

# Investigation of CA-4 metabolism and related $\beta$ -lactam analogues in chemoresistant HT-29 colon cancer cells

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## Introduction

- Drug resistance is a common cause of the failure of chemotherapeutic agents to achieve cytotoxicity responses in human malignant disease.
- Drug inactivation by metabolism within tumour cells is recognised as an important mechanism of drug resistance [1].
- Glucuronidation is a major route for the metabolic inactivation of many drugs and also endogenous substances.
- Combretastatin-A4 (CA-4) undergoes direct glucuronidation in the presence of UGTs at the meta-hydroxy group of the B-ring and could cause an inherent resistance in HT-29 colon cancer cells [2].

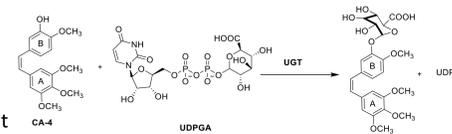


Figure 1 : Glucuronidation reaction of CA-4

## Results and Discussion

### Comparison of antiproliferative activity between m-hydroxy ring B and deletion of m-hydroxy ring B $\beta$ -lactam compounds

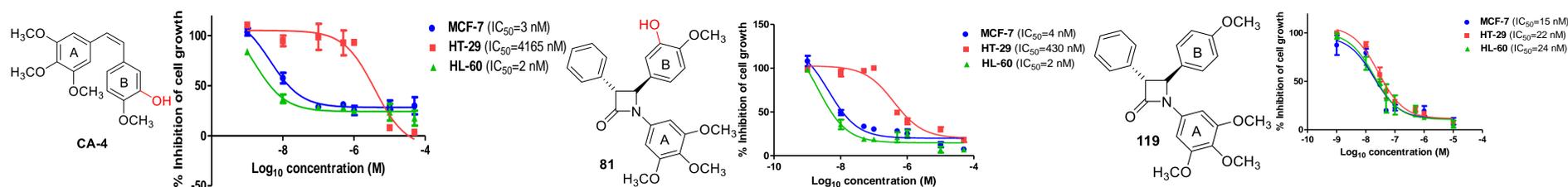


Figure 2 : Antiproliferative effect of CA-4, 81 and 119 in MCF-7, HT-29 and HL-60 cancer cells.

- The excellent activity of CA-4 in MCF-7 cells in nanomolar range and its resistance in HT-29 cells with  $IC_{50} = 4 \mu M$  is well known
- compound 81 (bearing m-hydroxyphenyl ring B) mimics the same manner of low cytotoxicity as CA-4 in HT-29 cells.
- Compound 119 is an example of deletion of m-hydroxy in ring B that showed the significant improvement of cytotoxicity in HT-29 cells compared to its related m-hydroxyphenyl ring B  $\beta$ -lactam as well as CA-4

### Expression level of UGT protein is significantly higher in CA-4 resistant HT-29 cells as compared to CA-4 sensitive MCF-7 and HL-60 cells

- The endogenous level of UGT in CA-4 resistant HT-29 cells was significantly higher when compared to UGT expression levels in CA-4 sensitive MCF-7 and HL-60 cells.
- The apparent abundant expression of UGT in HT-29 cells would confer resistance to CA-4 and derivatives of CA-4 that contain the required phenolic functional groups which facilitate glucuronate conjugation and subsequent inactivation.

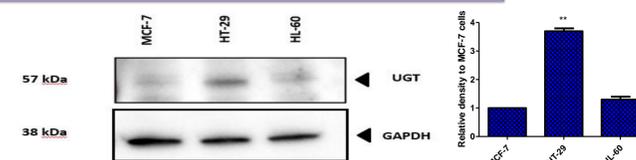
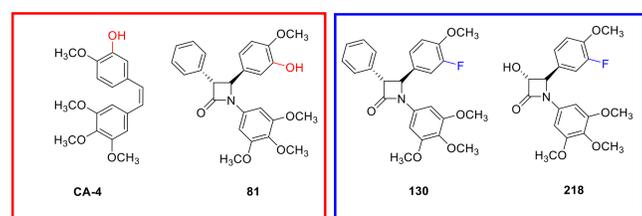


Figure 3 : Western blot analysis of the expression of UGT protein levels in MCF-7, HT-29 and HL-60 cells using UGT antibody .

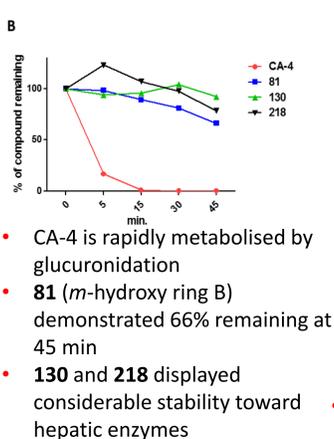
### Microsomal metabolic stability



Potency in HT-29 cells			
$IC_{50}$ : 3 nM (MCF-7 cells)	4 nM (MCF-7 cells)	16 nM (MCF-7 cells)	22 nM (MCF-7 cells)
$IC_{50}$ : 4165 nM (HT-29 cells)	430 nM (HT-29 cells)	9 nM (HT-29 cells)	3 nM (HT-29 cells)

Metabolic stability in HT-29 cells			
$CL_{int}$ : 645 $\mu L/min/mg$ protein	18.1 $\mu L/min/mg$ protein	0.982 $\mu L/min/mg$ protein	14.2 $\mu L/min/mg$ protein
$t_{1/2}$ : 2.15 min	76.5 min	1410 min	97.7 min

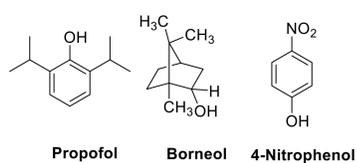
Figure 4 : microsomal metabolic stability for CA-4 and compounds 81, 130 and 218



- CA-4 is rapidly metabolised by glucuronidation
- 81 (m-hydroxy ring B) demonstrated 66% remaining at 45 min
- 130 and 218 displayed considerable stability toward hepatic enzymes

### Evaluation of CA-4 stability in HT-29 cells using different UGT inhibitors

Inhibitor	Boreneol	Propofol		4-nitrophenol			
		-	+	-	+		
Flufenamic acid	Cl <sub>int</sub>	7.75	4.79	10.0	2.20	19.7	1.11
	$t_{1/2}$	89.4	145	69	314	35.5	623
Mefenamic acid	Cl <sub>int</sub>	10.5	6.59	12.5	2.20	14.8	0.61
	$t_{1/2}$	66.1	105	55.4	316	46.2	1140
CA-4	Cl <sub>int</sub>	21.5	21.2	21.55	15.2	26.1	13.7
	$t_{1/2}$	32.8	32.7	32.25	45.6	25	50



- Intrinsic clearance ( $Cl_{int}$ ) ( $\mu L/min/million$  cells) and half-life ( $t_{1/2}$ ) for flufenamic acid, mefenamic acid as positive controls, together with CA-4 in HT-29 cells in the presence or absence of boreneol, propofol and 4-Nitrophenol are shown in table 1.
- CA-4 pretreatment with boreneol indicated weak inhibition
- There is a significant intracellular accumulation of CA-4 treated with propofol compared to CA-4 alone
- 4-nitrophenol produced a significant inhibition of CA-4 metabolism by glucuronotransferase in HT-29 cells.

Table 1: Intrinsic clearance ( $Cl_{int}$ ) ( $\mu L/min/mg$  protien) and half-life ( $t_{1/2}$ ) (min) for flufenamic acid, mefenamic acid, CA-4 and 81 in HT-29 cells

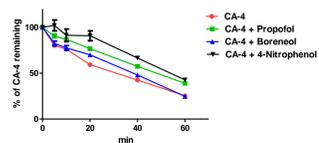


Figure 6 : Percentage of CA-4 pretreated with different UGT inhibitors remaining in HT-29 cells

- Many different glucuronidation inhibitors for CA-4 were used to evaluate UDP-glucuronyltransferase activity toward CA-4.
- Three different known inhibitors of glucuronidation were used; boreneol, propofol and 4-nitrophenol.
- 4-Nitrophenol was found to be the most potent inhibitor of UGTs activity in HT-29 cells compared to the other inhibitors which used boreneol and propofol
- There is a significant improvement of CA-4 and  $\beta$ -lactam 81 cytotoxicity pretreated with 4-nitrophenol at 6, 12 and 24 h and at higher concentration at 10 and 50  $\mu M$ .

## Conclusion:

- CA-4 resistance mediated by glucuronidation could be inhibited weakly by a broad UGT inhibitor Boreneol, and strongly inhibited by UGT1A9 competitive inhibitor propofol, or UGT1A6 substrate 4-nitrophenol.
- The strategic deletion of the ring B hydroxyl group can produce CA-4 analogues that are equally effective in cancer cells expressing UGTs as compared to those expressing little or undetectable levels of UGTs, offering a simple solution to overcoming resistance associated with glucuronidation of CA-4.

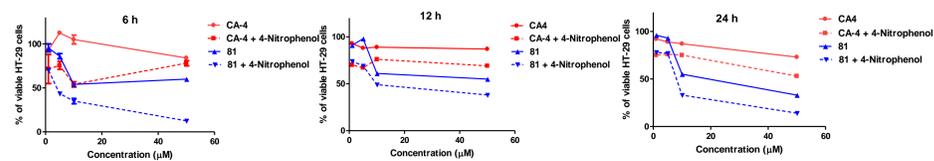
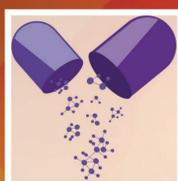


Figure 7: 4-Nitrophenol inhibits CA-4 and 81 inactivation in HT-29 cells. Cells were treated with different concentration of CA-4 and 81 alone or in the presence of 10  $\mu M$  of 4-nitrophenol for 6, 12 and 24 h

## References:

- 1-Vickers, P.J. et al, Mechanisms of resistance to antineoplastic drugs. In *Developments in cancer chemotherapy*, CRC Press: 2019; pp. 117-152.
- 2-Malebari, A.M. et al,  $\beta$ -Lactam analogues of combretastatin A-4 prevent metabolic inactivation by glucuronidation in chemoresistant HT-29 colon cancer cells. *European journal of medicinal chemistry* 2017, 130, 261-285.
- 3-Quan, H. et al, 1,4-Diamino-2,3-dicyano-1,4-bis(methylthio)butadiene (U0126) enhances the cytotoxicity of combretastatin A4 independently of mitogen-activated protein kinase kinase. *J Pharmacol Exp Ther* 2009, 330, 326-333.



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