



Contents lists available at ScienceDirect

Neuropharmacology

journal homepage: www.elsevier.com/locate/neuropharm

C-547, a 6-methyluracil derivative with long-lasting binding and rebinding on acetylcholinesterase: Pharmacokinetic and pharmacodynamic studies

Konstantin Petrov^{a, b}, Irina Zueva^a, Irina Kovyazina^c, Igor Sedov^b, Sofya Lushchekina^d, Alexandra Kharlamova^a, Oksana Lenina^a, Sergei Koshkin^b, Yurii Shtyrlin^b, Evgeny Nikolsky^{a, b, e}, Patrick Masson^{b, *}

^a A.E. Arbuzov Institute of Organic and Physical Chemistry of Russian Academy of Sciences, Arbuzov str. 8, Kazan 420088 Russia

^b Kazan Federal University, Kremlevskaya str, 18, Kazan 420008, Russia

^c Kazan Institute of Biochemistry and Biophysics of Russian Academy of Sciences, P.O. Box 30, Kazan 420111, Russia

^d N.M. Emanuel Institute of Biochemical Physics of Russian Academy of Sciences, Kosygina str. 4, Moscow 119334, Russia

^e Kazan State Medical University, Kazan 420012, Russia

ARTICLE INFO

Article history:

Received 18 July 2017

Received in revised form

7 December 2017

Accepted 19 December 2017

Available online 24 December 2017

Keywords:

Acetylcholinesterase

6-methyluracil

Binding kinetics

Myasthenia gravis

Pharmacokinetics

Pharmacodynamics

ABSTRACT

C-547, a potent slow-binding inhibitor of acetylcholinesterase (AChE) was intravenously administered to rat (0.05 mg/kg). Pharmacokinetic profiles were determined in blood and different organs: *extensor digitorum longus* muscle, heart, liver, lungs and kidneys as a function of time. Pharmacokinetics (PK) was studied using non-compartmental and compartmental analyses. A 3-compartment model describes PK in blood. Most of injected C-547 binds to albumin in the bloodstream. The steady-state volume of distribution (3800 ml/kg) is 15 times larger than the distribution volume, indicating a good tissue distribution. C-547 is slowly eliminated ($k_{el} = 0.17 \text{ h}^{-1}$; $T_{1/2} = 4 \text{ h}$) from the bloodstream.

Effect of C-547 on animal model of *myasthenia gravis* persists for more than 72 h, even though the drug is not analytically detectable in the blood. A PK/PD model was built to account for such a pharmacodynamical (PD) effect. Long-lasting effect results from micro-PD mechanisms: the slow-binding nature of inhibition, high affinity for AChE and long residence time on target at neuromuscular junction (NMJ). In addition, NMJ spatial constraints i.e. high concentration of AChE in a small volume, and slow diffusion rate of free C-547 out of NMJ, make possible effective rebinding of ligand. Thus, compared to other cholinesterase inhibitors used for palliative treatment of *myasthenia gravis*, C-547 is the most selective drug, displays a slow pharmacokinetics, and has the longest duration of action. This makes C-547 a promising drug leader for treatment of *myasthenia gravis*, and a template for development of other drugs against neurological diseases and for neuroprotection.

© 2017 Elsevier Ltd. All rights reserved.

Abbreviations: ACh, acetylcholine; AChE, acetylcholinesterase; ACh, acetylthiocholine; BBB, blood brain barrier; BChE, butyrylcholinesterase; BK, binding kinetics; BSA, bovine serum albumin; C-547, 1,3-bis[5(diethyl-o-nitrobenzylammonium)pentyl]-6-methyluracil dibromide; ChE, cholinesterase; CMAP, compound muscle action potential; DTNB, dithiobisnitrobenzoic acid; EAMG, experimental autoimmune *myasthenia gravis*; EDL, Extensor digitorum longus muscle; iso-OMPA, tetraisopropyl pyrophosphoramidate; MG, *myasthenia gravis*; MRT, mean residence time; NMJ, neuromuscular junction; PK/PD, pharmacokinetics/pharmacodynamics; RBC, red blood cell.

* Corresponding author.

E-mail addresses: pym.masson@free.fr, PMasson@kpfu.ru (P. Masson).

1. Introduction

Translational drug research implies a tight coupling between molecular mechanisms, modeling, pharmacokinetics and pharmacodynamics. This approach has been implemented for the discovery of new drugs for the treatment of *myasthenia gravis* (MG). In this respect, C-547, an alkylammonium derivative of 6-methyluracil (Scheme 1) — potent inhibitor of acetylcholinesterase (AChE) — was considered as a promising drug (Kharlamova et al., 2016; Petrov et al., 2011). Unlike its non-charged analogue (C-35) that is of potential interest for the treatment of Alzheimer disease (Semenov et al., 2015), C-547 does not cross the blood-brain barrier