

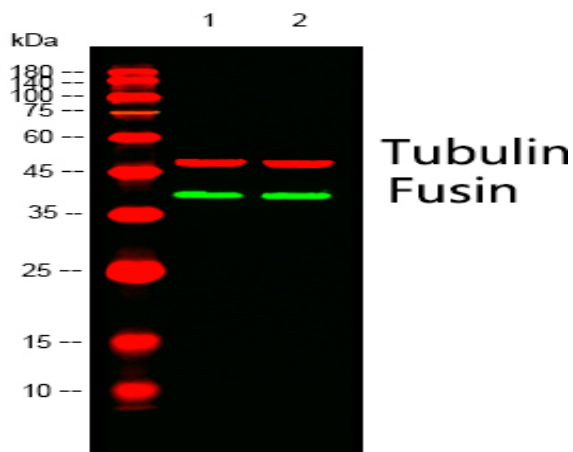
## Fusin Polyclonal Antibody

<b>Catalog No :</b>	YT1800
<b>Reactivity :</b>	Human;Mouse;Rat
<b>Applications :</b>	WB;IF;ELISA
<b>Target :</b>	CXCR4
<b>Fields :</b>	>>Viral life cycle - HIV-1;>>Calcium signaling pathway;>>Cytokine-cytokine receptor interaction;>>Viral protein interaction with cytokine and cytokine receptor;>>Chemokine signaling pathway;>>Endocytosis;>>Axon guidance;>>Leukocyte transendothelial migration;>>Intestinal immune network for IgA production;>>Regulation of actin cytoskeleton;>>Human cytomegalovirus infection;>>Human immunodeficiency virus 1 infection;>>Pathways in cancer
<b>Gene Name :</b>	CXCR4
<b>Protein Name :</b>	C-X-C chemokine receptor type 4
<b>Human Gene Id :</b>	7852
<b>Human Swiss Prot No :</b>	P61073
<b>Mouse Gene Id :</b>	12767
<b>Mouse Swiss Prot No :</b>	P70658
<b>Rat Swiss Prot No :</b>	O08565
<b>Immunogen :</b>	The antiserum was produced against synthesized peptide derived from human CXCR4. AA range:300-349
<b>Specificity :</b>	Fusin Polyclonal Antibody detects endogenous levels of Fusin protein.
<b>Formulation :</b>	Liquid in PBS containing 50% glycerol, 0.5% BSA and 0.02% sodium azide.
<b>Source :</b>	Polyclonal, Rabbit,IgG

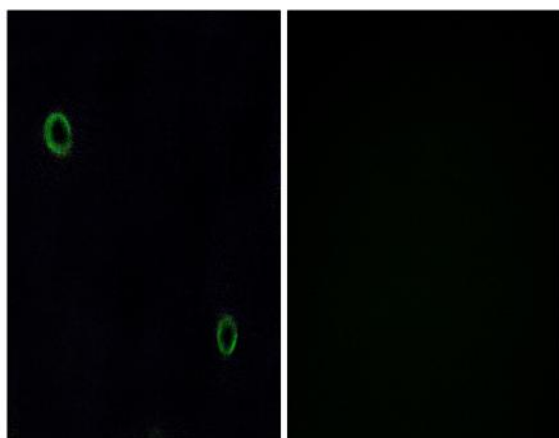
<b>Dilution :</b>	WB 1:500 - 1:2000. IF 1:200 - 1:1000. ELISA: 1:40000. Not yet tested in other applications.
<b>Purification :</b>	The antibody was affinity-purified from rabbit antiserum by affinity-chromatography using epitope-specific immunogen.
<b>Concentration :</b>	1 mg/ml
<b>Storage Stability :</b>	-15°C to -25°C/1 year(Do not lower than -25°C)
<b>Observed Band :</b>	36kD
<b>Cell Pathway :</b>	Cytokine-cytokine receptor interaction;Chemokine;Endocytosis;Axon guidance;Leukocyte transendothelial migration;Intestinal immune network for IgA production;
<b>Background :</b>	C-X-C motif chemokine receptor 4(CXCR4) Homo sapiens This gene encodes a CXC chemokine receptor specific for stromal cell-derived factor-1. The protein has 7 transmembrane regions and is located on the cell surface. It acts with the CD4 protein to support HIV entry into cells and is also highly expressed in breast cancer cells. Mutations in this gene have been associated with WHIM (warts, hypogammaglobulinemia, infections, and myelokathexis) syndrome. Alternate transcriptional splice variants, encoding different isoforms, have been characterized. [provided by RefSeq, Jul 2008],
<b>Function :</b>	alternative products:Additional isoforms seem to exist,caution:Was originally (PubMed:8329116 and PubMed:8234909) thought to be a receptor for neuropeptide Y type 3 (NPY3R) (NPY3-R).,disease:Defects in CXCR4 are a cause of WHIM syndrome [MIM:193670]; also called warts, hypogammaglobulinemia, infections, and myelokathexis. WHIM syndrome is an immunodeficiency disease characterized by neutropenia, hypogammaglobulinemia and extensive human papillomavirus (HPV) infection. Despite the peripheral neutropenia, bone marrow aspirates from affected individuals contain abundant mature myeloid cells, a condition termed myelokathexis.,domain:The amino-terminus is critical for ligand binding. Residues in all four extracellular regions contribute to HIV-1 coreceptor activity.,function:Receptor for the C-X-C chemokine CXCL12/SDF-1. Transduces a signal by increasing the intracellular calcium ions level.
<b>Subcellular Location :</b>	Cell membrane ; Multi-pass membrane protein . Cell junction. Early endosome. Late endosome. Lysosome. In unstimulated cells, diffuse pattern on plasma membrane. On agonist stimulation, colocalizes with ITCH at the plasma membrane where it becomes ubiquitinated. In the presence of antigen, distributes to the immunological synapse forming at the T-cell-APC contact area, where it localizes at the peripheral and distal supramolecular activation cluster (SMAC).
<b>Expression :</b>	Expressed in numerous tissues, such as peripheral blood leukocytes, spleen,

thymus, spinal cord, heart, placenta, lung, liver, skeletal muscle, kidney, pancreas, cerebellum, cerebral cortex and medulla (in microglia as well as in astrocytes), brain microvascular, coronary artery and umbilical cord endothelial cells. Isoform 1 is predominant in all tissues tested.

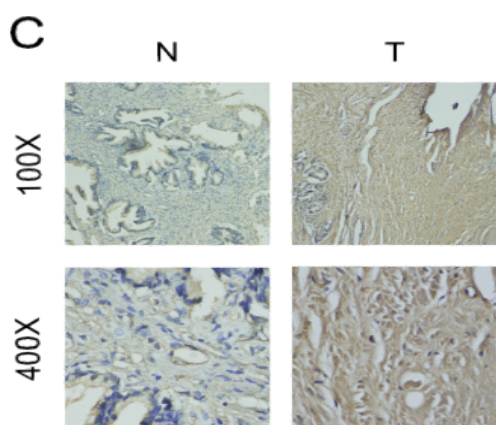
## Products Images



Western blot analysis of lysates from 1) HeLa, 2) mouse-brain cells, (Green) primary antibody was diluted at 1:1000, 4° over night, Dylight 800 secondary antibody(Immunoway:RS23920)was diluted at 1:10000, 37° 1 hour. (Red) Tubulin  $\beta$  Monoclonal Antibody(5G3) (Immunoway:YM3030) antibody was diluted at 1:5000 as loading control, 4° over night,Dylight 680 secondary antibody(Immunoway:RS23710)was diluted at 1:10000, 37° 1 hour.



Immunofluorescence analysis of A549 cells, using CXCR4 Antibody. The picture on the right is blocked with the synthesized peptide.



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