## Recombinant Human Integrin beta 1 Protein (His Tag)

## Catalog Number: PKSH031971

**Note:** Centrifuge before opening to ensure complete recovery of vial contents.

Description	
Species	Human
Source	HEK293 Cells-derived Human Integrin beta 1 protein Met 1-Asp728, with an C-
	terminal His
Calculated MW	83.3 kDa
Accession	CAA30790.1
Bio-activity	Not validated for activity
Properties	
Purity	> 90 % as determined by reducing SDS-PAGE.
Endotoxin	< 1.0 EU per µg of the protein as determined by the LAL method.
Storage	Generally, lyophilized proteins are stable for up to 12 months when stored at -20 to -80
	°C. Reconstituted protein solution can be stored at 4-8°C for 2-7 days. Aliquots of
	reconstituted samples are stable at $< -20^{\circ}$ C for 3 months.
Shipping	This product is provided as lyophilized powder which is shipped with ice packs.
Formulation	Lyophilized from sterile PBS, pH 7.4.
	Normally 5% - 8% trehalose, mannitol and 0.01% Tween 80 are added as protectants
	before lyophilization.
	Please refer to the specific buffer information in the printed manual.
Reconstitution	Please refer to the printed manual for detailed information.



KDa	М
116	
66.2	-
45.0	-
35.0	- 11
25.0	-
18.4 14.4	=

> 90 % as determined by reducing SDS-PAGE.

Background

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## **Elabscience**®

Granulocyte-macrophage colony-stimulating factor (GM-CSF) is one of an array of cytokines with pivotal roles in embryo implantation and subsequent development. Several cell lineages in the reproductive tract and gestational tissues synthesise GM-CSF under direction by ovarian steroid hormones and signalling agents originating in male seminal fluid and the conceptus. The pre-implantation embryo, invading placental trophoblast cells and the abundant populations of leukocytes controlling maternal immune tolerance are all subject to GM-CSF regulation. GM-CSF stimulates the differentiation of hematopoietic progenitors to monocytes and neutrophils, and reduces the risk for febrile neutropenia in cancer patients. GM-CSF also has been shown to induce the differentiation of myeloid dendritic cells (DCs) that promote the development of T-helper type 1 immune responses in cognate T cells. As a part of the immune/inflammatory cascade, GM-CSF promotes Th1 biased immune response, angiogenesis, allergic inflammation, and the development of autoimmunity, and thus worthy of consideration for therapeutic target. GM-CSF has been utilized in the clinical management of multiple disease processes. Most recently, GM-CSF has been incorporated into the treatment of malignancies as a sole therapy, as well as a vaccine adjuvant. While the benefits of GM-CSF in this arena have been promising, recent reports have suggested the potential for GM-CSF to induce immune suppression and, thus, negatively impact outcomes in the management of cancer patients.