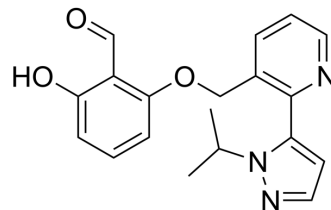


Voxelotor

Cat. No.:	HY-18681
CAS No.:	1446321-46-5
Molecular Formula:	C ₁₉ H ₁₉ N ₃ O ₃
Molecular Weight:	337.37
Target:	Others
Pathway:	Others
Storage:	4°C, stored under nitrogen * In solvent : -80°C, 6 months; -20°C, 1 month (stored under nitrogen)



SOLVENT & SOLUBILITY

In Vitro

DMSO : 100 mg/mL (296.41 mM; Need ultrasonic)

Preparing Stock Solutions	Solvent Concentration	Mass		
		1 mg	5 mg	10 mg
	1 mM	2.9641 mL	14.8205 mL	29.6410 mL
	5 mM	0.5928 mL	2.9641 mL	5.9282 mL
	10 mM	0.2964 mL	1.4821 mL	2.9641 mL

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

In Vivo

- Add each solvent one by one: 5% DMSO >> 40% PEG300 >> 5% Tween-80 >> 50% saline
Solubility: ≥ 2.5 mg/mL (7.41 mM); Clear solution
- Add each solvent one by one: 5% DMSO >> 95% (20% SBE-β-CD in saline)
Solubility: ≥ 2.5 mg/mL (7.41 mM); Clear solution
- Add each solvent one by one: 10% DMSO >> 40% PEG300 >> 5% Tween-80 >> 45% saline
Solubility: ≥ 2.08 mg/mL (6.17 mM); Clear solution
- Add each solvent one by one: 10% DMSO >> 90% (20% SBE-β-CD in saline)
Solubility: ≥ 2.08 mg/mL (6.17 mM); Clear solution
- Add each solvent one by one: 10% DMSO >> 90% corn oil
Solubility: ≥ 2.08 mg/mL (6.17 mM); Clear solution
- Add each solvent one by one: 1% DMSO >> 99% saline
Solubility: 0.5 mg/mL (1.48 mM); Suspended solution; Need ultrasonic

BIOLOGICAL ACTIVITY

Description

Voxelotor (GBT 440) is a potent inhibitor of haemoglobin S (HbS) polymerization. Voxelotor has the potential for sickle cell disease (SCD) treatment^[1].

IC₅₀ & Target	HbS polymerization ^[1]																
In Vitro	Voxelotor (GBT440) \times N \times \times \times \times (Hb) \times \times \times \times \times S (HbS) \times \times \times \times \times HbS \times \times \times \times \times (RBC) \times \times \times \times \times MCE has not independently confirmed the accuracy of these methods. They are for reference only.																
In Vivo	<p>Voxelotor (GBT440) 100-150 mg/kg \times \times \times \times \times \times \times \times \times 9-12 \times \times \times \times \times (SCD) \times \times \times \times \times \times \times (RBC) \times \times \times \times \times \times \times</p> <p>Voxelotor \times \times \times \times \times T_{1/2} \times 11.7 \times 19.1 \pm 1.5 \times 66.0 \pm 11 \times 28.8 \pm 4.0 \times \times (70 mg/kg \times iv) \times \times \times (1.6 mg/kg \times iv) \times \times (1 mg/kg \times iv) \times \times momkey (1 mg/kg \times iv) \times \times \times \times \times</p> <p>Voxelotor \times \times \times (30 mg/kg \times po) \times \times \times (7.2 mg/kg \times po) \times \times (2.5 mg/kg \times po) \times \times momkey (4.25 mg/kg \times po) C_{max}s \times 81.9, 71.2 \pm 6.0, 5.56 \pm 1.6, and 25.2 \pm 5.5 μg/mL^[1] \times</p> <p>MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p> <table border="1"> <tr> <td>Animal Model:</td> <td>HbSS Townes knock-in sickle mice (SS mice)^[1]</td> </tr> <tr> <td>Dosage:</td> <td>100 and 150 mg/kg</td> </tr> <tr> <td>Administration:</td> <td>Oral administration; twice a day; for 9-12 days</td> </tr> <tr> <td>Result:</td> <td>Reduced haemolysis.</td> </tr> </table> <table border="1"> <tr> <td>Animal Model:</td> <td>C57BL/6J mice, Sprague-Dawley rats, Beagle dogs and Cynomolgus monkeys^[1]</td> </tr> <tr> <td>Dosage:</td> <td>70, 1.6, 1 and 1 mg/kg for mice, rats, dogs and monkeys, respectively 30, 7.2, 2.5 and 4.25 mg/kg for mice, rats, dogs and monkeys, respectively</td> </tr> <tr> <td>Administration:</td> <td>Intravenous (IV: 70, 1.6, 1 and 1 mg/kg, respectively) Oral (PO: 30, 7.2, 2.5 and 4.3 mg/kg, respectively)</td> </tr> <tr> <td>Result:</td> <td>T_{1/2}s of 11.7, 19.1 \pm 1.5, 66.0 \pm 11, 28.8 \pm 4.0 hours for mouse (70 mg/kg; i.v.), rat (1.6 mg/kg; i.v.), dog (1 mg/kg; i.v.), and momkey (1 mg/kg; i.v.), respectively. C_{max}s of 81.9, 71.2 \pm 6.0, 5.56 \pm 1.6, and 25.2 \pm 5.5 μg/mL for mouse (30 mg/kg; p.o.), rat (7.2 mg/kg; p.o.), dog (2.5 mg/kg; p.o.), and momkey (4.25 mg/kg; p.o.), respectively.</td> </tr> </table>	Animal Model:	HbSS Townes knock-in sickle mice (SS mice) ^[1]	Dosage:	100 and 150 mg/kg	Administration:	Oral administration; twice a day; for 9-12 days	Result:	Reduced haemolysis.	Animal Model:	C57BL/6J mice, Sprague-Dawley rats, Beagle dogs and Cynomolgus monkeys ^[1]	Dosage:	70, 1.6, 1 and 1 mg/kg for mice, rats, dogs and monkeys, respectively 30, 7.2, 2.5 and 4.25 mg/kg for mice, rats, dogs and monkeys, respectively	Administration:	Intravenous (IV: 70, 1.6, 1 and 1 mg/kg, respectively) Oral (PO: 30, 7.2, 2.5 and 4.3 mg/kg, respectively)	Result:	T _{1/2} s of 11.7, 19.1 \pm 1.5, 66.0 \pm 11, 28.8 \pm 4.0 hours for mouse (70 mg/kg; i.v.), rat (1.6 mg/kg; i.v.), dog (1 mg/kg; i.v.), and momkey (1 mg/kg; i.v.), respectively. C _{max} s of 81.9, 71.2 \pm 6.0, 5.56 \pm 1.6, and 25.2 \pm 5.5 μ g/mL for mouse (30 mg/kg; p.o.), rat (7.2 mg/kg; p.o.), dog (2.5 mg/kg; p.o.), and momkey (4.25 mg/kg; p.o.), respectively.
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CUSTOMER VALIDATION

- Am J Hematol. 2019 May;94(5):575-584.
- Pharmaceutics. 2021, 13(9), 1388.
- Sci Rep. 2020 Nov 20;10(1):20277.
- J Pharm Biomed Anal. 2022: 115152.
- Am J Clin Pathol. 2020 Oct 13;154(5):627-634.

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REFERENCES

- [1]. Metcalf B, Chuang C, Dufu K, et al. Discovery of GBT440, an Orally Bioavailable R-State Stabilizer of Sickle Cell Hemoglobin. ACS Med Chem Lett. 2017;8(3):321-326.
- [2]. Oksenberg D, et al. GBT440 increases haemoglobin oxygen affinity, reduces sickling and prolongs RBC half-life in a murine model of sickle cell disease. Br J Haematol.

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

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