

[Borneo Journal of Pharmacy](https://journal.umpr.ac.id/index.php/bjop) *<https://journal.umpr.ac.id/index.php/bjop/article/view/7218>* Vol 7 Issue 3 August 2024 DOI:<https://doi.org/10.33084/bjop.v7i3.7218> e-ISSN[: 2621-4814](https://portal.issn.org/resource/ISSN/2621-4814)

Research Article

Affinity of Nintedanib Towards New Candidate Target for Idiopathic Pulmonary Fibrosis

© 2024 Hari Baskar Balasubramanian, Sima Biswas, Maria Talmon, Filippo Patrucco, Piero Emilio Balbo, Luigia Grazia Fresu, Angshuman Bagchi. Published by [Institute for Research and Community Services](https://journal.umpr.ac.id/) [Universitas](https://umpr.ac.id/) [Muhammadiyah Palangkaraya.](https://umpr.ac.id/) This is an Open Access article under the CC-BY-SA License [\(http://creativecommons.org/licenses/by-sa/4.0/\)](http://creativecommons.org/licenses/by-sa/4.0/). DOI[: https://doi.org/10.33084/bjop.v7i3.7218](https://doi.org/10.33084/bjop.v7i3.7218)

INTRODUCTION

Idiopathic pulmonary fibrosis (IPF) is a progressive lung disease characterized by the accumulation of fibrotic tissue, leading to impaired gas exchange and ultimately respiratory failur[e](#page-11-0)**¹** . Despite ongoing research, the precise molecular mechanisms underlying IPF development remain elusiv[e](#page-11-1)**²** . A variety of factors have been implicated in IPF pathogenesis, including cigarette smoking, viral infections, chronic aspiration, exposure to environmental pollutants, genetic predisposition, and certain drug[s](#page-11-2)**³** . The histopathological hallmark of IPF is the presence of fibroblast foci, where myofibroblasts and excessive collagen deposition contribute to the distortion of lung architectur[e](#page-11-0)**¹** . Alveolar macrophages play a pivotal role in initiating

How to cite: Balasubramanian HB, Biswas S, Talmon M, Patrucco F, Balbo PE, Fresu LG, et al. Affinity of Nintedanib Towards New Candidate Target for Idiopathic Pulmonary Fibrosis. Borneo J Pharm. 2024;7(3):264-77. do[i:10.33084/bjop.v7i3.7218](https://doi.org/10.33084/bjop.v7i3.7218)

the fibrotic process by secreting proinflammatory and profibrotic cytokines that stimulate mesenchymal cell proliferation and collagen deposition**[4,](#page-11-3)[5](#page-11-4)** .

Currently, only two drugs, pirfenidone**[6](#page-11-5)** and nintedani[b](#page-11-6)**⁷** , are approved for IPF treatment. While these medications can slow disease progression as measured by forced vital capacity (FVC), they do not reverse the fibrotic tissue changes observed on high-resolution computed tomography (CT) scans. Consequently, they often fail to improve disease-related symptoms and quality of life for IPF patient[s](#page-11-2)**³** . Ongoing research efforts are focused on developing novel therapeutic approaches targeting various pathways involved in IPF pathogenesis. These include new drug delivery systems and molecules that act on distinct mechanisms**[8,](#page-11-7)[9](#page-11-8)** .

Nintedanib, a tyrosine kinase inhibitor, targets platelet-derived growth factor (PDGF), fibroblast growth factor (FGF), and vascular endothelial growth factor (VEGF) receptors, inhibiting their intracellular signaling by competitively binding to the ATP-binding site**[10](#page-11-9)**. While nintedanib has demonstrated efficacy in treating idiopathic pulmonary fibrosis (IPF), this study aimed to explore its potential interactions with additional proteins implicated in IPF pathogenesis. Specifically, we investigated the binding affinity of nintedanib to RhoE-ROCK1, c-Jun N-terminal kinase (JNK), interleukin (IL)-13, human galectin-3 (Gal-3), autotaxin, human chitotrosidase-1 (CHIT-1) and the Rho-associated protein kinase-2 (ROCK2). These proteins have been implicated in the development or progression of IPF**⁸** [,](#page-11-7) suggesting that their modulation might offer therapeutic benefits.

Autotaxin, an enzyme responsible for lysophosphatidic acid (LPA) production, plays a crucial role in IPF by promoting fibroblast migration and inducing apoptosis of lung epithelial cells. Elevated levels of autotaxin and LPA have been observed in the bronchoalveolar lavage fluid and exhaled breath of IPF patients**[11](#page-11-10)[-14](#page-11-11)**. Targeting autotaxin could potentially mitigate the fibrotic process in IPF.

Galectin-3, a lectin involved in fibrosis, regulates the expression of transforming growth factor beta (TGF-β) receptors and has been found to be elevated in IPF patients**[15](#page-12-0)**. The Rho-ROCK pathway, implicated in IPF fibrosis, is activated by oxidative stress and plays a role in regulating the cytoskeleton and cell motility**[16](#page-12-1)**. Targeting the Rho-ROCK pathway has shown promise in reducing fibrosis in preclinical models**[16-](#page-12-1)[18](#page-12-2)** .

Interleukin-13, a pro-fibrotic cytokine, is involved in asthma and has been associated with IPF pathogenesis**[19-](#page-12-3)[22](#page-12-4)**. While IL-13 inhibitors have shown efficacy in asthma, their effectiveness in IPF is limited. However, the combination of pirfenidone and lebrikizumab has demonstrated positive effects in reducing exacerbations in IPF patients**[23](#page-12-5)** .

Chitotrosidase-1, an enzyme involved in chitin degradation, has been implicated in fibrosis by modulating TGF-β and IL-13 signaling**[24,](#page-12-6)[25](#page-12-7)**. Targeting CHIT-1 has shown promise in reducing fibrosis in preclinical models**[26](#page-12-8)** .Finally, the JNK pathway, involved in inflammation and fibrosis, is activated in IPF and has been shown to contribute to the fibrotic process^{[27,](#page-12-9)[28](#page-12-10)}. JNK inhibitors have demonstrated efficacy in reducing fibrosis in preclinical models**[29,](#page-12-11)[30](#page-13-0)** .

Existing literature lacks studies investigating the molecular interactions between nintedanib and ancillary proteins implicated in IPF. To address this knowledge gap, we employed molecular docking to predict and analyze the binding interactions of nintedanib with these proteins. By identifying potential alternative targets, this study aims to elucidate the mechanisms underlying nintedanib's efficacy and explore avenues for developing novel therapeutic strategies.

MATERIALS AND METHODS

Materials

The three-dimensional (3D) structures of target proteins, including RhoE-ROCK1 (PDB ID: 2V55), JNK (PDB ID: 3V6R), IL-13 (PDB ID: 4I77), human Gal-3 (PDB ID: 5H9P), autotaxin (PDB ID: 6W35), human CHIT-1 (PDB ID: 6Z8E), and ROCK2 (PDB ID: 7JNT), were retrieved from the Protein Data Bank (PDB). Additionally, the structures of VEGFR2 (PDB ID: 3C7Q) and chain A and B of FGFR1 (PDB ID: 1FGK) were obtained for use as positive controls, as nintedanib is known to bind these proteins. The 3D structure of the ligand nintedanib (PubChem CID: 135423438) was retrieved from the PubChem database. A summary of the software, web servers, and databases used in this study is provided in **[Table I](#page-2-0)**.

Table I. The software, web servers, and databases used.

Methods

Preparation of receptor and ligand structures

Co-crystallized molecules and crystallographic water molecules were removed from the three-dimensional coordinate files using Discovery Studio Visualizer 2.5. This step was necessary to ensure that the protein structures were free of extraneous molecules for accurate docking calculations**[31](#page-13-1)**. Subsequently, the protein structures were geometrically optimized using Discovery Studio Visualizer 2.5, employing a standard energy minimization protocol to alleviate steric clashes and bond distortions. The ligand molecule was also optimized using the same software and protocol.

Prediction of active sites

Accurate identification of a protein's active site is crucial in *de novo* drug design and molecular docking approaches. This knowledge facilitates the generation of near-native conformations for the receptor-ligand complex, ultimately contributing to the success of the docking study**[32](#page-13-2)**. Here, the COACH server was employed to predict the active site amino acid residues for all target proteins**[33](#page-13-3)**. Additionally, the active site residues of VEGFR2 and FGFR1 were retrieved from the literature for comparison.

Molecular docking analysis

A molecular docking study was performed using the AutoDock 4 software suite. AutoDock employs a Lamarckian genetic algorithm to predict the binding orientation and affinity of small molecules (ligands) to macromolecules (receptors)**[34](#page-13-4)** . Ligand structures were prepared using Discovery Studio Visualizer 2.5. Polar hydrogen atoms were added, Kollman united atom type charges were assigned, fragmental volumes were calculated, and solvation parameters were set using AutoDockTools. These parameters were saved for subsequent docking simulations.

Binding site information for each ligand-receptor complex was identified using the COACH server and incorporated into AutoDock**[33](#page-13-3)**. AutoGrid was utilized to generate a grid map encompassing the binding site residues of the receptor protein. This grid-based approach optimizes computational efficiency and improves docking accuracy. Lamarckian genetic algorithm searches were performed for each ligand-receptor complex using AutoDock. Each docking simulation yielded ten unique ligand conformations within the defined binding site.

Prediction of the physiochemical properties of the ligand

To assess the drug-like properties of nintedanib, we employed the admetSAR server and the Lipinski rule of five**[28](#page-12-10)**. The Lipinski rule of five is a set of guidelines used to evaluate a ligand's potential for oral bioavailability. The admetSAR server provides a user-friendly interface to visualize various physiochemical and pharmacological properties of ligands relevant to drug discovery, includingLogP (octanol-water partition coefficient), hydrogen bond donor and acceptor count, molecular weight, and rotatable bond count. These properties are crucial factors influencing a ligand's potential as a drug candidate. The admetSAR server was used to assess the combined effects of these properties, along with pharmacokinetics and pharmacodynamics, and generate a drug-likeness score.

Data analysis

The Discovery Studio Visualizer 2.5 was employed to visualize the interactions between the receptor and ligand within the protein-ligand complexes. LigPlot+, a web-based tool, was used to analyze the binding interaction profile in detail. This tool calculates the various non-covalent interactions (e.g., hydrogen bonds, hydrophobic interactions) established between the ligand and the receptor.

RESULTS AND DISCUSSION

Analysis of the active sites of the receptor

Amino acid residues within the active sites of proteins play crucial roles in ligand binding interactions. Understanding these interactions is vital for drug discovery and protein-ligand docking studies**[35](#page-13-5)**. We employed the COACH server to predict potential ligand binding sites using the amino acid sequences and structural information of the receptor proteins. The results of these analyses are presented in **[Tables](#page-2-0) II**to **[VII](#page-4-0)**. Given the diverse methodologies employed by the various tools within the COACH server, we adopted a consensus approach to analyze the results. By considering the outputs from all tools, we aimed to identify consistent predictions regarding potential ligand binding sites.The consensus amino acid residues present in the binding site of the proteins were used for docking purposes. We used the method of directed docking by specifying the amino acid residues of the ligand proteins, by looking for amino acid residues that always appear in the results of each test parameter (COACH server, TM SITE, S-SITE, and COFACTOR). The results show that there are 8, 9, 7, 10, 9, and 8 consensus amino acids in CHIT-1, ROCK2, Gal-3, RhoE-ROCK1, JNK, and autotaxin, respectively.

Table II. COACH server results of human CHIT-1 (PDB ID: 6Z8E).

Table III. COACH server results of ROCK2 (PDB ID: 7JNT).

Table IV. COACH server results of Gal-3 (PDB ID: 5H9P).

Table V. COACH server results of RhoE-ROCK1 (PDB ID: 2V55).

Parameter	Amino acid residues
COACH server	ILE70, GLY71, SER72, VAL78, ALA91, LYS93, ILE124, MET146, GLU147, LEU148, MET149, ASP150, ALA151,
	ASN152, SER193, ASN194, VAL196, LEU206, ASP207
TM SITE	ILE70, GLY71, VAL78, ALA91, LYS93, ILE124, MET146, GLU147, LEU148, MET149, ASP150, ALA151, ASN152,
	SER193, ASN194, VAL196, LEU206, ASP207
S-SITE	ILE70, GLY71, SER72, GLY73, GLN75, GLY76, VAL78, ALA91, LYS93, GLJU111, MET115, ILE124, LEU144,
	MET146, GLU147, LEU148, MET149, ASP150, ALA151, ASN152, GLN155, SER193, ASN194, VAL196, LEU206,
	ASP207, PHE208
COFACTOR	VAL78, ALA91, LYS93, ARG107, GLU111, ILE124, LEU144, MET146, MET149, ASP150, ALA151, GLN155,
	LEU206, ASP207
Consensus binding site	VAL78, ALA91, LYS93, ILE124, MET149, ASP150, ALA151, LEU206, ASP207

Table VI. COACH server results of JNK (PDB ID: 3V6R).

Table VII. COACH server results of autotaxin (PDB ID: 6W35).

Parameter	Amino acid residues
COACH server	ILE168, ASP172, LYS209, THR210, PHE211, LEU217, ALA218, ASN231, PHE274, PHE275, TYR307, ASP312,
	HIS316, HIS475, MET513
TM SITE	ILE168, ASP172, LYS209, THR210, PHE211, LEU217, ALA218, ASN231, PHE274, PHE275, TYR307, ASP312,
	HIS316, HIS475, MET513
S-SITE	ILE168, SER170, ASP172, LYS209, THR210, PHE211, LEU214, LEU217, ALA218, ASN231, LEU244, TRP255,
	TRP261, PHE274, PHE275, ALA305, TYR307, ASP312, HIS316, ASP359, HIS360, HIS475, MET513
COFACTOR	ILE168, SER170, THR210, PHE211, LEU214, ALA218, ILE228, ASN231, LEU244, TRP255, TRP261, PHE274,
	ALA305, TYR307, ASP312, HIS316, HIS475
Consensus binding site	THR210, PHE211, ALA218, ASN231, TYR307, ASP312, HS316, HIS475

Molecular docking simulations (Site-specific and blind docking)

Molecular docking simulations were conducted using AutoDock 4.0 to predict the binding interactions between nintedanib and the target proteins. AutoDock 4 employs a genetic algorithm for docking simulations, generating a set of potential protein-ligand complex conformations. These conformations were ranked based on their binding free energy values, with those exhibiting the most favorable binding energies selected for further analysis (**[Table VIII](#page-4-1)**).Given the known amino acid residues involved in nintedanib binding, site-directed docking was employed for these proteins. For other proteins where binding site information was unavailable, both blind and site-specific docking simulations were performed.

For each receptor protein, two sets of docking experiments were performed: site-specific (directed) and blind docking. Directed docking utilized previously identified binding site information to constrain the ligand's search space. In contrast, blind docking allowed the ligand to explore the entire receptor protein surface to identify the most favorable binding site. This dual approach provided a more comprehensive assessment of potential binding interactions^{[36](#page-13-6)}.

The binding free energy values obtained from both docking methods were analyzed to identify the most promising binding conformations. LigPlot⁺ was used to visualize the binding interactions between the ligand and the receptor proteins. While the COACH server could not identify specific binding sites for IL-13, we conducted blind docking simulations for this molecule. As nintedanib's binding sites on VEGFR2 and FGFR1 are well-established, control experiments did not involve blind docking for these receptors. Our prime focus in this study is to check the interaction pattern of the Nintedanib with the following proteins RhoE-ROCK1, JNK, IL-13, Gal-3, autotaxin, CHIT-1, and ROCK2, therefore the co-crystal/reference ligands were removed from their structures. While nintedanib displayed favorable binding affinities for all target proteins, RhoE-ROCK1, CHIT-1, and JNK emerged as the most promising targets based on their binding free energy values. As detailed in **[Table IX](#page-5-0)**, we employed the following docking protocols for each protein. The binding interactions between nintedanib and these receptor proteins are depicted in **[Figures 1](#page-5-0)** and **[2](#page-8-0)**.

Table IX. Binding free energy from docking results.

Figure 1. The binding interactions between the ligand and the different protein receptors (site-specific) of **a**: VEGFR2; **b**: FGFR1 Chain-A; **c**: FGFR1 Chain-B; **d**: ROCK2; **e**: CHIT-1; **f**: Gal-3; **g**: JNK; **h**: RhoE-ROCK1; and **i**: autotaxin. In each panel, **A**-represents the binding of the ligand with the receptor protein (the receptor protein is represented in the cartoon. The ligand is presented in ball stick model). **B**-represents the amino acid residues of the receptor protein binding with the ligand. C-represents the various types of non-covalent interactions during the binding of the ligand with the receptor.

g

Figure 2. The binding interactions between the ligand and the different protein receptors (blind docking) of **a**: IL-13; **b**: autotaxin; **c**: Gal-3; **d**: CHIT-1; **e**: JNK; **f**: RhoE-ROCK1; and **g**: ROCK2. In each panel, **A**-represents the binding of the ligand with the receptor protein (the receptor protein is represented in the cartoon. The ligand is presented in ball stick model). **B**-represents the amino acid residues of the receptor protein binding with the ligand. **C**-represents the various types of non-covalent interactions during the binding of the ligand with the receptor.

Physiochemical and pharmacodynamics properties of the ligand

We conducted a comprehensive ADMET (absorption, distribution, metabolism, excretion, and toxicity) profile analysis for the ligand molecule (**[Table X](#page-9-0)**). The ADMET study was unable to be conducted using other web servers due to limitations. SwissADME could not analyze nintedanib due to the length of its SMILES character string (exceeding 200 characters). Additionally, pkCSM was undergoing maintenance during the time of this study. Additionally, the Lipinski rule of five was applied to assess the ligand's drug-likeness properties (**[Table XI](#page-10-0)**). These results indicate that nintedanib is most likely absorbed from the human intestine, has low oral bioavailability, may inhibit and be a substrate for P-glycoprotein, and is moderately toxic when administered orally in a single dose. The results indicate that the ligand possesses favorable characteristics for drug development, suggesting its potential as a promising therapeutic candidate. These results are relevant as reported by Wind *et al*[.](#page-11-6) **⁷**previously.

Table X. List of drug-likeliness properties of nintedanib.

Parameters	Values
Molecular mass (Da)	541
Hydrogen bond donor	
Hydrogen bond acceptors	
LogP	2.2736
Molar refractivity (m^3/mol)	155.623642

Table XI. ADMET profile of nintedanib.

CONCLUSION

This study investigated the binding interactions of nintedanib with several ancillary proteins implicated in the pathogenesis of IPF, including RhoE-ROCK1, JNK, IL-13, Gal-3, autotaxin, and CHIT-1. Nintedanib is a well-established inhibitor of VEGFR2, PDGF, and FGFR1, which are key drivers of IPF. Our molecular docking simulations revealed that nintedanib exhibits strong binding affinities to both autotaxin and RhoE-ROCK1, comparable to its interactions with VEGFR2 and FGFR1. These findings suggest that nintedanib might exert additional beneficial effects in IPF treatment by targeting these alternative pathways. However, further in vitro studies are warranted to validate the functional implications of these binding interactions and elucidate the precise mechanisms through which nintedanib could influence IPF progression.

ACKNOWLEDGMENT

The author would like to express his gratitude to the Department of Biotechnology, Government of India, for funding this research (Grant sanction no.:BT/PR40162/BTIS/137/48/2022). The infrastructural support provided by the DBT-funded Bioinformatics and Integrative Systems Biology (BIF) Center at the University of Kalyani is also gratefully acknowledged. The author wishes to thank the University of Kalyani for its continued support.

AUTHORS' CONTRIBUTION

Conceptualization:Hari Baskar Balasubramanian, Angshuman Bagchi, Luigia Grazia Fresu, Filippo Patrucco, Piero Emilio Balbo **Data curation**: Hari Baskar Balasubramanian, Angshuman Bagchi, Sima Biswas **Formal analysis**: Hari Baskar Balasubramanian, Sima Biswas **Funding acquisition**:- **Investigation**: Hari Baskar Balasubramanian, Angshuman Bagchi, Sima Biswas **Methodology**: Hari Baskar Balasubramanian, Angshuman Bagchi, Sima Biswas **Project administration**: Angshuman Bagchi **Resources**: Angshuman Bagchi **Software**:Angshuman Bagchi, Sima Biswas **Supervision**:Angshuman Bagchi, Luigia Grazia Fresu **Validation**: Angshuman Bagchi **Visualization**: Angshuman Bagchi, Luigia Grazia Fresu **Writing - original draft**: Angshuman Bagchi, Luigia Grazia Fresu, Maria Talmon **Writing -review & editing**: Hari Baskar Balasubramanian, Angshuman Bagchi, Maria Talmon

DATA AVAILABILITY

None.

CONFLICT OF INTEREST

The authors have no conflicts of interest to declare that are relevant to the content of this article.

REFERENCES

- 1. Phan THG, Paliogiannis P, Nasrallah GK, Giordo R, Eid AH, Fois AG, et al. Emerging cellular and molecular determinants of idiopathic pulmonary fibrosis. Cell Mol Life Sci. 2021;78(5):2031–57. DOI[: 10.1007/s00018-020-03693-7;](https://doi.org/10.1007/s00018-020-03693-7) PMCID[: PMC7669490;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc7669490/) PMID[: 33201251](https://pubmed.ncbi.nlm.nih.gov/33201251/)
- 2. Sgalla G, Iovene B, Calvello M, Ori M, Varone F, Richeldi L. Idiopathic pulmonary fibrosis: pathogenesis and management. Respir Res. 2018;19(1):32. DOI[: 10.1186/s12931-018-0730-2;](https://doi.org/10.1186/s12931-018-0730-2) PMCID[: PMC5824456;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc5824456/) PMID[: 29471816](https://pubmed.ncbi.nlm.nih.gov/29471816/)
- 3. Martinez FJ, Collard HR, Pardo A, Raghu G, Richeldi L, Selman M, et al. Idiopathic pulmonary fibrosis. Nat Rev Dis Primer. 2017;3:17074. DOI[: 10.1038/nrdp.2017.74;](https://doi.org/10.1038/nrdp.2017.74) PMID[: 29052582](https://pubmed.ncbi.nlm.nih.gov/29052582/)
- 4. Gross TJ, Hunninghake GW. Idiopathic pulmonary fibrosis. N Engl J Med. 2001;345(7):517–25. DOI: [10.1056/nejmra003200;](https://doi.org/10.1056/nejmra003200) PMID[: 11519507](https://pubmed.ncbi.nlm.nih.gov/11519507/)
- 5. Degryse AL, Lawson WE. Progress Toward Improving Animal Models for Idiopathic Pulmonary Fibrosis. Am J Med Sci. 2011;341(6):444–9. DOI[: 10.1097/maj.0b013e31821aa000;](https://doi.org/10.1097/maj.0b013e31821aa000) PMCID[: PMC3103078;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc3103078/) PMID[: 21613932](https://pubmed.ncbi.nlm.nih.gov/21613932/)
- 6. Lancaster LH, de Andrade JA, Zibrak JD, Padilla ML, Albera C, Nathan SD, et al. Pirfenidone safety and adverse event management in idiopathic pulmonary fibrosis. Eur Respir Rev. 2017;26(146):170057. DOI[: 10.1183/16000617.0057-2017;](https://doi.org/10.1183/16000617.0057-2017) PMCID[: PMC9488585;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc9488585/) PMID[: 29212837](https://pubmed.ncbi.nlm.nih.gov/29212837/)
- 7. Wind S, Schmid U, Freiwald M, Marzin K, Lotz R, Ebner T, et al. Clinical Pharmacokinetics and Pharmacodynamics of Nintedanib. Clin Pharmacokinet. 2019;58(9):1131–47. DOI[: 10.1007/s40262-019-00766-0;](https://doi.org/10.1007/s40262-019-00766-0) PMCID: [PMC6719436;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc6719436/) PMID: [31016670](https://pubmed.ncbi.nlm.nih.gov/31016670/)
- 8. Kolb M, Bonella F, Wollin L. Therapeutic targets in idiopathic pulmonary fibrosis. Respir Med. 2017;131:49–57. DOI: [10.1016/j.rmed.2017.07.062;](https://doi.org/10.1016/j.rmed.2017.07.062) PMID[: 28947042](https://pubmed.ncbi.nlm.nih.gov/28947042/)
- 9. Li R, Jia Y, Kong X, Nie Y, Deng Y, Liu Y. Novel drug delivery systems and disease models for pulmonary fibrosis. J Controlled Release. 2022;348:95–114. DOI[: 10.1016/j.jconrel.2022.05.039;](https://doi.org/10.1016/j.jconrel.2022.05.039) PMID[: 35636615](https://pubmed.ncbi.nlm.nih.gov/35636615/)
- 10. Hilberg F, Tontsch-Grunt U, Baum A, Le AT, Doebele RC, Lieb S, et al. Triple Angiokinase Inhibitor Nintedanib Directly Inhibits Tumor Cell Growth and Induces Tumor Shrinkage via Blocking Oncogenic Receptor Tyrosine Kinases. J Pharmacol Exp Ther. 2018;364(3):494–503. DOI[: 10.1124/jpet.117.244129;](https://doi.org/10.1124/jpet.117.244129) PMCID[: PMC6040086;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc6040086/) PMID[: 29263244](https://pubmed.ncbi.nlm.nih.gov/29263244/)
- 11. Swaney JS, Chapman C, Correa LD, Stebbins KJ, Bundey RA, prodanovich PC, et al. A novel, orally active LPA(1) receptor antagonist inhibits lung fibrosis in the mouse bleomycin model. Br J Pharmacol. 2010;160(7):1699–713. DOI: [10.1111/j.1476-5381.2010.00828.x;](https://doi.org/10.1111/j.1476-5381.2010.00828.x) PMCID[: PMC2936842;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc2936842/) PMID[: 20649573](https://pubmed.ncbi.nlm.nih.gov/20649573/)
- 12. Tager AM, LaCamera P, Shea BS, Campanella GS, Selman M, Zhao Z, et al. The lysophosphatidic acid receptor LPA1 links pulmonary fibrosis to lung injury by mediating fibroblast recruitment and vascular leak. Nat Med. 2008;14(1):45– 54. DOI[: 10.1038/nm1685;](https://doi.org/10.1038/nm1685) PMID[: 18066075](https://pubmed.ncbi.nlm.nih.gov/18066075/)
- 13. Stoddard NC, Chun J. Promising pharmacological directions in the world of lysophosphatidic Acid signaling. Biomol Ther. 2015;23(1):1–11. DOI[: 10.4062/biomolther.2014.109;](https://doi.org/10.4062/biomolther.2014.109) PMCID[: PMC4286743;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc4286743/) PMID[: 25593637](https://pubmed.ncbi.nlm.nih.gov/25593637/)
- 14. Cuozzo JW, Clark MA, Keefe AD, Kohlmann A, Mulvihill M, Ni H, et al. Novel Autotaxin Inhibitor for the Treatment of Idiopathic Pulmonary Fibrosis: A Clinical Candidate Discovered Using DNA-Encoded Chemistry. J Med Chem. 2020;63(14):7840–56. DOI[: 10.1021/acs.jmedchem.0c00688;](https://doi.org/10.1021/acs.jmedchem.0c00688) PMID[: 32584034](https://pubmed.ncbi.nlm.nih.gov/32584034/)
- 15. Hirani N, MacKinnon AC, Nicol L, Ford P, Schambye H, Pedersen A, et al. Target inhibition of galectin-3 by inhaled TD139 in patients with idiopathic pulmonary fibrosis. Eur Respir J. 2021;57(5):2002559. DOI: [10.1183/13993003.02559-](https://doi.org/10.1183/13993003.02559-2020) [2020;](https://doi.org/10.1183/13993003.02559-2020) PMCID[: PMC8156151;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc8156151/) PMID[: 33214209](https://pubmed.ncbi.nlm.nih.gov/33214209/)
- 16. Shimizu Y, Dobashi K, Sano T, Yamada M. Rock Activation in Lung of Idiopathic Pulmonary Fibrosis with Oxidative Stress. Int J Immunopathol Pharmacol. 2014;27(1):37–44. DOI[: 10.1177/039463201402700106;](https://doi.org/10.1177/039463201402700106) PMID[: 24674677](https://pubmed.ncbi.nlm.nih.gov/24674677/)
- 17. Knipe RS, Tager AM, Liao JK. The Rho kinases: critical mediators of multiple profibrotic processes and rational targets for new therapies for pulmonary fibrosis. Pharmacol Rev. 2015;67(1):103–17. DOI: [10.1124/pr.114.009381;](https://doi.org/10.1124/pr.114.009381) PMCID: [PMC4279074;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc4279074/) PMID[: 25395505](https://pubmed.ncbi.nlm.nih.gov/25395505/)
- 18. Zhou Y, Huang X, Hecker L, Kurundkar D, Kurundkar A, Liu H, et al. Inhibition of mechanosensitive signaling in myofibroblasts ameliorates experimental pulmonary fibrosis. J Clin Invest. 2013;123(3):1096–108. DOI[: 10.1172/jci66700;](https://doi.org/10.1172/jci66700) PMCID[: PMC3582144;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc3582144/) PMID[: 23434591](https://pubmed.ncbi.nlm.nih.gov/23434591/)
- 19. Zhu Z, Homer RJ, Wang Z, Chen Q, Geba GP, Wang J, et al. Pulmonary expression of interleukin-13 causes inflammation, mucus hypersecretion, subepithelial fibrosis, physiologic abnormalities, and eotaxin production. J Clin Invest. 1999;103(6):779–88. DOI[: 10.1172/jci5909;](https://doi.org/10.1172/jci5909) PMCID[: PMC408149;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc408149/) PMID[: 10079098](https://pubmed.ncbi.nlm.nih.gov/10079098/)
- 20. Castro M, Corren J, Pavord ID, Maspero J, Wenzel S, Rabe KF, et al. Dupilumab Efficacy and Safety in Moderate-to-Severe Uncontrolled Asthma. N Engl J Med. 2018;378(26):2486–96. DOI[: 10.1056/nejmoa1804092;](https://doi.org/10.1056/nejmoa1804092) PMID[: 29782217](https://pubmed.ncbi.nlm.nih.gov/29782217/)
- 21. Panettieri Jr RA, Sjöbring U, Péterffy A, Wessman P, Bowen K, Piper E, et al. Tralokinumab for severe, uncontrolled asthma (STRATOS 1 and STRATOS 2): two randomised, double-blind, placebo-controlled, phase 3 clinical trials. Lancet Respir Med. 2018;6(7):511–25. DOI[: 10.1016/s2213-2600\(18\)30184-x;](https://doi.org/10.1016/s2213-2600(18)30184-x) PMID[: 29792288](https://pubmed.ncbi.nlm.nih.gov/29792288/)
- 22. Hanania NA, Korenblat P, Chapman KR, Bateman ED, Kopecky P, Paggiaro P, et al. Efficacyand safety of lebrikizumab in patients with uncontrolled asthma (LAVOLTA I and LAVOLTA II): replicate, phase 3, randomised, double-blind, placebo-controlled trials. Lancet Respir Med. 2016;4(10):781–96. DOI[: 10.1016/s2213-2600\(16\)30265-x;](https://doi.org/10.1016/s2213-2600(16)30265-x) PMID[: 27616196](https://pubmed.ncbi.nlm.nih.gov/27616196/)
- 23. Maher TM, van der Aar EM, Van de Steen O, Allamassey L, Desrivot J, Dupont S, et al. Safety, tolerability, pharmacokinetics, and pharmacodynamics of GLPG1690, a novel autotaxin inhibitor, to treat idiopathic pulmonary fibrosis (FLORA): a phase 2a randomised placebo-controlled trial. Lancet Respir Med. 2018;6(8):627–35. DOI: [10.1016/s2213-2600\(18\)30181-4;](https://doi.org/10.1016/s2213-2600(18)30181-4) PMID[: 29792287](https://pubmed.ncbi.nlm.nih.gov/29792287/)
- 24. Di Rosa M, Malaguarnera L. Chitotriosidase: A New Inflammatory Marker in Diabetic Complications. Pathobiology. 2016;83(4):211–9. DOI[: 10.1159/000443932;](https://doi.org/10.1159/000443932) PMID[: 27116685](https://pubmed.ncbi.nlm.nih.gov/27116685/)
- 25. Koralewski R, Dymek B, Mazur M, Sklepkiewicz P, Olejniczak S, Czestkowski W, et al. Discovery of OATD-01, a Firstin-Class Chitinase Inhibitor as Potential New Therapeutics for Idiopathic Pulmonary Fibrosis. J Med Chem. 2020;63(24):15527–40. DOI[: 10.1021/acs.jmedchem.0c01179;](https://doi.org/10.1021/acs.jmedchem.0c01179) PMID[: 33078933](https://pubmed.ncbi.nlm.nih.gov/33078933/)
- 26. Sklepkiewicz P, Dymek BA, Mlacki M, Koralewski R, Mazur M, Nejman-Gryz P, et al. Inhibition of CHIT1 as a novel therapeutic approach in idiopathic pulmonary fibrosis. Eur J Pharmacol. 2022;919:174792. DOI: [10.1016/j.ejphar.2022.174792;](https://doi.org/10.1016/j.ejphar.2022.174792) PMID[: 35122869](https://pubmed.ncbi.nlm.nih.gov/35122869/)
- 27. Alcorn JF, van der Velden J, Brown AL, McElhinney B, Irvin CG, Janssen-Heininger YMWJ. c-Jun N-Terminal Kinase 1 Is Required for the Development of Pulmonary Fibrosis. Am J Respir Cell Mol Biol. 2009;40(4):422–32. DOI: [10.1165/rcmb.2008-0174oc;](https://doi.org/10.1165/rcmb.2008-0174oc) PMCID[: PMC2660560;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc2660560/) PMID[: 18836136](https://pubmed.ncbi.nlm.nih.gov/18836136/)
- 28. Bennett BL. c-Jun N-terminal kinase-dependent mechanisms in respiratory disease. Eur Respir J. 2006;28(3):651–61. DOI: [10.1183/09031936.06.00012106;](https://doi.org/10.1183/09031936.06.00012106) PMID[: 16946096](https://pubmed.ncbi.nlm.nih.gov/16946096/)
- 29. Lee VY, Schroedl C, Brunelle JK, Buccellato LJ, Akinci OI, Kaneto H, et al. Bleomycin induces alveolar epithelial cell death through JNK-dependent activation of the mitochondrial death pathway. Am J Physiol Lung Cell Mol Physiol. 2005;289(4):L521–8. DOI[: 10.1152/ajplung.00340.2004;](https://doi.org/10.1152/ajplung.00340.2004) PMID[: 16148050](https://pubmed.ncbi.nlm.nih.gov/16148050/)
- 30. Lin CH, Yu MC, Tung WH, Chen TT, et al. Connective tissue growth factor induces collagen I expression in human lung fibroblasts through the Rac1/MLK3/JNK/AP-1 pathway. Biochim Biophys Acta. 2013;1833(12):2823–33. DOI: [10.1016/j.bbamcr.2013.07.016;](https://doi.org/10.1016/j.bbamcr.2013.07.016) PMID[: 23906792](https://pubmed.ncbi.nlm.nih.gov/23906792/)
- 31. Baroroh U, Muscifa ZS, Destiarani W, Rohmatullah FG, Yusuf M. Molecular interaction analysis and visualization of protein-ligand docking using Biovia Discovery Studio Visualizer. Indones J Comput Biol. 2023;2(1):22-30. DOI: [10.24198/ijcb.v2i1.46322](https://doi.org/10.24198/ijcb.v2i1.46322)
- 32. Agu PC, Afiukwa CA, Orji OU, Ezeh EM, Ofoke IH, Ogbu CO, et al. Molecular docking as a tool for the discovery of molecular targets of nutraceuticals in diseases management. Sci Rep. 2023;13(1):13398. DOI[: 10.1038/s41598-023-40160-](https://doi.org/10.1038/s41598-023-40160-2) [2;](https://doi.org/10.1038/s41598-023-40160-2) PMCID[: PMC10435576;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc10435576/) PMID[: 37592012](https://pubmed.ncbi.nlm.nih.gov/37592012/)
- 33. Yang J, Roy A, Zhang Y. Protein-ligand binding site recognition using complementary binding-specific substructure comparison and sequence profile alignment. Bioinformatics. 2013;29(20):2588-95. DOI[: 10.1093/bioinformatics/btt447;](https://doi.org/10.1093/bioinformatics/btt447) PMCID[: PMC3789548;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc3789548/) PMID[: 23975762](https://pubmed.ncbi.nlm.nih.gov/23975762/)
- 34. Meng XY, Zhang HX, Mezei M, Cui M. Molecular docking: a powerful approach for structure-based drug discovery. Curr Compout Aided Drug Des. 2011;7(2):146-57. DOI: [10.2174/157340911795677602;](https://doi.org/10.2174/157340911795677602) PMCID: [PMC3151162;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc3151162/) PMID: [21534921](https://pubmed.ncbi.nlm.nih.gov/21534921/)
- 35. Fu Y, Zhao J, Chen Z. Insights into the Molecular Mechanisms of Protein-Ligand Interactions by Molecular Docking and Molecular Dynamics Simulation: A Case of Oligopeptide Binding Protein. Comput Math Methods Med. 2018;2018:3502514. DOI[: 10.1155/2018/3502514;](https://doi.org/10.1155/2018/3502514) PMCID[: PMC6305025;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc6305025/) PMID[: 30627209](https://pubmed.ncbi.nlm.nih.gov/30627209/)
- 36. Zhang W, Bell EW, Yin M, Zhang Y. EDock: blind protein-ligand docking by replica-exchange monte carlo simulation. J Cheminform. 2020;12(1):37. DOI[: 10.1186/s13321-020-00440-9;](https://doi.org/10.1186/s13321-020-00440-9) PMCID[: PMC7251717;](http://www.ncbi.nlm.nih.gov/pmc/articles/pmc7251717/) PMID[: 33430966](https://pubmed.ncbi.nlm.nih.gov/33430966/)