

THE PRACTICE OF MEDICINAL CHEMISTRY

THIRD EDITION

EDITED BY
CAMILLE GEORGES WERMUTH



The Practice of Medicinal Chemistry

Third edition

This page intentionally left blank

The Practice of Medicinal Chemistry

Third edition

Edited by

Camille Georges Wermuth

Prestwick Chemical Inc.
Illkirch, France



AMSTERDAM • BOSTON • HEIDELBERG • LONDON • NEW YORK • OXFORD
• PARIS • SAN DIEGO • SAN FRANCISCO • SINGAPORE • SYDNEY • TOKYO
Academic Press is an imprint of Elsevier



Academic Press is an imprint of Elsevier
30 Corporate Drive, Suite 400, Burlington, MA 01803, USA
525 B Street, Suite 1900, San Diego, California 92101-4495, USA
84 Theobald's Road, London WC1X 8RR, UK

First published 1996
Reprinted 2001
Second edition 2003
Third edition 2008

Copyright © 2008, Elsevier Ltd. All rights reserved.

No part of this publication may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopy, recording, or any information storage and retrieval system, without permission in writing from the publisher.

Permissions may be sought directly from Elsevier's Science & Technology Rights Department in Oxford, UK: phone: (+44) 1865 843830, fax: (+44) 1865 853333, E-mail: permissions@elsevier.com. You may also complete your request online via the Elsevier homepage (<http://elsevier.com>), by selecting "Support & Contact" then "Copyright and Permission" and then "Obtaining Permissions."

Notice

No responsibility is assumed by the publisher for any injury and/or damage to persons or property as a matter of products liability, negligence or otherwise, or from any use or operation of any methods, products, instructions or ideas contained in the material herein.

British Library Cataloguing-in-Publication Data

A catalogue record for this book is available from the British Library

Library of Congress Cataloging-in-Publication Data

A catalog record for this book is available from the Library of Congress

ISBN: 978-0-12-374194-3

For information on all Academic Press publications
visit our web site at www.books.elsevier.com

Typeset by Charon Tec Ltd., A Macmillan Company
(www.macmillansolutions.com)

Printed in China

08 09 10 9 8 7 6 5 4 3 2 1

Working together to grow
libraries in developing countries

www.elsevier.com | www.bookaid.org | www.sabre.org

ELSEVIER

BOOK AID
International

Sabre Foundation

Contents

Biography	xxv
Section Editors	xxvii
Contributors	xxix
Preface to the First Edition	xxxv
Preface to the Second Edition	xxxvii
Preface to the Third Edition	xxxix

Part I General Aspects of Medicinal Chemistry Section Editor: Hugo Kubinyi 1

1. A History of Drug Discovery	3
<i>François Chast</i>	
I. Introduction	4
A. The renewal of chemistry	4
B. The dawn of the organic chemistry crosses the birth of biology	5
II. Two Hundred Years of Drug Discoveries	6
A. Pain killers: best-sellers and controversies	6
B. Giving back the heart its youth	10
C. Fight against microbes and viruses	15
D. Drugs for immunosuppression	24
E. Contribution of chemists to the fight against cancer	26
F. Drugs for endocrine disorders	30
G. Anti-acid drugs	34
H. Lipid lowering drugs	35
I. From neurotransmitters to receptors	37
J. Drugs of the mind	41
III. Considerations on Recent Trends in Drug Discovery	49
A. From genetics to DNA technology	49
B. Hopes and limits for drug hunting	52
References	55
2. Medicinal Chemistry: Definitions and Objectives, Drug Activity Phases, Drug Classification Systems	63
<i>Peter Imming</i>	
I. Definitions and Objectives	63
A. Medicinal chemistry and related disciplines and terms	63
B. Drugs and drug substances	64
C. Stages of drug development	64
II. Drug Activity Phases	66
A. The pharmaceutical phase	66
B. The pharmacokinetic phase	66

C. The pharmacodynamic phase	67
D. The road to successful drug development?	67
III. Drug Classification Systems	67
A. Classification by target and mechanism of action	68
B. Other classification systems	70
References	71
3. Measurement and Expression of Drug Effects	73
<i>Jean-Pierre Nowicki and Bernard Scatton</i>	
I. Introduction	73
II. <i>In Vitro</i> Experiments	75
A. Binding studies	75
B. Ligand–receptor interaction-induced functional effects	76
C. Allosteric interaction	78
D. Expression of functional effects for targets other than GPCRS	79
E. Cellular and tissular functional responses	79
III. <i>Ex Vivo</i> Experiments	81
IV. <i>In Vivo</i> Experiments	82
References	83
4. Molecular Drug Targets	85
<i>Jean-Pierre Gies and Yves Landry</i>	
I. Introduction	86
A. How many drug targets for how many drugs?	86
B. From the drug target to the response of the organism	86
C. Drug binding, affinity and selectivity	87
D. Various ligands for a single target	87
II. Enzymes as Drug Targets	88
A. Targeting human enzymes	88
B. Targeting enzymes selective of invading organisms	89
III. Membrane Transporters as Drug Targets	89
A. Established drug targets among membrane transporters	89
B. Progress in the pharmacological control of membrane transporters	89
IV. Voltage-Gated Ion Channels as Drug Targets	90
A. Voltage-gated sodium channels (Na _v channels)	90
B. Voltage-gated calcium channels (Ca _v channels)	91
C. Potassium channels	91
V. Non-Selective Cation Channels as Drug Targets	92
VI. Direct Ligand-Gated Ion Channels (Receptors with Intrinsic Ion Channel)	93
A. P2X-ATP receptors	94
B. Glutamate-activated receptors	94
C. The “Cys-loop receptor superfamily”	95
VII. Receptors with Intrinsic Enzyme Activity	95
A. Receptors with guanylate cyclase activity	95
B. Receptors with serine/threonine kinase activity	96
C. Receptors with tyrosine kinase activity	96
VIII. Receptors Coupled to Various Cytosolic Proteins	97
A. Receptors coupled to the cytosolic tyrosine kinase JAK	97
B. Receptors coupled to the cytosolic Src, Zap70/Syk and Btk tyrosine kinases (immunoreceptors)	97
C. Receptors coupled to the cytosolic serine/threonine kinase IRAK	98
D. Receptors coupled to caspases and to NFκB	98
E. Receptors of the cellular adhesion	99
IX. G-Protein-Coupled Receptors	99
A. How many druggable GPCRs?	100

B. Diversity of G-proteins	101
C. Diversity of GPCR-elicited signaling and related drug targets	101
X. Nuclear Receptors As Drug Targets	103
References	104
5. Drug Targets, Target Identification, Validation and Screening	106
<i>Kenton H. Zavitz, Paul L. Bartel and Adrian N. Hobden</i>	
I. Introduction	106
II. Improving the Resolution of Disease Etiology	107
III. Biopharmaceutical Therapies	108
A. Passive immunotherapy	108
IV. Drug Target Identification	109
A. Rare mutations leading to generalized therapies	109
B. Mining the proteome	109
C. Yeast two-hybrid systems	110
D. RNA interference	111
V. Hit-to-Lead	113
A. Cell-based screening	113
B. Intracellular receptors	113
C. Intracellular enzymes	115
D. G-protein-coupled receptors	115
E. Transgenic animals	117
F. Drug metabolism	118
G. Toxicology	118
VI. Clinical Biomarkers	119
VII. Conclusions	119
References	119

Part II Lead Compound Discovery Strategies

Section Editor: John R. Proudfoot

123

6. Strategies in the Search for New Lead Compounds or Original Working Hypotheses	125
<i>Camille G. Wermuth</i>	
I. Introduction	125
A. Hits and leads	125
B. The main hit or lead finding strategies	126
II. First Strategy: Analog Design	126
A. Typical examples	126
B. The different categories of analogs	127
C. Pros and cons of analog design	128
III. Second Strategy: Systematic Screening	129
A. Extensive screening	129
B. Random screening	129
C. High-throughput screening	130
D. Screening of synthesis intermediates	131
E. New leads from old drugs: The SOSA approach	132
IV. Third Strategy: Exploitation of Biological Information	134
A. Exploitation of observations made in humans	134
B. Exploitation of observations made in animals	137
C. Exploitation of observations made in the plant kingdom and in microbiology	137
V. Fourth Strategy: Planned Research and Rational Approaches	138
A. L-DOPA and rarkinsonism	138

B. Inhibitors of the ACE	139
C. Discovery of the H ₂ -receptor antagonists	141
VI. Conclusion	142
References	142
7. High-Throughput Screening and Drug Discovery	144
<i>John R. Proudfoot</i>	
I. Introduction	144
II. Historical Background	144
III. From Screen to Lead	146
A. Compound collections	146
B. Assays	146
C. Hit-to-lead process	147
IV. Examples of Drugs Derived from Screening Leads	147
A. Reverse transcriptase inhibitors, nevirapine, efavirenz, and delavirdine	148
B. Endothelin antagonists, bosentan, sitaxsentan, edonentan, and ambrisentan	150
C. Raf kinase inhibitor, sorafenib	152
V. Practical Application, Recent Example	152
A. IKK inhibitors	152
VI. Conclusion	154
References	155
8. Natural Products as Pharmaceuticals and Sources for Lead Structures	159
<i>David J. Newman, Gordon M. Cragg and David G. I. Kingston</i>	
I. Introduction	159
II. The Importance of Natural Products in Drug Discovery and Development	160
A. The origin of natural products	161
B. The uniqueness of the natural products approach	161
C. The impact of new screening methods	162
III. The Design of an Effective Natural-Products-Based Approach to Drug Discovery	163
A. Acquisition of biomass	163
B. The unexplored potential of microbial diversity	164
C. Extraction	167
D. Screening methods	167
E. Isolation of active compounds	168
F. Structure elucidation	168
G. Further biological assessment	168
H. Procurement of large-scale supplies	168
I. Determination of structure–activity relationships	169
IV. Examples of Natural Products or Analogs as Drugs	169
A. Antihypertensives	169
B. Anticholesterolemics	169
C. Immunosuppressives	171
D. Antibiotics	171
E. Microbial anticancer agents	172
F. Anticancer agents from plants	174
G. Anticancer agents from marine organisms	175
H. Antimalarial agents	177
I. Other natural products	177
V. Future Directions in Natural Products as Drugs and Drug Design Templates	177
A. Introduction	177
B. Combinatorial chemistry	177
C. Natural products as design templates	178
D. Interactions of microbial sources, genomics, and synthetic chemistry	178
VI. Summary	180
References	180

9. Biology Oriented Synthesis and Diversity Oriented Synthesis in Compound Collection Development	187
<i>Kamal Kumar, Stefan Wetzel and Herbert Waldmann</i>	
I. Introduction	187
II. Diversity Oriented Synthesis	188
A. DOS: Principles	188
B. DOS of small molecule libraries	188
C. Applications of DOS libraries	192
III. Biology Oriented Synthesis	194
A. Introduction	194
B. The scaffold tree for structural classification of natural products	194
C. Protein structure similarity clustering	199
D. BIOS: The combined application of SCONP and PSSC	202
E. BIOS: Prospects and future directions	205
IV. Conclusion and Outlook	205
References	206
10. In Silico Screening: Hit Finding from Database Mining	210
<i>Thierry Langer and Sharon D. Bryant</i>	
I. Introduction	210
A. Chemoinformatics in drug discovery	211
B. What is the difference between a hit and a lead structure?	211
C. Data mining using chemoinformatics	212
II. Representation of Chemical Structures	212
A. Structural keys and 1D fingerprints	213
B. Topological descriptors	213
C. 3D descriptors	214
D. Further descriptors	216
III. Data Mining Methods	216
IV. Database Searches	217
A. Distance and similarity searches	217
B. 2D database searches	217
C. 3D database searches	218
V. Applications	218
A. Ligand-based <i>in silico</i> screening	218
B. Structure-based <i>in silico</i> screening	219
C. Assessing affinity profiles using parallel <i>in silico</i> screening	219
D. Example: Parallel pharmacophore-based virtual screening	219
VI. Conclusion and Future Directions	222
References	222
11. Fragment-Based Drug Discovery	228
<i>Bennett T. Farmer and Allen B. Reitz</i>	
I. Ligand–Protein Interactions: First Principles	228
A. Binding energy as the sum of the parts	228
B. Historical development	229
C. Ligand efficiency	230
II. Status of Late 1990s Drug Discovery in the Pharmaceutical Industry	230
III. What is FBDD?	231
A. Concept and overview	231
B. Differences between FBDD and HTS/HTL approaches	233
C. The role of the medicinal chemist in FBDD	234

IV. Creation and Analysis of FBDD Libraries	234
A. General evaluation and analysis	234
B. Computational approaches	235
C. Use of primary data: sprouting and merging to create secondary libraries	235
V. Nuclear Magnetic Resonance	235
A. 1D (ligand-based) screening	235
B. Example	236
C. 2D (protein-based) screening	237
VI. X-ray Crystallography	237
A. General principles and limitations	237
B. Examples	238
VII. Other Biophysical and Biochemical Screening Methods	238
A. Substrate activity screening	238
B. <i>In situ</i> click chemistry	239
C. SPR spectroscopy	239
D. SAR by mass spectroscopy	239
VIII. Methods for Fragment Hit Follow-Up	239
A. How to best reduce false positives (NMR, MS) and false negatives (X-ray)	239
B. Isothermal and differential titration calorimetry and further secondary analysis	240
IX. Trends for the Future	240
References	241
12. Lead-Likeness and Drug-Likeness	244
<i>Alex Polinsky</i>	
I. Introduction	244
II. Assessing “Drug-Likeness”	245
A. Avoiding known threats	245
B. Mimicking known drugs	247
C. Direct property prediction	249
III. Selecting Better Leads: “Lead-Likeness”	250
A. What is a “high-quality” lead compound?	250
B. Designing “lead-like” libraries for biochemical screening	251
IV. Conclusion	253
References	253
13. Web Alert: Using the Internet for Medicinal Chemistry	255
<i>David Cavalla</i>	
I. Introduction	255
II. Blogs	256
III. Wikis	257
A. RSS information feeds	257
IV. Compound Information	257
A. ChempSpider	257
B. The NIH Roadmap and PubChem	258
C. ChemBank	258
V. Biological Properties of Compounds	258
A. Prediction of biochemical properties	259
B. Molecular datasets	259
C. Information on metabolic properties	260
VI. Drug Information	260
A. DrugBank	260
VII. Physical Chemical Information	261
VIII. Prediction and Calculation of Molecular Properties	261
IX. Chemical Suppliers	263

X. Chemical Synthesis	264
XI. Chemical Software Programs	263
A. Chemical drawing and viewing software	264
B. Various cheminformatics software	265
C. Datasets for virtual screening	266
XII. Analysis	267
XIII. Chemical Publications	267
A. Journals	267
B. Open access	268
C. Theses	268
XIV. Patent Information	269
A. Japanese patents	270
XV. Toxicology	270
XVI. Metasites and Technology Service Provider Databases	272

Part III Primary Exploration of Structure–Activity Relationships

Section Editor: Camille G. Wermuth

273

14. Molecular Variations in Homologous Series: Vinylogues and Benzologues	275
<i>Camille G. Wermuth</i>	
I. Homologous Series	275
A. Definition and classification	275
B. Shapes of the biological response curves	277
C. Results and interpretation	278
II. Vinylogues and Benzologues	283
A. Applications of the vinylogy principle	283
B. Comments	287
References	287
15. Molecular Variations Based on Isosteric Replacements	290
<i>Paola Ciapetti and Bruno Giethlen</i>	
I. Introduction	290
II. History: Development of the Isosterism Concept	291
A. The molecular number	291
B. The isosterism concept	292
C. The notion of pseudoatoms and Grimm's hydride displacement law	293
D. Erlenmeyer's expansion of the isosterism concept	293
E. Isosterism criteria: Present conceptions	293
F. The bioisosterism concept: Friedman's and Thornber's definitions	294
III. Currently Encountered Isosteric and Bioisosteric Modifications	294
A. Replacement of univalent atoms or groups	294
B. Interchange of divalent atoms and groups	294
C. Interchange of trivalent atoms and groups	296
D. Ring equivalents	297
E. Groups with similar polar effects: functional equivalents	303
F. Reversal of functional groups	320
IV. Scaffold Hopping	323
A. Successful examples of serendipitous scaffold hopping	323
B. Scaffold hopping and virtual screening	325
V. Analysis of the Modifications Resulting from Isosterism	326
A. Structural parameters	327
B. Electronic parameters	327
C. Solubility parameters	327
D. Anomalies in isosterism	328

VI. Minor Metalloids-Toxic Isosters	330
A. Carbon–silicon bioisosterism	330
B. Carbon–boron isosterism	331
C. Bioisosteres involving selenium	333
References	334
16. Ring Transformations	343
<i>Christophe Morice and Camille G. Wermuth</i>	
I. Introduction	343
II. Analogical Approaches	343
A. Analogy by ring opening: open-chain analogs	343
B. Analogy by ring closure	345
C. Other analogies	349
III. Disjunctive Approaches	354
A. Cocaine-derived local anesthetics	355
B. Morphinic analgesics	355
C. Dopamine autoreceptor agonists	355
D. CCK antagonists	355
IV. Conjunctive Approaches	356
A. Dopaminergic antagonists	356
B. Glutamate NMDA and AMPA receptor antagonists	358
C. Norfloxacin analogs	359
D. Melatonin analogs	360
V. Conclusion	360
References	360
17. Conformational Restriction and/or Steric Hindrance in Medicinal Chemistry	363
<i>André Mann</i>	
I. Introduction	363
A. Theoretical points	364
B. On constrained analogs	366
C. On conformational analysis	367
D. On the nature of Steric effects	368
E. Rigid compounds and bioavailability	368
II. Case studies	368
A. Bradykinin	368
B. Allylic constraints for inducing conformational rigidity	369
C. Diversity-Oriented Synthesis	371
D. Epibatidine bioactive conformation	371
E. Ligands for the Hepatitis C virus	372
F. Nociceptin	374
G. Opioid receptors ligands	374
H. Peptidomimetics for SH2 domains	375
III. Summary and Outlook	377
References	378
18. Homo and Heterodimer Ligands the Twin Drug Approach	380
<i>Jean-Marie Contreras and Wolfgang Sippl</i>	
I. Introduction	380
II. Homodimer and Symmetrical Ligands	383
A. Symmetry in nature	383
B. Homodimers as receptors ligands	383
C. Homodimers as enzyme inhibitors	387

D. Homodimers as DNA ligands	390
E. Homodimers of pharmacological interest	390
III. Heterodimer and Dual Acting Ligands	391
A. Hybrid molecules as ligands of two different receptors	391
B. Hybrids as enzymes inhibitors	394
C. Hybrids acting at one receptor and one enzyme	398
D. Other examples of dual acting drugs	400
IV. Binding Mode Analysis of Identical and Non-identical Twin Drugs	401
A. Identical and non-identical twin drugs interacting with two adjacent binding sites located on the same macromolecule	403
B. Identical twin drugs interacting with two similar binding sites located on different monomers of the same macromolecule	405
C. Identical and non-identical twin drugs interacting with two different binding sites located on different macromolecules	408
V. Conclusion	409
References	410
19. Application Strategies for the Primary Structure–Activity Relationship Exploration	415
<i>Camille G. Wermuth</i>	
I. Introduction	415
II. Preliminary Considerations	415
III. Hit Optimization Strategies	416
A. Some information about the target is available	417
B. No information about the target is available	418
C. The predominant objective is potency	418
D. The predominant objective is the establishment of SARs	419
E. The predominant objective consists of analog design	422
IV. Application Rules	422
A. Rule number one: the minor modification rule	422
B. Rule number two: the biological logic rule	423
C. Rule number three: the structural logic's rule	424
D. Rule number four: the right substituent choice	424
E. Rule number five: the easy organic synthesis (EOS) rule	425
F. Rule number six: eliminate the chiral centers!	425
G. Rule number seven: the pharmacological logic rule	426
References	426
Part IV Substituents and Functions: Qualitative and Quantitative Aspects of Structure–Activity Relationships	
Section Editor: Han van de Waterbeemd	429
20. Substituent Groups	431
<i>Patrick Bazzini and Camille G. Wermuth</i>	
I. Introduction	431
II. Methyl Groups	432
A. Effects on solubility	432
B. Conformational effects	434
C. Electronics effects	435
D. Effects on metabolism	437
E. Extensions to other small alkyl groups	440

III. Effects of Unsaturated Groups	441
A. Vinyl series	442
B. Allylic series	443
C. Acetylenic series	445
D. Cyclenic equivalents of the phenyl ring	447
IV. Effects of Halogenation	448
A. The importance of the halogens in the structure–activity relationship	448
B. Usefulness of the halogens and of cognate functions	451
V. Effects of Hydroxylation	452
A. Effects on solubility	453
B. Effects on the ligand–receptor interaction	453
C. Hydroxylation and metabolism	453
VI. Effects of Thiols and Other Sulfur-Containing Groups	454
A. Drugs containing thiol	454
B. Drugs containing oxidized sulfides	454
C. Drugs containing thiocyanate or thiourea	454
VII. Acidic Functions	456
A. Effects on solubility	456
B. Effects on biological activity	457
VIII. Basic Groups	458
IX. Attachment of Additional Binding Sites	459
A. To increase lipophilicity	459
B. To achieve additional interactions	459
References	460
21. The Role of Functional Groups in Drug–Receptor Interactions	464
<i>Laurent Schaeffer</i>	
I. Introduction	464
II. General Principles	464
III. The Importance of the Electrostatic and Steric Match Between Drug and Receptor	465
A. Electrostatic interactions	465
B. Steric interactions	471
C. Enthalpy/entropy compensation	472
IV. The Strengths of Functional Group Contributions to Drug–Receptor Interactions	473
A. Measuring functional group contributions	473
B. The methyl group and other nonpolar substituents	475
C. The hydroxyl group and other hydrogen-bond forming substituents	476
D. Acidic and basic substituents	476
E. Practical applications for the medicinal chemist	476
F. Ligand efficiency	478
V. Cooperative binding	478
References	479
22. Compound Properties and Drug Quality	481
<i>Christopher A. Lipinski</i>	
I. Introduction	481
II. Combinatorial Libraries	482
A. Library design for HTS screens	482
B. Experimental synthesis success rate	483
C. Poor solubility and library design	483
D. Importance of the synthesis rate-determining step	483
E. If protocol development is rate determining	484
F. Poor ADME properties – business aspects	484

G. If library production is rate determining	484
H. Relative importance of ADME assays	484
III. Chemistry Control of Intestinal Permeability	484
A. Improving permeability	485
B. Hydrogen bonding and permeability	485
C. Intramolecular hydrogen bonds	485
D. Permeability testing	485
IV. Chemistry Control of Aqueous Solubility	486
A. The definition of poor solubility	486
B. Aqueous solubility and blunt SAR	486
C. Changing the pK_a	486
D. Improving aqueous solubility	487
V. <i>In Vitro</i> Potency and Chemistry Control	487
A. Lead complexity	487
VI. Metabolic stability	488
A. ADME computational models	488
B. Limitations of Caco-2 cell culture	488
C. Poor aqueous solubility and permeability assay noise	489
D. Physiologically-relevant screening concentration	489
VII. Acceptable Solubility Guidelines for Permeability Screens	489
A. Batch-mode solubility prediction	490
References	490
23. Quantitative Approaches to Structure–Activity Relationships	491
<i>Han van de Waterbeemd and Sally Rose</i>	
I. Introduction to QSAR	491
II. Brief History and Outlook	492
III. QSAR Methodology	493
A. Descriptors	493
B. Methods for building predictive models	496
C. Global and local models, and consensus modeling	503
D. Time-series behavior and autoQSAR	503
E. Experimental design	504
F. Inverse QSAR and multi-objective optimization	505
IV. Practical Applications	505
A. Limitations and appropriate use	505
B. Examples	506
C. Library design, compound acquisition and profiling	508
D. HTS analysis	509
E. Software	509
References	510
Part V Spatial Organization, Receptor Mapping and Molecular Modeling	
Section Editor: David J. Triggle	
	515
24. Overview: The Search for Biologically Useful Chemical Space	517
<i>David J. Triggle</i>	
I. Introduction	517
II. How Big is Chemical Space?	518
III. Biological Space is Extremely Small	518
IV. Limited Biological Space as an Effective Biological Strategy	519
References	520

25. Pharmacological Space	521
<i>Andrew L. Hopkins</i>	
I. What is Pharmacological Space?	521
II. Chemical Space	521
A. Drug-like space	522
III. Target Space	524
A. Druggability	525
B. Structure-based druggability	526
C. Degrees of druggability	527
D. Druggable genome	529
VI. Conclusions	531
Acknowledgments	531
References	531
26. Optical Isomerism in Drugs	533
<i>Camille G. Wermuth</i>	
I. Introduction	533
II. Experimental Facts and Their Interpretation	533
A. Stereoselectivity in biologically active compounds	533
B. The three-point contact model	535
C. Diastereoisomers	537
D. Stereoselectivity ratios	537
E. Pfeiffer's rule	538
III. Optical Isomerism and Pharmacodynamic Aspects	538
A. Differences in potency and antagonism between two enantiomers	538
B. Differences in the pharmacological profile of two enantiomers	539
IV. Optical Isomerism and Pharmacokinetic Effects	539
A. Isomer effects on absorption and distribution	540
B. Isomer effects on metabolism	540
C. Isomer effects on uptake	541
D. Isomer effects on excretion	541
V. Practical Considerations	541
A. Racemates or enantiomers?	541
B. The distomer counteracts the eutomer	542
C. Racemic switches	542
D. The distomer is metabolized to unwanted or toxic products	542
E. Deletion of the chiral center	543
F. Usefulness of racemic mixtures	543
References	546
27. Multi-Target Drugs: Strategies and Challenges for Medicinal Chemists	549
<i>Richard Morphy and Z. Rankovic</i>	
I. Introduction	549
II. Strategies for Lead Generation	551
III. Main Areas of Focus in DML Discovery (1990–2005)	553
A. SERT-plus DMLs for depression	554
B. Dopamine D ₂ -plus DMLs for schizophrenia	555
C. DMLs targeting the angiotensin system for hypertension	555
D. Histamine H ₁ -plus DMLs for allergies	558
E. AChE-based DMLs for Alzheimer's disease	559
F. PPAR-based DMLs for metabolic disease	560
G. DMLs that inhibit multiple kinases for treating cancer	560

H. DMLs targeting the arachidonic acid cascade	561
I. Mu-opioid-plus DMLs for treating pain	563
IV. Optimization of the Activity Profile and Wider Selectivity	563
V. The Physicochemical Challenge	565
VI. Summary	568
References	569
28. Pharmacophore Identification and Pseudo-Receptor Modeling	572
<i>Wolfgang Sippl</i>	
I. Introduction	572
A. Historical background	573
B. Definitions	573
C. Importance of the pharmacophore concept	574
D. Application of pharmacophores	574
II. Methodology	575
A. Pharmacophore modeling	575
III. Advanced approaches	577
A. Structure-based pharmacophores	577
B. Pseudo-receptor models	579
IV. Application study	580
A. Pharmacophore-based screening for novel histamine H ₃ -receptor antagonists	580
B. Pharmacophore determination process	581
C. Pharmacophore-based screening of compound libraries	582
V. Conclusions	584
References	584
29. 3D Quantitative Structure–Property Relationships	587
<i>Thierry Langer and Sharon D. Bryant</i>	
I. Introduction	587
II. 3D QSAR Workflow	589
III. 3D QSAR: Conformation Analysis and Molecular Superimposition	590
IV. Calculation of 3D Molecular Field Descriptors	591
V. Statistical Tools	592
VI. Alignment Independent 3D QSAR Techniques	592
VII. Validation Of 3D QSAR Models	594
VIII. Applications	594
A. 3D QSAR study on the structural requirements for inhibiting AChE	594
B. 3D QSAR as a tool to determine molecular similarity	597
IX. Conclusions and Future Directions	601
References	601
30. Protein Crystallography and Drug Discovery	605
<i>Jean-Michel Rondeau and Herman Schreuder</i>	
I. Presentation	605
II. Historical Background	607
A. The early days of crystallography	607
B. The current state of the art	607
C. Past and present contributions to drug discovery	608
III. Examples	609
A. Aliskiren (Tekturna™, Rasilez™)	609
B. Nilotinib (Tasigna™)	610
IV. Basic Principles and Methods of Protein Crystallography	611
A. Crystallization	611

B. Data collection	615
C. From diffraction intensities to a molecular structure	615
D. Information content and limitations of crystal structures	618
V. Practical Applications	621
A. Target identification, selection and validation	621
B. Hit/lead generation	623
C. Lead optimization	627
References	629

Part VI Chemical Modifications Influencing the Pharmacokinetic Properties

Section Editor: Richard B. Silverman

635

31. Physiological Aspects Determining the Pharmacokinetic Properties of Drugs 637

Koen Bousserly, Frans M. Belpaire and Johan Van de Voorde

I. Introduction	637
II. Passage of Drugs Through Biological Barriers	638
A. Transcellular drug transport	638
B. Paracellular drug transport	640
III. Drug Absorption	640
A. Dosage form of the drug	640
B. GI motility and gastric emptying	640
C. GI permeability to the drug	642
D. Perfusion of the GI tract and the first-pass effect	643
IV. Drug Distribution	644
A. Plasma protein binding	644
B. Drug accumulation	645
C. The blood–brain barrier	645
V. Drug Elimination	645
A. Excretion	645
B. Biotransformation	647
VI. Some Pharmacokinetic Parameters and Terminology	648
A. Plasma concentration–time curve	648
B. Volume of distribution	649
C. Clearance	650
D. Elimination half-life ($T_{1/2}$)	651
E. Bioavailability	651
VII. Variability in Pharmacokinetics	652
A. Genetic factors	652
B. Age	652
C. Drug interactions	653
D. Disease state	653
E. Pregnancy	653
Bibliography	654

32. Biotransformation Reactions and their Enzymes 655

Bernard Testa

I. Introduction	655
II. Functionalization Reactions	656
A. Enzymes catalyzing functionalization reactions	657
B. Reactions of carbon oxidation and reduction	660
C. Oxidation and reduction of N- and S-containing moieties	662
D. Reactions of hydration and hydrolysis	663

III.	Conjugation Reactions	664
A.	Introduction	664
B.	Methylation	665
C.	Sulfonation	665
D.	Glucuronidation	665
E.	Acetylation	667
F.	Conjugation with coenzyme A and subsequent reactions	668
G.	Conjugation reactions of glutathione	669
IV.	Biological Factors Influencing Drug Metabolism	671
V.	Concluding Remarks	672
	References	672
33.	Biotransformations Leading to Toxic Metabolites: Chemical Aspects	674
	<i>Anne-Christine Macherey and Patrick M. Dansette</i>	
I.	Historical Background	674
II.	Introduction	675
III.	Reactions Involved in the Bioactivation Process	676
A.	Oxidation	676
B.	Oxidative stress	678
C.	Reduction	680
D.	Substitutions: hydrolysis and conjugation	682
E.	Eliminations	683
F.	Further biotransformations leading to the ultimate toxicant	683
IV.	Examples of Metabolic Conversions Leading to Toxic Metabolites	685
A.	Acetaminophen	685
B.	Tienilic acid	687
C.	Halothane	688
D.	Valproic acid	690
E.	Troglitazone	691
V.	Conclusion	693
	References	694
34.	Drug Transport Mechanisms and their Impact on the Disposition and Effects of Drugs	697
	<i>Jean-Michel Scherrmann</i>	
I.	Introduction	697
II.	Biology and Function of Transporters	698
A.	Modes of active transport	698
B.	Genes and classification	698
C.	Basic structure	699
D.	Distributions and properties of transporters in tissues	699
III.	Transporters in Drug Disposition	702
A.	ABC transporters	702
B.	SLC transporters	703
IV.	Roles of Transporters in Drug Pharmacokinetics, Pharmacodynamics and Toxicology	705
A.	Intestinal absorption	705
B.	Liver and hepatic clearance	706
C.	Blood barriers and tissue distribution	707
D.	Kidney and renal clearance	707
V.	Conclusion	709
	Acknowledgments	709
	References	709

35. Strategies for Enhancing Oral Bioavailability and Brain Penetration	711
<i>Brian C. Shook and Paul F. Jackson</i>	
I. Introduction	711
II. Enhancing Oral Bioavailability	711
A. Metabolic stability	711
B. Structural rigidity	712
C. pK _a	713
D. Hydrogen bond interactions	713
E. Miscellaneous	715
III. Enhancing Brain Penetration	715
A. Metabolic stability	715
B. pK _a	716
C. Log P	717
D. Hydrogen bond interactions	718
IV. Conclusion	719
References	719
36. Designing Prodrugs and Bioprecursors	721
<i>Camille G. Wermuth</i>	
I. Introduction	721
II. The Different Kinds of Prodrugs	721
A. Definitions and classifications	721
B. The carrier prodrug principle	722
C. The bioprecursor-prodrug principle	723
D. Other categories of prodrugs	724
E. Practical applications of prodrug design	724
III. Carrier Prodrugs: Application Examples	724
A. Improvement of the bioavailability and the biomembrane passage	724
B. Site-specific delivery	728
C. Prolonged duration of action	730
IV. Particular Aspects of Carrier Prodrug Design	731
A. Use of cascade prodrugs	731
B. Codrugs	734
C. Soft drugs	734
D. Carrier prodrugs: conclusion	734
V. Bioprecursor Prodrugs: Application Examples	735
A. Oxidative bioactivations	735
B. Reductive bioactivations	737
C. Mixed bioactivation mechanism	738
D. Reactions without change in the state of oxidation	740
VI. Discussion	740
A. Bioprecursors versus carrier prodrugs	740
B. Existence of mixed-type prodrugs	740
VII. Difficulties and Limitations	741
VIII. Conclusion	742
References	742

Part VII Pharmaceutical and Chemical Means to Solubility and Formulation Problems

Section Editor: Michael J. Bowker 747

37. Preparation of Water-Soluble Compounds through Salt Formation	749
<i>Michael J. Bowker and P. Heinrich Stahl</i>	
I. Introduction	749
II. The Solubility of Compounds in Water	750

A. The determination and prediction of solubility	750
B. Ionization of drugs and the importance of pK_a	751
III. Acids and Bases Used in Salt Formation	751
IV. Early salt formation studies	753
A. Choice of salt formers	753
B. Prediction of the pH of the salt in solution	754
C. Search for crystalline salts	755
V. Comparison of Different Crystalline Salts	755
A. Melting point	756
B. Aqueous solubility	756
C. Common ion and indifferent electrolyte effects	758
D. Hygroscopicity	758
E. Solubility in co-solvents (water-miscible solvents)	759
F. Dissolution Rate	759
G. Particle size and crystal morphology	760
H. Polymorphism and pseudopolymorphism	760
I. Chemical stability	761
J. Other properties	761
VI. Implications of Salt Selection on Drug Dosage Forms	762
A. Tablet products	762
B. Hard gelatine capsules	763
C. Parenteral solutions	763
D. Oral solutions	763
E. Suspension formulations	763
F. MDI products	764
G. DPI products	764
H. Soft gelatine capsule formulations	764
I. Emulsions, creams and ointments	764
VII. Conclusion	765
References	765

38. Preparation of Water-Soluble Compounds by Covalent Attachment of Solubilizing Moieties 767

Camille G. Wermuth

I. Introduction	767
II. Solubilization Strategies	768
A. How will the solubilizing moiety be grafted?	768
B. Where will it be grafted?	768
C. What kind of solubilizing chain will be utilized?	768
III. Acidic Solubilizing Chains	769
A. Direct introduction of acidic functions	769
B. Alkylation of OH and NH functions with acidic chains	769
C. Acylation of OH and NH functions with acidic chains	770
IV. Basic Solubilizing Chains	775
A. Direct attachment of a basic residue	775
B. Bioisosteric exchange of a basic functionality	776
C. Development of a water-soluble prodrug of diazepam	776
D. Attachment of the solubilizing moiety to an alcoholic hydroxyl	777
E. Attachment of the solubilizing moiety to an acidic NH function	779
F. Attachment of the solubilizing moiety to a basic NH_2 function	779
G. Attachment of the solubilizing moiety to carboxylic acid functionalities	780
V. Non-ionizable Side Chains	780
A. Glycolyl and glyceryl side chains	780
B. Polyethylene glycol derivatives	781
C. Glucosides and related compounds	781

VI. Concluding Remarks	782
References	783
39. Drug Solubilization with Organic Solvents, or Using Micellar Solutions or Other Colloidal Dispersed Systems	786
<i>Michael J. Bowker and P. Heinrich Stahl</i>	
I. Introduction	786
II. Factors Controlling Solubility and Absorption	788
A. The nature of drug substances	788
B. The polarity of the solvent system	788
III. Water–cosolvent systems	789
IV. Solubilization Mediated by Surfactants	793
V. Solubilization by Lipid Vehicles	798
A. Emulsions and microemulsions	798
B. Liposomes	802
VI. Nanoparticles and Other Nanocolloidal Technologies	803
VII. Drug Delivery and Clearance Mechanisms of Nanocolloids	806
VIII. Drug Delivery and Accumulation Using Colloidal Systems for the Treatment of Cancer	807
A. Liposome formulations	807
B. Formulations based on nanoparticles, microparticles and conjugated systems	808
IX. Modification of Drug Toxicity by Nanocolloidal Drug Delivery Systems	808
References	809
40. Improvement of Drug Properties by Cyclodextrins	813
<i>Kaneto Uekama and Fumitoshi Hirayama</i>	
I. Introduction	813
II. Pharmaceutically Useful CyDs	813
A. Physicochemical profiles of CyDs	814
B. Biological profiles of CyDs	814
III. Improvement of Drug Properties	816
A. Solubilization	817
B. Stabilization in solution	818
C. Control of solid properties	819
D. Release control	821
E. Enhancement of drug absorption	822
F. Reduction of side-effects	824
G. Use in peptide and protein drugs	826
H. Combined use of CyDs with additives	829
IV. CyD-Based Site-Specific Drug Delivery	831
A. Colon targeting	832
B. Cell targeting	834
C. Brain targeting	835
V. Conclusion	835
References	835
41. Chemical and Physicochemical Approaches to Solve Formulation Problems	841
<i>Camille G. Wermuth</i>	
I. Introduction	841
II. Increasing Chemical Stability	841
III. Improved Formulation of Peptides and Proteins	844
IV. Dealing with Mesomorphic Crystalline Forms	845
V. Increasing the Melting Point	846
A. Salt or complex formation	846
B. Covalent derivatives	846

C. Introduction of symmetry	847
VI. Gastrointestinal Irritability and Painful Injections	847
A. Gastrointestinal irritability	847
B. Avoidance of painful injections	848
VII. Suppressing Undesirable Organoleptic Properties	849
A. Odor	849
B. Taste	850
References	852

Part VIII Development of New Drugs: Legal and Economic Aspects

Section Editor: Bryan G. Reuben

855

42. Discover a Drug Substance, Formulate and Develop It to a Product 857

Bruno Galli and Bernard Faller

I. Introduction	857
II. Discover the Drug Substance	857
A. Exploratory research (target finding)	858
B. Early discovery program (lead finding)	858
C. Mature discovery program (lead optimization)	858
D. Research–development interface	859
E. Learning experiences	859
III. Defining Experimental Formulations, The Creative Phase	859
A. Basic thoughts on oral formulation	859
B. What is the purpose of a formulation?	859
C. Suggested sequence of activities prior to start formulation	860
D. Biopharmaceutical classification of compounds	861
E. How do we proceed at a practical level?	861
F. Which formulation principles are used?	862
IV. Pharmaceutical Development in Industry	863
V. Fixing The Quality And Develop The Product in A Regulated Environment	865
References	866

43. Drug Nomenclature 867

R. G. Balocco Mattavelli, J.C. Dong, S. Lasseur and S. Kopp

I. Introduction	867
II. Trade Names and Nonproprietary Names	867
III. Drug Nomenclature	868
A. INNs for pharmaceutical substances	868
B. Common names selected by the International Standards Organization (ISO)	874
IV. Use and Protection of Nonproprietary Names	874
A. Use of nonproprietary names	874
B. Protection of nonproprietary names	874
V. Summary	875
References	875
Annex	875

44. Legal Aspects of Product Protection: What a Medicinal Chemist Should Know about Patent Protection 878

Maria Souleau

I. Introduction	878
A. History of the patent-system prior to 1883	878
B. Main conventions and treaties	879

II. Definition of A Patent – Patent Rights	882
III. Kind of Inventions	882
IV. Subjects of Patents: Basic and Formal Requirements for Filing a Patent	882
A. Basic requirements	882
B. Formal requirements	888
V. Lifetime of Patents	890
VI. Ownership of Patents	890
VII. Infringement of a Patent	890
VIII. Patents as a Source of Information	891
IX. Patenting in the Pharmaceutical Industries	891
X. Conclusion	892
References	892
45. The Consumption and Production of Pharmaceuticals	894
<i>Bryan G. Reuben</i>	
I. “Important” Drugs	895
A. The top-earning drugs	895
B. The most widely prescribed drugs	895
C. National differences in prescribing	899
II. Sources of Drugs	902
A. Vegetable sources	902
B. Animal sources	902
C. Biological sources	902
D. Fermentation	903
E. Chemical synthesis	903
III. Manufacture of Drugs	903
A. Good manufacturing practice	904
B. Plant design	904
C. Formulation and packaging—sterile products	905
D. Choice of reagents	906
E. “Green” chemistry	906
F. Downstream processing	907
G. Outsourcing	907
IV. Social and Economic Factors	909
A. Pattern and cost of innovation	909
B. Patents	910
C. Orphan drugs	911
D. Generic pharmaceuticals	912
E. Parallel trade	914
F. Cost containment measures	914
G. Pharmacoeconomics	916
V. The Future of the Pharmaceutical Industry	918
A. Trends in pharmaceuticals	919
B. Conclusion	920
References	920
Index	923



Camille-Georges Wermuth PhD, Prof. and Founder of Prestwick Chemical, was Professor of Organic Chemistry and Medicinal Chemistry at the Faculty of Pharmacy, Louis Pasteur University, Strasbourg, France from 1969 to 2002. He became interested in Medicinal Chemistry during his two years of military service in the French Navy at the “Centre d’Etudes Physio

biologiques Appliquées à la Marine” in Toulon. During this time he worked under the supervision of Dr Henri Laborit, the scientist who invented artificial hibernation and discovered chlorpromazine.

Professor Wermuths’ main research themes focus on the chemistry and the pharmacology of pyridazine derivatives. The 3-aminopyridazine pharmacophore, in particular, allowed him to accede to an impressive variety of biological activities, including antidepressant and anticonvulsant molecules; inhibitors of enzymes such as mono-amine-oxidases, phosphodiesterases and acetylcholinesterase; ligands for neuro-receptors: GABA-A receptor antagonists, serotonin 5-HT₃ receptor antagonists, dopaminergic and muscarinic agonists. More recently, in collaboration with the scientists of the Sanofi Company, he developed potent antagonists of the 41 amino-acid neuropeptide CRF (corticotrophin-releasing factor) which regulates the release of ACTH

and thus the synthesis of corticoids in the adrenal glands. Professor Wermuth has also, in collaboration with Professor Jean-Charles Schwartz and Doctor Pierre Sokoloff (INSERM, Paris), developed selective ligands of the newly discovered dopamine D₃ receptor. After a three-year exploratory phase, this research has led to nanomolar partial agonists which may prove useful in the treatment of the cocaine-withdrawal syndrome.

Besides about 300 scientific papers and about 80 patents, Professor Wermuth is co-author or editor of several books including; *Pharmacologie Moléculaire*, Masson & Cie, Paris; *Médicaments Organiques de Synthèse*, Masson & Cie, Paris; *Medicinal Chemistry for the Twenty-first Century*, Blackwell Scientific Publications, Oxford; *Trends in QSAR and Molecular Modeling*, ESCOM, Leyden, two editions of *The Practice of Medicinal Chemistry*, Academic Press, London and *The Handbook of Pharmaceutical Salts, Properties Selection and Use*, Wiley-VCH.

Professor Wermuth was awarded the Charles Mentzer Prize of the Société Française de Chimie Thérapeutique in 1984, the Léon Velluz Prize of the French Academy of Science in 1995, the Prix de l’Ordre des Pharmaciens 1998 by the French Academy of Pharmacy and the Carl Mannich Prize of the German Pharmaceutical Society in 2000. He is Corresponding Member of the German Pharmaceutical Society and was nominated Commandeur des Palmes Académiques in 1995. He has been President of the Medicinal Chemistry Section of the International Union of Pure and Applied Chemistry (IUPAC) from 1988 to 1992 and from January 1998 to January 2000 was President of the IUPAC Division on Chemistry and Human Health.

This page intentionally left blank

Section Editors



Michael J. Bowker studied chemistry and received his doctorate in Organic Chemistry from the University of Leeds, UK. After 5 years working for a multinational polymer company, he moved to May & Baker Ltd., a UK subsidiary of Rhône-Poulenc Santé (now Sanofi-Aventis). He was a Director of Analytical Chemistry for about 15 years and, more

recently, Director of Preformulation at Aventis Pharma Ltd. He has been intimately involved in preformulation and solid-state activities, on a worldwide basis for more than 15 years. He has published several research papers and one chapter for a book on pharmaceutical salts and is currently a Director of M. J. Bowker Consulting Limited, a small company undertaking consultancy in salt selection, polymorph selection and pharmaceutical preformulation.



Hugo Kubinyi is a Medicinal Chemist with 35 years of industrial experience in drug design, molecular modeling, protein crystallography and combinatorial chemistry, in Knoll and BASF AG, Ludwigshafen. He is a Professor of Pharmaceutical Chemistry at the University of Heidelberg, former Chair of The QSAR and Modelling Society and IUPAC Fellow.

From his scientific work resulted more than 100 publications and seven books on QSAR, drug design, chemogenomics, and drug discovery technologies.



John R. Proudfoot received his Ph.D. from University College Dublin, Ireland in 1981 working with Professor Dervilla Donnelly. He completed post doctoral studies with Professor Carl Djerassi at Stanford University and Professor John Cashman at the University of California San Francisco.

In 1987, he joined Boehringer Ingelheim and is presently a Distinguished Scientist in the medicinal chemistry department.



Bryan G. Reuben is Professor Emeritus of Chemical Technology at London South Bank University. He has written widely on the technology and economics of the chemical and pharmaceutical industries. His most recent experimental work was on hydrogen–deuterium exchange in protonated peptides and on the downstream processing of nisin.



Richard B. Silverman is the John Evans Professor of Chemistry at Northwestern University. He has published 240 research articles, holds 38 domestic and foreign patents, has written four books, and is the inventor of Lyrica™ (pregabalin), marketed worldwide by Pfizer for refractory epilepsy, neuropathic pain, fibromyalgia, and (in Europe) for generalized anxiety disorder.



David J. Trigg is a SUNY Distinguished Professor and the University Professor State University of New York at Buffalo. Educated in United Kingdom and Canada in physical and organic chemistry he has served a variety roles at Buffalo including Dean of the School of Pharmacy and University Provost. His work has been principally in the area of the chemical pharmacology of drug–receptor and

drug–ion channel interactions. He is the author and editor of some 30 books and several hundred publications.



Han van de Waterbeemd studied organic and medicinal chemistry and got his PhD at the University of Leiden. After his academic years at the University of Lausanne with Bernard Testa he worked for 20 years in the pharmaceutical industry for Roche, Pfizer and AstraZeneca. His research interests are in optimizing compound quality using measured and predicted physico-

chemical and DMPK properties. He contributed to 145 research papers and book chapters, and (co-)edited 13 books.

This page intentionally left blank

Contributors

Raffaella. G. Balocco Mattavelli

Manager of the International Nonproprietary
Names Programme
Quality Assurance & Safety: Medicines
World Health Organization
20, av. Appia
CH-1211, Geneva 27

Paul L. Bartel

Myriad Genetics, Inc.
320 Wakara Way
Salt Lake City, UT 84108
USA

Patrick Bazzini

Prestwick Chemical Inc.
Boulevard Gonthier
d' Andernach
67400 Illkirch
France

Frans M. Belpaire

Heymans Institute for Pharmacology
Jeroom Duquesnoyiaan 37
9051 Gent
Belgium

Koen Boussey

Laboratory of Medical Biochemistry and Clinical Analysis
Faculty of Pharmaceutical Sciences
Gent University
Harelbekestraat 72
9000 Gent
Belgium

Michael J. Bowker

M.J. Bowker Consulting Ltd.
36, Burses Way
Hutton, Brentwood
Essex CM13 2PS
UK

Sharon D. Bryant

Medicinal Chemistry Group
Laboratory of Pharmacology and Chemistry
National Institute of Environmental Health Sciences

P.O. Box 12233, MD: B3-05
Research Triangle Park, NC 27709
USA

David Cavalla

Arachnova
St. John's Innovation Centre
Cambridge CB4 4WS
UK

François Chast

Pharmacy, Pharmacology, Toxicology Department
Hôtel-Dieu
1, Place du Parvis Notre-Dame
75004 Paris
France

Paola Ciapetti

Head of Medicinal Chemistry
Novalyst Discovery
Boulevard Sébastien Brant BP 30170
F-67405 Illkirch Cedex
France

Jean-Marie Contreras

Prestwick Chemical Inc.
Boulevard Gonthier d' Andernach
67400 Illkirch
France

Gordon M. Cragg

Natural Products Branch
National Cancer Institute
1003 W 7th Street, Suite 206
Frederick, MD 21701
USA

Patrick M. Dansette

Laboratoire de Chimie et Biochimie
Pharmacologiques et Toxicologiques
Université PARIS Descartes
UMR 8601 – CNRS
45, Rue des Saints Pères
F-75270 Paris Cedex 06
France

Ji-Cui Dong

International Nonproprietary Names Programme
Quality Assurance & Safety: Medicines
World Health Organization
20, av. Appia
CH-1211, Geneva 27

Bernard Faller

Novartis Pharma AG
Werk Klybeck
Klybeckstrasse 141
WKL-122.P.33
CH-4057 Basel
Switzerland

Bennett T. Farmer

Boehringer Ingelheim Pharmaceuticals, Inc.
900 Ridgebury Road
P.O. Box 368
Ridgefield, CT 06877
USA

Bruno Galli

Novartis Pharma AG
TRD-PTM WSJ-340-451
Lichtstrasse 35
CH-4056 Basel
Switzerland

Jean-Pierre Gies

Université Louis Pasteur
Faculté de Pharmacie
Equipe de Signalisation Cellulaire
74, Route du Rhin
67401 Illkirch-Cedex,
France

Bruno Giethlen

Prestwick Chemical Inc.
Boulevard Gonthier d'Andernach
67400 Illkirch
France

Fumitoshi Hirayama

Faculty of Pharmaceutical Sciences
Sojo University
4-22-1 Ikeda
Kumamoto 860-0082
Japan

Adrian N. Hobden

Myriad Genetics, Inc.
320 Wakara Way
Salt Lake City, UT 84108
USA

Andrew L. Hopkins

Division of Biological Chemistry and Drug Discovery
College of Life Sciences
University of Dundee
Dundee
Scotland DD1 5EH
UK

Peter Imming

Institut für Pharmazie
Martin-Luther-Universität Halle-wittenberg Wolfgang-
Langenbeck-Str. 4
06120 Halle (Saale) Germany

Paul F. Jackson

Johnson & Johnson
Pharmaceutical R&D, L.L.C.
Welsh McKean Roads
P.O. Box 776
Spring House, PA 19477
USA

David G. I. Kingston

Virginia Polytechnic Institute & State University
Department of Chemistry, M/C 0212
3111 Hahn Hall
West Campus Drive
Blacksburg, VA 24061
USA

Sabine Kopp

Medicines Quality Assurance Programme
Quality Assurance & Safety: Medicines
World Health Organization
20, av. Appia
CH-1211 Geneva 27

Hugo Kubinyi

Donnersbergstrasse 9
67256 Weisenheim am Sand
Germany

Kamal Kumar

Max Planck Institute of Molecular Physiology
Otto-Hahn-Str. 11
D-44227 Dortmund
Germany

Yves Landry

Université Louis Pasteur
Faculté de Pharmacie
Equipe de Signalisation Cellulaire
74, Route du Rhin
67401 Illkirch-Cedex,
France

Thierry Langer

Inte:Ligand GmbH
Clemens Maria Hofbauer-G.6
2344 Maria Enzersdorf
Austria

Institute of Pharmacy
University of Innsbruck
Innrain 52
6020 Innsbruck
Austria

Sophie Lasseur

International Nonproprietary Names Programme
Quality Assurance & Safety: Medicines
World Health Organization
20, av. Appia
CH-1211, Geneva 27

Christopher A. Lipinski

Melior Discovery
10 Conshire Drive
Waterford, CT 06385-4122
USA

Anne-Christine Macherey

Unité de Prévention du Risque Chimique
UPS 831–Bat.11
CNRS
Avenue de la Terrasse
F-91198 Gif sur Yvette Cedex
France

André Mann

Département de Pharmacochimie de la Communication
Cellulaire
UMR 7175 LC 1 ULP/CNRS
Faculté de Pharmacie
74 route du Rhin
67401 Illkirch
France

Christophe Morice

Prestwick Chemical Inc.
Boulevard Gonthier
d'Andernach
67400 Illkirch
France

Richard Morphy

Organon Laboratories Ltd.
A part of the Schering Plough Corporation
Newhouse
Lanarkshire
Scotland ML1 5SH
UK

David J. Newman

Natural Products Branch
National Cancer Institute
1003 W 7th Street, Suite 206
Frederick, MD 21701
USA

Jean-Pierre Nowicki

Sanofi-Aventis RD
31, Avenue Paul Vaillant-Couturier
92220 Bagneux
France

Alex Polinsky

Research Technologies
Pfizer Global Research and Development
620 Memorial Drive
Cambridge, MA 02138
USA

John R. Proudfoot

Boehringer Ingelheim
Pharmaceuticals Inc.
900 Ridgebury Road
P.O. Box 368
Ridgefield, CT 06877
USA

Z. Rankovic

Organon Laboratories Ltd.
A part of the Schering Plough Corporation
Newhouse
Lanarkshire
Scotland ML1 5SH
UK

Allen B. Reitz

Johnson & Johnson
Pharmaceutical Research and Development, LLC
Welsh McKean Rds.
Spring House, PA 19477
USA

Bryan G. Reuben

London South Bank University
24 Claverley Grove
London N3 2DH
UK

Jean-Michel Rondeau

Novartis Pharma AG
Novartis Institutes for BioMedical Research
WSJ-88.8.08A
CH-4056 Basel
Switzerland

Sally Rose

Cresset BioMolecular Discovery Ltd
BioPark Hertfordshire
Broadwater Road
Welwyn Garden City
Herts., AL7 3AX
UK

Bernard Scatton

Sanofi-Aventis RD
31, Avenue Paul Vaillant-Couturier
92220 Bagneux
France

Laurent Schaeffer

Prestwick Chemical Inc.
Boulevard Gonthier
d'Andernach
67400 Illkirch
France

Jean-Michel Scherrmann

INSERM U 705; CNRS 7157
University Paris Descartes and Paris Diderot
Department of Pharmacokinetics Faculty of Pharmacy
4, avenue de l'Observatoire
75006 Paris
France

Herman Schreuder

Aventis Pharma Deutschland GmbH
Building G 6865A
D-65926 Frankfurt am Main
Germany

Brian C. Shook

Johnson & Johnson
Pharmaceutical R&D, L.L.C.
Welsh McKean Roads
P.O. Box 776
Spring House, PA 19477
USA

Richard B. Silverman

Department of Chemistry
Northwestern University
2145, Sheridan Road
Evanston, IL 60208-3113
USA

Wolfgang Sippl

Department of Pharmaceutical Chemistry
Martin-Luther-Universität Halle-Wittenberg
Wolfgang-Langenbeck-Str. 4
06120 Halle (Saale)
Germany

Maria Souleau

Sanofi-Aventis
20, Rue Raymond Aron
92160 Antony
France

P. Heinrich Stahl

Lerchenstrasse 28
79104 Freiburg im Breisgau
Germany

Bernard Testa

Service de Pharmacie, CHUV
Centre Hospitalier Universitaire Vaudois
Rue du Bugnon 46
CH-1011 Lausanne
Switzerland

David J Triggle

SUNY at Buffalo
School of Pharmaceutical Sciences
126 Cooke Hall
Buffalo, NY 14260
USA

Kaneto Uekama

Faculty of Pharmaceutical Sciences
Sojo University
4-22-1 Ikeda
Kumamoto 860-0082
Japan

Johan Van de Voorde

Ghent University
Vascular Research Unit
De Pintelaan 185 – Blok B
9000 Gent
Belgium

Han van de Waterbeemd

AstraZeneca
LG DECS, Global Compound Sciences
Alderley Park, 50S39
Macclesfield
Cheshire SK10 4TG
UK

Herbert Waldmann

Max Planck Institute of Molecular Physiology
Otto-Hahn-Str. 11
D-44227 Dortmund
Germany

Camille G. Wermuth

Prestwick Chemical Inc.
Boulevard Gonthier d' Andernach
67400 Illkirch
France

Kenton H. Zavitz

Myriad Genetics, Inc.
320 Wakara Way
Salt Lake City, UT 84108
USA

Stefan Wetzel

Max Planck Institute of Molecular Physiology
Otto-Hahn-Str. 11
D-44227 Dortmund
Germany

This page intentionally left blank

Preface to the First Edition

The role of chemistry in the manufacture of new drugs, and also of cosmetics and agrochemicals, is essential. It is doubtful, however, whether chemists have been properly trained to design and synthesize new drugs or other bioactive compounds. The majority of medicinal chemists working in the pharmaceutical industry are organic synthetic chemists with little or no background in medicinal chemistry who have to acquire the specific aspects of medicinal chemistry during their early years in the pharmaceutical industry. This book is precisely aimed to be their 'bedside book' at the beginning of their career.

After a concise introduction covering background subject matter, such as the definition and history of medicinal chemistry, the measurement of biological activities and the three main phases of drug activity, the second part of the book discusses the most appropriate approach to *finding a new lead compound or an original working hypothesis*. This most uncertain stage in the development of a new drug is nowadays characterized by high-throughput screening methods, synthesis of combinatorial libraries, data base mining and a return to natural product screening. The core of the book (Parts III to V) considers the *optimization of the lead in terms of potency, selectivity, and safety*. In 'Primary Exploration of Structure-Activity Relationships', the most common operational stratagems are discussed, allowing identification of the portions of the molecule that are important for potency. 'Substituents and functions' deals with the rapid and systematic optimization of the lead compound. 'Spatial Organization, Receptor Mapping and Molecular Modelling' considers the three-dimensional aspects of drug-receptor interactions, giving particular emphasis to the design of peptidomimetic drugs and to the control of the agonist- antagonist transition. Parts VI and VII concentrate on the definition of satisfactory drug-delivery conditions, i.e. means to ensure that the molecule reaches its target organ. Pharmacokinetic properties are improved through adequate chemical modifications, notably prodrug design, obtaining suitable water solubility (of utmost importance in medical practice) and improving organoleptic properties (and thus rendering the drug administration acceptable to the patient). Part VIII, 'Development of New Drugs: Legal and Economic Aspects', constitutes an important area in which chemists are almost wholly self taught following their entry into industry.

This book fills a gap in the available bibliography of medicinal chemistry texts. There is not, to the author-editor's knowledge, any other current work in print which

deals with the practical aspects of medicinal chemistry, from conception of molecules to their marketing. In this single volume, all the disparate bits of information which medicinal chemists gather over a career, and generally share by word-of-mouth with their colleagues, but which have never been organized and presented in coherent form in print, are brought together. Traditional approaches are not neglected and are illustrated by modern examples and, conversely, the most recent discovery and development technologies are presented and discussed by specialists. Therefore, *The Practice of Medicinal Chemistry* is exactly the type of book to be recommended as a text or as first reading to a synthetic chemist beginning a career in medicinal chemistry. And, even if primarily aimed at organic chemists entering into pharmaceutical research, all medicinal chemists will derive a great deal from reading the book.

The involvement of a large number of authors presents the risk of a certain lack of cohesiveness and of some overlaps, especially as each chapter is written as an autonomic piece of information. Such a situation was anticipated and accepted, especially for a first edition. It can be defended because each contributor is an expert in his/her field and many of them are 'heavyweights' in medicinal chemistry. In editing the book I have tried to ensure a balanced content and a more-or-less consistent style. However, the temptation to influence the personal views of the authors has been resisted. On the contrary, my objective was to combine a plurality of opinions, and to present and discuss a given topic from different angles. Such as it is, this first edition can still be improved and I am grateful in advance to all colleagues for comments and suggestions for future editions.

Special care has been taken to give complete references and, in general, each compound described has been identified by at least one reference. *For compounds for which no specific literature indication is given, the reader is referred to the Merck Index.*

The cover picture of the book is a reproduction of a copperplate engraving designed for me by the late Charles Gutknecht, who was my secondary school chemistry teacher in Mulhouse. It represents an extract of Brueghel's engraving *The alchemist ruining his family in pursuing his chimera*, surmounted by the aquarius symbol. Represented on the left-hand side is my lucky charm castor oil plant (*Ricinus communis* L., *Euphorbiaceae*), which was the starting point of the pyridazine chemistry in my laboratory. The historical cascade of events was as follows: cracking of castor oil produces n-heptanal and aldolization of

n-heptanal – and, more generally, of any enolisable aldehyde or ketone – with pyruvic acid leads to α -hydroxy- γ -keto acids. Finally, the condensation of these keto acids with hydrazine yields pyridazines. Thus, all our present research on pyridazine derivatives originates from my schoolboy chemistry, when I prepared in my home in Mulhouse n-heptanal and undecylenic acid by cracking caster oil!

Preparing this book was a collective adventure and I am most grateful to all authors for their cooperation and for the time and the effort they spent to write their respective contributions. I appreciate also their patience, especially as the editing process took much more time than initially expected.

I am very grateful to Brad Anderson (University of Utah, Salt Lake city), Jean-Jacques André (Marion Merrell

Dow, Strasbourg), Richard Baker (Eli Lilly, Erl Wood, UK), Thomas C. Jones (Sandoz, Basle), Isabelle Morin (Servier, Paris), Bryan Reuben (London South Bank University) and John Topliss (University of Michigan, Ann Arbor) for their invaluable assistance, comments and contributions.

My thanks go also to the editorial staff of Academic Press in London, Particularly to Susan Lord, Nicola Linton and Fran Kingston, to the two copy editors Len Cegiela and Peter Cross, and finally, to the two secretaries of our laboratory, Franqois Herth and Marylse Wernert.

Last but not least, I want to thank my wife Renée for all her encouragement and for sacrificing evenings and Saturday family life over the past year and a half, to allow me to sit before my computer for about 2500 hours!

Camille G. Wermuth

Preface to the Second Edition

Like the first edition of *The Practice of Medicinal Chemistry* (nicknamed ‘The Bible’ by medicinal chemists) the second edition is intended primarily for organic chemists beginning a career in drug research. Furthermore, it is a valuable reference source for academic, as well as industrial, medicinal chemists. The general philosophy of the book is to complete the biological progress – Intellectualization at the level of function using the chemical progress Intellectualization at the level of structure (Professor Samuel J. Danishevsky, *Studies in the chemistry and biology of the epothilones and eleutherobins*, Conference given at the XXXIV^{èmes} Rencontres Internationales de Chimie Thérapeutique, Faculté de Pharmacie, Nantes, 8–10 July, 1998).

The recent results from genomic research have allowed for the identification of a great number of new targets, corresponding to hitherto unknown receptors or to new subtypes of already existing receptors. The massive use of combinatorial chemistry, associated with high throughput screening technologies, has identified thousands of hits for these targets. The present challenge is to develop these hits into usable and useful drug candidates. This book is, therefore, particularly timely as it covers abundantly the subject of drug optimization.

The new edition of the book has been updated, expanded and refocused to reflect developments over the nine years since the first edition was published. Experts in the field have provided personal accounts of both traditional methodologies, and the newest discovery and development technologies, giving us an insight into diverse aspects of medicinal chemistry, usually only gained from years of practical experience.

Like the previous edition, this edition includes a concise introduction covering the definition and history of

medicinal chemistry, the measurement of biological activities and the three main phases of drug activity. This is followed by detailed discussions on the discovery of new lead compounds including automated, high throughput screening techniques, combinatorial chemistry and the use of the internet, all of which serve to reduce pre-clinical development times and, thus, the cost of drugs. Further chapters discuss the optimization of lead compounds in terms of potency, selectivity, and safety; the contribution of genomics; molecular biology and X-ray crystallization to drug discovery and development, including the design of peptidomimetic drugs; and the development of drug-delivery systems, including organ targeting and the preparation of pharmaceutically acceptable salts. The final section covers legal and economic aspects of drug discovery and production, including drug sources, good manufacturing practices, drug nomenclature, patent protection, social-economic implications and the future of the pharmaceutical industry.

I am deeply indebted to all co-authors for their cooperation, for the time they spent writing their respective contributions and for their patience during the editing process. I am very grateful to Didier Rognan, Paola Ciapetti, Bruno Giethlen, Annie Marcincal, Marie-Louise Jung, Jean-Marie Contreras and Patrick Bazzini for their helpful comments.

My thanks go also to the editorial staff of *Academic Press* in London, particularly to Margaret Macdonald and Jacqueline Read. Last but not least, I want to express my gratitude to my wife Renée for all her encouragements and for her comprehensiveness.

Camille G. Wermuth

This page intentionally left blank

Preface to the Third Edition

Like the preceding editions of this book, this third edition treats of the essential elements of medicinal chemistry in a unique volume. It provides a practical overview of the daily problems facing medicinal chemists, from the conception of new molecules through to the production of new drugs and their legal/economic implications. This edition has been updated, expanded and refocused to reflect developments in the past 5 years, including 11 new chapters on topics such as hit identification methodologies and cheminformatics. More than 50 experts in the field from eight different countries, who have benefited from years of practical experience, give personal accounts of both traditional methodologies and the newest discovery and development technologies, providing readers with an insight into medicinal chemistry.

A major change in comparison to the previous editions was the decision to alleviate my editorial burden in sharing it with seven section editors, each being responsible for one of the eight sections of the book. I highly appreciated their positive and efficacious collaboration and express them my warmest thanks (in the alphabetical order) to Michael Bowker, Hugo Kubinyi, John Proudfoot, Bryan Reuben, Richard Silverman, David Triggler and Han van de Waterbeemd.

Another change was the decision taken by Elsevier/Academic Press to publish the book in full colors thus rendering it more pleasant and user-friendly. I take this occasion to thank Keri Witman, Pat Gonzales, Kirsten Funk and Renske van Dijk for having successively ensured the editorial development of the book. Taking into account that we had to work with a cohort of about 50 authors, each of them having his personality, his original approach and his main busy professional life, this was not an easy task. I am deeply indebted to my assistant Odile Blin for the way she had mastered, efficiently and with friendliness, all the secretarial work and particularly the contacts with the different authors and with the Elsevier development editors. As for the earlier editions, I also want to express my gratitude to my wife Renée and my daughters Delphine, Joëlle and Séverine for all their encouragements and for sacrificing many hours of family life in order to leave me enough free time to edit this new version of the “Medicinal Chemist’s Bible.”

My final thoughts go to the future readers of the book, and especially to the newcomers in Medicinal Chemistry having the curiosity to read the preface. I cannot resist giving them some advice for doing good science.

First of all, be open-minded and original. As Schopenhauer noted, the task of the creative mind is “not so much to see what no one has seen yet; but to think what nobody has thought yet, about what everyone sees.” A wonderful illustration is found in Peter Hesse’s cartoon below.



“IT’S CALLED FIRE... IT RECYCLES WOOD.”

Second, always keep in mind that the object of Medicinal Chemistry is to synthesize new drugs useful for suffering patients. Like many scientists, medicinal chemists, have to navigate between two tempting reefs. On one side they should avoid doing “NAAR”: non-applicable applied research, on the other side they may be attracted by “NFBR”: non-fundamental basic search.”

Third, convinced as they may be that the neighbors grass is always greener, they may be attracted to start their research in using as a hit a recently published competitor’s product. In fact, the published compound may exhibit only a weak activity, therefore be very careful when starting a new program and never forget that the worst thing a medicinal chemist can do is to prepare a me-too of an inactive compound!

Camille G. Wermuth

This page intentionally left blank

Part I

General Aspects of Medicinal Chemistry

Hugo Kubinyi

Section Editor

This page intentionally left blank

A History of Drug Discovery

From first steps of chemistry to achievements in molecular pharmacology

François Chast

I. INTRODUCTION	C. Fight against microbes and viruses	J. Drugs of the mind
A. The renewal of chemistry	D. Drugs for immunosuppression	III. CONSIDERATIONS ON RECENT TRENDS IN DRUG DISCOVERY
B. The dawn of the organic chemistry crosses the birth of biology	E. Contribution of chemists to the fight against cancer	A. From genetics to DNA technology
II. TWO HUNDRED YEARS OF DRUG DISCOVERIES	F. Drugs for endocrine disorders	B. Hopes and limits for drug hunting
A. Pain killers: best-sellers and controversies	G. Anti-acid drugs	REFERENCES
B. Giving back the heart its youth	H. Lipid lowering drugs	
	I. From neurotransmitters to receptors	

Le médicament place l'organisme dans des conditions particulières qui en modifient heureusement les procédés physiques et chimiques lorsqu'ils ont été troublés.

Claude Bernard*

During more than 2,000 years, Hippocratic medical tradition weighed on the development of a modern medicine and a renewed approach of the treatment of diseases. The basis for the use of drugs remained founded on empirical theories linked to the equilibrium of body's "humors" consisting in sanguine, melancholic, phlegmatic and choleric. Health and disease were seen as a question of balance or imbalance with foods and herbs classified according to their ability to affect natural homeostasis. Later, during the Middle Ages, Muslim world made significant contributions to medicine and a major medical advance was the founding of many hospitals and university medical schools.

Before the 1800s, pharmacy remained an empiric science, guided by traditional medicine, inherited from

"Ancients." Numerous drugs, most of them being prepared with plant extracts, (Figure 1.1) sometimes efficacious, were available. But none of them could respond to a chemical definition of what we call today a drug, except drugs coming from mineral reign.

The technology of making drugs was crude at best: tinctures, poultices, soups, and infusions were made with water- or alcohol-based extracts of freshly ground or dried herbs or animal products such as bone, fat, or even pearls, and sometimes from minerals best left in the ground.¹

The objective of this first chapter is to offer a presentation of the fabulous history of drug discoveries, from traditional pharmacy emerged from ethnopharmacy, till the recent

*Leçons sur les Effets de Substances Médicamenteuses et Toxiques (1857) deuxième leçon (5 mars 1856), p.38: "Drugs place the body in particular conditions which modify fortunately the physical and chemical processes when they have been disturbed."



FIGURE 1.1 Opium latex flowing out of poppy.

concepts of drug design, production and development, born from molecular genetics and molecular pharmacology.

Of course, it is not possible to describe exhaustively, in such a short chapter, such a complex and diversified history. We made the choice to describe the evolution of few families of drugs as examples of mankind ingenuity and intelligence to make pharmaceutical progress more and more successful in treating or preventing diseases.

I. INTRODUCTION

A. The renewal of chemistry

The 18th century concluded its progress in chemistry with an enthusiastic environment. Joseph Priestley in the United Kingdom, Carl Wilhelm Scheele in Sweden, Antoine Laurent de Lavoisier in France,² gave a precise signification to the chemical reactivity and promoted a large number of substances to the statute of chemical reagents. Scheele and Priestley prepared and studied oxygen. Both of them discovered nitrogen as a constituent of air, carbon monoxide, ammonia, and several other gases; manganese, barium and chlorine; isolated glycerin and many acids, including tartaric, lactic, uric, prussic, citric, and gallic. Lavoisier is generally considered as the founder of modern chemistry as creating the oxygen theory of combustion.³ He should be known as one of the most astonishing 18th century “men of the Enlightenment,” the founder of modern scientific

experimental methodology. By formulating the principle of the conservation of mass, he gave a clear differentiation between elements and compounds, something so important for pharmaceutical chemistry. Few years later, Antoine François de Fourcroy, Louis Nicolas Vauquelin, Joseph Louis Proust, Jöns Jakob Berzelius, Louis-Joseph Gay-Lussac, and Humphrey Davy introduced new concepts in chemistry. Those scientists integrated the practical advancements of a new generation of experimenters. All these industrial innovations would have their own impact on other developments in industrial and then medicinal chemistry.⁴ At the turn of the 19th century, as the result of a scientific approach, drugs are becoming an industrial item. Claude Louis Berthollet began the industrial exploitation of chlorine (1785). Nicolas Leblanc prepared sodium hydroxide (1789) and then, bleach (1796). Davy performed electrolysis and distinguished between acids and anhydrides. Louis Jacques Thénard prepared hydrogen peroxide and Antoine Jérôme Balard discovered bromide (1826). The growing of therapeutic resources was mainly due to the mastery of chemical or physico-chemical principles proposed by Gay-Lussac and Justus Von Liebig.⁵ This chemists’ generation, by realizing all these discoveries, established the compost of the therapeutic discoveries of the 19th century. The constitution of chemistry as a scientific discipline found a new turn few decades later by crossing the road of biology which included revolutionary works of Claude Bernard,⁶ Rudolph Virchow,⁷ and Louis Pasteur.⁸ Besides these fundamental sciences, physiology, biochemistry, or microbiology were becoming natural tributaries of the outbreak of pharmacology. Thus, rational treatments were about to be designed on the purpose of new knowledge in various clinical or fundamental fields. After a period characterized by extraction and purification from natural materials (mainly plants), drugs would be synthesized in chemical factories or prepared through biotechnology (fermentation or gene technology) after a rational research, design and development in research laboratories. Whereas the purpose was to isolate active molecules from plants during the first half of the 19th century, the birth of organic chemistry following charcoal and oil industries, progressively led chemists and pharmacists toward organic synthesis performed in what would be called “laboratory” a new concept created by this generation of scientists. Even when those laboratories hosted discoveries like active principles extracted from plants, progresses in drug compounding and packaging made irreversible industrialization processes. At the same time, the economical dimension of growing pharmaceutical industry transformed drugs as strategic items, mainly when it could interfere with military processes, for instance during colonial expeditions.

The “modern” word “*pharmacology*” became more and more often used by physicians after the works of François Magendie (Figure 1.2) in France or Oscar Schmiedeberg in Germany. Progressively a clear dichotomy took place between those two entities. *Materia Medica* considered drugs with a static and conservative view as for their