abcam

Product datasheet

Anti-ZIP-13 antibody ab106586

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Overview

Product name Anti-ZIP-13 antibody

Description Rabbit polyclonal to ZIP-13

Host species Rabbit

Specificity At least two isoforms of ZIP-13 are known to exist; ab106586 will detect both isoforms. ab106586

is predicted to not crossreact with other ZIP family members.

Tested applications Suitable for: ICC/IF, WB, IHC-P

Species reactivity Reacts with: Human

Immunogen Synthetic peptide corresponding to Human ZIP-13 (N terminal).

Database link: NP_001121697

Positive control K562 cell lysate

General notesThe 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 (stable for up to 12 months).

Storage buffer pH: 7.2

Preservative: 0.02% Sodium azide

Constituent: PBS

Purity Immunogen affinity purified

Clonality Polyclonal

Isotype IgG

Applications

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The Abpromise guarantee

Our **Abpromise guarantee** covers the use of ab106586 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
ICC/IF		Use a concentration of 20 µg/ml.
WB		Use a concentration of 1 µg/ml. Predicted molecular weight: 39 kDa.
IHC-P		Use at an assay dependent concentration.

Target

Function

Acts as a zinc-influx transporter.

Involvement in disease

Defects in SLC39A13 are the cause of Ehlers-Danlos syndrome-like spondylocheirodysplasia (SCD-EDS) [MIM:612350]. SCD-EDS is a 'spondylocheiro dysplastic form of Ehlers-Danlos syndrome'. The syndrome consists of a generalized skeletal dysplasia involving mainly the spine (spondylo) and striking clinical abnormalities of the hands (cheiro) in addition to the EDS-like features. Clinical features included postnatal growth retardation, moderate short stature, protuberant eyes with bluish sclerae, hands with finely wrinkled palms, atrophy of the thenar muscles, and tapering fingers. Patients have thin, hyperelastic skin and hypermobile small joints consistent with an Ehlers-Danlos-like phenotype. Radiologic features included mild to moderate platyspondyly, mild to moderate osteopenia of the spine, small ileum, flat proximal femoral epiphyses, short, wide femoral necks, and broad metaphyses (elbows, knees, wrists, and interphalangeal joints).

Sequence similarities

Belongs to the ZIP transporter (TC 2.A.5) family.

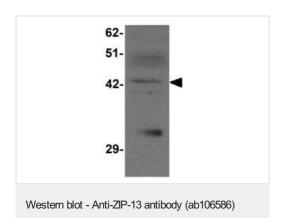
Cellular localization

Membrane.

Form

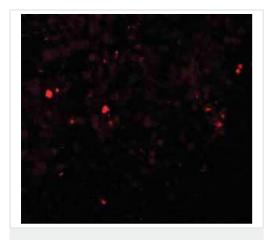
There are 2 isoforms produced by alternative splicing.

Images

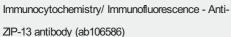


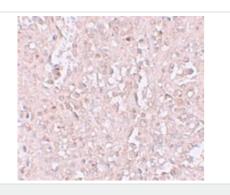
Anti-ZIP-13 antibody (ab106586) at 1 μ g/ml + K562 cell lysate at 15 μ g

Predicted band size: 39 kDa



Immunofluorescence of ZIP-13 in Human spleen tissue with ab106586 at 20 $\mbox{ug/mL}.$





Immunohistochemistry (Formalin/PFA-fixed paraffinembedded sections) - Anti-ZIP-13 antibody (ab106586)

Immunohistochemistry of ZIP-13 in Human spleen tissue with ab106586 at 2.5 $\mu g/mL$.

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

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