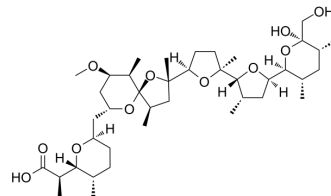


Nigericin

Cat. No.:	HY-127019
CAS No.:	28380-24-7
Molecular Formula:	C ₄₀ H ₆₈ O ₁₁
Molecular Weight:	724.96
Target:	Sodium Channel; NOD-like Receptor (NLR); Apoptosis; Bacterial; Antibiotic; Pyroptosis; Wnt; β -catenin
Pathway:	Membrane Transporter/Ion Channel; Immunology/Inflammation; Apoptosis; Anti-infection; Stem Cell/Wnt
Storage:	Please store the product under the recommended conditions in the Certificate of Analysis.



SOLVENT & SOLUBILITY

In Vivo	<ol style="list-style-type: none"> Add each solvent one by one: 10% DMSO >> 90% corn oil Solubility: ≥ 2.5 mg/mL (3.45 mM); Clear solution Add each solvent one by one: 10% DMSO >> 40% PEG300 >> 5% Tween-80 >> 45% saline Solubility: 2.08 mg/mL (2.87 mM); Suspended solution; Need ultrasonic
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BIOLOGICAL ACTIVITY

Description	Nigericin is an antibiotic derived from <i>Streptomyces hygroscopicus</i> that act as a K ⁺ /H ⁺ ionophore, promoting K ⁺ /H ⁺ exchange across mitochondrial membranes. Nigericin shows promising anti-cancer activities through decreasing intracellular pH (pHi), and inactivation of Wnt/ β -catenin signals. Nigericin induces pyroptosis through caspase 1/GSDMD in TNBC ^{[1][2][3][4][5][6][7]} .									
IC₅₀ & Target	NLRP3									
In Vitro	<p>Nigericin (0-4 μg/ml; 24 h) induces pyroptosis through caspase 1/GSDMD pathway in TNBC cells^[6].</p> <p>Nigericin (1 μg/mL, 8 \times MIC; 2 μg/mL, 16 \times MIC; 196 h) is a bactericidal antibiotic against MDR gram-positive bacteria^[4].</p> <p>Nigericin (0-0.25 μg/ml; 24 h) inactivates Wnt/β-catenin pathway in H460 cells as an anti-cancer effect^[7].</p> <p>MCE has not independently confirmed the accuracy of these methods. They are for reference only.</p> <p>Cell Viability Assay^[4]</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Cell Line:</td> <td>S. aureus, Staphylococcus epidermidis, Enterococcus faecalis, E. faecium, S. pneumoniae), and Streptococcus agalactiae</td> </tr> <tr> <td>Concentration:</td> <td>0 μg/ml, 0.05 μg/ml, 0.125 μg/ml, 0.25 μg/ml</td> </tr> <tr> <td>Incubation Time:</td> <td>24 h</td> </tr> <tr> <td>Result:</td> <td>Exhibited potent activity against these clinical MDR strains, with MIC values ranging from 0.004-0.25 mg/ml.</td> </tr> </table>		Cell Line:	S. aureus, Staphylococcus epidermidis, Enterococcus faecalis, E. faecium, S. pneumoniae), and Streptococcus agalactiae	Concentration:	0 μ g/ml, 0.05 μ g/ml, 0.125 μ g/ml, 0.25 μ g/ml	Incubation Time:	24 h	Result:	Exhibited potent activity against these clinical MDR strains, with MIC values ranging from 0.004-0.25 mg/ml.
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Incubation Time:	24 h									
Result:	Exhibited potent activity against these clinical MDR strains, with MIC values ranging from 0.004-0.25 mg/ml.									

Western Blot Analysis^[6]

Cell Line:	MDA-MB-231, and 4T1 cells
Concentration:	0 µg/ml, 2 µg/ml, 4 µg/ml
Incubation Time:	24 h
Result:	Showed increasing in the proteins level of caspase 1 and N-GSDMD.

Cell Viability Assay^[7]

Cell Line:	H460 cells
Concentration:	0.5 µM, 1 µM, 2.5 µM
Incubation Time:	24 h
Result:	Showed downregulating in the expression of proteins of the canonical Wnt (LRP6, Wnt5a/b, and β-catenin) signaling pathway.

In Vivo

Nigericin (1 mg/kg; i.p.; every 12 h for 3 D) reduces the infection of *S. aureus* USA300 in mice^[4].
Nigericin (0.025 mg/kg; s.c.; every two days in 4 weeks) plus anti-PD-1 shows synergistic anti-cancer effect^[6].
MCE has not independently confirmed the accuracy of these methods. They are for reference only.

Animal Model:	BALB/c Mice injected orthotopically with 4T1 cells ^[6]
Dosage:	0.025 mg/kg
Administration:	Subcutaneous injection (s.c.)
Result:	Showed combination with anti-PD-1 antibody almost completely suppressed tumor growth.

Animal Model:	Mice Infected with <i>S. aureus</i> USA300 ^[4]
Dosage:	1 mg/kg
Administration:	Intraperitoneal injection (i.p.)
Result:	Showed reduction in the bacterial burden to 1,000-10,000-fold in the major organs.

CUSTOMER VALIDATION

- Cell Res. 2023 Sep 19.
- Cell Host Microbe. 2023 Nov 8;31(11):1820-1836.e10.
- Cell Metab. 2020 May 5;31(5):892-908.e11.
- Bioact Mater. 20 July 2022.
- J Extracell Vesicles. 2023 Feb;12(2):e12310.

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- [1]. Xiaoli Zhu, et al. Nigericin is effective against multidrug resistant gram-positive bacteria, persisters, and biofilms. *Front Cell Infect Microbiol.* 2022 Dec 20;12:1055929.
- [2]. Guanzhuang Gao, et al. Evidence of nigericin as a potential therapeutic candidate for cancers: A review. *Biomed Pharmacother.* 2021 May;137:111262.
- [3]. Lisha Wu, et al. Nigericin Boosts Anti-Tumor Immune Response via Inducing Pyroptosis in Triple-Negative Breast Cancer. *Cancers (Basel).* 2023 Jun 16;15(12):3221.
- [4]. Juan Sebastian Yakisich, et al. Nigericin decreases the viability of multidrug-resistant cancer cells and lung tumorspheres and potentiates the effects of cardiac glycosides. *Tumour Biol.* 2017 Mar;39(3):1010428317694310.
- [5]. Zotova L, et al. Novel components of an active mitochondrial K(+)/H(+) exchange. *J Biol Chem.* 2010 May 7;285(19):14399-414.
- [6]. Mariathasan S, et al. Cryopyrin activates the inflammasome in response to toxins and ATP. *Nature.* 2006 Mar 9;440(7081):228-32.
- [7]. Bissinger R, et al. Triggering of Suicidal Erythrocyte Death by the Antibiotic Ionophore Nigericin. *Basic Clin Pharmacol Toxicol.* 2016 May;118(5):381-9.
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Caution: Product has not been fully validated for medical applications. For research use only.

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