

ADIPOR1 Antibody (C-term)

Affinity Purified Rabbit Polyclonal Antibody (Pab) Catalog # AP8634B

Specification

ADIPOR1 Antibody (C-term) - Product Information

Application FC, IHC-P, WB,E

Primary Accession O96A54 Other Accession 091VH1 Reactivity Human Predicted Mouse Host Rabbit Clonality **Polyclonal** Isotype Rabbit IgG Calculated MW 42616 Antigen Region 305-331

ADIPOR1 Antibody (C-term) - Additional Information

Gene ID 51094

Other Names

Adiponectin receptor protein 1, Progestin and adipoQ receptor family member I, ADIPOR1, PAQR1, TESBP1A

Target/Specificity

This ADIPOR1 antibody is generated from rabbits immunized with a KLH conjugated synthetic peptide between 305-331 amino acids from the C-terminal region of human ADIPOR1.

Dilution

FC~~1:10~50 IHC-P~~1:10~50 WB~~1:1000

E~~Use at an assay dependent concentration.

Format

Purified polyclonal antibody supplied in PBS with 0.09% (W/V) sodium azide. This antibody is purified through a protein A column, followed by peptide affinity purification.

Storage

Maintain refrigerated at 2-8°C for up to 2 weeks. For long term storage store at -20°C in small aliquots to prevent freeze-thaw cycles.

Precautions

ADIPOR1 Antibody (C-term) is for research use only and not for use in diagnostic or therapeutic procedures.

ADIPOR1 Antibody (C-term) - Protein Information



Name ADIPOR1 (HGNC:24040)

Function Receptor for ADIPOQ, an essential hormone secreted by adipocytes that regulates glucose and lipid metabolism (PubMed:<u>12802337</u>, PubMed:<u>25855295</u>). Required for normal glucose and fat homeostasis and for maintaining a normal body weight. ADIPOQ-binding activates a signaling cascade that leads to increased AMPK activity, and ultimately to increased fatty acid oxidation, increased glucose uptake and decreased gluconeogenesis. Has high affinity for globular adiponectin and low affinity for full-length adiponectin (By similarity).

Cellular Location

Cell membrane; Multi-pass membrane protein Note=Localized to the cell membrane and intracellular organelles

Tissue Location

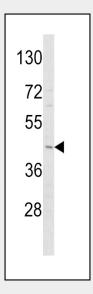
Widely expressed (PubMed:16044242). Highly expressed in heart and skeletal muscle (PubMed:12802337). Expressed at intermediate level in brain, spleen, kidney, liver, placenta, lung and peripheral blood leukocytes (PubMed:12802337). Weakly expressed in colon, thymus and small intestine (PubMed:12802337)

ADIPOR1 Antibody (C-term) - Protocols

Provided below are standard protocols that you may find useful for product applications.

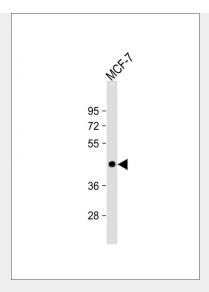
- Western Blot
- Blocking Peptides
- Dot Blot
- Immunohistochemistry
- Immunofluorescence
- Immunoprecipitation
- Flow Cytomety
- Cell Culture

ADIPOR1 Antibody (C-term) - Images

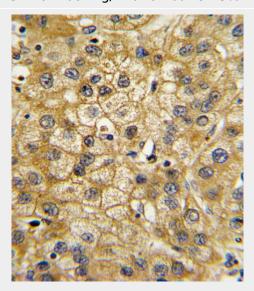


Western blot analysis of ADIPOR1 Antibody (C-term) (Cat. #AP8634b) in Y79 cell line lysates (35ug/lane). ADIPOR1 (arrow) was detected using the purified Pab.



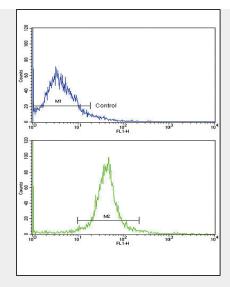


Anti-ADIPOR1 Antibody (C-term) at 1:1000 dilution + MCF-7 whole cell lysate Lysates/proteins at 20 μ g per lane. Secondary Goat Anti-Rabbit IgG, (H+L), Peroxidase conjugated at 1/10000 dilution. Predicted band size : 43 kDa Blocking/Dilution buffer: 5% NFDM/TBST.



Formalin-fixed and paraffin-embedded human hepatocarcinoma with ADIPOR1 Antibody (C-term), which was peroxidase-conjugated to the secondary antibody, followed by DAB staining. This data demonstrates the use of this antibody for immunohistochemistry; clinical relevance has not been evaluated.





Flow cytometric analysis of widr cells using ADIPOR1 Antibody (C-term)(bottom histogram) compared to a negative control cell (top histogram). FITC-conjugated goat-anti-rabbit secondary antibodies were used for the analysis.

ADIPOR1 Antibody (C-term) - Background

The adiponectin receptors, ADIPOR1 and ADIPOR2, serve as receptors for globular and full-length adiponectin and mediate increased AMPK and PPAR-alpha ligand activities, as well as fatty acid oxidation and glucose uptake by adiponectin.

ADIPOR1 Antibody (C-term) - References

Civitarese, A.E., et.al., Diabetologia 47 (5), 816-820 (2004) Wang, H., et.al., Diabetes 53 (8), 2132-2136 (2004)