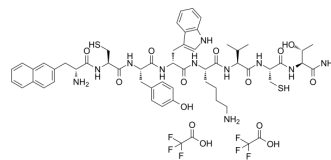


## Angiopeptin TFA

<b>Cat. No.:</b>	HY-P2090A
<b>CAS No.:</b>	2478421-60-0
<b>Molecular Formula:</b>	C <sub>58</sub> H <sub>73</sub> F <sub>6</sub> N <sub>11</sub> O <sub>14</sub> S <sub>2</sub>
<b>Molecular Weight:</b>	1326.39
<b>Sequence Shortening:</b>	{Nal}CYWKVCT-NH2
<b>Target:</b>	Somatostatin Receptor; Adenylate Cyclase
<b>Pathway:</b>	GPCR/G Protein; Neuronal Signaling
<b>Storage:</b>	Sealed storage, away from moisture
	Powder    -80°C    2 years
	-20°C    1 year



\* In solvent : -80°C, 6 months; -20°C, 1 month (sealed storage, away from moisture)

### SOLVENT & SOLUBILITY

#### In Vitro

H<sub>2</sub>O : 10 mg/mL (7.54 mM; Need ultrasonic)

Preparing Stock Solutions	Solvent Concentration	Mass		
		1 mg	5 mg	10 mg
	1 mM	0.7539 mL	3.7696 mL	7.5393 mL
	5 mM	0.1508 mL	0.7539 mL	1.5079 mL
	10 mM	---	---	---

Please refer to the solubility information to select the appropriate solvent.

### BIOLOGICAL ACTIVITY

#### Description

Angiopeptin TFA, a cyclic octapeptide analogue of somatostatin, is a weak sst<sub>2</sub>/sst<sub>5</sub> receptor partial agonist with IC<sub>50</sub> values of 0.26 nM and 6.92 nM, respectively. Angiopeptin TFA is a potent inhibitor of growth hormone release and insulin-like growth factor-1 (IGF-1) production. Angiopeptin TFA inhibits adenylate cyclase or stimulates extracellular acidification. Angiopeptin TFA has the potential for coronary atherosclerosis research<sup>[1][2]</sup>.

#### IC<sub>50</sub> & Target

IC<sub>50</sub>: 0.26 nM (sst<sub>2</sub>) and 6.92 nM (sst<sub>5</sub>)<sup>[1][2]</sup>

#### In Vitro

Angiopeptin (0.1 nM- 10 μM; for 1 h) TFA acts as a partial agonist (pEC<sub>50</sub>=6.57) with a maximum response of 423% at 3 μM on the release of tritium on CHO hsst<sub>2</sub> cells<sup>[2]</sup>.

MCE has not independently confirmed the accuracy of these methods. They are for reference only.

#### In Vivo

Angiopeptin (20 and 50 μg/kg; i.h.) TFA significantly inhibits neointimal formation<sup>[1]</sup>.

Angiopeptin (20 μg/kg; per day) TFA significantly inhibits coronary artery myointimal proliferation in cardiac allografts by approximately 50%<sup>[1]</sup>.

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MCE has not independently confirmed the accuracy of these methods. They are for reference only.

## REFERENCES

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- [1]. Lundergan CF, et al. Peptide inhibition of myointimal proliferation by angiopeptin, a somatostatin analogue. J Am Coll Cardiol. 1991;17(6 Suppl B):132B-136B.
- [2]. Alderton F, et al. Somatostatin receptor-mediated arachidonic acid mobilization: evidence for partial agonism of synthetic peptides. Br J Pharmacol. 2001;132(3):760-766.
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**Caution: Product has not been fully validated for medical applications. For research use only.**

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