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Store at -20C  
#9819

## Arginase-1 Antibody

For Research Use Only. Not for Use in Diagnostic Procedures.

<b>Applications:</b> W	<b>Reactivity:</b> H M R	<b>Sensitivity:</b> Endogenous	<b>MW (kDa):</b> 40	<b>Source/Isotype:</b> Rabbit	<b>UniProt ID:</b> #P05089	<b>Entrez-Gene Id:</b> 383
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### Product Usage Information

#### Application

Western Blotting

#### Dilution

1:1000

### Storage

Supplied in 10 mM sodium HEPES (pH 7.5), 150 mM NaCl, 100 µg/ml BSA and 50% glycerol. Store at -20°C. Do not aliquot the antibody.

### Specificity/Sensitivity

Arginase-1 Antibody recognizes endogenous levels of total arginase-1 protein.

### Source / Purification

Polyclonal antibodies are produced by immunizing animals with a synthetic peptide corresponding to residues surrounding Val47 of human arginase-1 protein. Antibodies are purified by protein A and peptide affinity chromatography.

### Background

L-arginine plays a critical role in regulating the immune system (1-3). In inflammation, cancer, and certain other pathological conditions, myeloid cell differentiation is inhibited leading to a heterogeneous population of immature myeloid cells, known as myeloid-derived suppressor cells (MDSCs). MDSCs are recruited to sites of cancer-associated inflammation and express high levels of arginase-1 (4). Arginase-1 catalyzes the final step of the urea cycle converting L-arginine to L-ornithine and urea (5). Thus, MDSCs increase the catabolism of L-arginine resulting in L-arginine depletion in the inflammatory microenvironment of cancer (4,6). The reduced availability of L-arginine suppresses T cell proliferation and function and thus contributes to tumor progression (4,6). Arginase-1 is of great interest to researchers looking for a therapeutic target to inhibit the function of MDSCs in the context of cancer immunotherapy (7). In addition, research studies have demonstrated that arginase-1 distinguishes primary hepatocellular carcinoma (HCC) from metastatic tumors in the liver, indicating its value as a potential biomarker in the diagnosis of HCC (8,9).

### Background References

1. Albina, J.E. et al. (1989) *J Exp Med* 169, 1021-9.
2. Mills, C.D. (2001) *Crit Rev Immunol* 21, 399-425.
3. Rodriguez, P.C. et al. (2004) *Cancer Res* 64, 5839-49.
4. Gabrilovich, D.I. and Nagaraj, S. (2009) *Nat Rev Immunol* 9, 162-74.
5. Wu, G. and Morris, S.M. (1998) *Biochem J* 336 (Pt 1), 1-17.
6. Raber, P. et al. (2012) *Immunol Invest* 41, 614-34.
7. Wesolowski, R. et al. (2013) *J Immunother Cancer* 1, 10.
8. Sang, W. et al. (2015) *Tumour Biol* 36, 3881-6.
9. Geramizadeh, B. and Seifar, N. (2015) *Hepat Mon* 15, e30336.

### Species Reactivity

Species reactivity is determined by testing in at least one approved application (e.g., western blot).

### Western Blot Buffer

IMPORTANT: For western blots, incubate membrane with diluted primary antibody in 5% w/v nonfat dry milk, 1X TBS, 0.1% Tween® 20 at 4°C with gentle shaking, overnight.

### Applications Key

**W:** Western Blotting

### Cross-Reactivity Key

**H:** Human **M:** Mouse **R:** Rat

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