

Product datasheet for AP11570PU-N

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GJA3 (N-term) Rabbit Polyclonal Antibody

Product data:

Product Type: Primary Antibodies

Applications: IHC, WB

Recommended Dilution: ELISA 1:1,000.

Immunohistochemistry 1:50 - 1:100.

Reactivity: Human
Host: Rabbit

Isotype: lg

Clonality: Polyclonal

Immunogen: This antibody is generated from rabbits immunized with a KLH conjugated synthetic peptide

selected from the N-term region of human GJA3.

Specificity: This antibody detects GJA3 at N-term. **Formulation:** PBS with 0.09% (W/V) sodium azide

State: Purified

State: Liquid Ig fraction

Concentration: lot specific

Purification: Protein G column, eluted with high and low pH buffers and neutralized immediately, followed

by dialysis against PBS

Conjugation: Unconjugated

Storage: Store the antibody at 2 - 8 °C up to one month or (in aliquots) at -20 °C for longer. Avoid

repeated freezing and thawing.

Stability: Shelf life: one year from despatch.

Gene Name: gap junction protein alpha 3

Database Link: Entrez Gene 2700 Human

Q9Y6H8



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Background:

GJA3, an integral membrane protein, belong to the connexin family, alpha-type (group II) subfamily. One gap junction consists of a cluster of closely packed pairs of transmembrane channels, the connexons, through which materials of low MW diffuse from one cell to a neighboring cell. A connexon is composed of a hexamer of connexins. This particular connexin is a component of lens fiber gap junctions, can form both junctional and nonjunctional ('hemi-') channels. Defects in GJA3 are the cause of zonular pulverulent cataract type 3 (CZP3), a form of autosomal dominant congenital cataract.

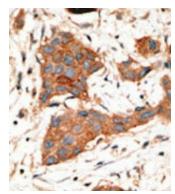
Synonyms: Gap junction alpha-3 protein, Connexin-46

Note: Molecular weight: 47296 Da

Product images:



Western blot analysis of GJA3 Antibody (N-term) in Jurkat cell line lysates (35 ug/lane). GJA3 (arrow) was detected using the purified Pab.



Formalin-fixed and paraffin-embedded human breast carcinoma reacted with the primary antibody, which was peroxidase-conjugated to the secondary antibody, followed by DAB staining. This data demonstrates the use of this antibody for immunohistochemistry; clinical relevance has not been evaluated.