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产品名称：Bay 59-3074
产品别名：Bay 59-3074

生物活性：

Description	Bay 59-3074 is a selective cannabinoid CB_1/CB_2 receptor partial agonist with K_i values of 48.3 and 45.5 nM at human CB_1 and CB_2 receptors, respectively. Bay 59-3074 has analgesic properties[1].	
IC_{50} & Target	CB1	CB2
	48.3 nM (Ki)	45.5 nM (Ki)
In Vivo	BAY 59-3074 (0.3-3 mg/kg; oral administration; daily; for 2 weeks; male Wistar rats) treatment improves antihyperalgesic and antiallodynic effects against thermal or mechanical stimuli in rat models of chronic neuropathic and inflammatory pain.	
	Animal Model:	Male Wistar rats (160-250 g)[1]
	Dosage:	0.3 mg/kg, 1 mg/kg, and 3 mg/kg
	Administration:	Oral administration; daily; for 2 weeks.
	Result:	Antiallodynic efficacy in the spared nerve injury model was maintained after 2 weeks of daily administration. Tolerance developed rapidly (within 5 days) for cannabinoid-related side effects. Antihyperalgesic and antiallodynic efficacy was maintained/increased.

Solvent&Solubility

In Vitro:

DMSO： ≥ 34 mg/mL (75.00 mM)

* "≥" means soluble, but saturation unknown.

	Solvent / Mass / Concentration	1 mg	5 mg	10 mg
Preparing Stock Solutions	1 mM	2.2058 mL	11.0288 mL	22.0575 mL
	5 mM	0.4412 mL	2.2058 mL	4.4115 mL
	10 mM	0.2206 mL	1.1029 mL	2.2058 mL

*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 →90% corn oil

Solubility: ≥ 2.5 mg/mL (5.51 mM); Clear solution

此方案可获得 ≥ 2.5 mg/mL (5.51 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 25.0 mg/mL 的澄清 DMSO 储备液加到 900 μL 玉米油中，混合均匀。

References	[1]. De Vry J et al. 3-[2-cyano-3-(trifluoromethyl)phenoxy]phenyl-4,4,4-trifluoro-1-butanesulfonate (BAY 59-3074): a novelcannabinoid Cb1/Cb2 receptor partial agonist with antihyperalgesic and antiallodynic effects. J Pharmacol Exp Ther. 2004 Aug;310(2):620-32.