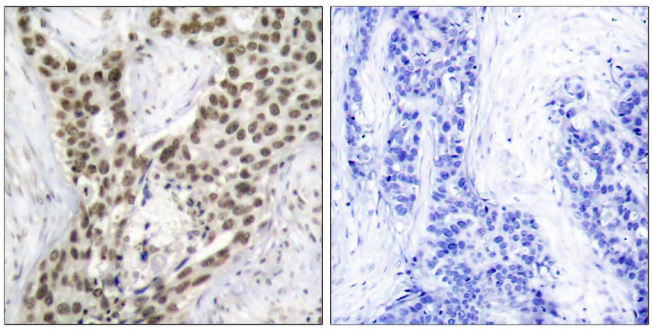
AR (phospho Ser213) Polyclonal Antibody

Catalog No	YP-Ab-03274
Isotype	IgG
Reactivity	Human;Rat;Mouse;
Applications	IHC;IF;ELISA
Gene Name	AR
Protein Name	Androgen receptor
Immunogen	The antiserum was produced against synthesized peptide derived from human Androgen Receptor around the phosphorylation site of Ser213. AA range:186-235
Specificity	Phospho-AR (S213) Polyclonal Antibody detects endogenous levels of AR protein only when phosphorylated at S213.
Formulation	Liquid in PBS containing 50% glycerol, 0.5% BSA and 0.02% sodium azide.
Source	Polyclonal, Rabbit,IgG
Purification	The antibody was affinity-purified from rabbit antiserum by affinity-chromatography using epitope-specific immunogen.
Dilution	IHC: 1/100 - 1/300. ELISA: 1/40000.. IF 1:50-200
Concentration	1 mg/ml
Purity	≥90%
Storage Stability	-20°C/1 year
Synonyms	AR; DHTR; NR3C4; Androgen receptor; Dihydrotestosterone receptor; Nuclear receptor subfamily 3 group C member 4
Observed Band	
Cell Pathway	Nucleus . Cytoplasm . Detected at the promoter of target genes (PubMed:25091737). Predominantly cytoplasmic in unligated form but translocates to the nucleus upon ligand-binding. Can also translocate to the nucleus in unligated form in the presence of RACK1. .
Tissue Specificity	[Isoform 2]: Mainly expressed in heart and skeletal muscle. ; [Isoform 3]: Expressed in basal and stromal cells of the prostate (at protein level).
Function	disease:Defects in AR are the cause of androgen insensitivity syndrome (AIS) [MIM:300068]; previously known as testicular feminization syndrome (TFM). AIS is an X-linked recessive form of pseudohermaphroditism due end-organ resistance to androgen. Affected males have female external genitalia, female breast development, blind vagina, absent uterus and female adnexa, and abdominal or inguinal testes, despite a normal 46,XY karyotype.,disease:Defects in AR are the cause of androgen insensitivity syndrome partial (PAIS) [MIM:312300]; also known as Reifenstein syndrome. PAIS is characterized by hypospadias, hypogonadism, gynecomastia, genital ambiguity, normal XY karyotype, and a pedigree pattern consistent with X-linked recessive inheritance. Some patients present azoospermia or severe oligospermia without other clinical manifestations.,disease:Defects in AR are the cause of spinal and bulb

Background	The androgen receptor gene is more than 90 kb long and codes for a protein that has 3 major functional domains: the N-terminal domain, DNA-binding domain, and androgen-binding domain. The protein functions as a steroid-hormone activated transcription factor. Upon binding the hormone ligand, the receptor dissociates from accessory proteins, translocates into the nucleus, dimerizes, and then stimulates transcription of androgen responsive genes. This gene contains 2 polymorphic trinucleotide repeat segments that encode polyglutamine and polyglycine tracts in the N-terminal transactivation domain of its protein. Expansion of the polyglutamine tract from the normal 9-34 repeats to the pathogenic 38-62 repeats causes spinal bulbar muscular atrophy (Kennedy disease). Mutations in this gene are also associated with complete androgen insensitivity (CAIS). Two alternatively spliced variants encoding distinct isoform
matters needing attention	Avoid repeated freezing and thawing!
Usage suggestions	This product can be used in immunological reaction related experiments. For more information, please consult technical personnel.

Products Images



Immunohistochemistry analysis of paraffin-embedded human prostate carcinoma, using Androgen Receptor (Phospho-Ser213) Antibody. The picture on the right is blocked with the phospho peptide.