

Integrin αIIb rabbit pAb

Catalog No :	YT7836
Reactivity :	Human;Rat;Mouse;
Applications :	WB;ELISA
Target :	CD41
Fields :	>>Rap1 signaling pathway;>>PI3K-Akt signaling pathway;>>Focal adhesion;>>ECM-receptor interaction;>>Platelet activation;>>Neutrophil extracellular trap formation;>>Hematopoietic cell lineage;>>Regulation of actin cytoskeleton;>>Human papillomavirus infection;>>Pathways in cancer;>>Small cell lung cancer;>>Hypertrophic cardiomyopathy;>>Arrhythmogenic right ventricular cardiomyopathy;>>Dilated cardiomyopathy;>>Fluid shear stress and atherosclerosis
Gene Name :	ITGA2B GP2B ITGAB
Protein Name :	Integrin αIIb
Human Gene Id :	3674
Human Swiss Prot No :	P08514
Mouse Gene Id :	16399
Mouse Swiss Prot No :	Q9QUM0
Immunogen :	Synthesized peptide derived from human Integrin αIIb AA range: 1-80
Specificity :	This antibody detects endogenous levels of Human Integrin αIIb
Formulation :	Liquid in PBS containing 50% glycerol, 0.5% BSA and 0.02% sodium azide.
Source :	Polyclonal, Rabbit,IgG
Dilution :	WB 1:1000-2000 ELISA 1:5000-20000

Purification :	The antibody was affinity-purified from rabbit antiserum by affinity-chromatography using epitope-specific immunogen.
Concentration :	1 mg/ml
Storage Stability :	-15°C to -25°C/1 year(Do not lower than -25°C)
Molecularweight :	114kD
Background :	This gene encodes a member of the integrin alpha chain family of proteins. The encoded preproprotein is proteolytically processed to generate light and heavy chains that associate through disulfide linkages to form a subunit of the alpha-IIb/beta-3 integrin cell adhesion receptor. This receptor plays a crucial role in the blood coagulation system, by mediating platelet aggregation. Mutations in this gene are associated with platelet-type bleeding disorders, which are characterized by a failure of platelet aggregation, including Glanzmann thrombasthenia. [provided by RefSeq, Jan 2016],
Function :	disease:Defects in ITGA2B are a cause of Glanzmann thrombasthenia (GT) [MIM:273800]; also known as thrombasthenia of Glanzmann and Naegeli. This autosomal recessive disorder is the most common inherited disease of platelets. GT is characterized by mucocutaneous bleeding of mild-to-moderate severity and the inability of this integrin to recognize macromolecular or synthetic peptide ligands. GT has been classified clinically into types I and II. In type I, platelets show absence of the glycoprotein IIb/beta-3 complexes at their surface and lack fibrinogen and clot retraction capability. In type II, the platelets express the glycoprotein IIb/beta-3 complex at reduced levels (5-20% controls), have detectable amounts of fibrinogen, and have low or moderate clot retraction capability. The platelets of GT 'variants' have normal or near normal (60-100%) expression of dysfunctional receptors.,fun
Subcellular Location :	Membrane; Single-pass type I membrane protein.
Expression :	Isoform 1 and isoform 2 are expressed in platelets and megakaryocytes, but not in reticulocytes. Not detected in Jurkat, nor in U937 cell lines (PubMed:2351656). Isoform 3 is expressed in prostate adenocarcinoma, as well as in several erythroleukemia, prostate adenocarcinoma and melanoma cell lines, including PC-3, DU-145, HEL, WM983A, WM983B and WM35. Not detected in platelets, nor in normal prostate (at protein level) (PubMed:9809974).

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