



Recombinant Protein Technical Manual

Recombinant Human SPINK4 Protein (His Tag)

RPES2631

Product Data:

Product SKU: RPES2631

Size: 10µg

Species: Human

Expression host: Human Cells

Uniprot: NP_055286.1

Protein Information:

Molecular Mass: 7.7 kDa

AP Molecular Mass: 12 kDa

Tag: C-6His

Bio-activity:

Purity: > 95 % as determined by reducing SDS-PAGE.

Endotoxin: < 1.0 EU per µg as determined by the LAL method.

Storage: Lyophilized proteins are stable for up to 12 months when stored at -20 to -80°C. Reconstituted protein solution can be stored at 4-8°C for 2-7 days. Aliquots of reconstituted samples are stable at < -20°C for 3 months.

Shipping: This product is provided as lyophilized powder which is shipped with ice packs.

Formulation: Lyophilized from a 0.2 µm filtered solution of PBS, 1mM EDTA, 5% Mannitol, 7.4.

Reconstitution: Please refer to the printed manual for detailed information.

Application:

Synonyms: Serine Protease Inhibitor Kazal-Type 4; Peptide PEC-60 Homolog; SPINK4; HEL136; MGC133107; PEC-60; PEC60

Immunogen Information:

Sequence: Gly27-Cys86

Background:

Serine Protease Inhibitor Kazal-Type 4 (SPINK4) is a secreted protein containing one Kazal-like domain. SPINK4 is a member of the SPINK protein family. The gene family of serine protease inhibitors of the Kazal type (SPINK) are functional and positional candidate genes for celiac disease (CD). SPINK1 plays an important role in protecting the pancreas against excessive trypsinogen activation. It is a potent natural inhibitor of pancreatic trypsin activity. SPINK1 mutations are associated with the development of acute and chronic pancreatitis and have been detected in all forms of chronic pancreatitis. SPINK2 functions as a trypsin/acrosin inhibitor and is synthesized mainly in the testis and seminal vesicle where its activity is engaged in fertility. The SPINK2 protein contains a typical Kazal domain composed by six cysteine residues forming three disulfide bridges. SPINK9 was identified in human skin. Its expression was strong in palmar epidermis, but not detectable or very low in non palmoplantar skin.