

# Supporting Information

## Increased immune cell infiltration in patient-derived tumor explants treated with Traniplatin: an original Pt(IV) pro-drug based on Cisplatin and Tranilast

Daniele Lo Re<sup>\*a</sup>, Diego Montagner<sup>\*b</sup>, Dina Tolan<sup>c</sup>, Claudio Di Sanza<sup>a</sup>, Mar Iglesias<sup>d, e</sup>, Alexandre Calon<sup>\*d</sup> and E. Giralt<sup>a, f</sup>

<sup>a</sup> Institute for Research in Biomedicine (IRB Barcelona)

C/Baldiri Reixac 10, Barcelona, E-08028, Spain

<sup>b</sup> Department of Chemistry, Maynooth University, Ireland

<sup>c</sup> School of Chemistry, NUI Galway, Ireland

<sup>d</sup> Hospital del Mar Medical Research Institute (IMIM)

C/Dr Aiguader 88, Barcelona, E-08003, Spain

<sup>e</sup> Hospital del Mar, Universidad Autónoma de Barcelona CIBERONC)

Passeig Maritim 25-29 E-8003, Spain

<sup>f</sup> Department of Organic Chemistry

University of Barcelona, Martí i Franquès 1-11

Barcelona E-08028, Spain

Correspondence should be addressed to D.L. ([lore.daniele.mail@gmail.com](mailto:lore.daniele.mail@gmail.com)), D.M. ([diego.montagner@mu.ie](mailto:diego.montagner@mu.ie)), A.C. ([acalon@imim.es](mailto:acalon@imim.es))

### Materials and Methods.

Tranilast was purchased from TCI Europe and used as supplied. NHS (Hydroxysuccinimide), DCC (N,N'-Dicyclohexylcarbodiimide) and K<sub>2</sub>CO<sub>3</sub> were purchased from Sigma Aldrich. Cisplatin and Oxoplatin were synthesized as previously described [1, 2].

All the other chemicals and solvents were of analytical or spectroscopic grade, obtained from commercial sources and used without further purification. Deuterated solvents were obtained from Apollo Scientific.

**Elemental analyses** (carbon, hydrogen and nitrogen) were performed with a PerkinElmer 2400 series II analyzer.

**ESI Mass Spectra** were recorded with a Waters LCT Premier XE Spectrometer.

**ICP-MS:** Platinum determination was performed with an Agilent 7500ce Series Inductively Coupled Plasma-Mass Spectrometer.

**NMR:** <sup>1</sup>H and <sup>13</sup>C spectra were obtained in solution of CDCl<sub>3</sub> or DMSO-*d*<sub>6</sub> and <sup>195</sup>Pt NMR spectrum was obtained in DMF solution (Insert of D<sub>2</sub>O) at 300 K, in 5-mm sample tubes, with an Agilent Varian 500 MHz premium shielded (operating at 500.13, 125.75 and 107.49 MHz respectively). The <sup>1</sup>H chemical shift was referenced to the residual impurity of the solvent. The external reference was Na<sub>2</sub>PtCl<sub>4</sub> in D<sub>2</sub>O (adjusted to δ = -1628 ppm from Na<sub>2</sub>PtCl<sub>6</sub>) for <sup>195</sup>Pt.

**HPLC Studies.** The purity and the stability of TPT was assessed using HPLC. HPLC chromatograms were obtained on a Waters Alliance 2695 with an automatic injector and a photodiode array detector 2998 Waters (Waters, Milford, MA) using a Sunfire C18 column (100 x 4.6 mm x 5 μm, 100 Å, Waters) and software EmpowerPro 2. The flow rate was 1 mL/min using MeCN (1% TFA) and H<sub>2</sub>O (1% TFA). Gradient G0100 were used in all cases. Traniplatin was dissolved in DMF (0.5 ml) and diluted to a final concentration of 0.5 mM using acetonitrile and water solution (1/1).

The reduction of the Traniplatin with ascorbic acid was followed *via* high-performance liquid chromatography (HPLC) using a Phenomenex Luna C18 (5  $\mu$ M, 100 Å, 250 mm  $\times$  4.60 mm i.d.) column at RT at a flow rate of 1.0 mL/min with 254 nm UV detection. Mobile phase containing 80:20 acetonitrile (1% trifluoroacetic acid): water (1% trifluoroacetic acid). Traniplatin was dissolved in DMF (0.5 ml) and diluted to a final concentration of 0.5 mM using acetonitrile and water solution (1/1) with 5 mM ascorbic acid and 2 mM 4-(2-hydroxyethyl)piperazine-1-ethanesulfonic acid (HEPES) buffer (pH 7). The process was followed at 37 °C until complete reduction. The HPLC chromatogram from the reduction reaction is compared with the chromatogram of pure samples of the tranilast.

**Log P<sub>ow</sub> Determination.** The Log P<sub>ow</sub> determination of the traniplatin was conducted using the shake flask method [3]. Traniplatin was dissolved in 0.9% NaCl w/v ultrapure water (presaturated with *n*-octanol for 96 h and left to stand overnight). The solutions were sonicated and filtered through Celite to remove undissolved traniplatin. The initial concentrations of platinum content were determined by ICP-MS. Subsequently, the platinum(IV) solutions were added an equal volume of *n*-octanol (presaturated with 0.9% NaCl w/v ultrapure water for 96 h and left to stand overnight). The heterogeneous mixtures were shaken vigorously for 2 h before centrifuging for 15 min to achieve phase separation. The final concentration of platinum content in the aqueous phase was determined again by ICP-MS, and the water-octanol partition coefficient was calculated. The experiment was done in triplicates.

**Cell Culture.** A549 (non-small lung cancer, human), HT29 (colon adenocarcinoma, human), Hela (cervix adenocarcinoma, human), RAW 264.7 (macrophages, mouse) cells were grown in 75 cm<sup>2</sup> culture flasks (Corning® Flask) as adherent monolayer cultures in Dulbecco's Modified Eagle Medium (DMEM) (GIBCO, ref. 41966-029). PC-3 and C4-2 prostate cancer cells were grown in 75 cm<sup>2</sup> culture flasks (Corning® Flask) as adherent monolayer cultures in RPMI medium 1640 (GIBCO, ref. A10491-01). Both culture mediums were supplemented with 10% heat-inactivated fetal bovine serum, and with Penicillin/Streptomycin (Gibco, 15140-122). Cultures were maintained at 37 °C in a humidified atmosphere containing 5% CO<sub>2</sub>.

**Inhibition of Cell Viability Assay.** Drug effects on exponentially growing tumour cells were determined using XTT assay as described previously. [4] PC3, C4-2, HT29 and A549 were seeded at a density of 3000 cells/well in 96-well plates and incubated for 24h. Thereafter, cancer cells were exposed to drugs at different concentrations during 72h. At 72h, 50  $\mu$ L of XTT/ECR 1:50 solution (ROCHE ref.: 11465015001) and incubated for a further 4 h at 37 °C. Absorbance measured at 475 nm was converted to percentages. UV-vis absorbance was measured at 475 nm using a microplate reader (PowerWave<sub>x</sub>, BIO-TEK). Experiments were performed in triplicated for each drug concentration and carried out independently at least three times. The interpolation analysis was done using dose-dependent inhibition pattern with Prism version 5.00 software (GraphPad Software, USA). The statistical analysis was done using Prism version 5.00 software (GraphPad Software, USA). The paired t-test (two-tailed) was applied.

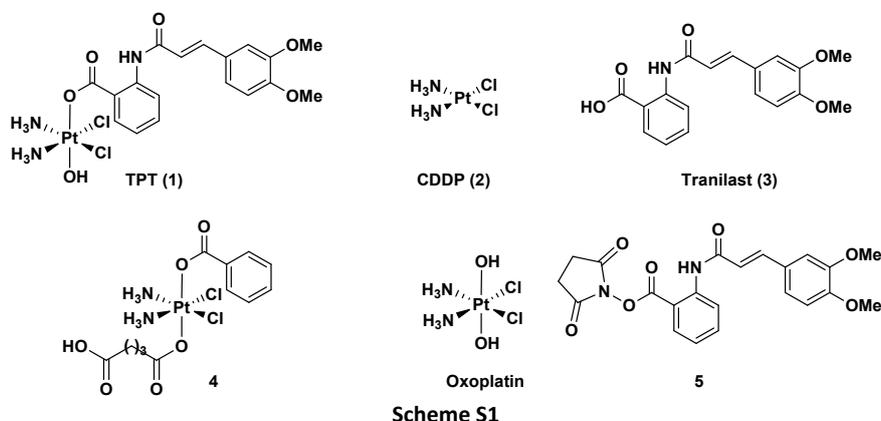
**Apo-ONE Homogeneous Caspase-3/7 Assay.** The homogeneous caspase-3/7 assay kit (Promega, Madison, WI), which provides a profluorescent substrate with an optimized bifunctional cell lysis/activity buffer for caspase-3/7 activity was used. A549 and HT29 cells were seeded at a density of 3000 cells/well in a black 96-well plate and incubated for 24h. Thereafter, cancer cells were exposed to 10  $\mu$ M of **1** or **2** for 24h. The apo-ONE homogeneous caspase-3/7 assay was performed according to the manufacturer's protocol. The buffer and the substrate were mixed and added to the samples. The excitation/emission (483 Ex/525 Em) was recorded on SAFIRE<sup>2</sup> with XFLUOR4SAFIREII Version: V 4.62n software.

**Platinum Uptake Experiment.** Platinum determination was performed with an Agilent 7500ce Series Inductively Coupled Plasma-Mass Spectrometer. For quantitative determination the most abundant isotopes of platinum were measured at  $m/z$  195. A549 and HT29 cells were seeded at a density of 200000 cells/well in a 6-well plate and incubated for 24h. Thereafter, cancer cells were exposed to 10  $\mu$ M of compound **1** or **2** for 4h. After incubation, cells were washed with PBS followed by trypsinization. The cell suspension was centrifuged at 1000 rpm for 5 min at 4 °C and the pellets were stored at -80 °C. The pellets were suspended in 300  $\mu$ L of mQ H<sub>2</sub>O and sonicated during 30 minute. Protein concentration was determinate using the BCA protein assay reagent (Thermo Scientific catalogue number: 23225) according to the manufacturer's instructions (micro-well plate protocol). The remaining cell suspension was transferred into a Teflon reactor with 300  $\mu$ L of HNO<sub>3</sub> 65% and mineralized at 90 °C for 18h. The samples were diluted with mQ H<sub>2</sub>O until 2% HNO<sub>3</sub> concentration was reached. Platinum determination was performed with ICP-MS.

**Human tumor explants.** Freshly resected tumor samples from colorectal cancer patient collected at Hospital del Mar were sliced in equivalent pieces, maintained in culture at 37°C, 5% CO<sub>2</sub> and treated ex vivo with triplatin (TPT, 10  $\mu$ M) or Cisplatin (CDDP, 10  $\mu$ M) during 72h. Explants were cultured in patient-derived CoSC-specific media - Advanced DMEM/F12; 10 mM HEPES; 1x Glutamax; 1x B-27 without retinoic acid; 1x N-2; 1 mM N-Acetyl-L-cysteine and 50 ng/mL EGF [4]. Samples were treated in vitro for 72h and compared to non-treated control. Following in vitro treatment, samples were processed for further pathological analysis -tissue fixation, inclusion and sectioning. Following treatment, samples were processed for histopathological analysis. Immunohistochemical staining for leukocytes (CD45) and apoptotic cells (cleaved Caspase-3) in the biopsy specimens was performed at IRB Histopathology core facility. Immunostainings were carried out on 4- $\mu$ m tissue sections using antibodies against CD45 (Dako, IS751) or cleaved Caspase-3 (Cell Signalling, 9661S) according to standard procedures. Qualitative evaluation was performed by expert pathologist (M.I.) in a blinded fashion with respect to experimental settings. Presence of CD45 (+) or cleaved Caspase-3 (+) cells in high-power field (HPF) was determined for each tumor sample using light microscopy from randomly selected HPFs in the tumor sample.

**Ethical approval.** Samples are obtained under informed consent and approval of the Tumor Bank Committee according to Spanish ethical regulations (Ley Orgánica 15/1999 de diciembre de Protección de Datos de carácter personal –LOPD-). The study follows the guidelines of the Declaration of Helsinki, and patient identity for pathological specimens remains anonymous in the context of this study.

## Synthesis



**2,5-dioxopyrrolidin-1-yl (E)-2-(3-(3,4-dimethoxyphenyl) acrylamido) benzoate (5).** Tranilast (**3**) (0.4 g, 1.22 mmol) and NHS hydroxysuccinimide (0.14 g, 1.21 mmol) were dissolved in 25 mL of dry THF

and DCC, dissolved in dry THF (10 mL, 122 mM), was added dropwise. A white solid immediately precipitated and the reaction mixture was stirred at RT overnight. The white solid obtained was filtered-off and the yellow solution was dried under vacuum to give a yellow solid that was re-dissolved in 20 mL of dichloromethane and kept at 4°C overnight. Another small portion of white solid was formed and removed by filtration. The yellow solution was dried under vacuum obtaining **5** as a yellow solid (321 mg, 62%). <sup>1</sup>H NMR (500 MHz, CDCl<sub>3</sub>): δ = 8.20 (dd, 1H), 7.80 (d, 1H), 7.79 (d, 1H), 7.61 (d, 1H), 7.48 (dd, 1H), 7.18 (d, 1H), 7.16 (s, 1H), 6.90 (d, 1H), 6.71 (d, 1H), 3.94 (s, 3H, OCH<sub>3</sub>), 3.93 (s, 3H, OCH<sub>3</sub>), 2.74 (s, 4H, NHS). HRMS-ESI calcd. for C<sub>22</sub>H<sub>11</sub>O<sub>7</sub>N<sub>2</sub> 425.1343 found 425.1354 [M+H]<sup>+</sup>

**Traniplatin (1).** Oxoplatin (65 mg, 0.194 mmol) and tranilast-NHS (**5**) (75 mg, 0.177 mmol) were suspended in 6 mL of dry DMSO and the mixture was stirred at 60°C for 15 h. The yellow residue (oxoplatin in excess) was filtered off and the yellow solution was lyophilised overnight obtaining a sticky yellow solid. The solid is dissolved in 4 mL of DMF and precipitated by addition of Et<sub>2</sub>O. The solid was washed 3 times with 5 mL of dichloromethane and 2 times with 5 mL of Et<sub>2</sub>O and dried under vacuum overnight giving **1** as a yellow solid (37 mg, 0.057 mmol, 33%). Anal. Calcd. for C<sub>18</sub>H<sub>23</sub>Cl<sub>2</sub>N<sub>3</sub>O<sub>6</sub>Pt: C 33.60, H 3.60, N: 6.53, found C 33.84, H 3.42, N 6.76. <sup>1</sup>H NMR (DMSO-*d*<sub>6</sub>, 500 MHz): δ = 11.33 (s, 1H), 8.71 (dd, 1H, *J*=8.4, 1.2 Hz), 7.94 (dd, 1H, *J*=7.9, 1.7 Hz), 7.52 (d, 1H, *J*=15.6 Hz), 7.51-7.47 (m, 1H), 7.44 (d, 1H, *J*=2.0 Hz), 7.23 (dd, 1H, *J*=8.3, 1.9 Hz), 7.14 (d, 1H, *J*=15.6 Hz), 7.09 (dd, 1H, *J*=7.40, 7.27 Hz), 7.00 (d, 1H, *J*=8.3 Hz), 6.39-5.86 (m, 6H), 3.87 (s, 3H), 3.80 (s, 3H) ppm; <sup>13</sup>C NMR (DMSO-*d*<sub>6</sub>, 125.75 MHz) δ 172.7 (C), 164.4 (C), 150.9 (C), 149.5 (C), 140.8 (CH), 140.2 (C), 132.7 (CH), 132.0 (CH), 128.1 (C), 123.1 (CH), 122.5 (CH), 121.7 (CH), 121.3 (C), 119.7 (CH), 112.0 (CH), 110.1 (CH), 56.4 (CH<sub>3</sub>), 56.0 (CH<sub>3</sub>) ppm; <sup>195</sup>Pt NMR (107.49 MHz DMF insert D<sub>2</sub>O): δ = 985 ppm. HRMS-ESI calcd. for C<sub>18</sub>H<sub>24</sub>O<sub>6</sub>N<sub>3</sub>Cl<sub>2</sub>Pt 643.6084 found 643.0692 [M+H]<sup>+</sup>

Figure S1. <sup>1</sup>H-NMR of Traniplatin (1) in DMSO-d<sub>6</sub>

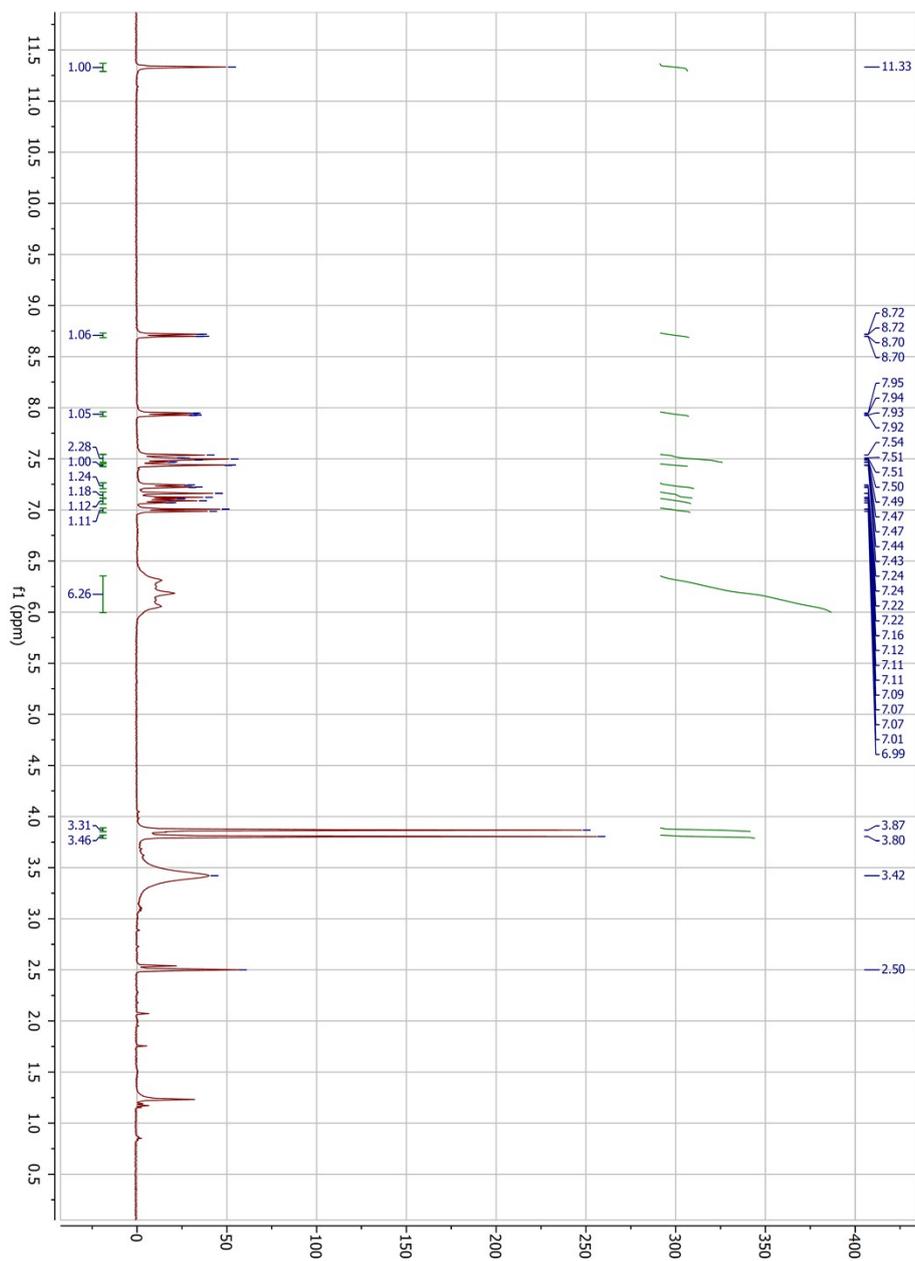
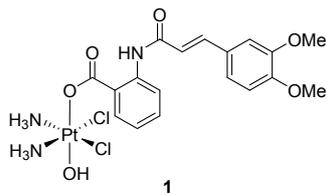


Figure S2.  $^{13}\text{C}$ -NMR of Traniplatin (1) in  $\text{DMSO-}d_6$

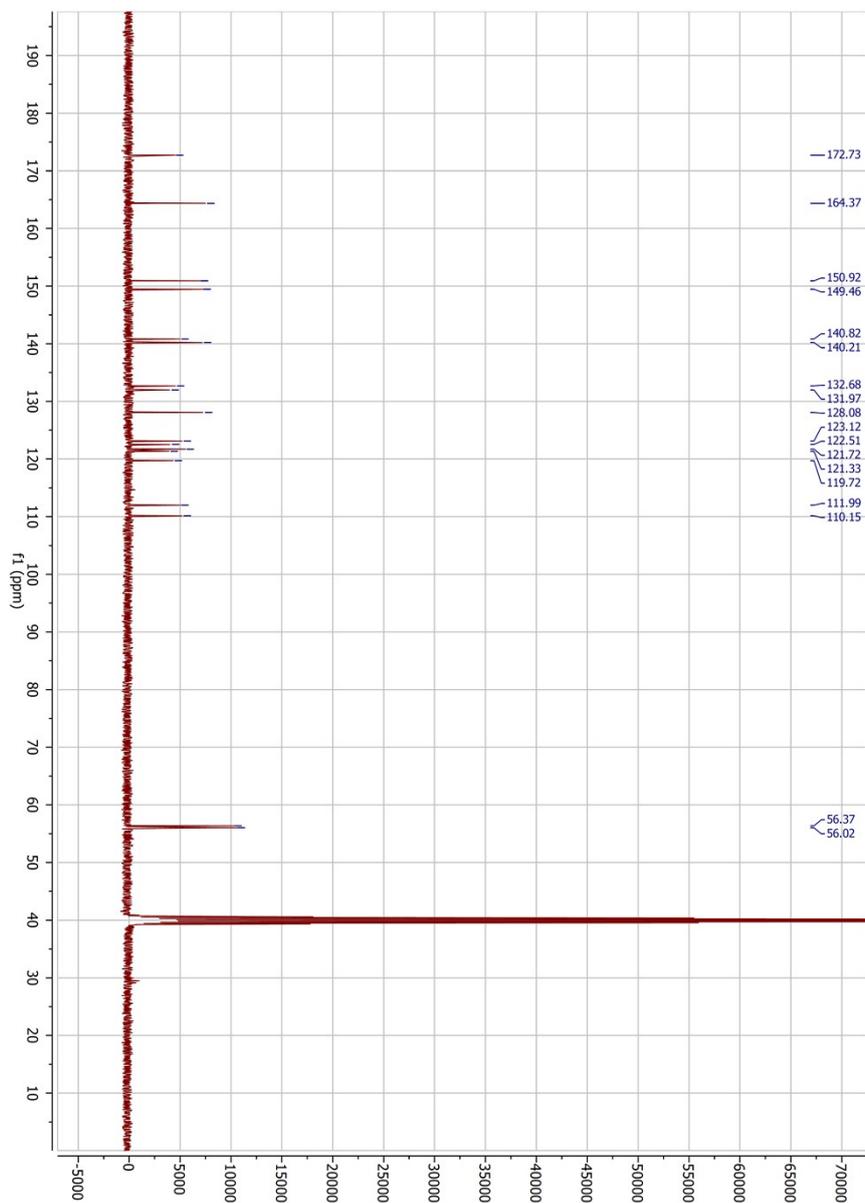
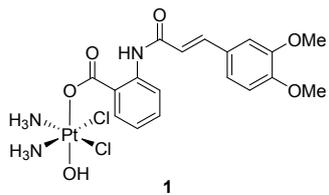


Figure S3. COSY-NMR of Traniplatin (1) in DMSO-*d*<sub>6</sub>

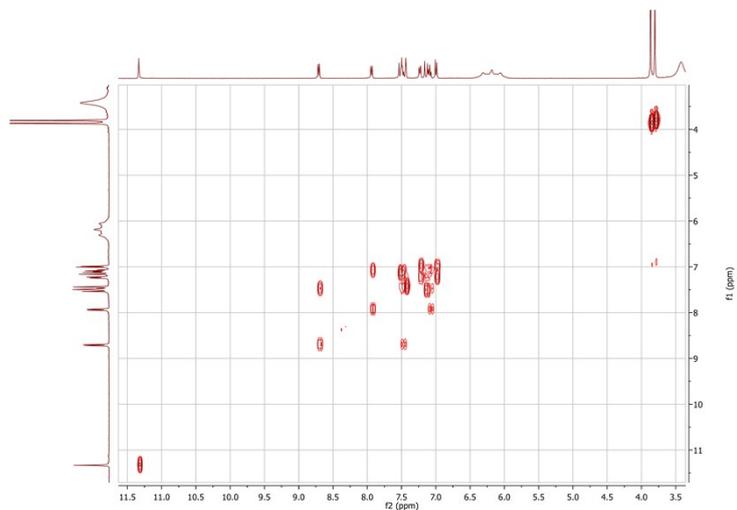
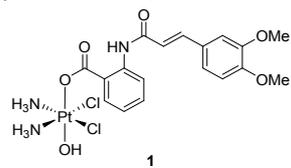
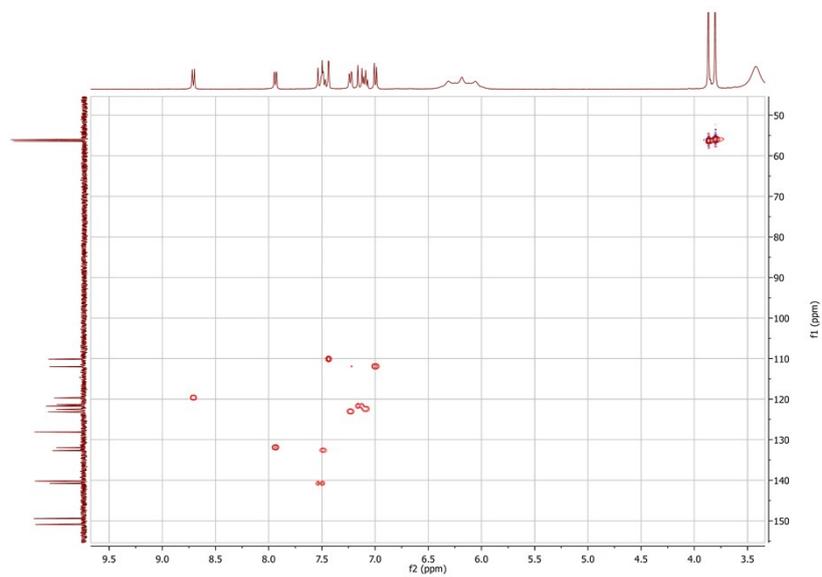
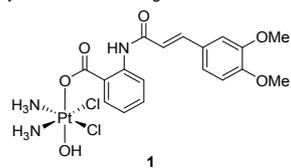
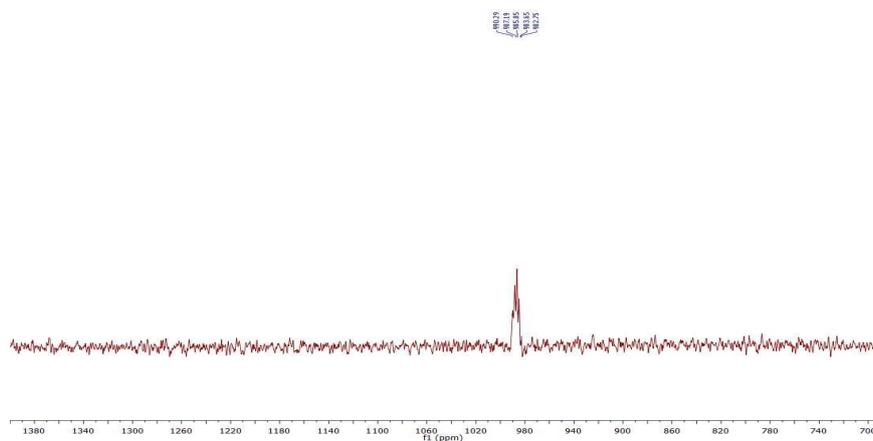


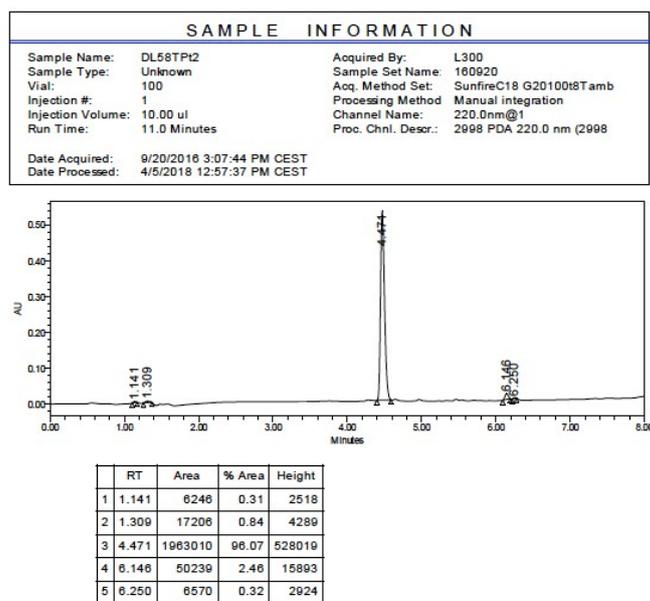
Figure S4. HSQC-NMR of Traniplatin (1) in DMSO-*d*<sub>6</sub>



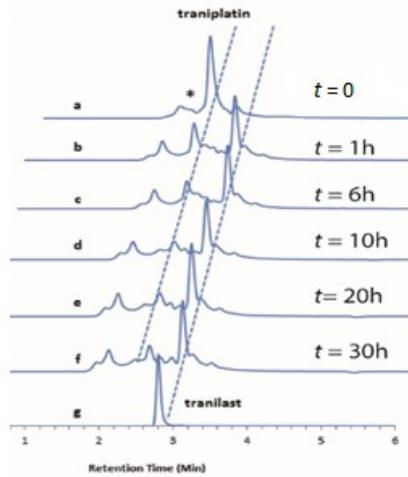
**Figure S5.**  $^{139}\text{Pt}$ -NMR of Traniplatin (**1**) in DMF ( $\text{D}_2\text{O}$ )



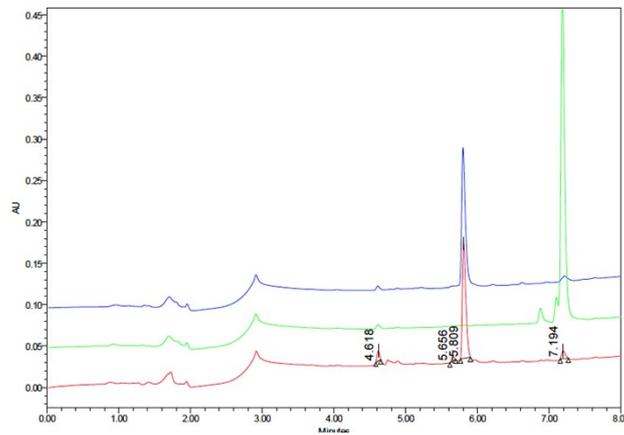
**Figure S6.** HPLC chromatogram of Traniplatin using a Sunfire C18 (mobile phase  $\text{H}_2\text{O}$  1% TFA and ACN 1% TFA).



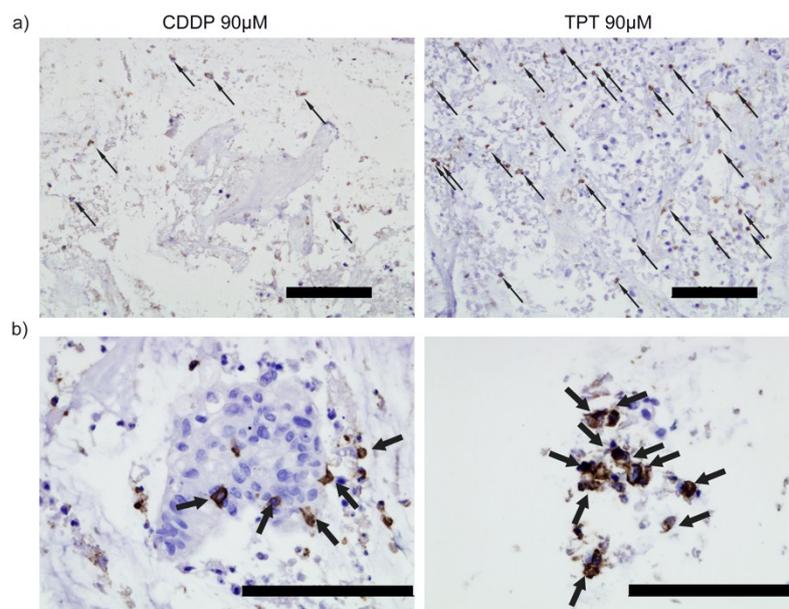
**Figure S7.** HPLC chromatogram showing : a) traniplatin (**1**) + Ascorbic Acid (AA) at  $t = 0$  ; b) traniplatin **1**+AA  $t = 1\text{h}$ ; c) **1**+AA  $t = 6\text{h}$ ; d) **1**+AA  $t = 10\text{h}$ ; e) **1**+AA  $t = 20\text{h}$ ; f) **1**+AA  $t = 30\text{h}$ ; g) tranilast (**3**). \* is AA.



**Figure S8.** HPLC chromatogram of Traniplatin at  $t=0$  (blue line), Tranilast (green line) and Traniplatin at  $t=24h$  in  $H_2O/ACN$  (red line).



**Figure S9.** a-b) Cell membrane CD45 reactivity in representative tumor explants treated *ex vivo* with CDDP 90  $\mu M$  (left panels) or TPT 90  $\mu M$  (right panels) for 72h; arrows point to positive -immune-cells in the tumor. Scale bars, 200  $\mu m$ . a) Explants treated with TPT showed overall occasional presence of CD45+ (right panel) compared to CDDP-treated tumor explants (left panel). b) left panel: a hotspot of 5 CD45+ cells detected in explant treated with CDDP, right panel: a hotspot of 10 CD45+ cells explants detected in TPT treated explant.



[1] S. C. Dhara *Indian J. Chem.* 1970, **8**, 193-197.

[2] M. Galanski, B. K. Keppler, *Inorg. Chem.* 1996, **35**, 1709-1711.

[3] Test No. 107: Partition Coefficient (n-octanol/water): Shake Flask Method; OECD Publishing: Paris, 1995.

[4] A. Calon et al, *Cancer Cell*, **2012**, 22, 571-584; A. Calon et al, *Nature Genetics*, **2015**, 47, 320-329