

Varenicline

Cat. No.:	HY-10019		
CAS No.:	249296-44-4		
Molecular Formula:	C ₁₃ H ₁₃ N ₃		
Molecular Weight:	211.26		
Target:	nAChR		
Pathway:	Membrane Transporter/Ion Channel; Neuronal Signaling		
Storage:	Powder	-20°C	3 years
		4°C	2 years
	In solvent	-80°C	6 months
		-20°C	1 month

SOLVENT & SOLUBILITY

In Vitro

DMSO : 25 mg/mL (118.34 mM; Need ultrasonic)
 H₂O : ≥ 20 mg/mL (94.67 mM)
 * "≥" means soluble, but saturation unknown.

Preparing Stock Solutions	Solvent Concentration	Mass	1 mg	5 mg	10 mg
	1 mM		4.7335 mL	23.6675 mL	47.3350 mL
5 mM		0.9467 mL	4.7335 mL	9.4670 mL	
10 mM		0.4734 mL	2.3668 mL	4.7335 mL	

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

In Vivo

- Add each solvent one by one: 10% DMSO >> 40% PEG300 >> 5% Tween-80 >> 45% saline
Solubility: ≥ 2.5 mg/mL (11.83 mM); Clear solution
- Add each solvent one by one: 10% DMSO >> 90% (20% SBE-β-CD in saline)
Solubility: ≥ 2.5 mg/mL (11.83 mM); Clear solution
- Add each solvent one by one: 10% DMSO >> 90% corn oil
Solubility: ≥ 2.5 mg/mL (11.83 mM); Clear solution

BIOLOGICAL ACTIVITY

Description

Varenicline (CP 526555) is a potent partial agonist for α₄β₂ nicotinic acetylcholine receptor (nAChR) with an EC₅₀ value of 2.3 μM. Varenicline is a full agonist for α₃β₄ and α₇ nAChRs with EC₅₀ values of 55 μM and 18 μM, respectively^[2]. Varenicline is a nicotinic ligand based on the structure of cytosine, and has the potential for smoking cessation treatment^[5].

IC₅₀ & Target

EC₅₀: 2.3 μM (α₄β₂ nAChR); 18 μM (α₇ nAChR); 55 μM (α₃β₄ nAChR)^[1]

In Vitro

Varenicline (1 μ M, 24 h) inhibits LPS-Induced cytokine secretions (IL-1 β , IL-6, and TNF α) and cell proliferation rate in RAW 264.7 macrophages^[1].

Varenicline (250 nM) evokes action potentials (Aps) in the absence of ACh stimulation in Human adrenal chromaffin cells isolated from male and female organ donors^[3].

Varenicline (100 μ M, 4 h) promotes migration of HUVECs by lowering the protein expression of VE-cadherin^[4].

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

Cell Proliferation Assay^[1]

Cell Line:	RAW 264.7 murine macrophage cells (treated with 4 μ g/mL LPS for 24 h)
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Concentration:	1 μ M
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Incubation Time:	0-48 h
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Result:	Decreased the LPS-induced cell proliferation rate.
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Western Blot Analysis^[4]

Cell Line:	HUVECs
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Concentration:	1, 10, 100 μ M
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Incubation Time:	24 h or 30 min
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Result:	Decreased the protein expression of VE-cadherin and activated ERK1/2, p38 and JNK signaling.
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In Vivo

Varenicline (Subcutaneous injection, 0.01-1 mg/kg, 3 days) given 10 min prior to nicotine (0.5 mg/kg, s.c.) inhibits nicotine conditioned place preference (CPP)^[5].

Varenicline (Subcutaneous injection, 2.5 mg/kg, 3 days) results in a place aversion which is dependent on α 5 nAChRs but not β 2 nAChRs^[5].

Varenicline (Subcutaneous injection, 0.1 and 0.5 mg/kg, 3 days) reverses nicotine withdrawal signs such as hyperalgesia and somatic signs and withdrawal-induced aversion in a dose-related manner^[5].

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

Animal Model:	ICR male mice ^[5]
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Dosage:	0.01-1 mg/kg for 3 days
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Administration:	Subcutaneous injection
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Result:	Inhibited nicotine conditioned place preference (CPP) in a dose dependent manner.
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REFERENCES

[1]. Elif Baris, et al. Varenicline Prevents LPS-Induced Inflammatory Response via Nicotinic Acetylcholine Receptors in RAW 264.7 Macrophages. *Front Mol Biosci.* 2021 Oct 12;8:721533.

[2]. Mihalak KB, et al. Varenicline is a partial agonist at alpha4beta2 and a full agonist at alpha7 neuronal nicotinic receptors. *Mol Pharmacol.* 2006 Sep;70(3):801-5. Epub 2006 Jun 9.

[3]. Jin H, et al. Therapeutic concentrations of varenicline in the presence of nicotine increase action potential firing in human adrenal chromaffin cells. *J Neurochem.* 2017 Jan;140(1):37-52.

[4]. Mitsuhsa Koga, et al. Varenicline promotes endothelial cell migration by lowering vascular endothelial-cadherin levels via the activated α 7 nicotinic acetylcholine receptor-mitogen activated protein kinase axis. *Toxicology.* 2017 Sep 1;390:1-9.

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

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