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Rabbit Anti-Calcium Sensing Receptor antibody

SL8524R

Product Name:	Calcium Sensing Receptor
Chinese Name:	钙敏感受体1抗体
Alias:	Ca sensing receptor; Ca2+ sensing receptor 1; Ca2+ sensing receptor; CAR; CaSR; CASR_HUMAN; EIG8; Extracellular calcium sensing receptor; Extracellular calcium sensing receptor [Precursor]; Extracellular calcium-sensing receptor [Precursor]; Extracellular calcium-sensing receptor; FHH; FIH; GPRC2A; HHC; HHC1; Hypocalciuric hypercalcemia 1; Hypocalciuric hypercalcemia 1 severe neonatal hyperparathyroidism; MGC138441; NSHPT; Parathyroid Ca(2+) sensing receptor 1; Parathyroid Cell calcium sensing receptor; Parathyroid Cell calcium-sensing receptor; PCAR 1; PCAR1.
文献引用 PubMed :	**Specific References(1)**|SL8524R has been referenced in 1 publications. **[IF=2.91]**Huang, Bo, et al. "Chitosan oligosaccharide reduces intestinal inflammation that involves CaSR activation in LPS challenged-piglets." Journal of Agricultural and Food Chemistry (2016).**WB;Pig**. PubMed:26654156
Organism Species:	Rabbit
Clonality:	Polyclonal
React Species:	Human,Mouse,Rat,Dog,Pig,Cow,Horse,
Applications:	WB=1:500-2000ELISA=1:500-1000 not yet tested in other applications. optimal dilutions/concentrations should be determined by the end user.
Molecular weight:	118kDa
Cellular localization:	The cell membrane
Form:	Lyophilized or Liquid
Concentration:	1mg/ml
immunogen:	KLH conjugated synthetic peptide derived from human Calcium Sensing Receptor/CaSR:121-220/1078<Extracellular>

Lsotype:	IgG
Purification:	affinity purified by Protein A
Storage Buffer:	0.01M TBS(pH7.4) with 1% BSA, 0.03% Proclin300 and 50% Glycerol.
Storage:	Store at -20 °C for one year. Avoid repeated freeze/thaw cycles. The lyophilized antibody is stable at room temperature for at least one month and for greater than a year when kept at -20°C. When reconstituted in sterile pH 7.4 0.01M PBS or diluent of antibody the antibody is stable for at least two weeks at 2-4 °C.
PubMed:	PubMed
Product Detail:	Extracellular calcium-sensing receptor (CaSR), also designated parathyroid cell calcium-sensing receptor, is an integral membrane protein that belongs to the G protein-coupled receptor 3 family. CaSR is involved in maintaining a stable calcium concentration by acting as an sensor of the extracellular calcium levels for the parathyroid and kidney. Its activity is mediated by a G protein which activates a phosphatidylinositol-calcium second messenger **Function:** Senses changes in the extracellular concentration of calcium ions. The activity of this receptor is mediated by a G-protein that activates a phosphatidylinositol-calcium second messenger system. **Subunit:** Interacts with VCP and RNF19A. Interacts with ARRB1 (By similarity). **Subcellular Location:** Cell membrane. **Tissue Specificity:** Expressed in the temporal lobe, frontal lobe, parietal lobe, hippocampus, and cerebellum. Also found in kidney, lung, liver, heart, skeletal muscle, placenta. **Post-translational modifications:** N-glycosylated. Ubiquitinated by RNF19A; which induces proteasomal degradation. **DISEASE:** Defects in CASR are the cause of familial hypocalciuric hypercalcemia type 1 (FHH) [MIM:145980]. FHH is characterized by altered calcium homeostasis. Affected individuals exhibit mild or modest hypercalcemia, relative hypocalciuria, and inappropriately normal PTH levels. Defects in CASR are the cause of neonatal severe primary hyperparathyroidism (NSHPT) [MIM:239200]. NSHPT is a rare autosomal recessive life-threatening disorder characterized by very high serum calcium concentrations, skeletal demineralization, and parathyroid hyperplasia. In some instances NSHPT has been demonstrated to be the homozygous form of FHH. Defects in CASR are a cause of familial isolated hypoparathyroidism (FIH) [MIM:146200]; also called autosomal dominant hypoparathyroidism or autosomal

dominant hypocalcemia. FIH is characterized by hypocalcemia and hyperphosphatemia due to inadequate secretion of parathyroid hormone. Symptoms are seizures, tetany and cramps. An autosomal recessive form of FIH also exists.
Defects in CASR are the cause of epilepsy, idiopathic generalized type 8 (EIG8) [MIM:612899]. A disorder characterized by recurring generalized seizures in the absence of detectable brain lesions and/or metabolic abnormalities. Seizure types are variable, but include myoclonic seizures, absence seizures, febrile seizures, complex partial seizures, and generalized tonic-clonic seizures.
Note=Homozygous defects in CASR can be a cause of primary hyperparathyroidism in adulthood. Patients suffer from osteoporosis and renal calculi, have marked hypercalcemia and increased serum PTH concentrations.

Similarity:
Belongs to the G-protein coupled receptor 3 family.

SWISS:
P41180

Gene ID:
846

Database links:

Entrez Gene: 281038Cow

Entrez Gene: 846Human

Entrez Gene: 12374Mouse

Entrez Gene: 24247Rat

Omim: 601199Human

SwissProt: P35384Cow

SwissProt: P41180Human

SwissProt: Q9QY96Mouse

SwissProt: P48442Rat

Unigene: 435615Human

Unigene: 103619Mouse

Unigene: 10019Rat

Important Note:
This product as supplied is intended for research use only, not for use in human,

	therapeutic or diagnostic applications.