesized for the Treatment of Dyslipidemia and Obesity- Adiposity - Epidemiology and Treatment Modalities, 2017, Chapter-13, Page no. 220-236, DOI: 10.5772/65328

ANTI-ADRENERGIC AGENTS



Mechanism of action

The adrenergic blockers or antagonist binds to the adrenoreceptor thus blocking or inhibiting the stimulation of sympathetic nervous system. They antagonize the receptor action of adrenaline and related drugs.

 α adrenergic blocking agents: These drugs inhibit adrenergic responses mediated through the α adrenergic receptors. They can act non-selectively on α_1 or α_2 receptors or selectively on either of the receptor. These agents may be competitive which is reversible or they may cause inhibition by forming covalent bond, that is, irreversible inhibition.

 β adrenergic blocking agents: These drugs inhibit adrenergic responses mediated through the β receptors. They are competitive antagonists. Similar to α blocking agents, they are also non-selective to β_1 , β_2 and β_3 or selective to β_1 .

* The third generation beta-blockers such as Labetalol, Carvedilol, Celiprolol, Nebivolol possess additional α blocking and/or vasodilator property.

Structure- activity relationship

 α adrenergic blocking agents: These blockers consist of several compounds of diverse chemical structure that bear little obvious resemblance to the agonist.

Non-selective α blockers: They are imidazoline consisting competitive blockers having a similar structure as that of imidazoline α agonists except for that of the lipophilic substituents which makes them antagonist.

Selective α_1 blockers: They are a class of quinazoline compounds.

- The amino group on 4th position of quinazoline ring is essential for antagonist activity.
- The piperazine ring can be replaced by other heterocycles (e.g., piperidine) without any change in affinity.
- The nature of the acyl group has a significant effect on the pharmacokinetic properties.

Selective a_2 blockers: e.g., Yohimbine and Corynanthine are indolealkylamine. The only difference between these two is relative stereochemistry of carbon containing carbomethoxy substituent.

- 2. β adrenergic blocking agents: Most of these agents are aryloxypropanolamines. Propranolol considered prototype of β blockers.
- The important features for the activity are aryl ring, and a side chain containing propanolamine.
- · The amine group must be secondary for efficient activity.
- The nature of aromatic ring and its substitutions affect the antagonistic activity and also the ADME properties of the compound.
- The carbon containing OH in the side chain must be of S configuration.

Propranolol

Synthesis

α adrenergic blocking agents: e.g., Prazosin

Prazosin

I-(4-amino-6,7-dimethoxy-2-quinazolinyl)-4-(2-furanyl carbonyl)-piperazine

NH-

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4-amino 2-chloro 6,7-dimethoxy quinazoline

2. B adrenergic blocking agent: e.g., Acebutalol

$$H_3C(H_2C)_2OCHN$$

$$- \begin{array}{c} & H & H \\ -O - \overset{}{C} - \overset{}{C} - CH_2NHCH(CH_3)_2 \\ & H & OH \end{array}$$

N-[3-acetyl-4-(2-hydroxy-3-(isopropyl)amino propoxy)phenyl] butyramide

N-(4-hydroxyphenyl)butyramide

Fries rearrangement reaction

COCH₃

-OH

Acebutalol

$$+$$
 $H_{2}N-CH(CH_{3})_{2}$
 $+$
 $CI-C-C-CH_{3}$
 H_{3}

Isopropylamine

AICI

Epichlorohydrin

Therapeutic uses

- Hypertension
- Angina pectoris
- Cardiac arrhythmias
- Myocardial Infarction
- Congestive heart failure
- Dissecting aortic aneurysm

Adverse affects

- Hypotension
- Bradycardia
- Heart block
- CHF
- Increased airway resistance
- Vertigo

- Pheochromocytoma
- Thyrotoxicosis
- 9. Migraine
- 10. Anxiety
- 11. Glaucoma
- Hypertrophic obstructive cardiomyopathy

- Lethargy
- 8. Fatigue
- Depression
- Insomnia
- 11. Hallucinations
- Agranulocytosis

Recent Advances

Synthesis and Pharmacological Evaluation of Novel Silodosin-Based Arylsulfonamide Derivatives as α_{1A}/α_{1D} -Adrenergic Receptor Antagonist with Potential Uroselective Profile

- A series of arylsulfonamide derivatives of (aryloxy)ethyl alicyclic amines was designed, synthesized, and biologically evaluated as potent α₁-adrenoceptor antagonists with uroselective profile. One of the optimized compound from series, that is, (3-chloro-2-fluoro-N-([1-(2-(2-2,2-trifluoroethoxy)phenoxy]ethyl)piperidin-4-yl) methyl) benzenesulfonamide) showed adequate metabolic stability in rat-liver microsome assay similar to the reference drug tamsulosin.
- The data from this study supported development of uroselective agents in the group of arylsulfonamides of alicyclic amines with potential efficacy in the treatment of lower urinary tract symptoms associated to benign prostatic hyperplasia.
- The structure is synthesized from silodosin and arylsulfonamide derivatives.

Reference: Design and Synthesis of aryloxypropanolamine as β3-adrenergic receptor antagonist in cancer and lipolysis, European Journal of Medicinal Chemistry, 2018, DOI: 10.1016/j.ejmech.2018.03.032

Design and Synthesis of aryloxypropanolamine as β_3 -adrenergic receptor antagonist in cancer and lipolysis

- A few antagonists of β₃-AR have been identified. At present, there are two typical β₃-AR inhibitors: aryloxy propanolamine tetrahydrate β₃-AR inhibitor (SR59230A) and aryloxypropanolamine β₃-AR inhibitor (L-748,337).
- SR59230A displays high affinity at human cloned β₁-AR and β₂-AR. Therefore, SR59230A is a potent and nonselective β-AR antagonist. In contrast, L-748,337 displays more than 90-fold selectivity for human β₃-AR over β₁-AR, 45-fold selectivity for human β₃-AR over β₂-AR, respectively.
- A series of novel L-748,337 compounds were synthesized and evaluated on animal models for their activity against tumour and also the capability of lipolysis.
- One compound among the series showed excellent activity which displayed 23-fold more potent β₃-AR antagonist activity and it alleviated weight loss and inhibit tumor growth in C26 tumor cachexia animal model.

(5)-1-(3-(2-((3-()1)/-indol-4-yf)oxy)-2-hydroxypropy[)amino)ethyl)phenyl)-3-phenylurea

Reference: Synthesis and Pharmacological Evaluation of Novel Silodosin-Based Arylsulfonamide Derivatives as α_{1A}/α_{1D} -Adrenergic Receptor Antagonist with Potential Uroselective Profile, Molecules 2018, DOI:10.3390/molecules23092175

MARKETED PRODUCTS

Adrenergic agonists



Epinephrine



Phenylephrine



Amphetamine



Norepinephrine



Dobutamine



Clonidine

Adrenergic antagonists



Prazosin





Nadolol



Carvedilol



Acebutolol



Nebivolol

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