Altrenogest

Cat. No.: HY-B0521
CAS No.: 850-52-2
Molecular Formula: C₂₁H₂₆O₂
Molecular Weight: 310.43
Target: Progestosterone Receptor
Pathway: Others
Storage:
- Powder: -20°C for 3 years
- Powder: 4°C for 2 years
- In solvent: -80°C for 6 months
- In solvent: -20°C for 1 month

SOLVENT & SOLUBILITY

In Vitro

DMSO: ≥ 100 mg/mL (322.13 mM)
H₂O: < 0.1 mg/mL (insoluble)
* "≥" means soluble, but saturation unknown.

<table>
<thead>
<tr>
<th>Preparing Stock Solutions</th>
<th>Solvent Concentration</th>
<th>Mass</th>
<th>1 mg</th>
<th>5 mg</th>
<th>10 mg</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1 mM</td>
<td></td>
<td>3.2213 mL</td>
<td>16.1067 mL</td>
<td>32.2134 mL</td>
</tr>
<tr>
<td></td>
<td>5 mM</td>
<td></td>
<td>0.6443 mL</td>
<td>3.2213 mL</td>
<td>6.4427 mL</td>
</tr>
<tr>
<td></td>
<td>10 mM</td>
<td></td>
<td>0.3221 mL</td>
<td>1.6107 mL</td>
<td>3.2213 mL</td>
</tr>
</tbody>
</table>

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: ≥ 3 mg/mL (9.66 mM); Clear solution
2. Add each solvent one by one: 10% DMSO >> 90% (20% SBE-β-CD in saline)
   Solubility: ≥ 3 mg/mL (9.66 mM); Clear solution
3. Add each solvent one by one: 10% DMSO >> 90% corn oil
   Solubility: ≥ 3 mg/mL (9.66 mM); Clear solution

BIOLOGICAL ACTIVITY

Description
Altrenogest (Allyltrenbolone) is a progestogen structurally related to veterinary steroid trenbolone.

IC₅₀ & Target
Progesterone Receptor[1].
In Vitro

Altrenogest (Allyltrenbolone) is a progestogen structurally related to veterinary steroid trenbolone. Treatment of embryo-recipient mares with Altrenogest (Allyltrenbolone) appears to be beneficial in extending the degree of donor-recipient synchrony required for successful embryo transfer[1]. The oil and gel Altrenogest (Allyltrenbolone) preparations are equally effective in modulating estrous behavior and time to estrus and ovulation. Altrenogest (Allyltrenbolone) treatment started late in diestrus appears to result in a high incidence of ovulation during treatment and when luteolysis and ovulation occur during treatment; the subsequent luteal phase is frequently prolonged due to failure of regression of the CL[2].

REFERENCES
