

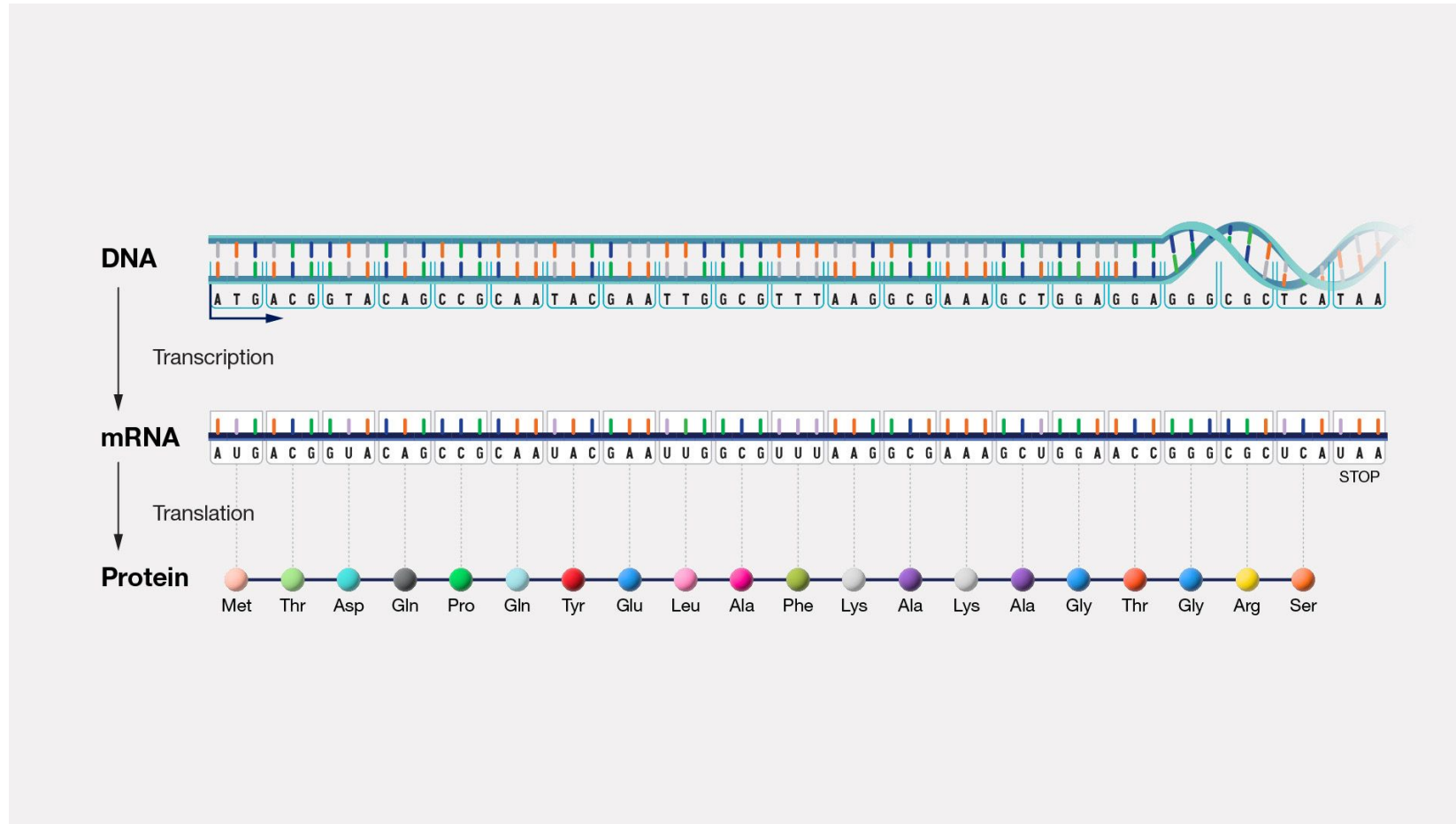
Follow up of questions on the video on Herceptin by Susan Desmond-Hellmann

[Link to the video](#)

Questions for the video

1. What is the **indication** of *Herceptin*? (**Her2 positive breast cancer**) What is its generic (USAN, or United States Adopted Name) name? (**Trastuzumab**)
2. What is the **gene target** of Herceptin? (**Her2, ERBB2**)
3. In which year was the **target** of Herceptin described? When was Herceptin **approved**? (**1987; 1998 in metastatic cancer and 2005 in the adjuvant setting**)
4. What was the **improvement** of Herceptin compared with earlier antibodies? (**humanized**)
5. Why does a **biomarker** matter besides developing drugs? (**diagnostic, higher chance of success due to patient stratification**)
6. In the clinical trial of *Herceptin* for **metastatic breast cancer**, how much improvement in the **median survival** did Herceptin achieve? And how much improvement is in the **adjuvant setting** (Herceptin applied directly after operation)? (**5.1 months improvement in median survival for metastatic breast cancer. Time to remission doubled in the adjuvant setting**)

AMIDD Lecture 2: The Central Dogma and Drug Discovery



Source:
<https://www.genome.gov/genetics-glossary/Central-Dogma>

Dr. Jitao David Zhang, Computational Biologist

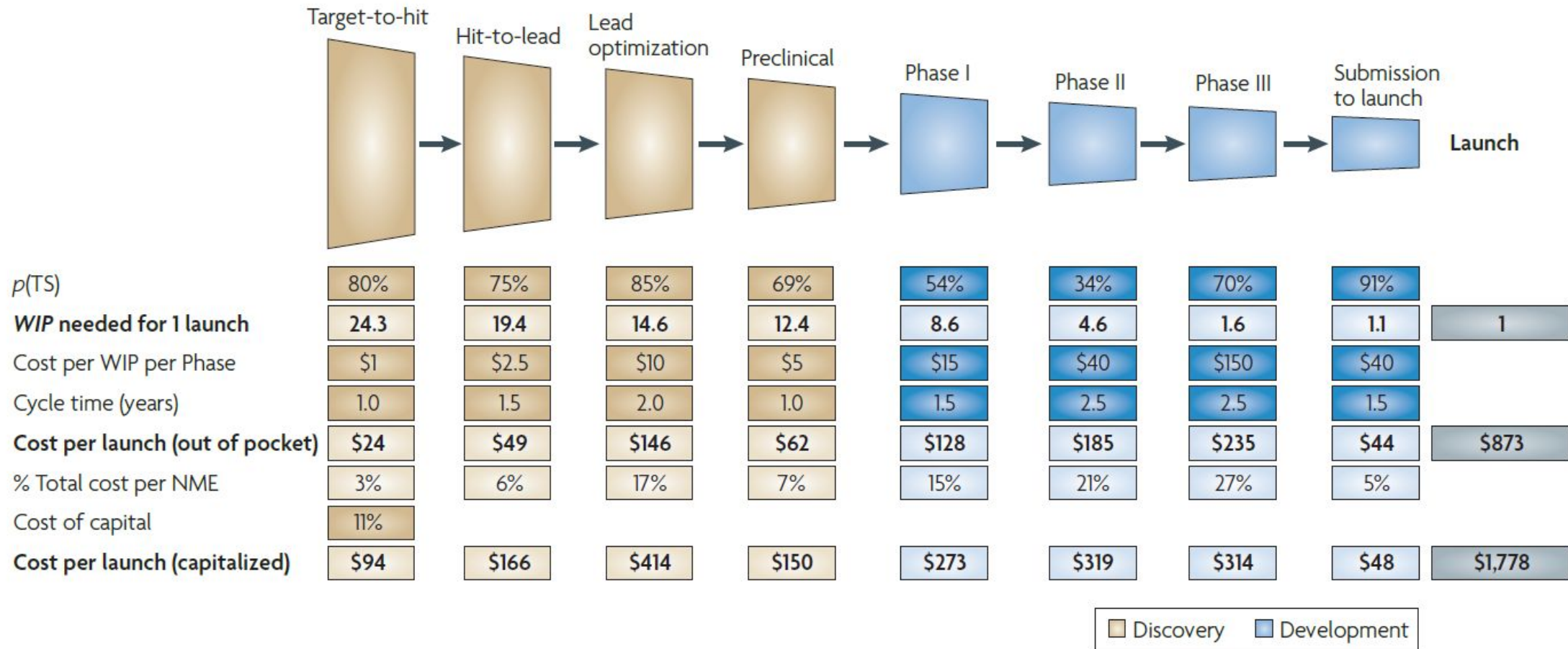
¹ **Pharmaceutical Sciences, Pharma Research and Early Development, Roche Innovation Center Basel, F. Hoffmann-La Roche**

² **Department of Mathematics and Informatics, University of Basel**

Today's goals

- Linear and multiscale view of drug discovery and development
- The central dogma of molecular biology in context of drug discovery
- Case study: discovery of *Vemurafenib*

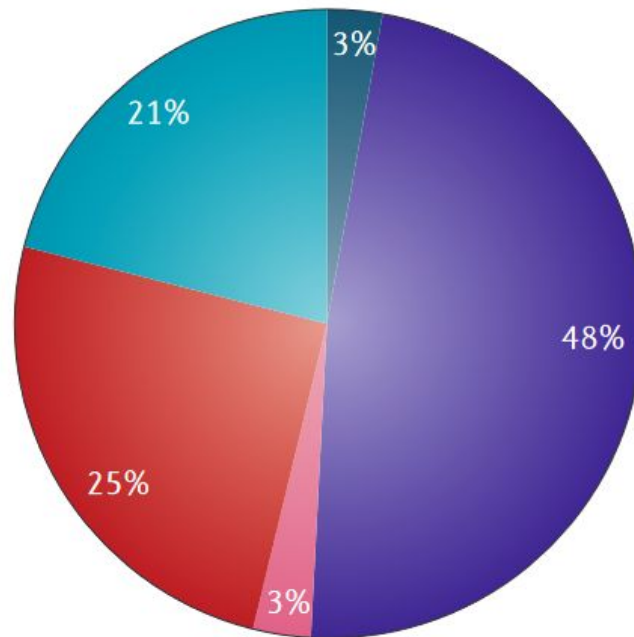
Risks and costs associated with each stage of the linear view of drug discovery



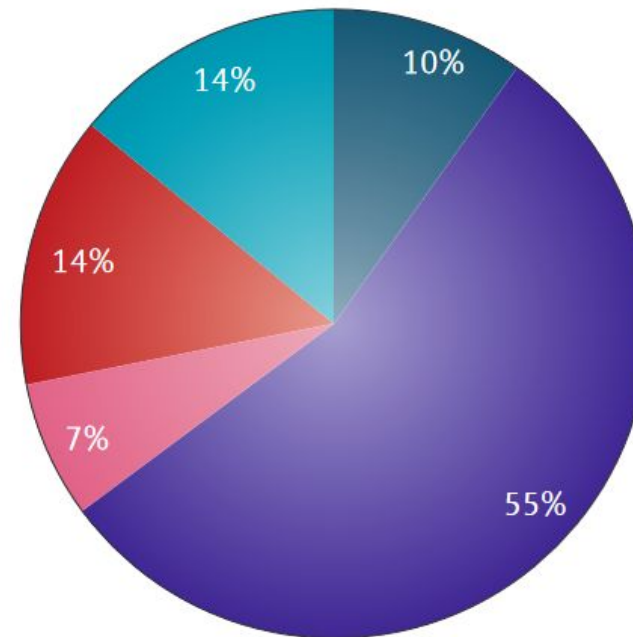
pTS: probability of technical success. **WIP:** work in progress; **Capitalized cost:** Out-of-pocket cost corrected for cost of capital, standard for long-term investments; **Out-of-pocket cost:** total cost required to expect one drug launch, taking into account attrition, but not the cost of capital; **Cost of capital:** annual rate of return expected by investors based on the level of risk of the investment. Paul *et al.*, Nature Reviews Drug Discovery, 2010.

Factors causing failures in Phase II and Phase III clinical trials, 2013-2015

c Reason for failure in phase II



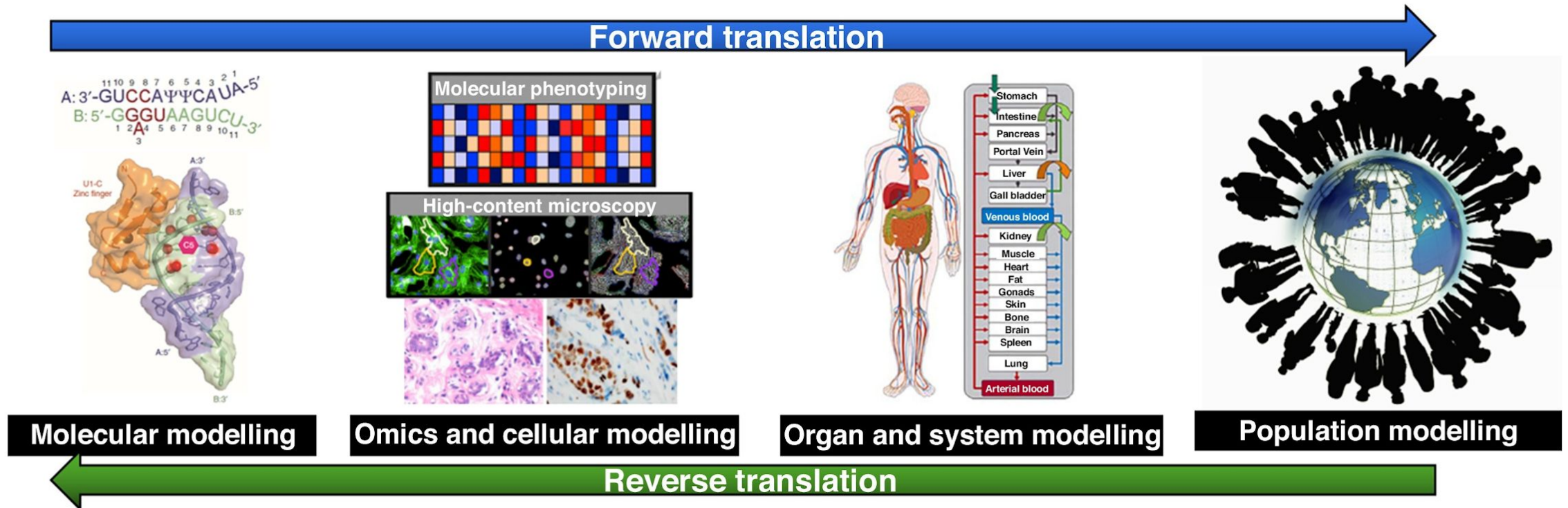
d Reason for failure in phase III



- Commercial
- Operational
- Efficacy
- Safety
- Strategy

Harrison, Richard K. "Phase II and Phase III Failures: 2013–2015." *Nature Reviews Drug Discovery* 15 (November 4, 2016): 817–18. <https://doi.org/10.1038/nrd.2016.184>.

The alternative, multiscale-modelling view of drug discovery



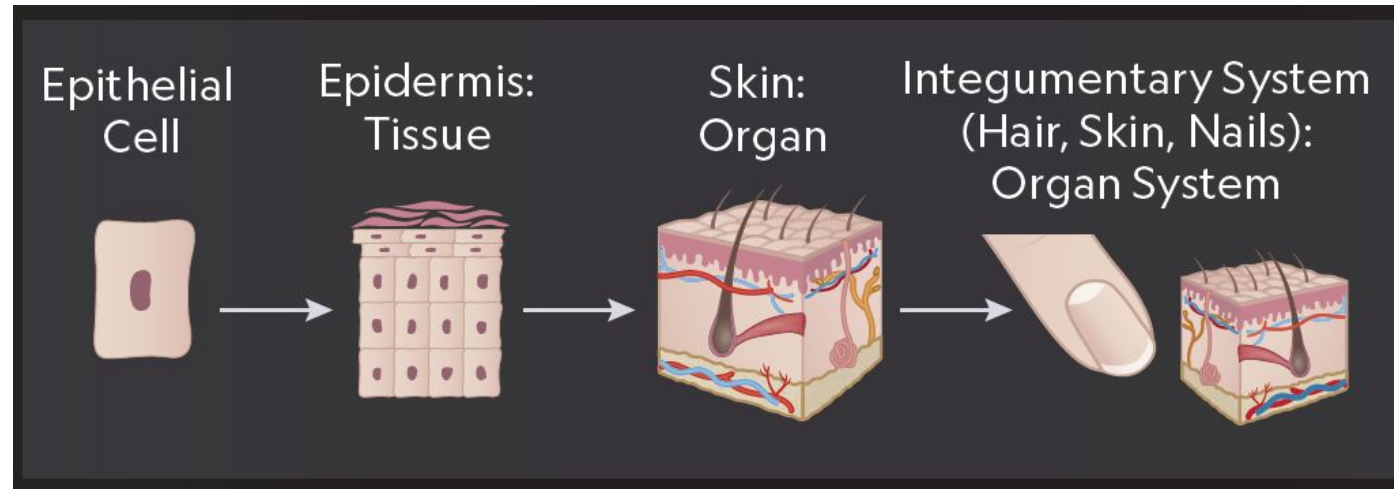
Drug Discovery Today

Zhang, Jitao David, Lisa Sach-Peltason, Christian Kramer, Ken Wang, and Martin Ebeling. 2020. "Multiscale Modelling of Drug Mechanism and Safety." *Drug Discovery Today* 25 (3): 519–34. <https://doi.org/10.1016/j.drudis.2019.12.009>.

Five fundamental views of cells

- Material
- Producer and consumer of energy
- Vehicle of Information
- Product of evolution
- Computation unit

The human biological system is hierarchical

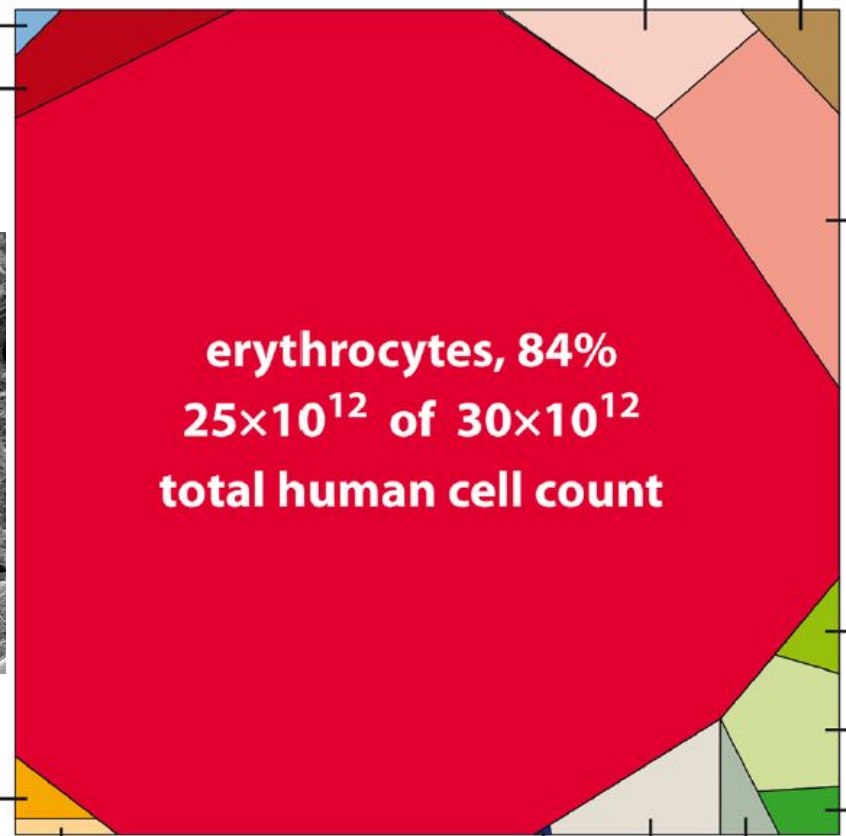


Cells: basic building blocks, variable morphologies and functions

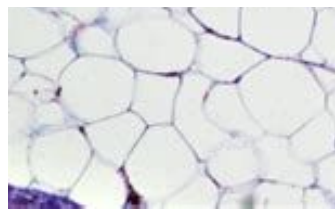
Tissues: groups of specialized cells that communicate and collaborate

Organ: group of tissues to perform specific functions

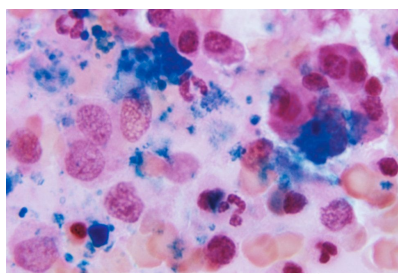
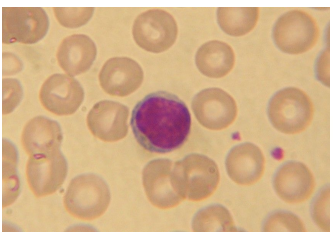
Organ systems: group of organs and tissues



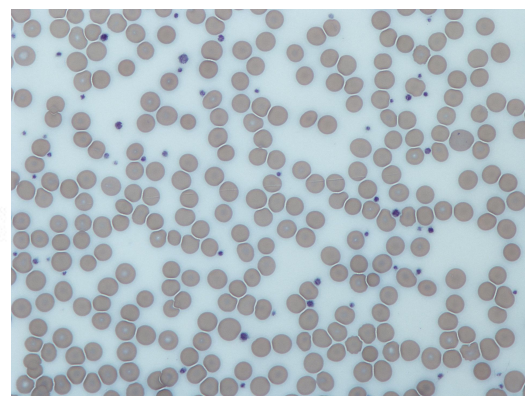
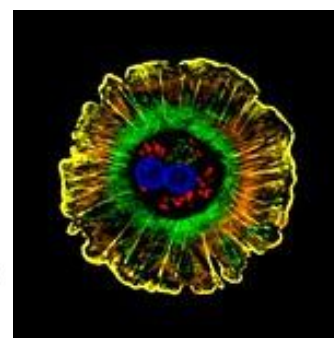
erythrocytes, 84%
 25×10^{12} of 30×10^{12}
total human cell count



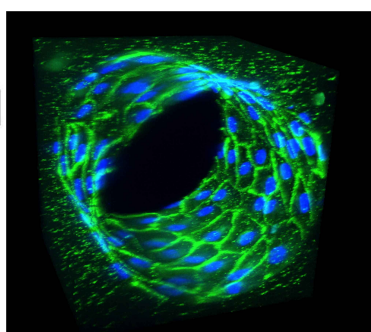
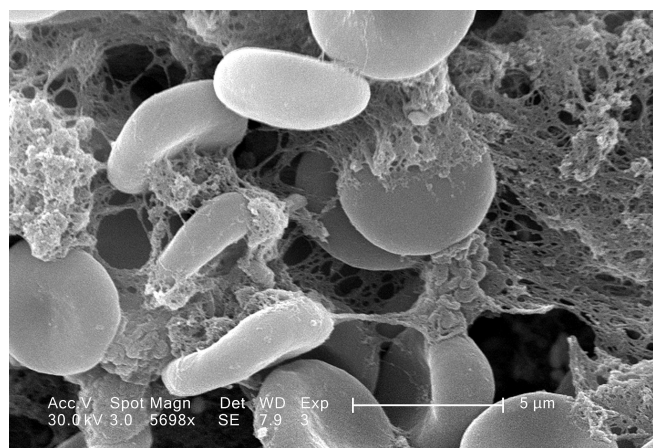
adipocytes 0.2%
 lymphocytes 1.5%



bone marrow cells 2.5% hepatocytes 0.8%



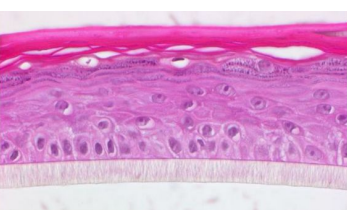
platelets 4.9%



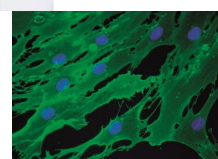
bronchial endothelial cells 0.5%

vascular endothelial cells 2.1%

respiratory interstitial cells 0.5%



epidermal cells 0.5%

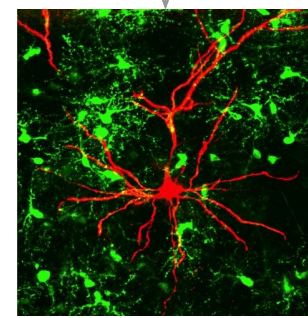
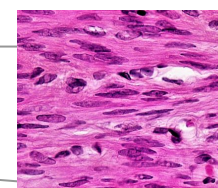


dermal fibroblasts 0.1%

muscle cells 0.001%

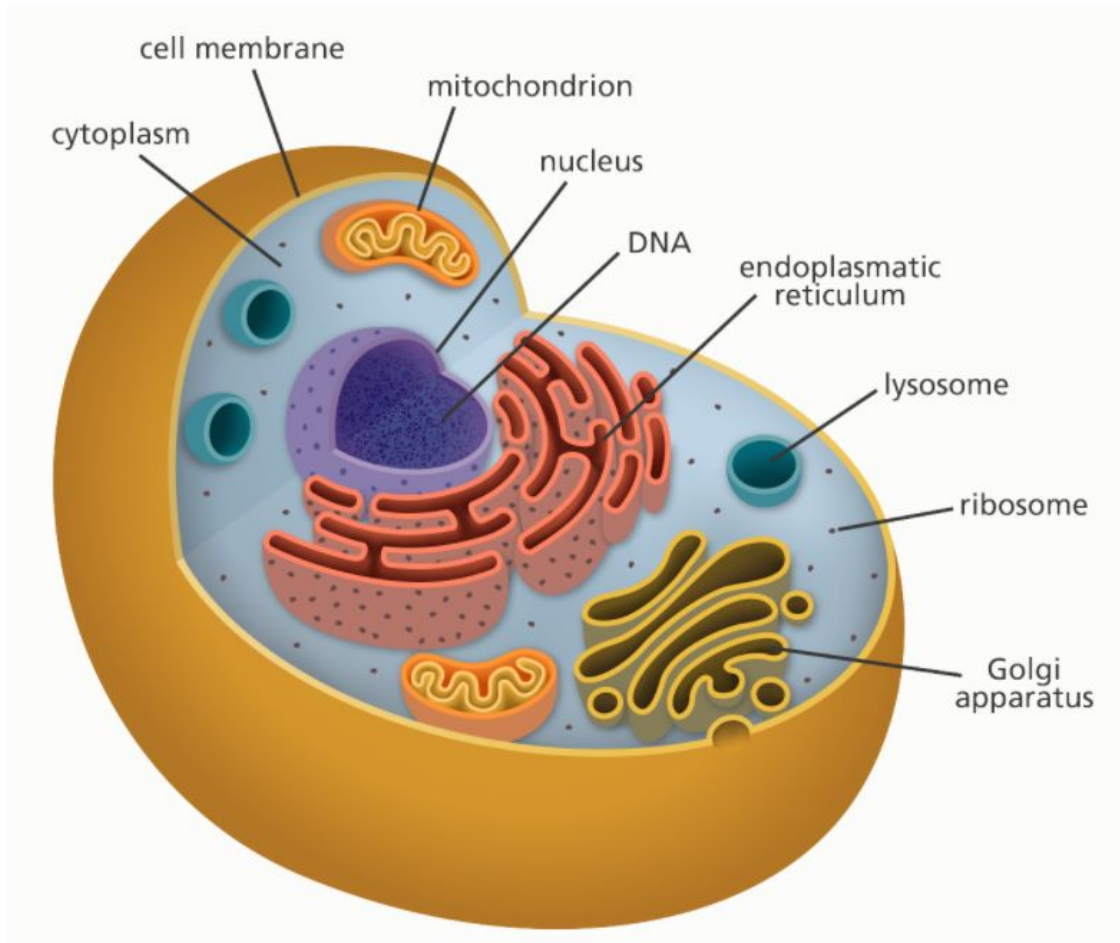
other 2.0%

neurons and glia 0.6%

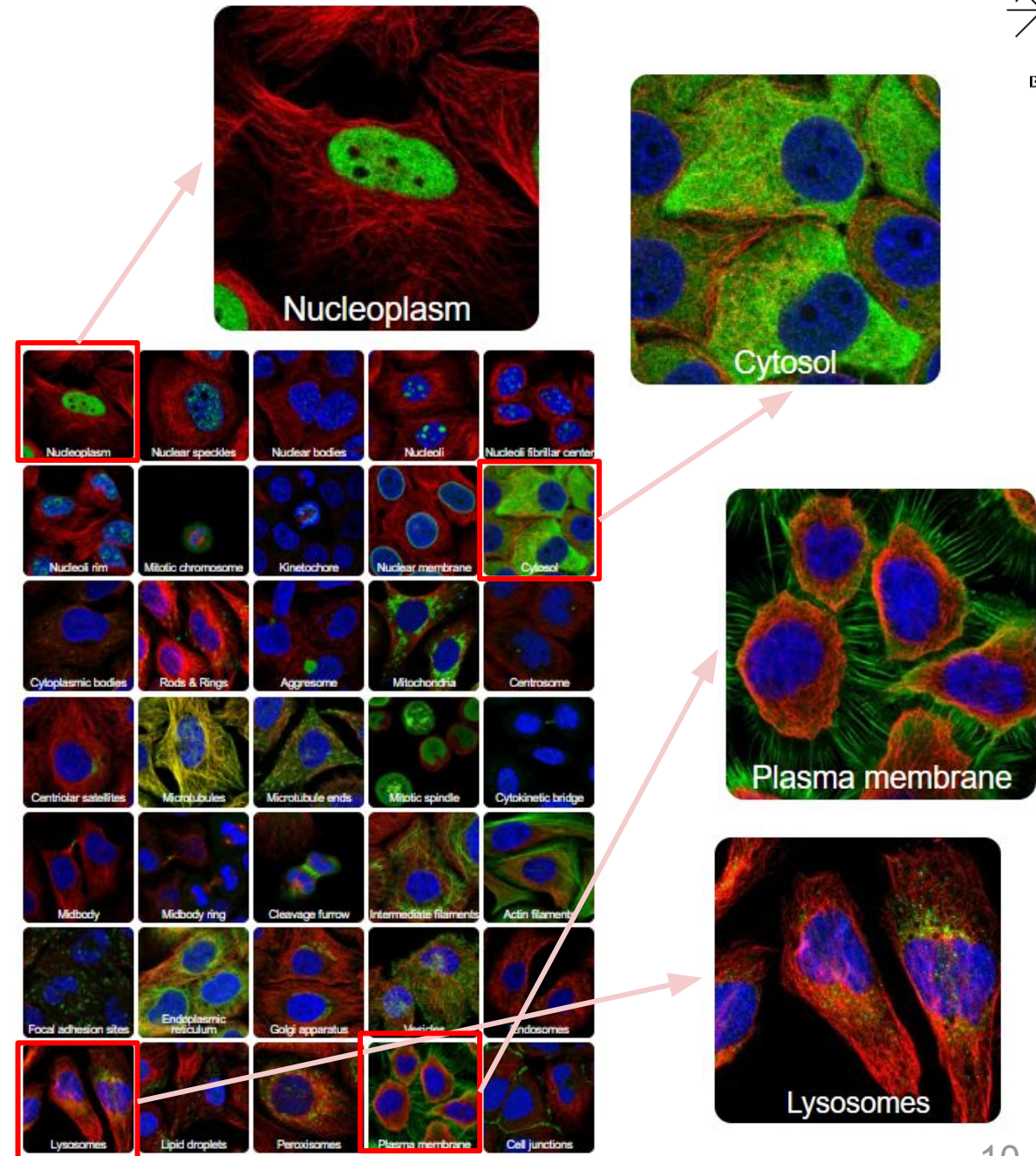


The human cell as a material entity

The Physics

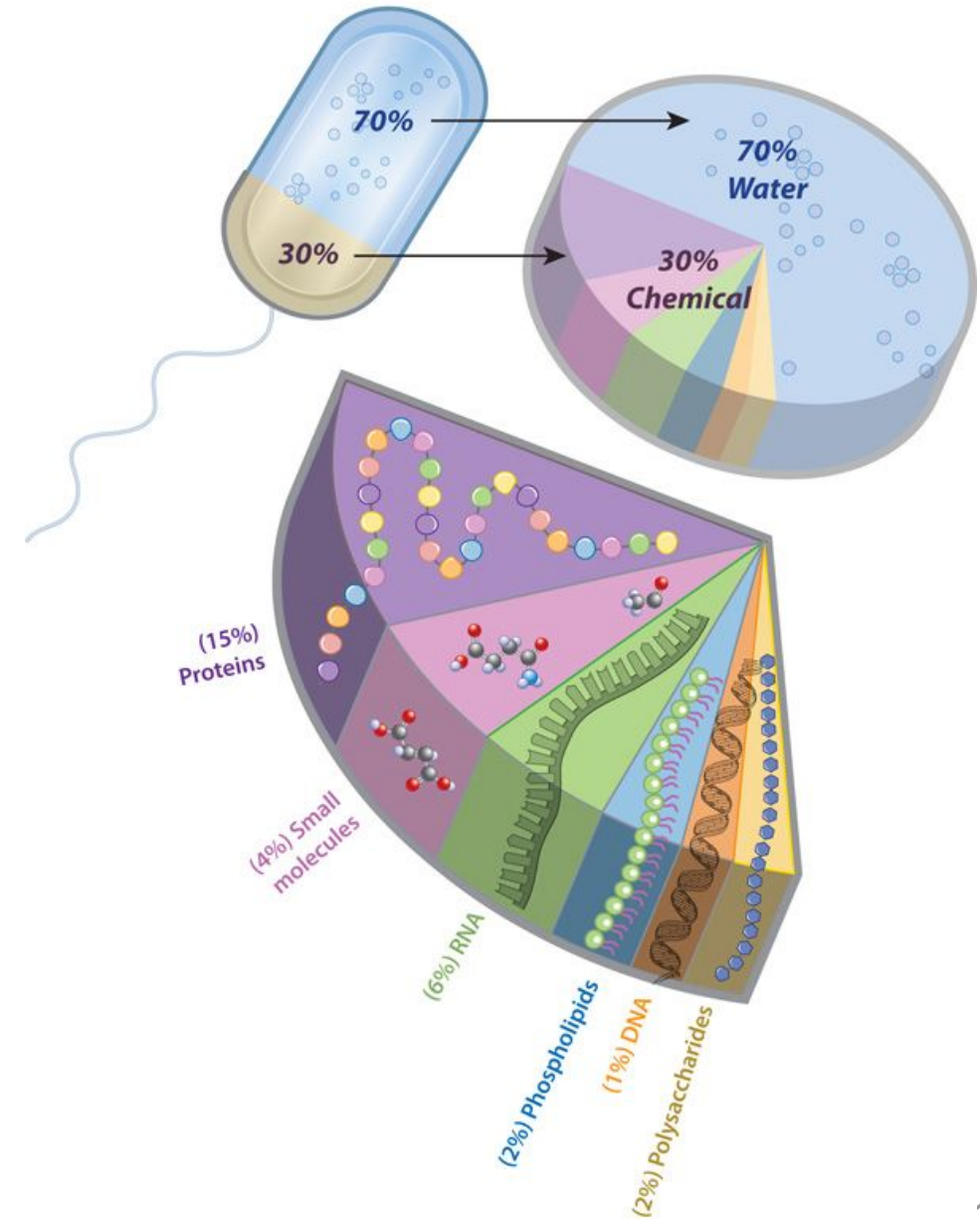
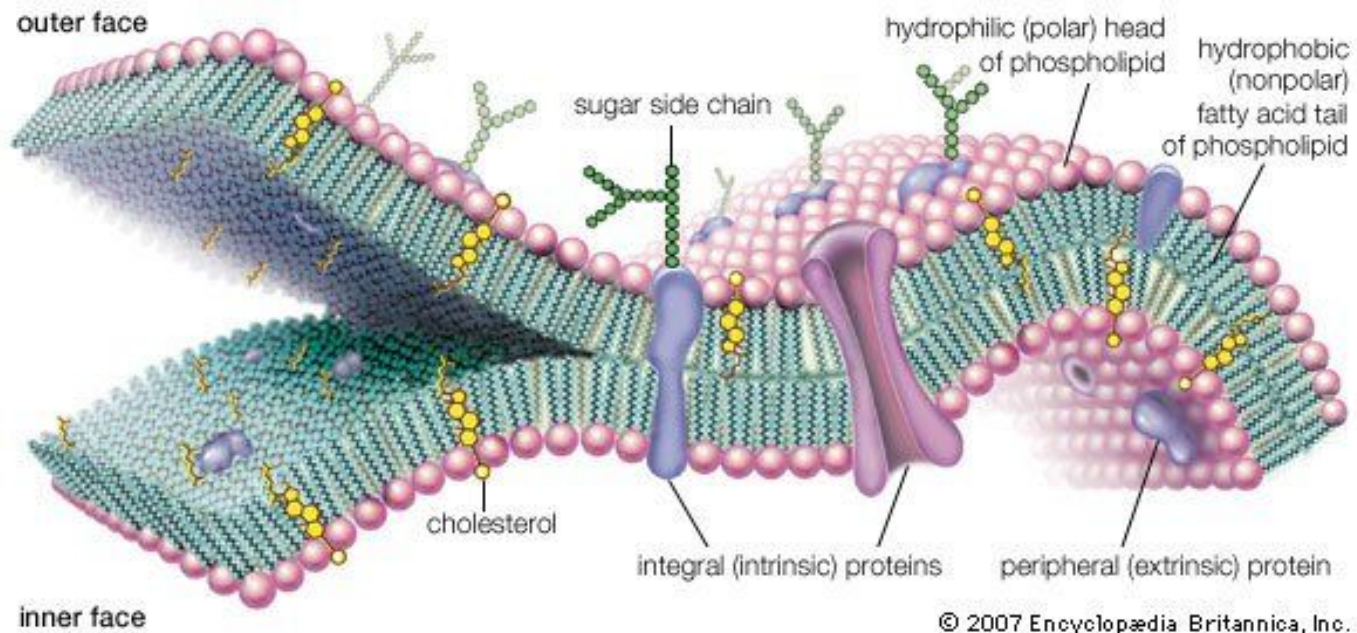


Left: Illustration showing the structures of an animal cell. Image credit: Genome Research Limited. Right: [Figure from The Human Protein Atlas](#)



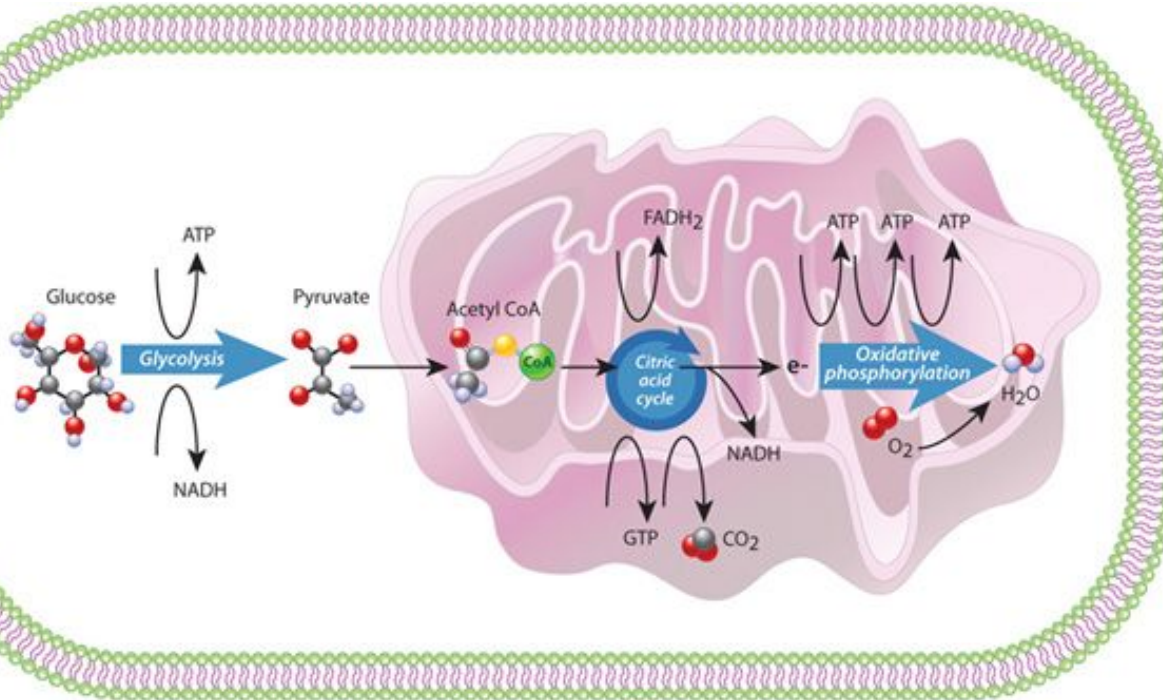
The human cell as a material entity

The Chemistry



Left: Cell membrane, copyright of Encyclopedia Britannica, Inc.
 Right: Chemical composition of a human cell, by [Scitable Nature Education](#).

The human cell as an energy producer and consumer



Energy metabolism: glycolysis takes place in the cytoplasm. Within the mitochondrion, the citric acid cycle occurs in the mitochondrial matrix, and oxidative metabolism occurs at the internal folded mitochondrial membranes (cristae). Source: [Nature Education](#).

| tissue | protein synthesis | Na ⁺ /K ⁺ ATPase | Ca ²⁺ ATPase | other |
|-----------------|-------------------|--|-------------------------|--|
| liver | 20% | 5-10% | 5% | gluconeogenesis (15-40%), substrate recycling (20%), proton leak (20%), urea synthesis (12%) |
| kidney | 6% | 40-70% | - | gluconeogenesis (5%) |
| heart | 3% | 1-5% | 15-30% | actinomyosin ATPase (40-50%), proton leak (15% max) |
| brain | 5% | 50-60% | significant | a single cortical action potential was estimated to require 10 ⁸ -10 ⁹ ATP, BNID 111183) |
| skeletal muscle | 17% | 5-10% | 5% | proton leak (50%), nonmitochondrial (14%) |

Distribution of major oxygen-consuming processes to total oxygen consumption rate of rate tissues in standard state, from [Cell Biology By The Numbers](#). The total energy production rate is about 100W (or ~1W/kg) at rest.

The central dogma of molecular biology: the human cell as an information vehicle



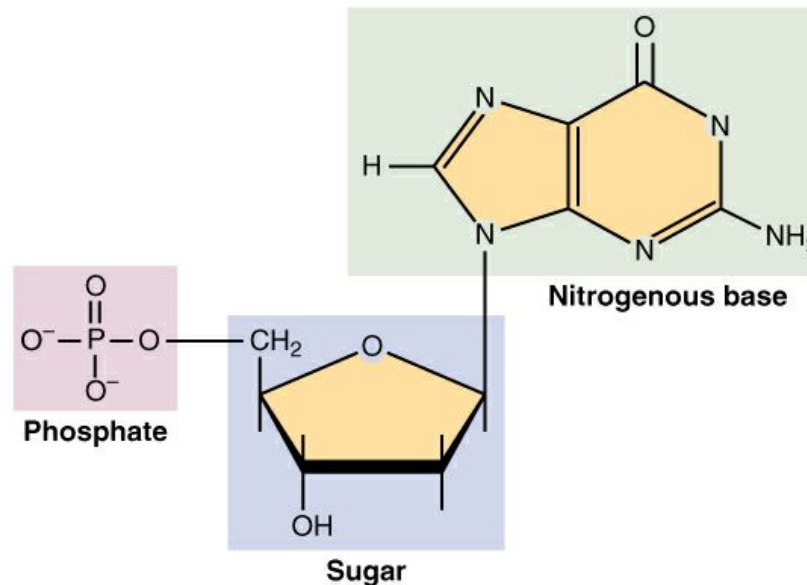
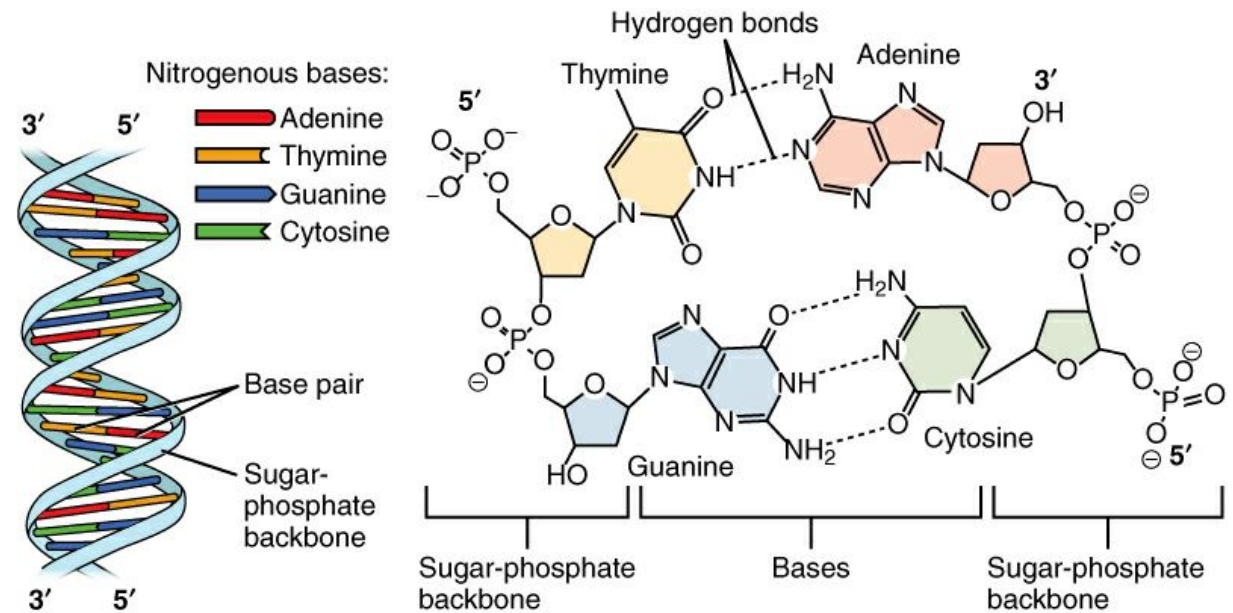
The Central Dogma can be represented by a graph of chemical information vehicles (nodes) and biological information flows (edges)

DNA: sequences and structure



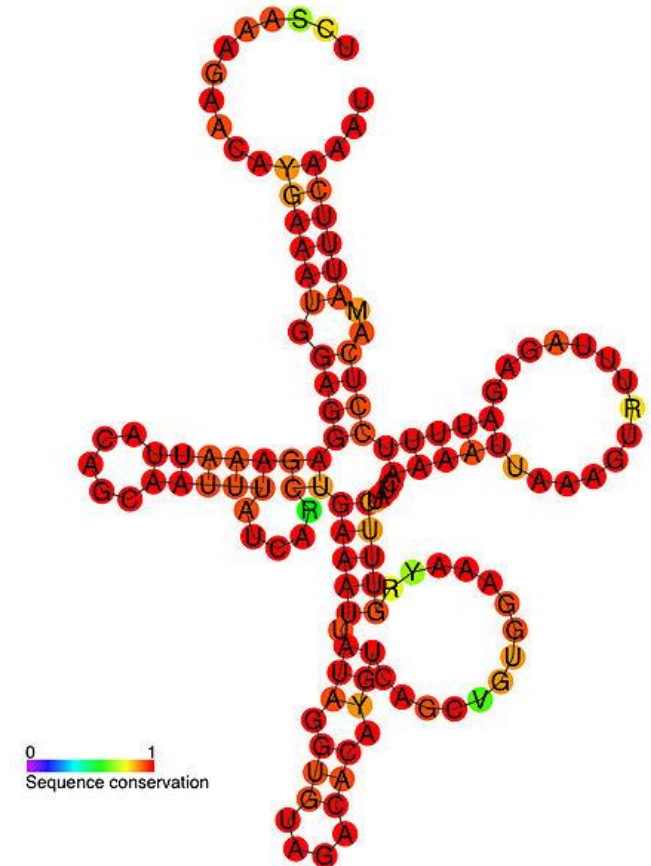
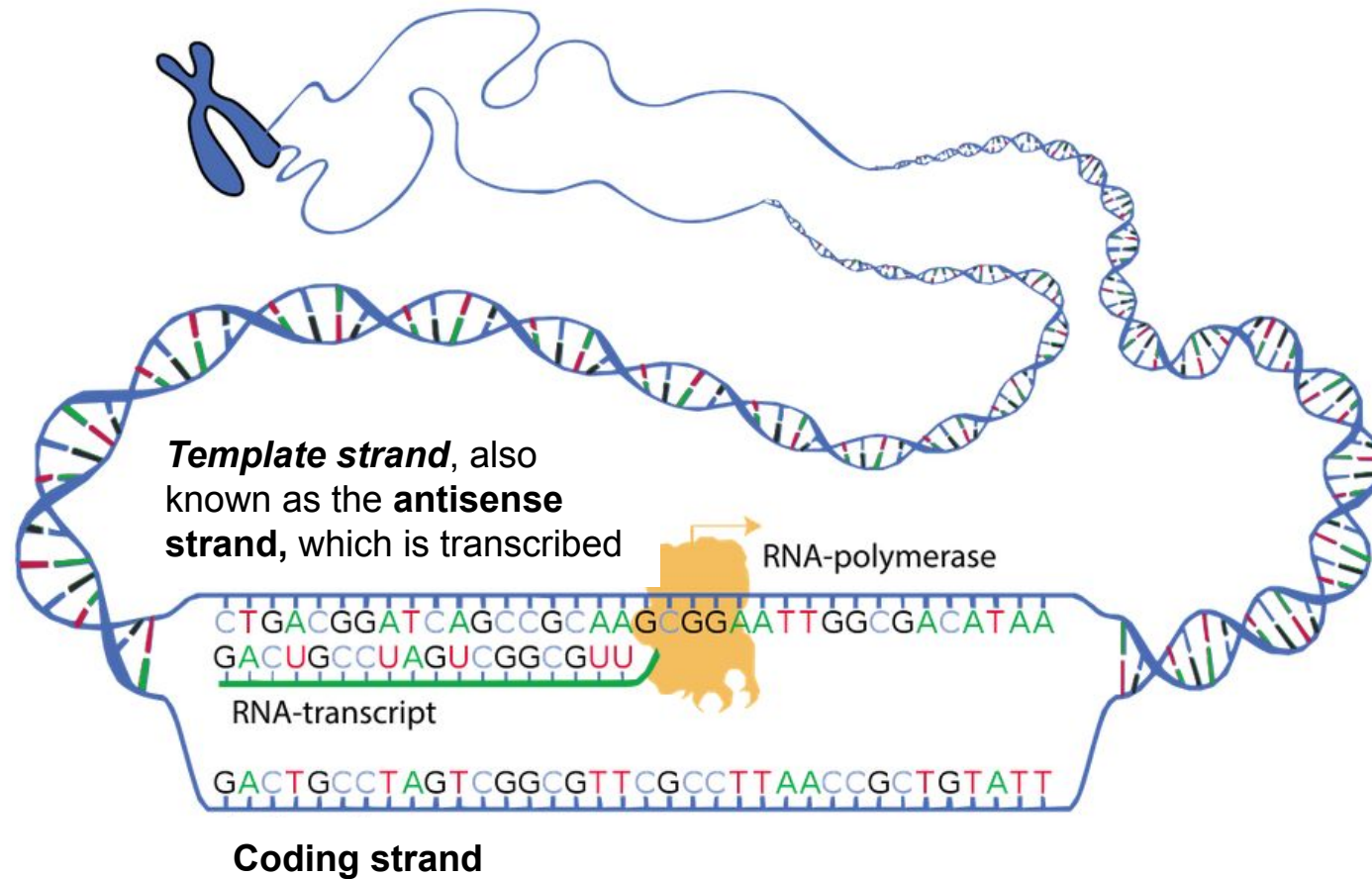
Photo 51, X-ray diffraction
image of DNA

Franklin R, Gosling RG (1953)
"Molecular Configuration in Sodium
Thymonucleate". *Nature* 171: 740–741.



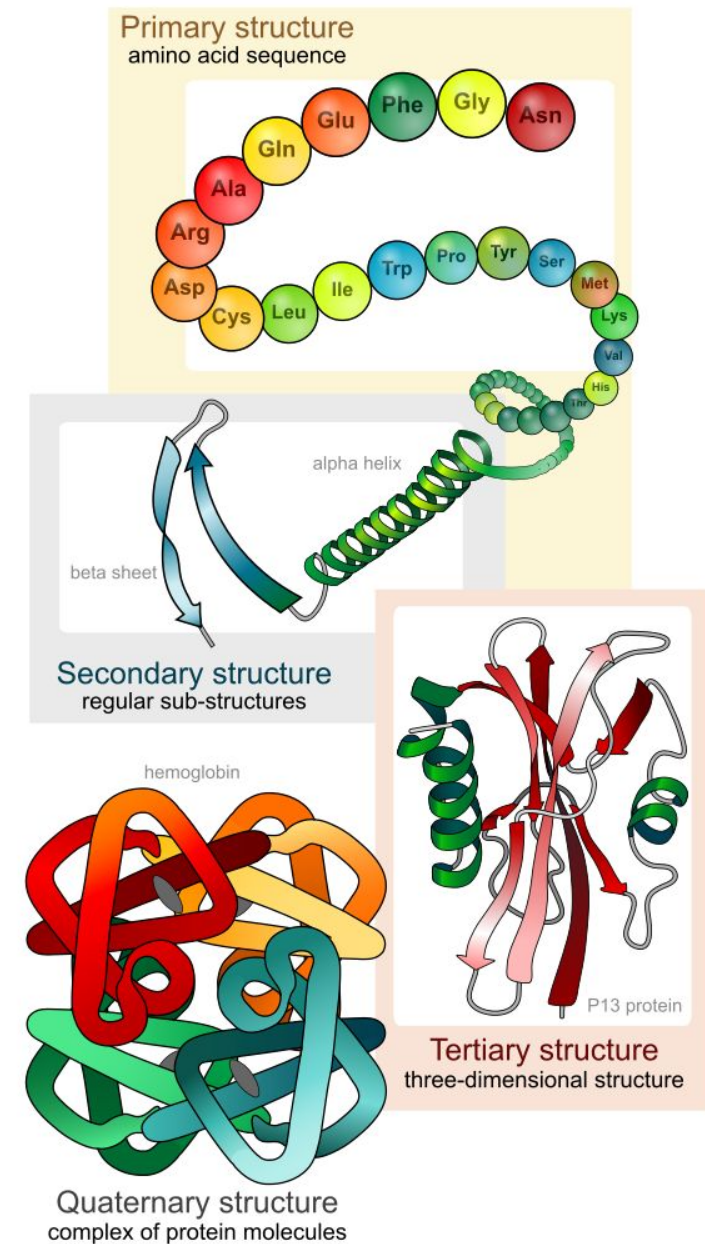
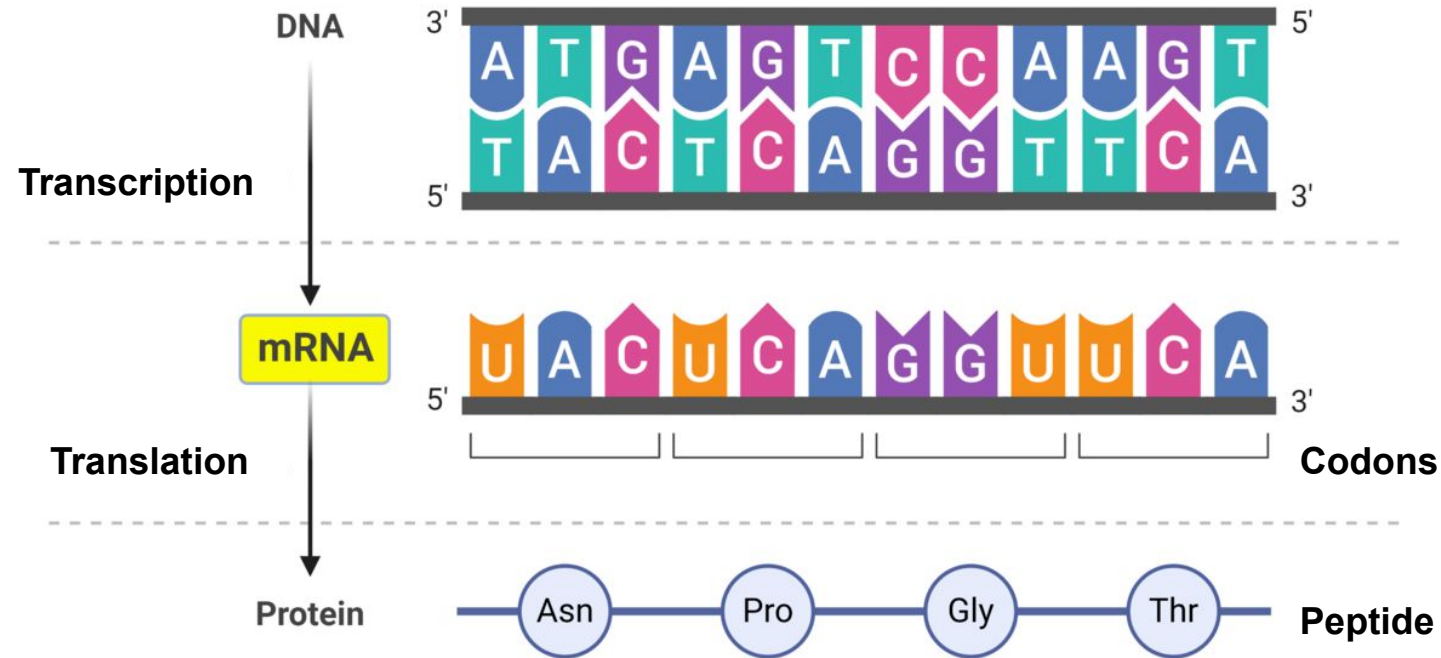
From the textbook OpenStax Anatomy and Physiology, discovered
through Wikimedia, reused under the CC license.

RNA: transcription and the secondary structure

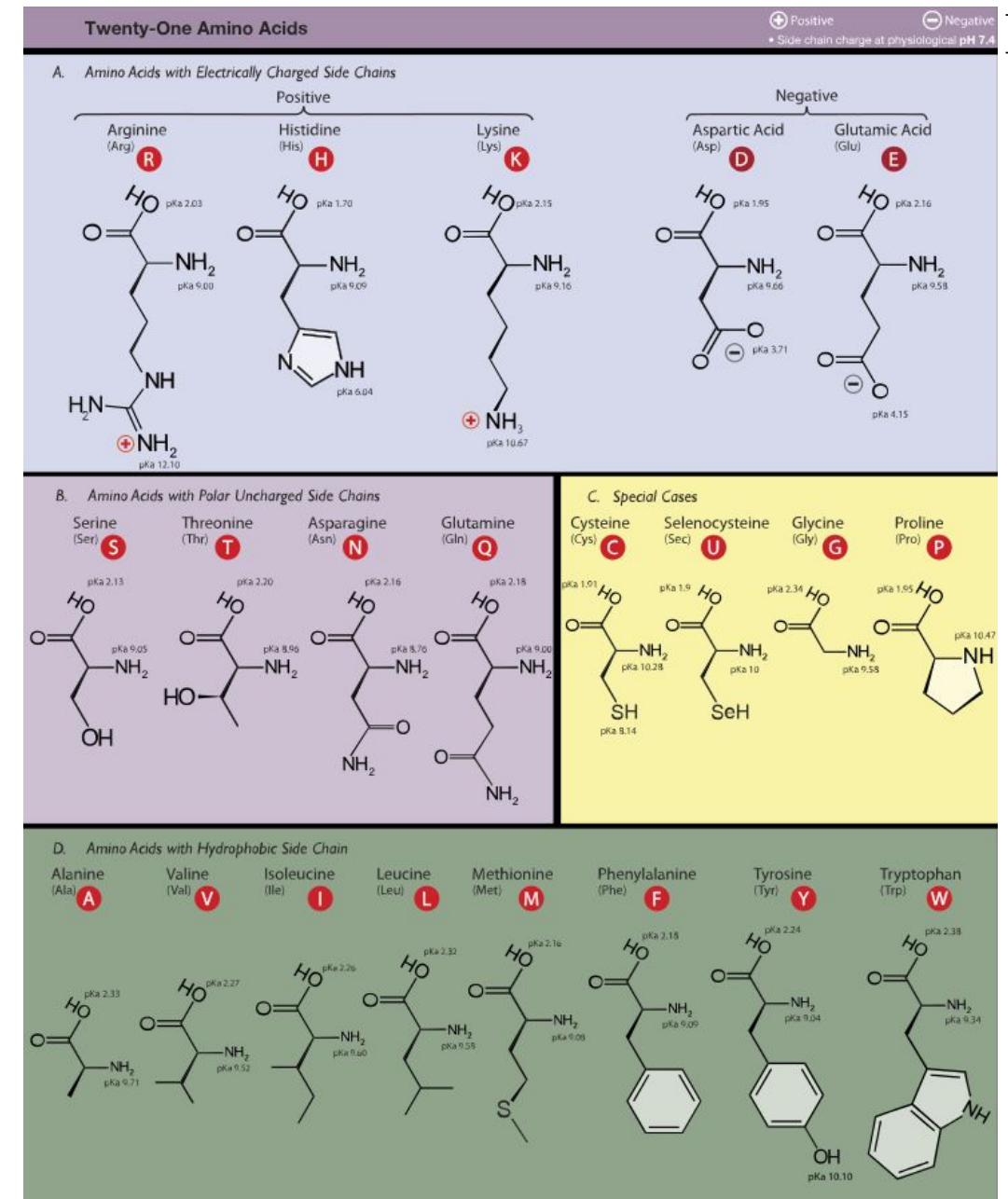
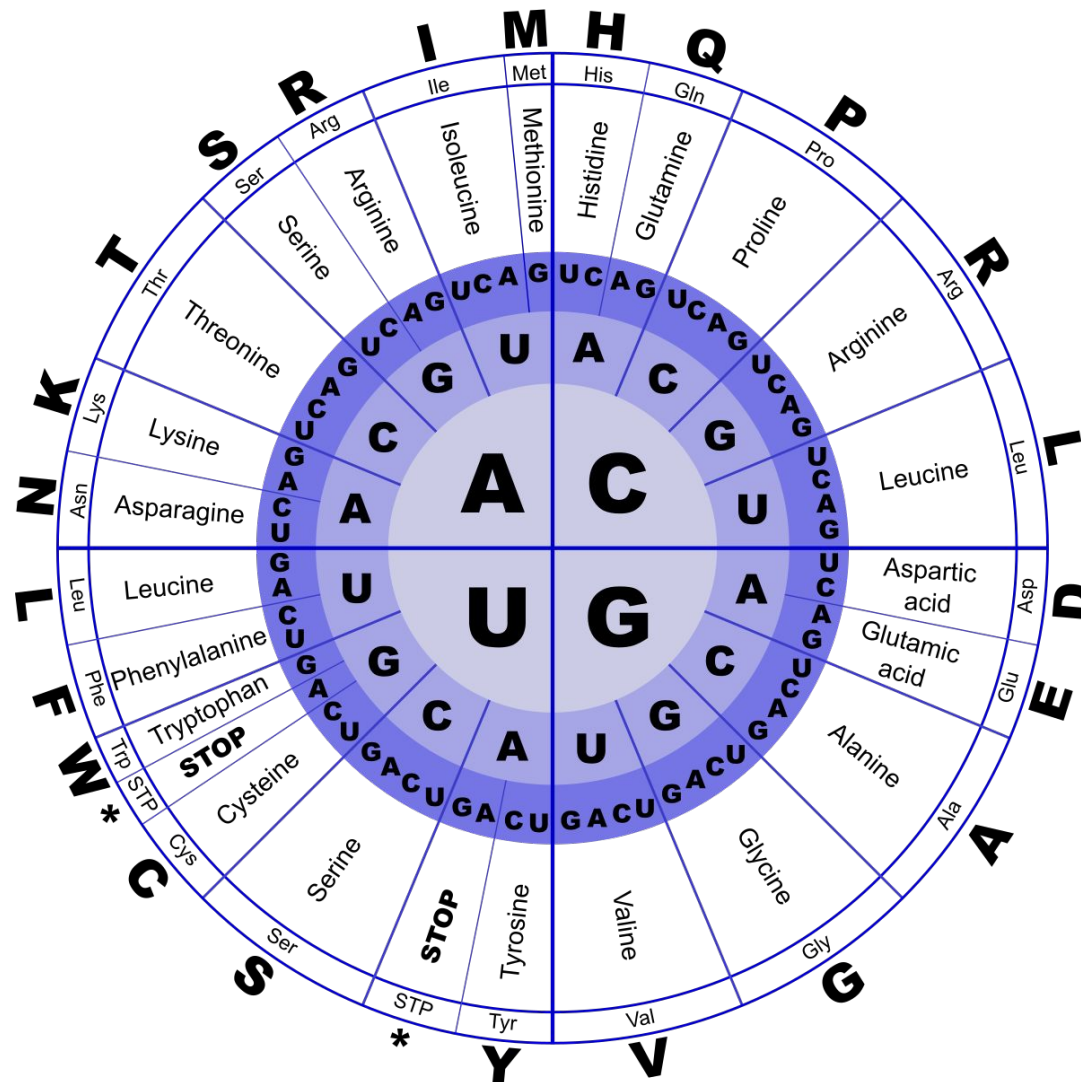


Downloaded and adapted from https://commons.wikimedia.org/wiki/File:DNA_transcriptie.svg and https://en.m.wikipedia.org/wiki/File%3AHAR1F_RF00635_rna_secondary_structure.jpg. Original work by wikipedia user: OrgreBot and user:Ppgardne. Used under CC-SA 3.0 license.

Translation of RNA into proteins



Codes of the central dogma



Break-out

1. Think of **three** drugs that you have used and/or used.
2. Look for their **chemical structures**, and identify whether they belong to small molecule, antibodies, oligonucleotides, or others.
3. Try to look after **their pharmacological targets**, and tell which part of the central dogma do they target?
4. (Optional) Try to learn their mechanism-of-action or mode-of-action (MoA), *i.e.* how do they work, and their indications, *i.e.* the diseases they try to cure.

Drugs work by targeting nodes or edges of the central dogma

| Target | Example drugs or therapeutic candidates |
|------------------------------|--|
| Protein | <ul style="list-style-type: none"> • Most small-molecules, for instance GPCR modulators, kinase inhibitors, ion channel inhibitors • Most large-molecules (antibodies) |
| Translation | <ul style="list-style-type: none"> • Antimicrobial protein synthesis inhibitors • mTOR-pathway modulating drugs such as rapamycin |
| RNA | <ul style="list-style-type: none"> • Anti-sense oligonucleotides (ASO), for instance siRNA (silencing RNA) or locked nucleotide acids (LNA) |
| Transcription | <ul style="list-style-type: none"> • Antimicrobials such as actinomycin D and α-Amanitin • Evrysdi (Risdiplam, SMN2 splicing modulator) |
| Reverse transcription | <ul style="list-style-type: none"> • Reverse transcriptase inhibitors such as AZT (Zidovudine) |
| DNA | <ul style="list-style-type: none"> • Genome-editing therapies such as chimeric activated receptors in T-cells (CAR-T) or CRISPR-CAS9 |
| DNA replication | <ul style="list-style-type: none"> • Topoisomerase inhibitors such quinolones • Chemotherapies |

Most drugs so far target proteins

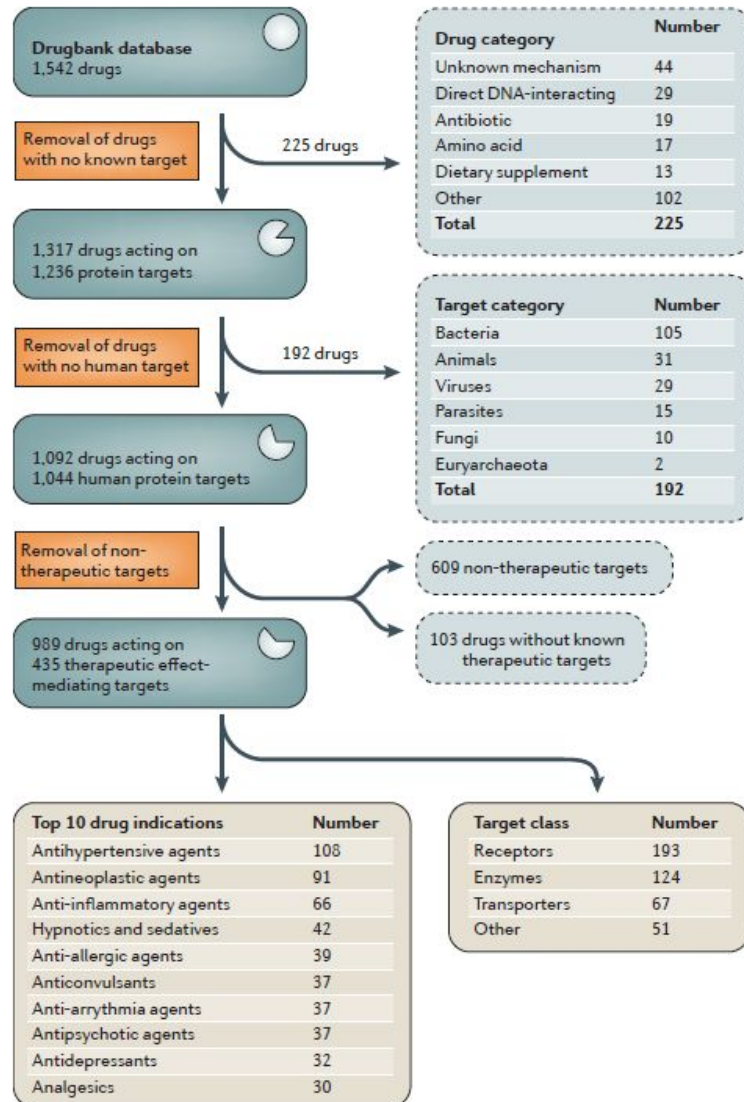
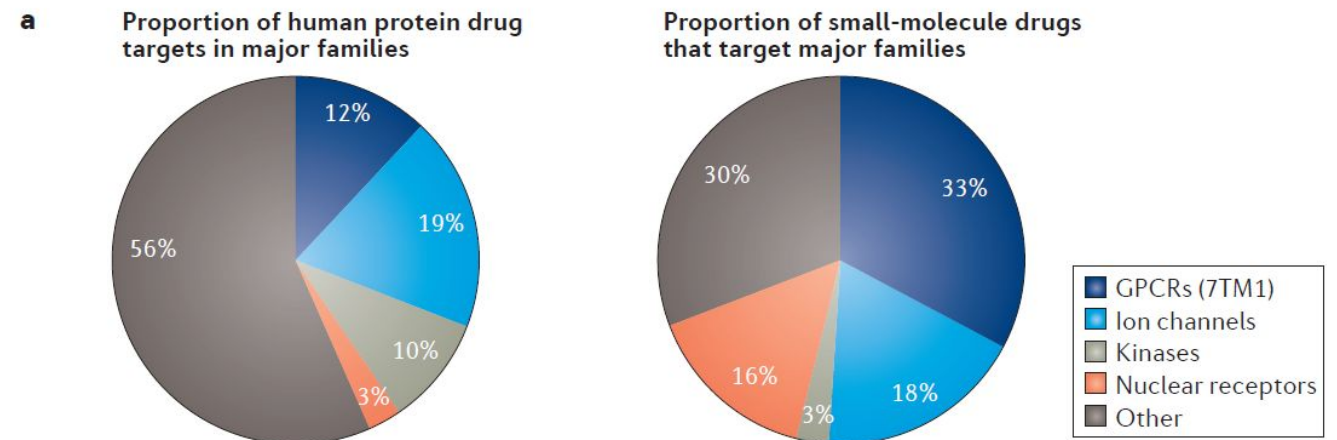


Table 1 | Molecular targets of FDA-approved drugs

| Drug target class | Targets | | | Drugs | | |
|-----------------------------|---------------|-----------------------------|-----------------------|-------------|-----------------|-----------|
| | Total targets | Small-molecule drug targets | Biologic drug targets | Total drugs | Small molecules | Biologics |
| Human protein | 667 | 549 | 146 | 1,194 | 999 | 195 |
| Pathogen protein | 189 | 184 | 7 | 220 | 215 | 5 |
| Other human biomolecules | 28 | 9 | 22 | 98 | 63 | 35 |
| Other pathogen biomolecules | 9 | 7 | 4 | 79 | 71 | 8 |

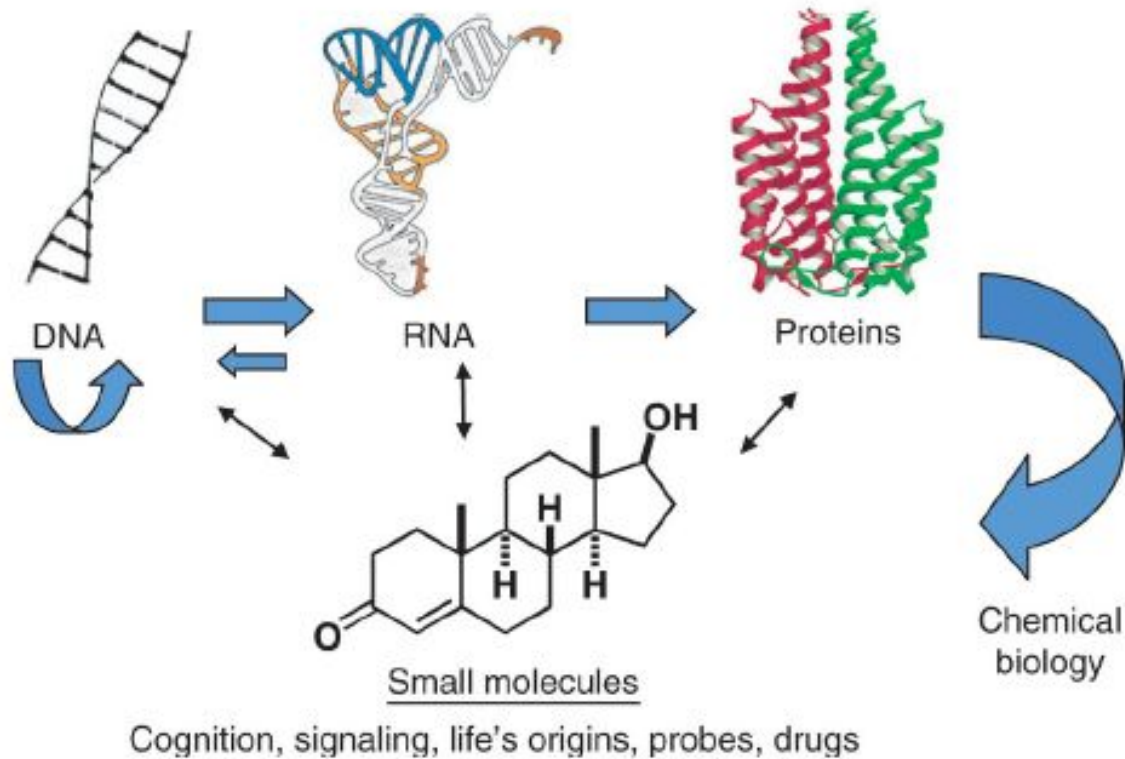
The list also includes antimalarial drugs approved elsewhere in the world.



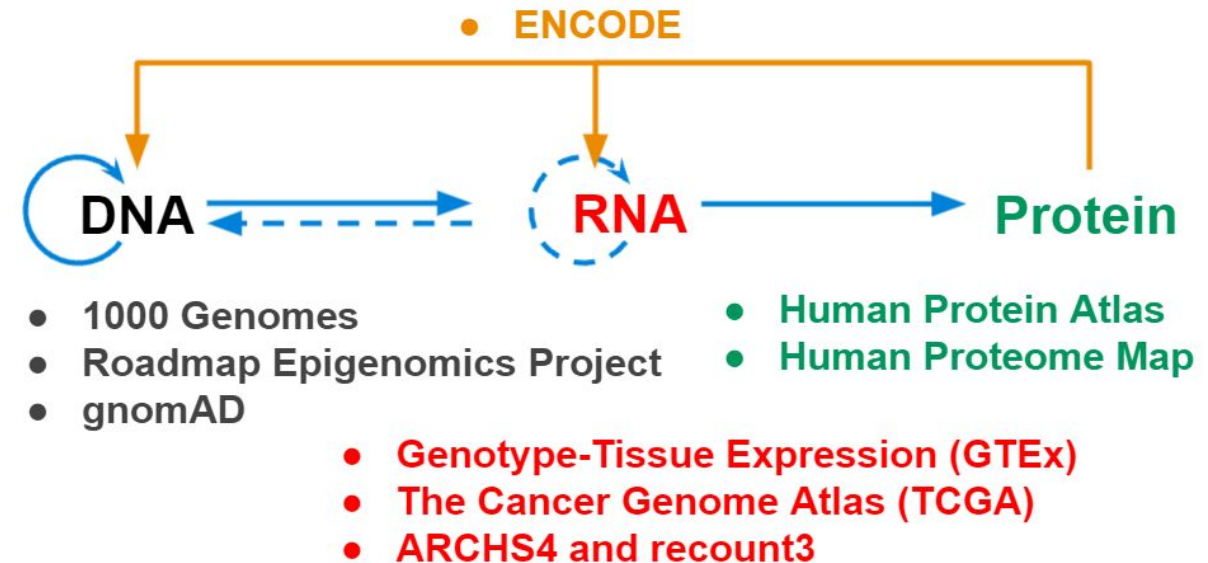
Left: Rask-Andersen, Mathias, Markus Sällman Almén, and Helgi B. Schiöth. 2011. "Trends in the Exploitation of Novel Drug Targets." *Nature Reviews Drug Discovery* 10 (8): 579–90. <https://doi.org/10.1038/nrd3478>.

Right: Santos, Rita, Oleg Ursu, Anna Gaulton, A. Patrícia Bento, Ramesh S. Donadi, Cristian G. Bologa, Anneli Karlsson, et al. 2017. "A Comprehensive Map of Molecular Drug Targets." *Nature Reviews Drug Discovery* 16 (1): 19–34. <https://doi.org/10.1038/nrd.2016.230>.

Extending the Central Dogma with small molecules, feedback regulations, and Big Data



Schreiber, Stuart L. "Small Molecules: The Missing Link in the Central Dogma." *Nature Chemical Biology* 1, no. 2 (July 2005): 64–66.
<https://doi.org/10.1038/nchembio0705-64>.



Many references. Two for ENCODE are selected here: Moore, Jill E., Michael J. Purcaro, Henry E. Pratt, Charles B. Epstein, Noam Shores, Jessika Adrian, Trupti Kawli, et al. "Expanded Encyclopaedias of DNA Elements in the Human and Mouse Genomes." *Nature* 583, no. 7818 (July 2020): 699–710. <https://doi.org/10.1038/s41586-020-2493-4>; Van Nostrand, Eric L., Peter Freese, Gabriel A. Pratt, Xiaofeng Wang, Xintao Wei, Rui Xiao, Steven M. Blue, et al. "A Large-Scale Binding and Functional Map of Human RNA-Binding Proteins." *Nature* 583, no. 7818 (July 2020): 711–19. <https://doi.org/10.1038/s41586-020-2077-3>.

Questions about Bollag *et al.*, Nature 2010

1. What is the **indication** of *PLX4032*?
2. What is the **gene target** of *PLX4032*?
3. The malignancy depends on which biological **pathway**?
4. What is the **Mechanism of Action** of *PLX4032*?
5. What went wrong in the first **Phase I clinical trial**? And how was it solved?
6. What was the **dosing regimen** in the final Phase I clinical trial, and what is the **response rate**?

Questions for further thinking

- In the video that you watched offline, Susan Desmond-Hellmann summarizes great drug development in four key concepts: (1) Having a deep understanding of the basic science and the characteristics of the drug. (2) Target the right patients. (3) Set a high bar in the clinic. (4) Work effectively with key regulatory decision makers. What parts of this abstract reflect these points?
- Susan Desmond-Hellmann emphasized the importance of collaboration. Is that true when you consider this abstract?
- How do you like the abstract? Anything that you can learn from it about writing?

Offline activities

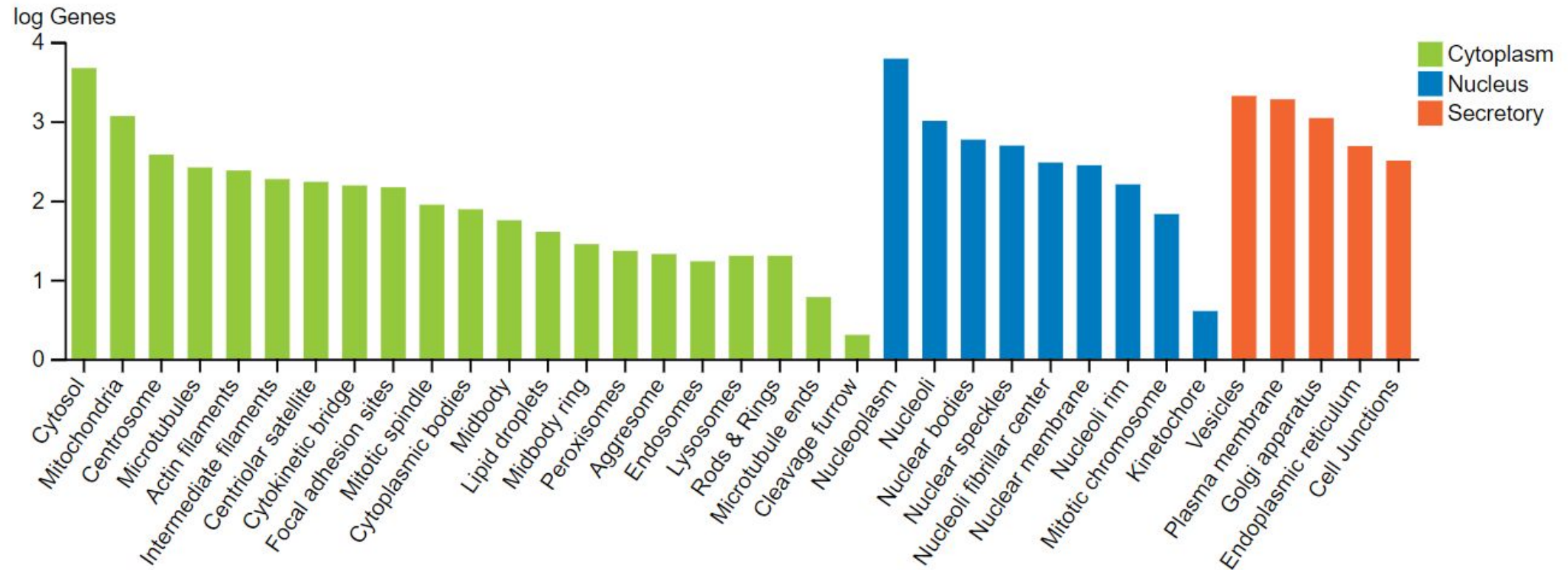
- Read the paper [Bollag et al., 2010](#), and answer questions [here in Offline Activities](#).
- Optional read: Santos, Rita, Oleg Ursu, Anna Gaulton, A. Patrícia Bento, Ramesh S. Donadi, Cristian G. Bologa, Anneli Karlsson, et al. “A Comprehensive Map of Molecular Drug Targets.” *Nature Reviews Drug Discovery* 16, no. 1 (January 2017): 19–34. <https://doi.org/10.1038/nrd.2016.230>.

Questions for Bollag et al., 2010

1. We learned that many drugs target one of the four protein types: GPCRs, ion channels, kinases, and nuclear receptors. Which type does the target of PLX4032 belong to?
2. How was the efficacy of PLX4032 tested?
3. Why was PLX4032 chosen for further development, but not PLX4720?
4. How was the exposure of PLX4032 in the blood quantified? Which mathematical operation was used?
5. How was the final dosing regimen (960-mg BID) determined?
6. How did patients with the V600K mutation in BRAF respond?
7. What measures were taken to demonstrate the effect of BRAF inhibition in patient biopsies?
8. What side effects of PLX4032 were reported?
9. What measures were taken against side effects and safety concerns of PLX4032?
10. Where do you think mathematics and informatics is used in the discovery and development of PLX4032?

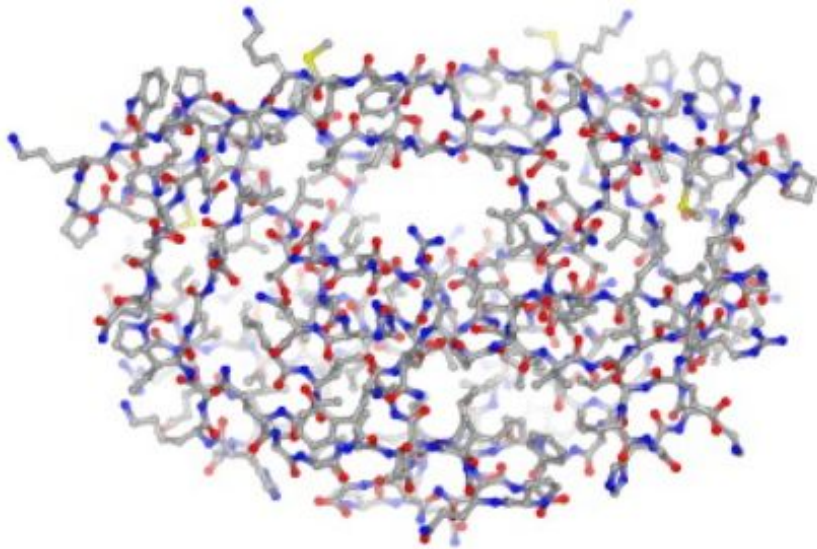
Backup slides

Protein distribution in the human cell

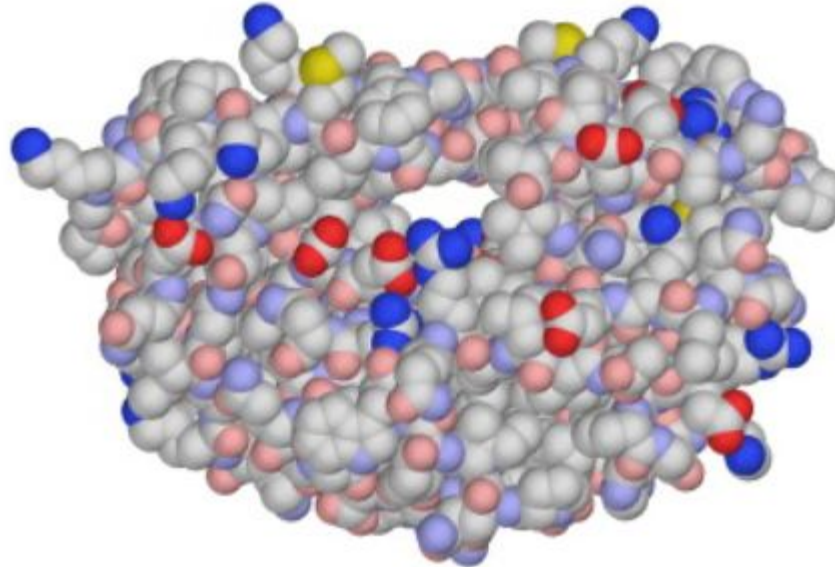


Source: [The Human Protein Atlas](#). Among N=12813 cells, 55% (n=7106) of the proteins were detected in more than one location (*multilocalizing* proteins), and 25% (n=3141) displayed single-cell variation in expression level or spatial distribution.

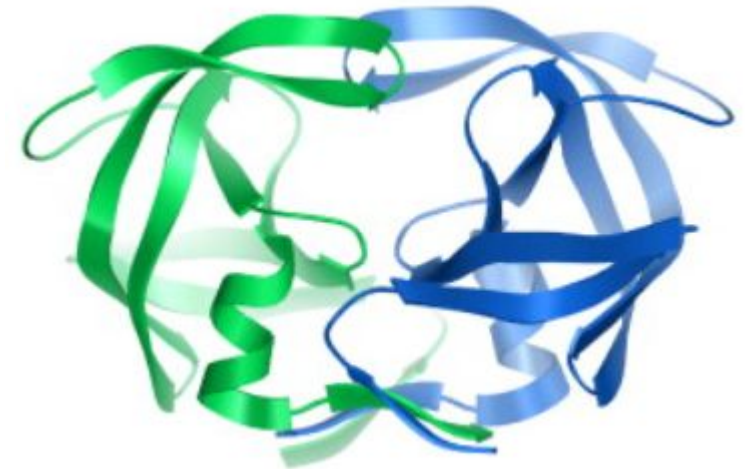
Three basic visual metaphors to display proteins



The bond diagram (balls-and-sticks)



The space-filling diagram



The ribbon diagram

Color codes: **Charged Nitrogen**, **Charged Oxygen**, **Uncharged Nitrogen**, **Uncharged Oxygen**, Carbon (gray/white), **Sulfur**