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## anti-DPYD antibody (AA 265-370) (Alexa Fluor 647)



Overview	
Quantity:	100 μL
Target:	DPYD
Binding Specificity:	AA 265-370
Reactivity:	Human
Host:	Rabbit
Clonality:	Polyclonal
Conjugate:	This DPYD antibody is conjugated to Alexa Fluor 647
Application:	Western Blotting (WB), Immunofluorescence (Cultured Cells) (IF (cc)), Immunofluorescence (Paraffin-embedded Sections) (IF (p))
Product Details	
Immunogen:	KLH conjugated synthetic peptide derived from human DPYD
Isotype:	IgG
Predicted Reactivity:	Human,Mouse,Rat,Dog,Cow,Sheep,Pig,Horse,Rabbit
Purification:	Purified by Protein A.
Target Details	
Target:	DPYD
Alternative Name:	DPYD (DPYD Products)
Background:	Synonyms: DHP, DHPDHase, Dihydropyrimidine dehydrogenase [NADP+], Dihydropyrimidine

dehydrogenase, Dihydrothymine dehydrogenase, Dihydrouracil dehydrogenase, DPD, DPYD, DPYD\_HUMAN, MGC132008, MGC70799, OTTHUMP00000058954.

Background: Dihydropyrimidine dehydrogenase (DPYD) catalyzes the first rate-limiting step of the NADPH-dependent catabolism of uracil and thymine to dihydrouracil and dihydrothymine, thus, a deficiency of DPYD leads to an accumulation of uracil and thymine. Abnormal concentrations of these metabolites in bodily fluids may be the cause of neurological disease and a contraindication for treatment of cancer patients with certain pyrimidine analogs. DPYD also catalyzes the anticancer agent 5-fluorouracil (5-FU) pathway and is involved in the efficacy and toxicity of 5-FU. Variations in DPYD concentration may arise from alterations at the transcriptional level of the dihydropyrimidine dehydrogenase gene. Specifically, hypermethylation of the DPYD promoter downregulates dihydropyrimidine dehydrogenase expression. Deficient DPYD alleles may constitute a risk factor for severe toxicity following treatment with 5-FU. Involvement in disease: Defects in DPYD are the cause of dihydropyrimidine dehydrogenase deficiency (DPYD deficiency), also known as hereditary thymine-uraciluria or familial pyrimidinemia. DPYD deficiency is a disease characterized by persistent urinary excretion of excessive amounts of uracil, thymine and 5-hydroxymethyluracil. Patients suffering from this disease show a severe reaction to the anticancer drug 5-fluorouracil. This reaction includes stomatitis, Leukopenia, thrombocytopenia, hair loss, diarrhea, fever, marked weight loss, cerebellar ataxia, and neurologic symptoms, progressing to semicoma.

Gene ID: 1806

Pathways: Ribonucleoside Biosynthetic Process

#### **Application Details**

Application Notes: IF(IHC-P) 1:50-200

IF(IHC-F) 1:50-200

IF(ICC) 1:50-200

Restrictions: For Research Use only

#### Handling

Format: Liquid

Concentration:  $1 \mu g/\mu L$ Buffer: Aqueous buffered solution containing 0.01M TBS (pH 7.4) with 1 % BSA, 0.03 % Proclin300 and 50 % Glycerol.

### Handling

Preservative:	ProClin
Precaution of Use:	This product contains ProClin: a POISONOUS AND HAZARDOUS SUBSTANCE, which should be handled by trained staff only.
Storage:	-20 °C
Storage Comment:	Store at -20°C. Aliquot into multiple vials to avoid repeated freeze-thaw cycles.
Expiry Date:	12 months