



[Go to Product page](#)

Datasheet for ABIN3026049
anti-GNRHR antibody (AA 1-29)

1 Image

Overview

Quantity:	100 µg
Target:	GNRHR
Binding Specificity:	AA 1-29
Reactivity:	Human, Rat, Rabbit
Host:	Mouse
Clonality:	Monoclonal
Conjugate:	This GNRHR antibody is un-conjugated
Application:	Immunofluorescence (IF), Flow Cytometry (FACS), Immunohistochemistry (Paraffin-embedded Sections) (IHC (p))

Product Details

Immunogen:	A synthetic peptide aa 1-29 (MANSASPEQNQHCSAINNSIPLMQGNLPY) from the N-terminal of human GnRHR was used as the immunogen for the GnRH Receptor antibody.
Clone:	F1G4 or GNRH03
Isotype:	IgG1 kappa
Purification:	Protein G affinity chromatography

Target Details

Target:	GNRHR
Alternative Name:	GnRH Receptor (GNRHR Products)

Target Details

Background: Recognizes an epitope on the extracellular domain of gonadotropin releasing hormone (GnRH) receptor or luteinizing hormone receptor (LHCGR). Lutropin (also designated luteinizing hormone) plays a role in spermatogenesis and ovulation by stimulating the testes and ovaries to produce steroids. Gonadotropin (also designated choriogonadotropin) production in the placenta maintains estrogen and progesterone levels during the first trimester of pregnancy. Ovaries and testes abundantly express luteinizing hormone/choriogonadotropin receptor. GnRH receptor contains seven hydrophobic transmembrane domains connected by hydrophilic extracellular and intracellular loops characteristic of G-protein coupled receptors. GnRH stimulates the gonadotrophs of the anterior pituitary to secrete luteinizing hormone (LH) as well as follicle-stimulating hormone (FSH). GnRH influences the protective effect of pregnancy and Gonadotropin against breast cancer. The expression of GnRH on breast carcinoma correlates in part to the degree of tumor differentiation. GnRH-positive breast tumors occur more frequently in tumors with greater cell differentiation in premenopausal women. GnRH is present in luteal and granulosa cells as well as in ovarian cell membrane preparations.

Application Details

Application Notes: Optimal dilution of the GnRH Receptor antibody should be determined by the researcher.

1. Staining of formalin-fixed tissues requires boiling tissue sections in 10 mM Tris with 1 mM EDTA, pH 9.0, for 10-20 min followed by cooling at RT for 20 min
2. The prediluted format is supplied in a dropper bottle and is optimized for use in IHC. After epitope retrieval step (if required), drip mAb solution onto the tissue section and incubate at RT for 30 min.\. Flow Cytometry: 0.5-1 µg/million cells in 0.1ml,Immunofluorescence: 1-2 µg/mL,Immunohistochemistry (FFPE): 1-2 µg/mL for 30 min at RT (1),Prediluted format : incubate for 30 min at RT (2)

Restrictions: For Research Use only

Handling

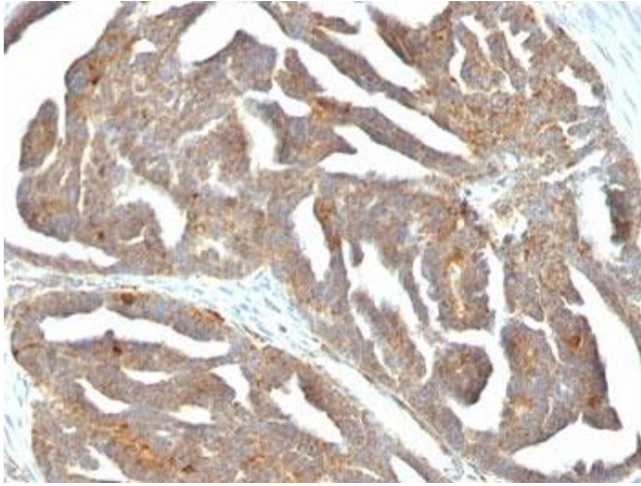
Concentration: 1 mg/mL

Buffer: 1 mg/mL in 1X PBS, BSA free, sodium azide free

Preservative: Azide free

Storage: 4 °C,-20 °C

Storage Comment: Store the GnRH Receptor antibody at 2-8°C (with azide) or aliquot and store at -20°C or colder (without azide).



Immunohistochemistry (Formalin-fixed Paraffin-embedded Sections)

Image 1. Formalin-fixed, paraffin-embedded human ovarian carcinoma stained with GnRH Receptor antibody (F1G4)