

## DESCRIPTION

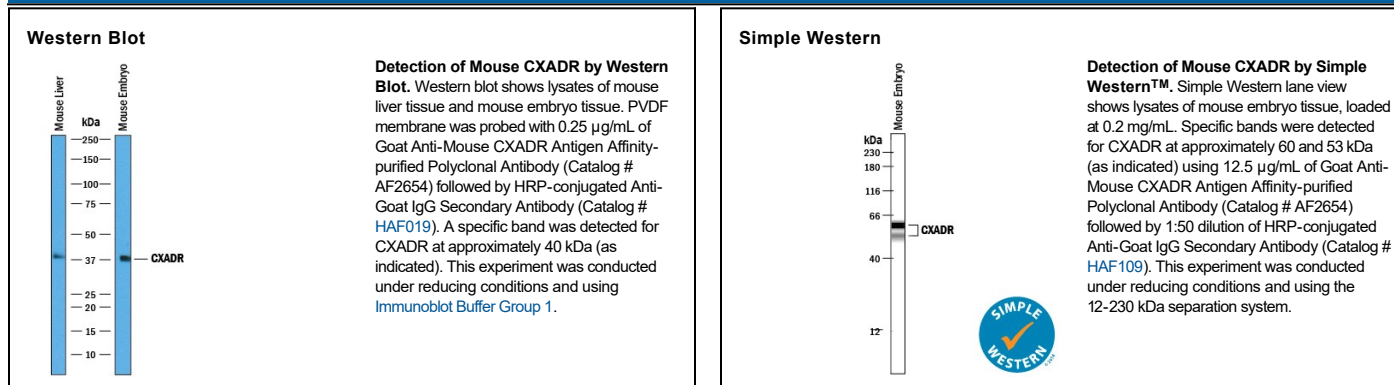
<b>Species Reactivity</b>	Mouse
<b>Specificity</b>	Detects mouse CXADR in direct ELISAs and Western blots. In direct ELISAs and Western blots, approximately 35% cross-reactivity with recombinant human CXADR is observed.
<b>Source</b>	Polyclonal Goat IgG
<b>Purification</b>	Antigen Affinity-purified
<b>Immunogen</b>	Mouse myeloma cell line NS0-derived recombinant mouse CXADR Leu20-Gly237 Accession # P97792
<b>Formulation</b>	Lyophilized from a 0.2 µm filtered solution in PBS with Trehalose. See Certificate of Analysis for details. *Small pack size (-SP) is supplied either lyophilized or as a 0.2 µm filtered solution in PBS.

## APPLICATIONS

**Please Note:** Optimal dilutions should be determined by each laboratory for each application. [General Protocols](#) are available in the Technical Information section on our website.

	<b>Recommended Concentration</b>	<b>Sample</b>
<b>Western Blot</b>	0.25 µg/mL	See Below
<b>Immunohistochemistry</b>	5-15 µg/mL	Immersion fixed frozen sections of mouse embryo (E15.5)
<b>Simple Western</b>	12.5 µg/mL	See Below

## DATA



## PREPARATION AND STORAGE

<b>Reconstitution</b>	Reconstitute at 0.2 mg/mL in sterile PBS.
<b>Shipping</b>	The product is shipped at ambient temperature. Upon receipt, store it immediately at the temperature recommended below. *Small pack size (-SP) is shipped with polar packs. Upon receipt, store it immediately at -20 to -70 °C
<b>Stability &amp; Storage</b>	<b>Use a manual defrost freezer and avoid repeated freeze-thaw cycles.</b> <ul style="list-style-type: none"> <li>● 12 months from date of receipt, -20 to -70 °C as supplied.</li> <li>● 1 month, 2 to 8 °C under sterile conditions after reconstitution.</li> <li>● 6 months, -20 to -70 °C under sterile conditions after reconstitution.</li> </ul>

**BACKGROUND**

CXADR (Coxsackie and Adenovirus Receptor), also known as CAR, is a 46 kDa type I transmembrane glycoprotein that belongs to the CTX family of the Ig superfamily (1-3). CXADR has received attention as a receptor that facilitates gene transfer mediated by most adenoviruses (1, 2). It is also an adhesion molecule within junctional complexes, notably between epithelial cells lining body cavities and within myocardial intercalated discs (1, 2, 4). CXADR is essential for normal cardiac development in the mouse (7). It is expressed throughout brain neuroepithelium during development, but mainly in ependymal cells in the adult (4-6). The 365 amino acid (aa) mouse CXADR contains a 19 aa signal sequence, a 218 aa extracellular domain (ECD) with a V-type (D1) and a C2-type (D2) Ig-like domain, a 21 aa transmembrane segment and a 107 aa intracellular domain. D1 is thought to be responsible for homodimer formation in trans within tight junctions (2). The fiber knob of adenoviruses attaches at a similar site, and evidence suggests that disruption of tight junctions facilitates virus binding (1, 2). A PDZ binding motif at the C-terminus interacts with several cytoplasmic junctional proteins (1). The ECD of mouse CXADR shares 97%, 90%, 89%, 89% and 88% aa sequence identity with the corresponding regions of rat, human, bovine, porcine and canine CXADR, respectively. An alternately spliced isoform (CXADR2) that diverges in the C-terminal 15 aa shows the same expression pattern, but may show different subcellular localization (4, 8). Transcription of other splice variants has been detected, but not their translation. A secreted form identified in serum and pleural fluid can block viral infection (9).

**References:**

1. Coyne, C.B. and J.M. Bergelson (2005) *Adv. Drug Deliv. Rev.* **57**:869.
2. Philipson, L. and R.F. Pettersson (2004) *Curr. Top. Microbiol. Immunol.* **273**:87.
3. Tomko, R.P. *et al.* (1997) *Proc. Natl. Acad. Sci. USA* **94**:3352.
4. Raschperger, E. *et al.* (2006) *Exp. Cell Res.* **312**:1566.
5. Hotta, Y. *et al.* (2003) *Dev. Brain Res.* **143**:1.
6. Hauwel, M. *et al.* (2005) *Brain Res. Rev.* **48**:265.
7. Chen, J. *et al.* (2006) *Circ. Res.* **98**:923.
8. Mirza, M. *et al.* (2006) *Exp. Cell Res.* **312**:817.
9. Bernal, R.M. *et al.* (2002) *Clin. Cancer Res.* **8**:1915.