

PGR/PR Antibody (Center)

Affinity Purified Rabbit Polyclonal Antibody (Pab) Catalog # AP13057c

Specification

PGR/PR Antibody (Center) - Product Information

Application IHC-P, WB,E **Primary Accession** P06401 Other Accession NP 000917.3 Reactivity Human Host **Rabbit** Clonality **Polyclonal** Isotype Rabbit IgG Calculated MW 98981 Antigen Region 349-377

PGR/PR Antibody (Center) - Additional Information

Gene ID 5241

Other Names

Progesterone receptor, PR, Nuclear receptor subfamily 3 group C member 3, PGR, NR3C3

Target/Specificity

This PGR/PR antibody is generated from rabbits immunized with a KLH conjugated synthetic peptide between 349-377 amino acids from the Central region of human PGR/PR.

Dilution

IHC-P~~1:10~50 WB~~1:1000

E~~Use at an assay dependent concentration.

Format

Purified polyclonal antibody supplied in PBS with 0.09% (W/V) sodium azide. This antibody is purified through a protein A column, followed by peptide affinity purification.

Storage

Maintain refrigerated at 2-8°C for up to 2 weeks. For long term storage store at -20°C in small aliquots to prevent freeze-thaw cycles.

Precautions

PGR/PR Antibody (Center) is for research use only and not for use in diagnostic or therapeutic procedures.

PGR/PR Antibody (Center) - Protein Information

Name PGR



Synonyms NR3C3

Function The steroid hormones and their receptors are involved in the regulation of eukaryotic gene expression and affect cellular proliferation and differentiation in target tissues. Depending on the isoform, progesterone receptor functions as a transcriptional activator or repressor.

Cellular Location

Nucleus. Cytoplasm. Note=Nucleoplasmic shuttling is both hormone- and cell cycle-dependent. On hormone stimulation, retained in the cytoplasm in the G(1) and G(2)/M phases [Isoform 4]: Mitochondrion outer membrane

Tissue Location

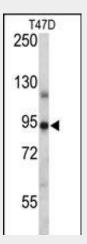
In reproductive tissues the expression of isoform A and isoform B varies as a consequence of developmental and hormonal status. Isoform A and isoform B are expressed in comparable levels in uterine glandular epithelium during the proliferative phase of the menstrual cycle. Expression of isoform B but not of isoform A persists in the glands during mid-secretory phase. In the stroma, isoform A is the predominant form throughout the cycle. Heterogeneous isoform expression between the glands of the endometrium basalis and functionalis is implying region-specific responses to hormonal stimuli

PGR/PR Antibody (Center) - 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

PGR/PR Antibody (Center) - Images



PGR/PR Antibody (Center) (Cat. #AP13057c) western blot analysis in T47D cell line lysates (35ug/lane). This demonstrates the PGR/PR antibody detected the PGR/PR protein (arrow).





PGR/PR Antibody (Center) (Cat. #AP13057c)immunohistochemistry analysis in formalin fixed and paraffin embedded human uterus tissue followed by peroxidase conjugation of the secondary antibody and DAB staining. This data demonstrates the use of PGR/PR Antibody (Center) for immunohistochemistry. Clinical relevance has not been evaluated.

PGR/PR Antibody (Center) - Background

This gene encodes a member of the steroid receptor superfamily. The encoded protein mediates the physiological effects of progesterone, which plays a central role in reproductive events associated with the establishment and maintenance of pregnancy. This gene uses two distinct promotors and translation start sites in the first exon to produce two isoforms, A and B. The two isoforms are identical except for the additional 165 amino acids found in the N-terminus of isoform B and mediate their own response genes and physiologic effects with little overlap. The location of transcription initiation for isoform A has not been clearly determined.

PGR/PR Antibody (Center) - References

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Tang, P., et al. Cancer Invest. 28(9):978-982(2010)
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Taylor, K.C., et al. Horm Res Paediatr (2010) In press:
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