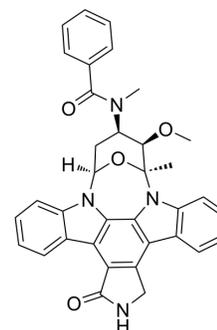


Midostaurin

Cat. No.:	HY-10230
CAS No.:	120685-11-2
Molecular Formula:	C ₃₅ H ₃₀ N ₄ O ₄
Molecular Weight:	570.64
Target:	PKC; Apoptosis; VEGFR; c-Kit; NO Synthase
Pathway:	Epigenetics; TGF-beta/Smad; Apoptosis; Protein Tyrosine Kinase/RTK; Immunology/Inflammation
Storage:	-20°C, sealed storage, away from moisture * In solvent : -80°C, 6 months; -20°C, 1 month (sealed storage, away from moisture)



SOLVENT & SOLUBILITY

In Vitro	DMSO : 50 mg/mL (87.62 mM; Need ultrasonic)				
		Solvent Concentration	Mass		
	Preparing Stock Solutions			1 mg	5 mg
		1 mM		1.7524 mL	8.7621 mL
		5 mM		0.3505 mL	1.7524 mL
	10 mM		0.1752 mL	0.8762 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 (4.38 mM); Clear solution				
	2. Add each solvent one by one: 10% DMSO >> 90% corn oil Solubility: ≥ 2.5 mg/mL (4.38 mM); Clear solution				

BIOLOGICAL ACTIVITY

Description	Midostaurin (PKC412; CGP 41251) is an orally active, reversible multi-targeted protein kinase inhibitor. Midostaurin inhibits PKCα/β/γ, Syk, Flk-1, Akt, PKA, c-Kit, c-Fgr, c-Src, FLT3, PDFRβ and VEGFR1/2 with IC ₅₀ s ranging from 22-500 nM ^{[1][2]} . Midostaurin also upregulates endothelial nitric oxide synthase (eNOS) gene expression. Midostaurin shows powerful anticancer effects ^[3] .			
IC₅₀ & Target	cPKC-α 22 nM (IC ₅₀)	eNOS	cPKC-γ 24 nM (IC ₅₀)	cPKC-β1 30 nM (IC ₅₀)
	cPKC-β2 31 nM (IC ₅₀)	nPKC-δ 33 nM (IC ₅₀)	nPKC-η 160 nM (IC ₅₀)	nPKC-ε 1250 nM (IC ₅₀)

	aPKC- ζ 465000 nM (IC ₅₀)	PPK 38 nM (IC ₅₀)	KDR 86 nM (IC ₅₀)	c-Syk 95 nM (IC ₅₀)
	cdk1/cycB 570 nM (IC ₅₀)	Protein kinase A 570 nM (IC ₅₀)	c-Fgr 790 nM (IC ₅₀)	c-Src 800 nM (IC ₅₀)
	Flt-1 912 nM (IC ₅₀)	EGF-R 1100 nM (IC ₅₀)	Myosin-light chain kinase 1900 nM (IC ₅₀)	Flk-1 3900 nM (IC ₅₀)
	c-Lyn 4300 nM (IC ₅₀)	P70S6 kinase 5000 nM (IC ₅₀)	CSK 8000 nM (IC ₅₀)	

In Vitro	<p>Midostaurin (PKC412) shows a broad antiproliferative activity against various tumor and normal cell lines in vitro, and is able to reverse the Pgp-mediated multidrug resistance of tumor cells in vitro. Exposure of cells to Midostaurin (PKC412) results in a dose-dependent increase in the G₂/M phase of the cell cycle concomitant with increased polyploidy, apoptosis and enhanced sensitivity to ionizing radiation^[1].</p> <p>Midostaurin (PKC412) induces substantial inhibition of KIT-, Lyn-, and STAT5 activity, but does not suppress Btk in HMC-1 cells and primary neoplastic mast cells^[3].</p> <p>Midostaurin (PKC412) inhibits EN fusion tyrosine kinase in hematopoietic Ba/F3 cells. Midostaurin (PKC412) significantly inhibits EN phosphorylation in M0-91 and IMS-M2 cells in a dose-dependent manner^[4].</p> <p>MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p>
In Vivo	<p>Midostaurin (PKC412) strongly inhibits retinal neovascularization as well as laser-induced choroidal neovascularization in murine models^[1].</p> <p>Midostaurin (PKC412) (25 mg/kg, i.p.) protects mouse livers of the K18 Arg90Cys-overexpressing transgenic mice from Fas-induced apoptosis^[5].</p> <p>MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p>

PROTOCOL

Cell Assay ^[3]	<p>Proliferation is determined by trypan blue dye exclusion test. Cells in suspension are seeded in six-well plates at a density of 1×10⁵ cells/mL in the presence of different concentrations of PKC412 for 3 days. In control wells, DMSO instead of Midostaurin (PKC412) is added. After the treatment, 10 μL of the cell suspension is mixed with 10 μL of 0.4% trypan blue, and alive cells are counted manually using a hemacytometer. Results are calculated as the percentage of the values measured when cells are grown in the absence of the reagent. All experiments are performed in triplicate^[3].</p> <p>MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p>
Animal Administration ^[4]	<p>K8-deficient, K18-deficient, and human K18 R90C-overexpressing mice with age of 6-8 weeks are used in the assay. Age and sex matched mice are treated with Midostaurin (25 mg/kg), daily for 4 d or with an equal volume of DMSO as vehicle (both administered intraperitoneally). On day 5 post-treatment, apoptosis is induced by intraperitoneal injection of Fas ligand (Fas-L) (0.15 μg/g body weight). Mice are fasted overnight before Fas Ab injection, and 18 mice are used per DMSO or Midostaurin (PKC412) group for the Fas-treated mice while 6 mice are used per DMSO or Midostaurin (PKC412) group for the control non-Fas-treated mice. Mice are sacrificed by CO₂ inhalation 6 h after Fas Ab injection. Blood is collected by intracardiac puncture, and livers are harvested for hematoxylin and eosin (HE) staining (after fixation in 10% formalin) or frozen in optimum cutting temperature compound for immunofluorescence staining^[4].</p> <p>MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p>

CUSTOMER VALIDATION

- Cell. 2018 Sep 20;175(1):171-185.e25.

- Blood. 2022 Aug 18;blood.2021015246.
- Sci Transl Med. 2018 Jul 18;10(450):eaaq1093.
- Nat Commun. 2023 Oct 10;14(1):6332.
- Biomaterials. 16 September 2022.

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- [2]. Fabbro D, et al. PKC412--a protein kinase inhibitor with a broad therapeutic potential. Anticancer Drug Des. 2000 Feb;15(1):17-28.
- [3]. Gleixner KV, et al. Synergistic growth-inhibitory effects of Midostaurin (PKC412) on neoplastic mast cells carrying KIT D816V. Haematologica. 2013 Sep;98(9):1450-7.
- [4]. Chi HT, et al. ETV6-NTRK3 as a therapeutic target of small molecule inhibitor PKC412. Biochem Biophys Res Commun. 2012 Dec 7;429(1-2):87-92.
- [5]. Kwan R, et al. PKC412 normalizes mutation-related keratin filament disruption and hepatic injury in mice by promoting keratin-myosin binding. Hepatology. 2015 Dec;62(6):1858-69.
- [6]. Fabbro D, et al. Inhibitors of protein kinases: CGP 41251, a protein kinase inhibitor with potential as an anticancer agent. Pharmacol Ther. 1999 May-Jun;82(2-3):293-301.
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Caution: Product has not been fully validated for medical applications. For research use only.

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