



KIR6.2 Polyclonal Antibody

Catalog No	YP-Ab-16447
Isotype	IgG
Reactivity	Human;Mouse;Rat
Applications	WB;IHC;IF;ELISA
Gene Name	KCNJ11
Immunogen	The antiserum was produced against synthesized peptide derived from human Kir6.2. AA range:190-239
Specificity	KIR6.2 Polyclonal Antibody detects endogenous levels of KIR6.2 protein.
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. Immunohistochemistry: 1/100 - 1/300. Immunofluorescence: 1/200 - 1/1000. ELISA: 1/10000. Not yet tested in other applications.
Concentration	1 mg/ml
Purity	≥90%
Storage Stability	-20°C/1 year
Synonyms	BIR;HHF2;IKATP;KCNJ11;KIR6.2;PHHI;TNDM3;ATP-sensitive inward rectifier potassium channel 11;Inward rectifier K(+) channel Kir6.2;Potassium channel; inwardly rectifying subfamily J member 11
Observed Band	40kD
Calculated Molecular Weight	40kD
Cell Pathway	Membrane; Multi-pass membrane protein.
Tissue Specificity	Brain,Breast,Ovary,Placenta,Spleen,
Function	disease:Defects in KCNJ11 are a cause of permanent neonatal diabetes mellitus (PNDM) [MIM:606176]. PNDM is a rare form of diabetes characterized by insulin-requiring hyperglycemia that is diagnosed within the first months of life.,disease:Defects in KCNJ11 are the cause of familial hyperinsulinemic hypoglycemia type 2 (HHF2) [MIM:601820]; also known as persistent hyperinsulinemic hypoglycemia of infancy (PPHI) or hyperinsulinism. HHF2 is the most common cause of persistent hypoglycemia in infancy and is due to defective negative feedback regulation of insulin secretion by low glucose levels.



It causes nesidioblastosis, a diffuse abnormality of the pancreas in which there is extensive, often disorganized formation of new islets. Unless early and aggressive intervention is undertaken, brain damage from recurrent episodes of hypoglycemia may occur.,disease:Defects in KCNJ11 are the cause of

Background

Potassium channels are present in most mammalian cells, where they participate in a wide range of physiologic responses. The protein encoded by this gene is an integral membrane protein and inward-rectifier type potassium channel. The encoded protein, which has a greater tendency to allow potassium to flow into a cell rather than out of a cell, is controlled by G-proteins and is found associated with the sulfonylurea receptor SUR. Mutations in this gene are a cause of familial persistent hyperinsulinemic hypoglycemia of infancy (PHHI), an autosomal recessive disorder characterized by unregulated insulin secretion. Defects in this gene may also contribute to autosomal dominant non-insulin-dependent diabetes mellitus type II (NIDDM), transient neonatal diabetes mellitus type 3 (TNDM3), and permanent neonatal diabetes mellitus (PNDM). Multiple alternatively spliced trans

matters needing attention

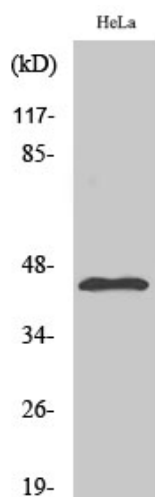
Avoid repeated freezing and thawing!

Usage suggestions

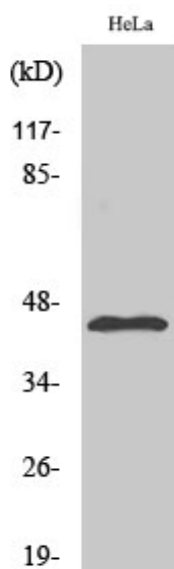
This product can be used in immunological reaction related experiments. For more information, please consult technical personnel.



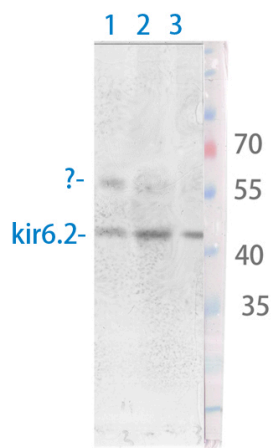
Products Images



Western Blot analysis of various cells using KIR6.2
Polyclonal Antibody diluted at 1:500



Western Blot analysis of NIH-3T3 cells using KIR6.2
Polyclonal Antibody diluted at 1:500

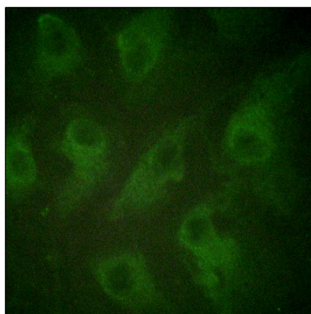


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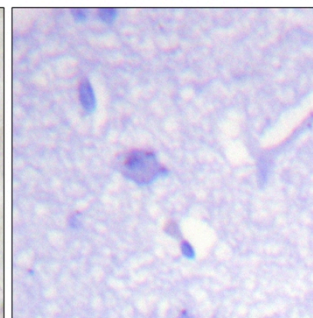
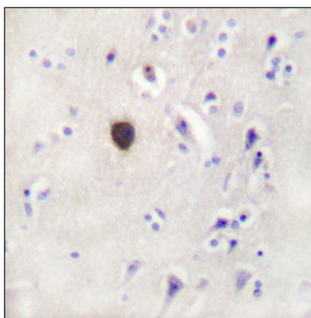
2 mouse-liver

3 mouse-brain

Western Blot analysis of various cells using Antibody diluted at 1:1000. Secondary antibody(catalog#:RS0002) was diluted at 1:20000



Immunofluorescence analysis of HeLa cells, using Kir6.2 Antibody. The picture on the right is blocked with the synthesized peptide.



Immunohistochemistry analysis of paraffin-embedded human brain tissue, using Kir6.2 Antibody. The picture on the right is blocked with the synthesized peptide.

