Elabscience[®]

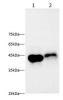
AGER Polyclonal antibody

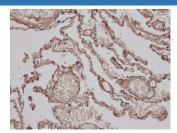
catalog number: AN006020L

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

Description	
Reactivity	Human;Mouse;Rat
Immunogen	Recombinant Human AGER protein expressed by Mammalian
Host	Rabbit
Isotype	IgG
Purification	Antigen Affinity Purification
Conjugation	Unconjugated
Buffer	PBS with 0.05% Proclin300, 1% protective protein and 50% glycerol, pH7.4
Applications	Recommended Dilution
WB	1:5000-1:10000
IHC	1:100-1:200

Data





Western blot with Anti AGER Polyclonal antibody at dilution Immunohistochemistry of paraffin-embedded Human lung of 1:5000. Lane 1: Mouse lung tissue lysate, Lane 2: Rat lung

using AGER Polyclonal Antibody at dilution of 1:450.

tissue lysate. Observed-MW:43 kDa Calculated-MW:42 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

AGER (Advanced Glycosylation End-Product Specific Receptor) is a Protein Coding gene. Diseases associated with AGER include Diabetic Angiopathy and Hyperglycemia. Cell surface pattern recognition receptor that senses endogenous stress signals with a broad ligand repertoire including advanced glycation end products, S100 proteins, high-mobility group box 1 protein/HMGB1, amyloid beta/APP oligomers, nucleic acids, phospholipids and glycosaminoglycans. Advanced glycosylation end products are nonenzymatically glycosylated proteins which accumulate in vascular tissue in aging and at an accelerated rate in diabetes. These ligands accumulate at inflammatory sites during the pathogenesis of various diseases, including diabetes, vascular complications, neurodegenerative disorders, and cancers and RAGE transduces their binding into pro-inflammatory responses. Upon ligand binding, uses TIRAP and MYD88 as adapters to transduce the signal ultimately leading to the induction or inflammatory cytokines IL 6, IL8 and TNFalpha through activation of NF-kappa-B.