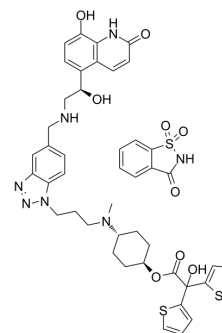


## Navafenterol saccharinate

|                           |   |
|---------------------------|---|
| <b>Cat. No.:</b>          | HY-120802A  |
| <b>CAS No.:</b>           | 1648550-37-1  |
| <b>Molecular Formula:</b> | C <sub>45</sub> H <sub>47</sub> N <sub>7</sub> O <sub>9</sub> S <sub>3</sub>              |
| <b>Molecular Weight:</b>  | 926.09  |
| <b>Target:</b>            | mAChR; Adrenergic Receptor  |
| <b>Pathway:</b>           | GPCR/G Protein; Neuronal Signaling  |
| <b>Storage:</b>           | Please store the product under the recommended conditions in the Certificate of Analysis. |



### BIOLOGICAL ACTIVITY

|                    |   |               |  |         |                                 |                 |                         |         |  |
|--------------------|---|---------------|--|---------|---------------------------------|-----------------|-------------------------|---------|--|
| <b>Description</b> | <p>Navafenterol (AZD-8871) saccharinate is an inhaled dual-acting, potent, selective, and long-lasting M3-antagonist/<math>\beta</math>2-agonist (MABA) with long-lasting effects and favorable safety profile. The pIC<sub>50</sub> is 9.5 for human M3 receptor, and the pEC<sub>50</sub> is 9.5 for <math>\beta</math>2-adrenoceptor. Navafenterol saccharinate can be used for the research of chronic obstructive pulmonary disease (COPD). Bronchoprotective and antisialagogue effects. Favorable cardiovascular profile<sup>[1]</sup>.</p>  |               |  |         |                                 |                 |                         |         |  |
| <b>In Vitro</b>    | <p>The pIC<sub>50</sub> values of Navafenterol (AZD-8871) at the human M1, M2, M3, M4, and M5 receptor are 9.9, 9.9, 9.5, 10.4, and 8.8, respectively<sup>[1]</sup>.</p> <p>pEC<sub>50</sub> values of Navafenterol at the <math>\beta</math>1, <math>\beta</math>2, and <math>\beta</math>3 adrenoceptor are 9.0, 9.5, and 8.7, respectively. It is selective for the <math>\beta</math>2-adrenoceptor over the <math>\beta</math>1 and <math>\beta</math>3 subtypes (3- and 6-fold, respectively)<sup>[1]</sup>.</p> <p>Navafenterol shows kinetic selectivity for the M3 (half-life: 4.97 hours) over the M2 receptor (half-life: 0.46 hour)<sup>[1]</sup>.</p> <p>Navafenterol shows dual antimuscarinic and <math>\beta</math>2-adrenoceptor functional activity in isolated guinea pig tissue (pIC<sub>50</sub> in electrically stimulated trachea: 8.6; pEC<sub>50</sub> in spontaneous tone isolated trachea: 8.8, respectively), which are sustained over time<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>Navafenterol (AZD-8871) prevents acetylcholine-induced bronchoconstriction in both guinea pig and dog with minimal effects on salivation and heart rate at doses with bronchoprotective activity. Moreover, AZD8871 shows long-lasting effects in dog, with a bronchoprotective half-life longer than 24 hours. Navafenterol shows dose-proportional bronchoprotective effect, with a nonsignificantly different potency (ID<sub>40</sub> of 0.40 <math>\mu</math>g/kg)<sup>[1]</sup>.</p> <p>MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Animal Model:</td> <td>Male Dunkin Hartley guinea pigs (body weight 340-600 g) bearing bronchoconstriction model<sup>[1]</sup></td> </tr> <tr> <td>Dosage:</td> <td>10, 30, 100, and 300 <math>\mu</math>g/mL</td> </tr> <tr> <td>Administration:</td> <td>Administered by aerosol</td> </tr> <tr> <td>Result:</td> <td>Inhibited the bronchoconstriction in a concentration-response manner with the IC<sub>50</sub> value of 2.1 <math>\mu</math>g/mL.<br/>Exhibited the antisialagogue effect with a maximal inhibition of sialorrhea of 65%<math>\pm</math>11% at 300 <math>\mu</math>g/mL and an estimated IC<sub>50</sub> of 138.4 <math>\mu</math>g/mL.</td> </tr> </table> | Animal Model: | Male Dunkin Hartley guinea pigs (body weight 340-600 g) bearing bronchoconstriction model <sup>[1]</sup> | Dosage: | 10, 30, 100, and 300 $\mu$ g/mL | Administration: | Administered by aerosol | Result: | Inhibited the bronchoconstriction in a concentration-response manner with the IC <sub>50</sub> value of 2.1 $\mu$ g/mL.<br>Exhibited the antisialagogue effect with a maximal inhibition of sialorrhea of 65% $\pm$ 11% at 300 $\mu$ g/mL and an estimated IC <sub>50</sub> of 138.4 $\mu$ g/mL. |
| Animal Model:      | Male Dunkin Hartley guinea pigs (body weight 340-600 g) bearing bronchoconstriction model <sup>[1]</sup>  |               |  |         |                                 |                 |                         |         |  |
| Dosage:            | 10, 30, 100, and 300 $\mu$ g/mL   |               |  |         |                                 |                 |                         |         |  |
| Administration:    | Administered by aerosol   |               |  |         |                                 |                 |                         |         |  |
| Result:            | Inhibited the bronchoconstriction in a concentration-response manner with the IC <sub>50</sub> value of 2.1 $\mu$ g/mL.<br>Exhibited the antisialagogue effect with a maximal inhibition of sialorrhea of 65% $\pm$ 11% at 300 $\mu$ g/mL and an estimated IC <sub>50</sub> of 138.4 $\mu$ g/mL.  |               |  |         |                                 |                 |                         |         |  |

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|-----------------|--|
| Animal Model:   | Male anesthetized Beagle dogs <sup>[1]</sup>   |
| Dosage:         | 0.3, 1, 3, or 10 µg/kg   |
| Administration: | Administered as nebulized liquid aerosols; the administration volume was 3 mL  |
| Result:         | Showed significant effects over 24 hours at all the doses tested (0.3-10 µg/kg).<br>Showed long-lasting effects at 10 µg/kg, with a 79% ± 3.6% of bronchoprotection at 24 hours and a calculated half-life longer than 24 hours. |

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## REFERENCES

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[1]. Josuel Ora, et al. Long-Acting Muscarinic Antagonists Under Investigational to Treat Chronic Obstructive Pulmonary Disease. J Exp Pharmacol. 2020 Dec 8;12:559-574.

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

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