Repaglinide

Cat. No.:	HY-15209			
CAS No.:	135062-02-1	L		
Molecular Formula:	$C_{27}H_{36}N_{2}O_{4}$			
Molecular Weight:	452.59			
Target:	Potassium Channel			
Pathway:	Membrane Transporter/Ion Channel			
Storage:	Powder	-20°C	3 years	
		4°C	2 years	
	In solvent	-80°C	2 years	
		-20°C	1 year	

R

MedChemExpress

SOLVENT & SOLUBILITY

In Vitro	DMSO : ≥ 50 mg/mL (110.48 mM) * "≥" means soluble, but saturation unknown.						
	Preparing Stock Solutions	Solvent Mass Concentration	1 mg	5 mg	10 mg		
		1 mM	2.2095 mL	11.0475 mL	22.0951 mL		
		5 mM	0.4419 mL	2.2095 mL	4.4190 mL		
		10 mM	0.2210 mL	1.1048 mL	2.2095 mL		
	Please refer to the solubility information to select the appropriate solvent.						
In Vivo	1. Add each solvent one by one: 10% DMSO >> 40% PEG300 >> 5% Tween-80 >> 45% saline Solubility: ≥ 2.5 mg/mL (5.52 mM); Clear solution						
	2. Add each solvent one by one: 10% DMSO >> 90% (20% SBE-β-CD in saline) Solubility: ≥ 2.5 mg/mL (5.52 mM); Clear solution						
	 Add each solvent of Solubility: ≥ 2.5 m 	one by one: 10% DMSO >> 90% cor g/mL (5.52 mM); Clear solution	n oil				

BIOLOGICAL ACTIV					
BIOLOGICAL ACTIVITY					
Description	Repaglinide is an insulin secretagogue for the treatment of type-2 diabetes mellitus ^[1] .				
In Vitro	Repaglinide reduces postprandial glucose levels by enhancing the early phase of insulin secretion and increasing the total amount of insulin secreted ^[1] . MCE has not independently confirmed the accuracy of these methods. They are for reference only.				





In Vivo

Repaglinide (AG-EE 623ZW) is very rapidly absorbed (t_{max} less than 1 hour) with a $t_{1/2}$ of less than one hour. Furthermore, Repaglinide is inactivated in the liver and more than 90 % excreted via the bile. Repaglinide (1 mg/kg p.o.) is effective (P<0.001) as an insulin-releasing agent in a rat model (low-dose streptozotocin) of type 2 diabetes. MCE has not independently confirmed the accuracy of these methods. They are for reference only.

REFERENCES

[1]. Wang LC, et al. Characteristics of repaglinide and its mechanism of action on insulin secretion in patients with newly diagnosed type-2 diabetes mellitus. Medicine (Baltimore). 2018 Sep;97(38):e12476.

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

 Tel: 609-228-6898
 Fax: 609-228-5909
 E-mail: tech@MedChemExpress.com

 Address: 1 Deer Park Dr, Suite Q, Monmouth Junction, NJ 08852, USA