Chloroquine dihydrochloride

Cat. No.:	HY-17589B			
CAS No.:	3545-67-3			
Molecular Formula:	C ₁₈ H ₂₈ Cl ₃ N ₃	H-CI		
Molecular Weight:	392.79	H H-CI		
Target:	Antibiotic; Parasite; Autophagy; SARS-CoV; Toll-like Receptor (TLR); HIV			
Pathway:	Anti-infection; Autophagy; Immunology/Inflammation			
Storage:	Please store the product under the recommended conditions in the Certificate of			
	Analysis.			

BIOLOGICAL ACTIVITY							
Description	Chloroquine dihydrochloride is an antimalarial and anti-inflammatory agent widely used to treat malaria and rheumatoid arthritis. Chloroquine dihydrochloride is an autophagy and toll-like receptors (TLRs) inhibitor. Chloroquine dihydrochloride is highly effective in the control of SARS-CoV-2 (COVID-19) infection in vitro (EC ₅₀ =1.13 μM) ^{[1][2][3][4]} .						
IC ₅₀ & Target	Plasmodium	Malaria	TLRs	SARS-COV-2			
	HIV-1						
In Vitro	Vitro Chloroquine dihydrochloride (20 μM) inhibits IL-12p70 release and reduces Th1-priming capacity of activated hum monocyte-derived Langerhans-like cells (MoLC). Chloroquine dihydrochloride (20 μM) enhances IL-1-induced IL-2. secretion in MoLC and subsequently increases IL-17A release by primed CD4+ T cells[1]. Chloroquine dihydrochlorid suppresses MMP-9 mRNA expression in normoxia and hypoxia in parental MDA-MB-231 cells. Chloroquine dihydrochlorid has cell-, dose- and hypoxia-dependent effects on MMP-2, MMP-9 and MMP-13 mRNA expression ^[2] . TLR7 and TLR9 using IRS-954 or Chloroquine dihydrochloride significantly reduces HuH7 cell proliferation in vitro ^[3] . Chloroquine dihydrochloride (0.01-100 μM; 48 hours) potently blocked virus infection (vero E6 cells infected with S 2) at low-micromolar concentration (EC50=1.13 μM). Chloroquine dihydrochloride blocks virus infection by increase endosomal pH required for virus/cell fusion, as well as interfering with the glycosylation of cellular receptors of SA MCE has not independently confirmed the accuracy of these methods. They are for reference only.						
In Vivo	Chloroquine dihydrochloride (80 mg/kg, i.p.) does not prevent the growth of the triple-negative MDA-MB-231 cells with high or low TLR9 expression levels in the orthotopic mouse model ^[2] . TLR7 and TLR9 inhibition using IRS-954 or Chloroquine dihydrochloride significantly inhibits tumour growth in the mouse xenograft model. HCC development in the DEN/NMOR rat model is also significantly inhibited by Chloroquine ^[3] . MCE has not independently confirmed the accuracy of these methods. They are for reference only.						

- Nature. 2023 Jun;618(7966):799-807.
- Nature. 2022 Dec;612(7941):725-731.
- Nat Biotechnol. 2022 Dec;40(12):1834-1844.

Product Data Sheet



- Cell Res. 2023 Jul 17.
- Mol Cancer. 2019 Apr 10;18(1):85.

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REFERENCES

[1]. Said A, et al. Chloroquine promotes IL-17 production by CD4+ T cells via p38-dependent IL-23 release by monocyte-derived Langerhans-like cells. J Immunol. 2014 Dec 15;193(12):6135-43.

[2]. Tuomela J, et al. Chloroquine has tumor-inhibitory and tumor-promoting effects in triple-negative breast cancer. Oncol Lett. 2013 Dec;6(6):1665-1672.

[3]. Mohamed FE, et al. Effect of toll-like receptor 7 and 9 targeted therapy to prevent the development of hepatocellular carcinoma. Liver Int. 2014 Jul 2. doi: 10.1111/liv.12626.

[4]. Colson P, et al. Chloroquine and hydroxychloroquine as available weapons to fight COVID-19. Int J Antimicrob Agents. 2020;55(4):105932.

[5]. Savarino A, et al. The anti-HIV-1 activity of chloroquine. J Clin Virol. 2001;20(3):131-135.

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