

Summary

Production Name	PPAR-γ Rabbit Polyclonal Antibody
Description	Rabbit Polyclonal Antibody
Host	Rabbit
Application	IF,WB,IHC,ELISA
Reactivity	Human, Mouse, Rat

Performance

Conjugation	Unconjugated
Modification	Unmodified
lsotype	IgG
Clonality	Polyclonal
Form	Liquid
Storage	Store at 4°C short term. Aliquot and store at -20°C long term. Avoid freeze/thaw
	cycles.
Buffer	Liquid in PBS containing 50% glycerol, 0.5% BSA and 0.02% New type preservative N.
Purification	Affinity purification

Immunogen

Gene Name	PPARG
Alternative Names	PPARG; NR1C3; Peroxisome proliferator-activated receptor gamma; PPAR-gamma;
	Nuclear receptor subfamily 1 group C member 3
Gene ID	5468.0
SwissProt ID	P37231.The antiserum was produced against synthesized peptide derived from human
	PPAR-gamma. AA range:78-127

Application

Dilution Ratio	IF 1:50-200 WB 1:500 - 1:2000. IHC 1:100 - 1:300. ELISA: 1:10000. Not yet tested in other
	applications.
Molecular Weight	57kD



Background

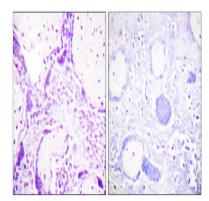
peroxisome proliferator activated receptor gamma(PPARG) Homo sapiens This gene encodes a member of the peroxisome proliferator-activated receptor (PPAR) subfamily of nuclear receptors. PPARs form heterodimers with retinoid X receptors (RXRs) and these heterodimers regulate transcription of various genes. Three subtypes of PPARs are known: PPAR-alpha, PPAR-delta, and PPAR-gamma. The protein encoded by this gene is PPAR-gamma and is a regulator of adipocyte differentiation. Additionally, PPAR-gamma has been implicated in the pathology of numerous diseases including obesity, diabetes, atherosclerosis and cancer. Alternatively spliced transcript variants that encode different isoforms have been described. [provided by RefSeq, Jul 2008], alternative products: Additional isoforms seem to exist, disease: Defects in PPARG are the cause of familial partial lipodystrophy type 3 (FPLD3) [MIM:604367]. Familial partial lipodystrophies (FPLD) are a heterogeneous group of genetic disorders characterized by marked loss of subcutaneous (sc) fat from the extremities. Affected individuals show an increased preponderance of insulin resistance, diabetes mellitus and dyslipidemia., disease: Defects in PPARG can lead to type 2 insulin-resistant diabetes and hyptertension., disease: Defects in PPARG may be associated with colon cancer., disease: Defects in PPARG may be associated with susceptibility to obesity [MIM:601665]., disease: Variation in PPARG is associated with carotid intimal medial thickness 1 (CIMT1) [MIM:609338]. CIMT is a measure of atherosclerosis that is independently associated with traditional atherosclerotic cardiovascular disease risk factors and coronary atherosclerotic burden. 35 to 45% of the variability in multivariable-adjusted CIMT is explained by genetic factors., function: Receptor that binds peroxisome proliferators such as hypolipidemic drugs and fatty acids. Once activated by a ligand, the receptor binds to a promoter element in the gene for acyl-CoA oxidase and activates its transcription. It therefore controls the peroxisomal beta-oxidation pathway of fatty acids. Key regulator of adipocyte differentiation and glucose homeostasis.,online information:Peroxisome proliferator-activated receptor entry,online information: The Singapore human mutation and polymorphism database, polymorphism: Genetic variation in PPARG may influence body mass index (BMI) [MIM:606641]. BMI reflects the amount of fat, lean mass, and body build.,similarity:Belongs to the nuclear hormone receptor family.,similarity:Belongs to the nuclear hormone receptor family. NR1 subfamily., similarity: Contains 1 nuclear receptor DNA-binding domain., subunit: Forms a heterodimer with the retinoic acid receptor RXRA called adipocyte-specific transcription factor ARF6. Interacts with NCOA6 coactivator, leading to a strong increase in transcription of target genes. Interacts with coactivator PPARBP, leading to a mild increase in transcription of target genes. Interacts with FAM120B (By similarity). Interacts with NOCA7 in a ligand-inducible manner. Interacts with NCOA1 LXXLL motifs. Interacts with TGFB111. Interacts with DNTTIP2., tissue specificity: Highest expression in adipose tissue. Lower in skeletal muscle, spleen, heart and liver. Also detectable in placenta, lung and ovary.,

Research Area

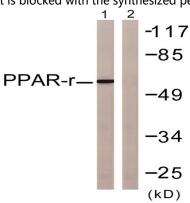
Protein_Acetylation

Image Data

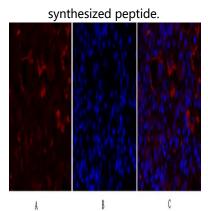




Immunohistochemistry analysis of paraffin-embedded human placenta tissue, using PPAR-gamma Antibody. The picture on the right is blocked with the synthesized peptide.

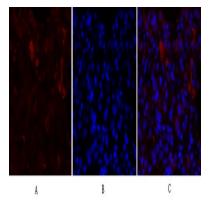


Western blot analysis of lysates from HUVEC cells, using PPAR-gamma Antibody. The lane on the right is blocked with the

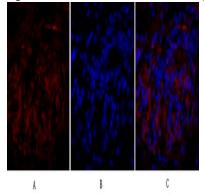


Immunofluorescence analysis of rat-lung tissue. 1,PPAR-γ Polyclonal Antibody (red) was diluted at 1:200 (4°C,overnight) . 2, Cy3 labled Secondary antibody was diluted at 1:300 (room temperature, 50min) .3, Picture B: DAPI (blue) 10min. Picture A:Target. Picture B: DAPI. Picture C: merge of A+B



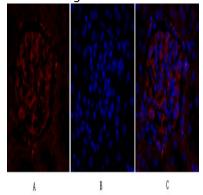


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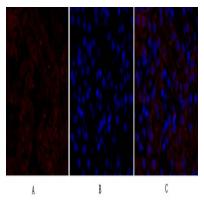
Picture A:Target. Picture B: DAPI. Picture C: merge of A+B

Immunofluorescence analysis of rat-kidney tissue. 1,PPAR-γ Polyclonal Antibody (red) was diluted at 1:200 (4°C,overnight) . 2, Cy3 labled Secondary antibody was diluted at 1:300 (room temperature, 50min) .3, Picture B: DAPI (blue) 10min. Picture A:Target. Picture B: DAPI. Picture C: merge of A+B

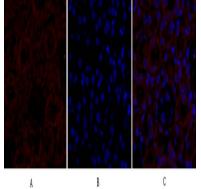


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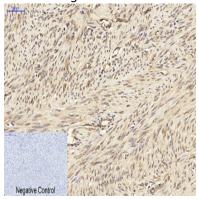




Immunofluorescence analysis of mouse-kidney tissue. 1,PPAR-γ Polyclonal Antibody (red) was diluted at 1:200 (4°C,overnight) . 2, Cy3 labled Secondary antibody was diluted at 1:300 (room temperature, 50min) .3, Picture B: DAPI (blue) 10min. Picture A:Target. Picture B: DAPI. Picture C: merge of A+B



Immunofluorescence analysis of mouse-kidney tissue. 1,PPAR-γ Polyclonal Antibody (red) was diluted at 1:200 (4°C,overnight) . 2, Cy3 labled Secondary antibody was diluted at 1:300 (room temperature, 50min) .3, Picture B: DAPI (blue) 10min. Picture A:Target. Picture B: DAPI. Picture C: merge of A+B



Immunohistochemical analysis of paraffin-embedded Human-uterus tissue. 1,PPAR-γ Polyclonal Antibody was diluted at 1:200 (4°C,overnight) . 2, Sodium citrate pH 6.0 was used for antibody retrieval (>98°C,20min) . 3,Secondary antibody was diluted at 1:200 (room tempeRature, 30min) . Negative control was used by secondary antibody only.



Note

For research use only.