



AR (phospho Tyr363) Polyclonal Antibody

Catalog No	YP-Ab-03283
Isotype	IgG
Reactivity	Human;Mouse;Rat
Applications	WB;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 Tyr363. AA range:331-380
Specificity	Phospho-AR (Y363) Polyclonal Antibody detects endogenous levels of AR protein only when phosphorylated at Y363.
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	Western Blot: 1/500 - 1/2000. ELISA: 1/10000. Not yet tested in other applications.
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	85kD
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

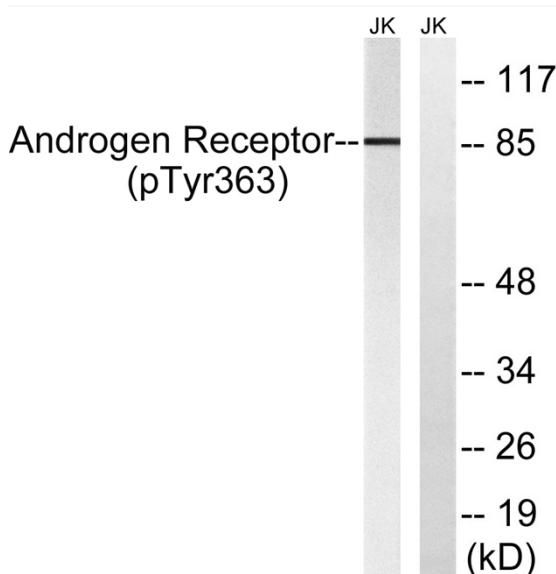
matters needing attention

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



Western blot analysis of lysates from Jurkat cells treated with UV 15', using Androgen Receptor (Phospho-Tyr363) Antibody. The lane on the right is blocked with the phospho peptide.