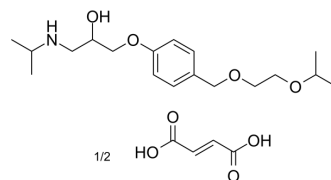


## Bisoprolol hemifumarate

Cat. No.:	HY-B0076
CAS No.:	104344-23-2
Molecular Formula:	C <sub>18</sub> H <sub>31</sub> NO <sub>4</sub> ·1/2C <sub>4</sub> H <sub>4</sub> O <sub>4</sub>
Molecular Weight:	383.48
Target:	Adrenergic Receptor
Pathway:	GPCR/G Protein; Neuronal Signaling
Storage:	4°C, sealed storage, away from moisture * In solvent : -80°C, 6 months; -20°C, 1 month (sealed storage, away from moisture)



### SOLVENT & SOLUBILITY

In Vitro	DMSO : ≥ 50 mg/mL (130.38 mM)																			
	H <sub>2</sub> O : 20 mg/mL (52.15 mM; Need ultrasonic)																			
	* "≥" means soluble, but saturation unknown.																			
Preparing Stock Solutions	<table border="1"> <thead> <tr> <th rowspan="2">Solvent Concentration</th> <th colspan="3">Mass</th> </tr> <tr> <th>1 mg</th> <th>5 mg</th> <th>10 mg</th> </tr> </thead> <tbody> <tr> <td>1 mM</td> <td>2.6077 mL</td> <td>13.0385 mL</td> <td>26.0770 mL</td> </tr> <tr> <td>5 mM</td> <td>0.5215 mL</td> <td>2.6077 mL</td> <td>5.2154 mL</td> </tr> <tr> <td>10 mM</td> <td>0.2608 mL</td> <td>1.3038 mL</td> <td>2.6077 mL</td> </tr> </tbody> </table>	Solvent Concentration	Mass			1 mg	5 mg	10 mg	1 mM	2.6077 mL	13.0385 mL	26.0770 mL	5 mM	0.5215 mL	2.6077 mL	5.2154 mL	10 mM	0.2608 mL	1.3038 mL	2.6077 mL
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Please refer to the solubility information to select the appropriate solvent.																				
In Vivo	1. Add each solvent one by one: PBS Solubility: 100 mg/mL (260.77 mM); Clear solution; Need ultrasonic																			

### BIOLOGICAL ACTIVITY

Description	Bisoprolol hemifumarate is a potent, selective and orally active β <sub>1</sub> -adrenergic receptor blocker with little activity on β <sub>2</sub> -receptor. Bisoprolol hemifumarate has the potential for hypertension, coronary artery disease and stable ventricular dysfunction research <sup>[1][2]</sup> .
IC <sub>50</sub> & Target	Beta-1 adrenergic receptor
In Vitro	Bisoprolol hemifumarate (2 μM, 1 h) protects myocardial cells (H9c2) from ischemia/reperfusion (I/R) injury <sup>[2]</sup> . Bisoprolol hemifumarate (2 μM, 1 h) reduces the H/R-induced ROS production and apoptosis in H9c2 cells <sup>[2]</sup> . Bisoprolol hemifumarate (2 μM, 1 h) increases AKT and GSK3β phosphorylation in H9c2 cells <sup>[2]</sup> . Bisoprolol hemifumarate (100 μM, 24 h) reverses Epinephrine-inhibited emigration in cholesterol-loaded DCs (dendritic cell) through increasing in β-arrestin 2, CCR7 and PI3K phosphorylation <sup>[3]</sup> . MCE has not independently confirmed the accuracy of these methods. They are for reference only.

### Cell Viability Assay<sup>[2]</sup>

Cell Line:	H9c2 cells
Concentration:	0.2, 2, 20 $\mu$ M
Incubation Time:	1 h
Result:	Elevated the survival rates of cardiomyocytes subjected to H/R (hypoxia/reoxygenation) to 73.20%, 90.38%, 81.25% respectively.

### Cell Migration Assay<sup>[3]</sup>

Cell Line:	DCs
Concentration:	100 $\mu$ M
Incubation Time:	6, 12, 24 h
Result:	Increased the amount of migrating cells by 46.00% (6 h), 64.25% (12 h) and 55.74% (24 h).

### In Vivo

Bisoprolol hemifumarate (oral administration, 5 mg/kg, for 1 week) increases left ventricular ejection fraction (LVEF) and decreases the heart rate value<sup>[2]</sup>.

Bisoprolol hemifumarate (oral gavage, 8 mg/kg, daily for four weeks) shows protective effects against Cadmium-induced myocardial toxicity in rats<sup>[4]</sup>.

Bisoprolol hemifumarate (oral gavage, 1 mg/kg, daily for 6 weeks) reverses small conductance calcium-activated potassium channel (SK) remodeling in a volume-overload rat model<sup>[5]</sup>.

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

Animal Model:	Ischemia/reperfusion (I/R) injury rats <sup>[2]</sup>
Dosage:	0.5, 5, 10 mg/kg
Administration:	Oral administration, for 1 week, prior to 0.5 h ischemia/4 h reperfusion.
Result:	Reduced infarct size from 44% in I/R group to 31% in treated group.

Animal Model:	Cadmium-induced rats <sup>[4]</sup>
Dosage:	2, 8 mg/kg
Administration:	Oral gavage, daily for four weeks.
Result:	Decreased mean arterial pressure (MAP) at 8 mg/kg. Decreased serum biomarkers (ALT, AST) and NF- $\kappa$ B p65 expression and TNF- $\alpha$ levels (cardiac tissue samples) at 8 mg/kg.

### CUSTOMER VALIDATION

- Am J Respir Cell Mol Biol. 2023 May 10.
- Mol Neurobiol. 2019 Jan;56(1):367-377.
- ACS Omega. August 8, 2022.

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- J Pharmaceut Biomed. 2020, 113870.

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## REFERENCES

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- [1]. Jillian G Baker, et al. The selectivity of beta-adrenoceptor antagonists at the human beta1, beta2 and beta3 adrenoceptors. *Br J Pharmacol.* 2005 Feb;144(3):317-22.
- [2]. Jing Wang, et al. Bisoprolol, a  $\beta$  1 antagonist, protects myocardial cells from ischemia-reperfusion injury via PI3K/AKT/GSK3 $\beta$  pathway. *Fundam Clin Pharmacol.* 2020 Dec;34(6):708-720.
- [3]. Hong Yang, et al. Bisoprolol reverses epinephrine-mediated inhibition of cell emigration through increases in the expression of  $\beta$ -arrestin 2 and CCR7 and PI3K phosphorylation, in dendritic cells loaded with cholesterol. *Thromb Res.* 2013 Mar;131(3):230-7.
- [4]. Jinhua Liu, et al. Protective Effects of Bisoprolol Against Cadmium-induced Myocardial Toxicity Through Inhibition of Oxidative Stress and NF- $\kappa$ B Signalling in Rats. *J Vet Res.* 2021 Oct 20;65(4):505-511.
- [5]. Yajuan Ni, et al. Bisoprolol reversed small conductance calcium-activated potassium channel (SK) remodeling in a volume-overload rat model. *Mol Cell Biochem.* 2013 Dec;384(1-2):95-103.
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**Caution: Product has not been fully validated for medical applications. For research use only.**

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