

## Product datasheet

# Human V2R peptide ab192052

### Description

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<b>Product name</b>	Human V2R peptide
<b>Accession</b>	<a href="#">P30518</a>
<b>Animal free</b>	No
<b>Nature</b>	Synthetic
<b>Species</b>	Human

### Specifications

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Our [Abpromise guarantee](#) covers the use of **ab192052** in the following tested applications.

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

<b>Applications</b>	Blocking - Blocking peptide for Anti-V2R antibody ( <a href="#">ab188748</a> )
<b>Form</b>	Liquid
<b>Additional notes</b>	This is the blocking peptide for <a href="#">ab188748</a> This product was previously labelled as AVPR V2

### Preparation and Storage

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<b>Stability and Storage</b>	Shipped at 4°C. Store at -20°C. Constituent: PBS
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### General Info

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<b>Function</b>	Receptor for arginine vasopressin. The activity of this receptor is mediated by G proteins which activate adenylate cyclase.
<b>Tissue specificity</b>	Kidney.
<b>Involvement in disease</b>	Defects in AVPR2 are the cause of nephrogenic syndrome of inappropriate antidiuresis (NSIAD) [MIM:300539]. This disorder is characterized by an inability to excrete a free water load, with inappropriately concentrated urine and resultant hyponatremia, hypoosmolarity, and natriuresis. Defects in AVPR2 are the cause of diabetes insipidus nephrogenic X-linked (XNDI) [MIM:304800]; also known as diabetes insipidus nephrogenic type 1. XNDI is caused by the

inability of the renal collecting ducts to absorb water in response to arginine vasopressin. It is characterized by excessive water drinking (polydypsia), excessive urine excretion (polyuria), persistent hypotonic urine, and hypokalemia.

**Sequence similarities**

Belongs to the G-protein coupled receptor 1 family. Vasopressin/oxytocin receptor subfamily.

**Cellular localization**

Cell membrane.

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**Please note:** All products are "FOR RESEARCH USE ONLY. NOT FOR USE IN DIAGNOSTIC PROCEDURES"

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