Crystal Structure of *Anti*-Configuration of Indomethacin and Leukotriene B₄ 12-Hydroxydehydrogenase/15-Oxo-Prostaglandin 13-Reductase Complex Reveals the Structural Basis of Broad Spectrum Indomethacin Efficacy

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The crystal structure of the ternary complex of leukotriene B_4 12-hydroxydehydrogenase/15-oxo-prostaglandin (15-oxo-PG) 13-reductase (LTB₄ 12HD/PGR), an essential enzyme for eicosanoid inactivation pathways, with indomethacin and NADP⁺ has been solved. An indomethacin molecule bound in the anti-configuration at one of the two active site clefts of the homo-dimer interface in the LTB₄ 12HD/PGR and was confirmed by a binding calorimetry. The chlorobenzene ring is buried in the hydrophobic pore used as a binding site by the ω -chain of 15-oxo-PGE₂. The carboxyl group interacts with the guanidino group of Arg56 and the phenolic hydroxyl group of Tyr262. Indomethacin shows a broad spectrum of efficacy against lipid-mediator related proteins including cyclooxygenase-2, phospholipase A2, PGF synthase and PGE synthase-2 but in the syn-configuration as well as LTB₄12HD/PGR in the anti-configuration. Indomethacin does not necessarily mimic the binding mode of the lipid-mediator substrates in the active sites of these complex structures. Thus, the broad spectrum of indomethacin efficacy can be attributed to its ability to adopt a range of different stable conformations. This allows the indomethacin to adapt to the distinct binding site features of each protein whilst maintaining favorable interactions between the carboxyl group and a counter charged functional group.

Key words: crystal structure, indomethacin, inhibition mechanism, isothermal titration calorimetry, leukotriene B_4 12-hydroxydehydrogenase/15-oxo-prostaglandin 13-reductase.

Abbreviations: COX, cyclooxygenase; indomethacin, [1-(4-chlorobenzoyl)-5-methoxy-2-methyl-1H-indole-3-acetic acid]; ITC, isothermal titration calorimetry; LTB₄ 12HD/PGR, leukotriene B₄ 12-hydroxydehydrogenase/15-oxo-prostaglandin 13-reductase; mPGES-2, microsomal prostaglandin E synthase type 2; PGFS, prostaglandin F_{2 α} synthase; PLA₂, phospholipase A₂.

Indomethacin [1-(4-chlorobenzoyl)-5-methoxy-2-methyl-1*H*-indole-3-acetic acid] is a highly effective analgesic drug and one of the "classical" non-steroidal anti-inflammatory drugs (NSAIDs) in common usage (1, 2) (Fig. 1A). The effect of the drug is primarily attributed to the nonselective inhibition of cyclooxygenase 1 and 2 (COX-1 and -2) activity, resulting in decreased production of prostaglandins (PGs), lipid-mediators for inflammation (3). Indomethacin also modulates a wide range of enzymes and receptors other than COXs (4-11), with effects not limited to inflammation and pain regulation (4-6). For example, indomethacin and other several NSAIDs reduce the amyloid- β 42 level, whose toxic aggregation is one of the initial pathological steps in Alzheimer's disease. This activity is independent of COX inhibitory activity, although a target protein remains to be identified (4). Indomethacin

also acts as an agonist to peroxisome proliferator-activated receptor γ (PPAR γ), which is highly expressed in adipocytes and induces adipocyte differentiation (5). In addition, indomethacin and several NSAIDs induce NSAID-activated gene 1 (NAG-1), a member of the transforming growth factor β (TGF- β) superfamily, which possesses proapoptotic and antitumorigenic effects independent of COX activity in some cells (6). Furthermore, indomethacin inhibits leukotriene B₄ 12-hydroxydehydrogenase/15-oxo-prostaglandin 13-reductase (LTB₄ 12HD/PGR), in the eicosanoid inactivation pathway (7), prostaglandin $F_{2\alpha}$ synthase (PGFS, referred to as an aldoketoreductase AKR1C3) (8) and microsomal PGE synthase type 2 (mPGES-2) (9). The pathophysiological relevance of the actions of indomethacin on these enzymes is not known. Indomethacin is also an antagonist of PPARδ (10) and an agonist of CRTH2 (chemoattractant receptorhomologous molecule expressed on T-helper type 2 cells), a rhodopsin family G-protein coupled receptor acting as a PGD_2 receptor (DP2) (11). Most of the target proteins of

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Fig. 1. **Indomethacin structure.** (A) Schematic drawing of the chemical structure of the *anti-* and *syn-*configurations of indomethacin. The atom numbers are defined according to the formal name of indomethacin, [1-(4-chlorobenzoyl)-5-methoxy-2-methyl-

1*H*-indole-3-acetic acid]. The ϕ 1 axis is defined as the dihedral angle of C9-N1-C7'-C1'. (B) The $|F_o| - |F_c|$ simulated annealing omit map contoured at 3.3 σ of the final indomethacin model.

indomethacin are lipid-mediator related proteins. In order to understand the molecular basis of the broad spectrum of activities of indomethacin and facilitate the design of more effective drugs with fewer side effects it is necessary to obtain structural detail on the different indomethacin binding modes. We have examined the binding mode of indomethacin to LTB₄ 12HD/PGR and compared this with the binding modes to other lipid-mediator related target proteins.

The bi-functional LTB₄ 12HD/PGR is expressed in various tissues in mammals (12) and is induced by a cancer drug dithiolethione (13). LTB₄ 12HD/PGR is responsible for the regulation of clearance of lipid mediators, catalyzing the first irreversible reaction in the pathway to inactivate various types of lipid mediators (14–17). LTB_4 12HD/PGR catalyzes the NAD(P)⁺ dependent oxidation of LTB₄ to inactive 12-oxo-LTB₄ (14). LTB₄ 12HD/PGR also irreversibly catalyzes the NAD(P)H dependent reduction of various 15-oxo-PGs and 15-oxo-lipoxin A₄ (LXA₄) to 13.14dihydro-15-oxo forms in the clearance pathways of relatively stable E and F series of PGs and LXA₄. (15, 16). These lipid-mediators play crucial roles in broad biological responses such as inflammation (reviewed in Ref. 18). For example, pro-inflammatory LTB₄ leads to the activation and chemotaxis of leukocytes (reviewed in Ref. 19). Pro-inflammatory PGE₂ is a potent vasodilator in inflammation sites to promoting exudate formation (reviewed in Refs. 18 and 20). Anti-inflammatory LXA₄ regulates excessive leukocyte traffic, down-regulates leukocyte function and promotes resolution of inflammation (21). The inhibition of LTB₄ 12HD/PGR by NSAIDs also affects the complex inflammation balance, since LTB₄ 12HD/PGR is responsible for the regulation of clearance of these lipidmediators.

LTB₄ 12HD/PGR structure has a typical medium-chain dehydrogenase fold (17). The homo-dimer protein is in two-fold symmetry with the two active sites at the dimer interface. In the ternary complex structure with 15-oxo-PGE₂ and NADP⁺, both active sites were occupied by 15-oxo-PGE₂ and NADP⁺. The ω -chain moieties of both bound 15-oxo-PGE₂ molecules were buried in the hydrophobic pores of the two active sites, whereas the α -chains are exposed to the solvent (17).

Here we report the crystal structure of the ternary complex of LTB₄ 12HD/PGR with NADP⁺ and indomethacin. The bound indomethacin in the *anti*-configuration of the chlorobenzene and indole rings is accommodated into only one of the two substrate binding sites of LTB₄ 12HD/PGR. This is the first observation of an *anti*-configuration of bound indomethacin in protein; all the other protein-indomethacin complexes report a synconfiguration (Fig. 1A). The broad efficacy of indomethacin is attributed to the flexibility of the molecule allowing dramatic changes in conformation. This structural flexibility allows indomethacin to adapt to the various features of the binding site whilst maintaining a favor interaction between the carboxyl group of indomethacin and polar groups in the many target proteins.

EXPERIMENTAL PROCEDURES

Purification and Crystallization—All Expression. procedures of expression, purification and crystallization were performed as previously described (12, 17). Briefly, guinea-pig LTB₄ 12HD/PGR was expressed as a GST fusion protein in *Escherichia coli* strain BL21 StarTM (DE3) cells (Invitrogen) at 20°C. GST-LTB₄ 12HD/PGR was purified on a Glutathione Sepharose 4B column (GE Healthcare Bio-Science), and the N-terminal GST was removed with thrombin (Wako), followed by further purification on a Mono S column (GE Healthcare Bio-Science). The buffer was exchanged to 20 mM Tris-HCl (pH 8.0), 150 mM NaCl and 1 mM DTT using a desalting column (GE Healthcare Bio-Science), and the sample was concentrated to 1 mg/ml by ultra-filtration (Millipore). Ten mM NADP⁺ (Sigma) and 3 mM indomethacin (Cavman chemical) were added to the protein sample followed by incubation for 30 min at room temperature. The protein complex sample was then further concentrated to 20 mg protein/ml. Crystals were obtained using the oil-batch method by mixing equal volumes of protein and precipitant solution [100 mM 4-morpholineethanesulfonic acid (MES) (pH 6.4), 20 to 30% polyethylene glycol 4,000 and 50 mM MgCl₂] at 20°C. The same condition yielded crystals of LTB₄ 12HD/PGR complexed with 15-oxo-PGE₂ and NADP⁺ or with NADP⁺ only (17). Crystals appeared within 1 week.

Table 1. Data collection and structural refinement statistics.

Beam line	BL45XU (Jupiter CCD)			
Space group	Monoclinic $P2_1$			
Unit cell <i>a</i> , <i>b</i> , <i>c</i> (Å) and β (°)	58.3, 76.1, 79.6 and 102.6			
Resolution (Å)	34.2–2.0 $(2.07–2.00 \text{ Å})^{a}$			
Wavelength (Å)	1.0000			
No. of observed ref.	325,829			
Unique ref.	45,006			
Completeness (%)	97.9 (84.1)			
$\langle I/\sigma \rangle$	51.9 (10.8)			
$R_{ m merge}$ (%)	7.0 (17.9)			
$R_{ m cryst}$ (%)	18.1			
$R_{ m free}$ (%) ^b	22.4			
r.m.s. deviation				
Bonds (Å)	0.007			
Angles (°)	1.12			
No. of amino acids in asymmetric $\mbox{unit}^{\rm c}$	664			
No. of waters in asymmetric unit	600			
Average <i>B</i> -factor $(Å^2)$				
All	31.7			
Indomethacin	58.3			
NADP in each monomer	23.4/18.7			
Tris	45.9			

^aNumbers in parentheses are the values in the highest resolution shell (2.07–2.00 Å). ${}^{b}R_{\rm free}$ is calculated for 5% of data omitted from refinement calculations. ^cIt includes residual thrombin recognition sites.

Data Collection and Structural Analysis-X-ray diffraction data were collected at 100 K at RIKEN Structural Biology Beamline I (BL45XU) at SPring-8 (22) with a Jupiter CCD detector (RIGAKU) (Table 1). For cryocooling, the crystal was treated with a 1:1 Paraffin/ Paratone-N mixture (Hampton Research). The data were processed using HKL2000 (23), and the refinement of the structure was initiated with the rigid-body refinement in CNS (24) using the atomic coordinates of the LTB₄ 12HD/ PGR and NADP⁺ binary complex structure (PDB id: 1V3T) (17). The atomic coordinate of indomethacin was derived from the crystal structure of iodo-indomethacin (25) and was energy minimized with QUANTA/CHARMm (Accelrys). The iterative model re-building and the refinement of the ternary complex were performed using O(26), CNS (24) and REFMAC5 with TLS refinement (27). One homo-dimer of LTB₄ 12HD/PGR, one indomethacin, two NADP⁺, one Tris molecules as well as 600 waters exist per asymmetric unit in the space group $P2_1$. The electron density of indomethacin was well defined (Fig. 1B). The whole 15-oxo-PGE₂ bound molecule was modeled into the structure of the 15-oxo-PGE₂, NADP⁺ and LTB₄ 12HD/ PGR ternary complex (PDB id: 1V3V), since the electron density of only the ω -chain had been defined (17). Three LTB₄ 12HD/PGR structures (indomethacin and NADP⁺ ternary; PDB id: 2DM6, 15-oxo-PGE₂ and NADP⁺ ternary; 1V3V and NADP⁺ binary complexes; 1V3T) were crystallized under the same conditions. The unit cell dimensions and space group were identical for all the crystals allowing an analysis of the structural changes without consideration of the effect of crystal packing (17). The figures were prepared with MolScript (28), Bobscript (29), Raster3D (30) and QUANTA/CHARMm (Accelrys).

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Isothermal Titration Calorimetry-Isothermal titration calorimetry (ITC) experiments were performed at 37°C using a VP-ITC microcalorimeter (MicroCal). LTB₄ 12HD/PGR was dialyzed against 0.1 M sodium phosphate buffer (pH 7.4) containing 1 mM 2-mercaproethanol (buffer A) overnight. Both the enzyme solution (69.7 μ M LTB₄ 12HD/PGR and 1 mM NADH in buffer A) and the ligand solution (1.5 mM indomethacin and 1 mM NADH in buffer A) were degassed *in vacuo* for 3 min at 30°C prior to use. Heat effects were recorded as a function of time with $10 \ \mu$ l injections of the ligand solution into the sample cell containing the enzyme solution. Data were analyzed using the ITC data analysis module in Origin 5.0 (MicroCal) to determine the binding constant (K_d) , binding enthalpy (ΔH) , and stoichiometry (n). The titration curve fitted well to a model of "a single set of sites." The entropy (ΔS) and free energy (ΔG) changes were evaluated using the following equation,

$$\Delta G = RT \ln K_{\rm d} = \Delta H - T \Delta S$$

where R and T are the gas constant and the absolute temperature, respectively.

Enzyme Assays—Inhibition of PGR activity by indomethacin was assayed by the chromophore method as described (17). Briefly, the reaction was initiated by incubating 100 μ l of enzyme-cofactor complex (1 mM NADH and 0.5 μ g enzyme) and 100 μ l of substrate-indomethacin mixture (100 μ M 15-oxo-PGE₂ and various concentration of indomethacin) in buffer for 0 or 5 min at 37°C. The reaction was terminated by addition of 400 μ l of methanol. Then, 600 μ l of 2 N NaOH was added to measure the amount of remaining 15-oxo-PGE₂ by reading the maximal absorption at 500 nm using a time course mode of a UV-visible spectrophotometer MultiSpec-2100 (Shimadzu, Japan). The IC_{50} value was calculated using Prism4 (GraphPad).

RESULTS

Indomethacin Binding to LTB₄ 12HD/PGR—The thermodynamic parameters for the binding of indomethacin to the LTB₄ 12HD/PGR and NADH complex were measured by ITC revealing a favorable, exothermic interaction (Fig. 2). The large negative value of ΔH (-20.2 ± 2.28 kcal/mol or -84.5 ± 9.54 J/mol) compensated the decrease in entropy ($T\Delta S = -14.8$ kcal/mol or -61.9 J/mol), resulting in a substantial negative ΔG (-5.4 kcal/mol, -22.6 J/mol) at 37°C. The decrease in entropy suggested to occur a certain conformational restraints by the NADH and indomethacin complex formation in LTB₄ 12HD/PGR. Stoichiometry of indomethacin binding per one active site of LTB₄ 12HD/PGR was calculated to be 0.58 \pm 0.059. This is consistent with the result of the crystallographic studies, showing that only one active site was occupied by an indomethacin molecule in the LTB₄ 12HD/PGR homodimer structure as described below. In contrast the substrate $15-\infty - PGE_2$ is defined in both active sites of the ternary LTB₄ 12HD/PGR homodimer structure complexed with 15-oxo-PGE₂ and NADP⁺ (17).

The IC_{50} of indomethacin on 15-oxo-PGE₂ reductase activity of LTB₄ 12HD/PGR (97.9 ± 19.4 μ M) is compatible with that of the dissociation constant ($K_{\rm d}$ = 159.2 μ M) obtained by ITC (Fig. 2).

Structure of the Indomethacin Binding Site—In the crystal structure of the LTB₄ 12HD/PGR complex, the



Fig. 2. Isothermal titration calorimetry of indomethacin binding to LTB₄ 12HD/PGR at 37°C. (A) The heat release with the titration for the association using 69.7 μ M LTB₄ 12HD/ PGR monitored by ITC. (B) Integration of the thermogram yielded a binding isotherm (open squares) that fits to the model (solid line). $K_d = 159.2 \ \mu$ M, $\Delta G = -5.4 \ \text{kcal/mol}$, $\Delta H = -20.2 \pm 2.28 \ \text{kcal/mol}$, $T\Delta S = -14.8 \ \text{kcal/mol}$ at 37°C and $n = 0.58 \pm 0.059$.

bound indomethacin is located next to the nicotineamide ring of NADP⁺ in only one of the two active sites of LTB₄ 12HD/PGR (Fig. 3A). The bound indomethacin occupies one of the same binding sites occupied by 15-oxo-PGE₂ in the substrate binding complex (Fig. 4A). The carboxyl group of the bound indomethacin makes a salt bridge with the guanidino group of Arg56 (over a distance of 2.8 Å) from one monomer (termed monomer 1) and a hydrogen bond with the phenolic hydroxyl group of Tyr262 (over a distance of 2.6 Å) from the other monomer (monomer 2) at the dimer interface of the substrate binding pore (Fig. 3A). The positive electrostatic potential around Arg56 and Tyr262 is complimentary to the negatively charged carboxyl group of the bound indomethacin with the salt bridge forming with Arg56 (Fig. 3, B and C).

The chlorobenzene ring of the bound indomethacin is buried in the hydrophobic pore at the dimer interface of the LTB₄ 12HD/PGR monomers (Fig. 3, A and B), where the ω -chain of 15-oxo-PGE₂ binds in the complex structure (Fig. 4A). The residues surrounding the chlorobenzene ring and within 4 Å are Tyr245 from monomer 1, and Pro257, Glu258, Ile261 and Tyr262 from monomer 2 (Fig. 3A). The plane of the chlorobenzene ring is about 60° from that of the phenyl ring of Tyr262 and the two groups form an aromatic-aromatic interaction (*31*). In addition, the phenolic hydroxyl group of Tyr245 makes a weak hydrogen bond with the benzene ring hydrogen with a short atomic distance of the hydroxyl oxygen atom to the C3' atom of the chlorobenzene of 3.0 Å (32), contributing to the stabilization of the indomethacin binding (Fig. 3A). There are no water molecules in the indomethacin bound pore.

In contrast to the chlorobenzene ring, the indole ring of the bound indomethacin is accessible to solvent in the complex structure of LTB₄ 12HD/PGR (Fig. 3B). There is no direct interaction between the indole ring and the nicotineamide ring of NADP⁺, since there are three water molecules (W1-W3) between the two rings (Fig. 3A). The bound water, W1 has been proposed to be a catalytic water indispensable for the 15-oxo-PGE₂ reductase reaction due to its stabilizing effect on the enolate anion intermediate (17). W1 was also found in all the structures of the NADP⁺ and LTB₄ 12HD/PGR complex, regardless of 15-oxo-PGE₂ or indomethacin binding (17). At the solvent region, the oxygen atom of the methoxy group of indomethacin makes a hydrogen bond with the water W4 (over a distance of 2.8 Å). These results indicate that the amphipathic indomethacin is highly suited for binding to LTB₄ 12HD/PGR, since the hydrophobic portion of the molecule is surrounded by the hydrophobic pore of LTB₄ 12HD/PGR and the negatively charged carboxyl group interacts with the positively charged Arg56 and Tyr262 residues. The bound form of indomethacin is in the anti-configuration (Fig. 3A) with the torsion angle around C9-N1-C7'-C1' (ϕ 1) of 144° (Fig. 1A).

Structural Changes in LTB₄ 12HD/PGR Induced by Indomethacin Binding—Indomethacin binding induces a structural change in the active site due to van der Waals repulsion (Fig. 4A). When the indomethacin or 15-oxo-PGE₂ bound complex structures (PDB id: 2DM6 and 1V3V, respectively) were superimposed at one monomer (monomer 2) of the LTB₄ 12HD/PGR homo-dimer, several residues of the 15-oxo-PGE₂ binding complex, Tyr49, Ala53 and Ile271 in monomer 1 and Tyr262 in monomer 2, are located within the distances of the van der Waals radii of the indomethacin molecule in the indomethacin bound complex structure (Fig. 4A). These steric hindrances result in distortion of the active site at the border of the two monomers which causes formation of the wider hydrophobic pore of the substrate binding site observed in the indomethacin bound complex compared to the 15-oxo-PGE₂ bound form (Fig. 4A). In the superimposed LTB₄ 12HD/ PGR structures using only the monomer 2 subunits, the differences of the corresponding $C\alpha$ atom positions are 1.7, 1.7 and 1.0 Å in Tyr49, Ala53 and Ile271 residues from monomer 1, respectively, and 0.7 Å in Tyr262 from monomer 2 in the indomethacin occupied active site, whereas the corresponding distances are 0.2, 0.2, 0.5 and 0.6 Å in the indomethacin unbound active site, respectively. Thus, the region of the protein involved in forming the indomethacin bound active site was substantially distorted in order to accommodate the bulkier indomethacin molecule.

The distortion of the indomethacin bound active site also results in a rigid-body rotation of the monomer (Fig. 4, A and B). When the indomethacin and 15-oxo-PGE₂ binding complex structures were superimposed at monomer 2, the r.m.s. deviation for all C α atoms in monomer 2 is 0.9 Å while for monomer 1 the r.m.s. deviation is 2.2 Å.





Fig. 3. The binding mode of indomethacin to the dimer interface of LTB₄ 12HD/PGR. (A) The indomethacin binding structure. Indomethacin, a nicotineamide moiety of NADP⁺ (all atoms colored in yellow), bound waters W1-W4 and surrounding residues are shown. The carbon atoms of indomethacin are in cyan. The carbon atoms of residues from monomer 1 are colored in light green and those of monomer 2 are in light pink. The nitrogen, oxygen, chloride and sulfur atoms are colored in blue, red, indigo and green, respectively. The salt bridge and hydrogen bonds with indomethacin are indicated by dashed lines with distances (Å). (B) Electrostatic potential of the molecular surface of the LTB_4 12HD/PGR active site. Negative and positive potentials are colored in red and blue, respectively. The bound indomethacin is also shown. (C) Electrostatic potential of the molecular surface of bound indomethacin colored as for (B). The electrostatic potentials were calculated by QUANTA/CHARMm (Accelrys) for the active site of LTB₄ 12HD/PGR including polar hydrogens (B) and for the bound indomethacin including all hydrogens (C).

Compared with the position of center of mass for each monomer, the conformational change corresponds to monomer 1 rotation by 6° (Fig. 4B). However such rigid-body rotation was not observed between the structures with and without bound 15-oxo-PGE2, and the r.m.s. deviation of 0.5 Å for the whole dimeric structures was observed (PDB id: 1V3V and 1V3T) (17). The slight structural change induced around the active site by the asymmetric binding of indomethacin causes the monomer rotation which prevents a second indomethacin or 15-oxo-PGE₂ from occupying the vacant active site.

When the indomethacin or 15-oxo-PGE₂ binding complexes were superimposed at the monomer 2, whose active site was vacant in the indomethacin bound complex, it was observed that the residues around the vacant active site, especially Ile242 to Pro253, slightly shift to close the cavity. Since both the active sites are adjacent with non-crystallographic two fold symmetry in dimer, those residues lined in the vacant active site should be sterically strained due to the structural change of the indomethacin occupied active site by the bound indomethacin in the monomer 1. The structural shift would be the counter direction as expected when an indomethacin molecule bound to the vacant active site, resulting in prohibiting additional indomethacin binding. The implication for the vacant active site based on the indomethacin complex structure is compatible with the binding stoichiometry $(n = 0.58 \pm 0.059)$ and the large decrease of entropy $(T\Delta S = -14.8 \text{ kcal/mol at } 37^{\circ}\text{C})$ by indomethacin binding to the active site of LTB₄ 12HD/PGR in solution (Fig. 2). The structural constraints on the vacant active site due to monomer rotation also inhibits binding of the substrate, 15-oxo-PGE₂. The lack of structural change induced in the second active site upon 15-oxo-PGE₂ binding may be the reason why both active sites can be occupied in the 15-oxo- PGE_2 bound form (17). In summary, the bulk indomethacin binds to only one of the two 15-oxo-PGE₂ binding sites in the homo-dimer of LTB₄ 12HD/PGR. Indomethacin



Fig. 4. Superposition of LTB₄ 12HD/PGR structure with indomethacin and NADP⁺, and 15-oxo-PGE₂ and NADP⁺. Only one monomer (monomer 2) of each complex was used for the superposition. (A) The stereo view of the superposition around the indomethacin bound active site. The indomethacin binding complex structure is colored in green (monomer 1) and magenta (monomer 2), and the 15-oxo-PGE₂ binding complex model is in light-green (monomer 1) and light-magenta (monomer 2). The

binding induces monomer rotation and the resultant structural constraints imposed prevent binding to the second site.

DISCUSSION

This paper describes the first structure of LTB₄ 12HD/PGR in complex with bound indomethacin which has revealed that indomethacin binds in the *anti*-configuration of the chlorobenzene and indole rings (Fig. 1A). This is in contrast to the *syn*-configuration observed for indomethacin when bound to other enzymes (9, 33, 34) (Fig. 1A). Such a flexible nature allows dramatic changes in the conformation of the indomethacin molecule allowing optimal binding to a wide range of proteins. Here we compare the binding modes of indomethacin to a wide angle of enzymes in order to elucidate the structural basis of broad spectrum indomethacin efficacy.

Comparison of the Bound Indomethacin Configurations among Enzymes—The indole and chlorobenzene rings of the bound indomethacin molecule can adopt a number of different conformations dependent on the different characteristics of the binding sites in various enzymes. Indomethacin bound to LTB_4 12HD/PGR has an *anti*configuration of the flexible imido bond (N1-C7') between the chlorobenzene and indole rings (Fig. 1A), in which the bulky two rings are located in energetically favorable opposite positions (Fig. 1B). The flexible torsion angle of C9-N1-C7'-C1' (ϕ 1) is 144°, derived from the steric constraint between the carbonyl oxygen atom and the

carbon atoms of the indomethacin and 15-oxo-PGE₂ are colored in cyan and orange, respectively. (B) Over view of the superposition. Indomethacin binding complex is colored in green (monomer 1) and light-green (monomer 2), and 15-oxo-PGE₂ binding complex model is in red (monomer 1) and light-red (monomer 2). The bound indomethacin is colored in cyan and the indomethacin unbound active site is indicated by an asterisk.

hydrogen atom attached to C8 (Fig. 1A). Indomethacin bound COX-2 ($\phi 1 = -59^{\circ}$) (PDB id: 4COX) (33), PGFS $(\phi 1 = 44^{\circ})$ (1S2S) (34), mPGES-2 ($\phi 1 = 22^{\circ}$) (1Z9H) (9) and phospholipase A_2 (PLA₂) ($\phi 1 = -33^\circ$) (1TI0) is in the synconfiguration, in which $\phi 1$ is reversed compared with the anti-configuration seen in the LTB₄ 12HD/PGR complex (Fig. 5A). Each configuration can be further classified into two sub-classes according to whether the rotation about $\phi 1$ is clockwise or counterclockwise (Table 2 and Fig. 5). There are four possible stable configurations of the bound indomethacin molecule which yield the same minimal energies in vacuo (Table 2). Indomethacins bound to mPGES-2 and PGFS are in the clockwise syn-configuration (syn1), and bound to COX-2 and PLA₂ in the counterclockwise syn-configuration (syn2). Indomethacin bound to LTB₄ 12HD/PGR is in the clockwise anti-configuration (anti1), while the final possible configuration of indomethacin bound to a protein in the counterclockwise anticonfiguration (anti2) has yet to be found experimentally.

These results indicate that the configuration of the bound indomethacin molecule can vary about the $\phi 1$ axis as well as the positions of the carboxyl and the methoxy groups. Indomethacin can thus adapt to the specific features of a number of protein binding sites in order to optimize the indomethacin-protein interaction.

Comparison of the Indomethacin Binding Mode among Enzymes—Indomethacin binds to each enzyme according to a specific binding mode. The binding mode of indomethacin to LTB_4 12HD/PGR is in part analogous to that of COX-2. In each enzyme, the carboxyl group of



Fig. 5. Stable configurations of indomethacin. Indomethacin structures are superimposed with respect to the indole rings and shown parallel to the C7'-N bond defined in Fig. 1A. The chlorobenzene rings are emphasized by the bold sticks. (A) Comparison of the bound indomethacin structures complexed with various lipidmediator related enzymes; LTB₄ 12HD/ PGR (PDB id: 2DM6), COX-2 (4COX) (33), PGFS (1S2S) (34) and PLA₂ (1TL0) and mPGES-2 (1Z9H) (9). (B) Crystal structure of indomethacin and iodoindomethacin. The anti- and two syn-configuration of indomethacins (anti2, syn1 and syn2) (CSD reference id: INDMET02) (42) and the anticonfiguration of iodoindomethacin (anti1) (HIFYIE) (25) (B).

Table 2. Summary of possible stable configurations and inhibition competence for each enzyme of indomethacin.

	Enzyme-indomethacin								
Configuration	Enzyme ^a	Complex crystal		Inhibition competence		Indomethacin single crystal			Calculated
			$\phi 1^{\rm b}$	PDB id ^c (ref.)	IC_{50}	(ref.)	Molecule	$\phi 1^{b}$	CSD id ^e (ref.)
syn 1	mPGES-2	22°	1Z9H (9)	1 mM	(9)	indomethacin	29°	$INDMET02^{f}(42)$	43°
	PGFS	44°	1S2S(34)	$4.1~\mu M$	(8)				
syn 2	PLA_2	-33°	$1 \mathrm{TI0^{d}}$			indomethacin	-28°	INDMET02 (42)	-43°
	COX-2	-59°	4COX (33)	$15 \ \mu M$	(36)				
anti 1	LTB_4 12HD/PGR	144°	2DM6 (This work)	$100 \ \mu M$	(This work)	indomethacin	155°	HIFYIE (25)	136°
anti 2						indomethacin	-156°	INDMET02 (42)	-138°

^aAbbreviations: mPGES-2: microsomal prostaglandin E synthase type 2, PGFS: prostaglandin $F_{2\alpha}$ synthase, PLA₂: phospholipase A₂, COX-2: cyclooxygenase-2, LTB₄ 12HD/PGR: leukotriene B₄ 12-hydroxydehydrogenase/15-oxo-prostaglandin 13-reductase. ^b ϕ 1: Torsion angle of C9-N1-C7'-C1' (Fig. 1). ^cPDB: Protein Data Bank (http://www.rcsd.org). ^dSnigh, N. *et al.* (unpublished in PDB). ^eCSD: Cambridge Structural Database. ^fThere are three indomethacin molecules in an asymmetric unit. ^gEach indomethacin structure was energy-minimized with QUANTA/CHARMm (Accelrys).

indomethacin forms an interaction with the guanidino group of an arginine and the phenolic hydroxyl group of a tyrosine, Arg56 and Tyr262 of LTB₄ 12HD/PGR (Fig. 6A) and Arg120 and Tyr355 of COX-2 (33) (Fig. 6B). The chlorobenzene ring of indomethacin in each enzyme is surrounded by hydrophobic residues, which constitute the ω -chain recognition site for 15-oxo-PGE₂ in LTB₄ 12HD/ PGR (17) (Fig. 3A) and are also involved in recognition of the unsaturated hydrocarbon chain of arachidonic acid close to the active site in COX-2 (35). However, the most prominent difference in indomethacin binding is in the environment of the indole ring. In LTB₄ 12HD/PGR, the indole ring is accessible to the solvent (Fig. 3B). In contrast in COX-2 the indole is surrounded by several hydrophobic residues and is inaccessible to the solvent (33).

The binding of indomethacin to other enzymes also varies. In mPGES-2 the chlorobenzene ring is buried in the hydrophobic pocket, while the indole ring is accessible to solvent as in the LTB₄ 12HD/PGR-indomethacin complex structure (9). In mPGES-2 the carboxyl group of indomethacin forms hydrogen bonds with a thiol group of cysteine and a bound water (9). In contrast, in PGFS the bound indomethacin is located inside the hydrophobic cavity of the protein and is totally inaccessible as seen in the COX2-indomethacin complex (33, 34). The carboxyl

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group of the indomethacin interacts with the oxygen atoms of phospho-diester bond in NADP⁺, the back-bone nitrogen atom of Gln222 and bound water molecules in the hydrophobic environment (Fig. 6C) (34). In snake venom PLA₂ the indomethacin adsorbs on the hydrophobic wall of the active site and one complete side of the indomethacin surface including the chlorobenzene ring is accessible to solvent. In this case the putatively protonated carboxyl group interacts with a carboxyl group of aspartate residue and surrounding water molecules. These complex structures show that the indomethacin binding mode differs according to the protein in terms of some distinct binding site features.

The inhibition competence of indomethacin can be determined according to the environment of the interaction of the carboxyl group of indomethacin with a protein. In pharmacological studies, COX-2 (IC₅₀ = 15 μ M for preincubated indomethacin) (*36*) and PGFS (IC₅₀ = 4.1 μ M) (*8*) are more competently inhibited by indomethacin than LTB₄ 12HD/PGR (IC₅₀ = 100 μ M) and mPGES-2 (IC₅₀ = 1 mM) (*9*). The inhibitory competence of indomethacin and strict inhibition is achieved when indomethacin is fully buried within the hydrophobic cavity of the protein interior. The polar interaction between the carboxyl group



Fig. 6. Comparison of the binding mode of indomethacin and in the cognate prostanoid for each enzyme. (A) LTB_4 12HD/PGR (PDB id; 1V3V and 2DM6) (17), (B) COX-2 (4COX, 1CVU and 1DDX) (33, 35) and (C) PGFS (1S2A and 1RY0) (34, 40). The indomethacin, substrate or product bound complex structures are superimposed in each enzyme, and the bound ligands and the functional groups interacting with the carboxyl group of the ligands are only represented. The non-bonding interactions are indicated by dashed lines. The carbon atoms of indomethacin,

prostaglandins, arachidonic acid and the functional groups of enzymes are colored in cyan, pink, yellow-green and gray, respectively. The carbon atom numbers of prostaglandins and arachidonic acid are indicated. The α -chain and head group of the 15-oxo-PGE₂ was modeled in the ternary complex structure of LTB₄ 12HD/PGR with 15-oxo-PGE₂ and NADP⁺ in which the electron density of only the ω -chain of 15-oxo-PGE₂ had been defined (PDB id: 1V3V) (17). In COX-2, the bound arachidonic acid is in a non-productive binding mode (35).

of indomethacin and the charged group in the hydrophobic environment as seen in COX-2 (Fig. 6B) (33) and PGFS (Fig. 6C) (34) contributes to the tighter binding of indomethacin due to lower dielectric constants at the hydrophobic interior of the protein compared to the higher dielectric constants found at the solvent accessible environment as seen in the LTB₄ 12HD/PGR (Fig. 6A) and mPGES-2 structures (9). Indeed, the interaction with the carboxyl group is indispensable for indomethacin binding to COXs, since mutation of Arg120 in both COX-1 and COX-2 drastically weakened the inhibition by indomethacin (37, 38) and amide and ester derivatives of the carboxyl group of indomethacin have been shown to be inactive for COX-1 inhibition (39). These results indicate that the interaction of the carboxyl group of indomethacin with polar groups of a protein is a primary determinant for the inhibitory competence of indomethacin, and the optimum interaction can be obtained through adaptation of the flexible indomethacin configuration.

Comparison of the Binding Mode of Indomethacin and Substrate—Indomethacin binding modes are very different to those of the prostanoid substrates. For LTB₄ 12HD/PGR, COX-2 and PGFS, both the indomethacin and substrate complex structures have been determined. Thus it was possible to analyze the binding mode of indomethacin in comparison with that of each bound substrate in order to elucidate whether the indomethacin mimics the binding mode of the natural substrate by superposition of the indomethacin and the corresponding substrate bound complex structures (Fig. 6). In LTB₄ 12HD/PGR, the chlorobenzene ring of bound indomethacin overlaps with the C16-C20 of the alkyl ω -chain in the bound 15-oxo-PGE₂, when monomer 2 of the LTB₄ 12HD/PGR/NADP⁺/indomethacin ternary complex structure is superimposed with the ternary complex structure with 15-oxo-PGE₂ and NADP⁺ (Fig. 6A). In COX-2, the bound indomethacin corresponds to the α -chain (C1-C8) of the PGH₂ complex structure or C5-C14 of the alkyl chain in the arachidonic acid complex structure (Fig. 6B) (33, 35). In PGFS, only the C12-C15 alkyl ω -chain is superimposed to indomethacin (34, 40) (Fig. 6C). Of the crystallographically defined prostanoid substrates, the arachidonic acid and PGH₂ in COX-2 and PGD₂ in PGFS, the carboxyl groups do not share the same interaction with that of indomethacin (Fig. 6, B and C). These results show that there may be little qualitative correlation between the binding mode of indomethacin and the prostanoid substrates indicating that indomethacin does not act as a substrate mimic.

Broad Spectrum of Indomethacin Efficacy—The broad spectrum of indomethacin efficacy can be explained based on the structural insight obtained from the proteinindomethacin complexes; (a) the carboxyl group of the bound indomethacin can interact with a variety of functional groups of target proteins and (b) the bound configuration of the indomethacin is very flexible about the ϕ 1 axis, allowing adaptation to the specific features of the binding site in each target protein whilst maintaining optimum interaction of the carboxyl group as discussed above. The flexible configuration of indomethacin enables it to bind to various proteins in binding modes distinct from those observed for the enzyme substrates.

The data revealed by this study may be useful for the future design of inhibitors. Indeed the two phenyl groups of COX-2 selective inhibitors SC58635 and SC558 are fixed in a configuration similar to that of the *syn*-configuration of indomethacin (33, 41). The development of drugs which

mimic the *anti*-configuration of indomethacin may prove to be most effective against LTB₄ 12HD/PGR with lower efficacy against COX-2, mPGES-2 or PGFS.

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