

Anti-Nicotinic Acetylcholine Receptor alpha 4/CHRNA4 antibody ab41172

★★★★★ [1 Abreviews](#) [5 References](#) [2 图像](#)

概述

产品名称	Anti-Nicotinic Acetylcholine Receptor alpha 4/CHRNA4抗体
描述	兔多克隆抗体to Nicotinic Acetylcholine Receptor alpha 4/CHRNA4
宿主	Rabbit
特异性	Antiserum Specificity Polypeptide % Cross Reactivity Nicotinic a4 receptor (620-627) 100 Nicotinic a4 receptor ~80 Nicotinic a3 receptor 0 Nicotinic a5 receptor 0 Nicotinic a7 receptor 0 Nicotinic β2 receptor 0 Nicotinic β3 receptor 0 Nicotinic β4 receptor 0
经测试应用	适用于: ELISA, ICC/IF, IHC-P, WB, IHC-Fr
种属反应性	与反应: Mouse, Rat, Chicken, Human, Chimpanzee, Pufferfish, Zebrafish, Snail
免疫原	Synthetic peptide corresponding to Human Nicotinic Acetylcholine Receptor alpha 4/CHRNA4 aa 620-627 (C terminal) conjugated to keyhole limpet haemocyanin (Cysteine residue). Sequence: PPWLAGMI

(Peptide available as [ab49523](#), [ab99319](#))

 [Run BLAST with](#)

 [Run BLAST with](#)

常规说明

The Life Science industry has been in the grips of a reproducibility crisis for a number of years. Abcam is leading the way in addressing this with our range of recombinant monoclonal antibodies and knockout edited cell lines for gold-standard validation. Please check that this product meets your needs before purchasing.

If you have any questions, special requirements or concerns, please send us an inquiry and/or contact our Support team ahead of purchase. Recommended alternatives for this product can be found below, along with publications, customer reviews and Q&As

性能

形式	Liquid
存放说明	Shipped at 4°C. Upon delivery aliquot and store at -20°C. Avoid freeze / thaw cycles.
存储溶液	Constituents: PBS, 1% BSA
纯度	Whole antiserum

克隆

多克隆

同种型

IgG

应用

The Abpromise guarantee **Abpromise™**承诺保证使用ab41172于以下的经测试应用

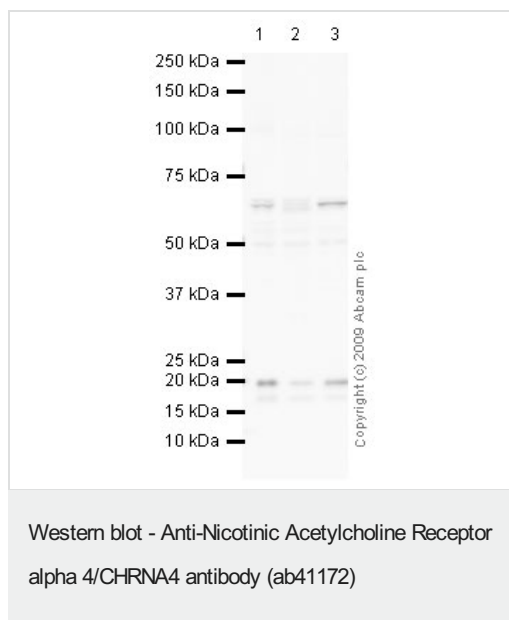
“应用说明”部分 下显示的仅为推荐的起始稀释度;实际最佳的稀释度/浓度应由使用者检定。

应用	Ab评论	说明
ELISA		Use at an assay dependent concentration.
ICC/IF		Use at an assay dependent concentration.
IHC-P		1/250.
WB		1/800. Predicted molecular weight: 70 kDa. With this antibody, we have found that blocking with 5% goat or donkey serum significantly reduces background as compared to BSA or milk.
IHC-Fr	★★★★★ (1)	Use at an assay dependent concentration.

靶标

功能	After binding acetylcholine, the AChR responds by an extensive change in conformation that affects all subunits and leads to opening of an ion-conducting channel across the plasma membrane.
疾病相关	Defects in CHRNA4 are the cause of nocturnal frontal lobe epilepsy type 1 (ENFL1) [MIM:600513]; also symbolized ADNFLE. ENFL1 is an autosomal dominant epilepsy characterized by nocturnal seizures with hyperkinetic automatisms and poorly organized stereotyped movements.
序列相似性	Belongs to the ligand-gated ion channel (TC 1.A.9) family. Acetylcholine receptor (TC 1.A.9.1) subfamily. Alpha-4/CHRNA4 sub-subfamily.
细胞定位	Cell junction > synapse > postsynaptic cell membrane. Cell membrane.

图片



All lanes : Anti-Nicotinic Acetylcholine Receptor alpha 4/CHRNA4 antibody (ab41172) at 1/800 dilution

Lane 1 : SW480 (Human colon adenocarcinoma cell line) Whole Cell Lysate

Lane 2 : HepG2 (Human hepatocellular liver carcinoma cell line) Whole Cell Lysate

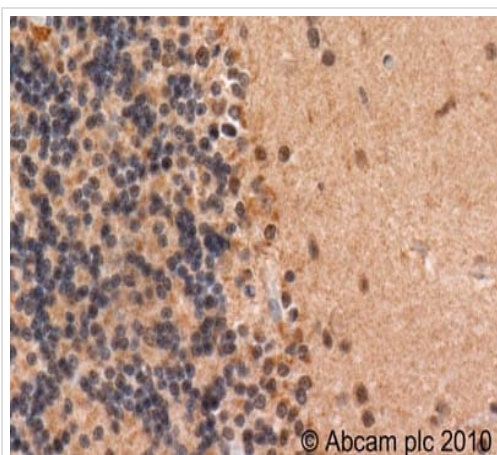
Lane 3 : HeLa (Human epithelial carcinoma cell line) Whole Cell Lysate

Lysates/proteins at 10 µg per lane.

Secondary

All lanes : Goat polyclonal to Rabbit IgG - H&L - Pre-Adsorbed (HRP) at 1/3000 dilution

Predicted band size: 70 kDa



Immunohistochemistry (Formalin/PFA-fixed paraffin-embedded sections) - Anti-Nicotinic Acetylcholine Receptor alpha 4/CHRNA4 antibody (ab41172)

ab41172 (1/250 dilution) staining Nicotinic Acetylcholine Receptor alpha 4/CHRNA4 in human cerebellum using an automated system (DAKO Autostainer Plus). Using this protocol there is strong staining of nuclear and membrane compartment within the glia region of cells

Sections were rehydrated and antigen retrieved with the Dako 3 in 1 AR buffer EDTA pH 9.0 in a DAKO PT link. Slides were peroxidase blocked in 3% H₂O₂ in methanol for 10 mins. They were then blocked with Dako Protein block for 10 minutes (containing casein 0.25% in PBS) then incubated with primary antibody for 20 min and detected with Dako envision flex amplification kit for 30 minutes. Colorimetric detection was completed with Diaminobenzidine for 5 minutes. Slides were counterstained with Haematoxylin and coverslipped under DePeX. Please note that, for manual staining, optimization of primary antibody concentration and incubation time is recommended. Signal amplification may be required.

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