

Product datasheet

Anti-PPAR gamma antibody [EPR18516] ab178860

Recombinant RabMAb

[27 References](#) [7 Images](#)

Overview

Product name	Anti-PPAR gamma antibody [EPR18516]
Description	Rabbit monoclonal [EPR18516] to PPAR gamma
Host species	Rabbit
Specificity	Expression levels of PPAR γ protein vary with sample type. Induction may be required if endogenous expression is low.
Tested applications	Suitable for: Flow Cyt (Intra), WB, ICC/IF
Species reactivity	Reacts with: Human
Immunogen	Synthetic peptide. This information is proprietary to Abcam and/or its suppliers.
Positive control	WB: Human adipose tissue, ovary and placenta lysates; K562 and HeLa whole cell lysates. ICC/IF: HeLa and K562 cells. Flow Cyt (intra): HeLa and K562 cells.
General notes	<p>This product is a recombinant monoclonal antibody, which offers several advantages including:</p> <ul style="list-style-type: none"> - High batch-to-batch consistency and reproducibility - Improved sensitivity and specificity - Long-term security of supply - Animal-free production <p>For more information see here.</p> <p>Our RabMAb[®] technology is a patented hybridoma-based technology for making rabbit monoclonal antibodies. For details on our patents, please refer to RabMAb[®] patents.</p>

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: 0.01% Sodium azide Constituents: PBS, 40% Glycerol, 0.05% BSA
Purity	Protein A purified
Clonality	Monoclonal
Clone number	EPR18516

Isotype

IgG

Applications

The Abpromise guarantee

Our **Abpromise guarantee** covers the use of ab178860 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
Flow Cyt (Intra)		1/1500.
WB		1/1000. Detects a band of approximately 58 kDa (predicted molecular weight: 58 kDa).
ICC/IF		1/250.

Target

Function

Receptor that binds peroxisome proliferators such as hypolipidemic drugs and fatty acids. Once activated by a ligand, the receptor binds to a promoter element in the gene for acyl-CoA oxidase and activates its transcription. It therefore controls the peroxisomal beta-oxidation pathway of fatty acids. Key regulator of adipocyte differentiation and glucose homeostasis.

Tissue specificity

Highest expression in adipose tissue. Lower in skeletal muscle, spleen, heart and liver. Also detectable in placenta, lung and ovary.

Involvement in disease

Note=Defects in PPARG can lead to type 2 insulin-resistant diabetes and hypertension. PPARG mutations may be associated with colon cancer.

Defects in PPARG may be associated with susceptibility to obesity (OBESITY) [MIM:601665]. It is a condition characterized by an increase of body weight beyond the limitation of skeletal and physical requirements, as the result of excessive accumulation of body fat.

Defects in PPARG are the cause of familial partial lipodystrophy type 3 (FPLD3) [MIM:604367]. Familial partial lipodystrophies (FPLD) are a heterogeneous group of genetic disorders characterized by marked loss of subcutaneous (sc) fat from the extremities. Affected individuals show an increased preponderance of insulin resistance, diabetes mellitus and dyslipidemia.

Genetic variations in PPARG can be associated with susceptibility to glioma type 1 (GLM1) [MIM:137800]. Gliomas are central nervous system neoplasms derived from glial cells and comprise astrocytomas, glioblastoma multiforme, oligodendrogliomas, and ependymomas.

Note=Polymorphic PPARG alleles have been found to be significantly over-represented among a cohort of American patients with sporadic glioblastoma multiforme suggesting a possible contribution to disease susceptibility.

Sequence similarities

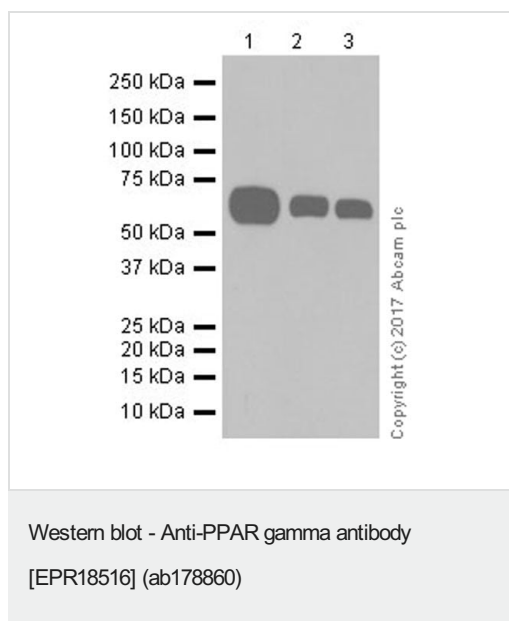
Belongs to the nuclear hormone receptor family. NR1 subfamily.

Contains 1 nuclear receptor DNA-binding domain.

Cellular localization

Nucleus.

Images



All lanes : Anti-PPAR gamma antibody [EPR18516] (ab178860)
at 1/1000 dilution

Lane 1 : Human adipose tissue lysate

Lane 2 : Human ovary lysate

Lane 3 : Human placenta lysate

Lysates/proteins at 20 µg per lane.

Secondary

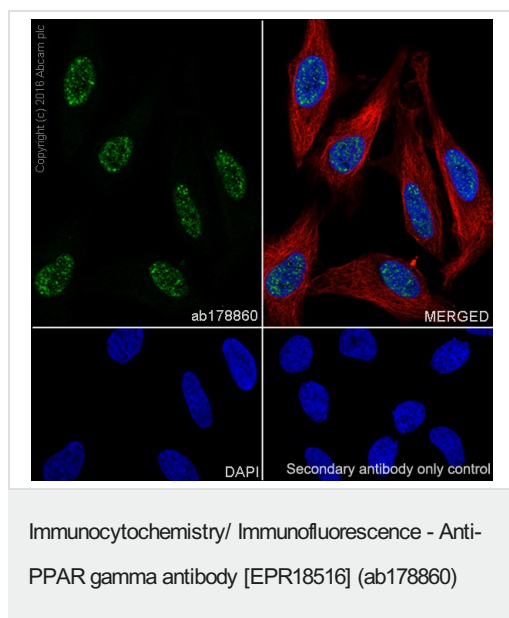
All lanes : Goat Anti-Rabbit IgG Peroxidase Conjugate, specific to the non-reduced form of IgG at 1/20000 dilution

Predicted band size: 58 kDa

Observed band size: 58 kDa

Exposure time: 3 minutes

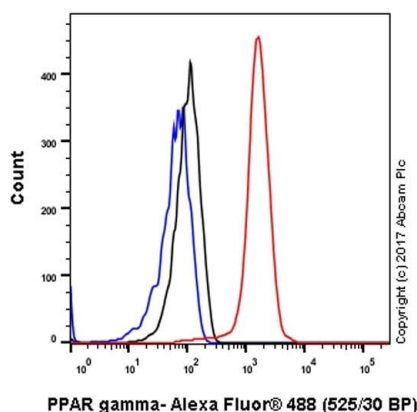
Blocking/Dilution buffer: 5% NFDM/TBST.



Immunofluorescent analysis of 4% paraformaldehyde-fixed, 0.1% Triton X-100 permeabilized HeLa (Human epithelial cell line from cervix adenocarcinoma) cells labeling PPAR gamma with ab178860 at 1/250 dilution, followed by Goat anti-rabbit IgG (Alexa Fluor® 488) ([ab150077](#)) secondary antibody at 1/1000 dilution (green). Confocal image showing nuclear and weak cytoplasmic staining on HeLa cell line.

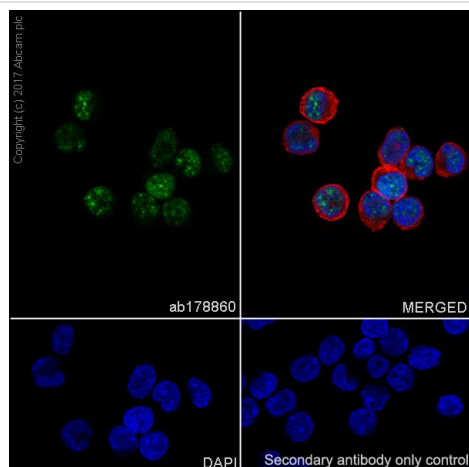
The nuclear counter stain is DAPI (blue). Tubulin is detected with [ab195889](#) (Anti-alpha Tubulin antibody [DM1A] - Microtubule Marker (Alexa Fluor® 594)) at 1/200 dilution (red).

Secondary antibody only control: Used PBS instead of primary antibody, secondary antibody is Goat anti-rabbit IgG (Alexa Fluor® 488) ([ab150077](#)) at 1/1000 dilution.



Flow Cytometry (Intracellular) - Anti-PPAR gamma antibody [EPR18516] (ab178860)

Intracellular flow cytometric analysis of 4% paraformaldehyde-fixed HeLa (Human epithelial cell line from cervix adenocarcinoma) cells labeling PPAR gamma with ab178860 at 1/1500 dilution (red) compared with a rabbit monoclonal IgG isotype control ([ab172730](#); black) and an unlabeled control (cells without incubation with primary antibody and secondary antibody; blue). Goat anti rabbit IgG (Alexa Fluor® 488) at 1/2000 dilution was used as the secondary antibody.

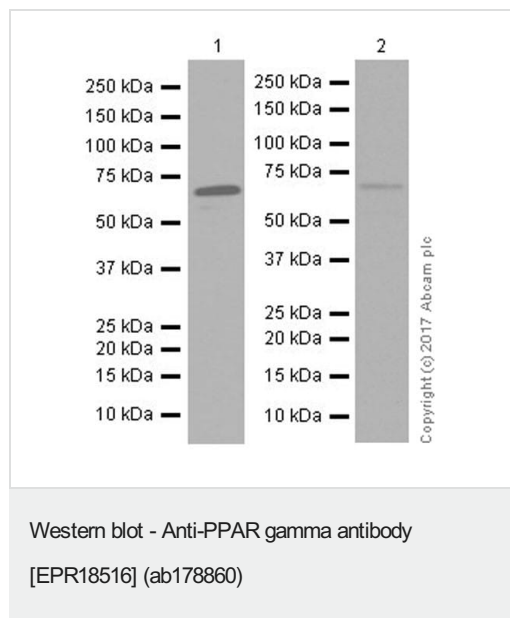


Immunocytochemistry/ Immunofluorescence - Anti-PPAR gamma antibody [EPR18516] (ab178860)

Immunofluorescent analysis of 4% paraformaldehyde-fixed, 0.1% Triton X-100 permeabilized K562 (Human chronic myelogenous leukemia cell line from bone marrow) cells labeling PPAR gamma with ab178860 at 1/250 dilution, followed by Goat anti-rabbit IgG (Alexa Fluor® 488) ([ab150077](#)) secondary antibody at 1/1000 dilution (green). Confocal image showing nuclear and weak cytoplasmic staining on K562 cell line.

The nuclear counter stain is DAPI (blue). Tubulin is detected with [ab195889](#) (Anti-alpha Tubulin antibody [DM1A] - Microtubule Marker (Alexa Fluor® 594)) at 1/200 dilution (red).

Secondary antibody only control: Used PBS instead of primary antibody, secondary antibody is Goat anti-rabbit IgG (Alexa Fluor® 488) ([ab150077](#)) at 1/1000 dilution.



All lanes : Anti-PPAR gamma antibody [EPR18516] (ab178860) at 1/1000 dilution

Lane 1 : K562 (Human chronic myelogenous leukemia cell line from bone marrow) whole cell lysate

Lane 2 : HeLa (Human epithelial cell line from cervix adenocarcinoma) whole cell lysate

Lysates/proteins at 10 µg per lane.

Secondary

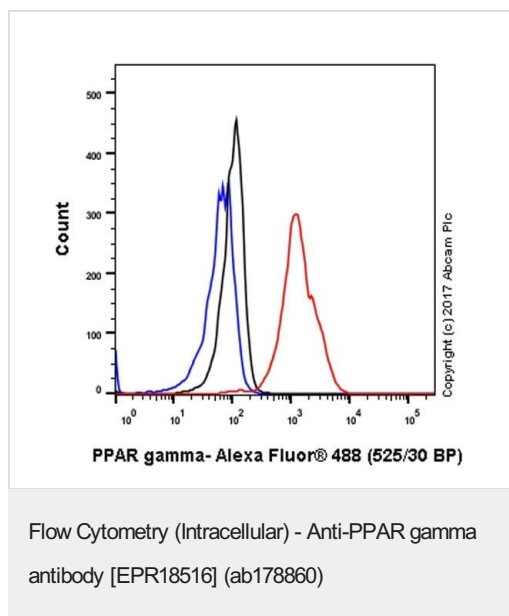
All lanes : Goat Anti-Rabbit IgG H&L (HRP) ([ab97051](#)) at 1/20000 dilution

Predicted band size: 58 kDa

Observed band size: 58 kDa





Blocking/Dilution buffer: 5% NFDM/TBST.

Exposure times: Lane 1: 10 seconds; Lane 2: 3 seconds.



Intracellular flow cytometric analysis of 4% paraformaldehyde-fixed K562 (Human chronic myelogenous leukemia cell line from bone marrow) cells labeling PPAR gamma with ab178860 at 1/1500 dilution (red) compared with a rabbit monoclonal IgG isotype control (**ab172730**; black) and an unlabeled control (cells without incubation with primary antibody and secondary antibody; blue). Goat anti rabbit IgG (Alexa Fluor® 488) at 1/2000 dilution was used as the secondary antibody.

Why choose a recombinant antibody?

 <p>Research with confidence Consistent and reproducible results</p>	 <p>Long-term and scalable supply Recombinant technology</p>
 <p>Success from the first experiment Confirmed specificity</p>	 <p>Ethical standards compliant Animal-free production</p>

Anti-PPAR gamma antibody [EPR18516] (ab178860)

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

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