

LDE225 (Sonidegib; NVP-LDE225; Erismodegib)

Catalog No: tcsc0904

Available Sizes

Size: 5mg

Size: 10mg

Size: 100mg

Size: 200mg

Size: 500mg

Size: 500mg

Size: 500mg

CAS No:
956697-53-3

Formula:

 $C_{26}H_{26}F_{3}N_{3}O_{3}$

Pathway:

Stem Cell/Wnt

Target:

Smo

Purity / Grade:

>98%

Solubility:

10 mM in DMSO

Alternative Names: LDE225; NVP-LDE 225

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Observed Molecular Weight:

485.5

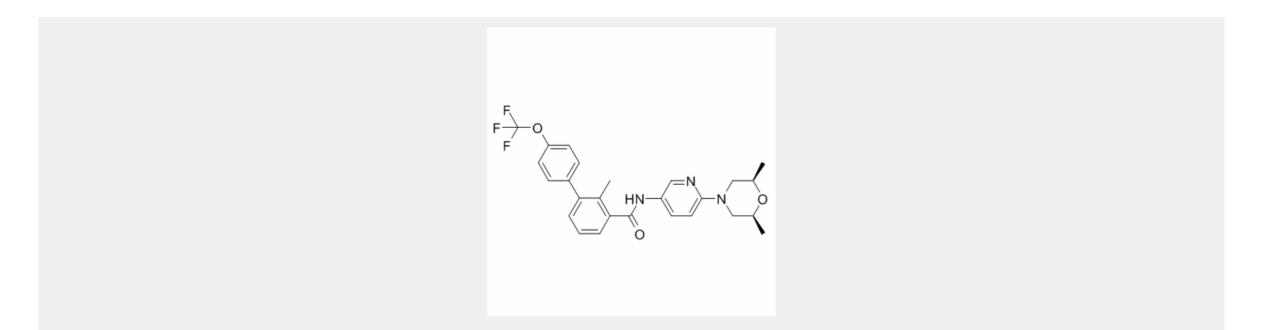
Product Description

Erismodegib (LDE225) is a potent and selective **Smoothened (Smo)** antagonist with **IC₅₀**s of 1.3 nM and 2.5 nM for mouse and human Smo, respectively.

IC50 & Target: IC50: 1.3 nM (mSmo), 2.5 nM (hSmo)^[1]

In Vitro: The IC₅₀ values for Erismodegib (NVP-LDE225) for the major human CYP450 drug metabolizing enzymes is greater than 10 μ M^[1]. Erismodegib (LDE225), a small molecule, clinically investigated SMO inhibitor, used alone and in combination with Nilotinib, inhibits the Hh pathway in CD34⁺ chronic phase (CP)-chronic myeloid leukaemia (CML) cells, reducing the number and self-renewal capacity of CML leukaemia stem cell (LSC). Erismodegib interacts directly with SMO, in a similar fashion to cyclopamine, to reduce expression of downstream Hh signaling targets. Primary CD34⁺ CP-CML cells are cultured in serum free media (SFM)±Erismodegib for 6, 24 and 72 hours (h). At 72 h, while there is variability between the biological samples, *GLI1* is significantly downregulated following exposure to Erismodegib (10 nM; 0.78-fold and 100 nM; 0.73-fold, respectively (p[2].

In Vivo: Erismodegib (NVP-LDE225) is a weak base with a measured pK_a of 4.2 and exhibits relatively poor aqueous solubility. In the subcutaneous Ptch^{+/-}p53^{-/-} medulloblastoma allograft mouse model, Erismodegib demonstrates dose-related antitumor activity after 10 days of oral administration of a suspension of the diphosphate salt. At a dose of 5 mg/kg/day qd, Erismodegib significantly inhibits tumor growth, corresponding to a T/C value of 33% (p[1]. Bone marrow cells and spleen cells from a subset of treated mice are transplanted into secondary recipient mice. Transplantation of either bone marrow (BM) or spleen cells from mice treated with Erismodegib+Nilotinib results in reduced white cell count (WCC) and reduces leukaemia development in secondary recipients compared to Erismodegib or Nilotinib alone^[2].



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