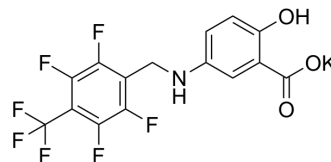


Nelonemdaz potassium

Cat. No.:	HY-106408A
CAS No.:	916214-57-8
Molecular Formula:	C ₁₅ H ₇ F ₇ KNO ₃
Molecular Weight:	421.31
Target:	iGluR
Pathway:	Membrane Transporter/Ion Channel; Neuronal Signaling
Storage:	4°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 : 200 mg/mL (474.71 mM; Need ultrasonic)

Concentration	Mass			
	1 mg	5 mg	10 mg	
1 mM	2.3735 mL	11.8677 mL	23.7355 mL	
5 mM	0.4747 mL	2.3735 mL	4.7471 mL	
10 mM	0.2374 mL	1.1868 mL	2.3735 mL	

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

BIOLOGICAL ACTIVITY

Description

Nelonemdaz (Salfaprodil) potassium is an NR2B-selective and uncompetitive antagonist of N-methyl-D-aspartate (NMDA). Nelonemdaz potassium is also a free radical scavenger. Nelonemdaz potassium has excellent neuroprotection against NMDA- and free radical-induced cell death^{[1][2]}.

IC₅₀ & Target

NMDA^[1]

In Vitro

Nelonemdaz potassium (10-300 μM) shows apparent neuroprotection against 300 μM N-methyl-d-aspartate (NMDA) at doses as low as 30 μM^[1].
 Nelonemdaz potassium (10-500 μM) inhibits the electrophysiologic response of cultured cortical neurons to 300 μM NMDA in a concentration-dependent manner^[1].
 Nelonemdaz potassium (0.1-1 μM) produces a marked reduction of Fe²⁺-induced neurotoxicity, even at doses of 0.1 to 0.3 μM^[1].
 Nelonemdaz potassium (0.1-1 μM) blocks the degeneration of neurons and glia in cortical cell cultures^[1].
 Nelonemdaz potassium (0-350 μM) effectively scavenges superoxide radicals (IC₅₀=63.07±1.44 μM), nitric oxide (IC₅₀=155.8±4.88 μM), and hydroxyl radicals (IC₅₀=58.45±1.74 μM)^[3].
 Nelonemdaz potassium (0.78-12.5 μM) decreases the amount of antimycin A-induced ROS/RNS formation in a dose-dependent manner, with an IC₅₀ of 2.21±0.11 μM^[3].

Nelonemdaz potassium (0.19-12.5 μM) inhibits malondialdehyde (MDA) formation with an IC_{50} of $2.72 \pm 0.26 \mu\text{M}$ ^[3].
Nelonemdaz potassium (0-125 μM) effectively reduces iron-ascorbate-induced lipid peroxidation ($\text{IC}_{50} = 24.56 \pm 0.07 \mu\text{M}$)^[3].
MCE has not independently confirmed the accuracy of these methods. They are for reference only.

In Vivo

Nelonemdaz potassium (0.5-20 mg/kg; i.v.) reduces cerebral infarct evolving 24 h after 60-mins occlusion of the middle cerebral artery occlusion (MCAO) substantially and dose dependently^[1].
Nelonemdaz potassium (5 mg/kg; i.v.) protects white matter such as axons and myelin as well as gray matter from ischemic brain injury^[1].
MCE has not independently confirmed the accuracy of these methods. They are for reference only.

Animal Model:	Male Sprague-Dawley rats (260 to 300 g) (clip occlusion model) ^[1]
Dosage:	0.5-20 mg/kg
Administration:	I.v. administration 5 mins after reperfusion
Result:	Produced a large neuroprotective effect, with a maximal reduction in infarct volume of 66% at doses of 2.5 to 5 mg/kg. Not observed neuronal damage in the most vulnerable cortical area after administration of 5 mg/kg.
Animal Model:	Male Sprague-Dawley rats (260 to 300 g) (intraluminal thread occlusion model) ^[1]
Dosage:	5 mg/kg
Administration:	I.v. administration 30 mins after reperfusion
Result:	Did not change physiologic variables such as arterial pH, PCO_2 , PO_2 , and hematocrit. Reduced infarct volume evolving in the cortex and the striatum substantially. Reduced white matter damage in the striatum and external capsule markedly.

REFERENCES

- [1]. Nishant PV, et, al. Antioxidant Properties of Neu2000 on Mitochondrial Free Radicals and Oxidative Damage. *Toxicol In Vitro*. 2013 Mar; 27(2): 788-97.
- [2]. Gwag BJ, et al. Marked prevention of ischemic brain injury by Neu2000, an NMDA antagonist and antioxidant derived from aspirin and sulfasalazine. *J Cereb Blood Flow Metab*. 2007 Jun;27(6):1142-51.
- [3]. Sung IC, et, al. Neu2000, an NR2B-selective, Moderate NMDA Receptor Antagonist and Potent Spin Trapping Molecule for Stroke. *Drug News Perspect*. 2010 Nov; 23(9): 549-56.

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

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