

Product Data Sheet

Atrasentan

Cat. No.: HY-15403 CAS No.: 173937-91-2 Molecular Formula: $C_{29}H_{38}N_2O_6S$ Molecular Weight: 542.69

Target: Endothelin Receptor
Pathway: GPCR/G Protein

Storage: Powder -20°C 3 years

In solvent -80°C 6 months

-20°C 1 month

SOLVENT & SOLUBILITY

In Vitro

DMSO: 100 mg/mL (184.27 mM; Need ultrasonic)

Preparing Stock Solutions	Solvent Mass Concentration	1 mg	5 mg	10 mg
	1 mM	1.8427 mL	9.2134 mL	18.4267 mL
	5 mM	0.3685 mL	1.8427 mL	3.6853 mL
	10 mM	0.1843 mL	0.9213 mL	1.8427 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 (4.61 mM); Clear solution; Need ultrasonic
- 2. Add each solvent one by one: 10% DMSO >> 90% (20% SBE- β -CD in saline) Solubility: 2.5 mg/mL (4.61 mM); Clear solution; Need ultrasonic
- Add each solvent one by one: 10% DMSO >> 90% corn oil
 Solubility: 2.5 mg/mL (4.61 mM); Clear solution; Need ultrasonic

BIOLOGICAL ACTIVITY

Description	Atrasentan (ABT-627) is an endothelin receptor antagonist with IC $_{50}$ of 0.0551 nM for ET $_{\rm A}^{[1]}$.		
IC ₅₀ & Target	IC50: 0.055 nM (ET _A)		
In Vitro	Atrasentan (ABT-627, 0-50 μ M) significantly inhibits LNCaP and C4-2b prostate cancer cell growth. ABT-627 in conbination with Taxotere elicits a significantly greater loss of viable prostate cancer cells relative to either agent alone and shows greater degree of down-regulation of the NF- κ B DNA binding activity ^[2] . Atrasentan profoundly induces several CYPs and drug transporters (e.g. 12-fold induction of CYP3A4 at 50 μ M). It is a moderate P-gp inhibitor (IC50 in P388/dx cells=15.1±1.6 μ		

	M) and a weak BCRP inhibitor (IC $_{50}$ in MDCKII-BCRP cells=59.8±11 μ M) ^[3] . MCE has not independently confirmed the accuracy of these methods. They are for reference only.
In Vivo	Atrasentan (3 mg/kg, p.o.) inhibits the pressor response induced by big endothelin-1 (1 nmol/kg) in pithed rats ^[1] . Aatrasentan (ABT-627, 10 mg/kg, i.p.) as well as Taxotere alone inhibited the C4-2b tumor growth within the bone environment to some extent in the SCID-hu model ^[2] . MCE has not independently confirmed the accuracy of these methods. They are for reference only.

PROTOCOL

Kinase Assay [2]

Cells are incubated and treated with Atrasentan. They are then washed twice with PBS and lysed in ice-cold lysis buffer [20 mM Tris (pH 7.4), 150 mM NaCl, 1% Triton X-100, 1 mM EDTA, 1 mM EGTA, 2.5 mM sodium PPi, 1 mM β -glycerophosphate, 1 mM sodium orthovanadate, 1 μ g/mL leupeptin, and 1 mM PMSF]. The extracts are centrifuged to remove cellular debris, and the protein content of the supernatants is determined using the bicinchoninic acid (BCA) protein assay reagent. Proteins (150 μ g) are incubated with gentle rocking at 4°C overnight with immobilized Akt antibody cross-linked to agarose hydrazide beads. After the Akt is selectively immunoprecipitated from the cell lysates, the immunoprecipitated products are washed twice with lysis buffer and twice with kinase assay buffer [25 mM Tris (pH 7.5), 10 mM MgCl₂, 5 mM β -glycerol phosphate, 0.1 mM sodium orthovanadate, 2 mM DTT] and then resuspended in 40 μ L of kinase assay buffer containing 200 μ M ATP and 1 μ g GSK-3 α / β fusion protein. The kinase assay reaction is allowed to proceed at 30°C for 30 min and stopped by the addition of Lamelli SDS sample buffer. Reaction products are resolved by 10% SDS-PAGE, followed by Western blotting with anti-phosphorylated GSK-3 α / β antibody. For analysis of the total amount of Akt, 40 μ g of protein from the lysate samples are resolved by 10% SDS-PAGE, followed by Western blotting with anti-Akt antibody.

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Cell Assay [2]

All three prostate cancer cell lines (LNCaP, C4-2b, and PC-3 cells) are seeded at a density of 3×10^3 cells per well in 96-well microtiter culture plates. After overnight incubation, the medium is removed and replaced with a fresh medium containing different concentrations of ABT-627 (0-50 μ M) diluted from a 10-mM stock. After 72 h of incubation with drug, 20 μ L of MTT solution (5 mg/mL in PBS) are added to each well and incubated further for 2 h. Upon termination, the supernatant is aspirated and the MTT formazan formed by metabolically viable cells is dissolved in isopropanol (100 μ L). The plates are mixed for 30 min on a gyratory shaker, and the absorbance is measured at 595 nm on a plate reader. MCE has not independently confirmed the accuracy of these methods. They are for reference only.

Animal Administration [1]

YM598 (0.3, 1, and 3 mg/kg), atrasentan (0.3, 1, and 3 mg/kg), or 0.5% methyl cellulose as vehicle is orally administered to rats with a dosing cannula. Dosing volume of the test substances and vehicle is set at 5 mL/kg. Approximately 20 min after administration of compounds, the rats are anesthetized with sodium pentobarbital, and then pithed and ventilated 30 min after dosing. Approximately 1 h after oral administration of compounds, big endothelin-1 (1 nmol/kg) is intravenously administered, and blood pressure is measured. In these two experiments, the dose of test compound that cause 50% inhibition (ID_{50}) of the big endothelin-1-induced increase in diastolic blood pressure is determined by linear regression analysis.

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CUSTOMER VALIDATION

- Commun Biol. 2022 Jul 28;5(1):750.
- Eur J Pharmacol. 2019 Mar 12;852:142-150.
- Mol Immunol. 2019 Oct:114:10-18.
- J Vet Intern Med. 2015 Nov;29(6):1584-94.
- Department Veterinary Clinical Medicine. University of Illinois. 2015.

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REFERENCES

- [1]. Yuyama H, et al. Superiority of YM598 over atrasentan as a selective endothelin ETA receptor antagonist. Eur J Pharmacol. 2004 Sep 13;498(1-3):171-7.
- [2]. Banerjee S, et al. In vitro and in vivo molecular evidence for better therapeutic efficacy of ABT-627 and taxotere combination in prostate cancer. Cancer Res. 2007 Apr 15;67(8):3818-26.
- [3]. Weiss J, et al. Interaction potential of the endothelin-A receptor antagonist atrasentan with drug transporters and drug-metabolising enzymes assessed in vitro. Cancer Chemother Pharmacol. 2011 Oct;68(4):1093-8.

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

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