Enoximone

MedChemExpress

HY-B1639		
77671-31-9		
C ₁₂ H ₁₂ N ₂ O ₂ S	i	
248.3		
Phosphodiesterase (PDE)		
Metabolic Enzyme/Protease		
Powder	-20°C	3 years
	4°C	2 years
In solvent	-80°C	6 months
	-20°C	1 month
	77671-31-9 C ₁₂ H ₁₂ N ₂ O ₂ S 248.3 Phosphodie Metabolic E Powder	77671-31-9 C ₁₂ H ₁₂ N ₂ O ₂ S 248.3 Phosphodiesterase (I Metabolic Enzyme/Pr Powder -20°C 4°C In solvent -80°C

SOLVENT & SOLUBILITY

In Vitro DMSO: 8.33 mg/mL (33.55 mM; Need ultrasonic) Mass Solvent 10 mg 1 mg 5 mg Concentration Preparing 1 mM 4.0274 mL 20.1369 mL 40.2739 mL **Stock Solutions** 5 mM 0.8055 mL 4.0274 mL 8.0548 mL 10 mM 0.4027 mL 2.0137 mL 4.0274 mL

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

BIOLOGICAL ACTIVITY				
Description	Enoximone is an inotropic vasodilating agent and a selective and orally active phosphodiesterase III (PDE3) inhibitor with an IC ₅₀ of 5.9 μM. Enoximone induces vasodilatation and increases intracellular levels of cAMP by inhibiting cGMP-inhibited PDE. Enoximone also exhibits PDE4 inhibitory effect with an IC ₅₀ of 21.1 μM for myocardial PDE4A. Enoximone has the potential for congestive heart failure research and has bronchodilatory, antiasthma and anti-inflammatory effects ^{[1][2][3]} .			
IC₅₀ & Target	PDE3/PDE	PDE4A 21.1 μM (IC ₅₀ , myocardial PDE4A)		
In Vitro	In vitro, 10 μM Enoximone-treated bronchoalveolar lavage (BAL) eosinophils induced by IL-33 treatment shows significantly lower CD11b expression when compared with diluent-treated BAL eosinophils ^[1] . MCE has not independently confirmed the accuracy of these methods. They are for reference only.			
In Vivo	Topical Enoximone (25 μg; intratracheal route) abrogates house dust mite (HDM)-induced allergic airway inflammation ^[1] . The Enoximone-treated (25 μg; for 5 days) HDM-exposed mice shows significant reductions in inflammatory cell numbers including eosinophils, macrophages, neutrophils, ILC2s, and T cells, indicating that Enoximone treatment reduces airway			

Product Data Sheet

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inflammation^[1].

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REFERENCES

[1]. Jan Beute, et al. A Pathophysiological Role of PDE3 in Allergic Airway Inflammation. JCI Insight. 2018 Jan 25;3(2):e94888.

[2]. R C Dage, et al. Pharmacology and Pharmacokinetics of Enoximone. Cardiology. 1990;77 Suppl 3:2-13; discussion 27-33.

[3]. M B Vroom, et al. Effect of Phosphodiesterase Inhibitors on Human Arteries in Vitro. Br J Anaesth. 1996 Jan;76(1):122-9.

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

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