For Research Use Only

androgen receptor Monoclonal antibody

Catalog Number:66747-1-lg 11 Publications



Basic Information

Catalog Number: 66747-1-lg

Concentration: 1000 ug/ml

Source: Mouse Isotype: IgG2a

Immunogen Catalog Number:

AG17291

GenBank Accession Number:

BC132975 GenelD (NCBI):

UNIPROT ID: P10275 Full Name:

androgen receptor Calculated MW:

914 aa, 99 kDa Observed MW: 110-120 kDa

Positive Controls:

WB: LNCaP cells, human testis tissue, NCCIT cells

Purification Method:

Protein A purification

Recommended Dilutions:

WB 1:600-1:3000 IHC 1:5000-1:20000

IF-P 1:200-1:800

IF/ICC 1:200-1:800

CloneNo.:

1F7C12

IHC : human prostate cancer tissue, mouse testis

tissue, rat testis tissue

IF-P: human prostate cancer tissue,

IF/ICC: LNCaP cells,

Applications

Tested Applications:

WB, IHC, IF/ICC, IF-P, ELISA

Cited Applications: WB, IHC, IF, IP, CoIP Species Specificity: human, mouse, rat

Cited Species:

human, mouse, rat, goat

Note-IHC: suggested antigen retrieval with TE buffer pH 9.0; (*) Alternatively, antigen retrieval may be performed with citrate buffer pH 6.0

Background Information

AR, also named as DHTR and NR3C 4, 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)

Notable Publications

Author	Pubmed ID	Journal	Application
Weian Zhu	39643184	Int J Biol Macromol	WB,IF,CoIP
Si Ha	39577229	Eur J Med Chem	WB,IHC,IF
Fang-E Zhao	39575435	Front Vet Sci	WB,IHC

Storage

Storage

Store at -20°C. Stable for one year after shipment.

PBS with 0.02% sodium azide and 50% glycerol, pH7.3

Aliquoting is unnecessary for -20°C storage

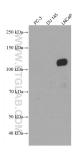
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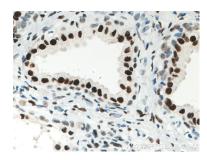
W: ptgcn.com

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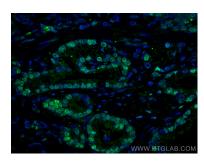
Selected Validation Data



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



Immunohistochemical analysis of paraffinembedded 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-lg, Clone: 1F7C12) at dilution of 1:400 and CoraLite®488-Conjugated AffiniPure Goat Anti-Mouse IgG(H+L).



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