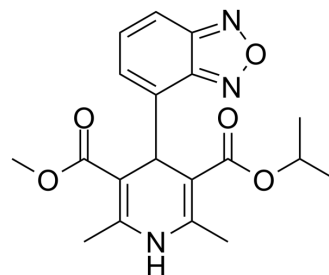


Isradipine

Cat. No.:	HY-B0233		
CAS No.:	75695-93-1		
Molecular Formula:	C ₁₉ H ₂₁ N ₃ O ₅		
Molecular Weight:	371.39		
Target:	Calcium Channel; Autophagy		
Pathway:	Membrane Transporter/Ion Channel; Neuronal Signaling; Autophagy		
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 : ≥ 100 mg/mL (269.26 mM)
 * "≥" means soluble, but saturation unknown.

Preparing Stock Solutions	Solvent Concentration	Mass		
		1 mg	5 mg	10 mg
	1 mM	2.6926 mL	13.4629 mL	26.9259 mL
	5 mM	0.5385 mL	2.6926 mL	5.3852 mL
	10 mM	0.2693 mL	1.3463 mL	2.6926 mL

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

In Vivo

- Add each solvent one by one: 10% DMSO >> 40% PEG300 >> 5% Tween-80 >> 45% saline
 Solubility: ≥ 2.5 mg/mL (6.73 mM); Clear solution
- Add each solvent one by one: 10% DMSO >> 90% (20% SBE-β-CD in saline)
 Solubility: ≥ 2.5 mg/mL (6.73 mM); Clear solution
- Add each solvent one by one: 10% DMSO >> 90% corn oil
 Solubility: ≥ 2.5 mg/mL (6.73 mM); Clear solution

BIOLOGICAL ACTIVITY

Description

Isradipine (PN 200-110) is an orally active L-type calcium channel blocker. Isradipine, as a powerful peripheral vasodilator, is a dihydropyridine calcium antagonist with selective actions on the heart as well as the peripheral circulation. Isradipine is a potentially viable neuroprotective agent for Parkinson's disease^{[1][2][3]}.

IC₅₀ & Target

L-type calcium channel^{[1][2]}

In Vitro	<p>Isradipine has much higher (840 fold) affinity for Cav1.3 channels as well as good brain bioavailability. Isradipine has nearly equal potency at Cav1.2 and Cav1.3 channels^[1].</p> <p>MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p>								
In Vivo	<p>Isradipine (0.1~3 mg/kg; p.o.) makes sodium excretion increase in a dose-dependent manner^[3].</p> <p>Isradipine pre-treatment reduces 6-hydroxydopamine induced neurotoxicity at the striatal level. Protective effect of isradipine at the striatal level is dose-dependent as shown from 6 mice. Isradipine pre-treatment increases the number of surviving SNc DA cells after 6-hydroxydopamine induced degeneration. Isradipine is capable of protecting striatal dopaminergic terminals and SNc dopaminergic cell bodies against a slow, progressive insult created by intrastratial injection of 6-hydroxydopamine^[1].</p> <p>MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p> <table border="1" data-bbox="347 520 1515 758"> <tr> <td data-bbox="347 520 618 583">Animal Model:</td> <td data-bbox="618 520 1515 583">Rats^[3]</td> </tr> <tr> <td data-bbox="347 583 618 646">Dosage:</td> <td data-bbox="618 583 1515 646">0.1~3 mg/kg</td> </tr> <tr> <td data-bbox="347 646 618 709">Administration:</td> <td data-bbox="618 646 1515 709">P.o.</td> </tr> <tr> <td data-bbox="347 709 618 758">Result:</td> <td data-bbox="618 709 1515 758">Sodium excretion increased in a dose-dependent manner.</td> </tr> </table>	Animal Model:	Rats ^[3]	Dosage:	0.1~3 mg/kg	Administration:	P.o.	Result:	Sodium excretion increased in a dose-dependent manner.
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REFERENCES

- [1]. Ilijic E, et al. The L-type channel antagonist isradipine is neuroprotective in a mouse model of Parkinson's disease. *Neurobiol Dis.* 2011;43(2):364-371.
- [2]. Campbell CA, et al. Effects of isradipine, an L-type calcium channel blocker on permanent and transient focal cerebral ischemia in spontaneously hypertensive rats. *Exp Neurol.* 1997;148(1):45-50.
- [3]. Hof RP, et al. Selective effects of PN 200-110 (isradipine) on the peripheral circulation and the heart. *Am J Cardiol.* 1987;59(3):30B-36B.

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

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