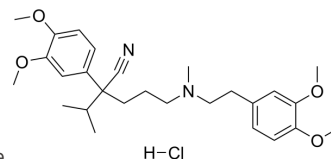


## Verapamil hydrochloride

<b>Cat. No.:</b>	HY-A0064
<b>CAS No.:</b>	152-11-4
<b>Molecular Formula:</b>	C <sub>27</sub> H <sub>39</sub> ClN <sub>2</sub> O <sub>4</sub>
<b>Molecular Weight:</b>	491.06
<b>Target:</b>	Calcium Channel; P-glycoprotein; Cytochrome P450
<b>Pathway:</b>	Membrane Transporter/Ion Channel; Neuronal Signaling; Metabolic Enzyme/Protease
<b>Storage:</b>	4°C, sealed storage, away from moisture and light * In solvent : -80°C, 1 year; -20°C, 6 months (sealed storage, away from moisture and light)



### SOLVENT & SOLUBILITY

#### In Vitro

H<sub>2</sub>O : 50 mg/mL (101.82 mM; Need ultrasonic)  
 DMSO : ≥ 31 mg/mL (63.13 mM)  
 \* "≥" means soluble, but saturation unknown.

Preparing Stock Solutions	Solvent Concentration	Mass		
		1 mg	5 mg	10 mg
	1 mM	2.0364 mL	10.1821 mL	20.3641 mL
	5 mM	0.4073 mL	2.0364 mL	4.0728 mL
	10 mM	0.2036 mL	1.0182 mL	2.0364 mL

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

#### In Vivo

- Add each solvent one by one: PBS  
Solubility: 25 mg/mL (50.91 mM); Clear solution; Need ultrasonic
- Add each solvent one by one: 10% DMSO >> 90% saline  
Solubility: ≥ 5 mg/mL (10.18 mM); Clear solution
- Add each solvent one by one: 10% DMSO >> 40% PEG300 >> 5% Tween-80 >> 45% saline  
Solubility: ≥ 2.08 mg/mL (4.24 mM); Clear solution
- Add each solvent one by one: 10% DMSO >> 90% (20% SBE-β-CD in saline)  
Solubility: ≥ 2.08 mg/mL (4.24 mM); Clear solution
- Add each solvent one by one: 10% DMSO >> 90% corn oil  
Solubility: ≥ 2.08 mg/mL (4.24 mM); Clear solution

### BIOLOGICAL ACTIVITY

#### Description

Verapamil hydrochloride ((±)-Verapamil hydrochloride) is a calcium channel blocker and a potent and orally active first-generation P-glycoprotein (P-gp) inhibitor. Verapamil hydrochloride also inhibits CYP3A4. Verapamil hydrochloride has the

	potential for high blood pressure, heart arrhythmias and angina research <sup>[1][2][3]</sup> .
<b>IC<sub>50</sub> &amp; Target</b>	CYP3
<b>In Vitro</b>	The EverFluor FL Verapamil (EFV) uptake by TR-iBRB2 cells is inhibited by cationic drugs, and inhibited by verapamil in a concentration-dependent manner with an IC <sub>50</sub> of 98.0 μM <sup>[4]</sup> . MCE has not independently confirmed the accuracy of these methods. They are for reference only.
<b>In Vivo</b>	Given orally Verapamil is useful for the prophylaxis of atrioventricular reentry tachycardia, and also in modulating the atrioventricular nodal response in atrial fibrillation <sup>[2]</sup> . Verapamil is injected i.v. into a femoral vein prior to ischemia. Verapamil (1 mg/kg) significantly decreases the incidence of ventricular arrhythmias including premature ventricular contractions (PVC), ventricular tachycardia (VT) and ventricular fibrillation (VF) for 45-min coronary artery occlusion. Total arrhythmia scores are significantly increased when the heart is subjected to ischemia. Verapamil (1 mg/kg) significantly prevents the enhancement of total arrhythmia scores induced by ischemia <sup>[5]</sup> . MCE has not independently confirmed the accuracy of these methods. They are for reference only.

## PROTOCOL

<b>Cell Assay</b> <sup>[1]</sup>	Cells (1×10 <sup>5</sup> ) are treated with 10 nM Bortezomib and/or 70 μM Verapamil for 16 hours and incubated for another 4 hours with Alamar-Blue. Activity of the mitochondrial dehydrogenase results in conversion of the coloring, which is followed by measurement of the absorption using a spectrophotometer <sup>[1]</sup> . MCE has not independently confirmed the accuracy of these methods. They are for reference only.
<b>Animal Administration</b> <sup>[3]</sup>	Rats <sup>[3]</sup> Adult male Sprague-Dawley (SD) rats (250–350 g) are used. Verapamil (1 mg/kg) is injected i.v. into a femoral vein 10 min prior to ischemia. A sham group undergoes the same surgical procedures, except the suture underneath the LAD is left untied. In another series of experiment, arrhythmia is induced by Bay K8644, an L-type calcium channel agonist, at a dose of 0.1 mg/kg given i.v. into the FV. Verapamil (1 mg/kg) is administered 10 min prior to Bay K8644. All injections are performed within 30 sec. MCE has not independently confirmed the accuracy of these methods. They are for reference only.

## CUSTOMER VALIDATION

- Cancer Cell. 2017 Apr 10;31(4):501-515.e8.
- Adv Mater. 2023 Sep 27:e2211980.
- Cell Stem Cell. 2023 Apr 6;30(4):378-395.e8.
- Bioact Mater. 2021 Apr 21;6(11):4073-4082.
- Research (Wash D C). 2024 Feb 21.

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## REFERENCES

- [1]. Gowarty JL, et al. Verapamil as a culprit of palbociclib toxicity. J Oncol Pharm Pract. 2019 Apr;25(3):743-746.
- [2]. Krikler DM. Verapamil in arrhythmia. Br J Clin Pharmacol. 1986;21 Suppl 2:183S-189S.

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[3]. Zhou P, et al. Anti-arrhythmic effect of Verapamil is accompanied by preservation of cx43 protein in rat heart. PLoS One. 2013 Aug 12;8(8):e71567.

[4]. Rehnqvist N, et al. Effects of metoprolol vs verapamil in patients with stable angina pectoris. The Angina Prognosis Study in Stockholm (APSIS). Eur Heart J. 1996 Jan;17(1):76-81.

[5]. Kubo Y, et al. Blood-to-Retina Transport of Fluorescence-Labeled Verapamil at the Blood-Retinal Barrier. Pharm Res. 2018 Mar 12;35(5):93.

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

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