abcam

Product datasheet

Anti-Growth Hormone antibody ab64499

Overview

Product name Anti-Growth Hormone antibody

Description Sheep polyclonal to Growth Hormone

Host species Sheep

Tested applications Suitable for: IRMA, ELISA, IHC-P, RIA

Species reactivity Reacts with: Human

Immunogen Full length native purified Human Growth Hormone

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. Upon delivery aliquot and store at -20°C or -80°C. Avoid repeated freeze / thaw

cycles.

Storage buffer Preservative: 0.09% Sodium azide

Constituent: Whole serum

Purity Whole antiserum

Clonality Polyclonal

Isotype IgG

Applications

The Abpromise guarantee Our Abpromise guarantee covers the use of ab64499 in the following tested applications.

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

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Application	Abreviews	Notes
IRMA		Use at an assay dependent concentration.
ELISA		Use at an assay dependent concentration.
IHC-P		Use at an assay dependent concentration.
RIA		Use at an assay dependent concentration.

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 similaritiesBelongs to the somatotropin/prolactin family.

Cellular localization Secreted.

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

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