

STKLD1 (6G9): sc-134290

BACKGROUND

Chromosome 9 consists of about 145 million bases and 4% of the human genome, encoding nearly 900 genes. Considered to play a role in gender determination, deletion of the distal portion of 9p can lead to development of male to female sex reversal, the phenotype of a female with a male X,Y genotype. Hereditary hemorrhagic telangiectasia, which is characterized by harmful vascular defects, is associated with the chromosome 9 gene-encoding Endoglin protein, ENG. Familial dysautonomia is also associated with chromosome 9 through the gene IKBKAP. Notably, chromosome 9 encompasses the largest interferon family gene cluster. Chromosome 9 is partnered with chromosome 22 in the translocation leading to the aberrant production of Bcr-Abl fusion protein often found in leukemias.

REFERENCES

1. Manning, G., et al. 2002. The protein kinase complement of the human genome. *Science* 298: 1912-1934.
2. Zheng, X., et al. 2006. Bcr and its mutants, the reciprocal t(9;22)-associated Abl/Bcr fusion proteins, differentially regulate the cytoskeleton and cell motility. *BMC Cancer* 6: 262.
3. Coppo, P., et al. 2006. Bcr-Abl activates STAT3 via JAK and MEK pathways in human cells. *Br. J. Haematol.* 134: 171-179.
4. Greenman, C., et al. 2007. Patterns of somatic mutation in human cancer genomes. *Nature* 446: 153-158.
5. Burmeister, T., et al. 2007. Atypical Bcr-Abl mRNA transcripts in adult acute lymphoblastic leukemia. *Haematologica* 92: 1699-1702.
6. Fernandez-L, A., et al. 2007. Gene expression fingerprinting for human hereditary hemorrhagic telangiectasia. *Hum. Mol. Genet.* 16: 1515-1533.
7. Cottin, V., et al. 2007. Pulmonary vascular manifestations of hereditary hemorrhagic telangiectasia (Rendu-Osler disease). *Respiration* 74: 361-378.
8. Gardiner, J., et al. 2007. Potential role of tubulin acetylation and microtubule-based protein trafficking in familial dysautonomia. *Traffic* 8: 1145-1149.
9. Temtamy, S.A., et al. 2007. Phenotypic and cytogenetic spectrum of 9p trisomy. *Genet. Couns.* 18: 29-48.

CHROMOSOMAL LOCATION

Genetic locus: STKLD1 (human) mapping to 9q34.2.

SOURCE

STKLD1 (6G9) is a mouse monoclonal antibody raised against recombinant STKLD1 protein of human origin.

PRODUCT

Each vial contains 100 µg IgG_{2a} kappa light chain in 1.0 ml of PBS with < 0.1% sodium azide and 0.1% gelatin.

RESEARCH USE

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

APPLICATIONS

STKLD1 (6G9) is recommended for detection of STKLD1 of 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)] and solid phase ELISA (starting dilution 1:30, dilution range 1:30-1:3000).

Suitable for use as control antibody for STKLD1 siRNA (h): sc-92721, STKLD1 shRNA Plasmid (h): sc-92721-SH and STKLD1 shRNA (h) Lentiviral Particles: sc-92721-V.

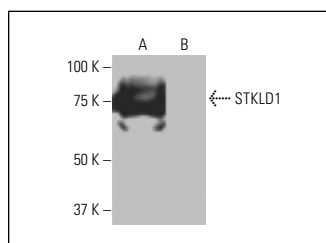
Molecular Weight of STKLD1: 76/23/23 kDa.

Positive Controls: Hep G2 cell lysate: sc-2227 or human STKLD1 transfected 293T whole cell lysate.

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).

DATA



STKLD1 (6G9): sc-134290. Western blot analysis of STKLD1 expression in human STKLD1 transfected (A) and non-transfected (B) 293T whole cell lysates.

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.