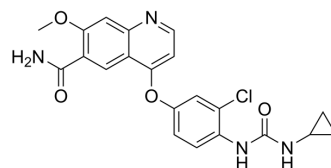


## Lenvatinib

Cat. No.:	HY-10981		
CAS No.:	417716-92-8		
Molecular Formula:	C <sub>21</sub> H <sub>19</sub> ClN <sub>4</sub> O <sub>4</sub>		
Molecular Weight:	426.85		
Target:	VEGFR; FGFR; PDGFR; c-Kit; RET		
Pathway:	Protein Tyrosine Kinase/RTK		
Storage:	Powder	-20°C	3 years
		4°C	2 years
	In solvent	-80°C	2 years
		-20°C	1 year



### SOLVENT & SOLUBILITY

#### In Vitro

DMSO : ≥ 12.78 mg/mL (29.94 mM)  
 \* "≥" means soluble, but saturation unknown.

Preparing Stock Solutions	Solvent Concentration	Mass		
		1 mg	5 mg	10 mg
	1 mM	2.3427 mL	11.7137 mL	23.4274 mL
	5 mM	0.4685 mL	2.3427 mL	4.6855 mL
	10 mM	0.2343 mL	1.1714 mL	2.3427 mL

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

#### In Vivo

- Add each solvent one by one: 0.5% Methylcellulose/saline water  
 Solubility: 6.67 mg/mL (15.63 mM); Suspended solution; Need ultrasonic
- Add each solvent one by one: 5% DMSO >> 95% (20% SBE-β-CD in saline)  
 Solubility: ≥ 0.64 mg/mL (1.50 mM); Clear solution

### BIOLOGICAL ACTIVITY

#### Description

Lenvatinib (E7080) is an oral, multi-targeted tyrosine kinase inhibitor that inhibits VEGFR1-3, FGFR1-4, PDGFR, KIT, and RET, shows potent antitumor activities<sup>[1][2]</sup>.

#### IC<sub>50</sub> & Target

VEGFR1 22 nM (IC <sub>50</sub> )	VEGFR2 4 nM (IC <sub>50</sub> )	VEGFR3 5.2 nM (IC <sub>50</sub> )	FGFR1 46 nM (IC <sub>50</sub> )
FGFR2	FGFR3	FGFR4	PDGFRα 51 nM (IC <sub>50</sub> )

	PDGFR $\beta$ 39 nM (IC <sub>50</sub> )	c-Kit 100 nM (IC <sub>50</sub> )	RET
<b>In Vitro</b>	Lenvatinib (E7080) has IC <sub>50</sub> s of 4, 5.2, 22 nM for VEGFR2 (KDR), VEGFR3 (Flt-4), and VEGFR1 (Flt-1), respectively. Lenvatinib inhibits PDGFR $\alpha$ , PDGFR $\beta$ , FGFR1, and KIT with IC <sub>50</sub> s of 51, 39, 46, and 100 nM, respectively <sup>[3]</sup> . MCE has not independently confirmed the accuracy of these methods. They are for reference only.		
<b>In Vivo</b>	Lenvatinib (E7080) (100 mg/kg, p.o.) significantly inhibits local tumor growth at the m.f.p., and at the end of treatment, Lenvatinib mesylate also significantly inhibits metastasis to both regional lymph nodes and distant lung <sup>[3]</sup> . Lenvatinib (E7080) inhibits the growth of H146 tumor at 30 and 100 mg/kg (BID, QDx21) in a dose-dependent manner and causes tumor regression at 100 mg/kg in H146 xenograft model. IHC analysis with anti-CD31 antibody shows that lenvatinib at 100 mg/kg decreases microvessel density more than anti-VEGF antibody and STI571 treatment <sup>[4]</sup> . MCE has not independently confirmed the accuracy of these methods. They are for reference only.		

## PROTOCOL

### Cell Assay <sup>[1]</sup>

H146 (1.2×10<sup>3</sup> cells/50  $\mu$ L/well) in SFM containing 0.5% BSA are cultured in 96-well multi-plates. After overnight culture at 37°C, SFM (150  $\mu$ L/well) containing 0.5% FBS and several concentrations of SCF are added with or without several concentrations of compound. After culture for 72 hr, the ratios of surviving cells are measured by WST-1.  
MCE has not independently confirmed the accuracy of these methods. They are for reference only.

### Animal Administration <sup>[1]</sup>

Female BALB/c nude mice (8-12 weeks old, 20-25 g) are maintained under clean-room conditions. H146 tumor cells (6.5×10<sup>6</sup>) are implanted subcutaneously (s.c.) into the flank region of mice. Twelve days after inoculation, mice are randomized into control (n=12) and treatment (n=6 or n=5) groups and this point in time is identified as day 1. Lenvatinib and STI571, and VEGF neutralization antibody are suspended in 0.5% methylcellulose and saline, respectively, and administered orally twice a day for lenvatinib and STI571 and twice a week for antibody from day 1 to day 21. Tumor volume is measured on the indicated days and calculated. Antitumor activity is shown as a relative tumor volume (RTV=calculated tumor volume at indicated days/volume on day 1).  
MCE has not independently confirmed the accuracy of these methods. They are for reference only.

## CUSTOMER VALIDATION

- Drug Resist Updat. 2023 Jul;69:100976.
- Sci Transl Med. 2018 Jul 18;10(450):eaaq1093.
- J Extracell Vesicles. 2024 Jul;13(7):e12468.
- Adv Sci (Weinh). 2024 Jul 9:e2402327.
- Mol Ther. 2023 May 4;S1525-0016(23)00253-8.

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## REFERENCES

- [1]. Kudo M, et al. Lenvatinib versus Bay 43-9006 in first-line treatment of patients with unresectable hepatocellular carcinoma: a randomised phase 3 non-inferiority trial. *Lancet*. 2018 Mar 24;391(10126):1163-1173.
- [2]. Suyama K, et al. Lenvatinib: A Promising Molecular Targeted Agent for Multiple Cancers. *Cancer Control*. 2018 Jan-Dec;25(1):1073274818789361.
- [3]. Matsui J, et al. E7080, a novel inhibitor that targets multiple kinases, has potent antitumor activities against stem cell factor producing human small cell lung cancer

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H146, based on angiogenesis inhibition. Int J Cancer. 2008, 122(3), 664-671.

[4]. Matsui J, et al. Multi-kinase inhibitor E7080 suppresses lymph node and lung metastases of human mammary breast tumor MDA-MB-231 via inhibition of vascular endothelial growth factor-receptor (VEGF-R) 2 and VEGF-R3 kinase. Clin Cancer Res. 2008, 14(17),545.

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**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](mailto:tech@MedChemExpress.com)

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