NDUFS1 (G-6): sc-271387



The Power to Ouestion

BACKGROUND

The multisubunit NADH:ubiquinone oxidoreductase (complex I) is the first enzyme complex in the electron transport chain of mitochondria. Through use of chaotropic agents, complex I can be separated into three different fractions: a flavoprotein fraction, an iron-sulfur protein (IP) fraction, and a hydrophobic protein (HP) fraction. The IP fraction contains NDUFS1-7. NDUFS1, a 75 kD protein, is the largest subunit of complex I, and is thought to be the first of the Fe-S proteins to accept electrons from an NADH-flavoprotein reductase within the complex. NDUFS1 may even form part of the active site crevice where NADH is oxidized. NDUFS1 is also a critical caspase substrate in mitochondria, and caspase cleavage of NDUFS1 is required for several mitochondrial changes associated with apoptosis.

REFERENCES

- Chow, W., et al. 1991. Determination of the cDNA sequence for the human mitochondrial 75 kDa FeS protein of NADH-coenzyme Q reductase. Eur. J. Biochem. 201: 547-550.
- Duncan, A.M., et al. 1992. Localization of the human 75 kDa FeS protein of NADH-coenzyme Q reductase gene (NDUFS1) to 2q33-q34. Cytogenet. Cell Genet. 60: 212-213.
- Bénit, P., et al. 2001. Large-scale deletion and point mutations of the nuclear NDUFV1 and NDUFS1 genes in mitochondrial complex I deficiency. Am. J. Hum. Genet. 68: 1344-1352.
- Smeitink, J.A., et al. 2004. Cell biological consequences of mitochondrial NADH: ubiquinone oxidoreductase deficiency. Curr. Neurovasc. Res. 1: 29-40.
- Karahan, O.I., et al. 2005. Ultrasound evaluation of peritoneal catheter tunnel in catheter related infections in CAPD. Int. Urol. Nephrol. 37: 363-366.
- Martin, M.A., et al. 2005. Leigh syndrome associated with mitochondrial complex I deficiency due to a novel mutation in the NDUFS1 gene. Arch. Neurol. 62: 659-661.

CHROMOSOMAL LOCATION

Genetic locus: NDUFS1 (human) mapping to 2q33.3; Ndufs1 (mouse) mapping to 1 C2.

SOURCE

NDUFS1 (G-6) is a mouse monoclonal antibody raised against amino acids 428-727 mapping at the C-terminus of NDUFS1 of human origin.

PRODUCT

Each vial contains 200 $\mu g \ lgG_1$ 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.

APPLICATIONS

NDUFS1 (G-6) is recommended for detection of NDUFS1 of mouse, rat and human origin by Western Blotting (starting dilution 1:100, dilution range 1:100-1:1000), immunoprecipitation [1-2 μ g per 100-500 μ g of total protein (1 ml of cell lysate)], 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 NDUFS1 siRNA (h): sc-61164, NDUFS1 siRNA (m): sc-61165, NDUFS1 shRNA Plasmid (h): sc-61164-SH, NDUFS1 shRNA Plasmid (m): sc-61165-SH, NDUFS1 shRNA (h) Lentiviral Particles: sc-61164-V and NDUFS1 shRNA (m) Lentiviral Particles: sc-61165-V.

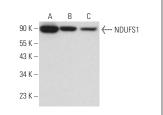
Molecular Weight of NDUFS1: 75 kDa.

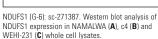
Positive Controls: Raji whole cell lysate: sc-364236, NAMALWA cell lysate: sc-2234 or Hep G2 cell lysate: sc-2227.

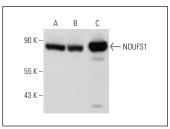
RECOMMENDED SUPPORT REAGENTS

To ensure optimal results, the following support reagents are recommended: 1) Western Blotting: use m-lgG κ BP-HRP: sc-516102 or m-lgG κ BP-HRP (Cruz Marker): sc-516102-CM (dilution range: 1:1000-1:10000), Cruz MarkerTM 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-lgG κ BP-FITC: sc-516140 or m-lgG κ BP-PE: sc-516141 (dilution range: 1:50-1:200) with UltraCruz[®] Mounting Medium: sc-24941 or UltraCruz[®] Hard-set Mounting Medium: sc-359850.

DATA







NDUFS1 (G-6): sc-271387. Western blot analysis of NDUFS1 expression in Raji ($\bf A$) and Hep G2 ($\bf B$) whole cell lysates and rat heart tissue extract ($\bf C$).

SELECT PRODUCT CITATIONS

- Elouej, S., et al. 2020. Loss of MTX2 causes mandibuloacral dysplasia and links mitochondrial dysfunction to altered nuclear morphology. Nat. Commun. 11: 4589.
- 2. Sato, T., et al. 2022. Enhanced glucose metabolism through activation of HIF-1 α covers the energy demand in a rat embryonic heart primordium after heartbeat initiation. Sci. Rep. 12: 74.

RESEARCH USE

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