Published in final edited form as:

Bioorg Med Chem Lett. 2019 February 01; 29(3): 471–476. doi:10.1016/j.bmcl.2018.12.022.

Muscarinic agonist, ($\pm$)-quinuclidin-3-yl-(4-fluorophenethyl)(phenyl) carbamate: High affinity, but low subtype selectivity for human M₁ – M₅ muscarinic acetylcholine receptors

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Abstract

Novel quinuclidinyl *N*-phenylcarbamate analogs were synthesized, and binding affinities at M₁–M₅ muscarinic acetylcholine receptor (mAChR) subtypes were determined using Chinese hamster ovary (CHO) cell membranes stably expressing one specific subtype of human mAChR. Although not subtype selective, the lead analog ($\pm$)-quinuclidin-3-yl-(4-fluorophenethyl)(phenyl)carbamate (**3c**) exhibited the highest affinity (K_i = 2.0, 13, 2.6, 2.2, 1.8 nM) at each of the M₁–M₅ mAChRs, respectively. Based on results from the [³H]dopamine release assay using rat striatal slices, **3c** acted as an agonist at mAChRs. The effect of **3c** was inhibited by the nonselective mAChR antagonist, scopolamine, and **3c** augmented release evoked by oxotremorine. A potent analog from the same scaffold, ($\pm$)-quinuclidin-3-yl-(4-methoxyphenethyl)(phenyl)-carbamate (**3b**) exhibited the greatest selectivity (17-fold) at M₃ over M₂ mAChRs. These analogs could serve as leads for further discovery of novel subtype-selective muscarinic ligands with the goal of providing therapeutics for substance use disorders and chronic obstructive pulmonary disease.

Keywords

Carbamate; Muscarinic acetylcholine receptors; [³H]N-methylscopolamine binding; [³H]dopamine release; Substance use disorders; Chronic obstructive pulmonary disease

Muscarinic acetylcholine receptors (mAChRs) consist of five subtypes (M₁, M₂, M₃, M₄ and M₅ mAChRs). Each mAChR subtype has a unique expression pattern and activates distinct cholinergic signaling mechanisms and cellular functions.^{1,2} Each mAChR subtype can be considered as a therapeutic target for relevant diseases that are associated with specific cell functions modulated by the mAChR subtype. For example, M₁ mAChRs expressed in cerebral cortex, striatum and hippocampus mediate learning and memory processes.³ M₁ mAChRs allosteric agonists, VU0357017 and VU0364572, enhance spatial learning in rats in the Morris water maze.^{4,5} Agonists at M₁ mAChRs have been proposed as

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pharmacotherapeutics for Alzheimer's disease and schizophrenia.^{1,6,7} Another example is the M₃ mAChR, which mediates contraction of smooth muscles in the respiratory system.^{8,9} M₃ mAChR antagonists, such as tiotropium or umeclidinium have been approved by the US Food and Drug Administration (FDA) as therapeutics for chronic obstructive pulmonary disease (COPD).^{1,10,11} More recently, a combination therapy including umeclidinium and vilanterol, a β 2-adrenergic agonist, was approved by the FDA for COPD.¹² Thus, mAChRs are viable targets for drug discovery.

M₅ mAChRs are specifically and highly expressed in the ventral tegmental area (VTA), a brain region containing dopamine (DA) neuronal cell bodies, which project to the nucleus accumbens (NAc).^{13–18} Importantly, NAc DA release mediates the rewarding effects of many substances with high abuse liability, including opioids (e.g., morphine) and psychostimulants (e.g., cocaine and amphetamines).^{19–22} With respect to opioids, morphine-induced DA release in the NAc is absent in M₅ mAChR knockout (KO) mice, linking M₅ mAChRs to opioid-induced reward.²³ Direct infusion into VTA of a virus containing M₅ mAChR DNA increased both M₅ mAChR expression and morphine-induced locomotor activity compared to control mice, suggesting that M₅ mAChRs mediate DA-related behaviors.²⁴ Relative to wild-type mice, M₅ mAChR KO mice exhibit a decreased amount of time spent in the cocaine-paired compartment in the conditioned place preference assay^{25,26} and decreased cocaine i.v. self-administration,²⁷ suggesting M₅ mAChRs mediate cocaine reward and reinforcement, respectively.

Since M₅ mAChRs are highly expressed in VTA, micro infusion of nonselective mAChRs antagonists (e.g., scopolamine and atropine) into VTA allows for quasi-selective inhibition of M₅ mAChR function. Scopolamine microinfused unilaterally into VTA decreased morphine-evoked DA release in NAc in mice.²³ Atropine microinfused bilaterally into VTA also decreased morphine-induced hyperlocomotion in mice, supporting a critical role for VTA M₅ mAChRs in modulating opioid effects on behavior.²⁸ Thus, both pharmacological and genetic approaches to reduce M₅ mAChR function provide consistent results implicating this mAChR subtype in the effects of opioids on DA neurochemistry and related behaviors.

The above findings led us to hypothesize that discovery of selective M₅ mAChRs antagonists may provide novel pharmacotherapeutics that act to decrease the activity of VTA DA projections to NAc, thereby reducing the reinforcing effects of substances with high abuse liability. Previously, we described a 1,2,5,6-tetrahydropyridine-3-carboxylic acid scaffold from which several M₅ mAChRs antagonists were found.²⁹ From this series of compounds, compound **1** (Fig. 1) exhibited the greatest selectivity (11-fold) at M₅ over M₁ mAChRs; however, **1** provided only modest affinity ($K_i = 2.24 \mu\text{M}$) for M₅ mAChRs.²⁹ Compound **1** inhibited oxotremorine-induced DA release from superfused rat striatal slices, revealing an antagonist action at M₅ mAChRs.²⁹

The 3,4-dimethoxyphenethyl group in compound **1** was suggested to play an important role in its binding preference at the M₅ subtype.²⁹ Quinuclidinyl carbamate mAChR antagonists such as SVT-40776 (Fig. 1) and its analogs also have high affinity at mAChRs.³⁰ In an effort to improve analog affinity and selectivity at M₅ mAChRs, we report herein the synthesis and

evaluation of hybrid compounds, **2a** and **3a** (Fig. 1), and a series of related analogs (Tables 1 and 2).

The syntheses of analogs **2–6** are depicted in Schemes 1 and 2. *N*-Phenylquinuclidin-3-amine (**8**) was synthesized as an enantiomeric mixture by reductive amination of quinuclidinone (**7**) with aniline. Conversion of **8** to carbamoyl chloride **9** followed by reaction with appropriate alcohols under microwave irradiation afforded analogs of general structure **2** as enantiomeric mixtures (Scheme 1). *N*-Alkylation of aniline with phenyl ring substituted phenethyl bromide under microwave irradiation afforded compound **10**. Conversion of **10** to carbamoyl chloride **11** followed by reaction with (±)-3-quinuclidinol, (±)-*N*-methylpiperidin-3-ol, *N*-methylpiperidin-4-ol, or tropine under microwave irradiation afforded analogs of general structure **3**, **4**, **5**, and **6**, respectively (Scheme 2).

Initially, affinity at M₅ mAChRs was determined for all analogs. Since M₅ mAChRs have relatively high sequence homology with M₃ > M₁ > M₄ > M₂ mAChRs (85%, 79%, 73% and 68%, respectively),³¹ we next determined affinity of all analogs at M₃ and M₁ mAChRs. Analog with high affinity (K_i 10 nM) were evaluated also at M₂ and M₄ mAChRs to assess subtype selectivity. Chinese hamster ovary (CHO) cell lines individually expressing each of the human M₁–M₅ mAChRs were generously provided by Dr. Tom Bonner, National Institute of Mental Health. Analog-induced inhibition of [³H]N-methylscopolamine (NMS) binding was used to determine affinity at each of mAChR subtypes.^{32,33} Amount of [³H]NMS bound after a 60-min incubation in the absence and presence of a range of analog concentrations was plotted as a function of analog concentration to obtain IC₅₀ values. IC₅₀ values were used to calculate compound affinity (inhibition constant, K_i) using the Cheng and Prusoff equation.³⁴ Maximal inhibition ($I_{\max}$) of specific [³H]NMS binding was represented as a percent of control (absence of compound). Atropine was used as the positive control, and its K_i values at M₁, M₂, M₃ and M₅ were 0.44, 0.90, 0.53, and 0.60 nM, respectively, in good agreement with literature values.^{35,36}

The K_i and $I_{\max}$ values of analogs with general structure **2** at M₁, M₂, M₃, and M₅ mAChRs are provided in Table 1. Compound **2a**, in which the R group is 3,4-dimethoxyphenethyl, is the prototypic analog in this series. Compared with parent compound **1**, **2a** retained affinity at M₅ mAChRs, however, selectivity over other mAChR subtypes was diminished. Substituents on the phenyl ring of the R group and the length between the phenyl ring and O atom had important influences on binding affinity. Thus, a wide range of K_i values (19 nM–6.98 μM) was obtained, whereas the majority of the compounds completely inhibited [³H]NMS binding ($I_{\max}$ = 85.9–100% of control). Overall, analogs with a one-carbon linker (**2b**, **2d**, **2j**, **2l**, **2o**, and **2q**) had the highest affinity within each subgroup of compounds having the same substituents on the phenyl ring. However, analogs with a longer linker generally exhibited higher preference for M₅ compared with the corresponding one-carbon linker counterparts. Among the analogs in this series, **2m**, in which the R group is 3,4-dichlorophenethyl, exhibited relatively high affinity (K_i = 80 nM) and the greatest selectivity (4.5-fold) for M₅ over M₁ mAChRs.

Transposition of the phenylalkyl group and the quinuclidin-3-yl group in **2** resulted in analogs **3a**, **3b**, and **3c** as enantiomeric mixtures (Table 2). The design of this group of

“rearranged” analogs was based on hypotheses that spatial rearrangement or reorientation of the pharmacophore elements in mAChR ligands would alter affinity and selectivity profiles.³⁷ Compound **3c** with an *N*-4-fluorophenethyl group exhibited the highest affinity at M₅, M₁ and M₃ mAChRs (K_i = 1.8, 2.0 and 2.6 nM, respectively). Thus, **3c** is ~ 5-fold and 32 to 48-fold, respectively, higher than **3b** having a 3-methoxyphenethyl, and **3a** having a 3,4-dimethoxyphenethyl group. These findings indicate that substituents on the phenyl ring have major impact on affinity and that an electron-withdrawing group may be favorable for receptor binding. Replacement of the quinuclidin-3-yl group in **3** with an *N*-methylpiperidin-3-yl, an *N*-methylpiperidin-4-yl, or a tropan-4-yl provided analogs **4a/b/c**, **5a/b/c**, and **6a/b**, respectively (Table 2). Affinity at M₅, M₁ and M₃ mAChRs for these analogs was lower than their corresponding quinuclidine-containing analogs **3a/b/c**. Despite the overall increase in affinity in this series of analogs compared to analogs in the **2** series, none of these compounds exhibited preference for M₅ mAChRs. Of note, analogs in the **2**, **3**, and **4** series were racemic.

As in our previous studies²⁹, the lead analog **3c** was evaluated using a functional assay determining inhibition of oxotremorine-induced DA release from superfused rat striatal slices. Oxotremorine is a nonselective agonist at mAChRs.³⁹ If analog-induced inhibition is observed, then this suggests that the analog acts via an antagonist action at mAChRs. For the [³H]DA release assay, rat striatal slices were incubated with 0.1 μM [³H]DA for 30 min, and then, were superfused with buffer for 60 min to obtain stable efflux of [³H]DA.^{29,38} Samples were collected for 15 min to determine basal [³H]DA outflow. Superfusion continued for 35 min in the absence and presence scopolamine (1 and 10 μM, positive control) or **3c** (0.1, 1, and 10 μM) added to the superfusion buffer. Then, oxotremorine (100 μM)²⁸ was added to the buffer for 25 min. The ability of scopolamine and **3c** to inhibit oxotremorine-evoked [³H]DA overflow was determined. In agreement with our previous findings, oxotremorine increased [³H]DA overflow compared to control, and scopolamine (1 and 10 μM) inhibited (51% and 59%, respectively) oxotremorine-evoked [³H]DA overflow ($[F_{3,35} = 6.13]$, $p < 0.005$, one-way ANOVA followed by Tukey's test; Fig. 2). The results are consistent with the predicted outcome that scopolamine (positive control) inhibits oxotremorine-evoked DA release from rat striatum. The ability of lead compound **3c** to inhibit oxotremorine-evoked [³H]DA overflow from superfused rat striatal slices was determined (Fig. 3). Scopolamine (10 μM) was included as a positive control in these experiments. Similar to the results illustrated in Fig. 2, oxotremorine increased [³H]DA overflow and scopolamine decreased the stimulatory effect of oxotremorine. In contrast to expectations, **3c** did not inhibit oxotremorine-evoked [³H]DA overflow, but rather, augmented oxotremorine-evoked [³H]DA overflow. One-way ANOVA followed by Tukey's test revealed that **3c** (10 μM) increased oxotremorine-evoked [³H]DA overflow relative to oxotremorine alone (scopolamine 0 μM; $[F_{3,11} = 6.83]$, $p < 0.005$; Fig. 3). Augmentation of the effect of oxotremorine by **3c** suggests that **3c** acts as an agonist at mAChRs.

To further determine if **3c** acts as a mAChR agonist, the ability of scopolamine to inhibit **3c**-evoked [³H]DA overflow was determined. One-way ANOVA followed by Tukey's test revealed that the **3c**-evoked increase in [³H]DA overflow was inhibited by scopolamine (10 μM) ($[F_{5,42} = 6.92]$, $p < 0.0001$; Fig. 4). Since the effect of **3c** was inhibited by a

nonselective mAChR antagonist, scopolamine, these results support the interpretation that **3c** acts as an agonist at mAChRs to increase [³H]DA overflow from rat striatal slices.

Whereas oxotremorine (1, 10, and 100 μM)-evoked striatal [³H]DA overflow was not altered in M₁ or M₂ mAChR KO mice, oxotremorine-evoked [³H]DA overflow was increased in M₃ KO mice, abolished in M₄ KO mice, and decreased by 50% in M₅ KO mice.⁴⁰ Thus, M₁ or M₂ mAChRs do not appear to have a role in mediating striatal DA release in mice. Also, M₃, M₄ and M₅ mAChRs appear to play differing roles in mediating striatal DA release in mice. In contrast to VTA where M₅ mAChR subtype expression predominates, M₃, M₄ and M₅ mAChRs mediate oxotremorine-evoked [³H]DA overflow from striatal slices in mice. If allowed to extrapolate from these results obtained using striatal slices from KO mice, the current results suggest that oxotremorine increases striatal DA release via stimulation of M₄ and/or M₅ mAChRs, but not via M₃ mAChRs. Based on the results from the KO studies,⁴⁰ stimulation of M₃ mAChRs would be expected to decrease DA release. Assuming mAChR modulation of DA release is similar in rats and mice, the lead compound **3c** appears to evoke DA release from rat striatal slices either through an agonist action at M₄ and/or M₅ mAChRs, or through an antagonist action at M₃. In any case, **3c** increases striatal DA release via an agonist action at mAChRs, since this effect is inhibited by scopolamine.

Another important finding from the present study is that the two structural scaffolds provided analogs that exhibit selectivity for M₃ over M₂. Out of the 30 analogs evaluated, 9 analogs (**2d**, **2j**, **2l**, **2n**, **2o**, **2q**, **3a**, **3b** and **3c**) exhibit relatively high affinity ($K_i < 100$ nM) at M₃ mAChRs. For these 9 analogs, selectivity at M₃ over M₂ mAChRs was determined in consideration of their potential efficacy in treating COPD. Of note, compound **3b** exhibited 17-fold selectivity for M₃ over M₂ mAChRs. Selectivity between M₃ and M₂ subtypes is important because antagonists at M₃ mAChRs decrease airway smooth muscle contraction and decrease mucus secretion, which would be beneficial in the treatment of COPD; whereas, antagonism at M₂ mAChRs increases acetylcholine release from parasympathetic nerves innervating the airway smooth muscle and submucosal glands, ultimately stimulating M₃ mAChRs and counteracting the beneficial M₃ antagonism produced by therapeutic agents targeting M₃.^{41,42} Using the [³H]NMS binding assay, several compounds have been reported previously to be highly potent (low nM range) and selective for M₃ over M₂ mAChRs.^{45,46} Specifically, (2*R*)-1-((2*S*,4*R*)-4-hydroxy-1-[3,3,3-tris(4-fluoro-phenyl)propanoyl]-pyrrolidine-2-yl)carbonyl-*N*-(4-piperidinyl-methyl)pyrrolidine-2-carboxamide (compound **14a**) and (2*R*)-*N*-[1-(6-aminopyridin-2-ylmethyl)piperidin-4-yl]-2-[(1*R*)-3,3-difluorocyclopentyl]-2-hydroxy-2-phenylacetamide (compound **A**) exhibit 1600- and 193-fold selectivity, respectively, for M₃ over M₂.^{36,43} **14a** and **A** act as M₃ mAChR antagonists as indicated by inhibition of carbachol-induced contraction of the isolated rat tracheal muscle.^{36,43} Interestingly, tiotropium and umeclidinium, exhibit only 2 to 3-fold selectivity at M₃ relative to M₂ mAChRs, as indicated from [³H]NMS binding assays.^{44–46} Despite, marginal selectivity for M₃, tiotropium and umeclidinium have kinetic selectivity for M₃ and long dissociation half-lives.⁴⁴ Moreover, both compounds are FDA-approved COPD inhalation therapeutics. Thus, the current findings that **3b** has high affinity ($K_i = 7.6$ nM) and 17-fold selectivity for M₃ over M₂ mAChRs suggest that this compound may have beneficial therapeutic effects over currently available medications for COPD.

In summary, through the synthesis and evaluation of two series of carbamates, **3c** was identified as the most potent ($K_i = 1.8$ nM) analog interacting at M₅ mAChRs. Although **3c** exhibited 1200-fold higher affinity for M₅ mAChRs compared to compound **1**, **3c** lacked selectivity for M₅ mAChRs. Interestingly, compound **1** inhibited oxotremorine-evoked DA release from rat striatal slices, whereas **3c** augmented oxotremorine-evoked DA release, and moreover, itself increased DA release, indicating that **3c** acts as a mAChR agonist. Future structure activity relationship studies using **3c** as the lead compound will be needed to identify analogs with high affinity and selectivity for M₅. Additionally, **3b** exhibited high affinity and selectivity for M₃ over M₂ mAChRs and may have potential to be developed as a COPD treatment.

Acknowledgment

This work was supported by funding from the National Institute of Health including grants DA 030667 and UL1 TR001998.

References

1. Eglén RM. *Auton Autacoid Pharmacol.* 2006;26:219. [PubMed: 16879488]
2. Fryer AD, Christopoulos A, Nathanson NM. *Handb Exp Pharmacol.* 2012;208 Chapter 1.
3. Levey AI. *Proc Natl Acad Sci USA.* 1996;93:13541. [PubMed: 8942969]
4. Digby GJ, Shirey JK, Conn PJ. *Mol Biosyst.* 2010;6:1345. [PubMed: 20582339]
5. Lebois EP, Bridges TM, Lewis LM, et al. *ACS Chem Neurosci.* 2010;1:104. [PubMed: 21961051]
6. Jiang S, Li Y, Zhang C, et al. *Neurosci Bull.* 2014;30:295. [PubMed: 24590577]
7. Fisher A, Pittel Z, Bar-Ner N, et al. *J Mol Neurosci.* 2003;20:349. [PubMed: 14501019]
8. Barnes PJ. *Thorax.* 1989;44:161. [PubMed: 2650010]
9. Walker JK, Gainetdinov RR, Feldman DS, et al. *Am J Physiol Lung Cell Mol Physiol.* 2004;386:L312.
10. Chin SJ, Curmowicz AG, Chowdhury BA. *Ann Am Thorac Soc.* 2016;13:173. [PubMed: 26650145]
11. U.S. Food and Drug Administration. Drugs@FDA. Approval History and Summary Review for Spiriva RespiMat NDA 207070 <https://www.accessdata.fda.gov/scripts/cder/daf/index.cfm?event=overview.process&applno=021395>.
12. Goldenberg MM. *P&T.* 2014;39:112. [PubMed: 24669177]
13. Yeomans JS. *Handb Exp Pharmacol.* 2012;208:243.
14. Vilaro MT, Palacios JM, Mengod G. *Neurosci Lett.* 1990;114:154. [PubMed: 2395528]
15. Weiner DM, Levey AL, Brann MR. *Proc Natl Acad Sci USA.* 1990;87:7050. [PubMed: 2402490]
16. Yasuda RP, Ciesla W, Flores LR, et al. *Mol Pharmacol.* 1993;43:149. [PubMed: 8429821]
17. Lein ES, Hawrylycz MJ, Ao N, et al. *Nature.* 2007;445:168. [PubMed: 17151600]
18. Omelchenko N, Sesack SR. *J Comp Neurol.* 2006;494:863. [PubMed: 16385486]
19. Di Chiara G, Imperato A. *Proc Natl Acad Sci USA.* 1988;85:5274. [PubMed: 2899326]
20. Chevrette J, Stellar JR, Hesse GW, Markou A. *Pharmacol Biochem Behav.* 2002;71:501. [PubMed: 11830184]
21. Koob GF, Sanna PP, Bloom FE. *Neuron.* 1998;21:467. [PubMed: 9768834]
22. Lyness WH, Friedle NM, Moore KE. *Pharmacol Biochem Behav.* 1979;11:553. [PubMed: 531077]
23. Steidl S, Miller AD, Blaha CD, Yeomans JS. *PLoS One.* 2011;6:e27538. [PubMed: 22102904]
24. Wasserman DI, Wang HG, Rashid AJ, Josselyn SA, Yeomans JS. *Eur J Neurosci.* 2013;38:2774. [PubMed: 23773170]
25. Raffa RB. *J Clin Pharm Ther.* 2009;34:623. [PubMed: 20175795]

26. Fink-Jensen A, Fedorova I, Wörtwein G, et al. *J Neurosci Res*. 2003;74:91. [PubMed: 13130510]
27. Thomsen M, Woldbye DP, Wörtwein G, Fink-Jensen A, Wess J, Caine SB. *J Neurosci*. 2005;25:8141. [PubMed: 16148222]
28. Steidl S, Yeomans JS. *J Pharmacol Exp Ther*. 2009;328:263. [PubMed: 18849356]
29. Zheng G, Smith AM, Huang X, et al. *J Med Chem*. 2013;56:1693. [PubMed: 23379472]
30. Prat M, Buil MA, Fernández MD, et al. *Bioorg Med Chem Lett*. 2011;21:3457. [PubMed: 21524581]
31. Bonner TI, Young AC, Brann MR, Buckley NJ. *Neuron*. 1988;1:403. [PubMed: 3272174]
32. Lee N-R, Zhang X, Darna M, Dwoskin LP, Zheng G. *Bioorg Med Chem Lett*. 2015;25:5032. [PubMed: 26494260]
33. [³H]NMS binding assay: [³H]NMS binding assays were performed using 96-well plates. Membrane aliquots containing 10 µg of protein per well for M₁ or M₅ mAChRs subtypes, 20 µg of protein per well for M₂ or M₄ mAChRs subtypes, and 3 µg of protein per well for M₃ mAChRs were added to wells containing 1 nM to 100 µM of analog, 0.3 nM [³H]NMS (specific activity 84.2 Ci/mmol; Perkin-Elmer/NEN, Boston, MA) and buffer (50 mM Tris-HCl, pH 7.4) and then incubated for 2 h at 25°C. Nonspecific binding of [³H]NMS was determined in the presence of 1 µM atropine. Reactions were terminated by rapid filtration onto GF/B filters using a Filtermate harvester (PerkinElmer Life and Analytical Sciences, Boston, MA) and washed three times with 50 mM Tris-HCl buffer (pH 7.4). Subsequently, 40 µL of MicroScint 20 (PerkinElmer Life and Analytical Sciences, Waltham, MA) was added to each well and radioactivity bound determined using liquid scintillation spectrometry.
34. Cheng Y, Prusoff WH. *Biochem Pharmacol*. 1973;22:3099. [PubMed: 4202581]
35. Moriya H, Takagi Y, Hayashi M, Tani T, Hirotsu I. *Life Sci*. 1999;64:2351. [PubMed: 10374898]
36. Hirose H, Aoki I, Kimura T, et al. *J Pharmacol Exp Ther*. 2001;297:790. [PubMed: 11303071]
37. Naito R, Yonetoku Y, Okamoto Y, Toyoshima A, Ikeda K, Takeuchi M. *J Med Chem*. 2005;48:6597. [PubMed: 16220976]
38. [³H]DA release assay: Rat striata were dissected and sliced (500 µm, 4–6 mg). Striatal slices were incubated in Krebs' buffer (108 mM NaCl, 4.7 mM KCl, 1.2 mM MgCl₂, 1 mM NaH₂PO₄, 1.3 mM CaCl₂, 11.1 mM glucose, 25 mM NaHCO₃, 0.11 mM L-ascorbic acid and 0.004 disodium EDTA, pH 7.4) for 60 min at 34°C. During the latter 30 min of the incubation, [³H]DA (0.1 µM) was added to the incubation buffer. Each striatal slice was placed in a superfusion chamber after incubation, and then superfused (0.6 mL/min) with Krebs' buffer for 60 min in the presence of nomifensine (a DA transporter inhibitor; 10 µM) and pargyline (a monoamine oxidase inhibitor; 10 µM). Samples were collected every 5 min for a total of 75 min. Samples collected during the first 15 min were used to determine [³H]DA basal outflow. Samples were collected for 35 min in the absence or presence of scopolamine or **3c**, followed by 25 min in absence or presence of oxotremorine (100 µM) in the superfusion buffer. [³H] DA overflow was determined as the summation of radioactivity in superfusate samples during exposure to compound following the subtraction of basal outflow across the same time period. Radioactivity was determined using liquid scintillation spectroscopy.
39. Barocelli E, Ballabeni V, Bertoni S, et al. *Bioorg Med Chem Lett*. 2000;67:717.
40. Zhang W, Yamada M, Gomeza J, Basile AS, Wess J. *J Neurosci*. 2002;22:6327.
41. Buels SK, Fryer DA. *Handb Exp Pharmacol*. 2012;208:317.
42. Gosens R, Zaagsma J, Meurs H, Halayko AJ. *Respir Res*. 2006;7:73. [PubMed: 16684353]
43. Sagara Y, Sagara T, Uchiyama M, et al. *J Med Chem*. 2006;49:5653. [PubMed: 16970392]
44. Sykes DA, Dowling MR, Leighton-Davies J, et al. *J Pharmacol Exp Ther*. 2012;343:520. [PubMed: 22854200]
45. Salmon M, Luttmann MA, Foley JJ, et al. *J Pharmacol Exp Ther*. 2013;345:260. [PubMed: 23435542]
46. Dowling MR, Charlton SJ. *Br J Pharmacol*. 2006;148:927. [PubMed: 16847442]

Fig. 1.
Structures of compound **1**, SVT-40776, **2a**, and **3a**.

Fig. 2. Scopolamine (1 and 10 μM, positive control) inhibits oxotremorine (100 μM)-evoked [³H]DA overflow from superfused rat striatal slices. Data are presented as mean ± SEM. **p* < 0.05 compared to buffer; #*p* < 0.05 compared to oxotremorine alone (scopolamine 0 μM), *n* = 10.

Fig. 3.

Compound **3c** increases oxotremorine (100 μM)-evoked [³H]DA overflow from rat striatal slices. A range of concentrations (0.1, 1, and 10 μM) of **3c** were evaluated. Scopolamine (10 μM) was used as the positive control. **p* < 0.05 compared to buffer, #*p* < 0.05 compared to oxotremorine alone (scopolamine 0 μM), *n* = 4–10.

Fig. 4.

Scopolamine (10 μM) inhibits **3c**-evoked [³H]DA overflow from superfused rat striatal slices. **p* < 0.05 compared to buffer (in the absence of **3c**), #*p* < 0.05 compared to **3c** (10 μM) in the absence of scopolamine, *n* = 6.

Scheme 1.

Reagents and conditions: (a) aniline, EtOH, reflux; (b) NaBH₄, EtOH, 95%; (c) triphosgene, Et₃N, CH₂Cl₂, -78°C, 73%; (d) ROH, KO^tBu, toluene, MWI, 150°C, 30 min, 28–52%.

Scheme 2.

Reagents and conditions: (a) R^2Br , KI, CH_3CN , MWI, 160°C , 15 min, 83–99%; (b) triphosgene, Et_3N , CH_2Cl_2 , -78°C , 85–90%; (c) R^1OH , KO^tBu , toluene, MWI, 150°C , 15 min, 56–82%.

Table 1

Structures and binding affinity at M₁, M₂, M₃, and M₅ mAChRs for atropine and analogs with general structure **2**.^a

Compd	R	³ H]NMS binding $K_i \pm \text{SEM}$ (μM) ($I_{\text{max}} \pm \text{SEM}$, % inhibition)			M ₁	M ₂	M ₃	M ₅	Selectivity M ₁ /M ₅ M ₂ /M ₃	
Atropine	–	0.00044 ± 0.0001 ^a	(99.5 ± 0.28)	0.0009 ± 0.00005	(99.4 ± 0.74)	0.00053 ± 0.00006	(99.3 ± 0.63)	0.0006 ± 0.00003	(96.7 ± 0.50)	1.7 0.7
1^b	–	25.3	> 100	> 100	> 100	> 100	> 100	2.24	11	–
2a		6.98 ± 0.65	(90.6 ± 0.61)	ND ^c	2.76 ± 0.23	(85.9 ± 1.55) ^d	3.49 ± 0.09	(94.0 ± 0.63)	2.0	–
2b		0.77 ± 0.03	(96.8 ± 0.24)	ND	1.02 ± 0.11	(95.4 ± 0.45)	0.55 ± 0.02	(98.7 ± 0.41)	1.4	–
2c		1.46 ± 0.14	(97.1 ± 0.33)	ND	1.56 ± 0.22	(96.3 ± 0.58)	1.61 ± 0.09	(99.0 ± 1.9)	0.9	–
2d		0.19 ± 0.02	(99.5 ± 0.15)	0.12 ± 0.01	(99.4 ± 0.28)	0.09 ± 0.004	(98.6 ± 0.42)	0.15 ± 0.03	(97.2 ± 0.24)	1.3 1.2
2e		0.79 ± 0.08	(88.5 ± 1.37)	ND	0.30 ± 0.01	(99.1 ± 0.504)	0.26 ± 0.03	(96.9 ± 4.4)	3.0	–

Compd	R	³ H]NMS binding $K_i \pm \text{SEM}$ (μM) ($I_{\text{max}} \pm \text{SEM}$, % inhibition)			Selectivity		
		M ₁	M ₂	M ₃	M ₅	M ₁ /M ₅	M ₂ /M ₃
		0.78 $\pm$ 0.05 (99.1 $\pm$ 0.28)	ND	0.55 $\pm$ 0.03 (98.9 $\pm$ 0.42)	0.26 $\pm$ 0.008 (95.7 $\pm$ 0.17)	3.0	–
2f							
		0.71 $\pm$ 0.06 (97.9 $\pm$ 0.21)	ND	1.15 $\pm$ 0.06 (95.7 $\pm$ 0.52)	0.47 $\pm$ 0.05 (97.1 $\pm$ 0.89)	1.5	–
2g							
		0.76 $\pm$ 0.02 (98.4 $\pm$ 0.08)	ND	0.42 $\pm$ 0.05 (99.3 $\pm$ 0.22)	0.23 $\pm$ 0.005 (98.9 $\pm$ 0.09)	3.3	–
2h							
		0.59 $\pm$ 0.02 (98.5 $\pm$ 0.19)	ND	0.39 $\pm$ 0.04 (96.8 $\pm$ 1.25)	0.64 $\pm$ 0.10 (99.5 $\pm$ 3.5)	0.9	–
2i							
		0.03 $\pm$ 0.003 (100 $\pm$ 0.18)	0.03 $\pm$ 0.005 (99.4 $\pm$ 0.87)	0.019 $\pm$ 0.002 (99.9 $\pm$ 0.72)	0.04 $\pm$ 0.003 (99.7 $\pm$ 0.37)	0.8	1.7
2j							
		0.63 $\pm$ 0.10 (99.6 $\pm$ 0.40)	ND	0.29 $\pm$ 0.03 (98.0 $\pm$ 0.53)	0.24 $\pm$ 0.06 (97.1 $\pm$ 4.8)	2.6	–
2k							
		0.06 $\pm$ 0.002 (100 $\pm$ 0.24)	0.22 $\pm$ 0.009 (97.5 $\pm$ 1.76)	0.07 $\pm$ 0.009 (95.8 $\pm$ 0.78)	0.06 $\pm$ 0.001 (98.6 $\pm$ 4.75)	0.9	3.3
2l							

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Compd	R	³ HJNMS binding $K_i \pm \text{SEM}$ (μM) ($I_{\text{max}} \pm \text{SEM}$, % inhibition)			Selectivity		
		M ₁	M ₂	M ₃	M ₅	M ₁ /M ₅	M ₂ /M ₃
2m		0.37 $\pm$ 0.02 (99.9 $\pm$ 0.36)	ND	0.26 $\pm$ 0.02 (99.8 $\pm$ 0.27)	0.08 $\pm$ 0.02 (98.8 $\pm$ 0.30)	4.5	–
2n		0.17 $\pm$ 0.01 (100 $\pm$ 0.10)	0.30 $\pm$ 0.02 (99.9 $\pm$ 0.063)	0.06 $\pm$ 0.003 (100 $\pm$ 0.25)	0.13 $\pm$ 0.003 (99.4 $\pm$ 0.30)	1.3	4.7
2o		0.07 $\pm$ 0.003 (99.5 $\pm$ 0.99)	0.10 $\pm$ 0.01 (98.8 $\pm$ 0.64)	0.05 $\pm$ 0.003 (100 $\pm$ 0.022)	0.04 $\pm$ 0.01 (96.7 $\pm$ 0.50)	1.5	1.8
2p		0.43 $\pm$ 0.03 (100 $\pm$ 0.14)	ND	0.25 $\pm$ 0.03 (99.8 $\pm$ 1.08)	0.26 $\pm$ 0.004 (99.4 $\pm$ 0.22)	1.7	–
2q		0.04 $\pm$ 0.001 (100 $\pm$ 0.14)	0.03 $\pm$ 0.001 (99.7 $\pm$ 0.60)	0.02 $\pm$ 0.0003 (99.0 $\pm$ 0.56)	0.03 $\pm$ 0.003 (97.4 $\pm$ 0.13)	1.2	1.3
2r		0.20 $\pm$ 0.004 (100 $\pm$ 0.25)	ND	0.13 $\pm$ 0.009 (100 $\pm$ 0.29)	0.13 $\pm$ 0.004 (99.9 $\pm$ 0.45)	1.5	–
2s		0.30 $\pm$ 0.02 (100 $\pm$ 0.25)	ND	0.22 $\pm$ 0.008 (99.5 $\pm$ 1.09)	0.10 $\pm$ 0.003 (99.4 $\pm$ 0.30)	3.0	–

^aThree independent experiments, each with duplicate samples, were performed to obtain K_i values (Mean $\pm$ SEM).

^dNo plateau for the mean inhibition curve was obtained; I_{max} % inhibition at 100 μM analogs was reported.

^cNot determined.

^bData from Ref. [29].

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Table 2

Structures and binding affinity at M₁, M₂, M₃, M₄, and M₅ mAChRs for analogs **3–6**.^a

Compd	R ¹	R ²	³ HJNMS binding K _i ± SEM, μM (I _{max} ± SEM, % inhibition)		M ₁	M ₂	M ₃	M ₄	M ₅	Selectivity M ₁ /M ₅ M ₂ /M ₃	
3a			0.095 ± 0.0037 (100 ± 0.14)	0.35 ± 0.02 (98.6 ± 1.57)	0.06 ± 0.006 (99.7 ± 0.91)	ND ^b	0.065 ± 0.002 (99.8 ± 0.56)	1.5	5.7		
4a			4.30 ± 0.49 (94.3 ± 0.61)	ND	4.36 ± 0.90 (85.6 ± 0.85) ^c	ND	4.49 ± 0.32 (89.2 ± 0.87)	1.0			
5a			0.77 ± 0.082 (99.0 ± 0.16)	ND	1.28 ± 0.10 (96.6 ± 0.58)	ND	0.38 ± 0.03 (96.5 ± 2.81)	2.0			
6a			1.87 ± 0.17 (95.3 ± 0.25)	ND	2.80 ± 0.03 (88.8 ± 0.49) ^c	ND	1.37 ± 0.07 (95.9 ± 0.91)	1.4

Compd	R ¹	R ²	³ HJNMS binding K _i ± SEM, μM (I _{max} ± SEM, % inhibition)			M ₁	M ₂	M ₃	M ₄	M ₅	Selectivity		
											M ₁ /M ₅	M ₂ /M ₃	
3b			0.01 ± 0.0003 (100 ± 0.16)	0.13 ± 0.025 (99.7 ± 0.48)	0.008 ± 0.0003 (99.9 ± 0.41)	0.025 ± 0.0002 (99.9 ± 0.37)	0.01 ± 0.0005 (100 ± 0.68)	1.0	17.1				
4b			0.69 ± 0.092 (98.6 ± 0.36)	ND	1.32 ± 0.069 (96.2 ± 0.28)	ND	1.05 ± 0.02 (97.7 ± 0.45)	0.7	–				
5b			0.28 ± 0.038 (99.8 ± 0.33)		0.57 ± 0.092 (99.7 ± 0.43)	ND	0.19 ± 0.01 (99.7 ± 0.82)	1.5	–				
6b			0.35 ± 0.02 (99.7 ± 0.05)	ND	0.27 ± 0.01 (98.9 ± 0.35)	ND	0.24 ± 0.02 (97.9 ± 2.0)	1.5	–

Compd	R ¹	R ²	³ H/NMS binding K _i ± SEM, μM(I _{max} ± SEM, % inhibition)			M ₁	M ₂	M ₃	M ₄	M ₅	M ₁ /M ₅	M ₂ /M ₃	Selectivity
3c			0.002 ± 0.0001 (99.9 ± 0.11)	0.013 ± 0.003 (100 ± 0.71)	0.0026 ± 0.0001 (100 ± 1.39)	0.0022 ± 0.0001 (99.8 ± 0.33)	0.0018 ± 0.0001 (99.8 ± 0.71)	ND	0.15 ± 0.01 (99.9 ± 1.64)	0.006 ± 0.002 (100 ± 0.35)	1.1	5.0	–
4c			0.12 ± 0.006 (99.9 ± 0.07)	ND	0.35 ± 0.05 (99 ± 1.37)	ND	0.06 ± 0.002 (100 ± 0.35)	0.14 ± 0.019 (100 ± 0.50)	ND	0.06 ± 0.002 (100 ± 0.35)	0.8	–	–
5c			0.07 ± 0.002 (100 ± 0.14)	ND	0.14 ± 0.019 (100 ± 0.50)	ND	0.06 ± 0.002 (100 ± 0.35)	0.14 ± 0.019 (100 ± 0.50)	ND	0.06 ± 0.002 (100 ± 0.35)	1.2	–	–

^aThree independent experiments, each with duplicate samples, were performed to obtain K_i values (Mean ± SEM).

^bNot determined.

^cNo plateau for the mean inhibition curve was obtained; I_{max} % inhibition at 100 μM analogs was reported.