

FGF-16 Protein, Human/Cynomolgus, Recombinant

General Information

Synonyms:	fibroblast growth factor 16
Protein Construction:	A DNA sequence encoding the human / cynomolgus FGF16 [(Identical to the human FGF16 (NP_003859.1)) (Met1-Arg207)] was expressed. Human and Cynomolgus FGF16 sequences are identical. Predicted N terminal: Met
Species:	Human,Cynomolgus
Expression Host:	Baculovirus Insect Cells
Accession:	O43320
Molecular Weight:	23.8 kDa (predicted)

QC Testing

Biological Activity:	Measured in a cell proliferation assay using Balb/c 3T3 mouse embryonic fibroblasts. The ED50 for this effect is typically 10-50 ng/ml.
Purity:	> 95 % as determined by SDS-PAGE
Endotoxin:	< 1.0 EU/µg of the protein as determined by the LAL method.
Formulation:	Lyophilized from a solution filtered through a 0.22 µm filter, containing 50 mM Tris, 1 M NaCl, pH 8.0. Typically, a mixture containing 5% to 8% trehalose, mannitol, and 0.01% Tween 80 is incorporated as a protective agent before lyophilization.

Preparation and Storage

Reconstitution:
Reconstituted with sterile deionized water to 0.15 mg/mL. Reconstitution conditions may vary depending on the lot.

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

Fibroblast growth factor 16 (FGF16) is preferentially expressed in the heart after birth, suggesting its regulation is associated with tissue-specific chromatin remodeling and DNA-protein interactions. Mutation of the MEF2 site resulted in a blunting of FGF16 promoter activity in transfected neonatal rat cardiac myocytes, that chromatin remodeling and MEF2 binding in the FGF16 promoter contribute to expression in the postnatal heart. FGF16

involvement in the fine tuning of the human skeleton of the hand. Impaired FGF16 function may also be responsible for connective tissue symptoms in MF4 patients. FGF16 expression is markedly increased in ovarian tumors, and FGF16 in conjunction with Wnt pathway contributes to the cancer phenotype of ovarian cells and suggests that modulation of its expression in ovarian cells might be a promising therapeutic strategy for the treatment of invasive ovarian cancers.

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