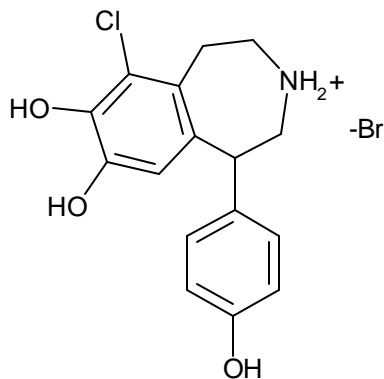


Product Information

FENOLDOPAM MONOHYDROBROMIDE

Product Number **F6800**

Storage Temperature: 2-8°C



CAS#: 67287-54-1

Synonyms: SKF-82526

Product Description

Molecular Formula: C₁₆H₁₆ClNO₃•HBr

Molecular Weight: 386.68 (anhydrous)

Dopamine (DA) receptors were initially divided into two general categories on the basis of differences in receptor pharmacology and biochemical mechanisms of signal transduction. With the application of molecular biology techniques, several groups cloned the two predominant DA receptors, D₁ and D₂. Additional dopamine receptors were identified based on their homology to D₁ and D₂. Two families of DA receptors are currently recognized. The D₁-like family is composed of the D₁ and D₅ receptors. The D₂-like family includes D₂, D₃, and D₄.¹ The availability of agonists and antagonists selective for the subtypes of dopamine receptors allows physiological roles to be attributed to these receptors.

D₁ receptors on vascular smooth muscle cells mediate vasodilation, while on renal tubule cells they increase sodium excretion by inhibiting the Na⁺/K⁺ ATPase

responsible for sodium reuptake. Fenoldopam is a selective agonist at peripheral D₁ dopamine receptors.² It activates vascular D₁ receptors and induces vasodilation of the vascular beds of the kidney, heart, brain, and mesentery. It also activates renal tubule D₁ receptors and induces diuresis and natriuresis that may be mediated in part through increased nitric oxide production.³ Both mechanisms are involved in the reduction of blood pressure induced by fenoldopam in normotensive animals.⁴ In contrast, fenoldopam reduced the blood pressure of spontaneously hypertensive rats, but has little effect on renal blood flow, indicating a defect in renal D₁ receptors in these animals.^{5,6} Fenoldopam does not cross the blood-brain barrier.²

Preparation Instructions

Soluble in water (4.75 mg/ml) and DMSO (>12 mg/ml).

Storage/Stability

Store at 2-8°C sealed tightly under argon. Protect from exposure to light and air.

References

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3. Venkatakrisnan, U., et al., *Clin. Exp. Hypertens.*, **22**, 309-324 (2000).
4. Quevedo, M., et al., *Gen. Pharmacol.* **32**, 123-125 (1999).
5. deVries, P.A., et al., *J. Cardiovasc. Pharmacol.*, **34**, 191-198 (1999).
6. Hussain, T., and Lokhandwala, M.F., *Am. J. Physiol.* **272**, F339-F346 (1997).

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