

## Produktinformation



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Diagnostik & molekulare Diagnostik



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# **PRODUCT INFORMATION**



## IP Receptor (human) Polyclonal Antibody

Item No. 10005518

#### **Overview and Properties**

This vial contains 500 µl of peptide affinity-purified polyclonal antibody. Contents: Synonyms: PGI<sub>2</sub> Receptor; Prostacyclin Receptor; Prostaglandin I<sub>2</sub> Receptor Immunogen: Synthetic peptide from the N-terminal region of human IP receptor

Cross Reactivity: (+) IP Receptor

Species Reactivity: (+) Human and mouse; other species not tested

**Uniprot No.:** P43119 Form: Liquid

-20°C (as supplied) Storage:

Stability: ≥3 years

Storage Buffer: TBS, pH 7.4, with 50% glycerol, 0.1% BSA, and 0.02% sodium azide

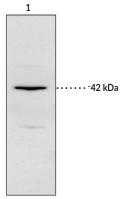
Rabbit Host:

Western blot; the recommended starting dilution is 1:200. Other applications were Application:

not tested, therefore optimal working concentration/dilution should be determined

empirically.

#### **Image**



Lane 1: RT4 cell lysate (50 µg)

WARNING
THIS PRODUCT IS FOR RESEARCH ONLY - NOT FOR HUMAN OR VETERINARY DIAGNOSTIC OR THERAPEUTIC USE.

This material should be considered hazardous until further information becomes available. Do not ingest, inhale, get in eyes, on skin, or on clothing. Wash thoroughly after handling. Before use, the user must review the complete Safety Data Sheet, which has been sent via email to your institution.

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## PRODUCT INFORMATION



#### Description

The IP Receptor is a class A rhodopsin-like G protein-coupled receptor that mediates the actions of prostaglandin I<sub>2</sub> (PGI<sub>2</sub>).<sup>1</sup> The C-terminal intracellular tail of the IP receptor undergoes isoprenylation and palmitoylation that results in anchoring of the tail to the plasma membrane. The IP receptor is expressed in platelets and vascular smooth muscle cells and in the aorta, lungs, heart, and kidneys.<sup>1,2</sup> It signals through G proteins in a cell type- and expression-dependent manner and is involved in cardiovascular, inflammatory, and immune functions, as well as the pain response.<sup>1,3-6</sup> An arginine-to-cysteine mutation at position 212 in the IP receptor inhibits its ability to activate adenylyl cyclase, which leads to increased platelet aggregation ex vivo and increases disease severity and the incidence of cardiovascular events in patients with a high risk of cardiovascular disease.<sup>7</sup> The human IP receptor is N-terminally truncated by 28 amino acids compared with the murine receptor.<sup>8,9</sup> Cayman's IP Receptor (human) Polyclonal Antibody can be used for Western blot (WB). The antibody recognizes the IP receptor at approximately 42 kDa from human and mouse samples.

#### References

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