

## 2-(Quinolin-4yloxy)acetamides are active against Drug-susceptible and Drug-resistant *Mycobacterium tuberculosis* strains

Kenia Pissinate\* (PQ)<sup>1</sup>, Anne D. Villela (PQ)<sup>1</sup>, Valnês Rodrigues-Junior (PQ)<sup>1</sup>, Bruno C. Giacobbo (PG)<sup>1</sup>, Estêvão S. Grams (IC)<sup>1</sup>, Bruno L. Abadi (PQ)<sup>1</sup>, Rogério V. Trindade (PG)<sup>1</sup>, Davi F. Back (PQ)<sup>2</sup>, Maria M. Campos (PQ)<sup>1</sup>, Luiz A. Basso (PQ)<sup>1</sup>, Diógenes S. Santos (PQ)<sup>1</sup>, Pablo Machado (PQ)<sup>1</sup>

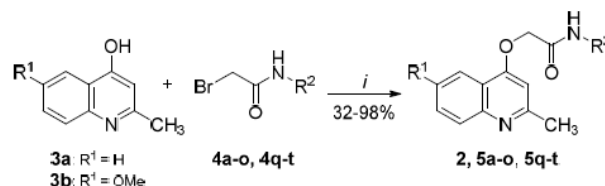
[k.pissinate@gmail.com](mailto:k.pissinate@gmail.com)

<sup>1</sup>Pontifícia Universidade Católica do Rio Grande do Sul, 90619-600, Porto Alegre, RS - INCT/CPBMF; <sup>2</sup>Universidade Federal de Santa Maria, 97105-900, Santa Maria, RS - UFSM.

Palavras Chave: 4-quinoloxiacetamides, drug-susceptible, tuberculosis

### Abstract

Chemical modifications of lead compounds were carried out, potent antitubercular agents with MIC as low as 0.05  $\mu$ M.



**Scheme 1.** Reaction conditions: i) DMF, K<sub>2</sub>CO<sub>3</sub>, 25 °C, 16 h.

The synthesized compounds were evaluated in a whole-cell assay against *M. tuberculosis* strain H37Rv conducted by the Resazurin Assay method using isoniazid (INH) as the standard drug. The most active molecules against *M. tuberculosis* H37Rv were tested against a panel of clinically isolated drug-resistant strains and in a macrophage-infected model. In addition, thermodynamic solubility, metabolic stability in human liver S9 fraction, cytochrome P450 inhibition, and cardio toxicity risk were also evaluated.<sup>3</sup>

The simplicity, easily accessible reactants and reagents, reasonably good yields (32–98%), and high purity make this synthetic method attractive.

Further, the synthesized compounds were active against drug-resistant strains and were devoid of apparent toxicity to Vero and HaCat cells (IC<sub>50</sub>s  $\geq$  20  $\mu$ M). In addition, the 2-(quinolin-4-yloxy)acetamides showed intracellular activity against the bacilli in infected macrophages with action similar to rifampin. Finally, the most potent compounds exhibited low to moderate metabolic stabilities, low risks of drug–drug interactions based on CYP450 inhibition studies with no signs of cardiac toxicity in zebrafish (*Danio rerio*) at 5  $\mu$ M.

### Introdução

Tuberculosis (TB) is an infectious disease caused mainly by *Mycobacterium tuberculosis* and is one of the most devastating public health problems worldwide. Approximately 9.6 million new cases claiming 1.5 million lives were reported in 2014.<sup>1</sup> Furthermore, MDR-TB and XDR-TB treatments are limited and recommended medicines are often not available revealing an urgent need for new anti-TB alternatives.<sup>2</sup>

In this study, we synthesized a series of 2-(quinolin-4yloxy)acetamides for further evaluation of MICs using drug-susceptible and drug-resistant Mtb strains. Moreover, a preliminary structure-activity relationship (SAR) study was also presented.

### Resultados e Discussão

The syntheses of 2-(quinolin-4yloxy)acetamides **2**, **5a-o** and **5q-t** were conducted in two synthetic steps<sup>3</sup>. First, the 2-bromo-*N*-arylacetyl chlorides **4a-o** and **4q-t** were prepared by the acylation reaction of substituted anilines or 1(2)-naphthylamine using bromoacetyl chloride in the presence of 4-dimethylaminopyridine (DMAP) as a catalyst. Subsequently, 2-(quinolin-4-yloxy)acetamides **2**, **5a-o**, and **5q-t** were synthesized by the O-alkylation reaction of 4-hydroxyquinolines **3a-b** with 2-bromo-*N*-arylacetyl chlorides **4a-o** and **4q-t** in the presence of potassium carbonate using *N,N*-dimethylformamide (DMF) as the solvent (**Scheme 1**).

### Conclusões

These data indicate that this class of compounds may furnish candidates for future development to, hopefully, provide drug alternatives for tuberculosis treatment.

### Agradecimentos

CNPq, CAPES, BNDES and FAPERGS.

<sup>1</sup>WHO, Global tuberculosis report 2015; <sup>2</sup>Hoffner, S. Lancet. 2012, 380, 1367–1369; <sup>3</sup>Pissinate K. et al. 2016, DOI:10.1021/acsmedchemlett.5b00324.