



上海源叶生物科技有限公司
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产品名称: KIRA6

产品别名: KIRA6

生物活性:

Description	KIRA6 is an advanced small-molecule IRE1 α RNase kinase inhibitor with an IC ₅₀ of 0.6 μ M ^[2] . KIRA6 can trigger an apoptotic response ^[1] .
IC₅₀ & Target	IC50: 0.6 μ M (IRE1 α RNase kinase) ^[2]
	KIRA6 (1nM-100 μ M) binds to the cytoplasmic domain of KIT with a Kd value of 10.8 μ M ^[1] . KIRA6 (10-1000 nM; 72 hours) strongly compromises the viability of the KIT-dependent cell line HMC-1.1 at the low nM concentration, in a manner that coincided with KIT blockade ^[1] . KIRA6 (10-1000 nM; 1 hour) reduces signaling output of KIT, including the phosphorylation of KIT as well as its downstream signaling modules, PSTAT5 and phosphorylated ERK1/2 ^[1] . KIRA6 (1 μ M; 0-48 hours) inhibits Ins1 mRNA decay from IRE1 α hyperactivation at a dose-dependent manner ^[2] . KIRA6 (0.1-10 μ M; 72 hours) dose-dependently reduces 1NM-PP1 potentiation of Ins1 apoptosis during ER stress in a dose-dependent manner ^[2] .
Cell Viability Assay[1]	
Cell Line:	HMC-1.1 cells
Concentration:	10 nM, 30 nM, 100 nM, 300 nM, 1000 nM
Incubation Time:	72 hours
Result:	Inhibited cell viability from 30 nM.
Western Blot Analysis[1]	
Cell Line:	HMC-1.1 cells
Concentration:	10 nM, 30 nM, 100 nM, 300 nM, 1000 nM
Incubation Time:	1 hours
Result:	Reduced expression of phosphorylated KIT, STAT5 and ERK1/2.
RT-PCR[2]	
Cell Line:	INS-1 IRE1 α (WT) cells
Concentration:	1 μ M
Incubation Time:	0 hour, 12 hours, 24 hours, 48 hours
Result:	Inhibited Ins1 mRNA expression.
Apoptosis Analysis[2]	
Cell Line:	INS-1 IRE1 α (WT) cells
Concentration:	1-10 μ M
Incubation Time:	72 hours
Result:	Reduced 1NM-PP1 potentiation of Ins1 apoptosis during ER stress.
In Vivo	KIRA6 (intraperitoneal injection; 5 mg/kg; 37 days) shows significant amelioration of random glucose levels over several weeks compared to vehicle, both fed ad lib ^[2] . KIRA6 (intraperitoneal injection; 5 mg/kg; 21 or 18 days postinjections) increases both plasma insulin and C-peptide levels, remains insulin-positive islet areas at high level after stopping injections in the Akita Mouse ^[2] .



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	Animal Model:	Male Ins2+/Akita mice[2]			
	Dosage:	5 mg/kg			
	Administration:	Intraperitoneal injection; 5 mg/kg; 21 or 18 days postinjections			
	Result:	Attenuates b cell functional loss, increased insulin levels.			
Solvent&Solubility	In Vitro: DMSO : ≥ 5 mg/mL (0.96 mM) Ethanol : 2 mg/mL (3.86 mM; Need ultrasonic) * "≥" means soluble, but saturation unknown.				
	Preparing Stock Solutions	Solvent \ Mass	1 mg	5 mg	10 mg
		Concentration			
		1 mM	1.9285 mL	9.6426 mL	19.2853 mL
		5 mM	0.3857 mL	1.9285 mL	3.8571 mL
		10 mM	---	---	---
	*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。				
	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。				
	In Vivo: 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: ——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				
	1. 请依序添加每种溶剂: 10% DMSO → 40% PEG300 → 5% Tween-80 → 45% saline Solubility: ≥ 0.5 mg/mL (0.96 mM); Clear solution 此方案可获得 ≥ 0.5 mg/mL (0.96 mM, 饱和度未知) 的澄清溶液。 以 1 mL 工作液为例, 取 100 μL 5.0 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。				
	2. 请依序添加每种溶剂: 10% DMSO → 90% (20% SBE-β-CD in saline) Solubility: ≥ 0.5 mg/mL (0.96 mM); Clear solution 此方案可获得 ≥ 0.5 mg/mL (0.96 mM, 饱和度未知) 的澄清溶液。 以 1 mL 工作液为例, 取 100 μL 5.0 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。				
	3. 请依序添加每种溶剂: 10% DMSO → 90% corn oil Solubility: ≥ 0.5 mg/mL (0.96 mM); Clear solution 此方案可获得 ≥ 0.5 mg/mL (0.96 mM, 饱和度未知) 的澄清溶液, 此方案不适用于实验周期在半个月以上的实验。 以 1 mL 工作液为例, 取 100 μL 5.0 mg/mL 的澄清 DMSO 储备液加到 900 μL 玉米油中, 混合均匀。				



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References

- [1]. Mahameed M, et al. The unfolded protein response modulators GSK2606414 and KIRA6 are potent KIT inhibitors. *Cell Death Dis.* 2019 Apr 1;10(4):300.
- [2]. Ghosh R, et al. Allosteric inhibition of the IRE1 α RNase preserves cell viability and function during endoplasmic reticulum stress. *Cell.* 2014 Jul 31;158(3):534-48.



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