



上海源叶生物科技有限公司
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产品名称: Go 6983

产品别名: Gö 6983; Goe 6983

生物活性:

Description	Go 6983 is a pan-PKC inhibitor against for PKC α , PKC β , PKC γ , PKC δ and PKC ζ with IC50 of 7 nM, 7 nM, 6 nM, 10 nM and 60 nM, respectively.						
IC₅₀ & Target	PKC γ	PKC α	PKC β	PKC δ	PKC ζ	PKC μ	
	6 nM (IC ₅₀)	7 nM (IC ₅₀)	7 nM (IC ₅₀)	10 nM (IC ₅₀)	60 nM (IC ₅₀)	20000 nM (IC ₅₀)	
In Vitro	Go 6983 inhibits PKC μ with IC50 of 20 μ M, and the other PKC isoenzymes can be suppressed by Go 6983 with IC50 values from 7 to 60 nM[1]. Go 6983 (100 nM) significantly reduces PMN adherence to the endothelium and infiltration into the myocardium compared with I/R + PMN hearts, and significantly inhibits superoxide release from PMNs by 90 +/- 2% in rat hearts[2]. Go 6983 (200 nM) has a reduced cardioprotective effect compared with the cardioprotective Go 6983 concentrations (50 and 100 nM) despite inhibiting PMN superoxide release by 99%[3].						
Solvent&Solubility	<p>In Vitro:</p> <p>DMSO : \geq 34 mg/mL (76.83 mM)</p> <p>H₂O : < 0.1 mg/mL (insoluble)</p> <p>* "\geq" means soluble, but saturation unknown.</p>						
	Preparing Stock Solutions	1 mg	5 mg	10 mg			
		1 mM	2.2598 mL	11.2992 mL	22.5984 mL		
		5 mM	0.4520 mL	2.2598 mL	4.5197 mL		
		10 mM	0.2260 mL	1.1299 mL	2.2598 mL		
<p>*请根据产品在不同溶剂中的溶解度选择合适的溶剂配制储备液 一旦配成溶液, 请分装保存, 避免反复冻融造成的产品失效。</p> <p>储备液的保存方式和期限 -80°C, 6 months; -20°C, 1 month。-80°C 储存时, 请在 6 个月内使用, -20°C 储存时, 请在 1 个月内使用。</p> <p>In Vivo:</p> <p>请根据您的实验动物和给药方式选择适当的溶解方案。以下溶解方案都请先按照 In Vitro 方式配制澄清的储备液, 再依次添加助溶剂:</p> <p>——为保证实验结果的可靠性, 澄清的储备液可以根据储存条件, 适当保存; 体内实验的工作液, 建议您现用现配, 当天使用; 以下溶剂前显示的百分比是指该溶剂在您配制终溶液中的体积占比; 如在配制过程中出现沉淀、析出现象, 可以通过加热和/或超声的方式助溶</p> <p>1.请依序添加每种溶剂: 10% DMSO → 40% PEG300 → 5% Tween-80 → 45% saline</p> <p>Solubility: \geq 2.5 mg/mL (5.65 mM); Clear solution</p> <p>此方案可获得 \geq 2.5 mg/mL (5.65 mM, 饱和度未知) 的澄清溶液。</p> <p>以 1 mL 工作液为例, 取 100 μL 25.0 mg/mL 的澄清 DMSO 储备液加到 400 μL PEG300 中, 混合均匀, 向上述体系中加入 50 μL Tween-80, 混合均匀; 然后继续加入 450 μL 生理盐水定容至 1 mL。</p> <p>2.请依序添加每种溶剂: 10% DMSO → 90% (20% SBE-β-CD in saline)</p> <p>Solubility: 2.5 mg/mL (5.65 mM); Suspended solution; Need ultrasonic</p>							



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	<p>此方案可获得 2.5 mg/mL (5.65 mM)的均匀悬浊液，悬浊液可用于口服和腹腔注射。</p> <p>以 1 mL 工作液为例，取 100 μL 25.0 mg/mL 的澄清 DMSO 储备液加到 900 μL 20% 的 SBE-β-CD 生理盐水溶液中，混合均匀。</p> <p>3.请依序添加每种溶剂： 10% DMSO →90% corn oil</p> <p>Solubility: 2.5 mg/mL (5.65 mM); Suspended solution; Need ultrasonic</p> <p>此方案可获得 2.5 mg/mL (5.65 mM)的均匀悬浊液，悬浊液可用于口服和腹腔注射。</p> <p>以 1 mL 工作液为例，取 100 μL 25.0 mg/mL 的澄清 DMSO 储备液加到 900 μL 玉米油中，混合均匀。</p>
References	[1]. Gschwendt M, et al. Inhibition of protein kinase C mu by various inhibitors. Differentiation from protein kinase c isoenzymes. FEBS Lett, 1996, 392(2), 77-80. [2]. Peterman EE, et al. G0 6983 exerts cardioprotective effects in myocardial ischemia/reperfusion. J Cardiovasc Pharmacol, 2004, 43(5), 645-656. [3]. Young LH, et al. G0 6983: a fast acting protein kinase C inhibitor that attenuates myocardial ischemia/reperfusion injury. Cardiovasc Drug Rev, 2005, 23(3), 255-272.
实验参考：	
Kinase Assay	Phosphorylation reactions are carried out in a total volume of 100 μL, containing buffer C (50 mM Tris-HCl, pH 7.5, 10 mM β-mercaptoethanol), 4 mM MgCl ₂ , 10 μg PS, 100 nM TPA, 5 μL of a Sf158 cell extract as a source of recombinant PKCμ or of Sf9 cell extracts as a source of other recombinant PKC isoenzymes, 10 μg of syntide 2 as substrate, and 35 μM ATP containing 1 μCi [γ - ³² P]ATP. In some experiments, PS and TPA are omitted or various inhibitors at concentrations indicated in the text are added. After incubation for 10 min at 30°C, the reaction is terminated by transferring 50 μL of the assay mixture onto a 20 mm square piece of phosphocellulose paper, which is washed 3 times in deionized water and twice in acetone. The radioactivity on each paper is determined by liquid scintillation counting. [1]
References	[1]. Gschwendt M, et al. Inhibition of protein kinase C mu by various inhibitors. Differentiation from protein kinase c isoenzymes. FEBS Lett, 1996, 392(2), 77-80. [2]. Peterman EE, et al. G0 6983 exerts cardioprotective effects in myocardial ischemia/reperfusion. J Cardiovasc Pharmacol, 2004, 43(5), 645-656. [3]. Young LH, et al. G0 6983: a fast acting protein kinase C inhibitor that attenuates myocardial ischemia/reperfusion injury. Cardiovasc Drug Rev, 2005, 23(3), 255-272.