## **Certificate of Analysis**

Osteopontin, Human

Osteopontin is an RGD (arginine-glycine-asparate) containing glycoprotein. It is acidic, rich in aspartic and glutamic acid residues and is phosphorylated at up to 28 sites. Osteopontin is a member of the SIBLING (small integrin-binding ligand and N-linked glycoprotein) family of proteins.<sup>1</sup>

Osteopontin is a monomer and has a mass (including glycosilation) of approximately 75 kDa. Proteolytic cleavage and variation of post translational modifications results in molecular weight variants from 25 – 75 kDa.<sup>2</sup>

Integrins  $\alpha_{\nu}\beta_1$ ,  $\alpha_{\nu}\beta_3$ ,  $\alpha_{\nu}\beta_5$ ,  $\alpha_5\beta_1$ , and  $\alpha_8\beta_1$  have been reported to bind to osteopontin through the RGD sequence.  $\alpha_4\beta_1$  and  $\alpha_9\beta_1$  integrins bind to osteopontin through an SVVYGLR sequence adjacent to the RGD site.<sup>3</sup>

Osteopontin has a thrombin cleavage site, which modulates both RGD-dependant and RGDindependent receptor interactions. There are also cleavage sites specific for MMP-3 and MMP-4.<sup>4</sup> Angiogenic endothelial cell migration is mediated through interaction with the thrombin-cleaved form.<sup>5</sup>

Osteopontin is involved in normal and pathological (arthrosclerosis) mineralization, kidney function, inflammation through interaction with CD44 variants on T-cells, leukocyte recruitment, tissue remodeling, cell survival and tumorogenesis.<sup>6</sup>

Osteopontin is a major component of the uterine-placental microenvironment. It has been found on epithelial cells and in the secretions of the gastro-intestinal tract, kidneys, thyroid, breast, uterus, placenta and testes. It is expressed in leukocytes, smooth muscle cells, bones, dentin and hypertrophic cartilage.<sup>1, 2</sup>

Human Osteopontin 354256 is purified from human milk by the method of Senger et al<sup>7</sup>. The diffuse 75 kDa component is completely cleaved to the 35 kDa form by the action of thrombin. It has less than 0.5 endotoxin units/microgram as determined by the Limulus Amoebocyte Lysate Assay.

CATALOG NUMBER:	354256	LOT NUMBER:
SOURCE:	Human milk	
NOTE:	Any donor of the human source materia this material was tested and found non- antigen (HBsAG), for antibody to hepati antibody to human immunodeficiency v to human immunodeficiency virus-2 (an (RPR), for human T-cell lymphotropic v T-cell lymphotropic virus-II (HTLV-2). F product should be handled observing th Precautions employed when handling a material.	eactive for hepatitis B surface tis C virus (anti-HCV), for irus-1 (anti-HIV-1), for antibody ti-HIV-2), for antibody to syphilis irus-I (HTLV-1), and for human Regardless of the test data this e same Universal Safety
QUANITITY:	50 µg	
CONCENTRATION:	μg/ml	

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FORMULATION:	As a liquid in Dulbecco's Phosphate Buffered Saline	
PURITY:	≥95% by SDS-PAGE	
QUALITY CONTROL:	Tested and found negative for the presence of bacteria, fungi, and mycoplasma.	
STORAGE:	Stable when stored at -70°C. Avoid multiple freeze-thaws. Do not store in frost-free freezer. <b>KEEP FROZEN</b> .	
EXPIRATION DATE:		
REFERENCES:	<ol> <li>Rangaswami, H., et al., Trends in Cell Biol., 16:79 (2006).</li> <li>Johnson, G.A., et al., Biol. of Reprod., 69:1458 (2003).</li> <li>Yokosaki, Y., et al., Matrix Biol., 24:418 (2005).</li> <li>Denhardt, D.T., et al., J. Clinical Invest., 107:1055 (2001).</li> <li>Senger, D.R., et al., Am. J. Pathol., 149:293 (1996).</li> <li>Mazzali, M., et al., Q.J. Med., 95:3 (2002).</li> </ol>	

7. Senger, D.R., et al., Biochim. Biophysics Acta, 996:43 (1989).

**Quality Assurance** 

Date



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