

Recombinant Mouse EPO Protein(His Tag)

Catalog Number: PDMM100250

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

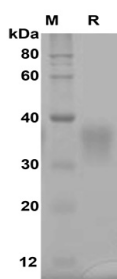
Description

Species	Mouse
Source	Mammalian-derived Mouse EPO protein Ala27-Arg192, with anC-terminal His
Calculated MW	18.15 kDa
Observed MW	32-38 kDa
Accession	P07321
Bio-activity	Not validated for activity

Properties

Purity	> 90% 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 Human EPO proteins, 2 µg/lane of Recombinant Human EPO proteins, was resolved with SDS-PAGE under reducing conditions, showing bands at 32-38 kDa.

Background

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Erythropoietin (EPO) is a glycoprotein hormone that is principally known for its role in erythropoiesis, where it is responsible for stimulating proliferation and differentiation of erythroid progenitor cells. Erythropoietin is a member of the EPO/TPO family. It is a secreted, glycosylated cytokine composed of four alpha helical bundles. The differentiation of CFU-E (Colony Forming Unit-Erythroid) cells into erythrocytes can only be accomplished in the presence of EPO. Physiological levels of EPO in adult mammals are maintained primarily by the kidneys, whereas levels in fetal or neonatal mammals are maintained by the liver. EPO also can exert various non-hematopoietic activities, including vascularization and proliferation of smooth muscle, neural protection during hypoxia, and stimulation of certain B cells. Genetic variation in erythropoietin is associated with susceptibility to microvascular complications of diabetes type 2. These are pathological conditions that develop in numerous tissues and organs as a consequence of diabetes mellitus. They include diabetic retinopathy, diabetic nephropathy leading to end-stage renal disease, and diabetic neuropathy.

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