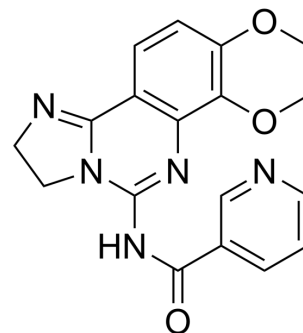


## PIK-90

<b>Cat. No.:</b>	HY-12030		
<b>CAS No.:</b>	677338-12-4		
<b>Molecular Formula:</b>	C <sub>18</sub> H <sub>17</sub> N <sub>5</sub> O <sub>3</sub>		
<b>Molecular Weight:</b>	351		
<b>Target:</b>	PI3K; DNA-PK		
<b>Pathway:</b>	PI3K/Akt/mTOR; Cell Cycle/DNA Damage		
<b>Storage:</b>	Powder	-20°C	3 years
		4°C	2 years
	In solvent	-80°C	2 years
		-20°C	1 year



## SOLVENT & SOLUBILITY

<b>In Vitro</b>	DMSO : 6.67 mg/mL (19.00 mM; ultrasonic and adjust pH to 2 with HCl)				
		Solvent Concentration	Mass 1 mg	5 mg	10 mg
	<b>Preparing Stock Solutions</b>	1 mM	2.8490 mL	14.2450 mL	28.4900 mL
		5 mM	0.5698 mL	2.8490 mL	5.6980 mL
10 mM		0.2849 mL	1.4245 mL	2.8490 mL	
Please refer to the solubility information to select the appropriate solvent.					
<b>In Vivo</b>	<ol style="list-style-type: none"> <li>Add each solvent one by one: 10% DMSO &gt;&gt; 40% PEG300 &gt;&gt; 5% Tween-80 &gt;&gt; 45% saline Solubility: ≥ 0.67 mg/mL (1.91 mM); Clear solution</li> <li>Add each solvent one by one: 10% DMSO &gt;&gt; 90% (20% SBE-β-CD in saline) Solubility: ≥ 0.67 mg/mL (1.91 mM); Clear solution</li> <li>Add each solvent one by one: 10% DMSO &gt;&gt; 90% corn oil Solubility: ≥ 0.67 mg/mL (1.91 mM); Clear solution</li> </ol>				

## BIOLOGICAL ACTIVITY

<b>Description</b>	PIK-90 is a DNA-PK and PI3K inhibitor, which inhibits p110α, p110γ and DNA-PK with IC <sub>50</sub> s of 11, 18 and 13 nM, respectively.			
<b>IC<sub>50</sub> &amp; Target</b>	p110α 11 nM (IC <sub>50</sub> )	p110γ 18 nM (IC <sub>50</sub> )	p110δ 58 nM (IC <sub>50</sub> )	p110β 350 nM (IC <sub>50</sub> )
	hsVPS34 830 nM (IC <sub>50</sub> )	PI3KC2β 64 nM (IC <sub>50</sub> )	PI3KC2α 47 nM (IC <sub>50</sub> )	DNA-PK 13 nM (IC <sub>50</sub> )

	ATM 610 nM (IC <sub>50</sub> )	PI4KIII $\alpha$ 830 nM (IC <sub>50</sub> )	PI4KIII $\beta$ 3.1 $\mu$ M (IC <sub>50</sub> )	mTORC1 1.05 $\mu$ M (IC <sub>50</sub> )
	ATR 15 $\mu$ M (IC <sub>50</sub> )			
<b>In Vitro</b>	<p>PIK-90 also inhibits p110<math>\beta</math>, p110<math>\delta</math>, PI3KC2<math>\alpha</math>, PI3KC2<math>\beta</math>, hsVPS34, PI4KIII<math>\alpha</math>, PI4KIII<math>\beta</math>, ATR, ATM and mTORC1 with IC<sub>50</sub>s of 350 nM, 58 nM, 47 nM, 64 nM, 830 nM, 830 nM, 3.1 <math>\mu</math>M, 15 <math>\mu</math>M, 610 nM and 1.05 <math>\mu</math>M, respectively<sup>[1]</sup>. To determine the effects of PIK-90 on chronic lymphocytic leukemia (CLL) cell viability, CLL cells from different patients are incubated with various concentrations of PIK-90 (1 <math>\mu</math>M and 10 <math>\mu</math>M) for 24, 48, and 72 hours. PIK-90 reveals the strong apoptosis-inducing effects at both concentrations and at all different time points. Using a concentration of 10 <math>\mu</math>M, PIK-90 reduces the viability of CLL cells to 51.1% plus or minus 6.6% at 24 hours, whereas 1 <math>\mu</math>M PIK-90 reduces the viability to 77.8% plus or minus 6.4%<sup>[2]</sup>. MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p>			
<b>In Vivo</b>	<p>To test the efficacy of Roscovitine and PIK-90 in vivo, GBM43 cells are implanted s.c. into nude mice. Mice with established tumors are randomized into four treatment groups: vehicle (PBS:H<sub>2</sub>O), Roscovitine, PIK-90, or PIK-90 plus Roscovitine. After 12 d of treatment, both Roscovitine and PIK-90 show clear single-agent efficacy, with tumor size in mice treated with Roscovitine and PIK-90 in combination significantly smaller than either vehicle or monotherapy-treated controls. Roscovitine is less effective than PIK-90 in blocking proliferation (levels of Ki-67), whereas combination therapy shows essentially additive antiproliferative effects<sup>[3]</sup>. MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p>			

## PROTOCOL

### Cell Assay <sup>[2]</sup>

To determine the viability of CLL B cells, 200  $\mu$ L cells are removed from the wells of a 24-well plate at the indicated time points and incubated for 15 minutes in fluorescence-activated cell sorter buffer (RPMI+0.5% BSA) containing 40 nM 3,3'-dihydroxycarbocyanine iodide (DiOC<sub>6</sub>) and 10  $\mu$ g/mL Propidium iodide (PI). Within 30 minutes, the cells are then analyzed by flow cytometry. Viable cells show high DiOC<sub>6</sub> and low PI fluorescence, whereas apoptotic cells have low DiOC<sub>6</sub> and PI fluorescence; necrotic cells are characterized by low DiOC<sub>6</sub> and high PI fluorescence. The normal PBMCs are also cultured under the same conditions, with or without the various PI3K inhibitors (e.g., PIK-90, 1  $\mu$ M and 10  $\mu$ M), Fludarabine, and with or without stromal cell support, and their viability is also determined by staining with DiOC<sub>6</sub> and PI<sup>[2]</sup>. MCE has not independently confirmed the accuracy of these methods. They are for reference only.

### Animal Administration <sup>[3]</sup>

Mice<sup>[3]</sup>  
Human primary GBM43 cells (10<sup>6</sup>) are injected s.c. just caudal to the left forelimb in 4- to 6-wk-old female *BALB/c nu/nu* mice. After tumors are established (50-100 mm<sup>3</sup>), mice are randomly allocated to daily i.p. treatment with 40 mg/kg PIK-90 (DMSO:H<sub>2</sub>O), 50 mg/kg Roscovitine (DMSO:PBS), 40 mg/kg PIK-90 plus 50 mg/kg Roscovitine, and DMSO:H<sub>2</sub>O:PBS (control). Tumor diameters are measured with calipers at 3-d intervals, and volumes are calculated. MCE has not independently confirmed the accuracy of these methods. They are for reference only.

## CUSTOMER VALIDATION

- Molecules. 2020 Apr 23;25(8):1980.

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## REFERENCES

[1]. Knight ZA, et al. A pharmacological map of the PI3-K family defines a role for p110alpha in insulin signaling. *Cell*. 2006 May 19;125(4):733-47.

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[2]. Niedermeier M, et al. Isoform-selective phosphoinositide 3'-kinase inhibitors inhibit CXCR4 signaling and overcome stromal cell-mediated drug resistance in chronic lymphocytic leukemia: a novel therapeutic approach. *Blood*. 2009 May 28;113(22):5549-57.

[3]. Cheng CK, et al. Dual blockade of lipid and cyclin-dependent kinases induces synthetic lethality in malignant glioma. *Proc Natl Acad Sci U S A*. 2012 Jul 31;109(31):12722-7.

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

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