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## TRPM4 Antibody Blocking Peptide

Catalog Number: bs-9051P

Activity: Not tested

Purification: HPLC

Storage: Shipped at 4°C. Stored at -20°C for one year. Avoid repeated freeze/thaw cycles.

**Background:** Calcium-activated non selective (CAN) cation channel that mediates membrane depolarization. While it is activated by increase in intracellular  $\text{Ca}^{2+}$ , it is impermeable to it. Mediates transport of monovalent cations ( $\text{Na}^{+} > \text{K}^{+} > \text{Cs}^{+} > \text{Li}^{+}$ ), leading to depolarize the membrane. It thereby plays a central role in cardiomyocytes, neurons from entorhinal cortex, dorsal root and vomeronasal neurons, endocrine pancreas cells, kidney epithelial cells, cochlea hair cells etc. Participates in T-cell activation by modulating  $\text{Ca}^{2+}$  oscillations after T lymphocyte activation, which is required for NFAT-dependent IL2 production. Involved in myogenic constriction of cerebral arteries. Controls insulin secretion in pancreatic beta-cells. May also be involved in pacemaking or could cause irregular electrical activity under conditions of  $\text{Ca}^{2+}$  overload. Affects T-helper 1 (Th1) and T-helper 2 (Th2) cell motility and cytokine production through differential regulation of calcium signaling and NFATC1 localization. Enhances cell proliferation through up-regulation of the beta-catenin signaling pathway.

Involvement in disease:

Defects in TRPM4 are the cause of progressive familial heart block type 1B (PFHB1B) [MIM:604559]. It is a cardiac bundle branch disorder characterized by progressive alteration of cardiac conduction through the His-Purkinje system, with a pattern of a right bundle-branch block and/or left anterior hemiblock occurring individually or together. It leads to complete atrio-ventricular block causing syncope and sudden death.