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Produktinformation

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Lieferung & Zahlungsart

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Zuschläge

- Mindermengenzuschlag
- Trockeneiszuschlag
- Gefahrgutzuschlag
- Expressversand

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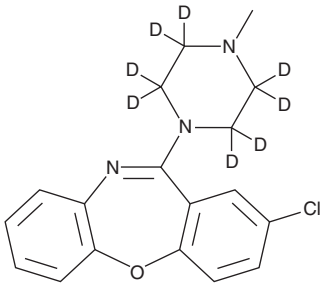
PRODUCT INFORMATION

Loxapine-d_8

Item No. 33537

CAS Registry No.: 1189455-63-7
Formal Name: 2-chloro-11-(4-methylpiperazin-1-yl-2,2,3,3,5,5,6,6-d_8)dibenzo[b,f][1,4]oxazepine
MF: $C_{18}H_{10}ClD_8N_3O$
FW: 335.9
Chemical Purity: ≥98% (Loxapine)
Deuterium Incorporation: ≥99% deuterated forms (d_1-d_8); ≤1% d_0
Supplied as: A solid
Storage: -20°C
Stability: ≥2 years



Information represents the product specifications. Batch specific analytical results are provided on each certificate of analysis.

Laboratory Procedures

Loxapine-d_8 is intended for use as an internal standard for the quantification of oxapine (Item No. 20760) by GC- or LC-MS. The accuracy of the sample weight in this vial is between 5% over and 2% under the amount shown on the vial. If better precision is required, the deuterated standard should be quantitated against a more precisely weighed unlabeled standard by constructing a standard curve of peak intensity ratios (deuterated *versus* unlabeled).

Loxapine-d_8 is supplied as a solid. A stock solution may be made by dissolving the loxapine-d_8 in the solvent of choice, which should be purged with an inert gas. Loxapine-d_8 is soluble in methanol, DMSO, and acetonitrile.

Description

Loxapine is an atypical antipsychotic.[1] It binds to the serotonin (5-HT) receptor subtypes 5-HT_{1A}, 5-HT_{2A}, 5-HT_{2C}, 5-HT_6, and 5-HT_7 (K_is = 2,456, 7.7, 9.5, 32, and 87.2 nM, respectively), as well as dopamine D_2, histamine H_1, and M_3 muscarinic acetylcholine receptors (K_is = 12, 7, and 122 nM, respectively). Loxapine also binds to α_{1A}-, α_{2A}-, α_{2B}-, and α_{2C}-adrenergic receptors (K_is = 31, 150.8, 107.6, and 79.9 nM, respectively). Formulations containing loxapine have been used in the treatment of schizophrenia.

Reference

1. Kroeze, W.K., Hufeisen, S.J., Popadak, B.A., *et al.* H1-histamine receptor affinity predicts short-term weight gain for typical and atypical antipsychotic drugs. *Neuropsychopharmacology* **28(3)**, 519-526 (2003).

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