Screening Libraries

Derenofylline

Cat. No.: HY-14858 CAS No.: 251945-92-3 Molecular Formula: $C_{18}H_{20}N_4O$ Molecular Weight: 308.38

Target: Adenosine Receptor Pathway: GPCR/G Protein

Storage: Powder

2 years

3 years

In solvent -80°C 2 years

-20°C

-20°C 1 year

Product Data Sheet

SOLVENT & SOLUBILITY

In Vitro

DMSO: 100 mg/mL (324.28 mM; Need ultrasonic)

Preparing Stock Solutions	Solvent Mass Concentration	1 mg	5 mg	10 mg
	1 mM	3.2428 mL	16.2138 mL	32.4275 mL
	5 mM	0.6486 mL	3.2428 mL	6.4855 mL
	10 mM	0.3243 mL	1.6214 mL	3.2428 mL

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

In Vivo

- 1. Add each solvent one by one: 10% DMSO >> 40% PEG300 >> 5% Tween-80 >> 45% saline Solubility: ≥ 6.25 mg/mL (20.27 mM); Clear solution
- 2. Add each solvent one by one: 10% DMSO >> 90% (20% SBE- β -CD in saline) Solubility: ≥ 6.25 mg/mL (20.27 mM); Clear solution
- 3. Add each solvent one by one: 10% DMSO >> 90% corn oil Solubility: ≥ 6.25 mg/mL (20.27 mM); Clear solution

BIOLOGICAL ACTIVITY

Description	Derenofylline (SLV 320) is a potent, selective and orally active adenosine A_1 receptor antagonist, with K_i values of 1 nM, 200 nM and 398 nM for human A_1 , A_3 and A_{2A} receptors respectively. Derenofylline suppresses cardiac fibrosis and attenuates albuminuria without affecting blood pressure in rats ^[1] .			
IC ₅₀ & Target	A1R	Adenosine A ₃ receptor	A2AR	
	1 nM (Ki)	200 nM (Ki)	398 nM (Ki)	

In Vitro	Derenofylline (100 μ M, 72 h) inhibits TGF- β 1-induced myofibroblast transformation without affecting the cell viability ^[2] . MCE has not independently confirmed the accuracy of these methods. They are for reference only.		
In Vivo	Derenofylline (0.3-10 mg/kg, oral administration) suppresses adenosine-induced bradycardia in rats ^[1] . Derenofylline (10 mg/kg/d, oral administration, 12 weeks) reduces myocardial fibrosis in 5/6 nephrectomy rats without affecting blood pressure ^[1] . Derenofylline (0.1-5mg/kg, intravenous injection) causes no major haemodynamic effects (heart rate and blood pressure) ^[1] . MCE has not independently confirmed the accuracy of these methods. They are for reference only.		
	Animal Model:	5/6 nephrectomy rats ^[1]	
	Dosage:	10 mg/kg/d	
	Administration:	Oral administration, mixed with food for 12 weeks	
	Result:	Attenuated urinary albuminuria by about 50%. Suppressed the increase in CK levels, ALT and AST plasma levels in nephrectomized animals.	

REFERENCES

[1]. Marta Mateus, et al. Understanding the Role of Adenosine Receptors in the Myofibroblast Transformation in Peyronie's Disease. J Sex Med. 2018 Jul;15(7):947-957.

[2]. Kalk P, et al. The adenosine A1 receptor antagonist SLV320 reduces myocardial fibrosis in rats with 5/6 nephrectomy without affecting blood pressure. Br J Pharmacol. 2007 Aug;151(7):1025-32.

 $\label{lem:caution:Product} \textbf{Caution: Product has not been fully validated for medical applications. For research use only.}$

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