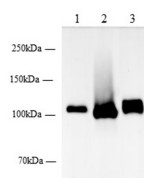


## DPP4/CD26 Polyclonal Antibody

catalog number: AN006840L

**Note:** Centrifuge before opening to ensure complete recovery of vial contents.

| Description  |  |
|--------------|--|
| Reactivity   | Mouse;Rat  |
| Immunogen    | Recombinant Mouse DPP4/CD26 protein expressed by Mammalian               |
| Host         | Rabbit   |
| Isotype      | IgG  |
| Purification | Antigen Affinity Purification  |
| Conjugation  | Unconjugated   |
| Buffer       | PBS with 0.05% proclin 300, 1% protective protein and 50% glycerol,pH7.4 |
| Applications | Recommended Dilution   |
| WB           | 1:1000-1:2000  |
| Data         |  |



Western blot with Anti DPP4/CD26 Polyclonal antibody at dilution of 1:1000. Lane 1: Rat liver tissue lysate, Lane 2: Rat kidney tissue lysate, Lane 3: Mouse thymus tissue lysate.

**Observed-MW:110 kDa**

**Calculated-MW:87 kDa**

| Preparation & Storage |  |
|-----------------------|--|
| Storage               | Store at -20°C Valid for 12 months. Avoid freeze / thaw cycles.  |
| Shipping              | The product is shipped with ice pack, upon receipt, store it immediately at the temperature recommended. |

| Background   |
|--|
| <p>Dipeptidyl peptidase-4 (DPP4) or adenosine deaminase complexing protein 2 (ADCP 2) or T-cell activation antigen CD26 is a serine exopeptidase belonging to the S9B protein family that cleaves X-proline dipeptides from the N-terminus of polypeptides, such as chemokines, neuropeptides, and peptide hormones. The enzyme is a type II transmembrane glycoprotein, expressed on the surface of many cell types. It is also present in serum and other body fluids in a truncated form (sCD26/DPPIV). The soluble CD26 (sCD26) as a tumour marker for the detection of colorectal cancer (CRC) and advanced adenomas. As both a regulatory enzyme and a signalling factor, DPP4 has been evaluated and described in many studies. DPP4 inhibition results in increased blood concentration of the incretin hormones glucagon-like peptide-1 (GLP-1) and gastric inhibitory polypeptide (GIP). This causes an increase in glucose-dependent stimulation, resulting in a lowering of blood glucose levels. Recent studies have shown that DPP4 inhibitors can induce a significant reduction in glycosylated haemoglobin (HbA(1c)) levels, either as monotherapy or as a combination with other antidiabetic agents. Research has also demonstrated that DPP4 inhibitors portray a very low risk of hypoglycaemia development, and are a new pharmacological class of drugs for treating Type 2 diabetes.</p> |

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