

## Product datasheet for **AM50131PU-T**

### Cytokeratin 17 (KRT17) Mouse Monoclonal Antibody [Clone ID: SPM560]

#### Product data:

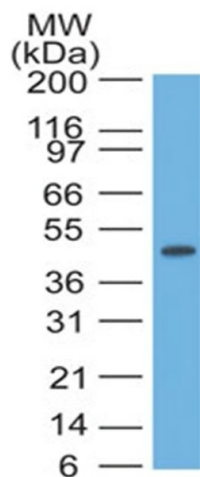
Product Type:	Primary Antibodies
Clone Name:	SPM560
Applications:	FC, IF, IHC, WB
Recommended Dilution:	<b>Flow Cytometry:</b> 0.5-1 µg/10 <sup>6</sup> cells. <b>Immunofluorescence:</b> 1-2 µg/ml. <b>Western Blotting:</b> 0.5-1 µg/ml. <b>Immunohistochemistry on Formalin-Fixed Paraffin Sections:</b> 0.5-1.0 µg/ml for 30 minutes at RT. Staining of formalin-fixed tissues requires boiling tissue sections in 10mM Citrate Buffer, pH 6.0, for 10-20 min followed by cooling at RT for 20 minutes. <b>Positive Control:</b> Skin.
Reactivity:	Bovine, Goat, Human, Porcine, Rat
Host:	Mouse
Isotype:	IgG2b
Clonality:	Monoclonal
Immunogen:	The cytoskeletal fraction of Rat colon epithelium.



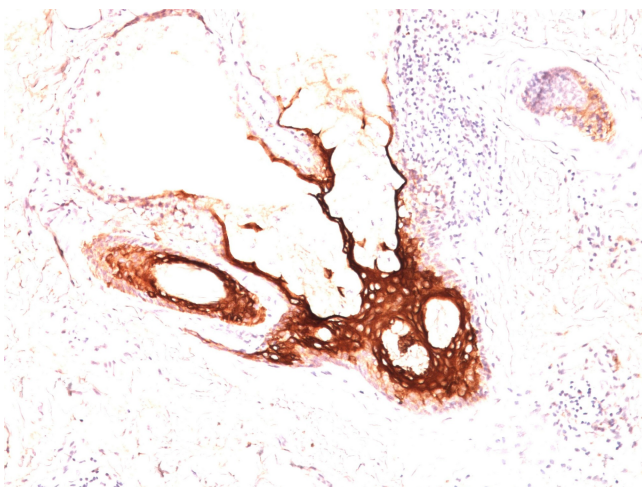
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<b>Specificity:</b>	<p>Cytokeratin 17 (CK17) is a member of the Cytokeratin subfamily of intermediate filament proteins (IFP's). It is unique in that it is normally expressed in the basal cells of complex epithelia but not in stratified or simple epithelia. CK17 is expressed in the nail bed, hair follicle, sebaceous glands and other epidermal appendages. Antibody to CK17 is an excellent tool to distinguish myoepithelial cells from luminal epithelium of various glands such as mammary, sweat and salivary. CK17 is expressed in epithelial cells of various origins, such as bronchial epithelial cells and skin appendages. It may be considered as "epithelial stem cell" marker because CK17 Ab marks basal cell differentiation. CK17 can be useful when included in a panel of antibodies against TTF-1, napsin A, CK5&amp;6, p63, and SOX-2 for diagnostic differentiation between lung adenocarcinoma (LADC) and lung squamous cell carcinoma (SCLC), especially for poorly-differentiated lung carcinoma. CK17 is expressed in SCLC much higher than in LADC. In breast carcinomas, approximately 20% of patients show no expression of ER, PR and Her2, which are defined as triple negative tumor. Eighty-five percent of the triple negative breast carcinomas immunoreact with basal cytokeratins including anti-CK17. Also important is that cases of triple negative breast carcinoma with expression of CK17 show an aggressive clinical course. The histologic differentiation of ampullary cancer, intestinal vs. pancreatobiliary, is very important for treatment. Usually anti-CK17 and anti-MUC1 immunoreactivity represents pancreatobiliary subtype whereas anti-MUC2 and anti-CDX-2 positivity defines intestinal subtype.</p> <p><b>Cellular Localization:</b> Cytoplasmic.</p>
<b>Formulation:</b>	10mM PBS State: Purified State: Liquid purified IgG fraction from Bioreactor Concentrate Stabilizer: 0.05% BSA Preservative: 0.05% Sodium Azide
<b>Concentration:</b>	lot specific
<b>Purification:</b>	Protein A/G Chromatography
<b>Conjugation:</b>	Unconjugated
<b>Storage:</b>	Store undiluted at 2-8°C.
<b>Stability:</b>	Shelf life: one year from despatch.
<b>Predicted Protein Size:</b>	46 kDa
<b>Gene Name:</b>	keratin 17
<b>Database Link:</b>	<a href="#">Entrez Gene 3872 Human Q04695</a>
<b>Synonyms:</b>	Cytokeratin-17, Keratin-17, Keratin 17, KRT17, CK17, K17

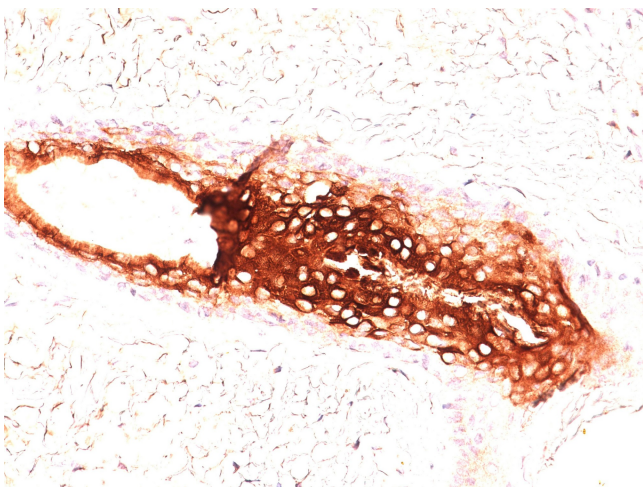
## Product images:



Western blot of HeLa lysate using CK17 Antibody (Clone SPM560).



Formalin-Paraffin skin stained with CK17 Antibody (Clone SPM560).



Formalin-Paraffin skin stained with CK17 Antibody (Clone SPM560).