

GDF15 Polyclonal Antibody

Product Details	
Size	100 µg
Species Reactivity	Human
Published Species	Human
Host/Isotype	Rabbit / IgG
Class	Polyclonal
Type	Antibody
Conjugate	Unconjugated
Immunogen	Synthetic peptide derived from the N-terminal region of the human GDF-15 protein
Form	Liquid
Concentration	0.25 mg/mL
Purification	Antigen affinity chromatography
Storage buffer	PBS, pH 7.4
Contains	0.1% sodium azide
Storage conditions	-20°C
RRID	AB_2533515

Applications	Tested Dilution	Publications
Western Blot (WB)	1 µg/mL	-
Immunocytochemistry (ICC/IF)	5 µg/mL	-
Inhibition Assays (IA)	-	1 Publication
In vitro Assay (IV)	-	1 Publication

Product Images For GDF15 Polyclonal Antibody

GDF15 Antibody (42-1700) in WB

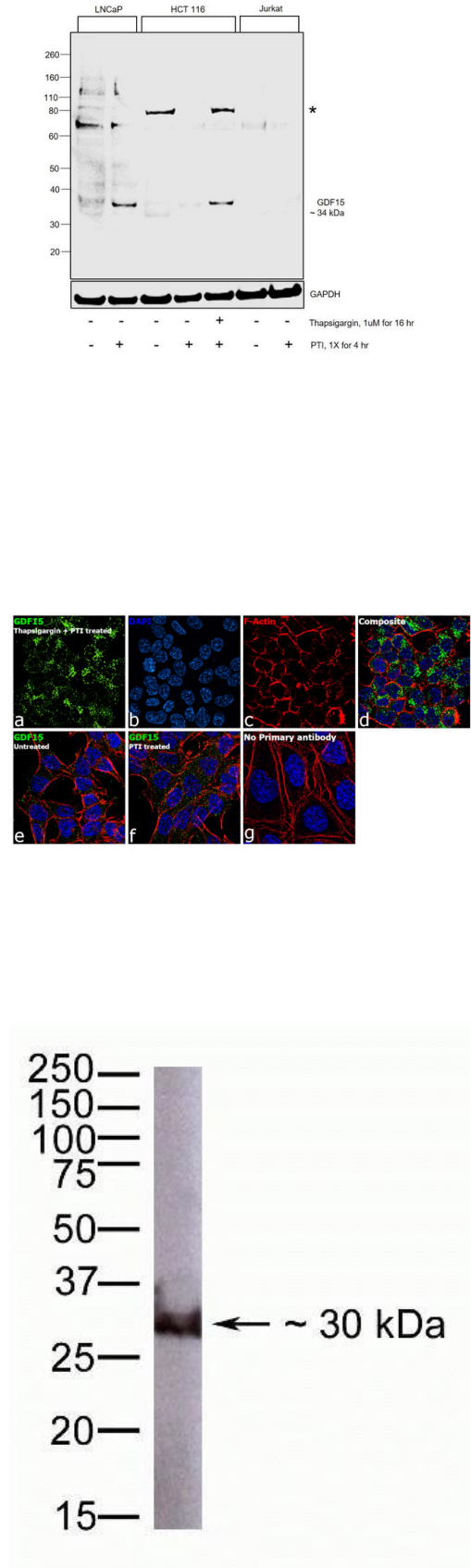
Western blot was performed using Anti-GDF15 Polyclonal Antibody(Product # 42-1700) and a 34 kDa band corresponding to GDF15 was observed across cell lines tested except Jurkat which is reported to be negative. The expression of protein was also increased upon thapsigargin treatment in HCT 116. Whole cell extracts (50 µg lysate) of LNCaP (Lane 1), LNCaP treated with PTI (1X for 4hr) (Lane 2), HCT 116 (Lane 3), HCT 116 treated with PTI (1X for 4hr) (Lane 4), HCT 116 treated with thapsigargin (1 µM for 16hr) followed by PTI (1X for 4hr) (Lane 5), Jurkat (Lane 6) and Jurkat treated with PTI (1X for 4hr) (Lane 7) were electrophoresed using NuPAGE™ 4-12% Bis-Tris Protein Gel (Product # NP0322BOX). Resolved proteins were then transferred onto a Nitrocellulose membrane (Product # IB23001) by iBlot® 2 Dry Blotting System (Product # IB21001). The blot was probed with the primary antibody (1 µg/mL) and detected by chemiluminescence with Goat anti-Rabbit IgG (Heavy Chain) Superclonal™ Recombinant Secondary Antibody, HRP (Product # A27036,1:4000 dilution) using the iBright FL 1000 (Product # A32752). Chemiluminescent detection was performed using Novex® ECL Chemiluminescent Substrate Reagent Kit (Product # WP20005).

GDF15 Antibody (42-1700) in ICC/IF

Immunofluorescence analysis of GDF15 was performed using 70% confluent log phase HCT 116 cells treated with 1 µm of Thapsigargin for 16 hours and PTI. The cells were fixed with 4% paraformaldehyde for 10 minutes, permeabilized with 0.1% Triton™ X-100 for 15 minutes, and blocked with 2% BSA for 45 minutes at room temperature. The cells were labeled with GDF15 Polyclonal Antibody (Product # 42-1700) at 5 µg/mL in 0.1% BSA, incubated at 4 degree celsius overnight and then labeled with Donkey anti-Rabbit IgG (H+L) Highly Cross-Adsorbed Secondary Antibody, Alexa Fluor Plus 488 (Product # A32790), (1:2000), for 45 minutes at room temperature (Panel a: Green). Nuclei (Panel b: Blue) were stained with ProLong™ Diamond Antifade Mountant with DAPI (Product # P36962). F-actin (Panel c: Red) was stained with Rhodamine Phalloidin (Product # R415, 1:300). Panel d represents the merged image showing cytoplasmic(Golgi complex like pattern) localization. Panel e represents untreated cells . Panel f represents cells treated with PTI alone. Panel g represents control cells with no primary antibody to assess background. The images were captured at 60X magnification.

GDF15 Antibody (42-1700) in WB

Western blot analysis of LNCaP.FGC cell lysates using Zymed Rb anti-GDF-15 (Product # 42-1700).



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Inhibition Assays (1)

<p>Cancers</p> <p>GDF15 Is an Eribulin Response Biomarker also Required for Survival of DTP Breast Cancer Cells.</p> <p>"42-1700 was used in In vitro experiments to show that the growth differentiation factor 15 (GDF15) is a protein significantly over-secreted upon eribulin treatment."</p> <p>Authors: Bellio C,Emperador M,Castellano P,Gris-Oliver A,Canals F,Sánchez-Pla A,Zamora E,Arribas J,Saura C,Serra V,Tabernero J,Littlefield BA,Villanueva J</p>	<p>Year 2022</p> <p>Species Human</p>
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In vitro Assay (1)

<p>Cancers</p> <p>GDF15 Is an Eribulin Response Biomarker also Required for Survival of DTP Breast Cancer Cells.</p> <p>"42-1700 was used in In vitro experiments to show that the growth differentiation factor 15 (GDF15) is a protein significantly over-secreted upon eribulin treatment."</p> <p>Authors: Bellio C,Emperador M,Castellano P,Gris-Oliver A,Canals F,Sánchez-Pla A,Zamora E,Arribas J,Saura C,Serra V,Tabernero J,Littlefield BA,Villanueva J</p>	<p>Year 2022</p> <p>Species Human</p>
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