abcam

Product datasheet

Anti-beta Dystroglycan (phospho Y892) antibody [M117] ab29037

2 Images

Overview

Product name Anti-beta Dystroglycan (phospho Y892) antibody [M117]

Description Mouse monoclonal [M117] to beta Dystroglycan (phospho Y892)

Host species Mouse

Tested applications Suitable for: WB

Species reactivity Reacts with: Human

Immunogen Synthetic peptide corresponding to Human beta Dystroglycan (phospho Y892) conjugated to

keyhole limpet haemocyanin.

Positive control HepG2 cells or HeLa cells treated with pervanadate.

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. Upon delivery aliquot and store at -20°C. Avoid freeze / thaw cycles.

Storage buffer Preservative: 0.05% Sodium azide

Constituents: 50% Glycerol, 0.1% BSA

Purity Protein A purified

Clonality Monoclonal

Clone number M117

Isotype IgG

Applications

1

The Abpromise guarantee

Our Abpromise guarantee covers the use of ab29037 in the following tested applications.

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

Application	Abreviews	Notes
WB		

Application notes

ELISA: 1/2000.

WB: 1/1000. Membrane was incubated with diluted antibody in 5% non fat milk, PBS, 0.04% Tween 20 for 1 hour at room temperature. Predicted molecular weight: 97 kDa (Dystroglycan is expressed as a precursor protein that is cleaved into alpha and beta dystroglycan. The beta dystroglycan fragment is about 43 kDa).

Not yet tested in other applications.

Optimal dilutions/concentrations should be determined by the end user.

Target

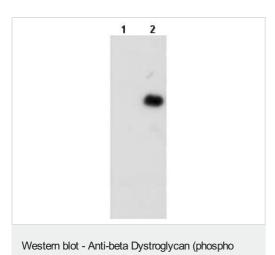
Relevance

Dystroglycans are essential elements of the neuromuscular junction (NMJ). The gene for dystroglycan is expressed as a precursor protein that is post translationally cleaved into a 156 kDa extracellular peripheral membrane protein called alpha dystroglycan and a 43 kDa transmembrane protein, beta dystroglycan. The latter protein contains a PPxY motif that promotes binding to WW domain containing proteins, such as utrophin and dystrophin. Phosphorylation at tyrosine 892 within the PPxY motif may regulate c Src interactions with beta dystroglycan, as well as inhibit interactions with WW domain proteins. In skeletal muscle, beta dystroglycan is normally localized to the plasma membrane, however phosphorylation of Tyr892 leads to localization of beta dystroglycan to endosomal compartments along with c Src. Thus, phosphorylation at Tyr892 may have important roles in altering the localization of beta dystroglycan during NMJ formation.

Cellular localization

Type I membrane protein.

Images



Y892) antibody [M117] (ab29037)

All lanes: Anti-beta Dystroglycan (phospho Y892) antibody [M117] (ab29037)

Lane 1: Lysates from HepG2 cells (untreated)

Lane 2: Lysates from HepG2 cells treated with pervanadate (1

mM) for 30 min

Lysates/proteins at 20 µg per lane.

Predicted band size: 97 kDa Observed band size: 43 kDa Dystroglycan is expressed as a precursor protein (97kDa) that is cleaved into alpha and beta dystroglycan. The beta dystroglycan fragment is about 43 kDa.

Western blot - Anti-beta Dystroglycan (phospho

Y892) antibody [M117] (ab29037)

Western blot analysis of HepG2 cells untreated (lanes 1 & 3) or treated with pervanadate (1 mM) for 30 min (lanes 2 & 4). Blots were probed with anti-beta-dystroglycan (lanes 1 & 2) and anti-beta-dystroglycan (Tyr-892) (lanes 3 & 4).

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

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