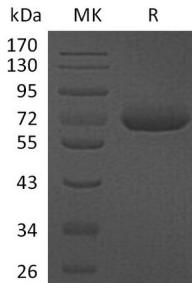
Product Name: Recombinant Human CFHR5 (C-6His)
Catalog #: PHH0441

Summary

Name	Complement Factor H-related 5/CFHR5
Purity	Greater than 95% as determined by reducing SDS-PAGE
Endotoxin level	<1 EU/μg as determined by LAL test.
Construction	Recombinant Human Complement Factor H-Related 5 is produced by our Mammalian expression system and the target gene encoding Glu19-Glu569 is expressed with a 6His tag at the C-terminus.
Accession #	Q9BXR6
Host	Human Cells
Species	Human
Predicted Molecular Mass	63.5 KDa
Formulation	Lyophilized from a 0.2 μm filtered solution of 20mM PB, 150mM NaCl, pH 7.4.
Shipping	The product is shipped at ambient temperature. Upon receipt, store it immediately at the temperature listed below.
Stability&Storage	Store at ≤-70°C, stable for 6 months after receipt. Store at ≤-70°C, stable for 3 months under sterile conditions after opening. Please minimize freeze-thaw cycles.
Reconstitution	Always centrifuge tubes before opening. Do not mix by vortex or pipetting. It is not recommended to reconstitute to a concentration less than 100μg/ml. Dissolve the lyophilized protein in distilled water. Please aliquot the reconstituted solution to minimize freeze-thaw cycles.Always centrifuge tubes before opening. Do not mix by vortex or pipetting. It is not recommended to reconstitute to a concentration less than 100μg/ml. Dissolve the lyophilized protein in distilled water. Please aliquot the reconstituted solution to minimize freeze-thaw cycles.

SDS-PAGE image



Background

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Alternative Names	Complement factor H-related protein 5; CFHR5; CFHL5; FHR5
Background	Complement factor H-related protein 5(FHR-5 for short), is a secreted protein which contains 9 Sushi (CCP/SCR) domains. It is expressed by the liver and secreted in plasma. The pattern of the deposits is similar to other complement components, suggesting that FHR-5 may play a role in complement activation and regulation. Defects in CFHR5 have been found in patients with atypical hemolytic uremic syndrome and may contribute to the disease. In contrast to typical hemolytic uremic syndrome, atypical forms have a poorer prognosis, with higher death rates and frequent progression to end-stage renal disease.

Note

For Research Use Only , Not for Diagnostic Use.