

In Silico Binding Affinity Study of Lisinopril and Captopril to I/D Intron 16 Variant of Angiotensin Converting Enzyme Protein

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ABSTRACT

ACE gene polymorphism is thought responsible to the difference of response to ACE inhibitor therapy in hypertensive patients. The inhibitory potency of ACE inhibitors are mainly determined by differences in the binding affinity. This study was conducted to investigate the inhibitory potency of lisinopril and captopril by analyzing the binding affinity of ACE protein to lisinopril and captopril *in silico*. Binding affinity was obtained from molecular docking using AutodockVina. Docking calculation showed lisinopril has the higher binding affinity to the C-domain than N-domain ACE, means that lisinopril was found to be more effective to inhibit D variant of ACE protein activity. In case of captopril, captopril showed the same binding affinity of captopril in both N- and C-domain (-6.1 kcal/mol). This result implied that captopril could bind to I and D variant of ACE protein with the same affinity. In conclusion, lisinopril and captopril apparently showed a difference inhibitory potency between I and D variant of ACE, as proven by calculated binding affinity.

Keywords: ACE, Binding affinity, Lisinopril, Captopril

INTRODUCTION

Angiotensin-converting enzyme (ACE) is a zinc metallopeptidase that generates an active vasopressor angiotensin II and inactivates the vasodilator bradykinin¹. ACE protein has two domains (N-domain and C-domain), each possessing a functional active site with Zn binding sequence motif HEXXH^{2,3}. Our previous study suggested that *Alu* insertion in the intron 16 results in the presence of premature termination codon, so the protein only has one active site in the N-domain, while the D allele still has two active sites. This variation is thought responsible to the difference of response to ACE-inhibitors between the two alleles. However, binding of a substrate at one active site makes the other site unavailable for either the same or a different substrate⁴. Several ACE-inhibitors employed clinically show some different inhibitory potencies towards the two active sites that are mainly determined by differences in the binding affinity^{5,6}. Several studies have conducted to investigate the association of ACE gene I/D polymorphism, either with hypertension or ACE-inhibitor response⁶⁻⁸. To our knowledge, there is no study conducted in Indonesia to investigate the potency of ACE-inhibitors in hypertensive patients with ACE gene I/D polymorphism. Therefore, this study was conducted to investigate the potency of lisinopril and captopril in hypertensive patients with ACE gene I/D polymorphism by analyzing the binding affinity of ACE protein to lisinopril and captopril *in silico*.

MATERIAL AND METHODS

Sample Preparation

The 3D structure of lisinopril-N domain ACE complex (2C6N), lisinopril-C domain ACE complex (1O86), and captopril-C domain ACE (1UZF) were retrieved from protein data bank, PDB (<http://www.rcsb.org>). Then, those complexes were separated using UCSF Chimera software (<https://www.cgl.ucsf.edu/chimera>). Captopril obtained from 1UZF complex separation was then used in molecular docking of captopril and N domain ACE.

Molecular Docking

Molecular docking of lisinopril and captopril with ACE protein was performed using AutoDock Vina, PyRx software⁹. Autodock Vina was used due to its accuracy and its speed, which is approximately two orders of magnitude faster than its predecessor, AutoDock 4¹⁰. As there is only one domain that functionally active⁴, molecular docking was performed between lisinopril and captopril with each domain ACE separately. To get the predicted binding affinity, we redocked lisinopril and N-domain ACE (2C6N), lisinopril and C-domain ACE complex (1O86), captopril and tACE complex (1UZF)¹¹⁻¹³. The grid maps we used are 15.767 x 10.854 x 16.102, 13.209 x 15.914 x 19.217, 7.537 x 6.8335 x 10.969 in the dimensions of x, y, and z using 1.000Å spacing, respectively. For captopril and N-domain ACE complex, as there is no crystal structure of the complex, we used 2C6N grid maps. The predicted binding affinity (kcal/mol) is calculated based on the scoring function used in AutoDock Vina. A more

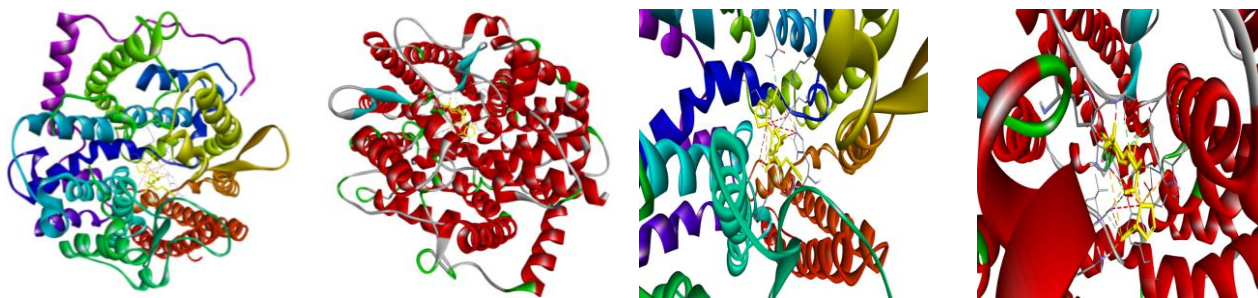


Figure 1: 3D representation of molecular docking between lisinopril and N-domain ACE (left), lisinopril and C-domain ACE (right).

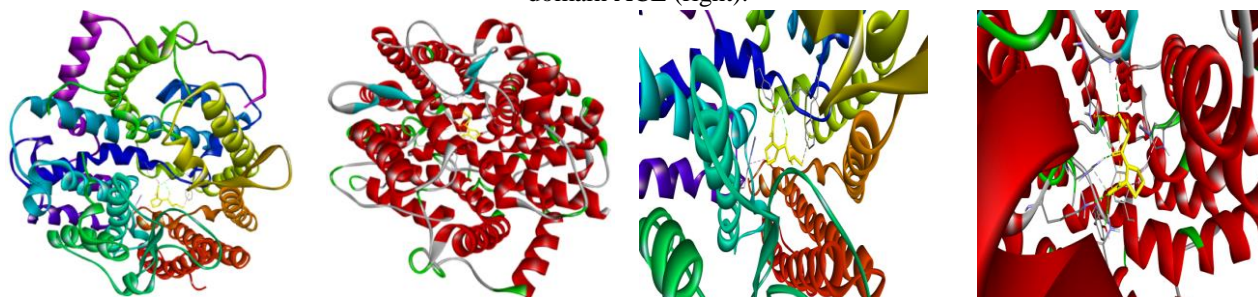


Figure 2: 3D representation of molecular docking between captopril and N-domain ACE (left), captopril and C-domain ACE (right).

Table 1: Binding Affinity of Lisinopril and Captopril with N- and C-domain ACE.

ACE inhibitor	Binding affinity (kcal/mol)	
	N-domain	C-domain
Lisinopril	-7.3	-8.8
Captopril	-6.1	-6.1

negative binding affinity indicates stronger binding. The scoring function in AutoDock Vina is divided into two parts: i) a conformation-dependent part that can be seen as a sum of intramolecular and intermolecular contributions, including steric, hydrophobic, and hydrogen bonding interactions, and ii) a conformation-independent part that depends on the number of rotatable bonds between heavy

DISCUSSION

The concept of free energy is used to determine the binding affinity of protein-ligand complex in docking studies. The negative or low value of free energy indicates the strong binding affinity between protein-ligand complex and that the ligand is in the most favourable conformation¹⁴. Therefore, in the present study, we determined the binding affinity of both lisinopril and captopril to I/D intron 16 variant of Angiotensin Converting Enzyme protein. Our previous study indicates that *Alu* insertion in the intron 16 ACE gene leads to the absence of C-domain ACE, thus the protein only has N-domain, whereas the D variant has both C- and N-domain. As there is only one domain that functionally active⁴, molecular docking was performed between lisinopril and captopril with each domain ACE separately. Our docking calculation indicates that lisinopril has the higher binding affinity for C-domain ACE, means that lisinopril was found to be more effective to inhibit D variant of ACE protein activity. This is consistent with biological experiment, which suggested that K_i of

atoms in the ligand. Each contribution (steric, hydrophobic, hydrogen bonding, and number of rotatable bonds) is given a different weight in the AutoDock Vina scoring function¹⁰.

RESULTS

Binding Affinity of Lisinopril and Captopril with N- and C-domain ACE

To know the difference of inhibitory potency of lisinopril and captopril in I and D variant, we performed molecular docking between lisinopril with N- and C-domain ACE (Fig.1) and captopril with N- and C-domain (Fig.2). The binding affinity of lisinopril was found higher in complex with C-domain than N-domain, while captopril showed the same binding affinity in N- and C-domain (Table 1). lisinopril is lower in C-domain than N-domain¹⁵. Although N- and C-domain ACE shared ~60% homology, there are some residue differences in the active side of both domain¹². Glu 162 in the C-domain ACE is replaced by Asp140 in N-domain. This substitution results in an increased distance between the side chain of Asp140 and lysine side chain of lisinopril, thus the binding affinity of lisinopril to N-domain ACE was lower³. Captopril bound to N- and C-domain with the same affinity (-6.1 kcal/mol). Our result is consistent with previous study that stated captopril was able to bind to the two domain ACE with similar affinity¹⁶. This result means that captopril could bind to the two domain ACE and implied that captopril could bind to I and D variant of ACE protein with the same affinity. However, previous study showed that K_i value of captopril was lower in N-domain ACE than C-domain ACE¹⁵. Given that binding affinity of captopril to N-domain ACE was the same with N-domain, the modest N-domain selectivity of captopril remains unclear¹¹.

CONCLUSION

In conclusion, lisinopril and captopril apparently showed a difference inhibitory potency between I and D variant of ACE, as proven by calculated binding affinity. We found that lisinopril binds to C-domain ACE with the higher affinity than N-domain, means that the inhibitory potency of lisinopril was higher in D variant than I variant of I/D ACE gene polymorphism. In case of captopril, the affinity formed from interaction between captopril with N- and C-domain ACE was the same, indicating that captopril showed the same inhibitory potency for both I and D variant of ACE protein.

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REFERENCES

- Almeida SS, Barros CC, Moraes MR, Russo FJ, Haro AS, Rosa TS, Alves MF, Pesquero JB, Carmona AK, Bacurau RFP, Araujo RC. 2010. Plasma Kallikrein and Angiotensin I-converting Enzyme N- and C-terminal Domain Activities are Modulated by the Insertion/Deletion Polymorphism. *Neuropeptides* (44): 139-143. DOI: 10.106/j.npep.2009.12.003
- Fernandez JH, Hayashi MAF, Antonio CM. Carmago, Goran N. 2003. Structural basis of the lisinopril-binding specificity in N- and C-domains of human somatic ACE. *Biochemical and Biophysical Research Communication* 308: 219-226. DOI:10.1016/S0006-291X (03)01363-9
- Tsakoz AG, Gerothanassis IP. 2005. Domain-Selective Ligand-Binding Modes and Atomic Level Pharmacophore Refinement in Angiotensin I Converting Enzyme (ACE) Inhibitors. *ChemBioChem* 6: 1089-1103. DOI: 10.1002/cbic.200400386
- Skirgello OE, Binevski PV, Pozdnev VF, Kost OA. 2005. Kinetic probes for inter-domain co-operation in human somatic angiotensin-converting enzyme. *Biochem. J.* 391, 641-647. DOI: 10.1042/BJ20050702
- Elisseeva YE, Kugaevskaya EV. 2008. Structure and Physiological Importance of Angiotensin Converting Enzyme Domains. *BIOCHEMISTRY (MOSCOW) SUPPLEMENT SERIES B: BIOMEDICAL CHEMISTRY* Vol 3(3): 237-247. DOI: 10.1134/S1990750809030032
- Bawazier LA, Sja'bani M, Haryana SM, Soesatyo MHNE, Sadewa AH. 2010. Relationship of Angiotensin Converting Enzyme Gene Polymorphism and Hypertension in Yogyakarta, Indonesia. *Acta Med Indones-Indones J Intern Med* Vol. 42(4): 192-198
- Hingorani AD, Jia H, Sevens PA, Hopper R, Dickerson JE, Brown MJ. 1995. Renin-angiotensin system gene polymorphisms influence blood pressure and the response to angiotensin converting enzyme inhibition. *J. Hypertens* 13(12Pt2): 1602-1609
- Schelleman H, Klungel OH, van Dujin CM, Hofman A, A de Boer, Stricker BHCh. 2005. Insertion/Deletion polymorphism of the ACE gene and adherence to ACE inhibitors. *Br J Clin Pharmacol* 59(4): 483-485. DOI:10.1111/J.1365-2125.2004.02332.x
- Trott O, Olson AJ. AutoDock Vina: improving the speed and accuracy of docking with a new scoring function, efficient optimization, and multithreading. *J Comput Chem* 2010, 31(2):455-461.
- Morris GM, Huey R, Olson AJ: Using AutoDock for ligand-receptor docking. *Curr Protoc Bioinformatics* 2008, Chapter 8(Unit 8):14.
- Natesh R, Schwager SLU, Sturrock ED, Acharya KR. 2003. Crystal structure of the human angiotensin-converting enzyme-lisinopril complex. *Nature* 421: 551-554
- Corradi HR, Schwager SLU, Nchinda AT, Sturrock ED, Acharya KR. 2006. Crystal structure of the N domain of human somatic angiotensin I-converting enzyme provides a structural basis for domain-specific inhibitor design. *J. Mol. Biol.* 357: 964-974
- Natesh R, Schwager SLU, Evans HR, Sturrock ED, Acharya KR. 2004. Structural details on the binding of antihypertensive drugs captopril and enalaprilat to human testicular angiotensin I-converting enzyme. *Biochemistry* 43: 8718-8724.
- Harish BM, Devaraju KS, Gopi A, Saraswathi R, Anushree, Babu RL, Sharma SC. 2013. In silico binding affinity study of calcineurin inhibitors to calcineurin and its close associates. *Indian Journal of Biotechnology*. Vol 12, pp 213-217
- Wei L, Clauser E, Ihenc-Gelas F, Corvol P. 1992. The Two Homologous Domains of Human Angiotensin I-converting Enzyme Interact Differently with Competitive Inhibitors. *THE JOURNAL OF BIOLOGICAL CHEMISTRY*. Vol. 267, No. 19 pp. 13398-13405
- Tom B, de Vries R, Saxena PR, Danser AHJ. 2001. Bradykinin Potentiation by Angiotensin-(1-7) and ACE Inhibitors Correlates With ACE C- and N-Domain Blockade. *Hypertension*. 38:95-9