

Product datasheet

SOX2 (glcnac S248) peptide ab157602

Description

Product name	SOX2 (glcnac S248) peptide
Purity	>= 70 % HPLC. 70 - 90% by HPLC
Animal free	No
Nature	Synthetic

Specifications

Our [Abpromise guarantee](#) covers the use of **ab157602** in the following tested applications.

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

Applications	Blocking - Blocking peptide for Anti-SOX2 (GlcNAc S248) antibody (ab136167)
Form	Liquid
Additional notes	<ul style="list-style-type: none"> - First try to dissolve a small amount of peptide in either water or buffer. The more charged residues on a peptide, the more soluble it is in aqueous solutions. - If the peptide doesn't dissolve try an organic solvent e.g. DMSO, then dilute using water or buffer. - Consider that any solvent used must be compatible with your assay. If a peptide does not dissolve and you need to recover it, lyophilise to remove the solvent. - Gentle warming and sonication can effectively aid peptide solubilisation. If the solution is cloudy or has gelled the peptide may be in suspension rather than solubilised. - Peptides containing cysteine are easily oxidised, so should be prepared in solution just prior to use.

Preparation and Storage

Stability and Storage	Shipped at 4°C. Upon delivery aliquot and store at -20°C or -80°C. Avoid repeated freeze / thaw cycles. Information available upon request.
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General Info

Function	Transcription factor that forms a trimeric complex with OCT4 on DNA and controls the expression of a number of genes involved in embryonic development such as YES1, FGF4, UTF1 and
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ZFP206 (By similarity). Critical for early embryogenesis and for embryonic stem cell pluripotency.

Involvement in disease

Defects in SOX2 are the cause of microphthalmia syndromic type 3 (MCOPS3) [MIM:206900]. Microphthalmia is a clinically heterogeneous disorder of eye formation, ranging from small size of a single eye to complete bilateral absence of ocular tissues (anophthalmia). In many cases, microphthalmia/anophthalmia occurs in association with syndromes that include non-ocular abnormalities. MCOPS3 is characterized by the rare association of malformations including uni- or bilateral anophthalmia or microphthalmia, and esophageal atresia with trachoesophageal fistula.

Sequence similarities

Contains 1 HMG box DNA-binding domain.

Post-translational modifications

Sumoylation inhibits binding on DNA and negatively regulates the FGF4 transactivation.

Cellular localization

Nucleus.

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