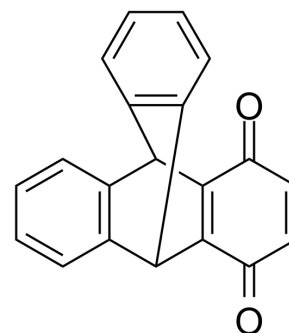


INCA-6

Cat. No.:	HY-108544
CAS No.:	3519-82-2
Molecular Formula:	C ₂₀ H ₁₂ O ₂
Molecular Weight:	284.31
Target:	Others
Pathway:	Others
Storage:	Please store the product under the recommended conditions in the Certificate of Analysis.



BIOLOGICAL ACTIVITY

Description	INCA-6 (Triptycene-1,4-quinone) is a cell-permeable NFAT inhibitor. INCA-6 specifically blocks targeting of NFAT(P) substrate to the calcineurin (CN) phosphatase site and is an effective inhibitor of CN-NFAT signaling ^{[1][2][3]} .									
In Vitro	<p>INCA-6 (5 μM; for 24-hour) prevents transient outward K⁺ current (I_{to}) downregulation in 3-Hz cells^[1].</p> <p>Pre-treatment of BV-2 cells with INCA-6 (10 μM) significantly inhibits ATP-induced CXCL2 expression in BV-2 cells. INCA-6 also inhibits ATP-induced CXCL2 expression in rat primary microglia^[2].</p> <p>INCA-6 (5 μM) reduces SERCA2 transcript levels as well as protein expression, in the absence or in the presence of thapsigargin (TG)^[3].</p> <p>INCA-6 (1.0 and 2.5 μM; 24 hours) treatment significantly decreases both VEGF and serum-induced human retinal microvascular endothelial cells (HRMEC) proliferation, but does not affect baseline proliferation^[4].</p> <p>MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p> <p>Cell Proliferation Assay^[4]</p> <table border="1"> <tr> <td>Cell Line:</td> <td>Human retinal microvascular endothelial cells</td> </tr> <tr> <td>Concentration:</td> <td>0.5, 1.0, or 2.5 μM</td> </tr> <tr> <td>Incubation Time:</td> <td>24 hours</td> </tr> <tr> <td>Result:</td> <td>Significantly inhibited VEGF-induced proliferation at 1.0 and 2.5 μM concentrations.</td> </tr> </table>		Cell Line:	Human retinal microvascular endothelial cells	Concentration:	0.5, 1.0, or 2.5 μM	Incubation Time:	24 hours	Result:	Significantly inhibited VEGF-induced proliferation at 1.0 and 2.5 μM concentrations.
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In Vivo	<p>INCA-6 (5.0, or 25.0 μM) treatment significantly reduces pathologic neovascularization in oxygen-induced retinopathy (OIR)^[4].</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>Rats bearing OIR model^[4]</td> </tr> <tr> <td>Dosage:</td> <td>2.5, 5.0, or 25.0 μM</td> </tr> <tr> <td>Administration:</td> <td>Intravitreal injection on days 14(0) and 14(3)</td> </tr> <tr> <td>Result:</td> <td>Decreased the severity of OIR in a dose dependent manner. Significant inhibition was seen at 5.0 and 25.0 μM concentrations.</td> </tr> </table>		Animal Model:	Rats bearing OIR model ^[4]	Dosage:	2.5, 5.0, or 25.0 μM	Administration:	Intravitreal injection on days 14(0) and 14(3)	Result:	Decreased the severity of OIR in a dose dependent manner. Significant inhibition was seen at 5.0 and 25.0 μM concentrations.
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REFERENCES

- [1]. Ling Xiao, et al. Mechanisms underlying rate-dependent remodeling of transient outward potassium current in canine ventricular myocytes. *Circ Res*. 2008 Sep 26;103(7):733-42.
- [2]. Miho Shiratori, et al. P2X7 receptor activation induces CXCL2 production in microglia through NFAT and PKC/MAPK pathways. *J Neurochem*. 2010 Aug;114(3):810-9.
- [3]. Anand Mohan Prasad, et al. Silencing calcineurin A subunit reduces SERCA2 expression in cardiac myocytes. *Am J Physiol Heart Circ Physiol*. 2011 Jan;300(1):H173-80.
- [4]. Colin A Bretz, et al. The role of the NFAT signaling pathway in retinal neovascularization. *Invest Ophthalmol Vis Sci*. 2013 Oct 25;54(10):7020-7.
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Caution: Product has not been fully validated for medical applications. For research use only.

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