

PDGFRB Antibody (N-term)
Purified Rabbit Polyclonal Antibody (Pab)
Catalog # AP7667a

Specification

PDGFRB Antibody (N-term) - Product Information

Application	WB, IHC-P, IF, FC,E
Primary Accession	P09619
Reactivity	Human
Host	Rabbit
Clonality	Polyclonal
Isotype	Rabbit IgG
Antigen Region	40-72

PDGFRB Antibody (N-term) - Additional Information

Gene ID 5159

Other Names

Platelet-derived growth factor receptor beta, PDGF-R-beta, PDGFR-beta, Beta platelet-derived growth factor receptor, Beta-type platelet-derived growth factor receptor, CD140 antigen-like family member B, Platelet-derived growth factor receptor 1, PDGFR-1, CD140b, PDGFRB, PDGFR, PDGFR1

Target/Specificity

This PDGFRB antibody is generated from rabbits immunized with a KLH conjugated synthetic peptide between 40-72 amino acids from the N-terminal region of human PDGFRB.

Dilution

WB~~1:1000
IHC-P~~1:10~50
IF~~1:10~50
FC~~1:10~50
E~~Use at an assay dependent concentration.

Format

Purified polyclonal antibody supplied in PBS with 0.09% (W/V) sodium azide. This antibody is prepared by Saturated Ammonium Sulfate (SAS) precipitation followed by dialysis against PBS.

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

PDGFRB Antibody (N-term) is for research use only and not for use in diagnostic or therapeutic procedures.

PDGFRB Antibody (N-term) - Protein Information

Name PDGFRB**Synonyms** PDGFR, PDGFR1

Function Tyrosine-protein kinase that acts as a cell-surface receptor for homodimeric PDGFB and PDGFD and for heterodimers formed by PDGFA and PDGFB, and plays an essential role in the regulation of embryonic development, cell proliferation, survival, differentiation, chemotaxis and migration. Plays an essential role in blood vessel development by promoting proliferation, migration and recruitment of pericytes and smooth muscle cells to endothelial cells. Plays a role in the migration of vascular smooth muscle cells and the formation of neointima at vascular injury sites. Required for normal development of the cardiovascular system. Required for normal recruitment of pericytes (mesangial cells) in the kidney glomerulus, and for normal formation of a branched network of capillaries in kidney glomeruli. Promotes rearrangement of the actin cytoskeleton and the formation of membrane ruffles. Binding of its cognate ligands - homodimeric PDGFB, heterodimers formed by PDGFA and PDGFB or homodimeric PDGFD -leads to the activation of several signaling cascades; the response depends on the nature of the bound ligand and is modulated by the formation of heterodimers between PDGFRA and PDGFRB. Phosphorylates PLCG1, PIK3R1, PTPN11, RASA1/GAP, CBL, SHC1 and NCK1. Activation of PLCG1 leads to the production of the cellular signaling molecules diacylglycerol and inositol 1,4,5-trisphosphate, mobilization of cytosolic Ca(2+) and the activation of protein kinase C. Phosphorylation of PIK3R1, the regulatory subunit of phosphatidylinositol 3-kinase, leads to the activation of the AKT1 signaling pathway. Phosphorylation of SHC1, or of the C-terminus of PTPN11, creates a binding site for GRB2, resulting in the activation of HRAS, RAF1 and down-stream MAP kinases, including MAPK1/ERK2 and/or MAPK3/ERK1. Promotes phosphorylation and activation of SRC family kinases. Promotes phosphorylation of PDCD6IP/ALIX and STAM. Receptor signaling is down-regulated by protein phosphatases that dephosphorylate the receptor and its down-stream effectors, and by rapid internalization of the activated receptor.

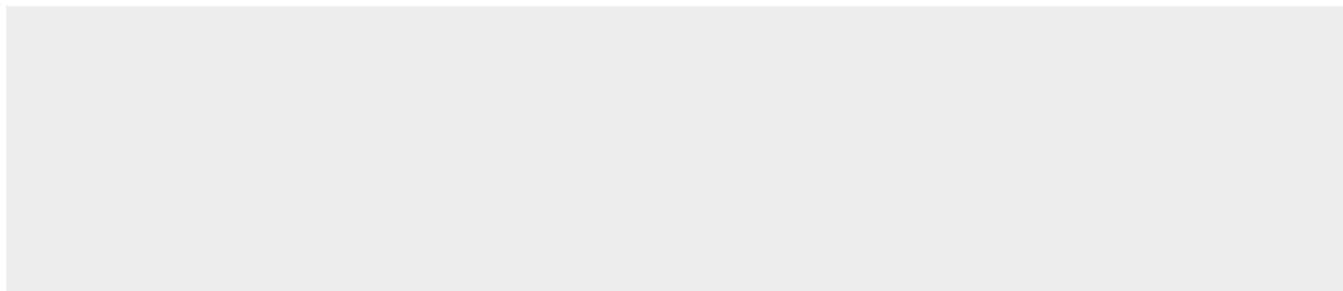
Cellular Location

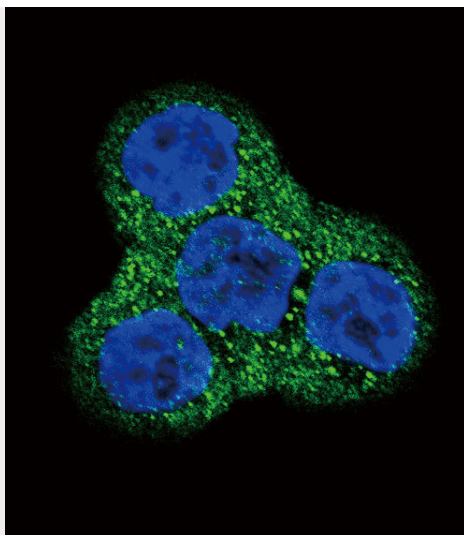
Cell membrane; Single-pass type I membrane protein. Cytoplasmic vesicle. Lysosome lumen. Note=After ligand binding, the autophosphorylated receptor is ubiquitinated and internalized, leading to its degradation

PDGFRB Antibody (N-term) - Protocols

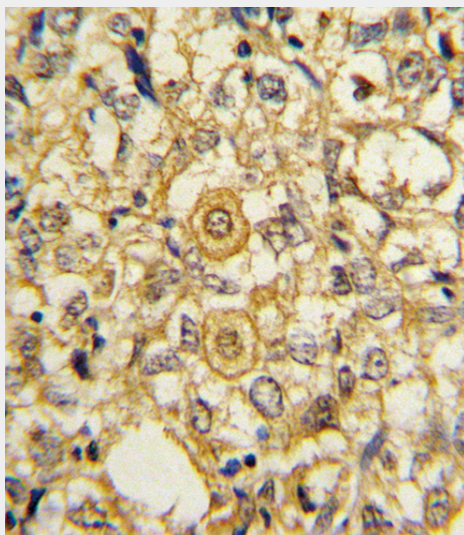
Provided below are standard protocols that you may find useful for product applications.

- [Western Blot](#)
- [Blocking Peptides](#)
- [Dot Blot](#)
- [Immunohistochemistry](#)
- [Immunofluorescence](#)
- [Immunoprecipitation](#)
- [Flow Cytometry](#)
- [Cell Culture](#)

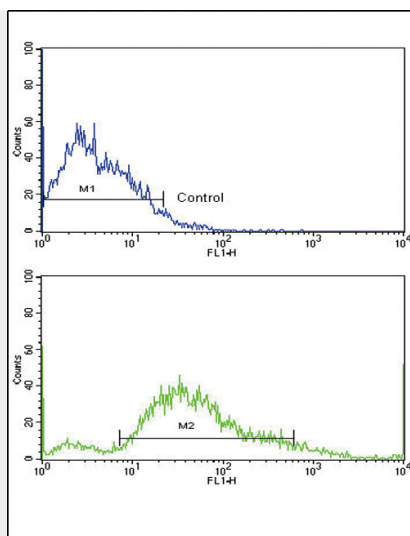
PDGFRB Antibody (N-term) - Images



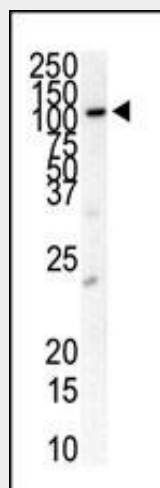
Confocal immunofluorescent analysis of PDGFRB Antibody (N-term)(Cat#AP7667a) with WiDr cell followed by Alexa Fluor 488-conjugated goat anti-rabbit IgG (green).DAPI was used to stain the cell nuclear (blue).



Formalin-fixed and paraffin-embedded human breast carcinoma reacted with PDGFRB Antibody (N-term), which was peroxidase-conjugated to the secondary antibody, followed by DAB staining. This data demonstrates the use of this antibody for immunohistochemistry; clinical relevance has not been evaluated.



Flow cytometric analysis of SK-Br-3 cells using PDGFRB Antibody (N-term)(bottom histogram) compared to a negative control cell (top histogram). FITC-conjugated goat-anti-rabbit secondary antibodies were used for the analysis.



Western blot analysis of anti-PDGFRB Antibody (N-term) (Cat. #AP7667a) in cell line lysates (35ug/lane). PDGFRB(arrow) was detected using the purified Pab).

PDGFRB Antibody (N-term) - Background

PDGFRB is a cell surface tyrosine kinase receptor for members of the platelet-derived growth factor family. These growth factors are mitogens for cells of mesenchymal origin. The identity of the growth factor bound to a receptor monomer determines whether the functional receptor is a homodimer or a heterodimer, composed of both platelet-derived growth factor receptor alpha and beta polypeptides. The gene is flanked on chromosome 5 by the genes for granulocyte-macrophage colony-stimulating factor and macrophage-colony stimulating factor receptor; all three genes may be implicated in the 5-q syndrome. A translocation between chromosomes 5 and 12, that fuses the gene to that of the translocation, ETS, leukemia gene, results in chronic myelomonocytic leukemia.

PDGFRB Antibody (N-term) - References

Wu, H., et al., J. Biol. Chem. 278(42):40425-40428 (2003).
Whiteman, E.L., et al., Endocrinology 144(9):3811-3820 (2003).
Uren, A., et al., Oncogene 22(15):2334-2342 (2003).
Steer, E.J., et al., Acta Haematol. 107(2):113-122 (2002).

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