

Antigen Affinity-purified Polyclonal Goat IgG Catalog Number: AF682

DESCRIPTION	
Species Reactivity	Human
Specificity	Detects human Prolactin in ELISAs and Western blots. In sandwich ELISAs, less than 0.05% cross-reactivity with recombinant mouse Prolactin and recombinant human Prolactin R.
Source	Polyclonal Goat IgG
Purification	Antigen Affinity-purified
Immunogen	<i>E. coli-</i> derived recombinant human Prolactin Leu29-Cys227 Accession # Q5THQ0
Endotoxin Level	<0.10 EU per 1 µg of the antibody by the LAL method.
Formulation	Lyophilized from a 0.2 μm filtered solution in PBS with Trehalose. See Certificate of Analysis for details. *Small pack size (-SP) is supplied either lyophilized or as a 0.2 μm filtered solution in PBS.

APPLICATIONS

	Recommended Concentration	Sample
Western Blot	0.25 µg/mL	See Below
Immunohistochemistry	1-15 µg/mL	See Below
Simple Western	2.5 µg/mL	Human pituitary tissue
Human Prolactin Sandwich Immunoassay		Reagent
ELISA Capture	0.2-0.8 µg/mL	Human Prolactin Antibody (Catalog # AF682)
ELISA Detection	0.1-0.4 µg/mL	Human Prolactin Biotinylated Antibody (Catalog # BAF682)
Standard		Recombinant Human Prolactin (Catalog # 682-PL)
Neutralization		tibody (Catalog # AF682) neutralizes Recombinant Human Prolactin (Catalog # 682-PL) induced b2-11 rat lymphoma cell line. The Neutralization Dose (ND ₅₀) for this effect is typically 0.0200-

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Human Prolactin Antibody

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/ & Storage	Use a manual defrost freezer and avoid repeated freeze-thaw cycles.

- 12 months from date of receipt, -20 to -70 °C as supplied.
- 1 month, 2 to 8 °C under sterile conditions after reconstitution.
- 6 months, -20 to -70 °C under sterile conditions after reconstitution.

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Stability

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BACKGROUND

Prolactin (PRL) is a neuroendocrine pituitary hormone. Prolactin is synthesized by the anterior pituitary, placenta, brain, uterus, dermal fibroblasts, decidua, B cell, T cells, NK cells, and breast cancer cells. Originally characterized as a lactogenic hormone, studies have demonstrated broader roles in breast cancer development, regulation of reproductive function, and immunoregulation. In the immune system, prolactin has been shown to be secreted by human PBMC and to act as a proliferative growth factor. Additionally, prolactin treatment of human PBMC has been shown to enhance IFN-γ production. Prolactin has several molecular forms. The predominant form is a monomer, the non-glycosylated form is 23 kDa and the glycosylated form is 25 kDa. Glycosylated prolactin is removed from the circulation faster and has been reported to have lower biological potency. Prolactin cDNA encodes a 227 amino acid residue protein with a putative 28 aa residue signal peptide. The prolactin receptor is a transmembrane type I glycoprotein that belongs to the cytokine hematopoietic receptor family. B cells, T cells, macrophages, NK cells, magnety cland liver kidney, adrenals, ovaries, testis, prostrate, seminal vesicles, and byoothalamus have all

monocytes, CD34⁺ progenitor cells, neutrophils, mammary gland, liver, kidney, adrenals, ovaries, testis, prostrate, seminal vesicles, and hypothalamus have all been shown to express the prolactin receptor. Three forms of the receptor, generated by differential splicing, have been identified. These isoforms differ in the length of their cytoplasmic domains. It is believed that the short cytoplasmic form is non-functional. Prolactin signal transduction involves the JAK/STAT families and Src kinase family.

References:

- 1. Cooke, N.E. et al. (1981) J. Biol. Chem. 256:4007.
- 2. Ben-Johnson, N. et al. (1996) Endoc. Rev. 17:639.
- 3. Cesario, T. et al. (1994) Proc. Soc. Exp. Biol. Med. 205:89.
- 4. Price, A.E. et al. (1995) Endoc. 136:4827.
- 5. Hoffmann, T. et al. (1993) J. Endoc. Invest. 16:807.
- 6. Bellone, G. et al. (1995) J. Cell Physiol. 163:221.
- 7. Cole, E. et al. (1991) Endoc. 129:2639.
- 8. Lewis, U. et al. (1985) Endoc. 116:359.