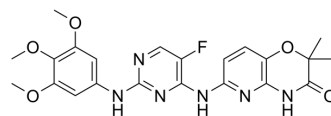


## R406 free base

<b>Cat. No.:</b>	HY-11108		
<b>CAS No.:</b>	841290-80-0		
<b>Molecular Formula:</b>	C <sub>22</sub> H <sub>23</sub> FN <sub>6</sub> O <sub>5</sub>		
<b>Molecular Weight:</b>	470.45		
<b>Target:</b>	Syk; Apoptosis; FLT3		
<b>Pathway:</b>	Protein Tyrosine Kinase/RTK; Apoptosis		
<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 : 25 mg/mL (53.14 mM); ultrasonic and warming and heat to 60°C)				
		Solvent Concentration	Mass 1 mg	5 mg	10 mg
	<b>Preparing Stock Solutions</b>	1 mM	2.1256 mL	10.6281 mL	21.2562 mL
		5 mM	0.4251 mL	2.1256 mL	4.2512 mL
10 mM		0.2126 mL	1.0628 mL	2.1256 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 >> 40% PEG300 >> 5% Tween-80 >> 45% saline Solubility: 2.5 mg/mL (5.31 mM); Suspended solution; Need ultrasonic  2. Add each solvent one by one: 10% DMSO >> 90% corn oil Solubility: ≥ 2.5 mg/mL (5.31 mM); Clear solution				

### BIOLOGICAL ACTIVITY

<b>Description</b>	R406 free base is an orally available and competitive Syk/FLT3 inhibitor for ATP binding with a K <sub>i</sub> of 30 nM, potently inhibits Syk kinase activity in vitro with an IC <sub>50</sub> of 41 nM, measured at an ATP concentration corresponding to its K <sub>m</sub> value. R406 free base reduces immune complex-mediated inflammation <sup>[1]</sup> . R406 free base also inhibits Lyn (IC <sub>50</sub> =63 nM) and Lck (IC <sub>50</sub> =37 nM) <sup>[2]</sup> .
<b>IC<sub>50</sub> &amp; Target</b>	Ki: 30 nM (Syk) <sup>[1]</sup> IC50: 41 nM (Syk) <sup>[1]</sup> FLT3 <sup>[1]</sup> IC50: 63 nM (Lyn), 37 nM (Lck) <sup>[2]</sup>

<b>In Vitro</b>	<p>R406 inhibits adenosine A3 receptor (IC<sub>50</sub>=0.081 μM), adenosine transporter (IC<sub>50</sub>=1.84 μM), and monoamine transporter (IC<sub>50</sub>=2.74 μM)<sup>[1]</sup>.</p> <p>R406 inhibits Huh7 hepatocyte, A549 epithelial, and H1299 lung cancer lines with EC<sub>50</sub>s of 15.1, 2.9 and 6.3 μM, respectively [1].</p> <p>R406 inhibits phosphorylation of Syk substrate LAT in mast cells and BLNK/SLP65 in B cells<sup>[1]</sup>.</p> <p>MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p> <p>Western Blot Analysis<sup>[1]</sup></p>								
	<table border="1"> <tr> <td>Cell Line:</td> <td>Cultured human mast cells (CHMC)</td> </tr> <tr> <td>Concentration:</td> <td>0.016, 0.08, 0.4, 2 μM</td> </tr> <tr> <td>Incubation Time:</td> <td>40 minutes</td> </tr> <tr> <td>Result:</td> <td>Inhibited all other kinases tested at 5 to 100 fold less potency than Syk as judged by phosphorylation of target proteins.</td> </tr> </table>	Cell Line:	Cultured human mast cells (CHMC)	Concentration:	0.016, 0.08, 0.4, 2 μM	Incubation Time:	40 minutes	Result:	Inhibited all other kinases tested at 5 to 100 fold less potency than Syk as judged by phosphorylation of target proteins.
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<b>In Vivo</b>	<p>R406 (5 and 10 mg/kg) shows efficacy in the amelioration of the Arthus reaction and in reducing clinical symptoms in the collagen antibody-induced arthritis (CAIA) and K/BxN models of rheumatoid arthritis (RA). Immune complex (IC)-mediated inflammation is reduced by inhibition of Fc receptor signaling with R406<sup>[1]</sup>.</p> <p>MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p>								
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## CUSTOMER VALIDATION

- Cell. 2018 Oct 4;175(2):442-457.e23.
- Sci Transl Med. 2018 Jul 18;10(450):eaaq1093.
- Nat Commun. 2022 Apr 19;13(1):2136.
- Arthritis Rheumatol. 2018 Sep;70(9):1419-1428.
- Theranostics. 2021 May 24;11(15):7308-7321.

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## REFERENCES

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[1]. Sylvia Braselmann, et al. R406, an orally available spleen tyrosine kinase inhibitor blocks fc receptor signaling and reduces immune complex-mediated inflammation. J Pharmacol Exp Ther. 2006 Dec;319(3):998-1008.

[2]. Hoon-Suk Cha , et al. A novel spleen tyrosine kinase inhibitor blocks c-Jun N-terminal kinase-mediated gene expression in synoviocytes. J Pharmacol Exp Ther. 2006 May;317(2):571-8.

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

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