α2-ADRENOCEPTOR AND 5-HT3 SEROTONIN RECEPTOR LIGANDS AS POTENTIAL ANALGESIC ADJUVANTS

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α2-ADRENOCEPTOR AND 5-HT₃ SEROTONIN RECEPTOR LIGANDS AS
POTENTIAL ANALGESIC ADJUVANTS

A dissertation submitted in partial fulfillment of the requirements for the degree of Doctor
of Philosophy at Virginia Commonwealth University.

by

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August 2012
ACKNOWLEDGMENT

First, I would like to thank Dr. Malgorzata Dukat for her continued assistance and advice throughout my studies. This guidance has helped me better understand and appreciate medicinal chemistry. Also, a special thanks is given to both Dr. Dukat and Dr. Richard A. Glennon for their constant quizzing during group meetings, which not only helped me recognize what I did not already understand, but also, improved my ability to devise potential solutions for future research problems. Furthermore, I could not have successfully completed this dissertation work without the help of Dr. Jin-Sung Kim as my synthetic chemistry trainer, Dr. Phil Mosier as my molecular modeling trainer and Dr. Richard Young and Shawquia Young as mentors and instructors for the behavioral animal studies. These trainers provided me with much guidance and leadership, which helped me remain optimistic and patient through the various research problems that occurred. Furthermore, I would like to thank Virginia Commonwealth University and the School of Pharmacy for giving me this opportunity as well as providing me with financial assistance for the graduate school award for dissertation writing. These studies were supported by the Jeffress Memorial Trust RG-J-778 and the A. D. Williams Trust Fund awarded to Dr. Dukat.

And last but certainly not least, I would like to thank my husband, Stuart Alley, and my parents, Scott and Louisa Sirles, for their constant support and patience throughout my studies at VCU. A special thanks is given to my graduate school colleagues, Jessica Worsham, Kendra Haney and Rossana Ferrera, who provided support, motivation and confidence even when I was filled with frustration and defeat. I could not have successfully completed my graduate work without all of these people in the lab and at home.
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<tr>
<td>5-HT</td>
<td>5-hydroxytryptamine or serotonin</td>
</tr>
<tr>
<td>5-HTQ</td>
<td>N,N,N-trimethyl-5-HT</td>
</tr>
<tr>
<td>ANOVA</td>
<td>analysis of variance</td>
</tr>
<tr>
<td>AR</td>
<td>adrenoceptor</td>
</tr>
<tr>
<td>BBB</td>
<td>blood-brain barrier</td>
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<tr>
<td>CI</td>
<td>confidence interval</td>
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<tr>
<td>CHO</td>
<td>Chinese hamster ovary</td>
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<tr>
<td>CNS</td>
<td>central nervous system</td>
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<td>COX-2</td>
<td>cyclooxygenase type 2</td>
</tr>
<tr>
<td>ED</td>
<td>effective dose</td>
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<td>EL</td>
<td>extracellular loop</td>
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<td>EPI</td>
<td>epinephrine</td>
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<tr>
<td>GABA</td>
<td>gamma-aminobutyric acid</td>
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<tr>
<td>GPCR</td>
<td>G protein-coupled receptor</td>
</tr>
<tr>
<td>G proteins</td>
<td>GTP-binding protein</td>
</tr>
<tr>
<td>Abbreviation</td>
<td>Description</td>
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<tr>
<td>--------------</td>
<td>-------------</td>
</tr>
<tr>
<td>HPLC</td>
<td>high performance liquid chromatography</td>
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<tr>
<td>IA</td>
<td>intrinsic activity</td>
</tr>
<tr>
<td>i.c.v.</td>
<td>intracerebroventricular</td>
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<td>IL</td>
<td>intracellular loop</td>
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<td>i.p.</td>
<td>intraperitoneal</td>
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<tr>
<td>i.t.</td>
<td>intrathecal</td>
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<tr>
<td>LGIC</td>
<td>ligand-gated ion channel</td>
</tr>
<tr>
<td>mCPBG</td>
<td>meta-chlorophenylbiguanide</td>
</tr>
<tr>
<td>MD-354</td>
<td>meta-chlorophenylguanidine or mCPG</td>
</tr>
<tr>
<td>MPE</td>
<td>maximal possible effect</td>
</tr>
<tr>
<td>NE</td>
<td>norepinephrine</td>
</tr>
<tr>
<td>N₂O</td>
<td>nitrous oxide</td>
</tr>
<tr>
<td>NSAID</td>
<td>nonsteroidal anti-inflammatory drug</td>
</tr>
<tr>
<td>PBG</td>
<td>phenylbiguanide</td>
</tr>
<tr>
<td>SAFIR</td>
<td>structure-affinity relationship</td>
</tr>
<tr>
<td>SAR</td>
<td>structure-activity relationship</td>
</tr>
<tr>
<td>s.c.</td>
<td>subcutaneous</td>
</tr>
<tr>
<td>S.E.M.</td>
<td>standard error of the mean</td>
</tr>
<tr>
<td>Abbreviation</td>
<td>Full Name</td>
</tr>
<tr>
<td>--------------</td>
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</tr>
<tr>
<td>SR57227A</td>
<td>1-(6-chloro-2-pyridyl)-4-piperidinylamine</td>
</tr>
<tr>
<td>TDIQ</td>
<td>5,6,7,8-tetrahydro-1,3-dioxo[4,5-g]isoquinoline</td>
</tr>
<tr>
<td>TM</td>
<td>transmembrane</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
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ABSTRACT

α₂-ADRENOCEPTOR AND 5-HT₃ SEROTONIN RECEPTOR LIGANDS AS POTENTIAL ANALGESIC ADJUVANTS

By Genevieve Sirles Alley, Ph.D.

A dissertation submitted in partial fulfillment of the requirements for the degree of Doctor of Philosophy at Virginia Commonwealth University.

Virginia Commonwealth University, 2012.

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There continues to be a need for more effective analgesics. The α₂-adrenoceptor (AR) agonist clonidine is an analgesic whose use is severely limited by undesirable side effects. meta-Chlorophenylguanidine (MD-354), an agent developed in our laboratory, selectively potentiates the antinociceptive effects of clonidine in a biphasic manner. Mechanistic studies suggest that both 5-HT₃ receptor and α₂-AR mechanisms are involved.

To further evaluate mechanisms underlying the analgesia-potentiating effect of clonidine by MD-354, pharmacological studies using more established 5-HT₃ receptor agonists: meta-chlorophenylbiguanide (mCPBG) and centrally-acting SR57227A, and non-selective α₂-adrenoceptor ligand TDIQ, administered alone and in combination with
clonidine, were conducted in mouse antinociceptive assays. None of the examined analogs produced an antinociceptive effect when administered alone. Nevertheless, mCPBG potentiated the antinociceptive actions of clonidine in a monophasic manner and the effect was antagonized by the 5-HT₃ receptor antagonist tropisetron but not by tropisetron methiodide, suggesting that potentiation is, at least in part, due to a central 5-HT₃ receptor mechanism. SR57227A did not alter the antinociceptive actions of clonidine. TDIQ was found to potentiate the analgesic actions of clonidine in a synergistic manner (as determined by an isobolographic analysis) and the effect was blocked by α₂-AR antagonists (BRL-44408, imiloxan, ARC-239; α₂A-, α₂B-, and α₂C-AR antagonists, respectively). This supports the hypothesis that MD-354 could be potentiating the analgesic actions of clonidine via an α₂-AR agonist mechanism.

In order to explore the role of the ring nitrogen atoms and the chloro substituent of conformationally-constrained rotamers of MD-354, analogs of 2-amino-7-chloro-3,4-dihydroquinazoline, with a varying number of nitrogen atoms in the ring were synthesized. Preliminary binding affinity results indicated that the ring nitrogen atoms are essential for 5-HT₃ receptor binding.

In attempt to explain the varied binding and functional activity of MD-354 at α₂-ARs, 3D homology models of α₂A-, α₂B- and α₂C-AR were generated and docking studies of the low-energy rotamers of MD-354 were conducted.

The present studies support a role for the involvement of 5-HT₃ receptors and α₂-ARs in antinociception. Analgesic adjuvants with a dual mechanism of action such as MD-354 might represent a promising avenue to pain treatment.
I. Introduction

Cancer, which is one of the most deadly diseases among Americans, is commonly associated with various types of pain with various degrees of intensity and duration due to multiple sources.\textsuperscript{1,2} In general, cancer pain is due to (a) direct invasion of tumor into bones, soft tissue, nerves, tendons, or connective tissue, (b) metastases, and/or (c) cancer-related treatments such as surgery, radiation and chemotherapy.\textsuperscript{2}

The World Health Organization (WHO) developed a three-step analgesic ladder that communicated guidelines for cancer pain management.\textsuperscript{3} The first line of therapy for cancer pain therapy is administration of nonopioids such as nonsteroidal anti-inflammatory drugs (NSAIDs) or acetaminophen.\textsuperscript{2-4} However, NSAIDs that nonspecifically inhibit cyclooxygenases type 1 and 2 can cause undesirable effects such as renal and gastrointestinal effects (e.g., ulceration and bleeding).\textsuperscript{5,6} Although NSAIDs that are selective for cyclooxygenase type 2 are devoid of these side effects, recent studies indicate that these agents increase the risk of stroke and heart attack.\textsuperscript{5,6} In the second line of therapy, WHO recommends adding opioids to the treatment.\textsuperscript{2-4} Although opioids have been found to be very effective analgesics, physicians and patients have concerns that physical dependence and tolerance will result from opioid treatments and, furthermore, adverse effects of such agents include respiratory depression, nausea and sedation.\textsuperscript{7,8}
Adjuvant analgesics might be a solution for individual patients due to their particular symptoms of cancer-related pain and/or their sensitivity to certain adverse effects.\textsuperscript{7} For example, the $\alpha_2$-adrenoceptor (AR) agonist clonidine is used to relieve severe cancer pain.\textsuperscript{9}

Behavioral, neurochemical, and electrophysiological studies indicate an adrenoceptor role in antinociception via spinal administration of norepinephrine (NE; 1) or electrical stimulation of cerebral AR cell nuclei.\textsuperscript{10-15} The descending pathway is influenced by NE (1), which is receptor-dependent and affects the nociceptive threshold.\textsuperscript{16} Regarding the receptor subtypes of $\alpha_2$-ARs ($\alpha_{2A}$-, $\alpha_{2B}$- and $\alpha_{2C}$-ARs), there are knockout mouse studies as well as pharmacological studies such as systemic/spinal administration of selective $\alpha_{2A}$-AR agonists and antagonists that indicate an $\alpha_{2A}$-AR role in analgesia, but an antinociceptive role for $\alpha_{2B}$- and $\alpha_{2C}$-ARs is unclear.\textsuperscript{16-18}

Additionally, serotonin receptors seem to modulate mechanisms of descending inhibition and decending facilitation in the dorsal horn.\textsuperscript{16} Leading to both pronociceptive and antinociceptive actions, various studies such as electrical brain stimulation, morphine-induced antinociception, and direct administration of serotonin (5-HT) into the spinal cord suggest that descending serotonergic pathways exert opposing nociceptive effects (modulation of descending and facilitating inhibitory pathways).\textsuperscript{19,20} These varying effects produced by the endogenous ligand 5-HT could be due to the multiple subtypes of 5-HT receptors (i.e., it is the receptor, rather than the neurotransmitter, that is responsible for the excitatory or inhibitory action) and/or the localization of specific 5-HT receptors.
With regard to the 5-HT_3 receptor subtype, most of the current studies indicate an excitatory role in neuronal activity; specifically, phospholipase C activity is enhanced by activation of 5-HT_3 receptors, which, in turn, influences neuronal activity. However, to date, the mechanism of pronociception is unclear, possibly due to incomplete characterization of 5-HT_3 receptors (e.g., 5-HT_3A vs. 5-HT_3AB receptors), and more research is necessary to fully understand 5-HT_3 receptors’ role in the descending control of pain.

In vivo pharmacological results are also ambiguous; for example, the analgesic action of phenylbiguanide seems to be dependent on the nociceptive animal model, as it produces an antinociceptive effect in the rat hot-plate assay, whereas it shows saline-like effects in the rat tail-flick assay. Furthermore, different analgesic effects observed in the tail-flick assay are seemingly due to species; 5-HT_3 receptor agonists (e.g., phenylbiguanide and meta-chlorophenylbiguanide) produce saline-like effects in the rat tail-flick assay, but show antinociceptive effects in the mouse model. Although there are a few exceptions, in general, 5-HT_3 receptor antagonists (e.g., tropisetron and zacopride) produce saline-like effects in antinociceptive animal models.

In view of the roles of α_2-ARs and 5-HT_3 receptors in pain, meta-chlorophenylguanidine (MD-354), which was identified in our laboratory, was found to possess a rather selective binding profile. MD-354 was shown to display high affinity to the ligand-gated ion channel 5-HT_3 receptors (K_i = 35 nM), and to the low- and high-affinity states of the G protein-coupled α_2-adrenoceptors (K_i: α_2A-AR, 110 and 825 nM; α_2B-AR, 220 and 25 nM; α_2C-AR, 4,700 and 140 nM, respectively). In vitro functional assays ([^35]S)GTPγS assay) indicated that MD-354 behaves as a weak partial agonist at
α2A-ARs, but at high concentrations MD-354 nonselectively antagonizes the agonist effect of NE at all three receptor subtypes.31

As MD-354 has an interesting binding profile with regards to antinociception, its functional activity in the mouse tail-flick and hot-plate assays have been investigated. However, in both assays, MD-354 failed to produce a statistically significant antinociceptive effect.33 Although MD-354 produced saline-like effects in the mouse tail-flick and hot-plate assays, it was found to potentiate the antinociceptive effect of an “inactive” dose of clonidine (an α2-AR agonist) in the mouse tail-flick assay in a biphasic manner.33 That is, as MD-354 doses increased, the antinociceptive properties of clonidine were potentiated by MD-354 in a biphasic manner (dose-response curve displays two peaks at 1.0 and 10.0 mg/kg doses of MD-354). Clonidine, one of the few non-opioid FDA-approved treatments for cancer pain, is a potent analgesic agent, but also produces undesirable side effects including sedation. However, MD-354 displayed selective potentiation of clonidine; specifically, MD-354 potentiated the analgesic properties of clonidine in the mouse tail-flick assay, but did not potentiate the adverse sedative effect of clonidine in the mouse locomotor activity assay, which could have substantial clinical ramifications for the treatment of cancer-related pain.29,33

The potentiating effect could be due to different mechanisms; for example, the low-dose potentiating effect might be caused by activation of 5-HT3 receptors, whereas the high-dose potentiating effect might be due to action at one or more of the α2-ARs. In fact, mechanistic studies suggest that the low-dose potentiation of clonidine by MD-354 may be due, at least in part, to a 5-HT3 receptor agonist mechanism.34 However, when 5-HT3 receptor antagonists (e.g., zacopride and tropisetron) were co-administered with
the clonidine/MD-354 (high dose) combination, neither potentiation nor attenuation of the antinociceptive effect occurred, which indicates that the high-dose potentiation is unlikely due to the 5-HT$_3$ receptor character of MD-354.$^{29}$ Due to MD-354’s binding affinity at $\alpha_2$-ARs, various $\alpha_2$-ARs antagonists with different binding selectivity were examined for their antinociceptive properties both alone and in combination with low- and high doses of MD-354 and clonidine. However, difficulty arises in such mechanistic studies because of a lack of highly selective ligands at the three subtypes of $\alpha_2$-ARs. The mouse tail-flick assay results incorporating various $\alpha_2$-AR antagonists such as the non-selective $\alpha_2$-AR antagonist yohimbine, the moderately selective $\alpha_{2B}^-$ and $\alpha_{2A}^-$-AR antagonists imiloxan and BRL44408, respectively, in combination with clonidine suggest that $\alpha_{2B}$-AR antagonists can potentiate the action of clonidine.$^{31,33}$ In other words, if MD-354 behaves as an $\alpha_{2B}$-AR antagonist, then it might be potentiating the antinociceptive effect of clonidine (either the low-dose or high-dose peak) via an $\alpha_{2B}$-AR antagonist mechanism of action. Nevertheless, a possible $\alpha_{2A}^-$ and/or $\alpha_{2C}^-$-AR mechanism cannot be ruled out. When the abovementioned $\alpha_2$-AR antagonists were co-administered with the clonidine/MD-354 combination (low dose), attenuation of the antinociceptive effect occurred.$^{31}$ Because, by definition, antagonists block the effect of agonists, these observations suggest an $\alpha_2$-AR agonist mechanism in the actions associated with the potentiation of clonidine by a low dose of MD-354. Therefore, from the abovementioned mechanistic studies, MD-354 seems to potentiate the antinociceptive actions of an inactive dose of clonidine, at least in part, via a 5-HT$_3$ receptor and an $\alpha_2$-AR mechanism.
Such results lead to the current project objectives. The first main goal is to determine the mechanism of action of the analgesia-potentiating effect of clonidine by MD-354. In the present investigation, this mechanism of action will be evaluated by studying the more established 5-HT₃ receptor agonist *meta*-chlorophenylbiguanide, the known centrally-acting 5-HT₃ receptor agonist SR57227A, and the non-selective α₂-AR ligand TDIQ. Second, an objective of this study is to explore the conformationally-constrained rotamers of MD-354 as such conformational constraint might enlighten the manner in which MD-354 binds to 5-HT₃ receptors. Furthermore, the role of the ring nitrogen atoms and the chloro substituent in 5-HT₃ receptor binding will be evaluated by synthesizing conformationally-constrained analogs of MD-354 (anlogs which lack one or more nitrogen atoms or chloro substituents as compared to MD-354). Also, as MD-354 has high binding affinity at all three subtypes of α₂-ARs, docking studies of MD-354 at the low- and high-affinity states of α₂A-, α₂B- and α₂C-AR homology models will be performed in order to better explain the binding affinity and functional activity of MD-354.
II. Background

A. Current therapy for cancer pain

After heart disease, cancer is the most deadly disease among Americans.\textsuperscript{1} In 2010, approximately 1.5 million new cancer cases were expected to be diagnosed in the United States alone and 0.5 million Americans were expected to die from cancer.\textsuperscript{1} Many cancer patients deal with various types of pain throughout their treatment program. Statistical data suggest a high incidence of cancer-related pain in patients specifically affecting 9 million people each year.\textsuperscript{3,5}

Cancer-related pain is multifaceted; there are multiple types of pain with various degrees of intensity and duration due to multiple sources.\textsuperscript{2} Cancer pain is a result of: (a) direct invasion of tumor into bones, soft tissue, nerves, tendons, or connective tissue, (b) metastases, and/or (c) cancer-related treatments including surgery, radiation and chemotherapy.\textsuperscript{2}

The three main physiological types of pain associated with cancer are nociceptive/somatic, visceral, and neuropathic pain, which are caused by the disease, itself and by side effects of various cancer treatments.\textsuperscript{2} Nociceptive pain (similar to somatic pain) is due to nociceptor activation, which results from tissue injury from surgery or from the tumor, itself.\textsuperscript{2} Cancer patients may also develop pain that originates from the organs within the abdomen, pelvis or thorax, which is comprehensively called
visceral pain.² And, finally, neuropathic pain results from injury to the central or peripheral nervous system and, specifically in cancer patients, it arises due to cancer treatments such as surgery, radiation, and chemotherapy.²

In 1986, the WHO developed a three-step analgesic ladder that described guidelines for the management of cancer pain.³ The general guidelines describe steps that progressively increase the strength of required analgesic agents.²⁴ It suggests that cancer patients dealing with pain start with nonopioid therapies such as NSAIDs or acetaminophen (with or without adjuvant agents).²⁴ If the pain persists or the intensity increases, physicians are recommended to administer combination products, which include weak opioid and nonopioid analgesics (e.g., acetaminophen or acetylsalicylic acid plus codeine, hydrocodone, or oxycodone).²⁴ And, finally, if pain continues to persist, step 3 of the WHO cancer pain ladder proposes the use of stronger opioids such as morphine.²⁴

1. Nonopioid therapies

As suggested by the WHO guidelines for cancer pain therapy, the first line of therapy is administration of nonopioids.²⁴ Traditional NSAIDs, selective cyclooxygenase type 2 (COX-2) inhibitors, and acetylsalicylic acid reduce inflammatory pain by blocking prostanoid production.³⁶ NSAIDs that nonspecifically inhibit both types of cyclooxygenases (type 1 and 2) can cause renal and gastrointestinal side effects including ulceration and bleeding.⁵⁶ Even though selective COX-2 inhibitors are devoid of this gastric side effect while maintaining analgesic properties, these agents have
been recently shown to increase the risk of stroke and heart attack when administered in high doses.\textsuperscript{5,6} Although NSAIDs have been found to effectively control cancer pain,\textsuperscript{7} these side-effect concerns have resulted in product discontinuation or black box warnings.\textsuperscript{5,6} Acetaminophen, which displays analgesic and antipyretic properties, is also used for mild to moderate pain in cancer patients.\textsuperscript{2} The main concern with the administration of high doses of acetaminophen is an increased risk of hepatotoxicity.\textsuperscript{2}

2. **Opioid therapies**

Based on the cancer pain step ladder developed by the WHO, various opioids are added to the treatment starting in the second step.\textsuperscript{2-4} Whether the agent is a full agonist, partial agonist, or mixed agonist-antagonist, most opioid drugs act at mu opioid receptors, but some are non-selective and, therefore, also bind to kappa and delta opioid receptors.\textsuperscript{2} In addition to continued use of acetaminophen or acetylsalicylic acid, mild opioids such as codeine, hydrocodone, or oxycodone are used in the second step of cancer pain treatment.\textsuperscript{2} If pain persists after step 2, stronger opioids (e.g., morphine, hydromorphone, fentanyl) replace the milder agents.\textsuperscript{2} Although these stronger opioid agents are typically very effective as analgesics, physicians and patients have concerns that opioids will result in physical dependence and tolerance.\textsuperscript{7,8} Additional adverse effects of opioids include respiratory depression, nausea, constipation, and sedation.\textsuperscript{7}
3. Adjuvant therapies

Cancer pain is multifaceted; thus, it is difficult to control. Adjuvant analgesics are drugs that were originally developed for a different indication; many of these agents have no effect when administered alone, but enhance the antinociceptive properties of a known analgesic. Adjuvant analgesics are a promising solution for individual patients due to their particular symptoms of cancer-related pain and/or their sensitivity to certain adverse effects. The main groups of adjuvant therapies for cancer pain are corticosteroids (e.g., dexamethasone), antidepressants (e.g., tricyclic antidepressants), and anticonvulsants (e.g., gabapentin). An additional adjuvant analgesic, clonidine, which is an α₂-AR agonist, is used to relieve severe cancer pain especially in neuropathic pain.

4. Pain pathways and pain control theories

In the mid-17th century, the reflex theory was developed by René Descartes in an attempt to describe pain. The reflex theory stated that pain messages were sent from pain receptors in the skin to pain centers in the brain through a specific pain pathway. The reflex theory was used both for the pain pathway and the treatment of pain for more than 300 years. It was thought that if the reflex theory was correct, then alleviation of pain could result from disconnection of the pain pathway. This theory was not refuted until 1965 with Melzack and Wall’s gate theory. The gate theory suggested that the dorsal horn of the spinal cord acts as a gate, which can open (or
close) to allow (or block) pain messages to travel to the brain and back to the site of pain.\textsuperscript{40}

Two pain pathways describe the chain of nerve fibers along which impulses can travel: (a) afferent or ascending pathways transmit impulses from the periphery to the brain and (b) efferent or descending pathways transmit impulses from the brain to the spinal cord.\textsuperscript{16} In general, serotonergic and adrenergic neurons have been found to play a role in the descending pathway of pain perception in the raphe nuclei and locus coeruleus, respectively.\textsuperscript{41,42} These descending neurons transmit pain signals from the brain into the dorsal horn where they display inhibitory actions that can hinder the perception of pain stimuli.\textsuperscript{16}

B. Adrenoceptors

1. Classification

Norepinephrine (1; NE; noradrenaline) and epinephrine (2; EPI; adrenaline) (Figure 1) are endogenous neurotransmitters that produce various functional effects such as hypotension, sedation, and analgesia via ARs.\textsuperscript{43} In 1948, Alquist proposed two classes of ARs; α-ARs, which produce excitatory effects and β-ARs, which produce inhibitory effects.\textsuperscript{44} About 25 years later, α-ARs were divided into α\textsubscript{1}- and α\textsubscript{2}-AR subpopulations based on in vitro experiments that suggested α\textsubscript{1}-ARs were located post-synaptically, whereas α\textsubscript{2}-ARs were presynaptic receptors.\textsuperscript{45} Although this theory was
later negated, the same nomenclature of α-ARs (α₁- and α₂-ARs) was subsequently proposed due to the relative affinities of various agonists and antagonists.⁴⁶

![Figure 1](image)

**Figure 1.** Structures of adrenergic neurotransmitters: norepinephrine (1) and epinephrine (2).

The α₁- and α₂-ARs were later differentiated into six subpopulations (α₁A⁻, α₁B⁻, α₁D⁻, α₂A⁻, α₂B⁻, and α₂C⁻-ARs) based on radioligand binding studies⁴⁷,⁴⁸ and molecular cloning studies.⁴⁸-⁵¹ Similar studies discovered subpopulations of the β-ARs and eventually Bylund and co-workers⁵⁴ identified a total of nine types of adrenoceptors by molecular cloning and proposed the following nomenclature: α₁⁻, α₂⁻, and β-ARs, that were subdivided into α₁A⁻, α₁B⁻, α₁D⁻, α₂A⁻, α₂B⁻, α₂C⁻, β₁⁻, β₂⁻, and β₃-AR subclasses (Figure 2).

![Figure 2](image)

**Figure 2.** Classification of adrenoceptors.⁵⁴
There is a hole in the current adrenoceptor nomenclature because there is not an $\alpha_{1C}$-AR subtype. This subtype was initially proposed but was later determined to be incorrectly identified.$^{53}$

2. $\alpha_2$-Adrenoceptors

a) Structure and distribution

All three subtypes of $\alpha_2$-ARs are members of the G protein-coupled receptor (GPCR) family, which are integral membrane proteins structurally characterized by 7 $\alpha$-helical transmembrane-spanning domains (TM1-TM7) connected by three intracellular loops (IL1-IL3), three extracellular loops (EL1-EL3), an extracellular amino-terminal domain, and an intracellular carboxyl-terminal domain (Figures 3 and 4)$^{53}$ Interaction of the receptor with an agonist supposedly induces a conformational change in the receptor which allows it to associate with a G protein and this, in turn, initiates a signaling cascade that produces an effect.$^{43,53}$
In the past decade, the structure and function of GPCRs have been studied progressively due to an increase in the availability of crystal structure data of various receptors such as bovine rhodopsin, human β2-AR, turkey β1-AR, and human A2A adenosine receptors. There are two main mechanisms of GPCR activation, that incorporate highly conserved residues amongst most GPCRs. The **ionic lock** is
represented by an interaction between an arginine (R) residue in the conserved TM3 DRY motif and a negatively-charged residue (either D or E) in TM6 of bovine rhodopsin, that seems to hold the intracellular ends of TM3 and TM6 together to, thereby, restrain the receptor in an inactive state.\textsuperscript{55} The ionic lock has been associated with the constitutive activity of the receptor.\textsuperscript{60} Although this locking mechanism has been postulated for many GPCRs, there is evidence that it does not exist in all receptors including turkey β\textsubscript{1}-ARs, human β\textsubscript{2}-ARs, human A\textsubscript{2A} adenosine receptors, and human histamine H\textsubscript{4} receptors.\textsuperscript{60}

The rotameric switch, which is thought to be associated with the global toggle switch, involves the highly conserved CWxP motif in TM6.\textsuperscript{61} Although current crystal structures do not show torsion angle changes of tryptophan (W), spectroscopic studies suggest that the conserved W of the CWxP motif exchanges between rotameric states (g\textsuperscript{+} and trans). This change in W’s rotameric state appears to be associated with a TM6 conformational change during activation.\textsuperscript{62,63} The active conformation of W can interact with the aromatic ring of a highly conserved phenylalanine (F) moiety in TM5. In addition, it has been recently found that site-directed mutations at the conserved W eliminates constitutive activity.\textsuperscript{64} Although there is no crystal structure of inactive or active conformations of the α\textsubscript{2}-ARs, there is a relatively high homology between the sequence of α\textsubscript{2A/2B/2C}-ARs and β\textsubscript{2}-ARs, as well as with other GPCRs, especially within conserved residues and/or motifs.

Although the receptor densities of the three subtypes of α\textsubscript{2}-ARs are dissimilar in humans, all three α\textsubscript{2}-adrenoceptors are generally found throughout peripheral tissues and in many neuronal populations within the central nervous system (CNS).\textsuperscript{65} Gene
expression studies in rat brain show a high density of mRNA encoding $\alpha_{2A}$-ARs in the locus coeruleus, as well as in the brain stem, cerebral cortex, dorsal horn, and hypothalamus. In addition to wide distribution throughout the CNS, $\alpha_{2A}$-AR mRNA has been found both pre- and post-synaptically in rat brain. Though the other two subtypes were found in lower expression levels compared to $\alpha_{2A}$-ARs throughout the brain, mRNA encoding $\alpha_{2C}$-ARs was found mainly in the rat hippocampus, olfactory system, dorsal horn, striatum, and cerebral cortex, while that for the $\alpha_{2B}$-ARs was mainly expressed in the thalamus.

b) Adrenoceptor agonists

1) Pharmacology and clinical relevance

NE (1) and EPI (2), both of which are endogenous adrenoceptor agonists, bind to ARs and are believed to induce a conformational change in the receptor that leads to activation of heterotrimeric GTP-binding proteins (G proteins). The specific intracellular signal is dependent on the type of G protein associated with the receptor. Three of the known signal transduction pathways of $\alpha_{2}$-AR agonists are: (a) activation of $G_i$ proteins, which leads to the inhibition of adenylyl cyclase, thereby inhibiting the production of cyclic adenosine monophosphate, (b) suppression of voltage-activated calcium channels, which decreases extracellular $Ca^{2+}$ flow into target cells, via $G_o$ proteins, and (c) stimulation of $K^+$ channels via $G_i$ proteins.
Studies with genetically modified α_{2}-AR knockout mice have provided insight on subtype specific functions.\textsuperscript{17} For example, knockout mouse studies indicate that α_{2A}-ARs are mainly implicated in adrenoceptor functions such as hypotension, sedation, and analgesia, whereas α_{2B}-ARs seem to play a role in NO-induced analgesia and salt-induced hypertension.\textsuperscript{18,70} Studies from knockout mice suggest that CNS effects, such as locomotion and stress response, are due to the α_{2C}-AR subtype.\textsuperscript{70,71}

2) Structure-affinity relationships (SAFIRs)

The two main classes of α_{2}-AR agonists are phenylethylamines and imidazolines.\textsuperscript{70} The phenylethylamines, such as the endogenous agonists NE (1) and EPI (2; Figure 1), in general, contain an aromatic ring and a two-carbon chain with a β-hydroxy group and a terminal amine. \textit{R}-Enantiomers are the \textit{eutomers} and, therefore, have greater affinity at α_{2}-ARs than agents with the \textit{S}-configuration of the β-OH group.\textsuperscript{53} Affinity at α_{2}-ARs is maximal when the amine is \textit{N}-methyl-substituted, but dramatically decreases as the size of the \textit{N}-substituent increases.\textsuperscript{53} For example, EPI (2) has greater affinity than NE (1), but less than the β-AR-selective ligand isoproterenol (3; Figure 1), where the \textit{N}-substituent is an isopropyl group (Table 1).\textsuperscript{53} A methyl substituent at the α-position (e.g., α-methylnorepinephrine, 4) is tolerated but not the ethyl homolog (e.g., ethylnorepinephrine), which has diminished α-AR binding, thereby producing a β-AR-selective ligand.\textsuperscript{53} The dihydroxy groups found in the endogenous agonists (or other catechol-containing compounds) provide binding activity at all α- and
β-AR subtypes, but if the p-OH group is removed β-AR affinity is abolished while α-AR affinity is only reduced (e.g., phenylephrine; 5; Figure 5).53

\[ \text{Isoproterenol (3)} \] \hspace{1cm} \[ \text{Methylnorepinephrine (4)} \] \hspace{1cm} \[ \text{Phenylephrine (5)} \] \hspace{1cm} \[ \text{TDIQ (6)} \]

**Figure 5.** Structures of representative adrenoceptor ligands from the phenylethylamine class: the β-AR-selective ligand isoproterenol (3), the α-AR-selective ligand methylnorepinephrine (4), the α-AR-selective ligand phenylephrine (5), and the α2-AR-selective ligand TDIQ (6; \( K_i \): \( \alpha_{2A} = 75 \), \( \alpha_{2B} = 97 \), \( \alpha_{2C} = 65 \) nM, which is nonselective amongst the three \( \alpha_{2A} \) adrenoceptors).53

Described structurally as a conformationally-restricted phenylalkylamine, TDIQ (6; 5,6,7,8-tetrahydro-1,3-dioxolo[4,5-g]isoquinoline; Figure 5), synthesized in our laboratory, is an agent that binds rather non-selectively at all three \( \alpha_2 \)-AR subtypes (\( K_i \): \( \alpha_{2A} = 75 \), \( \alpha_{2B} = 97 \), and \( \alpha_{2C} = 65 \) nM), but possesses little affinity for other neurotransmitter receptors.72 In fact, amongst 31 receptors and transporters examined, TDIQ (6) only had modest affinity at two receptors (\( K_i \): dopamine D₃ = 1,440 nM and serotonin 5-HT₇ = 1,750 nM).72

The second class of \( \alpha_2 \)-AR agonists is the imidazolines, that includes the FDA-approved antihypertensive and analgesic agent clonidine (7).73,74 Clonidine (7) behaves as a partial agonist at all three \( \alpha_2 \)-AR subtypes, but also shows some activity at \( \alpha_1 \)-ARs and imidazoline receptors.53,75 Extensive SAFIR studies indicate the following: (a) binding affinity at \( \alpha_2 \)-ARs decreases when the o-position is modified: CI > Br > CF₃ >> F, but is unaffected when modified to a methyl group, (b) clonidine-constrained
analogs indicate that the anti-periplanar orientation of the imidazoline/aromatic ring is the preferred conformation of these ligands, (c) the aniline NH is not required for binding affinity (e.g., oxymetazoline; 8), and (d) the guanidine moiety could be changed by opening the imidazoline ring [e.g., guanabenz (9) and guanfacine (10)] without reducing activity, but changing the binding affinities (Table 2).53,70,76

**Table 1.** Affinity of norepinephrine (1) at $\alpha_{2A}$-, $\alpha_{2B}$-, and $\alpha_{2C}$-ARs; radioligand binding data ($[^3]H$RX821002) are reported as $K_i$ values (nM) at human cloned $\alpha_2$-ARs expressed in Chinese hamster ovary (CHO) cells.76

<table>
<thead>
<tr>
<th>Compound</th>
<th>$\alpha_{2A}$-AR</th>
<th>$\alpha_{2B}$-AR</th>
<th>$\alpha_{2C}$-AR</th>
</tr>
</thead>
<tbody>
<tr>
<td>(R)-Norepinephrine (1)</td>
<td>195</td>
<td>182</td>
<td>98</td>
</tr>
</tbody>
</table>
Table 2. Binding profile of the imidazoline class of α<sub>2</sub>-AR agonists at α<sub>2A</sub>-, α<sub>2B</sub>-, and α<sub>2C</sub>-ARs; radioligand binding ([<sup>3</sup>H]RX821002) are reported as $K_i$ values (nM) at human cloned α<sub>2</sub>-ARs expressed in Chinese hamster ovary (CHO) cells.\textsuperscript{76}

<table>
<thead>
<tr>
<th>Compound</th>
<th>$K_i$ (nM)</th>
<th>α&lt;sub&gt;2A&lt;/sub&gt;-AR</th>
<th>α&lt;sub&gt;2B&lt;/sub&gt;-AR</th>
<th>α&lt;sub&gt;2C&lt;/sub&gt;-AR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clonidine (7)</td>
<td></td>
<td>16</td>
<td>36</td>
<td>59</td>
</tr>
<tr>
<td>Oxymetazoline (8)</td>
<td></td>
<td>3</td>
<td>&gt;1,000</td>
<td>107</td>
</tr>
<tr>
<td>Guanabenz (9)</td>
<td></td>
<td>5</td>
<td>112</td>
<td>200</td>
</tr>
<tr>
<td>Guanfacine (10)</td>
<td></td>
<td>25</td>
<td>309</td>
<td>&gt;1,000</td>
</tr>
</tbody>
</table>
Guanabenz (9) and guanfacine (10) are FDA-approved agents for the treatment of hypertension and attention deficit hyperactivity disorder, respectively.\textsuperscript{77,78} Both of these agents display increased selectivity for $\alpha_2$-ARs over $\alpha_1$-ARs in comparison with clonidine (7), but they still cause adverse effects such as hypotension, bradycardia, and sedation.\textsuperscript{70}

c) Adrenoceptor antagonists

1) Pharmacology and clinical relevance

By definition, $\alpha_2$-AR antagonists block the actions produced by $\alpha_2$-AR agonists, which, in general, include activation of $G_{i/o}$ proteins. Therefore, pharmacologically, $\alpha_2$-AR antagonists have affinity but no efficacy at $\alpha_2$-ARs. Antagonists can either bind at the orthosteric site (i.e., the binding site for the endogenous agonist – norepinephrine) or an allosteric site; these agents will directly or indirectly inhibit agonist binding, respectively.

2) Structure-affinity relationships (SAFIRs)

There is a wide variety of structural diversity amongst $\alpha_2$-AR antagonists, but these agents display little selectivity amongst the three $\alpha_2$-AR subtypes. On one hand, these antagonists can be, structurally, much larger than the typical agonist, while, on the other hand, they can be analogous to the structure of an agonist with only a minor
chemical modification. Their lack of selectivity limits their ability to function as pharmacological tools, which is one of the reasons that the biological function of each subtype is unclear.

The most common non-selective $\alpha_2$-AR antagonist is yohimbine (11; Figure 6), an alkaloid derived from *Pausinystalia yohimbe* bark and *Rauwolfia* root. Yohimbine (11) was historically used as an aphrodisiac in Africa. It is now used for the treatment of erectile dysfunction, but its efficacy has not been adequately confirmed and, therefore, it is not commonly used. The main therapeutic uses of $\alpha_2$-AR antagonists revolve around the treatment of depression and diabetes. Yohimbine (11) has a high affinity for $\alpha_2$-ARs (Figure 6), but also has moderate affinity and antagonistic behavior at $\alpha_1$-ARs ($K_i$: $\alpha_{1A} = 200$, $\alpha_{1B} = 158$, and $\alpha_{1D} = 158$ nM), 5-HT$_{1A}$ ($K_i = 50$ nM), 5-HT$_{1D}$ ($K_i = 25$ nM), and dopamine D$_2$ ($K_i = 398$ nM) receptors.
Figure 6. Structures of α₂-AR antagonists; α₂A/2B/2C-AR binding affinity reported as $K_i$ values (nM).

Due to yohimbine’s (11) non-selective binding profile, other α₂-AR antagonists have been developed as pharmacological tools such as imiloxan (12) and phentolamine (13; Figure 6). Recently, there have been some small improvements on receptor subtype selectivity. For example, ARC-239 (14) displays 50-fold selectivity for α₂B/2C-over α₂A-AR, while BRL44408 (15) has selectivity for α₂A-ARs amongst the three α₂-AR subtypes (Figure 6).
d) Binding mode of $\alpha_2$-adrenoceptor agonists

The Easson-Stedman hypothesis$^{83,84}$ suggests a three-point interaction between adrenoceptors and catecholamines [e.g., NE (1) and EPI (2)]: (a) the protonated aliphatic amine, (b) the catecholic hydroxyl groups, and (c) the $\beta$-hydroxyl group. The introduction of a chiral center at the $\beta$-position of these ligands extended the hypothesis to suggest the following relative potencies: $R(-) > S(+) =$ desoxy, which was later verified by their binding affinities at all $\alpha$-ARs.$^{83,84}$

Molecular modeling studies, in some cases combined with site-directed mutagenesis data, support the Easson-Stedman hypothesis. These studies predicted the following interactions between $\alpha_2$-ARs and catecholamines: (a) an ionic interaction between the highly conserved D3.32 aspartate moiety and the charged nitrogen atom of the catecholamine, (b) a hydrogen bond interaction between two serines (S5.42 and S5.46) and the meta- and para-hydroxyl groups of the catecholamine, respectively, and (c) a possible hydrogen bond interaction between either S2.61 or Y6.55 and the $\beta$-hydroxyl group.$^{70,85,86}$ These amino acid residues are common in all three subtypes of $\alpha_2$-ARs.

The numbering of the amino acid residues is based on Ballesteros-Weinstein nomenclature.$^{87}$ Each transmembrane amino acid is assigned two numbers separated by a period: the first number corresponds to the transmembrane number (TM1-7) and the second number corresponds to the distance from the most highly conserved residue in each transmembrane amongst all GPCRs.$^{87}$ This highly conserved amino acid is arbitrarily given a value of 50 and any amino acid in the same transmembrane segment
that is closer to the carboxy-terminus is given a value >50, while those amino acids that are closer to the amino-terminus are given a value of <50. For example, the amino acid D3.32 is an aspartate residue located in TM3 and is 17 amino acids closer to the amino-terminus in comparison to the most highly conserved amino acid of all GPCRs in TM3 (3.50).

e) Descending control of pain

Behavioral, neurochemical, and electrophysiological studies indicate an adrenoceptor role in antinociception via spinal administration of NE (1) or electrical stimulation of cerebral AR cell nuclei. There is overwhelming evidence of post-synaptic mechanisms involved in the analgesic properties of NE (1) and only preliminary and less-compelling data to suggest a pre-synaptic mechanism. In addition, NE (1) affects the descending pathway associated with the serotonergic pathway from the nucleus raphae magnus to the dorsal horn. The nucleus raphae magnus contains a high concentration of pre- and post-synaptic, inhibitory α2-ARs.

The descending pathway is influenced by NE (1), which is receptor-dependent and affects the nociceptive threshold. As for the α2A-AR subtype, density and distribution in the dorsal horn seem to correlate with its role in antinociception. An α2A-AR role in analgesia is supported by systemic and spinal administration of selective α2A-AR agonists and antagonists as well as by studies using α2A-AR knockout mice.

There are some data that suggest an antinociceptive role for α2B- and α2C-ARs in the descending pathway, but these are unclear; lack of α2-AR subtype-selective agents
magnifies this ambiguous hypothesis. For example, α2B-AR knockout mice failed to exhibit antinociceptive effects to nitrous oxide (N2O), a known anesthetic and analgesic agent.\textsuperscript{89} Unfortunately, this is difficult to explain neurochemically because of the density and distribution of α2B-ARs (e.g., low concentration of α2B-ARs in the spinal cord).\textsuperscript{66} On the other hand, α2C-ARs seem to play a pro-nociceptive role in the dorsal horn via excitatory effects of the descending noradrenergic pathway, but just like the α2B-ARs, the α2C-AR subtype is poorly expressed in the human dorsal horn.\textsuperscript{12}

C. Serotonin receptors

1. Classification

Serotonin (5-hydroxytryptamine or 5-HT; \textsuperscript{16}, Figure 7) is a monoamine neurotransmitter that has been implicated in various disease states such as depression, anxiety, migraine, pain, and schizophrenia.\textsuperscript{90} Serotonin (\textsuperscript{16}) binds to 5-HT receptors, which are all GPCRs except for the ligand-gated ion channel (LGIC) 5-HT\textsubscript{3} receptors.\textsuperscript{90} Theories have been proposed and modified throughout the long history since the discovery of serotonin receptors, which have, in turn, often enhanced 5-HT receptor nomenclature.\textsuperscript{91}
Serotonin (16)

**Figure 7.** Structure of the neurotransmitter serotonin (16).

The criteria for the classification of 5-HT receptors began with functional data only, but over time it became more robust with additional experimental evidence including operational, structural, and transductional verification. For example, 5-HT$_{1C}$ receptors were later renamed 5-HT$_{2C}$ receptors due to their high sequence homology with other 5-HT$_2$ receptors and their common phosphoinositol second messenger system as opposed to the adenylate cyclase second messenger system associated with 5-HT$_1$ receptors. The second messenger systems of the serotonin receptors include coupling to adenylate cyclase (AC) or phospholipase C (PLC); this is summarized in Table 3.
### Table 3. Summary of the second messenger systems involved in 5-HT receptor transduction.\(^{94,95}\)

<table>
<thead>
<tr>
<th>Receptor subpopulation</th>
<th>Transducer</th>
<th>Effector</th>
</tr>
</thead>
<tbody>
<tr>
<td>5-HT(_{1A})</td>
<td>(G_i/G_0)</td>
<td>AC inhibition</td>
</tr>
<tr>
<td>5-HT(_{1B})</td>
<td>(G_i/G_0)</td>
<td>AC inhibition</td>
</tr>
<tr>
<td>5-HT(_{1D})</td>
<td>(G_i/G_0)</td>
<td>AC inhibition</td>
</tr>
<tr>
<td>5-ht(_{1e})</td>
<td>(G_i/G_0)</td>
<td>AC inhibition</td>
</tr>
<tr>
<td>5-HT(_{1F})</td>
<td>(G_i/G_0)</td>
<td>AC inhibition</td>
</tr>
<tr>
<td>5-HT(_{2A})</td>
<td>(G_i/G_0, G_q/G_{11})</td>
<td>AC inhibition, PLC stimulation</td>
</tr>
<tr>
<td>5-HT(_{2B})</td>
<td>(G_q/G_{11})</td>
<td>PLC stimulation</td>
</tr>
<tr>
<td>5-HT(_{2C})</td>
<td>(G_i/G_0, G_q/G_{11})</td>
<td>AC inhibition, PLC stimulation</td>
</tr>
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<tr>
<td>5-HT(_{4})</td>
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<td>AC stimulation</td>
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<td>AC inhibition, PLC stimulation</td>
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<td>5-HT(_{6})</td>
<td>(G_s, G_q/G_{11})</td>
<td>AC stimulation, PLC stimulation</td>
</tr>
<tr>
<td>5-HT(_{7})</td>
<td>(G_s)</td>
<td>AC stimulation</td>
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</tbody>
</table>

The Nomenclature Committee of the International Union of Pharmacology currently classifies 5-HT receptors as: 5-HT\(_{1A}\), 5-HT\(_{1B}\), 5-HT\(_{1D}\), 5-ht\(_{1e}\), 5-HT\(_{1F}\), 5-HT\(_{2A}\), 5-HT\(_{2B}\), 5-HT\(_{2C}\), 5-HT\(_{3A}\), 5-HT\(_{3AB}\), 5-HT\(_{4}\), 5-ht\(_{5a}\), 5-HT\(_{6}\), and 5-HT\(_{7}\).\(^{94,95}\) This receptor classification was based on the following criteria: operational or drug-binding characteristics, transductional or receptor-effector coupling, and structural or nucleotide/amino acid sequence of the gene/receptor.\(^{90,93}\) Lower case receptor nomenclature (e.g., 5-ht\(_{1e}\) and 5-ht\(_{5a}\)) is used until all the receptor population criteria have been met.\(^{93}\)
2. 5-HT₃ receptors

a) Structure and distribution

In contrast to the other G protein-coupled serotonin receptors, 5-HT₃ receptors are LGIC receptors. These receptors are cation-selective and part of the Cys-loop superfamily of LGICs, which include similar proteins such as nicotinic acetylcholine and gamma-aminobutyric acid (GABAₐ/ₐ) receptors. GABAₐ/ₐ receptors are composed of 5 subunits (pentamers) that surround a central core that forms an ion channel (Figure 8). Each subunit is composed of a large extracellular amine terminus, four transmembrane-spanning domains (M₁-M₄) connected by intracellular and extracellular loops, and an extracellular carboxyl terminus (Figure 8a). The M2 transmembrane domain lines the ion channel (Figure 8b).

Five human 5-HT₃ receptor subunits have been cloned and termed 5-HT3A, 5-HT3B, 5-HT3C, 5-HT3D, and 5-HT3E subunits, but current data suggest that a 5-HT3A subunit is required for receptor function. 5-HT3A, but not 5-HT3B, subunits have been shown to assemble into functional homopentamers via expression in Xenopus laevis oocytes. Co-expression of 5-HT3A and 5-HT3B subunits provides evidence for a functional heteromeric receptor and atomic-force microscopy studies indicate that the 5-HT₃AB receptor has two 5-HT3A and three 5-HT3B subunits in the following subunit arrangement: B-B-A-B-A. To date, the role of the 5-HT3C, 5-HT3D, and 5-HT3E subunits in receptor function is unclear.
Although the two known functional 5-HT\textsubscript{3} receptors (5-HT\textsubscript{3}A and 5-HT\textsubscript{3}AB) seem to be very similar; there is a slight difference in ion selectivity. Both receptors have monovalent cation permeability (e.g., Na\textsuperscript{+} and K\textsuperscript{+}) and negligible anion permeability, whereas the homomeric 5-HT\textsubscript{3}A receptors are also permeable to divalent cations such as Ca\textsuperscript{2+}.\textsuperscript{97,102-104} This difference in cation selectivity seems to be due to differences in transmembrane M2 residues that line the channel.\textsuperscript{103}

(a)

(b)

**Figure 8.** Representation of the structure of ligand-gated ion channels: (a) receptor subunit containing four transmembrane spanning helices and (b) a pentameric structure of the receptor with M2 (shaded) lining the ion channel.\textsuperscript{97}
Although 5-HT$_3$ receptors (originally referred to as 5-HT-M receptors due to their sensitivity to morphine) were first found in the peripheral nervous system, their highest densities are in the CNS.\textsuperscript{105,106} Within the CNS, autoradiographical studies indicate highest levels in the brainstem including the area postrema, the dorsal motor nucleus of the vagus nerve, and the nucleus tractus solitarius and lower levels in the forebrain.\textsuperscript{107-109} In addition to their various CNS distribution, 5-HT$_3$ receptors can be found both pre- and post-synaptically.\textsuperscript{105} Presynaptic 5-HT$_3$ receptors seem to modulate neurotransmitter (e.g., dopamine, GABA, and acetylcholine) release following Ca$^{2+}$ influx.\textsuperscript{105}

\textbf{b) 5-HT$_3$ receptor agonists}

There are various types of chemical structures that bind to 5-HT$_3$ receptors and that behave as partial or full agonists. The endogenous neurotransmitter, 5-HT (16), binds in a non-selective manner to human 5-HT$_3$ receptors with modest affinity ($K_i = 1,000$ nM) and, although its 2-methyl analog (i.e., 17, 2-methyl-5-HT) has slightly lower affinity ($K_i = 1,300$ nM) and reduced agonistic activity, it has increased selectivity for 5-HT$_3$ receptors (Figure 9).\textsuperscript{110,111} Due to its greater selectivity, 2-methyl-5-HT (17) was used in early 5-HT$_3$ receptor research, but, unfortunately, more recently it has been found to also bind to 5-HT$_6$ receptors.\textsuperscript{112} Another analog of 5-HT (16), $N,N,N$-trimethyl-5-HT (18; 5-HTQ), was found to have greater selectivity and affinity at 5-HT$_3$ receptors in comparison to 5-HT (16), but systemic administration of the quaternary amine 18
might not readily penetrate the blood-brain barrier (BBB) minimizing its central effect (Figure 9).

(a) 

\[
\begin{align*}
&\text{HO} \quad \text{NH}_2 \\
&5-\text{HT (16)} \\
&K_i: 5-\text{HT}_3 
&1,000 \text{ nM}
\end{align*}
\]

\[
\begin{align*}
&\text{HO} \quad \text{NH}_2 \\
&2-\text{Methyl-5-HT (17)} \\
&K_i: 5-\text{HT}_3 
&1,300 \text{ nM}
\end{align*}
\]

\[
\begin{align*}
&\text{HO} \quad \text{NH}_2 \\
&N,N,N-\text{Trimethyl-5-HT (18)} \\
&K_i: 5-\text{HT}_3 
&75 \text{ nM}
\end{align*}
\]

(b) 

\[
\begin{align*}
&\text{NH}_2 \quad \text{NH}_2 \\
&\text{PBG (19)} \\
&K_i: 5-\text{HT}_3 
&1,000 \text{ nM}
\end{align*}
\]

\[
\begin{align*}
&\text{NH}_2 \quad \text{NH}_2 \\
&m\text{CPBG (20)} \\
&K_i: 5-\text{HT}_3 
&17 \text{ nM}
\end{align*}
\]

\[
\begin{align*}
&\text{NH}_2 \quad \text{NH}_2 \\
&m\text{CPG (MD-354, 21)} \\
&K_i: 5-\text{HT}_3 
&35 \text{ nM}
\end{align*}
\]

**Figure 9.** Structures of 5-HT₃ receptor agonists: (a) serotonin (16) and analogs (17, 18) and (b) arylbiguanides (19, 20) and an arylguanidine (21); 5-HT₃ receptor binding affinity is reported as $K_i$ values (nM).¹¹⁰,¹¹¹,¹¹³

Structurally different than 5-HT (16), phenylbiguanide (19, PBG) has modest 5-HT₃ receptor affinity ($K_i = 1,000$ nM) and behaves as an agonist (Figure 9).¹¹¹ Structural modifications of 19 have led to many agonists with greater affinity. For example, the *meta*-chloro analog (20, mCPBG) has 60-fold increased affinity at human 5-HT₃ receptors ($K_i = 17$ nM; Figure 9).¹¹¹ Aryl substitution of 19 with chloro group(s) at various positions (e.g., 2-chloro-PBG and 3,4,5-trichloro-PBG) showed decreased $K_i$ values to the low nanomolar range in comparison to PBG (19).³²,¹¹⁴ Affinity was
retained when the biguanide moiety of mCPBG (20) was deconstructed to a guanidine as in meta-chlorophenylguanidine (21, mCPG, MD-354; $K_i = 35$ nM; Figure 9). Just like the arylbiguanides, the arylguanidines have improved affinity with the addition of chloro groups to the phenyl ring.

SR57227A (22; 1-(6-chloropyrid-2-yl)-4-piperidylamine; Figure 10) is a selective 5-HT$_3$ receptor agonist ($K_i = 103$ nM), which can penetrate the BBB. This agent (i.e., 22) has been found to behave as an agonist both at central and peripheral 5-HT$_3$ receptors, which makes it a powerful pharmacological tool for detection of CNS effects mediated by 5-HT$_3$ receptors.

![Figure 10](image)

**Figure 10.** Structure of the 5-HT$_3$ receptor agonist SR57227A (22); 5-HT$_3$ receptor binding affinity reported as a $K_i$ value (nM).

Although there are no current high-resolution structural data for the 5-HT$_3$ receptor, homology models have been generated based on the similar acetylcholine binding protein crystal structure. In addition to these 5-HT$_3$ receptor homology models, site-directed mutagenesis studies indicate an agonist and, therefore, a competitive antagonist, extracellular binding site at the interface of two subunits of the 5-HT$_3$ receptor.
c) 5-HT₃ receptor antagonists

Various 5-HT₃ receptor antagonists such as ondansetron (23; trade name: Zofran; Figure 11) and granisetron (trade name: Kytril) are used clinically to treat chemotherapy-induced nausea and vomiting.¹²¹ Also, zacopride (24; Figure 11), a 5-HT₃ receptor antagonist and 5-HT₄ receptor agonist, has been shown to be a useful antiemetic agent for cancer patients.¹²¹ In addition, preliminary results suggest that 5-HT₃ receptor antagonists influence the reward pathway (e.g., they reduce drug-induced self-administration of drugs such as ethanol or amphetamine), regulate food intake, produce anxiolytic effects, and attenuate chronic neuropathic pain.⁹¹,¹²¹

Antagonists at 5-HT₃ receptors were first discovered by modifying the chemical structure of cocaine, which was found to be a weak antagonist at 5-HT-M receptors.⁹⁰,¹²² Modifications led to the first selective 5-HT₃ receptor antagonists, bemesetron (MDL 72222) and tropisetron (25; Figure 11).⁹⁰,¹²³,¹²⁴ In fact, the centrally acting 5-HT₃ receptor antagonist, tropisetron (25; Figure 11), has become a valuable pharmacological tool because its quaternary amine analog, tropisetron methiodide, retains 5-HT₃ receptor antagonist activity but only at peripheral receptors due to its inability to cross the BBB.¹¹³ Numerous similar compounds, which were classified as keto compounds, were synthesized. This class typically contains a carbonyl-containing linker between an aromatic/heteroaromatic ring and a basic amine.⁹¹,¹²⁴ Most of these ligands are selective for 5-HT₃ receptors, but some have affinity at 5-HT₁P and/or 5-HT₄ receptors.⁹¹
Figure 11. Structures of some representative 5-HT$_3$ receptor antagonists (23-25); 5-HT$_3$ receptor binding affinity reported as $K_i$ values (nM).$^{125,126}$

In general, the basic aliphatic amine can tolerate small substituents; specifically, a methyl substituent is optimal as in tropisetron (25).$^{91,124}$ Binding affinity at 5-HT$_3$ receptors seems to be favorable when the aromatic/heteroaromatic ring is a fused 6,5-ring system (e.g., an indole in 23 and 25).$^{91,124}$ Also, the carbonyl group is typically coplanar with the aromatic system.$^{91,124}$ Extensive structure-affinity relationships of 5-HT$_3$ receptor antagonists have provided selective and high-affinity ligands.$^{90,91}$

d) Descending control of pain

Serotonin receptors seem to modulate mechanisms of descending inhibition and descending facilitation in the dorsal horn.$^{16}$ Serotonergic input is involved with primary afferent fibers, projection neurons, and inhibitory interneurons and, therefore, 5-HT (16) is associated with conveying information from tissues and organs into the CNS and transmitting signals from the CNS to the effector cells.$^{16}$
It was first thought that 5-HT (16) reduced nociceptive transmission in the dorsal horn, but there is a plethora of contradicting studies.\textsuperscript{19} Various studies such as electrical brain stimulation, morphine-induced antinociception, and direct administration of 5-HT (16) into the spinal cord suggest that descending serotonergic pathways exert opposing nociceptive processing effects in the dorsal horn: modulation of descending and facilitating inhibitory pathways.\textsuperscript{19,20} This leads to both pronociceptive and antinociceptive actions; there are two possible reasons for these contradictory actions from one neurotransmitter. Varying effects could be due to: (a) the multiple subtypes of 5-HT receptors (i.e., it is the receptor, rather than the neurotransmitter, that is responsible for the excitatory or inhibitory action) and/or (b) the localization of specific 5-HT receptors.

Focusing on the 5-HT$_3$ receptor subtype, most of the current data indicate an excitatory role in neuronal activity. Upon activation of 5-HT$_3$ receptors, phospholipase C activity is enhanced which, in turn, causes a cytosolic calcium influx leading to a cascade of intracellular changes and activity.\textsuperscript{21-24} In conjunction with behavioral studies suggesting a pronociceptive role of 5-HT$_3$ receptors, it has been reported that they potentiate the release of the pronociceptive transmitter substance P in the dorsal horn.\textsuperscript{20,24} In addition to an unclear mechanism, there are some contradictory data suggesting a suppression in substance P release.\textsuperscript{16} Although, to date, it is clear that more research is necessary to fully understand 5-HT$_3$ receptors’ role in the descending control of pain, it is possible that the ambiguous data are due to incomplete characterization of 5-HT$_3$ receptors (e.g., 5-HT$_3$A vs. 5-HT$_3$AB receptors).
Previously reported in vivo studies present contradictory analgesic effects of 5-HT$_3$ receptor agents in nociceptive animal studies (summarized in Table 4). Similar to the pharmacological profile of various 5-HT$_3$ receptor antagonists, 5-HT$_3$ receptor agonists can display anti- or pronociceptive effects. This might be due to the species, the animal model, or the route of drug administration. For example, the analgesic action of PBG (19) seems to be dependent on the nociceptive animal model; PBG (19, i.t.) produces an antinociceptive effect in the rat hot-plate assay, whereas it shows saline-like effects in the rat tail-flick assay.\textsuperscript{25} Likewise, the more potent 5-HT$_3$ receptor agonist mCPBG (20; i.t.) displayed analgesic effects in the rat formalin and paw pressure assay, but no effect was observed in the rat tail-flick assay.\textsuperscript{26,127,128} Different analgesic effects observed in the tail-flick assay are seemingly due to species; 5-HT$_3$ receptor agonists produce saline-like effects in the rat tail-flick assay, but show antinociceptive effects in the mouse model.\textsuperscript{25-28}
Table 4. Summary of the analgesic activity of 5-HT₃ receptor ligands in nociceptive animal models (routes of administrations: i.t., intrathecal; i.p., intraperitoneal; s.c., subcutaneous; i.c.v, intracerebroventricular).

<table>
<thead>
<tr>
<th>Animal Model</th>
<th>Agent</th>
<th>Agonist or antagonist</th>
<th>Species</th>
<th>Admin route</th>
<th>Analgesic activity</th>
<th>Ref</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tail-flick</td>
<td>mCPBG</td>
<td>agonist</td>
<td>rat</td>
<td>i.t.</td>
<td>no</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td>PBG</td>
<td>agonist</td>
<td>rat</td>
<td>i.t.</td>
<td>no</td>
<td>25</td>
</tr>
<tr>
<td></td>
<td>2-Me-5-HT</td>
<td>agonist</td>
<td>rat</td>
<td>i.t.</td>
<td>yes, blocked by tropisetron &amp; zacopride</td>
<td>28</td>
</tr>
<tr>
<td></td>
<td>SR57227A</td>
<td>agonist</td>
<td>mouse</td>
<td>i.p.</td>
<td>yes, blocked by bemesetron &amp; zacopride</td>
<td>27</td>
</tr>
<tr>
<td></td>
<td>tropisetron</td>
<td>antagonist</td>
<td>rat</td>
<td>i.t.</td>
<td>no</td>
<td>26</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>rat</td>
<td>s.c.</td>
<td>no</td>
<td>129</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>mouse</td>
<td>s.c.</td>
<td>no</td>
<td>29</td>
</tr>
<tr>
<td></td>
<td>zacopride</td>
<td>antagonist</td>
<td>rat</td>
<td>i.t.</td>
<td>no</td>
<td>30</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>mouse</td>
<td>i.p.</td>
<td>no</td>
<td>29</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>mouse</td>
<td>s.c.</td>
<td>no</td>
<td>29</td>
</tr>
<tr>
<td></td>
<td>ondansetron</td>
<td>antagonist</td>
<td>mouse</td>
<td>s.c.</td>
<td>no</td>
<td>29</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hot-plate</td>
<td>PBG</td>
<td>agonist</td>
<td>rat</td>
<td>i.t.</td>
<td>yes</td>
<td>25</td>
</tr>
<tr>
<td></td>
<td>2-Me-5-HT</td>
<td>agonist</td>
<td>rat</td>
<td>i.t.</td>
<td>yes</td>
<td>130</td>
</tr>
<tr>
<td></td>
<td>tropisetron</td>
<td>antagonist</td>
<td>rat</td>
<td>s.c.</td>
<td>no</td>
<td>129</td>
</tr>
<tr>
<td></td>
<td>ondansetron</td>
<td>antagonist</td>
<td>rat</td>
<td>i.t.</td>
<td>no</td>
<td>129</td>
</tr>
<tr>
<td>Paw pressure</td>
<td>5-HT</td>
<td>agonist</td>
<td>rat</td>
<td>i.t.</td>
<td>yes, blocked by granisetron &amp; tropisetron</td>
<td>127,128</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2-Me-5-HT</td>
<td>agonist</td>
<td>rat</td>
<td>i.t.</td>
<td>no</td>
<td>128</td>
</tr>
<tr>
<td></td>
<td>mCPBG</td>
<td>agonist</td>
<td>rat</td>
<td>i.t.</td>
<td>yes, blocked by tropisetron &amp; granisetron</td>
<td>127,128,131</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>rat</td>
<td>i.p.</td>
<td>yes</td>
<td>132</td>
</tr>
<tr>
<td></td>
<td>tropisetron</td>
<td>antagonist</td>
<td>rat</td>
<td>i.t.</td>
<td>no</td>
<td>127,128,131</td>
</tr>
<tr>
<td></td>
<td>ondansetron</td>
<td>antagonist</td>
<td>rat</td>
<td>i.p.</td>
<td>yes</td>
<td>132</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>rat</td>
<td>i.t.</td>
<td>no</td>
<td>131</td>
</tr>
<tr>
<td></td>
<td>granisetron</td>
<td>antagonist</td>
<td>rat</td>
<td>i.t.</td>
<td>no</td>
<td>128,131</td>
</tr>
<tr>
<td>Formalin</td>
<td>mCPBG</td>
<td>agonist</td>
<td>rat</td>
<td>i.t.</td>
<td>yes</td>
<td>133</td>
</tr>
<tr>
<td></td>
<td>tropisetron</td>
<td>antagonist</td>
<td>rat</td>
<td>s.c.</td>
<td>yes</td>
<td>129</td>
</tr>
<tr>
<td></td>
<td>ondansetron</td>
<td>antagonist</td>
<td>rat</td>
<td>i.t.</td>
<td>no</td>
<td>129,133</td>
</tr>
</tbody>
</table>
In general, administration of 5-HT₃ receptor antagonists produces saline-like effects in antinociceptive animal models, but there are some exceptions. For example, s.c. administration of tropisetron (25) showed analgesic actions in the rat formalin test.¹²⁹ Also, ondansetron (23) showed antinociceptive effects upon i.p. administration in a mechanical nociceptive animal model (rat paw pressure assay).¹³² Thus far, these contradictory observations are inadequately understood.

D. MD-354 (21)

1. Binding affinity

The 5-HT₃ receptor ligand MD-354 (21) was identified in our laboratory in 1996.³² Radioligand binding assays at 30 different aminergic receptors indicated that MD-354 (21) possesses a rather selective binding profile. The receptors for which MD-354 (21) displays high affinity include the ligand-gated ion channel serotonin 5-HT₃ receptors (Table 5).³² Subsequently, MD-354 (21) was found to bind to the low- and high-affinity states of the G protein-coupled α₂-adrenoceptors as determined using the antagonist radioligand ([ethyl-³H]RS-79948-197) and the agonist radioligand ([¹²⁵I]clonidine), respectively (Table 5).³¹,³³ It is thought that radiolabeled agonists label the high-affinity state of the receptor, whereas radiolabeled antagonists label both high- and low-affinity states of the receptor.¹³⁴
Table 5. MD-354 (21) binding profile.\textsuperscript{31-33}

<table>
<thead>
<tr>
<th>Receptor population</th>
<th>$K_i$ (nM)</th>
</tr>
</thead>
<tbody>
<tr>
<td>5-HT$_{3}$</td>
<td>35$^a$</td>
</tr>
<tr>
<td>$\alpha_{2A}$-ARs</td>
<td>$110^b$, $825^c$</td>
</tr>
<tr>
<td>$\alpha_{2B}$-ARs</td>
<td>$220^b$, $25^c$</td>
</tr>
<tr>
<td>$\alpha_{2C}$-ARs</td>
<td>$4,700^b$, $140^c$</td>
</tr>
</tbody>
</table>

Radioligands used in binding assays: $^a$[\textsuperscript{3}H]GR65630 (a 5-HT$_{3}$ receptor antagonist), $^b$[ethyl-\textsuperscript{3}H]RS-79948-197 (an adrenoceptor antagonist) and $^c$[\textsuperscript{125}I]clonidine (an adrenoceptor agonist).

Additionally, MD-354 (21) has very modest affinity for 5-HT$_{1A}$ ($K_i = 4,100$ nM), 5-HT$_{5A}$ ($K_i = 4,160$ nM), and 5-HT$_{7}$ ($K_i = 680$ nM) receptors as well as $\alpha_{1A}$- ($K_i = 300$ nM) and $\alpha_{1B}$- ($K_i = 1,900$ nM) ARs, but no affinity (i.e., $K_i > 10,000$ nM) at the remaining serotonin receptor and adrenoceptor subtypes, dopamine D$_{1}$-D$_{5}$ receptors, mu and kappa opioid receptors, m$_1$-m$_5$ muscarinic receptors, rat H$_1$ histamine receptors, phencyclidine receptors, NMDA receptors, benzodiazepine receptors, and the aminergic transporters (serotonin, dopamine, and norepinephrine).\textsuperscript{33}

2. In vitro functional activity

Functional [\textsuperscript{35}S]GTP\textgamma{}S assays were performed with two types of buffer conditions: low and high concentrations of NaCl. Experimental conditions with low salt concentrations have been found optimal for the detection of partial agonist activity.\textsuperscript{134} As concluded by these assays, MD-354 (21) behaves as a weak partial agonist at $\alpha_{2A}$-
ARs in low and high salt conditions (EC$_{50}$ = 0.83 and 1.4 μM, respectively).$^{31}$ At high concentrations (>100 μM), MD-354 (21) nonselectively antagonized the agonist effect of norepinephrine (1; NE) at all three receptor subtypes.$^{31}$

3. In vivo functional activity

a) MD-354 (21) administered alone

Numerous in vivo pharmacological studies involving 5-HT$_3$ receptor agents, such as MD-354 (21), have been reported. Initial MD-354 (21) functional studies included the rat von Bezold-Jarisch assay, which examined reflex bradycardia, and the rabbit bladder assay.$^{32}$ Although MD-354 (21) behaved as an agonist in both of these assays, it showed reduced potency in comparison to the biguanide analog mCPBG (20).$^{32}$ Low doses (e.g., 10 mg/kg, i.p.) of MD-354 (21) also were shown to reduce cisplatin-induced emesis, whereas higher doses (40 mg/kg, i.p.) elicited an emetic effect in the shrew.$^{113}$

MD-354 (21) has been used as a training drug in drug discrimination studies. The discriminative stimulus effects of MD-354 (21) in rats (training dose = 2.0 mg/kg) seems to be a central 5-HT$_3$ receptor-mediated effect because it is usually only centrally-acting agents that serve as discriminative stimuli, and because the stimulus effects of MD-354 (21) were antagonized by the 5-HT$_3$ receptor antagonists zacopride (24) and tropisetron (25), but not by tropisetron methiodide.$^{113,135}$ This quaternary analog (tropisetron methiodide) retains the antagonist properties of tropisetron (25) but is not able to readily cross the BBB.$^{113,135}$
Since 5-HT₃ receptors and α₂-ARs both have been implicated in pain, MD-354 (21) was examined in mouse tail-flick and hot-plate assays. In the mouse tail-flick assay, MD-354 (21; doses: 1.0-30 mg/kg, s.c.) showed saline-like effects using various pretreatment times.³³ Similarly, MD-354 (21) failed to produce a statistically significant antinociceptive effect (in comparison to saline control) at various doses (3.0-30 mg/kg, s.c.) and pretreatment times in the mouse hot-plate assay.³³ And, finally, the spontaneous activity of MD-354 (21) was examined and MD-354 (21) was found to produce saline-like effects in mice indicating it is neither a CNS stimulant nor a CNS depressant.³¹,³³,³³⁵ Another possible conclusion is that MD-354 (21) is unable to penetrate the BBB to produce its effect(s).

b) MD-354 (21) administered in combination with clonidine (7)

Although MD-354 (21; 1.0-30 mg/kg) produced no analgesic effects when administered alone, it potentiated the antinociceptive effect of an “inactive” dose of clonidine (7) in the mouse tail-flick assay [MD-354 (21) doses 1.0-30 mg/kg], but didn’t significantly potentiate or attenuate the effect of clonidine (7) in the mouse hot-plate assay [MD-354 (21) doses 10-30 mg/kg].³³ Moreover, in the mouse tail-flick assay the analgesic effect of the MD-354/clonidine (21/7) combination appeared to be biphasic (Figure 12).³⁴ The antinociceptive properties of clonidine (7) were potentiated by MD-354 (21) as depicted by both peaks [Peaks A and B at 1.0 and 10 mg/kg doses of MD-354 (21), respectively] of the biphasic dose-response curve (Figure 12). The potentiating effect of MD-354 (21) in combination with clonidine (7) illustrated by Peaks
A and B could be due to different mechanisms such as: (a) 5-HT₃ receptor agonism or antagonism, (b) action at one or more α₂-ARs (α₂A⁻, α₂B⁻, and/or α₂C-ARs), or (c) action at neither 5-HT₃ receptors nor α₂-ARs. Alternatively, the biphasic actions of the combination might be due to a combination of these mechanisms. For example, the low-dose potentiating effect (i.e., effect illustrated by Peak A) might be caused by activation of 5-HT₃ receptors, whereas the potentiating effect produced by a higher dose of MD-354 (21; 10 mg/kg; Peak B) might be due to action at one or more of the α₂-ARs (α₂A⁻, α₂B⁻, and/or α₂C-ARs).

Figure 12. Potentiation of the antinociceptive effect (± S.E.M.) of an “inactive” antinociceptive dose of clonidine (7; 0.25 mg/kg) by MD-354 (21; 0.3-30 mg/kg) in the mouse tail-flick assay. Asterisks denote a significant difference compared to the control group [clonidine (7) 0.25 mg/kg]; *P < 0.05, **P < 0.01, one-way ANOVA followed by Dunnett’s post hoc test.
The role of 5-HT$_3$ receptors in the potentiation of clonidine (7)-induced antinociception by MD-354 (21) depicted by Peaks A and B (Figure 12). Since MD-354 (21) is a 5-HT$_3$ receptor partial agonist, it is possible that its potentiating effect on clonidine (7) antinociception is due to either 5-HT$_3$ receptor agonism or antagonism.

The role of 5-HT$_3$ receptors in the potentiation of clonidine (7) antinociception by a low- and high dose of MD-354 (21) illustrated by Peaks A and B (Figure 12), respectively, was examined by co-administration of 5-HT$_3$ receptor antagonists with: (a) clonidine (7) alone and (b) the combination of MD-354 (21; 1.0 or 6.0 mg/kg) and clonidine (7; 0.25 mg/kg).

When administered alone via the s.c. route, three 5-HT$_3$ receptor antagonists [ondansetron (23; 0.02-2.0 mg/kg), zacopride (24; 0.0001-2.0 mg/kg), and tropisetron (25; 0.0001-1.0 mg/kg)] showed saline-like effects in the mouse tail-flick assay, but significantly potentiated the antinociceptive effect of an “inactive” dose of clonidine (7; 0.25 mg/kg). This potentiating effect suggests that blockade of 5-HT$_3$ receptors can augment the analgesic properties of clonidine (7). Therefore, it is possible that 5-HT$_3$ receptor antagonism could be implicated in the mechanism underlying Peak A and/or B.

Tropisetron (25) attenuated the antinociceptive effect observed in Peak A [i.e., the effect produced by the co-administration of MD-354 (21; 1.0 mg/kg) and clonidine (7; 0.25 mg/kg)]. This observation supports a 5-HT$_3$ receptor agonist mechanism for MD-354 (21) in Peak A.

The role of 5-HT$_3$ receptors in Peak B was examined by mechanistic studies involving 5-HT$_3$ receptor antagonists. For example, the 5-HT$_3$ receptor antagonist zacopride (24) failed to potentiate the antinociceptive effect of MD-354 (21) in the
mouse tail-flick assay; that is, co-administration of zacopride (24) and MD-354 (21) produced saline-like effects.\(^{29}\) Also, the potentiation of clonidine (7; 0.25 mg/kg) by a high dose of MD-354 (21; 6.0 mg/kg) was neither potentiated nor attenuated by zacopride (24).\(^{29,33}\) This suggests that the effect represented by Peak B is not due to 5-HT\(_3\) receptor agonist action.

Additional mechanistic studies were conducted. In the mouse tail-flick assay, the more selective 5-HT\(_3\) receptor antagonist tropisetron (25; 0.0001-1.0 mg/kg) in comparison to zacopride (24; acts at both 5-HT\(_3\) and 5-HT\(_4\) receptors) was also found to neither potentiate nor attenuate the antinociceptive effect of the MD-354/clonidine (21/7) combination when a high dose of MD-354 (21; 6 mg/kg) was administered.\(^{29}\) These combined results indicated a 5-HT\(_3\) receptor agonist mechanism associated with Peak A only.

It seems rather unlikely that the potentiating effect associated with Peak B is due to the 5-HT\(_3\) receptor agonist character of MD-354 (21) because two structurally diverse 5-HT\(_3\) receptor antagonists [zacopride (24) and tropisetron (25)] failed to block the antinociceptive effect of the MD-354/clonidine (21/7) combination (Peak B).\(^{29}\) Alternatively, it is possible that the potentiation of the antinociceptive effect of clonidine (7) by a high dose (6.0 mg/kg) of MD-354 (21) might be due to 5-HT\(_3\) receptor antagonism. This hypothesis was supported by the potentiating action of 5-HT\(_3\) receptor antagonists [e.g., zacopride (24), tropisetron (25), and ondansetron (23)] co-administered with clonidine (7) in the mouse tail-flick assay.\(^{29}\)

*The role of \(\alpha_2\)-ARs in the potentiation of clonidine (7)-induced antinociception by MD-354 (21) depicted by Peaks A and B (Figure 12).* Various \(\alpha_2\)-AR antagonists with
different binding selectivity were examined for their antinociceptive properties both alone and in combination with low and high doses (1.0 or 6.0 mg/kg, respectively) of MD-354 (21) and 0.25 mg/kg of clonidine (7). One difficulty in mechanistic studies involving the three subtypes of α2-ARs is the lack of highly selective ligands. Only preferentially adrenoceptor-selective antagonists are known; for example, imiloxan (12) and BRL44408 (15) have modest selectivity at α2B- and α2A-ARs, respectively (see Figure 6 for α2-AR binding affinities).82,136,137

The non-selective α2-AR antagonist yohimbine (11; 0.1-1.0 mg/kg) and the moderately selective α2B- and α2A-AR antagonists imiloxan (12; 0.1-1.0 mg/kg) and BRL44408 (15; 0.3-10 mg/kg), respectively, showed no antinociceptive effects when administered alone.31,33 Yohimbine (11) and BRL44408 (15) failed to affect the analgesic properties of an “inactive” dose of clonidine (7; 0.25 mg/kg); that is, the co-administration of yohimbine (11) and clonidine (7), as well as BRL44408 (15) and clonidine (7), produced saline-like effects in the tail-flick assay.31 Conversely, imiloxan (12; 0.1-3.0 mg/kg) significantly potentiated the antinociceptive effect of a saline-like dose of clonidine (7; 0.25 mg/kg).31 Although this does not rule out a possible α2A- or α2C-AR mechanism, the results obtained with imiloxan (12) suggest that α2B-AR antagonists can potentiate the action of clonidine (7). In other words, if MD-354 (21) behaves as an α2B-AR antagonist, then it might be potentiating the antinociceptive effect of clonidine (7; Peak A and/or B) via an α2B-AR antagonist mechanism of action.

In the mouse tail-flick assay, the non-selective α2-AR antagonist yohimbine (11) blocked the analgesic effect of Peak A [1.0 mg/kg dose of MD-354 (21) + 0.25 mg/kg dose of clonidine (7)] in a dose-dependent manner (AD50 = 0.33 mg/kg), which suggests
that at least one of the $\alpha_2$-AR subtypes is involved in the action.$^{31}$ Next, preferentially selective agents were studied; imiloxan (12) and BRL44408 (15) both attenuated the antinociceptive effect of the co-administration of MD-354 (21; 1.0 mg/kg) and clonidine (7; 0.25 mg/kg) in a dose-dependent fashion ($AD_{50} = 0.17$ and 2.1 mg/kg, respectively).$^{31}$ Because, by definition, antagonists block the effect of agonists, these observations suggest an $\alpha_2$-AR agonist mechanism in the actions associated with Peak A.

Thus far, imiloxan (12) is the only $\alpha_2$-AR agent that has been examined in mechanistic studies of Peak B. And, although imiloxan (12) was found to attenuate the effect of a lower dose of MD-354 (21; 1 mg/kg) in combination with clonidine (7; 0.25 mg/kg) illustrated by Peak A, it failed to alter the enhanced antinociception produced by administration of a 6 mg/kg dose of MD-354 (21) in combination with clonidine (7; 0.25 mg/kg) depicted by Peak B.$^{31,33}$ These results suggest that the antinociceptive effect produced by co-administration of a lower dose (1.0 mg/kg) of MD-354 (21) and 0.25 mg/kg dose of clonidine (7) is mediated by an $\alpha_{2B}$-AR agonist mechanism (i.e., an $\alpha_{2B}$-AR agonist mechanism seems to play a role in the effect associated with Peak A, but not Peak B; Figure 12).

Initial binding data for imiloxan (12) at cloned human $\alpha_2$-ARs ($K_i$: $\alpha_{2A} = 1584$, $\alpha_{2B} = 126$, $\alpha_{2C} = 1000$ nM)$^{136}$ suggested $\alpha_{2B}$-AR preferential selectivity, but later studies showed reduced binding selectivity ($K_i$: $\alpha_{2A} = 3,109$, $\alpha_{2B} = 562$, and $\alpha_{2C} = 1,025$ nM), as well as functional activity ([35]S] GTPγS assay; $K_i$: $\alpha_{2A} = 316$, $\alpha_{2B} = 68$, $\alpha_{2C} = 151$ nM).$^{31,137}$ The latter studies showed very modest selectivity with an $\alpha_{2B}$-AR activity of only five- and two-times greater than that for $\alpha_{2A}$-AR and $\alpha_{2C}$-AR activity, respectively.
Due to possible low $\alpha_2$-AR subtype selectivity, it is difficult to rule out an $\alpha_{2B}$-AR involvement in the action for Peak B.

To date, MD-354 (21) seems to potentiate the antinociceptive effect of clonidine (7), at least in part, via a 5-HT$_3$ receptor and an $\alpha_2$-AR mechanism.$^{31,29}$ It is unclear which AR subtypes are specifically involved; $\alpha_{2A}$- and $\alpha_{2B}$-ARs seem to play a role due to attenuation of the effect of the MD-354/clonidine (21/7) combination by the reasonably selective antagonists BRL44408 (15) and imiloxan (12), respectively, but an $\alpha_{2C}$-AR mechanism cannot be ruled out because imiloxan (12) has moderate affinity and activity at $\alpha_{2C}$-ARs.$^{31}$
III. Specific aims and rationale

A. To further investigate the mechanism of action of the analgesia-potentiating effect of clonidine (7) by MD-354 (21)

Epidural administration of clonidine (7), an α2-AR agonist, is one of the few non-opioid FDA-approved treatments of cancer pain. Although clonidine (7) is a potent analgesic agent, it produces undesirable side effects, including sedation and hypotension, limiting its use to clinical settings. One of the main goals of our laboratory is to develop adjuvant agents to minimize the side effects of clonidine (7) while retaining its analgesic action. It has been previously shown by our laboratory that MD-354 (21) is a 5-HT3 receptor/α2-AR ligand. Although MD-354 (21) is inactive when administered alone, it selectively potentiates the antinociceptive actions of an “inactive” analgesic dose of clonidine (7). This seems to be a selective effect because MD-354 (21) did not potentiate the sedative effect of clonidine (7). In other words, MD-354 (21) potentiates the desired analgesic, but not the adverse sedative effects of clonidine (7). This could have substantial clinical ramifications for the treatment of cancer-related pain.

More specifically, when MD-354 (21; 0.3-30 mg/kg) and a sub-threshold (i.e., an “inactive”) analgesic dose of clonidine (7; 0.25 mg/kg) were co-administered, a biphasic analgesic effect was observed (Figure 12). Analgesic potentiation of clonidine (7)-
induced antinociception produced by MD-354 (21), illustrated by Peaks A and B (Figure 12), might be due to different mechanisms (e.g., 5-HT3 receptor agonism/antagonism, α2A-, α2B-, or α2C-AR action, or a combination of these mechanisms). Mechanistic studies have determined that this analgesic potentiation is due, at least in part, to a 5-HT3 receptor and an α2-adrenoceptor mechanism.29,33

Since mechanistic studies of Peak A indicate potentiation by 5-HT3 receptor agonism, then the more established 5-HT3 receptor agonist meta-chlorophenylbiguanide (20; mCPBG) should produce a similar effect in combination with clonidine (7). In previous in vivo studies, i.t. administration of mCPBG (20) produced antinociceptive effects in some animal models (e.g., rat paw pressure and formalin test; Table 4).127-133 However, in the rat tail-flick assay, mCPBG (20; i.t.) failed to produce a significant effect.26 But, mCPBG (20) has not been examined in this assay via s.c. administration. Similarly, i.t. administered PBG [19; a much lower-affinity 5-HT3 receptor agonist, the des-chloro analog of mCPBG (20)], produced saline-like effects in the tail-flick assay but, in contrast, showed antinociceptive effects in the hot-plate assay when administered by an i.t. route.25 To the best of our knowledge, examination of the antinociceptive effect of mCPBG (20) in the hot-plate assay has not been reported.

In this study, we will determine the antinociceptive actions of mCPBG (20) when administered alone in mice via s.c. administration. Since, mCPBG (20) has not been previously examined in the mouse tail-flick assay via a s.c. route of administration, a time-course study will be undertaken to determine optimal pre-injection times. Then, combination studies [co-administration of mCPBG (20) and clonidine (7)] will be evaluated to determine if mCPBG (20) behaves in a manner similar to MD-354 (21) in
the tail-flick assay [i.e., to determine if it potentiates the antinociceptive actions of clonidine (7)]. If an ED$_{50}$ dose (a dose that produces 50% MPE or 50% maximal possible effect) of clonidine (7) is administered in combination with $m$CPBG (20), it will be possible to detect either attenuation or potentiation of the effect. If potentiation by $m$CPBG (20) is observed, 5-HT$_3$ antagonists [e.g., ondansetron (23) and tropisetron (25)] will be examined to assess $m$CPBG’s (20) mechanism of action. If a 5-HT$_3$ receptor antagonist blocks the antinociceptive effect of the $m$CPBG/clonidine (20/7) combination, this will provide evidence for a 5-HT$_3$ receptor agonist-mediated mechanism of action.

Literature data concerning $m$CPBG (20) and related compounds acting as central agents is unclear and limited. Contradictory data describing the ability of $m$CPBG (20) to cross the BBB is presented in Table 6. There seems to be a species-related difference; $m$CPBG (20) appears to cross the BBB in rat but, perhaps, not in mice.$^{115,138,139}$ Also, there is a discrepancy in the log P value depending on the experimental method employed. A log P value for $m$CPBG of -0.38 has been reported using the shake-flask method, whereas our laboratory has shown $m$CPBG (20) to be more lipophilic (log P = 1.70) using an HPLC (high performance liquid chromatography) technique.$^{118,140}$ In general, drugs with log P values ranging from 1.5 to 2.5 can penetrate the BBB.$^{141}$ Therefore, the log P value obtained from the shake-flask method indicates negligible BBB penetration, whereas data from the HPLC method suggests that $m$CPBG (20) should cross the BBB. However, it should be noted that the study with $m$CPBG (20) and MD-354 (21) in the shake-flask method employed their water soluble salts (hydrochloride and nitrate salts, respectively).
Table 6. Literature summary of the ability of \textit{mCPBG (20)} to cross the BBB.

<table>
<thead>
<tr>
<th>\textit{mCPBG (20)} does cross the BBB</th>
<th>\textit{mCPBG (20)} does not cross the BBB</th>
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<tbody>
<tr>
<td>\begin{itemize}</td>
<td>\begin{itemize}</td>
</tr>
<tr>
<td>\item \textit{mCPBG (20)} displaced $[^3]$HGR67330 in rat entorhinal cortex.\textsuperscript{139}</td>
<td>\item \textit{mCPBG (20)} did not displace $[^3]$H granisetron in mouse cortical membranes.\textsuperscript{115}</td>
</tr>
<tr>
<td>\item $[^3]$H\textit{mCPBG} labeled 5-HT\textsubscript{3} receptor recognition sites in rat brain.\textsuperscript{138}</td>
<td>\item Shake-flask method: \textit{mCPBG (20)} log P = -0.38\textsuperscript{140}</td>
</tr>
<tr>
<td>\item Relative retention times using HPLC: \textit{mCPBG (20)} log P = 1.70\textsuperscript{118}</td>
<td>\item \textit{mCPBG (20)} showed hypothermic effects [blocked by ondansetron (23)] by i.c.v., but not i.p., routes in mice.\textsuperscript{142}</td>
</tr>
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<td>\end{itemize}</td>
<td>\end{itemize}</td>
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</tbody>
</table>

There is evidence that \textit{mCPBG (20)} does not penetrate the BBB (Table 6). This might also be a species related effect. Therefore, in addition to receptor mechanism studies, central versus peripheral activity will be evaluated. If \textit{mCPBG (20)} is acting via a centrally-mediated 5-HT\textsubscript{3} receptor agonist mechanism, it should be possible to antagonize the effect with the centrally-acting 5-HT\textsubscript{3} receptor antagonist tropisetron (25). The quaternary amine analog of tropisetron (25), tropisetron methiodide, behaves as a 5-HT\textsubscript{3} receptor antagonist that does not readily penetrate the BBB. Therefore, tropisetron methiodide can be utilized as a control because it should only produce a peripheral antagonist effect.

If a 5-HT\textsubscript{3} receptor mechanism is supported in the above studies, the role of this mechanism in clonidine’s (7) potentiation by MD-354 (21) will be further evaluated by examining a centrally-acting 5-HT\textsubscript{3} receptor agonist. Unlike \textit{mCPBG (20)}, there is compelling evidence that SR57227A (22; 1-(6-chloropyrid-2-yl)-4-piperidinylamine; Figure 10) behaves as an agonist at central 5-HT\textsubscript{3} receptors.\textsuperscript{115} SR57227A (22)
displays affinity at 5-HT$_3$ receptors ($K_i = 103$ nM) but lacks an $\alpha_2$-AR component.\textsuperscript{115} In fact, i.p. administration of SR57227A (22; 1.0-20 mg/kg) has been previously shown to produce antinociceptive effects in the mouse tail-flick assay.\textsuperscript{27} Due to these functional properties, the effect of SR57227A (22; s.c.) will be studied when administered alone and in combination with clonidine (7) in mouse thermal antinociceptive assays. A s.c. route of administration will be used because our previous studies employed s.c. injections and SR57227A (22) can penetrate the BBB and, therefore, should produce peripheral and/or central effects via the s.c. route. Just as in the case of mCPBG (20), a time course study is critical in determining optimal pre-injection times. If MD-354 (21) potentiates the antinociceptive effect of clonidine (7) via a central 5-HT$_3$ receptor agonist mechanism, the centrally-acting 5-HT$_3$ receptor agonist SR57227A (22) should also potentiate the effect of an “inactive” dose of clonidine (7). In fact, it is expected that an additive antinociceptive effect will be displayed due to the analgesic actions of SR57227A (22) and clonidine (7) when administered alone.\textsuperscript{27,33} Analgesic potentiation of clonidine (7) by SR57227A (22) will give additional support for a central 5-HT$_3$ receptor agonist mechanism for Peak A (Figure 12).

Since mechanistic studies of the analgesia-potentiating effect of clonidine (7) by MD-354 (21) have also suggested a role for $\alpha_2$-ARs (e.g., an $\alpha_2$-AR agonist mechanism in Peak A), TDIQ (6; 5,6,7,8-tetrahydro-1,3-dioxolo[4,5-g]isoquinoline; Figure 5) will be examined in mouse antinociceptive assays. TDIQ (6), an agent developed in our laboratory, binds to all three $\alpha_2$-AR subtypes ($K_i$: $\alpha_{2A} = 75$, $\alpha_{2B} = 97$, and $\alpha_{2C} = 65$ nM) but possesses no affinity for 5-HT$_3$ receptors.\textsuperscript{72} Since TDIQ (6) and clonidine (7) have similar binding profiles (i.e., they bind nonselectively to $\alpha_2$-ARs), it is expected that TDIQ
will display antinociceptive effects in the tail-flick assay. The goal of this study includes the examination of the analgesic effect of TDIQ (6) alone and in combination with clonidine (7), as well as mechanistic studies involving selected $\alpha_2$-AR antagonists. That is, if TDIQ (6) augments the antinociceptive effect of clonidine (7), then selective $\alpha_2$-AR antagonists [e.g., imiloxan (12), ARC-239 (14), and BRL44408 (15)] will be co-administered with the TDIQ/clonidine (6/7) combination to help explain the mechanism of action. In addition to mechanistic studies, if TDIQ (6) is found to potentiate the antinociceptive actions of clonidine (7), an isobolographic analysis will be conducted to determine the nature of the potentiation because, due to its similar binding profile, TDIQ (6) might simply be another clonidine (7)-like agent. In this case, the effect should be additive. More specifically, an isobolographic analysis will assess if the biological effect produced by a combination of TDIQ (6) and clonidine (7) is greater than, equal to, or smaller than, the sum of the individual effects of the component drugs.

Furthermore, if antinociception is observed with the above agents [mCPBG (20), SR57227A (22), and TDIQ (6)] in the tail-flick assay, then analgesic actions will be analyzed in a second nociceptive mouse model, the hot-plate assay. Both of these assays model acute thermal pain, but hot-plate latencies are thought to reflect supraspinal responses, whereas tail-flick latencies generally reflect spinal responses. The reflexes produced in the tail-flick assay may not always be entirely due to spinal responses; they may be affected by supraspinal structures, too. In addition, it is possible that there is a learned response related to both of these animal models (i.e., reiteration of the test can lead to false antinociceptive observations). Therefore, it is important to subject the animals to the assay conditions sparingly. Drugs examined in
the hot-plate assay will include mCPBG (20), SR57227A (22), and TDIQ (6) alone and in combination with clonidine (7). These combined results should provide information related to possible novel mechanisms for pain therapy.

And, lastly, a mouse locomotor activity assay is often conducted to evaluate the sedative/locomotor properties of antinociceptive agents. If it is found that an agent (or combination of agents) produces a hypolocomotor (or depressant) or a hyperlocomotor (or stimulant) action, it is difficult to interpret antinociceptive assay results. Moreover, data are easier to interpret when it is known that the antinociceptive effect is not associated with sedation or general behavioral depression (or stimulation), as these adverse effects could alter the behavioral interpretation of the mouse assay in a way that would emulate analgesic actions. For example, the hot-plate assay measures the time it takes a mouse to jump from a heated surface (or another behavioral response). If an agent produces decreased motor activity (i.e., depressed locomotor action), then increased jump latency could be erroneously interpreted as an antinociceptive effect. In addition, clonidine (7) produces sedative effects, so it is important to determine if potentiation of clonidine’s (7) antinociceptive actions by mCPBG (20) is a selective effect. That is, does a potential adjuvant analgesic [e.g., mCPBG (20), SR57227A (22) or TDIQ (6)] selectively potentiate the antinociceptive effects of clonidine (7) or does it non-selectively potentiate the antinociceptive and sedative effects of clonidine (7)? For these reasons, it will be valuable to examine the locomotor properties of agents that produce an analgesia-potentiating effect in combination with clonidine (7).
B. Exploration of conformationally-constrained rotamers of MD-354 (21)

Another objective of this study is to further investigate the role of 5-HT₃ receptors in analgesia by developing agents that retain 5-HT₃ receptor character with reduced α₂-AR properties. As already mentioned, the conformational requirements for the interaction of imidazolines [e.g., clonidine (7)] with α₂-ARs calls for a nearly perpendicular plane between the aromatic rings and the imidazoline-containing moiety.⁷⁰ Therefore, if MD-354 (21) mimics the binding mode of clonidine (7), conformational constraint, as with 26 (Figure 13), should result in retention of 5-HT₃ receptor affinity but in a reduction of α₂-AR affinity.

Because MD-354 (21) possesses a rotatable bond (bond between C¹ and the aniline N atom), it exists as an indefinite number of rotamers. Thus, introduction of conformational constraint might enlighten the manner in which MD-354 (21) interacts with 5-HT₃ receptors. When MD-354 (21) is constrained into a quinazoline ring [e.g., 2-amino-7-chloro-3,4-dihydroquinazoline (26) and 2-amino-5-chloro-3,4-dihydroquinazoline (27)], two extreme rotamers are represented as illustrated in Figure 13.

And, indeed, it was determined in initial competitive binding assays that 26, not 27, has comparable binding affinity to MD-354 (21); 27 has decreased binding affinity at 5-HT₃ receptors relative to 26 (Table 7).¹⁴⁰,¹⁴⁵ Due to these initial results, 26 seems to be the conformationally-constrained analog that best mimics MD-354 (21) and, therefore, will be used as the parent compound in subsequent structure-affinity relationship studies.
Figure 13. Structures of rotamers of MD-354 (21) and related conformationally-constrained analogs 26 and 27 (quinazoline numbering indicated in red).

Table 7. Receptor affinity ($K_i$, nM) for MD-354 (21) and conformationally-constrained MD-354 (21) analogs 26 and 27.

<table>
<thead>
<tr>
<th></th>
<th>5-HT$_3$</th>
<th>$\alpha_{2A}$-AR</th>
<th>$\alpha_{2B}$-AR</th>
<th>$\alpha_{2C}$-AR</th>
</tr>
</thead>
<tbody>
<tr>
<td>MD-354 (21)</td>
<td>35$^a$</td>
<td>825$^d$</td>
<td>25$^d$</td>
<td>140$^d$</td>
</tr>
<tr>
<td>MKD-65 (26)</td>
<td>34$^b$</td>
<td>1384$^c$</td>
<td>555$^c$</td>
<td>1328$^c$</td>
</tr>
<tr>
<td>SY-70 (27)</td>
<td>1021$^c$</td>
<td>1305$^c$</td>
<td>984$^c$</td>
<td>2270$^c$</td>
</tr>
</tbody>
</table>

$^a$Ref. 32, $^b$Ref. 140, $^c$Ref. 145, and $^d$Ref. 33.

Role of the ring nitrogen atoms. In order to determine the role of quinazoline ring nitrogen atoms in the binding at 5-HT$_3$ receptors, des-nitrogen analogs of 26 will be prepared and evaluated (Figure 14). In other words, nitrogen atoms of 26 will be
systematically replaced one by one with an sp² hybridized carbon atom [e.g., 2-amino-7-chloroquinoline (28), 3-amino-6-chloroisooquinoline (29), and 2-amino-7-chloronaphthalene (30); Figure 14]. For example, compound 28 does not contain the 3-position nitrogen atom of 26, and 29 lacks the 1-position N atom found in 26. Compound 30 lacks both of these N atoms. Compounds 31-33 will evaluate the role of saturation/unsaturation on the binding of 28-30 at 5-HT₃ receptors.

![Figure 14. Structures of MD-354 (21)-related analogs 28-30 and their reduced forms (31-33).](image)

Structure-affinity relationship studies of arylguanidines, such as MD-354 (21), have been previously conducted. It was found that if one of the terminal amine nitrogen atoms of MD-354 (21) was replaced by a carbonyl group or H atom (e.g., 34 and 35), 5-HT₃ receptor affinity was abolished (i.e., $K_i > 10,000$ nM; Figure 15). But, 34 is no longer basic. Furthermore, it might not be the lack of the N atom that accounts for the decreased affinity of 35; rather it might be a lack of electrons associated with the amine. Hence, it would be difficult to predict the affinity of 28 a priori. Nevertheless, based on these studies, if 26 has the same binding mode as MD-354 (21), as 5-HT₃ receptor binding affinity seems to indicate, then 28 might have little to no affinity at 5-HT₃ receptors. When the aniline nitrogen atom of MD-354 (21) was replaced with an sp³ C atom in the arylguanidine SAFIR studies, 5-HT₃ receptor affinity was reduced by...
approximately 35-fold (36; Figure 15).\textsuperscript{32} Compound 37 also lacked affinity. But, here too, the electronic character of the chain has been altered. Compounds 28-30 will be prepared and evaluated to address this issue.

\begin{align*}
\text{Figure 15.} & \quad \text{MD-354 (21) structure-affinity relationship results; 5-HT}_3 \text{ receptor binding affinity reported as } K_i \text{ values (nM).}^{32}
\end{align*}

In addition to MD-354 (21) analogs 28-30, the reduced form of each, will be synthesized to give 2-amino-7-chloro-1,2,3,4-tetrahydroquinoline (31), 3-amino-6-chloro-1,2,3,4-tetrahydroisoquinoline (32), and 2-amino-7-chlorotetralin (33), respectively (Figure 14). This will, in effect, modulate the basicities of the amine functions in question. Although it is unknown if these novel agents will retain affinity for 5-HT\textsubscript{3} receptors, it is difficult to predict the trend. If these nitrogen atoms are directly implicated in interactions with the receptor (e.g., ionic or H-bond interactions between the ligand and the receptor), then the increased basic property of compounds 31-33 will be expected to increase 5-HT\textsubscript{3} receptor affinity in comparison to compounds 28-30. For example, compound 30 and 33 contain an aniline versus an aliphatic sp\textsuperscript{3} hybridized amine moiety, which have approximate pK\textsubscript{a} values of 4.6 and 10.6, respectively.\textsuperscript{148} Therefore, compound 33 has increased basic character that may improve the strength of the interactions with 5-HT\textsubscript{3} receptors in comparison with 30. That is, if the strength of
the interactions between the ligand and receptor is enhanced, receptor binding affinity will increase (or produce a lower $K_i$ value). In the case of the modification of 32 to 29, as well as 31 to 28, the s character of the ring nitrogen atom (sp$^3$ to sp$^2$ hybridization) is increased, which localizes the nitrogen lone electron pair closer to the nitrogen nucleus and, therefore, reduces its ability to donate an electron pair (or, in other words, reduces its Lewis basicity). This principle is supported by $pK_a$ values for piperidine (11.3) and pyridine (5.2).\textsuperscript{146}

*Role of the chloro substituent.* It is proposed to prepare the dichloro- and un-substituted analogs, 2-amino-5,7-dichloro-3,4-dihydroquinazoline (38) and 2-amino-3,4-dihydroquinazoline (39), respectively (Figure 16).

![Figure 16](image)

**Figure 16.** Structures of conformationally-constrained MD-354 (21) analogs 38 and 39.

In addition to SAFIR studies involving modification to the guanidine moiety of MD-354 (21)-related compounds, extensive aryl substitution was also evaluated. For example, the des-chloro analog of MD-354 (21) had reduced 5-HT$_3$ receptor binding affinity (phenylguanidine: $K_i = 2,340$ nM) by approximately 70-fold.\textsuperscript{32} Also, although m-chlorophenylguanidine [MD-354 (21): $K_i = 35$ nM)] possessed the highest binding affinity of all the monochlorinated aryl guanidines (e.g., o-chlorophenylguanidine and p-chlorophenylguanidine: $K_i = 190$ and 320 nM, respectively), the 3,4-dichloro ($K_i = 3.1$ nM).
nM) analog of MD-354 (21) displayed an even higher 5-HT₃ receptor binding affinity. Therefore, if it is assumed that the MD-354 (21) conformationally-constrained analogs bind in a similar manner to MD-354 (21), it might be expected that 38 and 39 will possess increased and decreased 5-HT₃ receptor binding affinity, respectively, in comparison to the parent compound, 26.

C. MD-354 (21) binding mode at α₂-adrenoceptors

MD-354 (21), an agent that binds with varied affinity at all three α₂-ARs, has been found to potentiate the antinociceptive effects of clonidine (7) due, at least in part, to an α₂-AR mechanism. In fact, competitive binding studies indicated that MD-354 (21) binds at the low-affinity states of α₂A/2B/2C-ARs (Kᵢ = 110, 220, and 4,700 nM, respectively) and at the high-affinity states of α₂A/2B/2C-ARs (Kᵢ = 825, 25, and 140 nM, respectively). Furthermore, functional assays show that MD-354 (21) is a weak partial agonist at α₂A-ARs, but an antagonist at α₂B/2C-ARs.

A goal of the current studies is to explain the binding affinity and functional activity of MD-354 (21) via examination of its binding mode to graphic receptor models of low- and high-affinity states for α₂A⁻, α₂B⁻, and α₂C-ARs. Since there are no current high-resolution structures available for α₂-ARs, a model of each subtype of the α₂-ARs will be generated using the inactive β₂-AR crystal structure as a template (pdb = 2RH1; Sybyl 8.1). These three models of α₂A/2B/2C-ARs mimic the low-affinity state because an inverse agonist is bound to the β₂-AR in the crystal structure (i.e., an inverse agonist binds preferentially to the inactive conformation of the receptor).
There are also no high-resolution structures of the active state of α₂-ARs or the similar β₂-ARs. Therefore, the active or high-affinity state of the α₂-ARs will be modeled by modifying the low-affinity state models. The main modifications include: (a) rotation of TM6, (b) tilting the TM5 extracellular portion into the binding pocket, and (c) “turning on” the toggle switch by modifying the χ₁ rotameric state of C6.47, W6.48, and F6.52. These modifications will be made and will be assumed to simulate an active state because they have been observed in other active-state structures of GPCRs.⁶¹-⁶³ To validate these α₂-AR models, the endogenous ligands NE (1) and EPI (2) will be docked (Gold 4.0) and their resulting docked poses will be compared to other homology models reported in the literature as well as considering available site-directed mutagenesis data.

Since MD-354 (21) contains rotatable bonds (Figure 13), before docking MD-354 (21) a systematic search will be conducted to identify its low-energy rotamers (Sybyl 8.1). These low-energy rotamers will be docked (Gold 4.0) to all six models (i.e., the low- and high-affinity states of α₂A⁻, α₂B⁻, and α₂C-AR models) to determine binding modes. Results from this study will provide homology models of all three subtypes of α₂-ARs in both low- and high-affinity states based on a relatively new β₂-AR crystal structure.⁵⁷ Also, more specifically, it will present potential binding modes of MD-354 (21) at all three receptors, which, in turn, might explain its variable binding and functional activities at α₂A⁻, α₂B⁻, and α₂C-ARs.
Summary of the studies involved in the specific aims:

A. Investigation of the mechanism of action of the analgesia-potentiation effect of clonidine (7) by MD-354 (21):

- Examine clonidine (7) alone in the tail-flick and hot-plate assays.
- Examine mCPBG (20) alone in the tail-flick and hot-plate assays.
- **Combination #1**: examine mCPBG (20) + clonidine (7) in the tail-flick and hot-plate assays.
- Examine the mouse brain-penetrant 5-HT₃ receptor agonist SR57227A (22) alone in the tail-flick and hot-plate assays.
- **Combination #2**: examine SR57227A (22) + clonidine (7) in the tail-flick and hot-plate assays.
- Examine a non-selective adrenoceptor agent lacking 5-HT₃ receptor properties, TDIQ (6), alone in the tail-flick and hot-plate assays.
- **Combination #3**: examine TDIQ (6) + clonidine (7) in the tail-flick and hot-plate assays.
- If any of the above treatments produce antinociceptive effects in either assay, sedative effects will be analyzed in the locomotor activity assay.
- If analgesic potentiation is observed in any of the combinations (#1-3), mechanistic studies will be conducted in the same nociceptive assay.
  - For combinations #1 and 2: examine 5-HT₃ receptor antagonists [ondansetron (23), tropisetron (25), or tropisetron methiodide] + combination.
  - For combinations #1-3: examine α₂-AR antagonists [yohimbine (11), BRL44408 (15), imiloxan (12), or ARC-239 (14)] + combination.
B. Exploration of conformationally-constrained rotamers of MD-354 (21):

- To determine the role of the nitrogen atoms of 26, des-amino analogs (28-30) and the corresponding reduced forms (31-33) will be synthesized.
- To determine the role of the chloro substituent of conformationally-constrained analogs of MD-354 (21), 38 and 39 will be synthesized.

C. Study the MD-354 (21) binding mode at α2-ARs:

- Construct α2A-, α2B-, and α2C-AR homology models of the inactive state based on the inactive β2-AR crystal structure template.
- Modify the α2A-AR inactive model to generate the α2A-AR active model; α2B- and α2C-AR active models will be generated using the α2A-AR active model as a template.
- Dock endogenous ligands [NE (1) and EPI (2)] in the 6 models.
- Conduct a low-energy conformational search of MD-354 (21).
- Dock low-energy conformers of MD-354 (21) in the 6 models.
IV. Results and discussion

A. Pharmacological studies: Nociceptive and locomotor activity animal models and binding assays

Pharmacological assays conducted in this project assessed the potential attenuation or potentiation of the antinociceptive effect of the α₂-AR agonist clonidine (7) by prospective adjuvant agents. First, the effects of clonidine (7) were evaluated when administered alone in all assays utilized in the succeeding combination studies (mouse tail-flick, hot-plate, and locomotor assays; control: saline). Pre-injection times employed for clonidine (7) were those previously determined in our laboratory and, therefore, were not necessary to re-establish.\(^{33,147,148}\) On the other hand, when evaluating agents in behavioral assays such as tail-flick and hot-plate assays, it is best to keep the environment constant, which includes the animal “handler”. Therefore, it was necessary to repeat these assays with administration of clonidine (7) using the predetermined pre-injection times to establish a new dose-response curve for the present studies. The data from these clonidine (7) dose-response curves were used to calculate ED\(_{50}\) values and were utilized in statistical analysis of subsequent combination studies.

In the mouse tail-flick and hot-plate assays, clonidine (7) produced antinociceptive effects in a dose-dependent manner (Figures 17 and 18, respectively). A low dose of clonidine (7; 0.25 mg/kg) produced saline-like effects, but as the dose
was increased (up to 2.0 mg/kg), the observed antinociceptive effect increased (tail-flick: % MPE = 62-82; ED$_{50}$ = 0.4 ± 0.07 mg/kg and hot-plate: % MPE = 27-73; ED$_{50}$ = 0.9 ± 0.06 mg/kg) in both assays (Figures 17 and 18, respectively). These ED$_{50}$ values are very similar to previously reported values [clonidine (7) ED$_{50}$ = 0.5 and 0.8 mg/kg for tail-flick and hot-plate assays, respectively].

![Graph showing antinociceptive effect of clonidine in the mouse tail-flick assay](image)

**Figure 17.** Antinociceptive effect (± S.E.M.) of clonidine (7; 0.25-2.0 mg/kg, s.c.) in the mouse tail-flick assay (n = 8-24 mice/treatment). Asterisks denote a significant difference compared to the control group (saline); **P < 0.01, ***P < 0.001, one-way ANOVA (F$_{4,59}$ = 9.399) followed by Dunnett's post hoc test.
Figure 18. Antinociceptive effect (± S.E.M.) of clonidine (7; 0.25-2.0 mg/kg, s.c.) in the mouse hot-plate assay (n = 9-10 mice/treatment). Asterisks denote a significant difference compared to the control group (saline); **P < 0.01, ***P < 0.001, one-way ANOVA (F_{4,42} = 11.94) followed by Dunnett's post hoc test.

Since clonidine (7) has been previously reported to produce sedative effects, its central depressant properties (e.g., the locomotor actions: movement episodes, movement time, movement distance, and vertical entries) were evaluated in mouse locomotor activity assays (Figure 19). Subcutaneous administration of a 0.25 mg/kg dose of clonidine (7) [i.e., a dose of clonidine (7) shown to be statistically inactive in the tail-flick and hot-plate assays] was analyzed in the locomotor activity assay because this dose will be used in subsequent combination studies.
Figure 19. Effect (± S.E.M.) of s.c. administered clonidine (7; pre-injection time: 5 min, 0.25 mg/kg) on (a) total movement episodes, (b) total movement time, (c) total movement distance, and (d) vertical entries with a 15-min recording time in the mouse locomotor activity assay (n = 8-10 mice/treatment). Asterisks denote a significant difference compared to the control group (saline); **P < 0.01, ***P < 0.001, Student’s t-test.

Results from the locomotor activity assay indicated a general hypolocomotor action of clonidine (7). That is, s.c. administration of clonidine (7; 0.25 mg/kg) produced a significant reduction in locomotor actions in all four parameters compared to saline vehicle (Figure 19); total movement episodes (60.2 ± 7.1, P < 0.001), total movement times (352.9 ± 60.5 s, P < 0.001), total movement distance (1,414.7 ± 280.9 cm, P <
0.01), and vertical entries (15.5 ± 5.2, *P* < 0.001). This is a clonidine (7) dose that produced saline-like effects in both mouse antinociceptive assays (tail-flick and hot-plate: Figures 17 and 18, respectively). Since there was a 5-min pre-injection time for clonidine (7), sedative properties were measured for 15 min, which corresponds to the pre-injection time in the antinociceptive assays (20 min).

1. Ondansetron (23)

In previous MD-354/clone (21/7) combination studies, the analgesic potentiation (depicted by Peak A; Figure 12) was blocked by a 5-HT₃ receptor antagonist [tropisetron (25)]. Due to differences in actions of various 5-HT₃ receptor antagonists, a second agent was studied.¹¹⁵ Previously, ondansetron (23; 0.02-2.0 mg/kg, s.c.) showed no effect in the mouse tail-flick assay (% MPE = 1-4).²⁹ Ondansetron (23; 0.01-1.0 mg/kg) failed to affect the antinociceptive effects of the Peak A MD-354/clonidine (21; 1.0 mg/kg + 7; 0.25 mg/kg) combination (Figure 20). Ondansetron (23; 0.01-1.0 mg/kg) was also found to neither attenuate nor potentiate the analgesic actions of the Peak B combination [6.0 mg/kg dose of MD-354 (21) + 0.25 mg/kg dose of clonidine (7); Figure 21].
Figure 20. Effect (± S.E.M.) of ondansetron (23; 0.01-1.0 mg/kg, s.c.) on the antinociceptive action of the MD-354 (21; 1.0 mg/kg, s.c.)/clonidine (7; 0.25 mg/kg, s.c.) combination in the mouse tail-flick assay (n = 8-23 mice/treatment). No significant difference (P > 0.05) compared to the control group [MD-354/clonidine (21/7) combination] was detected; one-way ANOVA (F_{3,43} = 0.1831) followed by Dunnett’s post hoc test.
Figure 21. Effect (± S.E.M.) of ondansetron (23; 0.01-1.0 mg/kg, s.c.) on the antinociceptive action of the MD-354 (21; 6.0 mg/kg, s.c.)/clonidine (7; 0.25 mg/kg, s.c.) combination in the mouse tail-flick assay (n = 8-19 mice/treatment). No significant difference (P > 0.05) compared to the control group [MD-354/clonidine (21/7) combination] was detected; one-way ANOVA (F3,39 = 1.381) followed by Dunnett’s post hoc test.

The results presented in Figure 20 differ from the mechanistic studies using tropisetron (25), which indicated a 5-HT3 receptor agonist mechanism for the potentiating activity of a low dose of MD-354 (21; 1.0 mg/kg) in combination with an “inactive” dose of clonidine (7; 0.25 mg/kg) depicted by Peak A.34 However, ondansetron’s (23) failure to attenuate the effect (Figure 21) of the high-dose combination [depicted by Peak B; MD-354 (21; 6.0 mg/kg) + clonidine (7; 0.25 mg/kg)] is similar to the mechanistic studies with zacopride (24) and tropisetron (25).29,33
2. *meta*-Chlorophenylbiguanide (20; mCPBG)

a) Tail-flick assay

In the present study, the more established 5-HT₃ receptor agonist mCPBG (20) was evaluated alone and in combination with clonidine (7) to examine its possible potentiation of clonidine (7)-induced analgesia. After comparing antinociceptive effects produced by mCPBG (20) with a 20- and 45-min pre-injection time, it was determined that 45 min was optimal (Figure 22). Nevertheless, as illustrated by the dose-response curves, mCPBG (20; 0.3-10 mg/kg, s.c.) failed to produce significant antinociception (% MPE < 36) when administered alone (Figure 22).

Figure 22. Antinociceptive effect (± S.E.M.) of mCPBG [20; 0.3-10 mg/kg, s.c., 20-min (orange squares) or 45-min (green triangles) pre-injection times] in the mouse tail-flick assay (n = 7-9 mice/treatment). No significant difference (P > 0.05) compared to the control group (saline) was detected; one-way ANOVA (F₅,₄₁ = 1.079 and F₅,₄₄ = 0.6228, respectively) followed by Dunnett’s post hoc test. Saline data not shown.
*m*CPBG (20; 0.3-10 mg/kg, s.c.), although inactive when administered alone, potentiated an "inactive" dose of clonidine (7; 0.25mg/kg, s.c.) dose-dependently in the mouse tail-flick assay (ED₅₀ = 1.6 ± 0.14 mg/kg; Figure 23a). In fact, the potentiating effect observed by the *m*CPBG/clonidine (20/7) combination persisted for at least 120 min (Figure 23b).

Since *m*CPBG (20) was found to potentiate the antinociceptive effect of an "inactive" dose of clonidine (7; Figure 23), the effect of 5-HT₃ receptor and α₂-AR antagonists on the effect of *m*CPBG (20)/clonidine (7) was examined. Ondansetron (23), which has been used clinically to treat chemotherapy-induced nausea and vomiting, is a 5-HT₃ receptor antagonist. When ondansetron (23; 0.00001-2.0 mg/kg) was co-administered with the *m*CPBG/clonidine (20/7) combination, neither attenuation nor potentiation was observed in comparison to the effect produced by *m*CPBG (20; 6.0 mg/kg) and clonidine (7; 0.25 mg/kg) in the tail-flick assay (Figure 24).
Effect of mCPBG in Combination with Clonidine (0.25 mg/kg) in the Mouse Tail-Flick Assay

** ***

NOTE: SIGNIFICANCE BASED ON DUNNETT'S

**Figure 23.** (a) Antinociceptive effect (± S.E.M.) of mCPBG (20; 0.3-10 mg/kg, s.c., 45-min pre-injection time) in combination with clonidine (7; 0.25 mg/kg, s.c.) in the mouse tail-flick assay (n = 8-24 mice/treatment). Asterisks denote a significant difference compared to the control group (0.25 mg/kg dose of clonidine; 7); **P < 0.01, ***P < 0.001, one-way ANOVA (F5,88 = 5.002) followed by Dunnett’s post hoc test. (b) Antinociceptive effect (± S.E.M.) of mCPBG (20; 10 mg/kg) in combination with clonidine (7; 0.25 mg/kg) at variable mCPBG (20) pre-injection times (20-120 min) in the mouse tail-flick assay (n = 8-17 mice/treatment).
Figure 24. Effect (± S.E.M.) of ondansetron (23; 0.00001-2.0 mg/kg, s.c.) on the antinociceptive action of the mCPBG (20; 6.0 mg/kg, s.c.)/clonidine (7; 0.25 mg/kg, s.c.) combination in the mouse tail-flick assay (n = 8-16 mice/treatment). No significant difference (P > 0.05) compared to the control group [mCPBG/clonidine (20/7) combination] was detected; one-way ANOVA (F_{7,66} = 0.3224) followed by Dunnett’s post hoc test.

The second 5-HT_{3} receptor antagonist examined was tropisetron (25) because previously reported studies have shown opposing effects among 5-HT_{3} receptor antagonists [e.g., ondansetron (23) and tropisetron (25)].^{115} Although tropisetron (25; 0.0000001-1.0 mg/kg, s.c.) showed no effect when administered alone (% MPE < 10; data not shown), tropisetron (25; 0.00001-0.1 mg/kg) attenuated the antinociceptive effect of the mCPBG/clonidine (20/7) combination as illustrated by a U-shaped dose-response curve (Figure 25).^{29,150} The results indicate that a 0.0001 mg/kg dose of
tropisetron (25) significantly blocked the potentiating effect of clonidine (7) by mCPBG (20; Figure 25).

**Figure 25.** Effect (± S.E.M.) of tropisetron (25; 0.00001-0.1 mg/kg, s.c.) on the antinociceptive action of the mCPBG (20; 6.0 mg/kg, s.c.)/clonidine (7; 0.25 mg/kg, s.c.) combination in the mouse tail-flick assay (n = 8-16 mice/treatment). Asterisks denote a significant difference compared to the control group [mCPBG/clonidine (20/7) combination]; *P < 0.05, one-way ANOVA (F5,50 = 2.866) followed by Dunnett’s post hoc test.

Since tropisetron (25) studies indicated involvement of a 5-HT3 receptor mechanism, the quaternized analog of tropisetron (tropisetron methiodide) was examined in combination studies. Tropisetron methiodide behaves as a 5-HT3 receptor antagonist, but does not readily cross the BBB.116 As a result, the analyses of tropisetron (25) and tropisetron methiodide not only examine the receptor mechanism, but also can support or refute a centrally-mediated effect. In other words, tropisetron
methiodide acts as a control because it will only produce peripheral effects (if any). Tropisetron methiodide (0.00001-0.1 mg/kg) did not alter the antinociception produced by the combination in the mouse tail-flick assay (Figure 26).

![Graph](image)

**Figure 26.** Effect (± S.E.M.) of tropisetron methiodide (0.00001-0.1 mg/kg, s.c.) on the antinociceptive action of the mCPBG (20; 6.0 mg/kg, s.c.)/clonidine (7; 0.25 mg/kg, s.c.) combination in the mouse tail-flick assay (n = 8-17 mice/treatment). No significant difference (P > 0.05) compared to the control group [mCPBG/clonidine (20/7) combination] was detected; one-way ANOVA (F₃,₄₅ = 0.9382) followed by Dunnett’s post hoc test.

And finally, to determine if there is an α₂-AR component associated with the potentiation of clonidine (7) by mCPBG (20; Figure 23), the non-selective α₂-AR antagonist yohimbine (11) was examined. When administered alone, yohimbine (11; 0.1-1.0 mg/kg, s.c.) produced saline-like effects in the mouse tail-flick assay (% MPE < 1).³¹,¹⁵⁰
**Figure 27.** Effect (± S.E.M.) of α2-AR antagonist yohimbine (11; 0.01-6.0 mg/kg, s.c.) on the antinociceptive action of the mCPBG (20; 6.0 mg/kg, s.c.) and clonidine (7; 0.25 mg/kg, s.c.) combination in the mouse tail-flick assay (n = 8-16 mice/treatment). Asterisks denote a significant difference compared to the control group [mCPBG/clonidine (20/7) combination]; *P < 0.05, **P < 0.01, ***P < 0.001, one-way ANOVA (F₆,₆₂ = 6.525) followed by Dunnett’s post hoc test.

Yohimbine (11; 0.01-6.0 mg/kg), however, attenuated the potentiating effect of the mCPBG/clonidine (20/7) combination in a dose-dependent manner in the mouse tail-flick assay (AD₅₀ = 0.04 mg/kg, 95% CL = 0.006-0.2 mg/kg; Figure 27).

**b) Hot-plate assay**

Before any combination studies were conducted, the antinociceptive effect of the agents when administered alone was examined in the mouse hot-plate assay. In prior hot-plate studies, clonidine (7) displayed reduced analgesic potency (ED₅₀ = 0.9 mg/kg; Figure 18) in comparison to the tail-flick assay (ED₅₀ = 0.4 mg/kg; Figure 17). And
similar to the tail-flick results (Figure 22), \( m\text{CPBG} \, (20; \, 0.3-10 \, \text{mg/kg}) \) failed to produce any significant analgesic effects in the hot-plate assay (% MPE = 3-14; Figure 28).

![Graph](image-url)

**Figure 28.** Antinociceptive effect (± S.E.M.) of \( m\text{CPBG} \, (20; \, 0.3-10 \, \text{mg/kg}, \text{s.c.}) \) in the mouse hot-plate assay \((n = 8 \, \text{mice/treatment})\). No significant difference \((P > 0.05)\) compared to the control group (saline) was detected; one-way ANOVA \((F_{5,42} = 1.212)\) followed by Dunnett’s post hoc test.

In the present investigation, clonidine \((7; \, 1.0 \, \text{mg/kg dose, which approximately equals the calculated ED}_{50} \, \text{dose, and which produced about 50\% MPE})\) was co-administered with \( m\text{CPBG} \, (20; \, 0.3-10 \, \text{mg/kg, s.c.}) \). And while 0.3-1.0 \, \text{mg/kg doses of} \, m\text{CPBG} \, (20) \, \text{only slightly attenuated} \, \% \, \text{MPE} = 27-32; \, P > 0.05) \, \text{the antinociceptive effect of clonidine} \, (7), \, \text{significant attenuation} \, \% \, \text{MPE} = 13.5 \, \pm \, 4.9; \, P < 0.01) \, \text{was observed when 3.0 mg/kg of} \, m\text{CPBG} \, (20) \, \text{was co-administered (Figure 29).}
Figure 29. Antinociceptive effect (± S.E.M.) of mCPBG (20; 0.3-10 mg/kg, s.c.) in combination with clonidine (7; 1.0 mg/kg, s.c.) in the mouse hot-plate assay (n = 8-10 mice/treatment). Asterisks denote a significant difference compared to the control group (1.0 mg/kg dose of clonidine; 7); **P < 0.01, one-way ANOVA (F_{4,45} = 2.844) followed by Dunnett’s post hoc test.

The attenuating effect of clonidine (7)-induced antinociception by mCPBG (20; 0.3-3.0 mg/kg) seemed to be dose-dependent (AD_{50} = 0.8 mg/kg, 95% CL = 0.25-2.6 mg/kg). However, a higher dose of mCPBG [(20): 10 mg/kg] only slightly antagonized (P > 0.05) the effect [i.e., the effect produced by clonidine (7; 1.0 mg/kg) alone was not significantly different than that of the co-administration of mCPBG (20; 10 mg/kg) and clonidine (7; 1.0 mg/kg); Figure 29]. It is important to note, there was a rather large standard error in this combination (% MPE = 31.4 ± 9.7; Figure 29).
c) Locomotor activity assay

Analgesic actions were observed when mCPBG (20) was co-administered with clonidine (7; 0.25 mg/kg dose) in the mouse tail-flick assay (Figure 23a). It was necessary to determine if this antinociceptive potentiation was a selective potentiation. In other words, does mCPBG (20) only potentiate the analgesic actions of clonidine (7) and not its sedative properties? Also, because clonidine (7) has already been reported to display hypolocomotor effects, the dose used in the tail-flick assay [0.25 mg/kg clonidine (7)] should be evaluated in the same species (male ICR mice) and should be used as a control for the combination treatment group.29 A low dose of clonidine (7; 0.25 mg/kg), which showed no analgesic effects in the tail-flick and hot-plate assays, produced hypolocomotor actions (Figure 19).
Figure 30. Effect (± S.E.M.) of the co-administration of mCPBG (20; 6.0 mg/kg, s.c., pre-injection time: 30 min) and clonidine (7; 0.25 mg/kg, s.c., pre-injection time: 5 min) on (a) total movement episodes, (b) total movement time, (c) total movement distance, and (d) vertical entries with a 15-min recording time in the mouse locomotor activity assay (n = 10 mice/treatment). No significant difference (P > 0.05) compared to the control group [clonidine (7) 0.25 mg/kg] was detected; Student's t-test.

The doses selected for the locomotor activity combination studies [6.0 mg/kg mCPBG (20) + 0.25 mg/kg clonidine (7)] were those that produced a statistically
significant increase in antinociceptive effects (% MPE = 68.0 ± 9.3; \( P < 0.01 \)) in the tail-flick assay (Figure 23a). As illustrated in Figure 30, \( m \)CPBG (20; 6.0 mg/kg) did not alter the locomotor effects of clonidine (7; 0.25 mg/kg) in any of the four parameters measured (\( P > 0.05 \)).

d) Summary

The antinociceptive effects of the more established and selective 5-HT\(_3\) receptor agonist \( m \)CPBG (20) administered alone and combination with an “inactive” dose of clonidine (7) was examined in the mouse tail-flick assay because a structurally similar agent, MD-354 (21), has been shown to potentiate the analgesic actions of clonidine (7) in a biphasic manner (Figure 12).\(^{34}\) Previous mechanistic studies suggested that the first potentiation peak (Peak A in Figure 12), which is produced by a low dose of MD-354 (21; 1.0 mg/kg) and clonidine (7; 0.25 mg/kg) is, at least in part, due to a 5-HT\(_3\) receptor agonist mechanism and involvement of an \( \alpha_2\)-AR mechanism.\(^{34}\) To date, it is unclear which \( \alpha_2\)-AR subtype is involved.\(^{34}\) As for the mechanism of action underlying Peak B [6.0 mg/kg MD-354 (21) + 0.25 mg/kg clonidine (7)], 5-HT\(_3\) receptor antagonism and \( \alpha_2\)-AR involvement seems to play a role.\(^{29,31}\)

In the present investigation, similar to results obtained with MD-354 (21), \( m \)CPBG (20; 0.3-10 mg/kg) displayed no antinociceptive effects when administered alone (Figure 22), but potentiated the analgesic actions of an “inactive” dose of clonidine (7; 0.25 mg/kg) in the mouse tail-flick assay (Figure 23a). In fact, this potentiation was observed over the course of 2 hours (Figure 23b). On the other hand,
unlike the biphasic curve observed with the co-administration of MD-354 (21) and clonidine (7; 0.25 mg/kg), the dose-response curve illustrating the potentiation by mCPBG (20) was monophasic (Figures 12 and 21a).

In the second nociceptive animal model (hot-plate assay), mCPBG (20; 0.3-10 mg/kg) also showed no analgesic effects when administered alone (Figure 28), but contrary to the tail-flick assay, mCPBG (20) dose-dependently attenuated clonidine’s (7; 1.0 mg/kg) effect (Figure 29). Although it was found to be statistically insignificant, antagonistic behavior was also observed when MD-354 (21) was co-administered with clonidine (7) in the mouse hot-plate assay.33

And lastly, locomotor effects were evaluated in the analgesia producing combination [6.0 mg/kg mCPBG (20) + 0.25 mg/kg clonidine (7); tail-flick assay]. The results indicated that even though mCPBG (20) potentiated the antinociceptive effects of a low dose of clonidine (7) in the mouse tail-flick assay, it did not alter clonidine’s (7) locomotor properties (Figure 30).

3. SR57227A (22)

a) Tail-flick assay

Thus far, MD-354 (21) and mCPBG (20) have been examined in combination studies with clonidine (7), and analgesic potentiation of an “inactive” dose of clonidine (7) was observed with both of these agents. Mechanistically, this potentiation effect seemed to be, at least in part, due to a 5-HT3 receptor action. There is question as to
whether MD-354 (21) and mCPBG (20) penetrate the mouse BBB. In contrast, SR57227A (22) has been demonstrated to be brain penetrant. Therefore, the analgesic properties of the centrally-acting 5-HT\textsubscript{3} receptor agonist SR57227A (22) was examined both alone and in combination with clonidine (7). If potentiation is observed when SR57227A (22) is co-administered with clonidine (7), then mechanistic studies involving 5-HT\textsubscript{3} receptor antagonists will be conducted.

In the tail-flick assay, SR57227A (22; 0.3-10 mg/kg) showed saline-like effects (i.e., the antinociceptive effect produced by SR57227A (22) was not statistically different than saline; Figure 31). At the highest dose (30 mg/kg) evaluated, SR57227A (22) produced an increase in antinociception and even though there was a relatively large standard error, statistical analysis (one-way ANOVA followed by Dunnett’s post hoc test) verified a difference between the treatment and control group ($P < 0.05$; Figure 31).

![Graph](image)

**Figure 31.** Antinociceptive effect (± S.E.M.) of SR57227A (22; 0.3-30 mg/kg, s.c.) in the mouse tail-flick assay ($n = 8$ mice/treatment). Asterisks denote a significant difference compared to the control group (saline); *$P < 0.05$, one-way ANOVA ($F_{6,49} = 4.344$) followed by Dunnett’s post hoc test.
Tail-flick latency, which is the time delay between the onset of intense light and the tail-flick response, is a second way of measuring tail-flick results. When the results from SR57227A (22) administered alone were analyzed in this way, there was no significant difference between the high dose of SR57227A (22; 30 mg/kg) and saline in the Dunnett’s post hoc test ($P > 0.05$) but, interestingly, it was determined as being significantly different in the Newman-Keuls multiple comparison test ($P < 0.05$; Figure 32).

![Figure 32](image_url)

**Figure 32.** Antinociceptive effect ($\pm$ S.E.M.) of SR57227A (22; 0.3-30 mg/kg, s.c.) in the mouse tail-flick assay (n = 8 mice/treatment). No significant difference ($P > 0.05$) compared to the control group (saline) was detected; one-way ANOVA ($F_{6,49} = 4.574$) followed by Dunnett’s post hoc test.

Although not significantly different from saline, lower doses of SR57227A (22; 0.3-10 mg/kg) showed reduced tail-flick latency (Figures 31 and 32). Therefore, hyperalgesia was examined in a modified tail-flick assay (radiant heat was adjusted so
that pre-treatment tail-flick latencies were 5-7 s). Dose-dependent hyperalgesic effects were observed in the SR57227A (22; 1.0-10 mg/kg)-treated mice (Figure 33).

![Figure 33.](image)

**Figure 33.** Hyperalgesic effect (± S.E.M.) of SR57227A (22; 1.0-10 mg/kg, s.c.) in the modified mouse tail-flick assay (n = 6-8 mice/treatment). For each treatment group, bars on the left depict the pre-treatment tail-flick latency. Asterisks denote a significant difference compared to the control group (pre-treatment tail-flick latency); ***P < 0.001, Student’s t-test.

Because MD-354 (21) and mCPBG (20) both potentiated the antinociceptive actions of an “inactive” dose of clonidine (7; 0.25 mg/kg), this same dose of clonidine (7) was co-administered with the selective 5-HT3 receptor agonist SR57227A (22). In the mouse tail-flick assay, SR57227A (22; 0.3-10 mg/kg, s.c.) did not alter the analgesic properties of a saline-like dose of clonidine (7; Figure 34).
Figure 34. Antinociceptive effect (± S.E.M.) of SR57227A (22; 0.3-10 mg/kg, s.c.) in combination with clonidine (7; 0.25 mg/kg, s.c.) in the mouse tail-flick assay (n = 8-24 mice/treatment). No significant difference (P > 0.05) compared to the control group [0.25 mg/kg dose of clonidine (7)] was detected; one-way ANOVA (F_{5,58} = 0.6047) followed by Dunnett’s post hoc test.

Since no potentiation was observed in the previous combination, a higher, more effective dose of clonidine (7; calculated ED_{50} = 0.5 mg/kg) was selected to determine if SR57227A (22) blocks the antinociceptive effect of clonidine (7; Figure 35).
Figure 35. Antinociceptive effect (± S.E.M.) of SR57227A (22; 0.3-10 mg/kg, s.c.) in combination with clonidine (7; 0.5 mg/kg, s.c.) in the mouse tail-flick assay (n = 8-24 mice/treatment). No significant difference (P > 0.05) compared to the control group [0.5 mg/kg dose of clonidine (7)] was detected; one-way ANOVA (F_{5,66} = 0.4993) followed by Dunnett’s post hoc test.

Similar to Figure 34, this combination [0.3-10 mg/kg doses of SR57227A (22) + 0.5 mg/kg dose of clonidine (7)] produced clonidine (7)-like effects (Figure 35). That is, the antinociceptive effects of clonidine (7) were neither potentiated nor attenuated by SR57227A (22).

b) Hot-plate assay

In the hot-plate assay, s.c. administration of SR57227A (22; 0.3-10 mg/kg) produced no antinociception (compared to saline control) but, just as before (i.e., similar to the tail-flick assay results), a higher dose (30 mg/kg) produced analgesic actions
Figure 36. Antinociceptive effect (± S.E.M.) of SR57227A (22; 0.3-30 mg/kg, s.c.) in the mouse hot-plate assay (n = 8-9 mice/treatment). Asterisks denote a significant difference compared to the control group (saline); ***P < 0.001, one-way ANOVA (F5,47 = 5.322) followed by Dunnett’s post hoc test.

In combination studies, SR57227A (22; 0.3-10 mg/kg) neither potentiated nor attenuated the antinociceptive effect of clonidine (7; 1.0 mg/kg; Figure 37).
Antinociceptive effect (± S.E.M.) of SR57227A (22; 0.3-10 mg/kg, s.c.) in combination with clonidine (7; 1.0 mg/kg, s.c.) in the mouse hot-plate assay (n = 9-20 mice/treatment). No significant difference (P > 0.05) compared to the control group [SR57227A/clonidine (22/7) combination] was detected; one-way ANOVA (F_{4,53} = 0.4547) followed by Dunnett’s post hoc test.

In summary, SR57227A (22; 0.3-10 mg/kg) produced no analgesic properties in both examined antinociceptive assays (tail-flick and hot-plate assays) when administered alone and in combination with clonidine (7), but a higher dose (30 mg/kg), this 5-HT_3 receptor agonist (22) showed augmented antinociceptive effects in the mouse tail-flick and hot-plate assays (P < 0.05 and P < 0.001, respectively).

c) Locomotor activity assay

In the mouse locomotor activity assay, a 30 mg/kg dose of SR57227A (22; dose that produced antinociceptive effects; Figures 32 and 36) was administered s.c. and compared to a s.c. saline treatment group (Figure 38). Statistical analysis of the
examined locomotor parameters (e.g., total movement episodes, total movement time, total movement distance, and total vertical entries) indicated a significant hypolocomotor action of SR57227A (22; 30 mg/kg) in comparison to saline ($P < 0.01$; Figure 38). That is, the only SR57227A (22) dose that produced antinociceptive effects in the tail-flick and hot-plate assays, also, produced sedative effects in mice.

![Figure 38](image.png)

**Figure 38.** Effect (± S.E.M.) of SR57227A (22; 30 mg/kg, s.c., pre-injection time: 0 min) on (a) total movement episodes, (b) total movement time, (c) total movement distance, and (d) vertical entries with a 45-min recording time in the mouse locomotor activity assay ($n = 8$ mice/treatment). Asterisks denote a significant difference compared to the control group (saline); **$P < 0.01$, ***$P < 0.001$, Student’s t-test.
Potentiation of clonidine’s (7) analgesic properties by SR57227A (22) was not observed in either nociceptive animal model (Figures 34, 35 and 37) and therefore, the locomotor activity of the combination was not examined.

d) Summary

In summary, SR57227A (22; 0.3-10 mg/kg, s.c.) produced saline-like effects in both antinociceptive assays \((P > 0.05; \text{Figures 31 and 34})\). Conversely, a higher dose (30 mg/kg) of SR57227A (22) showed a significant increase in analgesic actions in comparison to saline in the tail-flick and hot-plate assays \((P < 0.05 \text{ and } P < 0.001, \text{respectively}; \text{Figures 31 and 36})\). However, SR57227A (22; 30 mg/kg, s.c.) showed decreased motor activity in all locomotor parameters (movement episodes, movement time, movement distance, and vertical entries) in the mouse locomotor activity assay (Figure 38). Because low doses of SR57227A (22; 0.3-10 mg/kg) showed slight analgesic attenuation in the tail-flick assay, a modified tail-flick assay was conducted to detect hyperalgesia. Indeed, SR57227A (22) produced hyperalgesic effects \((P < 0.001)\) in the modified tail-flick assay (Figure 33).

In the tail-flick combination studies, SR57227A (22; 0.3-10 mg/kg, s.c.) neither potentiated nor attenuated the antinociceptive effect of clonidine (7; 0.25 or 0.5 mg/kg, s.c.; Figures 34 and 35). Similar to the tail-flick results, SR57227A (22; 0.3-10 mg/kg, s.c.) did not alter the antinociception produced by clonidine (7; 1.0 mg/kg, s.c.) in the hot-plate assay (Figure 37).
4. TDIQ (6)

a) Tail-flick assay

An $\alpha_2$-AR role in the potentiation of clonidine (7; 0.25 mg/kg) by MD-354 (21) was proposed because previous mechanistic studies showed analgesic attenuation of the MD-354/clonidine (21/7) combination by the following $\alpha_2$-AR antagonists: yohimbine (11; non-selective $\alpha_2$-AR antagonist), imiloxan (12; preferentially selective $\alpha_{2B}$-AR antagonist), and BRL44408 (15; preferentially selective $\alpha_{2A}$-AR antagonist). Therefore, the $\alpha_2$-AR agonist TDIQ (6) was selected to further examine the mechanism of action. Although TDIQ (6) acts nonselectively at all three subtypes of $\alpha_2$-ARs, it is devoid of 5-HT$_3$ receptor activity.

TDIQ (6; 0.3-10 mg/kg), when administered alone in the tail-flick assay, showed no analgesic properties (% MPE = 1-10; Figure 39). However, when TDIQ (6; 0.3-3.0 mg/kg) was co-administered with clonidine (7; 0.25 mg/kg), potentiation of the antinociceptive effect was observed ($ED_{50} = 0.6$ mg/kg, 95% CL = 0.2-1.3 mg/kg; Figure 40). That is, TDIQ (6) potentiated the antinociceptive effect of an “inactive” dose of clonidine (7) in a dose-dependent manner (Figure 40).
Effect of TDIQ in the Mouse Tail-Flick Assay

Figure 39. Antinociceptive effect (± S.E.M.) of TDIQ (6; 0.3-10 mg/kg, s.c.) in the mouse tail-flick assay (n = 8 mice/treatment). No significant difference (P > 0.05) compared to the control group (saline) was detected; one-way ANOVA (F_{4,35} = 0.6850) followed by Dunnett’s post hoc test.

Effect of TDIQ in Combination with Clonidine (0.25 mg/kg) in the Mouse Tail-Flick Assay

Figure 40. Antinociceptive effect (± S.E.M.) of TDIQ (6; 0.3-3.0 mg/kg, s.c.) in combination with clonidine (7; 0.25 mg/kg, s.c.) in the mouse tail-flick assay (n = 8-24 mice/treatment). Asterisks denote a significant difference compared to the control group (0.25 mg/kg dose of clonidine; 7); *P < 0.05, **P < 0.01, one-way ANOVA (F_{3,51} = 10.19) followed by Dunnett’s post hoc test.
Since 1.0 and 3.0 mg/kg doses of TDIQ (6) potentiated the antinociceptive actions of clonidine (7; 0.25 mg/kg), TDIQ (6) in combination with a lower dose of clonidine (7) was investigated. TDIQ (6) did not significantly alter the effect of the lower dose (0.1 mg/kg) of clonidine (7; Figure 41).

![Graph showing antinociceptive effect of TDIQ in combination with clonidine in the mouse tail-flick assay](image)

**Figure 41.** Antinociceptive effect (± S.E.M.) of TDIQ (6; 0.3-10 mg/kg, s.c.) in combination with clonidine (7; 0.1 mg/kg, s.c.) in the mouse tail-flick assay (n = 8-16 mice/treatment). No significant difference (P > 0.05) compared to the control group [0.1 mg/kg dose of clonidine (7)] was detected; one-way ANOVA (F_{4,51} = 1.579) followed by Dunnett’s post hoc test.

Since TDIQ (6) was found to potentiate the analgesic action of clonidine (7; 0.25 mg/kg) in the mouse tail-flick assay (Figure 40), additional combination studies were conducted to investigate the mechanism of action (Figure 40). The following α₂-AR antagonists were selected for mechanistic studies: BRL44408 (15; preferentially selective at α₂A-ARs), imiloxan (12; preferentially selective at α₂B-ARs), and ARC-239
(14; preferentially selective at $\alpha_{2B/2C}$-ARs). All three $\alpha_2$-AR antagonists lacked antinociceptive effects when administered alone in the mouse tail-flick assay (% MPE = 0-5).$^{31,150}$ When BRL44408 (15; 0.03-3.0 mg/kg, s.c.) was co-administered with the combination, attenuation of the antinociceptive effect of the combination [3.0 mg/kg dose of TDIQ (6) + 0.25 mg/kg dose of clonidine (7)] was observed ($AD_{50} = 0.2$ mg/kg, 95% CL = 0.05-0.5 mg/kg; Figure 42).

![Figure 42.](image)

**Figure 42.** Effect (± S.E.M.) of BRL44408 (15; 0.03-3.0 mg/kg, s.c.) on the antinociceptive action of the TDIQ (6; 3.0 mg/kg, s.c.)/clonidine (7; 0.25 mg/kg, s.c.) combination in the mouse tail-flick assay ($n = 8-15$ mice/treatment). Asterisks denote a significant difference compared to the control group [TDIQ/clonidine (6/7) combination]; *$P < 0.05$, ***$P < 0.001$, one-way ANOVA ($F_{6,59} = 9.751$) followed by Dunnett’s post hoc test.

Imiloxan (12; 0.1-3.0 mg/kg, s.c.) only attenuated ($P < 0.05$) the analgesic effect of the TDIQ/clonidine (6/7) combination at a medium dose (0.3 mg/kg; Figure 43). That is, lower (0.1 mg/kg) and higher (1.0-3.0 mg/kg) doses of imiloxan (12) did not alter ($P >$
0.05) the antinociception produced by the combination [3.0 mg/kg TDIQ (6) + 0.25 mg/kg clonidine (7); Figure 43].

Figure 43. Effect (± S.E.M.) of imiloxan (12; 0.1-3.0 mg/kg, s.c.) on the antinociceptive action of the TDIQ (6; 3.0 mg/kg, s.c.)/clonidine (7; 0.25 mg/kg, s.c.) combination in the mouse tail-flick assay (n = 8-15 mice/treatment). Asterisks denote a significant difference compared to the control group [TDIQ/clonidine (6/7) combination]; *P < 0.05, one-way ANOVA (F<sub>4,45</sub> = 3.223) followed by Dunnett’s post hoc test.

Finally, the α<sub>2B/2C</sub>-AR antagonist ARC-239 (14; 0.3-10 mg/kg, s.c.) blocked the analgesic actions of the TDIQ/clonidine (6/7) combination in a dose-dependent manner (AD<sub>50</sub> = 0.6 mg/kg, 95% CL = 0.2-2.3 mg/kg; Figure 44).
Effect of ARC-239 on the TDIQ/Clonidine Combination in the Mouse Tail-Flick Assay

Figure 44. Effect (± S.E.M.) of ARC-239 (14; 0.3-10 mg/kg, s.c.) on the antinociceptive action of the TDIQ (6; 3.0 mg/kg, s.c.)/clonidine (7; 0.25 mg/kg, s.c.) combination in the mouse tail-flick assay (n = 8-15 mice/treatment). Asterisks denote a significant difference compared to the control group [TDIQ/clonidine (6/7) combination]; *P < 0.05, **P < 0.01, ***P < 0.001, one-way ANOVA (F<sub>4,44</sub> = 7.435) followed by Dunnett’s post hoc test.

Clearly, TDIQ (6) potentiates the antinociceptive action of clonidine (7). If both clonidine (7) and TDIQ (6) are non-selective (among α<sub>2</sub>-ARs) α<sub>2</sub>-AR agonists, TDIQ’s (6) potentiation of clonidine (7)-induced antinociception might simply be an additive effect of the two agents. To further characterize the analgesic potentiation of clonidine (7; 0.25 mg/kg) produced by TDIQ (6; Figure 40), an isobolographic analysis was conducted. An isobolographic analysis is a method that assesses if a biological effect produced by a combination of drugs is greater than, equal to, or smaller than, the sum of the individual effects of the component drugs. Specifically, does TDIQ (6) behave in a synergistic or simply additive manner when co-administered with clonidine (7) in the mouse tail-flick assay?
In an isobolographic analysis, synergism is evaluated by comparing the experimental ED$_{50}^{\text{mix}}$ of a fixed-ratio of TDIQ (6) and clonidine (7) to the theoretical ED$_{50}^{\text{add}}$ of a simply additive mixture having the same proportions. Since TDIQ (6) does not produce antinociception when administered alone, the ED$_{50}^{\text{add}}$ will only be dependent on clonidine’s (7) effect. First, co-administration of fixed ratios of the TDIQ/clonidine (6/7) combination were examined in the tail-flick assay; the co-administration of the 3:1 and 12:1 fixed-ratios of TDIQ (6) and clonidine (7) resulted in a leftward shift compared to the clonidine (7) dose-response regression line (Figure 45).

![Figure 45](image.png)

**Figure 45.** Dose-response lines determined by regression analysis for clonidine (7) alone (red squares) and the co-administration of TDIQ (6) and clonidine (7) given in a 3:1 (green circles) and 12:1 (blue triangles) fixed-ratio in the mouse tail-flick assay ($n = 8$-24 mice/treatment), plotted as log clonidine (7) dose.
Next, a regression analysis of % MPE vs. log total dose graphically presented \( \text{ED}_{50\text{clonidine}} \) (0.44 mg/kg), \( \text{ED}_{50\text{mix}} \) (0.79 mg/kg) for the 3:1 fixed-ratio, and \( \text{ED}_{50\text{mix}} \) (1.64 mg/kg) for the 12:1 fixed-ratio (Figure 46). \( \text{ED}_{50\text{add}} \) values for both fixed-ratios can be calculated: \( \text{ED}_{50\text{add}} = \frac{\text{ED}_{50\text{clonidine}}}{P} = \frac{0.44}{(1/4)} = 1.76 \text{ mg/kg} \) for the 3:1 fixed ratio and \( \text{ED}_{50\text{add}} = \frac{\text{ED}_{50\text{clonidine}}}{P} = \frac{0.44}{(1/13)} = 5.72 \text{ mg/kg} \) for the 12:1 fixed ratio.

![Figure 46](image_url)

**Figure 46.** Dose-response lines determined by regression analysis for clonidine (7) alone (red squares) and co-administration of TDIQ (6) and clonidine (7) given in a 3:1 (green circles) and 12:1 (blue triangles) fixed-ratio in the mouse tail-flick assay \( (n = 8-24 \text{ mice/treatment}) \), plotted as log total administered dose.

The line of additivity is based solely on \( \text{ED}_{50\text{clonidine}} \) because TDIQ (6) was found to be inactive when administered alone in the mouse tail-flick assay (Figure 39). Because both \( \text{ED}_{50\text{mix}} \) values are plotted significantly below the line of additivity, the 3:1
and 12:1 fixed ratios of TDIQ (6) and clonidine (7) behaved in a synergistic manner ($P < 0.5$ and $P < 0.01$, respectively; Figure 47).

![Graph](image)

**Figure 47.** The isobologram shows the line of additivity (broken gray line), ED$_{50\text{mix}}$ for the 3:1 (green circles) and 12:1 (blue triangles) fixed-ratios of TDIQ (6) and clonidine (7), and ED$_{50\text{add}}$ (red squares) from the mouse tail-flick results ($n = 8-24$ mice/treatment). Asterisks denote a significant difference compared to the control (ED$_{50\text{add}}$ values); *$P < 0.05$, **$P < 0.01$, Student’s t-test.

Since the experimental ED$_{50\text{mix}}$ for a 3:1 and 12:1 fixed-ratio of TDIQ (6) and clonidine (7) was statistically different than the theoretical ED$_{50\text{add}}$ of a simply additive mixture having the same proportions, TDIQ (6) potentiates the analgesic actions of clonidine (7) in a synergistic (or super-additive) manner [i.e., the isobologram (Figure 47) suggests that the biological effect (antinociception) produced by the combination of
TDIQ (6) and clonidine (7) is greater than the sum of the individual effects of the component drugs.

b) Hot-plate assay

The analgesic properties of TDIQ (6) administered alone and in combination with clonidine (7) in a second nociceptive animal model, the hot-plate assay, were examined. When TDIQ (6) was s.c. administered in mice, no antinociception was observed in the hot-plate assay (Figure 48). This lack of antinociception is similar to the tail-flick results for TDIQ (6; Figure 39).

![Figure 48](image)

**Figure 48.** Antinociceptive effect (± S.E.M.) of TDIQ (6; 0.3-10 mg/kg, s.c.) in the mouse hot-plate assay \((n = 8-10\) mice/treatment). No significant difference \((P > 0.05)\) compared to the control group (saline) was detected; one-way ANOVA \((F_{4,41} = 0.2881)\) followed by Dunnett’s post hoc test.
In the tail-flick combination studies, TDIQ (6) potentiated a low, "inactive" dose of clonidine (7; 0.25 mg/kg; Figure 40) and, therefore, the first hot-plate combination study examined the co-administration of a low, "inactive" dose of clonidine (7; 0.25 mg/kg) and TDIQ (6). Unlike in the tail-flick assay, TDIQ (6) did not potentiate the antinociceptive effects of a low dose of clonidine (7) in the mouse hot-plate assay (Figure 49). In fact, there seemed to be a slight attenuation of effect; this observed attenuation was not significantly different from the control.

![Graph showing antinociceptive effect of TDIQ in combination with clonidine in the mouse hot-plate assay.](image)

**Figure 49.** Antinociceptive effect (± S.E.M.) of TDIQ (6; 0.3-10 mg/kg, s.c.) in combination with clonidine (7; 0.25 mg/kg, s.c.) in the mouse hot-plate assay (n = 8-28 mice/treatment). No significant difference (P > 0.05) compared to the control group [0.25 mg/kg dose of clonidine (7)] was detected; one-way ANOVA (F<sub>4,56</sub> = 2.191) followed by Dunnett’s post hoc test.

Due to slight attenuation observed in Figure 49, the dose of clonidine (7) was increased so that significant attenuation by TDIQ (6) might be more readily observed. TDIQ (6; 0.3-10 mg/kg) co-administered with a dose similar to the calculated ED<sub>50</sub> (0.9
mg/kg) of clonidine (7; 1.0 mg/kg) produced a significant decrease in antinociception (AD$_{50}$ = 1.4 mg/kg, 95% CL = 0.26-7.84 mg/kg) in comparison to clonidine (7; 1.0 mg/kg) alone (% MPE = 50.6 ± 6.2; Figure 50). A similar analgesic attenuation (% MPE = 32-36) by TDIQ (6; 0.3-10 mg/kg) was detected in an even larger dose of clonidine (7; 2.0 mg/kg; Figure 51).

![Antinociceptive effect of TDIQ in combination with clonidine](image)

**Figure 50.** Antinociceptive effect (± S.E.M.) of TDIQ (6; 0.3-10 mg/kg, s.c.) in combination with clonidine (7; 1.0 mg/kg, s.c.) in the mouse hot-plate assay (n = 9-20 mice/treatment). Asterisks denote a significant difference compared to the control group (1.0 mg/kg dose of clonidine; 7); *P < 0.05, **P < 0.01, one-way ANOVA (F$_{4,53}$ = 3.927) followed by Dunnett’s post hoc test.
**Figure 51.** Antinociceptive effect (± S.E.M.) of TDIQ (6; 0.3-10 mg/kg, s.c.) in combination with clonidine (7; 2.0 mg/kg, s.c.) in the mouse hot-plate assay (n = 11-19 mice/treatment). Asterisks denote a significant difference compared to the control group (2.0 mg/kg dose of clonidine; 7); *P < 0.05, **P < 0.01, one-way ANOVA (F_{4,58} = 4.954) followed by Dunnett’s post hoc test.

In the mouse hot-plate assay, the non-selective α₂-AR agonist TDIQ (6; 0.3-10 mg/kg) produced no antinociceptive effects when administered alone (Figure 48) and interestingly, attenuated the analgesic actions of a 1.0 and 2.0 mg/kg dose of clonidine (7; Figures 50 and 49, respectively). This attenuating effect produced by TDIQ (6) differs from that observed in the tail-flick assay (Figure 40).

c) Locomotor activity assay

Locomotor activity of TDIQ (6; 0.3-3.0 mg/kg, s.c.) alone and in combination with clonidine (7; 0.25 mg/kg, s.c.) has been previously examined in our laboratory.\textsuperscript{151} TDIQ (6; 0.3-3.0 mg/kg, s.c.) did not significantly differ from saline in the mouse locomotor
activity assay in all four stimulant parameters ($P > 0.05$) with one exception (Figure 52). A 3.0 mg/kg dose of TDIQ (6) did show decreased vertical entries ($P < 0.05$; data not shown).

Figure 52. Effect (± S.E.M.) of TDIQ (6; 0.3-3.0 mg/kg) alone and in combination with clonidine (7; 0.25 mg/kg) on (a) total movement episodes and (b) total movement time with a 45-min recording time in the mouse locomotor activity assay ($n = 8$ mice/treatment). No significant difference ($P > 0.05$) compared to the control group [saline and clonidine (7; 0.25 mg/kg), respectively] was detected; one-way ANOVA ($F_{3,22} = 0.4039$ and $F_{3,20} = 0.3899$) followed by Dunnett’s post hoc test. 151
In the combination studies, co-administration of TDIQ (6; 0.3-3.0 mg/kg) and clonidine (7; 0.25 mg/kg) produced locomotor activity similar to the effect observed by the s.c. administration of clonidine (7; 0.25 mg/kg) alone (Figure 52).

d) Summary

Briefly, when TDIQ (6) was administered alone, it produced no antinociceptive effects in the tail-flick (Figure 39) and hot-plate (Figure 48) assays. And since MD-354 (21) potentiated clonidine’s (7) antinociceptive effect, at least in part, by an α2-AR mechanism, the effect of the co-administration of the α2-AR agonist TDIQ (6) and clonidine (7) was also examined. Indeed, TDIQ (6) potentiated the analgesic effect of an “inactive” dose of clonidine (7; 0.25 mg/kg) in the mouse tail-flick assay (Figure 40). In contrast, although statistically non-significant, TDIQ (6) slightly attenuated the effect of an even lower dose (0.1 mg/kg) of clonidine (7; Figure 41). To further characterize the analgesic potentiation observed in Figure 40, an isobolographic analysis was conducted. These studies indicated that 3:1 and 12:1 fixed ratios of TDIQ (6) and clonidine (7) behave synergistically in the mouse tail-flick assay (Figure 47).

To investigate the mechanism of action, α2-AR antagonists were co-administered with the TDIQ/clonidine (6/7) combination. More specifically, the preferentially selective α2A-AR antagonist BRL44408 (15; 0.03-3.0 mg/kg), α2B-AR antagonist imiloxan (12; 0.1-3.0 mg/kg), and α2B/2C-AR antagonist ARC-239 (14; 0.3-10 mg/kg) significantly attenuated the analgesic potentiation of clonidine (7; 0.25 mg/kg) produced by TDIQ (6) in the mouse tail-flick assay (Figures 42, 43, and 44, respectively).
In the hot-plate assays, TDIQ (6) initially seemed to have no effect on the antinociceptive actions of clonidine (7; 0.25 mg/kg; Figure 49), but the effect of higher doses (1.0 and 2.0 mg/kg) of clonidine (7) was significantly attenuated by TDIQ (6; Figures 50 and 49, respectively).

In the final pharmacological studies, the locomotor activity of TDIQ (6) alone and in combination with clonidine (7) was assessed. In the mouse locomotor activity assay, s.c. administration of TDIQ (6; 0.3-3.0 mg/kg) produced saline-like effects (Figure 52). But more importantly, the TDIQ/clonidine (6/7) combinations that produced enhanced antinociceptive effects in the tail-flick assay (Figure 40) were examined in the mouse locomotor activity assay; results indicated that the co-administration of TDIQ (6; 0.3-3.0 mg/kg) and clonidine (7; 0.25 mg/kg) was not statistically different than control [clonidine (7); Figure 52].
Table 8. Summary of the pharmacological assays; the dose of clonidine (7; where employed) in all combination studies is 0.25 mg/kg.

<table>
<thead>
<tr>
<th>Treatment</th>
<th>Mouse tail-flick assay</th>
<th>Mouse hot-plate</th>
</tr>
</thead>
<tbody>
<tr>
<td>MD-354 (21; up to a 30 mg/kg dose)</td>
<td>inactive\textsuperscript{33}</td>
<td>inactive\textsuperscript{33}</td>
</tr>
<tr>
<td>Clonidine (7)</td>
<td>ED\textsubscript{50} = 0.4 mg/kg</td>
<td>ED\textsubscript{50} = 0.9 mg/kg</td>
</tr>
<tr>
<td>+ MD-354 (21)</td>
<td>biphasic potentiation\textsuperscript{34}</td>
<td>no potentiation\textsuperscript{33}</td>
</tr>
<tr>
<td>MD-354 (21; 1.0 mg/kg) + clonidine (7)</td>
<td>failed to attenuate</td>
<td></td>
</tr>
<tr>
<td>+ ondansetron (23)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>+ tropisetron (25)</td>
<td>AD\textsubscript{50} = 0.00047 mg/kg\textsuperscript{34}</td>
<td></td>
</tr>
<tr>
<td>+ yohimbine (11)</td>
<td>AD\textsubscript{50} = 0.33 mg/kg\textsuperscript{31}</td>
<td></td>
</tr>
<tr>
<td>+ BRL44408 (15)</td>
<td>AD\textsubscript{50} = 2.1 mg/kg\textsuperscript{31}</td>
<td></td>
</tr>
<tr>
<td>+ imiloxan (12)</td>
<td>AD\textsubscript{50} = 0.17 mg/kg\textsuperscript{31}</td>
<td></td>
</tr>
<tr>
<td>MD-354 (21; 6.0 mg/kg) + clonidine (7)</td>
<td>failed to attenuate</td>
<td></td>
</tr>
<tr>
<td>+ ondansetron (23)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>+ zacopride (24)</td>
<td>failed to attenuate\textsuperscript{33,29}</td>
<td></td>
</tr>
<tr>
<td>+ tropisetron (25)</td>
<td>failed to attenuate\textsuperscript{29}</td>
<td></td>
</tr>
<tr>
<td>+ yohimbine (11)</td>
<td>AD\textsubscript{50} = 2.3 mg/kg</td>
<td></td>
</tr>
<tr>
<td>+ imiloxan (12)</td>
<td>attenuated (s.c.)</td>
<td></td>
</tr>
<tr>
<td>+ imiloxan (12)</td>
<td>failed to attenuate (i.p.)\textsuperscript{33}</td>
<td></td>
</tr>
<tr>
<td>mCPBG (20; up to a 10 mg/kg dose)</td>
<td>inactive</td>
<td>inactive</td>
</tr>
<tr>
<td>mCPBG (20) + clonidine (7; ED\textsubscript{50} dose)</td>
<td></td>
<td>AD\textsubscript{50} = 0.8 mg/kg</td>
</tr>
<tr>
<td>mCPBG (20) + clonidine (7)</td>
<td>ED\textsubscript{50} = 1.6 mg/kg</td>
<td></td>
</tr>
<tr>
<td>+ ondansetron (23)</td>
<td>failed to attenuate</td>
<td></td>
</tr>
<tr>
<td>+ tropisetron (25)</td>
<td>attenuated</td>
<td></td>
</tr>
<tr>
<td>+ tropisetron methiodide</td>
<td>failed to attenuate</td>
<td></td>
</tr>
<tr>
<td>+ yohimbine (11)</td>
<td>AD\textsubscript{50} = 0.04 mg/kg</td>
<td></td>
</tr>
<tr>
<td>SR57227A (22; 0.3-10 mg/kg)</td>
<td>inactive</td>
<td>inactive</td>
</tr>
<tr>
<td>+ clonidine (7)</td>
<td>failed to potentiate</td>
<td></td>
</tr>
<tr>
<td>+ clonidine (7; ED\textsubscript{50} dose)</td>
<td>failed to potentiate/attenuate</td>
<td>failed to potentiate/attenuate</td>
</tr>
<tr>
<td>TDIQ (6; up to a 10 mg/kg dose)</td>
<td>inactive</td>
<td>inactive</td>
</tr>
<tr>
<td>TDIQ (6) + clonidine (7; ED\textsubscript{50} dose)</td>
<td></td>
<td>attenuated</td>
</tr>
<tr>
<td>TDIQ (6) + clonidine (7)</td>
<td>ED\textsubscript{50} = 0.6 mg/kg</td>
<td></td>
</tr>
<tr>
<td>+ BRL44408 (15)</td>
<td>AD\textsubscript{50} = 0.2 mg/kg</td>
<td>failed to potentiate</td>
</tr>
<tr>
<td>+ imiloxan (12)</td>
<td>AD\textsubscript{50} = 0.2 mg/kg</td>
<td></td>
</tr>
<tr>
<td>+ ARC-239 (14)</td>
<td>AD\textsubscript{50} = 0.6 mg/kg</td>
<td></td>
</tr>
</tbody>
</table>
5. Binding assays

Various agents [(·)NE (1), TDIQ (6), clonidine (7), and MD-354 (21)] were evaluated in α_{2A}^-, α_{2B}^-, and α_{2C}-AR binding assays: \[^{35}\text{S}]\text{GTPγS and competitive radioligand binding assays (conducted Dr. Scheinin’s Laboratories at University of Turku, Turku, Finland). In the \[^{35}\text{S}]\text{GTPγS binding assays, activity was analyzed under low salt conditions (i.e., low concentration of NaCl and GDP in the buffer solutions) that favor the detection of partial agonism.}^{152}\] In general, partial agonists do not show activity in high salt conditions.

(·)NE (1), considered as a full agonist, was analyzed as control [i.e., (·)NE’s (1) intrinsic activity at each receptor subtype was normalized to 100%]. As depicted in the graph (Figure 53a), (·)NE (1) displayed greater efficacy at α_{2A}^- and α_{2B}-ARs (E_{max} \approx 150\% over basal levels) in comparison to α_{2C}-ARs (E_{max} \approx 75\% over basal levels; Pohjanoksa and Scheinin, unpublished data). Similarly, the potency of (·)NE (1) is greater at α_{2A/2B}-ARs (EC_{50} = 106 and 145 nM, respectively) than α_{2C}-ARs (EC_{50} = 612 nM; Pohjanoksa and Scheinin, unpublished data; Table 9).
Figure 53. Effects of α₂-AR agents [a) (-)NE (1), b) TDIQ (6), c) clonidine (7), and d) MD-354 (21)] on [³⁵S]GTPγS binding (incubation buffer containing low Na⁺ and GDP concentrations) in CHO cell membranes expressing human α₂-ARs (α₂A: ●; α₂B: ■; α₂C: ▲). Data points represent the mean ± S.E.M. (each dose examined in triplicate).

TDIQ (6), clonidine (7), and MD-354 (21) were of lower efficacy than the full agonist (-)NE (1; IA = 100%) at all three α₂-AR subtypes in the [³⁵S]GTPγS binding assays; that is, intrinsic activity was less than 100% (Figure 53; Pohjanoksa and Scheinin, unpublished data). Table 9 summarizes the potency (EC₅₀) and efficacy [%IA of (-)NE (1)] of the agents examined at α₂A-, α₂B-, and α₂C-ARs (Pohjanoksa and Scheinin, unpublished data).
Table 9. Characterization of $[^{35}\text{S}]$GTPγS binding to CHO cell membranes expressing human $\alpha_{2A}$-, $\alpha_{2B}$-, or $\alpha_{2C}$-ARs in low salt conditions. Potency is represented as EC$_{50}$ values (nM) with the 95% CI in parenthesis. Efficacy (or maximal stimulation over basal) is expressed as intrinsic activity (IA) compared to (-)NE (1; Pohjanoksa and Scheinin, unpublished data).

<table>
<thead>
<tr>
<th></th>
<th>$\alpha_{2A}$</th>
<th></th>
<th>$\alpha_{2B}$</th>
<th></th>
<th>$\alpha_{2C}$</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>EC$_{50}$ (nM)</td>
<td>IA [% of (-)NE (1)]</td>
<td>EC$_{50}$ (nM)</td>
<td>IA [% of (-)NE (1)]</td>
<td>EC$_{50}$ (nM)</td>
</tr>
<tr>
<td>(-)NE (1)</td>
<td>106 (74-152)</td>
<td>100</td>
<td>145 (94-223)</td>
<td>100</td>
<td>612 (276-1,358)</td>
</tr>
<tr>
<td>TDIQ (6)</td>
<td>1,312 (382-4,503)</td>
<td>22</td>
<td>&gt;10,000</td>
<td>18</td>
<td>6,233</td>
</tr>
<tr>
<td>Clonidine (7)</td>
<td>23 (16-35)</td>
<td>62</td>
<td>220 (82-587)</td>
<td>36</td>
<td>&gt;10,000</td>
</tr>
<tr>
<td>MD-354 (21)</td>
<td>1,588 (757-3,333)</td>
<td>36</td>
<td>&gt;10,000</td>
<td>31</td>
<td>&gt;10,000</td>
</tr>
</tbody>
</table>

Affinity at $\alpha_{2}$-AR subtypes ($\alpha_{2A}$, $\alpha_{2B}$, and $\alpha_{2C}$) was examined for the above-mentioned agents via competitive ligand binding assays employing the $\alpha_{2}$-AR antagonist radioligand [ethyl-$^3$H]RS-79948-197 (Table 10). The binding affinity for the full agonist (-)NE (1) and (as subsequently determined) the partial agonists TDIQ (6), clonidine (7) and MD-354 (21) was measured in CHO cells expressing recombinant human $\alpha_{2A}$-, $\alpha_{2B}$-, and $\alpha_{2C}$-ARs (Table 10, unpublished data). Binding affinity for SR57227A (22) at $\alpha_{2}$-AR subtypes was also examined via competitive radioligand binding assays employing the human $\alpha_{2}$-AR agonist radioligand [$^3$H]clonidine (Table 11).^{145}
Table 10. Competitive binding affinity at human α2-ARs expressed in CHO cells employing [ethyl-3H]RS-79948-197 radioligand (α2-AR antagonist). Binding affinity is expressed as $K_i$ values (nM) with the 95% CI in parenthesis (Pohjanoksa and Scheinin, unpublished data).31

<table>
<thead>
<tr>
<th>Ligand</th>
<th>$K_i$ (nM)</th>
<th>$\alpha_{2A}$</th>
<th>$\alpha_{2B}$</th>
<th>$\alpha_{2C}$</th>
</tr>
</thead>
<tbody>
<tr>
<td>(-)NE (1)</td>
<td>405 (284-578)</td>
<td>579 (421-798)</td>
<td>417 (333-524)</td>
<td></td>
</tr>
<tr>
<td>TDIQ (6)</td>
<td>598 (478-749)</td>
<td>1,183 (904-1,547)</td>
<td>1,782 (1,538-2,065)</td>
<td></td>
</tr>
<tr>
<td>Clonidine (7)</td>
<td>35 (28-45)</td>
<td>98 (81-118)</td>
<td>287 (234-353)</td>
<td></td>
</tr>
<tr>
<td>MD-354 (21)</td>
<td>110 (70-190)</td>
<td>220 (170-280)</td>
<td>4,700 (2,800-7,800)</td>
<td></td>
</tr>
</tbody>
</table>

Table 11. Competitive binding affinity at human α2-ARs expressed in CHO cells employing [3H]clonidine radioligand (α2-AR agonist). Binding affinity is expressed as $K_i$ values ± S.E.M. (nM; unpublished data).145

<table>
<thead>
<tr>
<th>Ligand</th>
<th>$K_i$ (nM)</th>
<th>$\alpha_{2A}$</th>
<th>$\alpha_{2B}$</th>
<th>$\alpha_{2C}$</th>
</tr>
</thead>
<tbody>
<tr>
<td>SR57227A (22)</td>
<td>6,653 ± 665</td>
<td>4,990 ± 709</td>
<td>8,222 ± 658</td>
<td></td>
</tr>
</tbody>
</table>

TDIQ (6) shows a slight binding preference for α2A-ARs (2- and 3-fold over α2B- and α2B-ARs, respectively) but, in general, has relatively low binding affinity at α2-ARs. Similarly, clonidine (7) displays higher affinity at α2A-ARs versus α2B- and α2C-ARs (3- and 8-fold difference, respectively). MD-354 (21) binds at α2A- and α2B-ARs with similar affinity ($K_i = 110$ and 220 nM), but with significantly lower binding affinity at α2C-ARs ($K_i = 4,700$ nM). SR57227A (22), which has been described in the literature as a selective 5-HT3 receptor agent, displayed negligible binding affinity at human α2A-, α2B-, and α2C-ARs ($K_i > 1,000$ nM; Table 11).145
6. Discussion

Pharmacological studies were conducted to further characterize the biphasic, analgesic potentiation observed when MD-354 (21; 0.3-10 mg/kg) is co-administered with an “inactive” dose of clonidine (7; 0.25 mg/kg) in the mouse tail-flick assay (Figure 12). Since MD-354 (21) binds to 5-HT$_3$ receptors and α$_2$-ARs (Table 5), it is likely that each peak (Figure 12) depicts a unique mechanism of action. For example, the potentiation depicted by Peak A could be due to 5-HT$_3$ receptor agonism, whereas Peak B potentiation could be due to α$_2$-AR antagonism. In general, the Peak A and/or B potentiating effects could involve: (a) 5-HT$_3$ receptor agonism or antagonism, (b) α$_2$-AR (one or more of the receptor subtypes) agonism or antagonism, (c) a combination of the above, or (d) neither 5-HT$_3$ receptor nor α$_2$-AR action (i.e., that is, some other, yet unidentified, receptor mechanisms might be involved). Previously reported mechanistic studies on MD-354 (21) potentiation of the antinociceptive effect of clonidine (7) might provide some insight on Peak A and Peak B potentiation (summarized in Table 12).
**Table 12.** Summary of the previously reported mechanistic studies associated with the analgesic potentiation of clonidine (7; 0.25 mg/kg) by MD-354 (21; 0.3-10 mg/kg).

<table>
<thead>
<tr>
<th>Mechanistic study results</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Peak A</strong></td>
<td></td>
</tr>
<tr>
<td>• Tropisetron (25) attenuated the antinociceptive effect of the MD-354 (21; 1.0 mg/kg)/clonidine (7; 0.25 mg/kg) combination.³⁴</td>
<td>• This suggests a 5-HT₃ receptor agonist mechanism; but not all 5-HT₃ receptor antagonists [e.g., ondansetron (23)] blocked the effect.</td>
</tr>
<tr>
<td>• Yohimbine (11), imiloxan (12), and BRL44408 (15) attenuated the antinociceptive effect of the MD-354 (21; 1.0 mg/kg)/clonidine (7; 0.25 mg/kg) combination.³¹</td>
<td>• This suggests an α₂-AR agonist mechanism (but, it is unclear which α₂-AR subtype is involved).</td>
</tr>
<tr>
<td><strong>Peak B</strong></td>
<td></td>
</tr>
<tr>
<td>• Ondansetron (23), zacopride (24), and tropisetron (25) failed to attenuate the antinociceptive effect of the MD-354 (21; 6.0 mg/kg)/clonidine (7; 0.25 mg/kg) combination.³³,²⁹</td>
<td>• This suggests that 5-HT₃ receptor agonism is not the mechanism of action.</td>
</tr>
<tr>
<td>• Yohimbine (11) and imiloxan (12) attenuated the antinociceptive effect of the MD-354 (21; 6.0 mg/kg)/clonidine (7; 0.25 mg/kg) combination (unpublished data).</td>
<td>• This suggests an α₂-AR agonist mechanism (but, it is unclear which α₂-AR subtype is involved).</td>
</tr>
<tr>
<td><strong>Peak A or B</strong></td>
<td></td>
</tr>
<tr>
<td>• Ondansetron (23), zacopride (24), and tropisetron (25) potentiated the antinociceptive effect of clonidine (7; 0.25 mg/kg).²⁹</td>
<td>• This suggests that 5-HT₃ receptor antagonists can potentiate the antinociceptive effects of clonidine (7).</td>
</tr>
<tr>
<td>• Imiloxan (12) potentiated the antinociceptive effects of clonidine (7; 0.25 mg/kg).³¹</td>
<td>• This suggests an α₂-AR antagonist can potentiate the antinociceptive effects of clonidine (7).</td>
</tr>
</tbody>
</table>
Although numerous mechanistic studies have been conducted, the mechanism of action of the potentiation of clonidine’s (7) antinociceptive effect by MD-354 (21) remains elusive. As summarized in Table 12, 5-HT₃ receptors and α₂-ARs both seem to be involved in both Peak A and B. For example, a low dose of MD-354 (21; 1.0 mg/kg) appears to potentiate the antinociceptive effects of clonidine (7) via a 5-HT₃ receptor agonist mechanism (Peak A), whereas a higher dose of MD-354 (21; 6.0 mg/kg) might be acting as a 5-HT₃ receptor antagonist (Peak B).²⁹ ³⁴  The latter mechanism is speculative; MD-354 (21) shows partial agonist activity at 5-HT₃ receptors and, therefore, can behave functionally as an agonist or antagonist.¹¹³  Also, as shown in our laboratory, three structurally diverse 5-HT₃ receptor antagonists [ondansetron (23), zacopride (24), and tropisetron (25)] enhanced the analgesic actions of an “inactive” dose of clonidine (7) in the tail-flick assay.²⁹  This observed potentiation is unlikely due to a central depressant effect because co-administration of these 5-HT₃ receptor antagonists [e.g., zacopride (24; 0.01 mg/kg) or tropisetron (25; 0.2 mg/kg)] and the α₂-AR partial agonist clonidine (7; 0.25 mg/kg) produced results similar to that of control [0.25 mg/kg dose of clonidine (7); P > 0.05] in mouse locomotor activity assays.²⁹  This provides evidence that antagonism at 5-HT₃ receptors augments the antinociceptive effects of clonidine (7), but does not necessarily indicate a 5-HT₃ receptor antagonist role for MD-354 (21) in its analgesic potentiation of clonidine (7) in the mouse tail-flick assay.

In the present investigation, the role of 5-HT₃ receptor involvement in the potentiation of clonidine (7)-induced analgesia was further evaluated. A more established 5-HT₃ receptor agonist, mCPBG (20), and a known centrally-acting 5-HT₃
receptor agonist, SR57227A (22), were examined to help clarify the mechanism of action. In the mouse tail-flick assay, no antinociception was observed with s.c. administration of either mCPBG (20; 0.3-10 mg/kg; Figure 22) or SR57227A (22; 0.3-10 mg/kg; Figure 31) alone. However, a high dose (30 mg/kg) of SR57227A (22), administered alone, produced a significant effect ($P < 0.05$; Figure 31). Dose-dependent antinociception by SR57227A (22, doses of up to 20 mg/kg; ED$_{50}$ = 6.5 mg/kg) has been previously observed in the mouse-tail flick assay but, as opposed to the current study (which employed a s.c. route of administration), SR57227A (22) was administered via i.p. injection.$^{27}$ It is possible that the observed antinociceptive effect described in the literature is due to route of administration; furthermore, the hypolocomotor effects produced by this dose of SR57227A (22), as shown herein, might have interfered with interpretation of its antinociceptive actions. But, two prior studies showed no effect in the mouse locomotor assay when low doses (1.0-10 mg/kg) of SR57227A (22) were administered i.p., whereas only a high dose (30 mg/kg) showed hypolocomotor actions.$^{153,154}$ This is similar to the results obtained in our laboratory; SR57227A (22) elicited saline-like effects when low doses (1.0-10 mg/kg, i.p.) were administered, but sedative-like effects were observed when a high dose of SR57227A (22; 30 mg/kg) was administered s.c. in the mouse locomotor activity assay ($P < 0.01$; Figure 38).$^{155}$ It is difficult to reconcile differences between the published antinociceptive actions of SR57227A (22) with the present investigation, and even more difficult to explain its actions as resulting from sedation, given its lack of effect in locomotor assays (except at a very high dose). But, it might be noted that the single report showing that SR57227A (22) possesses antinociceptive action was published
only as an abstract and that various details (e.g., mouse strain and gender, pre-injection times, time of measurement, and apparatus) were not described. Nevertheless, antinociceptive effects have been produced by other 5-HT₃ receptor agonists [5-HT (16), 2-methyl-5-HT (17), and mCPBG (20)] in various animal models (tail-flick, paw pressure, and formalin assays; refer to Table 4)²⁸,¹²⁷,¹²⁸,¹³¹-¹³³ Therefore, the antinociceptive effects produced by SR57227A (22) are plausible, but inconsistent with the present results.

In the combination studies, albeit mCPBG (20; 0.3-10 mg/kg) augmented the antinociceptive effects of an “inactive” dose of clonidine (7; 0.25 mg/kg) in a dose-dependent manner (Figure 23), SR57227A (22; 0.3-10 mg/kg) had no effect on clonidine’s (7) analgesic properties in the mouse tail-flick assay (Figure 31). It is doubtful that the observed antinociception in the mCPBG/clonidine (20/7) treatment group is due to the hypolocomotor effects of mCPBG (20); the analgesia-producing combination [mCPBG (20; 6.0 mg/kg) + clonidine (7; 0.25 mg/kg)] showed clonidine (7)-like effects in the mouse locomotor activity assay (Figure 30). In addition, both i.p. and i.c.v. administration of mCPBG (20), alone, elicited saline-like effects in rat locomotor activity assays.¹⁵⁶,¹⁵⁷

mCPBG (20) and SR57227A (22) have slightly different receptor binding profiles; mCPBG (20) binds with high affinity at 5-HT₃ receptors (Kᵢ = 17 nM) and with low affinity at α₂-ARs (Kᵢ = 1,445 or 3,800 nM), 5-HT₂A receptors (Kᵢ = 5,700 nM), and 5-HT₂C receptors (Kᵢ = 1,400 nM), and according to the current literature, SR57227A (22) binds with high affinity only at 5-HT₃ receptors (Kᵢ = 103 nM).¹¹¹,¹¹⁵,¹⁴⁹,¹⁵⁸ It seems that SR57227A (22) is relatively selective for 5-HT₃ receptors; however, its affinity for other
receptors was simply reported as >1,000 nM and specific $K_i$ values were not provided (that is, its affinity for these other receptors might be only slightly greater than 1,000 nM). Bachy and co-workers described SR57227A (22) as a highly potent and selective 5-HT$_3$ receptor agonist; depending on the assay conditions, its $K_i$ value at 5-HT$_3$ receptors was approximately 100 nM ($IC_{50} = 199$-$258$ nM). In the same study, SR57227A (22) did not bind to other 5-HT receptors (5-HT$_{1A}$, 5-HT$_{1B}$, 5-HT$_{1C}$, 5-HT$_{1D}$, 5-HT$_2$, and 5-HT$_4$; $IC_{50} > 1,000$ nM, exact $K_i$ values were not reported). Since SR57227A (22) binding affinity at $\alpha_2$-ARs was ambiguous, our laboratory submitted a sample to the PDSP for binding affinity analysis. Using an $\alpha_2$-AR agonist radioligand [$^3$H]clonidine, SR57227A (22) showed little to no affinity for $\alpha_2$-ARs ($K_i$: $\alpha_{2A} = 6,653$, $\alpha_{2B} = 4,990$, and $\alpha_{2C} = 8,222$ nM; Roth, unpublished data; refer to Table 11).

In general, both of these agents [$m$CPBG (20) and SR57227A (22)] bind selectively at 5-HT$_3$ receptors, but it is possible that the behavioral activity of $m$CPBG (20) involves $\alpha_2$-ARs and/or 5-HT$_{2A/2C}$ receptors. This is unlikely because the affinity of $m$CPBG (20) at 5-HT$_3$ receptors is at least 100 times greater than that for the other receptors. Likewise, the lower-affinity 5-HT$_3$ receptor agent SR57227A (22) binds to other receptors, such as $\alpha_{2B}$-ARs, but with very low affinity ($K_i = 5,000$ nM). This binding profile indicates moderate binding selectivity at 5-HT$_3$ receptors (50-fold difference compared to $\alpha_{2B}$-ARs).

The differences observed in the analgesia-potentiating activity of clonidine (7) by $m$CPBG (20) and SR57227A (22) combination studies might be due to species difference. For example, $m$CPBG (20) binds at rat 5-HT$_3$ receptors with 100-times greater affinity than at human 5-HT$_3$ receptors. Also, the 5-HT$_3$ receptor efficacy of
*mCPBG (20)* is species dependent: ferret (53%), mouse (91%), rat (100%), and human (79-99%). Most in vitro and in vivo pharmacological assays indicate that *mCPBG (20)* is a full 5-HT₃ receptor agonist, however, *mCPBG (20)* exhibited partial agonist character in an electrophysiological assay employing NG108-15 cells. More specifically, the *mCPBG (20)* response was 54% of the maximal response produced by 5-HT (16). Similar to most other pharmacological studies, *mCPBG (20)* exhibited a full agonist response in a second electrophysiological study (i.e., utilizing N1E-115 cells). To the best of our knowledge, similar studies have not been conducted with SR57227A (22), but it is possible that this agent also has variable binding affinity and/or efficacy at 5-HT₃ receptors in different species.

Another explanation for the analgesic potentiation observed when *mCPBG (20)*, but not SR57227A (22), is co-administered with clonidine (7) is its selectivity for 5-HT₃ receptor subpopulations. That is, action at 5-HT₃AB receptors, but not 5-HT₃A receptors, might cause a potentiation in clonidine’s (7) antinociceptive effects. If this is the case, then it is plausible that *mCPBG (20)* might act at 5-HT₃AB receptors whereas SR57227A (22) activates 5-HT₃A receptors. This remains to be investigated.

To the best of our knowledge, binding affinities (under the same conditions) at each human receptor subtype (i.e., 5-HT₃A vs. 5-HT₃AB) are unknown for *mCPBG (20)* and SR57227A (22). As reported in the Background section, *mCPBG (20; Kᵢ = 17 nM)* binds at 5-HT₃ receptors (mixture of 5-HT₃A and 5-HT₃AB receptors) with higher affinity than SR57227A (22; Kᵢ = 103 nM). To date, 5-HT₃A receptor affinity for these two agents have been reported, but the experimental conditions, as well as the species, are different. Ito and co-workers reported binding affinity for 5-HT (16; Kᵢ = 339 nM) and
mCPBG (20; $K_i = 224$ nM) at cloned human 5-HT$_3$A receptors transfected in COS-1 cells employing [³H]ramosetron (5-HT$_3$ receptor antagonist) as a radioligand.$^{165}$ Because our laboratory was analyzing the mouse functional activity of SR57227A (22), investigation of the binding affinity at 5-HT$_3$A receptors was of interest to us. SR57227A’s (22; $K_i = 357 \pm 44$ nM) binding affinity at recombinant mouse 5-HT$_3$A receptors was evaluated using [³H]LY 278,584 (5-HT$_3$ receptor antagonist; unpublished data).$^{145}$ Unfortunately, these values are meaningless without the 5-HT$_3$AB binding affinities of both agents. It is also difficult to compare the 5-HT$_3$A receptor binding affinities of these two agents due to dissimilar experimental conditions.

Although, binding affinity has not been reported for each receptor subtype, mCPBG’s (20) functional activity has been evaluated both at 5-HT$_3$A and 5-HT$_3$AB receptors. Two electrophysiological studies were performed and they both suggest that mCPBG (20) has similar potencies at human 5-HT$_3$A and 5-HT$_3$AB receptors (e.g., $EC_{50} = 2.5$ and 2.1 μM, respectively).$^{97,98}$ But, interestingly, mCPBG (20) showed greater efficacy at the homomeric 5-HT$_3$ receptors [5-HT$_3$A receptors: 134%, 5-HT$_3$AB receptors: 79%; efficacy is expressed as % of 5-HT (16) effect].$^{97}$ Assuming that this is how mCPBG (20) behaves in mice, it seems reasonable that mCPBG (20) produces a greater pharmacological effect via 5-HT$_3$AB receptors than at 5-HT$_3$A receptors. Therefore, 5-HT$_3$AB, rather than 5-HT$_3$A, receptor agonism might be responsible for the analgesic potentiation observed in the mCPBG/clonidine (20/7) combination (Figure 23a). If this is the case, it is possible that the lack of analgesic potentiation of clonidine (7) by SR57227A (22) is due to negligible 5-HT$_3$AB receptor activity.
Both mCPBG (20) and the structurally-related analog MD-354 (21) were inactive (i.e., both agents produced saline-like effects) in the tail-flick assay (Figure 22). On the other hand, the 5-HT₃ receptor agonist SR57227A (22) exhibited pronociceptive effects in the mouse tail-flick assay (Figure 33). That is, SR57227A (22)-treated mice showed hyperalgesic effects (or increased sensitivity to pain). There are other reports for the hyperalgesic actions of 5-HT₃ receptor agonists. For example, when 5-HT (16) or 2-methyl-5-HT (17) was applied to human blisters, a hyperalgesic effect resulted. The pain-producing effect evoked by 5-HT (16) was inhibited by the 5-HT₃ receptor antagonist tropisetron (25). However, a hyperalgesic effect for SR57227A (22) has not been previously reported.

Since involvement of α₂-ARs seems to play a role in the potentiation of the antinociceptive actions of clonidine (7) by MD-354 (21), it was initially thought that the potentiating effect observed with mCPBG (20) but not SR57227A (22) in the tail-flick assay might be due to the difference in receptor binding selectivity [i.e., mCPBG (20) may be acting via an α₂-AR and not a 5-HT₃ receptor mechanism, which would explain why a 5-HT₃ receptor agent such as SR57227A (22) that lacks α₂-AR affinity would not potentiate the antinociceptive effects of clonidine (7)]. Hypothetically, if this was correct, a 5-HT₃ receptor antagonist should not attenuate the antinociceptive effects of the mCPBG/clonidine (20/7) combination. In contrast, the 5-HT₃ receptor antagonist tropisetron (25; 0.00001-0.1 mg/kg) attenuated the antinociceptive effect of the mCPBG/clonidine (20/7) combination, which resulted in a U-shaped dose-response curve (Figure 25). Although it is possible that this type of antagonism (i.e., antagonist effect that produces a U-shaped dose-response curve) is sometimes not detected when
a full range of doses is not examined, U-shaped dose-response curves are observed with many 5-HT₃ receptor antagonists [e.g., ondansetron (23)].¹⁶⁶,¹⁶⁷ Blockade of the effect of the mCPBG/clonidine (20/7) combination by the 5-HT₃ receptor antagonist tropisetron (25) indicates that mCPBG (20) may be potentiating clonidine’s (7) analgesic effects via a 5-HT₃ receptor agonist mechanism.

If a 5-HT₃ receptor agonist mechanism is involved with the potentiating effect of clonidine (7) by mCPBG (20), then it would be expected that a 5-HT₃ receptor antagonist [e.g., ondansetron (23)] would block the effect of the combination. Ondansetron (23) did not alter the antinociceptive effect of the mCPBG/clonidine (20/7) combination (Figure 24). It is important to note that previous pharmacological assays involving ondansetron (23) and tropisetron (25) have produced contradictory results.¹⁶⁸,¹⁶⁹ For example, tropisetron (25), but not ondansetron (23), improved phencyclidine-induced cognitive deficits in mice.¹⁶⁸ And, most analogous to the mCPBG (20) studies, our laboratory showed analgesic attenuation in the mouse tail-flick assay by tropisetron (25), but not by ondansetron (23), in the low-dose (1.0 mg/kg) MD-354/clonidine (21/7) combination (Figure 20).³⁴ Therefore, literature precedent suggests that ondansetron’s (23) lack of effect in our combination studies does not necessarily disprove a 5-HT₃ receptor agonist mechanism proposed from the tropisetron (25) results.

Moreover, a locomotor suppressant effect could alter the observed antinociceptive effect in the tail-flick assay. When administered alone, tropisetron (25; 0.2 mg/kg, s.c.) and ondansetron (23; 0.1-1.0 mg/kg, i.p.) showed saline-like effects in the mouse locomotor activity assay.²⁹,¹⁵⁵,¹⁷⁰ Tropisetron (25; 0.2 mg/kg) co-
administered with clonidine (7; 0.25 mg/kg) showed slightly reduced locomotor activity.\textsuperscript{29} However, this attenuation was not statistically different from control [0.25 mg/kg dose of clonidine (7)].\textsuperscript{29}

To date, it is unknown if \textit{m}CPBG (20) crosses the BBB; there is contradictory literature data (summarized in Table 6). Although it is unclear if \textit{m}CPBG (20) behaves as a central agent, mechanistic studies suggest that potentiation of the antinociceptive effects of clonidine (7) by \textit{m}CPBG (20) in the mouse tail-flick assay is due to a central 5-HT\textsubscript{3} receptor agonist mechanism because tropisetron (25), but not tropisetron methiodide, attenuated this effect (Figures 24 and 24). Results from this in vivo assay provide an indication that \textit{m}CPBG (20) can cross the BBB. Similarly, a 5-HT\textsubscript{3} receptor agonist mechanism was postulated for the analgesic potentiation depicted by Peak A in the MD-354/clonidine (21/7) combination studies (Table 12). There is some indication from previous in vivo studies that MD-354 (21) acts as a central agent; MD-354 (21) neither substituted for nor antagonized, but enhanced the stimulus effects of (+)amphetamine in a rat drug discrimination study.\textsuperscript{135} Thus far, although a central mechanism has also been implied in the mouse tail-flick studies, it is unknown if the agonistic behavior of MD-354 (21) is due to central or peripheral activation of 5-HT\textsubscript{3} receptors. Additional mechanistic studies are required (e.g., pretreatment with tropisetron methiodide).

In summary, the tail-flick assay results with \textit{m}CPBG (20) provide evidence for 5-HT\textsubscript{3} receptor agonist potentiation of an “inactive” dose of clonidine (7). This was the same conclusion that was reached from the tail-flick assay results with MD-354 (21; Peak A).\textsuperscript{34} However, the SR57227A (22; 0.3-10 mg/kg) results (Figure 34) indicate that
not all 5-HT$_3$ receptor agonists augment the analgesic properties of clonidine (7). Possible explanations for the lack of potentiation observed upon co-administration of SR57227A (22) and clonidine (7) include: (a) lower 5-HT$_3$ receptor binding affinity of SR57227A (22; $K_i = 103$ nM) in comparison to mCPBG (20; $K_i = 17$ nM), (b) action at different 5-HT$_3$ receptor subtypes (e.g., 5-HT$_3$A or 5-HT$_3$AB receptors), (c) possible offsetting behavioral activity [e.g., pronociceptive effects of SR57227A (22)] due to unknown activity at other receptors, (d) species difference, and that (e) unexamined, higher doses of SR57227A (22; >10 mg/kg) or temporal parameters might produce/influence potentiating activity. The latter explanation is plausible, but it would be difficult to understand if the analgesic potentiation was due to antinociceptive or sedative effects because a 30 mg/kg dose of SR57227A (22) was found to produce hypolocomotor effects in the present investigation (Figure 38). In fact, in a previously reported study, lower i.p. doses of SR57227A (22; 3-10 mg/kg) exhibited saline-like effects, whereas a 30 mg/kg dose (i.p.) significantly reduced locomotor activity ($P < 0.001$) in the mouse locomotor activity assay.\textsuperscript{154}

The role of 5-HT$_3$ receptors in potentiating the analgesic effects of clonidine (7) was evaluated in a second nociceptive mouse model, the hot-plate assay. Similar to the results in the tail-flick assay, when administered alone, both mCPBG (20; 0.3-10 mg/kg) and SR57227A (22; 0.3-10 mg/kg) showed no antinociceptive effects in the hot-plate assay (Figures 28 and 36, respectively); however, a higher, sedative-producing dose of SR57227A (22; 30 mg/kg) showed significant antinociceptive effects in the mouse hot-plate assay (Figure 36). Hence, these “antinociceptive” effects might be attributed to the sedative effect of SR57227A (22).
In combination studies, MD-354 (21) was found to potentiate the antinociceptive effect of clonidine (7) in the tail-flick assay, but not in the hot-plate assay. Reports of contrasting results in tail-flick and hot-plate assays have been documented in the literature; for example, gabapentin attenuated the analgesic actions of the non-selective COX inhibitor metamizol in the mouse tail-flick assay, but did not affect the antinociceptive effects of metamizol in the mouse hot-plate assay. The different effects observed in the tail-flick and hot-plate assays can be explained by different receptor subpopulations (spinal versus supraspinal, respectively) or different receptor mechanisms. In the current study, the ED$_{50}$ dose of clonidine (7; 1.0 mg/kg) was selected so that potentiation or attenuation could be observed when clonidine (7) was co-administered with varying doses of the 5-HT$_3$ receptor agents mCPBG (20) and SR57227A (22) in the hot-plate assay. mCPBG (20; 0.3-10 mg/kg) significantly attenuated the antinociceptive effect (AD$_{50}$ = 0.8 mg/kg) of clonidine (7; Figure 29), but SR57227A (22; 0.3-10 mg/kg) failed to potentiate or attenuate the actions of clonidine (7; Figure 37) in the hot-plate assay. Different pharmacological effects were observed among these three 5-HT$_3$ receptor agents; in combination studies with clonidine (7; 1.0 mg/kg), the antinociceptive effect was not significantly attenuated (i.e., not statistically significant) by MD-354 (21), significantly attenuated by mCPBG (20), and not affected by SR57227A (22). A high dose of MD-354 (21; 30 mg/kg) slightly antagonized the analgesic action of the ED$_{50}$ dose of clonidine (7) in the hot-plate assay. Therefore, the results in the mCPBG [20; structurally similar to MD-354 (21)]/clonidine (7) combination studies were not completely unexpected (Figure 29). MD-354 (21) behaves as a partial agonist at 5-
HT3 receptors and, therefore, could be producing its inhibitory actions via an agonist or antagonist mechanism. In contrast, mCPBG (20) displays full agonist action at 5-HT3 receptors (mouse and human). As a result, it is likely that the inhibitory action of clonidine’s (7) antinociceptive effects by mCPBG (20) and MD-354 (21) in the hot-plate assay is mediated by 5-HT3 receptor agonism.

If mCPBG (20) attenuates the analgesic actions of clonidine (7) in the mouse hot-plate assay via a 5-HT3 receptor agonist mechanism, why doesn’t administration of SR57227A (22) also inhibit the analgesic effect of clonidine (7) in the same assay? Even though inhibition by SR57227A (22) would further support a 5-HT3 receptor agonist mechanism, the lack of attenuation by SR57227A (22) was not too surprising because, as discussed in the Background section, 5-HT3 receptor agonists have notoriously produced varying results in nociceptive animal models (Table 4). For example, mCPBG (20; i.t.) produced saline-like effects, whereas a second 5-HT3 receptor agonist 2-methyl-5-HT (17; i.t.) produced antinociceptive effects in the tail-flick assay. The reason for these varying effects among 5-HT3 receptor agonists remains unclear. It is possible that 5-HT3 receptor subtype selectivity alters the pharmacological effects of these agents. Two known functional 5-HT3 receptor types have been identified: homopentameric 5-HT3A receptors and heteropentameric 5-HT3AB receptors, which are composed of two 5-HT3A and three 5-HT3B receptor subunits. Also, there are three other known 5-HT3 receptor subunits (5-HT3C, 5-HT3D, and 5-HT3E) but, to date, they have unknown function. Unfortunately, the lack of information regarding 5-HT3 receptors, and the affinity of agents at each of those populations, might lead to ambiguous interpretation of pharmacological results.
Following the combination studies that examined the role of 5-HT$_3$ receptors in the analgesia potentiation of clonidine (7), the role of α$_2$-ARs was investigated. It was already determined in mechanistic studies that mCPBG (20)-potentiation of the antinociceptive effect of an “inactive” dose of clonidine (7) in the tail-flick assay, at least in part, involves a 5-HT$_3$ receptor agonist mechanism. Next, mechanistic studies involving α$_2$-AR antagonists were conducted in the mouse tail-flick assay. The non-selective α$_2$-AR antagonist yohimbine (11; 0.01-6.0 mg/kg) blocked the antinociceptive potentiation of clonidine (7) by mCPBG (20) in a dose-dependent manner (Figure 27). This suggests that the combination is not only acting via a central 5-HT$_3$ receptor agonist mechanism, but also affects the analgesic properties of clonidine (7) via α$_2$-ARs.

α$_2$-AR involvement was also observed in the potentiation of clonidine (7) by MD-354 (21); the non-selective, α$_{2A}$-, and α$_{2B}$-AR preferential antagonists [yohimbine (11), BRL44408 (15), and imiloxan (12), respectively] blocked the analgesia-potentiating effect produced by MD-354 (21). MD-354 (21) binds to all three α$_2$-AR subtypes with variable affinity ($K_i$ = 25-4,700 nM; refer to Table 5) and functionally behaves as a partial agonist at α$_{2A}$-ARs [IA = 36% of NE (1) activity; EC$_{50}$ = 1,588 nM]. Additionally, MD-354 (21) seems to behave as a partial agonist at α$_{2B}$- and α$_{2C}$-ARs [IA = 31 and 41% of NE (1) activity, respectively], but its potency is very low (EC$_{50}$ > 10,000 nM for both subtypes). On the other hand, although subtype selectivity was not examined, mCPBG (20) has low affinity at α$_2$-ARs ($K_i$ = 1,445 nM) and seems to behave as an α$_2$-AR antagonist. In this study, mCPBG (20) binding affinity was based on rat brain cortex homogenates and the functional data was based on ex vivo mouse studies, in which mCPBG (20) facilitated NE (1) release in mouse cerebral cortex. Although
mCPBG (20) did produce α₂-AR antagonist actions at high doses, its potency was rather low compared to the yohimbine (11) stereoisomer rauwolscine (i.e., rauwolscine had 340-fold greater potency than mCPBG (20)).

There are two possible ways of interpreting the mechanistic studies involving α₂-AR antagonists co-administered with the MD-354/clonidine (21/7) combination. The analgesic attenuation could be due to blocking the effect of clonidine (7) or MD-354 (21). Conversely, since mCPBG (20) seems to behave as an α₂-AR antagonist, the analgesic attenuation observed in mechanistic studies utilizing the non-selective α₂-AR antagonist yohimbine (11) in combination with mCPBG (20) and clonidine (7) is most likely due to blocking the effect of clonidine (7). mCPBG (20) might potentiate the antinociceptive effect of clonidine (7) in the hot-plate assay if clonidine (7) is able to act at α₂-ARs (i.e., it is essential for clonidine (7) to act at α₂-ARs). In addition, because mCPBG (20) has low binding affinity for α₂-ARs (Kᵢ = 1,445 nM) compared to its affinity for 5-HT₃ receptors (Kᵢ = 17 nM), it is unlikely that the pharmacological effects of mCPBG (20) are due to interaction at α₂-ARs. Nevertheless, it is important to note that, to the best of our knowledge, the binding affinity and functional activity of mCPBG (20) at the three α₂-AR subtypes have not been examined. It is possible that the low affinity data obtained from rat brain cortex homogenates does not depict the affinity of mCPBG (20) at all α₂-AR subtypes (e.g., it is possible that mCPBG (20) displays high affinity at α₂A-AR, but not α₂B- or α₂C-ARs).

Previous literature indicates that the antinociceptive effects of clonidine (7) are due to an α₂A-AR agonist mechanism. And although clonidine (7) binds to all three subtypes of α₂-ARs with similar affinity (refer to Table 2), it behaves as a partial agonist
at $\alpha_{2A}$-ARs and as a very weak partial agonist at $\alpha_{2B}$- and $\alpha_{2C}$-ARs [%$E_{\text{max}}$ = 62, 36, and 37% of NE (1) activity; EC$_{50}$ = 23, 220, and >10,000 nM, respectively; Pohjanoksa and Scheinin, unpublished data].

The non-selective $\alpha_2$-AR agonist TDIQ (6), which is devoid of 5-HT$_3$ receptor affinity, was evaluated in the mouse tail-flick assay. This agent produced no antinociceptive effects when administered alone, but dose-dependently potentiated the analgesic effect of an “inactive” dose of clonidine (7; Figures 39 and 38, respectively). In fact, an isobolographic analysis of a 3:1 and 12:1 fixed ratio dose of TDIQ (6) and clonidine (7) indicated a synergistic potentiation of the antinociceptive effect (Figure 47). Activation of one receptor mechanism presumably produces a simply additive effect (i.e., the co-administration of the combination should produce the theoretical effect based on the individual potencies of the two drugs).$^{174,175}$ Most reports conclude synergy is due to multiple mechanisms (i.e., two drugs acting via different sites, whether that is different anatomical sites or different receptors); a recent study indicated that clonidine (7) and dexmedetomidine produced antinociceptive synergy in mice via a dual receptor mechanism (agonist action at $\alpha_{2A}$- and $\alpha_{2C}$-ARs).$^{176}$ Therefore, the supra-additive effect (or synergistic effect) produced by TDIQ (6) in combination with clonidine (7) suggests multiple mechanisms. For example, the analgesic synergy produced by TDIQ (6) and clonidine (7) could be mediated by an $\alpha_{2A}$-AR agonism as well as either a $\alpha_{2B}$- or $\alpha_{2C}$-AR agonism.

One therapeutic advantage to synergistic drug effects is a decrease in drug doses. This reduced drug dose(s) can theoretically produce efficacy of the desired effect, but reduce efficacy in producing side effects. In the abovementioned
combination studies [e.g., TDIQ (6) and clonidine (7)], a desired antinociceptive effect occurred without affecting clonidine’s (7) sedative side effect. That is, a reduced dose of clonidine (7; 0.25 mg/kg) in combination with TDIQ (6) produced analgesic actions without influencing locomotor activity.

To further understand the mechanism(s) underlying these actions, combination studies were conducted. The mechanistic studies with TDIQ (6) produced similar results compared to MD-354 (21); that is, the α2A-, α2B-, and α2B/2C-AR preferential antagonists [BRL44408 (15), imiloxan (12), and ARC-239 (14), respectively] significantly blocked the analgesia-potentiating effect of an “inactive” dose of clonidine (7) by TDIQ (6) in the tail-flick assay (Figures 42, 43, and 44, respectively). In [35S]GTPγS binding studies, TDIQ (6) behaved as a weak partial agonist at α2A-, α2B-, and α2C-ARs [IA = 22%, 18%, and 22% of NE (1) activity; EC50 = 1,300, >10,000, and 6,230 nM, respectively; Pohjanoksa and Scheinin, unpublished data]. Although TDIQ (6) produces partial agonist action at all three subtypes of α2-ARs, its efficacy (or intrinsic activity) is lower than that of clonidine [7; IA = 62%, 36%, and 37% of NE (1) activity at α2A-, α2B-, and α2C-ARs; Pohjanoksa and Scheinin, unpublished]. Due to its lower intrinsic activity, TDIQ (6) may behave as an α2-AR antagonist when co-administered with clonidine (7). In fact, previous imiloxan (12) studies suggest that α2B-AR antagonism might account for the potentiation of the antinociceptive effects of clonidine (7) in the mouse tail-flick assay (refer to Table 12).31

Based on these in vivo results, it is difficult to determine which α2-AR subtype is responsible for the analgesic potentiation observed in the TDIQ/clonidine (6/7) combination. At this time, none of the α2-AR subtypes can be ruled out. It is possible
that one or more of the receptor subtypes plays a role in this potentiating effect. The results are difficult to interpret because the available α₂-AR antagonists, to date, are only preferentially selective. For example, BRL44408 (15) binds to all three α₂-AR subtypes ($K_i$: $\alpha_{2A} = 5.7$, $\alpha_{2B} = 651$, and $\alpha_{2C} = 150$ nM). Even though BRL44408 (15) shows preferential binding affinity at $\alpha_{2A}$-ARs (e.g., 26-fold over $\alpha_{2C}$-ARs), it is possible that BRL44408 (15) behaves as an $\alpha_{2C}$-AR antagonist at the doses evaluated and, therefore, is able to block the effect of an $\alpha_{2C}$-AR agonist.

Similar to the results obtained in the tail-flick study (Figure 39), TDIQ (6) produced saline-like effects in the hot-plate assay when administered alone (Figure 48). However, unlike the potentiating effect observed in the tail-flick assay (Figure 40), when TDIQ (6) was co-administered with clonidine (7; 1.0 and 2.0 mg/kg doses), analgesic attenuation occurred (Figures 50 and 51). In summary, TDIQ (6) potentiated the antinociceptive actions of clonidine (7) in the mouse tail-flick assay, but blocked clonidine’s (7) effect in the hot-plate assay.

Opposing results in antinociceptive animal models have been previously described; for example, gabapentin augmented the antinociceptive effects of morphine in the hot-plate assay, but attenuated morphine’s effect in the tail-flick assay.$^{171}$ As discussed earlier, these contrasting results could be due to spinal versus supraspinal receptor activation. It is generally thought that the tail-flick response is due to a spinal response, whereas antinociceptive effects produced in the hot-plate assay are mostly due to a supraspinal response.$^{143}$ Therefore, it is possible that TDIQ (6) might attenuate the antinociceptive effect of clonidine (7) in the mouse hot-plate assay via a supraspinal mechanism, but its analgesia-potentiating effect in the tail-flick assay is mediated by
spinal receptors. Conversely, there is some controversial data suggesting that this is not the case (i.e., tail-flick responses may be due to both spinal and supraspinal activation).143

*mCPBG (20) and TDIQ (6) showed similar pharmacological effects in the two thermal nociceptive animal models: analgesic potentiation of an inactive dose of clonidine (7; 0.25 mg/kg) in the tail-flick assay and analgesic attenuation of the $ED_{50}$ dose of clonidine (7; 1.0 mg/kg) in the hot-plate assay. It seems unlikely that *mCPBG (20) and TDIQ (6) share the exact same mechanism of action because of a dissimilar binding profile; *mCPBG (20) binds with high affinity at 5-HT$_3$ receptors ($K_i = 17$ nM), whereas TDIQ (6) binds with high affinity at $\alpha_2$-ARs ($K_i$: $\alpha_{2A} = 75$, $\alpha_{2B} = 97$, $\alpha_{2C} = 65$ nM).53,111,113 On the other hand, the non-selective $\alpha_2$-AR antagonist yohimbine (11) blocked the analgesic potentiation of clonidine (7) by mCPBG (20) which indicates $\alpha_2$-AR involvement in the tail-flick assay (Figure 27).

In previously published hot-plate studies, clonidine’s (7) antinociceptive actions were augmented by the $\alpha_2$-AR agonist guanabenz (9; s.c.) in rats and blocked by the $\alpha_2$-AR antagonist idazoxan (i.p., i.c.v., or i.t) in mice.177,178 Therefore, it seems reasonable that TDIQ (6) may be attenuating clonidine’s (7) analgesic actions in the hot-plate assay via an $\alpha_2$-AR antagonist mechanism.

In summary, combination studies with clonidine (7) and various agents [MD-354 (21), mCPBG (20), SR57227A (22), and TDIQ (6)] have provided evidence of novel pain mechanisms. Clonidine (7), which is a potent analgesic agent, also produces undesired side effects such as sedation. Three of the four agents mentioned above [MD-354 (21), mCPBG (20) and TDIQ (6), but not SR57227A (22)] were able to potentiate the
antinociceptive effects of an “inactive” dose (i.e., a dose that does not produce antinociceptive effects when administered alone) of clonidine (7) in the mouse tail-flick assay. Furthermore, this analgesia-potentiating effect seems to be selective because all three combinations failed to alter the sedative properties of clonidine (7). Specifically, the locomotor “action” of the combinations was similar to that of clonidine (7; 0.25 mg/kg) when administered alone. Not only does this provide support for a selective potentiating effect, but it also indicates that the analgesic potentiation by MD-354 (21), mCPBG (20) or TDIQ (6) is unlikely due to a central depressant effect. When reviewing the mechanistic studies of all three agents, it seems that 5-HT₃ receptor and α₂-AR agonism can potentiate the analgesic effects of clonidine (7) without affecting its sedative properties. To date, it is unclear which α₂-AR subtype(s) is involved in this potentiating effect. One major disadvantage of studying α₂-AR agents is the lack of subtype-selective agents; advancement in this area should enhance our current understanding of α₂-AR pharmacology.

B. Synthesis

1. *meta*-Chlorophenylbiguanide Hydrochloride (20)

The hydrochloride salt of *m*CPBG (20) was synthesized according to a previously published procedure (Scheme 1). The free base of *meta*-chloroaniline (40) was dissolved in absolute EtOH and the hydrochloride salt (41) precipitated upon addition of a 35 M solution of HCl/Et₂O. Compound 41 was purified by recrystallization from
acetone (3x); mp (compared to lit$^{180}$ mp) and tlc analysis with an authentic sample supported its identity and purity. Cyanoguanidine and $m$-chloroaniline hydrochloride (41) were allowed to stir at reflux for 4 h and then cooled to 10 °C. The resulting precipitate was collected by filtration, washed with Et$_2$O, and recrystallized twice from H$_2$O to afford $m$CPBG hydrochloride (20). Product characterization of 20 (mp, $^1$H NMR, and IR) corresponded to previously reported data.$^{181}$

Scheme 1.$^a$

![Scheme 1](image)

$^a$Reagents and conditions: i) HCl/Et$_2$O, absolute EtOH, -10 °C; ii) cyanoguanidine, H$_2$O, reflux for 4 h, 10 °C for 24 h.

The prepared hydrochloride salt of $m$CPBG (20) was used in the abovementioned pharmacological assays (tail-flick, hot-plate, and locomotor activity assays).

2. 2-Amino-7-chloroquinoline Hydrochloride (28)

Compound 28 was prepared in a five-step synthesis starting with the commercially available toluene analog 42 (Scheme 2). Partial dissociation of DMF-DMA occurred in DMF and deprotonation of 42 occurred in the presence of pyrrolidine;
the resulting \( N,N \)-dimethylimmonium ion and toluene (42) anion reacted and upon elimination of a molecule of methanol, 43 was produced in quantitative yield. Oxidative hydrolysis of enamine 43 using NaIO\(_4\) led to the formation of benzaldehyde 44. Compound 44 was converted to 45 upon addition of NaH, diethyl cyanomethylphosponate and anhydrous DMF. In the last step, 45 was cyclized with SnCl\(_2\)-2H\(_2\)O in refluxing absolute EtOH; the resulting free base (28) was converted to a hydrochloride salt.

**Scheme 2.**

\[
\begin{align*}
\text{42} & \xrightarrow{\text{i}} \text{43} & \xrightarrow{\text{ii}} \text{44} & \xrightarrow{\text{iii}} \text{28} & \xrightarrow{\text{iv, v}} \text{45}
\end{align*}
\]

\( \text{i) DMF-DMA, pyrrolidine, DMF, N}_2, 110^\circ\text{C for 1h; ii) NaIO}_4, \text{H}_2\text{O, DMF, rt for 1.5 h; iii) diethyl cyanomethylphosphonate, anhydrous DMF, 0^\circ\text{C for 5 min; iv) SnCl}_2\cdot2\text{H}_2\text{O, absolute EtOH, reflux for 2.5 h; v) HCl/Et}_2\text{O, MeOH.} \)

In the third step of Scheme 2, the isomers of 45 were not separated and purified (i.e., the mixture of \((E/Z)-45\) was used in the final step without further purification). The reaction (step iv; Scheme 2) was monitored by tlc analysis and once the starting material disappeared, the reaction was worked-up. The resulting crude product
consisted of two compounds ($R_f = 0.5$ and 0.9; eluent: $\text{CH}_2\text{Cl}_2/\text{CH}_3\text{OH}/\text{NH}_4\text{OH} = 9:1:0.1$). Following column chromatography, both compounds were fully characterized. Based on $^1\text{H}$ NMR and IR analyses, only $(Z)$-45 cyclized to form the free base of 28 ($R_f = 0.5$) as depicted in Scheme 3. Addition of $\text{SnCl}_2\cdot2\text{H}_2\text{O}$ to $(E)$-45 simply reduced the nitro group to an amine, which resulted in the formation of compound 46 ($R_f = 0.9$) as a light-brown solid (Scheme 3).

**Scheme 3.**

![Scheme 3 with reagents and conditions](image)

*Reagents and conditions: i) $\text{SnCl}_2\cdot2\text{H}_2\text{O}$, absolute EtOH, reflux for 2.5 h.*

Although it was easy to separate 28 and 46 by column chromatography and to subsequently characterize each compound, further analysis was necessary to explain the reaction mechanism. In the first attempt to clarify the results, compound $(E/Z)$-45 was reacted with $\text{SnCl}_2\cdot2\text{H}_2\text{O}$ in absolute EtOH at room temperature, rather than at reflux. It was thought that at the reduced temperature, $(E/Z)$-45 would be simply
reduced into \((E/Z)-3-(2\text{-amino}-4\text{-chlorophenyl})\text{acrylonitrile} \ (46)\) isomers. However, based on tlc analysis, the same two compounds were produced (i.e., compounds that fluoresced under UV light at \(R_f = 0.5\) and 0.9, which corresponded to 28 and 46, respectively). Also, time did not seem to play a role in the reaction because the reaction mixture was allowed to stir for 1 week at room temperature followed by 2 days at reflux and the tlc remained the same.

Since it was speculated that one isomer was reduced to an amine while the other isomer was reduced and then cyclized, the mixture of 45 isomers were separated via combi-flash chromatography (eluent: hexanes/EtOAc = 1:0 to 1:1 over 20 min). Unfortunately, only the Z-isomer (45) was completely purified. In a small-scale reaction, \((Z)-45\) reacted with SnCl\(_2\cdot2\text{H}_2\text{O}\) at room temperature to afford only one product (\(R_f = 0.5\)). That is, the Z-isomer was reduced and subsequently cyclized to form compound 28. Since two products (46 and 28) were formed when \((E/Z)-45\) was added to the reaction, the E-isomer (compound 46) must be unable to cyclize under the experimental conditions. IR analysis aided in the structural characterization; compounds 45 and 46 indicated a nitrile moiety (peak at 2215 cm\(^{-1}\)) whereas compound 28 showed only a baseline signal in the general nitrile region (2200-2300 cm\(^{-1}\)).

3. 2-Amino-7-chloro-1,2,3,4-tetrahydroquinoline Hydrochloride (31)

When planning the synthesis of compound 31, it was thought that it could be prepared from 28 via catalytic hydrogenation (Scheme 4). Careful attention was given to the selection of catalyst because of the concern of dehalogenation of the 7-position
chloro group. For example, palladium and nickel catalysts have previously been used for the partial hydrogenation of quinolines to 1,2,3,4-tetrahydroquinolines.\textsuperscript{182,183} However, these catalysts have also been involved with dehalogenation of aryl halides,\textsuperscript{184,185} such as the 7-chloro group in 28. Due to these concerns, platinum oxide was chosen for the catalytic hydrogenation reaction (Scheme 4). In fact, the chemical literature reported catalytic hydrogenation (conditions: PtO\textsubscript{2}, AcOH, H\textsubscript{2}, rt) of a similar compound (5,6-dichloro-2-methylquinoline).\textsuperscript{186} Therefore, dehalogenation of 28 should not occur under these experimental conditions (attempt #1; Scheme 4).

\textbf{Scheme 4.}\textsuperscript{a}

\begin{center}
\begin{tabular}{c}
\textbf{28} \quad \xrightarrow{X} \quad \textbf{31}
\end{tabular}
\end{center}

\textsuperscript{a}Reagents and conditions for attempts #1-3: 1) PtO\textsubscript{2}, AcOH, H\textsubscript{2}, 15 psi (18 h); 30 psi (24 h); 45 psi (24 h); 60 psi (24 h); 2) PtO\textsubscript{2}, AcOH, HOCl\textsubscript{4}, H\textsubscript{2}, 60 psi (24 h); 3) Rh/Al\textsubscript{2}O\textsubscript{3}, MeOH, H\textsubscript{2}, 50 psi (24 h).

The experimental procedure reported by Ishikawa and co-workers was first employed in a trial reaction before attempting to hydrogenate 28.\textsuperscript{186} In the model reaction, a solution of isoquinoline in AcOH was partially hydrogenated with PtO\textsubscript{2} under H\textsubscript{2} (50 psi) to afford 1,2,3,4-tetrahydroisoquinoline. Both of these agents (starting material and product) were available in our laboratory and therefore, the reaction was monitored by tlc; tlc analysis suggested complete conversion within 18 h (i.e., UV light detected only the product). Although other laboratories have successfully reduced the
pyridine ring of heterocyclic systems (e.g., quinoline and isoquinoline analogs) with these conditions, attempts to reduce 28 to 31 were unsuccessful.

In the first attempt, 28 was subjected to H₂ under atmospheric pressure (≈ 14.7 psi) for 18 h and no reaction occurred (i.e., tlc analysis indicated only starting material). Subsequently, the pressure was altered to determine if it affected the reaction; increased H₂ pressure (30, 45, and 60 psi) on the Parr hydrogenator for 24 h also resulted in no reaction.

Since time and pressure seemed to have no effect on the reaction, modifying the reagents was considered. In the second attempt, a trace amount of perchloric acid was added to the reaction mixture because strong protic acids can act as promoters (substance that increases catalytic activity). The addition of perchloric acid had no effect on the reaction (attempt #2; Scheme 4).

In the third attempt to reduce the pyridine ring of 28, the catalyst was changed to Rh/Al₂O₃, which was based on a published experimental procedure for the selective hydrogenation (i.e., selective reduction of the pyridine and not the benzene ring) of 6-bromoquinoline as well as 2-substituted quinoline analogs such as 2-methylquinoline with catalyst Rh/Al₂O₃ and solvent MeOH in the presence of H₂ under increased pressure (50 bar; ≈ 725 psi). These analogs were interesting cases because the reaction worked in the presence of a halogen substituent and a substituent at the 2-position of quinoline. It is important to note, that conversion of 2-methylquinoline to 1,2,3,4-tetrahydro-2-methylquinoline was only 40% in 22 h whereas after 1 h, 6-bromoquinoline was consumed. Although there was 100% conversion observed in the 6-bromoquinoline reaction, two products were formed: the desired product 6-bromo-
1,2,3,4-tetrahydroquinoline (82%) and the debrominated product 1,2,3,4-
tetrahydroquinoline (18%). In our reaction, 28 was subjected to similar conditions
(Rh/Al₂O₃, MeOH, H₂, 50 psi) for 24 hours, but only starting material was detected. It is
possible that 28 would undergo hydrogenation at increased pressure (e.g., 50 bar as in
the literature procedure), but unfortunately we do not have that capability in our
laboratory.

In addition to the PtO₂ experimental (attempt #1; Scheme 4), Ishikawa and co-
workers described the partial hydrogenation of the quinoline analog, 6-fluoro-2-methyl-
5-(4-methyl-1-piperiziny|)quinoline, with 5% platinum on carbon under atmospheric H₂ in
high yield (91%). Since 28 was prepared in small quantity, trial reactions were first
done with the commercially available dechlorinated starting material (47; 2-
aminoquinoline). Unfortunately, when 47 was exposed to the same conditions, only
starting material fluoresced under UV light (attempt #1; Scheme 5).

Scheme 5.  
\[
\begin{align*}
\text{47} & \quad \text{48} \\
\text{\textbullet NH}_2 & \quad \text{\textbullet NH}_2 \\
\end{align*}
\]

\textsuperscript{a}Reagents and conditions for attempts #1 and 2: 1) 5% Pt/C, AcOH, H₂, 15 psi (24 h); 2) NaCNBH₃, BF₃·OEt₂, MeOH, reflux.

There is another interesting hydrogenation reaction reported in the literature
which used NaCNBH₃ in the presence of boron trifluoride etherate in refluxing MeOH to
selectively reduce the nitrogen-containing ring in quinoline derivatives. In a last attempt to convert 2-aminoquinoline (47) to 2-amino-1,2,3,4-tetrahydroquinoline (48), the same conditions were applied to 47, but over the course of 9 h no appreciable product formed (reaction monitored by tlc analysis: no products fluoresced under UV light and only a very faint spot near the baseline appeared, but over time this spot did not increase in intensity).

To our knowledge, there is no reported reactions involving the reduction of a 2-aminoquinoline analog to its 1,2,3,4-tetrahydro derivative. However, Moon and Hsi tried to directly hydrogenate 3-aminoquinoline. Although it is stated that the direct hydrogenation of 3-aminoquinoline to 3-amino-1,2,3,4-tetrahydroquinoline was unsuccessful, no details of the reaction conditions (e.g., reagents, time, temperature, etc.) were provided. On the other hand, they were able to selectively reduce the pyridine ring following acylation of the amine in the 3-position. Subsequently, the crude amide was hydrolyzed to afford 3-amino-1,2,3,4-tetrahydroquinoline. Due to these results, attempts were made to reduce 7-chloro-2-formamidoquinoline (49) in the same manner (Scheme 6).

**Scheme 6.**

\[ \text{Reagents and conditions: } \text{i) } \text{Ac}_2\text{O}, \text{AcOH}, \text{THF}, \text{N}_2; \text{ ii) } \text{PtO}_2, \text{AcOH or MeOH}, \text{H}_2, 50 \text{ psi (24-60 h); iii) } \text{HCl/EtOH}, 70 \, ^\circ\text{C}. \]
Compound 49 was synthesized by acylating 28 with acetic anhydride (Scheme 6). Unlike the reported results with the 3-formamido derivative, 49 did not reduce to 50. Various experimental conditions were modified to determine if any affected the reaction (e.g., solvents: AcOH and MeOH, time, and pressure). Though most experimental modifications did not seem to change the reaction progress as monitored by tlc analysis (i.e., only starting material was detected), time appeared to alter the tlc. For example, after 3 d on the Parr hydrogenator (50 psi), there were two faint product spots detected on tlc [eluent: EtOAc/MeOH = 20:1; starting material 49 (R\text{f} = 0.5) and products (R\text{f} = 0.3 and 0.8)], but these spots did not increase in intensity and the starting material did not decrease in intensity after an additional 4 d on the Parr hydrogenator. Therefore, the reaction was stopped after a total of 7 d and the two minor products were purified by preparative tlc (eluent: EtOAc/MeOH = 20:1). An insufficient amount was collected by preparative tlc to characterize these compounds. The reaction was repeated on a larger scale, but no products were formed. Synthesis of 31 was abandoned.

4. 3-Amino-6-chloroisouquinoline Hydrochloride (29)

Compound 29 was prepared in a three-step synthesis. First, a nucleophilic aromatic substitution of the commercially available starting material 4-chloro-2-fluorobenzonitrile (51) occurred resulting in a substitution of the aryl halide with a benzylic nitrile. Specifically, the sodium anion of ethyl cyanoacetate reacted with the 2-fluoro group of 51 to produce an ester intermediate and upon refluxing the ester in water, decarboxylation occurred to yield compound 52. The di-nitrile product was
purified by recrystallization from Et₂O (identical mp compared to lit.¹⁹¹ mp). Cyclization of 52 was achieved by adding a solution of HBr in AcOH, allowing the reaction mixture to stir for 1 h and precipitating compound 53 with Et₂O. The resulting crude product was neutralized, dried and purified via column chromatography.

**Scheme 7.**

\[
\begin{align*}
\text{51} & \xrightarrow{i} \text{52} & \text{53} \xrightarrow{\text{iii}} \text{29} \\
\end{align*}
\]

\(^a\text{Reagents and conditions: i) ethylcyanoacetate, NaH, DMSO, 0 °C to rt, 30 min., 90 °C for 90 h, water, reflux, 8 h; ii) HBr, AcOH, Et₂O; iii) n-BuLi in hexanes, anhydrous THF, N₂, -70 °C, 30 min, absolute EtOH.}\]

In the last step of Scheme 7, selective debromination in the 1-position was attempted; such selective debromination has been previously done on a similar compound, 3-amino-1,6-dibromoisoquinoline.¹⁹² However, when a mixture of 3-amino-1-bromo-6-chloroisoquinoline, ammonium formate, tetrakis(triphenyl phosphine) palladium and DMF was heated to 50 °C in a sealed tube, the tlc analysis after only 8 hours (literature procedure reported 48 hour reaction) displayed a very faint product spot and approximately 8 additional spots. It was apparent that purification of each product would be very difficult.

Therefore, in a second attempt, a known catalyst-free reaction was used to try to synthesize 29. In this literature reported procedure, selective debromination of both 1-bromo-3-chlorobenzene and 1-bromo-4-chlorobenzene occurred in high yield (approximately 98%).¹⁹³ Nevertheless, when 53 was reacted with LiAlH₄ in the
presence of DME for 18 hours (submerged in a ultrasound cleaner), no reaction occurred (only starting material fluoresced on the tlc plate and $^1$H NMR indicated starting material only).

In the last attempt to selectively debrominate, compound 53 was reacted with $n$-butyllithium (2.5 M in hexanes) under a N$_2$ atmosphere and followed by ethanolic quenching. This reaction scheme was successfully used to selectively debrominate the 1-position bromo group of 1,3-dibromoisoquinoline.$^{194}$ Successful synthesis of the debrominated product 29 occurred when using the procedure of Muchowski et al.,$^{194}$ but the product was not without impurities. The tlc analysis showed two products; the major spot was 29 and the minor spot was presumably the des-chloro analog of the the product or the des-chloro analog of the starting material (i.e., either 3-aminoisoquinoline or 3-amino-1-bromoisoquinoline, respectively). Upon recrystallization from benzene, pure product 29 as a free base was obtained (mp 232-234 °C) and confirmed by elemental analysis. An attempt was made to convert the free base to an HCl salt, however elemental analysis indicated that it was not a pure HCl salt of 29.

5. **3-Amino-6-chloro-1,2,3,4-tetrahydroisoquinoline hydrochloride (32)**

Similar to the synthesis of 31, attempts to partially hydrogenate 32 were unsuccessful.
Scheme 8.\textsuperscript{a}

\textsuperscript{a}Reagents and conditions: i) PtO\textsubscript{2}, MeOH, H\textsubscript{2}, 50 psi.

Even after reacting 29 with H\textsubscript{2} (50 psi) in the presence of a platinum catalyst for 3 days, only starting material was detected in the reaction mixture based on tlc and \textsuperscript{1}H NMR analyses. The route was abandoned.

6. 2-Amino-7-chloronaphthalene Hydrochloride (30)

Compound 30 was prepared according to literature procedures for similar compounds (Scheme 9).\textsuperscript{195-199}
Addition of nitric acid selectively nitrated the starting material 56 at the meta positions to afford 3,6-dinitro-1,8-naphthalic anhydride (57). Decarboxylation of the anhydride moiety in a quinoline solution with copper powder, as in step ii, was first described by Shepard et al. in 1930.\cite{Shepard1930} Although the mechanism is not completely understood, the literature suggests that quinoline’s basicity and high boiling point facilitates carboxylate anion formation by withdrawing d-electrons from the copper catalyst.\cite{Shepard1930, Shepard1931} In the current case, the decarboxylated product 58 was partially reduced to 2-amino-7-nitronaphthalene (59) by the addition of approximately one equivalent of sodium hydrosulfide. In the fourth and fifth step of Scheme 9, the aryl amine was converted to the aryl chloride via a Sandmeyer reaction. In the last step, reduction of 60 to 2-amino-7-chloronaphthalene (30) occurred under mild conditions (PtO₂, rt, rt).
atmospheric H$_2$) in order to reduce the possibility of dehalogenation; subsequently the free base was converted to a hydrochloride salt via the addition of HCl gas to an ethanolic solution.

7. 2-Amino-7-chlorotetralin Hydrochloride (33)

Compound 33 was prepared according to a literature procedure for similar compounds (Scheme 10).

Scheme 10.$^a$

$^a$Reagents and conditions: i) SOCl$_2$, CH$_2$Cl$_2$, reflux; ii) CH$_2$Cl$_2$, AlCl$_3$, C$_2$H$_4$ (g), -10 °C to 0 °C, H$_2$O; iii) NaBH$_3$CN, NH$_4$OAc, MeOH, rt; iv) absolute EtOH, HCl/EtOH, 0 °C.

The commercially available phenylacetic acid 61 was converted to the corresponding acid chloride 62 upon the addition of thionyl chloride and was subsequently purified under reduced pressure distillation (0.5 Torr, bp 97-103 °C). In the second step (Friedel-Crafts acylation-cycloaddition reaction$^{207}$), purification of AlCl$_3$ via prior sublimation improved the yield of the reaction. A methylene chloride solution of compound 62 was added to a suspension of AlCl$_3$ in CH$_2$Cl$_2$ at -10 to 0 °C under inert conditions (Scheme 10, step ii); ethylene gas was bubbled into the reaction mixture for
30 min, which caused the reaction temperature to slightly increase to 5-10 °C. Although no starting material remained, two products were formed due to two possible cyclization reactions (Scheme 11).

Scheme 11.\textsuperscript{a}

\[ \text{Reagents and conditions: i) } \text{CH}_2\text{Cl}_2, \text{AlCl}_3, \text{C}_2\text{H}_4 (g), -10 ^\circ\text{C} \text{ to } 0 ^\circ\text{C}, \text{H}_2\text{O}. \]

Column chromatography was performed to separate the two tetralones: 5-chloro-\(\beta\)-tetralone (64; 15%) and 7-chloro-\(\beta\)-tetralone (63; 10%); tlc eluent hexanes/EtOAc = 5:1 (\(R_f = 0.6\), purple tlc stain and \(R_f = 0.5\), beige tlc stain, respectively). There were other minor differences between the two products such as 5-chloro-\(\beta\)-tetralone (64) was an oil whereas 7-chloro-\(\beta\)-tetralone (63) was a low melting point solid (mp 37-38 °C). Structural characterization of the two products was determined by H\(^1\) NMR. Although both products showed three aromatic protons in the H\(^1\) NMR spectrum, there were differences in the chemical shifts and splitting patterns.

To synthesize the desired target compound, 63 was converted to 33 via reductive amination followed by hydrochloride salt formation (Scheme 10).
8. 2-Amino-5-chlorotetralin Hydrochloride (65)

Compound 65 was prepared via the same synthetic route as 33 (Scheme 12).

Scheme 12.\textsuperscript{a}

\begin{center}
\includegraphics[width=0.5\textwidth]{scheme12.png}
\end{center}

\textsuperscript{a}Reagents and conditions: i) NaBH\textsubscript{3}CN, NH\textsubscript{4}OAc, MeOH, rt; ii) absolute EtOH, HCl/EtOH, 0 °C.

The starting material 64 was synthesized from the previous reactions (Schemes 10 and 11). And similar to the preparation of 2-amino-7-chlorotetralin (33), reductive amination of β-tetralone 64 produced 2-amino-5-chlorotetralin hydrochloride (65; Scheme 12).

9. 2-Amino-5,7-dichloro-3,4-dihydroquinazoline Hydrochloride (38)

Compound 38 was prepared according to a literature procedure for similar compounds (Scheme 13).\textsuperscript{208-210}
Scheme 13.\textsuperscript{a}

\begin{center}
\begin{tabular}{c}
\includegraphics[width=\textwidth]{scheme13.png}
\end{tabular}
\end{center}

\textsuperscript{a}Reagents and conditions: i) CrO\textsubscript{3}, gl. AcOH, Ac\textsubscript{2}O, 90 °C; ii) S-methylthioisourea sulfate, Na\textsubscript{2}CO\textsubscript{3}, aq. MeCN (80%), reflux to rt, H\textsubscript{2}O; iii) BH\textsubscript{3}∙THF (1M), N\textsubscript{2}, reflux; iv) absolute EtOH, HCl/EtOH, O °C.

The first step was based on a literature procedure\textsuperscript{,208} but unlike what was suggested in the literature, the reaction did not go to completion and therefore, starting material 66 and product 67 remained in the reaction mixture. Perhaps due to similar chemical properties, purification via recrystallization (MeOH, isopropanol, or AcOH) and/or chromatography (column or flash) of isatin 66 and isatoic anhydride 67 was not successful. A second oxidation method was attempted in which a suspension of 4,6-dichloroisatin (66) in glacial AcOH and concentrated H\textsubscript{2}SO\textsubscript{4} was heated to 30 °C and then an aqueous solution of H\textsubscript{2}O\textsubscript{2} was added. However, this reaction did not go to completion as well.

Therefore, the next step was attempted without further purification of 67 because it was thought that it should be easy to purify the product by acid-base extraction. Compound 68 (2-amino-5,7-dichloroquinazolin-4(3H)-one) was prepared by reacting crude isatoic anhydride 67 with S-methylthioisourea sulfate (Scheme 13). An acid-base extraction was used to purify the product 68 and recover the starting material (66) from
the first step. Reduction of the amide with borane resulted in final compound 38 (Scheme 13). The free base was converted to a hydrochloride salt.

10. 2-Amino-3,4-dihydroquinazoline Hydrochloride (39)

The des-chloro analog of 38, 2-amino-3,4-dihydroquinazoline (39), was synthesized by the same procedure as described above (Scheme 14).

Scheme 14.a

![Scheme 14](image)

Reagents and conditions: i) S-methylthioisourea sulfate, Na\(^2\)CO\(_3\), aq. MeCN (80%), reflux to rt, H\(_2\)O; ii) BH\(_3\)·THF (1M), N\(_2\), reflux; iii) absolute EtOH, HCl/EtOH, O °C.

Commercially available isatoic anhydride 69 resulted in omission of the first step described in the synthesis of 38.

Summary: compounds 20, 28, 29 (free base), 30, 33, 38, 39, and 65 were successfully synthesized. Binding affinity at 5-HT\(_3\) receptors has been evaluated for several of the abovementioned synthesized compounds. Compounds 28, 33 and 65 were found to lack affinity at 5-HT\(_3\) receptors; that is, \(K_i > 10,000\) nM. These preliminary binding affinity results indicate that the ring-nitrogen atoms are important for 5-HT\(_3\) receptor binding. 5-HT\(_3\) receptor binding affinity results of the remaining synthesized
compounds will further evaluate the role of the nitrogen atoms and the chloro substituent in MD-354 (21) and conformationally-constrained analogs of MD-354 (21) in 5-HT₃ receptor binding.

C. Molecular modeling

Although MD-354 (21) shows no antinociceptive effects when administered alone, it potentiates the antinociceptive actions of the clinically used analgesic clonidine (7; non-subtype selective α₂-AR agonist) in a synergistic manner in the mouse tail-flick assay due to an α₂-AR mechanism (Table 8).³¹,³⁴ Mechanisms underlying the analgesia-potentiating effect are thought to involve at least an α₂A-AR component.³¹ Radioligand binding assays indicate that MD-354 (21) binds at both low-affinity states (antagonist [ethyl⁻³H]RS-79948-197) and high-affinity states (agonist [¹²⁵I]clonidine) of the three α₂-AR subtypes (Table 5).³¹,³⁴ Furthermore, functional assays show that MD-354 (21) is a weak partial agonist at α₂A-ARs, but an antagonist at α₂B/2C-ARs.³¹ In an attempt to explain the binding affinity and functional activity of MD-354 (21), molecular models were constructed to allow an examination of its binding modes to low- and high-affinity states of α₂A-, α₂B-, and α₂C-ARs.

The α₂-ARs are G protein-coupled receptors (GPCRs) which are integral membrane proteins that are structurally characterized by 7 transmembrane-spanning (TM) helices connected by intra- and extracellular loops, an amino-terminal (Nt) extracellular domain and a carboxyl-terminal (Ct) intracellular domain (Figures 3, 4 and 54). Interaction with agonists induces a conformational change in the receptor that
allows the receptor to associate with G proteins and initiates a signaling cascade that produces an effect. Due to this conformational change in the receptor, it was necessary to model the “inactive” (or low-affinity) and “active” (or high-affinity) state of $\alpha_{2A^{-}}$, $\alpha_{2B^{-}}$, and $\alpha_{2C^{-}}$ ARs.

![Diagram of β2-AR crystal structure](image)

**Figure 54.** X-Ray crystal structure of the $\beta_2$-AR (2RH1): TM1 (red), TM2 (orange), TM3 (yellow), TM4 (green), TM5 (cyan), TM6 (blue), TM7 (magenta), intra- and extra-cellular loops (tan) bound to the inverse agonist (carazolol; gray).\(^{57}\)

There are no high resolution structures of $\alpha_{2A^{-}}$, $\alpha_{2B^{-}}$, or $\alpha_{2C^{-}}$-ARs. Among the known GPCR crystal structures, the $\beta_2$-AR X-ray crystal structure (pdb = 2RH1; 2.4-Å resolution; Figure 54) has the greatest sequence similarity to the three subtypes of $\alpha_2$-
Therefore, this crystal structure, which is in the low-affinity state, was used as a template to generate homology models of $\alpha_2$-ARs. This $\beta_2$-AR X-ray crystal structure mimics the low-affinity state because an inverse agonist (i.e., carazolol) is bound to the receptor (i.e., an inverse agonist binds preferentially to the inactive conformation of the receptor).  

**1. MD-354 (21) rotamers**

MD-354 (21) possesses a rotatable bond (bond between C$^1$ and the aniline N), and exists as an indefinite number of rotamers (Figure 13). Therefore, it was important to first examine the likely conformations of MD-354 (21). There were two ways of examining the possible conformation(s) of MD-354 (21): (a) a systematic conformation search (SYBYL 8.1) and (b) determination of the conformations of arginine and clonidine in their X-Ray crystal structures, both of which have a guanidine moiety.

A systematic search was conducted on MD-354 (21) to determine its lowest-energy rotamers (Tripos Force Field, AM1; SYBYL 8.1). The systematic search was used to calculate the energy associated with the possible torsion angles of the rotatable bond between C$^1$ and the aniline N of MD-354 (21; Figure 55a). In general, syn ($s$) torsion angles are those between 0 and ±90° whereas anti ($a$) correspond to torsion angles between ±90 and 180°. Similarly, stereochemical conformations with a torsion angle between ±30 and 50° are called clinal ($c$) and those between 0 and 30° or 150 and 180° are called periplanar ($p$). When these terms are combined the following ranges of torsion angles are identified: synperiplanar ($sp$) = -30 to 30°, synclinal ($\pm sc$) =
±30 to ±90°, anticlinal (±ac) = ±90 to ±150°, and antiperiplanar (ap) = ±150 to 180° (Figure 55b).

Figure 55. (a) Energy associated with the various torsion angles of the rotatable bond in MD-354 (21) (red: TFF; blue: AM1); (b) the four lowest-energy rotamers of MD-354 (21); +/- synclinal (sc) and +/- anticlinal (ac).
Coincidentally, the torsion angle of arginine (from the Cambridge Structural Database) and clonidine crystal structures match one (i.e., the +sc) of the lowest-energy rotamers of MD-354 (21). Furthermore, the mCPBG crystal structure (57.4 and 301.9° torsion angles) displays similar torsion angles to +sc- and –sc-MD-354 (21) (65 and 295° torsion angles). Due to the results from both conformational analyses, the four lowest-energy rotamers of MD-354 (21) were employed in the docking studies.

2. α2A-Adrenoceptor 3D models

In order to generate the inactive model of α2A-ARs, the sequences of various GPCRs including the human α2A-AR and β2-AR were aligned using ClustalX (other GPCR sequences: human muscarinic ACh M1 receptor, human vasopressin V1a receptor, human dopamine D3 receptor, human δ-opioid receptor and bovine rhodopsin) as described by Bissantz et al. This sequence alignment (Figure 56) is, in general, based on aligning the highly conserved amino acids among GPCRs (e.g., D3.32). When comparing the amino acid sequence of the transmembrane regions (TM1-TM7) of α2A-ARs and β2-ARs, 41% are identical and 68% are similar (e.g., L and V residues are similar, but not identical). Using the ClustalX alignment, the side chains of amino acids within the transmembrane (TM) helices of the β2-AR crystal structure (pdb ID: 2RH1) were mutated to mimic the α2A-AR (Sybyl 8.1). The intra- and extracellular loops of the homology model were based on similar protein loops (Sybyl 8.1).
Figure 56. Amino acid sequence alignment of 6 GPCRs (human muscarinic acetylcholine receptor M1, human vasopressin V1a receptor, human dopamine D3 receptor, human β₂ adrenoceptor, human delta-type opioid receptor and bovine rhodopsin receptor) and human α₂A-AR (ADA2A_HUMAN); the 7 transmembrane helices are highlighted in yellow and highly conserved amino acids amongst GPCRs are highlighted in cyan.
Protein side chains were optimized using a backbone-dependent rotamer library (SCWRL4), and PROCHECK was performed to examine the stereochemistry of the receptor. Protable (SYBYL 8.1) was utilized to check all amino acid bond angles, bond lengths, and torsion angles.

Once the inactive α2A-AR homology model was energy minimized (Tripos Force Field; Gasteiger-Hückel charges, distance-dependent dielectric constant = 4.0), modifications to the receptor were made to mimic the active state: (a) rotating TM6 (-30°; R6.29-V6.60), (b) tilting the extracellular portion of TM5 into the binding pocket (6°; K5.36-A5.49), and (c) ‘turning on’ the toggle switch\textsuperscript{63} (i.e., modifying the $\chi_1$ rotameric state of C6.47, W6.48 and F6.52 to $g^+$, $t$ and $t$, respectively). These modifications were assumed to simulate an active state because they have been observed in other active-state structures of GPCRs.\textsuperscript{61-63} Tilting of TM5 brought residues S5.42 and S5.46 approximately 1 Å closer to D3.32. Rigid rotation of TM6 broke the ionic lock (R3.50–E6.30 C$\alpha$ distance = 12.9 Å) and enlarged the intracellular G protein binding cavity consistent with experimental results.\textsuperscript{62} Side chain conformations of residues on TM5 and TM6 were adjusted using SCWRL4, and manually, to optimize side chain–side chain interactions. PROCHECK was performed which resulted in a Ramachandran plot. This plot indicates which amino acid residues are within the most favorable (red), additional allowed (yellow), generously allowed (khaki), and disallowed (white) regions (Figure 57). As depicted in Figure 57, 90.4% of the amino acids were within the most favorable region (red), 8.8% in the allowed regions (yellow or khaki) and only two amino acids (0.8%) showed disallowed stereochemistry (white): E237 and C401. However, both of these latter two amino acids are located outside of the proposed binding pocket.
and, therefore, for our purposes, these imperfections were ignored and should not impact the docking studies. More specifically, E237, which was just outside the allowable region (Figure 57), is part of IL-3, whereas C401 is part of EL-3.

**Figure 57.** A Ramachandran plot of the active $\alpha_{2A}$-AR homology model (generated by PROCHECK; Sybyl 8.1).
To validate the energy-minimized active $\alpha_{2A}$-AR homology model, the endogenous ligands norepinephrine (NE; 1) and epinephrine (EPI; 2) were docked (GOLD 4.0) into the binding pocket (15-18 Å sphere centered around the conserved aspartate in TM3, D3.32). Since both NE (1) and EPI (2) have a stereocenter, all four isomers were examined in the docking study (NE: ($R$)-1 and ($S$)-1; EPI: ($R$)-2 and ($S$)-2). In the case of both phenylethylamines, the $R$-enantiomers are more active and have higher affinity at $\alpha_{2}$-ARs than those with the $S$-configuration of the $\beta$-OH group. Additionally, $N$-methyl-substituted phenylethylamines, such as 2, have higher binding affinity at $\alpha_{2}$-ARs than unsubstituted analogs, such as 1. Additional SAFIR studies, including other analogs of 1 and 2, which were discussed in greater detail in the Background section, have been published in the past two decades (Figure 5 and Table 1).

Due to extensive SAFIR studies, as well as site-directed mutagenesis studies, of phenethylamines, much is known about the binding mode of these agents, which makes phenethylamines a good tool to help validate the homology model. With support from catecholamine molecular modeling studies, the Easson-Stedman hypothesis suggests a three-point interaction between adrenoceptors and catecholamines [e.g., NE (1) and EPI (2)]: (a) the protonated aliphatic amine, (b) the catecholic hydroxyl groups, and (c) the $\beta$-hydroxyl group (see Table 13 for specific interactions).
Table 13. Interactions between α2-ARs and catecholamines.\textsuperscript{70,85,86}

<table>
<thead>
<tr>
<th>Chemical interaction</th>
<th>α2-AR residue</th>
<th>catecholamine moiety</th>
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</thead>
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<tr>
<td>ionic bond</td>
<td>D3.32</td>
<td>charged amine</td>
</tr>
<tr>
<td>hydrogen bond</td>
<td>S5.42</td>
<td>meta-hydroxyl</td>
</tr>
<tr>
<td>hydrogen bond</td>
<td>S5.46</td>
<td>para-hydroxyl</td>
</tr>
<tr>
<td>hydrogen bond</td>
<td>S2.61 or Y6.55</td>
<td>β-OH</td>
</tr>
</tbody>
</table>

When necessary, constraints were incorporated into the GOLD dockings of the endogenous ligands: H-bond constraints with the highly conserved D3.32, and distance constraints with S5.42 and S5.46. In general, data from site-directed mutagenesis\textsuperscript{85,86,215} and structure-activity relationship (SAR)\textsuperscript{215} studies of epinephrine (2) and its analogs were used to guide the docked poses into the models. In addition to comparing results to the Easson-Stedman hypothesis (Table 13), various characteristics were analyzed when examining the docking results, such as the GOLDscore (the higher the score, the better the docking result is likely to be based on factors such as H-bonding energy, van der Waals energy and ligand torsion strain), potential “unfavorable” interactions (e.g., the ligand is “too close” to the protein backbone; clashing), and favorable bonding distances (e.g., hydrogen bond $\approx$ 3 Å).

Of the four isomers [i.e., (R) and (S) isomers of NE (1) and EPI (2)], (R)-EPI (2; $K_i$ = 13 nM) has the highest binding affinity at α2A-ARs (active state) and, therefore, should display additional and/or stronger interactions with the receptor in comparison to the remaining 3 isomers. As shown in Figure 58, the main ligand–receptor interactions of (R)-EPI (2) observed in the active α2A-AR model were: (a) ionic: $N^+$—D3.32; (b) HB: β-
OH—D3.32, m-OH—S5.42 and p-OH—S5.46; (c) π-π (edge-to-face): F6.51, Y6.55; CH-π: V3.33; (d) π-cation: N⁺—F7.39. The β-OH moiety of (R)-EPI (2) seems to strongly interact (H-bond) with D3.32 whereas in the docking poses of (S)-EPI (2), the additional H-bond interaction with D3.32 was absent (i.e., the distance between the oxygen atoms of the β-OH and D3.32 side chain was > 5Å). This is consistent with the lower binding affinity of (S)-EPI (2) at α²A-ARs ($K_i = 687$ nM; agonist radioligand).
Figure 58. Proposed binding mode of (R)-epinephrine (2) in the active α2A-AR model. Amino acids within 4 Å are shown as capped sticks (grey) and distances (Å) of favorable ionic and HB interactions are shown in orange.

The docked poses of the norepinephrine (1) isomers showed similar results (data not shown). In general, the poses are consistent with binding affinity assay studies of endogenous ligands (and their analogs) that indicate affinity is affected by: β-OH ((R)-
isomer > (S)-isomers by ≈ 20-fold; presence > absence by ≈ 8-fold), \( m \)-OH (presence > absence by ≈ 100-fold); \( p \)-OH (presence > absence by ≈ 30-fold). These favorable interactions have been suggested by site-directed mutagenesis studies and are consistent with previous models.\(^{86,215,216}\)

The four lowest-energy rotamers of MD-354 (21), as interpreted from both conformational analyses, were docked in the abovementioned active model of the \( \alpha_{2A} \)-AR (Figure 55). After the MD-354 (21) rotamers were docked, energy minimization was implemented in order to optimize the bonding interactions between ligand and receptor. The major bonding interactions observed in the docked poses of MD-354 (21) rotamers include: (a) an ionic interaction between both the aniline and terminal nitrogens and D3.32 and (b) hydrogen bonding between the \( m \)-Cl group and either S5.42 or S5.46, with optimal bond distances (i.e., approximately 3 Å; Figure 59 and Table 14a). There are, also, additional hydrophobic interactions observed in the proposed binding mode of MD-354 (21) at the active \( \alpha_{2A} \)-ARs (e.g., V3.33, F6.51, F7.35 and F7.39; Figure 59).
Table 14. Distances (Å) of favorable HB and ionic interactions observed in proposed binding mode between ligands and the (a) active and (b) inactive α2A-ARs.

(a)

<table>
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<tr>
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(b)

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</table>
Figure 59. Proposed binding mode of –ac- (magenta) and +sc- (orange) MD-354 (21) in the active α2A-AR model. Amino acids within 4 Å are shown in capped sticks (grey) and distances (Å) of favorable HB or ionic interactions are shown in orange.
Figure 60. Proposed binding mode of +sc-MD-354 (21) in the active $\alpha_{2A}$-AR model; close-up of the interaction between the guanidine-D3.32 hydrogen bond network with the aryl ring of F7.39. D3.32 and F7.39 are shown in capped sticks (grey) and distances (Å) of favorable HB interactions are shown in orange whereas the centroid-to-centroid distance between the aryl ring of F7.39 and the 6-membered ring formed between the guanidine and D3.32 are shown by the black arrow.

In the inactive model of $\alpha_{2A}$-ARs, MD-354 (21) docked in a similar manner as compared to the active-state docking pose. Although the interaction with the TM5 residues was minimal (i.e., the distance between the $m$-Cl group and the serine residues of TM5 was not optimal for halogen bonding; Table 14b), a more favorable interaction with all three nitrogen atoms of the guanidine moiety was observed (Figure 61 and Table 14b). Measurements between the heavy atoms indicate a favorable bonding distance between the aniline N and D3.32, the terminal amine and D3.32, and the other terminal amine and Y6.55.
Figure 61. Proposed binding mode of +sc-MD-354 (21) in the inactive α_{2A}-AR model. Amino acids within 4 Å are shown in capped sticks (grey) and distances (Å) of favorable HB or ionic interactions are shown in orange.
Figure 62. Proposed binding mode of +sc-MD-354 (21) in the inactive α2A-AR model; close-up of the interaction between the guanidine-D3.32 hydrogen bond network with the aryl ring of F7.39. D3.32 and F7.39 are shown in capped sticks (grey) and distances (Å) of favorable HB interactions are shown in orange whereas the centroid-to-centroid distance between the aryl ring of F7.39 and the 6-membered ring formed between the guanidine and D3.32 are shown by the black arrow.

Furthermore, the bonding network between the guanidine moiety of MD-354 (21) and the aspartate carboxylate moiety (D3.32) is stacked over the aromatic ring of F7.39 in both the inactive and active α2A-AR models (Figures 60 and 62). The centroid-to-centroid distance, as shown in these figures, indicates that the 6-membered ring formed by the hydrogen bonding network between the guanidine moiety of MD-354 (21) and the carboxylate group of D3.32 has a slightly stronger parallel-stacking interaction with the
aryl ring of F7.39 in the inactive state (3.6 Å) in comparison with the active state (4.0 Å) of the α2A-AR models.  

3. α2B-Adrenoceptor 3D models

Since the sequence similarity within the TM regions is greater between α2A- and α2B-ARs (94%) compared to α2B-ARs and β2-ARs (66%), α2B-AR homology models were generated based on the previously generated α2A-AR models. The “active” α2A-AR model, which was previously supported by simulating the proposed binding mode of the neurotransmitters (i.e., the binding mode based on site-directed mutagenesis results and other homology models), was used as the template for the “active” α2B-AR model. First, the amino acid side chains among the transmembrane helices were mutated to mimic the α2B-AR sequence. The intra- and extracellular loops were replaced by protein loops with similar sequences and then the side chains were mutated if necessary (Sybyl 8.1). All protein side chains were optimized using a backbone-dependent rotamer library (SCWRL 4). As a final assessment, PROCHECK was performed to examine the stereochemistry of the receptor and Protable was used to check all amino acid bond angles, bond lengths, and torsion angles (SYBYL 8.1). Protein modifications were manually made when necessary; for example, the χ1 torsion angle of S5.42, which has been implicated in neurotransmitter binding, was modified so that the serine side chain pointed into the binding pocket. Protein modifications were followed by energy minimization in order to optimize ligand—receptor interactions.
The two best binding modes of MD-354 (21) (i.e., those with the most optimal bonding interactions) at the active $\alpha_{2B}$-ARs showed favorable ionic interactions with the conserved D3.32 (bonding distance = 2.7-3.0 Å), as well as hydrogen bonding interaction between the terminal amine of MD-354 (21) and Y5.38 (Table 15a and Figure 63). Furthermore, only one MD-354 (21) rotamer displayed an interaction with TM5. The proposed binding mode of the –ac-MD-354 (21) rotamer showed favorable distance (approximately 3 Å) between the $m$-Cl moiety and a serine residue of TM5 (S5.46); that is, a halogen bond interaction was observed between the ligand and receptor (Table 15a and Figure 63).
Table 15. Distances (Å) of favorable HB and ionic interactions observed in proposed binding mode between ligands and the (a) active and (b) inactive α<sub>2B</sub>-ARs.

(a)

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(b)

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Figure 63. Proposed binding mode of –ac- (magenta) and +sc- (orange) MD-354 (21) in the active α₂B-AR model. Amino acids within 4 Å are shown in capped sticks and distances (Å) of favorable HB or ionic interactions are shown in orange.

In the inactive model of α₂B-ARs, three conformers of MD-354 (21) showed good ionic interactions with the conserved aspartate residue (D3.32), as well as, hydrogen
bonding with Y6.55 and either the terminal amine or $m$-Cl group (dependent on the rotamer; Table 15b and Figure 64).

Figure 64. Proposed binding mode of $-$sc- (green), +ac (magenta), and +sc- (orange) MD-354 (21) in the inactive $\alpha_{2B}$-AR model. Amino acids within 4 Å are shown in capped sticks and distances (Å) of favorable HB or ionic interactions are shown in orange.
As in the active and inactive models of α₂A-ARs, parallel stacking (i.e., a π-π interaction) was observed between the bonding network of the amines in MD-354 (21) and D3.32 with F7.39 in the inactive model only (i.e., not in the active model) of α₂B-ARs (centroid-to-centroid distance = 3.6 Å; Figure 64).

4. α₂C-Adrenoceptor 3D models

The active model of the α₂C-AR was generated in a similar manner to that of the α₂B-ARs. That is, the active α₂A-AR model was mutated to simulate the α₂C-AR sequence, loopsearch was conducted to incorporate possible loop configurations, SCWRL was conducted, protein modifications were made if necessary and the receptor was energy minimized. Next, the NTs [(R)- and (S)-isomers of NE (1) and EPI (2)] were docked and the resulting ligand—receptor complex was energy minimized (data not shown). This model (with the ligand removed) was used for subsequent MD-354 (21) dockings.

The two best binding modes of MD-354 (21) in the active α₂C-AR model showed favorable bonding distances for a halogen bond between the m-Cl group of 21 and S5.46 (≈3.1 Å), as well as ionic interactions between the amines of 21 and D3.32 and Y5.38 (≈2.7-3.0 Å) (Figure 65).
Figure 65. Proposed binding mode of –ac- (purple) and +sc- (orange) MD-354 (21) in the active α2C-AR model. Amino acids within 4 Å are shown in capped sticks (grey) and distances (Å) of favorable HB or ionic interactions are shown in orange.

MD-354 (21) docking studies with the inactive α2C-AR model proved to be difficult; MD-354 (21) did not seem to bind favorably into the binding pocket. That is, MD-354 (21) would sometimes interact with the conserved aspartate D3.32, but would never reach the other side of the binding pocket near TM5 regardless of which rotamer of MD-354 (21) was utilized in the docking study (data not shown). Unsuccessful
attempts to influence the binding mode of MD-354 (21) in the inactive $\alpha_{2C}$-AR model were made. Manually docking MD-354 (21) closer to TM5, as well as additional binding constraints in GOLD (e.g., distance constraints between the $m$-Cl group of MD-354 (21) and the conserved TM5 serines), resulted in unfavorable interactions and therefore, upon energy minimizations, 21 moved away from TM5.

5. Discussion

3D molecular modeling studies suggest that MD-354 (21) might bind to the “active” $\alpha_{2A}$-AR model in a manner similar to that of epinephrine (2). More specifically, when superimposing $+sc$-MD-354 (21) and $(R)$-EPI (2) docked poses, the terminal amines, as well as the $m$-hydroxyl and chloro groups, overlap (Figure 66). In turn, these functional groups appear to interact with the same amino acid residues (i.e., ionic: N$^+$—D3.32; HB: $m$-OH—S5.42 or $m$-Cl—S5.42; Figure 66). Although the aromatic moiety and one of the terminal amines of $-ac$-MD-354 (21) does overlap with the docked pose of $(R)$-EPI (2), the $m$-Cl group does not overlap with the $m$-OH of $(R)$-EPI (2) (Figure 66). Alternatively, this $m$-Cl group overlaps with the unsubstituted $m$-position of $(R)$-EPI (2). Therefore, the docked pose of $-ac$-MD-354 (21) does not display an optimal interaction with S5.42, but may interact with S5.46 (bonding distance = 3.0 Å).
Figure 66. Proposed binding mode of (R)-Epinephrine (2) (magenta), –ac- (orange) and +sc- (green) MD-354 (21) in the active $\alpha_{2A}$-AR model. Key amino acids of $\alpha_{2A}$-ARs are shown in capped sticks (grey).

Based on the molecular modeling studies, it is possible that MD-354 (21) has a greater binding affinity at the low affinity state (i.e., inactive model of $\alpha_{2A}$-ARs) in comparison to the high affinity state because of increased interactions with the receptor. In the proposed binding mode of MD-354 (21) at the inactive $\alpha_{2A}$-ARs, there were three amine—receptor interactions (D3.32 and Y6.55), all of which were in optimal distance from each other (i.e., approximately 3 Å), but no halogen bonding with TM5 (e.g., $m$-Cl—S5.42 or S5.46). When evaluating all docked poses of the four lowest-energy rotamers of MD-354 (21) in the inactive $\alpha_{2A}$-AR model, the closest measurement
between the \( m \)-Cl group and the TM5 serine residues was 3.8 Å, which is not optimal for a halogen bond. In general, a halogen bond, which is a short interaction between a carbon-bonded halogen [e.g., the \( m \)-Cl moiety of MD-354 (21)] and a carbonyl, hydroxyl, charged carboxylate, or phosphate group (e.g., S5.42 or S5.46 of \( \alpha_{2A} \)-ARs), is optimally less than 3.3 Å when chlorine is the halogen.\(^{218}\) In general, the binding mode of MD-354 (21) contains three strong amine—receptor interactions in the inactive state, whereas it contains only 2 amine—receptor interactions and a relatively weak halogen bond in the active state. It is hypothesized that this difference in interactions provides support for the MD-354’s (21) greater binding affinity (less than 10-fold difference between the “active” and “inactive” \( \alpha_{2A} \)-ARs; see Table 5 for \( K_i \) values) at the “inactive” state.

The \( \pi \)-\( \pi \) stacking interaction (i.e., the bonding network between the guanidine moiety of MD-354 (21) and the aspartate carboxylate moiety (D3.32), which is stacked over the aromatic ring of F7.39) has been previously found between the H-bonding network between R (the guanidinium moiety) and E or D (the carboxylate moiety) and the aromatic moiety of a tyrosine residue.\(^{217}\) In this particular example, the distance between the center of the hydrogen bonding network and the center of the aromatic residue was 3.7 Å.\(^{217}\) This additional interaction in the proposed binding mode of MD-354 (21) in the inactive state of \( \alpha_{2A} \)-ARs may be one of the factors involved with increased binding affinity as compared to the active state (Figures 60 and 62).

It was not obvious as to how MD-354 (21) could behave as a weak partial agonist at \( \alpha_{2A} \)-ARs, while having a greater binding affinity to the low-affinity state of the receptor. However, it is noted, that the docking studies described above do indicate that MD-354
only interacts with the conserved TM5 serines (S5.42 or S5.46) when α₂A-AR is in an active conformation. That is, modifications to the inactive α₂A-AR model brought the top portion of TM5 further into the binding pocket, which allowed the m-Cl group of MD-354 (21) to get close enough to either S5.42 or S5.46 for a favorable halogen bond. As it has been previously proposed that the movement of TM5 is an important conformational change in GPCR activity, the interaction of the ligand and the TM5 residues might be key in keeping a receptor in its active state. Therefore, the agonist activity of MD-354 (21) at α₂A-ARs may be due to its halogen bonding with S5.42 or S5.46. Further, it is proposed that MD-354 (21) does not produce full agonist activity because halogen bonds are not extremely strong.

When comparing the proposed binding modes of MD-354 (21) in the active and inactive α₂B-AR models, one difference is that the four lowest-energy conformers of MD-354 (21) do not get close enough to TM5 to have favorable bonding distances between the m-Cl group of 21 and the conserved serines, S5.42 and/or S5.46, in the inactive model (Table 15). Secondly, in the active α₂B-AR model, F7.39 was positioned too far away (>5 Å) from the guanidine moiety of MD-354 (21) to provide a parallel-stacking interaction. Furthermore, the hydrogen bonding interactions between the guanidine of 21 and the carboxylate group of D3.32 were not optimal; that is, they did not form a 6-membered ring parallel to the aryl ring of F7.39 (as shown in Figure 63). It is possible that the additional parallel stacking interaction of MD-354 (21) in the inactive α₂B-AR model with the TM7 phenylalanine (F7.39), prevents the ligand from strongly interacting with the other side of the binding pocket, specifically with the TM5 serines (S5.42 and S5.46).
When comparing the two α2B-AR models, it is proposed that the approximately 10-fold difference in binding affinity of MD-354 (21) at the “active” and “inactive” α2B-ARs (Kᵢ = 25 and 220 nM at agonist [¹²⁵I]clonidine and antagonist [³H]RX 821002 sites; Table 5) may be due to the halogen bond interaction between the m-Cl group and S5.46 observed in the –ac-MD-354 (21) binding mode in the active α2B-AR model (Figure 63). As for the antagonist functional data for MD-354 (21) at α2B-ARs, it is possible that the parallel-stacking interaction (between F7.39 and the hydrogen bonding network of the guanidine moiety of MD-354 (21) and the carboxylate group of D3.32) reduces interaction with TM5 and therefore, affects MD-354’s (21) activity at α2B-ARs.

In the docking studies for the active α2C-AR model, the four lowest-energy conformers of MD-354 (21) showed favorable bonding distances to indicate ionic interactions between amines of 21 and D3.32 and Y5.38, as well as halogen bonding interactions between the m-Cl group of 21 and S5.46 (Figure 65). On the other hand, the conformers of MD-354 (21) did not show optimal interactions when docked to the inactive α2C-AR model; in fact, MD-354 (21) did not always reach the binding pocket (i.e., it did not always interact with the conserved aspartate D3.32). Although not too much can be concluded, these types of results in a docking study are indicative of a relatively low binding affinity.

In summary, the homology modeling results indicate that the difference in binding affinity of MD-354 (21) at the low- and high-affinity states of α2A-ARs may be due to the amine—receptor interactions, which are stronger in the inactive α2A-AR model than in the active α2A-AR model, whereas the binding affinity difference of MD-354 (21) at the low- and high-affinity states of α2B-ARs seem to be due to the additional halogen bond
interaction between the \( m \)-Cl group of \( \text{21} \) and the conserved TM5 serine (S5.46) in the active \( \alpha_2 \text{B-ARs} \). The inability of the lowest-energy conformer of MD-354 (21) to always bind in the binding pocket (i.e., the pocket centered around the conserved D3.32) of the inactive \( \alpha_2 \text{C-AR model} \) correspond to the low binding affinity. Overall the above results are only speculative, and remain to be further investigated (or documented) by mutagenesis studies.
V. Conclusions

One goal of the current project was to further investigate the mechanism of action of the selective analgesia-potentiating effect of clonidine (7) by MD-354 (21). As previously reported, co-administration of MD-354 (21) and clonidine (7) produces a biphasic analgesic effect in the mouse tail-flick assay (Peaks A and B, Figure 12) and mechanistic studies suggested that the analgesic potentiation is due, at least in part, to a 5-HT$_3$ receptor and an α$_2$-AR mechanism.$^{29,33,34}$

In the present investigation, the structurally similar, yet more established, 5-HT$_3$ receptor agonist mCPBG (20), also produced saline-like effects when administered alone (Figure 22), but potentiated the antinociceptive effect of an “inactive” dose of clonidine (7) in the mouse tail-flick assay (Figure 23a). Similar to the MD-354/clonidine (21/7) mechanistic studies, attenuation of the antinociceptive effect of the mCPBG/clonidine (20/7) combination by the 5-HT$_3$ receptor antagonist tropisetron (25; Figure 25), as well as the non-selective α$_2$-AR antagonist yohimbine (11; Figure 27), indicated that 5-HT$_3$ receptors and at least some subtypes of the α$_2$-AR are involved in mCPBG’s (20) potentiating effect in the mouse tail-flick assay. Furthermore, since the 5-HT$_3$ receptor antagonist tropisetron methiodide, that does not readily cross the BBB,$^{116}$ failed to block the analgesic effect produced by the mCPBG/clonidine (20/7) combination (Figure 26), it seems that the role of 5-HT$_3$ receptors in the potentiating mechanism may be centrally-mediated. Similar to the MD-354 (21) results presented in
previous investigations,\textsuperscript{29,33} \textit{mCPBG}'s (20) potentiation of the antinociceptive effects of clonidine (7) is a selective effect; that is, a dose combination of \textit{mCPBG} (20, 6.0 mg/kg) and clonidine (7; 0.25 mg/kg), which produce a statistically significant increase in antinociceptive effects (% MPE = 68.0) in the tail-flick assay, did not affect the locomotor effects of clonidine (Figure 30).

Unlike the potentiation effect observed in the mouse tail-flick assay, \textit{mCPBG} (20) attenuated clonidine’s (7) antinociceptive effect in the mouse hot-plate assay (Figure 29). This result was also observed when the structurally similar 5-HT\textsubscript{3} receptor agonist MD-354 (21) is co-administered with clonidine (7) in the mouse hot-plate assay.\textsuperscript{33}

The previous MD-354 (21)\textsuperscript{34} and current \textit{mCPBG} (20) studies both indicate that 5-HT\textsubscript{3} receptors play a role in the analgesia-potentiating effect of clonidine (7). Furthermore, the tropisetron (25) and tropisetron methiodide mechanistic studies suggest that \textit{mCPBG} (20) potentiates the antinociceptive effects of clonidine (7), at least in part, due to a central 5-HT\textsubscript{3} receptor mechanism. Therefore, SR57227A (22), a known centrally-acting 5-HT\textsubscript{3} receptor agonist, was selected as a pharmacological tool to evaluate central versus peripheral activity. When SR57227A (22; 0.3-10 mg/kg doses) was administered alone, saline-like effects were observed in the mouse tail-flick (Figure 31) and hot-plate (Figure 36) assays. In fact, in a modified tail-flick assay wherein radiant heat is adjusted, dose-dependent hyperalgesic effects were produced in SR57227A (22)-treated mice (Figure 33). At higher doses, SR57227A (22; 30 mg/kg) produced antinociceptive effects in the mouse tail-flick (Figure 31) and hot-plate (Figure 36) assays. However, locomotor activity results indicated that this high dose also produces significant hypolocomotor actions in comparison to saline (Figure 38), which
can misleadingly suggest that a high dose of SR57227A (22; 30 mg/kg) produces antinociceptive effects.

Unlike the other 5-HT₃ receptor ligands studied [MD-354 (21) and mCPBG (20)], SR57227A (22) did not attenuate or potentiate the antinociceptive actions of an “inactive” dose (Figure 34) or an ED₅₀ dose (Figure 35) of clonidine (7). SR57227A (22), also, had no effect on the antinociceptive effects of clonidine (7) in the mouse hot-plate assay (Figure 36). Because it has been previously shown that SR57227A (22) behaves as an agonist at central 5-HT₃ receptors¹¹⁵ and the abovementioned results indicate that SR57227A (22) does not alter the antinociceptive effects of clonidine (7), it might be speculated that MD-354 (21) potentiates the analgesic actions of clonidine (7) via a peripheral 5-HT₃ receptor mechanism, but this is highly unlikely as already described above and in the Discussion.

Since previous mechanistic studies of the analgesia-potentiating effect of clonidine (7) by MD-354 (21) also suggest a role for α₂-ARs (e.g., an α₂-AR agonist mechanism in Peak A),³¹ TDIQ (6), a non-selective α₂-AR agonist devoid of 5-HT₃ receptor activity, was selected as a pharmacological tool to examine the potential α₂-AR mechanism. In both antinociceptive assays, TDIQ (6) showed saline-like effects when administered alone (tail-flick assay: Figure 39; hot-plate assay: Figure 48). However, studies with co-administration of TDIQ (6) and clonidine (7; “inactive” dose) in the mouse tail-flick assay indicated potentiation of the antinociceptive effects of clonidine (7) in a dose-dependent manner (Figure 40). This is analogous to the MD-354/clonidine (21/7) results previously reported.³¹
Furthermore, since both clonidine (7) and TDIQ (6) are non-selective $\alpha_{2A/2B/2C}$-AR agonists, TDIQ’s (6) potentiation of clonidine (7)-induced antinociception might simply be an additive effect of the two agents. However, an isobolographic analysis indicated that TDIQ (6) potentiates the analgesic actions of clonidine (7) in a synergistic (or superadditive) manner in the mouse tail-flick assay [3:1 and 12:1 fixed ratios for TDIQ (6) and clonidine (7), Figure 47]; that is, the isobologram suggested that the antinociception produced by the combination of drugs [TDIQ (6) and clonidine (7)] is greater than the sum of the individual effects of the component drugs.

In order to determine the mechanism of action associated with TDIQ’s (6) potentiating effect of the antinociceptive actions of an “inactive” dose of clonidine (7), various $\alpha_2$-AR antagonists were co-administered with the TDIQ/clonidine (6/7) combination. Since the selected $\alpha_2$-AR antagonists, BRL44408 (15; preferentially selective at $\alpha_{2A}$-ARs), imiloxan (12; preferentially selective at $\alpha_{2B}$-ARs) and ARC-239 (14; preferentially selective at $\alpha_{2B/2C}$-ARs), produced saline-like effects when administered alone, but blocked the antinociceptive effect of the TDIQ/clonidine (6/7) combination (Figures 42, 43 and 44), there is support for an $\alpha_{2A}$- and $\alpha_{2B}$-AR role in the mechanism and, further, a role for $\alpha_{2C}$-AR cannot be ruled out. These results support the hypothesis that MD-354 (21) could be potentiating the analgesic actions of clonidine (7) via an $\alpha_2$-AR agonist mechanism.

Thus, potentiation of the analgesic actions of clonidine (7) by MD-354 (21) might be attributed to its unique 5-HT$_3$ receptor/$\alpha_2$-AR character (Peak A, Figure 12).

As indicative of the abovementioned pharmacological studies, there is support for a 5-HT$_3$ receptor mechanism in the selective potentiation of the antinociceptive actions...
of clonidine (7) by MD-354 (21), which leads to the next goal of the present investigation: the exploration of conformationally-constrained rotamers of the 5-HT3 receptor agonist MD-354 (21). Preliminary results indicated that when MD-354 (21) was constrained into a quinazoline ring to form two MD-354 (21) rotamers, 2-amino-7-chloro-3,4-dihydroquinazoline (26) and 2-amino-5-chloro-3,4-dihydroquinazoline (27), 26 more closely mimics the binding profile of MD-354 (21) (Figure 13 and Table 7). Therefore, 26 was used as the parent compound in the present investigation which explored the role of the ring nitrogen atoms and the chloro substituent in binding at 5-HT3 receptors.

In order to explore the role of the ring nitrogen atoms, procedures to synthesize compounds 28-33 (Figure 14) were developed, but only compound 28, 29, 30 and 33 were successfully synthesized (Schemes 2, 7, 9 and 10). Additionally, compound 65 was also synthesized because its precursor was a minor product in the reaction scheme to synthesize 33 (Schemes 11 and 12). Compounds 38 and 39 (Figure 16) were successfully prepared in order to study the role of the chloro substituent (Schemes 13 and 14). Binding affinity at 5-HT3 receptors have been evaluated for compounds 28, 33 and 65, all of which lacked affinity at 5-HT3 receptors ($K_i > 10,000$ nM). Due to these preliminary binding results, it is evident that the nitrogen atoms of the conformationally-constrained analogs of MD-354 (21) are important for 5-HT3 receptor binding. The conformationally-constrained MD-354 (21) analog 28 is missing one of the two terminal amines of MD-354 (21) or when comparing to 26, it is missing the 3-position amine. Both MD-354 (21) and 26 display high affinity at 5-HT3 receptors ($K_i = 35$ and 34 nM, respectively, Table 7) whereas the des-amino analog 28 lacks 5-HT3 receptor binding affinity ($K_i > 10,000$ nM), which suggests that at least one, if not both, of the MD-354
(21) terminal amines is necessary for 5-HT_3 receptor binding. Furthermore, no matter which meta-position the chloro substituent is in, when the aniline and 3-position nitrogen atoms are missing, 5-HT_3 receptor binding is abolished. For example, when comparing compounds 26 \((K_i = 34 \text{ nM})\) with 33 \((K_i > 10,000 \text{ nM})\), and 27 \((K_i = 1021 \text{ nM})\) with 65 \((K_i > 10,000 \text{ nM})\), 5-HT_3 receptor binding affinity is reduced by at least 300- and 10-fold, respectively (Table 7). 5-HT_3 receptor binding affinity results of the remaining synthesized compounds will further evaluate the role of the nitrogen atoms and the chloro substituent in MD-354 (21) and conformationally-constrained analogs of MD-354 (21) in 5-HT_3 receptor binding.

Just as the present investigation showed that various 5-HT_3 receptor [e.g., mCPBG (20) and SR57227A (22)] and α_2-AR [e.g., TDIQ (6)] ligands potentiated the antinociceptive actions of clonidine (7) via 5-HT_3 receptor or α_2-AR mechanisms, previous pharmacological studies indicated that there was a 5-HT_3 receptor and α_2-AR mechanism involved in clonidine’s (7) analgesic potentiation by MD-354 (21) in the mouse tail-flick assay. Since MD-354 (21) shows varied binding affinities and functional activity at the α_2-AR subtypes, the final goal of the current studies was to explain these subtype differences via examination of the binding mode of MD-354 (21) to graphic receptor models of low- and high-affinity states of α_{2A}^-, α_{2B}^- and α_{2C}-ARs.

In order to examine the binding mode of MD-354 (21) at α_{2A}^-, α_{2B}^- and α_{2C}-ARs in their inactive and active states, it was first necessary to identify the lowest-energy conformers of MD-354 (21) as these conformers should mimic the likely conformations of MD-354 (21) in its binding mode. A systematic conformation search conducted in SYBYL identified the four lowest-energy rotamers of MD-354 (21; Figure 55), which
coincidentally, matched the torsion angles found in arginine, clonidine (7) and mCPBG (20) crystal structures.

The inactive state of α2A-ARs was modeled by mutating the β2-AR crystal structure (pdb ID: 2RH1) and the active state of α2A-ARs was modeled by modifying the inactive α2A-AR homology model in a manner observed in other active-state structures of GPCRs. Due to extensive SAFIR studies and site-directed mutageneis studies of phenethylamines, endogenous ligands including NE (1) and EPI (2), were docked into the binding pocket to help validate the active α2A-AR homology model. Similar to the support in the literature, the docking studies indicated ligand—receptor interactions of, for example, (R)-EPI (2) in the active α2A-AR model: (a) ionic: N⁺—D3.32; (b) HB: β-OH—D3.32, m-OH—S5.42 and p-OH—S5.46; (c) π-π (edge-to-face): F6.51, Y6.55; CH-π: V3.33; (d) π-cation: N⁺—F7.39 (Figure 58). The lower binding affinity of (S)-EPI (2) in comparison to (R)-EPI (2) may be due to the decreased ligand—receptor interactions such as the H-bond interaction between the conserved D3.32 and the β-OH moiety of (S)-EPI (2).

Upon docking the four lowest-energy rotamers of MD-354 (21) based on the conformational analyses in the active model of α2A-AR, the major bonding interactions observed included: (a) an ionic interaction between both the aniline and terminal nitrogens and D3.32; (b) hydrogen bonding between the m-Cl group and either S5.42 or S5.46; (c) hydrophobic interactions with V3.33, F6.51, F7.35 and F7.39 (Figure 59 and Table 14a). In general, these docking studies suggest that MD-354 (21) might bind to the active α2A-AR model in a manner similar to that of EPI (2) (Figure 66).
Furthermore, when comparing the proposed binding modes of MD-354 (21) at the inactive and active α²A-ARs, it is possible that MD-354 (21) has a greater binding affinity at the low-affinity state because of increased interactions with the receptor. Specifically, the binding mode of MD-354 (21) contains three strong amine—receptor interactions in the inactive state, whereas it contains only 2 amine—receptor interactions and a relatively weak halogen bond in the active state.

Upon a comparison between the proposed binding modes of MD-354 (21) at the inactive and active α²B-AR models, it is proposed that the approximately 10-fold difference in binding affinity of MD-354 (21) at the low- and high-affinity state α²B-ARs (Kᵢ = 25 and 220 nM, respectively; Table 5) may be due to the halogen bond interaction between the m-Cl group and S5.46 observed in the –ac-MD-354 (21) binding mode in the active α²B-AR model (Figure 63). With regards to the antagonist functional data for MD-354 (21), it is possible that the additional parallel-stacking interaction (between F7.39 and the hydrogen bonding network of the guanidine moiety of MD-354 (21) and the carboxylate group of the conserved D3.32) diminishes the interaction with TM5 residues and therefore, affects MD-354’s (21) ability to “hold” the α²B-AR in an active state.

As the lowest-energy conformers of MD-354 (21) did not show optimal interactions in the inactive α²C-AR model, low binding affinity is not surprising. Similar to proposed binding mode of MD-354 (21) at active α²A-AR models, favorable bonding distances for a halogen bond between the m-Cl group of 21 and S5.46, as well as ionic interactions between the amines of 21 and D3.32 and Y5.38 was observed in the active α²C-AR docking results.
To conclude, the pharmacological studies indicated that arylguanidines represent a novel class of analgesic adjuvants with a dual mechanism of action (i.e., the mechanism involves both 5-HT$_3$ receptors and α$_2$-adrenoceptors). The proposed docking modes of MD-354 (21) at high-affinity states of α$_{2A}$- and α$_{2B}$-AR models display a halogen bond interaction between the chloro group of MD-354 (21) and conserved TM5 serines. Since the tilting of TM5 into the binding pocket has been implicated in the GPCR activation process, it seems possible that this halogen bond interaction observed in the α$_{2A}$- and α$_{2B}$-AR models might account for its partial agonist activity. Furthermore, on the basis of available binding affinity data of conformationally-constrained MD-354 (21) analogs, the nitrogen atoms seem to be necessary for 5-HT$_3$ receptor binding affinity.
VI. Experimental

A. Pharmacological studies

1. Animals

Male ICR mice (Harlan Laboratories; Indianapolis, IN; 19-30 g) were housed in groups of 5-6, with free access to food and water. The housing rooms were under a temperature- (22 °C) and humidity- (≈50%) controlled environment and a standard 12:12 h light/dark cycle starting at 7:00 a.m. The experiments were conducted in accordance to protocols set by the Institutional Animal Care and Use Committee (IACUC) of Virginia Commonwealth University (IACUC protocol # AM10339). On the experiment day, mice were first acclimated to the testing environment for at least one hour and weighed prior to any treatment.

2. Drugs

The hydrochloride salts of MD-354 (21; meta-chlorophenylguanidine) and mCPBG (20) were synthesized in our laboratory. Ondansetron hydrochloride (Zofran®, Lot CO99723; GlaxoSmithKline) was purchased from the MCVH-Pharmacy (Richmond, VA). Imiloxan hydrochloride (12), ARC-239 (14; 2-[2-(4-(2-Methoxyphenyl)piperazin-
1-yl)ethyl]-4,4-dimethyl-1,3-(2H,4H)-isoquinolindione dihydrochloride), BRL44408 (15; 2-[(4,5-dihydro-1H-imidazol-2-yl)methyl]-2,3-dihydro-1-methyl-1H-isoinodole), SR57227A hydrochloride (22; 1-(6-chloro-2-pyridyl)-4-piperidinylamine) and Zacopride (24) were purchased from Tocris (Ballwin, MO). TDIQ (6; 5,6,7,8-tetrahydro-1,3-dioxolo[4,5-g]isoquinoline) hydrochloride was synthesized in our laboratory. Clonidine (7), tropisetron (25) and yohimbine (11) were purchased from Sigma-Aldrich Chemicals (Milwaukee, WI). Tropisetron methiodide was purchased from RBI (Research Biochemicals Inc; Natick, MA). Drug solutions were prepared daily; all drugs were dissolved in 0.9% saline and administered to mice in a total volume of 10 mL/kg body weight by subcutaneous (s.c.) or intraperitoneal (i.p.) injections. Each dose of drug (or combination of drugs) was studied in at least 8 mice (i.e., \( n \geq 8 \) mice/treatment).

3. Behavioral assays

a) Tail-Flick assay

Antinociception was assessed by the tail-flick method of D'Armour and Smith\(^{219}\) as modified by Dewey et al.\(^{220}\) using a Columbus Tail-Flick Analgesia Meter (Columbus Instruments, Columbus, Ohio). Determination of qualifying mice was conducted by screening each mouse before the treatment (qualifying control response time between 1.7 and 4.0 s; in hyperalgesic studies: radiant heat was modified so that qualifying control response time was between 5 and 7 s). Test latency was determined after drug administration. In order to minimize tissue damage, a maximum latency of 10 s was
imposed. The antinociceptive response was calculated as percent maximum possible effect (\(^\%\)MPE), where \(^\%\)MPE = \([\text{test latency} - \text{control latency}] / (\text{cutoff time} - \text{control latency})\) x 100.

The experimental protocol for testing the antinociceptive effects of drugs was as follows: 15 min prior to s.c. administration of drugs, baseline tail-flick latency was determined for each mouse. Drugs were administered either alone or in combination with other drugs with the following pre-injection times (i.e., injection time prior to test): TDIQ (6; 45 minutes), clonidine (7; 20 minutes), yohimbine (11; 60 minutes), imiloxan (12; 55 minutes), ARC-239 (14; 50 minutes), BRL-44408 (15; 50 minutes), mCPBG (20; 45 minutes), MD-354 (21; 45 minutes), SR57227A (22; 45 minutes), ondansetron (23; 50 minutes) and tropisetron/tropisetron methiodide (25; 50 minutes).

b) Hot-Plate assay

The hot-plate method is a modification of that described by Eddy and Leimbech\(^{221}\) and Atwell and Jacobson.\(^{222}\) Mice were placed onto a hot-plate (Columbus Hot-plate Analgesia Meter) and covered with a 10 cm-wide glass cylinder, wherein the temperature was maintained at 55 °C. Determination of qualifying mice was conducted by screening each mouse before the treatment (qualifying mouse displays a control response time between 6 and 10 s). Test latency was determined after drug administration. In order to prevent any paw damage, 30 s was used as the cutoff time. The antinociceptive response was calculated as percent maximum possible effect.
(%MPE), where \( \%MPE = \frac{(\text{test latency} - \text{control latency})}{(\text{cutoff time} - \text{control latency})} \times 100. \)

The experimental protocol for testing the antinociceptive effects of drugs was as follows: 15 min prior to s.c. administration of drugs, baseline latency was determined for each mouse. Drugs were administered either alone or in combination with other drugs with the following pre-injection times (i.e., injection time prior to test): TDIQ (6; 45 minutes), clonidine (7; 30 minutes), \( m \)CPBG (20; 45 minutes) and SR57227A (22; 45 minutes).

c) Locomotor activity assay

Mice were placed into individual Tru Scan Infrared Locomotor Activity System (Coulbourn Instruments, Allentown, PA) photocell activity cages (40 cm cube) after s.c. (or i.p.) administration of drugs or combination of drugs (mice were only tested once). Ambulatory movement was measured by the number of times the animal interrupted the infrared beams traversing the cage for a period of 15 minutes; measurements were taken 15, 30 and 45 minutes following the start of the assay. The behavioral analysis examined nine measures of activity: movement episodes, movement time (s), movement distance (cm), vertical entries, margin distance (cm), margin time (s), center distance (cm), center time (s) and center entries.

Drugs were administered either alone or in combination with other drugs with the following pre-injection times (i.e., injection time prior to test): TDIQ (6; 30 minutes), clonidine (7; 5 minutes), \( m \)CPBG (20; 30 minutes) and SR57227A (22; 0 minutes).
4. Statistical analysis

Data were analyzed statistically by an analysis of variance (ANOVA) followed by the Dunnett’s post-hoc test. A measure of significant difference between two groups was analyzed using a Student’s t-test. The null hypothesis was rejected at the 0.05 level.

5. Isobolographic analysis

Synergism was assessed by the isobolographic analysis method described by Tallarida. In order to assess if a biological effect produced by a combination of drugs is greater than, equal to, or smaller than the sum of the individual effects of the component drugs, an isobolographic analysis was performed. The representative graph, an isobologram, compares the experimental ED\(_{50}\) of the combination of drugs (ED\(_{50}\text{mix}\)) to the theoretical additive combination (ED\(_{50}\text{add}\)). ED\(_{50}\text{add}\) is based on the individual potencies of the components (e.g. drug 1 and 2) in the combination. If only drug 2 is active when administered alone then, the ED\(_{50}\text{add}\) is based on the ED\(_{50}\) of drug 2 and its proportion in the combination. To evaluate synergism, the experimental ED\(_{50}\text{mix}\) of a fixed-ratio of TDIQ (6) and clonidine (7) is compared to the theoretical ED\(_{50}\text{add}\) of a simply additive mixture having the same proportions, wherein ED\(_{50}\text{add} = (ED_{50}\text{clonidine}) / P_{\text{clonidine}}\) \((P = \text{proportion})\). ED\(_{50}\text{mix}\) and ED\(_{50}\text{clonidine}\) were obtained from the regression analysis of the % MPE against log total dose. The difference between the two ED\(_{50}\) values with its corresponding standard error was statistically tested with a
Student’s t-test. Evaluation of results: a super-additive effect (exaggerated effect) occurs when $ED_{50\text{mix}} < ED_{50\text{add}}$, an additive effect (theoretical effect) occurs when $ED_{50\text{mix}} = ED_{50\text{add}}$ and a sub-additive effect (attenuated effect) occurs when $ED_{50\text{mix}} > ED_{50\text{add}}$.

B. Synthesis

Reactions were monitored by thin layer chromatography (tlc) on silica gel GHLF plates (250 μ, 2.5 x 10 cm, Analtech Inc.). Some compounds were purified via column chromatography (silica gel 62, 60-200 mesh, Sigma-Aldrich) or flash chromatography (CombiFlash Companion/TS, Teledyne Isco Inc.). All solid products were characterized by melting point on a Thomas-Hoover mp apparatus (and are uncorrected). $^1$H NMR spectra were obtained on either a Varian 300 MHz spectrometer or a Bruker 400 MHz spectrometer with tetramethylsilane as internal standard. Nicolet Avatar 360 FT-IR or Nicolet 52DX FT-IR spectrophotometers were used to obtain IR spectra for all compounds. Combustion analysis of carbon, hydrogen, and nitrogen was conducted by Atlantic Microlab Inc. (Norcross, GA) on all unknown target compounds. Calculated values were +/- 0.4 % of the theoretical values.

$m$-Chlorophenylbiguanide Hydrochloride (20). Compound 20 was prepared according to a literature procedure for a similar compound.\textsuperscript{179} Compound 41 (6.83 g, 41.64 mmol) was added to a stirred mixture of cyanoguanidine (3.50 g, 41.64 mmol) in $H_2O$ (10 mL) and heated at reflux for 4 h. The reaction mixture was allowed to cool to 10 °C for 24 h. The precipitated salt was collected by filtration, washed with $Et_2O$ (6 x 5
mL), and recrystallized from H$_2$O (2 x) to afford 4.46 g (22%) of 20 as white crystals: mp 195.5-196.5 °C (lit.\textsuperscript{181} mp 197-198 °C); $^1$H NMR (DMSO-$d_6$) δ 7.00-7.15 (m, 3H, ArH and NH, D$_2$O ex), 7.22-7.30 (m, 2H, ArH and NH, D$_2$O ex), 7.32 (t, 1H, ArH), 7.44 (br s, 3H, NH, D$_2$O ex), 7.59 (s, 1H, ArH), 9.92 (br s, 1H, NH$^+$, D$_2$O ex); IR (diamond, cm$^{-1}$) 3303, 3129, 2962, 1629, 1596.

2-Amino-7-chloroquinoline Hydrochloride (28). Compound 28 was prepared according to a literature procedure for a similar compound.\textsuperscript{224} A solution of 45 (1.54 g, 7.40 mmol) and SnCl$_2$·2H$_2$O (16.66 g, 7.40 mmol) in absolute EtOH (100 mL) was heated at reflux for 2.5 h. The reaction mixture was allowed to cool to room temperature and poured into ice-water (75 mL). The solution was made slightly basic (pH ≈ 8-9) by the addition of saturated NaHCO$_3$ solution. Solid NaCl (≈ 2-3 g) was added to the solution, and the solution extracted with EtOAc (5 x 200 mL). The combined organic extract was dried (Na$_2$SO$_4$) and the solvent was removed under reduced pressure. The mixture of products ($R_f$ = 0.5 and 0.9; CH$_2$Cl$_2$/MeOH/Me$_4$NH; 9:1:0.1) was purified by column chromatography (silica gel; CH$_2$Cl$_2$/MeOH/Me$_4$NH; 9:1:0.1) to afford the free base ($R_f$ = 0.5) of 28 as an off-white solid (0.20 g; 15%): mp 237-240 °C; $^1$H NMR (DMSO-$d_6$) δ 7.11 (d, 1H, ArH), 7.40 (dd, 1H, ArH), 7.51 (br s, 2H, NH$_2$, D$_2$O ex); IR (diamond, cm$^{-1}$) 3300, 3075, 2915, 1645, 1608.

A saturated solution of HCl (g)/Et$_2$O was added to a methanolic solution of the above free base (0.15 g). The resulting salt was collected via filtration and purified by recrystallization from EtOH/Et$_2$O to yield 0.08 g (42%) of 28 as a white solid: mp 268-270 °C; $^1$H NMR (DMSO-$d_6$) δ 3.44 (br s, 3H, NH$_3^+$, D$_2$O ex), 7.27 (d, 1H, ArH), 7.62 (d,
A 2.5 M solution of $n$-BuLi in hexanes (3.7 mL, 9.32 mmol) was added to a stirred solution of 53 (2.0 g, 7.77 mmol) in anhydrous THF (50 mL) at -70 °C under a N$_2$ atmosphere and allowed to stir for 30 min. The reaction was quenched with absolute EtOH (50 mL) and then allowed to warm to room temperature. The solvent was removed under reduced pressure and the resulting residue was dissolved in CH$_2$Cl$_2$ (100 mL). The solution was washed successively with H$_2$O (100 mL) and saturated NH$_4$Cl solution (100 mL). The organic extract was dried (Na$_2$SO$_4$) and concentrated under reduced pressure. The crude product was purified via column chromatography (silica gel; 1$^{\text{st}}$ column: CH$_2$Cl$_2$/MeOH; 40:1 to 20:1; 2$^{\text{nd}}$ column: hexanes/EtOAc = 10:1) and then subsequently recrystallized from benzene to yield 74 mg of 29 (5%) as a yellow solid: mp 228-230 °C (dec.); $^1$H NMR (CDCl$_3$) $\delta$ 4.53 (br s, 2H, NH$_2$), 6.65 (s, 1H, ArH), 7.18-7.21 (dd, 1H, ArH), 7.53 (s, 1H, ArH), 7.72-7.74 (d, 1H, ArH), 8.84 (s, 1H, ArH); IR (diamond, cm$^{-1}$) 3428, 3300, 3159, 1647; Anal. Calcd (C$_9$H$_7$N$_2$Cl·0.125 CH$_2$Cl$_2$) C, 57.92; H, 3.86; N, 14.80, Found: C, 58.12; H, 3.87; N, 14.50.

2-Amino-7-chloronaphthalene Hydrochloride (30). Absolute EtOH (5 mL) and platinum oxide (2 mg, 5% w/w) were added to 60 (0.03 g, 0.17 mmol) and the mixture
was allowed to stir at room temperature under a N₂ atmosphere for 15 min. A H₂ balloon was added and the reaction mixture was allowed to stir for 6.5 h. The reaction mixture was filtered over Celite and the solid material was washed with absolute EtOH (35 mL). The filtrate was evaporated under reduced pressure and the resulting beige solid was dried under reduced pressure for 5 h to afford the crude free base of 30 (0.02 g). Hydrogen chloride gas was bubbled slowly through an ethanolic solution (≈3 mL) of the crude free base for 10 min at 0 °C (ice-bath). The solvent was removed under reduced pressure and the crude product as a hydrochloride salt was purified via recrystallization from acetone to yield 0.01 g (34%) product as a brown solid: mp 262-264 °C (lit.205 mp 261-263 °C).

2-Amino-7-chlorotetralin Hydrochloride (33). Compound 33 was prepared according to a literature procedure for a similar compound.206 Sodium cyanoborohydride (0.08 g, 1.33 mmol) was added to a solution of 63 (0.20 g, 1.11 mmol) and NH₄OAc (0.85 g, 11.07 mmol) in MeOH (15 mL) at room temperature. The resulting yellow/green solution was allowed to stir for 23 h. The reaction mixture was acidified with 10% HCl to pH ≈ 2, concentrated under reduced pressure, and then extracted with CH₂Cl₂ (2 x 75 mL). The aqueous portion was basified with 6 N NaOH to pH ≈ 10 and extracted with CH₂Cl₂ (3 x 75 mL). The combined organic extract was dried (Na₂SO₄), concentrated, and the product was dried under reduced pressure for 2 h to yield 0.03 g (16%) of the free base of 33 as a yellow/green oil: ¹H NMR (CDCl₃) δ 1.50-1.56 (m, 1H, CH), 1.89-1.94 (m, 1H, CH), 2.42-2.49 (m, 1H, CH), 2.67-2.91 (m, 3H, CH), 3.07-3.14 (m, 1H, CH), 6.92-7.00 (m, 3H, ArH); IR (diamond, cm⁻¹) 2920, 2849, 2658, 1573.
The free base was converted to the HCl salt by dissolving the oil in absolute EtOH (8 mL); a saturated solution of HCl (g) in EtOH (4 mL) was added at 0 °C (ice-bath) and the mixture was allowed to stir for 30 min. The reaction mixture was concentrated under reduced pressure and washed with anhydrous Et₂O (10 mL). The resulting solid was recrystallized from EtOH/Et₂O to yield 0.02 g (50%) of 33 as a pink solid: mp >260 °C; ¹H NMR (DMSO-d₆) δ 1.68-1.78 (m, 1H, CH), 2.09-2.13 (m, 1H, CH), 2.75-2.85 (m, 3H, CH), 3.06-3.11 (m, 1H, CH), 3.43-3.46 (m, 1H, CH), 7.13-7.26 (m, 3H, ArH), 8.12 (br s, 3H, NH₃⁺, D₂O ex); IR (diamond, cm⁻¹) 2920, 2719, 2627, 2556, 2037, 1621, 1599. Anal. Calcd (C₁₀H₁₂NCI·HCl·0.25 H₂O) C, 53.95; H, 6.11; N, 6.29. Found: C, 54.26; H, 5.71; N, 6.08.

2-Amino-5,7-dichloro-3,4-dihydroquinazoline Hydrochloride (38). Compound 38 was prepared according to a literature procedure for a similar compound.²¹⁰ A solution of BH₃·THF complex (2.9 mL, 1 M) was added in a dropwise manner to 2-amino-5,7-dichloroquinazoline-4(3H)-one (68) under a N₂ atmosphere. The green reaction mixture was heated at reflux for 1 h. A solution of 6 N HCl (1 mL) was added in a dropwise manner at 0 °C (ice-bath) to hydrolyze the borate complex and excess reagent. The dark-blue suspension was basified with 6 N NaOH (1.5 mL). The reaction mixture was concentrated under reduced pressure and the resulting residue was extracted with hot CHCl₃ (2 x 15 mL). Crude product precipitated when the combined organic extract cooled to room temperature. The combined organic extract was filtered. The filtrate was evaporated to dryness and the product was recrystallized from CHCl₃. The combined solid was dried in an Abderhalden over toluene heated at reflux for 8 h to...
yield 0.09 g (59%) of the free base of 38 as an off-white solid: mp 207-208 °C; \(^1\)H NMR (DMSO-\(d_6\)) \(\delta\) 4.34 (s, 2H, CH\(_2\)), 5.87 (br s, 2H, NH\(_2\), D\(_2\)O ex), 6.41 (br s, 1H, NH, D\(_2\)O ex), 6.48 (d, 1H, ArH), 6.78 (d, 1H, ArH); IR (diamond, cm\(^{-1}\)) 3466, 3309, 3162, 1648, 1607.

2-Amino-5,7-dichloro-3,4-dihydroquinazoline (0.04 g, 0.20 mmol) was dissolved in absolute EtOH (5 mL) at 0 °C (ice-bath). A saturated solution of HCl (g) in EtOH (5 mL) was added and allowed to stir for 30 min. The solvent was removed under reduced pressure and the resulting off-white residue was recrystallized from absolute EtOH, washed with cold anhydrous Et\(_2\)O, and dried in an Abderhalden over toluene heated at reflux for 4 d to yield 0.04 g (68%) of 38 as an off-white solid: mp 272-273 °C; \(^1\)H NMR (DMSO-\(d_6\)) \(\delta\) 4.48 (s, 2H, CH\(_2\)), 7.03 (d, 1H, ArH), 7.36 (d, 1H, ArH), 7.85 (br s, 2H, NH\(_2\), D\(_2\)O ex), 8.69 (br s, 1H, NH, D\(_2\)O ex), 11.22 (br s, 1H, NH\(^+\), D\(_2\)O ex); IR (diamond, cm\(^{-1}\)) 3251, 3026, 2972, 2915, 2837, 1662, 1618. Anal. Calcd (C\(_8\)H\(_7\)Cl\(_2\)N\(_3\)HCl·0.25 EtOH·0.25 H\(_2\)O) C, 38.02; H, 3.75; N, 15.65. Found: C, 38.07; H, 3.76; N, 15.57.

**2-Amino-3,4-dihydroquinazoline Hydrochloride (39).** Compound 39 was prepared according to a literature procedure for a similar compound.\(^{210}\) A solution of BH\(_3\)-THF complex (12 mL, 1 M) was added in a dropwise manner to a solution of 70 (0.50 g, 3.10 mmol) in anhydrous THF (6 mL) under a N\(_2\) atmosphere at 0 °C (ice-bath). The reaction mixture was heated at reflux for 5 h and then allowed to stir at room temperature for 72 h. A solution of 6 N HCl (10 mL) was added in a dropwise manner at 0 °C (ice-bath) to hydrolyze the borate complex and excess reagent. The reaction mixture was heated at reflux without a condenser to remove the solvent. The
suspension was basified with 15% NaOH and extracted with hot CHCl₃ (25 mL). The product precipitated when the combined organic extract cooled to room temperature. The suspension was filtered and the solid was dried in a dessicator over NaOH pellets to yield 0.23 g (49%) of the free base of 39 as an off-white solid: mp 228 °C (lit.¹¹¹ mp 214-216 °C); ¹H NMR (DMSO-d₆) δ 4.27 (s, 2H, CH₂), 6.51 (d, 1H, ArH), 6.63 (t, 1H, ArH), 6.79 (d, 1H, ArH), 6.93 (t, 1H, ArH); IR (diamond, cm⁻¹) 3390, 3307, 3108, 2819, 1653.  

2-Amino-3,4-dihydroquinazoline (0.10 g, 0.07 mmol) was dissolved in absolute EtOH (5 mL) and allowed to stir at 0 °C (ice-water). A saturated solution of HCl (g) in absolute EtOH (5 mL) was added and the reaction mixture was allowed to stir for 30 min. The solvent was removed under reduced pressure and the resulting off-white residue was dissolved in hot absolute EtOH. The suspension was filtered and the filtrate was concentrated under reduced pressure. The residue was recrystallized from absolute EtOH and then dried in an Abderhalden over toluene heated at reflux for 12 h to yield 0.09 g (74%) of 39 as an off-white solid: mp 158-160 °C (lit.¹¹⁰ mp 199-200 °C); ¹H NMR (DMSO-d₆) δ 4.49 (s, 2H, CH₂), 6.97 (d, 1H, ArH), 7.09 (t, 1H, ArH), 7.18 (d, 1H, ArH), 7.26 (t, 1H, ArH), 7.63 (br s, 2H, NH₂, D₂O ex), 8.51 (br s, 1H, NH, D₂O ex), 10.83 (br s, 1H, NH⁺, D₂O ex); IR (diamond, cm⁻¹) 3261, 3088, 2963, 2870, 1671, 1626. Anal. Calcd (C₈H₉N₃·HCl·0.25 EtOH·0.25 H₂O) C, 51.13; H, 6.06; N, 21.05. Found: C, 51.23; H, 5.66; N, 20.92.  

**meta-Chloroaniline Hydrochloride (41).** A 35 M HCl/Et₂O solution (22.5 mL, 78.75 mmol) was added in a dropwise manner to a solution of *m*-chloroaniline (40; 10.00 g,
78.39 mmol) in absolute EtOH (100 mL) at -10 °C. The precipitated HCl salt was collected by filtration, recrystallized three times from acetone, and dried (KOH) to yield 3.59 g (28%) of 41 as a white powder: mp 218-219 °C (lit.\textsuperscript{180} mp 221.5-222.5 °C).

[2-(4-Chloro-2-nitrophenyl)vinyl]dimethylamine (43). Compound 43 was prepared according to a literature procedure for a similar compound.\textsuperscript{225} Dimethylformamide dimethylacetal (11.6 mL, 87 mmol) and pyrrolidine (3.6 mL, 44 mmol) were added to a solution of 4-chloro-2-nitrotoluene (42; 5.00 g, 29 mmol) in DMF (25 mL) at 110 °C under a N\textsubscript{2} atmosphere. The reaction mixture was allowed to stir for 1 h, diluted with Et\textsubscript{2}O (200 mL), and washed with H\textsubscript{2}O (150 mL). Solid NaCl (= 3-4 g) was added to the suspension and the organic portion was dried (MgSO\textsubscript{4}). The solvent was removed under reduced pressure to afford 7.60 g (100%) of 43 as a dark-violet crude substance: mp 43-45 °C (lit.\textsuperscript{226} mp 44-46 °C); \textsuperscript{1}H NMR (CDCl\textsubscript{3}) δ 2.92 (s, 6H, CH\textsubscript{3}), 5.82 (d, 1H, CH), 6.94 (d, 1H, CH), 7.21-7.29 (m, 1H, ArH), 7.38 (d, 1H, ArH), 7.85 (s, 1H, ArH); IR (diamond, cm\textsuperscript{-1}) 2976, 2930, 2853, 1691, 1596.

4-Chloro-2-nitrobenzaldehyde (44). Compound 44 was prepared according to a literature procedure for a similar compound.\textsuperscript{227} Compound 43 (0.64 g, 2.80 mmol) in DMF (2.5 mL) was added in a dropwise manner to a solution of NaIO\textsubscript{4} (1.80 g, 8.50 mmol) in H\textsubscript{2}O (5 mL) at room temperature. The reaction mixture was allowed to stir for 1.5 h. The crude reaction mixture was filtered and the solid was washed with toluene (50 mL). The organic portion of the filtrate was washed with H\textsubscript{2}O (3 x 25 mL) and concentrated under reduced pressure. The oily residue was purified by column
chromatography (silica gel; hexanes/EtOAc; 5:1) to afford 0.32 g (61%) of 44 as a pale-yellow solid: mp 66-68 °C (lit.228 mp 67-68 °C, Et₂O); ¹H NMR (CDCl₃) δ 7.76 (dd, 1H, ArH), 7.94 (d, 1H, ArH), 8.10 (s, 1H, ArH), 10.39 (s, 1H, CHO); IR (diamond, cm⁻¹) 3368, 3087, 2926, 1691, 1597.

3-(4-Chloro-2-nitrophenyl)acrylonitrile (45). Compound 45 was prepared according to a literature procedure for a similar compound.²²⁹ Sodium hydride (0.55 g, 13.80 mmol) was added portionwise to a stirred solution of diethyl cyanomethylphosphonate (2.45 g, 13.80 mmol) in anhydrous DMF (100 mL) at 0 °C (ice-bath). A solution of 44 (2.57 g, 13.80 mmol) in anhydrous DMF (25 mL) was added to the reaction mixture in a dropwise manner (over 10 min). After another 5 min, the reaction mixture was poured into ice-water and extracted with Et₂O (100 mL). The organic portion was dried (MgSO₄) and concentrated under reduced pressure. The residue was purified by column chromatography (silica gel; hexanes/EtOAc; 1:1) to afford 1.55 g (54%) of 45 as a dark-purple oil: ¹H NMR (CDCl₃) δ 5.73 (d, 1H, CH), 5.85 (d, 1H, CH), 7.51-8.21 (m, 3H, ArH); IR (nujol, cm⁻¹) 2958, 2905, 2844, 2344, 2215, 1514.

(E)-3-(2-Amino-4-chlorophenyl)acrylonitrile (46). The second product from the previous reaction was isolated by column chromatography (silica gel; CH₂Cl₂/MeOH/NH₄OH; 9:1:0.1) and recrystallized from benzene to afford the free base (Rᵣ = 0.9) of 46 as a light-brown solid (0.33 g, 25%): mp 159-160 °C; ¹H NMR (DMSO-d₆) δ 6.03 (br s, 2H, NH₂, D₂O ex), 6.18 (d, 1H, CH), 6.55 (d, 1H, ArH), 6.73 (d, 1H, CH),
7.44 (d, 1H, ArH), 7.76 (d, 1H, ArH); IR (diamond, cm⁻¹) 3461, 3374, 3230, 3057, 2214, 1635, 1598.

7-Chloro-2-acetamidoquinoline (49). Compound 49 was prepared according to a literature procedure for a similar compound.²³⁰ Acetic acid (0.1 mL, 1.70 mmol) was added in a dropwise manner to acetic anhydride (0.14 mL, 1.51 mmol) at 0 °C (ice-bath) and allowed to stir for 2 h at room temperature. The reaction mixture was added to a solution of 28 (free base; 135 mg, 0.76 mmol) in anhydrous THF (25 mL) under a N₂ atmosphere and allowed to stir for 30 min. The solvent was removed under reduced pressure. Methanol (20 mL) was added, the reaction mixture was allowed to stir for 30 min and the solvent was removed under reduced pressure. Diethyl ether (20 mL) was added, the reaction mixture was allowed to stir for 1 h and subsequently filtered. The precipitate was dried in an Abderhalden over toluene heated at reflux for 12 h to yield 120 mg (72%) of 49 as an off-white solid: mp 209-210 °C; ¹H NMR (CDCl₃) δ 2.31 (s, 3H, CH₃), 7.44-7.47 (dd, 1H, ArH), 7.69-7.72 (m, 2H, ArH), 8.53-8.55 (d, 1H, ArH), 8.59-8.60 (d, 1H, ArH), 10.24 (br s, 1H, NH); IR (diamond, cm⁻¹) 3138, 1696, 1607.

4-Chloro-2-cyanomethylbenzonitrile (52). Compound 52 was prepared according to a literature procedure for a similar compound.¹⁹⁹ Ethyl cyanoacetate (6.81 mL, 64 mmol) was added over 10 min to a suspension of NaH (2.56 g, 64 mmol, 60% dispersion in mineral oil) in DMSO (25 mL) at 0 °C (ice-bath). The yellow reaction mixture was allowed to stir at room temperature for 30 min. Compound 51 (5.0 g, 32 mmol) was added as a solution in DMSO (25 mL) and the resulting peach-colored
solution was allowed to stir at 90 °C for 9 h. Water (25 mL) was added and the reaction mixture was heated at reflux for 8 h. The bright-yellow reaction mixture was allowed to cool to 5 °C over 30 min. A 0.15 N HCl solution (20 mL) was added and the reaction mixture was allowed to stir for an additional 30 min. The resulting precipitate was filtered, washed successively with H₂O (25 mL), 0.1 M NaOH solution (2 x 75 mL) and brine (50 mL), and dried (Na₂SO₄) to yield 4.70 g of 52 (83%) as a pale-yellow powder: mp 116-117 °C (lit.¹⁹¹ mp 119-120 °C); ¹H NMR (CDCl₃) δ 3.92 (s, 2H, CH₂), 7.40-7.42 (dd, 1H, ArH), 7.57-7.59 (d, 1H, ArH), 7.61-7.62 (d, 1H, ArH); IR (diamond, cm⁻¹) 3083, 2991, 2226, 1592.

3-Amino-1-bromo-6-chloroisooquinoline (53). Compound 53 was prepared according to a literature procedure for a similar compound.²³¹ Compound 52 (4.7 g, 27 mmol) and a solution of HBr (g) in AcOH (25 mL, 30%) were allowed to stir for 1 h at room temperature. Diethyl ether (50 mL) was added, and the reaction mixture was allowed to stir for 30 min. The resulting yellow/orange precipitate was filtered, washed with Et₂O (2 x 25 mL), suspended in EtOAc (150 mL), and neutralized with saturated aq NaHCO₃ solution (100 mL). The organic extract was dried (Na₂SO₄) and concentrated under reduced pressure. The crude product was washed with cold Et₂O (2 x 50 mL) to yield 2.01 g of 53 (29%) as an orange solid: mp 175-177 °C; ¹H NMR (CDCl₃) δ 7.39-7.42 (dd, 1H, ArH), 7.72-7.73 (d, 1H, ArH), 7.87 (br s, 2H, NH₂), 8.03-8.06 (d, 1H, ArH), 8.36 (s, 1H, ArH); IR (diamond, cm⁻¹) 3222, 3183, 3045, 1664, 1552.
3,6-Dinitro-1,8-naphthalic anhydride (57). Compound 57 was prepared according to a literature procedure.\(^\text{195}\) 1,8-Naphthalic anhydride (56; 10.0 g, 50.0 mmol) was added to concentrated H\(_2\)SO\(_4\) (40.4 mL) and the resulting green solution was cooled to 5 °C. While avoiding a rise in temperature above 20 °C, concentrated HNO\(_3\) (9.3 mL) was added in a dropwise manner to the solution. The yellow solution was heated to 60 °C for 1.5 h and then allowed to cool to room temperature. The reaction mixture was added to ice-water (100 mL) in a dropwise manner and the resulting precipitate was filtered and washed with H\(_2\)O (3 x 75 mL). The crude product was recrystallized from glacial AcOH, washed with H\(_2\)O (3 x 50 mL), and dried in an Abderhalden over toluene heated at reflux for 12 h to yield 8.7 g (60%) of 57 as a yellow solid: mp 199-200 °C (lit.\(^\text{195}\) mp 208-210 °C, glacial AcOH); \(^1\)H NMR (CDCl\(_3\)) δ 9.50 (d, 2H, ArH), 9.56 (d, 2H, ArH); IR (diamond, cm\(^{-1}\)) 3071, 1782, 1741, 1597.

2,7-Dinitronaphthalene (58). Compound 58 was prepared according to a literature procedure.\(^\text{196}\) Compound 57 (7.6 g, 26.37 mmol) was added over 4 min to a suspension of copper powder (1.9 g) in boiling quinoline (previously distilled, 15.6 mL) and then more copper powder (1.9 g) was added. After 1 h, the reaction mixture was allowed to cool to room temperature and Et\(_2\)O (250 mL) was added. The resulting dark-brown reaction mixture was filtered and the filtrate was washed with H\(_2\)O (2 x 100 mL). The organic extract was washed successively with 15% HCl solution (2 x 75 mL), cold saturated NaHCO\(_3\) solution (100 mL), and H\(_2\)O (100 mL). The organic portion was dried (MgSO\(_4\)) and the solvent was removed under reduced pressure. The crude product was purified via column chromatography (silica gel; hexanes/EtOAc; 2:1 to 1:1) and
dried in an Abderhalden over toluene heated at reflux for 5 h to yield 0.8 g (13%) of 58 as an orange solid: mp 225-228 °C (lit.\textsuperscript{196} mp 234 °C, glacial AcOH); \textsuperscript{1}H NMR (CDCl\textsubscript{3}) \( \delta \) 8.17 (d, 2H, ArH), 8.50 (dd, 2H, ArH), 9.04 (s, 2H, ArH); IR (diamond, cm\textsuperscript{-1}) 3081, 1628, 1514.

**2-Amino-7-nitronaphthalene (59).** Compound 59 was prepared according to a literature procedure.\textsuperscript{197} A solution of NaSH (0.07 g, 1.27 mmol) in MeOH (2 mL) was added over 15 min to a solution of 58 (0.19 g, 0.85 mmol) in MeOH (3 mL) and H\textsubscript{2}O (6 mL) heated at reflux. The dark-purple reaction mixture was heated for 3 h and then poured into ice-water (50 mL). The resulting orange precipitate was filtered and washed with boiling 10% aq HCl solution (25 mL). The filtrate was basified with 10% NaOH solution and extracted with EtOAc (50 mL). The organic extract was dried (MgSO\textsubscript{4}) and the solvent was removed under reduced pressure to afford 59 (0.10 g, 64%) as an orange solid: mp 159-162 °C (lit.\textsuperscript{196} mp 184.5 °C, EtOH); \textsuperscript{1}H NMR (CDCl\textsubscript{3}) \( \delta \) 4.14 (br s, 2H, NH\textsubscript{2}, D\textsubscript{2}O ex), 7.13-7.17 (m, 2H, ArH), 7.76-7.83 (m, 2H, ArH), 7.99 (dd, 1H, ArH), 8.56 (d, 1H, ArH); IR (diamond, cm\textsuperscript{-1}) 3486, 3383, 2920, 1631, 1518.

**7-Chloro-2-nitronaphthalene (60).** Compound 60 was prepared according to a literature procedure for a similar compound.\textsuperscript{198} Acetic acid (0.4 mL) and 59 (0.09 g, 0.48 mmol) were added to a stirred solution of NaNO\textsubscript{2} (0.07 g, 1.06 mmol) in concentrated H\textsubscript{2}SO\textsubscript{4} (0.4 mL) at 0 °C (ice-bath). The resulting solution was added in a dropwise manner to a suspension of CuCl (0.17 g, 1.72 mmol) in concentrated HCl solution (0.7 mL) at 0 °C (ice-bath) and the mixture was allowed to stir for 2 h. The
black reaction mixture was poured into ice-water (50 mL) and the aqueous layer was extracted with CH$_2$Cl$_2$ (50 mL). The organic extract was dried (Na$_2$SO$_4$) and the solvent was removed under reduced pressure. The crude product was purified via column chromatography (silica gel; hexanes/EtOAc; 20:1) to yield 0.02 g of 60 (19%) as a yellow needle-like solid: mp 137-139 °C (lit.$^{229}$ mp 139-140 °C, EtOH); $^1$H NMR (CDCl$_3$) δ 7.65-7.74 (m, 2H, ArH), 7.92-8.06 (m, 2H, ArH), 8.28 (dd, 1H, ArH), 8.80 (dd, 1H, ArH); IR (diamond, cm$^{-1}$) 2917, 2845, 1731, 1586, 1514.

3-Chlorophenylacetyl chloride (62). Compound 62 was prepared according to a literature procedure for a similar compound.$^{203}$ Thionyl chloride (3.2 mL, 43.96 mmol) was added to a stirred solution of 3-chlorophenylacetic acid (61; 5.00 g, 29.31 mmol) in CH$_2$Cl$_2$ (12 mL) at room temperature. The yellow, translucent reaction mixture was heated at reflux for 24 h and then allowed to cool to room temperature. The orange reaction mixture was concentrated under reduced pressure. The product was purified via Kugel-rohr distillation (0.5 Torr, bp 97-103 °C; lit.$^{233}$ 1 Torr, bp 77.5-78 °C) and dried under reduced pressure for 2 h to yield 3.69 g (67%) of 62 as a yellow liquid: $^1$H NMR (CDCl$_3$) δ 4.05 (s, 2H, CH$_2$), 7.08-7.10 (m, 1H, ArH), 7.19-7.25 (m, 3H, ArH); IR (diamond, cm$^{-1}$) 3358, 3065, 2912, 1790, 1599.

7-Chloro-β-tetralone (63) and 5-Chloro-β-tetralone (64). Compounds 63 and 64 were prepared according to a literature procedure.$^{204}$ Compound 62 (2.49 g, 13.17 mmol) was dissolved in CH$_2$Cl$_2$ (25 mL) and added via an addition funnel over 20 min to a white suspension of AlCl$_3$ (previously sublimed; 3.86 g, 28.98 mmol) in CH$_2$Cl$_2$ (125
mL) stirring at -10 to 0 °C (cooling bath with CO₂). Ethylene gas was bubbled into the yellow mixture for 30 min, causing the temperature to rise to 5 °C, and then drop back down to -5 °C. Ethylene gas was allowed to bubble slowly through the mixture for an additional 1.75 h. Ice-water (100 mL) was added to the pale-yellow reaction mixture. The organic layer was separated and washed successively with 10% HCl (100 mL), saturated aq Na₂CO₃ (100 mL), and then dried (Na₂SO₄). The solvent was removed under reduced pressure and the product was isolated via column chromatography (silica gel; hexanes/EtOAc; 9:1) to yield 0.36 g (15%) of 64 as a yellow oil and 0.24 g (10%) of 63 as a pale-yellow solid: mp 37-38 °C (lit.²³⁴ mp 38-39 °C). Both products were dried under reduced pressure for 1 h and stored at -80 °C. 63: ¹H NMR (CDCl₃) δ 2.48 (t, 2H, CH₂), 2.97 (t, 2H, CH₂), 3.49 (s, 2H, CH₂), 7.10 (m, 3H, ArH); IR (diamond, cm⁻¹) 3022, 2964, 2763, 1686, 1598. 64: ¹H NMR (CDCl₃) δ 2.50 (t, 2H, CH₂), 3.17 (t, 2H, CH₂), 3.53 (s, 2H, CH₂), 6.96 (d, 1H, ArH), 7.09 (t, 1H, ArH), 7.23 (d, 1H, ArH); IR (diamond, cm⁻¹) 3064, 2916, 2849, 1817, 1715.

2-Amino-5-chlorotetralin Hydrochloride (65). Compound 65 was prepared according to a literature procedure for a similar compound.²⁰⁶ Sodium cyanoborohydride (0.04 g; 0.62 mmol) was added to a solution of 64 (0.09 g; 0.52 mmol) and NH₄OAc (0.40 g; 5.20 mmol) in MeOH (10 mL) at room temperature. The resulting pale-yellow/brown solution was allowed to stir for 18 h. The reaction mixture was acidified with 10% HCl solution (pH ≈ 2.0), concentrated under reduced pressure, and then extracted with CH₂Cl₂ (2 x 50 mL). The aqueous portion was basified with 6 N NaOH (pH ≈ 10) and extracted with CH₂Cl₂ (3 x 50 mL). The combined organic extract was dried (Na₂SO₄)
and concentrated under reduced pressure. The resulting yellow oil was dried under reduced pressure for 2 h to yield 0.03 g (32%) of the free base of 65: $^1$H NMR (CDCl$_3$) $\delta$ 1.52-1.59 (m, 1H, CH), 1.95-2.01 (m, 1H, CH), 2.45-2.54 (m, 1H, CH), 2.63-2.71 (m, 1H, CH), 2.89-2.97 (m, 2H, CH), 3.07-3.14 (m, 1H, CH), 6.90-7.13 (m, 3H, ArH); IR (diamond, cm$^{-1}$) 3340, 3276, 3060, 2927, 2855, 1568.

The free base was converted to the HCl salt by dissolving the oil in absolute EtOH (5 mL). A saturated solution of HCl (g) in EtOH (4 mL) was added at 0 °C (ice-bath) and allowed to stir for 30 min at 0 °C (ice-bath). The reaction mixture was concentrated under reduced pressure and washed with Et$_2$O (10 mL). The resulting crude solid was recrystallized from EtOH/Et$_2$O to yield 0.02 g (18%) of 65 as a pink solid: mp 280-282 °C (dec); $^1$H NMR (DMSO-d$_6$) $\delta$ 1.61-1.71 (m, 1H, CH), 2.02-2.05 (m, 1H, CH), 2.67-2.78 (m, 3H, CH), 2.99-3.04 (m, 1H, CH), 3.34-3.38 (m, 1H, CH), 7.06-7.18 (m, 3H, ArH), 8.04 (br s, 3H, NH$_3^+$, D$_2$O ex); IR (diamond, cm$^{-1}$) 2921, 2718, 2627, 2556, 2037, 1620, 1599. Anal. Calcd (C$_{10}$H$_{12}$NCl$\cdot$HCl) C, 55.06; H, 6.01; N, 6.42. Found: C, 55.03; H, 5.95; N, 6.32.

4,6-Dichloroisatoic anhydride (67).

**Method A.** Compound 67 was prepared according to a literature procedure.$^{208}$ Chromium trioxide (0.33 g, 3.30 mmol) was added portionwise at 90 °C to a stirred suspension of 4,6-dichloroisatin (66; 0.72 g, 3.31 mmol) in glacial AcOH (4 mL) and acetic anhydride (4 mL). The reaction mixture was allowed to stir at 90 °C for 1.5 h. Water (20 mL) was added to the green reaction mixture and the crude product precipitated. The crude solid was collected by filtration, washed with H$_2$O (15 mL), and
dried under reduced pressure for 1 h to yield 0.55 g of crude product (and starting material) as a yellow solid. It was determined by $^1$H NMR that the crude solid was a mixture of 4,6-dichloroisatin (66; 45%) and 67 (55%). This crude product was used in the next step without purification.

**Method B.** Compound 67 was prepared according to a literature procedure for a similar compound.$^{232}$ A suspension of 4,6-dichloroisatin (66; 0.50 g, 2.32 mmol) in glacial AcOH (2.5 mL) and concentrated H$_2$SO$_4$ (2 drops) was heated to 30 °C. The reaction mixture was allowed to stir for 15 min and then an aqueous solution of H$_2$O$_2$ (0.3 mL; 30%) was added in a dropwise manner. The reaction mixture was slowly heated to 65 °C and after 5 h the reaction mixture was allowed to cool to room temperature. The resulting precipitate was collected by filtration, washed with H$_2$O (3 x 5 mL), and dried under reduced pressure for 8 h to yield 0.32 g of crude product (and starting material) as a yellow solid. It was determined by $^1$H NMR that the crude solid was a mixture of 4,6-dichloroisatin (66; 56%) and 67 (44%). This crude product was used in the next step without purification.

**2-Amino-5,7-dichloroquinazolin-4(3H)-one (68).** Compound 68 was prepared according to a literature procedure for a similar compound.$^{209}$ S-Methylthiosourea sulfate (0.30 g, 1.07 mmol) and Na$_2$CO$_3$ (0.11 g, 1.07 mmol) were added to a solution of 4,6-dichloroisatoic anhydride (67; 0.25 g, 1.07 mmol) and 4,6-dichloroisatin (66; 0.30 g, 1.37 mmol) dissolved in aq MeCN (11 mL, 80%). The resulting solution was heated at reflux for 23 h. The reaction mixture was allowed to cool to room temperature over a
period of 30 min, H$_2$O (20 mL) was added, and the reaction mixture was allowed to stir for 2 h. The reaction mixture was filtered and the precipitate was washed with aq MeCN (3 x 15 mL; 80%). The solid was dried in an Abderhalden over toluene heated at reflux for 24 h to yield 0.17 g (70%) of 68 as a beige solid: mp >300 °C; $^1$H NMR (DMSO-$d_6$) δ 6.64 (br s, 2H, NH$_2$, D$_2$O ex), 7.13-7.15 (m, 2H, ArH), 11.10 (br s, 1H, NH, D$_2$O ex); IR (diamond, cm$^{-1}$) 3385, 2925, 2257, 2130, 1652.

To recover the isatin starting material, the filtrate was concentrated under reduced pressure, dissolved in EtOAc (100 mL), and washed with 15% HCl solution (50 mL). The aqueous layer was basified with 10% NaOH and extracted with EtOAc (2 x 50 mL). The combined organic portion was dried (MgSO$_4$) and the solvent was removed under reduced pressure.

2-Aminoquinazolin-4(3H)-one (70). Compound 70 was prepared according to a literature procedure for a similar compound.$^{209}$ S-Methylthioisourea sulfate (5.56 g, 20.00 mmol) and Na$_2$CO$_3$ (3.20 g, 30.00 mmol) were added to a solution of isatoic anhydride (69; 3.26 g, 20.00 mmol) in aq MeCN (100 mL, 80%) and the resulting dark-brown solution was heated at reflux for 23 h. The light-yellow reaction mixture was allowed to cool to room temperature over a period of 30 min. The resulting precipitate was collected by filtration and washed successively with aq MeCN (3 x 25 mL; 80%) and H$_2$O (75 mL). The solid was dried under reduced pressure and recrystallized from absolute EtOH to yield 1.14 g (35%) of 70 as a white solid: mp >300 °C (lit.$^{214}$ mp >250 °C); $^1$H NMR (DMSO-$d_6$) δ 6.40 (br s, 2H, NH$_2$, D$_2$O ex), 7.10 (t, 1H, ArH), 7.20 (d, 1H,
ArH), 7.55 (t, 1H, ArH), 7.88 (d, 1H, ArH), 11.03 (br s, 1H, NH, D$_2$O ex); IR (KBr, cm$^{-1}$) 3404, 3144, 3061, 1684, 1656, 1606.

C. Molecular modeling

All ligands and models were built in Sybyl (version 8.1; Tripos Associates, St. Louis, MO) on a Silicon Graphics workstation and given AM1 charges and geometries based on MOPAC. A conformation search of MD-354 (21), in order to identify the lowest-energy conformers, was conducted using Sybyl (Tripos Force Field, AM1).

In order to generate homology models of the inactive and active state of α$_{2A}$-, α$_{2B}$- and α$_{2C}$-ARs, first, a sequence alignment of the α$_2$-ARs and other GPCRs was created. Mimicking Bissantz et al.,$^{214}$ an alignment profile of several GPCRs including the primary sequences of human muscarinic cholinergic M$_1$ (P11229), human vasopressin V$_{1a}$ (P37288), human dopamine D$_3$ (P35462), human adrenergic β$_2$ (P07550), human δ-opioid (P41143) and bovine rhodopsin (P02699), all of which were retrieved from the ExPASy Proteomics Server (http://www.expasy.org/) at the Swiss Institute of Bioinformatics, was generated and further aligned to the human α$_{2A}$-AR (P08913) sequence using the ClustalX program (BLOSUM matrix series; gap opening: 15.0). Two alignments were generated as described above: (1) included amino acid residues from the N-terminus to the IL-3 and (2) included amino acid residues from the IL-3 to the C-terminus.$^{236}$ Previously identified highly conserved amino acid residues within GPCRs$^{237, 238}$ are aligned and there are no insertions or deletions in the transmembrane regions.
This alignment was used to generate the model of the $\alpha_{2A}$-AR based on its homology to human $\beta_2$-AR (chain A of PDB entry = 2RH1; RCSB Protein Data Bank, http://www.rcsb.org). The $\alpha_{2A}$-AR model was used as a template for $\alpha_{2B}$- and $\alpha_{2C}$-ARs, which means sequence alignments of $\alpha_{2B}$-AR and $\alpha_{2A}$-AR, as well as $\alpha_{2C}$-AR and $\alpha_{2A}$-AR, were first generated followed by mutating amino acid residues in the $\alpha_{2A}$-AR model to mimic the $\alpha_{2B}$-AR and $\alpha_{2C}$-AR. Ligand docking in these models was performed via GOLD (Version 4.0; 10 genetic algorithm runs/15 Å sphere around conserved D3.32).
References


38. Descartes, R. *L'Homme*. Paris, **1664**.


145. Roth, B. L., PDSP. In National Institute of Mental Health’s Psychoactive Drug Screening Program: 2009.


Vita

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