

Rabbit anti-Human p53 Polyclonal Antibody | anti-p53 antibody

p53 (S315) Rabbit pAb

CATALOG #	HOST	REACTIVITY	APPLICATIONS
AAA268684	Rabbit	Human	Immunofluorescence, ELISA, Immunohistochemistry, Immunocytochemistry, Western Blot

PRODUCT SYNONYMS

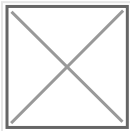
p53; Polyclonal Antibody; p53 (S315) Rabbit pAb; Cellular tumor antigen p53; Antigen NY-CO-13; Phosphoprotein p53; Tumor suppressor p53; TP53; P53; anti-p53 antibody

PRODUCT SPECIFICATIONS

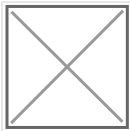
Host	Rabbit
Reactivity	Human
Clonality	Polyclonal
Isotype	IgG
Purity/Purification	Affinity Purified
Form/Format	Supplied in PBS with 0.09% (W/V) Sodium Azide. This antibody is purified through a protein A column, followed by peptide affinity purification.
Sequence Length	393
Applicable Applications for anti-p53 antibody	IF (Immunofluorescence), ELISA, IHC (Immunohistochemistry), ICC (Immunocytochemistry), WB (Western Blot)
Immunogen	This p53 antibody is generated from rabbits immunized with a KLH conjugated synthetic peptide between 293-322 amino acids from human p53.
Conjugation	Biotin
Cellular Localization	Nuclear
Tissue specificity	Ubiquitous. Isoforms are expressed in a wide range of normal tissues but in a tissue-dependent manner. Isoform 2 is expressed in most normal tissues but is not detected in brain, lung, prostate, muscle, fetal brain, spinal cord and fetal liver. Isoform 3 is expressed in most normal tissues but is not detected in lung, spleen, testis, fetal brain, spinal cord and fetal liver. Isoform 7 is expressed in most normal tissues but is not detected in prostate, uterus, skeletal muscle and breast. Isoform 8 is detected only in colon, bone marrow, testis, fetal brain and intestine. Isoform 9 is expressed in most normal tissues but is not detected in brain, heart, lung, fetal liver, salivary gland, breast or intestine.

Function	cofactor: Binds 1 zinc ion per subunit. ,Disease: Defects in TP53 are a cause of choroid plexus papilloma [MIM:260500]. Choroid plexus papilloma is a slow-growing benign tumor of the choroid plexus that often invades the leptomeninges. In children it is usually in a lateral ventricle but in adults it is more often in the fourth ventricle. Hydrocephalus is common, either from obstruction or from tumor secretion of cerebrospinal fluid. If it undergoes malignant transformation it is called a choroid plexus carcinoma. Primary choroid plexus tumors are rare and usually occur in early childhood. ,Disease: Defects in TP53 are a cause of Li-Fraumeni syndrome (LFS) [MIM:151623]. LFS is an autosomal dominant familial cancer syndrome that in its classic form is defined by the existence of a proband affected by a sarcoma before 45 years with a first degree relative affected by any tumor before 45 years and another first degree relative with any tumor before 45 years or a sarcoma at any age. Other clinical definitions for LFS have been proposed (PubMed:8118819 and PubMed:8718514) and called Li-Fraumeni like syndrome (LFL). In these families affected relatives develop a diverse set of malignancies at unusually early ages. Four types of cancers account for 80% of tumors occurring in TP53 germline mutation carriers: breast cancers, soft tissue and bone sarcomas, brain tumors (astrocytomas) and adrenocortical carcinomas. Less frequent tumors include choroid plexus carcinoma or papilloma before the age of 15, rhabdomyosarcoma before the age of 5, leukemia, Wilms tumor, malignant phylloides tumor, colorectal and gastric cancers. ,Disease: Defects in TP53 are a cause of lung cancer [MIM:211980]. ,Disease: Defects in TP53 are a cause of one form of hereditary adrenocortical carcinoma (ADCC) [MIM:202300]. ADCC is a rare childhood tumor, representing about 0.4% of childhood tumors, with a high incidence of associated tumors. ADCC occurs with increased frequency in patients with the Beckwith Wiedemann syndrome [MIM:130650] and is a component tumor in Li-Fraumeni syndrome [MIM:151623]. ,Disease: Defects in TP53 are found in Barrett metaplasia; also known as Barrett esophagus. It is a condition in which the normally stratified squamous epithelium of the lower esophagus is replaced by a metaplastic columnar epithelium. The condition develops as a complication in approximately 10% of patients with chronic gastroesophageal reflux disease and predisposes to the development of esophageal adenocarcinoma. ,Disease: Defects in TP53 are involved in esophageal squamous cell carcinoma (ESCC) [MIM:133239]. ESCC is a tumor of the esophagus. ,Disease: Defects in TP53 are involved in head and neck squamous cell carcinomas (HNSCC) [MIM:275355]. ,Disease: Defects in TP53 are involved in oral squamous cell carcinoma (OSCC). Cigarette smoke is a prime mutagenic agent in cancer of the aerodigestive tract. ,Disease: Defects in TP53 may be associated with nasopharyngeal carcinoma [MIM:161550]; also known as nasopharyngeal cancer.
Preparation and Storage	Store at -15°C to -25°C/1 year (Do not lower than -25°C)

IMAGES



IHC (Immunohistochemistry)
Immunohistochemistry analysis of paraffin-embedded human breast carcinoma, using p53 (Ser315) Antibody.



WB (Western Blot)
Western Blot analysis of 293 cells using p53 (S315) Polyclonal Antibody diluted at 1:1000.

NCBI AND UNIPROT INFORMATION

NCBI GI #	120407068
NCBI GeneID	7157
NCBI Accession #	NP_000537.3
NCBI GenBank Nucleotide #	NP_000537.3
UniProt Accession #	P04637
Molecular Weight	43kD (Observed)
NCBI Official Full Name	cellular tumor antigen p53 isoform a
NCBI Official Synonym Full Names	tumor protein p53
NCBI Official Symbol	TP53
NCBI Official Synonym Symbols	P53; BCC7; LFS1; BMFS5; TRP53
NCBI Protein Information	cellular tumor antigen p53

UniProt Protein Name	Cellular tumor antigen p53
UniProt Gene Name	TP53
UniProt Synonym Gene Names	P53
UniProt Entry Name	P53_HUMAN

For Research Use Only. Not for use in diagnostic or therapeutic procedures. Small volumes of product may become entrapped in the seal of the vial during shipment and storage; if necessary, briefly centrifuge the vial on a tabletop centrifuge to dislodge any liquid in the cap.

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Online datasheet: <https://stage.aaabiotech.com/polyclonal/p53-antibody-immunofluorescence-immunohistochemistry-immunocytochemistry-western-blot-elisa/268684>