

ARG82998 Human Dihydrotestosterone / DHT ELISA Kit

Package: 96 wells
Store at: 4°C

Summary

Product Description	ARG82998 Human Dihydrotestosterone / DHT ELISA Kit is an enzyme immunoassay kit for the quantification of 5 α -Dihydrotestosterone in human serum and plasma.
Tested Reactivity	Hu
Tested Application	ELISA
Target Name	Dihydrotestosterone / DHT
Conjugation	HRP
Conjugation Note	Substrate: TMB and read at 450 nm
Sensitivity	5.944 pg/ml
Sample Type	Serum and plasma.
Standard Range	25 - 1500 pg/ml
Sample Volume	75 μ l

Application Instructions

Assay Time	60, 15 min
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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.

Bioinformation

Gene Full Name	Dihydrotestosterone (DHT)
Background	<p>5 alpha-dihydrotestosterone (DHT) is a steroid similar to testosterone and androstenedione, which belong to a class called androgens. DHT is a C19 steroid and possesses androgenic activity. The bulk of androgen production takes place mainly in the Leydig cells of the testes. Androgens circulate in the blood bound to proteins, especially sex hormone binding globulin (SHBG) and albumin. A trace amount of these steroids circulate in the unbound form in the blood and are referred to as the free fractions. DHT has at least three times the binding affinity for SHBG than testosterone. In males about 70% of DHT is derived from peripheral conversion of testosterone, while in females most of the DHT is derived from androstenedione. The major organ to neutralize androgens is the liver. Therefore in the liver the steroid hormones undergo structural modifications that are generally regarded as prerequisites for their biological inactivation. Some metabolites are formed and some are returned to the circulation before renal excretion. Therefore, elimination of steroids from the body is done through the urine.</p> <p>Clinical Trends:</p>

In Klinefelter's syndrome the DHT level is much lower than that found in normal men. In idiopathic hirsutism about 40% of the patients have an increased level of DHT. In polycystic ovaries (PCO) about 35% of the patients have an increased DHT level. The DHT level in young people is much higher than those found in normal older people, hence androgen production increases at puberty which gives rise to masculinizing characteristics. It has been demonstrated that the human testes produce DHT, which appears to originate in the seminiferous tubules. Therefore in tubular damage the production of DHT is impaired, which causes a decrease in the levels of plasma DHT (patients with germinal cell aplasia and azoospermia). There is a very low level of plasma DHT in patients with anorchia. It has been reported that in some prostate cancer (especially in stage D) the determination of DHT could be useful in predicting the response to anti-androgen therapy.

Highlight

Related products:

[Dihydrotestosterone antibodies](#); [Dihydrotestosterone ELISA Kits](#);

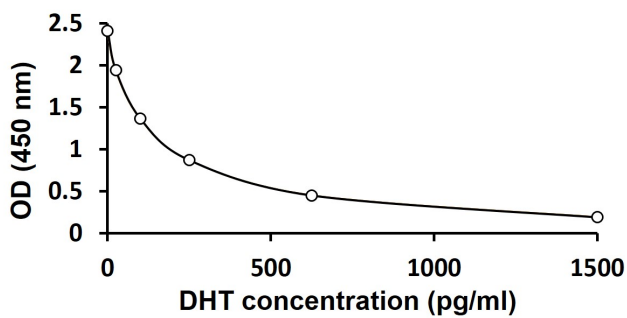
New ELISA data calculation tool:

[Simplify the ELISA analysis by GainData](#)

Research Area

Signaling Transduction kit

Images



ARG82998 Human Dihydrotestosterone / DHT ELISA Kit example of standard curve image

ARG82998 Human Dihydrotestosterone / DHT ELISA Kit results of a typical standard run with optical density reading at 450 nm.