

# Chapter 3

## Computer-Aided Drug Design Approaches to Study Key Therapeutic Targets in Alzheimer's Disease

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### Abstract

Alzheimer's Disease (AD) is one of the most common and complex age-related neurodegenerative disorders in elderly people. Currently there is no cure for AD, and available therapeutic alternatives only improve both cognitive and behavioral functions. For that reason, the search for anti-AD therapeutic agents with neuroprotective properties is highly demanding. Several research studies have implicated the involvement of G-Protein-Coupled Receptors (GPCRs) in diverse neurotransmitter systems that are dysregulated in AD, mainly in modulation of amyloidogenic processing of Amyloid Precursor Protein (APP) and of microtubule-associated protein *tau* phosphorylation and in learning and memory activities in in vivo AD models subjected to numerous behavioral procedures. In this chapter, a special focus will be given to the structure- and ligand-based in silico approaches and their applicability on the development of small molecules that target various GPCRs potentially involved in AD such as 5-hydroxytryptamine receptors, adenosine receptors, adrenergic receptors, chemokine receptors, histamine receptors, metabotropic glutamate receptors, muscarinic acetylcholine receptors, and opioid receptors.

**Key words** Alzheimer's disease, GPCRs, G-proteins, Drug design, Docking, Pharmacophore, QSAR

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### 1 Introduction

Alzheimer's disease (AD) is a neurodegenerative disorder clinically characterized by a progressive and irreversible loss of memory and impairment of other cognitive functions, which ultimately results in a complete degradation of intellectual and mental activities. Although age represents a critical risk factor, a combination of genetic, lifestyle, and environmental factors may contribute for the development of AD. Being the most common cause of dementia in elderly people, continuous research efforts have been devoted to unravel the etiology of AD with the objective of developing effective pharmacological treatments.

Although the underlying mechanism of AD is not yet well understood, several neuropathological hallmarks are thought to be

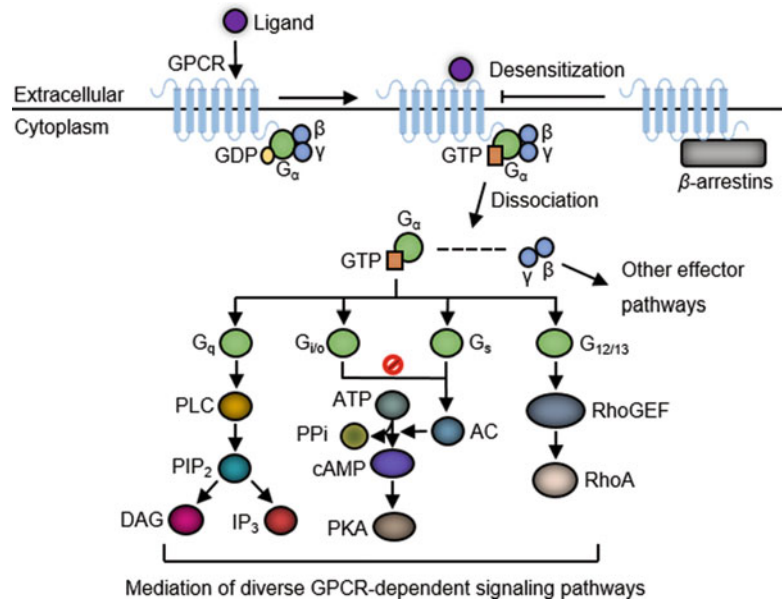
involved in the neurodegeneration in AD, including (i) deficiency on cholinergic transmission in the Central Nervous System (CNS) due to an extensive loss of cholinergic neurons which results in a deficit of AcetylCholine (ACh) in specific regions of the brain (cholinergic hypothesis) (reviewed in [1, 2]); (ii) abnormal clustering of neurotoxic  $\beta$ -amyloid ( $A\beta$ ) fragments and formation of senile plaques that occur as a consequence of an imbalance between the amyloidogenic (mediated by  $\beta$ - and  $\gamma$ -secretases) and non-amyloidogenic (mediated by  $\alpha$ - and  $\gamma$ -secretases) processing pathways of Amyloid Precursor Protein (APP) and an inefficient clearance of  $A\beta$  oligomers (amyloid hypothesis) (reviewed in [3, 4]); and (iii) hyperphosphorylation of Serine (Ser), Threonine (Thr), and Tyrosine (Tyr) sites in microtubule-associated *tau* proteins that leads to the destabilization of neuronal microtubules, the formation of *tau* aggregates and NeuroFibrillary Tangles (NFT), and the collapse of neuronal signaling (*tau* hypothesis) (reviewed in [5, 6]). With the increasing number of people suffering from age-related neurodegenerative disorders, particularly AD, effective therapeutic alternatives are highly demanding. Currently, pharmacological research has been focused on the discovery of drug candidates with neuroprotective properties, which target disease-modifying effects, contributing to the blockade of neuronal apoptosis and subsequent disease progression. These strategies are based on targeting key proteins involved in amyloidogenic processing of APP (activation of  $\alpha$ -secretase, inhibition of  $\beta$ - and  $\gamma$ -secretases, prevention of  $A\beta$  aggregation, and promotion of  $A\beta$  clearance) and in *tau* pathology (inhibition of *tau*-phosphorylating kinases, prevention of *tau* aggregation, and promotion of *tau* aggregate disassembly). However, current clinically available AD therapies are essentially symptomatic and target mainly AcetylCholinEsterase (AChE) (donepezil, rivastigmine, and galantamine) and *N*-methyl-D-aspartate receptor (memantine), which lead to the reversion of dysfunctions on cholinergic and glutamatergic neurotransmission, respectively. Moreover, neurodegeneration is not restricted to a particular neurotransmitter system. Histaminergic, adenosinergic, adrenergic, and serotonergic, among other neurotransmitter systems, are also dysregulated in AD. Interestingly, numerous studies have implicated the role of G-Protein-Coupled Receptors (GPCRs) in the pathogenesis of AD, particularly in the modulation of the distinct therapeutic targets involved in amyloidogenic processing of APP and in microtubule-associated *tau* protein aggregation, and the influence of GPCR modulators in AD animal models subjected to various learning and memory paradigms. Potential GPCR-derived therapeutic targets for AD include 5-HydroxyTryptamine 2A, 2C, 4, and 6 Receptors (5-HT<sub>2A</sub>R [7, 8], 5-HT<sub>2C</sub>R [7, 9], 5-HT<sub>4</sub>R [10, 11, 12, 13], and 5-HT<sub>6</sub>R [14, 15, 16, 17]); Adenosine A<sub>1</sub> and A<sub>2A</sub> Receptors (A<sub>1</sub>AR [18, 19, 20] and A<sub>2A</sub>AR [18, 21, 22, 23, 24]);  $\alpha_{2A}$ - and  $\beta_2$ -Adrenergic Receptors ( $\alpha_{2A}$ -AR [25] and  $\beta_2$ -AR [26, 27, 28]); CC motif chemokine

receptor 2 (CCR<sub>2</sub> [29, 30]); CXC motif chemokine receptor 2 (CXCR<sub>2</sub> [31, 32, 33]); corticotropin-releasing factor receptor 1 (CRFR<sub>1</sub> [34, 35, 36, 37]);  $\delta$ -opioid receptors (DOR [38]); histamine H<sub>3</sub> receptor (H<sub>3</sub>R [39, 40, 41]); metabotropic glutamate receptor types 1, 2, and 5 (mGluR<sub>1</sub> [42, 43, 44, 45], mGluR<sub>2</sub> [42, 46, 47], and mGluR<sub>5</sub> [42, 48, 49]); and M<sub>1</sub>, M<sub>2</sub>, and M<sub>3</sub> muscarinic acetylcholine receptors (M<sub>1</sub> mAChR [50, 51, 52, 53, 54], M<sub>2</sub> mAChR [54, 55], and M<sub>3</sub> mAChR [53, 54]), among others. In this chapter, we will provide an overview of the structure-based and ligand-based computational approaches widely employed in *in silico* medicinal chemistry to target the mentioned GPCRs potentially implicated in AD.

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## 2 GPCRs: A Case Study of Potential Targets for AD

Being one of the most heavily investigated drug targets in the pharmaceutical industry, GPCR-targeting drugs represent about ~30–40% of the current market for human therapeutics and have been subjected to a considerable number of computational studies [56, 57]. They comprise a large family of membrane-embedded proteins that mediate important physiological functions through interaction with various endogenous ligands, including ions, proteins, peptides, amines, hormones, chemokines, and neurotransmitters [58, 59]. Structurally, a single polypeptide chain with a variable length that crosses the phospholipidic bilayer seven times adopting the typical structure of seven transmembrane (TM)  $\alpha$ -helices connected to extracellular (ECL) and intracellular (ICL) loops characterizes the receptors belonging to this family [60]. Based on sequence homology and phylogenetic analysis, human GPCRs can be classified into five main families of receptors: *glutamate* (Class C, 22 members), *rhodopsin* (Class A, 672 members), *adhesion* (33 members), *frizzled/Taste2* (Class F, 36 members), and *secretin* (Class B, 15 members), which are usually shortened to the acronym *GRAFS* [60]. The complexity of GPCR-induced signaling is determined by their association with specific heterotrimeric guanine nucleotide-binding proteins (G-proteins) within the plasma membrane. Heterotrimeric G-proteins are composed of a guanine-binding  $\alpha$ -subunit (G <sub>$\alpha$</sub> ) and a dimer consisting of the  $\beta$ - and  $\gamma$ -subunits (G <sub>$\beta\gamma$</sub> ). In their inactive state, G <sub>$\alpha$</sub>  is bound to guanosine diphosphate (GDP) and associated with G <sub>$\beta\gamma$</sub> . In the extracellular site, the binding of an agonist stabilizes the active conformation of the receptor, which couples to heterotrimeric G-proteins, leading to GDP release and guanosine triphosphate (GTP) binding to the G <sub>$\alpha$</sub>  subunit. Subsequently, the GTP binding induces a conformational switch on the G <sub>$\alpha$</sub>  subunit, which promotes the release of G-proteins



**Fig. 1** General diagram of GPCR signaling mediated by activation of G $\alpha$  subunit of heterotrimeric G-proteins. *AC* Adenylyl Cyclase, *ATP* Adenosine TriPhosphate, *cAMP* cyclic Adenosine MonoPhosphate, *DAG* DiAcylGlycerol, *GDP* Guanosine DiPhosphate, *GTP* Guanosine TriPhosphate, *IP $_3$*  Inositol 1,4,5-trisPhosphate, *PIP $_2$*  Phosphatidylinositol 4,5-bisPhosphate, *PKA* Protein Kinase A, *PLC* PhosphoLipase C, *PPI* inorganic PyroPhosphate, *RhoA* Ras homolog gene family, member A, *RhoGEF* Rho Guanine nucleotide Exchange Factor

from GPCR and the dissociation of heterotrimeric G-proteins into G $\alpha$  and G $\beta\gamma$  subunits [61, 62]. The G $\alpha$  (G $_{as}$ , G $_{ai/o}$ , G $_{\alpha q}$ , G $_{\alpha 12/13}$ ) and G $\beta\gamma$  subunits amplify and propagate their transduction signals by modulating the activity of distinct downstream cellular effectors, including adenylyl and guanylyl cyclases, phospholipases, phosphodiesterases, and phosphoinositide 3-kinases, that in turn induces an increasing or decreasing production of second messengers, such as Ca $^{2+}$ , diAcylglycerol (DAG), inositol 1,4,5-trisphosphate (IP $_3$ ), cyclic adenosine monophosphate (cAMP), and cyclic guanosine monophosphate (cGMP) that triggers a wide range of cellular responses [63, 64] (Fig. 1).

Nevertheless, not all GPCR-dependent signaling pathways are mediated via heterotrimeric G-proteins. The persistent stimulation of a specific agonist may contribute to a decreasing responsiveness of GPCRs, eliciting a process of receptor desensitization, which terminates or attenuates the receptor signaling. Two families of regulatory proteins participate in the mechanism of GPCR desensitization, including second messenger-dependent protein kinases and G-protein-coupled receptor kinases (GRKs). Second messenger-dependent protein kinases, protein kinases A (PKA) and C (PKC), induce a conformational change in the receptor

through GPCR phosphorylation, directly uncoupling GPCR to heterotrimeric G-proteins. This mechanism of receptor regulation can be mediated in the absence of GPCR occupancy by an agonist through a process of heterologous desensitization. In contrast, GPCR occupancy is required for the recruitment of GRKs on receptor desensitization (homologous desensitization). The GRKs preferentially induce the phosphorylation in an agonist-bound conformation, leading to a significant attenuation of receptor signaling [65]. GRK-dependent phosphorylation enables GPCRs to interact with high affinity to a class of multifunctional scaffold proteins called  $\beta$ -arrestins, which sterically blocks further interactions between the G-protein and the activated receptor, preventing GPCR signaling [66]. Additionally, receptor-bound  $\beta$ -arrestins can also promote different signaling pathways or act as adapter proteins, promoting receptor sequestration through interaction with components of the cellular machinery required for clathrin-mediated endocytosis [67]. This mechanism is critical not only for receptor signaling desensitization but also for receptor resensitization for a next round of GPCR activation. Other mechanisms of desensitization include the receptor proteolysis in lysosomes [68], dynamic regulation of receptor gene expression [69], and GTP hydrolysis by regulators of G-protein signaling (RGS) proteins [70, 71].

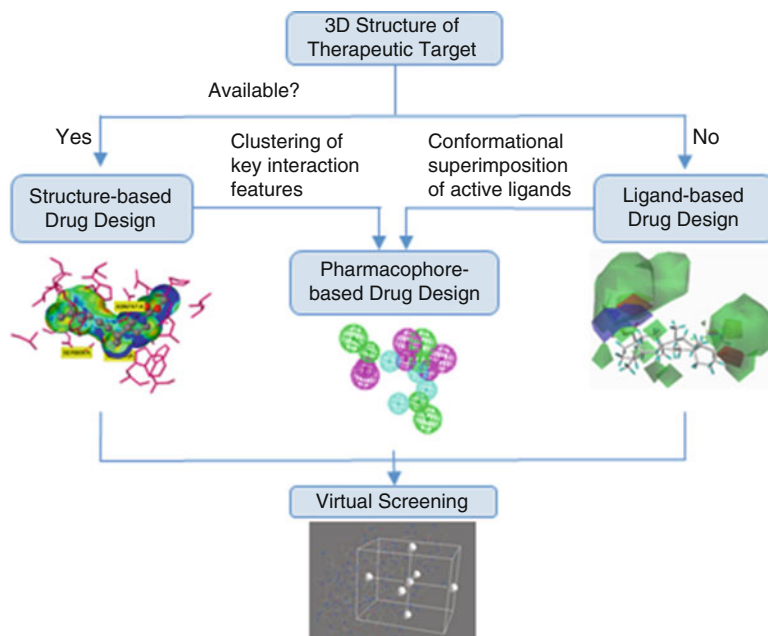
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### 3 In Silico Approaches in the Discovery of New Modulators of GPCR-Derived Therapeutic Targets for AD

A wide array of Computer-Aided Drug Design (CADD) methodologies have been employed as a complementary tool to the high-throughput screening (HTS) approaches to identify new GPCR modulators with therapeutic potential for AD. One critical stage in in silico drug design of GPCR modulators is the discovery of novel lead compounds (or hit-to-lead optimization), which can be accomplished using different strategies such as virtual screening of large libraries of chemical compounds using structure-based or ligand-based drug design approaches (Fig. 2).

#### 3.1 Structure-Based Drug Design Approaches

Over the last years, the progress of the structural biology on determination of accurate three-dimensional (3D) structures of GPCRs has furnished a valuable tool for drug design of GPCR modulators by structure-based drug design approaches, such as homology modeling, virtual screening, and fragment screening. In fact, X-ray crystallography and Nuclear Magnetic Resonance (NMR) studies provide detailed and atomic-level information of GPCR-drug interactions. As their function implicates, GPCRs are membrane-bound proteins, which make experimental 3D structure elucidation, by X-ray crystallography or NMR studies, an extremely



**Fig. 2** General diagram of in silico drug design approaches based on the availability of 3D structural information of therapeutic targets (Representative images were extracted from [72, 73])

complex and challenging task compared to globular proteins (reviewed in [74]). Until the elucidation of the X-ray diffraction structure at 2.8 Å resolution of Class A GPCR bovine rhodopsin in 2000 [75], no X-ray structures of any GPCR were available. The high quality and detailed structure of bovine rhodopsin provided a huge progress of understanding of GPCRs at molecular level and paved the way for structure-based design approaches for GPCRs. Rhodopsin was chosen as the typical example for structural studies due to the fact that it is easy to obtain considerable quantities of functional protein with high stability under conditions that denature other GPCRs [76]. For many years, the structure of inactive state of rhodopsin provided the only template sequence for molecular modeling studies in homologous GPCRs (reviewed in [77]), which was a limitation for the study of other GPCR family members. Although rhodopsin-like or Class A GPCRs present similar structural features with the prototypical bovine rhodopsin, especially concerning the TM domain, they share a low overall homology. Moreover, other GPCRs belonging to *glutamate*, *adhesion*, *secretin*, and *frizzled/taste2* families have no homology with *rhodopsin*. Also, the distinct ligand binding and mechanism of activation of rhodopsin from other GPCRs make the understanding from rhodopsin structure how such a diverse plethora of ligands could activate the large family of GPCRs difficult. Additionally, X-ray

structure of rhodopsin represents the inactive form of the receptor, while the active form would be much more suitable for rational drug design. The experimental progress in obtaining crystal GPCR structures was very slow. In fact, it took more than seven years until the 3D structures of  $\beta_2$ -AR complexed with carazolol [78, 79] and turkey  $\beta_1$ -AR complexed with cyanopindolol [80] were solved. With the development of receptor crystallization techniques, a number of technical issues derived from the low expression of GPCRs and their structural instability have been overcome, thereby resulting in an accelerated increase in solved GPCR structures. Currently, there are more than 150 3D structures of apo-, peptide-, natural ligand-, agonist-, and antagonist-bound GPCR complexes available within Protein Data Bank (PDB), in which the family A GPCR structures have been the most frequently reported ones. Only two family B, two family C, and one frizzled 3D GPCR structures have been published. Given the diverse physiological and pathological implications of their signaling, particularly in AD and other neurodegenerative disorders, GPCRs have been considered very promising therapeutic targets for pharmaceutical applications. Moreover, the identification of 3D GPCR structures provides a wealth of information to pharmaceutical researchers for drug design of GPCR modulators with neuroprotective properties for the treatment of AD.

Drug discovery efforts targeting GPCRs have been mainly focused on the development of ligands which interact with the orthosteric binding site for endogenous ligands, but a wide variety of GPCRs possess additional topographically distinct druggable sites (allosteric sites) (reviewed in [81, 82]). This allows the pharmacological modulation of particular GPCRs not only by conventional orthosteric agonists or antagonists but also by positive allosteric modulators (PAMs) or negative allosteric modulators (NAMs) with potentially high receptor subtype selectivity that either increase or reduce the receptor responsiveness, respectively (reviewed in [81, 82]). Since GPCRs interact with a plethora of intracellular signaling proteins, such as heterotrimeric G-proteins and  $\beta$ -arrestins, and modulate distinct intracellular pathways, distinct GPCR-targeted ligands are expected to stabilize various structural conformations and signaling states of GPCRs. In fact, specific GPCR-targeted ligands possess the ability to selectively evoke a particular stimulus-response, which results in a unique ligand-dependent signaling profile referred to as functional selectivity, biased signaling, or stimulus bias. The functional selectivity phenomenon has been explored in medicinal chemistry for the design of GPCR-targeted drugs with pathway selectivity (reviewed in [83, 84]).

In order to address how drug-dependent GPCR signaling relates to the concept of functional selectivity, atomistic-level information about the mode of ligand-GPCR interactions coupled with

its two signaling partners, G-proteins and  $\beta$ -arrestins, is required [85]. However, relevant structure-function information is still scarce. The first X-ray crystal structure of a GPCR/G-protein complex only became available in 2011, in which the  $\beta_2$ -AR was complexed to G<sub>o</sub>s protein [86]. Given the limitations of the crystallizable fragments and the static nature of this single available model, this important but restricted information is insufficient to understand the function of such a complex biological system. Nowadays, molecular dynamics (MD) simulations are a treasured resource for the study of GPCRs and can be applied to better understand their function. In fact, the usage of MD simulations has been extremely relevant to model the process of GPCR activation on an atomistic level [87, 88], to study ligand recognition or GPCR oligomerization [89] by generating ensembles of energetically accessible conformations [90, 91]. The overall construction of the membrane-protein systems is harder than for soluble proteins, but a few tools provide accurate and fast alternatives to step-by-step manual construction, such as Chemistry at HARvard Macromolecular Mechanics-Graphical User Interface (CHARMM-GUI) [92, 93], QwikMD [94], and high-throughput molecular dynamics (HTMD) [95]. The membrane environment can be explicitly (all atom) or implicitly (coarse grained (CG)) modeled. However, when a researcher aims to fully characterize the ligand-GPCR interactions, the explicit option should be chosen as it allows a detailed characterization of pairwise interactions and the measurement of a variety of chemical-physical features. While the dynamics of activation are beginning to be clarified for individual GPCRs, an increasingly important consideration pertains to the identity of the “signaling unit.” Thus, for many years, the GPCRs were thought to function only as monomers, but increasing evidence suggests that they can form homodimers, heterodimers, or higher-order oligomers. It was already demonstrated that minimal functional signaling unit is a complex between a GPCR and heterotrimeric G proteins [56]. Various dimer interfaces have been proposed, but a rearrangement of the dimerization interface to form a TM4-TM4 interface is likely a critical component of activation [96]. Nonetheless, the mechanistic and structural details of the ligand-GPCR function are not known, either at the level of the receptor signaling unit or with regard to the functional epitope between GPCR/G-proteins and GPCR/ $\beta$ -arrestins. These aims could be also achieved upon long all-atom MD simulations of the complete systems and their subsequent analysis.

Another *in silico* approach widely employed in drug design is docking-based virtual screening, which consists of a wide range of computational methodologies that analyze the interaction of large databases of small-molecule drug candidates against a 3D representation of the structure of a therapeutic target protein of interest (reviewed in [97]). This approach is usually performed through



molecular docking, in which each “virtual” drug candidate is docked into the X-ray crystallographic structure of the therapeutic target or, if 3D structure is not available, into a model of the target (homology model-based virtual screening), using algorithms that explore the multiple binding conformations of the ligand inside the binding cavity of a target protein. Subsequently, for each of the generated ligand conformation, the strength of their binding affinity to the target is predicted through the determination of a scoring function. In most of the automated molecular docking studies, a flexible ligand is docked in a rigid protein, since a flexible macromolecular target would demand a high cost of computational time (reviewed in [97]). Docking-based virtual screening can be applied to databases of commercially available compounds and *in-house* ligands that have been previously synthesized and tested in vitro or databases of virtual ligands that can be synthesized according to their calculated docking scores. Moreover, docking-based virtual screening may be also useful following in vitro studies for the interpretation of potential target-ligand interactions. Therefore, the main purpose of structure-based virtual screening is to select the ligand structures that are most likely to bind to a certain therapeutic target of interest, providing a library of the best scored ligands for experimental screening and, thereby, improving the overall efficacy of the drug screening process. Currently, there are a number of in silico tools widely employed in protein-ligand docking studies including automated docking (AutoDock) [98], AutoDock Vina [99], CHARMM-based DOCKER (CDOCKER) [100], FlexX [101], Genetic Optimization of Ligand Docking (GOLD) [102], Grid-based Ligand Docking with Energetics (GLIDE) [103], Internal Coordinate Mechanics (ICM) [104], molecular Interaction FingerPrints (IFP) [105], Induced-Fit Docking (IFD) [106], Library Docking (LibDock) [107], MolGridCal [108], and Protein-Ligand ANT System (PLANTS) [109], among others. Table 1 summarizes the most relevant structure-based studies performed by these docking programs for the GPCRs involved in AD.

### **3.2 Ligand-Based Drug Design Approaches**

The GPCR ligand-based drug design useful for the identification of therapeutic agents for AD relies on knowledge of compounds that are recognized to modulate the activity of this family of TM proteins and represents a suitable in silico approach when the structural information of the therapeutic target is not available. In fact, the majority of potential drug candidates that act on GPCRs have been conceived from ligand-based methodologies, due to the restricted availability of 3D structural data on GPCRs. Various ligand-based drug design approaches have been used to better understand the mechanism of action of GPCR modulators and to screen for new bioactive molecules. Table 2 reports the applicability of ligand-based drug design approaches on the discovery of GPCR modulators with therapeutic potential for AD using large databases of

**Table 1**  
**Structure-based drug design techniques for the modulation of potential GPCR-derived therapeutic targets of AD**

<b>GPCR: Adenosine A<sub>1</sub> receptor (A<sub>1</sub>AR)</b>		
<b>Ligands</b>		
Adenosine		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into a human A <sub>1</sub> AR model using the X-ray structure of bovine rhodopsin as template (PDBid 1F88)	AUTODOCK	[110]
<b>Ligands</b>		
Library of commercially available compounds (ZINC database) with molecular weight between 250 and 350 g/mol, less than 7 rotatable bonds, and a xlogP between 2.5 and 3.5		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into a human A <sub>1</sub> AR model using the X-ray structure of A <sub>2A</sub> AR as template (PDBid 3EML)	DOCK	[111]
<b>Ligands</b>		
DPCPX, 52 active antagonists, and 1000 decoys		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into 12 models of A <sub>1</sub> AR using the X-ray structure of A <sub>2A</sub> AR as template (PDBid 3EML)	DOCK, VINA, GOLD	[112]
<b>GPCR: Adenosine A<sub>2A</sub> receptor (A<sub>2A</sub>AR)</b>		
<b>Ligands</b>		
Library of 545,000 CNS drug-like compounds		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into a A <sub>2A</sub> AR model using the X-ray structure of turkey β <sub>1</sub> -AR as template (PDBid 2VT4)	GLIDE	[113]
<b>Ligands</b>		
Library of 4,300,000 drug-like compounds		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into X-ray structure of A <sub>2A</sub> AR (PDBid 3EML)	ICM	[114]
<b>Ligands</b>		
ZM241385		

(continued)

**Table 1**  
**(continued)**

Drug design technique(s)	Computational tool(s)	References
Docking into X-ray structure of A <sub>2A</sub> AR (PDBid 3EML) and into a A <sub>2A</sub> AR model using X-ray structure of β <sub>2</sub> -AR as template (PDBid 2R4R)	GLIDE XP, InducedFit, MOE Tabu search	[115]
<b>Ligands</b>		
Library of commercially available compounds (ZINC database)		
Drug design technique(s)	Computational tool(s)	References
Docking into four X-ray structures of A <sub>2A</sub> AR (PDBid 3QAK; PDBid 2YDO; PDBid 2YDV; PDBid 3EML)	DOCK	[116]
<b>Ligands</b>		
Library of commercially available compounds (ZINC database) with molecular weight less than 350 g/mol, less than seven rotatable bonds, and logP lower than 3.5		
Drug design technique(s)	Computational tool(s)	References
Docking into X-ray structure of A <sub>2A</sub> AR (PDBid 3EML)	DOCK	[117]
<b>GPCR: α<sub>2A</sub>-Adrenergic Receptor (α<sub>2A</sub>-AR)</b>		
<b>Ligands</b>		
Library of WOMBAT 2007.1 compounds		
Drug design technique(s)	Computational tool(s)	References
Docking into a α <sub>2A</sub> -AR model using the X-ray structure of human β <sub>2</sub> -AR as template (PDBid 2RH1)	GLIDE	[118]
<b>Ligands</b>		
Chlorpromazine, spiperone, spiroxatrine, quinazolines, dopamine, adrenaline, clonidine, dexmedetomidine, BRL-44408, JP-1302, OPC-2836, ARC239, clozapine, WB4101		
Drug design technique(s)	Computational tool(s)	References
Docking into a α <sub>2A</sub> -AR model using the X-ray structure of human dopamine D <sub>3</sub> receptor (D <sub>3</sub> R) as template (PDBid 3PBL) as template	GLIDE	[119]
<b>GPCR: β<sub>2</sub>-Adrenergic receptor (β<sub>2</sub>-AR)</b>		
<b>Ligands</b>		
Library of commercially available compounds (ZINC database)		
Drug design technique(s)	Computational tool(s)	References
Docking into the X-ray structures of β <sub>2</sub> -AR (PDBid 2RH1; PDBid 3POG) and virtual screening	PLANTS, IFP	[120]

(continued)

**Table 1**  
**(continued)**

<b>Ligands</b>		
Library of commercially available compounds (ZINC database)		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into the X-ray structure of $\beta_2$ -AR (PDBid 2RH1)	DOCK	[121]
<b>Ligands</b>		
Library of commercially available compounds (ZINC database)		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into the X-ray structure of $\beta_2$ -AR (PDBid 3SN6)	MolGridCal, AUTODOCK VINA, LibDock, CDOCKER, Discovery Studio 2.5, NAMD	[108]
<b>GPCR: CC motif chemokine receptor 2 (CCR<sub>2</sub>)</b>		
<b>Ligands</b>		
Teijin, RS-504393, 2-amino- <i>N</i> -(2-(((1 <i>S</i> ,2 <i>R</i> )-2-((4-(methylthio)benzyl)amino)cyclohexyl)amino)-2-oxoethyl)-5-(trifluoromethyl)benzamide, 2-amino- <i>N</i> -(2-(((3 <i>S</i> ,4 <i>R</i> )-4-((4-(methylthio)benzyl)amino)piperidin-3-yl)amino)-2-oxoethyl)-5-(trifluoromethyl)benzamide		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into a CCR <sub>2</sub> model using the X-ray structure of CXC chemokine receptor 4 (CXCR <sub>4</sub> ) as template (PDBid 3ODU)	GROMACS, AUTODOCK	[122]
<b>Ligands</b>		
TAK779, Teijin-comp1, JnJ-comp1, Merck-comp55, INCB3344, and BMS-comp22		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into a CCR <sub>2</sub> model using the X-ray structure of CXCR <sub>4</sub> as template (PDBid 3ODU)	AMBER, GLIDE	[123]
<b>GPCR: Corticotropin-releasing factor receptor 1 (CRFR<sub>1</sub>)</b>		
<b>Ligands</b>		
Dihydropyrrole[2,3- <i>d</i> ]pyridines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into a CRFR <sub>1</sub> model using the X-ray structure of glucagon and calcitonin receptors as templates	MacroModel/BatchMin	[124]
<b>GPCR: <math>\delta</math>-Opioid receptor (DOR)</b>		
<b>Ligands</b>		
NTB, NTI, NTIR, BNTX, SNC80, SNC67, BW373U86, SIOM, TAN-67, SB219825, SB206848, SUPERFIT, <i>cis</i> -(+)-3-methylfentanyl		

(continued)

**Table 1**  
**(continued)**

<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into three DOR models using the X-ray structure of bovine rhodopsin as template (PDBid 1F88)	AUTODOCK	[125]
<b>Ligands</b>		
Morphine		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into a DOR model using the X-ray structure of bovine rhodopsin (PDBid 1F88) and the theoretical model of bovine rhodopsin based on electron microscopy (PDBid 1B0J) as templates	MOE	[126]
<b>GPCR: Histamine H<sub>3</sub> receptor (H<sub>3</sub>R)</b>		
<b>Ligands</b>		
Library of compounds derived from ChEMBL database and VU-MedChem fragment library		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Virtual fragment screening into a H <sub>3</sub> R model using the X-ray structure of histamine H <sub>1</sub> receptor (H <sub>1</sub> R) as template (PDBid 3RZE)	PLANTS, GOLD	[127]
<b>Ligands</b>		
Library of 418 H <sub>3</sub> R antagonists		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into a H <sub>3</sub> R model using the X-ray structure of bovine rhodopsin (PDBid 1HZX) as template	GOLD	[128]
<b>Ligands</b>		
Library of non-imidazole H <sub>3</sub> R antagonists		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into a H <sub>3</sub> R model using the X-ray structure of bovine rhodopsin as template (PDBid 1L9H)	GOLD	[129]
<b>GPCR: Metabotropic glutamate receptor type 1 (mGluR<sub>1</sub>)</b>		
<b>Ligands</b>		
L-Glu, QUIS, Ibo, (1 <i>S</i> ,3 <i>R</i> )-ACPD, <i>S</i> -4CPG, <i>S</i> -4C3HPG, <i>S</i> -4H3CPG, M4CPG, <i>S</i> -3HPG, UPF523		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into a NH <sub>2</sub> -terminal domain of mGluR <sub>1</sub> model using the X-ray structures of leucine/isoleucine/valine-binding protein	SYBYL	[130]

(continued)

**Table 1**  
**(continued)**

(LIVBP) (PDBid 2LIV) and of leucine-binding protein (LBP) (PDBid 2LBP) as templates		
<b>GPCR: M<sub>1</sub> muscarinic AcetylCholine Receptor (M<sub>1</sub> mAChR)</b>		
<b>Ligands</b>		
L005771, L005772, L005773, L006454, L014151, pilocarpine, NCC11-1314, NCC11-1585, NCC11-1607, nebracetam, oxotremorine, oxotremorine-M, quinuclidine, RU47213, SDZ ENS 163, pilofrin, gliatilin (TN), sabcomeline, VU0357017, xanomeline, pentylthio-TZTP		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into a M <sub>1</sub> mAChR model using the X-ray structure of M <sub>3</sub> mAChR as template (PDBid 4DAJ)	GLIDE	[131]
<b>Ligands</b>		
Flavonoids		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into a M <sub>1</sub> mAChR model using the X-ray structure of M <sub>3</sub> mAChR as template (PDBid 4DAJ)	GLIDE, AUTODOCK	[132]
<b>GPCR: M<sub>2</sub> muscarinic AcetylCholine Receptor (M<sub>2</sub> mAChR)</b>		
<b>Ligands</b>		
Library of lead-like compounds and fragments derived from the ZINC database		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into the X-ray structure of M <sub>2</sub> mAChR (PDBid 3UON) and virtual screening	DOCK	[133]
<b>GPCR: M<sub>3</sub> muscarinic AcetylCholine Receptor (M<sub>3</sub> mAChR)</b>		
<b>Ligands</b>		
Library of lead-like compounds and fragments derived from the ZINC database		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Docking into the X-ray structure of M <sub>3</sub> mAChR (PDBid 4DAJ) and virtual screening	DOCK	[133]
<b>GPCR: 5-HydroxyTryptamine 2A Receptor (5-HT<sub>2A</sub>R)</b>		
<b>Ligands</b>		
Library of 5-HT <sub>2A</sub> R agonists (serotonin, DOI, mescaline, LSD, 5-MeO-alpha-ET, psilocin, bufotenine, dimethyltryptamine) and antagonists (nefazodone, aripiprazole, haloperidol, cyproheptadine, trazodone, clozapine, ketanserin, spiperone, risperidone)		

(continued)

**Table 1**  
**(continued)**

Drug design technique(s)	Computational tool(s)	References
Docking into human 5-HT <sub>2A</sub> R model using the X-ray structure of $\beta_2$ -AR (PDBid 3SN6) as template and virtual screening	GLIDE	[134]
<b>Ligands</b>		
Serotonin, dopamine, DOI, LSD, haloperidol, ketanserin, clozapine, risperidone		
Drug design technique(s)	Computational tool(s)	References
Docking into human 5-HT <sub>2A</sub> R model using the X-ray structure of $\beta_2$ -AR (PDBid 2RH1) as template	AUTODOCK	[135]
<b>Ligands</b>		
(Aminoalkyl)benzo and heterocycloalkanones		
Drug design technique(s)	Computational tool(s)	References
Docking into the transmembrane $\alpha$ -helices bundle of 5-HT <sub>2A</sub> R model using the X-ray structure of bovine rhodopsin (PDBid 1F88) as template	AMBER	[136]
<b>GPCR: 5-HydroxyTryptamine 2C Receptor (5-HT<sub>2C</sub>R)</b>		
<b>Ligands</b>		
(Aminoalkyl)benzo and heterocycloalkanones		
Drug design technique(s)	Computational tool(s)	References
Docking into the transmembrane $\alpha$ -helices bundle of 5-HT <sub>2C</sub> R model using the X-ray structure of bovine rhodopsin (PDBid 1F88) as template	AMBER	[136]
<b>Ligands</b>		
11-Chloro-2,3,4,5-tetrahydro-1 <i>H</i> -[1,4]diazepino[1,7- <i>a</i> ]indole, 8,9-dichloro-2,3,4,4 <i>a</i> -tetrahydro-1 <i>H</i> -pyrazino[1,2- <i>a</i> ]quinoxalin-5(6 <i>H</i> )-one, ( <i>S</i> )-1-(2-aminopropyl)-7-fluoro-1 <i>H</i> -indazol-6-ol, ( <i>R</i> )-1-(7-(2-chlorophenyl)-5-fluoro-2,3-dihydrobenzofuran-2-yl)- <i>N</i> -methylmethanamine, <i>N</i> -(3-(4-methylimidazolidin-1-yl)phenyl)-5,6-dihydrobenzo[ <i>b</i> ]quinazolin-4-amine, <i>N</i> -(4-methoxy-3-(4-methylpiperazin-1-yl)phenyl)-1,2-dihydro-3 <i>H</i> -benzo[ <i>e</i> ]indole-3-carboxamide, 1-(3,5-difluorophenyl)-3-(4-methoxy-3-(2-(piperidin-1-yl)ethoxy)phenyl)imidazolidin-2-one, <i>N</i> -(3-(2-((3-(piperazin-1-yl)pyrazin-2-yl)oxy)ethoxy)benzyl)propan-2-amine		
Drug design technique(s)	Computational tool(s)	References
Docking into 5-HT <sub>2C</sub> R model using the X-ray structure of $\beta_2$ -AR (PDBid 2RH1) as template	FlexX	[137]

**Table 2**  
**Ligand-based drug design techniques for the modulation of potential GPCR-derived therapeutic targets of AD**

GPCR: Adenosine A <sub>1</sub> receptor (A <sub>1</sub> AR)		
<b>Ligands</b>		
N <sup>6</sup> -Substituted adenosines, 8-substituted xanthenes		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
CoMFA	CHEM-X	[155]
GPCR: Adenosine A <sub>2A</sub> receptor (A <sub>2A</sub> AR)		
<b>Ligands</b>		
2-(Furan-2-yl)-[1, 2, 4]triazolo[1,5- <i>f</i> ]pyrimidin-5-amines, 2-(furan-2-yl)-[1, 2, 4]triazolo[1,5- <i>a</i> ]pyrazin-8-amine, and 2-(furan-2-yl)-[1, 2, 4]triazolo[1,5- <i>a</i> ][1, 3, 5]triazin-7-amines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
HQSAR	SYBYL	[154]
<b>Ligands</b>		
Thieno[3,2- <i>d</i> ]pyrimidine-4-methanones, 4-arylthieno[3,2- <i>d</i> ]pyrimidines, pyrazolo[3,4- <i>d</i> ]pyrimidines, pyrrolo[2,3- <i>d</i> ]pyrimidines, 6-arylpurines, pyrimidine-4-carboxamides, 7-aryltriazolo[4,5- <i>d</i> ]pyrimidines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
CoMFA, CoMSIA	SYBYL	[156]
<b>Ligands</b>		
Pyrimidines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
CoMFA	SYBYL	[157]
<b>Ligands</b>		
2-Substituted adenosines, 2-substituted adenosine-5'uronamides, 2-substituted adenosine-5' N-ethyluronamides		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
CoMFA	SYBYL	[158]
<b>Ligands</b>		
Triazolopyrimidines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
CoMFA	SYBYL	[159]
<b>Ligands</b>		
2-Alkyloxy-, 2-aryloxy-, and 2-aralkyloxy-adenosines		

(continued)



**Table 2**  
**(continued)**

Drug design technique(s)	Computational tool(s)	References
CoMFA	CHEM-X	[160]
<b>GPCR: <math>\beta_2</math>-Adrenergic receptors (<math>\beta_2</math>-AR)</b>		
<b>Ligands</b>		
Library of 94 $\beta_2$ -AR agonists and antagonists		
Drug design technique(s)	Computational tool(s)	References
CoMFA, CoMSIA	SYBYL	[161]
<b>Ligands</b>		
Tryptamines		
Drug design technique(s)	Computational tool(s)	References
CoMFA	SYBYL	[162]
<b>Ligands</b>		
Fenoterol derivatives		
Drug design technique(s)	Computational tool(s)	References
CoMFA	SYBYL	[163, 164, 165]
<b>GPCR: CXC motif chemokine receptor 2 (CXCR<sub>2</sub>)</b>		
<b>Ligands</b>		
<i>N,N'</i> -Diarylsquaramides, <i>N,N'</i> -diarylureas, diaminocyclobutenediones		
Drug design technique(s)	Computational tool(s)	References
CoMFA, CoMSIA	SYBYL	[166]
<b>GPCR: <math>\delta</math>-Opioid receptor (DOR)</b>		
<b>Ligands</b>		
SNC80 analogs		
Drug design technique(s)	Computational tool(s)	References
CoMFA	SYBYL	[167]
<b>GPCR: Histamine H<sub>3</sub> receptor (H<sub>3</sub>R)</b>		
<b>Ligands</b>		
Quinolines		
Drug design technique(s)	Computational tool(s)	References
CoMFA, CoMSIA	SYBYL	[168]
<b>Ligands</b>		

(continued)

**Table 2**  
**(continued)**

4-(3-(Phenoxy)propyl)-1 <i>H</i> -imidazoles, 4-aminoquinolines, 3-(1 <i>H</i> -imidazol-4-yl)propanol derivatives, 1-(4-(phenoxyethyl)benzyl)piperidines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
CoMFA and CoMSIA combined with the implementation of charged partial surface area and VolSurf descriptors, among others	SYBYL	[169]
<b>Ligands</b>		
Imidazoles, thiazoles		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
CoMFA, CoMSIA	SYBYL	[170]
<b>GPCR: Metabotropic glutamate receptor type 1 (mGluR<sub>1</sub>)</b>		
<b>Ligands</b>		
Triazafluorenones		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
CoMFA	CERIUS <sup>2</sup>	[171]
<b>Ligands</b>		
Quinolines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
CoMFA	SYBYL	[172]
<b>GPCR: Metabotropic glutamate receptor type 2 (mGluR<sub>2</sub>)</b>		
<b>Ligands</b>		
Triazolopyridines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
CoMFA	SYBYL, PIPELINE PILOT	[173]
<b>GPCR: Metabotropic glutamate Receptor type 5 (mGluR<sub>5</sub>)</b>		
<b>Ligands</b>		
<i>N</i> -(1,3-Diphenyl-1 <i>H</i> -pyrazol-5-yl)benzamides		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
HQSAR	SYBYL	[174]
<b>Ligands</b>		
Benzodiazepines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
CoMFA	SYBYL	[175]
<b>Ligands</b>		

(continued)

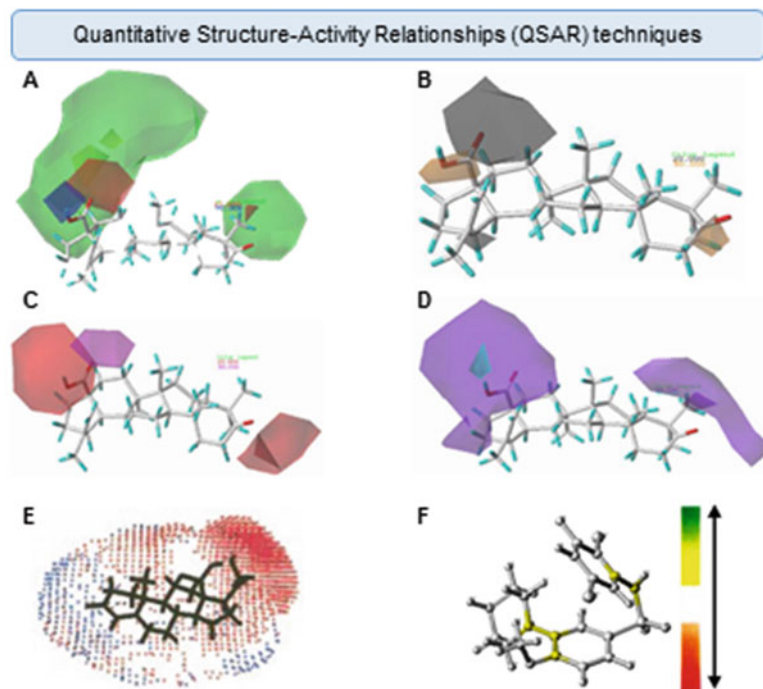
**Table 2**  
**(continued)**

Aryl ethers		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
CoMFA	SYBYL	[176]
<b>GPCR: M<sub>2</sub> muscarinic AcetylCholine Receptor (M<sub>2</sub> mAChR)</b>		
<b>Ligands</b>		
Bisquaternary caracurine V derivatives		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
CoMSIA	SYBYL	[177]
<b>Ligands</b>		
Piperidinylpiperidines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
CoMFA	SYBYL	[178]
<b>GPCR: 5-HydroxyTryptamine 2A Receptor (5-HT<sub>2A</sub>R)</b>		
<b>Ligands</b>		
Tryptamines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
HQSAR	SYBYL	[153]
<b>Ligands</b>		
Indoles, methoxybenzenes, quinazolidinediones		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
CoMFA, CoMSIA	SYBYL	[179]
<b>Ligands</b>		
1,4-Disubstituted aromatic piperazines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
CoMFA, CoMSIA	SYBYL	[180]
<b>Ligands</b>		
3-(Aminomethyl)tetralones, ketanserin analogs, 2-aminoethyl benzocyclohexanones, 2-(2-piperidinoethyl) benzocyclohexanones		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
CoMFA	SYBYL	[181]
<b>Ligands</b>		
Phenylalkylamines		

(continued)

**Table 2**  
**(continued)**

Drug design technique(s)	Computational tool(s)	References
CoMFA	SYBYL	[182]
<b>GPCR: 5-HydroxyTryptamine 2C Receptor (5-HT<sub>2C</sub>R)</b>		
<b>Ligands</b>		
1-(3-Pyridylcarbamoyl)indolines		
Drug design technique(s)	Computational tool(s)	References
CoMFA	SYBYL	[183]
<b>GPCR: 5-HydroxyTryptamine 4 Receptor (5-HT<sub>4</sub>R)</b>		
<b>Ligands</b>		
Benzimidazoles		
Drug design technique(s)	Computational tool(s)	References
CoMFA	SYBYL	[184, 185]
<b>Ligands</b>		
Indole carbazimidamides, 5-hydroxytryptamine, 4-amino-5-chloro-2-methoxybenzoic acid esters, 4-amino- <i>N</i> -[2-(1-aminocycloalkan-1-yl)ethyl]-5-chloro-2-methoxybenzamides, (±)-1-hydroxy-3-aminopyrrolidones, 5-benzyloxytryptamines, 5-methoxytryptamines		
Drug design technique(s)	Computational tool(s)	References
CoMFA	SYBYL	[186]
<b>Ligands</b>		
Benzamides		
Drug design technique(s)	Computational tool(s)	References
CoMFA	SYBYL	[187]
<b>GPCR: 5-HydroxyTryptamine 6 Receptor (5-HT<sub>6</sub>R)</b>		
<b>Ligands</b>		
Arylsulfonamides		
Drug design technique(s)	Computational tool(s)	References
HQSAR	HQSAR software	[152]
<b>Ligands</b>		
<i>N</i> <sub>1</sub> -Arylsulfonylindoles		
Drug design technique(s)	Computational tool(s)	References
CoMFA, CoMSIA	SYBYL	[188]

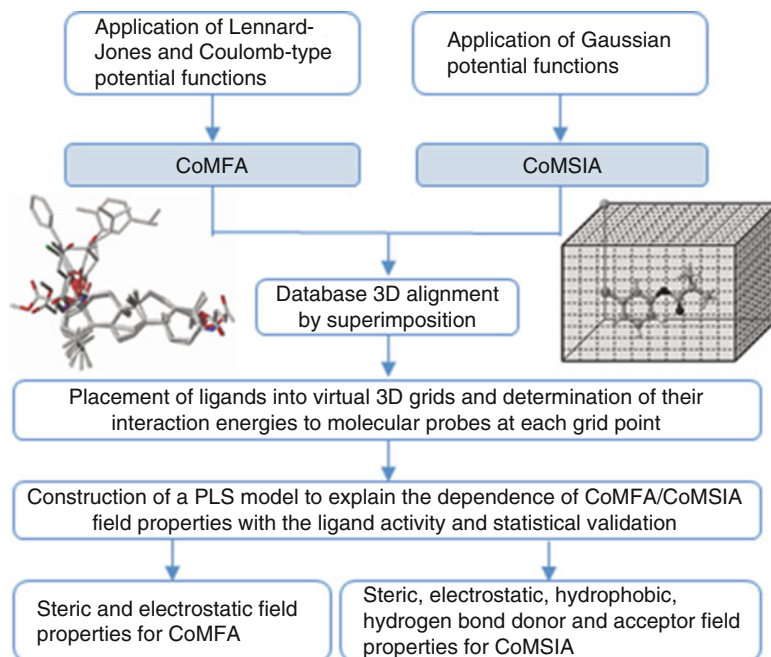


**Fig. 3** Representative QSAR-based methodologies for drug design of modulators of potential GPCR-derived therapeutic targets of AD. Color-coded contour maps (a) and (b) Comparative Molecular Field Analysis (CoMFA) [72], color-coded contour maps (c) and (d) Comparative Molecular Similarity Index Analysis (CoMSIA) [72], color-coded contour map (e) Self-Organizing Molecular Field Analysis (SOMFA) [149], and color-coded contour map (f) Hologram Quantitative Structure-Activity Relationship (HQSAR) [152]

compounds with drug-like properties, including Quantitative Structure-Activity Relationship (QSAR) techniques such as Comparative Molecular Field Analysis (CoMFA) (Fig. 3a, b), Comparative Molecular Similarity Index Analysis (CoMSIA) (Fig. 3c, d), Self-Organizing Molecular Field Analysis (SOMFA) (Fig. 3e), and Hologram Quantitative Structure-Activity Relationships (HQSAR) (Fig. 3f).

The investigation of QSARs has been a ligand-based drug design approach of utmost importance for computational chemistry and has opened new perspectives on the drug discovery process. This useful computational methodology searches for mathematical models that explore the contribution of specific functional groups and moieties of the ligands (physicochemical parameters and/or theoretical molecular descriptors) to the experimentally determined biological/pharmacological data for congeneric or non-congeneric series of chemical compounds (reviewed in [138, 139, 140]). The development of a robust and trustworthy QSAR model should take into account some considerations, particularly the guarantee that

the chemical structure of all ligands is properly drawn or imported, the reliability of biological/pharmacological activity data, and the use of validated software to calculate the descriptor values. In addition, the biological/pharmacological activity data should possess a normal distribution pattern (reviewed in [138, 139, 140]). The main purposes of QSAR are focused on explaining the subtle differences in biological/pharmacological data, at the molecular level, of a statistical population of drug candidates (training set) through the use of appropriate and relevant molecular descriptors (e.g., topological descriptors, electronic descriptors, geometrical descriptors, constitutional descriptors, etc.) (reviewed in [138, 139, 140]). The construction of mathematical QSAR models usually employs a wide variety of statistical methods for linear modeling, such as multiple (or multivariate) linear regression (MLR) [141], partial least squares (PLS) regression [142], and linear discriminant analysis (LDA) [143], and nonlinear modeling, such as artificial neural networks (ANN) [144] or support vector machines (SVM) [145] to derive a robust mathematical correlation that explains the dependence of particular descriptor variables (independent variables) to the biological/pharmacological activity of a set of ligands (dependent variables). The choice of an appropriate statistical method is crucial especially when a large number of descriptors are calculated in order to neglect the least relevant or redundant descriptors and to select the other ones with the highest mutual intercorrelation with the activity data. The resulting QSAR model is subjected to several validation tests to verify the reliability of the correlation models. After its construction, a QSAR model is usually corroborated by applying multiple strategies of QSAR model validation, in particular the internal validation or cross-validation and the external validation, which provide information about its stability and predictivity (reviewed in [138, 139, 140]). Regarding internal validation or cross-validation, the training set is modified by deleting one (leave-one-out cross-validation, LOO) or more (leave-some-out cross-validation, LSO; leave-many-out cross-validation, LMO) ligands from the set. The QSAR model is reconstructed based on the remaining ligands using the combination of descriptors previously determined, and the biological/pharmacological activity of the eliminated ligand(s) is calculated from the developed QSAR equation. Subsequently, the same procedure is performed until all or a definite portion of the ligands of the training set have been eliminated once and the predictive activity values of the compounds are used for the calculation of several internal validation parameters, in particular the predictive correlation coefficient  $r^2_{cv}$  (reviewed in [138, 139, 140]). The external validation consists in the prediction of activity of a group of chemical compounds that are not included in the training set (i.e., test set) and the same parameters are used in the construction of QSAR model. The external predictive ability of the generated QSAR



**Fig. 4** General procedure for CoMFA and CoMSIA methodologies (Representative images were extracted from [72])

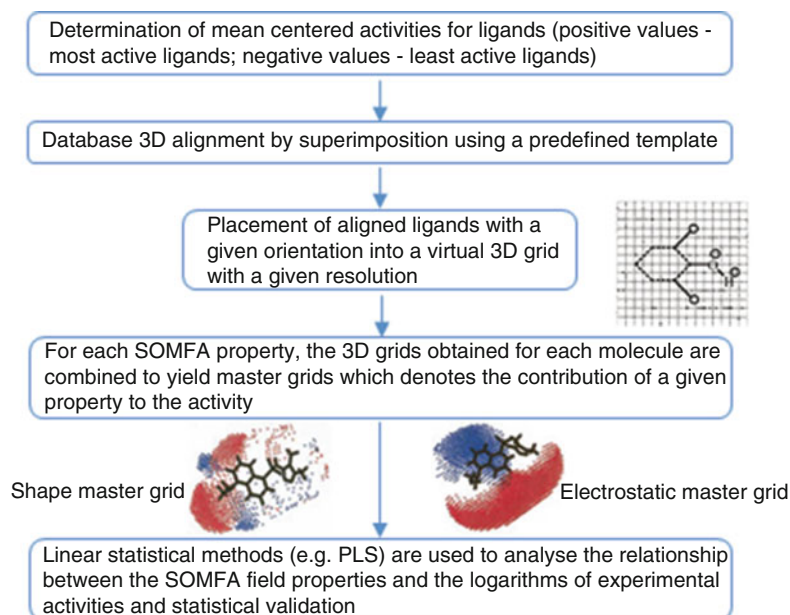
model is determined using the predictive correlation coefficient  $r^2_{\text{pred}}$  (reviewed in [138, 139, 140]).

The CoMFA and CoMSIA methodologies have been important ligand-based tools for the design and development of more potent drug candidates targeting GPCRs (Fig. 4). The basic concept of CoMFA methodology consists in finding differences in biological/pharmacological activity of a data set of ligands correlated to the differences in their 3D shape and the magnitude of molecular field properties. Particularly, CoMFA is restrained to steric (Lennard-Jones potential functions) and electrostatic components (Coulomb potential functions) for field calculation, and therefore these descriptors only take into account the ability of ligands to establish intermolecular interactions with a putative target protein (enthalpic contributions) [72, 146, 147]. A similar QSAR-based methodology, CoMSIA, was conceived based on arbitrary descriptors, so-called similarity indices. Unlike CoMFA, CoMSIA applies a smoother potential based on Gaussian-type distance-dependent functions, allowing the calculation of various similarity indices, in particular steric, electrostatic, hydrophobic, hydrogen-bond acceptor and donor properties, that were created to cover more broadly than the steric and electrostatic fields calculated by CoMFA, the possible major contributions for the binding free energy of ligands to a putative therapeutic target [148]. The 3D alignment of the chemical structures of ligands is required to

perform both methodologies. An optimal structure alignment of a data set of molecules can be described as the alignment that reaches the maximum superimposition of steric, electrostatic, hydrophobic, hydrogen-bond acceptor and hydrogen-bond donor parameters. In 3D QSAR-based methodologies, the 3D alignment is a crucial step and should reveal the superimposition of molecular conformations that a data set of ligands adopt when interacting with a specific therapeutic target. Each member of the training set is aligned to a template molecule which shares a common molecular substructure, and the members of the aligned training sets are placed inside virtual 3D grid boxes with a default grid spacing in all Cartesian directions [72, 146, 147, 148]. Subsequently, the interaction energies are calculated between the ligands and molecular fragments (molecular probes) at each grid point. Using an appropriate method for regression analysis, usually by PLS, the 3D QSAR model is constructed to describe the variation of biological/pharmacological activity with the variation of CoMFA/CoMSIA interaction fields, and the predictive ability of 3D QSAR model is verified by cross-validation and prediction of activity of test set. The resulting QSAR model is usually interpreted in a graphic form as color-coded contour maps, which exhibit specific volumes of space where the magnitudes of the steric, electrostatic, hydrophobic, hydrogen-bond acceptor and hydrogen-bond donor parameters are positively or negatively correlated with the biological/pharmacological activity [72, 146, 147, 148]. This type of graphical representation can be assumed as a model of the binding site in which a training set of ligands is supposed to interact. While the colored contour maps relative to steric and electrostatic field contributions of CoMFA display the regions of space where the aligned ligands can favorably or unfavorably bind to a putative therapeutic target, the colored contour maps generated by CoMSIA-field contributions highlight the regions of the aligned molecules that can favor the presence of a moiety with a given physicochemical property [148]. From the information provided by these graphical representations of CoMFA/CoMSIA models, the activity of novel synthesized drug candidates can be predicted.

A grid-based 3D QSAR technique known as SOMFA (Fig. 5) was originally developed by *Robinson* et al. to estimate the binding affinity of steroid compounds with corticosteroid-binding globulin [149]. This methodology shares common characteristics with CoMFA, in which a grid-based approach is employed, and with molecular similarity methods, in which the intrinsic molecular properties, such as molecular shape and electrostatic potential, are used to construct SOMFA-based QSAR models [149, 150]. The first step in the SOMFA procedure consists in the determination of mean centered activities for a training set of known ligands. The mean centered activity for each ligand of the training set, which consists in the subtraction of mean activity of the training set from



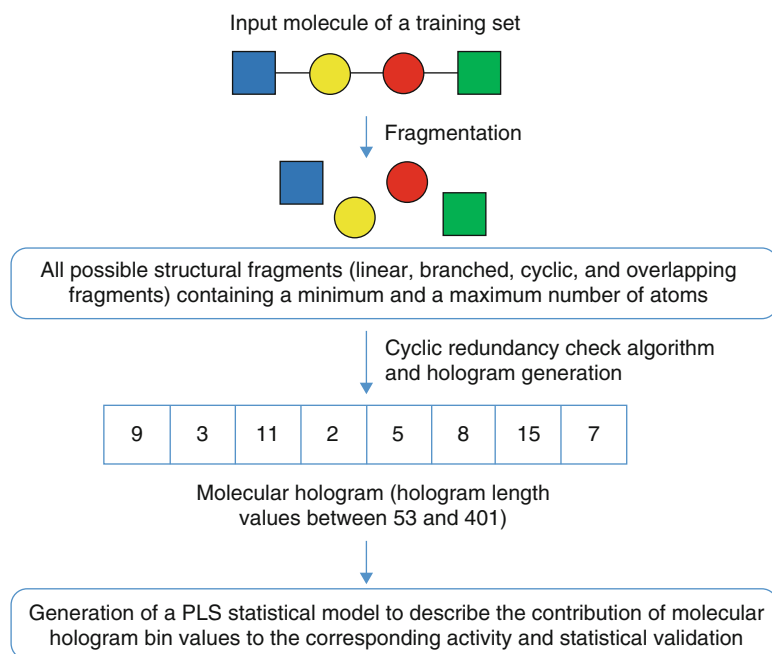


**Fig. 5** General procedure for SOMFA methodology (Representative images were extracted from [149])

each ligand's activity, is calculated in order to obtain a scale of activity where the most and the least active ligands present positive and negative values, respectively. In general, the mean centered activity represents a form of descriptor filtering which denotes the structural features that discriminate high-activity from low-activity ligands [149]. Subsequently, the ligands are structurally aligned by superimposition using molecular alignment tools such as principal component analysis (PCA) method and placed on a given orientation into 3D grids with a given resolution, as in other QSAR methodologies, with values at each grid point representing the shape and electrostatic potential. Linear regression models are constructed to describe the dependence of a given SOMFA molecular property with the experimental training set activities represented on logarithmic scale. The calculation of correlation coefficient indicates the potential importance of a given property. The final result is a grid-based map representing each molecular property that can support the molecular design of novel compounds with improved activity (e.g., binding affinity, etc.) [149, 150]. In general, a SOMFA grid can be used to calculate any molecular property. For each molecular property, particularly for molecular shape and electrostatic properties, the grids for each ligand in the training set are combined to yield property master grids that highlight the regions of ligands where steric and electrostatic parameters might be expected to be correlated with the activity (e.g., binding affinity values, etc.) [149]. Highly active

ligands sharing similar structural features superimpose these features at the same point on a master grid. The grid values for highly active ligands strengthen each other, resulting in a final master grid, in which the positive values are associated with common characteristics to these compounds. In a similar way, the least active compounds share common features that lead to a master grid of negative grid values. Since the grid values are assigned based on mean centered activity, moderately active ligands will have small effect on the final grid values. The quality of the model produced in SOMFA increases rapidly with the size of the training set data, and, for that reason, small data sets will not produce the overlapping features for SOMFA, contributing for a lower quality of correlation. The development of SOMFA has been revealed to be advantageous into the search for the best 3D QSAR model due to its speed and simplicity. Additionally, for the construction of a SOMFA model, the structural similarity between the suitably aligned ligands of a training set is not mandatory [149].

HQSAR has emerged as a novel 2D and fragment-based QSAR technique which employs fragment fingerprints as predictive variables of biological/pharmacological activity. The methodology employed in HQSAR procedure (Fig. 6) involves several steps, including the generation of structural fragments for each ligand in the training set and the encoding of these fragments in holograms [151]. Initially, the input molecules are broken into all possible structural fragments of atoms (e.g., linear, branched, cyclic, and



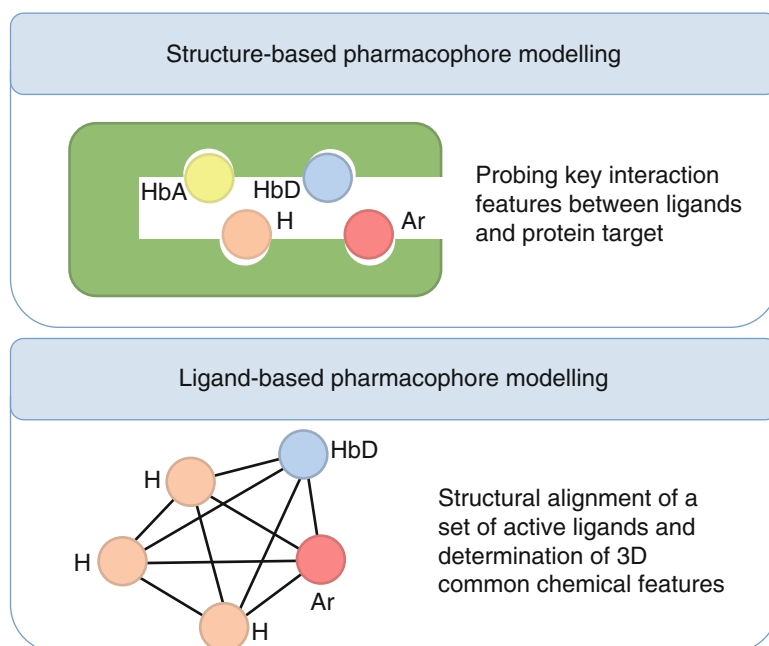
**Fig. 6** General procedure for HQSAR methodology

overlapping fragments, etc.) connected in size between a minimum and a maximum number of atoms as defined by hologram length parameters [152, 153, 154]. Afterwards, each unique fragment in the data set is assigned a large positive integer by means of a cyclic redundancy check (CRC) algorithm. Each of these integers corresponds to a square array of integers in a specified hologram length  $L$ . The cell values (bin occupancies) are incremented according to the produced fragments. Therefore, all the generated fragments are hashed into boxes (array bins), composing a matrix in the range of 1 to  $L$ . The matrix now constitutes a molecular hologram, and the bin occupancies are the descriptor parameters [152, 153, 154]. These descriptors provide some information about chemical and topological features of ligands under study. The use of hashing significantly diminishes the size of the molecular hologram but induces a phenomenon of fragment collision. Upon production of molecular fragments, the identical ones are hashed to the same bin, and the respective bin occupancy is increased. With the objective of avoiding the occurrence of identical or similar fragment collisions between unique molecular fragments, the values of hologram length are often selected to be prime numbers (default hologram length values which are a set of 12 prime numbers ranging from 53 to 401) [152, 153, 154]. The development of HQSAR model is strongly correlated to a number of different parameters concerning hologram generation, in particular the fragment size, the hologram length, and the fragment distinction. Diverse patterns of following fragment distinction parameters, including atom types (A), bond types (B), connectivity (C), hydrogen atoms (H), chirality (Ch), and donors and acceptors (DA), are used for the generation of molecular fragments and for the construction of HQSAR models [152, 153, 154]. Once an optimal model is identified, linear statistical methods such as PLS yield a mathematical equation that explains the dependence of molecular hologram bin values to the corresponding biological/pharmacological activity of each ligand in the training set. The resulting HQSAR models can be graphically displayed as color-coded contribution maps in which the color of each molecular fragment exhibits the contribution (favorable contribution, intermediate contribution, or unfavorable contribution) of an atom or a small number of atoms to the overall activity of ligands under study [152, 153, 154]. As in other QSAR methodologies, the derived HQSAR models are validated, and the biological/pharmacological activities of external test sets are predicted from the generated models. The application of HQSAR as an alternative to the existing QSAR methodologies exhibited a plethora of potential advantages. It avoids the selection and calculation of the physicochemical descriptors by traditional QSAR, and no explicit 3D information for the ligands (e.g., determination of the 3D structure, putative binding conformation, and molecular alignment) is required for the generation of molecular holograms.

Additionally, HQSAR analyses could be easily and rapidly performed for both small and large data sets that are not analyzable by traditional QSAR techniques [152].

### 3.3 Pharmacophore-Based Drug Design

Pharmacophore modeling has been demonstrated to be a remarkably useful *in silico* approach for the discovery of potentially bioactive molecules acting on several therapeutic targets [189, 190]. A pharmacophore does not represent a real molecule or an association of functional groups, but it represents an ensemble of steric and electronic determining features that assure an optimal interaction toward a relevant biological/pharmacological target and trigger its biological/pharmacological activity. Therefore, a pharmacophore can be described as the highest common denominator shared by a set of active ligands with similar biological/pharmacological activity and which may interact to the same site of a protein (reviewed in [73]). A pharmacophore model can be developed either in the absence of therapeutic target structure (ligand-based pharmacophore modeling) or based on the 3D structure of a therapeutic target (structure-based pharmacophore modeling) (Fig. 7). The construction of receptor-based pharmacophore models implies the analysis of the pharmacophoric features (hydrogen-bond acceptors and donors, hydrophobic groups, aromatic rings, etc.) in the active site and their spatial relationships which are important for ligand binding (reviewed in [73]). Regarding ligand-based pharmacophore



**Fig. 7** Representative schemes of structure-based and ligand-based pharmacophore modeling techniques

modeling, the construction of a pharmacophore model involves initially the generation of a conformational space for each ligand of training set to represent their conformational flexibility. The major goal of conformation generation relies on the identification of bioactive conformation(s) of a set of ligands from conformational ensembles in the lowest amount of computational time. Various software tools and algorithms used for conformation generation possess the ability to calculate different conformational geometries containing the bioactive conformation and other similar geometries (reviewed in [73]). A suitable computational tool for conformational search needs to generate all conformational geometries that ligands adopt when they interact with protein targets, to select a short list of low-energy conformational geometries in order to avoid the excess of mass storage capacity and to calculate the conformational geometries in a lower computational time. Subsequently, the multiple ligands belonging to training set are superimposed, and the common 3D structural features crucial for biological/pharmacological activity are determined (reviewed in [73]). Currently, several computational functionalities for generation of pharmacophore models have been developed, including Pharmacophore Alignment and Scoring Engine (PHASE) [191], Activity Prediction Expert System-3D (Apex-3D) [192], MOLMOD [193], System Level Automation Tool for Engineers (SLATE) [194], LigandScout [195], distributed computing (DistComp) [196], SYBYL [197], CATALYST [198], discrete surface charge optimization (DISCO) [198], genetic algorithm for structure and phase production (GASP) [198], and molecular operating environment (MOE) [199], among others. Table 3 reports the most relevant examples of applicability of these software packages for the study of the most critical molecular and electronic features of ligand databases for the modulation of GPCRs with therapeutic potential for AD.

Once a pharmacophore model is created by either ligand-based or structure-based manner, it can be used as a query to perform a virtual screening of 3D chemical databases in the search for new therapeutic strategies for AD based on modulation of GPCRs (reviewed in [73]). In the pharmacophore-based virtual screening procedure, a pharmacophore hypothesis is considered as a template for the identification of hit ligands that present similar chemical features to those of the pharmacophoric template. Apart from the applicability of pharmacophore modeling for virtual screening, de novo drug design approaches have been explored specifically for the design of drug candidates with novel structures which cover the chemical features of a given pharmacophore hypothesis. The software programs of pharmacophore-based de novo drug design usually use as input a set of detached molecular fragments consistent with the pharmacophore hypothesis, and the pharmacophoric fragments are connected by using appropriate linkers (reviewed in [73]).

**Table 3**  
**Pharmacophore-based drug design approaches for the modulation of potential GPCR-derived therapeutic targets of AD**

GPCR: Adenosine A <sub>2A</sub> receptor (A <sub>2A</sub> AR)		
<b>Ligands</b>		
1,2,4-Triazolo[5,1- <i>i</i> ]purines, 2- <i>N</i> -butyl-9-methyl-8-[1-3]triazol-2-yl-9 <i>H</i> -purin-6-ylamines, pyrazolo[4,3- <i>e</i> ]-1,2,4-triazolo[1,5- <i>c</i> ]pyrimidines, 2-amino-6-furan-2-yl-4-substituted nicotinonitriles, 4'-aza-carbocyclic nucleosides, 5,6-dihydro-(9 <i>H</i> )-pyrazolo[3,4- <i>e</i> ]-1,2,4-triazolo[4,3- <i>d</i> ]pyridines, <i>N</i> -[6-amino-2-(heteroaryl)pyrimidin-4-yl]acetamides, 4-acetylamino-2-(3,5-dimethylpyrazol-1-yl)-6-pyridylpyrimidines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling combined with QSAR	PHASE	[200]
<b>Ligands</b>		
Pyrazolo[4,3- <i>e</i> ]-1,2,4-triazolo[1,5- <i>c</i> ]pyrimidines, triazolopyridines, 4-amido-2-aryl-1,2,4-triazolo[4,3- <i>d</i> ]quinoxalin-1-ones, 2-amino-5-benzoyl-4-(2-furyl)thiazoles, <i>N</i> <sup>2</sup> -substituted pyrazolo[3,4- <i>d</i> ]pyrimidines, 2-(benzimidazol-2-yl)quinoxalines, 5-amino-2-phenyl [1-3]triazolo[1,2- <i>a</i> ] [1, 2, 4] benzotriazin-1-ones, 1,3-dipropyl-8-(1-heteroarylmethyl-1 <i>H</i> -pyrazol-4-yl)-xanthines, 9-alkylpurines, pyrido[2,1- <i>f</i> ]purine-2,4-diones, 1,3-dialkyl-8- <i>N</i> -substituted benzyloxycarbonylamino-9-deazaxanthines, 7-aryltriazolo[4,5- <i>d</i> ]pyrimidines, 7-imino-2-thioxo-3,7-dihydro-2 <i>H</i> -thiazolo[4,5- <i>d</i> ]pyrimidines, 2-amino-6-furan-2-yl-4-substituted nicotinonitriles, 2-aminoimidazopyridines, 8-(furan-2-yl)-3-substituted thiazolo[5,4- <i>e</i> ][1, 2, 4]triazolo-[1,5- <i>c</i> ]pyrimidine-2(3 <i>H</i> )-thiones, 2,6-diaryl-4-acylamino-1,2,4-triazolo[1,5- <i>c</i> ]pyrimidines, 1,2,4-triazolo[5,1- <i>i</i> ]purines, <i>N</i> -1 monosubstituted 8-(pyrazol-4-yl)xanthenes, 1,3-dialkyl-8-(hetero)aryl-9-OH-9-deazaxanthines, pyrimidine-4-carboxamides, 4-acetylamino-2-(3,5-dimethylpyrazol-1-yl)-6-pyridylpyrimidines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling combined with QSAR	PHASE	[201]
<b>Ligands</b>		
7-Substituted 5-amino-2-(2-furyl)pyrazolo[4,3- <i>e</i> ]-1,2,4-triazolo[1,5- <i>c</i> ]pyrimidines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	CATALYST	[202]
<b>Ligands</b>		
2,6-Diaryl-4-phenacylamino-1,2,4-triazolo[5,1- <i>i</i> ]purines, 2-amino- <i>N</i> -pyrimidin-4-ylacetamides, 2-amino- <i>N</i> -pyrimidin-4-yl acetamides, <i>N</i> -pyrimidinyl-2-phenoxyacetamides, 4-acetylamino-2-(3,5-dimethylpyrazol-1-yl)-6-pyridylpyrimidines, <i>N</i> -[6-amino-2-(heteroaryl)pyrimidin-4-yl]acetamides, pyrazolo[4,3- <i>e</i> ][1, 2, 4] triazolo[1,5- <i>c</i> ]pyrimidin-5-amine, pyrazolo[4,3- <i>e</i> ]-1,2,4-triazolo[1,5- <i>c</i> ]pyrimidines, 6-(furan-2-yl)-9 <i>H</i> -purin-2-amines, 2-(2-furanyl)-7-phenyl[1, 2, 4]triazolo[1,5- <i>c</i> ]pyrimidin-5-amines, 3 <i>H</i> -[1, 2, 4]-triazolo[5,1- <i>i</i> ]purin-5-amines, 1,2,4-triazolo[1,5- <i>c</i> ]pyrimidines, biaryl, heteroaryl, and heterocyclic derivatives of SCH 58261		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling combined with QSAR based on GFA joined with <i>k</i> NN	CATALYST	[203]
GPCR: α <sub>2A</sub> -Adrenergic receptor (α <sub>2A</sub> -AR)		

(continued)

**Table 3**  
**(continued)**

<b>Ligands</b>		
Catecholamines, imidazolines, guanidines, structures possessing distinct scaffolds (rilmenidine, talipexole, xylazine)		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling combined with CoMFA	DISCO, SYBYL	[204]
<b>GPCR: CC motif chemokine receptor 2 (CCR<sub>2</sub>)</b>		
<b>Ligands</b>		
<i>R</i> -3-amino-pyrrolidines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling combined with CoMFA and CoMSIA	SYBYL	[205]
<b>Ligands</b>		
Diaminopropionamide-glycine dipeptides, disubstituted and trisubstituted cyclohexanes		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	CATALYST	[206]
<b>GPCR: Corticotropin-releasing factor receptor 1 (CRFR<sub>1</sub>)</b>		
<b>Ligands</b>		
Arylquinolines, phenylpyrazolo[1,5- <i>a</i> ]pyrimidines, benzoylpyrimidines, and arylpyrrolopyridines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	CATALYST	[207]
<b>Ligands</b>		
Anilinopyrimidines and triazines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	CATALYST	[208]
<b>Ligands</b>		
<i>N</i> <sup>3</sup> -Phenylpyrazinones		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	PHASE	[209]
<b>GPCR: δ-Opioid receptor (DOR)</b>		
<b>Ligands</b>		
SB219825, SIOM, (-) TAN-67, BNTX, naltriben, naltrindole, oxymorbindole		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	SYBYL	[210]

(continued)

**Table 3**  
**(continued)**

<b>Ligands</b>		
Non-peptides (xorphanol, naltrindole, BNTX, SIOM, Win44441, lofentanil, carfentanil, SNC80(+8)), cyclic peptides (DPDPE, DPLPE), linear peptides (TIPP, TIP, TI-NH <sub>2</sub> )		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	DistComp	[196]
<b>Ligands</b>		
<i>(E)</i> - and <i>(Z)</i> -arylidenenaltrexones		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	SYBYL	[211]
<b>Ligands</b>		
DADLE, DPDPE, deltorphins, Leu- and Met-enkephalins, Dmt-Tic, ICI 174,864, TIPP		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	SYBYL	[212]
<b>GPCR: Histamine H<sub>3</sub> receptor (H<sub>3</sub>R)</b>		
<b>Ligands</b>		
Dibasic biphenyl derivatives, tetrahydroisoquinolines, tetrahydroquinolines, tetrahydroazepines, imidazolidinylideneprapanedinitriles		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	CATALYST	[213]
<b>Ligands</b>		
Imidazoles		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	SLATE	[214]
<b>Ligands</b>		
1-(4-(3-(Piperidin-1-yl)propoxy)benzyl)piperidine, 1-(4-chlorobenzyl)-1-(5-(pyrrolidin-1-yl)pentyl)guanidine, 3-(2,6-dibromo-4-(2-(dimethylamino)ethyl)phenoxy)- <i>N,N</i> -dimethylpropan-1-amine		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	CATALYST	[215]
<b>GPCR: Metabotropic glutamate receptor type 1 (mGluR<sub>1</sub>)</b>		
<b>Ligands</b>		
Methylglutamates		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	APEX-3D	[216]

(continued)



**Table 3**  
**(continued)**

<b>Ligands</b>		
$\alpha$ -Substituted cyclobutylglycins, 4-carboxy phenylglycins, ( <i>R,S</i> )-1-aminoindan-2,5-dicarboxylic acid, ( $\pm$ )- $\alpha$ -thioxanthylmethyl-3-carboxycyclobutylglycine		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	MOLMOD	[217]
<b>GPCR: Metabotropic glutamate receptor type 2 (mGluR<sub>2</sub>)</b>		
<b>Ligands</b>		
1,3-Dihydrobenzo[ <i>b</i> ][1,4]diazepin-2-ones		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling combined with CoMFA and CoMSIA	DISCO, SYBYL	[218]
<b>Ligands</b>		
Methylglutamates		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	APEX-3D	[216]
<b>GPCR: 5-Hydroxytryptamine 2C Receptor (5-HT<sub>2C</sub>R)</b>		
<b>Ligands</b>		
RS-102221, SB240284, Haloperidol, S20098, 2-alkyl-4-aryl-pyrimidines, bisaryl imidazolidin-2-ones, 2-phenyl-dihydropyrrolones, <i>N</i> -substituted-pyridoindolines, <i>cis</i> -fused 2- <i>N,N</i> -dimethylaminomethyl-2,3,3 <i>a</i> ,12 <i>b</i> -tetrahydrodibenzo[ <i>b,f</i> ]furo[2,3- <i>d</i> ]oxepines, 1 <i>H</i> -indole-3-carboxylic acid pyridine-3-ylamides, benzazepines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling combined with CoMFA	CATALYST, SYBYL	[219]
<b>Ligands</b>		
Library of 16,560 ChemDiv GPCR compounds		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	CATALYST	[220]
<b>GPCR: 5-Hydroxytryptamine 4 Receptor (5-HT<sub>4</sub>R)</b>		
<b>Ligands</b>		
Indolecarbazimidamide, 3- <i>N</i> -isopropylbenzimidazolone amide, 3- <i>N</i> -ethylbenzimidazolone amide and benzamide, ( <i>R</i> )-zacopride, 5-carbamoyltryptamine and metoclopramide		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling combined with CoMFA	SYBYL	[221]
<b>Ligands</b>		
Indolecarbazimidamides, azabicyclic indole esters, macrocyclic benzamides		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>

(continued)

**Table 3**  
**(continued)**

Pharmacophore modeling	CATALYST	[222]
<b>GPCR: 5-Hydroxytryptamine 6 receptor (5-HT<sub>6</sub>R)</b>		
<b>Ligands</b>		
Arylsulfonamides, arylsulfonyl derivatives, <i>N</i> -arylsulfonylindoles, 2-substituted tryptamines		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	CATALYST	[223]
<b>Ligands</b>		
Indoles; indole-like derivatives; monocyclic, bicyclic, and tricyclic aryl-piperazines; and miscellaneous derivatives		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	CATALYST	[224]
<b>Ligands</b>		
2-Methylindoles, 2-phenylindoles		
<b>Drug design technique(s)</b>	<b>Computational tool(s)</b>	<b>References</b>
Pharmacophore modeling	CATALYST	[225]

*GFA* genetic function algorithm, *kNN* *k* nearest neighbor

## 4 Concluding Remarks

With the progress of the structural biology on elucidation of 3D crystal structures of GPCRs from X-ray crystallography and NMR techniques and of in silico-based drug design tools, a diverse plethora of GPCR modulators have been identified by structure- and ligand-based drug design strategies. Experimentally, the application of structure-based drug design methodologies allows the understanding of ligand-GPCR interactions at a molecular level, which is fundamental for the construction of reliable structure-based pharmacophores and generation of novel drugs. However, future drug candidates acting on GPCRs are likely to rely on ligand-based approaches because of limited structural data information for the majority of GPCRs. The present chapter provided a general overview of the structure- and ligand-based computational methodologies as well as their applicability on various potential GPCR-derived therapeutic targets for AD by small-molecule modulators. In fact, the pharmacological activation/inhibition of all the aforementioned GPCRs on Tables 1, 2, and 3 has provided therapeutic opportunities, and from the analysis of these tables, it has become evident that diverse chemical scaffolds of small molecules have been explored using structure-based, ligand-based, and pharmacophore-

based methodologies in the search for anti-AD alternatives. Collectively, these *in silico* approaches have revealed to be of utmost importance in early stages of drug discovery, particularly in hit-to-lead optimization of drug candidates, in order to uncover the most favorable molecular modifications for the development of more potent and subtype-selective GPCR modulators targeting AD.

Apart from the extreme relevance of pharmacodynamic (PD) profile of GPCR modulators, pharmacokinetic (PK) properties, including absorption, distribution, metabolism, and excretion (ADME), and toxicology are vital features that should be taken into account in early phases of drug discovery since usually drug candidates with a promising PD profile may be failed at late stages of drug development due to unfavorable PK properties and toxicity. *In silico* structure- and ligand-based drug design approaches combined with *in silico* prediction of ADME properties are expected to contribute to the improvement of the computational methodologies used for drug discovery and be fundamental for the development of drugs targeting AD with enhanced PD and PK properties.

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