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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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.