

# Cleaved-Caspase-9 p35 (D315) Polyclonal Antibody

Catalog # AP63089

## Product Information

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<b>Application</b>	WB, IHC-P, IF, ICC, E
<b>Primary Accession</b>	<a href="#">P55211</a>
<b>Reactivity</b>	Human, Rat, Mouse
<b>Host</b>	Rabbit
<b>Clonality</b>	Polyclonal
<b>Calculated MW</b>	46281

## Additional Information

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<b>Gene ID</b>	842
<b>Other Names</b>	CASP9; MCH6; Caspase-9; CASP-9; Apoptotic protease Mch-6; Apoptotic protease-activating factor 3; APAF-3; ICE-like apoptotic protease 6; ICE-LAP6
<b>Dilution</b>	WB~~WB 1:500-2000, IHC-p 1:50-300, IF 1:50-300 IHC-P~~WB 1:500-2000, IHC-p 1:50-300, IF 1:50-300 IF~~1:50~200 ICC~~N/A E~~N/A
<b>Format</b>	Liquid in PBS containing 50% glycerol, 0.5% BSA and 0.09% (W/V) sodium azide.
<b>Storage Conditions</b>	-20°C

## Protein Information

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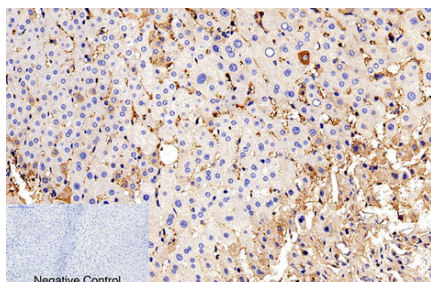
<b>Name</b>	CASP9
<b>Synonyms</b>	MCH6
<b>Function</b>	Involved in the activation cascade of caspases responsible for apoptosis execution. Binding of caspase-9 to Apaf-1 leads to activation of the protease which then cleaves and activates effector caspases caspase-3 (CASP3) or caspase-7 (CASP7). Promotes DNA damage- induced apoptosis in a ABL1/c-Abl-dependent manner. Proteolytically cleaves poly(ADP-ribose) polymerase (PARP). Cleaves BIRC6 following inhibition of BIRC6-caspase binding by DIABLO/SMAC (PubMed: <a href="#">36758105</a> , PubMed: <a href="#">36758106</a> ).
<b>Tissue Location</b>	Ubiquitous, with highest expression in the heart, moderate expression in liver, skeletal muscle, and pancreas. Low levels in all other tissues. Within the heart, specifically expressed in myocytes.

## Background

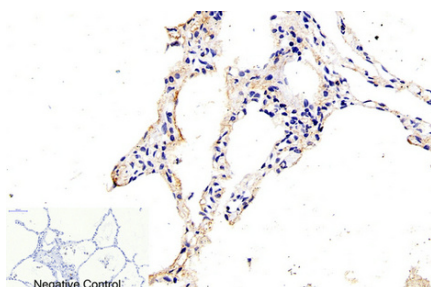
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Involved in the activation cascade of caspases responsible for apoptosis execution. Binding of caspase-9 to Apaf- 1 leads to activation of the protease which then cleaves and activates caspase-3. Promotes DNA damage-induced apoptosis in a ABL1/c-Abl-dependent manner. Proteolytically cleaves poly(ADP- ribose) polymerase (PARP).

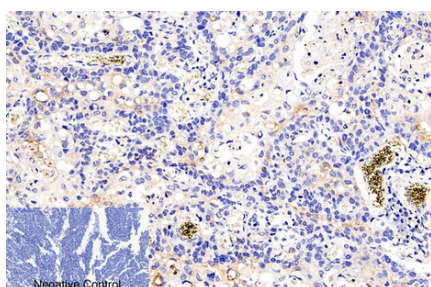
## Images



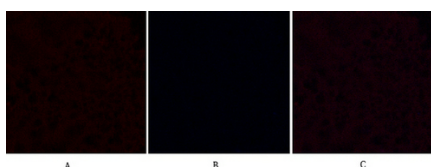
Immunohistochemical analysis of paraffin-embedded Human-liver tissue. 1,Cleaved-Caspase-9 p35 (D315) Polyclonal Antibody was diluted at 1:200(4°C,overnight). 2, Sodium citrate pH 6.0 was used for antibody retrieval(>98°C,20min). 3,Secondary antibody was diluted at 1:200(room temperature, 30min). Negative control was used by secondary antibody only.



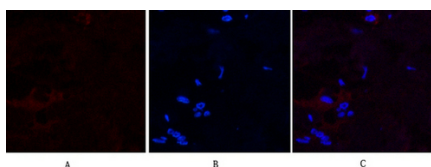
Immunohistochemical analysis of paraffin-embedded Human-lung tissue. 1,Cleaved-Caspase-9 p35 (D315) Polyclonal Antibody was diluted at 1:200(4°C,overnight). 2, Sodium citrate pH 6.0 was used for antibody retrieval(>98°C,20min). 3,Secondary antibody was diluted at 1:200(room temperature, 30min). Negative control was used by secondary antibody only.



Immunohistochemical analysis of paraffin-embedded Human-lung-cancer tissue. 1,Cleaved-Caspase-9 p35 (D315) Polyclonal Antibody was diluted at 1:200(4°C,overnight). 2, Sodium citrate pH 6.0 was used for antibody retrieval(>98°C,20min). 3,Secondary antibody was diluted at 1:200(room temperature, 30min). Negative control was used by secondary antibody only.

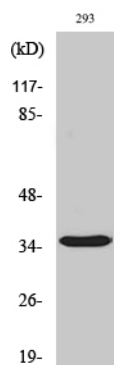
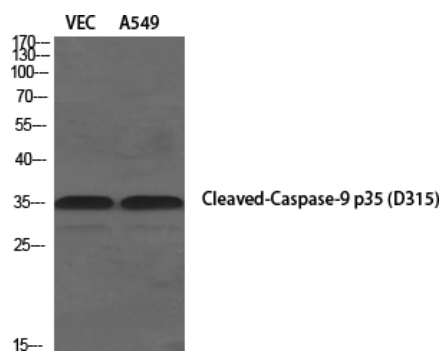


Immunofluorescence analysis of Human-breast tissue. 1,Cleaved-Caspase-9 p35 (D315) Polyclonal Antibody(red) was diluted at 1:200(4°C,overnight). 2, Cy3 labeled Secondary antibody was diluted at 1:300(room temperature, 50min).3, Picture B: DAPI(blue) 10min. Picture A:Target. Picture B: DAPI. Picture C: merge of A+B



Immunofluorescence analysis of Human-breast tissue. 1,Cleaved-Caspase-9 p35 (D315) Polyclonal Antibody(red) was diluted at 1:200(4°C,overnight). 2, Cy3 labeled Secondary antibody was diluted at 1:300(room temperature, 50min).3, Picture B: DAPI(blue) 10min. Picture A:Target. Picture B: DAPI. Picture C: merge of A+B

Western Blot analysis of various cells using Cleaved-Caspase-9 p35 (D315) Polyclonal Antibody diluted at 1 : 1000



Western Blot analysis of 293 cells using  
Cleaved-Caspase-9 p35 (D315) Polyclonal Antibody  
diluted at 1 : 1000

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