abcam

Product datasheet

Anti-Growth Hormone antibody [GH-2] ab9822

3 References 1 Image

Overview

Product name	Anti-Growth Hormone antibody [GH-2]
Description	Mouse monoclonal [GH-2] to Growth Hormone
Host species	Mouse
Tested applications	**Suitable for:** WB
Species reactivity	**Reacts with:** Human
Immunogen	Recombinant full length protein corresponding to Human Growth Hormone. Database link: **P01241**
General notes	This product was changed from ascites to tissue culture supernatant on 28/11/2017. Lot numbers higher than GR172544-1 and GR172544-3 will be from tissue culture supernatant. Please note that the dilutions may need to be adjusted accordingly. The Life Science industry has been in the grips of a reproducibility crisis for a number of years. Abcam is leading the way in addressing this with our range of recombinant monoclonal antibodies and knockout edited cell lines for gold-standard validation. Please check that this product meets your needs before purchasing. If you have any questions, special requirements or concerns, please send us an inquiry and/or contact our Support team ahead of purchase. Recommended alternatives for this product can be found below, along with publications, customer reviews and Q&As

Properties

Form	Liquid
Storage instructions	Shipped at 4°C. Store at +4°C short term (1-2 weeks). Upon delivery aliquot. Store at -20°C or -80°C. Avoid freeze / thaw cycle.
Storage buffer	pH: 7.2 Preservative: 0.1% Sodium azide Constituent: PBS
Purity	IgG fraction
Clonality	Monoclonal
Clone number	GH-2
Myeloma	unknown

Isotype	IgG1
Light chain type	unknown

Applications

The Abpromise guarantee Our **Abpromise guarantee** covers the use of ab9822 in the following tested applications.

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

Application	Abreviews	Notes
WB		1/1000 - 1/5000.

Target

Function	Plays an important role in growth control. Its major role in stimulating body growth is to stimulate the liver and other tissues to secrete IGF-1. It stimulates both the differentiation and proliferation of myoblasts. It also stimulates amino acid uptake and protein synthesis in muscle and other tissues.
Involvement in disease	Defects in GH1 are a cause of growth hormone deficiency isolated type 1A (IGHD1A) [MIM:262400]; also known as pituitary dwarfism I. IGHD1A is an autosomal recessive deficiency of GH which causes short stature. IGHD1A patients have an absence of GH with severe dwarfism and often develop anti-GH antibodies when given exogenous GH. Defects in GH1 are a cause of growth hormone deficiency isolated type 1B (IGHD1B) [MIM:612781]; also known as dwarfism of Sindh. IGHD1B is an autosomal recessive deficiency of GH which causes short stature. IGHD1B patients have low but detectable levels of GH. Dwarfism is less severe than in IGHD1A and patients usually respond well to exogenous GH. Defects in GH1 are the cause of Kowarski syndrome (KWKS) [MIM:262650]; also known as pituitary dwarfism VI. Defects in GH1 are a cause of growth hormone deficiency isolated type 2 (IGHD2) [MIM:173100]. IGHD2 is an autosomal dominant deficiency of GH which causes short stature. Clinical severity is variable. Patients have a positive response and immunologic tolerance to growth hormone therapy.
Sequence similarities	Belongs to the somatotropin/prolactin family.
Cellular localization	Secreted.

Images

Western blot - Anti-Growth Hormone antibody [GH-2] (ab9822)

Western blot of human growth hormone using ab9822 at a concentration of 1 µg/ml.

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