

bs-11708R**[Primary Antibody]****ATP13A2 Rabbit pAb****Bioss**
ANTIBODIES

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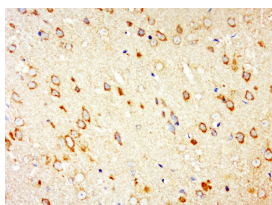
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— DATASHEET —

Host: Rabbit	Isotype: IgG	Applications: IHC-P (1:100-500) IHC-F (1:100-500) IF (1:100-500)
Clonality: Polyclonal		
GeneID: 23400	SWISS: Q9NQ11	
Target: ATP13A2		Reactivity: Rat (predicted: Human, Mouse, Rabbit, Pig, Cow, Horse)
Immunogen: KLH conjugated synthetic peptide derived from human ATP13A2: 1001-1080/1180. < Extracellular >		
Purification: affinity purified by Protein A		Predicted MW.: 129 kDa
Concentration: 1mg/ml		Subcellular Location: Cell membrane ,Cytoplasm
Storage: 0.01M TBS (pH7.4) with 1% BSA, 0.02% Proclin300 and 50% Glycerol. Shipped at 4°C. Store at -20°C for one year. Avoid repeated freeze/thaw cycles.		
Background: ATP13A2 is a 1,180 amino acid multi-pass membrane protein that belongs to the P5 subfamily of ATPases which play an important role in the transportation of inorganic cations. Expressed as multiple alternative spliced isoforms, ATP13A2 functions to catalyze the conversion of ATP to ADP and a free phosphate, thereby participating in the active transport of ions across cellular membranes. Defects in the gene encoding ATP13A2 are the cause of Kufor-Rakeb syndrome (KRS), a rare hereditary type of Parkinson's disease that exhibits juvenile onset and is characterized by neurodegeneration and dementia. The ATP13A2 gene maps to human chromosome 1, which spans 260 million base pairs, contains over 3,000 genes and comprises nearly 8% of the human genome.		

— VALIDATION IMAGES —

Paraformaldehyde-fixed, paraffin embedded (rat brain); Antigen retrieval by boiling in sodium citrate buffer (pH6.0) for 15min; Block endogenous peroxidase by 3% hydrogen peroxide for 20 minutes; Blocking buffer (normal goat serum) at 37°C for 30min; Antibody incubation with (ATP13A2) Polyclonal Antibody, Unconjugated (bs-11708R) at 1:400 overnight at 4°C, followed by a conjugated secondary (sp-0023) for 20 minutes and DAB staining.

— SELECTED CITATIONS —

- **[IF=4.9]** Martin Schicht. et al. Ocular Surface Changes Differ Significantly Between Oxaliplatin- and Diabetes-Induced Polyneuropathy. INT J MOL SCI. 2025 Jan;26(5):1884 IHC,IF ;Mouse. 40076510