

Human ARHI / DIRAS3 Protein (Fc Tag)

Catalog Number: 14239-H04H



Sino Biological Inc.

Biological Solution Specialist

General Information

Gene Name Synonym:

ARHI; DIRAS3; NOEY2; RHOI

Protein Construction:

A DNA sequence encoding the human DIRAS3 (O95661) (Met1-Lys225) was expressed with the Fc region of mouse IgG1 at the N-terminus.

Source: Human

Expression Host: Human Cells

QC Testing

Purity: > 85 % as determined by SDS-PAGE

Endotoxin:

< 1.0 EU per µg of the protein as determined by the LAL method

Stability:

Samples are stable for up to twelve months from date of receipt at -70 °C

Predicted N terminal: Asp

Molecular Mass:

The recombinant human DIRAS3/mFc comprises 461 amino acids and has a predicted molecular mass of 52.1 kDa. The apparent molecular mass of the monomer is approximately 62 kDa in SDS-PAGE under reducing conditions due to glycosylation.

Formulation:

Lyophilized from sterile PBS, pH 7.4.

Normally 5 % - 8 % trehalose, mannitol and 0.01% Tween80 are added as protectants before lyophilization. Specific concentrations are included in the hardcopy of COA. Please contact us for any concerns or special requirements.

Usage Guide

Storage:

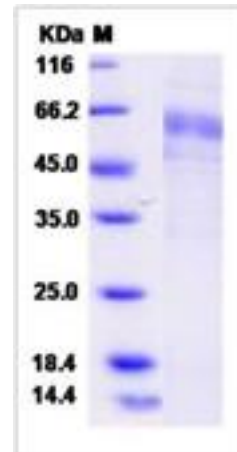
Store it under sterile conditions at -20°C to -80°C upon receiving. Recommend to aliquot the protein into smaller quantities for optimal storage.

Avoid repeated freeze-thaw cycles.

Reconstitution:

Detailed reconstitution instructions are sent along with the products.

SDS-PAGE:



Protein Description

ARHI, also known as DIRAS3, belongs to the small GTPase superfamily, Di-Ras family. ARHI gene is a novel tumor suppressor gene located on chromosome 1p31. Downregulation of ARHI expression has been detected in many types of cancer. ARHI is expressed in normal ovarian and breast epithelial cells but not in ovarian and breast cancers. As a suppressor, ARHI is not only an important factor in the pathogenesis of gastric cancer, but also a potential factor for tumor aggravation. ARHI expression in gastric cancer can be employed to indicate favorable prognosis for the disease.

References

1. Pei XH. et al., 2011, Cell Biol Int. 35 (10): 1019-24.
2. Lin D. et al., 2011, J Int Med Res. 39 (5): 1870-5.
3. Wang W. et al., 2012, Oncol Rep. 27 (6): 1953-9.

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Fax :+86-10-51029969 • Tel:+86-400-890-9989 • <http://www.sinobiological.com>