



Study of Pharmacologically Active Drugs Containing Quinazoline Pharmacophore: A Brief Overview

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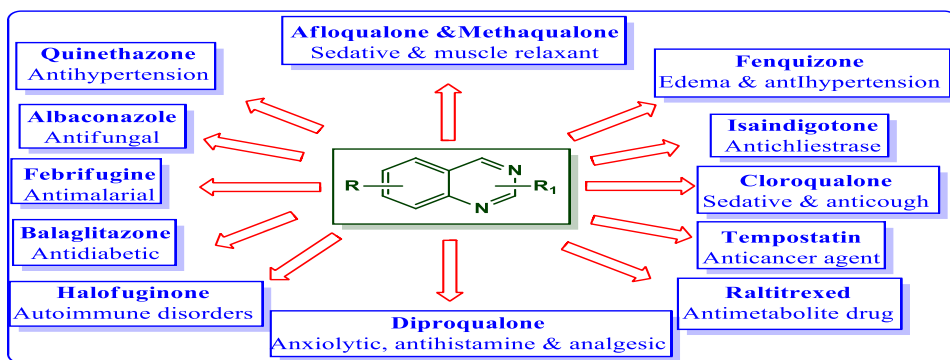
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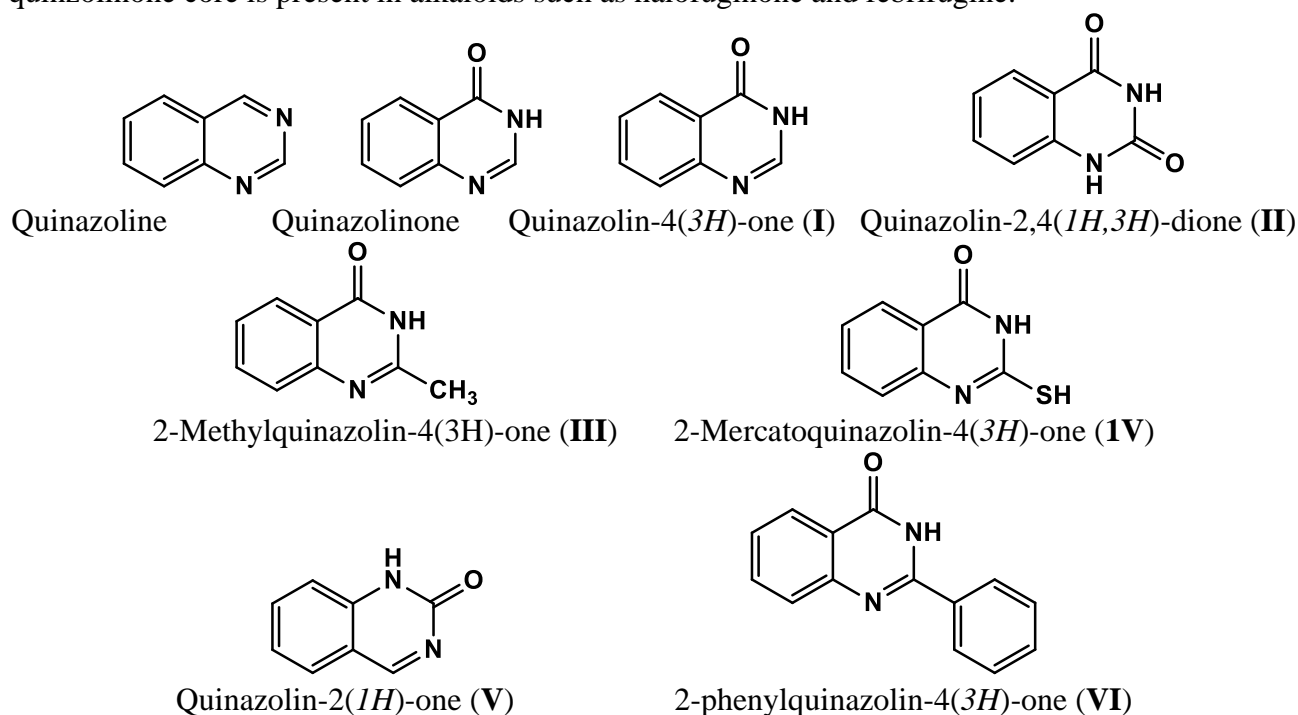
Article History	Abstract
Received: 02 January 2024 Revised: 18 January 2024 Accepted: 30 January 2024	<p><i>Heterocyclic compounds have been the subject of extensive research due to their diverse pharmacological effects. Among these molecules are quinazolinone analogs, which have demonstrated a range of pharmacological potentials. In search of novel therapeutic pharmaceutical molecules, medicinal chemistry researchers are drawn to the quinazolinone nucleus. This article aims to provide an overview of the many pharmacological activities of the quinazolinone moiety. Based on the quinazolinone moiety, more modern molecules have been developed and synthesized. These compounds show negligible toxicity and outstanding anti-disease capabilities. This paper reviews several different quinazolinone analogs and makes recommendations for future research paths in the quest to create effective quinazolinone drugs for a range of biological objectives.</i></p>
CC License CC-BY-NC-SA 4.0	<p>Keywords: Heterocyclic, pharmacologically active, quinazolinone analogs, drugs, diseases.</p>



Quinazolinone containing drug molecules

1. Introduction

These days, there are many different heterocyclic compounds known that contain oxygen, nitrogen, sulfur, and other heteroatoms. In the fields of agrochemicals and pharmaceuticals, organic molecules with heterocycle nuclei carry out pharmacological functions. Furthermore, nitrogen-containing heterocyclic molecules are extremely important in medical chemistry. Two nitrogen-containing heterocyclic compounds, quinazoline, and quinazolinone, are created when the benzene ring fuses with the pyrimidine and pyrimidinone moiety, respectively. According to where the oxygen and hydrogen atoms are located on the nitrogen (NH) atom, quinazolinones can be divided into the following six subcategories (Chaudhary, et al., 2018; Selvam, and Kumar. 2011). The modern human population suffers from several ailments that are directly related to lifestyle advancements, which highlights the urgent need for new medicine development. Quinazolinone moiety is an essential component of many bioactive synthetic and natural chemicals and is involved in medicinal chemistry. The advancement of these compounds' structural designs for powerful and specific pharmacological actions throughout the past ten years is still very desirable. This section covers the novel quinazolinone-containing biologically active chemicals that have been produced during the past ten years for a variety of disorders. Quinazolinone, or quinazolin-4(3H)-one in chemistry, is also known as quinazolinindiones (Asif. 2014; Chen, *et al.*, 2006). Quinazolinone is a chemical molecule that is heterocyclic. 2-quinazolinone and 4-quinazolinone are the two structural isomers; the latter is the more prevalent. Another class of medications with a 4-quinazolinone core that is used as a hypnotic or sedative is called quinazolinones. It has also been suggested that they be used to treat cancer. Afloqualone, cloroqualone, and diproqualone are a few examples. The quinazolinone core is present in alkaloids such as halofuginone and febrifugine.



Quinazolines are compounds with various pharmacophores, combining knowledge of a target with an awareness of the types of molecules that may interact with the target family. Quinazoline is a six-membered heterocyclic ring system that has been reported for its biological activities. To do the job, a strong, adaptable, and scalable chemistry must be used. This quinazoline property would be a useful model for a library of lead production materials. The biological actions carried out for different targets, coupled with a brief explanation of the targets, are the main emphasis of the current review paper.

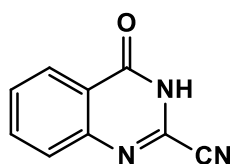
The fields of discovery, development, laboratory synthesis, and identification of physical and chemical processes are all under the purview of medicinal chemistry. New organic molecules, whether manufactured or natural, are the focus of most activity in this area. Inorganic compounds are still crucial for treating nutritional treatment, radiopharmaceuticals, and trace elements in food. New synthetic techniques for the development of organic compounds have emerged recently, including the fascinating discipline of biotechnology which uses a cell's biology to create new compounds. Methods such as site-directed mutagenesis, recombinant DNA, and cell line fusion have expanded the potential for novel disease-treating entities. With the aid of medicinal chemistry, pharmacists are now able to prescribe human insulin that has been modified to provide more convenient dosing schedules, cell-stimulating factors that have altered chemotherapy dosage schedules, humanized monoclonal antibodies that are targeted to specific tissues, and fused receptors that block cytokines produced by immune cells. Understanding the physiochemical characteristics that are employed to create novel pharmacologically active elements and their mechanisms of action is essential for comprehending the fundamentals of medicinal chemistry. Every year, thousands upon thousands of novel organic compounds are created globally, and a large number of these undergo pharmacological screening to ascertain their biological activity (Badolato, et al., 2018; Wdowiak, et al., 2021; Rezaeinasab, et al., 2022; Faisal, and Saeed. 2020; Wang, and Gao. 2013; Grivas, et al., 2013).

Although this approach of random screening has been ineffective, it has produced new lead compounds whose structures have been refined to yield effective therapeutic drugs. Understanding the molecular mechanisms of medication action is the primary goal of medicinal chemists. Chemistry containing heterocyclic compounds—compounds with at least two different element atoms in each ring—is known as heterocyclic chemistry. Despite the complex having carbon atoms in the ring, the heterocyclic atoms may be inorganic. "Different from carbon and hydrogen" is what the word hetero signifies. Both plants and animals can biosynthesize a large number of physiologically active heterocyclic molecules. Certain heterocyclic substances, such as the haem derivatives found in blood and the chlorophyll necessary for photosynthesis in plants, are important to life. Homocycles are also present in DNA and RNA. Plant-based dyes include indigo blue, which is used to color pants. The basic structural nucleus of several heterocycles includes nicotine, pyridoxine, cocaine, morphine, and other substances. Benzene and pyrimidine rings, two fused six-member simple aromatic rings, make comprise the compound quinazoline. This chemical has a yellow hue and is typically found in crystallized form. It is used as an antimalarial medication. In 1903, Gabriel made the first preparation of it and isolated it from the Chinese herb aseru. With the synthesis of the molecule 2-methyl-1,3-aryl-4-quinazoline derivative, research on the biological activity of quinazoline compounds began. This substance has sedative and soporific properties. Significant advancements have been made in medical research over the past ten to fifteen years. Methaqualone, a diuretic, and quinathazone, a soporific and anticonvulsant, were the only two compounds used in 1968. Approximately fifty different types of derivatives belonging to this class were known by 1980. These included medications with various biological actions, such as sedative, analgesic, anticonvulsant, antitussive, myorelaxant, antirheumatic, hypotensive, antiallergic, broncho-dilating, antidiabetic, cholagogues, diuretic, antimalarial, spermicidal, and so on (Hricovíniová, et al., 2021; Borah, et al., 2022; Mohammadkhani, and Heravi. 2020; Mohammed, et al., 2022).

Quinazolinone-Based Biologically Active Molecules

Out of the six quinazolinone moieties mentioned above, quinazolin-4(3H)-ones are more common and can be found as natural products or as intermediates in several hypothesized biosynthetic processes. Organic molecules with a quinazolinone core, both synthetic and natural, display a range of biological activities such as antimicrobial (Chavan, et al., 2014), anti-inflammatory (Priya, et al., 2011), antitumor (Srivalli, et al., 2012), anticonvulsant (El-Azab, et al., 2012), anti-tubercular (Devi, and Kachroo. 2014), antidiabetic (Ahmed, et al., 2012), anticancer (Zhang, et al., 2015), diuretic (Bouley, et al., 2016), cellular phosphorylation inhibition (Traxler, et al., 1999), antimalarial

(Ganguli, et al., 2012), antihypertensive (Khan, et al., 2016; Abou-Seri, et al., 2011) and kinase inhibitory activities (Bridges, et al., 1996). The primary sources of the quinazolinone-(3H)-one unit include anthranilic acid, different esters, isatoic anhydride, anthranilamide, and anthranilonitrile; on the other hand, anthranilonitrile is the source of quinazolin-2(H)-one. Numerous heterocyclic compounds with the nucleus of quinazolinone have been identified in a range of plants, animals, and microbes. To create 2-cyanoquinazolinone, the first quinazolinone chemical was created in the late 1860s using cyanogen and anthranilic acid. Currently, there are over 200 recognized naturally occurring quinazolinone alkaloids (Selvam, et al., 2011). The remarkable pharmacological activity and simple availability like quinazolinone derivatives have recently piqued the interest of biologists and chemists in their synthesis.



2-cyanoquinazolin-4(3H)-one

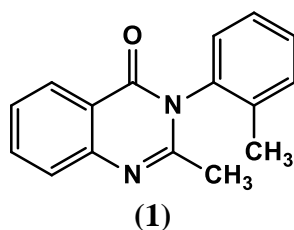
In addition to delving further into the synthesis process for quinazolinone and its derivatives, we attempt to condense the biological importance of quinazolinone and its derivatives here.

Quinazolinone-Based Drug Molecules

Many compounds based on quinazolinone have been produced and tested for a wide range of pharmacological properties since quinazolinone skeleton is a well-known therapeutic agent. The current state of rapid development indicates that several quinazolinone derivatives with a wide range of potential applications for various disorders have been patented and made accessible on the market. This section includes a summary of certain marketed medications.

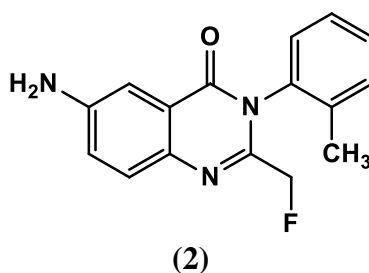
Methaqualone

It is chemically 2-methyl-3-(2-methylphenyl) quinazolin-4-(3H)-one (**1**) and was first synthesized in 1951. It possesses both central and peripheral muscle relaxant activity and also exhibits sedative–hypnotic effects (Rakesh, et al., 2017).



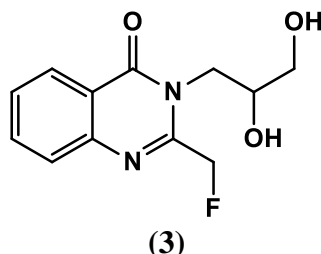
Afloqualone

It is an amino and fluoro analog of Methaqualone and chemically known as 6-amino-2-(fluoro methyl)-3-(2-methyl phenyl)quinazolin-4(3H)-one (**2**). It has sedative and muscle relaxant actions. It causes skin problems like dermatitis through photosensitization (Ishikawa, et al., 1994; Ochiai, et al., 1982, Ishikawa, et al., 1994).



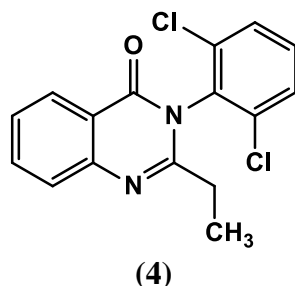
Diproqualone

It is a Methaqualone analog and chemically known as 3-(2,3-dihydroxypropyl)-2-methylquinazolin-4(3*H*)-one (3). It is used for the treatment of osteoarthritis, rheumatoid arthritis, insomnia, and neuralgia. This drug is also used for anxiolytic, antihistamine, and analgesic properties (Ishikawa, et al., 1994).



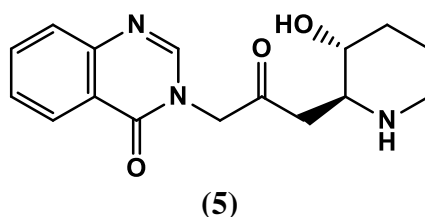
Cloroqualone

It is a Methaqualone analog, chemically known as 3-(2,6-Dichlorophenyl)-2-ethyl-4-quinazolinone (4), and was developed in 1980. It has weaker sedative properties than Methaqualone. It also has cough suppressing effect (Darias, et al., 1992; Ochiai, and Ishida. 1982).



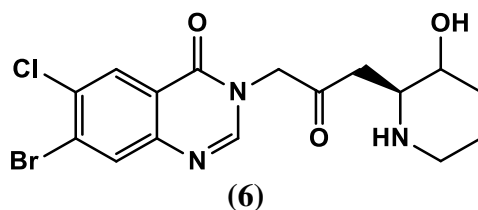
Febrifugine

Febrifugine alkaloid was extracted from *Dichroa febrifuga* leaves and also found in the garden plant Hydrangea. Its chemically known as 3-[3-((2*S*, 3*R*)-3-Hydroxypiperidin-2-yl)-2-oxo propyl]quinazolin-4(3*H*)-one (5). It has diverse effects as an antimalarial agent (McLaughlin, et al., 2010; Chen, et al., 2006).



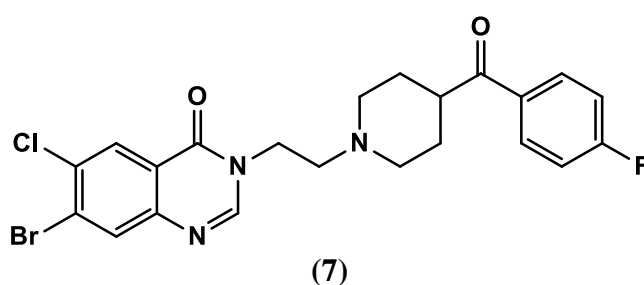
Halofuginone

This is a synthetic halogen derivative of Febrifugine alkaloid and isolated from the Chinese herb *Dichroa febrifuga*. Its chemically 7-bromo-6chloro-3-[3-((2*S*,3*R*)-3-hydroxy piperidin-2-yl)-2-oxopropyl]quinazolin-4(3*H*)-one (6). It is used as a coccidiostat in veterinary medicine and the treatment of scleroderma. It plays a major role in the inhibition of T helper 17 cells, immune cells, and other autoimmune diseases but it does not affect other kinds of T cells which are involved in normal immune function. It exhibits varied effects for the treatment of autoimmune disorders (Mishra, et al., 2015; Gnainsky, et al., 2004).



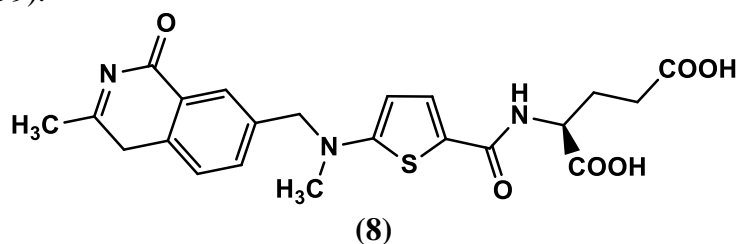
Ketanserin

Ketanserin is chemically 3-[2-(4-(4-fluorobenzoyl) piperidin-1-yl) ethyl]-*1H*-quinazoline-2,4-dione (7) and used in the treatment of chronic vascular hypertension and have considerable role in blocking of actions of serotonin. It is a selective serotonin receptor antagonist with weak adrenergic receptor-blocking properties. It is also responsible for inhibition of platelet accumulation (Sundrud, et al., 2009). It inhibits platelet aggregation. It is well tolerated and is particularly effective in older patients. The drug binds to but does not activate serotonin receptors, thereby blocking the actions of serotonin, thus known as serotonin receptor antagonists.



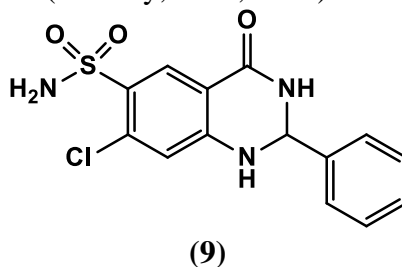
Raltitrexed

It is chemically known as *N*-[(5-(methyl [(2-methyl-4-oxo-1, 4-dihydroquinazolin-6-yl) methyl]amino)-2-thienyl)carbonyl]-*L*-glutamic acid (8), is an antimetabolite drug used in cancer chemotherapy. It is structurally similar to folic acid and acts as an inhibitor of thymidylate synthase; hence it is a folate antimetabolite. It is used in the treatment of colorectal cancer. It is used in the inhibition of thymidylate synthase and dihydrofolate reductase enzyme synthesis. It prevents the formation of DNA and RNA by preventing the formation of pyrimidine nucleotides which are required for the growth and survival of both normal and cancer cells (Zabludowski, et al., 1984; Widemann, et al., 1999).



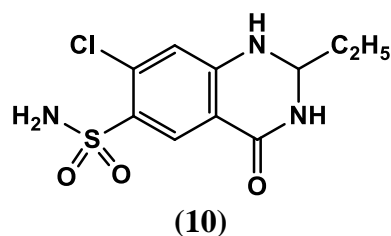
Fenquizone

It is known as Idrolone and chemically 7-chloro-4-oxo-2-phenyl-1,2,3,4-tetrahydroquinazoline-6-sulfonamide (9). Its structurally similar to thiazides like diuretics sulphonamides. It is used in the treatment of edema and hypertension (Mackay, et al., 2001).



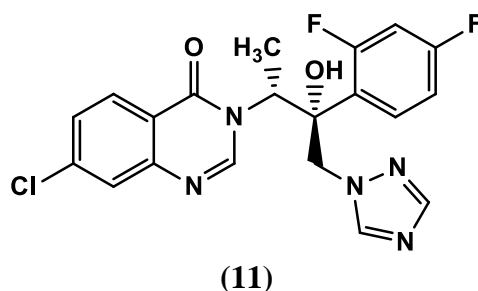
Quinethazone

Quinethazone is an introduced oral diuretic agent in which a cyclic carbamyl group has replaced the cyclic sulphamyl group present in the thiazides. It's chemically known as 7-chloro-2-ethyl-4-oxo-1,2,3,4-tetrahydroquinazoline-6-sulfonamide (**10**). It is used in the treatment of hypertension and its adverse effects include dizziness, dry mouth, nausea, and low potassium levels (Katague. 2006; Cohen, *et al.*, 1960). It is a thiazide diuretic used to treat hypertension. Common side effects include dizziness, dry mouth, nausea, and low potassium levels.



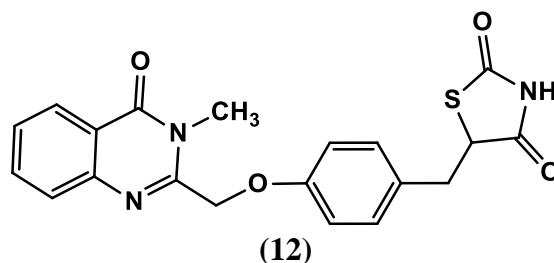
Albaconazole

Albaconazole (UR-9825) is chemically 7-chloro-3-[(2R,3R)-3-(2,4-difluorophenyl)-3-hydroxy-4-(1H,1,2,4-triazol-1-yl)butan-2-yl]quinazolin-4(3H)-one (**11**) is a triazole antifungal drug. The triazole moiety has diverse effects on fungal disease and the whole molecule has greater potential for broad-spectrum antibacterial activity (Cohen, *et al.*, 1960; Sorbera, *et al.*, 2003).



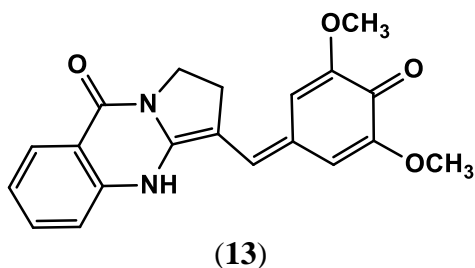
Balaglitazone

It is chemically 5-[4-[(3,4-dihydro-3-methyl-4-oxo-2-quinazoliny) methoxy] phenyl]methyl]-2,4-thiazolidinedione (**12**). It is type 2 diabetes, antagonists for peroxisome Proliferator-Activator Receptor γ (PPAR γ) and plays a significant role in the maintenance of glucose levels in the blood by insulin sensitization activity. It has adverse effects such as oedemas, infarctions, and increased fracture rates, limiting its applicability (Garau, *et al.*, 2003).



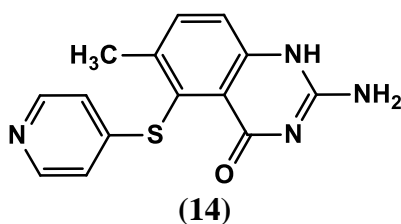
Isaindigotone

Isaindigotone is a natural alkaloid, commonly used in traditional Chinese medicine. It is chemically 3-[(3,5-dimethoxy-4-oxocyclohexa-2,5-dien-1-ylidene)methyl]-2,4-dihydro-1H-pyrrolo[2,1b]quinazolin-9-one (**13**). It is used as an inhibitor of cholinesterase (ChEs) and self induced b-amyloid (Ab) aggregation (Yousefi, *et al.*, 2017; Molina, *et al.*, 2001).



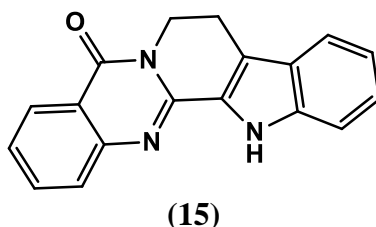
Nolatrexed

Nolatrexed is chemically 2-Amino-6-methyl-5-(4-pyridylthio)-*1H*-quinazolin-4-one (14). It is a lipophilic inhibitor of thymidylate synthase enzyme (Yan, et al., 2012; Estlin, et al., 2001; Hughes, et al., 1999).



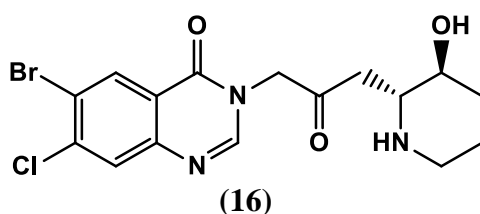
Rutaecarpine

Rutaecarpine is an indolopyridoquinazolinone alkaloid isolated from the fruit of various plants and trees of the Rutaceae family, such as *Evodia ruraecarpa*. It is chemically known as 8,13-Dihydroindolo[2',3':3,4]pyrido[2,1-b]quinazolin-5(7*H*)-one (15). This drug is used for the treatment of gastrointestinal disorders, headache, dysentery, and inflammation-related disorders. It also has cytotoxic, anti-platelet, vasorelaxation, and anti-anoxic activities (Jodrell, et al., 1999; Bubenyák, et al., 2010).



Tempostatin

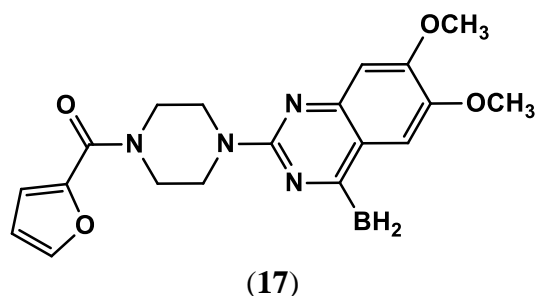
Tempostatin is chemically 7-bromo-6-chloro-3-[3-[(2*R*,3*S*)-3-hydroxy-2-piperidyl]-2-oxopropyl]quinazolin-4-one (16). Tempostatin plays an essential role in the inhibition of cancer cell growth by inhibiting the production of new blood vessels (Lee, et al., 2008).



Prazosin

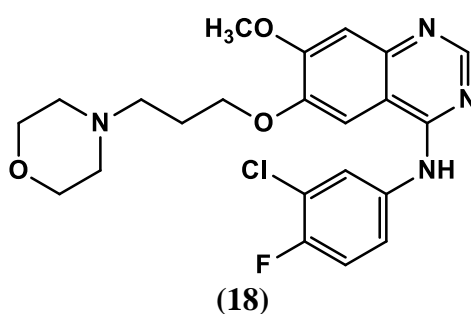
Prazosin is chemically 2-[4-(2-furoyl)piperazin-1-yl]-6,7-dimethoxyquinazolin-4-amine (17). It is a sympatholytic drug, an alpha-adrenergic blocker used to treat high hypertension by relaxing blood vessels. Specifically, prazosin is selective for the alpha-1 receptors on vascular smooth muscle.

These receptors are responsible for the vasoconstrictive action of norepinephrine, which normally raises blood pressure. By blocking these receptors, prazosin reduces blood pressure (Shen, 2008).



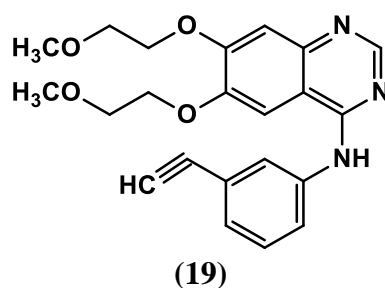
Gefitinib

Gefitinib (18) is Chemically N-(3-chloro-4-fluoro-phenyl)-7-methoxy-6-(3-morpholin-4-ylpropoxy)quinazolin-4-amine and also known as Iressa and used in the treatment of certain types of cancer. Gefitinib is an epidermal growth factor receptor (EGFR) inhibitor that interrupts signaling through the epidermal growth factor receptor in target cells. Gefitinib is proven to be effective in other cancers, there is potential for its use in the treatment of other cancers where EGFR over-expression is involved. It is a first-line treatment in patients harboring EGFR mutations (Pao *et al.*, 2004)



Erlotinib

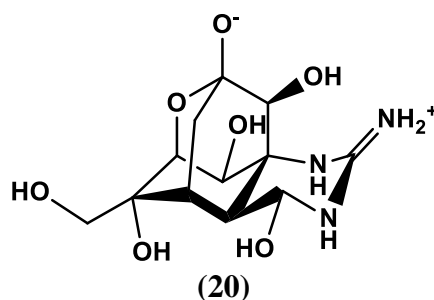
Erlotinib (19) is chemically N-(3-ethynylphenyl)-6,7-bis(2-methoxyethoxy)quinazolin-4-amine (Raymond *et al.*, 2000). It is used to treat non-small cell lung cancer, pancreatic cancer, and several other types of cancer. It is a tyrosine kinase inhibitor, which acts on the epidermal growth factor receptor (EGFR). The drug follows Iressa gefitinib, which was the first drug of this type. Erlotinib especially targets the EGFR tyrosine kinase, which is highly expressed and occasionally mutated in various forms of cancer. It binds reversibly to the adenosine triphosphate (ATP) binding site of the receptor.



Tetrodotoxin

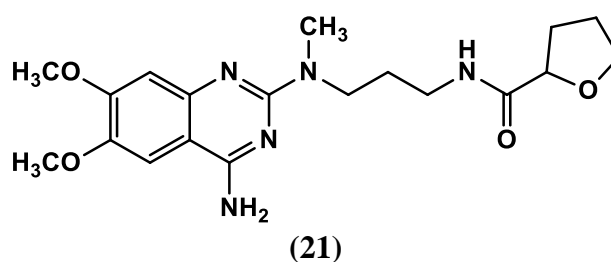
Tetrodotoxin is also known as tetrodotoxin (TTX), or "zombie powder" chemically (4R,4aR,5R,6S,7S,8S,8aR,10S,12S)-2-azaniumylidene-4,6,8,12-tetrahydroxy-6-(hydroxy methyl)-2,3,4,4a,5,6,7,8-octahydro-1H-8a,10-methano-5,7-epoxy methanoxy) quinazolin-10-olate (20). It is a potent neurotoxin, it blocks action potentials in nerves by binding to the voltage-gated, fast sodium

(Na⁺) channels in nerve cell membranes, essentially preventing any affected nerve cells from firing by blocking the channels used in the process (Rivera *et al.*, 1995).



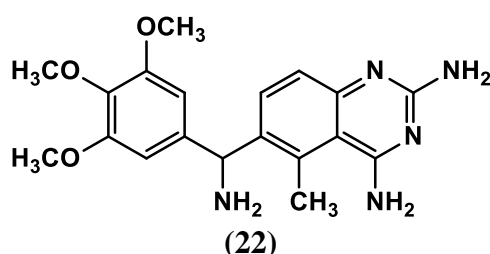
Alfuzosin

It is chemically *N*-[3-[(4-amino-6,7-dimethoxyquinazolin-2-yl)-methyl-amino]propyl]tetrahydrofuran-2-carboxamide (21). It is an α_1 receptor antagonist used to treat benign prostatic hyperplasia (BPH). It works by relaxing the muscles in the prostate and bladder neck, making it easier to urinate. It is used with caution in patients with severe renal insufficiency, and should not be prescribed to patients with a known history of QT prolongation who are taking medications known to prolong the QT interval (Hwang *et al.*, 2007).



Trimetrexate

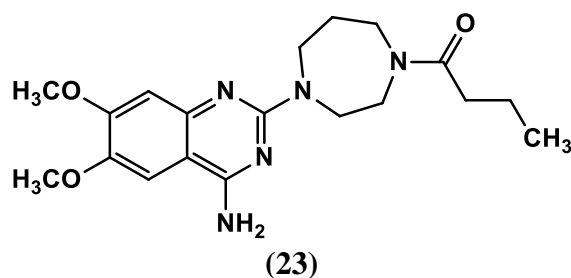
Trimetrexate is chemically 5-methyl-6-[(3,4,5-trimethoxyphenyl) aminomethyl] quinazoline-2,4-diamine (22), is a nonclassical folic acid inhibitor through its inhibition of dihydrofolate reductase. It is being tested for efficacy as an antineoplastic agent and as an antiparasitic agent against pneumocystis pneumonia in AIDS patients. Myelosuppression is its dose-limiting toxic effect. It is used with leucovorin in treating pneumocystis pneumonia. It is investigated for use in treating leiomyosarcoma. It is a methotrexate (MTX) analog that is active against transport-deficient MTX-resistant tumor cells that overcome the acquired and natural resistance to methotrexate. Other uses include skin lymphoma (Wong *et al.*, 1990, Smith *et al.*, 2002).



Bunazosin

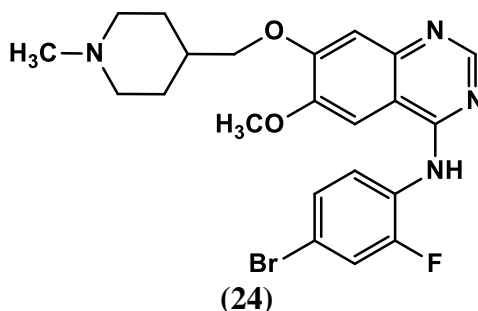
Bunazosin is chemically 1-(4-(4-amino-6,7-dimethoxyquinazolin-2-yl)-1,4-diazepan-1-yl)butan-1-one (23), is an alpha-1 antagonist. Bunazosin was initially developed to treat benign prostatic hyperplasia (BPH). It is approved in Japan in a topical form to treat glaucoma. The mechanism of action is a reduction of aqueous outflow through the uveoscleral pathway resulting in lowering the intraocular pressure. It also may act to improve blood flow to the ocular nerve. Systemic Alpha-1

adrenergic receptor antagonists have been implicated in Intraoperative Floppy Iris Syndrome (IFIS). Bunazosin potentially could have the same effect but there has been no research to substantiate this as a risk for cataract surgery.



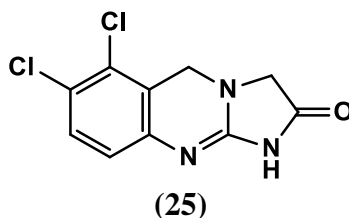
Vandetanib

Vandetanib is also known as ZD6474, chemically N-(4-bromo-2-fluorophenyl)-6-methoxy-7-[(1-methylpiperidin-4-yl)methoxy]quinazolin-4-amine (24), it is an antagonist of the vascular endothelial growth factor receptor (VEGFR) and the epidermal growth factor receptor (EGFR). It is a tyrosine kinase inhibitor. The drug has a third target: inhibits RET-tyrosine kinase activity, an important growth driver in certain types of thyroid cancer.



Anagrelide

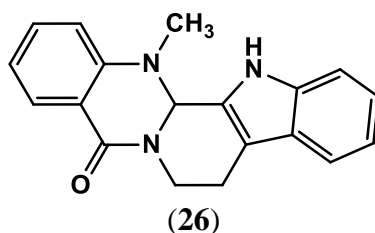
It is chemically 6,7-dichloro-1,5-dihydroimidazo(2,1-b)quinazolin-2(3H)-one (25), is a drug used for the treatment of essential thrombocytosis (ET), or overproduction of blood platelets. It is also used in the treatment of chronic myeloid leukemia. Anagrelide works by inhibiting the maturation of platelets from megakaryocytes. The exact mechanism of action is unclear, although it is known to be a phosphodiesterase (PDE) inhibitor. It is a potent ($IC_{50}=36nM$) inhibitor of PDE-II. It inhibits PDE-3 and phospholipase A2. The combination of hydroxyurea with aspirin is superior to the combination of anagrelide and aspirin for the initial management of ET. The hydroxyurea arm had a lower likelihood of myelofibrosis, arterial thrombosis, and bleeding, but it had a slightly higher rate of venous thrombosis (Voglová *et al.*, 2006, Petrides, 2006).



Evodiamine

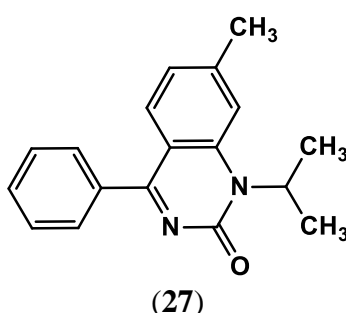
Evodiamine is chemically 21-methyl-3,13,21-triazapentacyclo[11.8.0.02,10.04,9.015,20] heneicosa-2(10),4,6,8,15,17,19-heptaen-14-one (26). It is extracted from the *Evodia* spp family of plants which has been shown to reduce fat uptake in mouse studies (Kobayashi, 2001, Wang, 2008). Its method is believed to be similar to capsaicin, but retains none of the "hot" taste. This chemical is known to

appear in some bodybuilding over-the-counter supplements, while neither its fat-burning benefits, nor its potential risks and side effects. Evodiamine raises your body's temperature and can inhibit the growth of certain cancer cells.



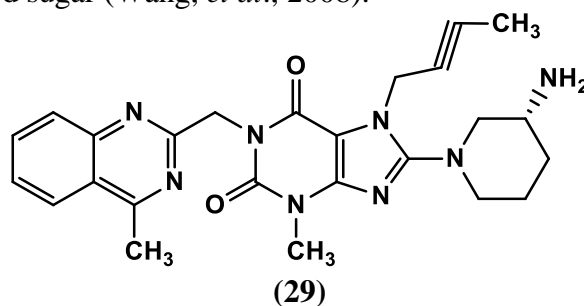
Proquazone

It is chemically 1-isopropyl-7-methyl-4-phenyl quinazolin-2(1H)-one (27) is a non-steroidal anti-inflammatory drug.



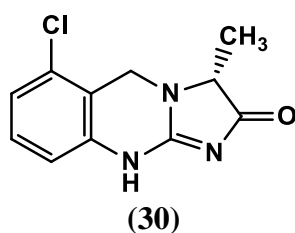
Linagliptin

It is chemically 8-[(3R)-3-aminopiperidin-1-yl]-7-(but-2-yn-1-yl)-3-methyl-1-[(4-methylquinazolin-2-yl) methyl]-3,7-dihydro-1H-purine-2,6-dione (28). It is a DPP-4 inhibitor developed by Boehringer Ingelheim undergoing research for type II diabetes. Linagliptin showed that the drug can effectively reduce blood sugar (Wang, *et al.*, 2008).



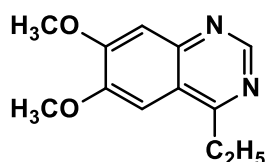
Quazinone

It is chemically (3R)-6-chloro-3-methyl-5,10-dihydroimidazo[2,1-b]quinazolin-2(3H)-one (30), it is a cardiostimulant and vasodilator drug and used for the treatment of heart disease. It acts as a selective PDE3 inhibitor (Eigenmann, *et al.*, 1984, Holck, *et al.*, 1984, Belz, *et al.*, 1985, Daly, *et al.*, 1985, Osinski, *et al.*, 2000, Denis *et al.*, 1999).



Quazodine

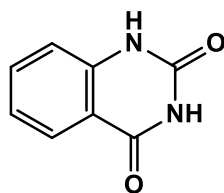
It is also known as quazodinum, and quazodina, chemically 4-ethyl-6,7-dimethoxyquinazoline (31). Theophylline and quazodine enhanced maximal twitches and contractural responses to acetylcholine and carbachol. These actions on contractility were exerted directly upon the muscle fibers and were dependent upon the concentration of calcium ions in the bathing solution. In addition, quazodine enhanced the neuromuscular blocking activity of tubocurarine, probably by a prejunctional action (Amer, *et al.*, 1971).



(31)

Benzouracil

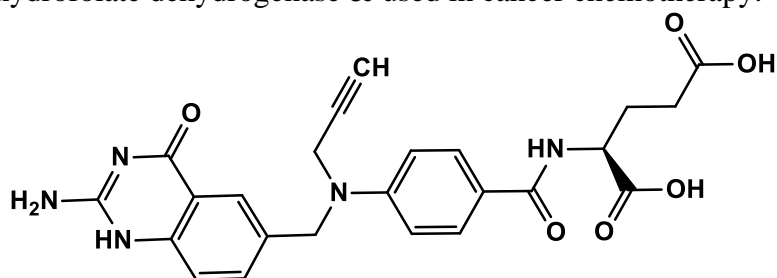
Benzouracil chemically 2,4(1H,3H)-quinazolinedione (32). The substituted Benzouracil is used in treating or preventing infection due to a virus from the Flaviridae family by administering it to a patient in need of an effective amount of a quinazoline derivative.



(32)

CB 3717

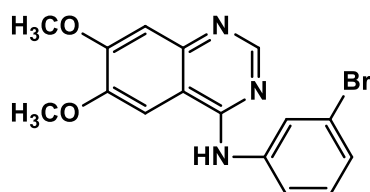
CB 3717 chemically (2S)-2-[[4-[(2-amino-4-oxo-1H-quinazolin-6-yl)methylprop-2-ynylamino]benzoyl]amino]pentanedioic acid (33). It is used as an antineoplastic agent, the folic acid antagonist of the enzyme tetrahydrofolate dehydrogenase & used in cancer chemotherapy.



(33)

EBE-A22

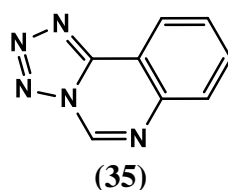
It is also known as PD 153035; PD-153035; PD153035; chemically *N*-(3-bromophenyl)-6,7-dimethoxyquinazolin-4-amine (34). It is used as an antineoplastic agent & intercalating agent (capable of inserting themselves between bases of DNA). They are used in the study of DNA (Cheng, *et al.*, 2011).



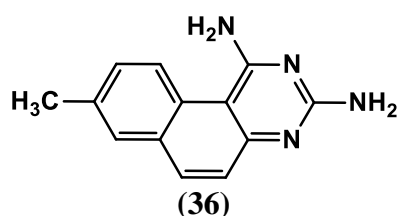
(34)

NSC127213

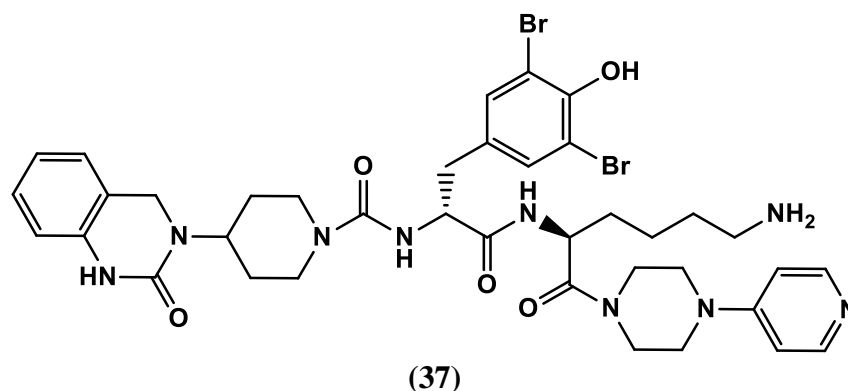
NSC127213 is chemically tetrazolo [1,5-c]quinazoline (**35**). NSC127213 is useful as an inhibitors of H1R and/or H4R for the treatment or prevention of inflammatory, autoimmune, allergic, and ocular diseases.

**NSC137192**

NSC137192 is chemically 8-methylbenzo[f]quinazoline-1,3-diamine (**36**). The drug invention provides compositions and methods for the treatment of B-cell proliferative disorders that employ an A2A receptor agonist or one or more PDE inhibitors.

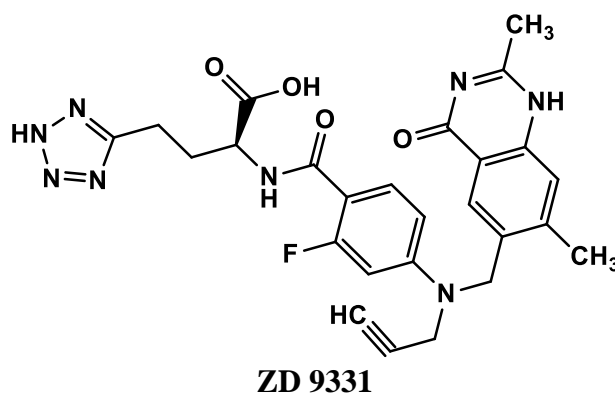
**BIBN4096BS**

BIBN4096BS chemically (R-(R*,S*))-N-(2-((5-amino-1-((4-(4-pyridinyl)-1-piperazinyl) carbonyl) pentyl)amino)-1-((3,5-dibromo-4-hydroxyphenyl)methyl)-2-oxoethyl)-4-(1,4-dihydro-2-oxo-3(2H)quinazolinyl)-1-piperidinecarboxamide (Mallee, *et al.*, 2002, Doods, *et al.*, 2000). It is a potent competitive antagonist of the relaxant effects of alpha-CGRP on the human temporal artery. Calcitonin gene-related peptide (CGRP) is one of the most potent endogenous vasodilators known. This peptide is increased during migraine attacks and has been implicated in the pathogenesis of migraine headaches. *In vitro*, this compound is extremely potent at primate CGRP receptors exhibiting an affinity (K_i) for human CGRP receptors of 14.4 ± 6.3 ($n=4$) pM. In an *in vivo* model, BIBN4096BS in doses between 1 and $30 \mu\text{gkg}^{-1}$ (*i.v.*) inhibited the effects of CGRP, released by stimulation of the trigeminal ganglion, on facial blood flow in marmoset monkeys. It is concluded that BIBN4096BS is a potent and selective CGRP antagonist.

**ZD 9331**

It is also known as BGC9331, chemically (2S)-2-[[4-[(2,7-dimethyl-4-oxo-1Hquinazolin-6-yl)methyl-prop-2-ynylamino]-2-fluorobenzoyl]amino]-4-(2H-tetrazol-5-yl)butanoic acid (**38**) (Doods, *et al.*, 2000). ZD-9331 is a non-polyglutamate thymidylate synthase inhibitor as a potential treatment for solid tumors and other neoplasia, including colorectal tumors. ZD-9331 resulted in a

period of intracellular 2'-deoxyuridine (dUrd) elevation, a surrogate marker of thymidylate synthase inhibition, with observed myelosuppression being no greater than that seen with raltitrexed and less than with bolus 5-FU. As in previous studies, myelosuppression was the dose-limiting toxicity, occurring at 4.8 and 7.5 mg/m²/day, with one patient at each of these two doses experiencing a DLT. The MTD was not achieved until 12 to 16 mg/m²/day, based on which a fixed dose of 25 mg/day was being evaluated.



2. Conclusions

The quinazoline scaffold's pharmacological actions have been described in the article. The ease of use, adaptability, and simplicity of the synthesis methods provide medicinal chemists with a wide variety of new quinazoline analogs. This will guarantee that this is an active and significant area of research in heterocyclic chemistry, especially in light of the advancements in synthetic tactics and technology for the development of effective and dependable methods for the production of novel molecules and demonstrated the ongoing interest in the quinazoline pharmacophore in medicinal chemistry and drug development. The significant level of protection against different illnesses may indicate that quinazoline analogs are promising candidates for additional research as bioactive drug delivery systems. Quinazoline analogs show promise as anti-infective medications against microorganisms that are resistant to many treatments due to their strong action. These analogs' wide-ranging antibacterial properties may result in the development of a novel class of antimicrobial drugs. Because of their biological significance, quinazoline analogs have demonstrated a wide range of pharmacological activities, including agonist and antagonist actions on receptors and considerable effects on enzymes. As a result, the quinazoline scaffold has numerous potential pharmacological actions in addition to being significant from a synthetic standpoint. More hopeful results may emerge from quinazoline scaffold research in the future.

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Conflict Of Interest

The authors have no conflicts of interest, financial or otherwise.

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