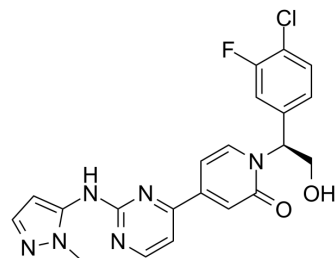


## Ravoxertinib

|                           |  |       |         |
|---------------------------|--|-------|---------|
| <b>Cat. No.:</b>          | HY-15947   |       |         |
| <b>CAS No.:</b>           | 1453848-26-4   |       |         |
| <b>Molecular Formula:</b> | C <sub>21</sub> H <sub>18</sub> ClFN <sub>6</sub> O <sub>2</sub> |       |         |
| <b>Molecular Weight:</b>  | 440.86   |       |         |
| <b>Target:</b>            | ERK  |       |         |
| <b>Pathway:</b>           | MAPK/ERK Pathway; Stem Cell/Wnt                                  |       |         |
| <b>Storage:</b>           | Powder   | -20°C | 3 years |
|                           |  | 4°C   | 2 years |
|                           | In solvent   | -80°C | 2 years |
|                           |  | -20°C | 1 year  |



### SOLVENT & SOLUBILITY

#### In Vitro

DMSO : ≥ 35 mg/mL (79.39 mM)  
 \* "≥" means soluble, but saturation unknown.

| Preparing Stock Solutions | Solvent Concentration | Mass      |            |            |
|---------------------------|-----------------------|-----------|------------|------------|
|                           |                       | 1 mg      | 5 mg       | 10 mg      |
|                           | 1 mM                  | 2.2683 mL | 11.3415 mL | 22.6829 mL |
|                           | 5 mM                  | 0.4537 mL | 2.2683 mL  | 4.5366 mL  |
|                           | 10 mM                 | 0.2268 mL | 1.1341 mL  | 2.2683 mL  |

Please refer to the solubility information to select the appropriate solvent.

#### In Vivo

- Add each solvent one by one: 30% PEG300 >> 70% (10% HP-β-CD in saline)  
Solubility: 5 mg/mL (11.34 mM); Clear solution; Need ultrasonic
- Add each solvent one by one: 5% DMSO >> 40% PEG300 >> 5% Tween-80 >> 50% saline  
Solubility: ≥ 2.5 mg/mL (5.67 mM); Clear solution
- Add each solvent one by one: 10% DMSO >> 40% PEG300 >> 5% Tween-80 >> 45% saline  
Solubility: ≥ 1.67 mg/mL (3.79 mM); Clear solution
- Add each solvent one by one: 10% DMSO >> 90% (20% SBE-β-CD in saline)  
Solubility: ≥ 1.67 mg/mL (3.79 mM); Clear solution
- Add each solvent one by one: 10% DMSO >> 90% corn oil  
Solubility: ≥ 1.67 mg/mL (3.79 mM); Clear solution

### BIOLOGICAL ACTIVITY

#### Description

Ravoxertinib (GDC-0994) is an orally active ERK kinase inhibitor with an IC<sub>50</sub> of 6.1 nM and 3.1 nM for ERK1 and ERK2, respectively.

|                                     |   |                                    |                                    |
|-------------------------------------|---|------------------------------------|------------------------------------|
| <b>IC<sub>50</sub> &amp; Target</b> | ERK2<br>3.1 nM (IC <sub>50</sub> )  | ERK1<br>6.1 nM (IC <sub>50</sub> ) | p-RSK<br>12 nM (IC <sub>50</sub> ) |
| <b>In Vitro</b>                     | <p>Ravoxertinib (GDC-0994) also inhibits p90RSK with an IC<sub>50</sub> of 12 nM<sup>[1]</sup>.</p> <p>Ravoxertinib (GDC-0994) is highly selective for ERK1 and ERK2, with biochemical potency of 1.1 nM and 0.3 nM, respectively [2].</p> <p>Ravoxertinib (GDC0994; 50 nM, 0.5 μM, and 5 μM; 48 hours) decreases the viability of lung adenocarcinoma cell lines (A549, HCC827, HCC4006)<sup>[3]</sup>.</p> <p>MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p> |                                    |                                    |
| <b>In Vivo</b>                      | <p>In CD-1 mice, a 10 mg/kg oral dose of Ravoxertinib (GDC-0994) is sufficient to achieve the desired target coverage for at least 8 h<sup>[1]</sup>. Daily, oral dosing of Ravoxertinib results in significant single-agent activity in multiple in vivo cancer models, including KRAS-mutant and BRAF-mutant human xenograft tumors in mice<sup>[2]</sup>.</p> <p>MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p>   |                                    |                                    |

## PROTOCOL

### Animal Administration <sup>[1]</sup>

Mice<sup>[1]</sup>

PK/PD data for Ravoxertinib (GDC-0994) in the HCT116 mouse xenograft model. HCT116 tumors are established in nude mice to a tumor volume of 400-600 mm<sup>3</sup>. Mice are treated with a single oral dose of 22 at 15, 30, or 100 mg/kg versus vehicle control alone (40% PEG400/60% (10% HPβCD)) follow by tumor and plasma collection at 2, 8, 16, and 24 h postdose. Tumor levels of phosphorylated p90RSK (pRSK) relative total p90RSK (tRSK) are measured by quantitative Western blot and are normalized to vehicle control at 2 h postdose (set to 100%). Plasma and tumor concentrations are measured by LC-MS. MCE has not independently confirmed the accuracy of these methods. They are for reference only.

## CUSTOMER VALIDATION

- Cell. 2018 Sep 20;175(1):186-199.e19.
- Cancer Cell. 2023 Jul 10;41(7):1345-1362.e9.
- Cell Mol Immunol. 2023 Jan 5.
- Nat Metab. 2022 Mar;4(3):374-388.
- Sci Transl Med. 2021 Jan 27;13(578):eaba7308.

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## REFERENCES

[1]. Blake JF, et al. Discovery of (S)-1-(1-(4-Chloro-3-fluorophenyl)-2-hydroxyethyl)-4-(2-((1-methyl-1H-pyrazol-5-yl)amino)pyrimidin-4-yl)pyridin-2(1H)-one (GDC-0994), an Extracellular Signal-Regulated Kinase 1/2 (ERK1/2) Inhibitor in Early Clinical Developme

[2]. Kirk Robarge, et al. Abstract DDT02-03: Discovery of GDC-0994, a potent and selective ERK1/2 inhibitor in early clinical development. Proceedings: AACR Annual Meeting 2014; April 5-9, 2014.

[3]. MICHAEL LAI. Opportunity for Pharmaceutical Intervention in Lung Cancer: Selective Inhibition of JAK1/2 to Eliminate EMT-Derived Mesenchymal Cells.

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

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