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Drug Discovery and Development: An update

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Abstract:

Drug discovery is a multi-stage process fueled by the hope of delivering new and effective therapies to patients suffering from complex diseases. From identifying unmet clinical needs and therapeutic targets to the rigorous phases of clinical testing, this journey spans over a decade, costing billions and testing thousands of compounds for every successful approval. This review aims to present a concise, yet comprehensive summary of the stages involved in the drug discovery and development pipeline. It delves into key milestones such as target identification and validation, high-throughput screening for hit compounds, lead optimization, preclinical evaluations, and the four clinical trial phases. Special focus is given to both traditional and modern approaches including drug repurposing, biologics, and computational tools that are revolutionizing the pharmaceutical landscape. Despite challenges like high attrition rates, regulatory hurdles, and ethical concerns, emerging technologies and interdisciplinary collaborations are paving the way for more efficient and patient-centered drug development. This paper offers a foundational overview for researchers and students interested in understanding the dynamic and evolving process that brings new medicines from bench to bedside.

Keywords: Drug Discovery, Clinical Trials, Lead Optimization, Target Identification

INTRODUCTION

Drug discovery represents one of the most resource-intensive and scientifically challenging domains in healthcare. It encompasses a carefully orchestrated sequence of steps aimed at identifying novel therapeutic agents that can address unmet medical needs. The journey begins by recognizing disease areas where existing treatments are inadequate. Researchers then

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identify molecular targets—such as proteins, receptors, or genes—whose modulation may alter disease progression.

Following target identification and validation, candidate compounds are screened through high-throughput methods. These screening techniques are designed to filter out the most promising molecules, which are further refined in lead optimization stages. Here, the focus is on improving the pharmacological properties of the compounds, including potency, selectivity, and bio-availability.

The process continues with preclinical testing, where compounds are assessed for safety and efficacy in in vitro and in vivo models. Only after passing these stages can a compound enter human clinical trials, which occur in multiple phases designed to evaluate safety, efficacy, dosage, and long-term impacts.

Throughout this complex path, drug development remains an intersection of biology, chemistry, engineering, and regulatory science. It is both a scientific endeavor and a humanitarian one—aimed at alleviating suffering and improving quality of life. This article reviews the essential steps and evolving strategies in modern drug discovery and development.

As the demand for safer, faster, and more personalized treatments grows, so does the urgency to rethink how we discover and deliver medicines. What once relied heavily on trial-and-error is now being transformed by data-driven insights, smarter screening tools, and a deeper understanding of human biology. In many ways, drug discovery today is not just about finding the next cure—it's about doing it better, faster, and with the patient always at the center.

KEY STAGES OF DRUG DISCOVERY

• Identification of Unmet Medical Needs

Unmet medical needs guide the selection of therapeutic areas where innovation is urgently required. These gaps are identified through clinical observations, epidemiological studies, and expert consultations.

• Target Identification and Validation

The next phase involves discovering a biological molecule that plays a central role in disease progression. Validation techniques such as antisense oligonucleotides, CRISPR, and knockout models are used to confirm the relevance of the target.

• Hit Identification and Assay Development

Once a target is confirmed, large compound libraries are screened using high-throughput systems. Biochemical and cell-based assays help identify 'hits'—molecules showing initial activity against the target this hits undergo counter – screening and dose response evaluation to ensure their specificity and safety.

Lead Optimization

Selected hits are modified to enhance their pharmacodynamic and pharmacokinetic profiles. Lipinski's Rule of 5 and ADME-Tox (Absorption, Distribution, Metabolism, Excretion, and Toxicity) parameters guide the development of drug-like properties.

Preclinical Testing

Before a potential drug ever reaches a human trial, it has to prove itself in the lab and in carefully monitored animal studies. These preclinical tests are essential for checking how the drug behaves inside the body—how it's absorbed, where it travels, how it breaks down, and how it exits. Just as importantly, they reveal any red flags related to safety or toxicity. It's a tough filter, but a necessary one. Only when a compound passes these early tests with enough promise can it move forward to the next big step: applying for an Investigational New Drug (IND) approval. This moment marks the transition from theory to human testing—and it's a major milestone in any drug's journey.



Figure 1: Overview of the Drug Discovery and Development Pipeline

CLINICAL DEVELOPMENT PHASES:

Phase 0

Micro-dosing studies in a small group of healthy volunteers help gather early pharmacokinetic data without causing significant biological effects.

Phase 1

Safety, tolerability, and dose range are evaluated in a small cohort (20–80 healthy volunteers). Initial pharmacodynamics and pharmacokinetics are established.

Phase 2

The compound is tested on patients to assess efficacy and identify side effects. It also helps determine optimal dosing regimens.

Phase 3

Larger patient populations (hundreds to thousands) are involved to confirm therapeutic benefits and monitor rare adverse effects.

Phase 4

Post-marketing surveillance ensures long-term safety and effectiveness. Real-world data help in refining treatment protocols.

Phase	Description	Participants	Primary Focus	Duration
Phase 0	Exploratory	<15	Pharmacokinetics	Few months
	trials with			
	micro-dosing			
Phase 1	First-in-human	20-100	Safety, dosage,	Several
	studies		side effects	months
Phase 2	Therapeutic	100-300	Efficacy, dose-	Months- 2
	exploration		ranging	years
Phase 3	Confirmatory	300-3,000+	Efficacy vs.	1-4 years
	trials		placebo,	
			monitoring	

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Phase 4	Post-marketing	Large	Long-term	Ongoing
	studies	population	effects,real-world	





Figure 1: Phases of Clinical Trials

EMERGING STRATEGIES –

Drug Repurposing

Existing drugs are investigated for new indications. This approach reduces both time and cost since safety profiles are already established.

Biologics and Allosteric Modulators

Advanced biologics such as monoclonal antibodies and allosteric modulators are being developed to provide targeted, effective treatments with fewer side effects.

Computational Tools and AI

Machine learning models and bioinformatics platforms are increasingly used for predicting drug-target interactions, optimizing molecules, and designing trials.

Collaborative Models

Public-private partnerships, academic collaborations, and crowdsourced innovation platforms are accelerating early-stage discovery and clinical translation.

CHALLENGES AND FUTURE PROSPECT

Despite technological advancements, the industry continues to face high failure rates, long development timelines, and rising R&D costs. Ethical concerns around animal testing and drug affordability also persist. Future directions will likely focus on:

- Multi-target drug design
- Personalized and precision medicine
- Use of green chemistry in drug synthesis
- Global regulatory harmonization

CONCLUSION

The pharmaceutical industry is navigating a dynamic and demanding landscape—marked by the growing need for innovative, effective, and accessible treatments. The process of drug discovery and development is not only foundational to modern medicine but also emblematic of scientific ambition, perseverance, and collaboration. From the initial identification of disease mechanisms to clinical validation and regulatory approval, each stage is rigorous, data-driven, and laden with uncertainty.

This review underscores the systematic progression of drug development—from unmet medical needs to clinical solutions. It also highlights the importance of key concepts such as high-throughput screening, target validation, and lead optimization, all of which are pivotal to identifying viable drug candidates. While preclinical and clinical testing remain the pillars of safety and efficacy, the rise of biologics, drug repurposing strategies, and AI-driven tools is revolutionizing the way researchers approach challenges. Despite the high rate of attrition and the daunting costs associated with each new drug, the field continues to evolve. Ethical concerns, regulatory bottlenecks, and global disparities in drug access remind us of the balance between scientific discovery and societal responsibility. However, with continuous innovation and deeper interdisciplinary partnerships, the goal of delivering safer, faster, and more personalized therapeutics is becoming more attainable. The journey is complex—but the potential to transform lives makes every step worthwhile.

SCOPE OF FUTURE

To further accelerate and improve the drug development landscape, future research should focus on the following key areas:

• **Refining Target Validation**: Employ next-generation tools like CRISPR, siRNA, and conditional knockout models to ensure high confidence in target relevance before clinical stages.

• Advancing Preclinical Models: Develop better translational models that mimic human physiology to improve predictability and reduce late-stage failures.

• **Drug Repurposing Pipelines**: Institutionalize frameworks and screening platforms for identifying new indications for existing drugs, enabling cost-effective and rapid deployment.

• **Biologics & Personalized Medicine**: Expand research into monoclonal antibodies, mRNA therapies, and biomarker-driven treatment strategies for highly specific, targeted care.

• Artificial Intelligence & Computational Biology: Integrate AI to optimize lead selection, predict pharmacokinetic properties, and design adaptive clinical trials with greater precision.

• **Multi-Target Drug Discovery**: Shift focus from "one drug–one target" to systems pharmacology approaches for diseases involving complex molecular networks.

• Enhanced Drug Delivery Technologies: Invest in smart delivery systems like liposomes, nano-emulsions, and polymeric carriers to improve drug stability and patient compliance.

REFERENCES

1. Drews, J. (2000). Drug discovery: a historical perspective. Science, 287(5460), 1960–1964.

2. Sliwoski, G., Kothiwale, S., Meiler, J., & Lowe, E. W. (2014). Computational methods in drug discovery. *Pharmacological Reviews*, 66(1), 334–395.

3. Mohs, R. C., & Greig, N. H. (2017). Drug discovery and development: Role of basic biological research. *Alzheimer's & Dementia: Translational Research & Clinical Interventions*, 3(4), 651–657.

4. Schneider, G. (2018). Automating drug discovery. *Nature Reviews Drug Discovery*, 17(2), 97–113.

5. Vamathevan, J., Clark, D., Czodrowski, P., et al. (2019). Applications of machine learning in drug discovery and development. *Nature Reviews Drug Discovery*, 18(6), 463–477.

6. Kapetanovic, I. M. (2008). Computer-aided drug discovery and development (CADDD): in silico-chemico-biological approach. *Chemico-Biological Interactions*, 171(2), 165–176.

7. Hughes, J. P., Rees, S. S., Kalindjian, S. B., & Philpott, K. L. (2011). Principles of early drug discovery. *British Journal of Pharmacology*, 162(6), 1239–1249.

8. Paul, D., Sanap, G., Shenoy, S., et al. (2021). Artificial intelligence in drug discovery and development. *Drug Discovery Today*, 26(1), 80–93.

9. Kannt, A., & Wieland, T. (2016). Managing risks in drug discovery: reproducibility of published findings. *Naunyn-Schmiedeberg's Archives of Pharmacology*, 389(4), 353–360.

10. Showell, G. A., & Mills, J. S. (2003). Chemistry challenges in lead optimization: silicon isosteres in drug discovery. *Drug Discovery Today*, 8(12), 551–556.

11. Deore, A. B., Dhumane, J. R., Wagh, R., & Sonawane, R. (2019). The stages of drug discovery and development process. *Asian Journal of Pharmaceutical Research and Development*, 7(6), 62–67.

12. Zhang, D., Luo, G., Ding, X., & Lu, C. (2012). Preclinical experimental models of drug metabolism and disposition. *Acta Pharmaceutica Sinica B*, 2(6), 549–561.

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13. Nicolaou, K. (2014). Advancing the drug discovery and development process. *Angewandte Chemie*, 126(35), 9280–9292.

14. Schwartsmann, G., Ratain, M., Cragg, G., et al. (2002). Anticancer drug discovery and development throughout the world. *Journal of Clinical Oncology*, 20(18 Suppl), 47S–59S.

15. Takebe, T., Imai, R., & Ono, S. (2018). The current status of drug discovery and development in academia. *Clinical and Translational Science*, 11(6), 597–606.

16. Dickson, M., & Gagnon, J. P. (2009). The cost of new drug discovery and development. *Discovery Medicine*, 4(22), 172–179.

17. Wu, F., Zhou, Y., Li, L., et al. (2020). Computational approaches in preclinical studies on drug discovery. *Frontiers in Chemistry*, 8, 726.

18. Frank, R., & Hargreaves, R. (2003). Clinical biomarkers in drug discovery and development. *Nature Reviews Drug Discovery*, 2(7), 566–580.

19. Colburn, W. A. (2003). Biomarkers in drug discovery and development: from target identification through drug marketing. *The Journal of Clinical Pharmacology*, 43(4), 329–341.

20. Leelananda, S. P., & Lindert, S. (2016). Computational methods in drug discovery. *Beilstein Journal of Organic Chemistry*, 12, 2694–2718.

21. Ashburn, T. T., & Thor, K. B. (2004). Drug repositioning: identifying and developing new uses for existing drugs. *Nature Reviews Drug Discovery*, 3(8), 673–683.

22. DiMasi, J. A., Grabowski, H. G., & Hansen, R. W. (2016). Innovation in the pharmaceutical industry: New estimates of R&D costs. *Journal of Health Economics*, 47, 20–33.

23. Hughes, B. (2009). 2008 FDA drug approvals. *Nature Reviews Drug Discovery*, 8(2), 93–96.

24. Pushpakom, S., Iorio, F., Eyers, P. A., et al. (2019). Drug repurposing: progress, challenges and recommendations. *Nature Reviews Drug Discovery*, 18(1), 41–58.

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