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Recombinant ALDH4A1 Monoclonal Antibody

catalog number: AN300262P

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

Description

Reactivity Human

Immunogen Recombinant Human ALDH4A1 Protein

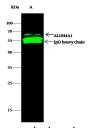
HostRabbitIsotypeIgGCloneB180PurificationProtein A

Buffer 0.2 µm filtered solution in PBS

Applications Recommended Dilution

WB 1:500-1:2000IP 1-4 μL/mg of lysate

Data



55— 40— 35— 25— 15 ern Blot with Al DH4A1 M

Immunoprecipitation analysis using 2 µL anti-ALDH4A1 Monoclonal Antibody and 60 µg of Immunomagnetic beads

Protein G. Western blot was performed from the immunoprecipitate using ALDH4A1 Monoclonal Antibody at a dilution of 1:100. Lane A:0.5 mg HepG2 Whole Cell Lysate

Observed-MW:62 kDa Calculated-MW:62 kDa

Western Blot with ALDH4A1 Monoclonal Antibody at dilution of 1:500. Lane A: HepG2 Whole Cell Lysate, Lane B: K562 Whole Cell Lysate, Lane C: A549 Whole Cell Lysate, Lysates/proteins at 30 µg per lane.

Observed-MW:62 kDa Calculated-MW:62 kDa

Preparation & Storage

Storage This antibody can be stored at 2°C-8°C for one month without detectable loss of

activity. Antibody products are stable for twelve months from date of receipt when stored at -20°C to -80°C. Preservative-Free. Avoid repeated freeze-thaw cycles.

Shipping Ice bag

Background

ALDH4A1 is a member of the aldehyde dehydrogenase family. Aldehyde dehydrogenase enzymes function in the metabolism of many molecules including certain fats (cholesterol and other fatty acids) and protein building blocks (amino acids). Additional aldehyde dehydrogenase enzymes detoxify external substances, such as alcohol and pollutants, and internal substances, such as toxins that are formed within cells. ALDH4A1 is expressed abundantly in liver followed by skeletal muscle, kidney, heart, brain, placenta, lung and pancreas. It is a mitochondrial matrix NAD-dependent dehydrogenase which catalyzes the second step of the proline degradation pathway, converting pyrroline-5-carboxylate to glutamate. Defects in ALDH4A1 are the cause of hyperprolinemia type 2 (HP-2). HP-2 is characterized by the accumulation of delta-1-pyrroline-5-carboxylate (P5C) and proline. The disorder may be causally related to neurologic manifestations, including seizures and mental retardation.

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