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Product Data Sheet

Icerguastat

Cat. No.: HY-111022 CAS No.: 951441-04-6 Molecular Formula: $C_{g}H_{g}ClN_{d}$ Molecular Weight: 196.64 Target: Phosphatase

Pathway: Metabolic Enzyme/Protease

Storage: 4°C, protect from light

* In solvent: -80°C, 6 months; -20°C, 1 month (protect from light)

SOLVENT & SOLUBILITY

In Vitro

DMSO: 50 mg/mL (254.27 mM; Need ultrasonic)

Preparing Stock Solutions	Solvent Mass Concentration	1 mg	5 mg	10 mg
	1 mM	5.0854 mL	25.4272 mL	50.8544 mL
	5 mM	1.0171 mL	5.0854 mL	10.1709 mL
	10 mM	0.5085 mL	2.5427 mL	5.0854 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: ≥ 2.08 mg/mL (10.58 mM); Clear solution
- 2. Add each solvent one by one: 10% DMSO >> 90% (20% SBE-β-CD in saline) Solubility: 2.08 mg/mL (10.58 mM); Suspended solution; Need ultrasonic

BIOLOGICAL ACTIVITY

Description	Icerguastat (Sephin1), a derivative of Guanabenz lacking the α 2-adrenergic activity, is a selective inhibitor of the phosphatase regulatory subunit PPP1R15A (R15A). Icerguastat inhibits eIF2 α dephosphorylation, thereby prolonging the protective response. Anti-prion effect ^{[1][2][3]} .
In Vitro	Icerguastat (5 μ M) prolongs eIF2 α phosphorylation in oligodendrocytes under stress ^[1] .

Icerguastat (Sephin1) (selective inhibitor of a holophosphatase), safely and selectively inhibits a regulatory subunit of

protein phosphatase 1 in vivo. Icerguastat selectively binds and inhibits the stress-induced PPP1R15A, but not the related and constitutive PPP1R15B, to prolong the benefit of an adaptive phospho-signaling pathway, protecting cells from otherwise lethal protein misfolding stress^[2].

MCE has not independently confirmed the accuracy of these methods. They are for reference only.

In Vivo

Icerguastat (4-8 mg/kg; i.p.; daily for 35 days) delays the onset of EAE (experimental autoimmune encephalomyelitis)^[1]. Icerguastat (100 μ g; i.p.) prolongs the survival of prion-infected mice^[3].

MCE has not independently confirmed the accuracy of these methods. They are for reference only.

Animal Model:	C57BL/6J female mice immunized with MOG35-55/CFA to induce chronic EAE ^[1]	
Dosage:	4 mg/kg, 8 mg/kg	
Administration:	I.p.; daily for 35 days	
Result:	Significantly delayed clinical disease onset with both dosages, but to a greater extent with the 8 mg/kg treatment.	
Animal Model:	Five-week-old female FVB mice (intracerebrally with mouse-adapted RML prions) ^[3]	
Dosage:	100 μg	
Administration:	I.p.; 3 times per week for 60 days, after 60 days of treatment, the treatment was reduced to two i.p. injections per week for another 20 days.	
Result:	Significantly prolonged survival of prion-infected mice.	

REFERENCES

- [1]. Chen Y, et al. Sephin1, which prolongs the integrated stress response, is a promising therapeutic for multiple sclerosis. Brain. 2019;142(2):344-361.
- [2]. Das I, et al. Preventing proteostasis diseases by selective inhibition of a phosphatase regulatory subunit. Science. 2015;348(6231):239-242.
- [3]. Thapa S, et al. Sephin1 Reduces Prion Infection in Prion-Infected Cells and Animal Model. Mol Neurobiol. 2020;57(5):2206-2219.

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

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