abcam

Product datasheet

Anti-FSH-R antibody ab113421

★★★★★ 3 Abreviews 10 References 2 Images

Overview

Product name Anti-FSH-R antibody

Description Rabbit polyclonal to FSH-R

Host species Rabbit

Tested applications Suitable for: IHC-P, ICC/IF

Species reactivity Reacts with: Human

Immunogen Synthetic peptide corresponding to Human FSH-R aa 278-327 (internal sequence).

Database link: P23945

Positive control Human Ovary tissue; MCF7 cells.

General notes

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 -20°C. Stable for 12 months at -20°C.

Storage buffer pH: 7.40

Preservative: 0.02% Sodium azide

Constituents: 49% PBS, 0.88% Sodium chloride

PBS (without Mg2+, Ca2+)

Purity Protein A purified

Clonality Polyclonal

Isotype IgG

Applications

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The Abpromise guarantee

Our Abpromise guarantee covers the use of ab113421 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	
IHC-P		Use a concentration of 10 µg/ml.	
ICC/IF	★★★★★ (1)	1/100 - 1/500.	

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Function

Receptor for follicle-stimulating hormone. The activity of this receptor is mediated by G proteins

which activate adenylate cyclase.

Tissue specificity

Sertoli cells and ovarian granulosa cells.

Involvement in disease

Defects in FSHR are a cause of ovarian dysgenesis type 1 (ODG1) [MIM:233300]; also known as premature ovarian failure or gonadal dysgenesis XX type or XX gonadal dysgenesis (XXGD) or hereditary hypergonadotropic ovarian failure or hypergonadotropic ovarian dysgenesis with normal karyotype. ODG1 is an autosomal recessive disease characterized by primary amenorrhea, variable development of secondary sex characteristics, and high serum levels of follicle-stimulating hormone (FSH) and luteinizing hormone (LH).

Defects in FSHR are a cause of ovarian hyperstimulation syndrome (OHSS) [MIM:608115]. OHSS is a disorder which occurs either spontaneously or most often as an iatrogenic complication of ovarian stimulation treatments for in vitro fertilization. The clinical manifestations vary from abdominal distention and discomfort to potentially life-threatening, massive ovarian enlargement and capillary leak with fluid sequestration. Pathologic features of this syndrome include the presence of multiple serous and hemorrhagic follicular cysts lined by luteinized cells, a condition called hyperreactio luteinalis.

Sequence similarities

Belongs to the G-protein coupled receptor 1 family. FSH/LSH/TSH subfamily.

Contains 9 LRR (leucine-rich) repeats.

Contains 1 LRRNT domain.

Post-translational modifications

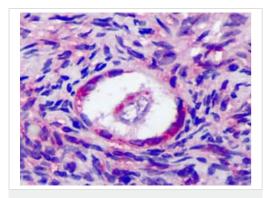
N-glycosylated; indirectly required for FSH-binding, possibly via a conformational change that

allows high affinity binding of hormone.

Cellular localization

Cell membrane.

Images



Immunohistochemistry (Formalin/PFA-fixed paraffinembedded sections) - Anti-FSH-R antibody (ab113421)

ab113421 at 10 µg/ml staining FSH-R in Human ovary by Immunohistochemistry Formalin-fixed, Paraffin-embedded tissue.



Immunocytochemistry/ Immunofluorescence - Anti-FSH-R antibody (ab113421) Immunofluorescence analysis of MCF7 cells, using ab113421 at 1/100 dilution. The image on the right is treated with the synthesized peptide.

Please note: All products are "FOR RESEARCH USE ONLY. NOT FOR USE IN DIAGNOSTIC PROCEDURES"

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