abcam

Product datasheet

APC Anti-Apolipoprotein E antibody [EPR19392] ab303051



重组 RabMAb

1 图像

概述

产品名称 APC Anti-Apolipoprotein E抗体[EPR19392]

描述 APC兔单克隆抗体[EPR19392] to Apolipoprotein E

宿主 Rabbit

偶联物 APC. Ex: 645nm, Em: 660nm

经测试应用 适用于: Target binding affinity, Antibody labelling

免疫原 Synthetic peptide. This information is proprietary to Abcam and/or its suppliers.

常规说明

This conjugated primary antibody is released using a quantitative quality control method that

evaluates binding affinity post-conjugation and efficiency of antibody labeling.

For suitable applications and species reactivity, please refer to the unconjugated version of this clone. This conjugated antibody is eligible for Abtrial: learn more here.

This product is a recombinant monoclonal antibody, which offers several advantages including:

- High batch-to-batch consistency and reproducibility
- Improved sensitivity and specificity
- Long-term security of supply
- Animal-free production

For more information see here.

Our RabMAb® technology is a patented hybridoma-based technology for making rabbit monoclonal antibodies. For details on our patents, please refer to **RabMAb**® **patents**.

性能

形式 Liquid

存放说明 Shipped at 4°C. Store at +4°C short term (1-2 weeks). Upon delivery aliquot. Store at +4°C.

Avoid freeze / thaw cycle. Store In the Dark.

存储溶液 pH: 7.4

> Preservative: 0.02% Sodium azide Constituents: 1% BSA, 98% PBS

纯度 Protein A purified

克隆 单克隆

克隆编号 EPR19392

同种型 IgG

应用

The Abpromise guarantee Abpromise™承诺保证使用ab303051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
Target binding affinity		Use at an assay dependent concentration.
Antibody labelling		Use at an assay dependent concentration.

靶标

功能

组织特异性

疾病相关

Mediates the binding, internalization, and catabolism of lipoprotein particles. It can serve as a ligand for the LDL (apo B/E) receptor and for the specific apo-E receptor (chylomicron remnant) of hepatic tissues.

Occurs in all lipoprotein fractions in plasma. It constitutes 10-20% of very low density lipoproteins (VLDL) and 1-2% of high density lipoproteins (HDL). APOE is produced in most organs. Significant quantities are produced in liver, brain, spleen, lung, adrenal, ovary, kidney and muscle.

Defects in APOE are a cause of hyperlipoproteinemia type 3 (HLPP3) [MIM:107741]; also known as familial dysbetalipoproteinemia. Individuals with HLPP3 are clinically characterized by xanthomas, yellowish lipid deposits in the palmar crease, or less specific on tendons and on elbows. The disorder rarely manifests before the third decade in men. In women, it is usually expressed only after the menopause. The vast majority of the patients are homozygous for APOE*2 alleles. More severe cases of HLPP3 have also been observed in individuals heterozygous for rare APOE variants. The influence of APOE on lipid levels is often suggested to have major implications for the risk of coronary artery disease (CAD). Individuals carrying the common APOE*4 variant are at higher risk of CAD.

Genetic variations in APOE are associated with Alzheimer disease type 2 (AD2) [MIM:104310]. It is a late-onset neurodegenerative disorder characterized by progressive dementia, loss of cognitive abilities, and deposition of fibrillar amyloid proteins as intraneuronal neurofibrillary tangles, extracellular amyloid plagues and vascular amyloid deposits. The major constituent of these plaques is the neurotoxic amyloid-beta-APP 40-42 peptide (s), derived proteolytically from the transmembrane precursor protein APP by sequential secretase processing. The cytotoxic Cterminal fragments (CTFs) and the caspase-cleaved products such as C31 derived from APP, are also implicated in neuronal death. Note=The APOE*4 allele is genetically associated with the common late onset familial and sporadic forms of Alzheimer disease. Risk for AD increased from 20% to 90% and mean age at onset decreased from 84 to 68 years with increasing number of APOE*4 alleles in 42 families with late onset AD. Thus APOE*4 gene dose is a major risk factor for late onset AD and, in these families, homozygosity for APOE*4 was virtually sufficient to cause AD by age 80. The mechanism by which APOE*4 participates in pathogenesis is not known. Defects in APOE are a cause of sea-blue histiocyte disease (SBHD) [MIM:269600]; also known as sea-blue histiocytosis. This disorder is characterized by splenomegaly, mild thrombocytopenia and, in the bone marrow, numerous histiocytes containing cytoplasmic granules which stain bright blue with the usual hematologic stains. The syndrome is the consequence of an inherited

metabolic defect analogous to Gaucher disease and other sphingolipidoses.

Defects in APOE are a cause of lipoprotein glomerulopathy (LPG) [MIM:611771]. LPG is an uncommon kidney disease characterized by proteinuria, progressive kidney failure, and distinctive lipoprotein thrombi in glomerular capillaries. It mainly affects people of Japanese and Chinese origin. The disorder has rarely been described in Caucasians.

序列相似性 Belongs to the apolipoprotein A1/A4/E family.

翻译后修饰 Synthesized with the sialic acid attached by O-glycosidic linkage and is subsequently desialylated

in plasma. O-glycosylated with core 1 or possibly core 8 glycans. Thr-307 is a minor glycosylation

site compared to Ser-308.

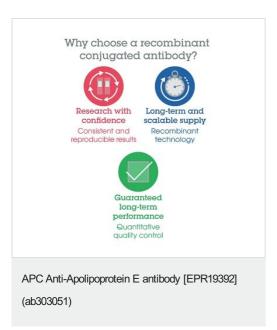
Glycated in plasma VLDL of normal subjects, and of hyperglycemic diabetic patients at a higher

level (2-3 fold).

Phosphorylation sites are present in the extracelllular medium.

细胞定位 Secreted.

图片



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