

CD164 Protein, Human, Recombinant (hFc)

General Information

Synonyms:	MGC-24v;MUC-24;sialomucin;Cd164;Endolyn;MGC-24
Protein Construction:	Asp24-Asp162
Species:	Human
Expression Host:	HEK293 Cells
Accession:	Q04900-1
Molecular Weight:	41.2 kDa (predicted). Due to glycosylation, the protein migrates to 110-115 kDa based on Tris-Bis PAGE result.

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:	> 95% as determined by Tris-Bis PAGE; > 95% as determined by HPLC
Endotoxin:	< 1.0 EU/ μ g of the protein as determined by the LAL method.
Formulation:	Lyophilized from a solution filtered through a 0.22 μ m filter, containing PBS (pH 7.4). Typically, 8% trehalose is incorporated as a protective agent before lyophilization.

Preparation and Storage

Reconstitution:

Reconstitute the lyophilized protein in distilled water. The product concentration should not be less than 100 μ g/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:

It is recommended to store recombinant proteins at -20°C to -80°C for future use. 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

CD164 was found to play a role in many malignant diseases. CD164 was associated with clinical and pathological features of patients. High level of CD164 was related to the distant metastasis and vascular invasion of bladder cancer patients. CD164 was associated with the poor clinical outcomes of BC patients. Silencing of CD164 could inhibit the progression of tumors in vivo and in vitro, which may become an effective target in the treatment of bladder cancer.

Reference

Zhang XG, et al. CD164 promotes tumor progression and predicts the poor prognosis of bladder cancer. Cancer Med. 2018 Aug;7(8):3763-3772. doi: 10.1002/cam4.1607. Epub 2018 Jul 18. PMID: 30022623; PMCID: PMC6089154.

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