

# Preliminary studies on SL 75212, a new potent cardioselective $\beta$ -adrenoceptor antagonist

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SL 75212, ( $\pm$ )-1-(isopropylamino)-3-(p-(cyclopropylmethoxyethyl)-phenoxy)-2-propranol.HCl, is a new potent cardioselective  $\beta$ -adrenoceptor antagonist devoid of intrinsic sympathomimetic activity with very weak local anaesthetic properties.

In isolated rat atria, the inhibition of isoprenaline induced chronotropic (spontaneously beating right atria) and inotropic (left atria paced at 1 Hz) effects

appears to possess the highest cardioselective properties of the compounds tested.

In intact anaesthetized rats and dogs, SL 75212 and ( $\pm$ )-propranolol (0.01–1.0 mg/kg, i.v.) similarly inhibited in a dose-related manner the tachycardia to isoprenaline (0.3  $\mu$ g/kg, i.v.). These antagonists were more potent (2–4 times) than metoprolol. However, metoprolol and SL 75212 only slightly antagonized the hypotensive action of isoprenaline. In contrast, ( $\pm$ )-propranolol was slightly more active in inhibiting the isoprenaline induced hypotension than the tachycardia response. When SL 75212 was given orally to rats or dogs, its  $\beta$ -adrenoceptor blocking activity was more pronounced (at least 10 times) and of a longer duration than those of ( $\pm$ )-propranolol and metoprolol.

In reserpinised (5 mg/kg, s.c. 24 h before the experiment), bivagotomized rats SL 75212 (0.01–1.0 mg/kg,

Table 1

| Antagonist      | Rat Atria                     |                          | Guinea-pig Tracheal chain         |                       | Ratio (C/R) |
|-----------------|-------------------------------|--------------------------|-----------------------------------|-----------------------|-------------|
|                 | Inotropism (pA <sub>2</sub> ) | Chronotropism (C) (P.R.) | Relaxation (R) (pA <sub>2</sub> ) | Relaxation (R) (P.R.) |             |
| SL 75212        | 8.29                          | 1.74                     | 8.53                              | 1.48                  | 224         |
| Atenolol        | 7.68*                         | 0.43                     | 7.55*                             | 0.15                  | 56          |
| Practolol       | 7.30*                         | 0.18                     | 6.73*                             | 0.02                  | 45          |
| Metoprolol      | 7.45*                         | 0.25                     | 7.64*                             | 0.19                  | 32          |
| (±)-Propranolol | 8.05                          | 1.00                     | 8.36                              | 1.00                  | 3           |

\*  $pA_2$  value significantly different from SL 75212 (Student's t-test,  $P < 0.05$ ).

All  $pA_2$  values are the means of 4–6 experiments.

The potency ratios [P.R. = antilog ( $pA_2$  antagonist— $pA_2$  propranolol)] are calculated with respect to ( $\pm$ )-propranolol.

by SL 75212 was comparable to that observed with ( $\pm$ )-propranolol and several times more potent than either metoprolol, atenolol or practolol (Table 1). SL 75212, atenolol, practolol and metoprolol, in contrast to ( $\pm$ )-propranolol, were weak antagonists of the isoprenaline induced relaxation in isolated guinea pig tracheal chains contracted with carbachol (Table 1). The ratio between the  $pA_2$  values for SL 75212, atenolol, practolol, metoprolol and ( $\pm$ )-propranolol against the effects of isoprenaline in isolated rat right atria and guinea pig tracheal chains were 224, 56, 45, 32 and 1, respectively. Therefore, *in vitro* SL 75212

i.v.) did not produce positive chronotropic effects which was in contrast to oxprenolol, pindolol and practolol. Hence, SL 75212 is devoid of intrinsic sympathomimetic activity.

In the frog sciatic nerve preparation the calculated concentration of ( $\pm$ )-propranolol needed to decrease the height of evoked action potentials by 50% ( $EC_{50}$ ) was approximately 14 mM. The  $EC_{50}$  of SL 75212 was greater than 300 mM indicating that SL 75212 possesses relatively weak local anaesthetic properties compared to ( $\pm$ )-propranolol.