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**Azobenzene photoresponsive elements can be installed on sulfonylureas, yielding optical control over pancreatic beta cell function and insulin release. An obstacle to such photopharmacological approaches remains the use of ultraviolet-blue illumination. Herein, we synthesize and test a novel yellow light-activated sulfonylurea based on a heterocyclic azobenzene bearing a push–pull system.**

Type 2 diabetes (T2D) is a modern pandemic currently affecting ~6% of the global population. This disease is characterized by diminished insulin secretion from pancreatic beta cells, which together with peripheral resistance to the secreted hormone, leads to defective glucose homeostasis.<sup>1</sup> The resulting elevated glucose concentration drives a variety of complications including heart disease, cancer, retinal degeneration, and nerve and vascular problems.<sup>2</sup>

While current medical treatments work well, they are associated with complications largely due to off-target or persistent actions.<sup>3</sup> Moreover, they are unable to recreate pulsatile insulin release, a more effective signal for glucoregulation.<sup>4</sup> Thus, T2D is ideally suited to photopharmacology, which harnesses the precision of light to spatiotemporally deliver drug activity.<sup>5</sup> We have recently shown that a sulfonylurea possessing an azobenzene photoresponsive element (a.k.a. AzoSulfonylurea) can be used to optically control beta cell function and insulin release *via* its effects on ATP-sensitive potassium ( $K_{ATP}$ ) channels and Exchange Protein directly Activated by cAMP 2A (Epac2A) signaling.<sup>6</sup>

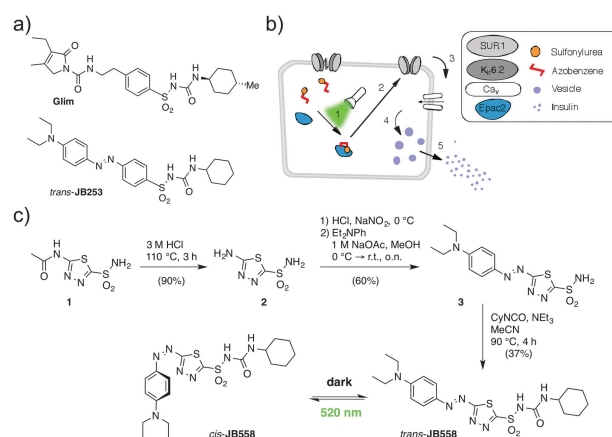
However, a significant barrier to the use of such ‘azo-drugs’ for T2D treatment is their ultraviolet-blue absorption spectra, increasing phototoxicity and limiting tissue penetration due to photon scattering.<sup>7</sup> By contrast, visible/near infrared wavelengths demonstrate better penetrance in the body.<sup>8</sup>

## A red-shifted photochromic sulfonylurea for the remote control of pancreatic beta cell function†

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Spurred on by recent studies of *ortho*- or *para*-substituted azobenzenes,<sup>9–11</sup> we therefore devised a novel approach for the synthesis of wavelength-tuned photopharmaceuticals with red-shifted photochromism. An AzoSulfonylurea based on glimepiride was achieved by installing a heterocyclic aromatic unit, rather than sterically bulky electron-donating halogen or amine moieties (Scheme 1).

Starting with the deacetylation of acetazolamide (**1**) in refluxing HCl, heterocycle **2** was obtained that could be further diazotized with *in situ* generated  $HNO_2$ . Trapping the resulting diazonium salt with *N,N*-diethylaniline generated sulfonamide azobenzene **3**. Finally, reaction with cyclohexyl isocyanate yielded **JB558** *via* acylation of the sulfonamide, giving unprecedented access to a sulfonylurea containing a heterocyclic azobenzene. While yields were reduced compared to the previously described **JB253** (37% *versus* 97%),<sup>6</sup> this was most likely due to the



**Scheme 1** (a) Structures of glimepiride (Glim) and the original blue light-responsive AzoSulfonylurea **JB253** for comparison. (b) The logic of a red-shifted AzoSulfonylurea. Following illumination with green–yellow light (1), the AzoSulfonylurea binds Epac2A, closing  $K_{ATP}$  channels (2) and opening voltage-dependent  $Ca_v^{2+}$  channels ( $Ca_v$ ) (3). This allows optical control of  $Ca^{2+}$  influx (4) and insulin secretion (5). (c) Synthesis of the AzoSulfonylurea **JB558** that can be switched from the *trans*- to the *cis*-isomer using green/yellow light.

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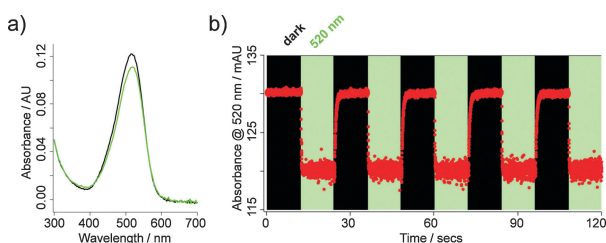


presence of a less reactive sulfonamide intermediate, as predicted by the lower  $pK_a$  value for **3** (7.36, Fig. S1, ESI†) and **JB558** (2.35, see ESI†).

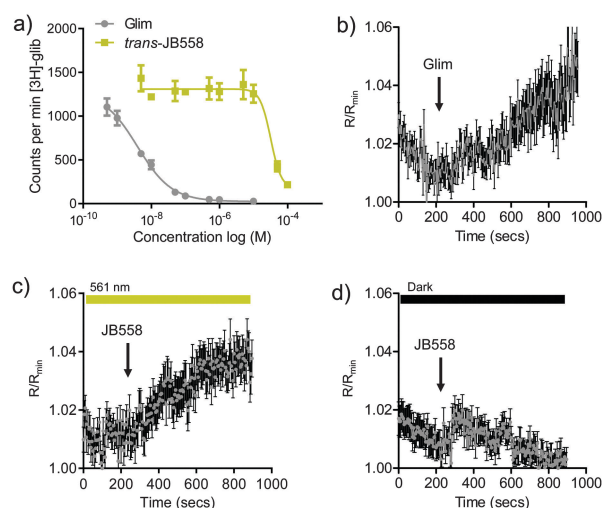
**JB558** possessed a red-shifted absorption spectrum ( $\lambda_{\max} = 526$  nm) in DMSO (Fig. 1a), and could be repeatedly photoconverted to its *cis*-state with green–yellow light ( $\lambda = 520$  nm) (Fig. 1b). Thermal back relaxation occurred rapidly in the dark and switching kinetics were within the millisecond range ( $\tau_{cis} = 64.9 \pm 1.5$  ms;  $\tau_{trans} = 410.8 \pm 12.6$  ms), without obvious decomposition (Fig. 1b). **JB558** was stable in the presence of *Escherichia coli* azoreductase, an enzyme expected to limit oral bioavailability through diazene cleavage in the intestine (Fig. S2, ESI†).

To determine the binding affinity of **JB558** to the  $K_{ATP}$  channel subunit SUR1, as well as Epac2A, [3H]-glibenclamide displacement and FRET assays were performed. While *trans*-**JB558** bound SUR1 with  $\sim 10\,000$ -fold less affinity than glibenclamide ( $IC_{50}(\textit{trans}\text{-JB558}) = 37.3$   $\mu\text{M}$ ;  $IC_{50}(\text{Glim}) = 1.8$  nM) (Fig. 2a), it was able to strongly and light-dependently activate an Epac2-camps biosensor containing the sulfonyleurea binding domain (Fig. 2b–d).<sup>12</sup>

Electrophysiological recordings of  $K^+$  currents in HEK293T-SUR1-Kir6.2 cells revealed partial  $K_{ATP}$  channel blockade by



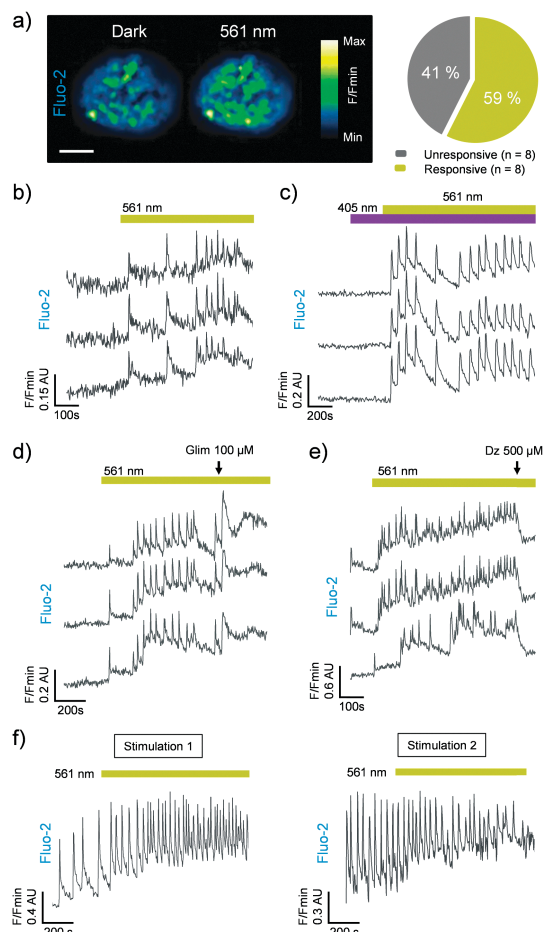
**Fig. 1** (a) UV-Vis spectra of **JB558** in DMSO following illumination with  $\lambda = 520$  nm (green) or under dark-adapted conditions (black). (b) Robust photoswitching between *cis*- and *trans*-**JB558** induced with  $\lambda = 520$  nm and dark, respectively.



**Fig. 2** (a) *trans*-**JB558** and glibenclamide (Glim) displace [3H]-glibenclamide from SUR1 ( $n = 3$  repeats). (b) Glibenclamide decreases FRET (shown here as an increase in  $R/R_{\min}$ ) in HEK293T cells expressing full length Epac2-camps ( $n = 32$  cells). (c) As for (b) but *cis*-**JB558** ( $\lambda = 561$  nm) ( $n = 41$  cells). (d) As for (c) but *trans*-**JB558** (dark) ( $n = 37$  cells). Values represent mean  $\pm$  s.e.m.

*trans*-**JB558**, presumably due to the momentary stationary state favoring some continued *cis*-isomerization (Fig. S3, ESI†).

We next assessed the photoswitching properties of **JB558** in native beta cells where sulfonyleurea-mediated  $K_{ATP}$  channel–Epac2A signaling is intimately linked to voltage-dependent  $Ca^{2+}$  channel (VDCC) activity and insulin exocytosis.<sup>13–16</sup> As expected, **JB558** was able to evoke large increases in intracellular  $Ca^{2+}$  concentrations in  $\sim 60\%$  of beta cells following exposure to yellow ( $\lambda = 561 \pm 5$  nm) (Fig. 3a and b), but not violet ( $\lambda = 405 \pm 5$  nm) light (Fig. 3c). These effects were potentiated using a high concentration of glibenclamide (Fig. 3d), and abrogated using diazoxide (Fig. 3e) to force open the  $K_{ATP}$  channel pore. Repeated switching of cytosolic  $Ca^{2+}$  concentrations could be achieved in the same islet following a brief period of dark exposure to induce *trans*-**JB558** accumulation (Fig. 3f).



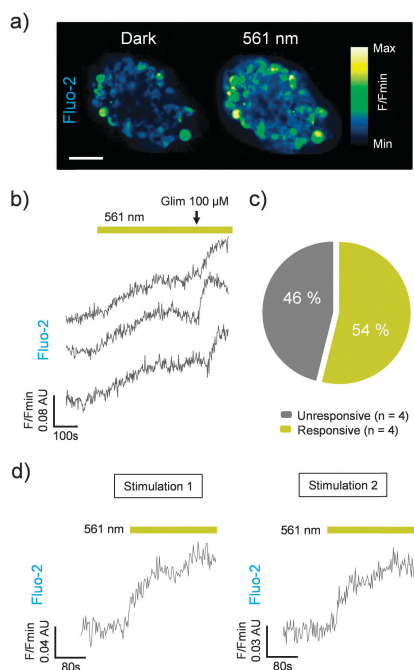
**Fig. 3** (a) **JB558** increases intracellular  $Ca^{2+}$  concentrations in 59% of beta cells residing within rodent islets of Langerhans following illumination with  $\lambda = 561$  nm (scale bar = 75  $\mu\text{m}$ ) ( $n = 8$  islets). (b) Photoswitching is rapid following exposure to  $\lambda = 561$  nm. (c) As for (b), but showing the absence of photoswitching with  $\lambda = 405$  nm. (d) A high concentration of glibenclamide (Glim) augments **JB558**-stimulated  $Ca^{2+}$  rises. (e) Diazoxide (Dz) reverses *cis*-**JB558**-induced  $Ca^{2+}$  fluxes. (f) Reversible manipulation of  $Ca^{2+}$  transients can be achieved in the same islet following thermal back relaxation of **JB558** in the dark (5 min between stimulation 1 and 2). Traces represent  $n = 6$ –10 recordings from 3 animals. Islets were maintained in 5 mM D-glucose throughout.



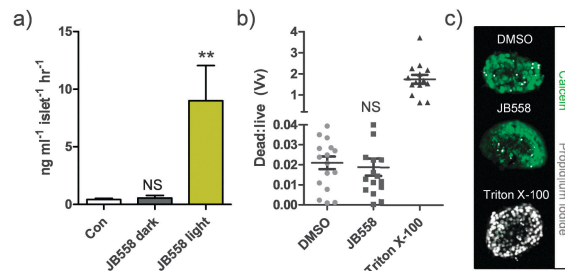
Similar to the results observed in rodent tissue, *cis*-**JB588** was able to confer light-sensitivity on  $\text{Ca}^{2+}$ -spiking activity in human pancreatic islets (Fig. 4a–c), and this effect could be reversed following 5 min relaxation in the dark (Fig. 4d).

To link photocontrol of  $\text{Ca}^{2+}$  levels with insulin secretion, batches of rodent islets were incubated with **JB588** and exposed to either dark (no illumination) or light ( $\lambda = 560 \pm 10$  nm). **JB588**-treated islets kept under dark conditions were no different to controls (5 mM glucose-alone) (Fig. 5a), suggesting that the observed stationary state  $\text{K}_{\text{ATP}}$  channel block was insufficient to elicit exocytosis. By contrast, irradiation dramatically stimulated insulin release (Fig. 5a). Finally, cytotoxicity assays demonstrated that **JB588** did not adversely affect cell viability, as assessed using the vital stain calcein and the necrosis indicator propidium iodide (Fig. 5b and c).

The data presented here outline a synthetic route for the production of AzoSulfonylureas with red-shifted photochromism. Consistent with its sulfonylurea backbone, **JB588** was able to bind SUR1 and activate Epac2A. Formation of *cis*-**JB588** occurred with green–yellow light ( $\lambda = 520$ – $561$  nm), and thermal back relaxation in the dark yielded *trans*-**JB588**. While photoconversion between *cis*- and *trans*-forms was rapid in solution, it was slower in the tissue setting, taking minutes for reversion. An effect of Fluo-2 excitation on the isomer equilibrium cannot be excluded, although illumination at  $\lambda = 491$  nm *per se* was unable to evoke  $\text{Ca}^{2+}$  rises in either Fluo-2- or Fura2 ( $\lambda = 340$  nm/380 nm)-loaded islets (Fig. S4, ESI†).



**Fig. 4** (a) **JB588** increases intracellular  $\text{Ca}^{2+}$  concentrations in human beta cells in response to illumination with 561 nm to induce *cis*-formation (scale bar = 50  $\mu\text{m}$ ). (b) Photoswitching is rapid following exposure to 561 nm and can be potentiated with glibenclamide (Glim). (c) *cis*-**JB588** activates 54% of beta cells ( $n = 4$  islets). (d) Reversible manipulation of  $\text{Ca}^{2+}$  rises following thermal back relaxation of **JB588** in the dark (5 min between stimulation 1 and 2). Traces represent  $n = 3$ – $9$  recordings from a single donor. Islets were maintained in 5 mM  $\text{D}$ -glucose throughout.



**Fig. 5** (a) **JB588**-treated islets respond to illumination with  $\lambda = 560$  nm by increasing insulin secretion (\*\* $P < 0.01$  and NS, non-significant versus Con; one-way ANOVA). (b) Incubation with **JB588** for 1 h did not adversely affect cell viability versus dimethyl sulfoxide (DMSO), as assessed by the ratio of propidium iodide (dead):calcein (live) fluorescence (positive control; Triton X-100) (NS, non-significant versus Con; one-way ANOVA). (c) Representative images of islets stained with calcein and propidium iodide. In all cases,  $n = 36$  islets per treatment group from 6 animals. Values represent mean  $\pm$  s.e.m.

A more plausible explanation is the inactivation of beta cell Epac2A-signaling, which may lag behind that of **JB588** due to persistent mobilization of intracellular  $\text{Ca}^{2+}$ .<sup>1,17</sup> Such tissue effects may be desirable for the development of photopharmaceuticals, since pulsed illumination would reduce phototoxicity, while sustaining compound activity to match long-lasting (dozens of minutes) insulin peaks.<sup>4</sup> Indeed, **JB588** displayed almost 3-fold more potency than its blue-light activated predecessor **JB253**,<sup>6</sup> most likely due to slower back-relaxation during the light pulses used in the secretion assays.

Neither were we able to detect photoswitching of  $\text{K}^+$  currents in HEK293T cells overexpressing  $\text{K}_{\text{ATP}}$  channels, free from orthogonal wavelengths (Fig. S5, ESI†). This was likely because HEK293T cells do not express sufficient Epac2A to allow **JB588** to properly toggle  $\text{K}_{\text{ATP}}$  activity,<sup>13,15,18</sup> and/or the inability to deliver sufficient illumination using the non-coherent source on our patch-clamp setup ( $\epsilon_{520\text{nm}}(\text{JB588}) = 1.14 \times 10^5 \text{ mol}^{-1} \text{ cm}^{-1}$ ; see ESI†).

Nonetheless, we clearly show that **JB588** light-dependently binds Epac2A, allowing optical control of cell function and insulin secretion with  $\lambda = 560$  nm in the most physiologically-relevant testbed, *viz.* the islets of Langerhans. Thus, **JB588** represents a blueprint for red-shifted AzoSulfonylureas based upon heterocyclic azobenzenes. Further studies are now warranted to improve isomerization kinetics in tissue to improve the use of **JB588** as a research tool for rapid  $\text{K}_{\text{ATP}}$  channel manipulation. Importantly, similar synthetic approaches may also be applicable to other clinically-relevant azobenzene-possessing compounds where steric hindrance may affect molecule motion *e.g.* neuromodulators,<sup>19</sup> neurotransmitters,<sup>20,21</sup> enzymes<sup>22</sup> and antibiotics.<sup>23</sup>

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