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产品名称: 氯丁胶乳
 产品别名: **Azeliragon; 阿齐瑞格; TTP488; PF-04494700**

生物活性:																												
Description	Azeliragon (TTP488) is an orally bioavailable inhibitor of the receptor for advanced glycation end products (RAGE) in development as a potential treatment to slow disease progression in patients with mild Alzheimer's disease (AD)[1]. Azeliragon also can cross the blood-brain barrier (BBB)[2].																											
In Vitro	Azeliragon (4 nM; 16 hours; T cells) treatment inhibits of wild type mice (WT) but not the deletion of the receptor (RAGE-/- mice) T cells and significant reduction in the production of IFN- γ [3].																											
	Cell Viability Assay[3]																											
	Cell Line: Purified T cells from RAGE-/- or WT B6 mice.																											
	Concentration: 4 nM																											
	Incubation Time: 16 hours																											
	Result: Inhibited of WT but not RAGE-/- T cells, and significantly reduced the level of IFN- γ .																											
In Vivo	Azeliragon (100 mcg/d; intraperitoneal injection; every day) treatment reduces syngeneic islet graft and islet allograft in NOD and B6 mice (Islets were isolated from young prediabetic NOD/LtJ mice and transplanted into NOD mice with spontaneous diabetes; islets were isolated from WT BALB/c mice and transplanted into B6 mice with diabetes)[3].																											
	Animal Model: Prediabetic NOD/LtJ (6-7 week old) mice, NOD mice with spontaneous diabetes, WT BALB/c mice (8-10 week old) and B6 mice with diabetes [3].																											
	Dosage: 100 mcg/d																											
	Administration: Intraperitoneal injection; every day																											
	Result: Prolonged islet auto and allograft survival.																											
Solvent&Solubility	In Vitro: DMSO : 50 mg/mL (93.96 mM; Need ultrasonic) H ₂ O : < 0.1 mg/mL (insoluble)																											
	<table border="1"> <thead> <tr> <th rowspan="2">Preparing</th> <th>Solvent</th> <th>Mass</th> <th>1 mg</th> <th>5 mg</th> <th>10 mg</th> </tr> <tr> <th>Concentration</th> <th></th> <th></th> <th></th> <th></th> </tr> </thead> <tbody> <tr> <td rowspan="3">Stock Solutions</td> <td>1 mM</td> <td></td> <td>1.8793 mL</td> <td>9.3964 mL</td> <td>18.7928 mL</td> </tr> <tr> <td>5 mM</td> <td></td> <td>0.3759 mL</td> <td>1.8793 mL</td> <td>3.7586 mL</td> </tr> <tr> <td>10 mM</td> <td></td> <td>0.1879 mL</td> <td>0.9396 mL</td> <td>1.8793 mL</td> </tr> </tbody> </table>	Preparing	Solvent	Mass	1 mg	5 mg	10 mg	Concentration					Stock Solutions	1 mM		1.8793 mL	9.3964 mL	18.7928 mL	5 mM		0.3759 mL	1.8793 mL	3.7586 mL	10 mM		0.1879 mL	0.9396 mL	1.8793 mL
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*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																												



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	<p>1.请依序添加每种溶剂: 10% DMSO→40% PEG300 →5% Tween-80 → 45% saline Solubility: ≥ 3 mg/mL (5.64 mM); Clear solution 此方案可获得 ≥ 3 mg/mL (5.64 mM, 饱和度未知) 的澄清溶液。 以 1 mL 工作液为例, 取 100 μL 30.0 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) Solubility: 3 mg/mL (5.64 mM); Suspended solution; Need ultrasonic 此方案可获得 3 mg/mL (5.64 mM)的均匀悬浊液, 悬浊液可用于口服和腹腔注射。 以 1 mL 工作液为例, 取 100 μL 30.0 mg/mL 的澄清 DMSO 储备液加到 900 μL 20% 的 SBE-β-CD 生理盐水水溶液中, 混合均匀。</p> <p>3.请依序添加每种溶剂: 10% DMSO →90% corn oil Solubility: ≥ 3 mg/mL (5.64 mM); Clear solution 此方案可获得 ≥ 3 mg/mL (5.64 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 30.0 mg/mL 的澄清 DMSO 储备液加到 900 μL 玉米油中, 混合均匀。</p>
References	<p>[1]. Burstein AH, et al. Assessment of Azeliragon QTc Liability Through Integrated, Model-Based Concentration QTc Analysis. Clin Pharmacol Drug Dev. 2019 May;8(4):426-435.</p> <p>[2]. Bongarzone S, et al. Targeting the Receptor for Advanced Glycation Endproducts (RAGE): A Medicinal Chemistry Perspective. J Med Chem. 2017 Sep 14;60(17):7213-7232.</p> <p>[3]. Chen Y, et al. RAGE ligation affects T cell activation and controls T cell differentiation. J Immunol. 2008 Sep 15;181(6):4272-8.</p>

源叶生物