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产品名称: **TAK-220**
产品别名: **TAK-220**

生物活性:

Description	TAK-220 is a selective and orally bioavailable CCR5 antagonist, with IC ₅₀ s of 3.5 nM and 1.4 nM for inhibition on the binding of RANTES and MIP-1α to CCR5, respectively, but shows no effect on the binding to CCR1, CCR2b, CCR3, CCR4, or CCR7; TAK-220 also selectively inhibits HIV-1, with EC ₅₀ s of 1.2 nM (HIV-1 KK), 0.72 nM (HIV-1 CTV), 1.7 nM (HIV-1 HKW), 1.7 nM (HIV-1 HNK), 0.93 nM (HIV-1 HTN), and 0.55 nM (HIV-1 HHA), and EC ₉₀ s of 12 nM (HIV-1 KK), 5 nM (HIV-1 CTV), 12 nM (HIV-1 HKW), 28 nM (HIV-1 HNK), 15 nM (HIV-1 HTN), and 4 nM (HIV-1 HHA) in PBMCs.				
IC ₅₀ & Target	RANTES-CCR5	MIP-1α-CCR5	HIV-1 (KK)		
	3.5 nM (IC ₅₀ , in CHO cells)	1.4 nM (IC ₅₀ , in CHO cells)	1.2 nM (EC ₅₀ , in PBMCs)		
	HIV-1 (CTV)	HIV-1 (HKW)	HIV-1 (HNK)		
	0.72 nM (EC ₅₀ , in PBMCs)	1.7 nM (EC ₅₀ , in PBMCs)	1.7 nM (EC ₅₀ , in PBMCs)		
	HIV-1 (HTN)	HIV-1 (HHA)	HIV-1 (KK)		
	0.93 nM (EC ₅₀ , in PBMCs)	0.55 nM (EC ₅₀ , in PBMCs)	12 nM (EC90, in PBMCs)		
	HIV-1 (CTV)	HIV-1 (HKW)	HIV-1 (HNK)		
	5 nM (EC90, in PBMCs)	12 nM (EC90, in PBMCs)	28 nM (EC90, in PBMCs)		
	HIV-1 (HTN)	HIV-1 (HHA)			
	15 nM (EC90, in PBMCs)	4 nM (EC90, in PBMCs)			
In Vitro	TAK-220 is a selective CCR5 antagonist, with IC ₅₀ s of 3.5 nM and 1.4 nM for inhibition on the binding of RANTES and MIP-1α to CCR5 in CHO cells, respectively, but shows no effect on the binding to CCR1, CCR2b, CCR3, CCR4, or CCR7. TAK-220 (0-1000 nM) interacts with CCR5 but not with RANTES and inhibits the CCR5-mediated Casup>2+ signaling. TAK-220 inhibits R5 HIV-1 (JR-FL) envelope-mediated membrane fusion, with an IC ₅₀ value of 0.42 nM, but does not alter X4 HIV-1 (HXB2) envelope-mediated membrane fusion. TAK-220 also selectively inhibits HIV-1, with EC ₅₀ s of 1.2 nM (HIV-1 KK), 0.72 nM (HIV-1 CTV), 1.7 nM (HIV-1 HKW), 1.7 nM (HIV-1 HNK), 0.93 nM (HIV-1 HTN), and 0.55 nM (HIV-1 HHA), and EC ₉₀ s of 12 nM (HIV-1 KK), 5 nM (HIV-1 CTV), 12 nM (HIV-1 HKW), 28 nM (HIV-1 HNK), 15 nM (HIV-1 HTN), and 4 nM (HIV-1 HHA) in PBMCs[1]. TAK-220 shows potent inhibitory activity against the R5 isolates, with IC ₅₀ s of 3.12 nM against HIV-1 R5-08, 13.47 nM against HIV-1 R5-06, and 2.26 nM against HIV-1 R5-18. TAK-220 (>100 nM) has no toxicity in uninfected PBMCs[2].				
	In Vitro: DMSO : ≥ 50 mg/mL (90.39 mM) * "≥" means soluble, but saturation unknown.				
	Preparing Stock Solutions	Solvent / Mass / Concentration	1 mg	5 mg	10 mg
		1 mM	1.8079 mL	9.0393 mL	18.0786 mL
		5 mM	0.3616 mL	1.8079 mL	3.6157 mL
		10 mM	0.1808 mL	0.9039 mL	1.8079 mL
*请根据产品在不同溶剂中的溶解度选择合适的溶剂配制储备液; 一旦配成溶液, 请分装保存, 避免反复冻融造成的产品失效。					



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Solvent&Solubility	储备液的保存方式和期限 -80°C, 6 months; -20°C, 1 month。 -80°C 储存时, 请在 6 个月内使用, -20°C 储存时, 请在 1 个月内使用。 In Vivo: 请根据您的实验动物和给药方式选择适当的溶解方案。以下溶解方案都请先按照 In Vitro 方式配制澄清的储备液, 再依次添加助溶剂: ——为保证实验结果的可靠性, 澄清的储备液可以根据储存条件, 适当保存; 体内实验的工作液, 建议您现用现配, 当天使用; 以下溶剂前显示的百分比是指该溶剂在您配制终溶液中的体积占比; 如在配制过程中出现沉淀、析出现象, 可以通过加热和/或超声的方式助溶 1.请依序添加每种溶剂: 10% DMSO→40% PEG300 →5% Tween-80 → 45% saline Solubility: ≥ 2.5 mg/mL (4.52 mM); Clear solution 此方案可获得 ≥ 2.5 mg/mL (4.52 mM, 饱和度未知) 的澄清溶液。 以 1 mL 工作液为例, 取 100 μL 25.0 mg/mL 的澄清 DMSO 储备液加到 400 μL PEG300 中, 混合均匀, 向上述体系中加入 50 μL Tween-80, 混合均匀; 然后继续加入 450 μL 生理盐水定容至 1 mL。 2.请依序添加每种溶剂: 10% DMSO→ 90% (20% SBE-β-CD in saline) Solubility: ≥ 2.5 mg/mL (4.52 mM); Clear solution 此方案可获得 ≥ 2.5 mg/mL (4.52 mM, 饱和度未知) 的澄清溶液。 以 1 mL 工作液为例, 取 100 μL 25.0 mg/mL 的澄清 DMSO 储备液加到 900 μL 20% 的 SBE-β-CD 生理盐水溶液中, 混合均匀。 3.请依序添加每种溶剂: 10% DMSO →90% corn oil Solubility: ≥ 2.5 mg/mL (4.52 mM); Clear solution 此方案可获得 ≥ 2.5 mg/mL (4.52 mM, 饱和度未知) 的澄清溶液, 此方案不适用于实验周期在半个月以上的实验。 以 1 mL 工作液为例, 取 100 μL 25.0 mg/mL 的澄清 DMSO 储备液加到 900 μL 玉米油中, 混合均匀。
References	[1]. Takashima K, et al. Highly potent inhibition of human immunodeficiency virus type 1 replication by TAK-220, an orally bioavailable small-molecule CCR5 antagonist. Antimicrob Agents Chemother. 2005 Aug;49(8):3474-82. [2]. Tremblay CL, et al. TAK-220, a novel small-molecule CCR5 antagonist, has favorable anti-human immunodeficiency virus interactions with other antiretrovirals in vitro. Antimicrob Agents Chemother. 2005 Aug;49(8):3483-5.
实验参考:	
Cell Assay	PHA-stimulated PBMCs are inoculated with 1,000 to 1,400 CCID₅₀s of R5 HIV-1 (JR-FL) or X4 HIV-1 (IIIB) or with 13 to 55 ng of p24 of HIV-1 clinical isolates per 4×10^6 cells and incubated for 4 h. The cells are washed to remove unadsorbed viral particles and seeded into a 96-well plate (2×10^5 cells/well) with culture medium containing various concentrations of TAK-220. The effects of high concentrations of human serum (HS) on the anti-HIV-1 activity of TAK-220 are examined with RPMI 1640 medium supplemented with either 20% FBS alone or 40% human type AB serum plus 10% FBS, 100 U/mL recombinant human interleukin 2, and antibiotics. On day 4 after infection, the cells are subcultured at 1:2 with culture medium containing the same concentrations of the test compounds. On day 7 after infection, the culture



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	supernatants are collected and their p24 antigen levels are determined with a p24 antigen enzyme-linked immunosorbent assay kit[1].
References	[1]. Takashima K, et al. Highly potent inhibition of human immunodeficiency virus type 1 replication by TAK-220, an orally bioavailable small-molecule CCR5 antagonist. Antimicrob Agents Chemother. 2005 Aug;49(8):3474-82. [2]. Tremblay CL, et al. TAK-220, a novel small-molecule CCR5 antagonist, has favorable anti-human immunodeficiency virus interactions with other antiretrovirals in vitro. Antimicrob Agents Chemother. 2005 Aug;49(8):3483-5.



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