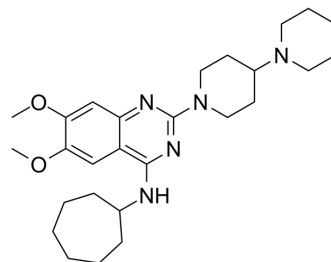


## C-021

<b>Cat. No.:</b>	HY-103364		
<b>CAS No.:</b>	864289-85-0		
<b>Molecular Formula:</b>	C <sub>27</sub> H <sub>41</sub> N <sub>5</sub> O <sub>2</sub>		
<b>Molecular Weight:</b>	467.65		
<b>Target:</b>	CCR		
<b>Pathway:</b>	GPCR/G Protein; Immunology/Inflammation		
<b>Storage:</b>	Powder	-20°C	3 years
		4°C	2 years
	In solvent	-80°C	6 months
		-20°C	1 month



### SOLVENT & SOLUBILITY

#### In Vitro

Ethanol : 50 mg/mL (106.92 mM; ultrasonic and warming and heat to 60°C)  
 DMSO : 50 mg/mL (106.92 mM; ultrasonic and warming and heat to 80°C)

Preparing Stock Solutions	Solvent Concentration	Mass		
		1 mg	5 mg	10 mg
	1 mM	2.1384 mL	10.6918 mL	21.3835 mL
	5 mM	0.4277 mL	2.1384 mL	4.2767 mL
	10 mM	0.2138 mL	1.0692 mL	2.1384 mL

Please refer to the solubility information to select the appropriate solvent.

#### In Vivo

- Add each solvent one by one: 10% DMSO >> 40% PEG300 >> 5% Tween-80 >> 45% saline  
Solubility: ≥ 0.71 mg/mL (1.52 mM); Clear solution
- Add each solvent one by one: 10% DMSO >> 90% (20% SBE-β-CD in saline)  
Solubility: ≥ 0.71 mg/mL (1.52 mM); Clear solution
- Add each solvent one by one: 10% DMSO >> 90% corn oil  
Solubility: ≥ 0.71 mg/mL (1.52 mM); Clear solution

### BIOLOGICAL ACTIVITY

#### Description

C-021 is a potent CC chemokine receptor-4 (CCR4) antagonist. C-021 potently inhibits functional chemotaxis in human and mouse with IC<sub>50</sub>s of 140 nM and 39 nM, respectively. C-021 effectively prevents human CCL22-derived [<sup>35</sup>S]GTPγS from binding to the receptor with an IC<sub>50</sub> of 18 nM<sup>[1]</sup>.

#### IC<sub>50</sub> & Target

CCR4

<b>In Vitro</b>	<p>The in vitro oxidative metabolic stability of C-021 (Compound 1b) is evaluated by measuring the rate of drug consumption in human liver microsomes (HML), thus providing intrinsic clearance values (CL<sub>int</sub>). C-021 exhibits CL<sub>int</sub> value of 17,377 mL/h/kg<sup>[1]</sup>.</p> <p>MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p>								
<b>In Vivo</b>	<p>The potency of C-021 (Compound 1b) is evident after subcutaneous administration in the murine oxazolone-induced contact hypersensitivity test, a known model of acute skin inflammation. When C-021 is administered orally, however, very little inhibition is observed<sup>[1]</sup>.</p> <p>C-021 (1 mg/kg; i.p.; daily; for 3 days) significantly less microgliosis in acute liver failure mice<sup>[2]</sup>.</p> <p>MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p> <table border="1" data-bbox="345 485 1515 722"> <tr> <td data-bbox="345 485 618 548">Animal Model:</td> <td data-bbox="618 485 1515 548">Male C57Bl/6 mice (20-25 g) with acute liver failure<sup>[2]</sup></td> </tr> <tr> <td data-bbox="345 548 618 611">Dosage:</td> <td data-bbox="618 548 1515 611">1 mg/kg</td> </tr> <tr> <td data-bbox="345 611 618 674">Administration:</td> <td data-bbox="618 611 1515 674">i.p.; daily; for 3 days</td> </tr> <tr> <td data-bbox="345 674 618 722">Result:</td> <td data-bbox="618 674 1515 722">Significantly less microgliosis, and significantly reduced the pERK1/2 to tERK1/2 ratio.</td> </tr> </table>	Animal Model:	Male C57Bl/6 mice (20-25 g) with acute liver failure <sup>[2]</sup>	Dosage:	1 mg/kg	Administration:	i.p.; daily; for 3 days	Result:	Significantly less microgliosis, and significantly reduced the pERK1/2 to tERK1/2 ratio.
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Administration:	i.p.; daily; for 3 days								
Result:	Significantly less microgliosis, and significantly reduced the pERK1/2 to tERK1/2 ratio.								

## CUSTOMER VALIDATION

- Biochem Pharmacol. 2023 Mar 2;210:115475.

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## REFERENCES

[1]. Yokoyama K, et al. Potent and orally bioavailable CCR4 antagonists: Synthesis and structure-activity relationship study of 2-aminoquinazolines. *Bioorg Med Chem*. 2009 Jan 1;17(1):64-73.

[2]. Matthew McMillin, et al. Neuronal CCL2 is upregulated during hepatic encephalopathy and contributes to microglia activation and neurological decline. *J Neuroinflammation*. 2014 Jul 10;11:121.

**Caution: Product has not been fully validated for medical applications. For research use only.**

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