Inhibitors

YK-4-279

Cat. No.: HY-14507 CAS No.: 1037184-44-3 Molecular Formula: $C_{17}H_{13}Cl_2NO_4$

Molecular Weight: 366.2

Target: DNA/RNA Synthesis; Apoptosis Pathway: Cell Cycle/DNA Damage; Apoptosis

Storage: Powder -20°C 3 years 4°C 2 years

In solvent -80°C 2 years

> -20°C 1 year

Product Data Sheet

SOLVENT & SOLUBILITY

In Vitro

DMSO: 25 mg/mL (68.27 mM; Need ultrasonic)

Preparing Stock Solutions	Solvent Mass Concentration	1 mg	5 mg	10 mg
	1 mM	2.7307 mL	13.6537 mL	27.3075 mL
	5 mM	0.5461 mL	2.7307 mL	5.4615 mL
	10 mM	0.2731 mL	1.3654 mL	2.7307 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: ≥ 2.5 mg/mL (6.83 mM); Clear solution
- 2. Add each solvent one by one: 10% DMSO >> 90% (20% SBE- β -CD in saline) Solubility: ≥ 2.5 mg/mL (6.83 mM); Clear solution
- 3. Add each solvent one by one: 10% DMSO >> 90% corn oil Solubility: ≥ 2.5 mg/mL (6.83 mM); Clear solution

BIOLOGICAL ACTIVITY

Description	YK-4-279 blocks RNA Helicase A (RHA) binding with EWS-FLI1 (oncogenic protein). YK-4-279 induces apoptosis and shows anti-proliferation activities towards various cancer cells. YK-4-279 has a chiral center and it can be separated into two enantiomers. YK-4-279 can be used for the research of cancer ^{[1][2]} .
IC ₅₀ & Target	IC50: 0.94 μM (TC32), 1.83 μM (TC71), 1.03 μM (RDES), 0.33 μM (SKES), 0.94 μM (MMH-ES-1), 0.60 μM (STA-ET 7.2), 1.46 μM (A4573), 4.95 μM (PC3), 22.82 μM (MCF7), 0.82 μM (MDA-MB-231), 1.514 μM (PANC1), 14.28 μM (ASPC1) $^{[2]}$

III VILIO	In	Vitro
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 $YK-4-279~(3-30~\mu\text{M}; overight)~dissociates~EWS-FLI1~from~RHA~in~Ewing's~sarcoma~family~tumor~(ESFT)~cells~\cite{13}.$

YK-4-279 (3-30 $\mu\text{M};$ 14 h) nearly eliminates cyclin D1 in TC32 cells $^{[1]}.$

YK-4-279 (3-30 μ M; 72 h) potently and specifically inhibits ESFTs^[1].

YK-4-279 (50 μ M; 6 h) induces substantial apoptosis of ESFT cells^[1].

YK-4-279 (0.1-30 μM; 72 h) inhibits the growth of ESFT, prostate, breast and pancreatic cancer cells^[2].

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

${\sf Cell\ Viability\ Assay}^{[1]}$

Cell Line:	TC32, ES925, GUES1, TC71, A673, A4573, CHP100, PANC1, ASP1, MCF-7, MDA-MB-231, PC-3, HFK and HEC cell lines	
Concentration:	3-30 μΜ	
Incubation Time:	72 h	
Result:	Inhibited cell growth with IC $_{50} s$ of 900 nM, 1 μM and 8 μM for TC32, ES925 and GUES1 cells, respectively.	
Apoptosis Analysis ^[1]		
Cell Line:	TC32, HEK, HEC and HFK cell lines	
Concentration:	50 μΜ	
Incubation Time:	6 h	
Result:	Induced apoptosis of ESFT cells and increased caspase-3 activity.	
Cell Viability Assay ^[2]		
Cell Line:	TC32, TC71, RDES, SKES, MMH-ES-1, STA-ET 7.2, A4573, PC3, MCF7, MDA-MB-231, PANC1 and ASPC1cell lines	
Concentration:	0.1-30 μΜ	
Incubation Time:	72 h	
Result:	Inhibited cell growth with IC ₅₀ s of 0.94, 1.83, 1.03, 0.33, 0.94, 0.60, 1.46, 4.95, 22.82, 0.82, 1.514 and 14.28 μM for TC32, TC71, RDES, SKES, MMH-ES-1, STA-ET 7.2, A4573, PC3, MCF7,	

In Vivo

YK-4-279 (1.5 mg; i.p. once) inhibited ESFT tumor growth^[1].

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MDA-MB-231, PANC1 and ASPC1 cells, respectively.

Animal Model:	Beige mice with orthotopic ESFT and ESFT xenografts ^[1]	
Dosage:	1.5 mg	
Administration:	Intraperitoneal injection; 1.5 mg once	
Result:	Effectively redeced tumor volume of CHP100 and ESFT xenografts (TC71 and CHP100).	

CUSTOMER VALIDATION

- Cancer Lett. 2022 Nov 30;216028.
- NPJ Precis Oncol. 2023 May 18;7(1):44.
- J Mol Med (Berl). 2019 Aug;97(8):1183-1193.
- Int J Med Sci. 2017 Apr 7;14(4):356-366.
- Research Square Preprint. 2023 May 31.

Jul;15(7):750-6.

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REFERENCES [1]. Erkizan HV, et al. A small molecule blocking oncogenic protein EWS-FLI1 interaction with RNA helicase A inhibits growth of Ewing's sarcoma. Nat Med. 2009

[2]. Barber-Rotenberg JS, et al. Single enantiomer of YK-4-279 demonstrates specificity in targeting the oncogene EWS-FLI1. Oncotarget. 2012 Feb;3(2):172-82.

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

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