

## Product datasheet

# Recombinant Human RANK protein ab109148

### Description

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<b>Product name</b>	Recombinant Human RANK protein
<b>Biological activity</b>	Inhibits Human rhsRANKL biological functions. Binds to Human and Mouse RANKL.
<b>Purity</b>	> 95 % SDS-PAGE.
<b>Endotoxin level</b>	< 0.100 Eu/μg
<b>Expression system</b>	HEK 293 cells
<b>Accession</b>	<a href="#">Q9Y6Q6</a>
<b>Protein length</b>	Protein fragment
<b>Animal free</b>	No
<b>Nature</b>	Recombinant
<b>Species</b>	Human
<b>Predicted molecular weight</b>	55 kDa including tags
<b>Amino acids</b>	29 to 313
<b>Additional sequence information</b>	Human RANK (aa 29-213) is fused at the C-terminus to the Fc portion of human IgG1.

### Specifications

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Our [Abpromise guarantee](#) covers the use of **ab109148** in the following tested applications.

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

<b>Applications</b>	Functional Studies SDS-PAGE
<b>Form</b>	Lyophilized
<b>Additional notes</b>	After reconstitution, prepare aliquots and store at -20°C. Avoid freeze/thaw cycles. PBS containing at least 0.1% BSA should be used for further dilutions. Inhibits Human rhsRANKL biological functions. Binds to Human and Mouse RANKL.

### Preparation and Storage

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<b>Stability and Storage</b>	Shipped at 4°C. Store at 4°C (up to 6 months). Store at -20°C. Constituent: PBS
<b>Reconstitution</b>	Reconstitute with 50μl sterile water to give a final concentration of 1mg/ml.

## General Info

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<b>Function</b>	Receptor for TNFSF11/RANKL/TRANCE/OPGL; essential for RANKL-mediated osteoclastogenesis. Involved in the regulation of interactions between T-cells and dendritic cells.
<b>Tissue specificity</b>	Ubiquitous expression with high levels in skeletal muscle, thymus, liver, colon, small intestine and adrenal gland.
<b>Involvement in disease</b>	<p>Defects in TNFRSF11A are the cause of familial expansile osteolysis (FEO) [MIM:174810]. FEO is a rare autosomal dominant bone disorder characterized by focal areas of increased bone remodeling. The osteolytic lesions develop usually in the long bones during early adulthood. FEO is often associated with early onset deafness and loss of dentition.</p> <p>Defects in TNFRSF11A are a cause of Paget disease of bone type 2 (PDB2) [MIM:602080]; also known as familial Paget disease of bone. PDB2 is a bone-remodeling disorder with clinical similarities to FEO. Unlike FEO, however, affected individuals have involvement of the axial skeleton with lesions in the spine, pelvis and skull.</p> <p>Defects in TNFRSF11A are the cause of osteopetrosis autosomal recessive type 7 (OPTB7) [MIM:612301]; also called osteoclast-poor osteopetrosis with hypogammaglobulinemia. Osteopetrosis is a rare genetic disease characterized by abnormally dense bone, due to defective resorption of immature bone. The disorder occurs in two forms: a severe autosomal recessive form occurring in utero, infancy, or childhood, and a benign autosomal dominant form occurring in adolescence or adulthood. OPTB7 is characterized by paucity of osteoclasts, suggesting a molecular defect in osteoclast development. OPTB7 is associated with hypogammaglobulinemia.</p>
<b>Sequence similarities</b>	Contains 4 TNFR-Cys repeats.
<b>Cellular localization</b>	Membrane.

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

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