

**CDKL5 (STK9) Antibody (Center) Blocking peptide**  
**Synthetic peptide**  
**Catalog # BP7244c****Specification**

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**CDKL5 (STK9) Antibody (Center) Blocking peptide - Product Information**Primary Accession [O76039](#)**CDKL5 (STK9) Antibody (Center) Blocking peptide - Additional Information****Gene ID** 6792**Other Names**

Cyclin-dependent kinase-like 5, Serine/threonine-protein kinase 9, CDKL5, STK9

**Target/Specificity**

The synthetic peptide sequence used to generate the antibody [AP7244c](/product/products/AP7244c) was selected from the Center region of human STK9. A 10 to 100 fold molar excess to antibody is recommended. Precise conditions should be optimized for a particular assay.

**Format**

Peptides are lyophilized in a solid powder format. Peptides can be reconstituted in solution using the appropriate buffer as needed.

**Storage**

Maintain refrigerated at 2-8°C for up to 6 months. For long term storage store at -20°C.

**Precautions**

This product is for research use only. Not for use in diagnostic or therapeutic procedures.

**CDKL5 (STK9) Antibody (Center) Blocking peptide - Protein Information****Name** CDKL5 ([HGNC:11411](#))**Synonyms** STK9**Function**

Mediates phosphorylation of MECP2 (PubMed: [15917271](http://www.uniprot.org/citations/15917271), PubMed: [16935860](http://www.uniprot.org/citations/16935860)). May regulate ciliogenesis (PubMed: [29420175](http://www.uniprot.org/citations/29420175)).

**Cellular Location**

Nucleus. Cytoplasm, cytoskeleton, cilium basal body Cytoplasm, cytoskeleton, microtubule organizing center, centrosome

**Tissue Location**

Expressed in brain, lung, kidney, prostate, ovary, placenta, pancreas and testis

**CDKL5 (STK9) Antibody (Center) Blocking peptide - Protocols**

Provided below are standard protocols that you may find useful for product applications.

- [Blocking Peptides](#)

**CDKL5 (STK9) Antibody (Center) Blocking peptide - Images****CDKL5 (STK9) Antibody (Center) Blocking peptide - Background**

Defects in STK9, a dual-specificity serine/threonine kinase, are a cause of atypical Rett syndrome. Rett syndrome is an X-linked dominant disease. It is a progressive neurologic developmental disorder and one of the most common causes of mental retardation in females. Patients appear to develop normally until 6 to 18 months of age, then gradually lose speech and purposeful hand movements and develop microcephaly, seizures, autism, ataxia, intermittent hyperventilation, and stereotypic hand movements. After initial regression, the condition stabilizes and patients usually survive into adulthood. Rett syndrome due to CDKL5-associated mutations is characterized by a severe early-onset phenotype and atypical features such as infantile spasms.

**CDKL5 (STK9) Antibody (Center) Blocking peptide - References**

Kalscheuer, V.M., et al., Am. J. Hum. Genet. 72(6):1401-1411 (2003). Montini, E., et al., Genomics 51(3):427-433 (1998).