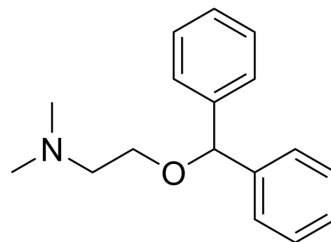


## Diphenhydramine

<b>Cat. No.:</b>	HY-B0303												
<b>CAS No.:</b>	58-73-1												
<b>Molecular Formula:</b>	C <sub>17</sub> H <sub>21</sub> NO												
<b>Molecular Weight:</b>	255.35												
<b>Target:</b>	Endogenous Metabolite; Histamine Receptor; Bacterial; iGluR												
<b>Pathway:</b>	Metabolic Enzyme/Protease; GPCR/G Protein; Immunology/Inflammation; Neuronal Signaling; Anti-infection; Membrane Transporter/Ion Channel												
<b>Storage:</b>	<table border="0"> <tr> <td>Pure form</td> <td>-20°C</td> <td>3 years</td> </tr> <tr> <td></td> <td>4°C</td> <td>2 years</td> </tr> <tr> <td>In solvent</td> <td>-80°C</td> <td>6 months</td> </tr> <tr> <td></td> <td>-20°C</td> <td>1 month</td> </tr> </table>	Pure form	-20°C	3 years		4°C	2 years	In solvent	-80°C	6 months		-20°C	1 month
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	4°C	2 years											
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	-20°C	1 month											



### SOLVENT & SOLUBILITY

<b>In Vitro</b>	DMSO : 100 mg/mL (391.62 mM; Need ultrasonic)				
		Solvent Concentration	Mass		
	<b>Preparing Stock Solutions</b>		1 mg	5 mg	10 mg
		1 mM	3.9162 mL	19.5810 mL	39.1619 mL
		5 mM	0.7832 mL	3.9162 mL	7.8324 mL
	10 mM	0.3916 mL	1.9581 mL	3.9162 mL	
Please refer to the solubility information to select the appropriate solvent.					
<b>In Vivo</b>	<ol style="list-style-type: none"> <li>Add each solvent one by one: 10% DMSO &gt;&gt; 90% (20% SBE-β-CD in saline) Solubility: ≥ 2.5 mg/mL (9.79 mM); Clear solution</li> <li>Add each solvent one by one: 10% DMSO &gt;&gt; 90% corn oil Solubility: ≥ 2.5 mg/mL (9.79 mM); Clear solution</li> </ol>				

### BIOLOGICAL ACTIVITY

<b>Description</b>	Diphenhydramine is a first-generation histamine H <sub>1</sub> -receptor antagonist with anti-cholinergic effect. Diphenhydramine hydrochloride can cross the ovine blood-brain barrier (BBB) [1][2][3].	
<b>IC<sub>50</sub> &amp; Target</b>	H <sub>1</sub> Receptor	NMDA Receptor 24.6 μM (IC <sub>50</sub> )
<b>In Vitro</b>	Diphenhydramine (1-300 μM, 30 s) can block NMDA-activated membrane currents. This property can be responsible for or add to its sedative, analgesic and memory related effects <sup>[2]</sup> . MCE has not independently confirmed the accuracy of these methods. They are for reference only.	

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

Cell Line:	Human TsA cells
Concentration:	1-300 $\mu$ M
Incubation Time:	10-30 s
Result:	<p>Did not discriminate between different GluN2 receptor subunits.</p> <p>The IC<sub>50</sub> value of Diphenhydramine against GluN1/GluN2B was 24.6 <math>\mu</math>M.</p> <p>The IC<sub>50</sub> values of Diphenhydramine against GluN1/GluN2A and GluN1_A652C/GluN2A were 24.4 <math>\mu</math>M and 89.6 <math>\mu</math>M, respectively, indicating that the receptor modification reduces sensitivity for diphenhydramine.</p> <p>The inhibitory potency of Diphenhydramine did not be overcome with increasing NMDA concentrations.</p> <p>The inhibitory potency of Diphenhydramine did not increase with increasing agonist concentration.</p>

### In Vivo

Diphenhydramine (0-10 mg/kg, i.v. and p.o.) has better oral bioavailability when used in combination with Dimenhydrinate (HY-B1215)<sup>[3]</sup>.

Diphenhydramine (20 mg/kg, i.p.) can improve the kidney injury induced by Cisplatin (CDDP) (HY-17394) in mice, and does not affect the anti-tumor efficacy of Cisplatin<sup>[4]</sup>.

Pharmacokinetic parameters for diphenhydramine after single oral or intravenous administration of diphenhydramine HCl (5 mg/kg) to six healthy dogs by using a noncompartmental model with first-order elimination<sup>[3]</sup>

Route	Dose (mg/kg)	AUC <sub>last</sub> (ng·h/mL)	C <sub>0</sub> (ng/mL)	CL (mL/h/kg)	T <sub>1/2</sub> (h)	K <sub>el</sub> (1/h)	MRT (h)	V <sub>ss_obs</sub> (mL/kg)	C <sub>max</sub> (ng/mL)	T <sub>max</sub> (h)	V <sub>z</sub> (mL/kg)	F (%)
i.v.	5	391.20	266.10	2833.04	1.89	0.45	2.47	6582.36	/	/	/	/
p.o.	5	153.80	/	/	4.98	0.59	6.97	/	35.80	1.30	180157.367.75	

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

Animal Model:	healthy, fasted mixed-breed dogs <sup>[3]</sup>
Dosage:	1/5/10 mg/kg
Administration:	i.v., p.o.
Result:	<p>Oral absorption of diphenhydramine was approximately three times greater with a longer half-life when it was administered as the combination product Dimenhydrinate (HY-B1215).</p>

### CUSTOMER VALIDATION

- Cell Rep. 2022 Nov 8;41(6):111615.
- Chemosphere. 2019 Jun;225:378-387.
- Pharmacol Res Perspect. 2021 Oct;9(5):e00879.

## REFERENCES

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- [1]. Föhr KJ, et al. Open channel block of NMDA receptors by diphenhydramine. *Neuropharmacology*. 2015 Dec;99:459-70.
  - [2]. Ehling S, et al. Diphenhydramine pharmacokinetics after oral and intravenous administration of diphenhydramine and oral administration of dimenhydrinate to healthy dogs, and pharmacodynamic effect on histamine-induced wheal formation: a pilot study. *Vet Dermatol*. 2019 Apr;30(2):91-e24.
  - [3]. Hamano H, et al. Diphenhydramine may be a preventive medicine against cisplatin-induced kidney toxicity. *Kidney Int*. 2021 Apr;99(4):885-899.
  - [4]. Jason P Berninger, et al. Effects of the antihistamine diphenhydramine on selected aquatic organisms. *Environ Toxicol Chem*. 2011 Sep;30(9):2065-72.
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**Caution: Product has not been fully validated for medical applications. For research use only.**

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