**Proteins** 

# Inhibitors

## **17-HETE**

Cat. No.: HY-116196 CAS No.: 128914-47-6 Molecular Formula:  $C_{20}^{}H_{32}^{}O_{3}^{}$ 

Molecular Weight: 320.47

Na+/K+ ATPase; Cytochrome P450 Target:

Pathway: Membrane Transporter/Ion Channel; Metabolic Enzyme/Protease

Storage: Please store the product under the recommended conditions in the Certificate of

Analysis.

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**Product** Data Sheet

### **BIOLOGICAL ACTIVITY**

Description	17-HETE is arachidonic acid metabolite through cytochrome P-450 pathways, which consists of 17R-HETE and 17S-HETE
	enantiomers. 17-HETE serves as allosteric activator of the cytochrome P450 1B1 and inhibitor of ATPase, induces cardic
	[1][2]

hypertrophy<sup>[1][2]</sup>.

IC <sub>50</sub> & Target	CYP1B1

#### In Vitro 17-HETE (5-20 $\mu$ M) promotes the development of cardiac hypertrophy in human, through increasing CY1B1 at activity and protein levels<sup>[1]</sup>.

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

Real Time qPCR<sup>[1]</sup>

Cell Line:	AC16
Concentration:	5-20 μM
Incubation Time:	24 h
Result:	Increased mRNA levels of $\beta\mbox{-MHC}$ and ANP, increased cell surface area.
Western Blot Analysis <sup>[1]</sup>	

Cell Line:	AC16
Concentration:	20 μΜ
Incubation Time:	24 h
Result:	Increased expression of CYP 1B1.

### In Vivo

17-HETE (1-20 µg, i.a.) stereospecificially inhibits proximal tubule ATPase activity with S- enantiomer in New Zealand white rabbit<sup>[2]</sup>.

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Animal Model:	New Zealand White rabbit <sup>[2]</sup>
Dosage:	1-20 μg
Administration:	injection into artery
Result:	17S inhibited more than 70% ATPase activity at the concentration of 2 μM, while 17R enantiomer remained inactive.

### **REFERENCES**

[1]. Isse FA, et al., 17-(R/S)-hydroxyeicosatetraenoic acid (HETE) induces cardiac hypertrophy through the CYP1B1 in enantioselective manners. Prostaglandins Other Lipid Mediat. 2023 Oct;168:106749.

[2]. Carroll MA, e al., Cytochrome P-450-dependent HETEs: profile of biological activity and stimulation by vasoactive peptides. Am J Physiol. 1996 Oct;271(4 Pt 2):R863-9.

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

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