

ARG82806 Human Estrone ELISA Kit

Package: 96 wells
Store at: 4°C

Summary

Product Description	ARG82806 Human Estrone ELISA Kit is an enzyme immunoassay kit for the quantification of Estrone in Human saliva.
Tested Reactivity	Hu
Tested Application	ELISA
Specificity	Cross-Reactivity: Estrone 3-sulfate: 52.88% Estradiol: 8.65% Estriol: 0.32% Progesterone: 0.08% 17-OH Progesterone: 0.05% DHEA-S: 0.15% Androstenedione: 0.09% 4-Androstene-3,17-dione: 1.66% Cortisone: 1.06% Tetrahydrocortisone: 0.23% Ethinisterone: 0.32% Cortisol, DHEA and Testosterone: Not detected
Target Name	Estrone
Conjugation	HRP
Conjugation Note	Substrate: TMB and read at 450 nm.
Sensitivity	1.073 pg/ml
Sample Type	Saliva
Standard Range	3 - 333 pg/ml
Sample Volume	100 µl
Precision	Intra-Assay CV: 7.3% Inter-Assay CV: 8.4%

Application Instructions

Assay Time	1 hour 15 min
------------	---------------

Properties

Form	96 well
Storage instruction	Store the kit at 2-8°C. Keep microplate wells sealed in a dry bag with desiccants. Do not expose test reagents to heat, sun or strong light during storage and usage. Please refer to the product user manual for detail temperatures of the components.
Note	For laboratory research only, not for drug, diagnostic or other use.

Background

Estrone (3-hydroxy-1,3,5 (10)-estratrien-17-one) is beside estradiol and estriol one of the three major naturally occurring estrogens. The estrogens are involved in the development of female sex organs and secondary sex characteristics. Bioassay data indicate that the estrogenic activity of estrone is considerably lower in comparison to estradiol. However, the physiological role of endogenous estrone is not well defined.

Estrone is produced primarily from androstenedione. In premenopausal women, more than 50% of the estrone is secreted by the ovary. In prepubertal children, men and postmenopausal women, the major portion of estrone is derived from peripheral tissue conversion. During the follicular phase of the menstrual cycle the estrone level increases with a clear peak around day 13. The peak is of short duration and by day 16 of the cycle levels will be low again. A second peak during the luteal phase occurs around day 21 of the cycle. If fertilization does not occur production of estrone decreases again. These changes of estrone concentration are in parallel to that of estradiol. Until the 4. to 6. week of pregnancy, estrone originates primarily from maternal sources such as the ovaries, adrenals, or peripheral conversion thus remaining within the normal values. After the 6. to 10. week of pregnancy the values increase gradually due to placental secretion of estrone. After menopause, estrone levels do not decline as dramatically as estradiol levels. In postmenopausal women estrone is the major estrogen. In males the concentration of E1 has been reported to rise up with age inversely to that of 17-OH-progesterone. In premenopausal women excessive estrone levels can result from the conversion of large amounts of androstenedione produced in polycystic ovary syndrom and ovarian tumors.

Highlight

Related products:

[Estrone ELISA Kits:](#)

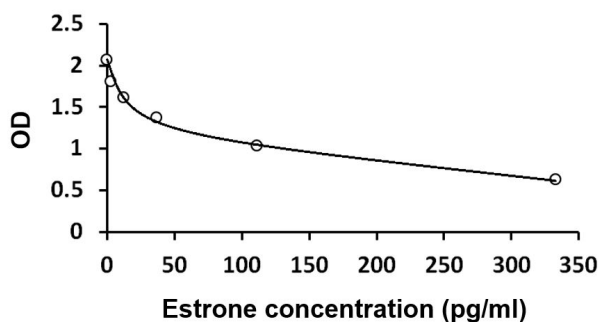
New ELISA data calculation tool:

[Simplify the ELISA analysis by GainData](#)

Research Area

Signaling Transduction kit

Images



ARG82806 Human Estrone ELISA Kit standard curve image

ARG82806 Human Estrone ELISA Kit results of a typical standard run with optical density reading at 450 nm.