Recombinant Mouse CRP/C-Reactive Protein (His Tag)

Catalog Number: PDMM100036

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

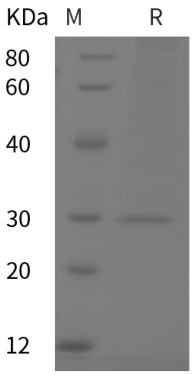
Description

Species	Mouse
Source	Mammalian-derived Mouse CRP;C-Reactive protein Met1-Ser225, with an C-terminal His
Calculated MW	24.6 kDa
Observed MW	30 kDa
Accession	P14847
Bio-activity	Not validated for activity

Properties

Purity	> 95% as determined by reducing SDS-PAGE.
Endotoxin	< 1.0 EU/mg 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 a 0.2 μm filtered solution in PBS with 5% Trehalose and 5% Mannitol.
Reconstitution	It is recommended that sterile water be added to the vial to prepare a stock solution of 0.5 mg/mL. Concentration is measured by UV-Vis.

Data



SDS-PAGE analysis of Mouse CRP/C-Reactive proteins, 2 μg/lane of Recombinant Mouse CRP/C-Reactive proteins was resolved with SDS-PAGE under reducing conditions, showing bands at 30 kDa.

Background

C-reactive protein (CRP) is synthesized by the liver in response to factors released by fat cells. It is a member of the pentraxin family of proteins. The levels of CRP rise in response to inflammation. Human C-reactive protein (CRP) is the classical acute phase reactant, the circulating concentration of which rises rapidly and extensively in a cytokine-mediated response to tissue injury, infection and inflammation. Serum CRP values are routinely measured, empirically, to detect and monitor many human diseases. However, CRP is likely to have important host defence, scavenging and metabolic functions through its capacity for calcium-dependent binding to exogenous and autologous molecules containing phosphocholine (PC) and then activating the classical complement pathway. CRP may also have pathogenic effects and the recent discovery of a prognostic association between increased CRP production and coronary atherothrombotic events is of particular interest.

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