

HBXIP Human

Description: HBXIP Human Recombinant produced in E. coli is a single polypeptide chain containing 197 amino acids (aa 1-173) and having a molecular mass of 20.7kDa. HBXIP is fused to a 24 amino acid His-tag at N-terminus & purified by proprietary chromatographic techniques.

Catalog #: HBPS-242

For research use only.

Synonyms: Ragulator complex protein LAMTOR5, Hepatitis B virus X-interacting protein, HBV X-interacting protein, HBX-interacting protein, Late endosomal/lysosomal adaptor and MAPK and MTOR activator 5, LAMTOR5, HBXIP, XIP.

Source: Escherichia Coli.

Physical Appearance: Sterile filtered colorless solution.

Amino Acid Sequence: MGSSHHHHHH SSGLVPRGSH MGSHMEPGAG HLDGHRAGSP
SLRQALCDGS AVMFSSKERG RCTVINFLVPL EAPLRSTPRS RQVTEACGGE GRAVPLGSEP
EWSVGGMEAT LEQHLEDTMK NPSIVGVLC TDSQGLNLGCR GTLSDEHAGV ISVLAQQA AK
LTSDPTDIPV VCLES DNGNI MIQKHDGIV AVHKMAS.

Purity: Greater than 90% as determined by SDS-PAGE.

Formulation:

The HBXIP solution (1mg/ml) contains 20mM Tris-HCl buffer (pH 8.0), 0.1M NaCl, 10% glycerol and 1mM EDTA.

Stability:

Store at 4°C if entire vial will be used within 2-4 weeks. Store, frozen at -20°C for longer periods of time. For long term storage it is recommended to add a carrier protein (0.1% HSA or BSA). Avoid multiple freeze-thaw cycles.

Usage:

NeoBiolab's products are furnished for LABORATORY RESEARCH USE ONLY. The product may not be used as drugs, agricultural or pesticidal products, food additives or household chemicals.

Introduction:

Hepatitis B virus x interacting protein (HBXIP) forms a complex with the C-terminus of hepatitis B virus X (HBX) protein. HBXIP negatively regulates HBX activity and changes the replicative life cycle of the virus. Furthermore, HBXIP is involved in bipolar spindle formation and regulates centrosome dynamics and cytokinesis in cells, possibly due to interaction with Dynein light chain. HBXIP is highly expressed in the skeletal and cardiac muscle, followed by pancreas, kidney, liver, brain, placenta and lung. HBXIP has elevated levels in both cancerous and non-cancerous liver tissue of patients with chronic HBV infection compared with hepatic tissue without HBV infection.

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