

## Human Menopausal Gonadotropin - Purified

<b>Catalog No.:</b>	PA1192X
<b>Quantity:</b>	5 mg
<b>Concentration:</b>	1.0 mg/ml
<b>Species:</b>	Human
<b>Source:</b>	Urine, Urine of post-menopausal women.
<b>Format:</b>	<b>State:</b> Sterile Filtered White lyophilized (freeze-dried) powder. <b>Purity:</b> >98% Greater than 98.0% as determined by: (a) Analysis by RP-HPLC. (b) Anion-exchange FPLC. (c) Analysis by reducing and non-reducing SDS-PAGE Silver Stained gel. <b>Buffer System:</b> Lyophilized from a concentrated solution in water containing no additives. <b>Reconstitution:</b> It is recommended to reconstitute the lyophilized hMG in sterile 18MΩ-cm H2O not less than 100µg/ml, which can then be further diluted to other aqueous solutions.
<b>Description:</b>	hMG is produced from a sterile preparation of placental glucoprotein urine of post-menopausal women. The hMG is purified by proprietary chromatographic techniques. <b>Biological Activity:</b> hMG conforms the following activities: 100IU/mg of FSH and 100IU/mg LH.
<b>Add. Information:</b>	Free of: HbsAg, Hepatitis B surface antigen and antibodies to HIV, Hepatitis C and HCV. Protein quantitation was carried out by two independent methods: 1. UV spectroscopy at 280 nm. 2. Analysis by RP-HPLC, using a standard solution of hMG as a Reference Standard.
<b>Storage:</b>	Lyophilized hMG although stable at room temperature for 3 weeks, should be stored desiccated below -18 C. Upon reconstitution hMG should be stored at 4 C between 2-7 days and for future use below -18 C. For long term storage it is recommended to add a carrier protein (0.1% HSA or BSA). Please avoid freeze-thaw cycles.
<b>General Readings:</b>	<ol style="list-style-type: none"><li>1. Lin YH, Seow KM, Chen HJ, Huang LW, Hwang JL, Tzeng CR. Impact of estradiol patterns in clomiphene citrate/human menopausal gonadotropin/cetrorelix protocol. <i>Gynecol Endocrinol.</i> 2007 Jan;23(1):45-9. PubMed PMID: 17484512.</li><li>2. Zhang HQ, Yan B, Zhao HX, Gu DY, Jia XF, Cao L, et al. Effect of traditional Chinese herbs combined with low dose human menopausal gonadotropin applied in frozen-thawed embryo transfer. <i>Chin J Integr Med.</i> 2006 Dec;12(4):244-9. PubMed PMID: 17361518.</li><li>3. Lin YH, Hwang JL, Seow KM, Huang LW, Hsieh BC, Tzeng CR. Comparison of outcome of clomiphene citrate/human menopausal gonadotropin/cetrorelix protocol and buserelin long protocol--a randomized study. <i>Gynecol Endocrinol.</i> 2006 Jun;22(6):297-302. PubMed PMID: 16785154.</li><li>4. Zech NH, Netzbandt P, Zech H. Development of severe ovarian hyperstimulation syndrome after inadvertent stimulation with a gonadotropin-releasing hormone agonist</li></ol>

and human menopausal gonadotropin in a pre-existing early pregnancy. Fertil Steril. 2005 Dec;84(6):1745. PubMed PMID: 16359980.

5. Keye WR, Webster B, Dickey R, Somkuti S, Crain J, Scobey MJ. Subcutaneously administered Menopur, a new highly purified human menopausal gonadotropin, causes significantly fewer injection site reactions than Repronex in subjects undergoing in vitro fertilization. Reprod Biol Endocrinol. 2005 Nov 9;3:62. PubMed PMID: 16280073.

6. Ovulation induction in the new millennium: recombinant follicle-stimulating hormone versus human menopausal gonadotropin. Gynecol Endocrinol 2005 Mar;20(3):161-9