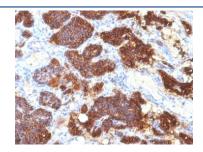


# PTH Antibody / C-Terminal [clone PTH/1175] (V2811)

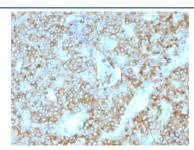
Catalog No.	Formulation	Size
V2811-100UG	0.2 mg/ml in 1X PBS with 0.1 mg/ml BSA (US sourced) and 0.05% sodium azide	100 ug
V2811-20UG	0.2 mg/ml in 1X PBS with 0.1 mg/ml BSA (US sourced) and 0.05% sodium azide	20 ug
V2811SAF-100UG	1 mg/ml in 1X PBS; BSA free, sodium azide free	100 ug
V2811IHC-7ML	Prediluted in 1X PBS with 0.1 mg/ml BSA (US sourced) and 0.05% sodium azide; *For IHC use only*	7 ml

# **Bulk quote request**

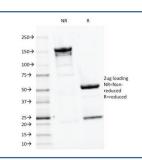
Availability	1-3 business days
Species Reactivity	Human
Format	Purified
Clonality	Monoclonal (mouse origin)
Isotype	Mouse IgG2b, kappa
Clone Name	PTH/1175
Purity	Protein G affinity chromatography
UniProt	P01270
Localization	Cytoplasmic and secreted
Applications	Immunohistochemistry (FFPE): 0.5-1ug/ml for 30 min at RT
Limitations	This PTH antibody is available for research use only.



IHC: Formalin-fixed, paraffin-embedded human parathyroid stained with PTH antibody (PTH/1175).



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SDS-PAGE Analysis of Purified, BSA-Free PTH Antibody (clone PTH/1175). Confirmation of Integrity and Purity of the Antibody.

## **Description**

Epitope of this mAb maps in the C-terminus of PTH, a hormone produced by the parathyroid gland that regulates the concentration of calcium and phosphorus in extracellular fluid. This hormone elevates blood Ca2+ levels by dissolving the salts in bone and preventing their renal excretion. It is produced in the parathyroid gland as an 84 amino acid single chain polypeptide. It can also be secreted as N-terminal truncated fragments or C-terminal fragments after intracellular degradation, as in case of hypercalcemia. Defects in this gene are a cause of familial isolated hypoparathyroidism (FIH); also called autosomal dominant hypoparathyroidism or autosomal dominant hypocalcemia. FIH is characterized by hypocalcemia and hyperphosphatemia due to inadequate secretion of parathyroid hormone. Symptoms are seizures, tetany and cramps. FIH exist both as autosomal dominant and recessive forms of hypoparathyroidism.

### **Application Notes**

Optimal dilution of the PTH antibody should be determined by the researcher.

- 1. Staining of formalin-fixed tissues requires boiling tissue sections in 10mM Citrate buffer, pH 6.0, 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.

### **Immunogen**

Amino acids 32-115 of human PTH was used as the immunogen for the Parathyroid Hormone antibody.

### **Storage**

Store the PTH antibody at 2-8oC (with azide) or aliquot and store at -20oC or colder (without azide).