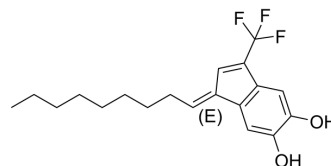


## E64FC26

<b>Cat. No.:</b>	HY-122895		
<b>CAS No.:</b>	2285446-62-8		
<b>Molecular Formula:</b>	C <sub>19</sub> H <sub>23</sub> F <sub>3</sub> O <sub>2</sub>		
<b>Molecular Weight:</b>	340.38		
<b>Target:</b>	Apoptosis; PDI		
<b>Pathway:</b>	Apoptosis; Cell Cycle/DNA Damage; Metabolic Enzyme/Protease		
<b>Storage:</b>	Powder	-20°C	3 years
		4°C	2 years
	In solvent	-80°C	6 months
		-20°C	1 month



### SOLVENT & SOLUBILITY

<b>In Vitro</b>	DMSO : 100 mg/mL (293.79 mM; Need ultrasonic)			
		Solvent Concentration	Mass	
			1 mg	5 mg
			10 mg	
<b>Preparing Stock Solutions</b>	<b>1 mM</b>	2.9379 mL	14.6895 mL	29.3789 mL
	<b>5 mM</b>	0.5876 mL	2.9379 mL	5.8758 mL
	<b>10 mM</b>	0.2938 mL	1.4689 mL	2.9379 mL
Please refer to the solubility information to select the appropriate solvent.				
<b>In Vivo</b>	1. Add each solvent one by one: 10% DMSO >> 90% (20% SBE-β-CD in saline) Solubility: ≥ 2.5 mg/mL (7.34 mM); Clear solution			

### BIOLOGICAL ACTIVITY

<b>Description</b>	E64FC26 is a potent pan-inhibitor of the protein disulfide isomerase (PDI) family, with IC <sub>50</sub> s of 1.9, 20.9, 25.9, 16.3, and 25.4 μM against PDIA1, PDIA3, PDIA4, TXNDC5, and PDIA6, respectively. E64FC26 shows anti-myeloma activity <sup>[1]</sup> .		
<b>In Vitro</b>	E64FC26 (0.01-100 μM; 24 hours) shows anti-MM activity, with an EC <sub>50</sub> of 0.59 μM <sup>[1]</sup> . E64FC26 is more cytotoxic against a genetically diverse panel of multiple myeloma (MM) cell lines (KMS11, OPM2, MM.1S BzR, MM.1S, SA-13, U266 BzR, ANBL6, KMS12PE, U266, 8226 DxR, 8226 BzR, KMS12BM, H929, 8226 cells) when compared to non-malignant cells <sup>[1]</sup> . MCE has not independently confirmed the accuracy of these methods. They are for reference only.		
	Cell Viability Assay <sup>[1]</sup>		
	Cell Line:	MM.1S BzR cells	
Concentration:	0.01, 0.1, 1, 10, 100 μM		

	<table border="1"> <tr> <td>Incubation Time:</td> <td>24 hours</td> </tr> <tr> <td>Result:</td> <td>Showed anti-MM activity , with an EC<sub>50</sub> of 0.59 μM.</td> </tr> </table>	Incubation Time:	24 hours	Result:	Showed anti-MM activity , with an EC <sub>50</sub> of 0.59 μM.				
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<b>In Vivo</b>	<p>E64FC26 (2 mg/ kg; i.p.; three days a week for 7days) shows anti-MM effect in NSG mice model, and increases median survival by 2 weeks<sup>[1]</sup>.</p> <p>?The combination of E64FC26 and Bortezomib produced the greatest improvement in survival, extending the median survival by 20 days<sup>[1]</sup>.</p> <p>?Pharmacokinetic of E64FC26 was measured in CD-1 mice. E64FC26 was administered i.v. (2 mg/kg; gray tracing) or p.o. (5 mg/ kg; blue tracing) and plasma drug concentrations were measured over a 24 h period. In CD-1 mice demonstrated adequate oral bioavailability of 34% with systemic exposure approaching a maximum concentration (C<sub>max</sub>) of 400 nM after a single oral dose of 5 mg/kg with a terminal half-life of 9.5 h<sup>[1]</sup>.</p> <p>?Vk*MYC transgenic mice are treated with E64FC26 (2 mg/kg, i.p., 3 days/week) for two consecutive weeks. E64FC26 treatment induces an immediate anti-MM response, decreasing serum M-protein in all mice by an average of 33 ± 7.9%<sup>[1]</sup>. MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p> <table border="1"> <tr> <td>Animal Model:</td> <td>NOD-SCID IL2Rγ<sup>-/-</sup> (NSG) mice (bearing MM.1S cells)<sup>[1]</sup></td> </tr> <tr> <td>Dosage:</td> <td>2 mg/ kg</td> </tr> <tr> <td>Administration:</td> <td>i.p.; three days a week for 7days</td> </tr> <tr> <td>Result:</td> <td>Showed a clear anti-MM effect in this model also, increasing median survival by 2 weeks.</td> </tr> </table>	Animal Model:	NOD-SCID IL2Rγ <sup>-/-</sup> (NSG) mice (bearing MM.1S cells) <sup>[1]</sup>	Dosage:	2 mg/ kg	Administration:	i.p.; three days a week for 7days	Result:	Showed a clear anti-MM effect in this model also, increasing median survival by 2 weeks.
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Administration:	i.p.; three days a week for 7days								
Result:	Showed a clear anti-MM effect in this model also, increasing median survival by 2 weeks.								

## REFERENCES

[1]. Robinson RM, et al. Inhibitors of the protein disulfide isomerase family for the treatment of multiple myeloma. *Leukemia*. 2019 Apr;33(4):1011-1022.

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

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