# Morphine (201): sc-66065



The Power to Question

#### **BACKGROUND**

Morphine, the most powerful opiate analgesic drug in opium, acts directly on synapses of the arcuate nuclei within the central nervous system to relieve pain. It is a highly addictive drug, to which tolerance as well as physical and psychological dependences quickly develop. Administered as intravenous, subcutaneous or epidural injections, Morphine creates an profound contraction sensation in the muscles due to histamine release and also produces a "rush" mediated by different receptors in the central nervous system. Morphine is a phenanthrene opioid receptor agonist. By binding to  $\mu$  opioid receptors within the central nervous system associated with analgesia, sedation, physical dependence and respiratory depression, the euphoric effects of Morphine are quickly followed by withdrawal symptoms.

## **REFERENCES**

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#### SOURCE

Morphine (201) is a mouse monoclonal antibody raised against Morphine.

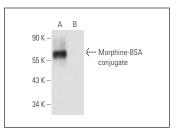
## **PRODUCT**

Each vial contains 100  $\mu g \; lg G_1$  in 1.0 ml of PBS with < 0.1% sodium azide and 0.1% gelatin.

#### **APPLICATIONS**

Morphine (201) is recommended for detection of Morphine by Western Blotting (starting dilution 1:200, dilution range 1:100-1:1000), immunoprecipitation [1-2 µg per 100-500 µg of total protein (1 ml of cell lysate)] and solid phase ELISA (starting dilution 1:30, dilution range 1:30-1:3000).

## **DATA**



Morphine (201): sc-66065. Western blot analysis of morphine in morphine-BSA conjugate (A) and BSA (B)

### **STORAGE**

Store at 4° C, \*\*DO NOT FREEZE\*\*. Stable for one year from the date of shipment. Non-hazardous. No MSDS required.

## **RESEARCH USE**

For research use only, not for use in diagnostic procedures.

#### **PROTOCOLS**

See our web site at www.scbt.com for detailed protocols and support products.

Santa Cruz Biotechnology, Inc. 1.800.457.3801 831.457.3801 fax 831.457.3801 Europe +00800 4573 8000 49 6221 4503 0 www.scbt.com