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Product datasheet

Anti-UGT1A4 antibody ab192424

1 References

Overview **Product name** Anti-UGT1A4 antibody Description Rabbit polyclonal to UGT1A4 **Host species** Rabbit **Tested applications** Suitable for: WB, IHC-P **Species reactivity** Reacts with: Human Immunogen Recombinant full length protein corresponding to Human UGT1A4. Database link: P22310 **General notes** The Life Science industry has been in the grips of a reproducibility crisis for a number of years. Abcam is leading the way in addressing this with our range of recombinant monoclonal antibodies and knockout edited cell lines for gold-standard validation. Please check that this product meets your needs before purchasing. If you have any questions, special requirements or concerns, please send us an inquiry and/or contact our Support team ahead of purchase. Recommended alternatives for this product can be found below, along with publications, customer reviews and Q&As

Properties	
Form	Liquid
Storage instructions	Shipped at 4°C. Store at +4°C short term (1-2 weeks). Upon delivery aliquot. Store at -20°C long term. Avoid freeze / thaw cycle.
Storage buffer	Preservative: 0.1% Sodium azide Constituents: 50% Glycerol, 49% PBS
Purity	Immunogen affinity purified
Purification notes	ab192424 was affinity-purified from rabbit antiserum by affinity-chromatography using epitope- specific immunogen and the purity is > 95% (by SDS-PAGE).
Clonality	Polyclonal
lsotype	lgG

Applications

The application notes include recommended starting dilutions; optimal dilutions/concentrations should be determined by the end user.

Application	Abreviews	Notes
WB		Use at an assay dependent concentration.
IHC-P		Use at an assay dependent concentration.

Target	
Function	UDPGT is of major importance in the conjugation and subsequent elimination of potentially toxic xenobiotics and endogenous compounds. This isoform glucuronidates bilirubin IX-alpha to form both the IX-alpha-C8 and IX-alpha-C12 monoconjugates and diconjugate.
Tissue specificity	Expressed in liver. Not expressed in skin or kidney.
Involvement in disease	 Defects in UGT1A4 are the cause of Gilbert syndrome (GILBS) [MIM:143500]. Gilbert syndrome occurs as a consequence of reduced bilirubin transferase activity and is often detected in young adults with vague nonspecific complaints. Defects in UGT1A4 are the cause of Crigler-Najjar syndrome type 1 (CN1) [MIM:218800]. CN1 patients have severe hyperbilirubinemia and usually die of kernicterus (bilirubin accumulation in the basal ganglia and brainstem nuclei) within the first year of life. CN1 inheritance is autosomal recessive. Defects in UGT1A4 are the cause of Crigler-Najjar syndrome type 2 (CN2) [MIM:606785]. CN2 patients have less severe hyperbilirubinemia and usually survive into adulthood without neurologic damage. Phenobarbital, which induces the partially deficient glucuronyl transferase, can diminish the jaundice. CN2 inheritance is autosomal dominant.
Sequence similarities	Belongs to the UDP-glycosyltransferase family.
Cellular localization	Microsome. Endoplasmic reticulum membrane.

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