



Magic™ Mouse Anti-Human IGFBP-1

Monoclonal antibody, clone 5S1522 (DMAB-CS24338)

This product is for research use only and is not intended for diagnostic use.

PRODUCT INFORMATION

Specificity	Human IGFBP-1
Target	Human IGFBP-1
Isotype	IgG1
Source/Host	Mouse
Species Reactivity	Human
Clone	5S1522
Conjugate	unconjugated
Applications	CLIA, LFIA
Format	Liquid
Size	1 mg
Buffer	PBS
Preservative	None
Storage	Stored at 2°C-8°C.

BACKGROUND

Introduction

Premature rupture of fetal membranes (PROM) refers to rupture of fetal membranes before onset of labor. PROM may occur at term (>37 weeks of pregnancy) or preterm (< 37 weeks of pregnancy) when it is called preterm premature rupture of fetal membranes (PPROM). PROM is relatively common as it is suspected in 10% of pregnancies. PPRM is the most common cause for preterm delivery as it is involved in 30-40% of preterm deliveries. Preterm delivery in turn is associated with high perinatal mortality as it causes roughly 30% of all perinatal deaths. PROM is a major risk to the mother as well as to the fetus because it is also associated with an increased risk of intra-amniotic infection that may lead to neonatal sepsis. Rupture of fetal membranes is not always associated with significant leakage of amniotic fluid and hence PROM is not always easy to diagnose and some of the historical methods do not provide adequate sensitivity or specificity. Clinical and Research Area PROM may be diagnosed using IGFBP-1 as a marker. IGFBP-1 concentration in amniotic fluid rises during pregnancy and 100 to 1000 fold higher concentrations may be detected in amniotic fluid compared to human blood. Because of the high concentration even minute amounts of amniotic fluid may be detected in samples taken from vagina when PROM is suspected.

Keywords

insulin-like growth factor binding protein 1; IGFBP-1; IGFBP1; premature rupture of fetal membranes; PROM
