

## IL-18BP Protein, Human, Recombinant (hFc)

### General Information

Synonyms:	Interleukin-18-binding protein;Tadakinig-alfa and IL18BP
Protein Construction:	Thr31-Gly194
Species:	Human
Expression Host:	HEK293 Cells
Accession:	O95998
Molecular Weight:	60-75 KDa (reducing condition)
AA Sequence:	Thr31-Gly194

### QC Testing

Biological Activity:	Activity has not been tested. It is theoretically active, but we cannot guarantee it. If you require protein activity, we recommend choosing the eukaryotic expression version first.
Purity:	Greater than 95% as determined by reducing SDS-PAGE. (QC verified)
Endotoxin:	< 0.1 ng/μg (1 EU/μg) as determined by LAL test.
Formulation:	Lyophilized from a solution filtered through a 0.22 μm filter, containing PBS, pH 7.4.

### Preparation and Storage

#### Reconstitution:

Reconstitute the lyophilized protein in distilled water. The product concentration should not be less than 100 μg/ml. Before opening, centrifuge the tube to collect powder at the bottom. After adding the reconstitution buffer, avoid vortexing or pipetting for mixing.

#### Stability & Storage:

Lyophilized powders can be stably stored for over 12 months, while liquid products can be stored for 6-12 months at -80°C. For reconstituted protein solutions, the solution can be stored at -20°C to -80°C for at least 3 months. Please avoid multiple freeze-thaw cycles and store products in aliquots.

Actual storage temperature shall be subject to the COA.

#### Shipping:

In general, lyophilized powders are shipped with blue ice, while solutions are shipped with dry ice.

### Protein Background

Interleukin-18-binding protein, also known as Tadakinig-alfa and IL18BP, contains 1 Ig-like C2-type domain. IL18BP is constitutively expressed and secreted in mononuclear cells. IL18BP functions as an IL18 inhibitor. IL18BP binds to IL18, prevents the binding of IL18 to its receptor, and thus inhibits IL18-induced IFN-gamma production. It has been shown that IL18BP may be a promising molecular approach to inhibit neointimal hyperplasia and arteriosclerosis progression following coronary and peripheral angioplasty.

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Tel:781-999-4286 E\_mail:info@targetmol.com Address:34 Washington Street,Wellesley Hills,MA 02481