

Product datasheet

Human Aromatase peptide ab35661

Overview

Product name Human Aromatase peptide

Description

Nature Synthetic

Specifications

Our [Abpromise guarantee](#) covers the use of **ab35661** in the following tested applications.

The application notes include recommended starting dilutions; optimal dilutions/concentrations should be determined by the end user.

Purity 70 - 90% by HPLC.

Form Liquid

Additional notes

- First try to dissolve a small amount of peptide in either water or buffer. The more charged residues on a peptide, the more soluble it is in aqueous solutions.
- If the peptide doesn't dissolve try an organic solvent e.g. DMSO, then dilute using water or buffer.
- Consider that any solvent used must be compatible with your assay. If a peptide does not dissolve and you need to recover it, lyophilise to remove the solvent.
- Gentle warming and sonication can effectively aid peptide solubilisation. If the solution is cloudy or has gelled the peptide may be in suspension rather than solubilised.
- Peptides containing cysteine are easily oxidised, so should be prepared in solution just prior to use.

Preparation and Storage

Stability and Storage Shipped at 4°C. Upon delivery aliquot and store at -20°C or -80°C. Avoid repeated freeze / thaw cycles.

Information available upon request.

General Info

Function Catalyzes the formation of aromatic C18 estrogens from C19 androgens.

Tissue specificity Brain, placenta and gonads.

Involvement in disease Defects in CYP19A1 are a cause of aromatase excess syndrome (AEXS) [MIM:139300]; also

known as familial gynecomastia. AEXS is characterized by an estrogen excess due to an increased aromatase activity.

Defects in CYP19A1 are the cause of aromatase deficiency (AROD) [MIM:107910]. AROD is a rare disease in which fetal androgens are not converted into estrogens due to placental aromatase deficiency. Thus, pregnant women exhibit a hirsutism, which spontaneously resolves after post-partum. At birth, female babies present with pseudohermaphroditism due to virilization of external genital organs. In adult females, manifestations include delay of puberty, breast hypoplasia and primary amenorrhoea with multicystic ovaries.

Sequence similarities

Belongs to the cytochrome P450 family.

Cellular localization

Membrane.

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