

TRIM29 (A-5): sc-166718

BACKGROUND

Ataxia-telangiectasia (AT) is an autosomal recessive human genetic disease characterized by an elevated risk of cancer, immune defects, genetic instability and an increased sensitivity to radiation. For example, 10-15% of AT patients suffer an extremely high incidence of lymphoid malignancies including both T and B cell tumors by early adulthood. Interestingly, there is a total absence of myeloid tumors in these patients. Although AT homozygotes are rare, the AT gene is likely to play a role in sporadic breast cancer and other common cancers. The human AT gene has been mapped to chromosome 11q23.3. The AT group D complementing gene has been cloned. The protein, designated TRIM29, or ATDC, has been shown to interact with the intermediate filament protein vimentin, a substrate for the PKC family of protein kinases, and with hPKC1-1, an inhibitor of the PKCs. Examination of the predicted TRIM29 amino acid sequence has revealed the presence of both zinc finger and leucine zipper motifs, suggesting that the protein may form homodimers and possibly associate with DNA.

CHROMOSOMAL LOCATION

Genetic locus: TRIM29 (human) mapping to 11q23.3.

SOURCE

TRIM29 (A-5) is a mouse monoclonal antibody raised against amino acids 289-588 mapping at the C-terminus of TRIM29 of human origin.

PRODUCT

Each vial contains 200 µg IgG₁ kappa light chain in 1.0 ml of PBS with < 0.1% sodium azide and 0.1% gelatin.

STORAGE

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

PROTOCOLS

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

APPLICATIONS

TRIM29 (A-5) is recommended for detection of TRIM29 of human origin by Western Blotting (starting dilution 1:100, dilution range 1:100-1:1000), immunoprecipitation [1-2 µg per 100-500 µg of total protein (1 ml of cell lysate)], immunofluorescence (starting dilution 1:50, dilution range 1:50-1:500), immunohistochemistry (including paraffin-embedded sections) (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 TRIM29 siRNA (h): sc-43625, TRIM29 shRNA Plasmid (h): sc-43625-SH and TRIM29 shRNA (h) Lentiviral Particles: sc-43625-V.

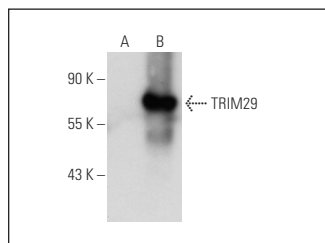
Molecular Weight of TRIM29: 66 kDa.

Positive Controls: TRIM29 (h): 293T Lysate : sc-112361.

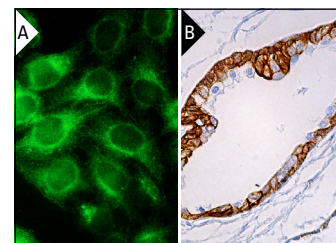
RECOMMENDED SUPPORT REAGENTS

To ensure optimal results, the following support reagents are recommended: 1) Western Blotting: use m-IgGκ BP-HRP: sc-516102 or m-IgGκ BP-HRP (Cruz Marker): sc-516102-CM (dilution range: 1:1000-1:10000), Cruz Marker™ Molecular Weight Standards: sc-2035, UltraCruz® Blocking Reagent: sc-516214 and Western Blotting Luminol Reagent: sc-2048. 2) Immunoprecipitation: use Protein A/G PLUS-Agarose: sc-2003 (0.5 ml agarose/2.0 ml). 3) Immunofluorescence: use m-IgGκ BP-FITC: sc-516140 or m-IgGκ BP-PE: sc-516141 (dilution range: 1:50-1:200) with UltraCruz® Mounting Medium: sc-24941 or UltraCruz® Hard-set Mounting Medium: sc-359850. 4) Immunohistochemistry: use m-IgGκ BP-HRP: sc-516102 with DAB, 50X: sc-24982 and Immunohistomount: sc-45086, or Organo/Limonene Mount: sc-45087.

DATA



TRIM29 (A-5): sc-166718. Western blot analysis of TRIM29 expression in non-transfected: sc-117752 (A) and human TRIM29 transfected: sc-112361 (B) 293T whole cell lysates.



TRIM29 (A-5): sc-166718. Immunofluorescence staining of methanol-fixed HeLa cells showing cytoplasmic localization (A). Immunoperoxidase staining of formalin fixed, paraffin-embedded human prostate tissue showing cytoplasmic and membrane staining of glandular cells (B).

SELECT PRODUCT CITATIONS

1. Kanno, Y., et al. 2014. TRIM29 as a novel prostate basal cell marker for diagnosis of prostate cancer. *Acta Histochem.* 116: 708-712.
2. Masuda, Y., et al. 2015. TRIM29 regulates the p63-mediated pathway in cervical cancer cells. *Biochim. Biophys. Acta* 1853: 2296-2305.
3. Yanagi, T., et al. 2018. Loss of TRIM29 alters keratin distribution to promote cell invasion in squamous cell carcinoma. *Cancer Res.* 78: 6795-6806.
4. Tokuchi, K., et al. 2021. Loss of FAM83H promotes cell migration and invasion in cutaneous squamous cell carcinoma via impaired keratin distribution. *J. Dermatol. Sci.* 104: 112-121.
5. Yue, C., et al. 2023. TRIM29 acts as a potential senescence suppressor with epigenetic activation in nasopharyngeal carcinoma. *Cancer Sci.* 114: 3176-3189.
6. Gao, G., et al. 2023. The NFIB/CARM1 partnership is a driver in preclinical models of small cell lung cancer. *Nat. Commun.* 14: 363.

RESEARCH USE

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