

Product Data Sheet

Cas No.:	117976-90-6		Cat. No:	PC11957
Product Name:	Rabeprazole sodium			
Product synonym:	雷贝拉唑钠;2-{{4-(3-甲氧基丙氧基)-3-甲基吡啶-2-基}甲基磺酰基}-1H-苯并咪唑钠;雷贝拉唑钠盐;Rabeprazole Sodium Salt 雷贝拉唑钠盐;雷贝拉唑-D4钠盐;雷贝拉唑钠 标准品;雷贝拉唑钠(质子泵抑制剂);雷贝拉唑钠标准品(JP);雷奈酸锶;雷贝拉唑钠对照品;雷贝拉唑钠及中间体;厂家供应雷贝拉唑整套杂质			
Chemical name:	Rabeprazole sodium			
MF:	C18H20N3NAO3S		FW:	381.4245
Purity:	≥98%		Batch No.:	-
Storage:				
Structural formula:				
λmax:	-		Formulation:	-
Solubility :				
SMILES :	S(C1=NC2=C([H])C([H])=C([H])C([H])=C2[N-]1)(C([H])([H])C1C(C([H])([H])[H])=C([H])=C([H])N=1)OC([H])([H])C([H])([H])C([H])([H])OC([H])([H])[H])=O.[Na+]			
InChI Code:	-			
InChI Key:				
WARNING This product is not for human or veterinary use.				

Product Description

质子泵抑制剂,Rabeprazole (LY307640)钠盐是质子泵抑制剂, 可抗溃疡。

生物活性	Rabeprazole sodium (LY307640 sodium) is a second-generation proton pump inhibitor (PPI) that irreversibly inactivates gastric H/K-ATPase. Rabeprazole sodium induces apoptosis . Rabeprazole sodium acts as an uridine nucleoside ribohydrolase (UNH) inhibitor with an IC₅₀ of 0.3 μM. Rabeprazole sodium can be used for the research of gastric ulcerations and gastroesophageal reflux.
IC ₅₀ & Target[1][2]	Pump inhibitor (PPI) IC ₅₀ : 0.3 μM (UNH) H/K-ATPase Apoptosis

体外研究(In Vitro)	<p>Rabeprazole attenuates the cell viability of the human gastric cancer cells following treatment with 0.2 mM for 16 hours. Rabeprazole completely inhibits the phosphorylation of ERK1/2 in the MKN-28 cells. The gastric cancer cell line MKN-28 is cultured in acidic culture media (pH 5.4) for 2 hours. Pretreatment with Rabeprazole (0.2 mM for 2 hours) leads to strong inhibition of ERK 1/2 phosphorylation in the MKN-28 cells.</p> <p>Medlife has not independently confirmed the accuracy of these methods. They are for reference only.</p> <p>Cell Viability Assay</p> <table border="1" data-bbox="361 370 1513 595"> <tr> <td>Cell Line:</td><td>Three gastric cancer cell lines KATO III, MKN-28 and MKN-45</td></tr> <tr> <td>Concentration:</td><td>0.2 mM</td></tr> <tr> <td>Incubation Time:</td><td>16 hours</td></tr> <tr> <td>Result:</td><td>Treatment resulted in the attenuation of viability in all cancer cell lines tested, the cell viability of the MKN-28</td></tr> </table> <p>Western Blot Analysis</p> <table border="1" data-bbox="361 651 1513 875"> <tr> <td>Cell Line:</td><td>Three gastric cancer cell lines (KATO III, MKN-28 and MKN-45)</td></tr> <tr> <td>Concentration:</td><td>0.2 mM</td></tr> <tr> <td>Incubation Time:</td><td>Pretreatment for 2 hours</td></tr> <tr> <td>Result:</td><td>Led to strong inhibition of ERK 1/2 phosphorylation in the MKN-28 cells, but a similar effect was not observed</td></tr> </table>	Cell Line:	Three gastric cancer cell lines KATO III, MKN-28 and MKN-45	Concentration:	0.2 mM	Incubation Time:	16 hours	Result:	Treatment resulted in the attenuation of viability in all cancer cell lines tested, the cell viability of the MKN-28	Cell Line:	Three gastric cancer cell lines (KATO III, MKN-28 and MKN-45)	Concentration:	0.2 mM	Incubation Time:	Pretreatment for 2 hours	Result:	Led to strong inhibition of ERK 1/2 phosphorylation in the MKN-28 cells, but a similar effect was not observed							
Cell Line:	Three gastric cancer cell lines KATO III, MKN-28 and MKN-45																							
Concentration:	0.2 mM																							
Incubation Time:	16 hours																							
Result:	Treatment resulted in the attenuation of viability in all cancer cell lines tested, the cell viability of the MKN-28																							
Cell Line:	Three gastric cancer cell lines (KATO III, MKN-28 and MKN-45)																							
Concentration:	0.2 mM																							
Incubation Time:	Pretreatment for 2 hours																							
Result:	Led to strong inhibition of ERK 1/2 phosphorylation in the MKN-28 cells, but a similar effect was not observed																							
<p>Rabeprazole (10 mg/kg; P.O.; every 48 h for 18 weeks) course leads to a significant decline in bone mineral density (BMD) and decreases serum calcium level and produces secondary hyperparathyroidism in female mice.</p> <p>Medlife has not independently confirmed the accuracy of these methods. They are for reference only.</p> <table border="1" data-bbox="361 1066 1513 1302"> <tr> <td>Animal Model:</td><td>Female Swiss albino mice (body weight equals 18-26 g)</td></tr> <tr> <td>Dosage:</td><td>10 mg/kg</td></tr> <tr> <td>Administration:</td><td>Oral administration; every 48 h for 18 weeks</td></tr> <tr> <td>Result:</td><td>Showed significantly lower serum calcium level compared to the vehicle treated group (5.5±2.07 vs. 9.68±2.77</td></tr> </table>	Animal Model:	Female Swiss albino mice (body weight equals 18-26 g)	Dosage:	10 mg/kg	Administration:	Oral administration; every 48 h for 18 weeks	Result:	Showed significantly lower serum calcium level compared to the vehicle treated group (5.5±2.07 vs. 9.68±2.77																
Animal Model:	Female Swiss albino mice (body weight equals 18-26 g)																							
Dosage:	10 mg/kg																							
Administration:	Oral administration; every 48 h for 18 weeks																							
Result:	Showed significantly lower serum calcium level compared to the vehicle treated group (5.5±2.07 vs. 9.68±2.77																							
体内研究(In Vivo)	<p>4°C, stored under nitrogen</p> <p>*In solvent : -80°C, 6 months; -20°C, 1 month (stored under nitrogen)</p>																							
包装储存	<p>体外研究:</p> <p>H₂O : ≥ 100 mg/mL (262.18 mM)</p> <p>DMSO : ≥ 48 mg/mL (125.85 mM)</p> <p>* "≥" means soluble, but saturation unknown.</p> <table border="1" data-bbox="361 1695 1513 1942"> <thead> <tr> <th rowspan="2">配制储备溶液</th> <th rowspan="2">溶剂体积 浓度</th> <th colspan="3">质量</th> </tr> <tr> <th>1 mM</th> <th>5 mg</th> <th>10 mg</th> </tr> </thead> <tbody> <tr> <td></td> <td>1 mM</td> <td>2.6218 mL</td> <td>13.1089 mL</td> <td>26.2178 mL</td> </tr> <tr> <td></td> <td>5 mM</td> <td>0.5244 mL</td> <td>2.6218 mL</td> <td>5.2436 mL</td> </tr> <tr> <td></td> <td>10 mM</td> <td>0.2622 mL</td> <td>1.3109 mL</td> <td>2.6218 mL</td> </tr> </tbody> </table> <p>* 产品不同，其溶解度不同。建议根据产品选择合适的溶剂配制储备溶液；配成溶液后，建议分装保存，避免反复冻融造成的产品失效。</p>	配制储备溶液	溶剂体积 浓度	质量			1 mM	5 mg	10 mg		1 mM	2.6218 mL	13.1089 mL	26.2178 mL		5 mM	0.5244 mL	2.6218 mL	5.2436 mL		10 mM	0.2622 mL	1.3109 mL	2.6218 mL
配制储备溶液	溶剂体积 浓度			质量																				
		1 mM	5 mg	10 mg																				
	1 mM	2.6218 mL	13.1089 mL	26.2178 mL																				
	5 mM	0.5244 mL	2.6218 mL	5.2436 mL																				
	10 mM	0.2622 mL	1.3109 mL	2.6218 mL																				

储备液的保存方式和期限: -80°C, 6 months; -20°C, 1 month (stored under nitrogen)。-80°C 储存时, 建议在 6 个月内使用, -20°C 储存时, 建议在 1 个月内使用。

体内研究:

建议根据您的[实验动物和给药方式](#)选择适当的溶解方案。以下溶解方案都建议先按照[体外研究](#)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. 建议依照次序添加每种溶剂: 10% DMSO 40% PEG300 5% Tween-80 45% saline

Solubility: $\geq 2.08 \text{ mg/mL}$ (5.45 mM); Clear solution

此方案可获得 $\geq 2.08 \text{ mg/mL}$ (5.45 mM, 饱和度未知) 的澄清溶液。

以 1 mL 工作液为例, 取 100 μL 20.8 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。

将 0.9 g 氯化钠, 完全溶解于 100 mL ddH₂O 中, 得到澄清透明的生理盐水溶液

2. 建议依照次序添加每种溶剂: 10% DMSO 90% (20% SBE- β -CD in saline)

Solubility: $\geq 2.08 \text{ mg/mL}$ (5.45 mM); Clear solution

此方案可获得 $\geq 2.08 \text{ mg/mL}$ (5.45 mM, 饱和度未知) 的澄清溶液。

以 1 mL 工作液为例, 取 100 μL 20.8 mg/mL 的澄清 DMSO 储备液加到 900 μL 20% 的 SBE- β -CD 生理盐水水溶液中, 混合均匀。

将 2 g 矿丁基醚 β -环糊精加入 5 mL 生理盐水中, 再用生理盐水定容至 10 mL, 完全溶解, 澄清透明

3. 建议依照次序添加每种溶剂: 10% DMSO 90% corn oil

Solubility: $\geq 2.08 \text{ mg/mL}$ (5.45 mM); Clear solution

此方案可获得 $\geq 2.08 \text{ mg/mL}$ (5.45 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 20.8 mg/mL 的澄清 DMSO 储备液加到 900 μL 玉米油中, 混合均匀。

*