

GnRH-Receptor / LH-RH Receptor; Clone A9E4 (Concentrate)


Availability/Contents:

<u>Item #</u>	<u>Volume</u>
RA0127-C.5	0.5 ml

Description:


Species:	Mouse
Immunogen:	A synthetic peptide of aa 1-29 (MANSASPEQNHCSAINNSIPLMQGNLPY) from the N-terminus of human GnRH receptor.
Clone:	A9E4
Isotype:	IgG1, kappa
Entrez Gene ID:	2798 (GNRHR) and 3973 (LHCGR) (Human)
Hu Chromosome Loc.:	4q21.2 (GNRHR) & 2p16.3 (LHCGR) (Human)
Synonyms:	GnRH receptor, GnRH-R, GNRHR1, gonadotropin-releasing hormone (type 1) receptor 1, GRHR, HH7, luteinizing-releasing hormone receptor, LHRHR, LRHR, luteinizing hormone releasing hormone receptor, Type I GnRH receptor
Mol. Weight of Antigen:	54-60kDa
Format:	200µg/ml of Ab purified from Bioreactor Concentrate by Protein A/G. Prepared in 10mM PBS with 0.05% BSA & 0.05% azide.
Specificity:	Recognizes an epitope on the extracellular domain of gonadotropin releasing hormone (GnRH) receptor or luteinizing hormone receptor (LHCGR).
Background:	Lutropin (also designated luteinizing hormone) plays a role in spermatogenesis and ovulation by stimulating the testes and ovaries to produce steroids. Gonadotropin (also designated choriogonadotropin) production in the placenta maintains estrogen and progesterone levels during the first trimester of pregnancy. Ovaries and testes abundantly express luteinizing hormone/choriogonadotropin receptor. GnRH receptor contains seven hydrophobic transmembrane domains connected by hydrophilic extracellular and intracellular loops characteristic of G-protein coupled receptors. GnRH stimulates the gonadotrophs of the anterior pituitary to secrete luteinizing hormone (LH) as well as follicle-stimulating hormone (FSH). GnRH influences the protective effect of pregnancy and gonadotropin against breast cancer. The expression of GnRH on breast carcinoma correlates in part to the degree of tumor differentiation. GnRH-positive breast tumors occur more frequently in tumors with greater cell differentiation in premenopausal women. GnRH is present in luteal and granulosa cells as well as in ovarian cell membrane preparations.
Species Reactivity:	Human. Predicted to react with Pig and Rabbit. Others not known.
Positive Control:	T47D cells. Pituitary gland, ovarian or breast cancers.
Cellular Localization:	Cytoplasmic
Titer/ Working Dilution:	Immunohistochemistry (Frozen and Formalin-fixed): 2-4 µg/ml Flow Cytometry: 0.5-1 µg/million cells Immunofluorescence: 1-2 µg/ml
Microbiological State:	This product is not sterile.

Storage: 2° C  8° C



ScyTek Laboratories, Inc.
 205 South 600 West
 Logan, UT 84321
 U.S.A.



 EmergoEurope (31)(0) 70 345-8570
 Molsnstraat 15
 2513 BH Hague, The Netherlands

Uses/Limitations: Not to be taken internally.
For Research Use Only.
This product is intended for qualitative immunohistochemistry with normal and neoplastic formalin-fixed, paraffin-embedded tissue sections, to be viewed by light microscopy.
Do not use if reagent becomes cloudy.
Do not use past expiration date.
Non-Sterile.

Ordering Information and Current Pricing at www.scytek.com

Procedure:

1. **Tissue Section Pretreatment (Required):** Staining of formalin fixed, paraffin embedded tissue sections is significantly enhanced by pretreatment with EDTA Buffer (10X) HIER Solution (pH 8.0) (ScyTek catalog# ETA).
2. **Primary Antibody Incubation Time:** We suggest an incubation period of 30 minutes at room temperature. However, depending upon the fixation conditions and the staining system employed, optimal incubation should be determined by the user.
3. **Visualization:** For maximum staining intensity we recommend the “UltraTek HRP Anti-Polyvalent Lab Pack” (ScyTek catalog# UHP125, see IFU for instructions) combined with the “DAB Chromogen/Substrate Bulk Pack (High Contrast)” (ScyTek catalog# ACV500, see IFU for instructions).


Precautions: Contains Sodium Azide as a preservative (0.09% w/v).
Do not pipette by mouth.
Avoid contact of reagents and specimens with skin and mucous membranes.
Avoid microbial contamination of reagents or increased nonspecific staining may occur.
This product contains no hazardous material at a reportable concentration according to U.S. 29 CFR 1910.1200, OSHA Hazardous Communication Standard and EC Directive 91/155/EC.


References:

1. Karande AA; Rajeshwari K; Schol DJ; Hilgers JH. Establishment of immunological probes to study human gonadotropin-releasing hormone receptors. *Molecular and Cellular Endocrinology*, 1995, 114(1-2):51-6.

Warranty:


No products or “Instructions For Use (IFU)” are to be construed as a recommendation for use in violation of any patents. We make no representations, warranties or assurances as to the accuracy or completeness of information provided on our IFU or website. Our warranty is limited to the actual price paid for the product. ScyTek Laboratories, Inc. is not liable for any property damage, personal injury, time or effort or economic loss caused by our products. Immunohistochemistry is a complex technique involving both histological and immunological detection methods. Tissue processing and handling prior to immunostaining can cause inconsistent results. Variations in fixation and embedding or the inherent nature of the tissue specimen may cause variations in results. Endogenous peroxidase activity or pseudoperoxidase activity in erythrocytes and endogenous biotin may cause non-specific staining depending on detection system used.

Storage: 2° C  8° C



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