

À des fins de recherche uniquement

Anticorps Monoclonal anti-androgen receptor

Numéro de catalogue: 66747-1-Ig 2 Publications



Informations de base

Numéro de catalogue:	BC132975	Méthode de purification:
66747-1-Ig	Purification par protéine A	
Taille:	Identification du gène (NCBI):	CloneNo.:
150ul , Concentration: 2300 µg/ml by 367	Nom complet:	1F7C12
Nanodrop and 1000 µg/ml by Bradford method using BSA as the standard;	androgen receptor	Dilutions recommandées:
Hôte:	MW calculé	WB 1:600-1:3000
Mouse	914 aa, 99 kDa	IHC 1:5000-1:20000
Isotype:	MW observés:	IF 1:200-1:800
IgG2a	110-120 kDa	
Immunogen Catalog Number:		
AG17291		

Applications

Applications testées:	Contrôles positifs:
IF, IHC, WB, ELISA	WB : cellules LNCaP, cellules NCCIT, tissu testiculaire humain
Demandes citées:	IHC : tissu de cancer de la prostate humain, tissu testiculaire de rat, tissu testiculaire de souris
IHC, WB	IF : tissu de cancer de la prostate humain, cellules LNCaP
Spécificité de l'espèce:	
Humain, rat, souris	
Espèces citées:	
rat	

Remarque-IHC: il est suggéré de démasquer l'antigène avec un tampon de TE buffer pH 9,0; (*) À défaut, 'le démasquage de l'antigène peut être effectué avec un tampon citrate pH 6,0.

Informations générales

AR, also named as DHTR and NR3C4, belongs to the nuclear hormone receptor family and NR3 subfamily. AR is a ligand-activated transcription factors that regulate eukaryotic gene expression and affect cellular proliferation and differentiation in target tissues. Transcription factor activity is modulated by bound coactivator and corepressor proteins. AR is activated, but not phosphorylated, by HIPK3. Defects in AR are the cause of androgen insensitivity syndrome (AIS), previously known as testicular feminization syndrome (TFM), which is an X-linked recessive form of pseudohermaphroditism due end-organ resistance to androgen. Defects in AR are the cause of spinal and bulbar muscular atrophy X-linked type 1 (SMAX1) which also known as Kennedy disease. Defects in AR may play a role in metastatic prostate cancer. Defects in AR are the cause of androgen insensitivity syndrome partial (PAIS) which also known as Reifenstein syndrome. AR exists various isoforms with MW 110-120 kDa and 75-80 kDa. (PMID: 19244107)

Publications notables

Autrice	Pubmed ID	Journal	Application
Parmveer Singh	37376888	Development	IHC
Qi Huang	37517819	Chin J Nat Med	WB

Stockage

Stockage:

Stocker à -20°C. Stable pendant un an après l'expédition.

Tampon de stockage:

PBS avec azoture de sodium à 0,02 % et glycérol à 50 % pH 7,3

L'aliquotage n'est pas nécessaire pour le stockage à -20C

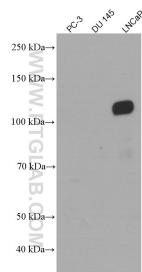
*** Les 20ul contiennent 0,1% de BSA.

For technical support and original validation data for this product please contact:
T: 1(888) 4PTGLAB (1-888-478-4522) (toll free
in USA), or 1(312) 455-8498 (outside USA)

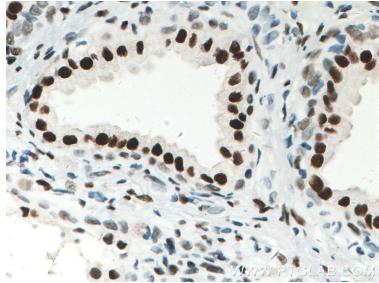
E: proteintech@ptglab.com
W: ptglab.com

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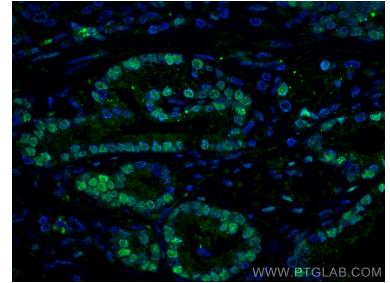
Données de validation sélectionnées



PC-3(AR-), DU 145(AR-) and LNCaP (AR+) cell lysates were subjected to SDS PAGE followed by western blot with 66747-1-Ig (AR antibody) at dilution of 1:3000 incubated at room temperature for 1.5 hours.



Immunohistochemical analysis of paraffin-embedded human prostate cancer tissue slide using 66747-1-Ig (AR antibody) at dilution of 1:20000 (under 40x lens. Heat mediated antigen retrieval with Tris-EDTA buffer (pH 9.0).



Immunofluorescent analysis of (4% PFA) fixed human prostate cancer tissue using AR antibody (66747-1-Ig, Clone: 1F7C12) at dilution of 1:400 and CoraLite®488-Conjugated AffiniPure Goat Anti-Mouse IgG(H+L).