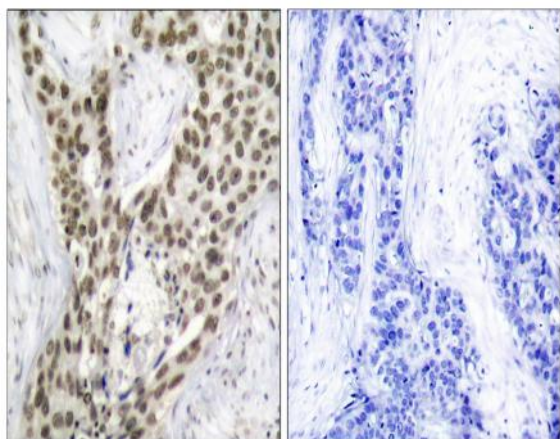


AR (phospho Ser213) Polyclonal Antibody

Catalog No :	YP0019
Reactivity :	Human;Rat;Mouse;
Applications :	IHC;IF;ELISA
Target :	Androgen Receptor
Fields :	>>Oocyte meiosis;>>Pathways in cancer;>>Chemical carcinogenesis - receptor activation;>>Prostate cancer
Gene Name :	AR
Protein Name :	Androgen receptor
Human Gene Id :	367
Human Swiss Prot No :	P10275
Mouse Swiss Prot No :	P19091
Immunogen :	The antiserum was produced against synthesized peptide derived from human Androgen Receptor around the phosphorylation site of Ser213. AA range:186-235
Specificity :	Phospho-AR (S213) Polyclonal Antibody detects endogenous levels of AR protein only when phosphorylated at S213.
Formulation :	Liquid in PBS containing 50% glycerol, 0.5% BSA and 0.02% sodium azide.
Source :	Polyclonal, Rabbit,IgG
Dilution :	IHC 1:100 - 1:300. ELISA: 1:40000.. IF 1:50-200
Purification :	The antibody was affinity-purified from rabbit antiserum by affinity-chromatography using epitope-specific immunogen.
Concentration :	1 mg/ml

Storage Stability :	-15 °C to -25 °C/1 year(Do not lower than -25 °C)
Molecularweight :	99kD
Cell Pathway :	Protein_Acetylation
Background :	<p>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</p>
Function :	<p>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</p>
Subcellular Location :	<p>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. .</p>
Expression :	<p>[Isoform 2]: Mainly expressed in heart and skeletal muscle. ; [Isoform 3]: Expressed in basal and stromal cells of the prostate (at protein level).</p>

Products Images



Immunohistochemistry analysis of paraffin-embedded human prostate carcinoma, using Androgen Receptor (Phospho-Ser213) Antibody. The picture on the right is blocked with the phosphopeptide.