

SLC25A13 Polyclonal Antibody

Purified Rabbit Polyclonal Antibody (Pab) Catalog # AP58119

Product Information

Application WB, IHC-P, IHC-F, IF, E

Primary Accession Q9U|S0

Reactivity Rat, Pig, Dog, Bovine

Host Rabbit
Clonality Polyclonal
Calculated MW 74176
Physical State Liquid

Immunogen KLH conjugated synthetic peptide derived from human SLC25A13

Epitope Specificity 351-450/675

Isotype IgG

Purity affinity purified by Protein A

Buffer

SUBCELLULAR LOCATION

SIMILARITY

0.01M TBS (pH7.4) with 1% BSA, 0.02% Proclin300 and 50% Glycerol. Mitochondrion inner membrane; Multi-pass membrane protein.

Belongs to the mitochondrial carrier family. Contains 4 EF-hand domains.

Contains 3 Solcar repeats.

DISEASE Defects in SLC25A13 are the cause of citrullinemia type 2 (CTLN2)

[MIM:603471]. Citrullinemia belongs to the urea cycle disorders. It is an autosomal recessive disease characterized primarily by elevated serum and urine citrulline levels. Ammonia intoxication is another manifestation. CTLN2 is characterized by neuropsychiatric symptoms including abnormal behaviors, loss of memory, seizures and coma. Death can result from brain edema. Onset is sudden and usually between the ages of 20 and 50 years. Defects in SLC25A13 are the cause of neonatal intrahepatic cholestasis due to citrin deficiency (NICCD) [MIM:605814]. NICCD is a form of citrullinemia type 2 with neonatal onset. NICCD is characterized by suppression of the bile flow, hepatic fibrosis, low birth weight, growth retardation, hypoproteinemia, variable liver dysfunction. NICCD is generally not severe and symptoms disappear by one year of age with an appropriate diet. Years or even decades

later, however, some individuals develop the characteristic features of citrullinemia type 2 with neuropsychiatric symptoms.

Important Note This product as supplied is intended for research use only, not for use in

human, therapeutic or diagnostic applications.

Background Descriptions SLC25A13 is a member of the mitochondrial carrier family. It contains four

EF-hand Ca(2+) binding motifs in the N-terminal domain, and localizes to mitochondria. It catalyzes the exchange of aspartate for glutamate and a proton across the inner mitochondrial membrane, and is stimulated by calcium on the external side of the inner mitochondrial membrane. Mutations in the SLC25A13 gene result in citrullinemia, type II. Multiple transcript

variants encoding different isoforms have been found for this gene.

Additional Information

Gene ID 10165

Other Names Calcium-binding mitochondrial carrier protein Aralar2, Citrin, Mitochondrial

aspartate glutamate carrier 2, Solute carrier family 25 member 13, SLC25A13,

ARALAR2

Target/Specificity High levels in liver and low levels in kidney, pancreas, placenta, heart and

brain.

Dilution WB=1:500-2000,IHC-P=1:100-500,IHC-F=1:100-500,IF=1:100-500,ELISA=1:5000

-10000

Format 0.01M TBS(pH7.4) with 1% BSA, 0.09% (W/V) sodium azide and 50% Glyce

Storage Store at -20 °C for one year. Avoid repeated freeze/thaw cycles. When

reconstituted in sterile pH 7.4 0.01M PBS or diluent of antibody the antibody

is stable for at least two weeks at 2-4 °C.

Protein Information

Name SLC25A13 (<u>HGNC:10983</u>)

Function Mitochondrial electrogenic aspartate/glutamate antiporter that favors efflux

of aspartate and entry of glutamate and proton within the mitochondria as part of the malate-aspartate shuttle (PubMed:<u>11566871</u>, PubMed:<u>38945283</u>). Also mediates the uptake of L- cysteinesulfinate (3-sulfino-L-alanine) by mitochondria in exchange of L-glutamate and proton (PubMed:<u>11566871</u>). Can also exchange L- cysteinesulfinate with aspartate in their anionic form without any proton translocation (PubMed:<u>11566871</u>). Lacks transport activity

towards gamma-aminobutyric acid (GABA) (PubMed:38945283).

Cellular Location Mitochondrion inner membrane; Multi-pass membrane protein

Tissue Location High levels in liver and low levels in kidney, pancreas, placenta, heart and

brain.

Please note: All products are 'FOR RESEARCH USE ONLY. NOT FOR USE IN DIAGNOSTIC OR THERAPEUTIC PROCEDURES'.