PSM (W-18): sc-10272



The Power to Question

BACKGROUND

Prostate cancer is the most frequently diagnosed cancer and the early detection of prostate cancer dramatically and efficiently reduces the observed mortality rate. Several proteins have been identified as specific markers of prostate cancer, and they may be useful as diagnostic indicators. PSA, prostate specific antigen, is the classical indicator for transformed prostate tissue; however, in addition to being upregulated in prostate cancer, PSA is also upregulated in non-malignant conditions, such as benign prostatic hyperplasia prostate. Conversely, STEAP (six-transmembrane epithelial antigen of the prostate), prostate carcinoma tumor antigen (PCTA-1) and prostatespecific membrane antigen (PSM) represent additional prostate-specific antigens that are overexpressed only in malignant tumors and therefore are more specific identifiers of malignancies. PSM is an integral membrane protein, and PCTA-1 is related to the galectin gene family, which mediate both cell-cell and cell-matrix interactions in a manner similar to the selectin subgroup of C-type lectins. STEAP is a serpentine transmembrane cell-surface tumor-antigen that is predicted to functions as a channel or transporter protein. In addition to prostate cancers, STEAP is also upregulated in bladder, colon, and ovarian cancers.

REFERENCES

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- Israeli, R.S., et al. 1993. Molecular cloning of a complementary DNA encoding a prostate-specific membrane antigen. Cancer Res. 53: 227-230.
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- Su, Z.Z., et al. 1996. Surface-epitope masking and expression cloning identifies the human prostate carcinoma tumor antigen gene PCTA-1, a member of the galectin gene family. Proc. Natl. Acad. Sci. USA 93: 7252-7257.
- Wang, F.L., et al. 1996. Two differentially expressed genes in normal human prostate tissue and in carcinoma. Cancer Res. 56: 3634-3637.
- Reiter, R.E., et al. 1998. Prostate stem cell antigen: a cell surface marker overexpressed in prostate cancer. Proc. Natl. Acad. Sci. USA 95: 1735-1740.
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SOURCE

PSM (W-18) is an affinity purified goat polyclonal antibody raised against a peptide mapping at the N-terminus of PSM of mouse origin.

PRODUCT

Each vial contains 200 μg lgG in 1.0 ml of PBS with < 0.1% sodium azide and 0.1% gelatin.

Blocking peptide available for competition studies, sc-10272 P, (100 μg peptide in 0.5 ml PBS containing < 0.1% sodium azide and 0.2% BSA).

APPLICATIONS

PSM (W-18) is recommended for detection of PSM of mouse and rat origin by Western Blotting (starting dilution 1:200, dilution range 1:100-1:1000), immunofluorescence (starting dilution 1:50, dilution range 1:50-1:500) and solid phase ELISA (starting dilution 1:30, dilution range 1:30-1:3000).

Suitable for use as control antibody for PSM siRNA (m): sc-40891.

RECOMMENDED SECONDARY REAGENTS

To ensure optimal results, the following support (secondary) reagents are recommended: 1) Western Blotting: use donkey anti-goat IgG-HRP: sc-2020 (dilution range: 1:2000-1:100,000) or Cruz Marker™ compatible donkey anti-goat IgG-HRP: sc-2033 (dilution range: 1:2000-1:5000), Cruz Marker™ Molecular Weight Standards: sc-2035, TBS Blotto A Blocking Reagent: sc-2333 and Western Blotting Luminol Reagent: sc-2048. 2) Immunofluorescence: use donkey anti-goat IgG-FITC: sc-2024 (dilution range: 1:100-1:400) or donkey anti-goat IgG-TR: sc-2783 (dilution range: 1:100-1:400) with UltraCruz™ Mounting Medium: sc-24941.

STORAGE

Store at 4° C, **DO NOT FREEZE**. Stable for one year from the date of shipment. Non-hazardous. No MSDS required.

RESEARCH USE

For research use only, not for use in diagnostic procedures.

PROTOCOLS

See our web site at www.scbt.com or our catalog for detailed protocols and support products.

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