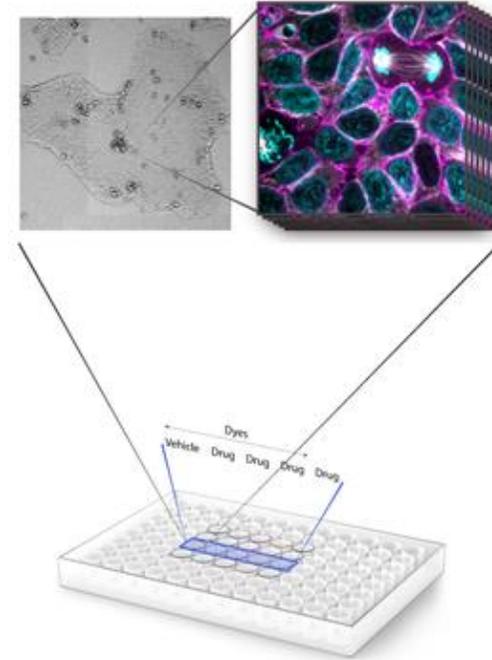


Phenotypic screens and cell perturbations

Rebecca Laposa

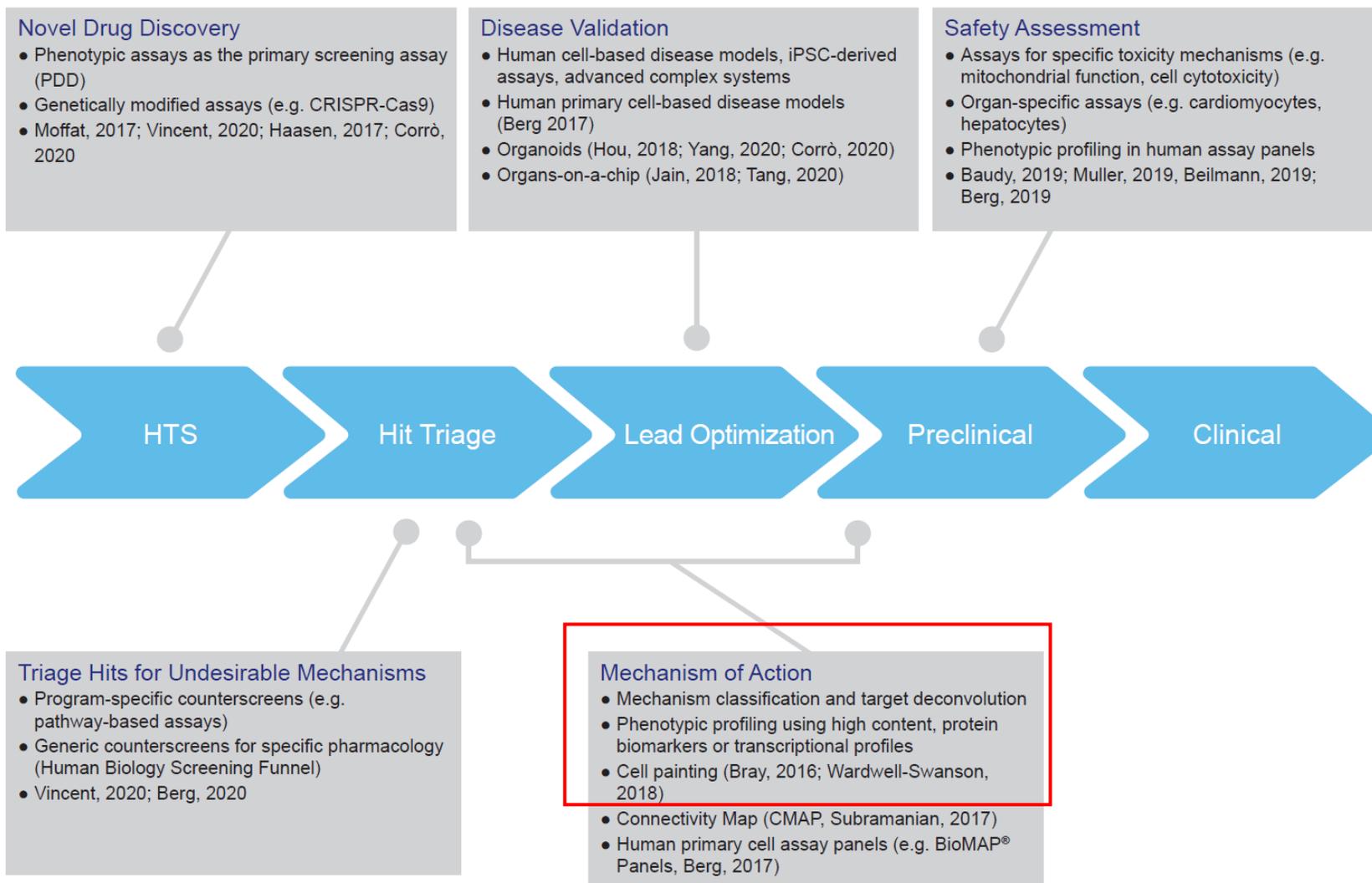


Outline

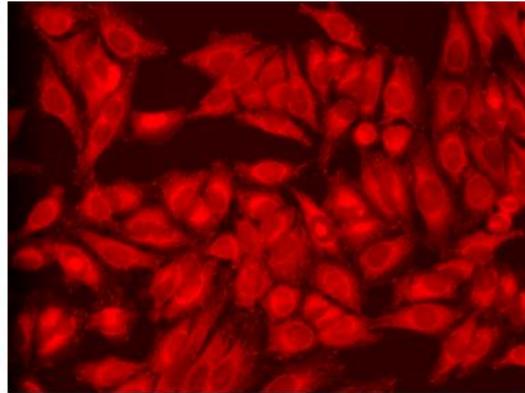
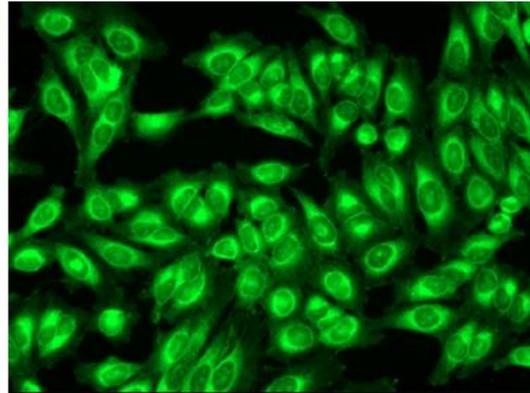
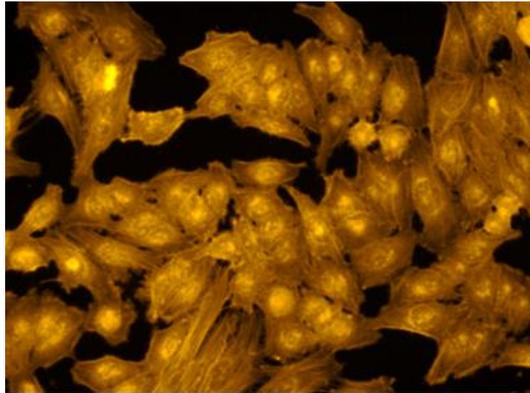
- High Content Screening
- RxRx3 benchmark dataset
- Contium of phenotypes – drugs and poisons
- Mechanisms of toxicity
- Tools for perturbing phenotypes

Phenotypic assays in drug discovery

Drug Discovery Process

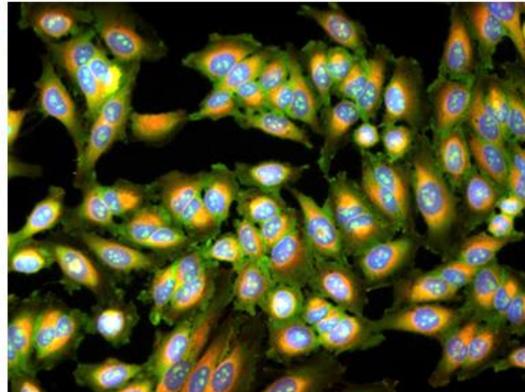
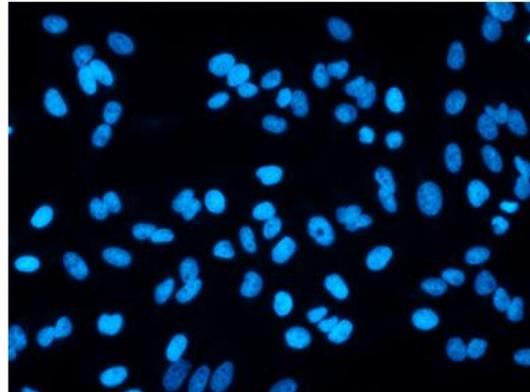
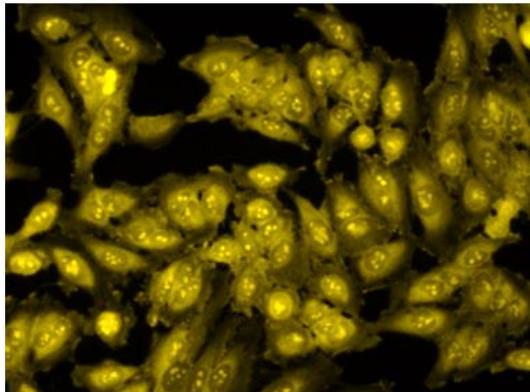


Cell Painting: Various organelle/cell structure dyes



5 individual dyes that stain cell structures found in most cells

Eg: nuclei (blue)
Mitochondria (red)

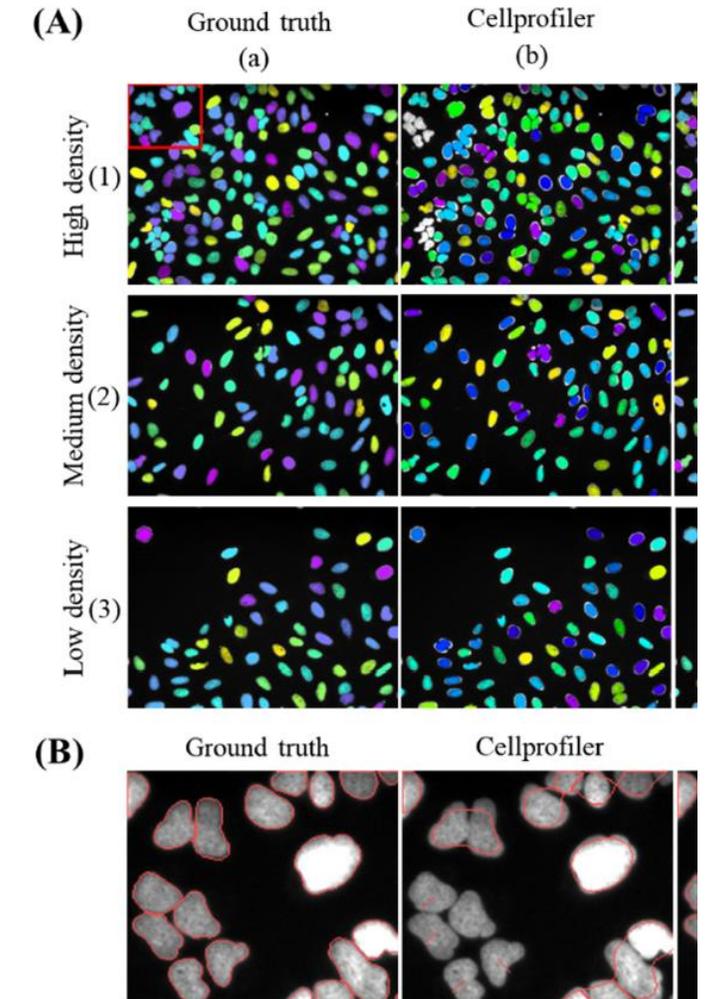
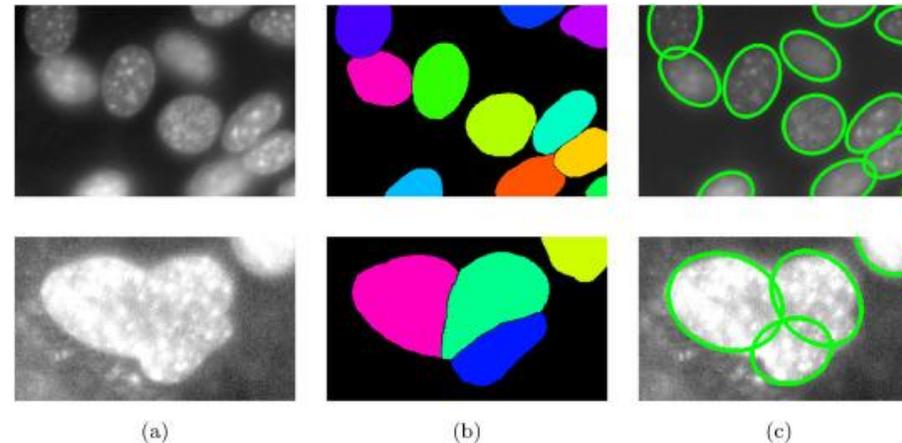


Plus overlay (panel 6)

Traditional HCS pipelines: Human subject matter expertise guides assumptions about features

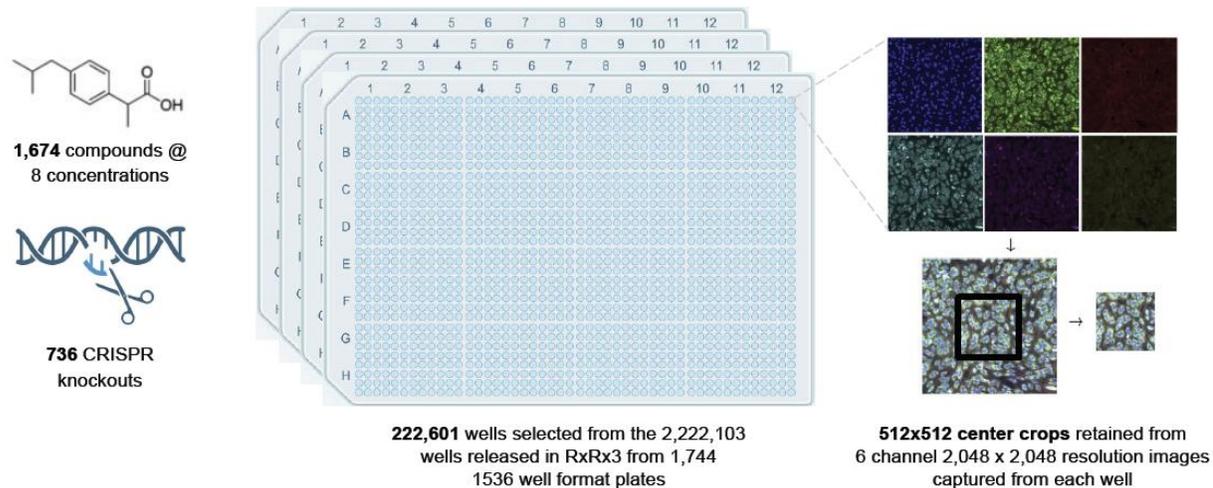
- Example: nuclear segmentation
- nuclei are assumed to have certain attributes
 - size range
 - minimum brightness intensity
 - signal over baseline

- Algorithms:
 - Thresholding
 - Watershed algorithm
 - etc



Contrast: AI/ML for phenomic models

- Uses deep learning to learn feature representation directly from pixel values
- Example benchmarking: RxRx3 Core (Module)



- 1674 compounds
- 736 CRISPR gene knockouts
- replicates

Perturbations: Combining phenotypic screening of compounds and genome-wide CRISPR screening

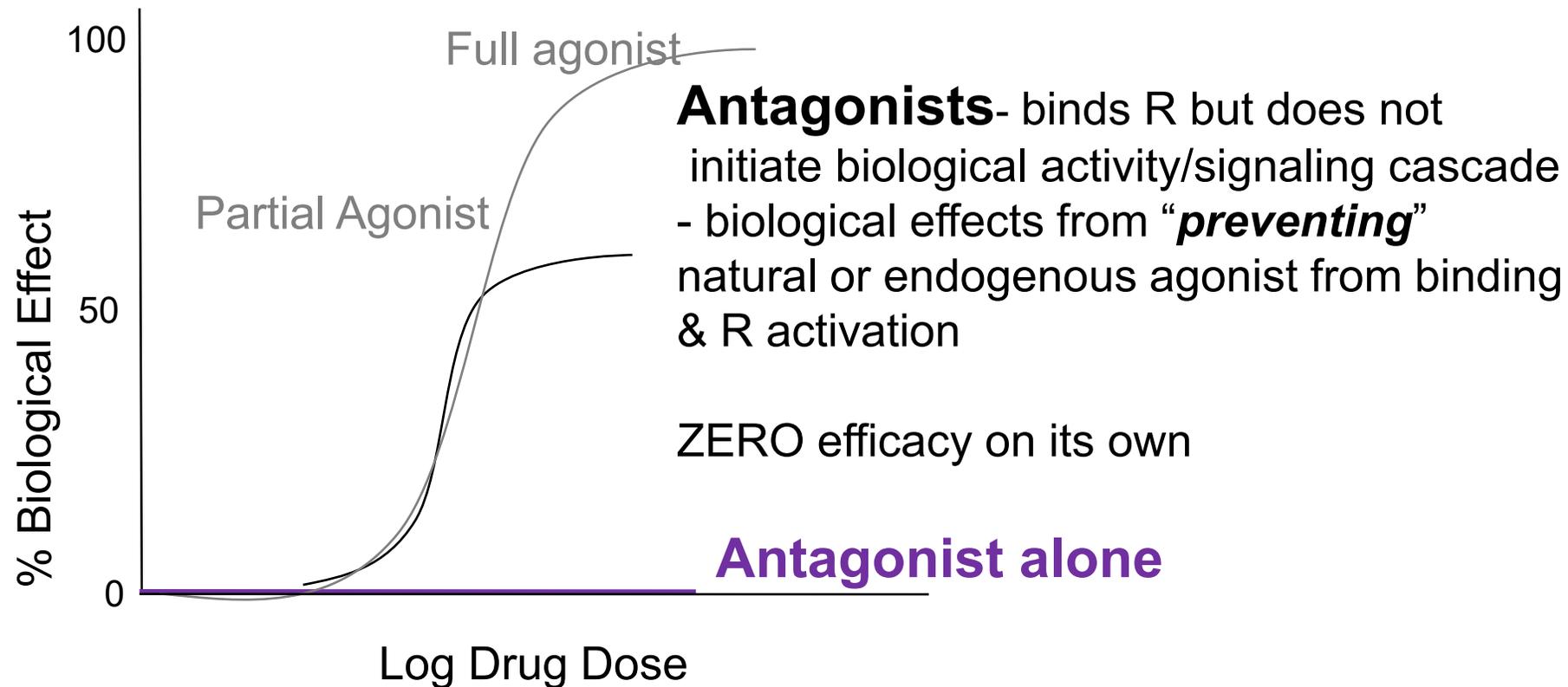


- Compare learned features to uncover similarities.
- If the representation of two perturbations in the neural network is similar, the network indicates that these perturbations lead to similar infilling (autoencoder)
- Infer mechanisms to drugs (what is the drug's target) → inferred causality

Issues with RxRx3 dataset – Pharmacist perspective

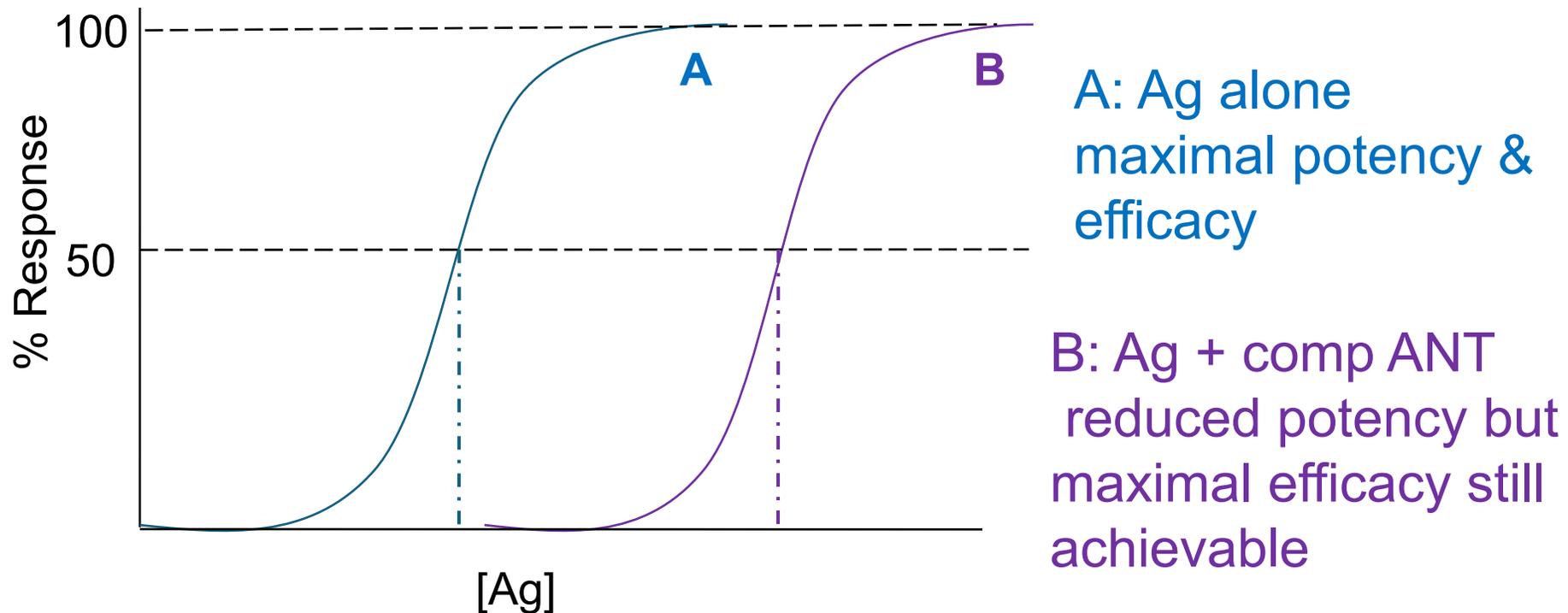
- Is the target present in the cell type?
 - Human umbilical epithelial cell line, HUVEC
 - All cell types same DNA → very different transcripts, proteins
- Only very few genes studied (~750 out of 25,000)
- Unlike a large phenotypic screen, this project involves FDA-approved drugs only (1674 compounds vs HTS library of >100K compounds)
- If our drug development program seeks antagonists, is the endogenous ligand present?
- What about dose-response?

When screening for antagonists, need natural (endogenous) agonist present



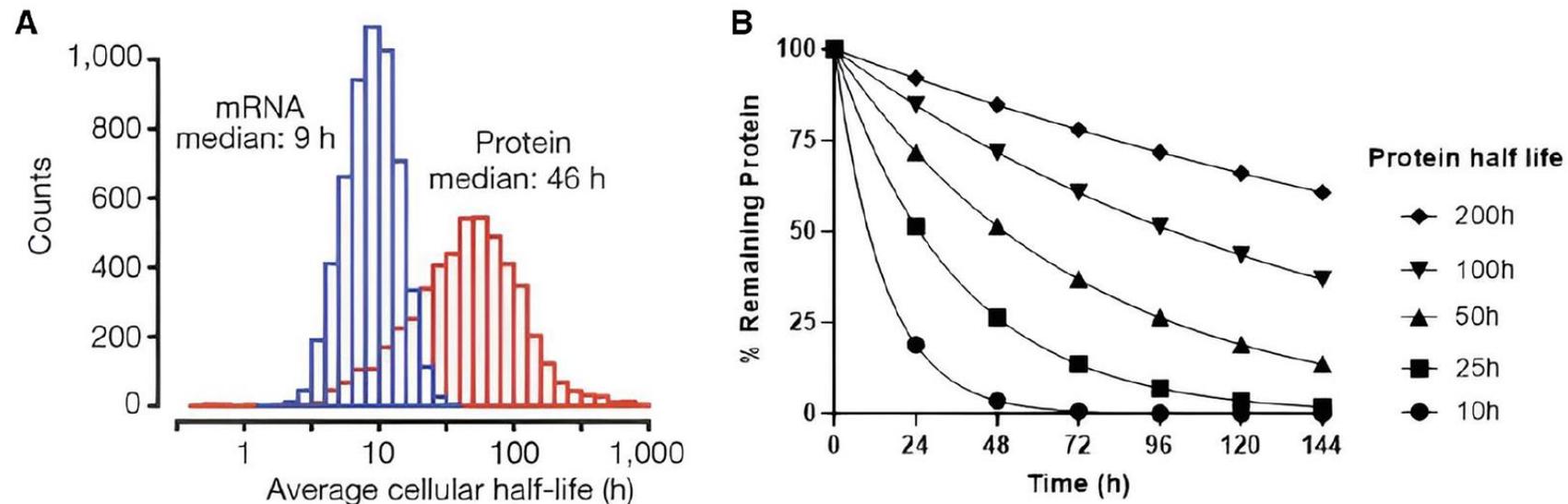
Competitive Antagonist

- Bind same site on R as Agonist
- Inhibition can be overcome by \uparrow [Ag]
- Affects Ag potency (ie shifts D-R curve RIGHT)
 - Clinically useful



What about timing?

- Timing of assay (microscope image capture post-intervention) reveals effects of some proteins but not others...



Is my molecule toxic?

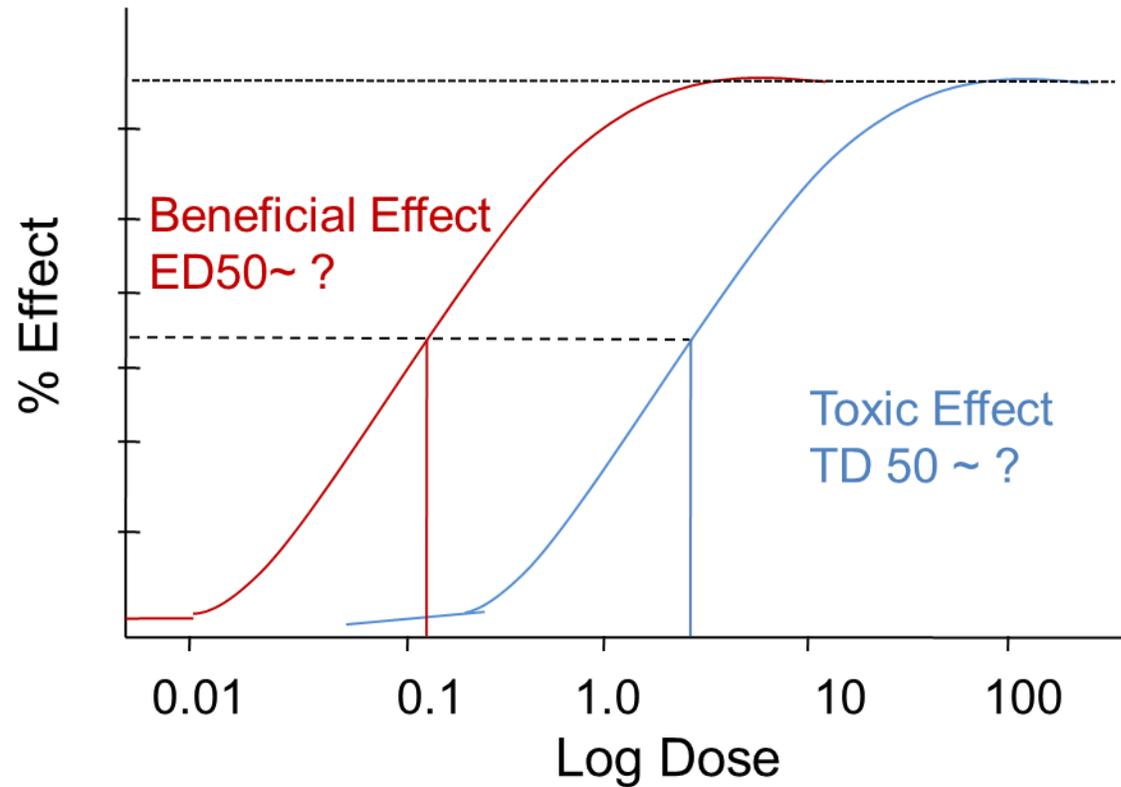
- This question has a dose-dependent answer....



- Need to move beyond simple classification problem (hit / not-hit)
- Reframe drugs/toxins as “bioactive molecules” with effect x at concentration y

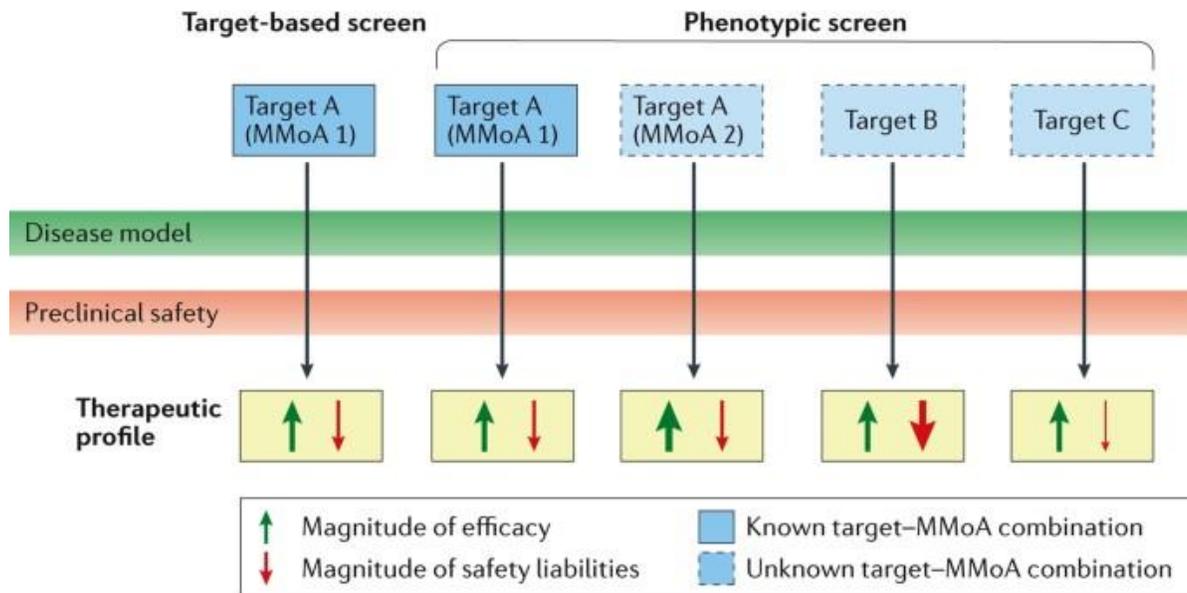
Therapeutic index

Ratio of concentration for toxic effect vs concentration for therapeutic effect (TD_{50}/ED_{50})



High therapeutic index:
Clinical utility

Phenotypic screens: Implications for drug safety and unknowns



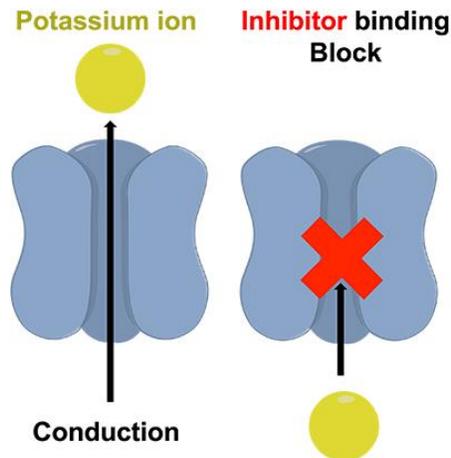
Nature Reviews | Drug Discovery

Toxicity depends on dose
3 major mechanisms

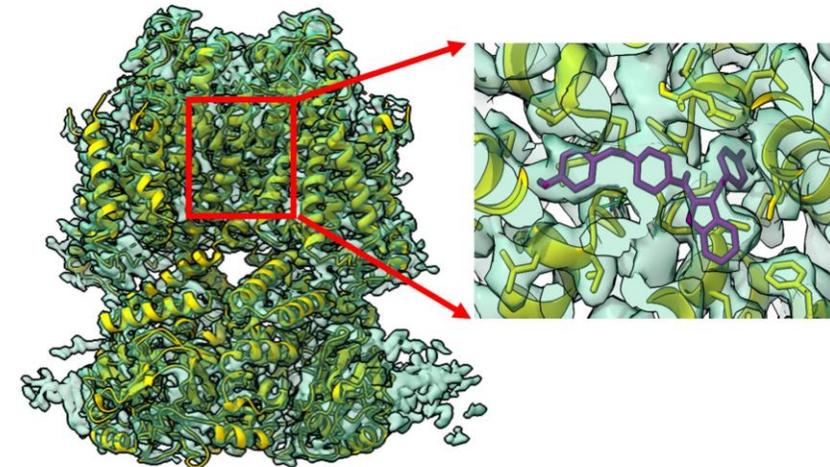
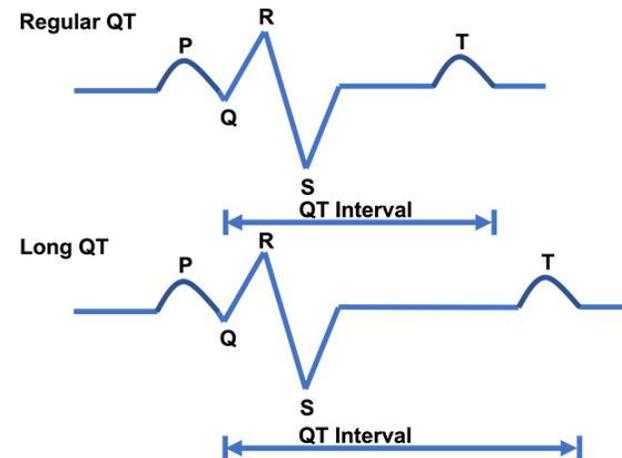
1. Off-target toxicity
2. On-target toxicity
3. Reactive intermediates

1. Off-target toxicity

- Some off-targets are so concerning that all new drugs are counter-screened against these targets
- Drug Development goal: “kill bad drugs early”
- Largest reason for attrition in preclinical drug dev: potential for cardiotoxicity
- Common example: cardiac ion channel → cardiotoxicity



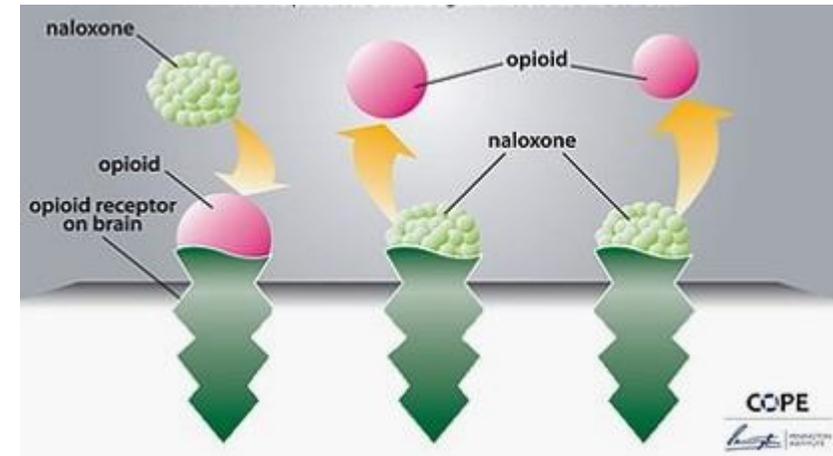
hERG potassium channel in the heart



CryoEM of hERG potassium channel

2. On-target toxicity

- Exacerbation of therapeutic effects
- Example: opioid drugs and opioid mu receptor
- On-target toxicity:
 - Respiratory depression
 - Sedation
- Eg. Fentanyl, opioid overdoses
- Counteract with naloxone
 - Fast-acting antagonist



**IF YOU CARE,
CARRY IT.**

Anyone can save a life
with **NALOXONE**.

Prevent and respond to an opioid
overdose on campus



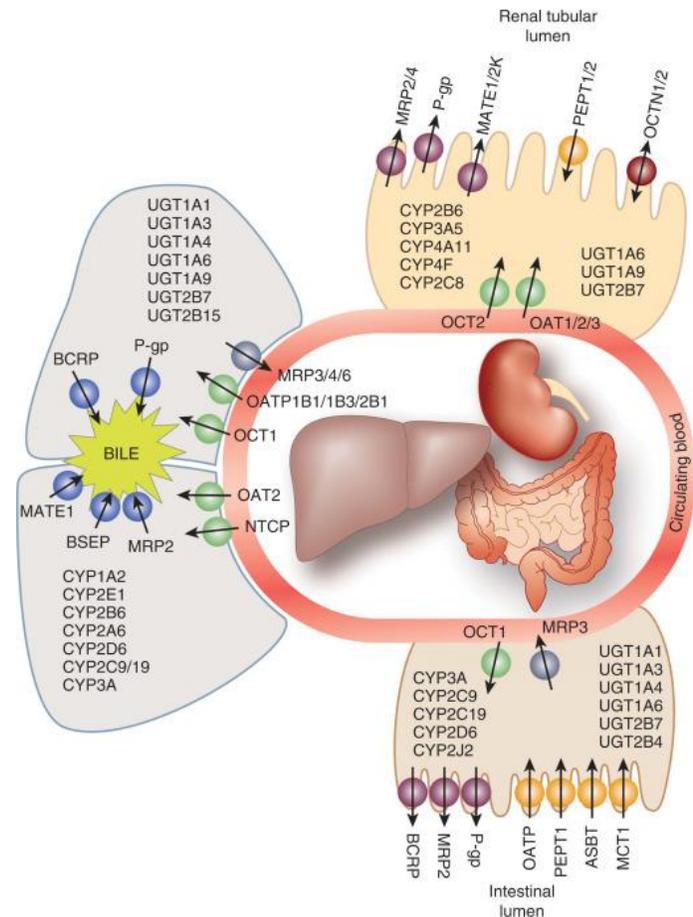
Canadian Mental
Health Association
Mental health for all



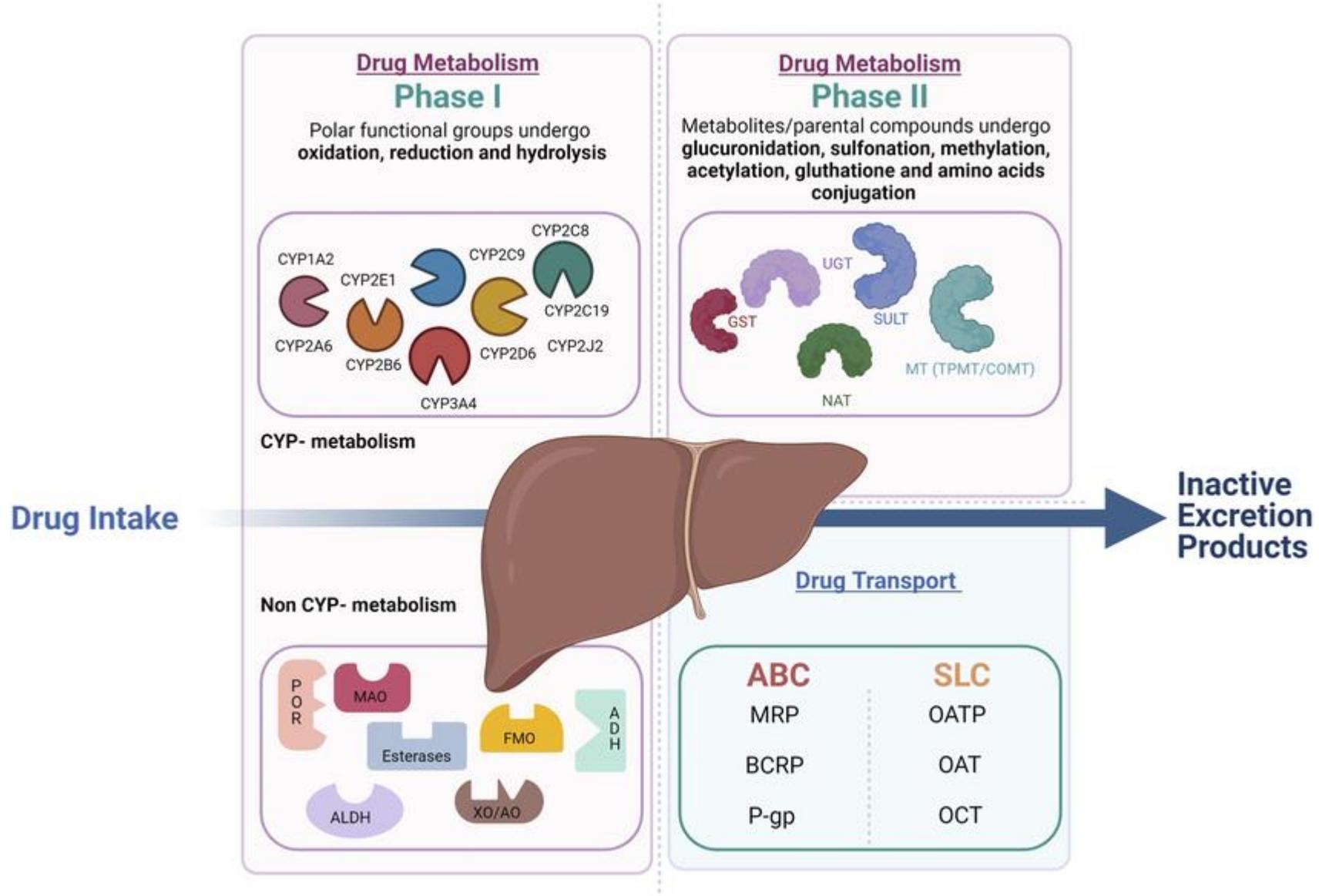
www.cmha.ca/carryit

3. Drug metabolism

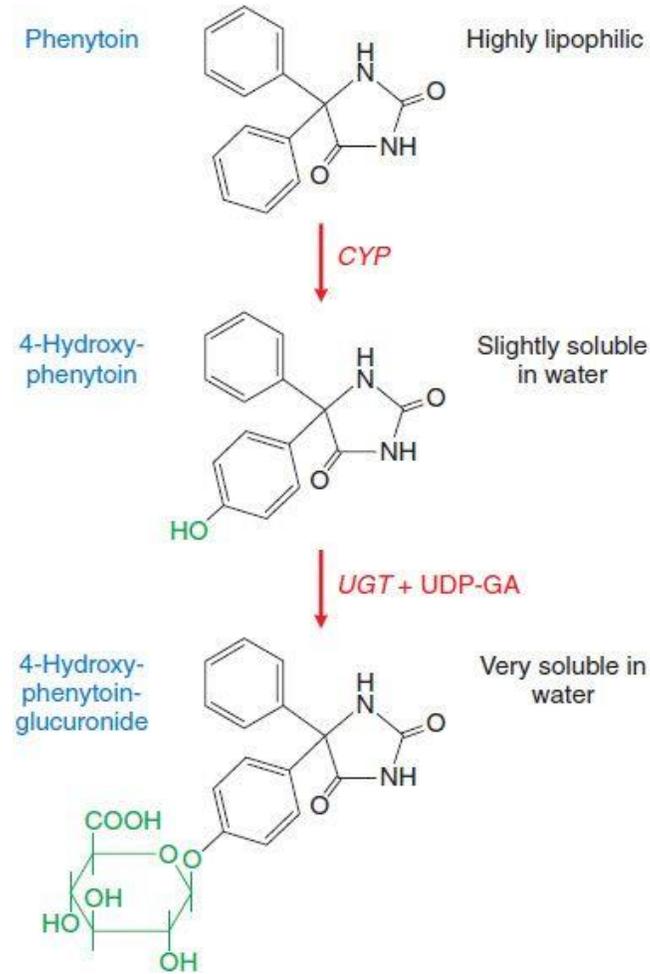
- Protective
- Evolutionarily conserved enzymes
- Remove “foreign” small molecules (chemicals) from the body
- Broad substrate specificity
 - Protection against chemicals the body has never encountered previously
 - Plant poisons
 - Including new and investigational drugs
- Abundant in liver but other sites in body also



3. Drug metabolism and transport for drug elimination



Drug metabolism to enhance elimination



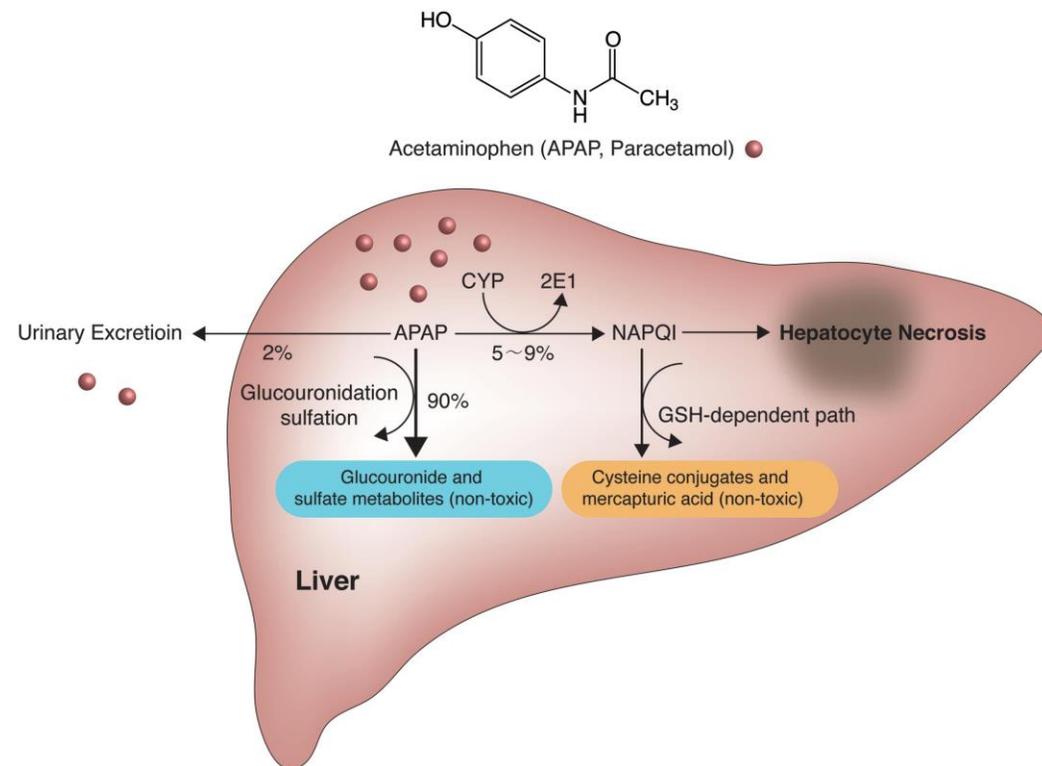
Anticonvulsant
drug example

Elimination in urine

3. Toxicity from Reactive metabolites

- Chemically reactive metabolites sometimes produced during drug metabolism
- Some of the intermediates produced can be harmful
 - covalent reactions with protein, DNA
- Inter-individual differences

- Appropriate phenotypic assays that “catch” toxicity require:
 - Source of drug metabolizing enzymes
 - Protein target expressed in cell type



Reactive metabolite toxicity – acetaminophen (Tylenol)

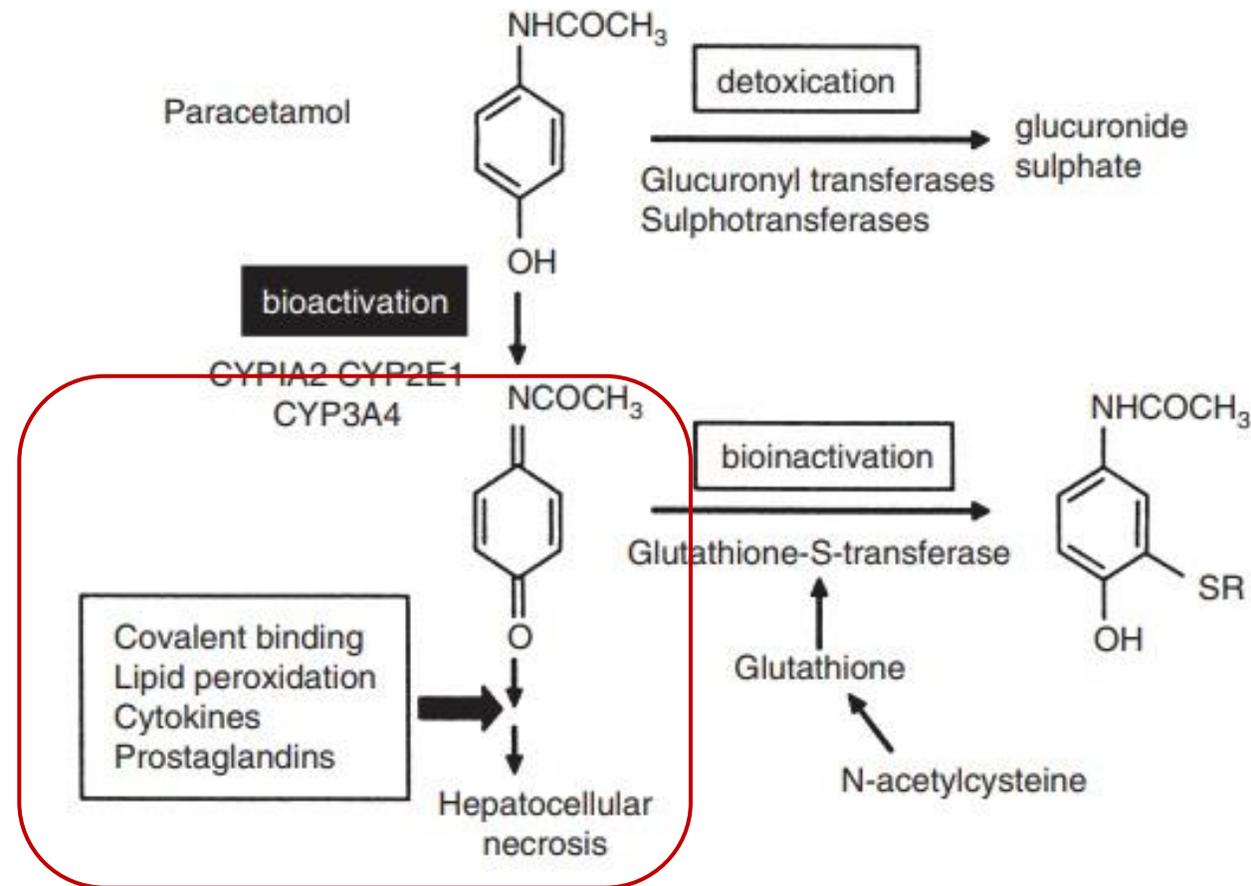
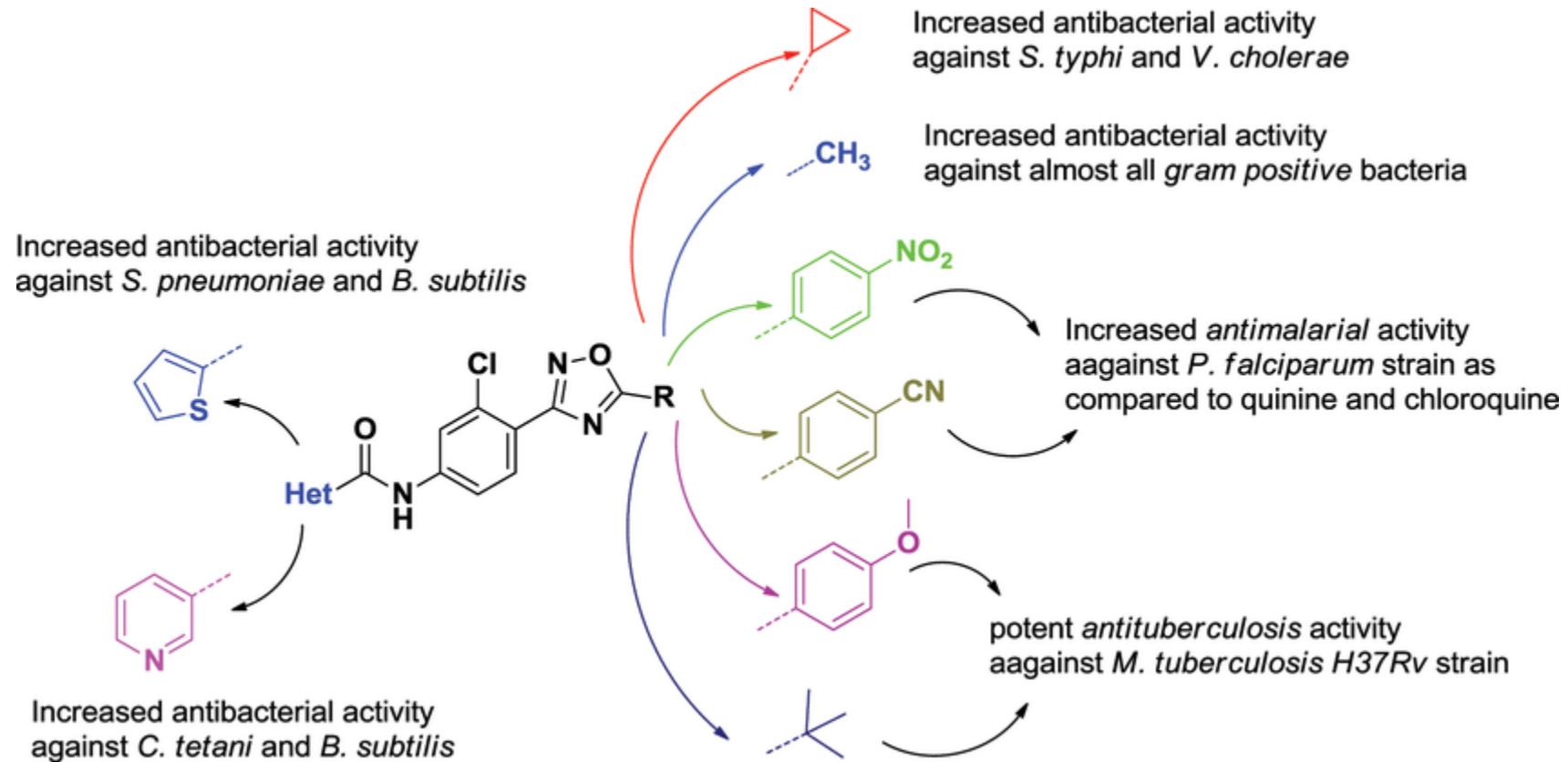


Figure 8.3. The role of metabolism in the hepatotoxicity associated with paracetamol.

Correlating chemical structure and phenotypic effect: Can your screen reveal structure-activity relationships?



Tools for perturbations

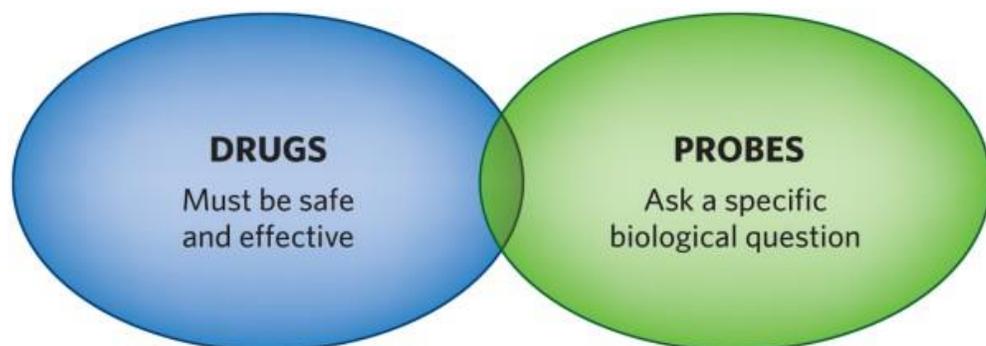
- Loss-of-function vs gain-of-function
 - CRISPR (loss)
 - Gene delivery (gain) → RNA → protein
- Binary vs continuous perturbation
 - CRISPR (DNA knockout, binary)
 - siRNA (acts on RNA transcripts, vary effect by varying dose of siRNA)
 - Recall: pharmacology focus on dose effects
- Chemical probes
 - **Cell-permeable** chemicals with clean mechanisms (single target)
 - Precise control of timing
 - Advantage when also structurally related inactive control (can do structure-activity relationships)

	RNAi	CRISPR
Benefits	<ul style="list-style-type: none">• Pre-designed reagents readily available• Useful for studying the effect of essential genes on phenotypes• Studies where temporary loss-of-function is desired (e.g., to mimic the effect of a drug)	<ul style="list-style-type: none">• Precise gene targeting with fewer off-target effects• Permanent gene disruption results in robust signal• Lower risk of immune response (some formats)• Flexible time frame for assay
Drawbacks	<ul style="list-style-type: none">• Temporary gene disruption may require a narrow assay window• Incomplete silencing (knockdown) may not produce a strong signal• Associated with more off-target effects• Silencing of multiple transcripts possible (introducing noise)• Introduced RNA may stimulate immune response• Laborious analysis and verification of true hits	<ul style="list-style-type: none">• Cannot be used to study essential genes

Chemical probes: tools for perturbation experiments

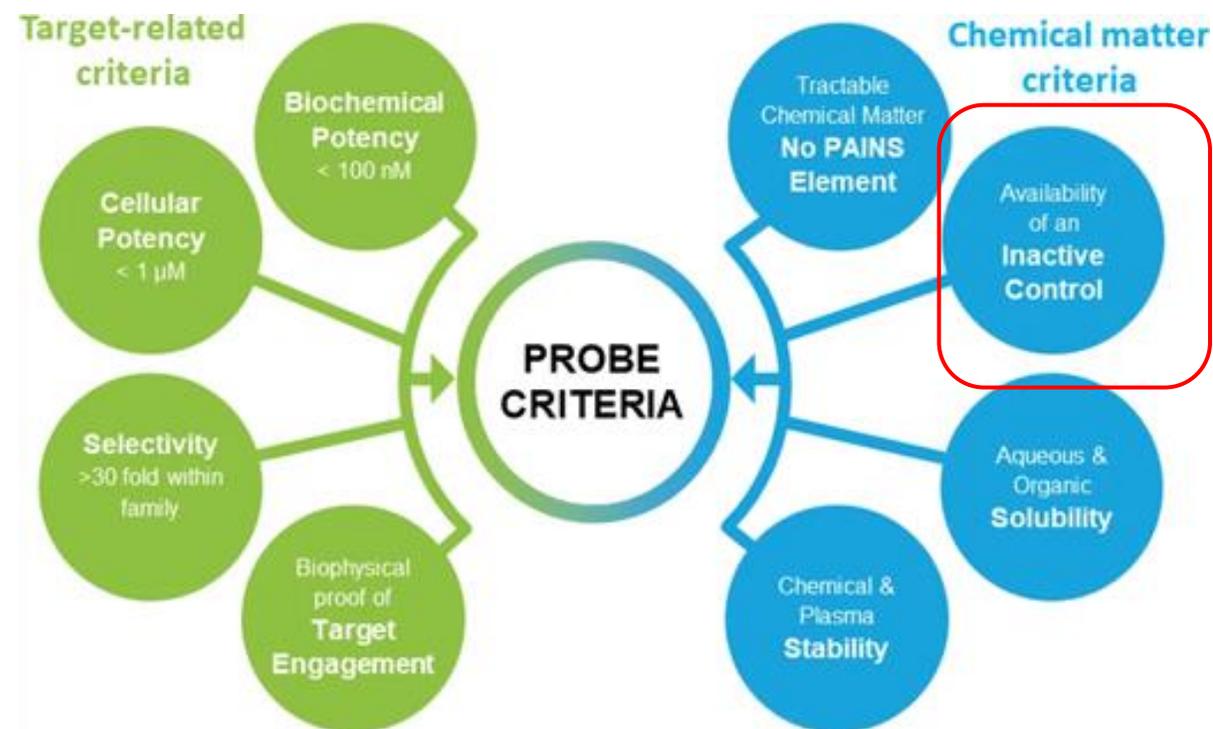


Goal: a chemical probe for every human protein

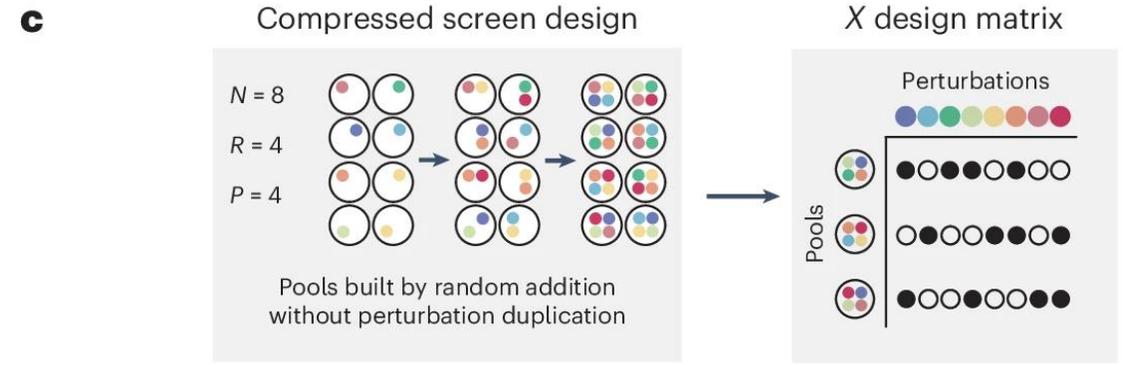
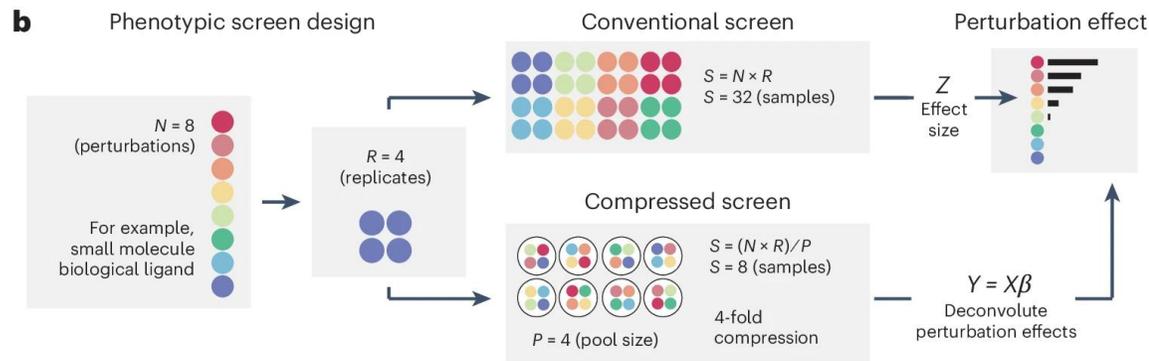
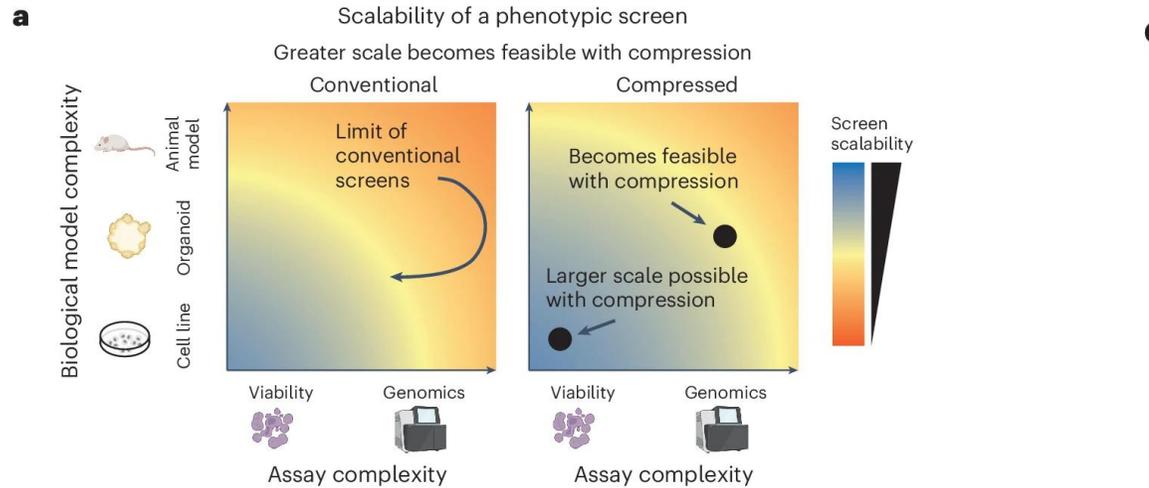


- May have undefined MoA
- IP restrictions; limited availability
- Must have human bioavailability
- High bar for physicochemical (guidelines for MW, lipophilicity, etc.) and pharmaceutical properties (stability, reasonable and economic synthesis, defined crystallization form, etc.)

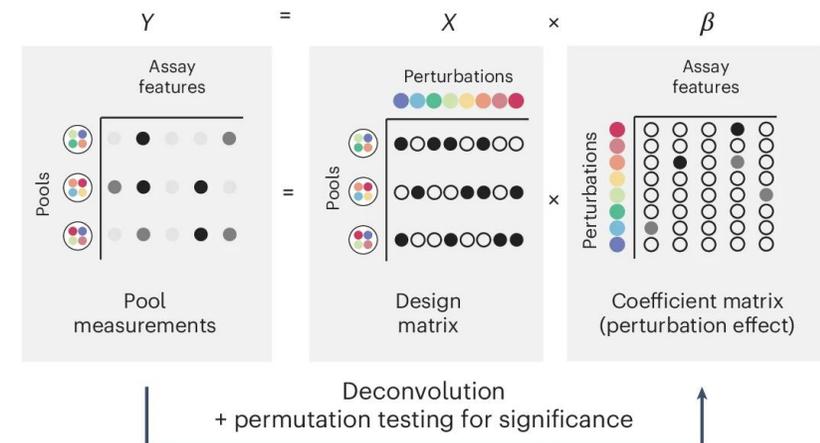
- Defined MoA is required
- Needs selectivity
- Freely available (both the physical compound itself and activity data)
- Drug-like properties, such as bioavailability, not necessarily required
- Value is markedly enhanced by use of structurally related inactive and structurally unrelated active compounds



Compressed phenotypic screens with pooled perturbations



d Single perturbation deconvolution: regularized linear regression model



Perspective

The limitations of small molecule and genetic screening in phenotypic drug discovery

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³Present address: Pharmacology Consulting LLC, East Lyme, CT, USA

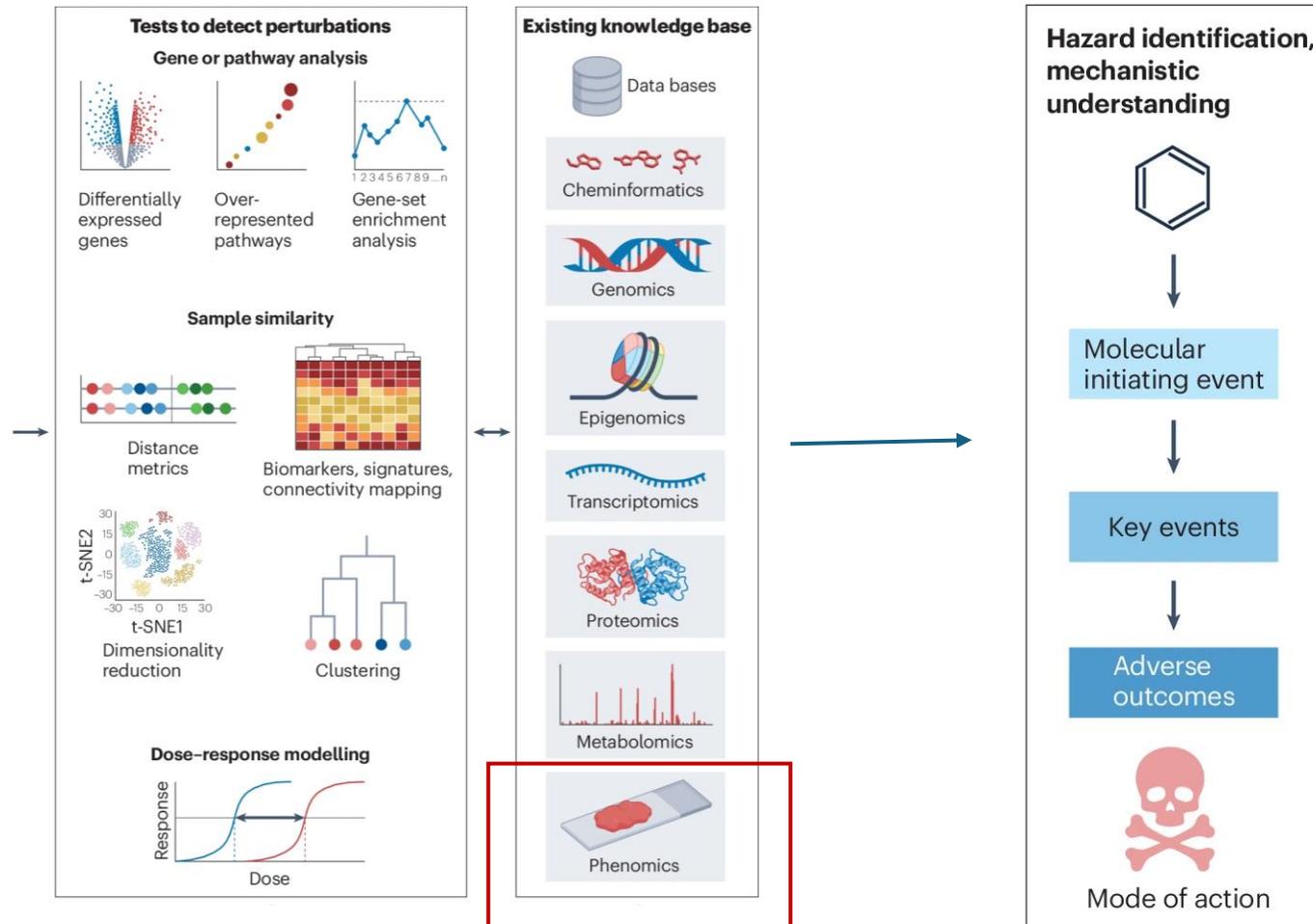
*Correspondence: fabien_vincent_us@yahoo.com (F.V.), davide.gianni@astrazeneca.com (D.G.)

<https://doi.org/10.1016/j.chembiol.2025.10.008>

Table 2. Small molecule screening limitations and mitigation strategies

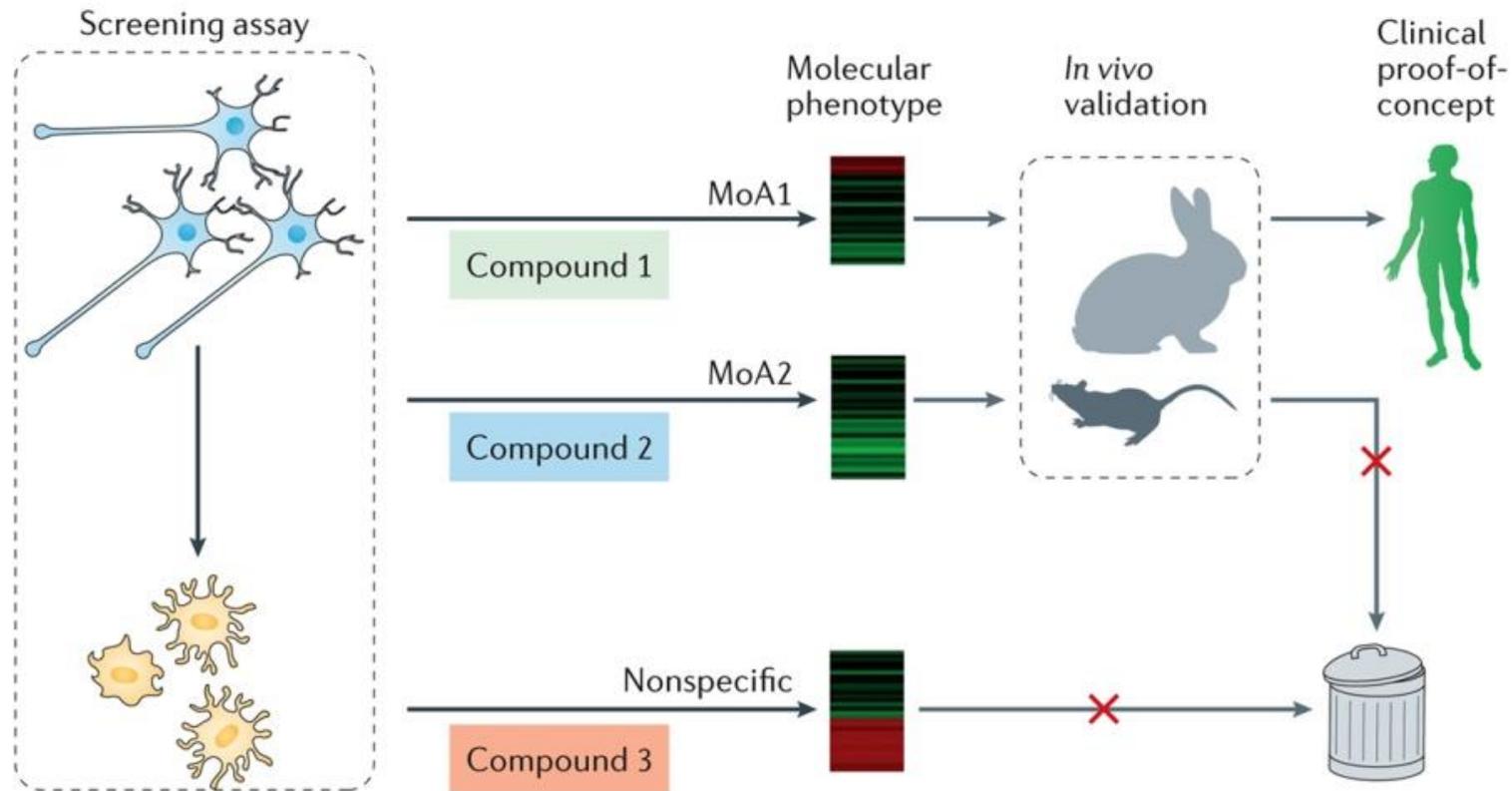
Small molecule screening limitations	Mitigation strategies
Chemogenomics libraries only cover ~5%–10% of the genome	Additional genome coverage via secreted proteins or receptor antibodies
Large legacy compound libraries only cover a fraction of the genome	New compound classes address a larger fraction of the genome (covalent, photoactivatable, and molecular glue compounds)
Limited throughput for complex assays, especially <i>in vivo</i> assays	Screening library compression, smaller compounds (e.g., fragments), biological diversity-driven libraries
Frequent lack of selectivity for related protein homologs	New compound classes may offer greater selectivity (covalent and molecular glue compounds)
Potential species translation hurdle	Additional species phenotypic assays, 10× <i>in vivo</i> dosing strategy, complex human models
Target and MoA deconvolution post-screen often challenging and may be required for successful outcome	New compound classes (covalent, photoactivatable, and glue) may facilitate target and MoA deconvolution through proteomics

Integrating phenomic approaches to understand toxicity



Where do we go from here in drug development?

c PDD compound screening and validation



Takeaways

- High content screening and phenotypic assays are useful in drug development
- Modeling approaches can leverage learned features that are distinct from subject matter expert-imposed features
- Phenotypic assays that combine genetic and chemical approaches are relevant for deconvoluting targets
- Drug toxicity is a phenotype of interest, amenable to AI/ML analysis

