

# HPRT (C-16): sc-20906

## BACKGROUND

HPRT (hypoxanthine phosphoribosyltransferase 1), also known as HGPRT or HPRT1, is a 218 amino acid cytoplasmic protein that belongs to the purine/pyrimidine phosphoribosyltransferase family. Involved in purine metabolism, HPRT functions as a purine salvage enzyme that catalyzes the conversion of hypoxanthine and guanine to their respective mononucleotides (inosine monophosphate and guanosine monophosphate, respectively). HPRT exists as a homotetramer that can bind two magnesium ions as cofactors. Defects in the gene encoding HPRT are the cause of gout and Lesch-Nyhan syndrome (LNS), both of which are characterized by a partial or complete lack of HPRT enzymatic activity. While a partial loss of HPRT enzymatic activity results in a buildup of uric acid (gout), a total loss of enzymatic activity results in hyperuricaemia, mental retardation, choreoathetosis and compulsive self-mutilation, all of which are symptoms associated with LNS. The severity of these diseases suggests an essential role for HPRT in purine metabolism.

## CHROMOSOMAL LOCATION

Genetic locus: HPRT1 (human) mapping to Xq26.2; Hprt1 (mouse) mapping to X A5.

## SOURCE

HPRT (C-16) is an affinity purified goat polyclonal antibody raised against a peptide mapping near the C-terminus of HPRT of human origin.

## PRODUCT

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

Blocking peptide available for competition studies, sc-20906 P, (100 µg peptide in 0.5 ml PBS containing < 0.1% sodium azide and 0.2% BSA).

## APPLICATIONS

HPRT (C-16) is recommended for detection of HPRT of mouse, rat and human origin by Western Blotting (starting dilution 1:200, 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).

HPRT (C-16) is also recommended for detection of HPRT in additional species, including equine, canine, bovine, porcine and avian.

Suitable for use as control antibody for HPRT siRNA (h): sc-40679, HPRT siRNA (m): sc-40680, HPRT shRNA Plasmid (h): sc-40679-SH, HPRT shRNA Plasmid (m): sc-40680-SH, HPRT shRNA (h) Lentiviral Particles: sc-40679-V and HPRT shRNA (m) Lentiviral Particles: sc-40680-V.

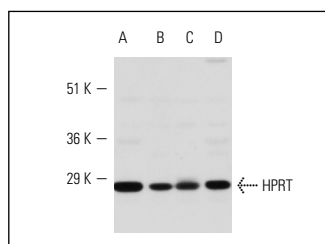
Molecular Weight of HPRT: 23 kDa.

Positive Controls: MIA PaCa-2 cell lysate: sc-2285, Hep G2 cell lysate: sc-2227 or KNRK whole cell lysate: sc-2214.

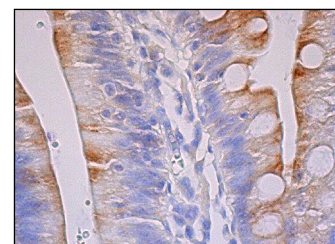
## RECOMMENDED SECONDARY REAGENTS

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) Immunoprecipitation: use Protein A/G PLUS-Agarose: sc-2003 (0.5 ml agarose/2.0 ml). 3) 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. 4) Immunohistochemistry: use ImmunoCruz™: sc-2053 or ABC: sc-2023 goat IgG Staining Systems.

## DATA



HPRT (C-16): sc-20906. Western blot analysis of HPRT expression in MIA PaCa-2 (A), Hep G2 (B), KNRK (C) and A549 (D) whole cell lysates.



HPRT (C-16): sc-20906. Immunoperoxidase staining of formalin fixed, paraffin-embedded human small intestine tissue showing cytoplasmic staining of glandular cells.

## 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](http://www.scbt.com) or our catalog for detailed protocols and support products.



Try **HPRT (F-1): sc-376938** or **HPRT (B-11): sc-393901**, our highly recommended monoclonal alternatives to HPRT (C-16).