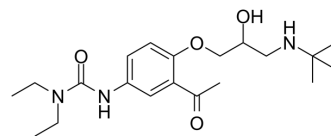


Celiprolol

Cat. No.:	HY-119873
CAS No.:	56980-93-9
Molecular Formula:	C ₂₀ H ₃₃ N ₃ O ₄
Molecular Weight:	379.49
Target:	NO Synthase; Adrenergic Receptor
Pathway:	Immunology/Inflammation; GPCR/G Protein; Neuronal Signaling
Storage:	Please store the product under the recommended conditions in the Certificate of Analysis.



BIOLOGICAL ACTIVITY

Description	Celiprolol (REV 5320) is a potent, cardioselective and orally active β 1-adrenoceptor antagonist with partial β 2 agonist activity, with K_i values of 0.14-8.3 μ M. Celiprolol has antihypertensive and antianginal activity, and can be used for the research of cardiovascular disease such as high blood pressure ^{[1][4]} .													
IC₅₀ & Target	Beta-adrenergic receptor 0.14-8.3 μ M (K _i)													
In Vitro	Celiprolol (0-3 mM, 90 min) is uptaken by human small intestinal transporter OATP-A/1A2 in <i>Xenopus Laevis</i> oocytes ^[5] . Celiprolol (10 μ M, 0-50 min) is transported across human intestinal epithelial (Caco-2) cells by mediation of multiple transporters including P-glycoprotein ^[6] . MCE has not independently confirmed the accuracy of these methods. They are for reference only.													
In Vivo	<p>Celiprolol (Oral administration, 100 mg/kg/day for 31 days) improves endothelial function in the arteries of in Otsuka Long-Evans Tokushima Fatty (OLETF) rats, and restores it 4 weeks after endothelial denudation in the arteries of OLETF rats^[2]. Celiprolol (Treated in drinking water, 10 mg/kg/day for 5 weeks) suppresses VCAM-1 expression by inhibition of oxidative stress, NF-κB, signal transduction, and increases eNOS via stimulation of the PI3K-Akt pathway, and improves cardiovascular remodeling in deoxycorticosterone acetate (DOCA)-salt hypertensive rats^[3]. 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>Type II male Otsuka Long-Evans Tokushima Fatty (OLETF) diabetic rats^[2]</td> </tr> <tr> <td>Dosage:</td> <td>100 mg/kg/day for 31 days</td> </tr> <tr> <td>Administration:</td> <td>Oral administration</td> </tr> <tr> <td>Result:</td> <td>Improved acetylcholine-induced NO-dependent relaxation in arteries. Improved tone-related basal NO release and acetylcholine-induced NO-dependent relaxation in the arteries and plasma NOx.</td> </tr> <tr> <td>Animal Model:</td> <td>Deoxycorticosterone acetate (DOCA)-salt hypertensive rats^[3]</td> </tr> <tr> <td>Dosage:</td> <td>10 mg/kg/d for 5 weeks</td> </tr> </table>		Animal Model:	Type II male Otsuka Long-Evans Tokushima Fatty (OLETF) diabetic rats ^[2]	Dosage:	100 mg/kg/day for 31 days	Administration:	Oral administration	Result:	Improved acetylcholine-induced NO-dependent relaxation in arteries. Improved tone-related basal NO release and acetylcholine-induced NO-dependent relaxation in the arteries and plasma NOx.	Animal Model:	Deoxycorticosterone acetate (DOCA)-salt hypertensive rats ^[3]	Dosage:	10 mg/kg/d for 5 weeks
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Administration:	Treated in drinking water
Result:	Activated phosphorylation of eNOS through the PI3K-Akt signaling pathway. Modulated VCAM-1 expression, which is associated with inhibition of NF- κ B phosphorylation. Reduced production of ROS by suppressing NAD(P)H oxidase subunit p22phox, p47phox, gp91phox, and nox1 expression.

CUSTOMER VALIDATION

- J Pharmaceut Biomed. 2020, 113870.

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REFERENCES

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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

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