Recombinant Human AGER/RAGE Protein

Catalog Number: PKSH031054

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

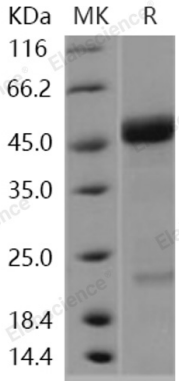
Description

Species	Human
Source	HEK293 Cells-derived Human AGER/RAGE protein Met 1-Ala 344
Calculated MW	35 kDa
Observed MW	46-52 kDa
Accession	NP_001127.1
Bio-activity	1. Measured by its ability to compete with Biotinylated recombinant human AGER for binding to immobilized recombinant human Fc-S100B in a functional ELISA. 2. Measured by its ability to compete with Biotinylated recombinant human AGER for binding to immobilized recombinant mouse S100B-Fc in a functional ELISA. 3. Measured by its ability to compete with Biotinylated recombinant human AGER for binding to immobilized recombinant human S100A1-Fc in a functional ELISA. 4. Measured by its ability to compete with Biotinylated recombinant human AGER for binding to immobilized recombinant human APP-Fc in a functional ELISA.

Properties

Purity	> 95% 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°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.

Data



> 95 % as determined by reducing SDS-PAGE.

Background

Receptor for Advanced Glycosylation End Products (RAGE, or AGER) is a member of the immunoglobulin super-family transmembrane proteins, as a signal transduction receptor which binds advanced glycation endproducts, certain members of the S100/calgranulin family of proteins, high mobility group box 1 (HMGB1), advanced oxidation protein products, and amyloid (beta-sheet fibrils). Initial studies investigating the role of RAGE in renal dysfunction focused on diabetes, neurodegenerative disorders, and inflammatory responses. However, RAGE also has roles in the pathogenesis of renal disorders that are not associated with diabetes, such as obesity-related glomerulopathy, doxorubicin-induced nephropathy, hypertensive nephropathy, lupus nephritis, renal amyloidosis, and ischemic renal injuries. RAGE represents an important factor in innate immunity against pathogens, but it also interacts with endogenous ligands, resulting in chronic inflammation. RAGE signaling has been implicated in multiple human illnesses, including atherosclerosis, arthritis, Alzheimer's disease, atherosclerosis and aging associated diseases.

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