abcam

Product datasheet

Anti-CSB antibody ab96089

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Overview

Product name	Anti-CSB antibody
Description	Rabbit polyclonal to CSB
Host species	Rabbit
Tested applications	**Suitable for:** WB, ICC/IF
Species reactivity	**Reacts with:** Human **Predicted to work with:** Mouse
Immunogen	Recombinant fragment within Human CSB aa 300-750. The exact immunogen sequence used to generate this antibody is proprietary information. If additional detail on the immunogen is needed to determine the suitability of the antibody for your needs, please **contact** our Scientific Support team to discuss your requirements.
Positive control	A431 whole cell lysate and in culture. H1299 whole cell lysate. 293T, H1299, and HepG2.
General notes	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

Properties

Form	Liquid
Storage instructions	Shipped at 4°C. Upon delivery aliquot and store at -20°C or -80°C. Avoid repeated freeze / thaw cycles.
Storage buffer	pH: 7.00 Preservative: 0.025% Proclin 300 Constituents: 50% Glycerol (glycerin, glycerine), 2.4% Tris, 1.5% Glycine, 46% PBS, 0.04% EGTA
Purity	Immunogen affinity purified
Clonality	Polyclonal
Isotype	IgG

Applications

The Abpromise guarantee Our **Abpromise guarantee** covers the use of ab96089 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
WB	★★★★☆ (1)	1/500 - 1/3000. Predicted molecular weight: 168 kDa.
ICC/IF		1/100 - 1/200.

Target

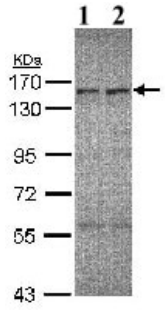
Function Essential factor involved in transcription-coupled nucleotide excision repair which allows RNA polymerase II-blocking lesions to be rapidly removed from the transcribed strand of active genes. Upon DNA-binding, it locally modifies DNA conformation by wrapping the DNA around itself, thereby modifying the interface between stalled RNA polymerase II and DNA. It is required for transcription-coupled repair complex formation. It recruits the CSA complex (DCX(ERCC8) complex), nucleotide excision repair proteins and EP300 to the at sites of RNA polymerase II-blocking lesions.

Involvement in disease Defects in ERCC6 are the cause of Cockayne syndrome type B (CSB) [MIM:133540]. Cockayne syndrome is a rare disorder characterized by cutaneous sensitivity to sunlight, abnormal and slow growth, cachectic dwarfism, progeroid appearance, progressive pigmentary retinopathy and sensorineural deafness. There is delayed neural development and severe progressive neurologic degeneration resulting in mental retardation. Two clinical forms are recognized: in the classical form or Cockayne syndrome type 1, the symptoms are progressive and typically become apparent within the first few years or life; the less common Cockayne syndrome type 2 is characterized by more severe symptoms that manifest prenatally. Cockayne syndrome shows some overlap with certain forms of xeroderma pigmentosum. Unlike xeroderma pigmentosum, patients with Cockayne syndrome do not manifest increased freckling and other pigmentation abnormalities in the skin and have no significant increase in skin cancer.
Defects in ERCC6 are the cause of cerebro-oculo-facio-skeletal syndrome type 1 (COFS1) [MIM:214150]; also known as COFS syndrome or Pena-Shokeir syndrome type 2. COFS is a degenerative autosomal recessive disorder of prenatal onset affecting the brain, eye and spinal cord. After birth, it leads to brain atrophy, hypoplasia of the corpus callosum, hypotonia, cataracts, microcornea, optic atrophy, progressive joint contractures and growth failure. Facial dysmorphism is a constant feature. Abnormalities of the skull, eyes, limbs, heart and kidney also occur.
Defects in ERCC6 are a cause of De Sanctis-Cacchione syndrome (DSC) [MIM:278800]; also known as xerodermic idiocy. DSC is an autosomal recessive syndrome consisting of xeroderma pigmentosum associated with mental retardation, retarded growth, gonadal hypoplasia and sometimes neurologic complications.
Note=A genetic variation in the 5-prime flanking region of ERCC6 has been shown to be associated with susceptibility to age-related macular degeneration.
Defects in ERCC6 are a cause of UV-sensitive syndrome (UVS) [MIM:600630]. UVS is a rare autosomal recessive disorder characterized by photosensitivity and mild freckling but without neurological abnormalities or skin tumors.

Sequence similarities Belongs to the SNF2/RAD54 helicase family.

	Contains 1 helicase ATP-binding domain. Contains 1 helicase C-terminal domain.
Domain	A C-terminal ubiquitin-binding domain (UBD) is essential for transcription-coupled nucleotide excision repair to proceed.
Post-translational modifications	Phosphorylated upon DNA damage, probably by ATM or ATR. Ubiquitinated at the C-terminus. Ubiquitination by the CSA complex leads to ERCC6 proteasomal degradation in a UV-dependent manner.
Cellular localization	Nucleus.

Images



Western blot - Anti-CSB antibody (ab96089)

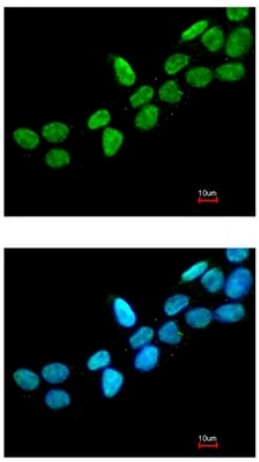
All lanes : Anti-CSB antibody (ab96089) at 1/500 dilution

Lane 1 : A431 whole cell lysate
Lane 2 : H1299 whole cell lysate

Lysates/proteins at 30 µg per lane.

Predicted band size: 168 kDa

7.5% SDS Page



Immunocytochemistry/ Immunofluorescence - Anti-CSB antibody (ab96089)

Immunofluorescence analysis of paraformaldehyde-fixed A431, using ab96089 antibody at 1/200 dilution. Lower image merged with DNA probe.

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