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Polyclonal Antibody to Human DcR3 (NT) TR6

Catalog No.: SP6259P

Quantity: 50 µg

Concentration: 0.5 mg/ml

Host: Rabbit

Immunogen: A peptide corresponding to amino acids 31 to 46 of human DcR3 precursor (1, 2).

Format: This antibody is supplied as liquid ion exchange chromatography purified immunglobulin fraction in Phosphate buffered saline with 0.02% sodium azide.

Applications:

Suitable for Western blot (1:500 - 1:1000). Tissue lysate of human heart can be used as positive control and an approximately 33 kDa band can be detected. Other applications not tested. Optimal dilutions of this antibody are dependent on conditions and should be determined by the user.

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Specificity:

Apoptosis is induced by certain cytokines including TNF and Fas ligand in the TNF family through their death domain containing receptors. Several novel members in the TNFR family including DR3, DR4, DR5, and DR6 were recently discovered and function as cell death receptors. Two decoy receptors, DcR1 and DcR2, were recently identified to compete with DR4 and DR5 for their ligand TRAIL binding. A novel decoy receptor was more recently discovered and designated DcR3 and TR6, respectively, (1, 2). Unlike DcR1 and DcR2, DcR3 is a soluble rather than a membrane associated molecule. DcR3 binds to FasL and LIGHT and inhibits FasL and LIGHT induced apoptosis (1, 2). DcR3 transcript is expressed in a

number of lung and colon carcinomas and in some normal tissues.

This antibody reacts with human DcR3 (NT) TR6.

Storage: Store the antibody undiluted at 4-8°C for one month or at -20°C for longer. Avoid repeated

freezing and thawing. Should this product contain a precipitate we recommend

microcentrifugation before use. Shelf life: one year from despatch.

General Readings: 1. Pitti RM, Marsters SA, Lawrence DA, Roy M, Kischkel FC, Dowd P, et al. Genomic

amplification of a decoy receptor for Fas ligand in lung and colon cancer. Nature. 1998 Dec

17;396(6712):699-703. PubMed PMID: 9872321.

2. Yu KY, Kwon B, Ni J, Zhai Y, Ebner R, Kwon BS. A newly identified member of tumor n