TRV-120027

®

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| Cat. No.: | HY-P2141 | | | |
|----------------------|--|-------|---------|--|
| CAS No.: | 1234510-46-3 | | | |
| Molecular Formula: | C ₄₃ H ₆₇ N ₁₃ O ₁₀ | | | |
| Molecular Weight: | 926.07 | | | |
| Sequence Shortening: | {Sar}-RVYIHPA | | | |
| Target: | Angiotensin Receptor; Arrestin | | | |
| Pathway: | GPCR/G Protein | | | |
| Storage: | Sealed storage, away from moisture and light, under nitrogen | | | |
| | Powder | -80°C | 2 years | |
| | | -20°C | 1 year | |
| | * In solvent : -80°C, 6 months; -20°C, 1 month (sealed storage, away from moisture | | | |
| | and light, under nitrogen) | | | |

BIOLOGICAL ACTIVITY

| Description | TRV120027, a β-arrestin-1-biased agonist of the angiotensin II receptor type 1 (AT1R), engages β-arrestins while blocking G- protein signaling ^[1] . TRV120027 induces acute catecholamine secretion through cation channel subfamily C3 (TRPC3) coupling, promotes the formation of a macromolecular complex composed of AT1R–β-arrestin-1–TRPC3–PLCγ at the plasma membrane. TRV120027 inhibits angiotensin II–mediated vasoconstriction and increases cardiomyocyte contractility. TRV120027 has the potential for the acute decompensated heart failure (ADHF) treatment ^[2] . | | | |
|---------------------------|---|--|--|--|
| IC ₅₀ & Target | IC50: the angiotensin II receptor type 1 (AT1R) ^[1] | | | |
| In Vitro | TRV120027 (100 nM) significantly increases the AT1R and TRPC3 association with the immunoprecipitated β-arrestin-1 in HEK293 cells co-transfected with Flag-AT1R-cherry, HA-β-arrestin-1 and TRPC3-GFP ^[2] . TRV120027 (100 nM) induces an [Ca ²⁺]i increase in HEK293 cells co-transfected with AT1R, β-arrestin-1, and TRPC3, which are significantly blocked by Pyr3 pre-incubation in HEK293 cells co-transfected with Flag-AT1R-Cherry, HA-β-arrestin-1, and TRPC3-GFP ^[2] . MCE has not independently confirmed the accuracy of these methods. They are for reference only. | | | |
| In Vivo | TRV120027 (intravenous injection; 0.3 or 1.5 μg/kg per minute; infusion rate, 0.5 mL/min) when added to furosemide decreases cardiac preload and afterload, systemic and renal vascular resistances, and left ventricular external work w increasing cardiac output and renal blood flow. GFR and renal excretory function are maintained in canines with experimental HF ^[1] . MCE has not independently confirmed the accuracy of these methods. They are for reference only.Animal Model:Male mongrel dogs (weight, 20.5–30 kg) ^[1] Dosage:0.3 or 1.5 μg/kg per minute; infusion rate, 0.5 mL/minAdministration:Intravenous injectionResult:Resulted in dose-dependent vasodilation, increased cardiac contractility, and decreas myocardial oxygen consumption in dog. | | | |

Product Data Sheet

CUSTOMER VALIDATION

- J Am Heart Assoc. 2022 Feb 15;11(4):e022070.
- Eur J Pharmacol. 2023 May 18;175780.
- University of Medicine Berlin. 2023 Mar.

See more customer validations on <u>www.MedChemExpress.com</u>

REFERENCES

[1]. Boerrigter G, et al. TRV120027, a novel β-arrestin biased ligand at the angiotensin II type I receptor, unloads the heart and maintains renal function when added to furosemide in experimental heart failure.Circ Heart Fail. 2012 Sep 1;5(5):627-34. Epub 2012 Aug 13.

[2]. Liu CH, et al. Arrestin-biased AT1R agonism induces acute catecholamine secretion through TRPC3 coupling.Nat Commun. 2017 Feb 9;8:14335.

Caution: Product has not been fully validated for medical applications. For research use only.

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