
Summary

Production Name	Troponin T-C Rabbit Polyclonal Antibody
Description	Rabbit Polyclonal Antibody
Host	Rabbit
Application	WB,IHC,IF,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	TNNT2
Alternative Names	TNNT2; Troponin T, cardiac muscle; TnTc; Cardiac muscle troponin T; cTnT
Gene ID	7139.0
SwissProt ID	P45379.The antiserum was produced against synthesized peptide derived from the Internal region of human TNNT2. AA range:131-180

Application

Dilution Ratio	WB 1:500 - 1:2000. IHC-p: 1:100-1:300. ELISA: 1:20000.. IF 1:50-200
Molecular Weight	35kD

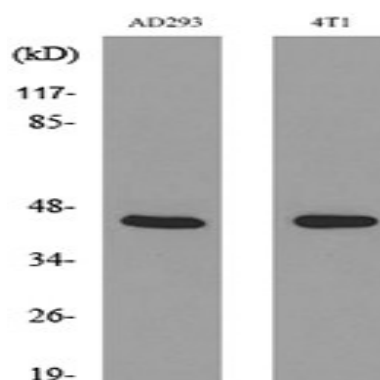
Background

The protein encoded by this gene is the tropomyosin-binding subunit of the troponin complex, which is located on the thin filament of striated muscles and regulates muscle contraction in response to alterations in intracellular calcium ion concentration. Mutations in this gene have been associated with familial hypertrophic cardiomyopathy as well as with dilated cardiomyopathy. Transcripts for this gene undergo alternative splicing that results in many tissue-specific isoforms, however, the full-length nature of some of these variants has not yet been determined. [provided by RefSeq, Jul 2008],alternative products:Additional isoforms seem to exist. Experimental confirmation may be lacking for some isoforms,disease:Defects in TNNT2 are the cause of cardiomyopathy dilated type 1D (CMD1D) [MIM:601494]. 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 TNNT2 are the cause of cardiomyopathy familial hypertrophic type 2 (CMH2) [MIM:115195]. 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 TNNT2 are the cause of cardiomyopathy familial restrictive type 3 (RCM3) [MIM:612422]. Restrictive cardiomyopathy is a heart 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 T is the tropomyosin-binding subunit of troponin, the thin filament regulatory complex which confers calcium-sensitivity to striated muscle actomyosin ATPase activity.,similarity:Belongs to the troponin T family.,tissue specificity:Heart. The fetal heart shows a greater expression in the atrium than in the ventricle, while the adult heart shows a greater expression in the ventricle than in the atrium. Isoform 6 predominates in normal adult heart. Isoforms 1, 7 and 8 are expressed in fetal heart. Isoform 7 is also expressed in failing adult heart.,

Research Area

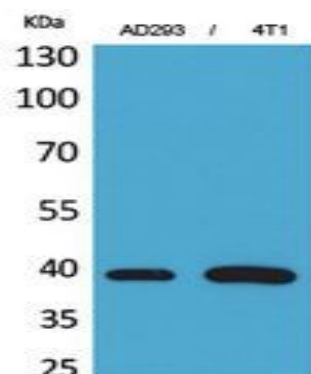
Cardiac muscle contraction;Hypertrophic cardiomyopathy (HCM);Dilated cardiomyopathy;

Image Data

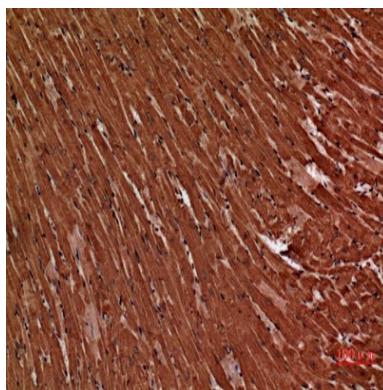


Western blot analysis of lysate from AD293, 4T1 cells, using TNNT2 Antibody.

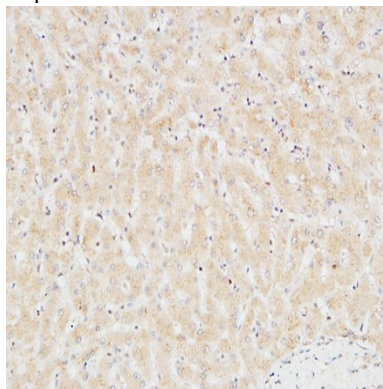
Product Name: Troponin T-C Rabbit Polyclonal Antibody
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Western Blot analysis of AD293, 4T1 cells using Troponin T-C Polyclonal Antibody.. Secondary antibody was diluted at 1:20000

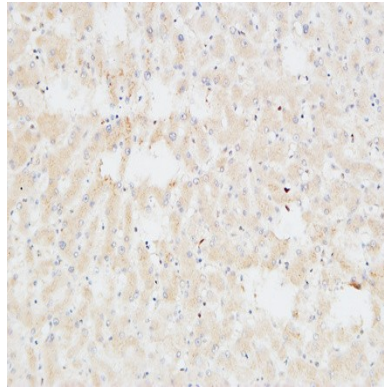


Immunohistochemical analysis of paraffin-embedded mouse-heart, antibody was diluted at 1:100

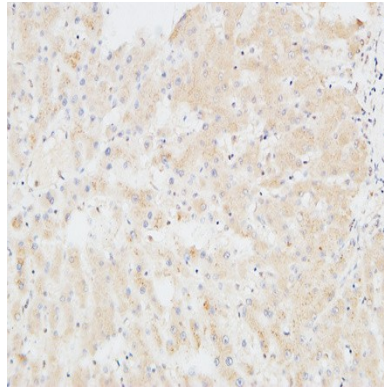


Immunohistochemical analysis of paraffin-embedded Human liver. 1, Antibody was diluted at 1:200 (4°,overnight) . 2, High-pressure and temperature EDTA, pH8.0 was used for antigen retrieval. 3,Secondary antibody was diluted at 1:200 (room temperature, 30min) .

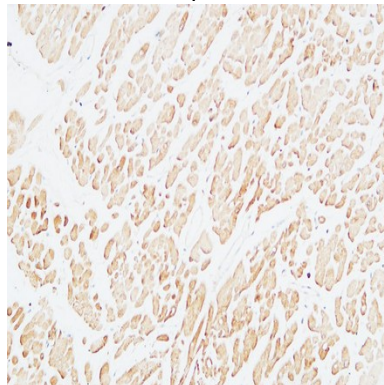
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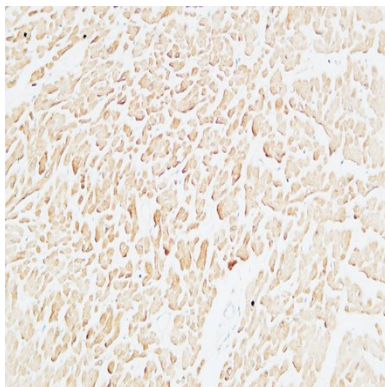


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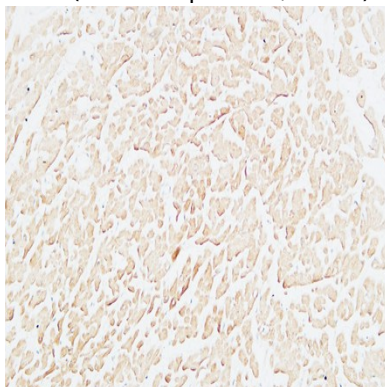


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Note

For research use only.