

## Product datasheet for **BM5046**

### Cytokeratin 9 (KRT9) Mouse Monoclonal Antibody [Clone ID: Ks9.70 / Ks9.216]

#### Product data:

Product Type:	Primary Antibodies
Clone Name:	Ks9.70 / Ks9.216
Applications:	IF, IHC, WB
Recommended Dilution:	<b>Immunohistochemistry on Frozen and Paraffin Embedded tissues:</b> 1/20 (PAP/ABC). For Paraffin sections, <b>microwave</b> treatment and in some cases protease digestion is recommended. <b>Immunofluorescence:</b> 1/10. <b>Western blotting:</b> 1/25-1/300 (Chemiluminescence (AP/ECL)).
Reactivity:	Human
Host:	Mouse
Isotype:	cocktail
Clonality:	Monoclonal
Immunogen:	Synthetic peptides [amino acids pos. 450-477 / N-terminal amino acids nos. 4-28] of Human Cytokeratin 9 (MW 62,129).
Specificity:	The antibody cocktail is an excellent tool to characterize primary cultures of keratinocytes/skin transplants for application in burn treatment. The antibody reagent represents an excellent marker to study palmoplantar epidermal distribution and differentiation. Specifically reactive in the middle/upper suprabasal layers (stratum spinosum/ granulosum) of the epidermis of palm and sole. CK9 can be detected in primary cultures of palmoplantar keratinocytes when they shift to differentiation-promoting conditions and grow stratified (upper cells). CK9 has not been found in normal, i.e. non-pathogenic, non-ridged epidermis, beside some minor cells surrounding the acrosyringeal ducts. No labelling has been found in epithelial cells of other stratified epithelia such as oesophagus or complex epithelia (e.g. urothelium) or in ductal or simple epithelia. <b>Negative tissues include:</b> Muscle, liver and duodenum.
Formulation:	State: Supernatant State: Liquid Hybridoma Culture Supernatant Preservative: 0.09% Sodium Azide
Conjugation:	Unconjugated



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<b>Storage:</b>	Store undiluted at 2-8°C. <b>DO NOT FREEZE!</b>
<b>Stability:</b>	Shelf life: one year from despatch.
<b>Database Link:</b>	<a href="#">Entrez Gene 3857 Human P35527</a>
<b>Background:</b>	Keratin 9 is a type I cytokeratin. It is expressed in the terminally differentiated epidermis of palms and soles. Defects in KRT9 are a cause of epidermolytic palmoplantar keratoderma (EPPK). EPPK is an autosomal dominant disease characterized by diffuse thickening of the epidermis on the entire surface of palms and soles sharply bordered with erythematous margins.
<b>Synonyms:</b>	Cytokeratin 9, KRT9, CK9, Keratin-9, K9
<b>Note:</b>	<b>Isotypes:</b> IgG1 for Ks9.70 and IgG3 for Ks9.216