



### Anti-human VEGFR-2/KDR

20201118DS

**FOR RESEARCH ONLY! NOT FOR HUMAN USE!**

<b>Cat.-no.:</b>	<b>102-PA18</b>
Size:	200 µg
Lot. No.:	According to product label
Country of origin:	Germany

**Preparation:** Produced from sera of rabbits immunized with highly pure recombinant human soluble extracellular domain of KDR (D1-7) as the immunizing antigen.

### Target Background

<b>Synonyms:</b>	Vascular endothelial growth factor receptor 2, Protein-tyrosine kinase receptor flk-1
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sKDR<sub>D1-7</sub>) is produced as a non-chimeric protein in a monomeric form. The soluble receptor protein consists of all 7 extracellular domains, which contain all the information necessary for high affinity ligand binding. The receptor monomers have a mass of approximately 116kDa.

Endothelial cells express three different vascular endothelial growth factor (VEGF) receptors, belonging to the family of receptor tyrosine kinases (RTKs). They are named VEGFR-1 (Flt-1), VEGFR-2 (KDR/Flk-1), VEGFR-3 (Flt-4). Their expression is almost exclusively restricted to endothelial cells, but VEGFR-1 can also be found on monocytes.

All VEGF-receptors have seven immunoglobulin-like extracellular domains, a single transmembrane region and an intracellular split tyrosine kinase domain. VEGFR-2 has a lower affinity for VEGF than the Flt-1 receptor, but a higher signaling activity. Mitogenic activity in endothelial cells is mainly mediated by VEGFR-2 leading to their proliferation. The binding of VEGF<sub>165</sub> to VEGFR-2 is dependent on heparin.

### References

1. Röckl et al., 1998, Exp Cell Res, 241: 161-170].

### Database References Antigen

<b>Protein RefSeq:</b>	NP_002244.1
<b>Uniprot ID:</b>	P35968
<b>mRNA RefSeq:</b>	NM_002253.2

### Product Specifications

<b>Species reactivity</b>	human
<b>Clone/Ab feature</b>	Rabbit IgG
<b>Cross reactivity</b>	ND
<b>Host</b>	rabbit
<b>Clonality</b>	polyclonal
<b>Purification</b>	Protein A purified
<b>Immunogen</b>	Recombinant human KDR (D1-7)
<b>Formulation</b>	lyophilized
<b>Buffer</b>	PBS

**Stability:** The lyophilized antibody is stable for at least 2 years at -20°C. After sterile reconstitution the antibody is stable at 2-8°C for up to 6 months. Frozen aliquots are stable for at least 6 months when stored at -20°C. Addition of a carrier protein or 50% glycerol is recommended for frozen aliquots.

**Reconstitution:** Centrifuge vial prior to opening. Reconstitute in sterile water to a concentration of 0.1-1.0 mg/ml.

 **AVOID REPEATED FREEZE AND THAW CYCLES!**

### Applications

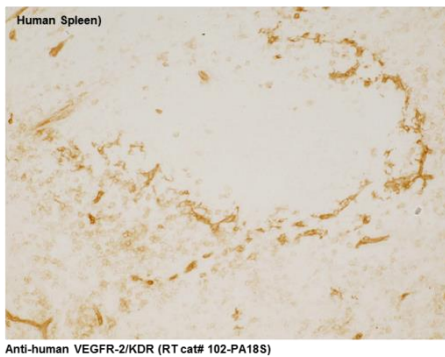
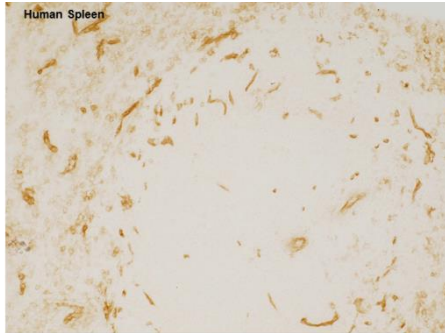
<b>Western Blot:</b>	Use at 1-5 µg/ml
<b>ELISA:</b>	Use at 5-15 µg/ml
<b>Others</b>	For IP use 1-2 µg/ml
<b>FACS</b>	Use at 1-5 µg/ml

**NOTE: OPTIMAL DILUTIONS SHOULD BE DETERMINED BY EACH LABORATORY FOR EACH APPLICATION!**

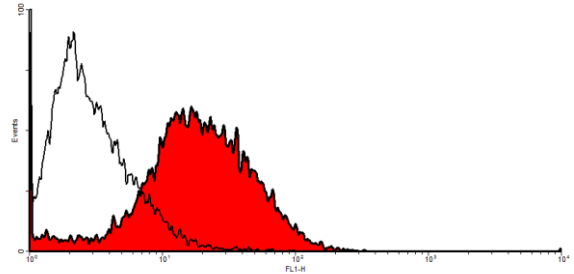


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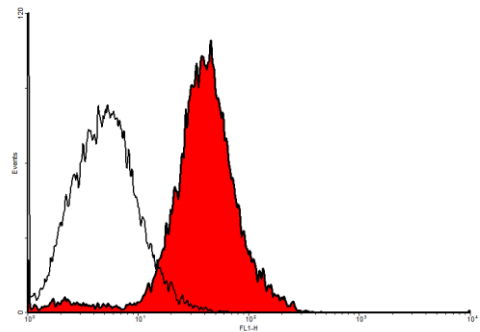
## Handling/Applications



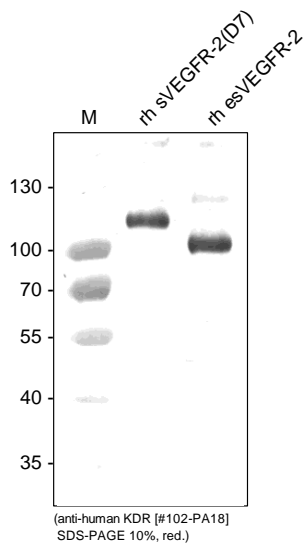
**Figure 1:** IHC with cryo sections of human spleen. The experiment was performed by Prof. Dr. Birte Steiniger, Institute of Anatomy and Cell Biology Robert-Koch-Str. 8, D-35037 Marburg, Germany



**Figure 3.** FACS analysis with primary human umbilical vein endothelial cells (HUVEC).



**Figure 4.** FACS analysis with primary human dermal lymphatic endothelial cells (HDLEC).



**Figure 2:** Western Analysis of anti-human VEGFR-2/KDR. Samples were loaded in 10% SDS-polyacrylamide gel under reducing conditions.