

产品名称: KIR6.2 Rabbit Polyclonal Antibody

产品货号: APRab13033

产品概述 (Summary)

描述(Description)	Rabbit polyclonal Antibody
宿主(Host)	Rabbit
应用(Application)	WB,IHC,ICC/IF,ELISA
种属反应(Reactivity)	Human,Mouse,Rat
偶联物(Conjugation)	Unconjugated
修饰(Modification)	Unmodified
同种型(Isotype)	IgG
克隆(Clonality)	Polyclonal
剂型(Form)	Liquid
保存条件(Storage)	Store at 4°C short term. Aliquot and store at -20°C long term. Avoid freeze/thaw cycles.
储存溶液(Buffer)	Liquid in PBS containing 50% glycerol, 0.5% protective protein and 0.02% New type preservative N.
纯化 (Purification)	Affinity purification

产品应用(Application)

稀释比(Dilution Ratio)	WB 1:500-1:2000,IHC 1:100-1:300,ICC/IF 1:200-1:1000,ELISA 1:5000-1:20000
分子量(Molecular Weight)	40kDa

抗原信息(Antigen Information)

基因名(Gene Name)	KCNJ11
别名(Alternative Names)	KCNJ11; ATP-sensitive inward rectifier potassium channel 11; IKATP; Inward rectifier K(+) channel Kir6.2; Potassium channel; inwardly rectifying subfamily J member 11
基因 ID(Gene ID)	3767.0
SwissProt ID	Q14654
免疫原(Immunogen)	The antiserum was produced against synthesized peptide derived from human Kir6.2. AA range:190-239

研究背景 (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 transcripts: 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. Defects in KCNJ11 are the cause of familial hyperinsulinemic hypoglycemia type 2 (HHF2) [MIM:601820]; also known as persistent hyperinsulinemic hypoglycemia of infancy (PHHI) 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. Defects in KCNJ11 are the cause of transient neonatal diabetes mellitus type 3 (TNDM3) [MIM:610582]. Neonatal diabetes mellitus, defined as insulin-requiring hyperglycemia within the first month of life, is a rare entity. In about half of the neonates, diabetes is transient and resolves at a median age of 3 months, whereas the rest have a permanent form of diabetes. In a significant number of patients with transient neonatal diabetes mellitus, diabetes type 2 appears later in life. The onset and severity of TNDM3 is variable with childhood-onset diabetes, gestational diabetes or adult-onset diabetes described. Defects in KCNJ11 may contribute to non-insulin-dependent diabetes mellitus (NIDDM), also known as diabetes mellitus type 2. Function: This receptor is controlled by G proteins. Inward rectifier potassium channels are characterized by a greater tendency to allow potassium to flow into the cell rather than out of it. Their voltage dependence is regulated by the concentration of extracellular potassium; as external potassium is raised, the voltage range of the channel opening shifts to more positive voltages. The inward rectification is mainly due to the blockage of outward current by internal magnesium. Can be blocked by extracellular barium. Similarity: Belongs to the inward rectifier-type potassium channel family. Subunit: Associates with ABCC8/SUR.

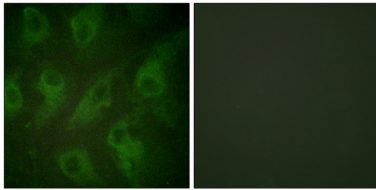
研究领域 (Research Area)

Type II diabetes mellitus;

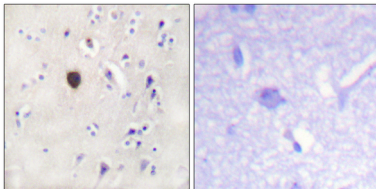
注意事项 (Note)

For research use only.

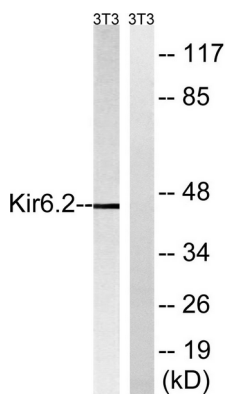
图片 (Image Data)



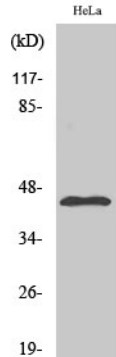
Immunofluorescence analysis of HeLa cells, using Kir6.2 Antibody. The picture on the right is blocked with the synthesized peptide.



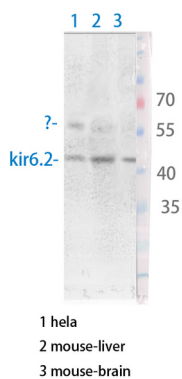
Immunohistochemistry analysis of paraffin-embedded human brain tissue, using Kir6.2 Antibody. The picture on the right is blocked with the synthesized peptide.



Western blot analysis of lysates from 3T3 cells, using Kir6.2 Antibody. The lane on the right is blocked with the synthesized peptide.



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



Western Blot analysis of various cells using Antibody diluted at 1:1000. Secondary antibody was diluted at 1:20000

EnkiLife 优势产品推荐

产品类别	产品货号	产品名称
WB 解决方案	RA10020	2h 极速 WB 即用型全流程试剂盒
	RA10021	4h 快速 WB 即用型全流程试剂盒
	RA10042	5h 畅享版 WB 全流程试剂盒
	RA10037	校准级彩色预染蛋白 Marker (8-180kDa)
	RA10038	校准级彩色预染蛋白 Marker (10-250kDa)
	RA10039	校准级高分子彩色预染蛋白 Marker (25-400kDa)
TSA 多重荧光染色试剂盒	RA10008	TSA 双标三色多重荧光染色试剂盒 (mIHC)
	RA10009	TSA 三标四色多重荧光染色试剂盒 (mIHC)
	RA10010	TSA 四标五色多重荧光染色试剂盒 (mIHC)
	RA10011	TSA 五标六色多重荧光染色试剂盒 (mIHC)
	RA10012	TSA 六标七色多重荧光染色试剂盒 (mIHC)
IHC 检测试剂盒	RA10006	HRP Anti-Mouse/Rabbit IHC Detection System
	RA10007	Polymer-HRP Anti-Mouse/Rabbit IHC Detection System
抗体标记试剂盒	RE80004p	辣根过氧化物酶(HRP)抗体标记试剂盒
	RE80002q	Sulfo-NHS-生物素标记试剂盒
	RE80007p	Cy3 荧光素标记试剂盒
	RE80011p	Fluor488 荧光素标记试剂盒
	RE80017p	Fluor750 荧光素标记试剂盒
	RE80005p	藻红蛋白(R-PE) 抗体快速标记试剂盒
	RE80040	PE-Cy7 串联染料抗体快速标记试剂盒
稳转细胞系构建服务 (免费赠送全膜 WB 验证)	TS-0001	过表达稳转细胞系构建
	TS-0002	敲低稳转细胞系构建
	TS-0003	敲除细胞系构建

限于篇幅，更多产品详见官网：<https://www.enkilife.cn>