
Summary

Production Name	Troponin I-C Rabbit Polyclonal Antibody
Description	Rabbit Polyclonal Antibody
Host	Rabbit
Application	IHC, WB, ELISA
Reactivity	Human, Mouse, Rat

Performance

Conjugation	Unconjugated
Modification	Unmodified
Isotype	IgG
Clonality	Polyclonal
Form	Liquid
Storage	Store at 4°C short term. Aliquot and store at -20°C long term. Avoid freeze/thaw cycles.
Buffer	Liquid in PBS containing 50% glycerol, 0.5% BSA and 0.02% New type preservative N.
Purification	Affinity purification

Immunogen

Gene Name	TNNI3
Alternative Names	TNNI3; TNNC1; Troponin I; cardiac muscle; Cardiac troponin I
Gene ID	7137.0
SwissProt ID	P19429. The antiserum was produced against synthesized peptide derived from human TNNI3. AA range: 11-60

Application

Dilution Ratio	WB 1:500 - 1:2000. IHC 1:100 - 1:300. ELISA: 1:5000..
Molecular Weight	26kD

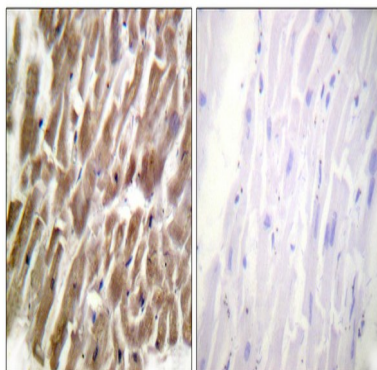
Background

Troponin I (TnI), along with troponin T (TnT) and troponin C (TnC), is one of 3 subunits that form the troponin complex of the thin filaments of striated muscle. TnI is the inhibitory subunit; blocking actin-myosin interactions and thereby mediating striated muscle relaxation. The TnI subfamily contains three genes: TnI-skeletal-fast-twitch, TnI-skeletal-slow-twitch, and TnI-cardiac. This gene encodes the TnI-cardiac protein and is exclusively expressed in cardiac muscle tissues. Mutations in this gene cause familial hypertrophic cardiomyopathy type 7 (CMH7) and familial restrictive cardiomyopathy (RCM). [provided by RefSeq, Jul 2008],disease:Defects in TNNI3 are the cause of cardiomyopathy dilated type 2A (CMD2A) [MIM:611880]. Dilated cardiomyopathy is a disorder characterized by ventricular dilation and impaired systolic function, resulting in congestive heart failure and arrhythmia. Patients are at risk of premature death.,disease:Defects in TNNI3 are the cause of cardiomyopathy familial hypertrophic type 7 (CMH7) [MIM:191044]. Familial hypertrophic cardiomyopathy is a hereditary heart disorder characterized by ventricular hypertrophy, which is usually asymmetric and often involves the interventricular septum. The symptoms include dyspnea, syncope, collapse, palpitations, and chest pain. They can be readily provoked by exercise. The disorder has inter- and intrafamilial variability ranging from benign to malignant forms with high risk of cardiac failure and sudden cardiac death.,disease:Defects in TNNI3 are the cause of cardiomyopathy familial restrictive type 1 (RCM1) [MIM:115210]. RCM1 is an heart muscle disorder characterized by impaired filling of the ventricles with reduced diastolic volume, in the presence of normal or near normal wall thickness and systolic function.,function:Troponin I is the inhibitory subunit of troponin, the thin filament regulatory complex which confers calcium-sensitivity to striated muscle actomyosin ATPase activity.,similarity:Belongs to the troponin I family.,subunit:Binds to actin and tropomyosin. Interacts with TRIM63.,

Research Area

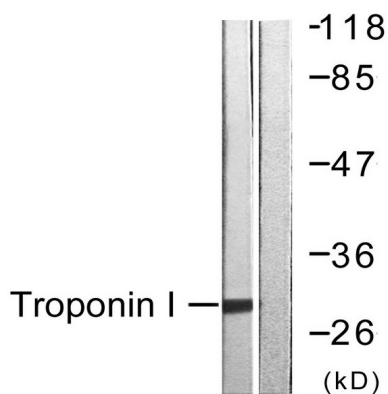
Cardiac muscle contraction;Hypertrophic cardiomyopathy (HCM);Dilated cardiomyopathy;

Image Data

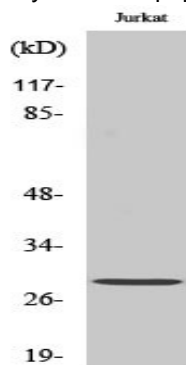


Immunohistochemistry analysis of paraffin-embedded human heart tissue, using TNNI3 Antibody. The picture on the right is blocked with the synthesized peptide.

Product Name: Troponin I-C Rabbit Polyclonal Antibody
Catalog #: APRab19305



Western blot analysis of lysates from Jurkat cells, using TNNI3 Antibody. The lane on the right is blocked with the synthesized peptide.



Western Blot analysis of various cells using Troponin I-C Polyclonal Antibody. Secondary antibody was diluted at 1:20000

Note

For research use only.