

LZIC Antibody (Center)

Affinity Purified Rabbit Polyclonal Antibody (Pab) Catalog # AP17735c

Specification

LZIC Antibody (Center) - Product Information

Application IF, WB, FC, IHC-P-Leica, E

Primary Accession <u>Q8WZA0</u>

Other Accession <u>Q5PQN7</u>, <u>Q8K3C3</u>, <u>Q6DHH7</u>, <u>NP 115744.2</u>

Reactivity
Predicted

Human, Rat
Zebrafish, Mouse

Host Rabbit
Clonality Polyclonal
Isotype Rabbit IgG
Antigen Region 81-109

LZIC Antibody (Center) - Additional Information

Gene ID 84328

Other Names

Protein LZIC, Leucine zipper and CTNNBIP1 domain-containing protein, Leucine zipper and ICAT homologous domain-containing protein, LZIC

Target/Specificity

This LZIC antibody is generated from rabbits immunized with a KLH conjugated synthetic peptide between 81-109 amino acids from the Central region of human LZIC.

Dilution

IF~~1:25

WB~~1:2000

FC~~1:25

IHC-P-Leica~~1:500

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

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

LZIC Antibody (Center) - Protein Information





Name LZIC

Tissue Location

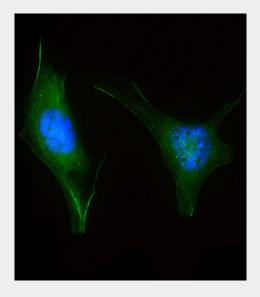
Ubiquitously expressed, with highest levels in kidney. Up-regulated in several cases of gastric cancers

LZIC Antibody (Center) - Protocols

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

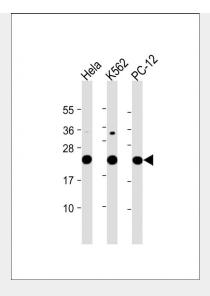
- Western Blot
- Blocking Peptides
- Dot Blot
- <u>Immunohistochemistry</u>
- Immunofluorescence
- <u>Immunoprecipitation</u>
- Flow Cytomety
- Cell Culture

LZIC Antibody (Center) - Images



Immunofluorescent analysis of 4% paraformaldehyde-fixed, 0. 1% Triton X-100 permeabilized Hela cells labeling LZIC with AP17735 at 1/25 dilution, followed by Dylight® 488-conjugated goat anti-Rabbit IgG secondary antibody at 1/200 dilution (green). Immunofluorescence image showing Nucleus and Cytoplasm Weak Membrane staining on Hela cell line. The nuclear counter stain is DAPI (blue).



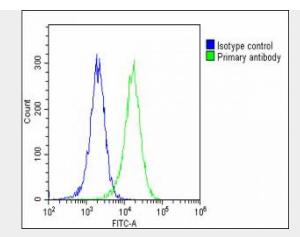


All lanes : Anti-LZIC Antibody (Center) at 1:2000 dilution Lane 1: Hela whole cell lysate Lane 2: K562 whole cell lysate Lane 3: PC-12 whole cell lysate Lysates/proteins at 20 μ g per lane. Secondary Goat Anti-Rabbit IgG, (H+L), Peroxidase conjugated at 1/10000 dilution. Predicted band size : 21 kDa Blocking/Dilution buffer: 5% NFDM/TBST.



Immunohistochemical analysis of paraffin-embedded human kidney tissue using AP17735 performed on the Leica® BOND RXm. Samples were incubated with primary antibody(1/500) for 1 hours at room temperature. A undiluted biotinylated CRF Anti-Polyvalent HRP Polymer antibody was used as the secondary antibody.





Overlay histogram showing Hela cells stained with AP17735c(green line). The cells were fixed with 2% paraformaldehyde (10 min) and then permeabilized with 90% methanol for 10 min. The cells were then icubated in 2% bovine serum albumin to block non-specific protein-protein interactions followed by the antibody (AP17735c, 1:25 dilution) for 60 min at 37 $^{\circ}$ C. The secondary antibody used was Goat-Anti-Rabbit IgG, DyLight® 488 Conjugated Highly Cross-Adsorbed(1583138) at 1/200 dilution for 40 min at 37 $^{\circ}$ C. Isotype control antibody (blue line) was rabbit IgG1 (1 μ g/1x10 $^{\circ}$ 6 cells) used under the same conditions. Acquisition of >10, 000 events was performed.

LZIC Antibody (Center) - Background

LZIC belongs to the CTNNBIP1 family. It is ubiquitously expressed with highest levels in kidney. LZIC is up-regulated in several cases of gastric cancers.

LZIC Antibody (Center) - References

Bailey, S.D., et al. Diabetes Care 33(10):2250-2253(2010) Talmud, P.J., et al. Am. J. Hum. Genet. 85(5):628-642(2009) Lamesch, P., et al. Genomics 89(3):307-315(2007) Katoh, M. Int. J. Mol. Med. 8(6):611-615(2001)