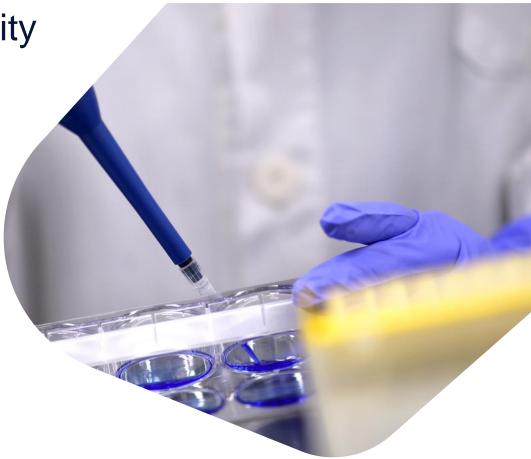
Emerging Modalities and Compound Developability Assessment in Small Molecule Early Development

MCERSI Co-Processed API and Regulatory Requirements



Ahmad Sheikh

July 13, 2022



VPAK-US-00002-E

## **Acknowledgements**

Rajni Miglani Bhardwaj Richard Hong Rodger Henry Moiz Diwan Vivian Suarez David DeGoey Paul Breckemeyer Gabriela Schneider-Rauber Alessandra Mattei Nathan Abraham Kenneth Engstrom Yi Gao Erin Jordan Charles Hutchins Yue Gui Gerry Danzer

Authors are employees of AbbVie and may own AbbVie stock. AbbVie sponsored and funded the study; contributed to the design; participated in the collection, analysis, and interpretation of data, and in writing, reviewing, and approval of the final publication.

## Last two decades

#### Journal of Medicinal Chemistry

Cite This: J. Med. Chem. 2019, 62, 1701-1714

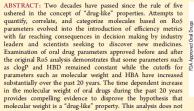
## Two Decades under the Influence of the Rule of Five and the Changing Properties of Approved Oral Drugs

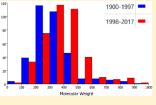
Miniperspective

Michael D. Shultz\*®

Global Discovery Chemistry, Novartis Institutes for Biomedical Research, Inc., 181 Massachusetts Avenue, Cambridge, Massachusetts 02139, United States

#### Supporting Information





Perspective

nubs acs org/im/

validate parameters that have not changed as being "drug-like" but instead calls into question the entire hypothesis that "drug-like" properties exist.

#### J. Med. Chem. 2019, 62, 4, 1701-1714

#### Table 2. Analysis of FDA Approved Oral NCEs from 1998 to 2007<sup>a</sup>

1997 90 <sup>th</sup> percentile         4.7         470.3         4.0         10         139.8         10.0         0.83         3           90 <sup>th</sup> percentile         4.7 (0)         525.5 (+ 55.2)         4.0 (0)         9.6 (-0.4)         142.3 (+2.5)         11 (+1)         0.78 (-0.05)         3.0 (0)           90 <sup>th</sup> percentile         4.7 (0)         525.5 (+ 55.2)         4.0 (0)         9.6 (-0.4)         142.3 (+2.5)         11 (+1)         0.78 (-0.05)         3.0 (0)           p value*         0.3         0.0026         >0.99         0.69         0.97         0.039         0.082         >0.99           Median         2.6 (+0.3)         348.4 (+40.1)         1 (0)         6 (+2)         74.7 (+7.2)         6 (+2)         0.43 (+0.03)         2 (+1)           Mean         2.4 (+0.3)         360.1 (+28.1)         1.8 (-0.1)         6.0 (+0.5)         82.0 (+3.2)         5.9 (+0.9)         0.46 (+0.03)         1.7 (+0.02)           p value <sup>†</sup> 0.35         0.28         0.94         0.55         0.94         0.066         0.56         0.025           p value <sup>†</sup> 0.46         0.014         >0.99         0.044         0.43         0.0085         0.73         0.73           10 <sup>th</sup> percentile         -0.									
percentile         4.7         4/0.3         4.0         10         139.8         10.0         0.83         3           90 <sup>th</sup> percentile         4.7 (0)         525.5 (+ 55.2)         4.0 (0)         9.6 (-0.4)         142.3 (+2.5)         11 (+1)         0.78 (-0.05)         3.0 (0)           p value*         0.3 <b>0.0026</b> >0.99         0.69         0.97 <b>0.039</b> 0.082         >0.99           Median         2.6 (+0.3)         348.4 (+40.1)         1 (0)         6 (+2)         74.7 (+7.2)         6 (+2)         0.43 (+0.03)         2 (+1)           Mean         2.4 (+0.3)         360.1 (+28.1)         1.8 (-0.1)         6.0 (+0.5)         82.0 (+3.2)         5.9 (+0.9)         0.46 (+0.03)         1.7 (+0)           p value <sup>†</sup> 0.35         0.28         0.94         0.55         0.94         0.066         0.56         0.025           p value <sup>‡</sup> 0.46         0.014         >0.99         0.044         0.43         0.0085         0.73         0.73           10 <sup>th</sup> percentile         -0.4 (+0.2)         201.3 (+30.1)         0.0 (0)         2.0 (0)         30.5 (+9.2)         1.0 (0)         0.08 (+0.1)         0(0)		clogP	MW	HBD	HBA	TPSA	RotB	Fsp <sup>3</sup>	#ArRNG
p value*         0.3         0.0026         >0.99         0.69         0.97         0.039         0.082         >0.99           Median         2.6 (+0.3)         348.4 (+40.1)         1 (0)         6 (+2)         74.7 (+7.2)         6 (+2)         0.43 (+0.03)         2 (+1)           Mean         2.4 (+0.3)         360.1 (+28.1)         1.8 (-0.1)         6.0 (+0.5)         82.0 (+3.2)         5.9 (+0.9)         0.46 (+0.03)         1.7 (+0)           p value <sup>†</sup> 0.35         0.28         0.94         0.55         0.94         0.066         0.56         0.025           p value <sup>‡</sup> 0.46         0.014         >0.99         0.044         0.43         0.0085         0.73         0.73           10 <sup>th</sup> percentile         -0.4 (+0.2)         201.3 (+30.1)         0.0 (0)         2.0 (0)         30.5 (+9.2)         1.0 (0)         0.08 (+0.1)         0 (0)		4.7	470.3	4.0	10	139.8	10.0	0.83	3
Median         2.6 (+0.3)         348.4 (+40.1)         1 (0)         6 (+2)         74.7 (+7.2)         6 (+2)         0.43 (+0.03)         2 (+1)           Mean         2.4 (+0.3)         360.1 (+28.1)         1.8 (-0.1)         6.0 (+0.5)         82.0 (+3.2)         5.9 (+0.9)         0.46 (+0.03)         1.7 (+0)           p value <sup>†</sup> 0.35         0.28         0.94         0.55         0.94         0.066         0.56         0.025           p value <sup>‡</sup> 0.46         0.014         >0.99         0.044         0.43         0.0085         0.73         0.73           10 <sup>th</sup> percentile         -0.4 (+0.2)         201.3 (+30.1)         0.0 (0)         2.0 (0)         30.5 (+9.2)         1.0 (0)         0.08 (+0.1)         0 (0)	90 <sup>th</sup> percentile	4.7 (0)	525.5 (+ 55.2)	4.0 (0)	9.6 (-0.4)	142.3 (+2.5)	11 (+1)	0.78 (-0.05)	3.0 (0)
Mean         2.4 (+0.3)         360.1 (+28.1)         1.8 (-0.1)         6.0 (+0.5)         82.0 (+3.2)         5.9 (+0.9)         0.46 (+0.03)         1.7 (+0           p value <sup>†</sup> 0.35         0.28         0.94         0.55         0.94         0.066         0.56         0.025           p value <sup>‡</sup> 0.46         0.014         >0.99         0.044         0.43         0.0085         0.73         0.73           10 <sup>th</sup> percentile         -0.4 (+0.2)         201.3 (+30.1)         0.0 (0)         2.0 (0)         30.5 (+9.2)         1.0 (0)         0.08 (+0.1)         0 (0)	p value*	0.3	0.0026	>0.99	0.69	0.97	0.039	0.082	>0.99
p value <sup>†</sup> 0.35         0.28         0.94         0.55         0.94         0.066         0.56         0.025           p value <sup>‡</sup> 0.46         0.014         >0.99         0.044         0.43         0.0085         0.73         0.73           10 <sup>th</sup> percentile         -0.4 (+0.2)         201.3 (+30.1)         0.0 (0)         2.0 (0)         30.5 (+9.2)         1.0 (0)         0.08 (+0.1)         0 (0)	Median	2.6 (+0.3)	348.4 (+40.1)	1 (0)	6 (+2)	74.7 (+7.2)	6 (+2)	0.43 (+0.03)	2 (+1)
p value <sup>‡</sup> 0.46       0.014       >0.99       0.044       0.43       0.0085       0.73       0.73 $10^{th}$ percentile       -0.4 (+0.2)       201.3 (+30.1)       0.0 (0)       2.0 (0)       30.5 (+9.2)       1.0 (0)       0.08 (+0.1)       0 (0)	Mean	2.4 (+0.3)	360.1 (+28.1)	1.8 (-0.1)	6.0 (+0.5)	82.0 (+3.2)	5.9 (+0.9)	0.46 (+0.03)	1.7 (+0.3)
10 <sup>th</sup> percentile         -0.4 (+0.2)         201.3 (+30.1)         0.0 (0)         2.0 (0)         30.5 (+9.2)         1.0 (0)         0.08 (+0.1)         0 (0)	p value $^{\dagger}$	0.35	0.28	0.94	0.55	0.94	0.066	0.56	0.025
	p value <sup>‡</sup>	0.46	0.014	>0.99	0.044	0.43	0.0085	0.73	0.73
p value <sup>*</sup> 0.6 <0.0001 >0.99 >0.99 0.37 >0.99 <0.0001 >0.99	10 <sup>th</sup> percentile	-0.4 (+0.2)	201.3 (+30.1)	0.0 (0)	2.0 (0)	30.5 (+9.2)	1.0 (0)	0.08 (+0.1)	0 (0)
	p value*	0.6	<0.0001	>0.99	>0.99	0.37	>0.99	<0.0001	>0.99

 ${}^{a}n = 195$ , or 26% of all FDA approved oral NCEs. The 90th percentile values determined for FDA approved oral drugs from 1900 to 1997 are included for reference. The change in values from FDA approved oral drugs from 1900 to 1997 values are in parentheses.  ${}^{*}p$  value of the 10th and 90th percentile cutoffs based on one-way ANOVA analyses.  ${}^{\dagger}p$  values from one-way ANOVA (normal distribution).  ${}^{\pm}p$  values from Kurskal–Wallace (non-normal distribution). Differences that achieve statistical significance (p < 0.05) are in bold. Categories that have a statistically significant increase are shaded in red.

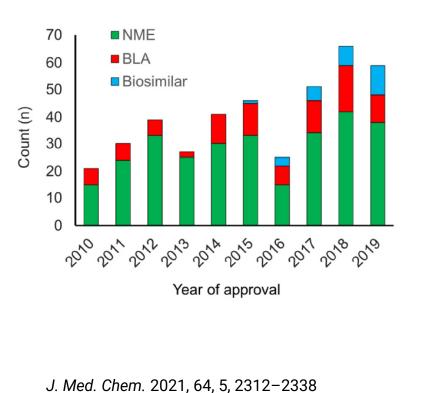
#### Table 3. Analysis of FDA Approved Oral NCEs from 2008 to 2017<sup>a</sup>

	clogP	MW	HBD	HBA	TPSA	RotB	Fsp <sup>3</sup>	#ArRNG
1997 90 <sup>th</sup> percentile	4.7	470.3	4.0	10	139.8	10.0	0.83	3
90 <sup>th</sup> percentile	5.0 (+0.3)	607.3 (+137.0)	4.0 (0)	11.7 (+2.0)	150.7 (+10.9)	13.7 (+3.7)	0.69 (-0.14)	4.0 (+1.0)
p value*	0.27	<0.0001	>0.99	<0.0001	0.20	<0.0001	<0.0001	<0.0001
Median	3.3 (+1.0)	420.0 (+111.7)	2 (+1)	6 (+2)	80.8 (+13.3)	6 (+2)	0.38 (-0.02)	2 (+1)
Mean	2.9 (+0.8)	436.5 (+104.5)	2.1 (+0.2)	6.8 (+1.4)	93.6 (+14.8)	7.0 (+2.0)	0.40 (-0.03)	2.2 (+0.8)
p value $^{\dagger}$	<0.0001	<0.0001	0.57	0.0008	0.037	<0.0001	0.65	<0.0001
p value <sup>‡</sup>	<0.0001	<0.0001	0.35	<0.0001	0.005	<0.0001	0.99	>0.99
10 <sup>th</sup> percentile	0.3 (+0.9)	235.5 (+64.3)	0.0 (0)	3.0 (+1)	39.7 (+14.8)	3 (+2)	0.16 (+0.07)	0 (0)
p value"	<0.0001	<0.0001	>0.99	0.024	0.0049	<0.0001	0.0005	>0.99

"n = 214, or 29% of all FDA approved oral NCEs. The 90th percentile values determined for FDA approved oral drugs from 1900 to 1997 are included for reference. The change in values from FDA approved oral drugs from 1900 to 1997 values are in parentheses. \*p value of the 10th and 90th percentile cutoffs based on one-way ANOVA analyses. †p values from ne-way ANOVA (normal distribution). \*p values from Kurskal–Wallace (non-normal distribution). Differences that achieve statistical significance (p < 0.05) are in bold. Categories that have a statistically significant decrease are shaded in red, and those that have a statistically significant decrease are shaded in green.

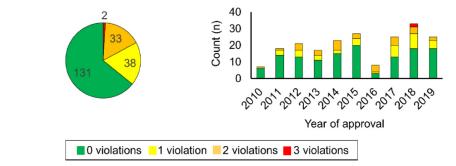
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## Last decade

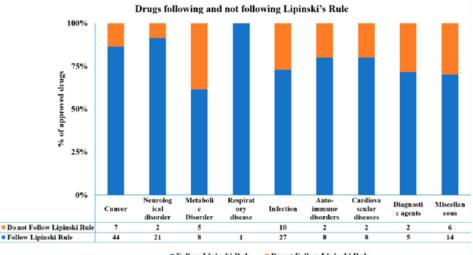


J. Med. Chem. 2021, 64, 5, 2339-2381

a Ro5 violations 2010-2019 (oral drugs) b Ro5 violations by year 2010-2019 (oral drugs)



(a) Total analysis of Ro5 violations for 204 approved oral drugs and (b) Ro5 violations per year on 204 approved oral drugs.



Follow Lipinski Rule Donot Follow Lipinski Rule

Bar graph represents percent of approved FDA drugs from the year 2015 until June 2020, following and not following Lipinski's Rule.

# PROTAC's way beyond rule of 5

PROTAC	Structure	Name	Target (POI)	E3 Ligase	DC <sub>50</sub> /D <sub>max</sub>	Cellular/m vivo	Ref
1	Šuč	Compound 14	AR	MDM2	10 µM/-	In vitro	18
2	manuther	A1874	BRD4	MDM2	32 nM/98% at 100 nM	In vitro	19
	Farmer of from	A1074	Bellys	810812	32 nm 98% at 100 nm	In 9270	19
	Jon Silon Mark	SNIPER(BRD4)-1	BRD4	IAP	> 3 nM & < 10 nM/70% at 10 nM	In vitro probe	20
i -	and a second	SNIPER(ABL)-39	ABL	IAP	> 3 nM & < 10 nM/ > 90% at 100 nM	In vitro probe	21
	Linnoparo	SNIPER(ER)-87	ERα	IAP	> 1nM & < 3 nM/70% at 10 nM	In vivo efficacy (IP injection)	22
		SNIPER(ER)-110	ERα	IAP	< 3 nM/80% at 100 nM	In vivo probe	23
	Jatin marting	MZ1	BRD4	VHL	< 100 nM (BRD4)/ > 96% at 50 nM	In vitro cellular probe	26
	atterments a	L∜ 12b	BRD4	VHL	0.083 µM/	In vitro	27
	Ziannet gras	ARV-771	BRD4	VHL	< 5 nM for BRD2/3/4/ > 99%	In vivo (SC) efficacy	28
0	Jähnn tag og	ATI	BET	VHL	> 10  nM  & < 100  nM for BRD4 short/ $> 90\%$	In vitro prob	29
1	of of the second	MZP54	BET	VHL	10 nM- < 100 nM/87% at 50 nM	In vitro cellular prob	30
2	r.r. dåro	PROTAC_ERRα (1)	ERRa	VHL	100 nM/86% at 1 μM	In vivo probe (IP injection)	31

Will these be orally bioavailable Would we crystallize them What would the formulations be

Table 2 In slitco metrics for selected PROTACs.

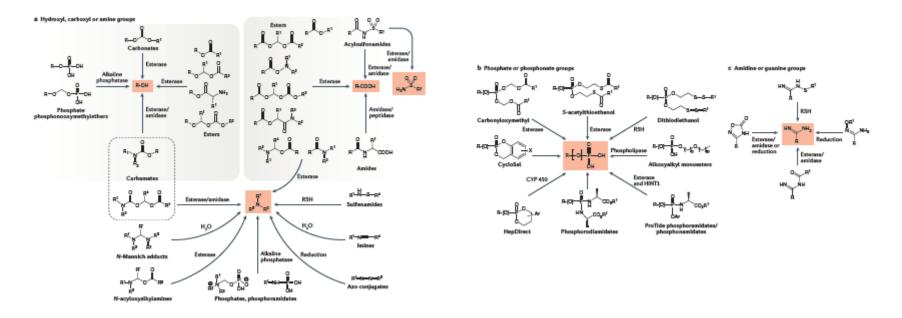
Compound	E3 Ligase	мw	cLogP	HBD	НВА	PSA	nRotB	N <sub>rule-of-5</sub>	Ar Rings	cLogD	AB- MPS
1	MDM2	1210	11	4	22	268	31	3	5	7.3	40.3
2	MDM2	1174	9.1	4	16	200	27	3	6	7.9	37.9
Average	MDM2	1192	10.1	4.0	19	234	29	3.0	5.5	7.6	39.1
3	IAP	1057	6.1	3	17	197	27	3	5	4.7	33.7
4	IAP	1115	5.7	4	20	228	29	3	5	5.9	36.9
5	IAP	1044	8.9	3	15	182	31	3	6	6.5	40.5
6	IAP	1122	11.4	4	16	196	33	3	5	7.5	42.5
Average	IAP	1085	8.0	3.5	17	201	30	3.0	5.3	6.2	38.4
7	VHL	1003	4.9	4	17	210	25	2	5	3.5	30.5
8	VHL	1040	4.2	4	19	229	24	2	6	3.4	30.4
9	VHL	987	5.9	4	16	202	23	3	5	3.2	28.2
10	VHL	973	6.1	4	14	184	22	3	5	4.4	28.4
11	VHL	1037	6.3	5	16	211	27	3	5	4.6	33.6
12	VHL	949	6.9	3	15	202	21	3	4	4.5	26.5

Bioorganic & Medicinal Chemistry Letters 29 (2019) 1555–1564

(continued on next page)



## Prodrugs- chemically labile by design

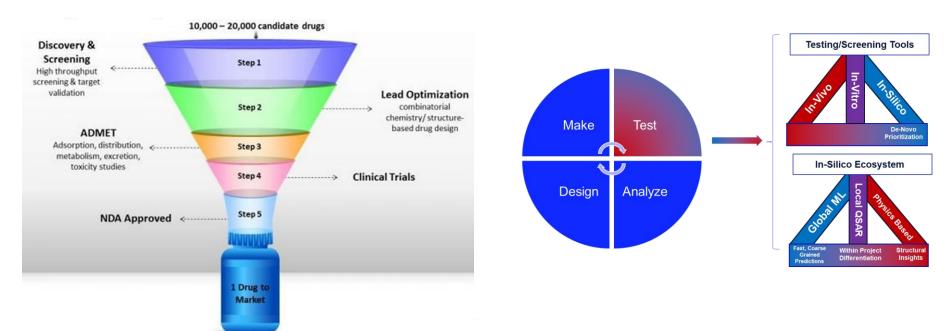


• Over 30 approved in the last decade ('08-17), representing ~ 12% of all approved small molecules

- Limited stability across physiologically relevant pH range, limited understanding of bio-conversion and metabolism
- Complex synthesis, complex solid state, analytical (CMC and bio-analytical)
- Regulatory challenges in setting specs for impurities such as "parent" and other pro-drug type impurities

Nature Reviews Drug Discovery, (2018) 559-587

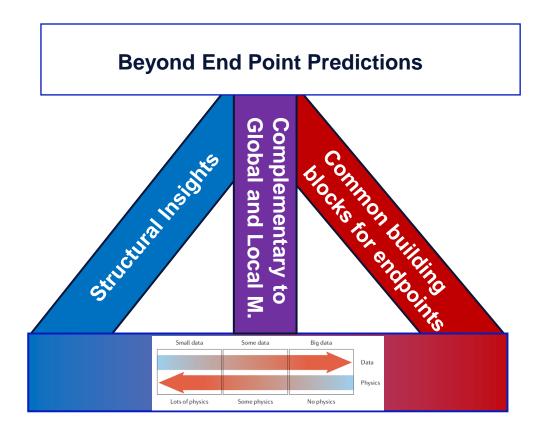
## Positioning of Developability earlier in the LO Funnel



Absorption	Distribution	Metabolism	Excretion	Toxicity	PhysChem
Caco-2 permeability	Human serum albumin binding	Microsomal stability	CLint	Ames mutagenicity	Aq. solubility
Caco-2 efflux ratio	Plasma-protein binding	Hepatocyte stability	Terminal half-life	CYP inhibition	LogD
PAMPA permeability	Fraction unbound (fu)	Site of metabolism		Phaspholipidosis	Membrane affinity
Blood-brain barrier penetration	Volume of distribution (vdss)			hERG inhibition	рКа
	Brain/plasma ratio (Kp)			Drug-induced liver injury (DILI)	

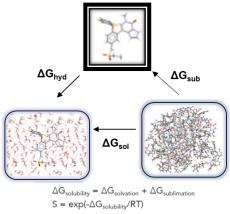
*Drug Disc Today*, Volume 27, Issue 4, 2022, 967-984

### **Physics Based Models**



Nat Rev Phys 3, 422-440 (2021)

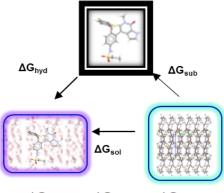
## Solubility Prediction: Trending and Quantitatively differentiating Structurally Related Molecules



Utilizing a thermodynamic cycle, solvation & sublimation energies are calculated

FEP R<sup>2</sup> = 0.974

solubility (uM) vs. Tier 2 solubility (uM





- · Ability to qualitatively predict solubility within a series
- Help remove low soluble compounds with ~30 % false negative

- Crystal structure prediction (CSP) to identify energetically favorable 3-D crystal packing using 2-D molecular structure
- Global minimum from CSP as input for thermodynamic cycle Quick version of CSP to bring efficiency for LO stage

## Thermodynamic Solubility Prediction before Synthesis and Crystallization

Supporting Information

Article

-2.0

-3.0

-6.0

-8.0

-9.0

-10.0

dicted Log S (mol/L)

Pre

-4.0 100 µM

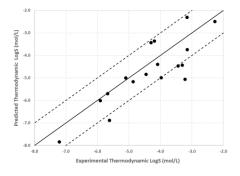
-5.0 10 μM

♦ Standard FEP+ Workflow

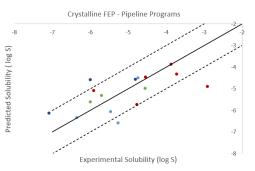
1

Crystalline FEP+ Workflow

2



#### Structurally distinct AbbVie Dataset (17)



#### Structurally related AbbVie Dataset (4 series)



J. Chem. Inf. Model. 2021, 61, 3, 1412-1426

Novel Physics-Based Ensemble Modeling Approach That Utilizes 3D

Richard S. Hong, Alessandra Mattei, Ahmad Y. Sheikh,\* Rajni Miglani Bhardwaj, Michael A. Bellucci, Keith F. McDaniel, M. Olivia Pierce, Guangxu Sun, Sizhu Li, Lingle Wang, Sayan Mondal, Jianguo Ji,

ABSTRACT: Drug design with patient centricity for ease of administration and pill burden requires robust understanding of the impact of chemical modifications on relevant physicochemical properties early in lead optimization. To this end, we have developed

a physic-based ensemble approach to predict aqueous thermodynamic crystalline solubility, with a 2D chemical structure as the injury. Predictions for the bromodomain and extraterimalic domain (BET) holdbles raires show very dowe match (OS by quird) with measured thermodynamic solubility in density domentated by up to a 4 log und rögen in okubility compared to kinetic

(anorphous) solubility in some cases and implications thereof, for instance on human dose. We have also demonstrated that incorporating predicted crystal structures in thermodynamic solubility prediction is necessary to differentiate (up to 4 log unit) between solubility or molecules within the series. Finally, our physics-based ensemble approach provide valuable structural insights

into the origins of 3-D conformational landscapes, crystal polymorphism, and anisotropy that can be leveraged for both drug design

Read Online

Article Recommendations

Molecular Conformation and Packing to Access Aqueous Thermodynamic Solubility: A Case Study of Orally Available Bromodomain and Extraterminal Domain Inhibitor Lead

#### Incorporation of Physical Properties considerations in the design cycle

-5.0

 $\diamond$ 

3

 $\diamond$ 

4

Molecule

5

-4.0

 $\diamond$ 

7

 $\diamond$ 

6

mic LogS (mol/L



pubs.acs.org/jcin

ACCESS

and development.

JOURNAL OF

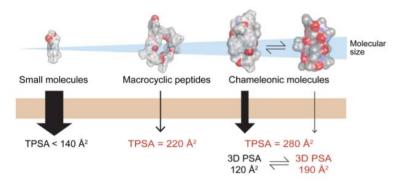
**Optimization Series** 

and Thomas B. Borchardt

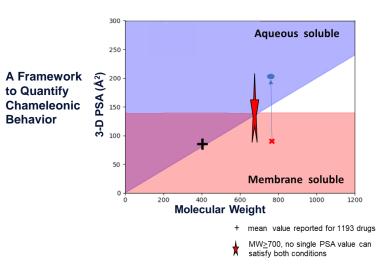
Cite This: J. Chem. Inf. Model. 2021, 61, 1412-1426

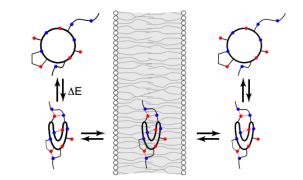
Metrics & More

### **bR05** Chameleonicity: Towards Improved Passive Permeability



Size boundaries for membrane-permeable molecules





Conformational changes due to intramolecular hydrogen bonding (IMHB) + alkyl/ aryl shielding of polar groups facilitate permeation

Generation of conformations in polar (aqueous) and non-polar (membrane) media and calculation of their BW SA 3D-PSA Provide information on IMHB, shielding of polarity in non-polar media which help improving the permeability



11

J Med Chem, 2017, 60, 1662–1664 Drug Disc Today, 21, 2016, 713-717

## Hepatitis C Infection- where were we a decade ago



3 to 4 million new cases diagnosed annually



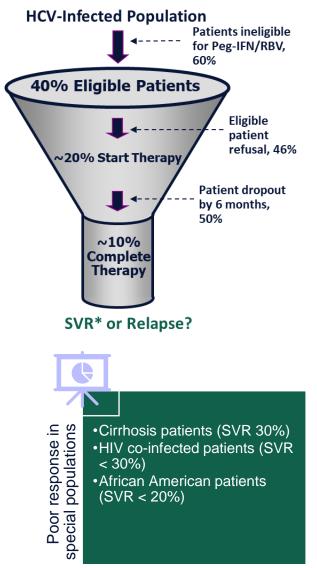
abbvie

PEG-IFN: fatigue, flu-like symptoms, headache, dizziness, anorexia, depression, abdominal pain, irritability, insomnia, injectionsite reaction, partial hair loss
Ribavirin: hemolytic anemia, insomnia, teratogenic effects



Sustained viral response (SVR)

Genotype 1 (48 wks, ≤50% SVR)
Genotype 2 (24 wks, 80% SVR)



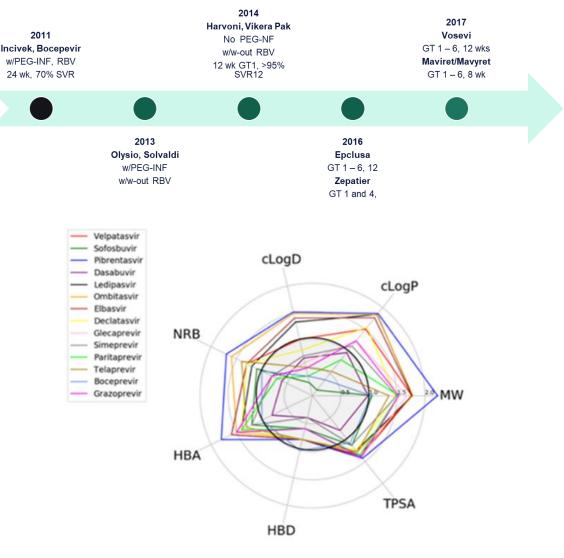
## and Since..

7 approved all-oral interferon free directacting antiviral (DAA) combination regimens.

Target nonstructural proteins responsible for replication and infection of HCV

Reach SVR12 > 95% across all prevalent genotypes

SVR12 also reduces adverse liver outcomes, such as cirrhosis, hepatic decompensation, and mortality



## Paritaprevir- the molecule

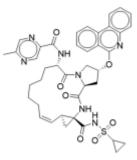
First generation NS3/4A protease inhibitordiscovered by AbbVie and Enanta Pharmaceuticals

Approved in 2014 as part of 1<sup>st</sup> gen DAA treatment regimen

Among 25 highest molecular weight approved oral drugs

Large triaryl phenanthridine group required for high potency in flat and featureless active binding site

abbvie



Paritaprevir



#### Implications of the Conformationally Flexible, Macrocyclic Structure of the First-Generation, Direct-Acting Anti-Viral Paritaprevir on Its Solid Form Complexity and Chameleonic Behavior

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Article

#### Distinct Hybrid Hydrates of Paritaprevir: Combined Experimental and Computational Assessment of their Hydration–Dehydration Behavior and Implications for Regulatory Controls

Published as part of a Crystal Growth and Design virtual special issue in Celebration of the Career of Roger Davey

Richard S. Hong, Rajni Miglani Bhardwaj, Rodger Henry, Alessandra Mattei, Moiz Diwan, Albert Thomas, Gerald D. Danzer, and Ahmad Y. Sheikh\*



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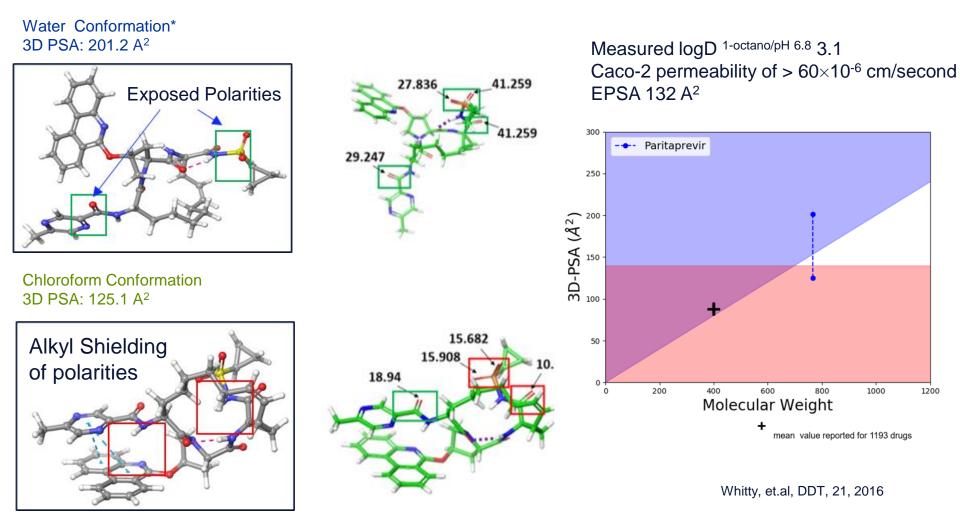
Published as part of a Crystal Growth and Design joint virtual special issue on Crystallizing the Role of Solid-State Form in Drug Delivery

Rajni Miglani Bhardwaj, Raimundo Ho, Yue Gui, Paul Brackemeyer, Gabriela Schneider-Rauber, Fredrik L. Nordstrom, and Ahmad Y. Sheikh\*

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## **Computational Assessment of Chameleonicity**



\*open conformations ensemble account for 52% compared to 10% in gas phase

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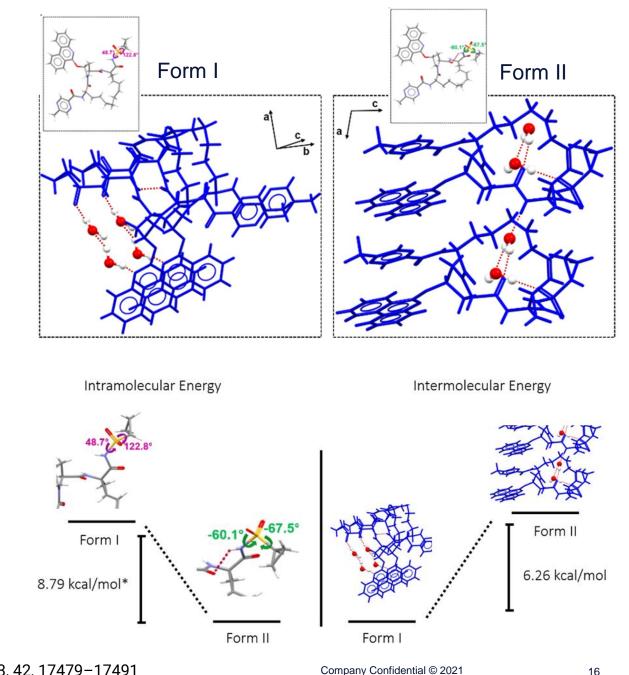
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## Form I and II-**Conformations and** interactions

Form I- No IMHB. Two intermolecular Hydrogen bonded chain motifs, leading to H-bonded planes parallel to *bc* plane. Weak  $\pi$ - $\pi$ interactions along *c* axis between Interdigitated phenanthridine rings

Form II- IMHB between the carbonyl oxygen and the sulfonamide N-H. Stacking related layers parallel to the *bc* plane related, stabilized by weak O···H-C intermolecular interactions\*

\* May result in offset between layers, higher void volume and lower long-range periodicity

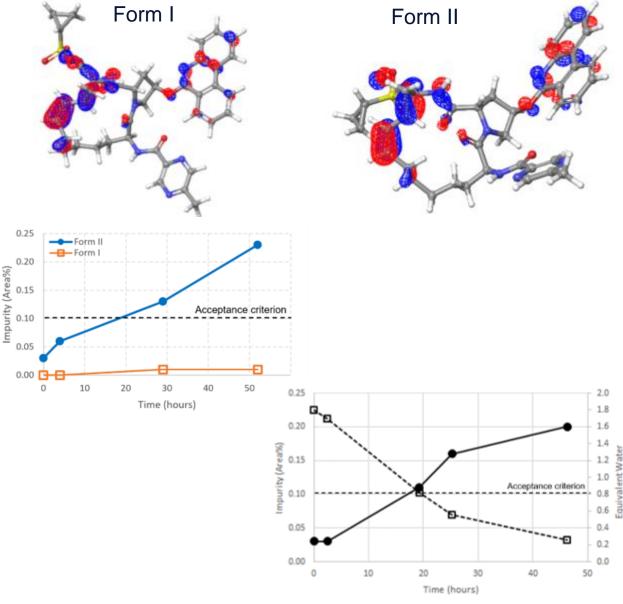


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## Form I and II-Differing solid state chemical reactivity

In Form I conformation, HOMO distribution spreads over double bond of macrocycle ring and not delocalized on the sulfonamide group. Distance between the centers of mass of the cyclopropyl-sulfonamide moiety and the olefin group is 1.3 Å larger than for Form II

In Form II conformation, HOMO distribution mainly delocalized on double bond of macrocycle ring and sulfonamide group. Electron density map indicates cyclopropyl-sulfonamide moiety and olefin groups can react to form the observed oxidative impurity. Removal of water adversely affects the reaction



## Dehydration

Form I exhibits strong host-host intermolecular interactions due to its lack of IMHB while Form II exhibits weak host-host interactions but strong host-water interactions

Due to weaker host-host interactions, Form II more amenable for hot melt extrusion processing

Form II exhibits hybrid stoichiometric and nonstoichiometric behavior with an enthalpically favored "stoichiometric regime and entropically favored nonstoichiometric regime consisting of ensembles of water bonding networks

#### Form I

3 000

2.500

2.000

1.500

1.000

0.500

0.000

0.0

behavior -

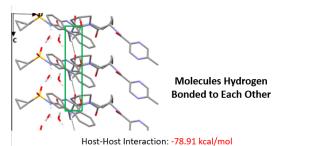
tightly bound water Di-Hydrate

Stoichiometric

20.0

40.0

Mol Ratio (Water)



Host-Water Interaction: -31.98 kcal/mol

---Sorption

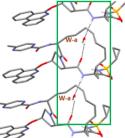
- Desorption

80 D

60.0

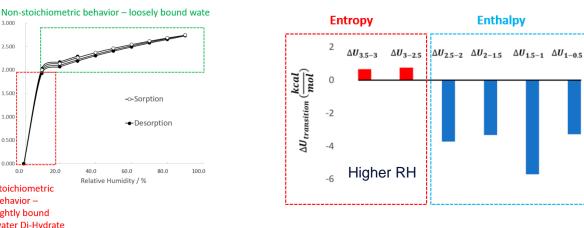
Relative Humidity / %

## Form II



Molecule "Bridged" Together by Water H-Bonding

Host-Host Interaction: -63.83 kcal/mol Host-Water Interaction: -39.49 kcal/mol



Lower RH

## Concluding Summary



Reducing or Managing complexity



Screen out developability challenges to the extent possible



Some targets can only be engaged with complex matter



Early identification of the liabilities



Broader toolkit



