abcam

Product datasheet

Anti-GFAP (phospho S8) antibody [YC10] ab115898

1 Abreviews 2 References

Overview

Product name	Anti-GFAP (phospho S8) antibody [YC10]
Description	Mouse monoclonal [YC10] to GFAP (phospho S8)
Host species	Mouse
Tested applications	**Suitable for:** ELISA, Functional Studies, WB, ICC
Species reactivity	**Reacts with:** Mouse, Rat, Cow, Human, Pig
Immunogen	Synthetic peptide corresponding to the N-terminus of Pig GFAP phosphorylated at Ser^{8}.

Properties

Form	Liquid
Storage instructions	Shipped at 4°C. Store at -20ºC.
Storage buffer	pH: 7.20 Constituents: 49% PBS, 50% Glycerol
Purity	Protein A purified
Clonality	Monoclonal
Clone number	YC10
Isotype	IgG1

Applications

Our Abpromise guarantee covers the use of **ab115898** in the following tested applications.

The application notes include recommended starting dilutions; optimal dilutions/concentrations should be determined by the end user.

Application	Abreviews	Notes
ELISA		Use at an assay dependent concentration.
Functional Studies		Use a concentration of 1 µg/ml.

Application	Abreviews	Notes
WB		Use a concentration of 1 µg/ml. Detects a band of approximately 50 kDa (predicted molecular weight: 50 kDa).
ICC		Use a concentration of 1 µg/ml.

Target

Function	GFAP, a class-III intermediate filament, is a cell-specific marker that, during the development of the central nervous system, distinguishes astrocytes from other glial cells.
Tissue specificity	Expressed in cells lacking fibronectin.
Involvement in disease	Defects in GFAP are a cause of Alexander disease (ALEXD) [MIM:203450]. Alexander disease is a rare disorder of the central nervous system. It is a progressive leukoencephalopathy whose hallmark is the widespread accumulation of Rosenthal fibers which are cytoplasmic inclusions in astrocytes. The most common form affects infants and young children, and is characterized by progressive failure of central myelination, usually leading to death usually within the first decade. Infants with Alexander disease develop a leukoencephalopathy with macrocephaly, seizures, and psychomotor retardation. Patients with juvenile or adult forms typically experience ataxia, bulbar signs and spasticity, and a more slowly progressive course.
Sequence similarities	Belongs to the intermediate filament family.
Post-translational modifications	Phosphorylated by PKN1.
Cellular localization	Cytoplasm. Associated with intermediate filaments.

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