Proteins

Product Data Sheet

Hexahydrocurcumin

Cat. No.: HY-N0929 CAS No.: 36062-05-2 Molecular Formula: C₂₁H₂₆O₆ Molecular Weight: 374.43

Target: COX; Reactive Oxygen Species

Pathway: Immunology/Inflammation; Metabolic Enzyme/Protease; NF-κΒ

Storage: Powder -20°C 3 years

4°C 2 years

-80°C In solvent 2 years

> -20°C 1 year

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SOLVENT & SOLUBILITY

In Vitro

DMSO: 100 mg/mL (267.07 mM; Need ultrasonic)

	Solvent Mass Concentration	1 mg	5 mg	10 mg
Preparing Stock Solutions	1 mM	2.6707 mL	13.3536 mL	26.7073 mL
	5 mM	0.5341 mL	2.6707 mL	5.3415 mL
	10 mM	0.2671 mL	1.3354 mL	2.6707 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: ≥ 2.5 mg/mL (6.68 mM); Clear solution
- 2. Add each solvent one by one: 10% DMSO >> 90% (20% SBE-β-CD in saline) Solubility: ≥ 2.5 mg/mL (6.68 mM); Clear solution
- 3. Add each solvent one by one: 10% DMSO >> 90% corn oil Solubility: ≥ 2.5 mg/mL (6.68 mM); Clear solution

BIOLOGICAL ACTIVITY

Description	Hexahydrocurcumin is one of the major metabolites of curcumin and a selective, orally active COX-2 inhibitor.	
	Hexahydrocurcumin is inactive against COX-1. Hexahydrocurcumin has antioxidant, anticancer and anti-inflammatory activities ^{[1][2]} .	

IC₅₀ & Target COX-2

In Vitro Hexahydrocurcumin (0-25 μM; 24-48 hours; HT-29 cells) treatment significantly decreased the viability of HT-29 colon cancer cells in a time- and concentration-dependent. The respective IC_{50} values for 24 and 48 h of Hexahydrocurcumin exposureare 77.05 and 56.95, respectively^[1].

Hexahydrocurcumin (0-25 μ M; 24-48 hours; HT-29 cells) combined with 5-fluorouracil (5-FU; 5 μ M) markedly reduces the COX-2 expression. The level of COX-1 is not altered [1].

Hexahydrocurcumin (0-25 μ M; 24-48 hours; HT-29 cells) combined with 5-fluorouracil (5-FU; 5 μ M) markedly reduces the COX-2 protein. The level of COX-1 protein is not altered [1].

Hexahydrocurcumin (7-14 μ M; 24 hours) attenuates lipopolysaccharide (LPS)-elicited increase of prostaglandin E₂ (PGE₂) in murine macrophages (RAW 264.7) in a concentration-dependent manner^[2].

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

Cell Viability Assay^[1]

Cell Line:	HT-29 cells	
Concentration:	0 μΜ, 5 μΜ, 10 μΜ, 25 μΜ	
Incubation Time:	24 hours or 48 hours	
Result:	Significantly decreased the viability of HT-29 colon cancer cells.	
RT-PCR ^[1]		
Cell Line:	HT-29 cells	
Concentration:	25 μΜ	
Incubation Time:	24 hours	
Result:	Combined with 5-fluorouracil (5-FU; 5 μM) markedly reduced the COX-2 expression.	
Western Blot Analysis ^[1]		
Cell Line:	HT-29 cells	
Concentration:	25 μΜ	
Incubation Time:	24 hours	
Result:	Combined with 5-fluorouracil (5-FU; 5 μM) markedly reduced the COX-2 protein.	

In Vivo

Hexahydrocurcumin (50 mg/kg; oral administration; daily; for 16 weeks; male Wistar rats) treatment significantly reduces the numbers of aberrant crypt foci (ACF) in colon cancer rats. Hexahydrocurcumin also markedly decreases COX-2 protein expression. The levels of COX-1 protein is not different from normal rats^[3].

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

Animal Model:	Male Wistar rats (100-120 g) injected with dimethylhydrazine (DMH) ^[3]
Dosage:	50 mg/kg
Administration:	Oral administration; daily; for 16 weeks
Result:	Significantly reduced the numbers of ACF in colon cancer rats. Also markedly decreased COX-2 protein expression.

REFERENCES

- [1]. Srimuangwong K, et al. Hexahydrocurcumin enhances inhibitory effect of 5-fluorouracil on HT-29 human colon cancer cells. World J Gastroenterol. 2012 May 21;18(19):2383-9.
- [2]. Li F, et al. In vitro antioxidant and anti-inflammatory activities of 1-dehydro-[6]-gingerdione, 6-shogaol, 6-dehydroshogaol and hexahydrocurcumin. Food Chem. 2012 Nov 15;135(2):332-7.
- [3]. Srimuangwong K, et al. Effects of hexahydrocurcumin in combination with 5-fluorouracil on dimethylhydrazine-induced colon cancer in rats. World J Gastroenterol. 2012 Dec 21;18(47):6951-9.

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

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