abcam

Product datasheet

Anti-Ret (phospho Y1062) antibody ab123544

2 Abreviews　画像数 3

製品の概要

製品名	Anti-Ret (phospho Y1062) antibody
製品の詳細	Rabbit polyclonal to Ret (phospho Y1062)
由来種	Rabbit
アプリケーション	**適用あり:** IHC-P, ELISA, WB
種交差性	**交差種:** Human **交差が予測される動物種:** Mouse, Rat, Rabbit, Horse, Cow, Dog, Pig, Chimpanzee, Macaque monkey, Gorilla
免疫原	Synthetic peptide conjugated to KLH derived from within residues 1050 to the C-terminus of Human Ret, phosphorylated at Y1062.Immunogen の所有権に関して
ポジティブ・コントロール	This antibody gave a positive signal in K562 whole cell lysate. IHC-P: human prostate tissue sections

製品の特性

製品の状態	Liquid
保存方法	Shipped at 4°C. Store at +4°C short term (1-2 weeks). Upon delivery aliquot. Store at -20°C or -80°C. Avoid freeze / thaw cycle.
バッファー	pH: 7.40 Preservative: 0.02% Sodium azide Constituent: PBS Note: Batches of this product that have a concentration < 1mg/ml may have BSA added as a stabilising agent. If you would like information about the formulation of a specific lot, please contact our scientific support team who will be happy to help.
精製度	Immunogen affinity purified
ポリ/モノ	ポリクローナル
アイソタイプ	IgG

アプリケーション

Our Abpromise guarantee covers the use of **ab123544** in the following tested applications.

The application notes include recommended starting dilutions; optimal dilutions/concentrations should be determined by the end user.

アプリケーション	Abreviews	特記事項
IHC-P		Use a concentration of 1 µg/ml. Perform heat mediated antigen retrieval before commencing with IHC staining protocol.
ELISA		Use at an assay dependent concentration.
WB		Use a concentration of 1 µg/ml. Detects a band of approximately 115 kDa (predicted molecular weight: 124 kDa).

ターゲット情報

機能

Probable receptor with tyrosine-protein kinase activity; important for development.

関連疾患

Defects in RET may be a cause of colorectal cancer (CRC) [MIM:114500].
Defects in RET are a cause of Hirschsprung disease (HSCR) [MIM:142623]. HSCR is a genetic disorder of neural crest development characterized by the absence of intramural ganglion cells in the hindgut, often resulting in intestinal obstruction. Occasionally, MEN2A or FMTC occur in association with HSCR.
Defects in RET are the cause of medullary thyroid carcinoma (MTC) [MIM:155240]. MTC is a rare tumor derived from the C cells of the thyroid. Three hereditary forms are known, that are transmitted in an autosomal dominant fashion: (a) multiple neoplasia type 2A (MEN2A), (b) multiple neoplasia type IIB (MEN2B) and (c) familial MTC (FMTC), which occurs in 25-30% of MTC cases and where MTC is the only clinical manifestation.
Defects in RET are the cause of multiple neoplasia type 2B (MEN2B) [MIM:162300]. MEN2B is an uncommon inherited cancer syndrome characterized by predisposition to MTC and phaeochromocytoma which is associated with marfanoid habitus, mucosal neuromas, skeletal and ophtalmic abnormalities, and ganglioneuromas of the intestine tract. Then the disease progresses rapidly with the development of metastatic MTC and a pheochromocytome in 50% of cases.
Defects in RET are a cause of susceptibility to pheochromocytoma (PCC) [MIM:171300]. A catecholamine-producing tumor of chromaffin tissue of the adrenal medulla or sympathetic paraganglia. The cardinal symptom, reflecting the increased secretion of epinephrine and norepinephrine, is hypertension, which may be persistent or intermittent.
Defects in RET are the cause of multiple neoplasia type 2A (MEN2A) [MIM:171400]; also known as multiple neoplasia type 2 (MEN2). MEN2A is the most frequent form of medullary thyroid cancer (MTC). It is an inherited cancer syndrome characterized by MTC, phaeochromocytoma and/or hyperparathyroidism.
Defects in RET are a cause of thyroid papillary carcinoma (TPC) [MIM:188550]. TPC is a common tumor of the thyroid that typically arises as an irregular, solid or cystic mass from otherwise normal thyroid tissue. Papillary carcinomas are malignant neoplasm characterized by the formation of numerous, irregular, finger-like projections of fibrous stroma that is covered with a surface layer of neoplastic epithelial cells. Note=Chromosomal aberrations involving RET are found in thyroid papillary carcinomas. Inversion inv(10)(q11.2;q21) generates the RET/CCDC6 (PTC1) oncogene; inversion inv(10)(q11.2;q11.2) generates the RET/NCOA4 (PTC3) oncogene; translocation t(10;14)(q11;q32) with GOLGA5 generates the RET/GOLGA5 (PTC5) oncogene; translocation t(8;10)(p21.3;q11.2) with PCM1 generates the PCM1/RET fusion; translocation t(6;10)(p21.3;q11.2) with RFP generates the Delta RFP/RET oncogene; translocation t(1;10)(p13;q11) with TRIM33 generates the TRIM33/RET (PTC7) oncogene; translocation t(7;10)(q32;q11) with TRIM24/TIF1 generates the TRIM24/RET (PTC6) oncogene.

The PTC5 oncogene has been found in 2 cases of PACT in children exposed to radioactive fallout after Chernobyl. A chromosomal aberration involving TRIM27/RFP is found in thyroid papillary carcinomas. Translocation t(6;10)(p21.3;q11.2) with RET. The translocation generates TRIM27/RET and delta TRIM27/RET oncogenes.
Defects in RET are a cause of renal adysplasia (RADYS) [MIM:191830]; also known as renal agenesis or renal aplasia. Renal agenesis refers to the absence of one (unilateral) or both (bilateral) kidneys at birth. Bilateral renal agenesis belongs to a group of perinatally lethal renal diseases, including severe bilateral renal dysplasia, unilateral renal agenesis with contralateral dysplasia and severe obstructive uropathy.
Defects in RET are a cause of congenital central hypoventilation syndrome (CCHS) [MIM:209880]; also known as congenital failure of autonomic control or Ondine curse. CCHS is a rare disorder characterized by abnormal control of respiration in the absence of neuromuscular or lung disease, or an identifiable brain stem lesion. A deficiency in autonomic control of respiration results in inadequate or negligible ventilatory and arousal responses to hypercapnia and hypoxemia.

配列類似性

Belongs to the protein kinase superfamily. Tyr protein kinase family.
Contains 1 cadherin domain.
Contains 1 protein kinase domain.

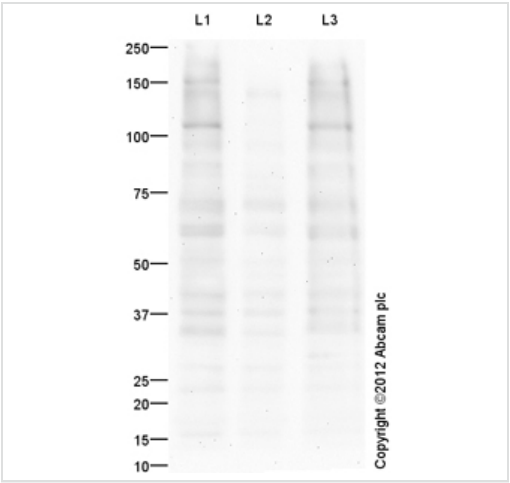
翻訳後修飾

Autophosphorylated on C-terminal tyrosine residues upon ligand stimulation. Dephosphorylated by PTPRJ on Tyr-905, Tyr-1015 and Tyr-1062.

細胞内局在

Membrane.

画像



Western blot - Anti-Ret (phospho Y1062) antibody (ab123544)

All lanes : Anti-Ret (phospho Y1062) antibody (ab123544) at 1 µg/ml

Lane 1 : K562 (Human erythromyeloblastoid leukemia cell line) Whole Cell Lysate
Lane 2 : K562 (Human erythromyeloblastoid leukemia cell line) Whole Cell Lysate with Immunising peptide at 1 µg/ml
Lane 3 : K562 (Human erythromyeloblastoid leukemia cell line) Whole Cell Lysate with Control peptide at 1 µg/ml

Lysates/proteins at 25 µg per lane.

Secondary
All lanes : Goat Anti-Rabbit IgG H&L (HRP) preadsorbed (ab97080) at 1/5000 dilution

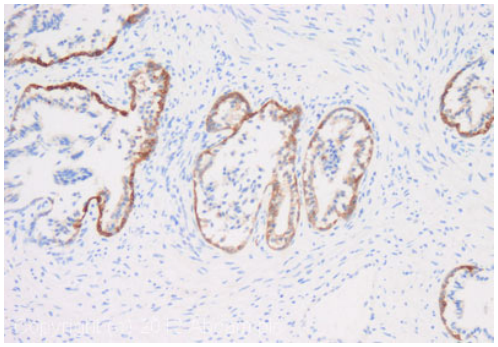
Developed using the ECL technique.

Performed under reducing conditions.

Predicted band size: 124 kDa
Observed band size: 115 kDa
Additional bands at: 151 kDa, 62 kDa, 70 kDa. We are unsure as to the identity of these extra bands.

Exposure time: 4 minutes

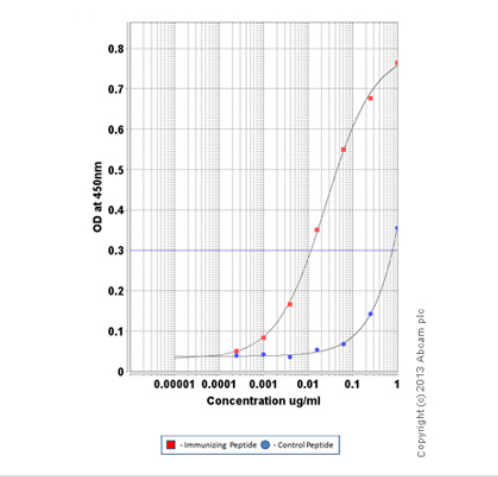
The band observed at 115 kDa could potentially be a cleaved form of Ret (phospho Y1062) due to the presence of a 28 amino acid signal peptide. This blot was produced using a 10% Bis-tris gel under the MOPS buffer system. The gel was run at 200V for 50 minutes before being transferred onto a Nitrocellulose membrane at 30V for 70 minutes. The membrane was then blocked for an hour using 5% Bovine Serum Albumin before being incubated with ab123544 overnight at 4°C. Antibody binding was detected using an anti-rabbit antibody conjugated to HRP, and visualised using ECL development solution.



Immunohistochemistry (Formalin/PFA-fixed paraffin-embedded sections) - Anti-Ret (phospho Y1062) antibody (ab123544)

IHC image of Ret (phospho Y1062) staining in human prostate carcinoma formalin fixed paraffin embedded tissue section, performed on a Leica Bond™ system using the standard protocol F. The section was pre-treated using heat mediated antigen retrieval with sodium citrate buffer (pH6, epitope retrieval solution 1) for 20 mins. The section was then incubated with ab123544, 1µg/ml, for 15 mins at room temperature and detected using an HRP conjugated compact polymer system. DAB was used as the chromogen. The section was then counterstained with haematoxylin and mounted with DPX.

For other IHC staining systems (automated and non-automated) customers should optimize variable parameters such as antigen retrieval conditions, primary antibody concentration and antibody incubation times.



ELISA - Anti-Ret (phospho Y1062) antibody (ab123544)

ab123544 was tested using an Indirect ELISA approach. The wells were coated with peptide (1µg/ml at 100µl/well) overnight at 4°C, followed by a 5% BSA blocking step for 1 hour at room temperature. The primary Ab was then added at a dilution range of 1- 0.00025µg/ml (100µl/well) for 1hr at room temperature. A HRP-conjugated anti-rabbit IgG (heavy and light chain) was used as a secondary antibody at 1:20,000 dilution for 1hr at room temperature.

Our Abpromise to you: Quality guaranteed and expert technical support

- Replacement or refund for products not performing as stated on the datasheet
- Valid for 12 months from date of delivery
- Response to your inquiry within 24 hours

- We provide support in Chinese, English, French, German, Japanese and Spanish
- Extensive multi-media technical resources to help you
- We investigate all quality concerns to ensure our products perform to the highest standards

If the product does not perform as described on this datasheet, we will offer a refund or replacement. For full details of the Abpromise, please visit https://www.abcam.co.jp/abpromise or contact our technical team.

Terms and conditions

- Guarantee only valid for products bought direct from Abcam or one of our authorized distributors