Recombinant Human PBEF/NAMPT Protein (His &GST Tag)

Catalog Number: PKSH031981

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

Description	
Species	Human
Source	Baculovirus-Insect Cells-derived Human PBEF/NAMPT protein Met 1-His 491, with
	an N-terminal His & GST
Calculated MW	83.3 kDa
Observed MW	75 kDa
Accession	P43490
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 20mM Tris, 500mM NaCl, pH 8.0, 20% glycerol, 0.3mM
	DTT.
	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.
Data	
	KDa M
	116

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> 90 % as determined by reducing SDS-PAGE.

Background

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Nicotinamide phosphoribosyltransferase (NAMPT); also known as pre-B-cell colony-enhancing factor 1 (PBEF1) or visfatin; is an enzyme belonging to the family of glycosyltransferases; to be specific; the pentosyltransferases. This enzyme participates in nicotinate and nicotinamide metabolism. This enzyme catalyzes the condensation of nicotinamide with 5- phosphoribosyl-1- pyrophosphate to yield nicotinamide mononucleotide; one step in the biosynthesis of nicotinamide adenine dinucleotide. NAMPT is also considered as an essential enzyme mediating granulocyte colony-stimulating factor (G-CSF)-triggered granulopoiesis in healthy individuals and in individuals with severe congenital neutropenia. Intracellular NAMPT and NAD+ amounts in myeloid cells; as well as plasma NAMPT and NAD+ levels; were increased by G-CSF treatment of both healthy volunteers and individuals with congenital neutropenia.