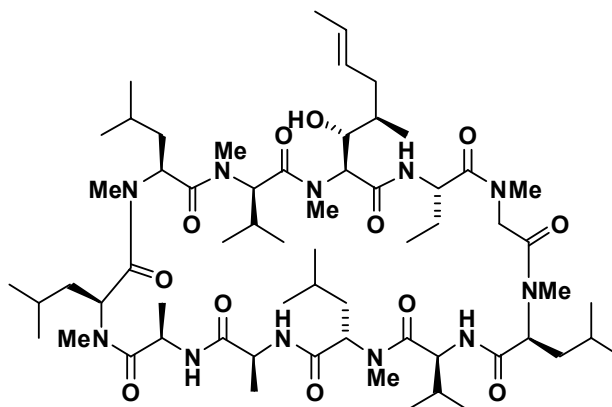


## Cyclosporin H

Code: **BIA-C1248**

Pack sizes: **1 mg, 5 mg**



Synonyms : **5-(N-methyl-D-valine)cyclosporine A**

## Specifications

CAS # : **83602-39-5**  
Molecular Formula : **C<sub>62</sub>H<sub>111</sub>N<sub>11</sub>O<sub>12</sub>**  
Molecular Weight : **1202.6**  
Source : ***Trichoderma* sp.**  
Appearance : **White powder**  
Purity : **> 95% by HPLC**  
Storage : **-20°C**  
Solubility : **Soluble in ethanol, methanol, DMF or DMSO. Limited water solubility.**

## Application Notes

Cyclosporin H is a minor analogue of the cyclosporin family which is immunologically inactive as it does not bind to immunophilin. Cyclosporin H is the most extensively investigated of the minor cyclosporin analogues and displays a range of activities. It is a potent inhibitor of tumor-promoting phorbol esters on mouse skin *in vivo*, a potent inhibitor of calcium/calmodulin-dependent EF-2 phosphorylation *in vitro*, a potent and selective antagonist of formyl peptide receptor and inhibitor of formyl peptide-induced superoxide formation.

## References

1. The weak immunosuppressant cyclosporine D as well as the immunologically inactive cyclosporine H are potent inhibitors *in vivo* of phorbol ester TPA-induced biological effects in mouse skin and of Ca<sup>2+</sup>/calmodulin dependent EF-2 phosphorylation *in vitro*. Gschwendt M. et al. BBRC 1988, 150, 545.
2. Differential inhibition of human neutrophil activation by cyclosporins A, D, and H. Cyclosporin H is a potent and effective inhibitor of formyl peptide-induced superoxide formation. Wenzel-Seifert K. et al. J. Immunol. 1991, 147, 1940.
3. Cyclosporin H is a potent and selective formyl peptide receptor antagonist. Comparison with N-t-butoxycarbonyl-L-phenylalanyl-L-leucyl-L-phenylalanyl-L-leucyl-L-phenylalanine and cyclosporins A, B, C, D, and E. Wenzel-Seifert K. & Seifert R. J. Immunol. 1993, 150, 4591.
4. Cyclosporin H is a potent and selective competitive antagonist of human basophil activation by N-formyl-methionyl-leucyl-phenylalanine. de Paulis A. et al. J. Allergy Clin. Immunol. 1996, 98, 152.