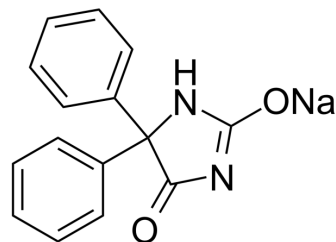


Phenytoin sodium

Cat. No.:	HY-B0448A
CAS No.:	630-93-3
Molecular Formula:	C ₁₅ H ₁₁ N ₂ NaO ₂
Molecular Weight:	274.25
Target:	Sodium Channel; Virus Protease
Pathway:	Membrane Transporter/Ion Channel; Anti-infection
Storage:	4°C, sealed storage, away from moisture * In solvent : -80°C, 6 months; -20°C, 1 month (sealed storage, away from moisture)



SOLVENT & SOLUBILITY

In Vitro	DMSO : 50 mg/mL (182.32 mM; Need ultrasonic)					
	H ₂ O : 1 mg/mL (3.65 mM; Need ultrasonic)					
	Preparing Stock Solutions	Solvent	Mass	1 mg	5 mg	10 mg
		Concentration				
		1 mM		3.6463 mL	18.2315 mL	36.4631 mL
5 mM			0.7293 mL	3.6463 mL	7.2926 mL	
	10 mM		0.3646 mL	1.8232 mL	3.6463 mL	
Please refer to the solubility information to select the appropriate solvent.						
In Vivo	1. Add each solvent one by one: 10% DMSO >> 40% PEG300 >> 5% Tween-80 >> 45% saline Solubility: ≥ 2.5 mg/mL (9.12 mM); Clear solution					
	2. Add each solvent one by one: 10% DMSO >> 90% (20% SBE-β-CD in saline) Solubility: ≥ 2.5 mg/mL (9.12 mM); Clear solution					
	3. Add each solvent one by one: 10% DMSO >> 90% corn oil Solubility: ≥ 2.5 mg/mL (9.12 mM); Clear solution					

BIOLOGICAL ACTIVITY

Description	Phenytoin sodium (5,5-Diphenylhydantoin sodium salt) is a potent Voltage-gated Na ⁺ channels (VGSCs) blocker. Phenytoin has antiepileptic activity and reduces breast tumour growth and metastasis in mice ^{[1][2]} .
In Vitro	Phenytoin sodium is an antiepileptic drug. It is useful to treat partial seizures and generalized tonic-clonic seizures but not primary generalized seizures such as absence seizures or myoclonic seizures. Phenytoin is believed to protect against seizures by causing voltage-dependent block of voltage-gated sodium channels ^[2] . Phenytoin has low affinity for resting sodium channels at hyperpolarized membrane potentials ^[3] . When neurons are depolarized and the channels transition into the open and inactivated states, greater binding and block

occur. The inhibitory potency is strongly use dependent, so that block accumulates with prolonged or repetitive activation, such as occurs during a seizure discharge. The blocking of sodium channels by phenytoin is of slow onset. The time course of fast sodium currents is therefore not altered in the presence of the drug and action potentials evoked by synaptic depolarizations of ordinary duration are not blocked. Thus phenytoin is able to selectively inhibit pathological hyperexcitability in epilepsy without unduly impairing ongoing activity. Phenytoin also blocks persistent sodium current and this may be of particular importance in seizure control. Phenytoin is a class 1b antiarrhythmic^[4].
MCE has not independently confirmed the accuracy of these methods. They are for reference only.

In Vivo

Phenytoin sodium (5,5-Diphenylhydantoin sodium salt; 60 mg/kg; daily; 28 days) reduces tumour growth in six week-old female Rag2^{-/-} Il2rg^{-/-} mice with MDA-MB-231 cells^[1].
MCE has not independently confirmed the accuracy of these methods. They are for reference only.

REFERENCES

- [1]. Rogawski, M.A. and W. Loscher, The neurobiology of antiepileptic drugs. *Nat Rev Neurosci*, 2004. 5(7): p. 553-64.
- [2]. Porter, R.J., et al., Mechanisms of action of antiseizure drugs. *Handb Clin Neurol*, 2012. 108: p. 663-81.
- [3]. Balaji, S., Medical therapy for sudden death. *Pediatr Clin North Am*, 2004. 51(5): p. 1379-87.
- [4]. Michaela Nelson, et al. The sodium channel-blocking antiepileptic drug phenytoin inhibits breast tumour growth and metastasis. *Mol Cancer*. 2015 Jan 27;14(1):13.

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

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