

Technical Information

Fibroblast Growth Factor 23 (C-terminal) cFGF23

Cat. No.:	BI-20702
Tests:	96
Method:	ELISA
Range:	0 – 20 pmol/l
LLOQ:	0.1 pmol/l (STD2 0.2 pmol/l)
Incubation time:	over night / 1 h / 30 min
Sample volume:	50 µl
Sample type:	Serum, EDTA/Heparin/Citrate plasma
Sample preparation:	Centrifuge freshly collected blood as soon as possible Store centrifuged samples at -20°C for longer storage. Samples are stable up to 4 freeze and thaw cycles. Hemolyzed or lipemic samples may cause erroneous results.
Reference values:	Median serum (n=35): 0.8 pmol/l Median EDTA plasma (n=22): 1.3 pmol/l Median heparin plasma (n=22): 1.2 pmol/l Median citrate plasma (n=30): 1.4 pmol/l
Species:	Human

Intended use:

FGF23 (fibroblast growth factor 23) is a member of the fibroblast growth factor family and controls phosphate and vitamin D homeostasis. The full-length protein comprises 251 amino acids including a 24 amino acid signal peptide. The N-terminal FGF homology region of FGF23 is separated from the unique C-terminal region by a proteolytic cleavage site. A proportion of FGF23 is proteolytically processed between arginine179 and serine180 to generate N-terminal and C-terminal fragments. Therefore, the major forms of FGF23 present in human circulation are hormonally intact FGF23 and inactive N-terminal and C-terminal fragments. FGF23 binds to FGF receptor 1c (FGFR1c) with its N-terminal region, while the C-terminal region is capable of interacting with the co-receptor α Klotho to confer high-affinity binding to the receptor. FGFR1c and α Klotho are expressed in the distal nephron and the parathyroid gland. Co-receptor independent signaling of FGF23 has been described or other FGFRs, which are expressed in a variety of tissues. The main source of FGF23 are osteocytes in the bone.

Intended applications:

- Bone diseases
- Cancer
- Cardiovascular diseases
- Endocrine disorders
- Metabolic disorders
- Kidney diseases

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