Product Data Sheet

Tolbutamide

Cat. No.: HY-B0401 **CAS No.:** 64-77-7

Molecular Formula: C₁₂H₁₈N₂O₃S

Molecular Weight: 270.35

Target: Na+/K+ ATPase

Pathway: Membrane Transporter/Ion Channel

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 : ≥ 34 mg/mL (125.76 mM)

* "≥" means soluble, but saturation unknown.

Preparing Stock Solutions	Solvent Mass Concentration	1 mg	5 mg	10 mg
	1 mM	3.6989 mL	18.4945 mL	36.9891 mL
	5 mM	0.7398 mL	3.6989 mL	7.3978 mL
	10 mM	0.3699 mL	1.8495 mL	3.6989 mL

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

In Vivo

- 1. Add each solvent one by one: 10% DMSO >> 40% PEG300 >> 5% Tween-80 >> 45% saline Solubility: ≥ 2.08 mg/mL (7.69 mM); Clear solution
- 2. Add each solvent one by one: 10% DMSO >> 90% (20% SBE-β-CD in saline) Solubility: ≥ 2.08 mg/mL (7.69 mM); Clear solution
- 3. Add each solvent one by one: 10% DMSO >> 90% corn oil Solubility: ≥ 2.08 mg/mL (7.69 mM); Clear solution

BIOLOGICAL ACTIVITY

Tolbutamide is an orally active K_{ATP} inhibitor. Tolbutamide inhibits cell proliferation, stimulates exocytosis of glucagon and reduces fetal lethality of mice. Tolbutamide can be used in the research of diabete^{[1][2][3][4]}.

In Vitro Tolbutamide (400 μM, 24h) with dbcAMP reduces glioma cell proliferation by increasing connexin43 (Cx43)^[1].

Tolbutamide (0.1 μ M, 1 min) stimulates exocytosis by activation of a mitochondriallike K_{ATP} channel in rat A-cells^[2].

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

Western Blot Analysis ^[1]	
Cell Line:	Glioma cell
Concentration:	400 μΜ
Incubation Time:	24h
Result:	Increasing the level of Cx43.

In Vivo

Tolbutamide (125 mg/kg, Supplemented in daily diet for 27 weeks) reduces the incidence of diabetes mellitus in the non-obese-diabetic mouse^[3].

Tolbutamide (100-400 mg/kg, Intraperitoneal injection, 400 mg/kg on day 13; 100 mg/kg on day 10-13; combined treatment: 100 mg/kg on day 10-12 and 400 mg/kg on day 13) reduces fetal lethality in pregnant mice^[4].

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

Animal Model:	Non-obese-diabetic mouse ^[3]		
Dosage:	125 mg/kg		
Administration:	Supplemented in daily diet for 27 weeks		
Result:	Showed 10 of 23 animals developed diabetes compared with 18 of 24 in the control groups.		
Animal Model:	Pregnant mice ^[4]		
Dosage:	100 mg/kg, 400 mg/kg		
Administration:	Intraperitoneal injection (i.p.)		
Result:	Showed a significant reduction (50 %) in the frequency of living fetuses for the group of 400 mg/kg on day 13.		

Had significantly fewer petechiae and more late resorptions for the group of 400 mg/kg on

CUSTOMER VALIDATION

- Cancer Cell Int. 2023 Jan 31;23(1):14.
- AAPS J. 2021 Jun 28;23(4):91.

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REFERENCES

[1]. Sánchez-Alvarez R, et al. Tolbutamide reduces glioma cell proliferation by increasing connexin43, which promotes the up-regulation of p21 and p27 and subsequent changes in retinoblastoma phosphorylation [J]. Glia, 2006, 54(2): 125-134.

day 13.

- [2]. How M, et al. Tolbutamide stimulates exocytosis of glucagon by inhibition of a mitochondrial-like ATP-sensitive K+ (KATP) conductance in rat pancreatic A-cells [J]. The Journal of Physiology, 2000, 527(1): 109-120.
- [3]. Williams A J K, et al. Tolbutamide reduces the incidence of diabetes mellitus, but not insulitis, in the non-obese-diabetic mouse [J]. Diabetologia, 1993, 36: 487-492.

4]. Belisle R J, et al. Tolbutami	de treatment of pregnant mi	ce: repeated administration rec	duces fetal lethality [J]. Teratology	, 1976, 13(1): 65-70.	
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