Differences in the pharmacology of cannabidiol and cannabidiol-dimethylheptyl at the type 1 cannabinoid receptor CB1R

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Introduction: Despite almost identical structures, (-)-cannabidiol (CBD) and its derivative, (-)-cannabidioldimethylheptyl (CBD-DMH), exhibit distinct pharmacology *in vivo* that can be attributed to the type 1 and type 2 cannabinoid receptors (CB1R and CB2R).(1) The purpose of this study was to determine how the structural differences between CBD and CBD-DMH relate to their disparate pharmacology at CB1R.

Method: HEK293 cells expressing human CB1R-GFP² \pm βarrestin1-Rluc were treated with CBD or CBD-DMH \pm the cannabinoid agonist CP55,940 or vehicle (1% DMSO in PBS). Inhibition of cAMP (cAMP luciferase reporter assay; Promega)(2) and βarrestin1 recruitment [bioluminescence resonance energy transfer (BRET)](3) were measured. Data were fit to the operational model of allosterism.(3) AutoDock 4.2(4) was used to simulate the binding of CBD and CBD-DMH relative to CP55,940, SR141716A (inverse agonist), and Org27569 (CB1R allosteric modulator) using the recently published crystal structures of agonist-bound (*i.e.* active) and antagonist-bound (*i.e.* active) human CB1R (PDB ID: 5TGZ, 5XRA).(5,6)

Results: CBD was a negative allosteric modulator (NAM) (n=6),(3) and CBD-DMH was a mixed agonist/positive allosteric modulator (ago-PAM) (n=6) of CP55,940 in CB1R cAMP inhibition (Fig. 1A) and β arrestin1 recruitment assays (Fig. 1B). In ligand docking simulations, CBD and Org27569 bound the outer vestibule in the inactive CB1R conformation, separate from that of CP55,940 (Fig. 1C). CBD shared a binding site with CP55,940 in the active CB1R conformation model (Fig. 1D). The observed binding site for CBD-DMH overlapped with CP55,940 and Org27569 in both active and inactive CB1R model conformations (Fig. 1C,D).

Conclusions: The pharmacological activity and modelled binding of CBD and CBD-DMH at CB1R may explain the disparate effects of these compounds observed *in vivo*.(1)These data suggest ligand binding to CB1R may be fluid, such that ligands transition between allosteric and orthosteric sites of action.

References:

(1) Fride E et al. (2005). Neuropharmacol 48, 1117-1129.

(2) Laprairie RB et al. (2016). ACS Chem Neurosci 7, 776-798.

(3) Laprairie RB et al. (2015). Br J Pharmacol 172, 4790-4805.

- (4) Morris GM et al. (2009). J Comput Chem 16, 2785-2789.
- (5) Hua T et al. (2016). Cell 167, 750-762.

(6) Hua T et al. (2017). Nature 574, 468-471.

Figure 1: CBD is a CB1R NAM. CBD-DMH is a CB1R ago-PAM. CBD (A) and CBD-DMH (B) had opposing effects on potency (Log α) and efficacy (Log β) of CP55,940 dependent cAMP inhibition and β arrestin. (C) AutoDock simulations of CP55,940, CBD, CBD-DMH, SR141716A, and Org27569 binding to agonist-bound (5XRA) and antagonist-bound (5TGZ) models of human CB1R.

