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(54) Titre : **MODULATEURS DE RECEPTEUR ANDROGENE ET PROCEDES D'UTILISATION DE CEUX-CI**
 (54) Title: **ANDROGEN RECEPTOR MODULATORS AND METHODS OF USE THEREOF**

(57) **Abrégé/Abstract:**

Compounds of structural formula (I) are disclosed as useful for modulating the androgen receptor (AR) in a tissue selective manner in a patient in need of such modulation, and in particular for antagonizing AR in the prostate of a male patient or in the uterus of a female patient and agonizing AR in bone and/or muscle tissue. These compounds are useful in the treating conditions caused by androgen deficiency or which can be ameliorated by androgen administration, including: osteoporosis, periodontal disease, bone fracture, bone damage following bone reconstructive surgery, sarcopenia, frailty, aging skin, male hypogonadism, female sexual dysfunction, post-menopausal symptoms in women, atherosclerosis, hypercholesterolemia, hyperlipidemia, aplastic anemia and other hematopoietic disorders, pancreatic cancer, renal cancer, prostate cancer, arthritis and joint repair, alone or in combination with other active agents. In addition, these compounds are useful as pharmaceutical composition ingredients alone and in combination with other active agents.

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(54) Title: ANDROGEN RECEPTOR MODULATORS AND METHODS OF USE THEREOF

(57) Abstract: Compounds of structural formula (I) are disclosed as useful for modulating the androgen receptor (AR) in a tissue selective manner in a patient in need of such modulation, and in particular for antagonizing AR in the prostate of a male patient or in the uterus of a female patient and agonizing AR in bone and/or muscle tissue. These compounds are useful in the treating conditions caused by androgen deficiency or which can be ameliorated by androgen administration, including: osteoporosis, periodontal disease, bone fracture, bone damage following bone reconstructive surgery, sarcopenia, frailty, aging skin, male hypogonadism, female sexual dysfunction, post-menopausal symptoms in women, atherosclerosis, hypercholesterolemia, hyperlipidemia, aplastic anemia and other hematopoietic disorders, pancreatic cancer, renal cancer, prostate cancer, arthritis and joint repair, alone or in combination with other active agents. In addition, these compounds are useful as pharmaceutical composition ingredients alone and in combination with other active agents.



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TITLE OF THE INVENTION

ANDROGEN RECEPTOR MODULATORS AND METHODS OF USE THEREOF

CROSS-REFERENCE TO RELATED APPLICATIONS

5 The present application claims priority of U.S. provisional application
Serial No. 60/334,866, filed October 19, 2001.

BACKGROUND OF THE INVENTION

10 Androgens play important roles in post-natal development that are
most pronounced at adrenarche and pubarche. Androgen production promotes the
musculoskeletal anabolism associated with the pubertal growth in both males and
females. At puberty, ovarian and testicular androgens are responsible for pubertal
hair, acne, and enhancement of libido. In males, exposure to 100-fold increased levels
of endogenous androgens results in the gender dimorphism in bone mass, muscle
15 mass (positive nitrogen balance), and upper body strength, and are required for normal
sexual development (genitalia, spermatogenesis, prostate and seminal vesicle
maturation). Delay in puberty decreases the peak bone mass achieved during
adulthood. (Bhasin, S., et al., Eds. Pharmacology, Biology, and Clinical
Applications of Androgens: Current Status and Future Prospects. Wiley-Liss,
20 Inc.:New York, 1996). In women, natural menopause causes virtually complete loss
of ovarian estrogen production and gradually reduces ovarian production of androgen
by approximately 50%. The physiological consequences of reduced androgen
production after menopause are evident in decreased energy and libido, and contribute
significantly in many women to vasomotor symptoms. Decreased androgen output is
25 also thought to contribute -- along with declining pituitary growth hormone (GH)
secretion and insulin derived growth factor 1 (IGF1) action -- to age-dependent
sarcopenia, negative nitrogen balance and loss of bone mass. (Vestergaard, et al.,
Effect of sex hormone replacement on the insulin-like growth factor system and bone
mineral: a cross-sectional and longitudinal study in 595 perimenopausal women
30 participating in the Danish Osteoporosis Prevention Study, J Clin Endocrinol Metab.
84:2286-90, 1999; and Bhasin, et al., Eds. Pharmacology, Biology, and Clinical
Applications of Androgens: Current Status and Future Prospects, Wiley-Liss,
Inc.:New York. 1996). Postmenopausal osteoporosis results mainly from estrogen
deficiency. However, many women who received estrogen replacement therapy still
35 lose bone with age and develop age – related osteoporotic fractures (albeit at a lower

rate than those taking estrogens), indicating that both estrogens and androgens play important roles for bone health in both women and men. The simultaneous decreases in bone mass, muscle mass and muscle strength increase the risk of falls and especially of hip fractures in both men and women > 65 years of age. In fact, one-
5 third of all hip fractures occur in men.

The androgen receptor (AR) belongs to the nuclear receptor superfamily and controls transcription in a ligand dependent manner (Brinkman, et al., Mechanisms of androgen receptor activation and function, J. Ster. Biochem. Mol. Biol. 69, 307-313, 1999). Upon androgen binding, AR binds directly to specific DNA
10 sequences present in the promoter region of androgen responsive genes, termed androgen response elements (AREs), to stimulate transcription. Ligands that interact with the AR and activate or repress gene transcription are classified as AR agonists, whereas ligands that interact with AR and block transactivation or transrepression of genes induced by endogenous androgens are classified as AR antagonists. A number
15 of natural or synthetic androgen agonists have been used for treatment of musculoskeletal or hematopoietic disorders and for hormone replacement therapy. In addition, AR antagonists, such as flutamide or bicalutamide, are used for treatment of prostate cancer. However, clinical use of these androgen agonists or antagonists have been limited because of undesirable effects, such as hirsutism and prostate
20 enlargement for agonists, and bone loss, fracture, gynecomastia and sarcopenia for antagonists. It would be useful to have available androgens with tissue selective agonistic activity, which increase bone formation and muscle mass but do not induce the virilization.

Osteoporosis is characterized by bone loss, resulting from an
25 imbalance between bone resorption (destruction) and bone formation, which starts in the fourth decade continues throughout life at the rate of about 1-4% per year (Eastell, Treatment of postmenopausal osteoporosis, New Eng. J. Med. 338 : 736, 1998). In the United States, there are currently about 20 million people with detectable fractures of the vertebrae due to osteoporosis. In addition, there are about 250,000 hip fractures
30 per year due to osteoporosis, associated with a 12%-20% mortality rate within the first two years, while 30% of patients require nursing home care after the fracture and many never become fully ambulatory again. In postmenopausal women, estrogen deficiency leads to increased bone resorption resulting in bone loss in the vertebrae of around 5% per year, immediately following menopause. Thus, first line
35 treatment/prevention of this condition is inhibition of bone resorption by

bisphosphonates, estrogens, selective estrogen receptor modulators (SERMs) and calcitonin. However, inhibitors of bone resorption are not sufficient to restore bone mass for patients who have already lost a significant amount of bone. The increase in spinal BMD attained by bisphosphonate treatment can reach 11% after 7 years of treatment with alendronate. In addition, as the rate of bone turnover differs from site to site; higher in the trabecular bone of the vertebrae than in the cortex of the long bones, the bone resorption inhibitors are less effective in increasing hip BMD and preventing hip fracture. Therefore, osteoanabolic agents, which increase cortical/periosteal bone formation and bone mass of long bones, would address an unmet need in the treatment of osteoporosis especially for patients with high risk of hip fractures. The osteoanabolic agents also complement the bone resorption inhibitors that target the trabecular envelope, leading to a biomechanically favorable bone structure. (Schmidt, et al., Anabolic steroid: Steroid effects on bone in women, 1996, In: J. P. Bilezikian, et al., Ed. Principles of Bone Biology. San Diego: Academic Press.)

A number of studies provide the proof of principle that androgens are osteoanabolic in women and men. Anabolic steroids, such as nandrolone decanoate or stanozolol, have been shown to increase bone mass in postmenopausal women. Beneficial effects of androgens on bone in post-menopausal osteoporosis are well-documented in recent studies using combined testosterone and estrogen administration (Hofbauer, et al., Androgen effects on bone metabolism: recent progress and controversies, Eur. J. Endocrinol. 140, 271-286, 1999). Combined treatment increased significantly the rate and extent of the rise in BMD (lumbar and hip), relative to treatment with estrogen alone. Additionally, estrogen - progestin combinations that incorporate an androgenic progestin (norethindrone) rather than medroxyprogesterone acetate yielded greater improvements in hip BMD. These results have recently been confirmed in a larger (N= 311) 2 year, double blind comparison study in which oral conjugated estrogen (CEE) and methyltestosterone combinations were demonstrated to be effective in promoting accrual of bone mass in the spine and hip, while conjugated estrogen therapy alone prevented bone loss (A two-year, double-blind comparison of estrogen-androgen and conjugated estrogens in surgically menopausal women: Effects on bone mineral density, symptoms and lipid profiles. J Reprod Med. 44(12):1012-20, 1999). Despite the beneficial effects of androgens in postmenopausal women, the use of androgens has been limited because of the undesirable virilizing and metabolic action of androgens. The data from Watts

and colleagues demonstrate that hot flushes decrease in women treated with CEE + methyltestosterone; however, 30% of these women suffered from significant increases in acne and facial hair, a complication of all current androgen pharmacotherapies (Watts, et al., Comparison of oral estrogens and estrogens plus androgen on bone mineral density, menopausal symptoms, and lipid-lipoprotein profiles in surgical menopause, *Obstet. Gynecol.* 85, 529-537, 1995). Moreover, the addition of methyltestosterone to CEE markedly decreased HDL levels, as seen in other studies. Thus, the current virilizing and metabolic side effect profile of androgen therapies provide a strong rationale for developing tissue selective androgen agonists for bone.

It is well established that androgens play an important role in bone metabolism in men, which parallels the role of estrogens in women. (Anderson, et al., Androgen supplementation in eugonadal men with osteoporosis – effects of 6 months of treatment on bone mineral density and cardiovascular risk factors, *Bone* 18: 171-177, 1996). Even in eugonadal men with established osteoporosis, the therapeutic response to testosterone treatment provides additional evidence that androgens exert important osteoanabolic effects. Mean lumbar BMD increased from 0.799 gm/cm² to 0.839 g/cm², in 5 to 6 months in response to 250 mg of testosterone ester IM q fortnight (p = 0.001). A common scenario for androgen deficiency occurs in men with stage D prostate cancer (metastatic) who undergo androgen deprivation therapy (ADT). Endocrine orchiectomy is achieved by long acting GnRH agonists, while androgen receptor blockade is implemented with flutamide or bicalutamide (AR antagonists). In response to hormonal deprivation, these men suffer from hot flushes, significant bone loss, weakness, and fatigue. In a recent pilot study of men with stage D prostate cancer, osteopenia (50% vs. 38%) and osteoporosis (38% vs. 25%) were more common in men who had undergone ADT for >1 yr than the patients who did not undergo ADT (Wei, et al. Androgen deprivation therapy for prostate cancer results in significant loss of bone density, *Urology* 54: 607-11, 1999). Lumbar spine BMD was significantly lower in men who had undergone ADT (P = 0.008). Thus, in addition to the use of tissue selective AR agonists for osteoporosis, tissue selective AR antagonists in the prostate that lack antagonistic action in bone and muscle may be a useful treatment for prostate cancer, either alone or as an adjunct to traditional ADT such as GnRH agonist/antagonist. (See also Stoche, et al., *J Clin. Endocrin. Metab.* 86:2787-91, 2001).

Additionally, it has been reported that patients with pancreatic cancer treated with the antiandrogen flutamide have been found to have increased survival

time. (Greenway, B.A., *Drugs & Aging*, 17(3), 161, 2000). The tissue selective androgen receptor modulators of the present invention may be employed for treatment of pancreatic cancer, either alone or as an adjunct to treatment with an antiandrogen.

The possibility of tissue selective AR agonism was suggested by androgen insensitivity syndrome (AIS), which results from mutations in AR gene located at X chromosome. (Quigley, et al., *Androgen receptor defects: Historical, clinical, and molecular perspectives. Endocrine Reviews*. 16:546-546, 1995). These mutations cause different degrees of androgen insensitivity. While complete lack of androgen responsiveness develops as a female phenotype with female-type bones, subtle mutations (one amino acid substitution) of AR may lead to partial AIS with different degrees of abnormality in male sexual development often with male-type skeleton. A similar aberration in male sex organ development is also found in individuals with mutations in 5 α -reductase type 2 gene, that converts testosterone to 5 α -dihydro-testosterone (5 α -DHT) (Mendonca, et al., *Male pseudohermaphroditism due to steroid 5alpha-reductase 2 deficiency: Diagnosis, psychological evaluation, and management, Medicine (Baltimore)*, 75:64-76 (1996)). These patients exhibit partial development of male organs with normal male skeleton, indicating that testosterone cannot substitute for 5 α -DHT as an activator of AR in genital development. This ligand specificity for certain tissues raises the possibility that androgenic compounds with AR agonistic activity could have specificity for certain tissues, such as bone, while lacking activity in other tissues, such as those responsible for virilization.

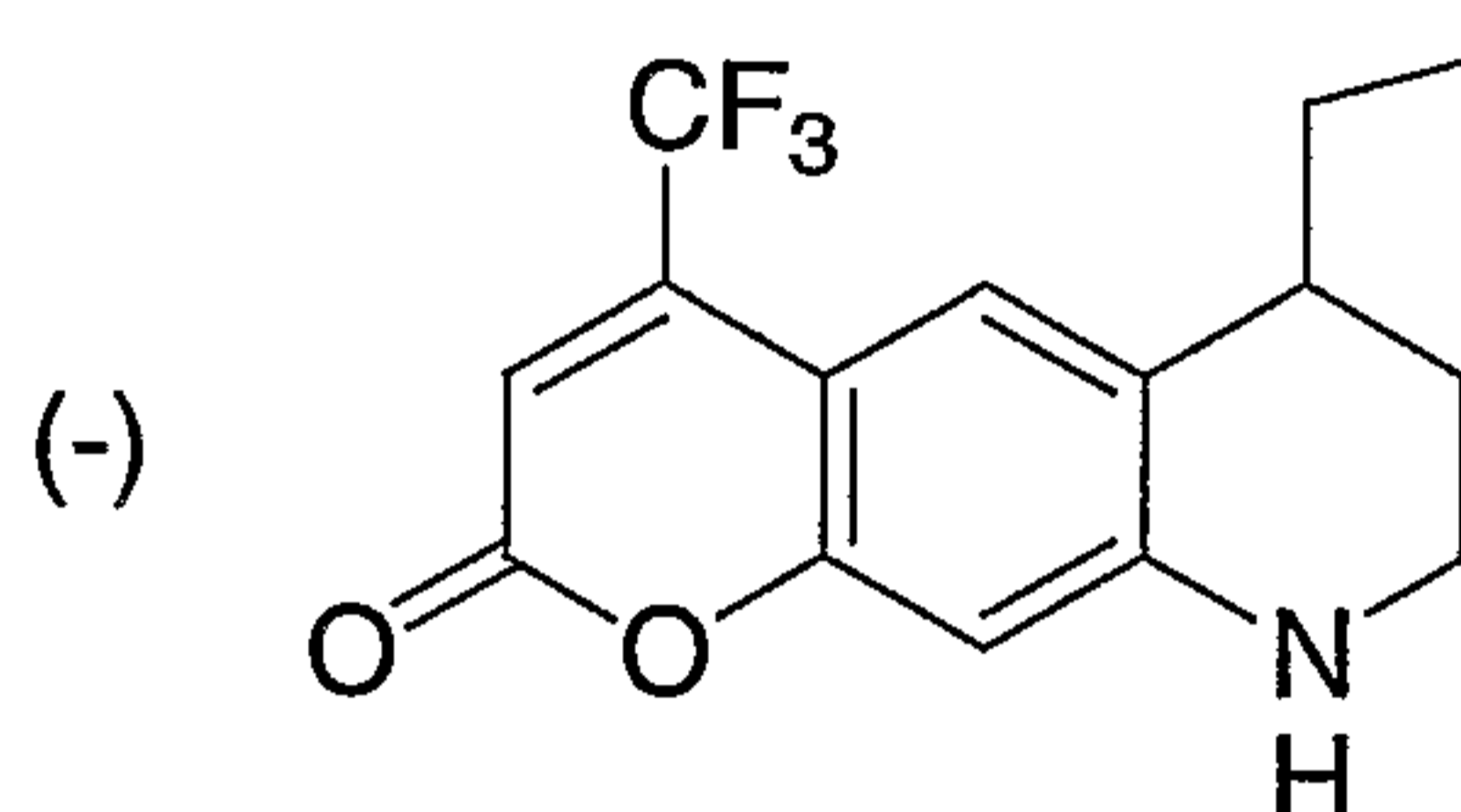
Recent advances in the steroid hormone receptor field uncovered the complex nature of transcription controlled by AR and other nuclear receptors (Brinkman, et al., *Mechanisms of androgen receptor activation and function, J. Ster. Biochem. Mol. Biol.* 69:307-313 1999). Upon binding to ARE as a homo-dimer, agonist-bound AR stimulates transcription by recruiting a large enzymatic co-activator complex that includes GRIP1/TIF2, CBP/p300 and other coactivators. Transcriptional activities of AR have been functionally mapped to both the N-terminal domain (NTD) and C-terminal ligand binding domain (LBD), also termed activation function AF1 and AF2, respectively. A feature of AR is the ligand mediated interaction of AR NTD with LBD (N-C interaction) which is essential for most ligand induced transcriptional activation. In addition, agonist-bound AR can also suppress transcription via protein-protein interaction with transcription factor complexes such as AP1, NF κ B and Ets family. Both AR agonist-induced transcriptional activation and repression are context (cell type and promoter)

dependent and are reversed by AR antagonists, providing the possibility for ligand-dependent, context specific agonism/antagonism. Androgenic ligands, thus, may lead to tissue selective AR agonism or partial AR agonism/antagonism, and have been named selective AR modulators (SARMs).

5 What is needed in the art are compounds that can produce the same positive responses as androgen replacement therapy without the undesired side effects. Also needed are androgenic compounds that exert selective effects on different tissues of the body. In this invention, we developed a method to identify SARMs using a series of in vitro cell-assays that profiles ligand mediated activation
10 of AR, such as (i) N-C interaction, (ii) transcriptional repression, (iii) transcriptional activation dependent on AF1 or AF2 or native form of AR. SARM compounds in this invention, identified with the methods listed above, exhibit tissue selective AR agonism in vivo, i. e. agonism in bone (stimulation of bone formation in rodent model of osteoporosis) and antagonism in prostate (minimal effects on prostate growth in
15 castrated rodents and antagonism of prostate growth induced by AR agonists). Such compounds are ideal for treatment of osteoporosis in women and men as a monotherapy or in combination with inhibitors of bone resorption, such as bisphosphonates, estrogens, SERMs, cathepsin K inhibitors, $\alpha V\beta 3$ antagonists, calcitonin, proton pump inhibitors. SARM compounds may also be employed for
20 treatment of prostate disease, such as prostate cancer and benign prostate hyperplasia (BPH). Moreover, compounds in this invention exhibit minimal effects on skin (acne and facial hair growth) and can be used for treatment of hirsutism. Additionally, compounds in this invention can exhibit muscle growth and can be used for treatment of sarcopenia and frailty. Moreover, compounds in this invention can exhibit
25 androgen agonism in the central nervous system and can be used to treat vasomotor symptoms (hot flush) and can increase energy and libido, particularly in post-menopausal women. The compounds of the present invention may also be used in particular to treat female sexual dysfunction. The compounds of the present invention may be used in the treatment of prostate cancer, either alone or as an adjunct to
30 traditional GnRH agonist/antagonist therapy for their ability to restore bone, or as a replacement for antiandrogen therapy because of the ability to antagonize androgen in the prostate, and minimize bone depletion in the skeletal system. Further, the compounds of the present invention may be used for their ability to restore bone in the treatment of pancreatic cancer as an adjunct to treatment with antiandrogen, or as solo
35 agents for their antiandrogenic properties, offering the advantage over traditional

antiandrogens of being bone-sparing. Additionally, compounds in this invention can increase the number of blood cells, such as red blood cells and platelets and can be used for treatment of hematopoietic disorders such as aplastic anemia. Finally, compounds in this invention have minimal effects on lipid metabolism, thus
 5 considering their tissue selective androgen agonism listed above, the compounds in this invention are ideal for hormone replacement therapy in hypogonadic (androgen deficient) men.

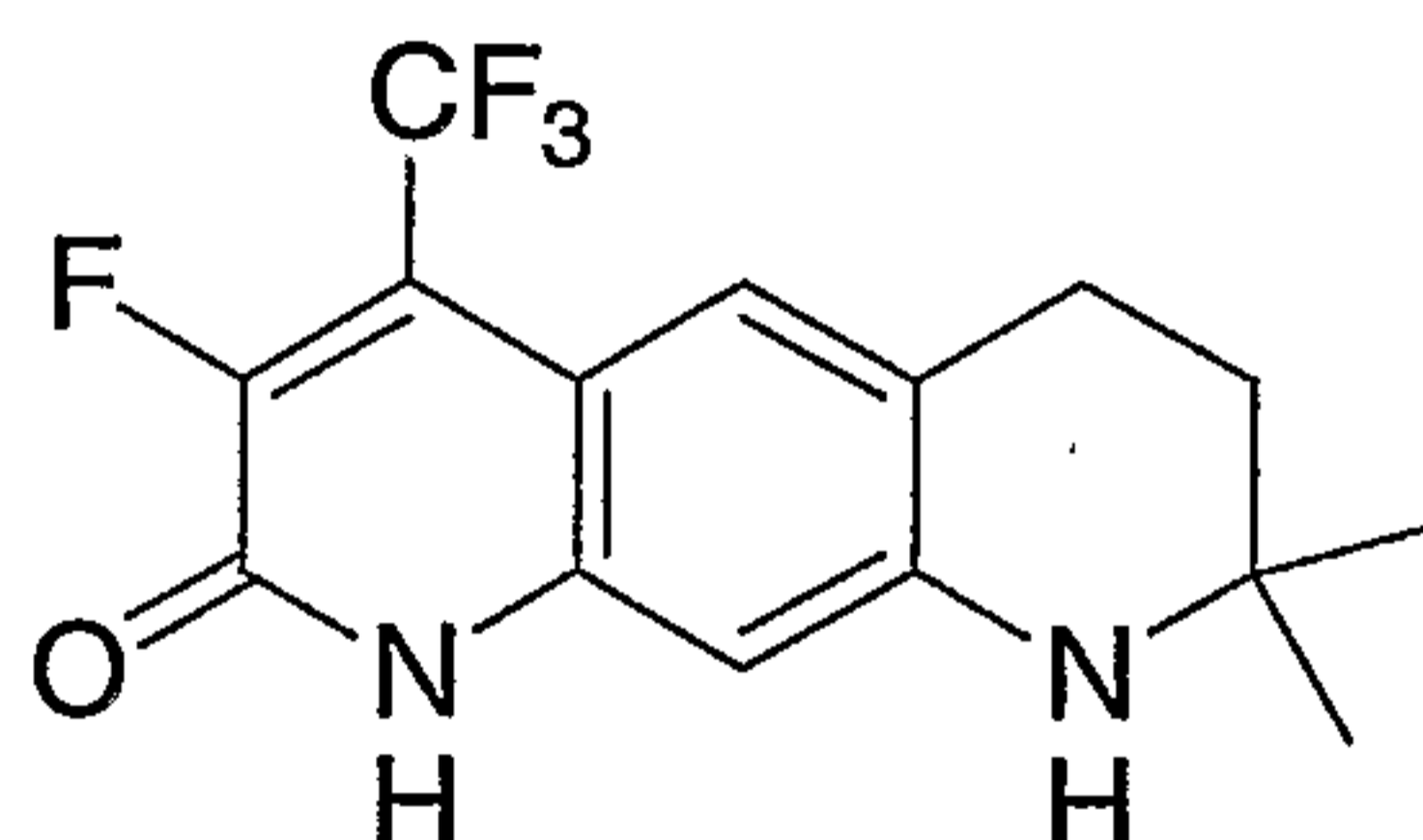
EP 1 002 799 assigned to Pfizer describes an optically pure androgen mediator of structural formula:



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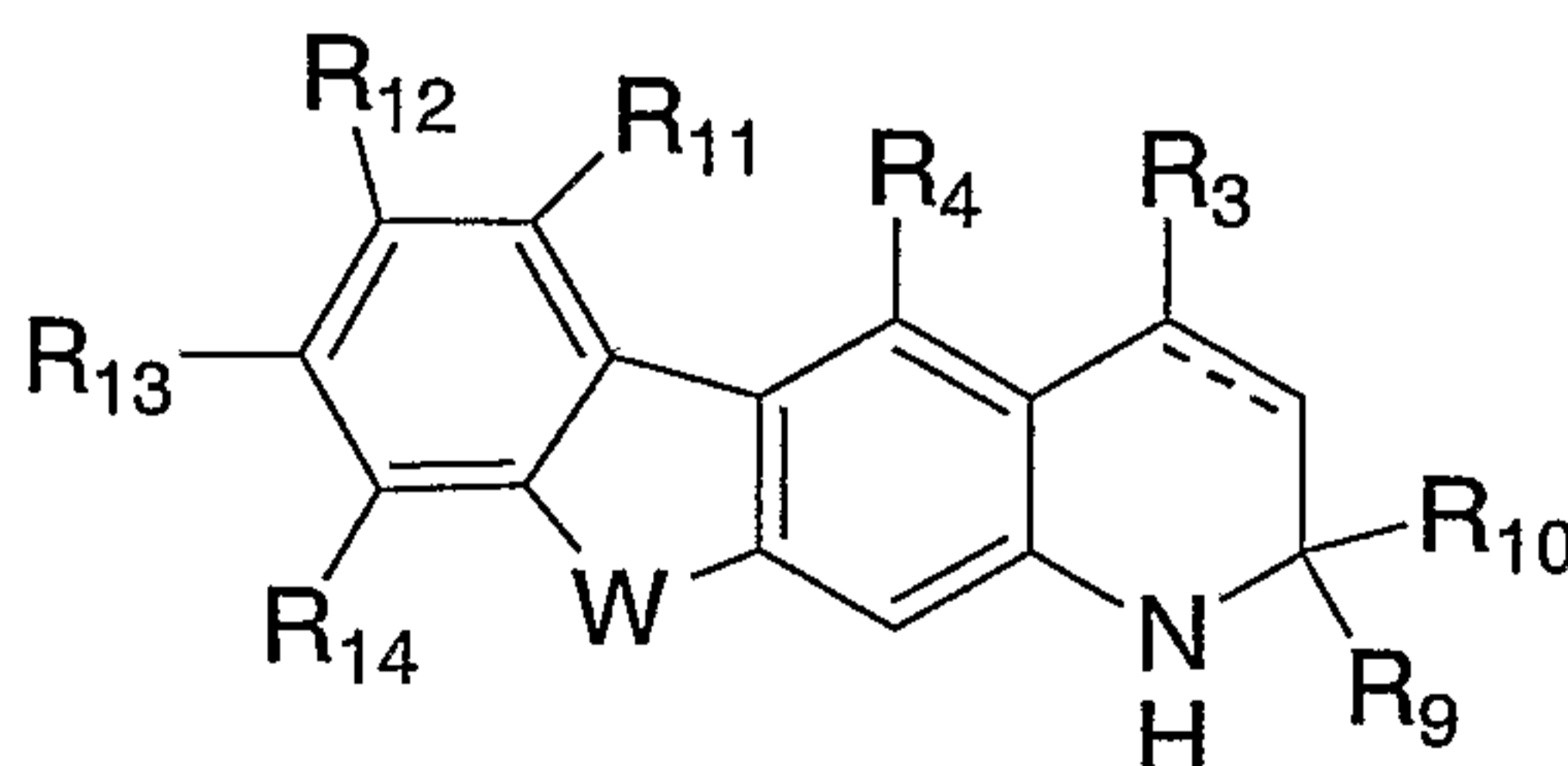
for use in the prevention and restoration of age-related decline in muscle mass and strength and the treatment of conditions which present with low bone mass in mammals, including humans.

US Patent 6,017,924, assigned to Ligand Pharmaceuticals, Inc., claims
 15 a compound of structural formula:



and its use as an androgen receptor modulator.

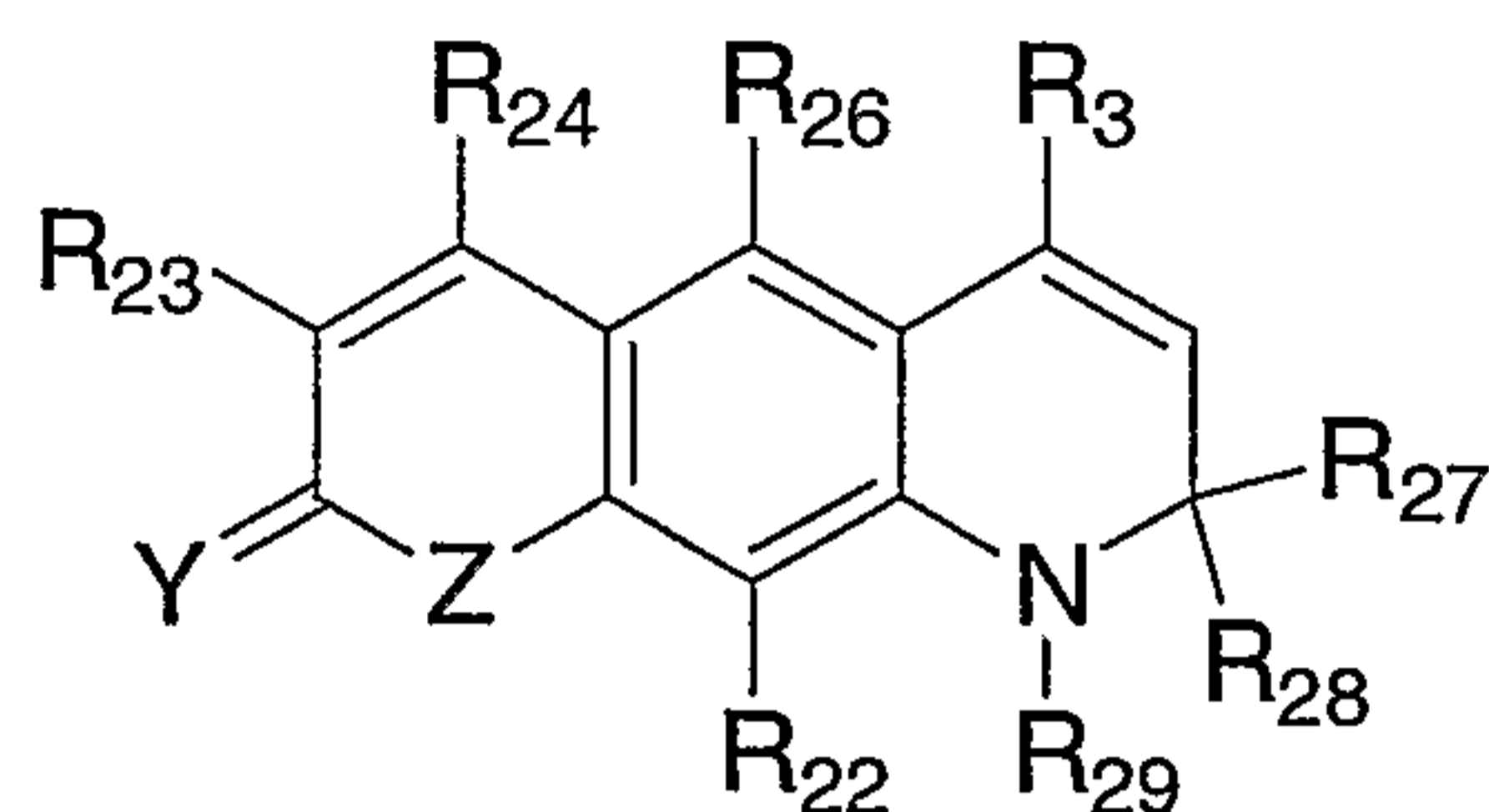
US Patent 5,688,808, assigned to Ligand Pharmaceuticals, Inc., claims
 compounds of structural formula:



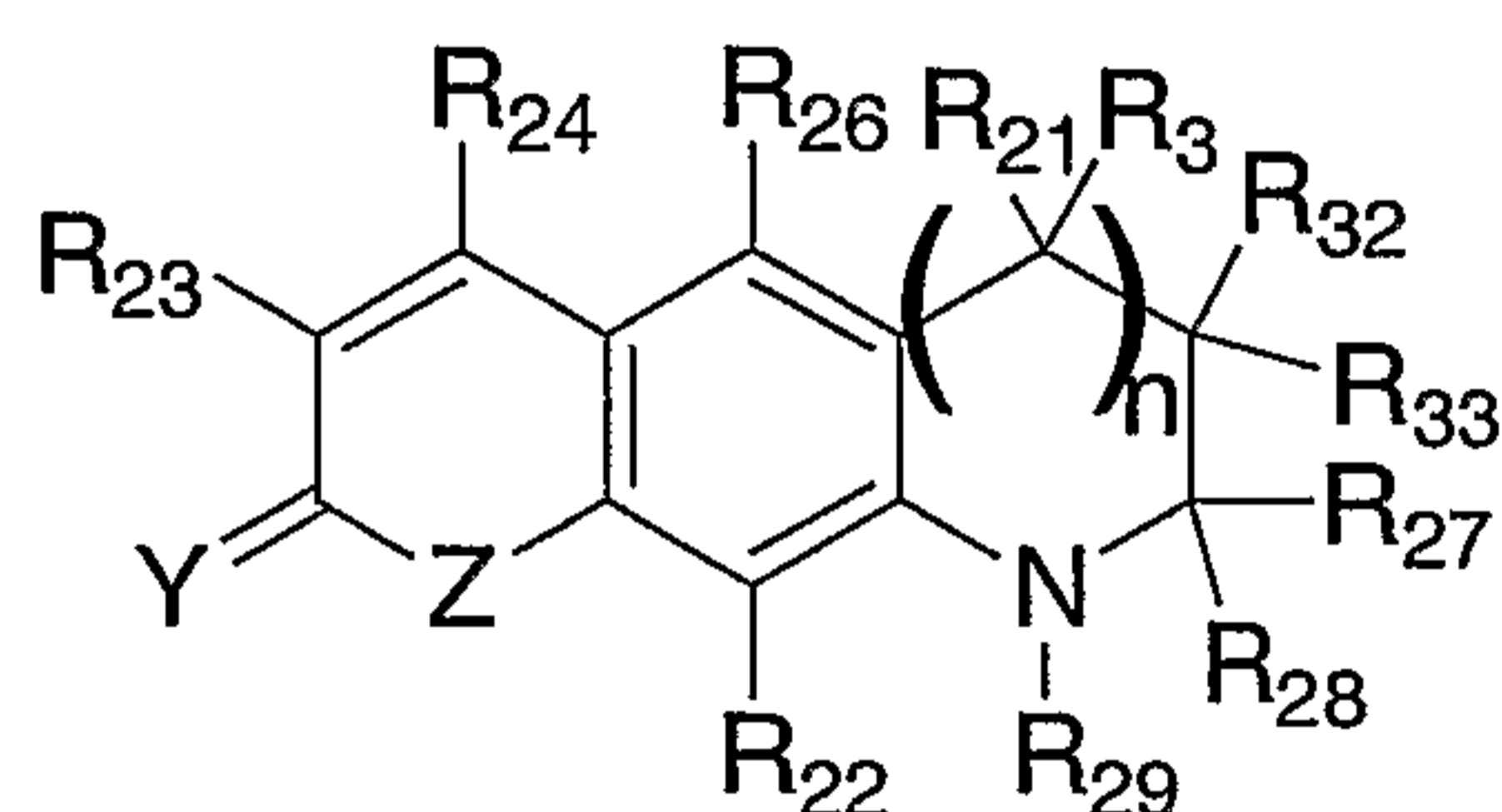
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as steroid receptor modulator compounds.

US Patent 5,696,130, assigned to Ligand Pharmaceuticals, Inc., claims compounds of structural formulae:

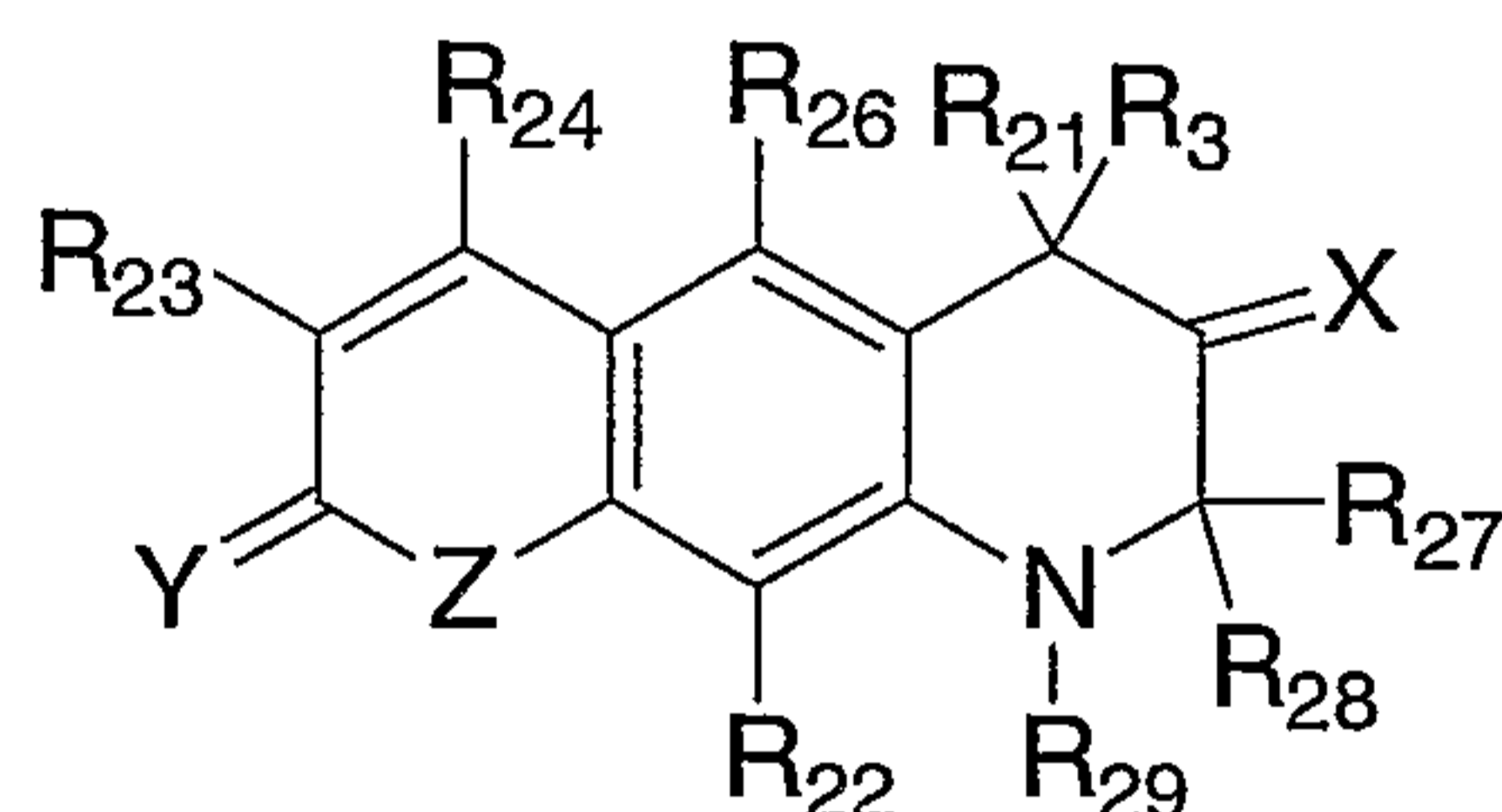


or



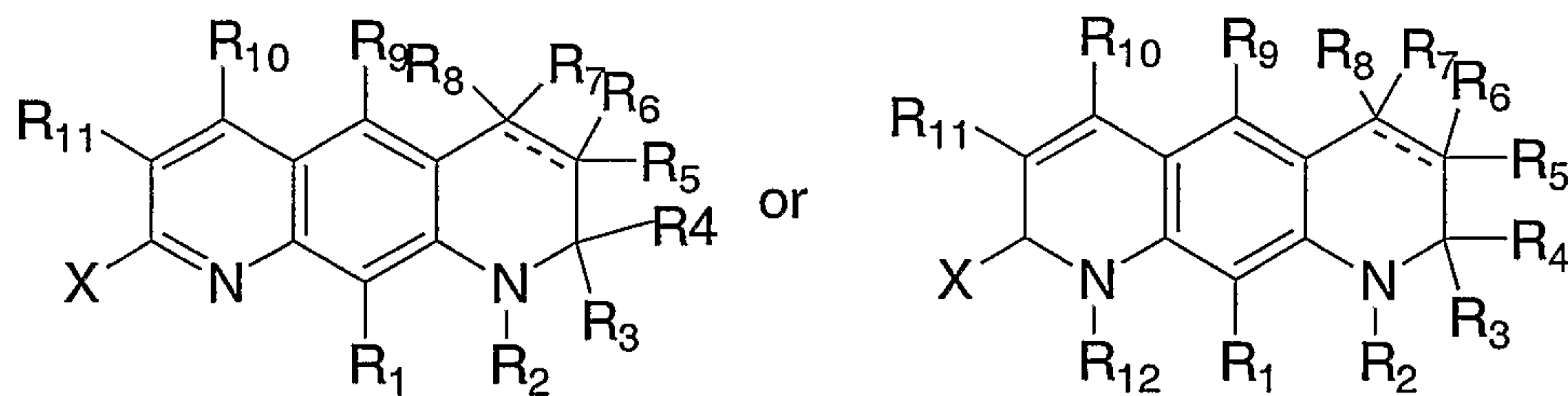
wherein n is 0 or 1;

or



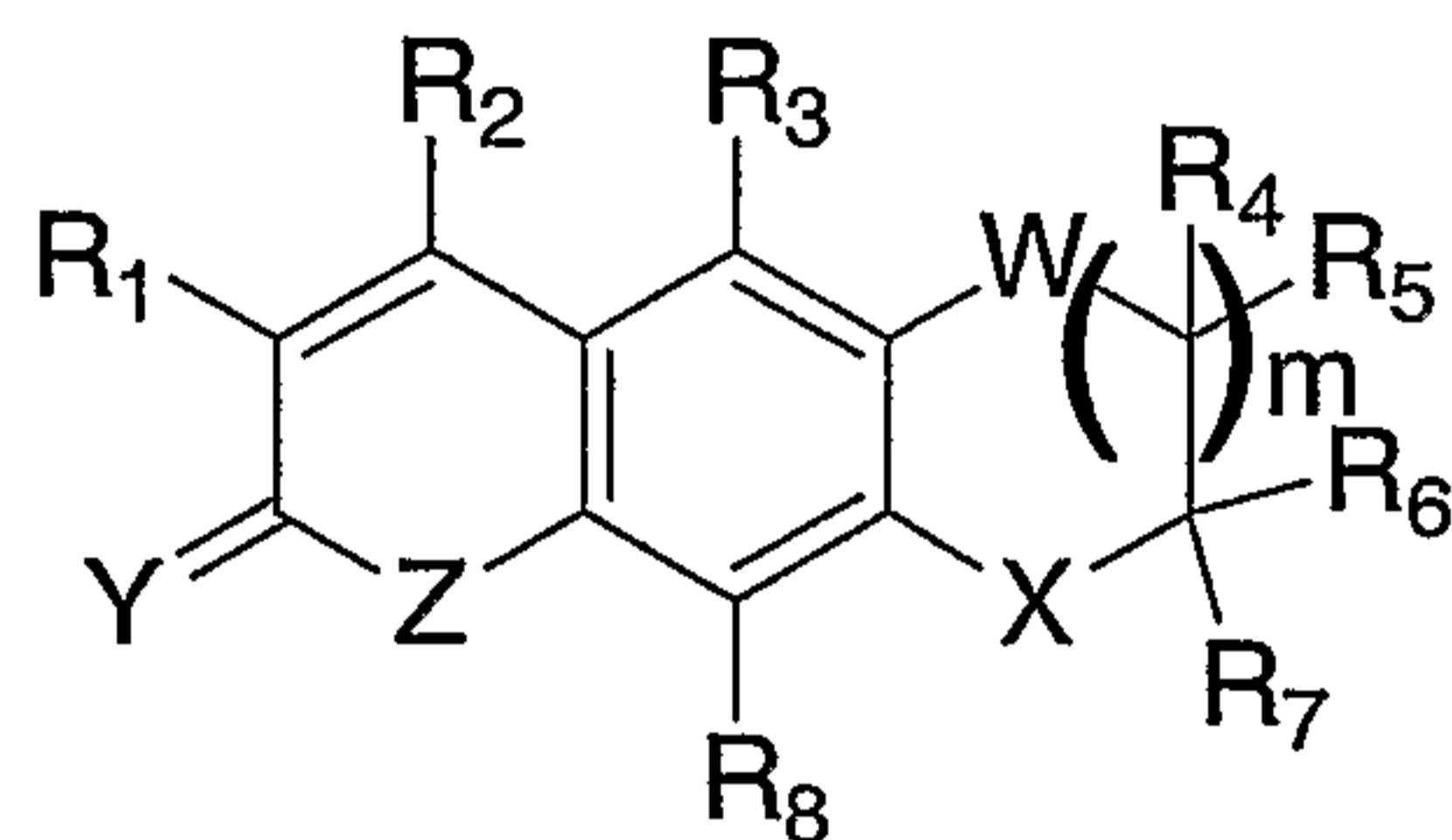
- 5 as high affinity, high selectivity modulators for steroid receptors. US Patent 6,093,821 is a divisional of US 5,696,130, and claims a method for producing 6-substituted-1,2-dihydro N-1 protected quinolines.

PCT publication WO 01/16133, assigned to Ligand Pharmaceuticals, Inc., describes 8-substituted-6-trifluoromethyl-9-pyrido[3,2,-g]quinoline compounds
10 of structural formulae:



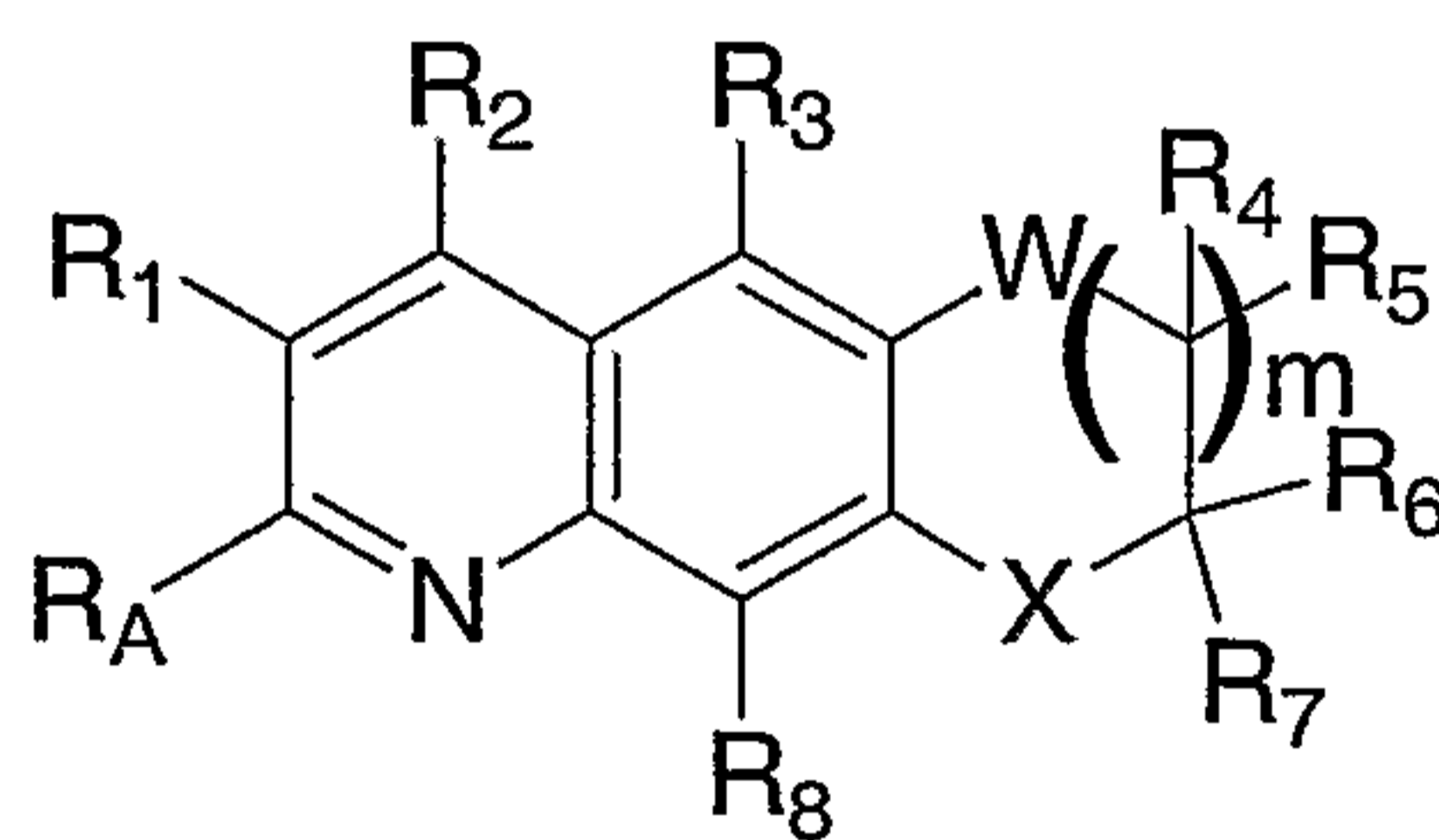
as androgen receptor modulators.

PCT publication WO 01/16139 assigned to Ligand Pharmaceuticals, Inc., describes compounds of structural formulae:

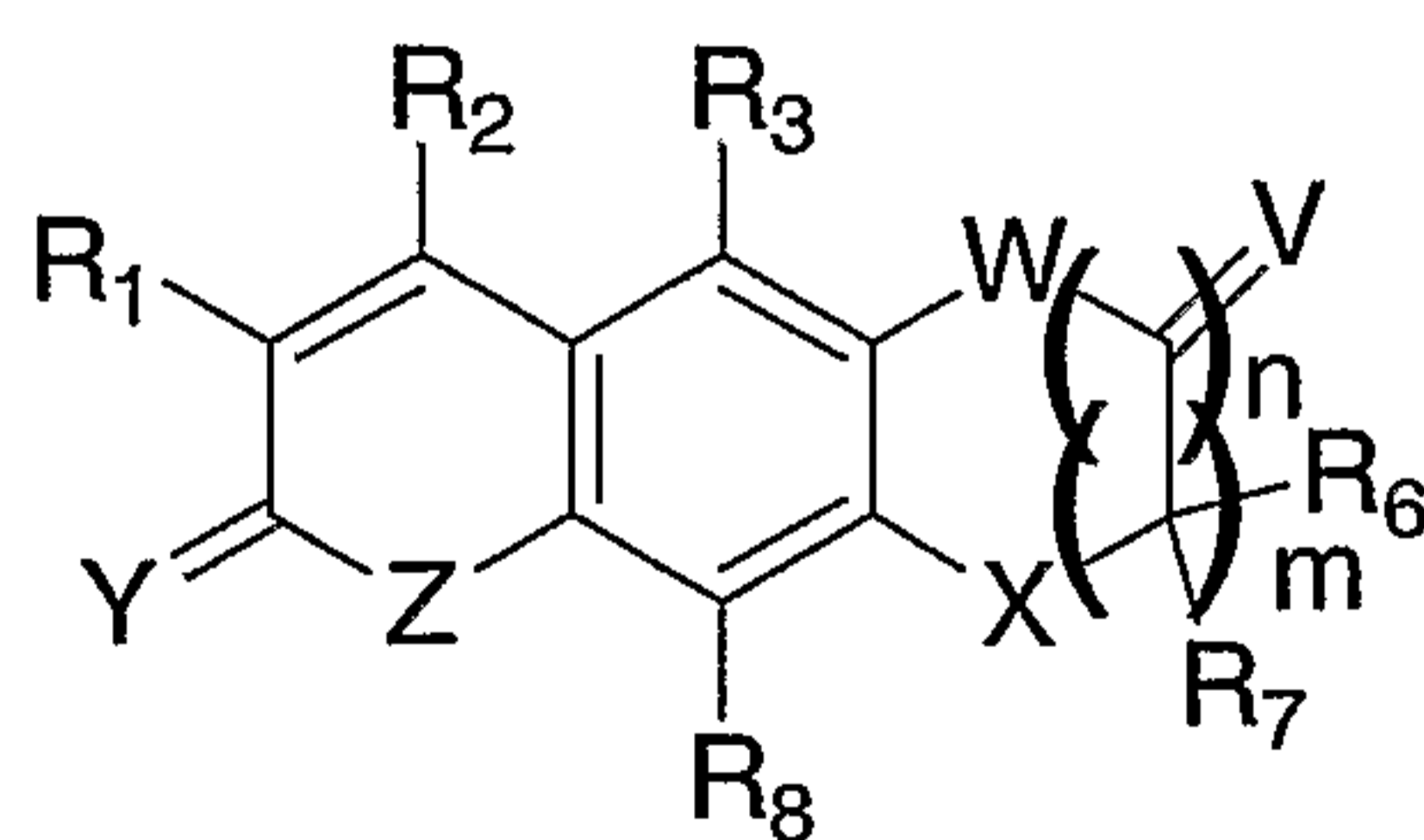


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or

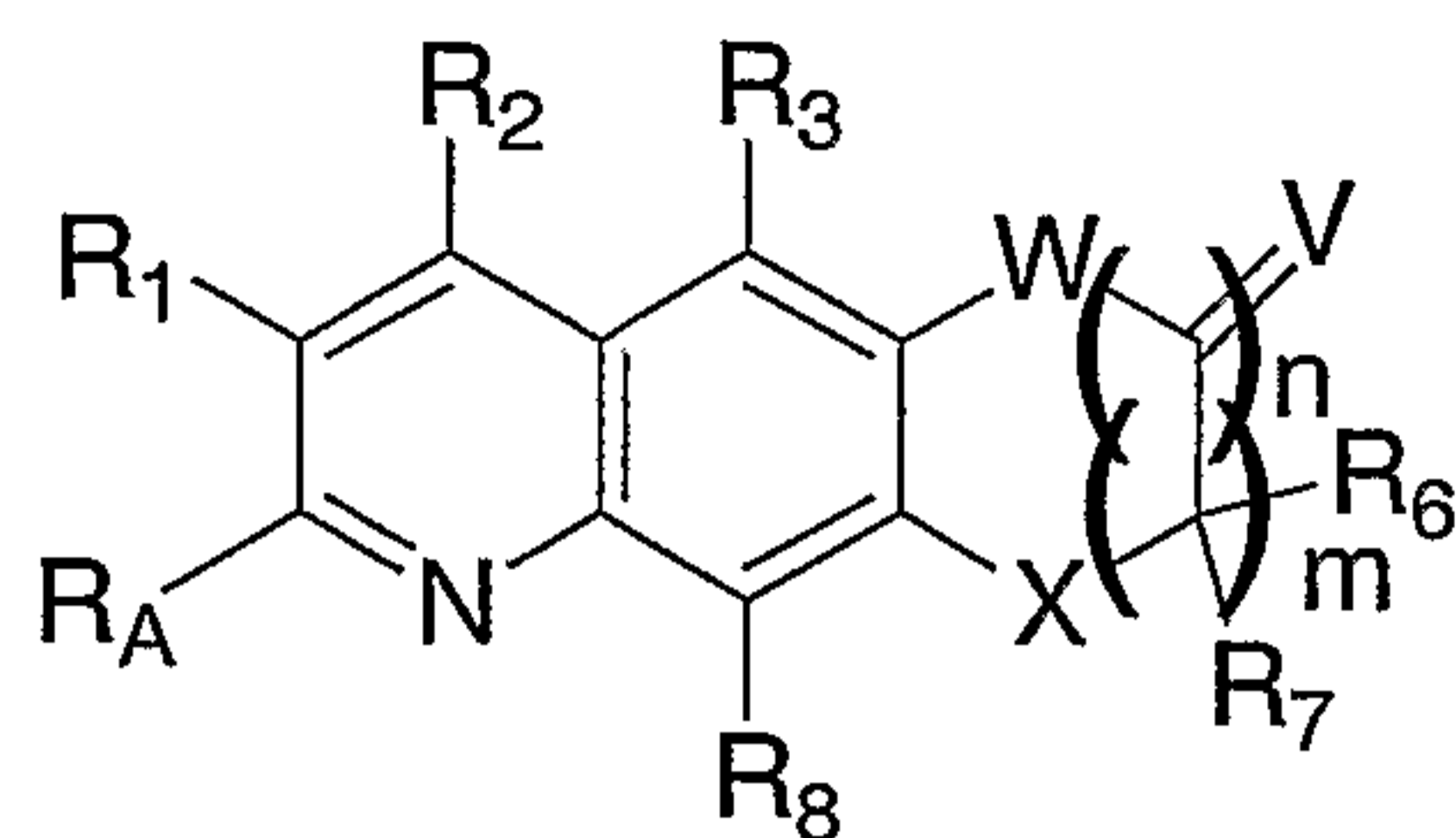


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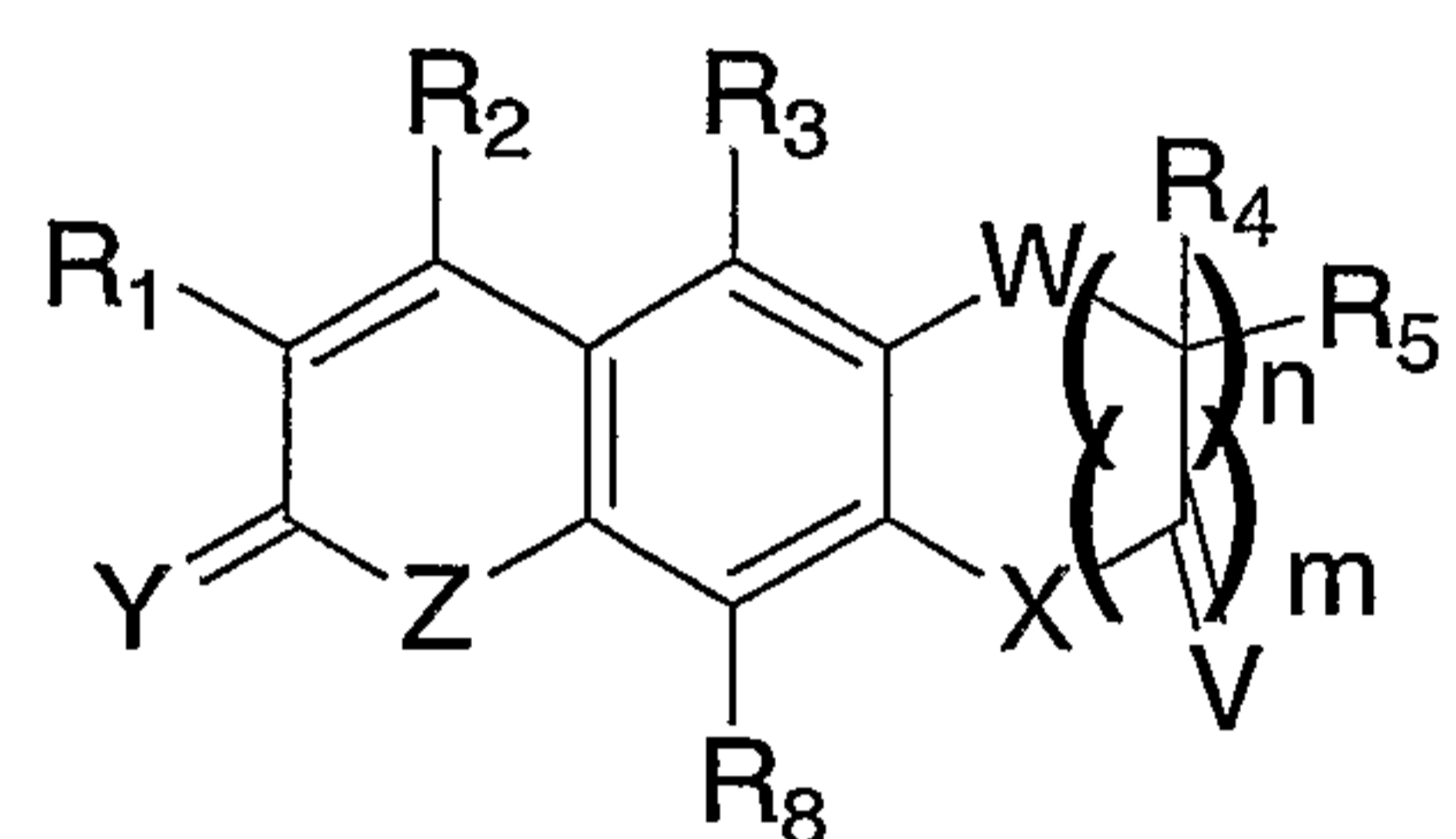


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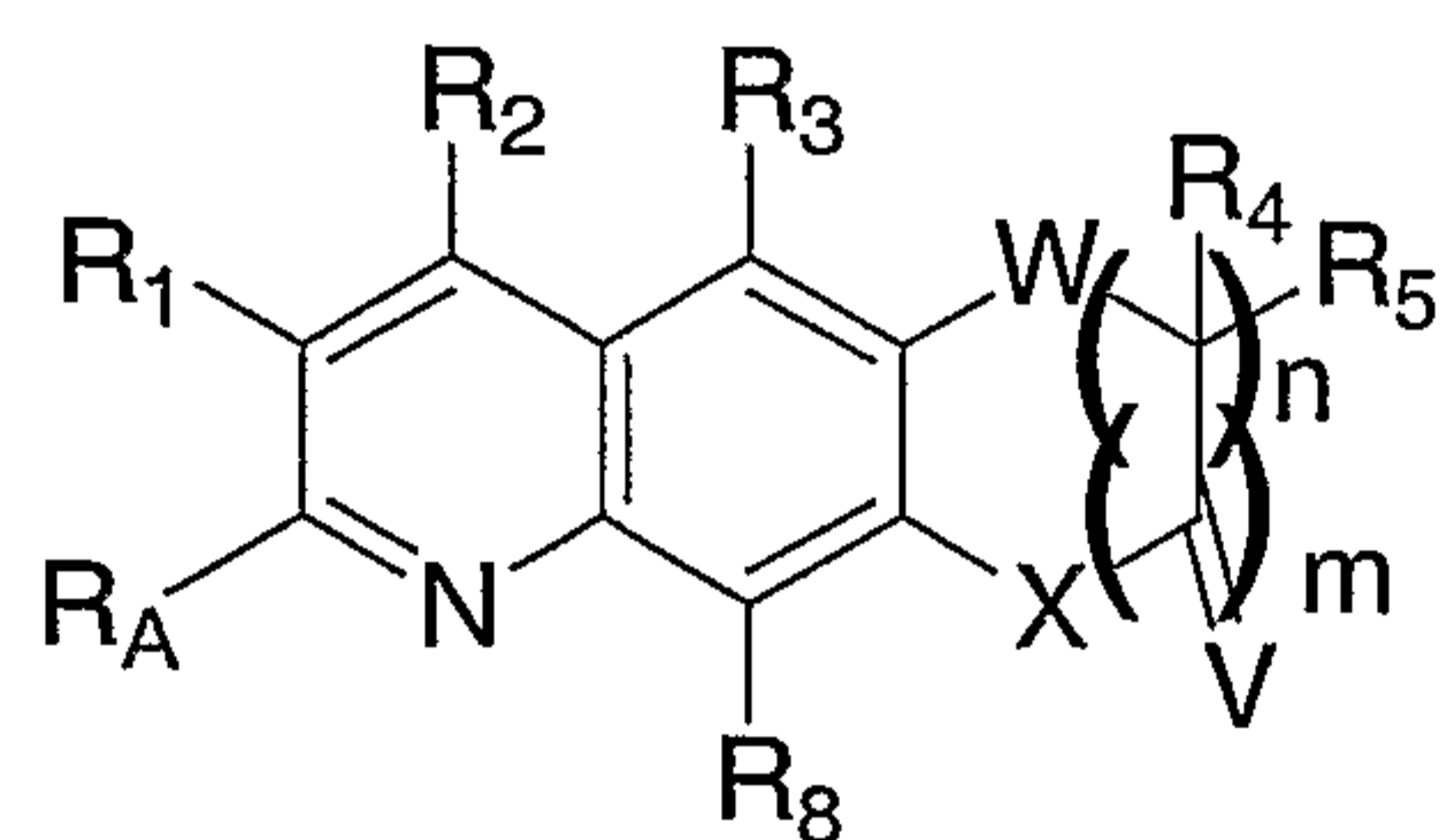
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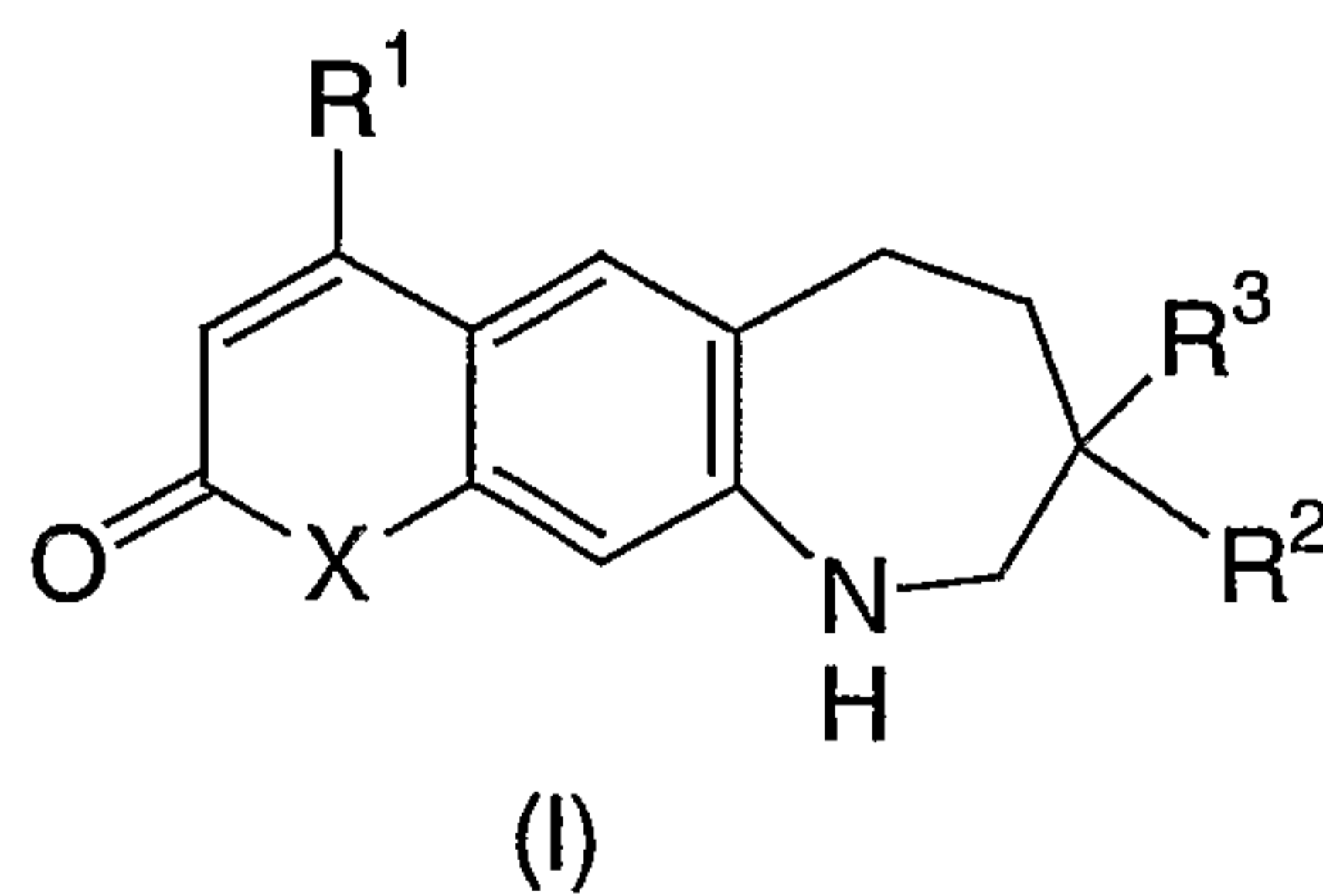
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as agonists, partial agonists and antagonists for the androgen receptor.

SUMMARY OF THE INVENTION

10

Compounds of structural formula (I):



and pharmaceutically acceptable salts thereof are useful in modulating the androgen receptor in a tissue selective manner in a patient in need of such modulation, as well as in a method of agonizing the androgen receptor in a patient, and in particular the method wherein the androgen receptor is agonized in bone and/or muscle tissue and
5 antagonized in the prostate of a male patient or in the uterus of a female patient. These compounds are useful in the treatment of conditions caused by androgen deficiency or which can be ameliorated by androgen administration, including: osteoporosis, periodontal disease, bone fracture, bone damage following bone reconstructive surgery, sarcopenia, frailty, aging skin, male hypogonadism, female
10 sexual dysfunction, post-menopausal symptoms in women, atherosclerosis, hypercholesterolemia, hyperlipidemia, aplastic anemia and other hematopoietic disorders, pancreatic cancer, renal cancer, prostate cancer, arthritis and joint repair, alone or in combination with other active agents. In particular, the compounds of the present invention are useful in treating glucocorticoid-induced osteoporosis. In
15 addition, these compounds are useful as pharmaceutical composition ingredients alone and in combination with other active agents.

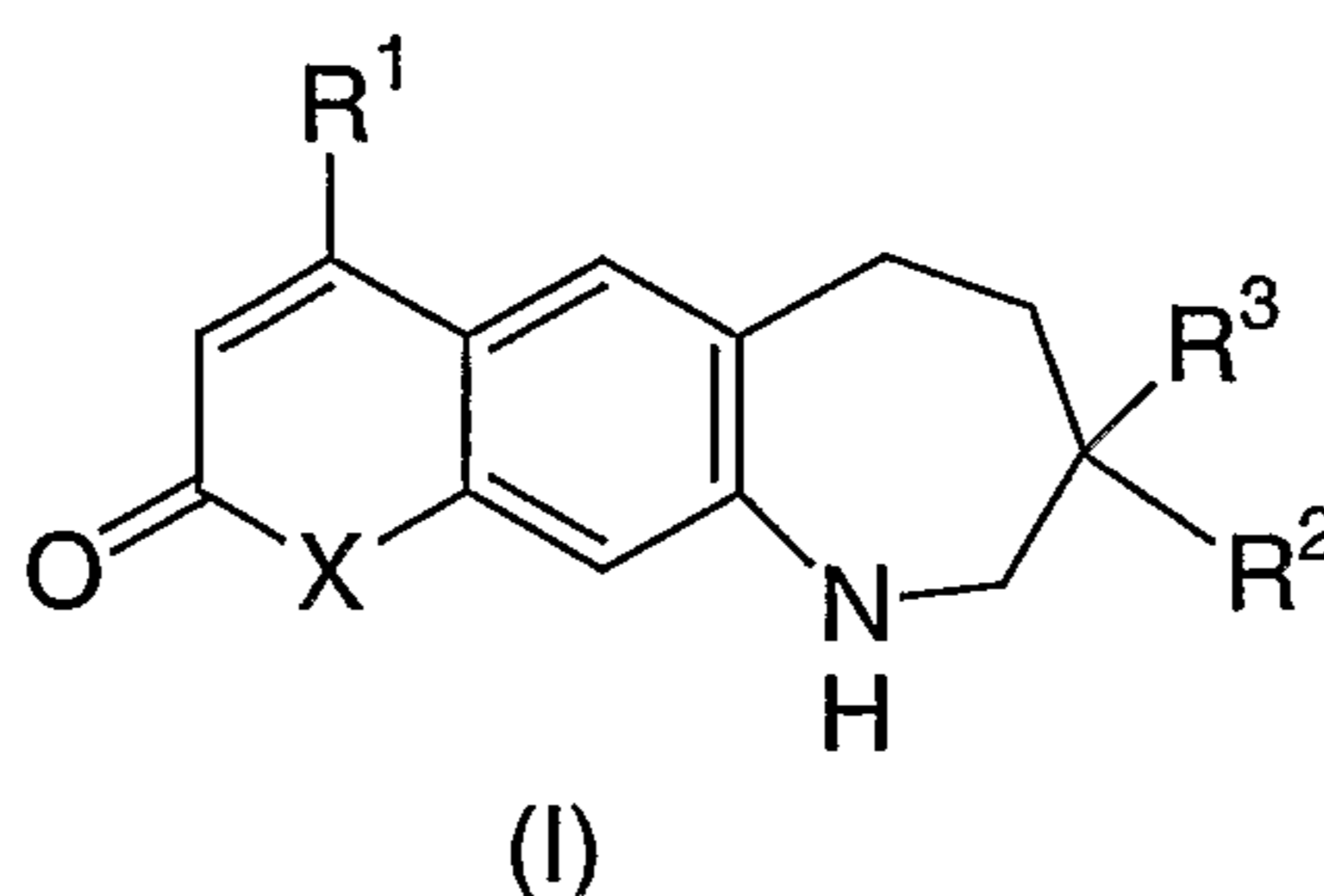
The invention is also concerned with novel compounds of structural formula I, and pharmaceutically acceptable salts thereof.

The invention is also concerned with pharmaceutical formulations
20 comprising one of the compounds as an active ingredient.

The invention is further concerned with processes for preparing the compounds of this invention.

25 DETAILED DESCRIPTION OF THE INVENTION

The present invention relates to compounds of structural formula (I):



wherein:

X is selected from -O-, and -N(R⁴)-;

R¹ is selected from hydrogen, C₁₋₃ alkyl, cyclopropyl and trifluoromethyl;

R² is selected from:

- 5 (1) hydrogen,
- (2) C₁₋₈ alkyl,
- (3) C₃₋₈ cycloalkyl,
- (4) C₃₋₈ cycloheteroalkyl,
- (5) C₃₋₈ cycloalkyl-C₁₋₆ alkyl,
- 10 (6) C₃₋₈ cycloheteroalkyl-C₁₋₆ alkyl,
- (7) aryl,
- (8) aryl-C₁₋₆ alkyl,
- (9) amino,
- (10) amino-C₁₋₆ alkyl,
- 15 (11) C₁₋₃ acylamino,
- (12) C₁₋₃ acylamino-C₁₋₆ alkyl,
- (13) (C₁₋₆ alkyl)_n amino,
- (14) C₃₋₆ cycloalkyl-C₀₋₂ alkylamino,
- (15) (C₁₋₆ alkyl)_n amino-C₁₋₆ alkyl,
- 20 (16) C₁₋₆ alkoxy,
- (17) C₁₋₄ alkoxy-C₁₋₆ alkyl,
- (18) hydroxycarbonyl,
- (19) hydroxycarbonyl-C₁₋₆ alkyl,
- (20) C₁₋₃ alkoxycarbonyl,
- 25 (21) C₁₋₃ alkoxycarbonyl-C₁₋₆ alkyl,
- (22) hydroxy,
- (23) hydroxy-C₁₋₆ alkyl,
- (24) nitro,
- (25) cyano,
- 30 (26) trifluoromethyl,
- (27) trifluoromethoxy,
- (28) trifluoroethoxy,
- (29) C₁₋₈ alkyl-S(O)_p-,
- (30) (C₁₋₈ alkyl)_paminocarbonyl,
- 35 (31) C₁₋₈ alkyloxycarbonylamino,

- (32) (C₁₋₈ alkyl)_n aminocarbonyloxy,
 (33) (aryl C₁₋₃ alkyl)_n amino,
 (34) (aryl)_n amino,
 (35) aryl-C₁₋₃ alkylsulfonylamino, and
 5 (36) C₁₋₈ alkylsulfonylamino;

R³ is selected from hydrogen, C₁₋₈ alkyl, and trifluoromethyl;

or R² and R³ together with the carbon atom to which they are attached form a carbonyl group, or join to form a 3- to 6-membered spiro-carbocyclic ring; and

wherein the alkyl groups in R² and R³ are either unsubstituted or substituted with one
 10 to three R⁵ substituents and wherein any of the aryl, cycloalkyl, or cycloheteroalkyl
 groups in R² are either unsubstituted or substituted with one to three R⁶ substituents;

R⁴ is selected from:

- (1) hydrogen,
 (2) aryl,
 15 (3) aminocarbonyl,
 (4) C₃₋₈ cycloalkyl,
 (5) amino C₁₋₆ alkyl,
 (6) (aryl)_paminocarbonyl,
 (7) (aryl C₁₋₅ alkyl)_paminocarbonyl,
 20 (8) hydroxycarbonyl C₁₋₆ alkyl,
 (9) C₁₋₈ alkyl,
 (10) perfluoro C₁₋₈ alkyl,
 (11) aryl C₁₋₆ alkyl,
 (12) (C₁₋₆ alkyl)_pamino C₂₋₆ alkyl,
 25 (13) (aryl C₁₋₆ alkyl)_pamino C₂₋₆ alkyl,
 (14) C₁₋₈ alkylsulfonyl,
 (15) C₁₋₈ alkoxy carbonyl,
 (16) aryloxy carbonyl,
 (17) aryl C₁₋₈ alkoxy carbonyl,
 30 (18) C₁₋₈ alkyl carbonyl,
 (19) aryl carbonyl,
 (20) aryl C₁₋₆ alkyl carbonyl,
 (21) (C₁₋₈ alkyl)_paminocarbonyl,
 (22) aminosulfonyl,

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- (23) C₁₋₈ alkylaminosulfonyl,
 - (24) (aryl)_paminosulfonyl,
 - (25) (aryl C₁₋₈ alkyl)_paminosulfonyl,
 - (26) arylsulfonyl,
 - (27) aryl C₁₋₆ alkylsulfonyl,
 - (28) C₁₋₆ alkylthiocarbonyl,
 - (29) arylthiocarbonyl, and
 - (30) aryl C₁₋₆ alkylthiocarbonyl,

10 wherein any of the alkyl groups of R⁴ are either unsubstituted or substituted with one to three R⁵ substituents and wherein any of the aryl, cycloalkyl, or cycloheteroalkyl groups in R⁴ are either unsubstituted or substituted with one to three R⁶ substituents; each R⁵ is independently selected from:

- (1) halogen,
- (2) C₁₋₈ alkyl,
- 15 (3) C₃₋₈ cycloalkyl,
- (4) C₃₋₈ cycloheteroalkyl,
- (5) C₃₋₈ cycloalkyl-C₁₋₆ alkyl,
- (6) C₃₋₈ cycloheteroalkyl-C₁₋₆ alkyl,
- (7) aryl,
- 20 (8) aryl-C₁₋₆ alkyl,
- (9) amino,
- (10) amino-C₁₋₆ alkyl,
- (11) C₁₋₃ acylamino,
- (12) C₁₋₃ acylamino-C₁₋₆ alkyl,
- 25 (13) (C₁₋₆ alkyl)_n amino,
- (14) C₃₋₆ cycloalkyl-C₀₋₂ alkylamino,
- (15) (C₁₋₆ alkyl)_n amino-C₁₋₆ alkyl,
- (16) C₁₋₆ alkoxy,
- (17) C₁₋₄ alkoxy-C₁₋₆ alkyl,
- 30 (18) hydroxycarbonyl,
- (19) hydroxycarbonyl-C₁₋₆ alkyl,
- (20) C₁₋₃ alkoxycarbonyl,
- (21) C₁₋₃ alkoxycarbonyl-C₁₋₆ alkyl,
- (22) hydroxy,

- (23) hydroxy-C₁₋₆ alkyl,
 (24) nitro,
 (25) cyano,
 (26) trifluoromethyl,
 5 (27) trifluoromethoxy,
 (28) trifluoroethoxy,
 (29) C₁₋₈ alkyl-S(O)_p-,
 (30) (C₁₋₈ alkyl)_paminocarbonyl,
 (31) C₁₋₈ alkyloxycarbonylamino,
 10 (32) (C₁₋₈ alkyl)_n aminocarbonyloxy,
 (33) (aryl C₁₋₃ alkyl)_n amino,
 (34) (aryl)_n amino,
 (35) aryl-C₁₋₃ alkylsulfonylamino, and
 (36) C₁₋₈ alkylsulfonylamino;
- 15 each R⁶ is independently selected from:
- (1) halogen,
 (2) aryl,
 (3) C₁₋₈ alkyl,
 (4) C₃₋₈ cycloalkyl,
 20 (5) C₃₋₈ cycloheteroalkyl,
 (6) aryl C₁₋₆alkyl,
 (7) amino C₀₋₆alkyl,
 (8) C₁₋₆ alkylamino C₀₋₆alkyl,
 (9) (C₁₋₆ alkyl)₂amino C₀₋₆alkyl,
 25 (10) aryl C₀₋₆ alkylamino C₀₋₆alkyl,
 (11) (aryl C₀₋₆ alkyl)₂amino C₀₋₆alkyl,
 (12) C₁₋₆ alkylthio,
 (13) aryl C₀₋₆alkylthio,
 (14) C₁₋₆ alkylsulfinyl,
 30 (15) aryl C₀₋₆alkylsulfinyl,
 (16) C₁₋₆ alkylsulfonyl,
 (17) aryl C₀₋₆alkylsulfonyl,
 (18) C₁₋₆ alkoxy C₀₋₆alkyl,
 (19) aryl C₀₋₆ alkoxy C₀₋₆alkyl,

- 5 (20) hydroxycarbonyl C₀₋₆alkyl,
 (21) C₁₋₆ alkoxy carbonyl C₀₋₆alkyl,
 (22) aryl C₀₋₆ alkoxy carbonyl C₀₋₆alkyl,
 (23) hydroxycarbonyl C₁₋₆ alkyloxy,
 (24) hydroxy C₀₋₆alkyl,
 (25) cyano,
 (26) nitro,
 (27) perfluoroC₁₋₄alkyl,
 (28) perfluoroC₁₋₄alkoxy,
 10 (29) oxo,
 (30) C₁₋₆ alkylcarbonyloxy,
 (31) aryl C₀₋₆alkylcarbonyloxy,
 (32) alkyl C₁₋₆ carbonylamino,
 (33) aryl C₀₋₆ alkylcarbonylamino,
 15 (34) C₁₋₆ alkylsulfonylamino,
 (35) aryl C₀₋₆alkylsulfonylamino,
 (36) C₁₋₆ alkoxy carbonylamino,
 (37) aryl C₀₋₆ alkoxy carbonylamino,
 (38) C₁₋₆alkylaminocarbonylamino,
 20 (39) aryl C₀₋₆alkylaminocarbonylamino,
 (40) (C₁₋₆alkyl)₂ aminocarbonylamino,
 (41) (aryl C₀₋₆alkyl)₂ aminocarbonylamino,
 (42) (C₁₋₆alkyl)₂ aminocarbonyloxy,
 (43) (aryl C₀₋₆alkyl)₂ aminocarbonyloxy,
 25 (44) C₀₋₆alkylcarbonyl C₀₋₆alkyl, and
 (45) aryl C₀₋₆alkylcarbonyl C₀₋₆alkyl;

n is selected from 1 and 2;

p is selected from 0, 1, and 2;

and pharmaceutically acceptable salts thereof.

30

The term "alkyl" shall mean straight or branched chain alkanes of one to ten total carbon atoms, or any number within this range (i.e., methyl, ethyl, 1-propyl, 2-propyl, n-butyl, s-butyl, t-butyl, etc.). The term "C₀ alkyl" (as in "C₀₋₈ alkylaryl") shall refer to the absence of an alkyl group.

The term "alkenyl" shall mean straight or branched chain alkenes of two to ten total carbon atoms, or any number within this range.

The term "alkynyl" shall mean straight or branched chain alkynes of two to ten total carbon atoms, or any number within this range.

5 The term "cycloalkyl" shall mean cyclic rings of alkanes of three to eight total carbon atoms, or any number within this range (i.e., cyclopropyl, cyclobutyl, cyclopentyl, cyclohexyl, cycloheptyl or cyclooctyl).

10 The term "cycloheteroalkyl," as used herein, shall mean a 3- to 8-membered fully saturated heterocyclic ring containing one or two heteroatoms chosen from N, O, or S and optionally fused to another fully saturated ring. Examples of cycloheteroalkyl groups include, but are not limited to piperidinyl, pyrrolidinyl, azetidiny, morpholinyl, piperazinyl, and octahydroquinolizinyl. In one embodiment of the present invention cycloheteroalkyl is selected from piperidinyl, pyrrolidinyl, and morpholinyl.

15 The term "alkoxy," as used herein, refers to straight or branched chain alkoxides of the number of carbon atoms specified (e.g., C₁₋₅ alkoxy), or any number within this range (i.e., methoxy, ethoxy, etc.).

20 The term "aryl," as used herein, refers to a monocyclic or bicyclic system comprising at least one aromatic ring, wherein the monocyclic or bicyclic system contains 0, 1, 2, 3, or 4 heteroatoms chosen from N, O, or S, and wherein the monocyclic or bicyclic system is either unsubstituted or substituted with one or more groups independently selected from hydrogen, halogen, aryl, C₁₋₈ alkyl, C₃₋₈ cycloalkyl, C₃₋₈ cycloheteroalkyl, aryl C₁₋₆alkyl, amino C₀₋₆alkyl, C₁₋₆ alkylamino C₀₋₆alkyl, (C₁₋₆ alkyl)₂amino C₀₋₆alkyl, aryl C₀₋₆ alkylamino C₀₋₆alkyl, (aryl C₀₋₆ alkyl)₂amino C₀₋₆alkyl, C₁₋₆ alkylthio, aryl C₀₋₆alkylthio, C₁₋₆ alkylsulfinyl, aryl C₀₋₆alkylsulfinyl, C₁₋₆ alkylsulfonyl, aryl C₀₋₆alkylsulfonyl, C₁₋₆ alkoxy C₀₋₆alkyl, aryl C₀₋₆ alkoxy C₀₋₆alkyl, hydroxycarbonyl C₀₋₆alkyl, C₁₋₆ alkoxycarbonyl C₀₋₆alkyl, aryl C₀₋₆ alkoxycarbonyl C₀₋₆alkyl, hydroxycarbonyl C₁₋₆ alkyloxy, hydroxy C₀₋₆alkyl, cyano, nitro, perfluoroC₁₋₄alkyl, perfluoroC₁₋₄alkoxy, oxo, C₁₋₆ alkylcarbonyloxy, aryl C₀₋₆alkylcarbonyloxy, C₁₋₆ alkylcarbonylamino, aryl C₀₋₆ alkylcarbonylamino, C₁₋₆ alkylsulfonylamino, aryl C₀₋₆alkylsulfonylamino, C₁₋₆ alkoxycarbonylamino, aryl C₀₋₆ alkoxycarbonylamino, C₁₋₆ alkylaminocarbonylamino, aryl C₀₋₆alkylaminocarbonylamino, (C₁₋₆alkyl)₂ aminocarbonylamino, (aryl C₀₋₆alkyl)₂ aminocarbonylamino, (C₁₋₆alkyl)₂ aminocarbonyloxy, (aryl C₀₋₆alkyl)₂ aminocarbonyloxy, and C₀₋₆alkylcarbonyl C₀₋₆

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alkyl. Examples of aryl include, but are not limited to, phenyl, naphthyl, pyridyl, pyrrolyl, pyrazolyl, pyrazinyl, pyrimidinyl, imidazolyl, benzimidazolyl, benzthiazolyl, benzoxazolyl, indolyl, thienyl, furyl, dihydrobenzofuryl, benzo(1,3)dioxolanyl, benzo(1,4)dioxanyl, oxazolyl, isoxazolyl, thiazolyl, quinolinyl, isothiazolyl, indanyl, 5 isoquinolinyl, dihydroisoquinolinyl, tetrahydronaphthyridinyl, benzothienyl, imidazopyridinyl, tetrahydrobenzazepinyl, quinoxalinyl, imidazopyrimidinyl, cyclopentenopyridinyl, phthalazinyl, tetrahydroquinolinyl, oxindolyl, isoquinolinyl, imidazothiazolyl, dihydroimidazothiazolyl, tetrazolyl, triazolyl, pyridazinyl, piperidinyl, piperazinyl, oxadiazolyl, thiadiazolyl, triazinyl, indazolyl, indazolinone, 10 dihydrobenzofuranyl, phthalide, phthalimide, coumarin, chromone, tetrahydroisoquinidine, naphthyridinyl, tetrahydronaphthyridinyl, isoindolinyl, triazanaphthalinyl, pteridinyl, and purinyl, which are either unsubstituted or substituted with one or more groups independently selected from hydrogen, halogen, aryl, C₁₋₈ alkyl, C₃₋₈ cycloalkyl, C₃₋₈ cycloheteroalkyl, aryl C₁₋₆alkyl, amino C₀₋₆alkyl, C₁₋₆ alkylamino C₀₋₆alkyl, (C₁₋₆ alkyl)₂amino C₀₋₆alkyl, aryl C₀₋₆alkylamino C₀₋₆alkyl, (aryl C₀₋₆ alkyl)₂amino C₀₋₆alkyl, C₁₋₆ alkylthio, aryl C₀₋₆alkylthio, C₁₋₆ alkylsulfinyl, aryl C₀₋₆alkylsulfinyl, C₁₋₆ alkylsulfonyl, aryl C₀₋₆alkylsulfonyl, C₁₋₆ alkoxy C₀₋₆alkyl, aryl C₀₋₆ alkoxy C₀₋₆alkyl, hydroxycarbonyl C₀₋₆alkyl, C₁₋₆ alkoxy carbonyl C₀₋₆alkyl, aryl C₀₋₆ alkoxy carbonyl C₀₋₆alkyl, 20 hydroxycarbonyl C₁₋₆ alkyloxy, hydroxy C₀₋₆alkyl, cyano, nitro, perfluoroC₁₋₄alkyl, perfluoroC₁₋₄alkoxy, oxo, C₁₋₆ alkylcarbonyloxy, aryl C₀₋₆alkylcarbonyloxy, C₁₋₆ alkylcarbonylamino, aryl C₀₋₆ alkylcarbonylamino, C₁₋₆ alkylsulfonylamino, aryl C₀₋₆alkylsulfonylamino, C₁₋₆ alkoxy carbonylamino, aryl C₀₋₆ alkoxy carbonylamino, C₁₋₆alkylaminocarbonylamino, aryl C₀₋₆alkylaminocarbonylamino, (C₁₋₆alkyl)₂ aminocarbonylamino, (aryl C₀₋₆alkyl)₂ aminocarbonylamino, (C₁₋₆alkyl)₂ aminocarbonyloxy, (aryl C₀₋₆alkyl)₂ aminocarbonyloxy, C₀₋₆alkylcarbonyl C₀₋₆alkyl and arylC₀₋₆alkylcarbonyl C₀₋₆alkyl. In one embodiment of the present invention, aryl is selected from phenyl, pyridyl, pyrazolyl, benzimidazolyl, imidazolyl, furyl, naphthyl, indolyl, indanyl, thienyl, pyrazinyl, benzothienyl, 3,4- 30 dihydro-1(1H)-isoquinolinyl, 1-8-tetrahydronaphthyridinyl, imidazo[1,2-a]pyridinyl, 2-oxo-2,3,4,5-tetrahydro-1H-benzo[B]azepinyl, quinoxalinyl, imidazo[1,2-a]pyrimidinyl, 2-3-cyclopentenopyridinyl, 1-(2H)-phthalazinyl, 1,2,3,4-tetrahydroquinolinyl, oxindolyl, isoquinolinyl, imidazo[2,1-b][1,3]thiazolyl, 2,3-dihydroimidazo[2,1-b][1,3]thiazolyl, and quinolinyl. Preferably, the aryl group is 35 unsubstituted, mono-, di-, or tri- substituted with one to three of the above-named

substituents; more preferably, the aryl group is unsubstituted, mono- or di-substituted with one to two of the above-named substituents.

Whenever the term "alkyl" or "aryl" or either of their prefix roots appears in a name of a substituent (e.g., aryl C₀₋₈ alkyl), it shall be interpreted as including those limitations given above for "alkyl" and "aryl." Designated numbers of carbon atoms (e.g., C₀₋₈) shall refer independently to the number of carbon atoms in an alkyl or cyclic alkyl moiety or to the alkyl portion of a larger substituent in which alkyl appears as its prefix root.

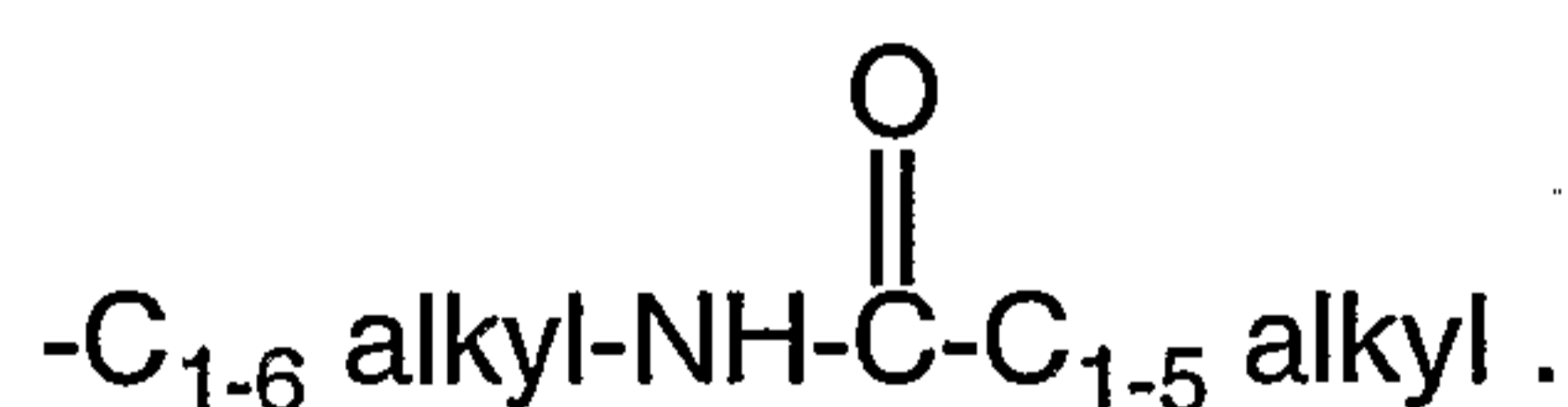
The terms "aryllkyl" and "alkylaryl" include an alkyl portion where alkyl is as defined above and to include an aryl portion where aryl is as defined above. Examples of aryllkyl include, but are not limited to, benzyl, fluorobenzyl, chlorobenzyl, phenylethyl, phenylpropyl, fluorophenylethyl, chlorophenylethyl, thienylmethyl, thienylethyl, and thienylpropyl. Examples of alkylaryl include, but are not limited to, toluene, ethylbenzene, propylbenzene, methylpyridine, ethylpyridine, propylpyridine and butylpyridine.

The term "halogen" shall include iodine, bromine, chlorine, and fluorine.

The term "oxy" means an oxygen (O) atom. The term "thio" means a sulfur (S) atom. The term "oxo" means "=O". The term "carbonyl" means "C=O."

When any variable (e.g., R³, R⁴, etc.) occurs more than one time in any constituent or in formula I, its definition on each occurrence is independent of its definition at every other occurrence. Also, combinations of substituents and/or variables are permissible only if such combinations result in stable compounds.

Under standard nomenclature used throughout this disclosure, the terminal portion of the designated side chain is described first, followed by the adjacent functionality toward the point of attachment. For example, a C₁₋₅ alkylcarbonylamino C₁₋₆ alkyl substituent is equivalent to



In choosing compounds of the present invention, one of ordinary skill in the art will recognize that the various substituents, i.e. R¹, R², R³, etc., are to be chosen in conformity with well-known principles of chemical structure connectivity.

The term "substituted" shall be deemed to include multiple degrees of substitution by a named substituent. Where multiple substituent moieties are disclosed or claimed, the substituted compound can be independently substituted by one or more of the disclosed or claimed substituent moieties, singly or plurally. By
 5 independently substituted, it is meant that the (two or more) substituents can be the same or different.

In one embodiment of the present invention X is selected from -O-, and -N(R⁴)-. In one class of this embodiment, X is selected from -O- and -NH-.

In another embodiment of the present invention, R¹ is selected from
 10 hydrogen, C₁₋₃ alkyl, cyclopropyl and trifluoromethyl. In one class of the present invention, R¹ is selected from hydrogen, methyl, cyclopropyl and trifluoromethyl. In one subclass of this class of the invention, R¹ is selected from hydrogen, methyl, and trifluoromethyl.

In yet another embodiment of the present invention, R² is selected
 15 from:

- (1) hydrogen,
- (2) C₁₋₈ alkyl,
- (3) C₃₋₈ cycloalkyl,
- (4) C₃₋₈ cycloheteroalkyl,
- 20 (5) C₃₋₈ cycloalkyl-C₁₋₆ alkyl,
- (6) C₃₋₈ cycloheteroalkyl-C₁₋₆ alkyl,
- (7) aryl,
- (8) aryl-C₁₋₆ alkyl,
- (9) amino,
- 25 (10) amino-C₁₋₆ alkyl,
- (11) C₁₋₃ acylamino,
- (12) C₁₋₃ acylamino-C₁₋₆ alkyl,
- (13) (C₁₋₆ alkyl)_n amino,
- (14) C₃₋₆ cycloalkyl-C₀₋₂ alkylamino,
- 30 (15) (C₁₋₆ alkyl)_n amino-C₁₋₆ alkyl,
- (16) C₁₋₆ alkoxy,
- (17) C₁₋₄ alkoxy-C₁₋₆ alkyl,
- (18) hydroxycarbonyl,
- (19) hydroxycarbonyl-C₁₋₆ alkyl,
- 35 (20) C₁₋₃ alkoxy-carbonyl,

- (21) C₁₋₃ alkoxy-carbonyl-C₁₋₆ alkyl,
 (22) hydroxy,
 (23) hydroxy-C₁₋₆ alkyl,
 (24) nitro,
 5 (25) cyano,
 (26) trifluoromethyl,
 (27) trifluoromethoxy,
 (28) trifluoroethoxy,
 (29) C₁₋₈ alkyl-S(O)_p-,
 10 (30) (C₁₋₈ alkyl)_paminocarbonyl,
 (31) C₁₋₈ alkyloxy-carbonylamino,
 (32) (C₁₋₈ alkyl)_n aminocarbonyloxy,
 (33) (aryl C₁₋₃ alkyl)_n amino,
 (34) (aryl)_n amino,
 15 (35) aryl-C₁₋₃ alkylsulfonylamino, and
 (36) C₁₋₈ alkylsulfonylamino;

wherein the alkyl groups are either unsubstituted or substituted with one to three R⁵
 substituents and wherein any of the aryl, cycloalkyl, or cycloheteroalkyl groups are
 either unsubstituted or substituted with one to three R⁶ substituents. In one class of
 20 this embodiment of the present invention, R² is selected from:

- (1) hydrogen,
 (2) C₁₋₆ alkyl,
 (3) C₃₋₈ cycloalkyl,
 (4) C₄₋₆ cycloheteroalkyl,
 25 (5) C₃₋₈ cycloalkyl-C₁₋₃ alkyl,
 (6) C₄₋₆ cycloheteroalkyl-C₁₋₃ alkyl,
 (7) phenyl,
 (8) phenyl-C₁₋₃ alkyl,
 (9) amino,
 30 (10) amino-C₁₋₃ alkyl,
 (11) C₁₋₃ acylamino,
 (12) C₁₋₃ acylamino-C₁₋₃ alkyl,
 (13) (C₁₋₃ alkyl)_n amino,
 (14) C₃₋₆ cycloalkyl-C₀₋₂ alkylamino,

- (15) (C₁₋₃ alkyl)_n amino-C₁₋₆ alkyl,
 (16) C₁₋₆ alkoxy,
 (17) C₁₋₃ alkoxy-C₁₋₆ alkyl,
 (18) hydroxycarbonyl,
 5 (19) hydroxycarbonyl-C₁₋₆ alkyl,
 (20) C₁₋₃ alkoxy-carbonyl,
 (21) C₁₋₃ alkoxy-carbonyl-C₁₋₆ alkyl,
 (22) hydroxy,
 (23) hydroxy-C₁₋₆ alkyl,
 10 (24) nitro,
 (25) cyano,
 (26) trifluoromethyl,
 (27) trifluoromethoxy,
 (28) trifluoroethoxy,
 15 (29) C₁₋₆ alkyl-S(O)_p-,
 (30) (C₁₋₆ alkyl)_p aminocarbonyl,
 (31) C₁₋₃ alkyloxycarbonylamino,
 (32) (C₁₋₃ alkyl)_n aminocarbonyloxy,
 (33) (aryl C₁₋₃ alkyl)_n amino,
 20 (34) (aryl)₁₋₂ amino,
 (35) aryl-C₁₋₃ alkylsulfonylamino, and
 (36) C₁₋₆ alkylsulfonylamino;

wherein any of the alkyl groups are either unsubstituted or substituted with one to three R⁵ substituents; and wherein any of the aryl, cycloalkyl, or cycloheteroalkyl
 25 groups are unsubstituted or substituted with one to three R⁶ substituents. In one subclass of this class of the invention, R² is selected from hydrogen, C₁₋₈ alkyl, cyclopropyl, cyclohexyl, piperidinyl, pyrrolidinyl, azetidiny, morpholinyl, piperazinyl, cyclopropylmethyl, cyclopropylethyl, cyclopropyl-propyl, cyclohexylmethyl, cyclohexylethyl, cyclohexylpropyl, piperidinylmethyl
 30 pyrrolidinylmethyl, azetidinylmethyl, morpholinylmethyl, piperazinylmethyl, piperidinylethyl, pyrrolidinylethyl, morpholinylethyl, piperazinylethyl, piperidinylpropyl, morpholinylpropyl, piperazinylpropyl, phenyl, benzyl, phenylethyl, phenylpropyl, hydroxy, methoxy, trifluoromethyl, trifluoromethoxy, and trifluoroethoxy; wherein any of the alkyl groups of R² are either unsubstituted or

substituted with one to three R⁵ substituents; and wherein any of the aryl, cycloalkyl, or cycloheteroalkyl groups in R² are optionally substituted with one to three R⁶ substituents.

In yet another subclass of this class of the invention, R² is selected from hydrogen, C₁₋₃ alkyl, benzyl, and cyclopropylmethyl. In still another subclass of this class of the invention, R² is selected from hydrogen, methyl, benzyl, and cyclopropylmethyl.

In one embodiment of the present invention, R³ is selected from hydrogen, C₁₋₈ alkyl, and trifluoromethyl. In one class of this embodiment of the present invention, R³ is selected from hydrogen, methyl and trifluoromethyl. In one subclass of this class of the invention, R³ is selected from hydrogen and methyl.

In another embodiment of the present invention, R² and R³ together with the carbon atom to which they are attached form a carbonyl group, or join to form a 3- to 6-membered spiro-carbocyclic ring; wherein the alkyl groups in R² and R³ are either unsubstituted or substituted with one to three R⁵ substituents and wherein any of the aryl, cycloalkyl, or cycloheteroalkyl groups in R³ are either unsubstituted or substituted with one to three R⁶ substituents.

In one class of this embodiment of the present invention, R² and R³, together with the carbon to which they are attached, join to form a spiro-cyclopropyl ring. In another class of this embodiment of the present invention, R² and R³, together with the carbon to which they are attached, join to form a carbonyl group.

In yet another embodiment of the present invention, R⁴ is selected from:

- (1) hydrogen,
- (2) aryl,
- (3) aminocarbonyl,
- (4) C₃₋₈ cycloalkyl,
- (5) amino C₁₋₆ alkyl,
- (6) (aryl)_paminocarbonyl,
- (7) (aryl C₁₋₅ alkyl)_paminocarbonyl,
- (8) hydroxycarbonyl C₁₋₆ alkyl,
- (9) C₁₋₈ alkyl,
- (10) perfluoro C₁₋₈ alkyl,
- (11) aryl C₁₋₆ alkyl,

- (12) (C₁₋₆ alkyl)_pamino C₂₋₆ alkyl,
 (13) (aryl C₁₋₆ alkyl)_pamino C₂₋₆ alkyl,
 (14) C₁₋₈ alkylsulfonyl,
 (15) C₁₋₈ alkoxy carbonyl,
 5 (16) aryloxy carbonyl,
 (17) aryl C₁₋₈ alkoxy carbonyl,
 (18) C₁₋₈ alkyl carbonyl,
 (19) aryl carbonyl,
 (20) aryl C₁₋₆ alkyl carbonyl,
 10 (21) (C₁₋₈ alkyl)_paminocarbonyl,
 (22) aminosulfonyl,
 (23) C₁₋₈ alkyl aminosulfonyl,
 (24) (aryl)_paminosulfonyl,
 (25) (aryl C₁₋₈ alkyl)_paminosulfonyl,
 15 (26) aryl sulfonyl,
 (27) aryl C₁₋₆ alkyl sulfonyl,
 (28) C₁₋₆ alkyl thiocarbonyl,
 (29) aryl thiocarbonyl, and
 (30) aryl C₁₋₆ alkyl thiocarbonyl,

20 wherein any of the alkyl groups of R⁴ are either unsubstituted or substituted with one to three R⁵ substituents and wherein any of the aryl, cycloalkyl, or cycloheteroalkyl groups in R⁴ are optionally substituted with one to three R⁶ substituents.

In one class of this embodiment of the present invention, R⁴ is selected from:

- 25 (1) hydrogen,
 (2) aryl,
 (3) C₁₋₈ alkyl,
 (4) perfluoro C₁₋₈ alkyl, and
 (5) aryl C₁₋₆ alkyl;

30 wherein any of the alkyl groups of are either unsubstituted or substituted with one to three R⁵ substituents; and wherein any of the aryl groups are either unsubstituted or substituted with one to three R⁶ substituents.

In one subclass of this class of the present invention, R⁴ is selected from hydrogen, methyl, ethyl, cyclopropyl, trifluoromethyl, and perfluoroethyl. In yet

another subclass of this class of the present invention, R⁴ is selected from hydrogen, methyl, cyclopropyl, and trifluoromethyl. In still another subclass of this class of the present invention, R⁴ is selected from hydrogen and methyl.

In one embodiment of the present invention, each R⁵ is independently
5 selected from:

- (1) halogen,
- (2) C₁₋₈ alkyl,
- (3) C₃₋₈ cycloalkyl,
- (4) C₃₋₈ cycloheteroalkyl,
- 10 (5) C₃₋₈ cycloalkyl-C₁₋₆ alkyl,
- (6) C₃₋₈ cycloheteroalkyl-C₁₋₆ alkyl,
- (7) aryl,
- (8) aryl-C₁₋₆ alkyl,
- (9) amino,
- 15 (10) amino-C₁₋₆ alkyl,
- (11) C₁₋₃ acylamino,
- (12) C₁₋₃ acylamino-C₁₋₆ alkyl,
- (13) (C₁₋₆ alkyl)_n amino,
- (14) C₃₋₆ cycloalkyl-C₀₋₂ alkylamino,
- 20 (15) (C₁₋₆ alkyl)_n amino-C₁₋₆ alkyl,
- (16) C₁₋₆ alkoxy,
- (17) C₁₋₄ alkoxy-C₁₋₆ alkyl,
- (18) hydroxycarbonyl,
- (19) hydroxycarbonyl-C₁₋₆ alkyl,
- 25 (20) C₁₋₃ alkoxy-carbonyl,
- (21) C₁₋₃ alkoxy-carbonyl-C₁₋₆ alkyl,
- (22) hydroxy,
- (23) hydroxy-C₁₋₆ alkyl,
- (24) nitro,
- 30 (25) cyano,
- (26) trifluoromethyl,
- (27) trifluoromethoxy,
- (28) trifluoroethoxy,
- (29) C₁₋₈ alkyl-S(O)_p,

- 5
- (30) (C₁₋₈ alkyl)_paminocarbonyl,
 - (31) C₁₋₈ alkyloxycarbonylamino,
 - (32) (C₁₋₈ alkyl)_n aminocarbonyloxy,
 - (33) (aryl C₁₋₃ alkyl)_n amino,
 - (34) (aryl)_n amino,
 - (35) aryl-C₁₋₃ alkylsulfonylamino, and
 - (36) C₁₋₈ alkylsulfonylamino.

In one class of this embodiment of the present invention, each R⁵ is independently selected from:

- 10
- (1) halogen,
 - (2) C₁₋₈ alkyl,
 - (3) C₃₋₈ cycloalkyl,
 - (4) C₃₋₈ cycloheteroalkyl,
 - (5) C₃₋₈ cycloalkyl-C₁₋₆ alkyl,
 - 15 (6) aryl,
 - (7) amino,
 - (8) C₁₋₃ acylamino,
 - (9) (C₁₋₆ alkyl)_n amino,
 - (10) C₃₋₆ cycloalkyl-C₀₋₂ alkylamino,
 - 20 (11) C₁₋₆ alkoxy,
 - (12) hydroxycarbonyl,
 - (13) hydroxy,
 - (14) cyano,
 - (15) trifluoromethyl,
 - 25 (16) trifluoromethoxy,
 - (17) trifluoroethoxy,
 - (18) (C₁₋₈ alkyl)_paminocarbonyl,
 - (19) C₁₋₈ alkyloxycarbonylamino,
 - (20) (C₁₋₈ alkyl)_n aminocarbonyloxy,
 - 30 (21) (aryl C₁₋₃ alkyl)_n amino, and
 - (22) (aryl)_n amino.

In another class of the present invention, each R⁵ is independently selected from:

- (1) C₁₋₈ alkyl,
- (2) C₃₋₈ cycloalkyl,

- (3) C3-8 cycloheteroalkyl,
 (4) C3-8 cycloalkyl-C1-6 alkyl,
 (5) C3-8 cycloheteroalkyl-C1-6 alkyl,
 (6) aryl,
 5 (7) aryl-C1-6 alkyl,
 (8) amino,
 (9) amino-C1-6 alkyl,
 (10) C1-3 acylamino,
 (11) C1-3 acylamino-C1-6 alkyl,
 10 (12) (C1-6 alkyl)_n amino,
 (13) C3-6 cycloalkyl-C0-2 alkylamino,
 (14) (C1-6 alkyl)_n amino-C1-6 alkyl,
 (15) C1-6 alkoxy,
 (16) C1-4 alkoxy-C 1-6 alkyl,
 15 (17) hydroxycarbonyl,
 (18) hydroxycarbonyl-C1-6 alkyl,
 (19) C1-3 alkoxycarbonyl,
 (20) C1-3 alkoxycarbonyl-C1-6 alkyl,
 (21) hydroxy,
 20 (22) hydroxy-C1-6 alkyl,
 (23) nitro,
 (24) cyano,
 (25) trifluoromethyl,
 (26) trifluoromethoxy,
 25 (27) trifluoroethoxy,
 (28) C1-8 alkyl-S(O)_p,
 (29) (C1-8 alkyl)_paminocarbonyl,
 (30) C1-8 alkyloxycarbonylamino,
 (31) (C1-8 alkyl)_n aminocarbonyloxy,
 30 (32) (aryl C1-3 alkyl)_n amino,
 (33) (aryl)_n amino,
 (34) aryl-C1-3 alkylsulfonylamino, and
 (35) C1-8 alkylsulfonylamino.

In one subclass of this class of this embodiment, each R⁵ is independently selected from:

- (1) C₁₋₈ alkyl,
- (2) C₃₋₈ cycloalkyl,
- 5 (3) C₃₋₈ cycloheteroalkyl,
- (4) C₃₋₈ cycloalkyl-C₁₋₆ alkyl,
- (5) aryl,
- (6) amino,
- (7) C₁₋₃ acylamino,
- 10 (8) (C₁₋₆ alkyl)_n amino,
- (9) C₃₋₆ cycloalkyl-C₀₋₂ alkylamino,
- (10) C₁₋₆ alkoxy,
- (11) hydroxycarbonyl,
- (12) hydroxy,
- 15 (13) cyano,
- (14) trifluoromethyl,
- (15) trifluoromethoxy,
- (16) trifluoroethoxy,
- (17) (C₁₋₈ alkyl)_paminocarbonyl,
- 20 (18) C₁₋₈ alkyloxycarbonylamino,
- (19) (C₁₋₈ alkyl)_n aminocarbonyloxy,
- (20) (aryl C₁₋₃ alkyl)_n amino, and
- (21) (aryl)_n amino.

In one subclass of this class of this embodiment, each R⁵ is independently selected from:

- (1) C₃₋₈ cycloalkyl,
- (2) C₃₋₈ cycloheteroalkyl,
- (3) C₃₋₈ cycloalkyl-C₁₋₆ alkyl,
- (4) aryl,
- 30 (5) amino,
- (6) C₁₋₃ acylamino,
- (7) (C₁₋₆ alkyl)_n amino,
- (8) C₃₋₆ cycloalkyl-C₀₋₂ alkylamino,
- (9) C₁₋₆ alkoxy,

- 5
- (10) hydroxycarbonyl,
 (11) hydroxy,
 (12) cyano,
 (13) trifluoromethyl,
 (14) trifluoromethoxy,
 (15) trifluoroethoxy,
 (16) (C₁₋₈ alkyl)_paminocarbonyl,
 (17) C₁₋₈ alkyloxycarbonylamino,
 (18) (C₁₋₈ alkyl)_n aminocarbonyloxy,
 10 (19) (aryl C₁₋₃ alkyl)_n amino, and
 (20) (aryl)_n amino.

In still another embodiment of the present invention, each R⁶ is independently selected from:

- 15 (1) halogen,
 (2) aryl,
 (3) C₁₋₈ alkyl,
 (4) C₃₋₈ cycloalkyl,
 (5) C₃₋₈ cycloheteroalkyl,
 (6) aryl C₁₋₆alkyl,
 20 (7) amino C₀₋₆alkyl,
 (8) C₁₋₆ alkylamino C₀₋₆alkyl,
 (9) (C₁₋₆ alkyl)₂amino C₀₋₆alkyl,
 (10) aryl C₀₋₆ alkylamino C₀₋₆alkyl,
 (11) (aryl C₀₋₆ alkyl)₂amino C₀₋₆alkyl,
 25 (12) C₁₋₆ alkylthio,
 (13) aryl C₀₋₆alkylthio,
 (14) C₁₋₆ alkylsulfinyl,
 (15) aryl C₀₋₆alkylsulfinyl,
 (16) C₁₋₆ alkylsulfonyl,
 30 (17) aryl C₀₋₆alkylsulfonyl,
 (18) C₁₋₆ alkoxy C₀₋₆alkyl,
 (19) aryl C₀₋₆ alkoxy C₀₋₆alkyl,
 (20) hydroxycarbonyl C₀₋₆alkyl,
 (21) C₁₋₆ alkoxycarbonyl C₀₋₆alkyl,
 35 (22) aryl C₀₋₆ alkoxycarbonyl C₀₋₆alkyl,

- (23) hydroxycarbonyl C₁₋₆ alkyloxy,
 (24) hydroxy C₀₋₆alkyl,
 (25) cyano,
 (26) nitro,
 5 (27) perfluoroC₁₋₄alkyl,
 (28) perfluoroC₁₋₄alkoxy,
 (29) oxo,
 (30) C₁₋₆ alkylcarbonyloxy,
 (31) aryl C₀₋₆alkylcarbonyloxy,
 10 (32) alkyl C₁₋₆ carbonylamino,
 (33) aryl C₀₋₆ alkylcarbonylamino,
 (34) C₁₋₆ alkylsulfonylamino,
 (35) aryl C₀₋₆alkylsulfonylamino,
 (36) C₁₋₆ alkoxy carbonylamino,
 15 (37) aryl C₀₋₆ alkoxy carbonylamino,
 (38) C₁₋₆alkylaminocarbonylamino,
 (39) aryl C₀₋₆alkylaminocarbonylamino,
 (40) (C₁₋₆alkyl)₂ aminocarbonylamino,
 (41) (aryl C₀₋₆alkyl)₂ aminocarbonylamino,
 20 (42) (C₁₋₆alkyl)₂ aminocarbonyloxy,
 (43) (aryl C₀₋₆alkyl)₂ aminocarbonyloxy,
 (44) C₀₋₆alkylcarbonyl C₀₋₆alkyl, and
 (45) aryl C₀₋₆alkylcarbonyl C₀₋₆alkyl.

In one class of this embodiment of the present invention, each R⁶ is
 25 independently selected from:

- (1) halogen,
 (2) phenyl,
 (3) C₁₋₃ alkyl,
 (4) C₄₋₆ cycloheteroalkyl,
 30 (5) phenyl C₁₋₃alkyl,
 (6) amino C₀₋₃alkyl,
 (7) C₁₋₃ alkylamino C₀₋₃alkyl,
 (8) (C₁₋₃ alkyl)₂amino C₀₋₃alkyl,
 (9) phenyl C₀₋₃alkylamino C₀₋₃alkyl,

- (10) (phenyl C₀₋₃ alkyl)₂amino C₀₋₃alkyl,
 (11) C₁₋₃ alkoxy C₀₋₃alkyl,
 (12) aryl C₀₋₃ alkoxy C₀₋₃alkyl,
 (13) hydroxycarbonyl C₀₋₃alkyl,
 5 (14) C₁₋₃ alkoxycarbonyl C₀₋₃alkyl,
 (15) phenyl C₀₋₃ alkoxycarbonyl C₀₋₃alkyl,
 (16) hydroxy C₀₋₃alkyl,
 (17) cyano,
 (18) trifluoromethyl, and
 10 (19) trifluoromethoxy.

In one subclass of this class of the present invention, each R⁶ is independently selected from:

- (1) halogen,
 (2) phenyl,
 15 (3) methyl,
 (4) C₄₋₆ cycloheteroalkyl,
 (5) phenyl C₁₋₃alkyl,
 (6) amino C₀₋₃alkyl,
 (7) C₁₋₃ alkylamino C₀₋₃alkyl,
 20 (8) (C₁₋₃ alkyl)₂amino C₀₋₃alkyl,
 (9) phenyl C₀₋₃alkylamino C₀₋₃alkyl,
 (10) C₁₋₃ alkoxy C₀₋₃alkyl,
 (11) aryl C₀₋₃ alkoxy C₀₋₃alkyl,
 (12) hydroxycarbonyl,
 25 (13) C₁₋₃ alkoxycarbonyl C₀₋₃alkyl,
 (14) hydroxy
 (15) methoxy,
 (16) cyano,
 (17) trifluoromethyl, and
 30 (18) trifluoromethoxy.

Particular compounds of structural formula (I) include:

4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one,
 4-(trifluoromethyl)-1,6,7,8,9,10-hexahydro-2H-azepino[3,2-g]quinolin-2-one,
 1,6,7,8,9,10-hexahydro-2H-azepino[3,2-g]quinolin-2-one,

- 8-(*R*)-methyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-*b*]azepin-2(6H)-one,
 8-(*S*)-methyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-*b*]azepin-2(6H)-one,
 5 8-spirocyclopropyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-*b*]azepin-2(6H)-one,
 8-(*R,S*)-propyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-*b*]azepin-2(6H)-one,
 8-(*R,S*)-dimethyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-*b*]azepin-
 10 2(6H)-one,
 8-(*R,S*)-benzyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-*b*]azepin-2(6H)-one,
 8-(*R,S*)-ethyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-*b*]azepin-2(6H)-one,
 15 8-(*R,S*)-cyclopropylmethyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-*b*]azepin-2(6H)-one,
 4,8-(*R,S*)-dimethyl-7,8,9,10-tetrahydrochromeno[7,6-*b*]azepin-2(6H)-one, and
 4-methyl-8-(*R,S*)-propyl-7,8,9,10-tetrahydrochromeno[7,6-*b*]azepin-2(6H)-one,
 and pharmaceutically acceptable salts thereof.

20 Compounds of the present invention, which may be prepared in accordance with the methods described herein, have been found to be tissue selective modulators of the androgen receptor (SARMs). In one aspect, compounds of the present invention may be useful to agonize the androgen receptor in a patient, and in particular to agonize the androgen receptor in bone and/or muscle tissue and
 25 antagonize the androgen receptor in the prostate of a male patient or in the uterus of a female patient and agonize the androgen receptor in bone and/or muscle tissue. In another aspect of the present invention, compounds of structural formula I may be useful to agonize the androgen receptor in bone and/or muscle tissue and antagonize the androgen receptor in the prostate of a male patient or in the uterus or skin of a
 30 female patient. The agonism in bone can be assayed through stimulation of bone formation in the rodent model of osteoporosis, and the antagonism in the prostate can be assayed through observation of minimal effects on prostate growth in castrated rodents and antagonism of prostate growth induced by AR agonists, as detailed in the Examples.

In a further aspect of the present invention are compounds of structural formula I that antagonize the androgen receptor in the prostate of a male patient or in the uterus of a female patient, but not in hair-growing skin or vocal cords, and agonize the androgen receptor in bone and/or muscle tissue, but not in organs which control blood lipid levels (e.g. liver). These compounds are useful in the treatment of conditions caused by androgen deficiency or which can be ameliorated by androgen administration, including: osteoporosis, periodontal disease, bone fracture, bone damage following bone reconstructive surgery, sarcopenia, frailty, aging skin, male hypogonadism, female sexual dysfunction, post-menopausal symptoms in women, atherosclerosis, hypercholesterolemia, hyperlipidemia, aplastic anemia and other hematopoietic disorders, arthritis and joint repair, alone or in combination with other active agents. In addition, these compounds are useful as pharmaceutical composition ingredients alone and in combination with other active agents.

The compounds of the present invention may be used to treat conditions which are caused by androgen deficiency or which can be ameliorated by androgen administration, including, but not limited to: osteoporosis, periodontal disease, bone fracture, bone damage following bone reconstructive surgery, sarcopenia, frailty, aging skin, male hypogonadism, female sexual dysfunction, post-menopausal symptoms in women, atherosclerosis, hypercholesterolemia, hyperlipidemia, aplastic anemia and other hematopoietic disorders, arthritis and joint repair, alone or in combination with other active agents. Treatment is effected by administration of a therapeutically effective amount of the compound of structural formula I to the patient in need of such treatment.

The compounds of the present invention may be used in the treatment of prostate cancer, either as sole therapy, or, preferably as adjuncts to traditional androgen depletion therapy in the treatment of prostate cancer to restore bone, minimize bone loss, and maintain bone mineral density. In this manner, they may be employed together with traditional androgen deprivation therapy, including GnRH agonists/antagonists such as leuprolide. It is also possible that the compounds of structural formula I may be used in combination with antiandrogens such as flutamide, hydroxy-flutamide (the active form of flutamide), and CasodexTM (the trademark for ICI 176,334 from Imperial Chemical Industries PLC, presently Astra-Zeneca) in the treatment of prostate cancer.

Further, the compounds of the present invention may also be employed in the treatment of pancreatic cancer, either for their androgen antagonist properties or

as an adjunct to an antiandrogen such as flutamide, hydroxy-flutamide (the active form of flutamide), and Casodex™ (the trademark for ICI 176,334).

Compounds of structural formula I have minimal negative effects on lipid metabolism, thus considering their tissue selective androgen agonism listed
5 above, the compounds in this invention are ideal for hormone replacement therapy in hypogonadic (androgen deficient) men.

“Male sexual dysfunction” includes impotence, loss of libido, and erectile dysfunction.

“Erectile dysfunction” is a disorder involving the failure of a male mammal to
10 achieve erection, ejaculation, or both. Symptoms of erectile dysfunction include an inability to achieve or maintain an erection, ejaculatory failure, premature ejaculation, or inability to achieve an orgasm. An increase in erectile dysfunction and sexual dysfunction can have numerous underlying causes, including but not limited to (1) aging, (b) an underlying physical dysfunction, such as trauma, surgery, and peripheral
15 vascular disease, and (3) side-effects resulting from drug treatment, depression, and other CNS disorders.

“Female sexual dysfunction” can be seen as resulting from multiple components including dysfunction in desire, sexual arousal, sexual receptivity, and orgasm related to disturbances in the clitoris, vagina, periurethral glans, and other
20 trigger points of sexual function. In particular, anatomic and functional modification of such trigger points may diminish the orgasmic potential in breast cancer and gynecologic cancer patients. Treatment of female sexual dysfunction with an SARM compound of the present invention can result in improved blood flow, improved lubrication, improved sensation, facilitation of reaching orgasm, reduction in the refractory period between orgasms, and improvements in arousal and desire. In a
25 broader sense, “female sexual dysfunction” also incorporates sexual pain, premature labor, and dysmenorrhea.

Additionally, compounds in this invention can increase the number of blood cells, such as red blood cells and platelets and can be used for treatment of
30 hematopoietic disorders such as aplastic anemia.

Representative compounds of the present invention typically display submicromolar affinity for the androgen receptor. Compounds of this invention are therefore useful in treating mammals suffering from disorders related to androgen
35 receptor function. Pharmacologically effective amounts of the compound, including

the pharmaceutically effective salts thereof, are administered to the mammal, to treat disorders related to androgen receptor function, or which can be improved by the addition of additional androgen, such as osteoporosis, periodontal disease, bone fracture, bone damage following bone reconstructive surgery, sarcopenia, frailty, aging skin, male hypogonadism, female sexual dysfunction, post-menopausal symptoms in women, atherosclerosis, hypercholesterolemia, hyperlipidemia, aplastic anemia and other hematopoietic disorders, pancreatic cancer, renal cancer, prostate cancer, arthritis and joint repair. In addition, the compounds of the present invention are useful in treating osteoporosis and/or bone weakening induced by glucocorticoid administration.

It is generally preferable to administer compounds of the present invention as enantiomerically pure formulations. Racemic mixtures can be separated into their individual enantiomers by any of a number of conventional methods. These include chiral chromatography, derivatization with a chiral auxiliary followed by separation by chromatography or crystallization, and fractional crystallization of diastereomeric salts.

As used herein, a compound that binds to an intracellular receptor, such as the androgen receptor, and mimics the effect of the natural ligand is referred to as an "agonist"; whereas, a compound that inhibits the effect of the natural ligand is called an "antagonist." The term "tissue selective androgen receptor modulator" refers to an androgen receptor ligand that mimics the action of the natural ligand in some tissues but not in others.

The term "pharmaceutically acceptable salt" is intended to include all acceptable salts such as acetate, lactobionate, benzenesulfonate, laurate, benzoate, malate, bicarbonate, maleate, bisulfate, mandelate, bitartrate, mesylate, borate, methylbromide, bromide, methylnitrate, calcium edetate, methylsulfate, camsylate, mucate, carbonate, napsylate, chloride, nitrate, clavulanate, N-methylglucamine, citrate, ammonium salt, dihydrochloride, oleate, edetate, oxalate, edisylate, pamoate (embonate), estolate, palmitate, esylate, pantothenate, fumarate, phosphate/diphosphate, gluceptate, polygalacturonate, gluconate, salicylate, glutamate, stearate, glycollylarsanilate, sulfate, hexylresorcinate, subacetate, hydrabamine, succinate, hydrobromide, tannate, hydrochloride, tartrate, hydroxynaphthoate, teoate, iodide, tosylate, isothionate, triethiodide, lactate, pantoate, valerate, and the like which can be used as a dosage form for modifying the

solubility or hydrolysis characteristics or can be used in sustained release or pro-drug formulations.

The term "pharmaceutically effective amount" of an active ingredient such as a compound of structural formula I, is intended to encompass amounts of the ingredient that are therapeutically or prophylactically useful in treating or preventing disease, particularly diseases associated with modulation of the Cannabinoid 1 receptor.

The term "therapeutically effective amount" means the amount the compound of structural formula I that will elicit the biological or medical response of a tissue, system, animal or human that is being sought by the researcher, veterinarian, medical doctor or other clinician.

The term "composition" as used herein is intended to encompass a product comprising the specified ingredients in the specified amounts, as well as any product which results, directly or indirectly, from combination of the specified ingredients in the specified amounts.

By "pharmaceutically acceptable" it is meant the carrier, diluent or excipient must be compatible with the other ingredients of the formulation and not deleterious to the recipient thereof.

The terms "administration of" and or "administering a" compound should be understood to mean providing a compound of the invention or a prodrug of a compound of the invention to the individual in need of treatment.

The administration of the compound of structural formula I in order to practice the present methods of therapy is carried out by administering an effective amount of the compound of structural formula I to the patient in need of such treatment or prophylaxis. The need for a prophylactic administration according to the methods of the present invention is determined via the use of well known risk factors. The effective amount of an individual compound is determined, in the final analysis, by the physician in charge of the case, but depends on factors such as the exact disease to be treated, the severity of the disease and other diseases or conditions from which the patient suffers, the chosen route of administration other drugs and treatments which the patient may concomitantly require, and other factors in the physician's judgment.

Generally, the daily dosage of the compound of structural formula I may be varied over a wide range from 0.01 to 1000 mg per adult human per day. Most preferably, dosages range from 0.1 to 200 mg/day. For oral administration, the

compositions are preferably provided in the form of tablets containing 0.01 to 1000 mg, particularly 0.01, 0.05, 0.1, 0.5, 1.0, 2.5, 3.0, 5.0, 6.0, 10.0, 15.0, 25.0, 50.0, 75, 100, 125, 150, 175, 180, 200, 225, and 500 milligrams of the active ingredient for the symptomatic adjustment of the dosage to the patient to be treated.

5 The dose may be administered in a single daily dose or the total daily dosage may be administered in divided doses of two, three or four times daily. Furthermore, based on the properties of the individual compound selected for administration, the dose may be administered less frequently, e.g., weekly, twice weekly, monthly, etc. The unit dosage will, of course, be correspondingly larger for
10 the less frequent administration.

When administered via intranasal routes, transdermal routes, by rectal or vaginal suppositories, or through a continual intravenous solution, the dosage administration will, of course, be continuous rather than intermittent throughout the dosage regimen.

15 For the treatment of sexual dysfunction compounds of the present invention are given in a dose range of 0.001 milligram to about 100 milligram per kilogram of body weight, preferably as a single dose orally or as a nasal spray.

Exemplifying the invention is a pharmaceutical composition comprising any of the compounds described above and a pharmaceutically acceptable
20 carrier. Also exemplifying the invention is a pharmaceutical composition made by combining any of the compounds described above and a pharmaceutically acceptable carrier. An illustration of the invention is a process for making a pharmaceutical composition comprising combining any of the compounds described above and a pharmaceutically acceptable carrier.

25 Formulations of the tissue selective androgen receptor modulator employed in the present method for medical use comprise the compound of structural formula I together with an acceptable carrier thereof and optionally other therapeutically active ingredients. The carrier must be pharmaceutically acceptable in the sense of being compatible with the other ingredients of the formulation and not
30 deleterious to the recipient subject of the formulation.

The present invention, therefore, further provides a pharmaceutical formulation comprising the compound of structural formula I together with a pharmaceutically acceptable carrier thereof.

The formulations include those suitable for oral, rectal, intravaginal, topical or parenteral (including subcutaneous, intramuscular and intravenous administration). Preferred are those suitable for oral administration.

5 The formulations may be presented in a unit dosage form and may be prepared by any of the methods known in the art of pharmacy. All methods include the step of bringing the active compound in association with a carrier which constitutes one or more ingredients. In general, the formulations are prepared by uniformly and intimately bringing the active compound in association with a liquid carrier, a waxy solid carrier or a finely divided solid carrier, and then, if needed,
10 shaping the product into desired dosage form.

Formulations of the present invention suitable for oral administration may be presented as discrete units such as capsules, cachets, tablets or lozenges, each containing a predetermined amount of the active compound; as a powder or granules; or a suspension or solution in an aqueous liquid or non-aqueous liquid, e.g., a syrup,
15 an elixir, or an emulsion.

A tablet may be made by compression or molding, optionally with one or more accessory ingredients. Compressed tablets may be prepared by compressing in a suitable machine the active compound in a free flowing form, e.g., a powder or granules, optionally mixed with accessory ingredients, e.g., binders, lubricants, inert
20 diluents, disintegrating agents or coloring agents. Molded tablets may be made by molding in a suitable machine a mixture of the active compound, preferably in powdered form, with a suitable carrier. Suitable binders include, without limitation, starch, gelatin, natural sugars such as glucose or beta-lactose, corn sweeteners, natural and synthetic gums such as acacia, tragacanth or sodium alginate, carboxymethyl-
25 cellulose, polyethylene glycol, waxes and the like. Lubricants used in these dosage forms include, without limitation, sodium oleate, sodium stearate, magnesium stearate, sodium benzoate, sodium acetate, sodium chloride and the like. Disintegrators include, without limitation, starch, methyl cellulose, agar, bentonite, xanthan gum and the like.

30 Oral liquid forms, such as syrups or suspensions in suitably flavored suspending or dispersing agents such as the synthetic and natural gums, for example, tragacanth, acacia, methyl cellulose and the like may be made by adding the active compound to the solution or suspension. Additional dispersing agents which may be employed include glycerin and the like.

Formulations for vaginal or rectal administration may be presented as a suppository with a conventional carrier, i.e., a base that is nontoxic and nonirritating to mucous membranes, compatible with the compound of structural formula I, and is stable in storage and does not bind or interfere with the release of the compound of structural formula I. Suitable bases include: cocoa butter (theobroma oil), polyethylene glycols (such as carbowax and polyglycols), glycol-surfactant combinations, polyoxyl 40 stearate, polyoxyethylene sorbitan fatty acid esters (such as Tween, Myrj, and Arlacel), glycerinated gelatin, and hydrogenated vegetable oils. When glycerinated gelatin suppositories are used, a preservative such as methylparaben or propylparaben may be employed.

Topical preparations containing the active drug component can be admixed with a variety of carrier materials well known in the art, such as, e.g., alcohols, aloe vera gel, allantoin, glycerine, vitamin A and E oils, mineral oil, PPG2 myristyl propionate, and the like, to form, e.g., alcoholic solutions, topical cleansers, cleansing creams, skin gels, skin lotions, and shampoos in cream or gel formulations.

The compounds of the present invention can also be administered in the form of liposome delivery systems, such as small unilamellar vesicles, large unilamellar vesicles and multilamellar vesicles. Liposomes can be formed from a variety of phospholipids, such as cholesterol, stearylamine or phosphatidylcholines.

Compounds of the present invention may also be delivered by the use of monoclonal antibodies as individual carriers to which the compound molecules are coupled. The compounds of the present invention may also be coupled with soluble polymers as targetable drug carriers. Such polymers can include polyvinylpyrrolidone, pyran copolymer, polyhydroxypropylmethacrylamide-phenol, polyhydroxy-ethylaspartamidephenol, or polyethylene-oxide polylysine substituted with palmitoyl residues. Furthermore, the compounds of the present invention may be coupled to a class of biodegradable polymers useful in achieving controlled release of a drug, for example, polylactic acid, polyepsilon caprolactone, polyhydroxy butyric acid, polyorthoesters, polyacetals, polydihydropyrans, polycyanoacrylates and cross-linked or amphipathic block copolymers of hydrogels.

Formulations suitable for parenteral administration include formulations that comprise a sterile aqueous preparation of the active compound which is preferably isotonic with the blood of the recipient. Such formulations suitably comprise a solution or suspension of a compound that is isotonic with the blood of the recipient subject. Such formulations may contain distilled water, 5%

dextrose in distilled water or saline and the active compound. Often it is useful to employ a pharmaceutically and pharmacologically acceptable acid addition salt of the active compound that has appropriate solubility for the solvents employed. Useful salts include the hydrochloride isothionate and methanesulfonate salts. Useful formulations also comprise concentrated solutions or solids comprising the active compound which on dilution with an appropriate solvent give a solution suitable for parenteral administration.

The compounds of the present invention may be coupled to a class of biodegradable polymers useful in achieving controlled release of a drug, for example, polylactic acid, polyepsilon caprolactone, polyhydroxy butyric acid, polyorthoesters, polyacetals, polydihydropyrans, polycyanoacrylates and cross-linked or amphipathic block copolymers of hydrogels.

The pharmaceutical composition and method of the present invention may further comprise other therapeutically active compounds usually applied in the treatment of the above mentioned conditions, including: osteoporosis, periodontal disease, bone fracture, bone damage following bone reconstructive surgery, sarcopenia, frailty, aging skin, male hypogonadism, female sexual dysfunction, post-menopausal symptoms in women, atherosclerosis, hypercholesterolemia, hyperlipidemia, aplastic anemia and other hematopoietic disorders, pancreatic cancer, renal cancer, prostate cancer, arthritis and joint repair.

For the treatment and prevention of osteoporosis, the compounds of the present invention may be administered in combination with a bone-strengthening agent selected from: resorption inhibitors, osteoanabolic agents, and other agents beneficial for the skeleton through the mechanisms which are not precisely defined, such as calcium supplements, flavonoids and vitamin D analogues. For example, the compounds of the instant invention may be effectively administered in combination with effective amounts of other agents such as estrogens, bisphosphonates, SERMs, cathepsin K inhibitors, osteoclast integrin inhibitors, particularly $\alpha_v\beta_3$ antagonists, vacuolar proton pump inhibitors, VEGF, thiazolidinediones, calcitonin, protein kinase inhibitors, parathyroid hormone and derivatives, calcium receptor antagonists, growth hormone secretagogues, growth hormone releasing hormone, insulin-like growth factor, bone morphogenic protein (BMP), inhibitors of BMP antagonism, prostaglandin derivatives, fibroblast growth factors, vitamin D and derivatives thereof, Vitamin K and derivatives thereof, soy isoflavones, calcium, and fluoride

salts. The conditions of periodontal disease, bone fracture, bone damage following bone reconstructive surgery may also benefit from these combined treatments.

In the treatment of osteoporosis, the activity of the compounds of the present invention are distinct from that of the resorption inhibitors: estrogens, bisphosphonates, SERMs, calcitonin $\alpha_v\beta_3$ antagonists and cathepsin K inhibitors, 5 vacuolar proton pump inhibitors, agents interfering with the RANK/RANKL/Osteoprotegerin pathway, p38 inhibitors or any other inhibitors of osteoclast generation or osteoclast activation. Rather than inhibiting bone resorption, the compounds of structural formula I stimulate bone formation, acting preferentially on 10 cortical bone, which is responsible for a significant part of bone strength. The thickening of cortical bone substantially contributes to a reduction in fracture risk, especially fractures of the hip. The combination of the tissue selective androgen receptor modulators of structural formula I with resorption inhibitors such as estrogen, bisphosphonates, antiestrogens, SERMs, calcitonin, osteoclast integrin inhibitors 15 HMG-CoA reductase inhibitors, proton pump inhibitors, and cathepsin K inhibitors is particularly useful because of the complementarity of the bone anabolic and antiresorptive actions.

Bone antiresorptive agents are those agents which are known in the art to inhibit the resorption of bone and include, for example, estrogen and estrogen 20 derivatives which include steroidal compounds having estrogenic activity such as, for example, 17 β -estradiol, estrone, conjugated estrogen (PREMARIN®), equine estrogen, 17 β -ethynyl estradiol, and the like. The estrogen or estrogen derivative may be employed alone or in combination with a progestin or progestin derivative. Nonlimiting examples of progestin derivatives are norethindrone and medroxy- 25 progesterone acetate.

Bisphosphonates are also bone anti-resorptive agents. Bisphosphonate compounds may also be employed in combination with the compound of structural formula I of the present invention include:

4-amino-1-hydroxybutylidene-1,1-bisphosphonic acid,
30 N-methyl-4-amino-hydroxybutylidene-1,1-bisphosphonic acid,
4-(N,N-dimethylamino-1-hydroxybutylidene-1,1-bisphosphonic acid,
3-amino-1-hydroxypropylidene-1,1-bisphosphonic acid,
3-(N,N-dimethylamino)-1-hydroxypropylidene-1,1-bisphosphonic acid,
1-hydroxy-3-(N-methyl-N-pentylamino)propylidene-1,1-bisphosphonic acid,
35 1-hydroxy-2-(3-pyridyl)ethylidene-1,1-bisphosphonic acid,

4-(hydroxymethylene-1,1-bisphosphonic acid)piperidine,
(1-hydroxyethylidene)-bisphosphonate,
(dichloromethylene)-bisphosphonate,
[1-hydroxy-2-imidazopyridin-(1,2-a)-3-ylethylidene]bisphosphonate,
5 (6-amino-1-hydroxyethylidene)bisphosphonate,
[1-hydroxy-2-(1H-imidazole-1-yl)ethylidene]bisphosphonate;
and their pharmaceutically acceptable salts. Especially preferred is alendronate, 4-
amino-1-hydroxybutylidene-1,1-bisphosphonic acid monosodium salt, trihydrate.
Methods for the preparation of bisphosphonic acids may be found in, e.g., U.S. Patent
10 No. 3,251,907; U.S. Patent No. 3,422,137; U.S. Patent No. 3,584,125; U.S. Patent No.
3,940,436; U.S. Patent No. 3,944,599; U.S. Patent No. 3,962,432; U.S. Patent No.
4,054,598; U.S. Patent No. 4,267,108; U.S. Patent No. 4,327,039; U.S. Patent No.
4,407,761; U.S. Patent No. 4,578,376; U.S. Patent No. 4,621,077; U.S. Patent No.
4,624,947; U.S. Patent No. 4,746,654; U.S. Patent No. 4,761,406; U.S. Patent No.
15 4,922,077. In particular, methods for the preparation of 4-amino-1-
hydroxybutylidene-1,1-bisphosphonic acid monosodium salt trihydrate may be found
in U.S. Patent No. 4,407,761 and U.S. Patent No. 4,621,077.

Still further, antiestrogenic compounds such as raloxifene (see, e.g.,
U.S. Pat. No. 5,393,763) clomiphene, zuclomiphene, enclomiphene, nafoxidene, CI-
20 680, CI-628, CN-55,945-27, Mer-25, U-11, 555A, U-100A, and salts thereof, and the
like (see, e.g., U.S. Pat. Nos. 4,729,999 and 4,894,373) may be employed in
combination with the compound of structural formula I in the methods and
compositions of the present invention. These agents are also known as SERMs, or
selective estrogen receptor modulators, agents known in the art to prevent bone loss
25 by inhibiting bone resorption via pathways believed to be similar to those of
estrogens. These agents may beneficially be used in combination with the compounds
of the present invention to beneficially treat bone disorders including osteoporosis.
Such agents include, for example: tamoxifen, raloxifene, lasofoxifene, toremifene,
azorxifene, EM-800, EM-652, TSE 424, clomiphene, droloxifene, idoxifene and
30 levormeloxifene. (Goldstein, et al., A pharmacological review of selective oestrogen
receptor modulators. Human Reproduction Update, 6 : 212-224, 2000, and Lufkin, et
al., The role of selective estrogen receptor modulators in the prevention and treatment
of Osteoporosis. Rheumatic Disease Clinics of North America. 27 (1) : 163-185,
2001.)

$\alpha_v\beta_3$ antagonists suppress bone resorption and may be employed in combination with the tissue selective androgen receptor modulators of structural formula I for the treatment of bone disorders including osteoporosis. Peptidyl as well as peptidomimetic antagonists of the $\alpha_v\beta_3$ integrin receptor have been described both

5 in the scientific and patent literature. For example, reference is made to W.J. Hoekstra and B.L. Poulter, *Curr. Med. Chem.* 5: 195-204, 1998 and references cited therein; WO 95/32710; WO 95/37655; WO 97/01540; WO 97/37655; WO 98/08840; WO 98/18460; WO 98/18461; WO 98/25892; WO 98/31359; WO 98/30542; WO 99/15506; WO 99/15507; WO 00/03973; EP 853084; EP 854140; EP 854145; US

10 Patent Nos. 5,204,350; 5,217,994; 5,639,754; 5,741,796; 5,780,426; 5,929,120; 5,952,341; 6,017,925; and 6,048,861. Evidence of the ability of $\alpha_v\beta_3$ integrin receptor antagonists to prevent bone resorption in vitro and in vivo has been presented (V.W. Engleman, et al., "A Peptidomimetic Antagonist of the $\alpha_v\beta_3$ Integrin Inhibits Bone Resorption In Vitro and Prevents Osteoporosis In Vivo," *J. Clin. Invest.* 99:

15 2284-2292, 1997; S.B. Rodan, et al., "A High Affinity Non-Peptide $\alpha_v\beta_3$ Ligand Inhibits Osteoclast Activity In Vitro and In Vivo," *J. Bone Miner. Res.* 11: S289, 1996; J.F. Gourvest, et al., "Prevention of OVX-Induced Bone Loss With a Non-peptidic Ligand of the $\alpha_v\beta_3$ Vitronectin Receptor," *Bone* 23: S612, 1998; M.W. Lark, et al., "An Orally Active Vitronectin Receptor $\alpha_v\beta_3$ Antagonist Prevents Bone

20 Resorption In Vitro and In Vivo in the Ovariectomized Rat," *Bone* 23: S219, 1998). Other $\alpha_v\beta_3$ antagonists are described in R.M. Keenan, et al., "Discovery of Potent Nonpeptide Vitronectin Receptor ($\alpha_v\beta_3$) Antagonists," *J. Med. Chem.* 40: 2289-2292, 1997; R.M. Keenan, et al., "Benzimidazole Derivatives As Arginine Mimetics in 1,4-Benzodiazepine Nonpeptide Vitronectin Receptor ($\alpha_v\beta_3$) Antagonists," *Bioorg. Med.*

25 *Chem. Lett.* 8: 3165-3170, 1998; and R.M. Keenan, et al., "Discovery of an Imidazopyridine-Containing 1,4-Benzodiazepine Nonpeptide Vitronectin Receptor ($\alpha_v\beta_3$) Antagonist With Efficacy in a Restenosis Model," *Bioorg. Med. Chem. Lett.* 8: 3171-3176, 1998. Still other benzazepine, benzodiazepine and benzocycloheptene $\alpha_v\beta_3$ integrin receptor antagonists are described in the following patent publications:

30 WO 96/00574, WO 96/00730, WO 96/06087, WO 96/26190, WO 97/24119, WO 97/24122, WO 97/24124, WO 98/14192, WO 98/15278, WO 99/05107, WO 99/06049, WO 99/15170, WO 99/15178, WO 99/15506, and U.S. Patent No. 6,159,964, and WO 97/34865. $\alpha_v\beta_3$ integrin receptor antagonists having dibenzocycloheptene, dibenzocycloheptane and dibenzoxazepine scaffolds have been

described in WO 97/01540, WO 98/30542, WO 99/11626, WO 99/15508, WO 00/33838, U.S. Patent Nos. 6,008,213, and 6,069,158. Other osteoclast integrin receptor antagonists incorporating backbone conformational ring constraints have been described in the patent literature. Published patent applications or issued patents disclosing antagonists having a phenyl constraint include WO 98/00395, WO 5 99/32457, WO 99/37621, WO 99/44994, WO 99/45927, WO 99/52872, WO 99/52879, WO 99/52896, WO 00/06169, EP 0 820,988, EP 0 820,991, U.S. Patent Nos. 5,741,796; 5,773,644; 5,773,646; 5,843,906; 5,852,210; 5,929,120; 5,952,381; 6,028,223; and 6,040,311. Published patent applications or issued patents disclosing antagonists having a monocyclic ring constraint include WO 99/26945, WO 10 99/30709, WO 99/30713, WO 99/31099, WO 99/59992, WO 00/00486, WO 00/09503, EP 0 796,855, EP 0 928,790, EP 0 928,793, U.S. Patent Nos. 5,710,159; 5,723,480; 5,981,546; 6,017,926; and 6,066,648. Published patent applications or issued patents disclosing antagonists having a bicyclic ring constraint include WO 15 98/23608, WO 98/35949, WO 99/33798, EP 0 853,084, U.S. Patent Nos. 5,760,028; 5,919,792; and 5,925,655. Reference is also made to the following reviews for additional scientific and patent literature that concern alpha v integrin antagonists: M. E. Duggan, et al., "Ligands to the integrin receptor $\alpha v \beta 3$, Exp. Opin. Ther. Patents, 10: 1367-1383, 2000; M. Gowen, et al., "Emerging therapies for osteoporosis," Emerging Drugs, 5: 1-43, 2000; J.S. Kerr, et al., "Small molecule αv integrin antagonists: novel anticancer agents," Exp. Opin. Invest. Drugs, 9: 1271-1291, 2000; and W.H. Miller, et al., "Identification and in vivo efficacy of small-molecule antagonists of integrin $\alpha v \beta 3$ (the vitronectin receptor)," Drug Discovery Today, 5: 20 397-408, 2000.

25 Cathepsin K, formerly known as cathepsin O2, is a cysteine protease and is described in PCT International Application Publication No. WO 96/13523, published May 9, 1996; U.S. Patent No. 5,501,969, issued March 3, 1996; and U.S. Patent No. 5,736,357, issued April 7, 1998, all of which are incorporated by reference herein in their entirety. Cysteine proteases, specifically cathepsins, are linked to a number of disease conditions, such as tumor metastasis, inflammation, arthritis, and 30 bone remodeling. At acidic pH's, cathepsins can degrade type-I collagen. Cathepsin protease inhibitors can inhibit osteoclastic bone resorption by inhibiting the degradation of collagen fibers and are thus useful in the treatment of bone resorption diseases, such as osteoporosis.

Members of the class of HMG-CoA reductase inhibitors, known as the “statins,” have been found to trigger the growth of new bone, replacing bone mass lost as a result of osteoporosis (The Wall Street Journal, Friday, December 3, 1999, page B1). Therefore, the statins hold promise for the treatment of bone resorption.

5 Examples of HMG-CoA reductase inhibitors include statins in their lactonized or dihydroxy open acid forms and pharmaceutically acceptable salts and esters thereof, including but not limited to lovastatin (see US Patent No. 4,342,767); simvastatin (see US Patent No. 4,444,784); dihydroxy open-acid simvastatin, particularly the ammonium or calcium salts thereof; pravastatin, particularly the sodium salt thereof
10 (see US Patent No. 4,346,227); fluvastatin particularly the sodium salt thereof (see US Patent No. 5,354,772); atorvastatin, particularly the calcium salt thereof (see US Patent No. 5,273,995); cerivastatin, particularly the sodium salt thereof (see US Patent No. 5,177,080), rosuvastatin, also known as ZD4522 (see US Patent No.5,260,440) and pitavastatin also referred to as NK-104 or nisvastatin (see PCT international
15 publication number WO 97/23200).

Osteoclast vacuolar ATPase inhibitors, also called proton pump inhibitors, may also be employed together with the tissue selective androgen receptor modulator of structural formula I. The proton ATPase which is found on the apical
20 membrane of the osteoclast has been reported to play a significant role in the bone resorption process. Therefore, this proton pump represents an attractive target for the design of inhibitors of bone resorption which are potentially useful for the treatment and prevention of osteoporosis and related metabolic diseases (C. Farina, et al., “Selective inhibitors of the osteoclast vacuolar proton ATPase as novel bone
resorption inhibitors,” DDT, 4: 163-172, 1999).

25 The angiogenic factor VEGF has been shown to stimulate the bone-resorbing activity of isolated mature rabbit osteoclasts via binding to its receptors on osteoclasts (M. Nakagawa, et al., “Vascular endothelial growth factor (VEGF) directly enhances osteoclastic bone resorption and survival of mature osteoclasts,” FEBS Letters, 473: 161-164, 2000). Therefore, the development of antagonists of
30 VEGF binding to osteoclast receptors, such as KDR/Flk-1 and Flt-1, may provide yet a further approach to the treatment or prevention of bone resorption.

Activators of the peroxisome proliferator-activated receptor- γ (PPAR γ), such as the thiazolidinediones (TZD's), inhibit osteoclast-like cell formation and bone resorption in vitro. Results reported by R. Okazaki, et al. in
35 Endocrinology, 140, pp 5060-5065, 1999 point to a local mechanism on bone marrow

cells as well as a systemic one on glucose metabolism. Nonlimiting examples of PPAR γ activators include troglitazone, pioglitazone, rosiglitazone, and BRL 49653.

Calcitonin may also be employed together with the tissue selective androgen receptor modulator of structural formula I. Calcitonin is preferentially administered as nasal spray. Azra, et al., Calcitonin, 1996, In: J. P. Bilezikian, et al. Ed. Principles of Bone Biology, San Diego: Academic Press; and Silverman. Calcitonin, Rheumatic Disease Clinics of North America 27:187-196, 2001).

Protein kinase inhibitors may also be employed together with the tissue selective androgen receptor modulator of structural formula I. Kinase inhibitors include those disclosed in WO 0117562 and are in one embodiment selected from inhibitors of P-38. Specific embodiments of P-38 inhibitors useful in the present invention include: SB 203580 (Badger, et al., Pharmacological profile of SB 203580, a selective inhibitor of cytokine suppressive binding protein/p38 kinase, in animal models of arthritis, bone resorption, endotoxin shock and immune function, J. Pharmacol. Exp. Ther. 279 : 1453-1461, 1996).

Osteoanabolic agents are those agents that are known in the art to build bone by increasing the production of the bone matrix. Such osteoanabolic agents include, for example, the various forms of parathyroid hormone (PTH) such as naturally occurring PTH (1-84), PTH (1-34), analogs thereof, native or with substitutions and particularly parathyroid hormone subcutaneous injection. PTH has been found to increase the activity of osteoblasts, the cells that form bone, thereby promoting the synthesis of new bone (Modern Drug Discovery, Vol. 3, No. 8, 2000). In studies reported at the First World Congress on Osteoporosis held in Chicago in June 2000, women in combined PTH-estrogen therapy exhibited a 12.8% increase in spinal bone mass and a 4.4% increase in total hip mass. Another study presented at the same meeting showed that PTH could increase bone size as well as density. A clinical trial of the effect of the human parathyroid hormone 1-34 fragment [hPTH(1-34)] on postmenopausal osteoporotic women resulted in $\geq 65\%$ reduction in spine fractures and a 54% reduction in nonvertebral fractures, after a median of 22 months of treatment (J.M. Hock, Bone, 27: 467-469, 2000 and S. Mohan, et al., Bone, 27: 471-478, 2000, and references cited therein). Thus, PTH and fragments thereof, such as hPTH(1-34), may prove to be efficacious in the treatment of osteoporosis alone or in combination with other agents, such as the tissue selective androgen receptor modulators of the present invention.

Also useful in combination with the SARMs of the present invention are calcium receptor antagonists which induce the secretion of PTH as described by Gowen, et al., in Antagonizing the parathyroid calcium receptor stimulates parathyroid hormone secretion and bone formation in osteopenic rats, J Clin Invest. 105 :1595-604, 2000.

Growth hormone secretagogues, growth hormone, growth hormone releasing hormone and insulin-like growth factor and the like are also osteoanabolic agents which may be employed with the compounds according to structural formula I for the treatment of osteoporosis. Representative growth hormone secretagogues are disclosed in U.S. Patent No. 3,239,345; U.S. Patent No. 4,036,979; U.S. Patent No. 4,411,890; U.S. Patent No. 5,206,235; U.S. Patent No. 5,283,241; U.S. Patent No. 5,284,841; U.S. Patent No. 5,310,737; U.S. Patent No. 5,317,017; U.S. Patent No. 5,374,721; U.S. Patent No. 5,430,144; U.S. Patent No. 5,434,261; U.S. Patent No. 5,438,136; U.S. Patent No. 5,494,919; U.S. Patent No. 5,494,920; U.S. Patent No. 5,492,916; U.S. Patent No. 5,536,716; EPO Patent Pub. No. 0,144,230; EPO Patent Pub. No. 0,513,974; PCT Patent Pub. No. WO 94/07486; PCT Patent Pub. No. WO 94/08583; PCT Patent Pub. No. WO 94/11012; PCT Patent Pub. No. WO 94/13696; PCT Patent Pub. No. WO 94/19367; PCT Patent Pub. No. WO 95/03289; PCT Patent Pub. No. WO 95/03290; PCT Patent Pub. No. WO 95/09633; PCT Patent Pub. No. WO 95/11029; PCT Patent Pub. No. WO 95/12598; PCT Patent Pub. No. WO 95/13069; PCT Patent Pub. No. WO 95/14666; PCT Patent Pub. No. WO 95/16675; PCT Patent Pub. No. WO 95/16692; PCT Patent Pub. No. WO 95/17422; PCT Patent Pub. No. WO 95/17423; PCT Patent Pub. No. WO 95/34311; PCT Patent Pub. No. WO 96/02530; Science, 260, 1640-1643, June 11, 1993; Ann. Rep. Med. Chem., 28, 177-186 (1993); Bioorg. Med. Chem. Ltrs., 4(22), 2709-2714, 1994; and Proc. Natl. Acad. Sci. USA 92, 7001-7005, July 1995.

Insulin-like growth factor (IGF) may also be employed together with the tissue selective androgen receptor modulator of structural formula I. Insulin-like growth factors may be selected from Insulin-like Growth Factor I, alone or in combination with IGF binding protein 3 and IGF II. (Johannson and Rosen, The IGFs as potential therapy for metabolic bone diseases, 1996, In: Bilezikian, et . al. Ed. Principles of Bone Biology. San Diego: Academic Press; and Ghiron, et al., Effects of recombinant insulin-like growth factor-I and growth hormone on bone turnover in elderly women, J Bone Miner Res. 10 :1844-52, 1995).

Bone morphogenic protein (BMP) may also be employed together with the tissue selective androgen receptor modulator of structural formula I. Bone morphogenic protein includes BMP 2, 3, 5, 6, 7, as well as related molecules TGF beta and GDF 5. (Rosen, et al., Bone morphogenetic proteins. 1996. In: J. P. Bilezikian, et . al. Ed. Principles of Bone Biology, San Diego: Academic Press; and Wang EA, Bone morphogenetic proteins (BMPs): therapeutic potential in healing bony defects. Trends Biotechnol. 11 :379-83, 1993)

Inhibitors of BMP antagonism may also be employed together with the tissue selective androgen receptor modulator of structural formula I. BMP antagonist inhibitors are in one embodiment selected from inhibitors of the BMP antagonists SOST, noggin, chordin, gremlin, and dan (Massague and Chen Controlling TGF-beta signaling, Genes Dev. 14 :627-44, 2000; Aspenberg, et al., The bone morphogenetic proteins antagonist Noggin inhibits membranous ossification, J Bone Miner Res. 16 :497-500, 2001; Brunkow, et al., Bone dysplasia sclerosteosis results from loss of the SOST gene product, a novel cystine knot-containing protein, Am J Hum Genet. 68 : 577-89, 2001).

Prostaglandin derivatives may also be employed together with the tissue selective androgen receptor modulator of structural formula I. Prostaglandin derivatives are in one embodiment selected from agonists of prostaglandin receptor EP1, EP2, EP4, FP and IP or a derivative thereof. Pilbeam, et al., Prostaglandins and bone metabolism, 1996, In: Bilezikian, et al. Ed. Principles of Bone Biology. San Diego: Academic Press; Weinreb, et al., Expression of the prostaglandin E(2) (PGE(2)) receptor subtype EP(4) and its regulation by PGE(2) in osteoblastic cell lines and adult rat bone tissue(1), Bone. 28(3):275-81, 2001.

Fibroblast growth factors may also be employed together with the tissue selective androgen receptor modulator of structural formula I. Fibroblast growth factors include aFGF, bFGF and related peptides with FGF activity. Hurley Florkiewicz; Fibroblast growth factor and vascular endothelial growth factor families. 1996. In: J. P. Bilezikian, et . al. Ed. Principles of Bone Biology. San Diego: Academic Press.

In addition to bone resorption inhibitors and osteoanabolic agents, there are also other agents known to be beneficial for the skeleton through the mechanisms which are not precisely defined. These agents may also be favorably combined with the tissue selective androgen receptor modulator of structural formula I.

Vitamin D and Vitamin D derivatives may also be employed together with the tissue selective androgen receptor modulator of structural formula I. Vitamin D and Vitamin D derivatives include: natural vitamin D, 25-OH-vitamin D₃, 1 α ,25(OH)₂ vitamin D₃, 1 α -OH-vitamin D₃, 1 α -OH-vitamin D₂, dihydrotachysterol, 26,27-F6-1 α ,25(OH)₂ vitamin D₃, 19-nor-1 α ,25(OH)₂ vitamin D₃, 22-oxacalcitriol, calcipotriol, 1 α ,25(OH)₂-16-ene-23-yne-vitamin D₃ (Ro 23-7553), EB1089, 20-epi-1 α ,25(OH)₂ vitamin D₃, KH1060, ED71, 1 α ,24(S)-(OH)₂ vitamin D₃, 1 α ,24(R)-(OH)₂ vitamin D₃. (Jones G. Pharmacological mechanisms of therapeutics : vitamin D and analogs. 1996. In: J. P. Bilezikian, et . al. Ed. Principles of Bone Biology. San Diego: Academic Press).

Vitamin K and Vitamin K derivatives may also be employed together with the tissue selective androgen receptor modulator of structural formula I. Vitamin K and Vitamin K derivatives include: menatetrenone (vitamin K₂). Shiraki, et al., Vitamin K₂ (menatetrenone) effectively prevents fractures and sustains lumbar bone mineral density in osteoporosis, J Bone Miner Res. 15 : 515-21.

Soy isoflavones including ipriflavone may be employed together with the tissue selective androgen receptor modulator of structural formula I.

Fluoride salts, including sodium fluoride (NaF) or monosodium fluorophosphate (MFP) may also be employed together with the tissue selective androgen receptor modulator of structural formula I Dietary calcium supplements may also be employed together with the tissue selective androgen receptor modulator of structural formula I. Dietary calcium supplements include calcium carbonate, calcium citrate and natural calcium salts (Heaney, Calcium, 1996, In: J. P. Bilezikian, et . al. Ed. Principles of Bone Biology. San Diego: Academic Press).

Daily dosage ranges for bone resorption inhibitors, osteoanabolic agents and other agents which may be used to benefit the skeleton when used in combination with the compounds of structural formula I are those which are known in the art. In such combinations, generally the daily dosage range for the tissue selective androgen receptor modulator of structural formula I is 0.01 to 1000 mg per adult human per day, more preferably from 0.1 to 200 mg/day. However, adjustments to decrease the dose of each agent may be made due to the increased efficacy of the combined agent.

In particular, when a bisphosphonate is employed, dosages of 2.5 to 100 mg/day (measured as the free bisphosphonic acid) are appropriate for treatment, more preferably 5 to 20 mg/day, especially about 10 mg/day. Prophylactically, doses

of about 2.5 to about 10 mg/day and especially about 5 mg/day should be employed. For reduction in side-effects, it may be desirable to administer the combination of the compound of structural formula I and the bisphosphonate once a week. For once weekly administration, doses of about 15 mg to 700 mg per week of bisphosphonate and 0.07 to 7000 mg of the compound of structural formula I may be employed, either separately, or in a combined dosage form. The compound of structural formula I may be favorably administered in a controlled-release delivery device, particularly for once weekly administration.

For the treatment of atherosclerosis, hypercholesterolemia, hyperlipidemia, the compounds of structural formula I may be effectively administered in combination with one or more additional active agents. The additional active agent or agents can be lipid altering compounds such as HMG-CoA reductase inhibitors, or agents having other pharmaceutical activities, or agents that have both lipid-altering effects and other pharmaceutical activities. Examples of HMG-CoA reductase inhibitors include statins in their lactonized or dihydroxy open acid forms and pharmaceutically acceptable salts and esters thereof, including but not limited to lovastatin (see US Patent No. 4,342,767); simvastatin (see US Patent No. 4,444,784); dihydroxy open-acid simvastatin, particularly the ammonium or calcium salts thereof; pravastatin, particularly the sodium salt thereof (see US Patent No. 4,346,227); fluvastatin particularly the sodium salt thereof (see US Patent No. 5,354,772); atorvastatin, particularly the calcium salt thereof (see US Patent No. 5,273,995); cerivastatin, particularly the sodium salt thereof (see US Patent No. 5,177,080), and nisvastatin also referred to as NK-104 (see PCT international publication number WO 97/23200). Additional active agents which may be employed in combination with a compound of structural formula I include, but are not limited to, HMG-CoA synthase inhibitors; squalene epoxidase inhibitors; squalene synthetase inhibitors (also known as squalene synthase inhibitors), acyl-coenzyme A: cholesterol acyltransferase (ACAT) inhibitors including selective inhibitors of ACAT-1 or ACAT-2 as well as dual inhibitors of ACAT1 and -2; microsomal triglyceride transfer protein (MTP) inhibitors; probucol; niacin; cholesterol absorption inhibitors such as SCH-58235 also known as ezetimibe and 1-(4-fluorophenyl)-3(R)-[3(S)-(4-fluorophenyl)-3-hydroxypropyl]-4(S)-(4-hydroxyphenyl)-2-azetidinone, which is described in U.S. Patent No.'s 5,767,115 and 5,846,966; bile acid sequestrants; LDL (low density lipoprotein) receptor inducers; platelet aggregation inhibitors, for example glycoprotein IIb/IIIa fibrinogen receptor antagonists and aspirin; human

peroxisome proliferator activated receptor gamma (PPAR γ) agonists including the compounds commonly referred to as glitazones for example troglitazone, pioglitazone and rosiglitazone and, including those compounds included within the structural class known as thiazolidinediones as well as those PPAR γ agonists outside the

5 thiazolidinedione structural class; PPAR α agonists such as clofibrate, fenofibrate including micronized fenofibrate, and gemfibrozil; PPAR dual α/γ agonists; vitamin B₆ (also known as pyridoxine) and the pharmaceutically acceptable salts thereof such as the HCl salt; vitamin B₁₂ (also known as cyanocobalamin); folic acid or a pharmaceutically acceptable salt or ester thereof such as the sodium salt and the

10 methylglucamine salt; anti-oxidant vitamins such as vitamin C and E and beta carotene; beta-blockers; angiotensin II antagonists such as losartan; angiotensin converting enzyme inhibitors such as enalapril and captopril; calcium channel blockers such as nifedipine and diltiazam; endothelial antagonists; agents such as LXR ligands that enhance ABC1 gene expression; bisphosphonate compounds such

15 as alendronate sodium; and cyclooxygenase-2 inhibitors such as rofecoxib and celecoxib as well as other agents known to be useful in the treatment of these conditions.

Daily dosage ranges for HMG-CoA reductase inhibitors when used in combination with the compounds of structural formula I correspond to those which

20 are known in the art. Similarly, daily dosage ranges for the HMG-CoA synthase inhibitors; squalene epoxidase inhibitors; squalene synthetase inhibitors (also known as squalene synthase inhibitors), acyl-coenzyme A: cholesterol acyltransferase (ACAT) inhibitors including selective inhibitors of ACAT-1 or ACAT-2 as well as dual inhibitors of ACAT1 and -2; microsomal triglyceride transfer protein (MTP)

25 inhibitors; probucol; niacin; cholesterol absorption inhibitors including ezetimibe; bile acid sequestrants; LDL (low density lipoprotein) receptor inducers; platelet aggregation inhibitors, including glycoprotein IIb/IIIa fibrinogen receptor antagonists and aspirin; human peroxisome proliferator activated receptor gamma (PPAR γ) agonists; PPAR α agonists; PPAR dual α/γ agonists; vitamin B₆; vitamin B₁₂; folic

30 acid; anti-oxidant vitamins; beta-blockers; angiotensin II antagonists; angiotensin converting enzyme inhibitors; calcium channel blockers; endothelial antagonists; agents such as LXR ligands that enhance ABC1 gene expression; bisphosphonate compounds; and cyclooxygenase-2 inhibitors also correspond to those which are known in the art, although due to the combined action with the compounds of

structural formula I, the dosage may be somewhat lower when administered in combination.

For the treatment of male and/or female sexual dysfunction, the SARM compounds of the present invention may be administered together with agents useful
5 in the treatment of male and/or female sexual dysfunction, such as type V cyclic-GMP-specific phosphodiesterase (PDE-V) inhibitors, including sildenafil and IC-351; alpha-adrenergic receptor antagonists, including phentolamine and yohimbine and pharmaceutically acceptable salts thereof; and dopamine receptor agonists, such as apomorphine.

10 In one embodiment of a combination for the treatment of male or female sexual dysfunction, the second ingredient to be combined with a SARM compound can be a type V cyclic-GMP-specific phosphodiesterase (PDE-V) inhibitor, such as sildenafil and IC-351 or a pharmaceutically acceptable salt thereof; an alpha-adrenergic receptor antagonist, such as phentolamine and yohimbine or a
15 pharmaceutically acceptable salt thereof; or a dopamine receptor agonist, such as apomorphine or a pharmaceutically acceptable salt thereof.

In accordance with the method of the present invention, the individual components of the combination can be administered separately at different times during the course of therapy or concurrently in divided or single combination forms.
20 The instant invention is therefore to be understood as embracing all such regimes of simultaneous or alternating treatment and the term "administering" is to be interpreted accordingly. It will be understood that the scope of combinations of the compounds of this invention with other agents useful for treating diseases caused by androgen deficiency or that can be ameliorated by addition of androgen.

25 Compounds according to the present invention may be prepared according to the procedures outlined in Scheme A and as detailed in the Examples.

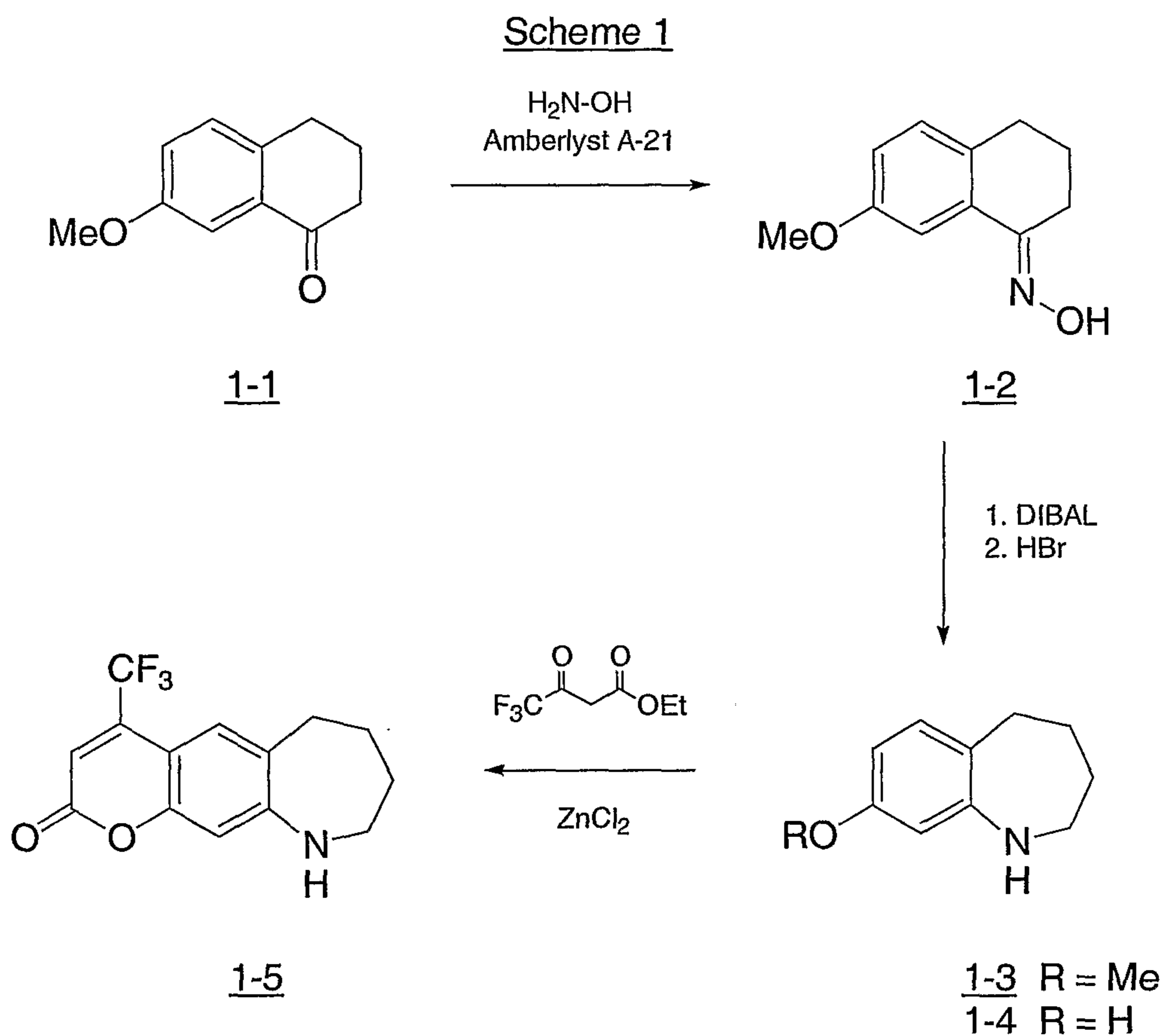
The following examples are provided to further illustrate details for the preparation and use of the compounds of the present invention. The examples are not intended to be limitations on the scope of the instant invention in any way,
30 and they should not be so construed. Furthermore, the compounds described in the following examples are not to be construed as forming the only genus that is considered as the invention, and any combination of the compounds or their moieties may itself form a genus. Those skilled in the art will readily understand that known variations of the conditions and processes of the following preparative

procedures can be used to prepare these compounds. All temperatures are in degrees Celsius unless noted otherwise.

Abbreviations: Ac represents acetyl; AR is the androgen receptor; aq is aqueous; cPr is cyclopropyl; ddWater is distilled, deionized water; DEA is N,N-diethylaniline; DIBAL is diisobutylaluminum hydride; 5 DMEM is Dulbecco's Modified Eagle Media; DMF is dimethyl formamide; EDTA is ethylenediaminetetraacetic acid; EGTA is ethylene bis(oxyethylenenitrolo) tetraacetic acid; Et represents ethyl; FCS is fetal calf serum; HAP is hydroxylapatite; hAR is the human androgen receptor; Me is 10 methyl; MEM is Minimum Essential Media; min. is minute; NMM is N-methyl morpholine; NMR is nuclear magnetic resonance; PBS is phosphate buffered saline (8 g NaCl, 0.2 g KCl, 1.44 g Na₂HPO₄, 0.24 KH₂PO₄ dissolve into H₂O to make 1 L and adjust pH to 7.4 with HCl); Ph is phenyl; pQCT is peripheral quantitative computer tomography; R1881 is 15 methyltrienolone, an androgen receptor agonist; RhAR is the rhesus androgen receptor; rt is room temperature; SARM is a tissue selective androgen receptor modulator; SEAP is secreted alkaline phosphatase; TAC is triamcinolone acetonide; tBu is tertiary butyl; THF is tetrahydrofuran.

EXAMPLE 1

20 4-(Trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one (1-5)



Step 1: 7-Methoxy-3,4-dihydronaphthalen-1(2H)-one oxime (1-2)

To a solution of 7-methoxy-1-tetralone 1-1 (7.0 g, 40 mmol) in EtOH (150 mL) were added hydroxylamine hydrochloride (5.52 g, 80 mmol), and AMBERLYST A-21 ion-exchange resin (8.5 g). The mixture was stirred for 24 h. The resin was removed by filtration and the filtrate concentrated. The residue was diluted with diethyl ether and washed with brine. The organic solution was dried over MgSO_4 , filtered and concentrated to give the desired product. Data for 1-2: $^1\text{H NMR}$ (500 MHz, CD_3OD) δ 7.43 (d, $J = 2.7$ Hz, 1H), 7.08 (d, $J = 8.5$ Hz, 1H), 6.88 (dd, $J = 8.5, 2.7$ Hz, 1H), 3.78 (s, 3H), 2.78 (m, 2H), 2.69 (m, 2H), 1.83 (m, 2H) ppm.

Step 2: 8-Methoxy-2,3,4,5-tetrahydro-1H-1-benzazepine (1-3)

A cooled (0°C) solution of oxime 1-2 (0.78 g, 4.0 mmol) in THF (100 mL) was treated with DIBAL (20.0 mmol, 1M in THF) via dropwise addition. The reaction was warmed to rt. After stirring for 4 d, the reaction was quenched with EtOAc and partitioned between 1N aq NaOH and EtOAc. The organic layer was washed with

brine, dried over K_2CO_3 , filtered and concentrated. The residue was absorbed onto silica gel then purified on an ISCO automated system affixed with a BIOTAGE flash 40(s) cartridge eluting with 5-20% EtOAc in hexane. Data for 1-3 : 1H NMR (500 MHz, $CDCl_3$) δ 7.03 (m, 1H), 6.42 (m, 1H), 6.33 (m, 1H), 3.78 (s, 3H), 3.08 (m, 2H),
5 2.75 (m, 2H), 1.82 (m, 2H), 1.65 (m, 2H) ppm.

Step 3: 8-Hydroxy-2,3,4,5-tetrahydro-1H-1-benzazepine (1-4)

Methyl ether 1-3 (0.22 g, 1.2 mmol) was treated with neat HBr (5 mL) and the solution heated to reflux for 2 h. The reaction was neutralized to pH 9 with aq
10 NH_4OH and the product was extracted with EtOAc. The organic layer was washed with brine, dried over K_2CO_3 , filtered, and concentrated. The residual brown oil was absorbed on silica gel then purified on an ISCO automated system affixed with a BIOTAGE flash 40(S) cartridge eluting with 5-15% EtOAc in hexane over 45 min at 20 mL/min. Data for 1-4 : 1H NMR (500 MHz, DMSO- d_6) δ 8.81 (s, 1H), 6.75 (d, J =
15 8.1 Hz, 1H), 6.22 (d, J = 2.4 Hz, 1H), 6.08 (dd, J = 8.1, 2.4 Hz, 1H), 2.87 (m, 2H), 2.51 (m, 2H), 1.63 (m, 2H), 1.50 (m, 2H) ppm.

Step 4: 4-(Trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one (1-5)

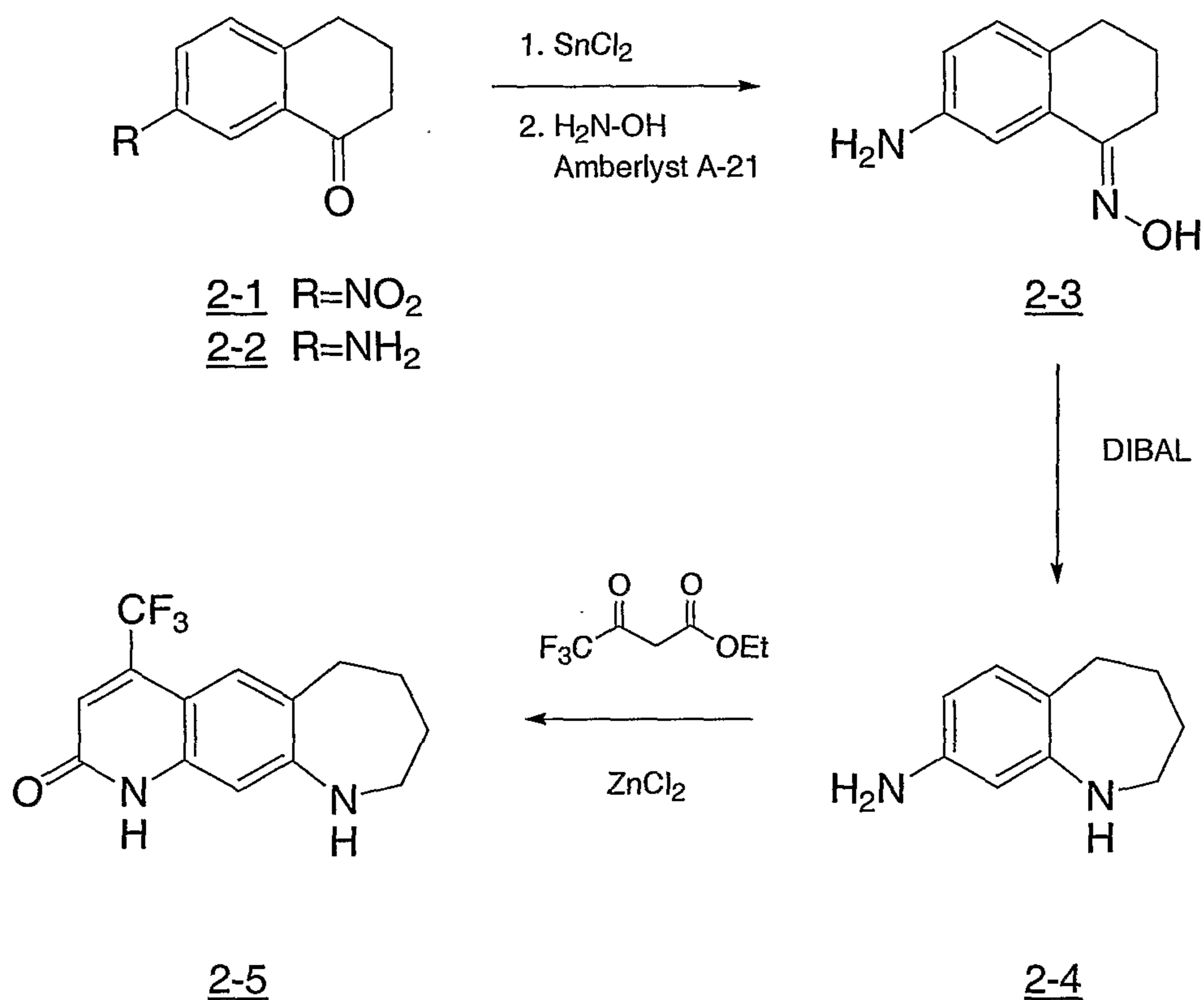
20 Equimolar amounts of 8-methoxy-2,3,4,5-tetrahydro-1H-1-benzazepine 1-4 (0.18 g, 1.12 mmol), ethyl 4,4,4-trifluoroacetate (0.205 g, 1.12 mmol), and zinc chloride (1.12 mL, 1M solution in Et_2O) were combined in a pressure bottle with 10 mL absolute EtOH. The bottle was sealed and allowed to stir at 100 °C for overnight. The reaction darkened from a clear and colorless solution to a dark green solution.
25 After cooling to rt, the reaction solution was absorbed onto silica gel and purified on an ISCO automated system affixed with a BIOTAGE flash 40(S) cartridge eluting 5-25% EtOAc in hexane to provide the desired product 1-5. Data for 1-5 : HRMS Calcd (M+1) 284.0893; found 284.0901.

30

EXAMPLE 2

4-(Trifluoromethyl)-1,6,7,8,9,10-hexahydro-2H-azepino[3,2-g]quinolin-2-one (2-5)

Scheme 2

Step 1: 2,3,4,5-Tetrahydro-1H-1-benzazepin-8-amine (2-4)

To a solution of 7-nitro-1-tetralone **2-1** (5.0 g, 26 mmol) in 100 mL ethanol was added tin (II) chloride (14.9 g, 78.5 mmol). The mixture changed from colorless to a deep red. The reaction was heated to reflux and allowed to stir for 2 h under N₂. The reaction was cooled, and concentrated in vacuo. The remaining residue was dissolved in EtOAc and washed with 1N NaOH which generated a thick white precipitate. The organic layer was washed with water (2 x 200mL), and brine. The organic solution was dried over K₂CO₃, filtered and concentrated to yield 1.2 g of the amino-tetralone **2-2**. A solution of tetralone **2-2** (1.2 g, 7.44 mmol) in EtOH (150 mL) was treated with hydroxylamine hydrochloride (14.9 mmol), and AMBERLYST A-21 ion-exchange resin (5 g). The mixture was allowed to stir until starting material was completely consumed (24 h). The resin was removed by filtration and the filtrate concentrated in vacuo. The residual oil was partitioned between water and diethyl ether. The organic layer was washed with brine, dried over MgSO₄, filtered and

concentrated to give the desired product 2-3. A ice-cooled solution of oxime 2-3 (1 g, 5.7 mmol) in benzene (100 mL) was treated with DIBAL (40 mL, 1M in dichloromethane). The reaction was gradually warmed to rt then stirred for 2 days at ambient temperature. The reaction was quenched with EtOAc and partitioned
 5 between 1N aqueous NaOH and EtOAc. The organic layer was washed with brine, dried over K₂CO₃, filtered and concentrated. The remaining oil was absorbed onto silica gel then purified on an ISCO automated system affixed with a BIOTAGE flash 40(s) cartridge eluted 5-50% EtOAc in hexane over 1.5 h. Data for 2-4 : ¹HNMR (500 MHz, CDCl₃) δ 6.87 (d, *J* = 7.8 Hz, 1H), 6.18 (dd, *J* = 7.8, 2.2 Hz, 1H), 6.08 (d, *J* =
 10 2.2 Hz, 1H), 3.01 (m, 2H), 2.65 (m, 2H), 1.75 (m, 2H), 1.58 (m, 2H) ppm.

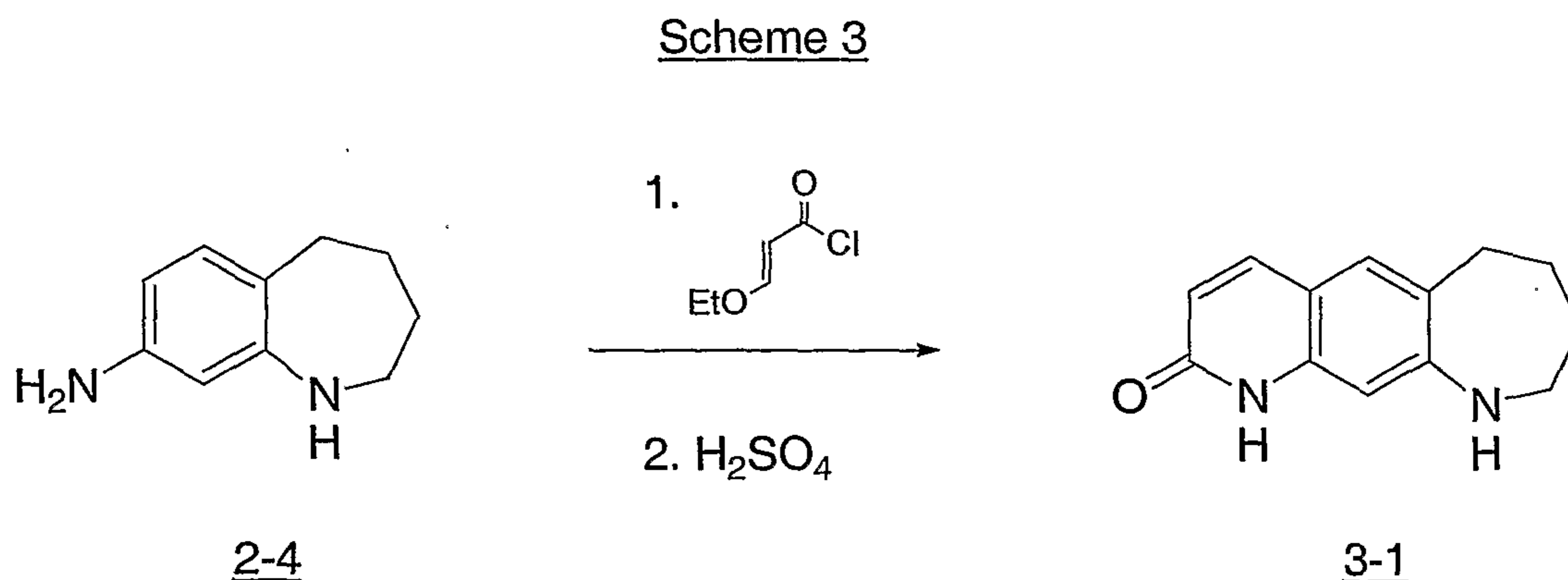
Step 2: 4-(Trifluoromethyl)-1,6,7,8,9,10-hexahydro-2H-azepino[3,2-g]quinolin-2-one (2-5)

Equimolar amounts of benzazepine 2-4 (0.2 g, 1.3 mmol), ethyl 4,4,4-trifluoroacetate (0.19mL), and zinc chloride (1.3 mL of 1M solution in Et₂O) were combined in a pressure bottle with 1 mL absolute EtOH. The bottle was sealed and heated at 100°C for overnight. The reaction changed from light brown to a dark orange. The reaction was cooled and then absorbed onto silica gel and purified on an ISCO automated system affixed with a BIOTAGE flash 40(S) cartridge eluted 5-45%
 20 EtOAc in hexane over 55 min. Data for 2-5 : ¹HNMR (500 MHz, CDCl₃) δ 7.50 (m, 1H), 6.84 (m, 1H), 6.65 (m, 1H), 3.22 (m, 2H), 2.86 (m, 2H), 1.85 (m, 2H), 1.78 (m, 2H) ppm.

EXAMPLE 3

1,6,7,8,9,10-Hexahydro-2H-azepino[3,2-g]quinolin-2-one (3-1)

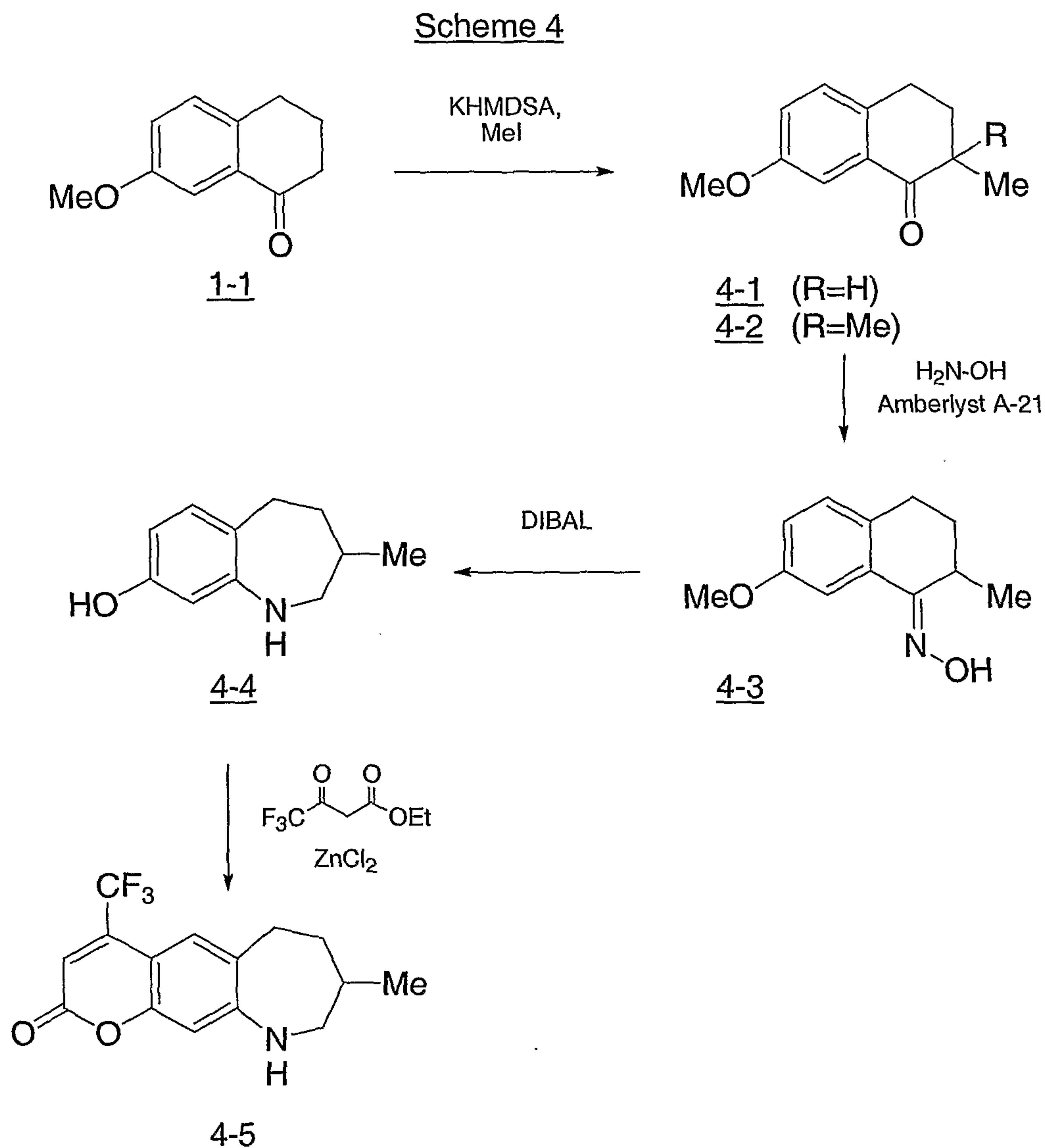
25



A solution of 2,3,4,5-tetrahydro-1H-1-benzazapin-8-amine (0.6 g, 3.4 mmol) and 3-ethoxyacryloyl chloride (0.45 g, 3.4 mmol) in CH₂Cl₂ (50 mL) and 3N NaOH (10 mL) was stirred for 1 h at ambient temperature. The reaction was partitioned between CH₂Cl₂ and water. The organic layer was concentrated and the remaining brown oil
5 was dissolved in 70% aq. H₂SO₄ (20 mL) and heated gently (50°C) for 2 h. The reaction was cooled and neutralized with aq. NH₄OH and partitioned between water and EtOAc. The organic layer was washed with brine, dried over MgSO₄, filtered and concentrated. The residue was dissolved in DMF (1 mL) and purified on a
10 GILSON automated system affixed with a YMC COMBIFLASH 50mm x 20mm reverse phase column eluted 5-95% CH₃CN in water at 30 mL/min over 10.5 min to provide pure desired product. HRMS m/z (M+1) calcd 215.1179; found 215.1186.

EXAMPLE 4

8-(*R*)-Methyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-
15 one and 8-(*S*)-Methyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-
2(6H)-one (4-5)



Step 1: 7-Methoxy-2 (R,S)-methyl-3,4-dihydronaphthalen-1(2H)-one (4-1) and 7-Methoxy-2,2-dimethyl-3,4-dihydronaphthalen-1(2H)-one (4-2)

A solution of lithium bis(trimethylsilyl)amide (17 mL of a 1M solution) in THF (30 mL) was cooled in a dry ice-acetone bath. A solution of 7-methoxy-1-tetralone (3.0 g, 17.0 mmol) in THF (5 mL) was added dropwise, and the solution was allowed to warm to 0°C by utilizing an ice bath. After stirring for 10 min, iodomethane (2.41 g, 17.0 mmol, 1.1 mL) was added and the reaction was warmed to rt and allowed to stir for 16 h. The reaction was quenched with water and extracted with EtOAc. The organic layer was washed with brine, dried over MgSO₄, filtered, and concentrated. Analysis by HPLC-MS showed starting material and two new products consistent with mono- and dialkylation. The residue was absorbed onto silica gel and purified

on an ISCO automated system affixed with a BIOTAGE Flash 40(M) cartridge eluting with 5-10% EtOAc in hexane at 40mL/min over 1 h to yield the monoalkylated adduct 4-1 (MS m/z (M+1) 190) and 2,2-dimethyl adduct 4-2 (MS m/z (M+1) 204).

5 Step 2: 7-Methoxy-2-(R,S)-methyl-3,4-dihydronaphthalen-1(2H)-one oxime (4-3)

A solution of 7-methoxy-2-(R,S)-methyl-3,4-dihydronaphthalen-1(2H)-one 4-1 (0.85 g, 4.5 mmol) and hydroxylamine hydrochloride (0.6 g, 8.9 mmol) in EtOH (15 mL) was treated with AMBERLYST A-21 ion-exchange resin (5.0 g). The mixture was
10 heated to reflux and allowed to stir until starting material was fully consumed (24 h). The reaction was cooled and the resin was removed by filtration. After concentration, the remaining oil was partitioned between water and diethyl ether. The organic layer was washed with brine, dried over MgSO₄, filtered and concentrated to give the desired product 4-3. HPLC-MS (MS m/z (M+1) 205).

15

Step 3: 3-(R,S)-Methyl-2,3,4,5-tetrahydro-1H-1-benzazepin-8-ol (4-4)

To a solution of 7-methoxy-2-methyl-3,4-dihydronaphthalen-1(2H)-one oxime 4-3 (1.1 g, 5.4 mmol) in benzene (20 mL) under N₂ was added DIBAL (27 mL of a 1M in
20 heptane, 27 mmol). The reaction was heated at reflux for 16 h. The reaction was quenched with saturated sodium potassium tartrate (Rochelle's salt) and partitioned between water and EtOAc. The organic layer was washed with brine, dried over MgSO₄, filtered and concentrated. The remaining oil was absorbed onto silica gel then purified on an ISCO automated system affixed with a BIOTAGE flash 40(s) cartridge eluted 5-50% EtOAc in hexane over 1.5 h at 20 mL/min to afford the desired
25 product 4-4. HPLC/MS (MS m/z (M+1) 177).

Step 4: 8-(R)--Methyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one and 8-(S)--Methyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one (4-5)

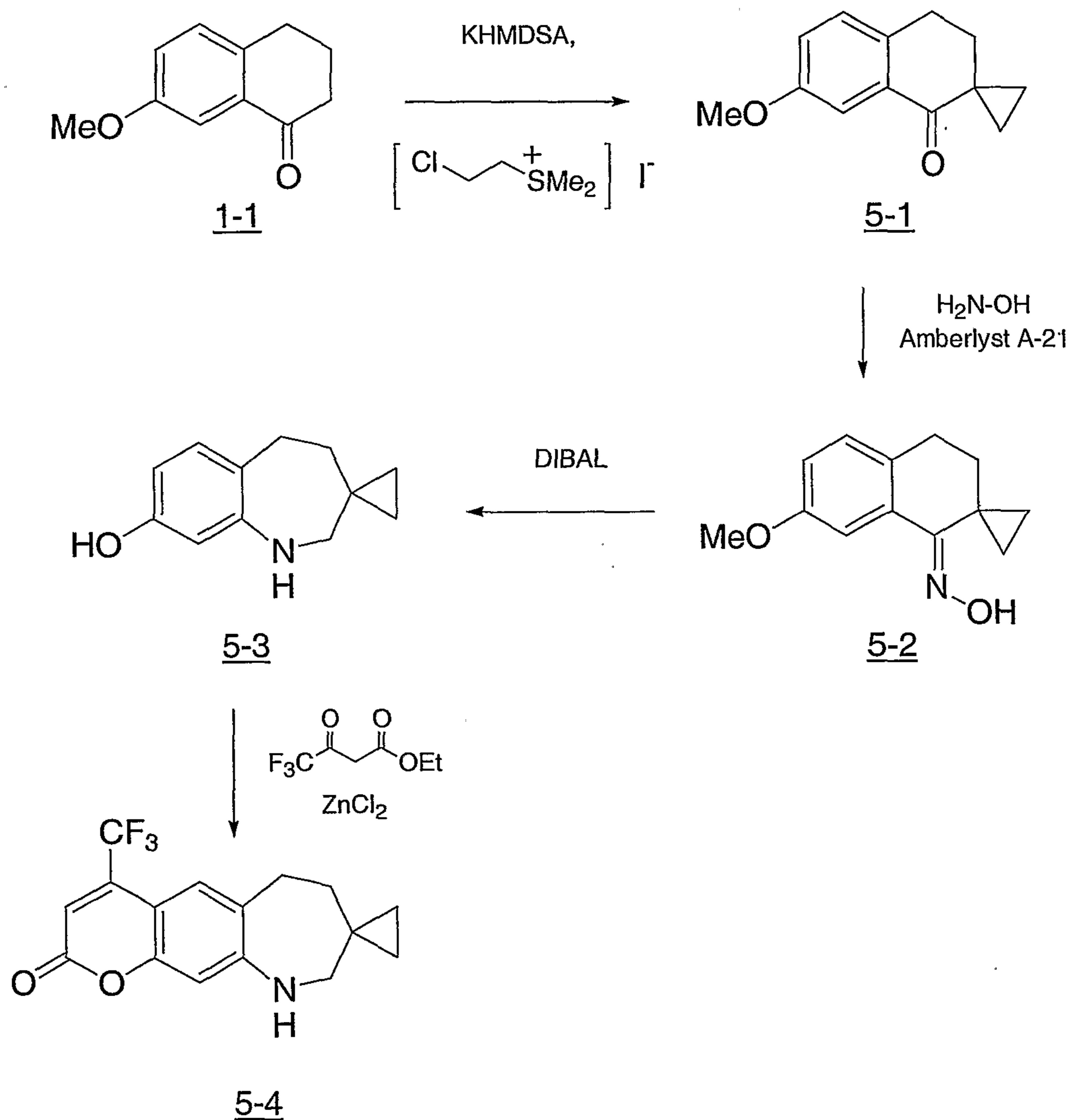
30 Equimolar amounts of 3-methyl-2,3,4,5-tetrahydro-1H-1-benzazepin-8-ol (0.1 g, 1.57 mmol), ethyl 2,2,2-trifluoroacetoacetate (0.08 mL), and zinc chloride (0.6 mL of 1M solution in Et₂O) in absolute EtOH (1 mL) were combined in a pressure bottle. The bottle was sealed and heated at 100° C for 16 h. After cooling to rt, the reaction mixture was absorbed onto silica gel and then purified on an ISCO automated system
35 affixed with a BIOTAGE Flash 40(s) cartridge eluting with 5-20% EtOAc in hexane

at 20mL/min for 45 min to provide the desired product racemate: HRMS m/z (M+1) calcd 298.1049; found 298.1052. The racemic product was resolved to yield pure enantiomers on a CHIRALPAK AD column (250 mm x 4.6 mm eluting with 95% hexane plus 0.1% DEA 5% EtOH at 1mL/min). The first enantiomer eluted 4-5a at 12.2 min ($[\alpha]$ =negative) and the second enantiomer 4-5b eluted at 13.4 min ($[\alpha]$ =positive).

EXAMPLE 5

8-Spirocyclopropyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one (5-4)

Scheme 5



10

Step 1: (2-Chloroethyl)(dimethyl)sulfonium iodide

A 150 mL pressure tube was charged with 2-chloroethyl methyl sulfide (5.0 g, 45 mmol), acetonitrile (30 mL), and iodomethane (2.8 mL). The tube was sealed and allowed to stir at room temperature for 3 days over which time a large amount of precipitate formed. The precipitate was collected by filtration, washed with acetonitrile, and dried under high vacuum. ¹HNMR data (500 MHz, DMSO-d₆) δ 4.17-4.12 (t, 1H); 3.85-3.75 (m, 2H); 3.59-3.54 (t, 1H), 2.98 (s, 3H); 2.93 (s, 3H) ppm.

Step 2: 7-Methoxy-2-spirocyclopropyl-3,4-dihydronaphthalen-1(2H)-one (5-1)

To a solution of 7-methoxy-1-tetralone (2.75 g, 15 mmol) in t-BuOH (25 mL) under N₂ was added sodium iodide (0.5 g) and NaH (0.7 g, 60% dispersion in mineral oil washed 3x with hexane then suspended in t-BuOH). After stirring for 15 min, (2-chloroethyl)dimethylsulfonium iodide (4.0g, 15 mmol) was added and the reaction stirred at rt overnight. The reaction was quenched with water and extracted with EtOAc. The organic layer was washed with brine, dried over MgSO₄, filtered, then concentrated. The remaining clear oil was absorbed onto silica gel and purified on an ISCO automated system affixed with a BIOTAGE flash 40(L) cartridge eluted 5-15% EtOAc in hexane over 1 h at 40 mL/min to give the desired product 5-1. MS m/z (M+1) 202.

Step 3: 7-Methoxy-2-spirocyclopropyl-3,4-dihydronaphthalen-1(2H)-one oxime (5-2)

This compound was produced by the same method as in Scheme 4 with the substitution of 7-methoxy-2-spirocyclopropyl-3,4-dihydronaphthalen-1(2H)-one 5-1 for 7-methoxy-2-(R,S)-methyl-3,4-dihydronaphthalen-1(2H)-one 4-1. MS m/z (M+1) 217.

Step 4: 3-Spirocyclopropyl-2,3,4,5-tetrahydro-1H-1-benzazepin-8-ol (5-3)

This compound was prepared by the same method as in Scheme 4 with the substitution of 7-methoxy-2-spirocyclopropyl-3,4-dihydronaphthalen-1(2H)-one oxime 5-2 for 7-methoxy-2-(R,S)-methyl-3,4-dihydronaphthalen-1(2H)-one oxime 4-3. MS m/z (M+1) 189.

Step 5: 8-Spirocyclopropyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one (5-4)

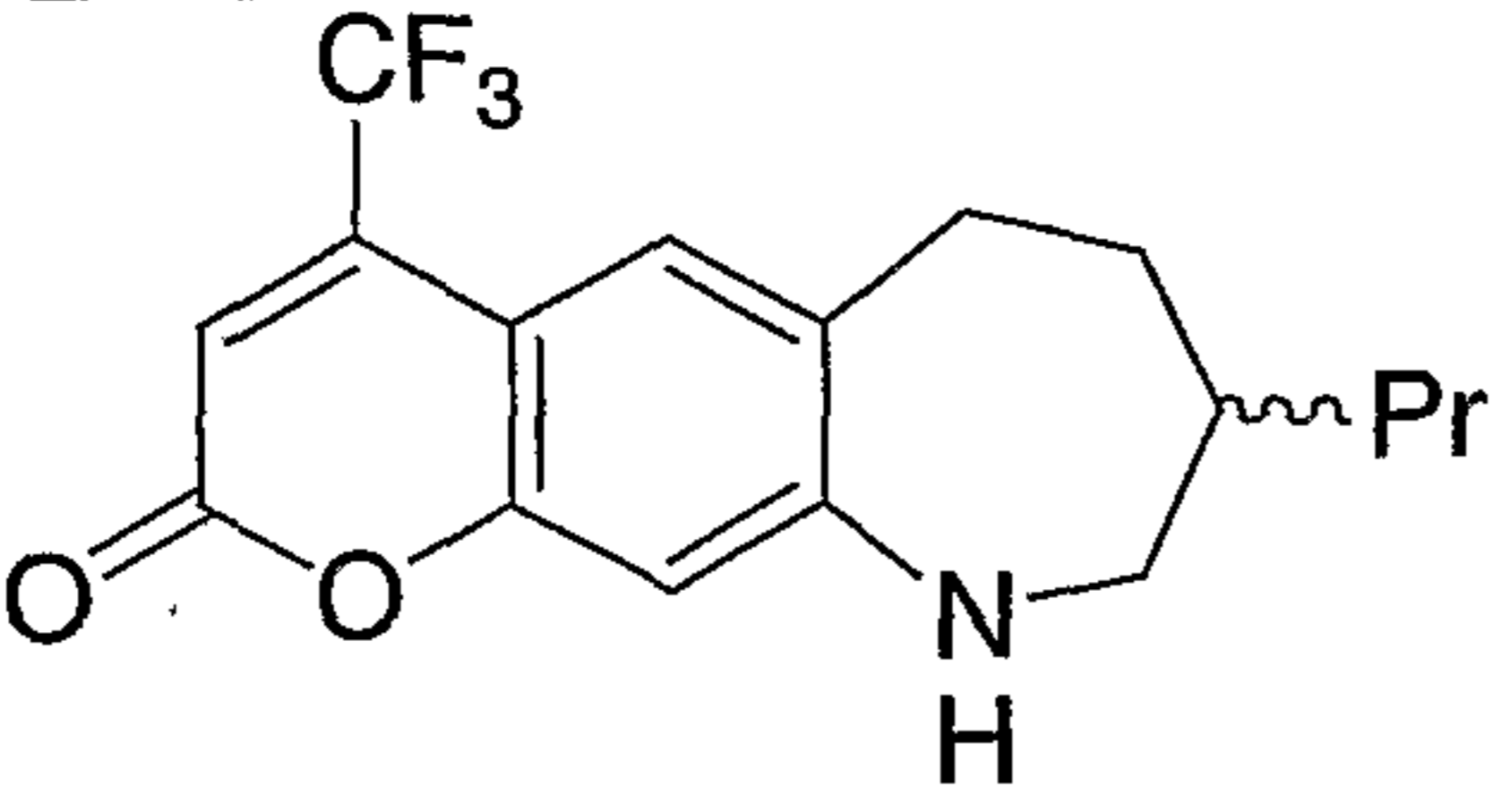
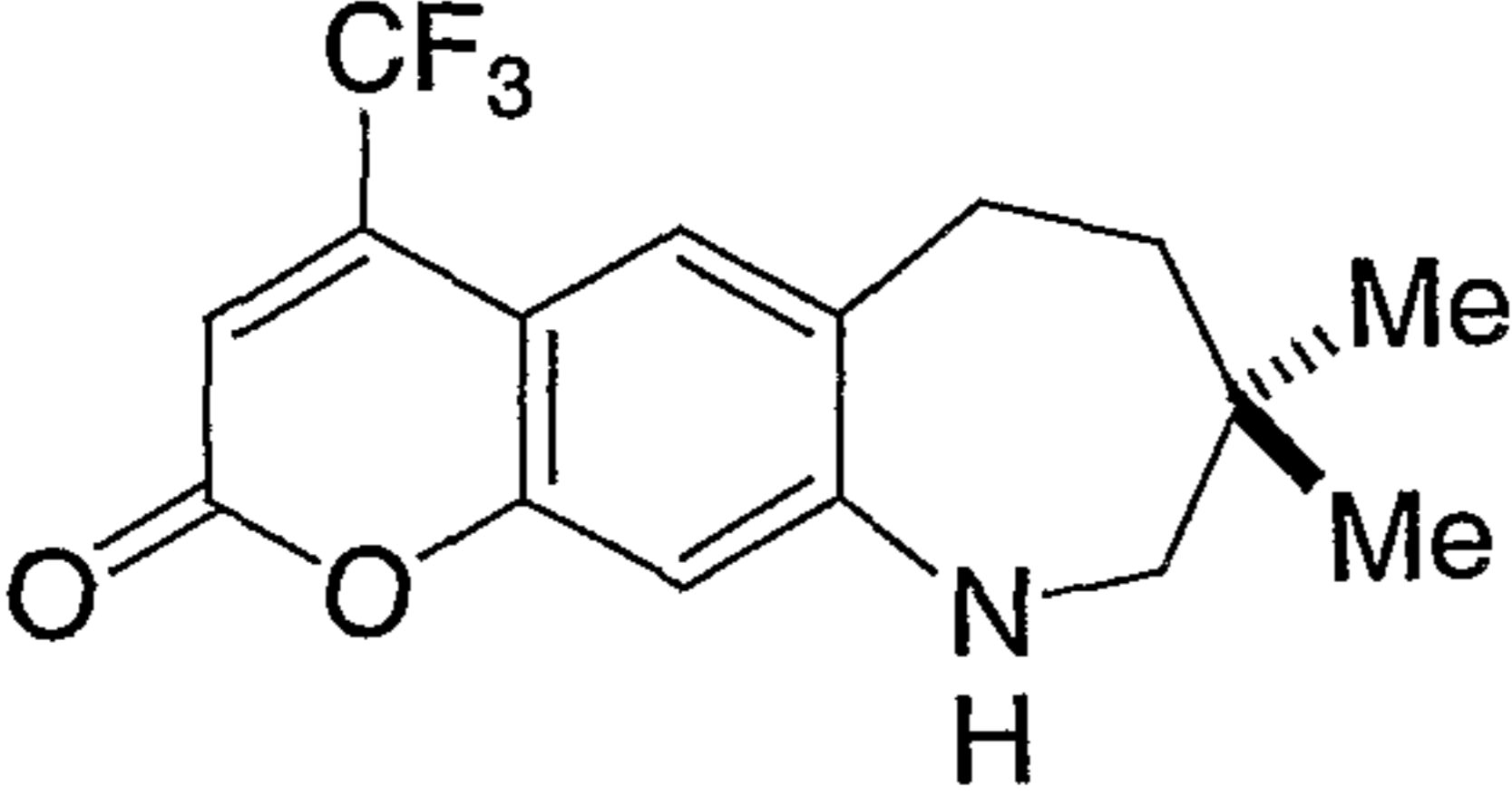
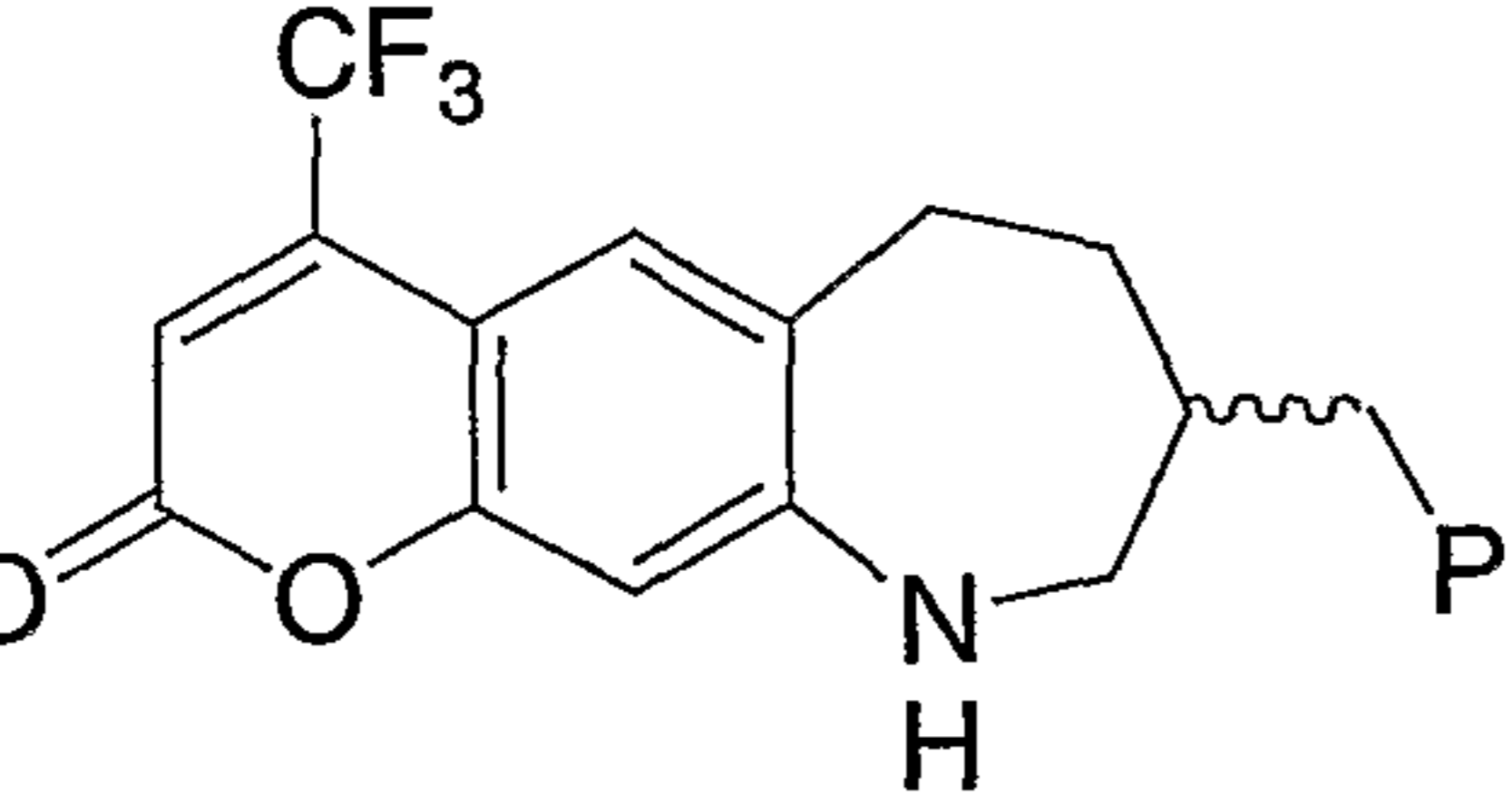
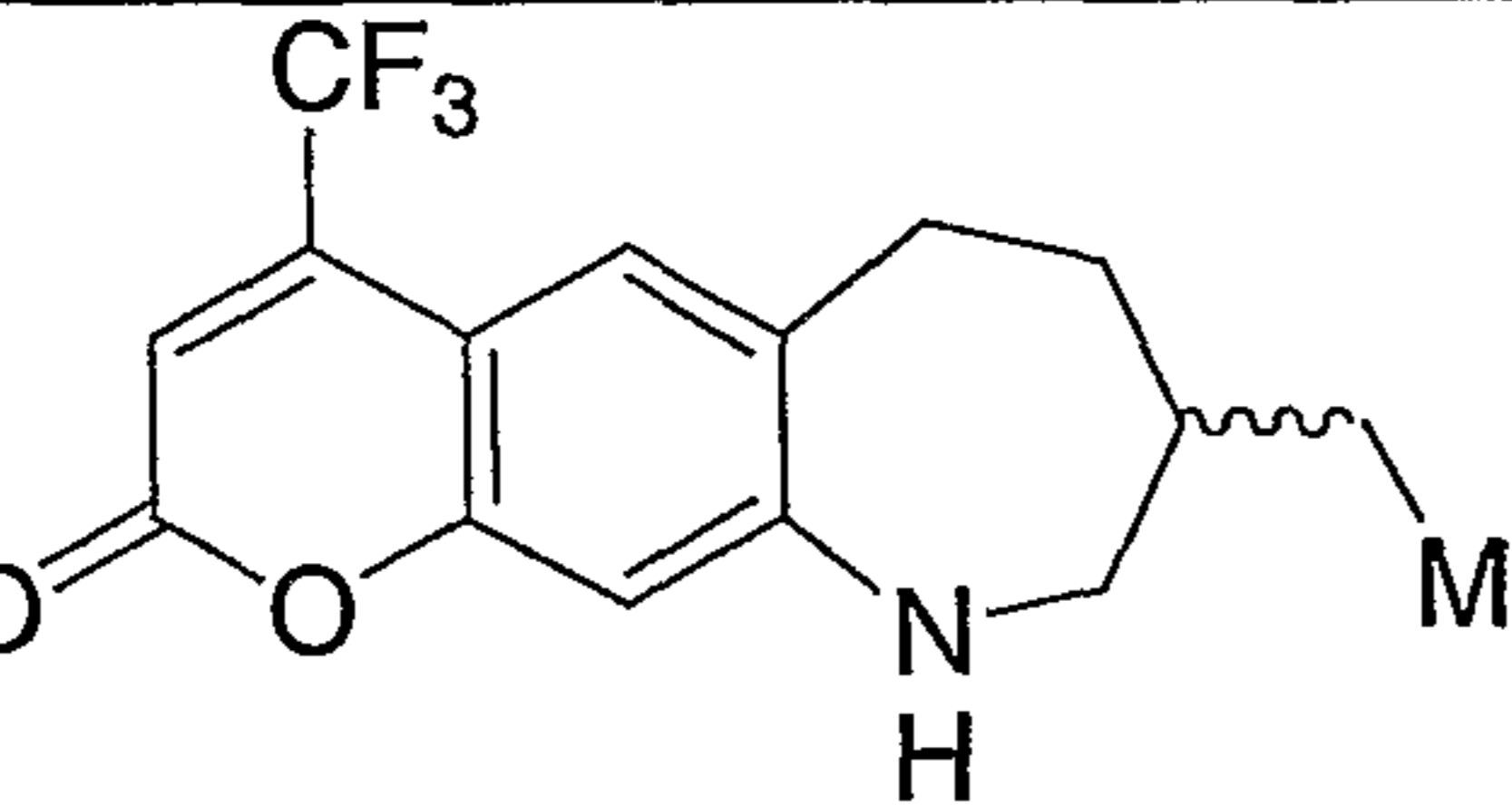
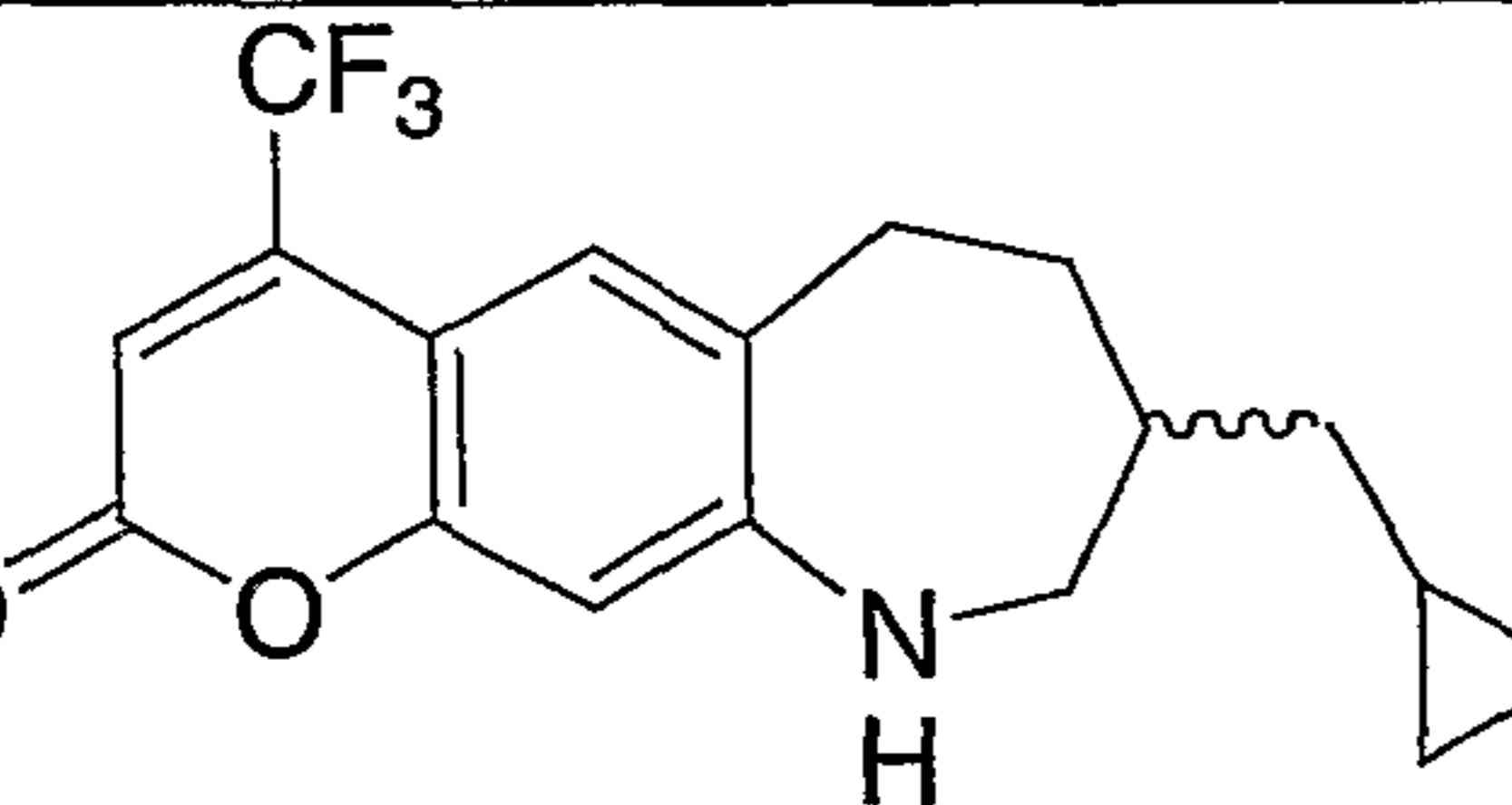
This compound was prepared by the same method as in Scheme 4 with the substitution of 3-spirocyclopropyl-2,3,4,5-tetrahydro-1H-1-benzazepin-8-ol 5-3 for 3-

methyl-2,3,4,5-tetrahydro-1H-1-benzazepin-8-ol 4-4. HRMS m/z (M+1) calcd 310.1050; found 310.1059.

Table 1

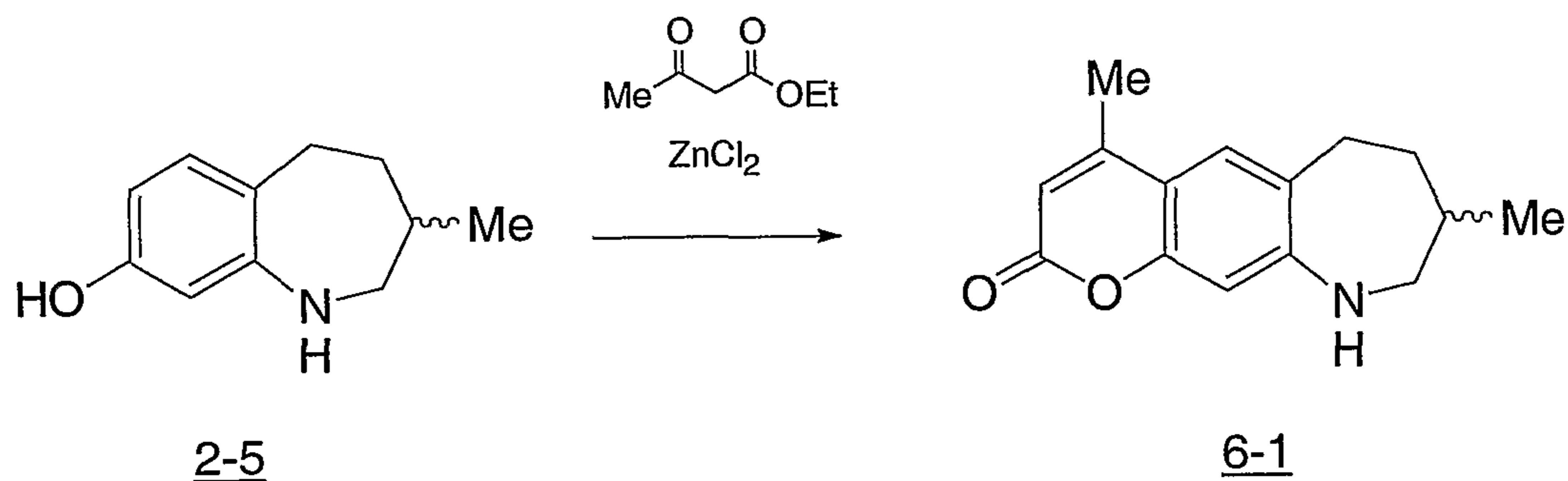
The following compounds were prepared by the methods illustrated in Scheme 4.

5

Compound (Example)	-Name	HRMS m/z (M+1)
 (6)	8-(<i>R,S</i>)-Propyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one	Calcd. 326.1363 Found 326.1369
 (7)	8-Dimethyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one	Calcd. 312.1206 Found 312.1213
 (8)	8-(<i>R,S</i>)-Benzyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one	Calcd. 374.1363 Found 374.1353
 (9)	8-(<i>R,S</i>)-Ethyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one	Calcd. 312.1206 Found 312.1216
 (10)	8-(<i>R,S</i>)-Cyclopropylmethyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one	Calcd. 338.1363 Found 338.1383

EXAMPLE 11

4,8-(*R,S*)-Dimethyl-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one (6-1)

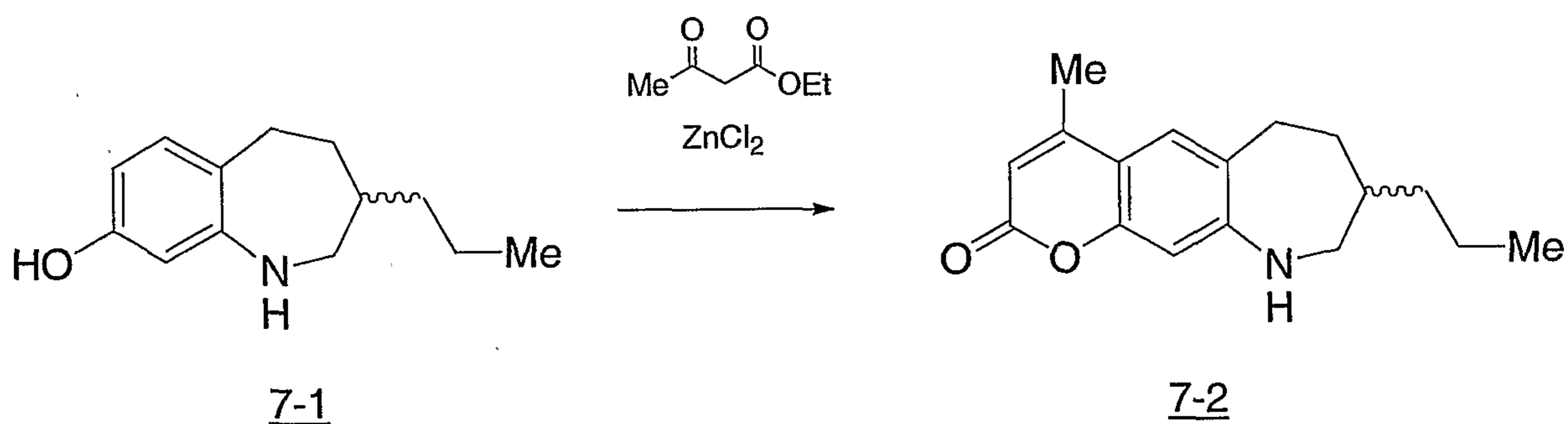
Scheme 6

This compound was prepared by the same method as Example 4 with the substitution of ethyl acetoacetate for ethyl 2,2,2-trifluoromethylacetoacetate. HRMS m/z (M+1) calcd. 244.1332, found 244.1329.

5

EXAMPLE 12

4-Methyl-8-(*R,S*)-propyl-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one (7-2)

Scheme 7

10 This compound was prepared by the same method as in Scheme 4 with the substitution of ethyl acetoacetate for ethyl 2,2,2-trifluoromethylacetoacetate. HRMS m/z (M+1) calcd. 272.1645, found 272.1645.

15

EXAMPLE 13

Oral Composition

As a specific embodiment of an oral composition of a compound of this invention, 50 mg of a compound of the present invention is formatted with
 5 sufficient finely divided lactose to provide a total amount of 580 to 590 mg to fill a size 0 hard gelatin capsule.

EXAMPLE 14

Transdermal Patch Formulation

<u>Ingredient</u>	<u>Amount</u>
Compound of formula I	40 g
Silicone fluid	45 g
Colloidal silicone dioxide	2.5 g

10 The silicone fluid and compound of structural formula I are mixed together and the colloidal silicone dioxide is added to increase viscosity. The material is then dosed into a subsequently heat sealed polymeric laminate comprised of the following: polyester release liner, skin contact adhesive composed of silicone or acrylic polymers, a control membrane which is a polyolefin (e.g. polyethylene, polyvinyl
 15 acetate or polyurethane), and an impermeable backing membrane made of a polyester multilaminate. The resulting laminated sheet is then cut into 10 cm² patches. For 100 Patches.

EXAMPLE 15

Suppository

<u>Ingredient</u>	<u>Amount</u>
Compound of structural formula I	25 g
Polyethylene glycol 1000	1481 g
Polyethylene glycol 4000	494 g

20 The polyethylene glycol 1000 and polyethylene glycol 4000 are mixed and melted. The compound of structural formula I is mixed into the molten mixture, poured into molds and allowed to cool. For 1000 suppositories.

EXAMPLE 16

25 Injectable solution

<u>Ingredient</u>	<u>Amount</u>
compound of structural formula I	5 g

Buffering agents	q.s.
Propylene glycol	400 mg
Water for injection	600 mL

The compound of structural formula I and buffering agents are dissolved in the propylene glycol at about 50°C. The water for injection is then added with stirring and the resulting solution is filtered, filled into ampules, sealed and sterilized by autoclaving. For 1000 Ampules.

5

EXAMPLE 17

Injectable solution

<u>Ingredient</u>	<u>Amount</u>
Compound of structural formula I	5 g
Buffering agents	q.s.
Magnesium sulfate heptahydrate	100 mg
Water for injection	880 mL

The compound of structural formula I, magnesium sulfate heptahydrate and buffering agents are dissolved in the water for injection with stirring, and the resulting solution is filtered, filled into ampules, sealed and sterilized by autoclaving. For 1000 Ampules.

10

Following are assays to characterize the activity of the tissue selective androgen receptor modulators of the present invention.

15

IN VITRO AND IN VIVO ASSAYS FOR IDENTIFICATION OF COMPOUNDS
WITH SARM ACTIVITY

Hydroxylapatite-based Radioligand Displacement Assay of Compound Affinity for Endogenously Expressed AR

20 Materials:

Binding Buffer: TEGM (10 mM Tris-HCl, 1 mM EDTA, 10% glycerol, 1 mM beta-mecaptoethanol, 10 mM Sodium Molybdate, pH 7.2)

50% HAP Slurry: Calbiochem Hydroxylapatite, Fast Flow, in 10 mM Tris, pH 8.0 and 1 mM EDTA.

25 *Wash Buffer:* 40 mM Tris, pH7.5, 100 mM KCl, 1 mM EDTA and 1 mM EGTA.
95% EtOH

Methyltrienolone, [17 α -methyl-³H], (R1881*); NEN NET590

Methyltrienolone (R1881), NEN NLP005 (dissolve in 95% EtOH)

Dihydrotestosterone (DHT) [1,2,4,5,6,7-³H(N)] NEN NET453

Hydroxylapatite Fast Flow; Calbiochem Cat#391947

5 Molybdate = Molybdic Acid (Sigma, M1651)

MDA-MB-453 cell culture media:

RPMI 1640 (Gibco 11835-055) w/23.8 mM NaHCO₃, 2 mM L-glutamine

In 500 mL of complete media	Final conc.
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10 mL (1M HEPES)	20 mM
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10 5 mL (200 mM L-glu)	4 mM
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0.5 mL (10 mg/mL human insulin)	10 μ g/mL
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in 0.01 N HCl Calbiochem#407694-S)

50 mL FBS (Sigma F2442)	10%
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1 mL (10 mg/mL Gentamicin	20 μ g /mL
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15 Gibco#15710-072)	
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Cell Passaging:

Cells (Hall R. E., et al., European Journal of Cancer, Vol. 30A (4), 484-490 (1994)).are rinsed twice in PBS, phenol red free Trypsin-EDTA is diluted in the same PBS 1:10 . The cell layers are rinsed with 1X Trypsin, extra Trypsin is poured out, and the cell layers are incubated at 37°C for ~ 2 min. The flask is tapped and checked to for signs of cell detachment. Once the cells are starting to sliding off the flask, the complete media is added to kill the trypsin. The cells are counted at this point, then diluted to the appropriate concentration and split into flasks or dishes for further culturing (Usually 1:3 to 1:6 dilution).

25 Preparation of MDA-MB-453 Cell Lysate

When the MDA cells are 70 to 85% confluent, they are detached as described above, and collected by centrifuging at 1000 g for 10 min at 4 °C. The cell pellet is washed 2x with TEGM (10 mM Tris-HCl, 1 mM EDTA, 10% glycerol, 1 mM beta-mercaptoethanol, 10 mM Sodium Molybdate, pH 7.2). After the final wash, the cells are resuspended in TEGM at a concentration of 10⁷ cells/mL. The cell suspension is snap frozen in liquid N₂ or ethanol dry ice bath and transferred to -80 °C freezer on dry ice. Before setting up the binding assay, the frozen samples are left on ice-water to just thaw (~1 hr). Then the samples are centrifuged at 12,500 g to 20,000 g for 30 min at 4°C. The supernatant is used to set-up assay right away. If

using 50 μL of supernatant, the test compound can be prepared in 50 μL of the TEGM buffer.

Procedure for Multiple Compound Screening:

1x TEGM buffer is prepared, and the isotope-containing assay mixture
5 is prepared in the following order: EtOH (2% final Conc. in reaction), ^3H -R1881 or
 ^3H -DHT (0.5 nM final Conc. in reaction) and 1x TEGM. [eg. For 100 samples, 200
 μL (100 x 2) of EtOH + 4.25 μL of 1:10 ^3H -R1881 stock + 2300 μL (100 x 23) 1x
TEGM]. The compound is serially diluted, e.g., if starting final conc. is 1 μM , and
the compound is in 25 μL of solution, for duplicate samples, 75 μL of 4x1 μM
10 solution is made and 3 μL of 100 μM is added to 72 μL of buffer, and 1:5 serial
dilution.

25 μL of ^3H -R1881 trace and 25 μL compound solution are first mixed
together, followed by addition of 50 μL receptor solution. The reaction is gently
mixed, spun briefly at about 200 rpm and incubated at 4 $^{\circ}\text{C}$ overnight. 100 μL of 50%
15 HAP slurry is prepared and 100 μL of 50% HAP slurry is added to the incubated
reaction which is then vortexed and incubated on ice for 5 to 10 minutes. The
reaction mixture is vortexed twice more to resuspend HAP while incubating reaction.
The samples in 96-well format are then washed in wash buffer using The FilterMateTM
Universal Harvester plate washer (Packard). The washing process transfers HAP
20 pellet containing ligand-bound expressed receptor to Unifilter-96 GF/B filter plate
(Packard). The HAP pellet on the filter plate is incubated with 50 μL of
MICROSCINT (Packard) scintillant for $\frac{1}{2}$ hour before being counted on the TopCount
micro scintillation counter (Packard). IC₅₀s are calculated using R1881 as a
reference. Tissue selective androgen receptor modulators of the present invention
25 typically have IC₅₀ values of 1 micromolar or less.

MMP1 Promoter Suppression, Transient Transfection Assay (TRAMPS)

HepG2 cells are cultured in phenol red free MEM containing 10 % charcoal-treated
FCS at 37C with 5% CO₂. For transfection, cells are plated at 10,000 cells/well in
30 96 well white, clear bottom plates. Twenty four hours later, cells are co-transfected
with a MMP1 promoter-luciferase reporter construct and a rhesus monkey expression
construct (50 : 1 ratio) using FuGENE6 transfection reagent, following the protocol
recommended by manufacture. The MMP1 promoter-luciferase reporter construct is
generated by insertion of a human MMP1 promoter fragment (-179/+63) into pGL2

luciferase reporter construct (Promega) and a rhesus monkey AR expression construct is generated in a CMV-Tag2B expression vector (Stratagene). Cells are further cultured for 24 hours and then treated with ligands in the presence of 100 nM phorbol-12-myristate-13-acetate (PMA), used to increase the basal activity of MMP1 promoter. The ligands are added at this point, at a range of 1000nM to 0.03nM, 10 dilutions, at a concentration on 10X, 1/10th volume. (example:10 microliters of ligand at 10X added to 100 microliters of media already in the well.) Cells are further cultured for additional 48 hours. Cells are then washed twice with PBS and lysed by adding 70 μ L of Lysis Buffer (1x, Promega) to the wells. The luciferase activity is measured in a 96 well format using a 1450 Microbeta Jet (Perkin Elmer) luminometer. AR agonism of tissue selective androgen receptor modulators is presented as suppression of luciferase signal from the PMA-stimulated control levels EC₅₀ and Emax values are reported. Tissue selective androgen receptor modulators of the present invention typically agonize repression typically with submicromolar EC₅₀ values and Emax values greater than about 50%.

References:

1. Newberry EP, Willis D, Latifi T, Boudreaux JM, Towler DA. Fibroblast growth factor receptor signaling activates the human interstitial collagenase promoter via the bipartite Ets-AP1 element. *Mol Endocrinol.* 1997 Jul;11(8):1129-44.
2. Schneikert J, Peterziel H, Defossez PA, Klocker H, Launoit Y, Cato AC. Androgen receptor-Ets protein interaction is a novel mechanism for steroid hormone-mediated down-modulation of matrix metalloproteinase expression. *J Biol Chem.* 1996 Sep 27;271(39):23907-13.

25 A Mammalian Two-Hybrid Assay for the Ligand-induced Interaction of N-Terminus and C-Terminus Domains of the Androgen Receptor (Agonist Mode)

This assay assesses the ability of AR agonists to induce the interaction between the N-terminal domain (NTD) and C-terminal domain (CTD) of rhAR that reflects the in vivo virilizing potential mediated by activated androgen receptors. (ref. 1). The interaction of NTD and CTD of rhAR is quantified as ligand induced association between a Gal4DBD-rhARCTD fusion protein and a VP16-rhARNTD fusion protein as a mammalian two-hybrid assay in CV-1 monkey kidney cells.

The day before transfection, CV-1 cells are trypsinized and counted, and then plated at 20,000 cells/well in 96 well plates or larger plates (scaled up

accordingly) in DMEM + 10% FCS. The next morning, CV-1 cells are cotransfected with pCBB1 (Gal4DBD-rhARLBD fusion construct expressed under the SV40 early promoter), pCBB2 (VP16 -rhAR NTD fusion construct expressed under the SV40 early promoter) and pFR (Gal4 responsive luciferase reporter, Promega) using
5 LIPOFECTAMINE PLUS reagent (GIBCO-BRL) following the procedure recommended by the vendor. Briefly, DNA admixture of 0.05µg pCBB1, 0.05µg pCBB2 and 0.1ug of pFR is mixed in 3.4 uL OPTI-MEM (GIBCO-BRL) is mixed with "PLUS Reagent" (1.6 µL, GIBCO-BRL) and incubated at room temperature (RT) for 15 min to form the pre-complexed DNA.

10 For each well, 0.4 µL LIPOFECTAMINE Reagent (GIBCO-BRL) is diluted into 4.6 µL OPTI-MEM in a second tube and mixed to form the diluted LIPOFECTAMINE Reagent. The pre-complexed DNA (above) and the diluted LIPOFECTAMINE Reagent (above) are combined, mixed and incubated for 15 min at RT. The medium on the cells is replaced with 40 µL /well OPTI-MEM, and 10 µL
15 DNA-lipid complexes are added to each well. The complexes are mixed into the medium gently and incubate at 37°C at 5% CO₂ for 5h. Following incubation, 200 µL /well D-MEM and 13% charcoal-stripped FCS is added, followed by incubation at 37°C at 5% CO₂

After 24 hours, the test compounds are added at the desired concentration(s) (1 nM –
20 10 µM). Forty eight hours later, luciferase activity is measured using LUC-Screen system (TROPIX) following the manufacture's protocol. The assay is conducted directly in the wells by sequential addition of 50 µL each of assay solution 1 followed by assay solution 2. After incubation for 40 minutes at room temperature, luminescence is directly measured with 2-5 second integration.

25 Activity of test compounds is calculated as the Emax relative to the activity obtained by 3nM R1881. Typical tissue selective androgen receptor modulators of the present invention display weak or no agonist activity in this assay with less than 50% agonist activity at 10 micromolar.

Reference:

30 1. He B, Kempainen JA, Voegel JJ, Gronemeyer H, Wilson EM Activation function In the human androgen receptor ligand binding domain mediates inter-domain communication with the NH(2)-terminal domain. J Biol Chem. V274: pp 37219-25, 1999.

A Mammalian Two-Hybrid Assay For Inhibition of Interaction between N-Terminus and C-Terminus Domains of Androgen Receptor (Antagonist Mode)

The assay assesses the ability of test compounds to antagonize the stimulatory effects of R1881 on the interaction between NTD and CTD of rhAR in a mammalian two-hybrid assay in CV-1 cells as described above.

Forty eight hours after transfection, CV-1 cells are treated with test compounds, typically at 10 μ M, 3.3 μ M, 1 μ M, 0.33 μ M, 100 nM, 33 nM, 10 nM, 3.3 nM and 1 nM final concentrations. After incubation at a 37°C at 5% CO₂ for 10 - 30 minutes, an AR agonist methyltrienolone (R1881) is added to a final concentration of 0.3 nM and incubated at 37°C. Forty-eight hours later, luciferase activity is measured using LUC-Screen system (TROPIX) following the protocol recommended by the manufacture. The ability of test compounds to antagonize the action of R1881 is calculated as the relative luminescence compared to the value with 0.3 nM R1881 alone.

SARM compounds of the present invention typically display antagonist activity in the present assay and have IC₅₀ values less than 1 micromolar.

In Vivo Prostate Assay

Male Sprague-Dawley rats aged 9-10 weeks, the earliest age of sexual maturity, are used in prevention mode. The goal is to measure the degree to which androgen-like compounds delay the rapid deterioration (~85%) of the ventral prostate gland and seminal vesicles that occurs during a seven day period after removal of the testes (orchidectomy [ORX]).

Rats are orchidectomized (ORX). Each rat is weighed, then anesthetized by isoflurane gas that is maintained to effect. A 1.5 cm anteroposterior incision is made in the scrotum. The right testicle is exteriorized. The spermatic artery and vas deferens is ligated with 4.0 silk 0.5cm proximal to the testicle. The testicle is freed by one cut of a small surgical scissors distal to the ligation site. The tissue stump is returned to the scrotum. The same is repeated for the left testicle. When both stumps are returned to the scrotum, the scrotum and overlying skin are sutured closed with 4.0 silk. For Sham-ORX, all procedures excepting ligation and scissors cutting are completed. The rats fully recover consciousness and full mobility within 10-15 minutes.

A dose of test compound is administered subcutaneously or orally to the rat immediately after the surgical incision is sutured. Treatment continues for an additional six consecutive days.

Necropsy and Endpoints

5 The rat is first weighed, then anesthetized in a CO₂ chamber until near death. Approximately 5ml whole blood is obtained by cardiac puncture. The rat is then examined for certain signs of death and completeness of ORX. Next, the ventral portion of the prostate gland is located and blunt dissected free in a highly stylized fashion. The ventral prostate is blotted dry for 3-5 seconds and then weighed (VPW).
10 Finally, the seminal vesicle is located and dissected free. The ventral seminal vesicle is blotted dry for 3-5 seconds and then weighed (SVWT).

 Primary data for this assay are the weights of the ventral prostate and seminal vesicle. Secondary data include serum LH (luteinizing hormone and FSH (follicle stimulating hormone), and possible serum markers of bone formation and
15 virilization. Data are analyzed by ANOVA plus Fisher PLSD post-hoc test to identify intergroup differences. The extent to which test compounds inhibit ORX-induced loss of VPW and SVWT is assessed.

In Vivo Bone Formation Assay

20 Female Sprague-Dawley rats aged 7-10 months are used in treatment mode to simulate adult human females. The rats have been ovariectomized (OVX) 75-180 days previously, to cause bone loss and simulate estrogen deficient, osteopenic adult human females. Pre-treatment with a low dose of a powerful anti-resorptive, alendronate (0.0028mpk SC, 2X/wk) is begun on Day 0. On Day 15, treatment with
25 test compound is started. Test compound treatment occurs on Days 15-31 with necropsy on Day 32. The goal is to measure the extent to which androgen-like compounds increase the amount of bone formation, shown by increased fluorochrome labeling, at the periosteal surface.

 In a typical assay, nine groups of seven rats each are studied.

30 On Days 19 and 29 (fifth and fifteenth days of treatment), a single subcutaneous injection of calcein (8mg/kg) is given to each rat.

Necropsy and Endpoints

 The rat is first weighed, then anesthetized in a CO₂ chamber until near death. Approximately 5mL whole blood is obtained by cardiac puncture. The rat is
35 then examined for certain signs of death and completeness of OVX. First, the uterus

is located, blunt dissected free in a highly stylized fashion, blotted dry for 3-5 seconds and then weighed (UW). The uterus is placed in 10% neutral-buffered formalin. Next, the right leg is disarticulated at the hip. The femur and tibia are separated at the knee, substantially defleshed, and then placed in 70% ethanol.

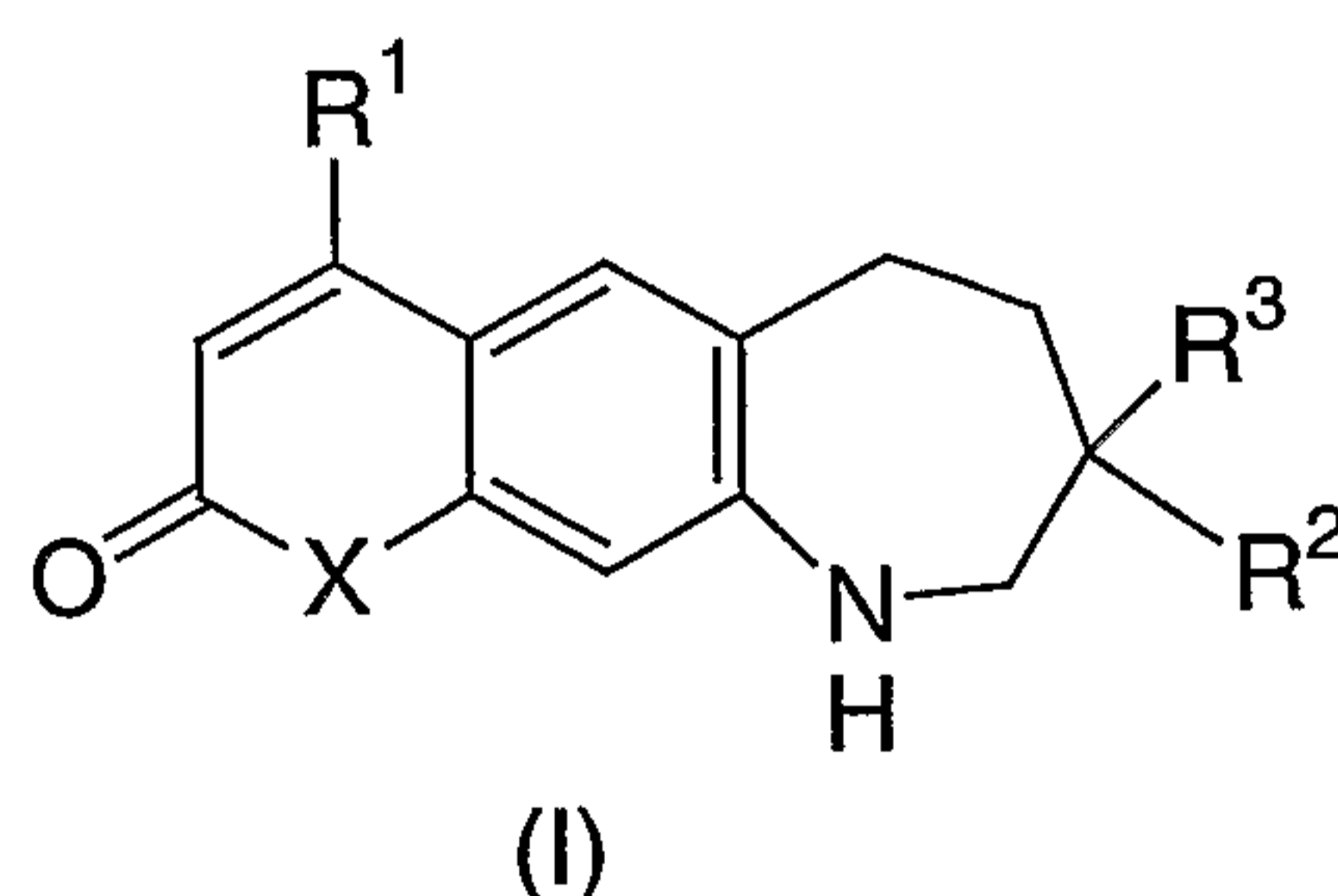
5 A 1cm segment of the central right femur, with the femoral proximal-distal midpoint at center, is placed in a scintillation vial and dehydrated and defatted in graded alcohols and acetone, then introduced to solutions with increasing concentrations of methyl methacrylate. It is embedded in a mixture of 90% methyl methacrylate :10% dibutyl phthalate, that is allowed to polymerize over a 48-72hr
10 period. The bottle is cracked and the plastic block is trimmed into a shape that conveniently fits the vice-like specimen holder of a Leica 1600 Saw Microtome, with the long axis of the bone prepared for cross-sectioning. Three cross-sections of 85 μ m thickness are prepared and mounted on glass slides. One section from each rat that approximates the midpoint of the bone is selected and blind-coded. The periosteal
15 surface of each section is assessed for total periosteal surface, single fluorochrome label, double fluorochrome label, and interlabel distance.

Primary data for this assay are the percentage of periosteal surface bearing double label and the mineral apposition rate (interlabel distance(μ m)/10d), semi-independent markers of bone formation. Secondary data include uterus weight
20 and histologic features. Tertiary endpoints may include serum markers of bone formation and virilization. Data are analyzed by ANOVA plus Fisher PLSD post-hoc test to identify intergroup differences. The extent to which test compounds increase bone formation endpoint will be assessed.

While the foregoing specification teaches the principles of the present
25 invention, with examples provided for the purpose of illustration, it will be understood that the practice of the invention encompasses all of the usual variations, adoptions, or modifications, as come within the scope of the following claims and their equivalents.

WHAT IS CLAIMED IS:

1. A compound of structural formula I:



5

wherein:

X is selected from -O-, and -N(R⁴)-;

R¹ is selected from hydrogen, C₁₋₃ alkyl, cyclopropyl and trifluoromethyl;

R² is selected from:

- 10 (1) hydrogen,
 (2) C₁₋₈ alkyl,
 (3) C₃₋₈ cycloalkyl,
 (4) C₃₋₈ cycloheteroalkyl,
 (5) C₃₋₈ cycloalkyl-C₁₋₆ alkyl,
 15 (6) C₃₋₈ cycloheteroalkyl-C₁₋₆ alkyl,
 (7) aryl,
 (8) aryl-C₁₋₆ alkyl,
 (9) amino,
 (10) amino-C₁₋₆ alkyl,
 20 (11) C₁₋₃ acylamino,
 (12) C₁₋₃ acylamino-C₁₋₆ alkyl,
 (13) (C₁₋₆ alkyl)_n amino,
 (14) C₃₋₆ cycloalkyl-C₀₋₂ alkylamino,
 (15) (C₁₋₆ alkyl)_n amino-C₁₋₆ alkyl,
 25 (16) C₁₋₆ alkoxy,
 (17) C₁₋₄ alkoxy-C₁₋₆ alkyl,
 (18) hydroxycarbonyl,
 (19) hydroxycarbonyl-C₁₋₆ alkyl,

- (20) C₁₋₃ alkoxy carbonyl,
 (21) C₁₋₃ alkoxy carbonyl-C₁₋₆ alkyl,
 (22) hydroxy,
 (23) hydroxy-C₁₋₆ alkyl,
 5 (24) nitro,
 (25) cyano,
 (26) trifluoromethyl,
 (27) trifluoromethoxy,
 (28) trifluoroethoxy,
 10 (29) C₁₋₈ alkyl-S(O)_p-,
 (30) (C₁₋₈ alkyl)_paminocarbonyl,
 (31) C₁₋₈ alkyloxy carbonylamino,
 (32) (C₁₋₈ alkyl)_n aminocarbonyloxy,
 (33) (aryl C₁₋₃ alkyl)_n amino,
 15 (34) (aryl)_n amino,
 (35) aryl-C₁₋₃ alkylsulfonylamino, and
 (36) C₁₋₈ alkylsulfonylamino;

R³ is selected from hydrogen, C₁₋₈ alkyl, and trifluoromethyl;

or R² and R³ together with the carbon atom to which they are attached form a
 20 carbonyl group, or join to form a 3- to 6-membered spiro-carbocyclic ring; and
 wherein the alkyl groups in R² and R³ are either unsubstituted or substituted with one
 to three R⁵ substituents and wherein any of the aryl, cycloalkyl, or cycloheteroalkyl
 groups in R² are either unsubstituted or substituted with one to three R⁶ substituents;
 R⁴ is selected from:

- 25 (1) hydrogen,
 (2) aryl,
 (3) aminocarbonyl,
 (4) C₃₋₈ cycloalkyl,
 (5) amino C₁₋₆ alkyl,
 30 (6) (aryl)_paminocarbonyl,
 (7) (aryl C₁₋₅ alkyl)_paminocarbonyl,
 (8) hydroxycarbonyl C₁₋₆ alkyl,
 (9) C₁₋₈ alkyl,
 (10) perfluoro C₁₋₈ alkyl,

- (11) aryl C₁₋₆ alkyl,
 (12) (C₁₋₆ alkyl)_pamino C₂₋₆ alkyl,
 (13) (aryl C₁₋₆ alkyl)_pamino C₂₋₆ alkyl,
 (14) C₁₋₈ alkylsulfonyl,
 5 (15) C₁₋₈ alkoxy carbonyl,
 (16) aryloxy carbonyl,
 (17) aryl C₁₋₈ alkoxy carbonyl,
 (18) C₁₋₈ alkyl carbonyl,
 (19) aryl carbonyl,
 10 (20) aryl C₁₋₆ alkyl carbonyl,
 (21) (C₁₋₈ alkyl)_paminocarbonyl,
 (22) aminosulfonyl,
 (23) C₁₋₈ alkyl aminosulfonyl,
 (24) (aryl)_paminosulfonyl,
 15 (25) (aryl C₁₋₈ alkyl)_paminosulfonyl,
 (26) aryl sulfonyl,
 (27) aryl C₁₋₆ alkyl sulfonyl,
 (28) C₁₋₆ alkyl thiocarbonyl,
 (29) aryl thiocarbonyl, and
 20 (30) aryl C₁₋₆ alkyl thiocarbonyl,

wherein any of the alkyl groups of R⁴ are either unsubstituted or substituted with one to three R⁵ substituents and wherein any of the aryl, cycloalkyl, or cycloheteroalkyl groups in R⁴ are either unsubstituted or substituted with one to three R⁶ substituents; each R⁵ is independently selected from:

- 25 (1) halogen,
 (2) C₁₋₈ alkyl,
 (3) C₃₋₈ cycloalkyl,
 (4) C₃₋₈ cycloheteroalkyl,
 (5) C₃₋₈ cycloalkyl-C₁₋₆ alkyl,
 30 (6) C₃₋₈ cycloheteroalkyl-C₁₋₆ alkyl,
 (7) aryl,
 (8) aryl-C₁₋₆ alkyl,
 (9) amino,
 (10) amino-C₁₋₆ alkyl,

- (11) C₁₋₃ acylamino,
 (12) C₁₋₃ acylamino-C₁₋₆ alkyl,
 (13) (C₁₋₆ alkyl)_n amino,
 (14) C₃₋₆ cycloalkyl-C₀₋₂ alkylamino,
 5 (15) (C₁₋₆ alkyl)_n amino-C₁₋₆ alkyl,
 (16) C₁₋₆ alkoxy,
 (17) C₁₋₄ alkoxy-C₁₋₆ alkyl,
 (18) hydroxycarbonyl,
 (19) hydroxycarbonyl-C₁₋₆ alkyl,
 10 (20) C₁₋₃ alkoxycarbonyl,
 (21) C₁₋₃ alkoxycarbonyl-C₁₋₆ alkyl,
 (22) hydroxy,
 (23) hydroxy-C₁₋₆ alkyl,
 (24) nitro,
 15 (25) cyano,
 (26) trifluoromethyl,
 (27) trifluoromethoxy,
 (28) trifluoroethoxy,
 (29) C₁₋₈ alkyl-S(O)_p-,
 20 (30) (C₁₋₈ alkyl)_paminocarbonyl,
 (31) C₁₋₈ alkyloxycarbonylamino,
 (32) (C₁₋₈ alkyl)_n aminocarbonyloxy,
 (33) (aryl C₁₋₃ alkyl)_n amino,
 (34) (aryl)_n amino,
 25 (35) aryl-C₁₋₃ alkylsulfonylamino, and
 (36) C₁₋₈ alkylsulfonylamino;

each R⁶ is independently selected from:

- (1) halogen,
 (2) aryl,
 30 (3) C₁₋₈ alkyl,
 (4) C₃₋₈ cycloalkyl,
 (5) C₃₋₈ cycloheteroalkyl,
 (6) aryl C₁₋₆alkyl,
 (7) amino C₀₋₆alkyl,

- (8) C₁₋₆ alkylamino C₀₋₆alkyl,
 (9) (C₁₋₆ alkyl)₂amino C₀₋₆alkyl,
 (10) aryl C₀₋₆ alkylamino C₀₋₆alkyl,
 (11) (aryl C₀₋₆ alkyl)₂amino C₀₋₆alkyl,
 5 (12) C₁₋₆ alkylthio,
 (13) aryl C₀₋₆alkylthio,
 (14) C₁₋₆ alkylsulfinyl,
 (15) aryl C₀₋₆alkylsulfinyl,
 (16) C₁₋₆ alkylsulfonyl,
 10 (17) aryl C₀₋₆alkylsulfonyl,
 (18) C₁₋₆ alkoxy C₀₋₆alkyl,
 (19) aryl C₀₋₆ alkoxy C₀₋₆alkyl,
 (20) hydroxycarbonyl C₀₋₆alkyl,
 (21) C₁₋₆ alkoxy carbonyl C₀₋₆alkyl,
 15 (22) aryl C₀₋₆ alkoxy carbonyl C₀₋₆alkyl,
 (23) hydroxycarbonyl C₁₋₆ alkyloxy,
 (24) hydroxy C₀₋₆alkyl,
 (25) cyano,
 (26) nitro,
 20 (27) perfluoroC₁₋₄alkyl,
 (28) perfluoroC₁₋₄alkoxy,
 (29) oxo,
 (30) C₁₋₆ alkylcarbonyloxy,
 (31) aryl C₀₋₆alkylcarbonyloxy,
 25 (32) alkyl C₁₋₆ carbonylamino,
 (33) aryl C₀₋₆ alkylcarbonylamino,
 (34) C₁₋₆ alkylsulfonylamino,
 (35) aryl C₀₋₆alkylsulfonylamino,
 (36) C₁₋₆ alkoxy carbonylamino,
 30 (37) aryl C₀₋₆ alkoxy carbonylamino,
 (38) C₁₋₆alkylaminocarbonylamino,
 (39) aryl C₀₋₆alkylaminocarbonylamino,
 (40) (C₁₋₆alkyl)₂ aminocarbonylamino,
 (41) (aryl C₀₋₆alkyl)₂ aminocarbonylamino,

- (42) (C₁₋₆alkyl)₂ aminocarbonyloxy,
- (43) (aryl C₀₋₆alkyl)₂ aminocarbonyloxy,
- (44) C₀₋₆alkylcarbonyl C₀₋₆alkyl, and
- (45) aryl C₀₋₆alkylcarbonyl C₀₋₆alkyl;

5 n is selected from 1 and 2;
 p is selected from 0, 1, and 2;
 and pharmaceutically acceptable salts thereof.

2. The compound according to Claim 1, wherein:

- 10 X is selected from -O-, and -N(R⁴)-;
 R¹ is selected from hydrogen, C₁₋₃ alkyl, cyclopropyl and trifluoromethyl;
 R² is selected from:
- (1) hydrogen,
 - (2) C₁₋₆ alkyl,
 - 15 (3) C₃₋₈ cycloalkyl,
 - (4) C₄₋₆ cycloheteroalkyl,
 - (5) C₃₋₈ cycloalkyl-C₁₋₃ alkyl,
 - (6) C₄₋₆ cycloheteroalkyl-C₁₋₃ alkyl,
 - (7) phenyl,
 - 20 (8) phenyl-C₁₋₃ alkyl,
 - (9) amino,
 - (10) amino-C₁₋₃ alkyl,
 - (11) C₁₋₃ acylamino,
 - (12) C₁₋₃ acylamino-C₁₋₃ alkyl,
 - 25 (13) (C₁₋₃ alkyl)_n amino,
 - (14) C₃₋₆ cycloalkyl-C₀₋₂ alkylamino,
 - (15) (C₁₋₃ alkyl)_n amino-C₁₋₆ alkyl,
 - (16) C₁₋₆ alkoxy,
 - (17) C₁₋₃ alkoxy-C₁₋₆ alkyl,
 - 30 (18) hydroxycarbonyl,
 - (19) hydroxycarbonyl-C₁₋₆ alkyl,
 - (20) C₁₋₃ alkoxycarbonyl,
 - (21) C₁₋₃ alkoxycarbonyl-C₁₋₆ alkyl,
 - (22) hydroxy,

- (23) hydroxy-C₁₋₆ alkyl,
 (24) nitro,
 (25) cyano,
 (26) trifluoromethyl,
 5 (27) trifluoromethoxy,
 (28) trifluoroethoxy,
 (29) C₁₋₆ alkyl-S(O)_p-,
 (30) (C₁₋₆ alkyl)_p aminocarbonyl,
 (31) C₁₋₃ alkyloxycarbonylamino,
 10 (32) (C₁₋₃ alkyl)_n aminocarbonyloxy,
 (33) (aryl C₁₋₃ alkyl)_n amino,
 (34) (aryl)₁₋₂ amino,
 (35) aryl-C₁₋₃ alkylsulfonylamino, and
 (36) C₁₋₆ alkylsulfonylamino;
- 15 R³ is selected from hydrogen, C₁₋₈ alkyl, and trifluoromethyl;
 or R² and R³ together with the carbon atom to which they are attached to form a
 carbonyl group, or join to form a 3- to 6-membered spiro-carbocyclic ring;
 R⁴ is selected from:
- 20 (1) hydrogen,
 (2) aryl,
 (3) C₁₋₈ alkyl,
 (4) perfluoro C₁₋₈ alkyl, and
 (5) aryl C₁₋₆ alkyl;
- wherein any of the alkyl groups of R², R³ and R⁴ are either unsubstituted or
 25 substituted with one to three R⁵ substituents;
 and wherein any of the aryl, cycloalkyl, or cycloheteroalkyl groups of R² or R⁴ are
 either unsubstituted or substituted with one to three R⁶ substituents;
 n is selected from 1 and 2;
 p is selected from 0, 1, and 2;
- 30 and pharmaceutically acceptable salts thereof.

3. The compound according to Claim 1, wherein:
 R¹ is selected from hydrogen, methyl, cyclopropyl and trifluoromethyl;

R² is selected from hydrogen, C₁₋₈ alkyl, cyclopropyl, cyclohexyl, piperidinyl, pyrrolidinyl, azetidiny, morpholinyl, piperazinyl, cyclopropylmethyl, cyclopropylethyl, cyclopropyl-propyl, cyclohexylmethyl, cyclohexylethyl, cyclohexylpropyl, piperidinylmethyl pyrrolidinylmethyl, azetidinylmethyl, morpholinylmethyl, piperazinylmethyl, piperidinylethyl, pyrrolidinylethyl, morpholinylethyl, piperazinylethyl, piperidinylpropyl, morpholinylpropyl, piperazinylpropyl, phenyl, benzyl, phenylethyl, phenylpropyl, hydroxy, methoxy, trifluoromethyl, trifluoromethoxy, and trifluoroethoxy;

R³ is selected from hydrogen, methyl and trifluoromethyl, or R² and R³, together with the carbon atom to which they are attached, form a carbonyl group, or join to form a 3- to 6- membered spiro-carbocyclic ring; wherein any of the alkyl groups of R² are either unsubstituted or substituted with one to three R⁵ substituents;

R⁴ is selected from hydrogen, methyl, ethyl, cyclopropyl, trifluoromethyl, and perfluoroethyl;

each R⁵ is independently selected from:

- (1) halogen,
- (2) C₁₋₈ alkyl,
- (3) C₃₋₈ cycloalkyl,
- (4) C₃₋₈ cycloheteroalkyl,
- (5) C₃₋₈ cycloalkyl-C₁₋₆ alkyl,
- (6) aryl,
- (7) amino,
- (8) C₁₋₃ acylamino,
- (9) (C₁₋₆ alkyl)_n amino,
- (10) C₃₋₆ cycloalkyl-C₀₋₂ alkylamino,
- (11) C₁₋₆ alkoxy,
- (12) hydroxycarbonyl,
- (13) hydroxy,
- (14) cyano,
- (15) trifluoromethyl,
- (16) trifluoromethoxy,
- (17) trifluoroethoxy,
- (18) (C₁₋₈ alkyl)_paminocarbonyl,

- (19) C₁₋₈ alkyloxycarbonylamino,
- (20) (C₁₋₈ alkyl)_n aminocarbonyloxy,
- (21) (aryl C₁₋₃ alkyl)_n amino, and
- (22) (aryl)_n amino;

5 and wherein any of the aryl, cycloalkyl, or cycloheteroalkyl groups in R² are unsubstituted or substituted with one to three R⁶ substituents, each R⁶ is independently selected from:

- (1) halogen,
- (2) phenyl,
- 10 (3) C₁₋₃ alkyl,
- (4) C₄₋₆ cycloheteroalkyl,
- (5) phenyl C₁₋₃alkyl,
- (6) amino C₀₋₃alkyl,
- (7) C₁₋₃ alkylamino C₀₋₃alkyl,
- 15 (8) (C₁₋₃ alkyl)₂amino C₀₋₃alkyl,
- (9) phenyl C₀₋₃alkylamino C₀₋₃alkyl,
- (10) (phenyl C₀₋₃ alkyl)₂amino C₀₋₃alkyl,
- (11) C₁₋₃ alkoxy C₀₋₃alkyl,
- (12) aryl C₀₋₃ alkoxy C₀₋₃alkyl,
- 20 (13) hydroxycarbonyl C₀₋₃alkyl,
- (14) C₁₋₃ alkoxycarbonyl C₀₋₃alkyl,
- (15) phenyl C₀₋₃ alkoxycarbonyl C₀₋₃alkyl,
- (16) hydroxy C₀₋₃alkyl,
- (17) cyano,
- 25 (18) trifluoromethyl, and
- (19) trifluoromethoxy;

n is selected from 1 and 2;

p is selected from 0, 1, and 2;

and pharmaceutically acceptable salts thereof.

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4. The compound according to Claim 1, wherein:

X is selected from -O- and -NH-;

R¹ is selected from hydrogen, methyl, and trifluoromethyl;

R² is selected from hydrogen, C₁₋₃ alkyl, benzyl, and cyclopropylmethyl;

R³ is selected from hydrogen and methyl;
 or R² and R³, together with the carbon to which they are attached, join to form a
 spiro-cyclopropyl ring;
 and pharmaceutically acceptable salts thereof.

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5. The compound according to Claim 1 selected from:
 4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one,
 4-(trifluoromethyl)-1,6,7,8,9,10-hexahydro-2H-azepino[3,2-g]quinolin-2-one,
 1,6,7,8,9,10-hexahydro-2H-azepino[3,2-g]quinolin-2-one,
 10 8-(*R*)-methyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-
 one,
 8-(*S*)-methyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-
 one,
 8-spirocyclopropyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-
 15 2(6H)-one,
 8-(*R,S*)-propyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-
 one,
 8-(*R,S*)-dimethyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-
 2(6H)-one,
 20 8-(*R,S*)-benzyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-
 one,
 8-(*R,S*)-ethyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-
 one,
 8-(*R,S*)-cyclopropylmethyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-
 25 b]azepin-2(6H)-one,
 4,8-dimethyl-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one, and
 4-methyl-8-(*R,S*)-propyl-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one,
 and pharmaceutically acceptable salts thereof.

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6. The compound according to Claim 1 selected from:
 4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-one,
 4-(trifluoromethyl)-1,6,7,8,9,10-hexahydro-2H-azepino[3,2-g]quinolin-2-one,
 8-(*R*)-methyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-b]azepin-2(6H)-
 one,

8-(*S*)-methyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-*b*]azepin-2(6H)-one,

8-spirocyclopropyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-*b*]azepin-2(6H)-one,

5 8-(*R,S*)-ethyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-*b*]azepin-2(6H)-one,

8-(*R,S*)-cyclopropylmethyl-4-(trifluoromethyl)-7,8,9,10-tetrahydrochromeno[7,6-*b*]azepin-2(6H)-one,

and pharmaceutically acceptable salts thereof.

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7. A method for modulating the androgen receptor in a tissue selective manner in a patient in need of such modulation comprising administering a therapeutically effective amount of a compound of Claim 1, and pharmaceutically acceptable salts thereof.

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8. A method of agonizing the androgen receptor comprising administering to a patient in need thereof of a therapeutically effective amount of a compound of Claim 1, and pharmaceutically acceptable salts thereof.

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9. A method according for antagonizing the androgen receptor in the prostate of a male patient or in the uterus of a female patient and agonizing the androgen receptor in bone or muscle tissue comprising administering to a patient in need thereof of a therapeutically effective amount of a compound of Claim 1, and pharmaceutically acceptable salts thereof.

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10. A method of treating a condition which is caused by androgen deficiency or which can be ameliorated by androgen administration selected from: osteoporosis, periodontal disease, bone fracture, bone damage following bone reconstructive surgery, sarcopenia, frailty, aging skin, male hypogonadism, female sexual dysfunction, post-menopausal symptoms in women, atherosclerosis, hypercholesterolemia, hyperlipidemia, aplastic anemia and other hematopoietic disorders, pancreatic cancer, renal cancer, prostate cancer, arthritis and joint repair, in a patient in need of such treatment, comprising administering a therapeutically effective amount of a compound according to Claim 1 or a pharmaceutically acceptable salt thereof.

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11. The method according to Claim 10 wherein the condition is osteoporosis.
- 5 12. A method of treating osteoporosis in a patient in need of such treatment, comprising administering a therapeutically effective amount of a compound according to Claim 5 or a pharmaceutically acceptable salt thereof.
- 10 13. The method according to Claim 11, additionally comprising the administration of a bone-strengthening agent selected from:
- (a) estrogen or an estrogen derivative, alone or in combination with a progestin or progestin derivative,
 - (b) a bisphosphonate,
 - (c) an antiestrogen or a selective estrogen receptor modulator,
 - 15 (d) an $\alpha_v\beta_3$ antagonist,
 - (e) a cathepsin K inhibitor,
 - (f) an HMG-CoA reductase inhibitor,
 - (g) an osteoclast vacuolar ATPase inhibitor,
 - (h) an antagonist of VEGF binding to osteoclast receptors,
 - 20 (i) a peroxisome proliferator-activated receptor γ ,
 - (j) calcitonin,
 - (k) a calcium receptor antagonist,
 - (l) parathyroid hormone,
 - (m) a growth hormone secretagogue,
 - 25 (n) human growth hormone,
 - (o) insulin-like growth factor,
 - (p) a P-38 protein kinase inhibitor,
 - (q) bone morphogenic protein,
 - (r) an inhibitor of BMP antagonism,
 - 30 (s) a prostaglandin derivative,
 - (t) vitamin D or vitamin D derivative,
 - (u) vitamin K or vitamin K derivative,
 - (v) ipriflavone,
 - (w) fluoride salts, and

(x) dietary calcium supplement.

14. The method according to Claim 13, wherein:

- (a) the estrogen or estrogen derivative, alone or in combination with a progestin or progestin derivative is selected from: conjugated estrogen, equine estrogen, 17 β -estradiol, estrone, 17 β -ethynyl estradiol, alone or in combination with an agent selected from norethindrone and medroxyprogesterone acetate;
- (b) the bisphosphonate is selected from:
- (1) 4-amino-1-hydroxybutylidene-1,1-bisphosphonic acid,
 - 10 (2) N-methyl-4-amino-hydroxybutylidene-1,1-bisphosphonic acid,
 - (3) 4-(N,N-dimethylamino-1-hydroxybutylidene-1,1-bisphosphonic acid,
 - (4) 3-amino-1-hydroxypropylidene-1,1-bisphosphonic acid,
 - (5) 3-(N,N-dimethylamino)-1-hydroxypropylidene-1,1-bisphosphonic acid,
 - 15 (6) 1-hydroxy-3-(N-methyl-N-pentylamino)propylidene-1,1-bisphosphonic acid,
 - (7) 1-hydroxy-2-(3-pyridyl)ethylidene-1,1-bisphosphonic acid,
 - (8) 4-(hydroxymethylene-1,1-bisphosphonic acid)piperidine,
 - (9) (1-hydroxyethylidene)-bisphosphonate,
 - 20 (10) (dichloromethylene)-bisphosphonate,
 - (11) [1-hydroxy-2-imidazopyridin-(1,2-a)-3-ylethylidene] bisphosphonate,
 - (12) (6-amino-1-hydroxyhexylidene)bisphosphonate, and
 - (13) [1-hydroxy-2-(1H-imidazole-1-yl)ethylidene]bisphosphonate;
- (c) the antiestrogen or selective estrogen receptor modulator is selected from: raloxifene, clomiphene, zuclomiphene, enclomiphene, nafoxidene, CI-680, CI-628, CN-55,945-27, Mer-25, U-11, 555A, U-100A tamoxifen, lasofoxifene, toremifene, azorxifene, EM-800, EM-652, TSE 424, droloxifene, idoxifene, and levormeloxifene;
- (d) the HMG-CoA reductase inhibitor is selected from lovastatin, simvastatin, dihydroxy-open acid simvastatin, pravastatin, fluvastatin, atorvastatin, cerivastatin, rosuvastatin, pitavastatin, and nisvastatin;
- (e) calcitonin is salmon calcitonin administered as a nasal spray;
- (f) bone morphogenic protein is selected from BMP 2, BMP 3, BMP 5, BMP 6, BMP 7, TGF beta, and GDF5;

- (g) insulin-like growth factor is selected from IGF I and IGF II alone or in combination with IGF binding protein 3;
- (h) the prostaglandin derivative is selected from agonists of prostaglandin receptor EP1, EP2, EP4, FP, and IP;
- 5 (i) the fibroblast growth factor is selected from aFGF and bFGF;
- (j) parathyroid hormone or parathyroid hormone analog is selected from parathyroid hormone subcutaneous injection, human PTH, 1-84, 1-34 and other partial sequences, native or with substitutions;
- 10 (k) vitamin D or vitamin D derivative is selected from: natural vitamin D, 25-OH-vitamin D3, 1 α ,25(OH)₂ vitamin D3, 1 α -OH-vitamin D3, 1 α -OH-vitamin D2, dihydrotachysterol, 26,27-F6-1 α ,25(OH)₂ vitamin D3, 19-nor-1 α ,25(OH)₂ vitamin D3, 22-oxacalcitriol, calcipotriol, 1 α ,25(OH)₂-16-ene-23-yne-vitamin D3 (Ro 23-7553), EB1089, 20-epi-1 α ,25(OH)₂ vitamin D3, KH1060, ED71, 1 α ,24(S)-(OH)₂ vitamin D3, and 1 α ,24(R)-(OH)₂ vitamin
- 15 D3;
- (l) the dietary calcium supplement is selected from calcium carbonate, calcium citrate, and natural calcium salts;
- (m) the fluoride salts are selected from: sodium fluoride and monosodium fluorophosphate (MFP);
- 20 and pharmaceutically acceptable salts thereof.

15. The method according to Claim 11, additionally comprising the administration of 4-amino-1-hydroxybutylidene-1,1-bisphosphonic acid monosodium salt, trihydrate.

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16. A composition comprising a compound according to Claim 1 or a pharmaceutically acceptable salt thereof, and a bone-strengthening agent selected from:

- (a) estrogen or an estrogen derivative, alone or in combination with a progestin or
- 30 progestin derivative,
- (b) a bisphosphonate,
- (c) an antiestrogen or a selective estrogen receptor modulator,
- (d) an $\alpha_v\beta_3$ antagonist,
- (e) a cathepsin K inhibitor,
- 35 (f) an HMG-CoA reductase inhibitor,

- (g) an osteoclast vacuolar ATPase inhibitor,
- (h) an antagonist of VEGF binding to osteoclast receptors,
- (i) a peroxisome proliferator-activated receptor γ ,
- (j) calcitonin,
- 5 (k) a calcium receptor antagonist,
- (l) parathyroid hormone,
- (m) a growth hormone secretagogue,
- (n) human growth hormone,
- (o) insulin-like growth factor,
- 10 (p) a P-38 protein kinase inhibitor,
- (q) bone morphogenic protein,
- (r) an inhibitor of BMP antagonism,
- (s) a prostaglandin derivative,
- (t) vitamin D or vitamin D derivative,
- 15 (u) vitamin K or vitamin K derivative,
- (v) ipriflavone,
- (w) fluoride salts, and
- (x) dietary calcium supplement.

20 17. A composition comprising a compound according to Claim 1 and a pharmaceutically acceptable carrier.

 18. A composition comprising a compound according to Claim 5 and a pharmaceutically acceptable carrier.

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 19. The use of a compound according to Claim 1 or a pharmaceutically acceptable salt thereof, for the preparation of a medicament useful for modulating the androgen receptor in a tissue selective manner in a patient in need of such modulation.

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 20. The use of a compound according to Claim 1, or a pharmaceutically acceptable salt thereof, for the preparation of a medicament useful for agonizing the androgen receptor in a patient in need thereof.

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 21. The use of a compound according to Claim 1,

or a pharmaceutically acceptable salt thereof, for the preparation of a medicament useful treating a condition which is caused by androgen deficiency or which can be ameliorated by androgen administration selected from:

- 5 osteoporosis, periodontal disease, bone fracture, bone damage
following bone reconstructive surgery, sarcopenia, frailty, aging skin,
male hypogonadism, female sexual dysfunction, post-menopausal
symptoms in women, atherosclerosis, hypercholesterolemia,
hyperlipidemia, aplastic anemia and other hematopoietic disorders,
pancreatic cancer, renal cancer, prostate cancer, arthritis and joint
10 repair,
in a patient in need of such treatment.