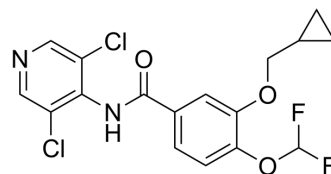


## Roflumilast

<b>Cat. No.:</b>	HY-15455		
<b>CAS No.:</b>	162401-32-3		
<b>Molecular Formula:</b>	C <sub>17</sub> H <sub>14</sub> Cl <sub>2</sub> F <sub>2</sub> N <sub>2</sub> O <sub>3</sub>		
<b>Molecular Weight:</b>	403.21		
<b>Target:</b>	Phosphodiesterase (PDE); RSV		
<b>Pathway:</b>	Metabolic Enzyme/Protease; Anti-infection		
<b>Storage:</b>	Powder	-20°C	3 years
		4°C	2 years
	In solvent	-80°C	2 years
		-20°C	1 year



### SOLVENT & SOLUBILITY

#### In Vitro

DMSO : ≥ 50 mg/mL (124.00 mM)  
 H<sub>2</sub>O : < 0.1 mg/mL (ultrasonic) (insoluble)  
 \* "≥" means soluble, but saturation unknown.

Preparing Stock Solutions	Solvent Concentration	Mass		
		1 mg	5 mg	10 mg
	1 mM	2.4801 mL	12.4005 mL	24.8010 mL
	5 mM	0.4960 mL	2.4801 mL	4.9602 mL
	10 mM	0.2480 mL	1.2400 mL	2.4801 mL

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

#### In Vivo

1. Add each solvent one by one: 10% DMSO >> 90% corn oil  
 Solubility: ≥ 2.5 mg/mL (6.20 mM); Clear solution

### BIOLOGICAL ACTIVITY

#### Description

Roflumilast (APTA-2217) is a selective PDE4 inhibitor with IC<sub>50</sub>s of 0.7, 0.9, 0.7, and 0.2 nM for PDE4A1, PDE4A, PDEB1, and PDEB2, respectively, without affecting PDE1, PDE2, PDE3 or PDE5 isoenzymes from various cells.

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

PDE4

#### In Vitro

Roflumilast does not affect PDE enzymes apart from PDE4, and is a subnanomolar inhibitor of most PDE4 splicing variants tested. It showed no PDE4 subtype selectivity apart from PDE4C (4C1, IC<sub>50</sub>=3 nM; 4C2, IC<sub>50</sub>=4.3 nM), which is inhibited with a slightly lower potency<sup>[2]</sup>. Roflumilast is a potent and selective PDE4 inhibitor. Roflumilast is a monoselective PDE4 inhibitor since it does not affect other PDE isoenzymes, including PDE1, PDE2, PDE3, and PDE5 up to 10,000-fold higher concentrations. Roflumilast inhibits human neutrophil functions. Roflumilast inhibits TNFα synthesis in monocyte-derived

dendritic cells. Roflumilast inhibits proliferation and cytokine synthesis in CD4<sup>+</sup> T cells. Proliferation is inhibited to a maximum of about 60% by Roflumilast with a potency (IC<sub>30</sub>) of 7 nM<sup>[3]</sup>.

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

#### In Vivo

Animal studies with Roflumilast demonstrated that it reduced the accumulation of neutrophils in bronchoalveolar lavage fluid following short-term exposure of guinea pigs, mice or rats to tobacco smoke, and following exposure of rats to a combination of tobacco smoke and bacterial lipopolysaccharide, and abolished the lung parenchymal influx of inflammatory cells seen in rats exposed to tobacco smoke for 7 months<sup>[2]</sup>. Roflumilast blocks COPD progression in pIgR<sup>/</sup> mice. For these studies, 9-month-old WT or pIgR<sup>/</sup> mice are treated daily by oral gavage with 100 µg of Roflumilast (5 µg/g) or vehicle (4% methylcellulose, 1.3% PEG400) for 3 months and lungs are harvested at 12 months of age. Unlike pIgR<sup>/</sup> mice treated with vehicle, mice treated with Roflumilast had no progression of small airway wall remodelling after starting treatment. Strikingly, 12-month-old pIgR<sup>/</sup> mice treated with Roflumilast had reduced indices of emphysema compared with 9-month-old pIgR<sup>/</sup> mice, indicating that Roflumilast not only blocks progression of emphysema in this model but apparently facilitates some resolution of the emphysematous destruction of lung parenchyma<sup>[4]</sup>.

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## PROTOCOL

#### Kinase Assay <sup>[3]</sup>

PDE activity is determined with some modifications. The assay mixture contain 50 mM Tris (pH 7.4), 5 mM MgCl<sub>2</sub>, 0.5 µM cAMP or cGMP, and [<sup>3</sup>H]cAMP or [<sup>3</sup>H]cGMP (about 30,000 cpm/assay), the indicated concentration of the inhibitor and an aliquot of the enzyme solution at a final assay volume of 200 µL. Stock solutions of the compounds are diluted 1:100 (v/v) in the Tris buffer mentioned above; appropriate dilutions are prepared in 1% (v/v) DMSO/Tris buffer, which are diluted 1:2 (v/v) in the assays to obtain the desired final concentrations of the inhibitors at a DMSO concentration of 0.5% (v/v). DMSO itself affected none of the PDE activities. After preincubation for 5 min at 37°C, the reaction is started by the addition of substrate (cAMP or cGMP) and the assays are incubated for further 15 min at 37°C. Then 50 µL of 0.2 N HCl is added to stop the reaction and the assays are left on ice for about 10 min. Following incubation with 25 µg of 5'-nucleotidase (Crotalus atrox snake venom) for 10 min at 37°C, the assays are loaded on QAE Sephadex A-25 (1 mL of bed volume in Poly-Prep chromatography columns). The columns are eluted with 2 mL of 30 mM ammonium formate (pH 6.0) and the eluate is counted for radioactivity. Results are corrected for blank values (measured in the presence of denatured protein) that are below 5% of total radioactivity. The amount of cyclic nucleotides hydrolyzed did not exceed 30% of the original substrate concentration <sup>[3]</sup>.

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#### Animal Administration <sup>[4]</sup>

Mice<sup>[4]</sup>

WT or pIgR<sup>-/-</sup> mice are used. For studies using Roflumilast, 200 µL of 0.5 mg/mL suspension of Roflumilast or vehicle (4% methylcellulose, 1.3% PEG400 and 5 µg drug per g animal weight) is administered by oral gavage once daily, 5 days a week for the duration of treatment. Mice are treated daily by oral gavage with 100 µg of Roflumilast (5 µg/g) or vehicle (4% methylcellulose, 1.3% PEG400) for 3 months and lungs are harvested at 12 months of age.

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

## CUSTOMER VALIDATION

- Inflamm Res. 2020 Dec;69(12):1191-1199.
- J Ethnopharmacol. 2025 Jan 7:119336.
- Ceram Int. 30 September 2021.
- J Dermatol Sci. 2023 Apr 3.
- BMC Neurosci. 2023 Jul 31;24(1):39.

## REFERENCES

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- [1]. Hatzelmann A, et al. The preclinical pharmacology of roflumilast--a selective, oral phosphodiesterase 4 inhibitor in development for chronic obstructive pulmonary disease. *Pulm Pharmacol Ther.* 2010 Aug;23(4):235-56.
- [2]. Rabe KF. Update on roflumilast, a phosphodiesterase 4 inhibitor for the treatment of chronic obstructive pulmonary disease. *Br J Pharmacol.* 2011 May;163(1):53-67.
- [3]. Hatzelmann A, et al. Anti-inflammatory and immunomodulatory potential of the novel PDE4 inhibitor roflumilast in vitro. *J Pharmacol Exp Ther.* 2001 Apr;297(1):267-79.
- [4]. Richmond BW, et al. Airway bacteria drive a progressive COPD-like phenotype in mice with polymeric immunoglobulin receptor deficiency. *Nat Commun.* 2016 Apr 5;7:11240.
- [5]. Ding H, et al. Treatment of obesity-associated overactive bladder by the phosphodiesterase type-4 inhibitor roflumilast. *Int Urol Nephrol.* 2017 Jul 29.
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**Caution: Product has not been fully validated for medical applications. For research use only.**

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