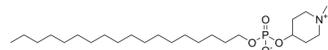


## Perifosine

<b>Cat. No.:</b>	HY-50909		
<b>CAS No.:</b>	157716-52-4		
<b>Molecular Formula:</b>	C <sub>25</sub> H <sub>52</sub> NO <sub>4</sub> P		
<b>Molecular Weight:</b>	461.66		
<b>Target:</b>	Akt; Autophagy; Apoptosis		
<b>Pathway:</b>	PI3K/Akt/mTOR; Autophagy; Apoptosis		
<b>Storage:</b>	Powder	-20°C	3 years
		4°C	2 years
	In solvent	-80°C	6 months
		-20°C	1 month



### SOLVENT & SOLUBILITY

#### In Vitro

H<sub>2</sub>O : 100 mg/mL (216.61 mM; Need ultrasonic)  
 DMF : < 1 mg/mL (insoluble)  
 DMSO : < 1 mg/mL (insoluble or slightly soluble)

Preparing Stock Solutions	Solvent Concentration	Mass		
		1 mg	5 mg	10 mg
	1 mM	2.1661 mL	10.8305 mL	21.6610 mL
	5 mM	0.4332 mL	2.1661 mL	4.3322 mL
	10 mM	0.2166 mL	1.0830 mL	2.1661 mL

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

#### In Vivo

1. Add each solvent one by one: PBS  
 Solubility: 50 mg/mL (108.30 mM); Clear solution; Need ultrasonic

### BIOLOGICAL ACTIVITY

<b>Description</b>	Perifosine is an oral Akt inhibitor which inhibits proliferation of different tumor cell lines with IC <sub>50</sub> s of 0.6-8.9 μM.
<b>IC<sub>50</sub> &amp; Target</b>	Autophagy
<b>In Vitro</b>	The IC <sub>50</sub> for growth of Ntv-a/LacZ cell lines is determined by MTT assay. When the cells are cultured for 48 hours in 10% FCS-supplemented media, the IC <sub>50</sub> for cells with constitutively active PDGF, Ras, or Akt signaling is similar and found to be ~45 μM <sup>[1]</sup> . Perifosine, a oral-bioavailable alkylphospholipid (ALK), on the cell cycle kinetics of immortalized keratinocytes (HaCaT) as well as head and neck squamous carcinoma cells. Proliferation is assessed by the incorporation of [ <sup>3</sup> H]thymidine into cellular DNA. Exposure to Perifosine (0.1-30 μM) for 24 h results in a dose-dependent inhibition of [ <sup>3</sup> H]thymidine uptake in all cell lines tested. The IC <sub>50</sub> s for growth are between 0.6 and 8.9 μM, reaching IC <sub>80</sub> s of ~10 μM. Perifosine blocks cell cycle

progression of head and neck squamous carcinoma cells at G<sub>1</sub>-S and G<sub>2</sub>-M by inducing p21<sup>WAF1</sup>, irrespective of p53 function, and may be exploited clinically because the majority of human malignancies harbor p53 mutations. Perifosine (20 μM) induces both G<sub>1</sub>-S and G<sub>2</sub>-M cell cycle arrest, together with p21<sup>WAF1</sup> expression in both p53 wild-type and p53<sup>-/-</sup> clones<sup>[2]</sup>. MCE has not independently confirmed the accuracy of these methods. They are for reference only.

#### In Vivo

Mice are identified with tumors by bioluminescence imaging and either treated them with 100 mg/kg Temozolomide, or 30 mg/kg Perifosine, or a combination with 100 mg/kg Temozolomide and 30 mg/kg Perifosine (Temozolomide+Perifosine) for 3 to 5 days. The mice are sacrificed and tumors analyzed histologically for cell proliferation by Ki-67 immunostaining. Ki-67 staining index is significantly reduced in mice treated with either Temozolomide (Ki-67 staining index=5.5±1.2%, n=4, P=0.0019) or Perifosine (Ki-67 staining index=3.2±1.1%, n=3, P=0.001) compared with Control, demonstrating the inhibitory effect on proliferation. Most importantly, the tumors treated with Temozolomide+Perifosine have the lowest Ki-67 staining index (1.7±1.2%, n=3, P=0.0005). The additional treatment with Perifosine results in a significantly lower proliferation rate than Temozolomide alone (P=0.0087)<sup>[1]</sup>. Perifosine markedly decreases p-Akt from 10 min to 24 hours and subsequently, moderately decreased p-S6 from 1h to 24 h after injection<sup>[3]</sup>. MCE has not independently confirmed the accuracy of these methods. They are for reference only.

## PROTOCOL

#### Kinase Assay <sup>[2]</sup>

Exponentially growing cells (HN12, HN30, and HaCaT) are lysed, and 500 μg of total cellular protein are used to immunoprecipitate active cdc2 and cdk2 complexes. After capturing with gammabind G Sepharose and subsequent washes, the active immune complexes are assessed for activity in the presence of increasing concentrations of Perifosine (0.1-30 μM) or flavopiridol (300 nM) in the kinase assay buffer containing [ $\gamma$ -<sup>32</sup>P]ATP (3000 Ci/mmol) and 0.2 mg/mL histone H1, 25 μM ATP. Reactions are incubated at 37°C for 30 min and terminated by the addition of SDS-gel loading buffer, resolved in SDS-PAGE, and dried gels are subjected to autoradiography and phosphorimaging<sup>[2]</sup>. MCE has not independently confirmed the accuracy of these methods. They are for reference only.

#### Cell Assay <sup>[2]</sup>

Cell proliferation studies by measuring the uptake of [<sup>3</sup>H]thymidine is performed. Briefly, HNSCC and HaCaT cells (1-2×10<sup>4</sup> /well) are grown overnight in 24-well plates and exposed to either Perifosine (0.1-30 μM) or PBS (control). After treatment (24-48 h), cells are pulsed with [<sup>3</sup>H]thymidine (1 μCi/well) for 4-6 h, fixed (5% trichloroacetic acid), and solubilized (0.5 M NaOH) before scintillation counting. Experiments are performed in triplicates<sup>[2]</sup>. MCE has not independently confirmed the accuracy of these methods. They are for reference only.

#### Animal Administration <sup>[1][3]</sup>

Mice<sup>[1]</sup>  
Drug treatment of tumor-bearing mice. Image-positive Ef-luc Ntv-a mice are treated daily with i.p. administration of buffer alone as a control, or i.p. administration of 100 mg/kg Temozolomide, or oral administration of 30 mg/kg Perifosine, or a combination with Perifosine and Temozolomide for 3 to 5 days. The mean doses of the treatments are: Control, 5 (all five); Temozolomide, 3.75 (three to five); Perifosine, 3.75 (three to four); and Perifosine+Temozolomide, 3 (all three). Control buffer solution consisted of 5% DMSO and 1% Tween 80 in distilled water.

Rats<sup>[3]</sup>  
To further determine whether the paradoxical effect of rapamycin on S6 phosphorylation is related to upstream signals of Akt-mTOR, rats are treated with Perifosine (20 mg/kg, ip, once), an Akt inhibitor, 30 min before rapamycin administration. Rats are sacrificed 1 h or 6 h after rapamycin injection. MCE has not independently confirmed the accuracy of these methods. They are for reference only.

## CUSTOMER VALIDATION

- Sci Transl Med. 2018 Jul 18;10(450):eaaq1093.
- Acta Pharm Sin B. 2023 Oct;13(10):4253-4272.

- Int J Biol Sci. 2016 Mar 30;12(5):607-16.
- Front Oncol. 2021 Apr 12;11:608570.
- J Cell Biochem. 2020 Mar;121(3):2343-2353.

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## REFERENCES

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[1]. Momota H, et al. Perifosine inhibits multiple signaling pathways in glial progenitors and cooperates with temozolomide to arrest cell proliferation in gliomas in vivo. Cancer Res, 2005, 65(16), 7429-7435.

[2]. Vyomesh Patel, et al. Perifosine, a novel alkylphospholipid, induces p21(WAF1) expression in squamous carcinoma cells through a p53-independent pathway, leading to loss in cyclin-dependent kinase activity and cell cycle arrest. Cancer Res, 2002, 62(5), 14

[3]. Chen L, et al. Rapamycin has paradoxical effects on S6 phosphorylation in rats with and without seizures. Epilepsia. 2012 Nov;53(11):2026-33.

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

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