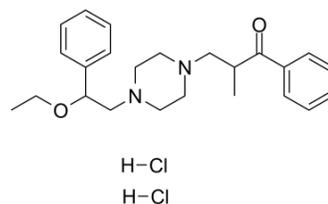


Eprazinone dihydrochloride

Cat. No.:	HY-B2078A		
CAS No.:	10402-53-6		
Molecular Formula:	C ₂₄ H ₃₄ Cl ₂ N ₂ O ₂		
Molecular Weight:	453.44		
Target:	Neurokinin Receptor		
Pathway:	GPCR/G Protein; Neuronal Signaling		
Storage:	Powder	-20°C	3 years
		4°C	2 years
	In solvent	-80°C	6 months
		-20°C	1 month



BIOLOGICAL ACTIVITY

Description	Eprazinone dihydrochloride is a gent with mucolytic, secretolytic, antitussive, and bronchial antispasmodic properties. Eprazinone dihydrochloride is a neurokinin 1 receptor (NK1R) ligand. Eprazinone dihydrochloride has the potential for chronic bronchitis treatment that improved pulmonary function and arterial partial pressure of oxygen ^{[1][2]} .	
IC₅₀ & Target	Neurokinin 1 receptor ^[1]	
In Vitro	Eprazinone specifically displaces binding to the NK1R. Although Eprazinone displays a rather weak inhibition of [¹²⁵ I]BH-SP binding to NK1R, at a concentration of 25 μM, and an antagonistic effect of about 30%, NK1R blockade could contribute to its mucolytic activity ^[2] . MCE has not independently confirmed the accuracy of these methods. They are for reference only.	
In Vivo	Eprazinone (50-200 mg/kg; oral gavage; daily; for 4 days; adult male rats) at a dose of 200 mg/kg significantly increases total and individual (with the exception of phosphatidylinositol) phospholipid levels and decreases total neutral lipids. Lower doses of Eprazinone significantly decrease neutral lipid levels without affecting the phospholipids ^[1] . In airway epithelial studies, mucosal addition of Eprazinone produces a dose-dependent partially reversible decrease in short-circuit current (I _{sc}). The decrease in I _{sc} at lower Eprazinone concentrations is accounted for entirely by a decrease in net chloride secretion while at higher concentrations both sodium and chloride transport are affected ^[1] . MCE has not independently confirmed the accuracy of these methods. They are for reference only.	
	Animal Model:	Adult male pathogen free Fischer 344 inbred rats (200-250 g) ^[1]
	Dosage:	50 mg/kg, 100 mg/kg, and 200 mg/kg
	Administration:	Oral gavage; daily; for 4 days
	Result:	At a dose of 200 mg/kg significantly increased total and individual (with the exception of phosphatidylinositol) phospholipid levels and decreased total neutral lipids.

REFERENCES

[1]. R S Thrall, et al. Eprazinone Alters Lung Lavage Lipid Levels and Transtracheal Ion Transport. *Exp Lung Res.* May-Jun 1992;18(3):409-20.

[2]. Yvonne Krautscheid, et al. Pharmacophore Modeling, Virtual Screening, and in Vitro Testing Reveal Haloperidol, Eprazinone, and Fenbutrazate as Neurokinin Receptors Ligands. *J Chem Inf Model.* 2014 Jun 23;54(6):1747-57.

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

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