





MCR Polyclonal Antibody

Catalog No	YP-Ab-07181
Isotype	IgG
Reactivity	Human;Rat;Mouse
Applications	WB;ELISA
Gene Name	NR3C2 MCR MLR
Protein Name	Mineralocorticoid receptor (MR) (Nuclear receptor subfamily 3 group C member 2)
Immunogen	Synthesized peptide derived from human protein . at AA range: 10-90
Specificity	MCR Polyclonal Antibody detects endogenous levels of protein.
Formulation	Liquid in PBS containing 50% glycerol, 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	WB 1:500-2000 ELISA 1:5000-20000
Concentration	1 mg/ml
Purity	≥90%
Storage Stability	-20°C/1 year
Synonyms	
Observed Band	108kD
Cell Pathway	Cytoplasm. Nucleus. Endoplasmic reticulum membrane; Peripheral membrane protein. Cytoplasmic and nuclear in the absence of ligand; nuclear after ligand-binding. When bound to HSD11B2, it is found associated with the endoplasmic reticulum membrane.
Tissue Specificity	Ubiquitous. Highly expressed in distal tubules, convoluted tubules and cortical collecting duct in kidney, and in sweat glands. Detected at lower levels in cardiomyocytes, in epidermis and in colon enterocytes.
Function	alternative products:Additional isoforms seem to exist, disease:Defects in NR3C2 are a cause of autosomal dominant pseudohypoaldosteronism type I (PHA1) [MIM:177735]. PHA1 is characterized by urinary salt wasting, resulting from target organ unresponsiveness to mineralocorticoids. There are 2 forms of PHA1: the autosomal dominant form that is mild, and the recessive form which is more severe and due to defects in any of the epithelial sodium channel subunits. In autosomal dominant PHA1 the target organ defect is confined to kidney. Clinical

autosomal dominant PHA1 the target organ defect is confined to kidney. Clinical expression can vary from asymptomatic to moderate. It may be severe at birth, but symptoms remit with age. Familial and sporadic cases have been reported., disease: Defects in NR3C2 are a cause of early onset hypertension with severe exacerbation in pregnancy [MIM:605115]. Inheritance is autosomal dominant. The disease is characterized by the onset of se



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Background	This gene encodes the mineralocorticoid receptor, which mediates aldosterone actions on salt and water balance within restricted target cells. The protein functions as a ligand-dependent transcription factor that binds to mineralocorticoid response elements in order to transactivate target genes. Mutations in this gene cause autosomal dominant pseudohypoaldosteronism type I, a disorder characterized by urinary salt wasting. Defects in this gene are also associated with early onset hypertension with severe exacerbation in pregnancy. Alternative splicing results in multiple transcript variants. [provided by RefSeq, Oct 2009],
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