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**Product Data Sheet**

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Product Name: Rituximab (Anti-Human CD20 type I, Chimeric Antibody)

Cat. No.: GC34209

**Chemical Properties**

Cas. No. 174722-31-7

SMILES [Rituximab]

Formula  $C_{6416}H_{9874}N_{1688}O_{1987}S_{44}$  M.Wt 144544.44

Solubility Storage Store at -80°C

General tips For obtaining a higher solubility , please warm the tube at 37 °C and shake it in the ultrasonic bath for a while. Stock solution can be stored below -20°C for several months.

Shipping Condition Evaluation sample solution : ship with blue ice All other available size: ship with RT , or blue ice upon request.

Structure **Protocol****Cell experiment [1]:**

Cell lines Peripheral blood mononuclear cells from B-CLL patients

Preparation Method  $7 \times 10^4$  cells/well were plated in quadruplicate in 96-well plates in the presence or absence of 0.3-1µg/ml fludarabine. After 24 h, human serum was added to a final 25% in the presence or absence of 10 µg/ml rituximab and the cells incubated for 4 h at 37°C.

Reaction Conditions 10 µg/ml for 4 hours

**Caution: Product has not been fully validated for medical applications. For research use only.**

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Applications	In CLL 4, rituximab and complement alone induced 34% cell death.
<b>Animal experiment [2]:</b>	
Animal models	Male C57BL/6 mice, weighing 18-22 g,
Preparation Method	Each animal received a single injection of rituximab (10 mg/mL) by either IV (1 and 40 mg/kg; tail vein) or SC routes (1, 10 and 40 mg/kg; mid back or mid abdomen). The volume of injection was 4 mL/kg (80 $\mu$ L for 20 g mouse), and the commercially available formulation (10 mg/mL) was diluted with sterile normal saline for low doses.
Dosage form	IV for 1, 40 mg/kg and SC for 1, 10, 40 mg/kg
Applications	The Subcutaneous (SC) absorption of rituximab in mice shows at both tested injection sites (back and abdomen), the extent of absorption was inversely related to the dose level, the absorption of rituximab from the abdomen was faster than at the back.

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### References:

[1]: Di Gaetano, N. et al.  
Synergism between fludarabine and rituximab revealed in a follicular lymphoma cell line resistant to the, cytotoxic activity of either drug alone. Br. J. Haematology 114, 800-809 (2001).

[2]: Kagan L, Zhao J, Mager DE . Interspecies pharmacokinetic modeling of subcutaneous absorption of rituximab in mice and rats. Pharm Res 2014; 31: 3265-3273.

### Background

Rituximab is a human/murine, chimeric anti-CD20 monoclonal antibody with established efficacy, and a favorable and well-defined safety profile in patients with various CD20-expressing lymphoid malignancies, including indolent and aggressive forms of B-cell non-Hodgkin lymphoma [1].

Intravenously administered rituximab was granted regulatory approval in 1997 by the US Food and Drug Administration and in 1998 by the European Medicines Agency for use in relapsed/refractory indolent non-Hodgkin lymphomas. Approvals for use in chronic lymphocytic leukemia followed in 2009 and 2010, respectively [1].

Rituximab binds with high affinity and specificity to the CD20 antigen, which is expressed on the vast majority of malignant B cells. The apparent affinity constant of rituximab for human CD20, as determined by Scatchard analysis using a human lymphoblastoid cell line, is approximately 5.2 nmol/L [2]. Rituximab provides significant, clinically meaningful benefits to patients with active rheumatoid arthritis also. In patients with active rheumatoid arthritis despite methotrexate treatment, a single course of two

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infusions of rituximab, alone or in combination with either cyclophosphamide or continued methotrexate, provided significant improvement in disease symptoms at both weeks 24 and 48 [3].

### References:

- [1]. Salles G, Barrett M, Foà R, et al. Rituximab in B-cell hematologic malignancies: a review of 20 years of clinical experience. *Adv Ther.* 2017;34(10):2232-2273.
- [2]. Reff ME, Carner K, Chambers KS, et al. Depletion of B cells in vivo by a chimeric mouse human monoclonal antibody to CD20. *Blood.* 1994;83:435-45.
- [3]. Edwards JC, Szczepanski L, Szechinski J, et al. Efficacy of B-cell-targeted therapy with rituximab in patients with rheumatoid arthritis. *N Engl J Med* 2004;350:2572-2581

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