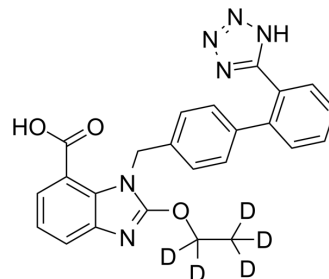


## Candesartan-d<sub>5</sub>

<b>Cat. No.:</b>	HY-B0205S1		
<b>CAS No.:</b>	1189650-58-5		
<b>Molecular Formula:</b>	C <sub>24</sub> H <sub>15</sub> D <sub>5</sub> N <sub>6</sub> O <sub>3</sub>		
<b>Molecular Weight:</b>	445.48		
<b>Target:</b>	Angiotensin Receptor		
<b>Pathway:</b>	GPCR/G Protein		
<b>Storage:</b>	Powder	-20°C	3 years
	In solvent	-80°C	6 months
		-20°C	1 month



### BIOLOGICAL ACTIVITY

<b>Description</b>	Candesartan-d <sub>5</sub> is the deuterium labeled Candesartan. Candesartan is an angiotensin II receptor antagonist with IC <sub>50</sub> of 0.26 nM.
<b>In Vitro</b>	Stable heavy isotopes of hydrogen, carbon, and other elements have been incorporated into drug molecules, largely as tracers for quantitation during the drug development process. Deuteration has gained attention because of its potential to affect the pharmacokinetic and metabolic profiles of drugs <sup>[1]</sup> . MCE has not independently confirmed the accuracy of these methods. They are for reference only.

### REFERENCES

- [1]. Russak EM, et al. Impact of Deuterium Substitution on the Pharmacokinetics of Pharmaceuticals. *Ann Pharmacother.* 2019;53(2):211-216.
- [2]. Pfeffer MA, et al. Effects of candesartan on mortality and morbidity in patients with chronic heart failure: the CHARM-Overall programme. *Lancet.* 2003 Sep 6;362(9386):759-66.
- [3]. Nishimura Y, et al. Chronic peripheral administration of the angiotensin II AT(1) receptor antagonist candesartan blocks brain AT(1) receptors. *Brain Res.* 2000 Jul 14;871(1):29-38.

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

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