# **Product** Data Sheet



# **Darolutamide**

Cat. No.: HY-16985 CAS No.: 1297538-32-9 Molecular Formula:  $\mathsf{C}_{19}\mathsf{H}_{19}\mathsf{CIN}_{6}\mathsf{O}_{2}$ 

Molecular Weight: 398.85

Target: Androgen Receptor

Pathway: Vitamin D Related/Nuclear Receptor

-20°C Storage: Powder

3 years 2 years

In solvent -80°C 1 year

> -20°C 6 months

## **SOLVENT & SOLUBILITY**

In Vitro

DMSO: 100 mg/mL (250.72 mM; Need ultrasonic)

Preparing Stock Solutions	Solvent Mass Concentration	1 mg	5 mg	10 mg
	1 mM	2.5072 mL	12.5360 mL	25.0721 mL
	5 mM	0.5014 mL	2.5072 mL	5.0144 mL
	10 mM	0.2507 mL	1.2536 mL	2.5072 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: ≥ 2.08 mg/mL (5.21 mM); Clear solution
- 2. Add each solvent one by one: 10% DMSO >> 90% (20% SBE-β-CD in saline) Solubility: ≥ 2.08 mg/mL (5.21 mM); Clear solution
- 3. Add each solvent one by one: 10% DMSO >> 90% corn oil Solubility: ≥ 2.08 mg/mL (5.21 mM); Clear solution

## **BIOLOGICAL ACTIVITY**

Description Darolutamide (ODM-201;BAY-1841788) is a potent androgen receptor (AR) antagonist with an IC<sub>50</sub> of 26 nM in in vitro assay.

IC50: 26 nM (AR-HEK293 cells, AR)<sup>[1]</sup> IC<sub>50</sub> & Target

In Vitro In competitive AR binding assays, the inhibition constant (Ki) values of Darolutamide (ODM-201) are 11 nM. ODM-201and ORM-15341 suppresse androgen-induced cell proliferation more efficaciously than ARN-509, IC50 values being 230 and 170 nM for Darolutamide and ORM-15341 vs. 420 nM for ARN-509. Darolutamide has no effect on the viability of AR-negative cell lines tested, DU-145 prostate cancer cells and H1581 lung cancer cells confirming that the antiproliferative properties of Darolutamide and ORM-15341 are specific to AR-dependent PC cells<sup>[1]</sup>.

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

In Vivo

Darolutamide (ODM-201) showes a significant antitumor activity with both doses, 50 mg/kg twice daily being more efficacious compared to castrated, untreated mice (p<0.001), which also showes inhibition of tumor growth (p<0.05) vs. castrated, untreated mice. Further, there is no sign of treatment-related toxicities; the body weights of mice treated with Darolutamide twice daily do not decrease significantly during the treatment<sup>[1]</sup>.

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#### **PROTOCOL**

Cell Assay [1]

To study the antiproliferative properties of Darolutamide and ORM-15341, the VCaP cell line originally derived from a bone metastasis of a CRPC patient is used. The VCaP cell line is characterized with endogenous AR gene amplification and AR overexpression30, typical for CRPC. VCaP cells are cultured in RPMI-1640 medium and supplemented with 10% fetal bovine serum (FBS), 100 UI/mL penicillin, 100  $\mu$  g/mL streptomycin, and 4 mM VCaP<sup>[1]</sup>.

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Animal
Administration [1]

To elucidate the in vivo efficacy of Darolutamide in a CRPC mouse model, castrated male nude mice with subcutaneously injected VCaP cells are treated orally with ODM-201 (50 mg/kg) once (qd) or twice daily (bid), or with enzalutamide (20 mg/kg, qd) for 37 days. The dose for enzalutamide is selected based on previously published studies9 and our pharmacokinetic (PK) analyses which reveales that in mice the systemic exposure (AUC0-24) for this dose of enzalutamide is 2.5 times higher than that for Darolutamide (50 mg/kg, bid). Moreover, enzalutamide exhibited a long plasma half-life (18.3 hours) while the half-life of Darolutamide in mice is not optimal (1.6 hours) supporting once daily dosing for enzalutamide and higher dose and more frequent dosing for ODM-201<sup>[1]</sup>.

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

## **CUSTOMER VALIDATION**

- Br J Cancer. 2022 May 26.
- Mol Oncol. 2024 Apr 10.
- J Dermatol Sci. 2023 Aug 29.
- Sci Rep. 2019 Sep 24;9(1):13786.

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#### **REFERENCES**

[1]. Moilanen AM, et al. Discovery of ODM-201, a new-generation androgen receptor inhibitor targeting resistance mechanisms to androgen signaling-directed prostate cancer therapies. Sci Rep. 2015 Jul 3;5:12007. doi: 10.1038/srep12007.

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

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