ISO-1

Cat. No.:	HY-16692		
CAS No.:	478336-92-4		
Molecular Formula:	C ₁₂ H ₁₃ NO ₄		
Molecular Weight:	235.24		
Target:	Macrophage migration inhibitory factor (MIF)		
Pathway:	Immunology/Inflammation		
Storage:	Powder	-20°C	3 years
		4°C	2 years
	In solvent	-80°C	2 years
		-20°C	1 year

SOLVENT & SOLUBILITY

In Vitro	Ethanol : 100 mg/mL (425.10 mM; Need ultrasonic) DMSO : 50 mg/mL (212.55 mM; Need ultrasonic)						
Preparing Stock Solutions	Preparing Stock Solutions	Solvent Mass Concentration	1 mg	5 mg	10 mg		
		1 mM	4.2510 mL	21.2549 mL	42.5098 mL		
	5 mM	0.8502 mL	4.2510 mL	8.5020 mL			
		10 mM	0.4251 mL	2.1255 mL	4.2510 mL		
	Please refer to the solubility information to select the appropriate solvent.						
In Vivo	1. Add each solvent one by one: 0.5% CMC-Na/saline water Solubility: 10 mg/mL (42.51 mM): Suspended solution: Need ultrasonic						
	2. Add each solvent one by one: 10% DMSO >> 40% PEG300 >> 5% Tween-80 >> 45% saline Solubility: ≥ 2.5 mg/mL (10.63 mM); Clear solution						
	3. Add each solvent one by one: 10% DMSO >> 90% (20% SBE-β-CD in saline) Solubility: ≥ 2.5 mg/mL (10.63 mM); Clear solution						
	4. Add each solvent one by one: 10% DMSO >> 90% corn oil Solubility: ≥ 2.5 mg/mL (10.63 mM); Clear solution						

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In Vitro	ISO-1 (0.1-20 μM; 16 hours) has a slight inhibitory effect on Cox-2 secretion without the addition of recombinant MIF ^[1] . MCE has not independently confirmed the accuracy of these methods. They are for reference only. Western Blot Analysis ^[1]				
	Cell Line:	RAW 264.7 macrophage cells			
	Concentration:	0.1μΜ⊠1μΜ⊠10μΜ⊠20μΜ			
	Incubation Time:	16 hours			
	Result:	Suppressed Cox-2 secretion.			
In Vivo	ISO-1 (injected intraperitoneally; 3.5-35 mg/kg; twice daily; 2 weeks) improves the survival rate from lethal endotoxemia and shows the anti-inflammatory effect ^[2] . ISO-1 (intraperitoneal injection; 35 mg/kg; twice daily; 3 days) causes a significant reduction in average implant size and decreases Flk1 expression in implants ^[3] . MCE has not independently confirmed the accuracy of these methods. They are for reference only.				
	Animal Model:	C57Bl/6 MIF ^{+/+} and MIF ^{-/-} mice ^[2]			
	Dosage:	3.5-35 mg/kg			
	Administration:	Injected intraperitoneally; 3.5-35 mg/kg; twice a day ; 2 weeks			
	Result:	Was protective against lethal sepsis.			
	Animal Model:	Female C57BL/6-Tg(ACTB-EGFP)1Osb/J mice ^[3]			
	Dosage:	35 mg/kg			
	Administration:	Intraperitoneal injection; 35 mg/kg; twice daily; 3 days			
	Result:	Reduced average endometriotic implant size.			

CUSTOMER VALIDATION

- Immunity. 2023 Oct 10;56(10):2325-2341.e15.
- J Neuroinflammation. 2018 Oct 19;15(1):291.
- Mol Ther Oncolytics. 19 August 2021.
- Int Immunopharmacol. 2021 Apr 3;96:107555.
- Front Cell Dev Biol. 31 December 2021.

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REFERENCES

[1]. Lubetsky JB, et al. The tautomerase active site of macrophage migration inhibitory factor is a potential target for discovery of novel anti-inflammatory agents. J Biol Chem. 2002 Jul 12;277(28):24976-82.

[2]. Al-Abed Y, et al. ISO-1 binding to the tautomerase active site of MIF inhibits its pro-inflammatory activity and increases survival in severe sepsis. J Biol Chem. 2005 Nov

4;280(44):36541-4.

[3]. Nothnick WB, et al. Inhibition of macrophage migration inhibitory factor reduces endometriotic implant size in mice with experimentally induced disease. J Endometr. 2011 Sep 30;3(3):135-142.

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

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