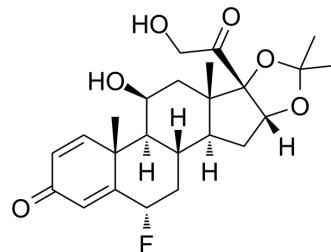


Flunisolide

Cat. No.:	HY-B1121		
CAS No.:	3385-03-3		
Molecular Formula:	C ₂₄ H ₃₁ FO ₆		
Molecular Weight:	434.5		
Target:	Glucocorticoid Receptor; Apoptosis		
Pathway:	Immunology/Inflammation; Vitamin D Related/Nuclear Receptor; Apoptosis		
Storage:	Powder	-20°C	3 years
		4°C	2 years
	In solvent	-80°C	2 years
		-20°C	1 year



SOLVENT & SOLUBILITY

In Vitro	DMSO : 125 mg/mL (287.69 mM; Need ultrasonic)				
		Solvent Concentration	Mass 1 mg	5 mg	10 mg
	Preparing Stock Solutions	1 mM	2.3015 mL	11.5075 mL	23.0150 mL
		5 mM	0.4603 mL	2.3015 mL	4.6030 mL
10 mM		0.2301 mL	1.1507 mL	2.3015 mL	
Please refer to the solubility information to select the appropriate solvent.					
In Vivo	<ol style="list-style-type: none"> Add each solvent one by one: 10% DMSO >> 40% PEG300 >> 5% Tween-80 >> 45% saline Solubility: ≥ 2.08 mg/mL (4.79 mM); Clear solution Add each solvent one by one: 10% DMSO >> 90% (20% SBE-β-CD in saline) Solubility: ≥ 2.08 mg/mL (4.79 mM); Clear solution Add each solvent one by one: 10% DMSO >> 90% corn oil Solubility: ≥ 2.08 mg/mL (4.79 mM); Clear solution 				

BIOLOGICAL ACTIVITY

Description	Flunisolide is a corticosteroid, which is an orally active glucocorticoid receptor activator with anti-inflammatory activity. Flunisolide can induce eosinophil apoptosis, and is used for the research of asthma or rhinitis, and inflammation ^{[1][2]} .
In Vitro	<p>Flunisolide (0.1-10 μM, 1 h) inhibits lung fibroblast (Isolated from lung) activation^[1].</p> <p>Flunisolide (10 μM, 24 h) reduces MMP-9, TIMP-1, TGF-β and fibronectin release by sputum cells (isolated from mild to moderate asthmatics), and induces sputum eosinophil apoptosis^[2].</p> <p>Flunisolide (0.1-10 μM, 24 h) effectively inhibits ICAM-1 expression and GM-CSF and IL-5 release induced by TNF-alpha in</p>

BEAS-2B cells^[3].

Flunisolide (115 μ M, 0-3 h) can be transported in a polarized way in the apical (ap) to basolateral (bl) direction in Calu-3 cells and is demonstrated to be ATP-dependent^[4].

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

Apoptosis Analysis^[2]

Cell Line:	Eosinophil
Concentration:	10 μ M
Incubation Time:	24 h
Result:	Induced sputum eosinophil apoptosis.

In Vivo

Flunisolide (Intranasal administration, 0.3–10 μ g/mouse, daily, from days 21-27) inhibits lung inflammation, fibrosis, and airway hyper-reactivity, also improves clearance of silica particles from the lungs in silicotic mice^[1].

Flunisolide (Intranasal administration, 0.3–10 μ g/mouse, daily, from days 21-27) inhibits silica-induced macrophage and myofibroblast accumulation in the lung tissue^[1].

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

Animal Model:	Male Swiss Webster mice (instilled, intranasally, with crystalline silica, 10 mg/50 μ L, particle size 0.5-10 μ m) ^[1]
Dosage:	0.3-10 μ g/mouse, daily, from days 21–27
Administration:	Intranasal administration
Result:	Reduced both granulomatous response, collagen deposition, concerning granuloma formation caused by silica particles. Reduced the number of F4/80 and α -SMA positive cells.

CUSTOMER VALIDATION

- Drug Test Anal. 2020 Aug 27.

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REFERENCES

[1]. Tatiana Paula Teixeira Ferreira, et al. Intranasal Flunisolide Suppresses Pathological Alterations Caused by Silica Particles in the Lungs of Mice. *Front Endocrinol (Lausanne)*. 2020 Jun 17;11:388.

[2]. M Profita, et al. In vitro effects of flunisolide on MMP-9, TIMP-1, fibronectin, TGF-beta1 release and apoptosis in sputum cells freshly isolated from mild to moderate asthmatics. *Allergy*. 2004 Sep;59(9):927-32.

[3]. S Boero, et al. Modulation by flunisolide of tumor necrosis factor-alpha-induced stimulation of airway epithelial cell activities related to eosinophil inflammation. *J Asthma*. 2010 May;47(4):381-7.

[4]. B I Florea, et al. Evidence of P-glycoprotein mediated apical to basolateral transport of flunisolide in human broncho-tracheal epithelial cells (Calu-3). *Br J Pharmacol*. 2001 Dec;134(7):1555-63.

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

Tel: 609-228-6898

Fax: 609-228-5909

E-mail: tech@MedChemExpress.com

Address: 1 Deer Park Dr, Suite Q, Monmouth Junction, NJ 08852, USA