

## Exploring Novel Opportunities for Aureolic Acids as Anticancer Drugs

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The aureolic acids are a family of polyglycosylated aromatic polyketides bearing a tricyclic core that includes mithramycin A, chromomycin A<sub>3</sub>, olivomycin A, UCH9 and durhamycin A (Figure 1) [1]. They are all antineoplastic antibiotics against Gram-positive bacteria and also stop the proliferation of tumor cells. Several studies have pointed out that the basis for the antitumor properties of mithramycin and its analogs (Mithralogs) is the inhibition of replication and transcription processes during macromolecular biosynthesis by interacting, in the presence of Mg<sup>2+</sup>, with GC-rich nucleotide sequences, especially the site of union of Sp1 transcription factor [2-4]. Mithramycin A (MTM) and chromomycin A<sub>3</sub> (CRM) are the most representative members of the family, MTM being approved as an anticancer drug in 1970, and used originally for the treatment of several types of cancer, Paget's bone disease and hypercalcemia [5-7]. However, the use of mithramycin in humans has been limited because its side effects, to the point commercial clinical batches have not been reported since 2000. Regarding CRM, despite being 10 times more active than MTM against several tumor cell lines, it has been limited clinically due to severe toxicity [8].

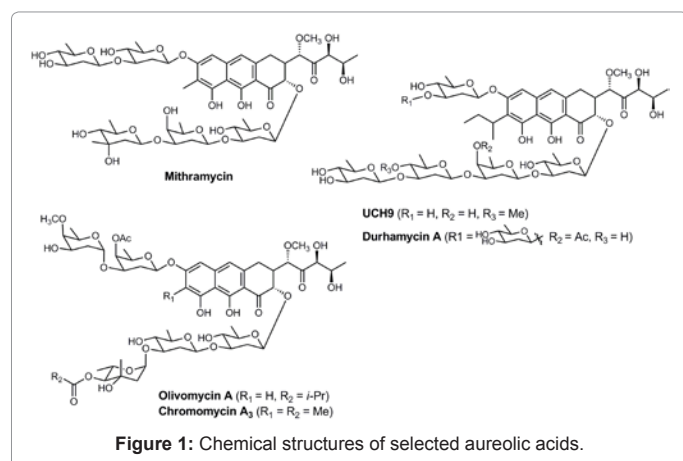
Notwithstanding, in recent years has been a renewed interest in aureolic acids, as new uses and activities has been described to MTM, including inhibition of apoptosis or antiangiogenic activity, in both cancer and noncancer related processes [9,10]. For example, MTM selectively blocks expression of cell proliferation and transforming growth factor  $\beta$  (TGF- $\beta$ ) signaling clusters in human gingival fibroblasts, and in glioma cells it was found to suppress and delay tumor cell migration [11]. On the other hand, the combination of MTM and betulinic acid has led to a novel antiangiogenic therapy for pancreatic cancer [12] and has also revealed to be a neuroprotective drug with potential application as neurological therapeutics [13]. Likewise, CRM was identified through *in silico* analysis of the publicly available drug profiles from the NIH (National Cancer Institute) as an agent suitable to selectively targeting the loss of the von Hippel-Lindau (VHL) tumor suppressor gene in clear cell renal carcinoma [14].

More recently, MTM has just been identified as the top candidate from a high-throughput screening of over 50,000 compounds to inhibit

the aberrant EWS-FLI1 fusion transcription factor, associated to the malignant transformation and progression of Ewing sarcoma family of tumors (ESFTs) [15]. Similarly, it has been shown that MTM is able to downregulate ABCG2, a xenobiotic pump, a knockdown effect that inhibits proliferation and migration in lung and esophageal cancer cells [16]. Importantly, both findings have provided the basis for starting clinical trials of MTM in cancer for the first time in decades [17,18].

These promising applications have triggered the development of several synthetic approaches in order to discover novel aureolic acid analogs with an improved therapeutic index [1,19,20]. In the field of combinatorial biosynthesis, modifications achieved by genetic engineering have allowed to modify the MTM molecule in the 3-side chain (aglycone), the sugar profile or both. Particularly, the mithralogs SK (MTM-SK), and SDK (MTM-SDK) [21], which bear a shorter side chain, showed higher antitumor activities and lower toxicity than the parental compound and were particularly effective in treating ovarian and advanced prostate cancers [22-24]. Likewise, the gene cluster involved in the biosynthesis of CRM has been cloned and characterized, showing that the CmmA gene encodes the acetyltransferase responsible for transferring both acetyl groups to the sugar moiety. Further employment of the CmmA acetyl transferase as a biosynthetic enzyme enabled to prepare novel mono-, di- and triacetyl derivatives of aureolic acids with improved antitumor activities [25]. Moreover, a biocatalytic approach based on a lipase-catalyzed regioselective acylation led to a plethora of mono- and diacetyl derivatives of MTM and CRM [26,27]. Recently the complexation of aureolic acids with metal ions has been studied as well as the activity of the resulting complexes. All the MTM and CRM complexes with divalent metal ions exhibited a 2:1 drug-metal complex stoichiometry. The antitumor activity of the CRM-complexes with Ni(II), Fe(II) and Co(II) were significantly higher than the uncomplexed drug due to higher DNA-acting affinity meanwhile the association with Cu(II) disfavored DNA binding [28]. Similarly, the dimer complex of MTM with Ni(II) exhibited a greater cytotoxicity than free MTM in several cancer cell lines [29].

One major problem to address with the aureolic acid family of drugs is the low bioavailability, short plasma retention time and low tumor accumulation. Previous attempts to address this issue with liposomal formulations as controlled delivery systems turned out to be not effective. Recently, two nanoparticle formulations of MTM analogs, poly(ethylene glycol)-poly(aspartatehydrazide) self-assembled



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and cross-linked polymer micelles have been developed in order to achieve a pH-dependent release of the drug. To a pH of 7.4 both self-assembled and cross-linked micelles retained 40-50% of the drug after 24 hours meanwhile drug release was accelerated at pH 5.0, especially in the cross-linked micelles. Interestingly, both formulations retained the antitumor activity of the mithralogs, the cross-linked micelles being even more potent against the A549 human non-small cell lung cancer cell line [30].

Olivomycin A was discovered more than forty years ago at the Gause Institute of New Antibiotics [31]. Despite having shown great activity in clinical trials as anticancer drug, its use was also limited due to the high toxicity. Regarding synthetic approaches, the Roush's group accomplished after ten years of impressive work the total synthesis of olivomycin A by preparing the aglycone unit (olivin), the di- and trisaccharide appendages and final assembly [32]. More recently, some synthetic analogs has been prepared by chemical modification of the aglycone moiety. For example, the attachment of amide groups to the 2'-keto group of the side chain led to a novel derivative with higher antitumor activity in *in vivo* experiments on mice bearing leukemia P-388 and lower toxicity than the parent drug as well as a marked inhibitory activity against topoisomerase I (Topo-I) [33]. Similarly, the shortening of the side chain of olivomycin to a methoxyacetic residue and further functionalization as an amide provided a novel derivative with improved DNA binding constant and antitumor effect against lymphoma and melanoma [34]. Durhamycin A was discovered in 1966 as an antifungal antibiotic from *Streptomyces durhamensis* sp. [35]. Although by far much less studied, in contrast to the well-established antitumor activity of all the other aureolic acids, durhamycin A exhibited excellent activity as a potent inhibitor (IC<sub>50</sub>=4.8 nM) of Tat, a small protein essential for both viral replication and progression of HIV disease [36]. Recently, the tetra- and trisaccharide units of the sugar moiety as well as an advanced precursor for the aglycone core have been synthesized which opens the door to new analogs [37]. Similarly, UCH9 with a structure close related durhamycin A, was isolated from *Streptomyces* sp. from a soil sample collected in Iwakuni city (Japan) in 1998. UCH9 showed cytotoxic activity against HeLa S3 cells with an IC<sub>50</sub> value of 13 nM and significant antitumor activity in a murine syngenic model [38].

In the immediate future, and in light of the promising applications highlighted above, it is almost certainly that novel aureolic acid analogs will be developed, especially taking advantage of the combinatorial biosynthesis and biocatalysis, as well as chemical synthesis. The launch of new clinical trials with MTM is re-opening the clinical interest in mithralogs. The viability of new analogs will be enabled by improvements in therapeutic window, a critical issue in many cancer therapeutics, especially those of natural origin. Overall, it is likely we will see new opportunities to this neglected class of compounds, long stigmatized since they address the activity of generally regarded undruggable targets.

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