

Anti-KCNQ1 Picoband Antibody

Catalog # ABO10054

Specification

Anti-KCNQ1 Picoband Antibody - Product Information

Application WB
Primary Accession P51787
Host Reactivity Human, Rat
Clonality Polyclonal
Format Lyophilized

Description

Rabbit IgG polyclonal antibody for Potassium voltage-gated channel subfamily KQT member 1(KCNQ1) detection. Tested with WB in Human;Rat.

Reconstitution

Add 0.2ml of distilled water will yield a concentration of 500ug/ml.

Anti-KCNQ1 Picoband Antibody - Additional Information

Gene ID 3784

Other Names

Potassium voltage-gated channel subfamily KQT member 1, IKs producing slow voltage-gated potassium channel subunit alpha KvLQT1, KQT-like 1, Voltage-gated potassium channel subunit Kv7.1, KCNQ1 (HGNC:6294)

Calculated MW 74699 MW KDa

Application Details

Western blot, 0.1-0.5 µg/ml, Human, Rat<br

Subcellular Localization

Cell membrane; Multi- pass membrane protein. Cytoplasmic vesicle membrane. Early endosome. Membrane raft. Endoplasmic reticulum. Basolateral cell membrane. Colocalized with KCNE3 at the plasma membrane (PubMed:10646604). Upon 17beta-oestradiol treatment, colocalizes with RAB5A at early endosome (PubMed:23529131). Heterotetramer with KCNQ5 is highly retained at the endoplasmic reticulum and is localized outside of lipid raft microdomains (PubMed:24855057). During the early stages of epithelial cell polarization induced by the calcium switch it removed from plasma membrane to the endoplasmic reticulum where it retained and it is redistributed to the basolateral cell surface in a PI3K-dependent manner at a later stage (PubMed:21228319).

Tissue Specificity

Abundantly expressed in heart, pancreas, prostate, kidney, small intestine and peripheral blood leukocytes. Less abundant in placenta, lung, spleen, colon, thymus, testis and ovaries.

Protein Name



Potassium voltage-gated channel subfamily KQT member 1

Contents

Each vial contains 5mg BSA, 0.9mg NaCl, 0.2mg Na2HPO4, 0.05mg NaN3.

Immunogen

A synthetic peptide corresponding to a sequence in the middle region of human KCNQ1 (356-397aa QQKQRQKHFNRQIPAAASLIQTAWRCYAAENPDSSTWKIYIR), different from the related mouse sequence by two amino acids, and from the related rat sequence by one amino acid.

Purification

Immunogen affinity purified.

Cross Reactivity

No cross reactivity with other proteins.

Storage

At -20°C for one year. After r°Constitution, at 4°C for one month. It°Can also be aliquotted and stored frozen at -20°C for a longer time. Avoid repeated freezing and thawing.

Anti-KCNQ1 Picoband Antibody - Protein Information

Name KCNQ1 (HGNC:6294)

Function

Pore-forming subunit of the voltage-gated potassium (Kv) channel involved in the regulation of cardiomyocyte excitability and important in normal development and functions of myocardium, inner ear, stomach and colon (PubMed:10646604, PubMed:25441029). Associates with KCNE beta subunits that modulates current kinetics (PubMed: 10646604, PubMed:11101505, PubMed:19687231, PubMed:8900283, PubMed:9108097, PubMed:9312006). Induces a voltage-dependent current by rapidly activating and slowly deactivating potassium-selective outward current (PubMed: 10646604, PubMed:11101505, PubMed:25441029, PubMed:8900283, PubMed:9108097, PubMed:9312006). Also promotes a delayed voltage activated potassium current showing outward rectification characteristic (By similarity). During beta-adrenergic receptor stimulation, participates in cardiac repolarization by associating with KCNE1 to form the I(Ks) cardiac potassium current that increases the amplitude and slows down the activation kinetics of outward potassium current I(Ks) (By similarity) (PubMed:10646604, PubMed:11101505, PubMed: 8900283, PubMed: 9108097, PubMed:9312006). Muscarinic agonist oxotremorine-M strongly suppresses KCNQ1/KCNE1 current (PubMed: <a



href="http://www.uniprot.org/citations/10713961" target=" blank">10713961). When associated with KCNE3, forms the potassium channel that is important for cyclic AMP-stimulated intestinal secretion of chloride ions (PubMed: 10646604). This interaction with KCNE3 is reduced by 17beta-estradiol, resulting in the reduction of currents (By similarity). During conditions of increased substrate load, maintains the driving force for proximal tubular and intestinal sodium ions absorption, gastric acid secretion, and cAMP-induced jejunal chloride ions secretion (By similarity). Allows the provision of potassium ions to the luminal membrane of the secretory canaliculus in the resting state as well as during stimulated acid secretion (By similarity). When associated with KCNE2, forms a heterooligomer complex leading to currents with an apparently instantaneous activation, a rapid deactivation process and a linear current-voltage relationship and decreases the amplitude of the outward current (PubMed: 11101505). When associated with KCNE4, inhibits voltage-gated potassium channel activity (PubMed: 19687231). When associated with KCNE5, this complex only conducts current upon strong and continued depolarization (PubMed: 12324418). Also forms a heterotetramer with KCNQ5; has a voltage-gated potassium channel activity (PubMed: 24855057). Binds with phosphatidylinositol 4,5-bisphosphate (PubMed:25037568). KCNQ1-KCNE2 channel associates with Na(+)-coupled myo-inositol symporter in the apical membrane of choroid plexus epithelium and regulates the myo- inositol gradient between blood

Cellular Location

Cell membrane; Multi-pass membrane protein. Cytoplasmic vesicle membrane Early endosome. Membrane raft. Endoplasmic reticulum Basolateral cell membrane. Apical cell membrane {ECO:0000250|UniProtKB:P97414}; Multi-pass membrane protein. Note=Colocalized with KCNE3 at the plasma membrane (PubMed:10646604). Upon 17beta-oestradiol treatment, colocalizes with RAB5A at early endosome (PubMed:23529131). Heterotetramer with KCNQ5 is highly retained at the endoplasmic reticulum and is localized outside of lipid raft microdomains (PubMed:24855057). During the early stages of epithelial cell polarization induced by the calcium switch, it is removed from the plasma membrane to the endoplasmic reticulum, where it is retained, and redistributed to the basolateral cell surface in a PI3K-dependent manner at a later stage (PubMed:21228319). Colocalizes with SLC5A3 at the apical membrane of choroid plexus epithelium {ECO:0000250|UniProtKB:P97414, ECO:0000269|PubMed:10646604, ECO:0000269|PubMed:21228319, ECO:0000269|PubMed:23529131, ECO:0000269|PubMed:24855057}

and cerebrospinal fluid with an impact on neuron excitability (By similarity).

Tissue Location

Abundantly expressed in heart, pancreas, prostate, kidney, small intestine and peripheral blood leukocytes. Less abundant in placenta, lung, spleen, colon, thymus, testis and ovaries

Anti-KCNQ1 Picoband Antibody - Protocols

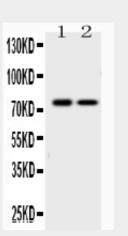
Provided below are standard protocols that you may find useful for product applications.

- Western Blot
- Blocking Peptides
- Dot Blot
- Immunohistochemistry
- Immunofluorescence
- Immunoprecipitation
- Flow Cytomety



• Cell Culture

Anti-KCNQ1 Picoband Antibody - Images



Western blot analysis of KCNQ1 expression in rat cardiac muscle extract (lane 1) and K562 whole cell lysates (lane 2). KCNQ1 at 75KD was detected using rabbit anti- KCNQ1 Antigen Affinity purified polyclonal antibody (Catalog # ABO10054) at 0.5 \hat{l}_{4} g/mL. The blot was developed using chemiluminescence (ECL) method .

Anti-KCNQ1 Picoband Antibody - Background

Kv7.1 (KvLQT1) is a potassium channel protein whose primary subunit in humans is encoded by the KCNQ1 gene. This protein can form heteromultimers with two other potassium channel proteins, KCNE1 and KCNE3. Mutations in this gene are associated with hereditary long QT syndrome 1 (also known as Romano-Ward syndrome), Jervell and Lange-Nielsen syndrome, and familial atrial fibrillation. This gene exhibits tissue-specific imprinting, with preferential expression from the maternal allele in some tissues, and biallelic expression in others. And this gene is located in a region of chromosome 11 amongst other imprinted genes that are associated with Beckwith-Wiedemann syndrome (BWS), and itself has been shown to be disrupted by chromosomal rearrangements in patients with BWS. Alternatively spliced transcript variants have been found for this gene.