

Molecular modelling and evaluation of antihyperthyroid drug compound

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Article History:

Received on: 08 Sep 2019
Revised on: 10 Oct 2019
Accepted on: 22 Nov 2019
Published on: 27 Dec 2019

Volume: 9 Issue: 4

Keywords:

Thyroid,
pituitary gland,
docking,
endocrines,
Drug

ABSTRACT

Drug targeting will play an essential function in drug discovery in the coming years, as the amount of structural records on protein targets keeps to rise. However, the conventional technique of drug discovery, primarily based upon random screening and systematic amendment of leads through medicinal chemistry strategies, will probably no longer to be deserted absolutely because it has doubtlessly vital advantages over shape-based strategies—specifically leads diagnosed in this way are unlikely to show a near resemblance to the herbal Ligand or substrate. They might also have gained in terms of patent novelty and selectivity. Such leads could then function the basis of structure-based totally, rational amendment programs, wherein their interactions with target receptors are described and improved molecules are designed. In the present study, an attempt is made to find suitable and better analogues of drugs used in the treatment of hyperthyroidism.

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eISSN: 2231-2935

DOI: <https://doi.org/10.26452/ijrsl.v9i4.1350>



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INTRODUCTION

The thyroid is one in all the most important endocrine gland in the frame. This gland is discovered inside the neck mediocre to the thyroid cartilage (additionally called Adam's apple in guys) and at about the equal because of the cricoid cartilage [1]. The thyroid control how fast the body burns electricity, make protein, and the way touchy the frame should be to additional hormones. [2].

Hyperthyroidism is the period for overactive tissue in the thyroid gland, subsequent in overproduction and consequently an additional of socializing unfas-

tened thyroid hormones: or each [3–7]. Thyroid hormone is essential at a cell degree, moving approximately every kind of tissue inside the body. Thyroid hormone capabilities as an incentive to metabolism and are essential to the common purpose of the cellular. In extra, it both overstimulates metabolism and exacerbates the impact of the sympathetic frightened gadget, inflicting "rushing up" of diverse body structures and symptoms corresponding to an overdose of epinephrine (adrenaline). These encompass fast coronary heartbeat and symptoms of palpitations, anxious device tremor and anxiety signs and symptoms, digestive gadget hypermotility (diarrhoea), and weight loss [8–10].

Common symptoms and signs of hyperthyroidism

- Breathlessness
- Increased bowel movements
- menstrual periods issues
- Nervousness
- Headache
- Fast heartbeat
- Trembling hands

- Insomnia
- Weight loss
- Muscle weakness
- Palpitations
- Heat intolerance
- skinissues [11]

MATERIALS AND METHODS

Data acquisition

PDB Structure

Protein co-ordinate file of the Thyroxine-binding globulin (TBG) 2CEO was collected from the protein database (<http://www.rcsb.org>).

Preparation of Ligands

The following Ligand for the hyperthyroidism was collected from the Pubchem composite database (www.ncbi.nlm.nih.gov/pccompound).

1. Levothyroxine
2. Liothyronine / Cytomel / T3 Drugs
3. Liotrix / Thyrolar
4. Carbimazole
5. methimazole
6. propranolol
7. propylthiouracil

Similarly, similar compounds for the above drugs were collected. And these ligands were optimized.

Identification of an active site

The active site for the protein thyroxine-binding globulin was identified using PDB sum and Castp server. The pocket information and the ligplot were downloaded. Addition to the above server, Accelrys discovery studio was used to identify the pocket information [12].

RESULTS AND DISCUSSION

Docking studies: Argus lab

Thyroxine (T4) is blended by methods for the follicular cell from permitted tyrosine and at the tyrosine buildups of the protein alluded to as thyroglobulin (TG). Thyroid hormone capabilities as an incentive to metabolism and are essential to the common purpose of the cellular. In extra, it both overstimulates metabolism and exacerbates the impact of the sympathetic frightened gadget, inflicting "rushing up" of diverse body structures and symptoms corresponding to an overdose of epinephrine (adrenaline). Upon incitement

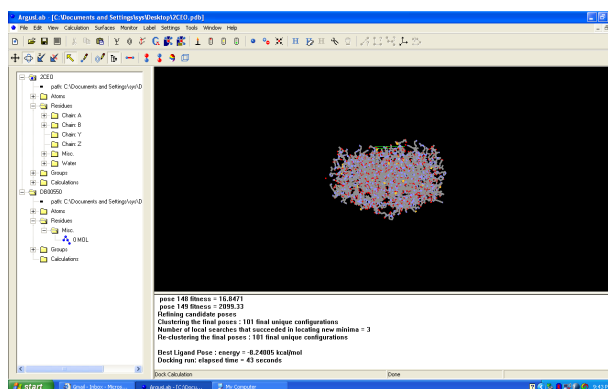


Figure 1: Docking of drug compound

by methods for the thyroid-invigorating hormone (TSH), the follicular cells reabsorb TGTG and proteolytically sever the iodinated tyrosines from TGTG, framing T4 and T3 (in T3, one iodine is missing contrasted with T4), and delivering them into the blood. Deiodinase catalysts convert T4 to T3 [13, 14]. We have taken Propylthiouracil for further studies to ligand optimization, Modified its scaffold with various substituents (Electron donor, acceptor, and electron-withdrawing groups etc.), Docking studies carried out in Molegro virtual docker and GOLD. The compound we have got the least energy and best-fit score in Pharmacophore studies was 6-[(1S)-1-fluoroethyl]-2-sulfanylidene-1H-pyrimidin-4-one(-88.6728). Finally, we have predicted Pharmacokinetics Properties, in Accelrys Discovery Studio 2.1 [15, 16]. Figure 1.

CONCLUSION

After studying literature Survey THYROXIN BINDING GLOBULIN RECEPTOR has been taken as a Drug target, its Structure was Deposited in PDB databank. Molecular Docking studies performed with markedly existed drugs like Propylthiouracil, carbimazole, methimazole, propranolol by using Argus lab. Propylthiouracil has got the least energy and high affinity to bind the active site of the receptor. We have taken Propylthiouracil for further studies to ligand optimization, Modified its scaffold with various substituents (Electron donor, acceptor, and electron-withdrawing groups etc.), Docking studies carried out in Molegro virtual docker and GOLD. The compound we have got the least energy and best-fit score in Pharmacophore studies was 6-[(1S)-1-fluoroethyl]-2-sulfanylidene-1H-pyrimidin-4-one(-88.6728). Finally, we have predicted Pharmacokinetics Properties, in Accelrys Discovery Studio 2.1.

ACKNOWLEDGEMENT

The authors are thankful to all who have extended their constant support for the completion of the work.

CONFLICT OF INTEREST

The authors declare that they have no conflict of interest for this study.

FUNDING SUPPORT

The authors declare that they have no funding support for this study.

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Cite this article: A Srikanth, T Shivakumar, R Shankar Sheshu, S Selva kumar. **Molecular modelling and evaluation of anti-hyperthyroid drug compound.** Int. J Rev. Life Sci. 2019; 9(4): 30-32.

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