

# **CASR Antibody**

Catalog # ASC11796

#### **Product Information**

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

Primary Accession P41180

Other Accession NP\_001171536, 296010811

**Reactivity** Human, Mouse, Rat

Host Rabbit
Clonality Polyclonal
Isotype IgG
Calculated MW 120675
Concentration (mg/ml) 1 mg/mL
Conjugate Unconjugated

**Application Notes** CASR antibody can be used for detection of CASR by Western blot at 1 - 2

□g/ml. Antibody can also be used for Immunohistochemistry at 5 □g/mL. For

Immunoflorescence start at 20 g/mL.

#### **Additional Information**

Gene ID 846

Other Names Extracellular calcium-sensing receptor, CaSR, Parathyroid cell calcium-sensing

receptor 1, PCaR1, CASR, GPRC2A, PCAR1

**Target/Specificity** CASR; CASR antibody is human, mouse and rat reactive. At least two isoforms

of CASR are known to exist.

**Reconstitution & Storage** CASR antibody can be stored at 4°C for three months and -20°C, stable for up

to one year.

**Precautions** CASR Antibody is for research use only and not for use in diagnostic or

therapeutic procedures.

#### **Protein Information**

Name CASR {ECO:0000303 | PubMed:16740594, ECO:0000312 | HGNC:HGNC:1514}

**Function** G-protein-coupled receptor that senses changes in the extracellular

concentration of calcium ions and plays a key role in maintaining calcium homeostasis (PubMed: 17555508, PubMed: 19789209, PubMed: 21566075,

PubMed:<u>22114145</u>, PubMed:<u>22789683</u>, PubMed:<u>23966241</u>, PubMed:<u>25104082</u>, PubMed:<u>25292184</u>, PubMed:<u>25766501</u>, PubMed:<u>26386835</u>, PubMed:<u>32817431</u>, PubMed:<u>33603117</u>,

PubMed:34194040, PubMed:34467854, PubMed:7759551, PubMed:8636323, PubMed:8702647, PubMed:8878438). Senses fluctuations in the circulating calcium concentration: activated by elevated circulating calcium, leading to decreased parathyroid hormone (PTH) secretion in parathyroid glands (By

similarity). In kidneys, acts as a key regulator of renal tubular calcium resorption (By similarity). Ligand binding causes a conformation change that triggers signaling via guanine nucleotide-binding proteins (G-proteins) and modulates the activity of downstream effectors (PubMed:38632411). CASR is coupled with different G(q)/G(11), G(i)/G(o)- or G(s)-classes of G-proteins depending on the context (PubMed:38632411). In the parathyroid and kidney, CASR signals through G(q)/G(11) and G(i)/G(o) G-proteins: G(q)/G(11) coupling activates phospholipase C-beta, releasing diacylglycerol (DAG) and inositol 1,4,5-trisphosphate (IP3) second messengers, while G(i)/G(o) coupling mediates inhibition of adenylate cyclase activity (PubMed:38632411, PubMed: 7759551). The G-protein-coupled receptor activity is activated by a co-agonist mechanism: aromatic amino acids, such as Trp or Phe, act concertedly with divalent cations, such as calcium or magnesium, to achieve full receptor activation (PubMed: 27386547, PubMed: 27434672, PubMed:32817431, PubMed:33603117, PubMed:34194040). Acts as an activator of the NLRP3 inflammasome via G(i)/G(o)-mediated signaling: down-regulation of cyclic AMP (cAMP) relieving NLRP3 inhibition by cAMP (PubMed:32843625). Acts as a regulator of proton-sensing receptor GPR68 in a seesaw manner: CASR-mediated signaling inhibits GPR68 signaling in response to extracellular calcium, while GPR68 inhibits CASR in presence of extracellular protons (By similarity).

Cellular Location (

Cell membrane; Multi-pass membrane protein

**Tissue Location** 

Expressed in the temporal lobe, frontal lobe, parietal lobe, hippocampus, and cerebellum. Also found in kidney, lung, liver, heart, skeletal muscle, placenta.

### **Background**

The calcium-sensing receptor protein (CASR) is a G protein-coupled receptor that is expressed in the parathyroid hormone (PTH)-producing chief cells of the parathyroid gland, and the cells lining the kidney tubule (1). It senses small changes in circulating calcium concentration and couples this information to intracellular signaling pathways that modify PTH secretion or renal cation handling, thus this protein plays an essential role in maintaining mineral ion homeostasis (1). Mutations in this gene cause familial hypocalciuric hypercalcemia, familial, isolated hypoparathyroidism, and neonatal severe primary hyperparathyroidism (1,2). Recent evidence suggests that activated CASR contributes to the cytokine secretion through the partial MAPK and NF-kappaB pathways in T cells (3).

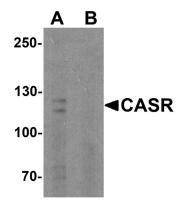
#### References

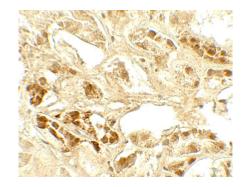
Pollak MR, Brown EM, Chou YH, et al. Mutations in the human Ca(2+)-sensing receptor gene cause familial hypocalciuric hypercalcemia and neonatal severe hyperparathyroidism. Cell 1993; 75:1297-303. Jakobsen SF, Rolighed L, Nissen PH, et al. Muscle function and quality of life are not impaired in familial hypocalciuric hypercalcemia: a cross-sectional study on physiological effects of inactivating variants in the calcium-sensing receptor gene (CASR). Eur. J. Endocrinol. 2013; 169:349-57.

Li T, Sun M, Yin X, et al. Expression of the calcium sensing receptor in human peripheral blood T lymphocyte and its contribution to cytokine secretion through MAPKs or NF-kB pathways. Mol. Immunol. 2013; 53:414-20.

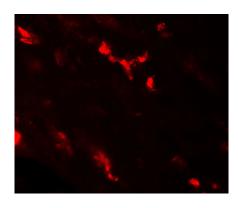
## **Images**

Western blot analysis of CASR in EL4 cell lysate with CASR antibody at 1  $\mu$ g/ml in (A) the absence and (B) the presence of blocking peptide.





Immunohistochemistry of CASR in human kidney tissue with CASR antibody at 5  $\mu g/mL$ .



Immunofluorescence of CASR in human kidney tissue with CASR antibody at 20  $\mu\text{g/mL}.$ 

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