

Product datasheet

Anti-Insulin antibody [K36αC10] ab6995

★★★★★ [9 Abreviews](#) [76 References](#) [1 Image](#)

Overview

Product name	Anti-Insulin antibody [K36αC10]
Description	Mouse monoclonal [K36αC10] to Insulin
Host species	Mouse
Specificity	The antibody exhibits cross-reactivity with human proinsulin. This antibody recognizes purified insulin from the pancreas of human, bovine, horse, sheep, and proinsulin from human. Cross reaction has been observed with insulin containing cells in fixed sections of pancreas from human, porcine, dog, rabbit, bovine, sheep, rat, guinea pig and cat.
Tested applications	Suitable for: IHC-P
Species reactivity	Reacts with: Human
Immunogen	Human insulin.
Positive control	IHC: Pancreas tissue
General notes	<p>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.</p> <p>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</p>

Properties

Form	Liquid
Storage instructions	Shipped at 4°C. Store at +4°C short term (1-2 weeks). Upon delivery aliquot. Store at -20°C long term. Avoid freeze / thaw cycle.
Storage buffer	<p>pH: 7.30</p> <p>Preservative: 0.05% Sodium azide</p> <p>Constituents: PBS, BSA</p>
Purity	Ascites
Purification notes	Ascites diluted in a PBS-based diluent.
Clonality	Monoclonal

Clone number	K36aC10
Isotype	IgG1

Applications

The Abpromise guarantee Our **Abpromise guarantee** covers the use of ab6995 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
IHC-P	★★★★★ (5)	1/25 - 1/50.

Target

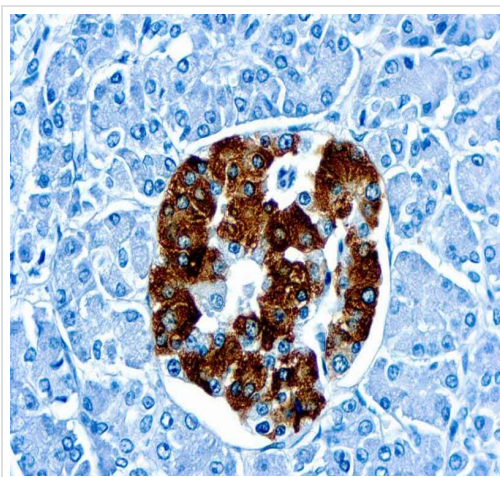
Function Insulin decreases blood glucose concentration. It increases cell permeability to monosaccharides, amino acids and fatty acids. It accelerates glycolysis, the pentose phosphate cycle, and glycogen synthesis in liver.

Involvement in disease Defects in INS are the cause of familial hyperproinsulinemia (FHPRI) [MIM:176730]. Defects in INS are a cause of diabetes mellitus insulin-dependent type 2 (IDDM2) [MIM:125852]. IDDM2 is a multifactorial disorder of glucose homeostasis that is characterized by susceptibility to ketoacidosis in the absence of insulin therapy. Clinical features are polydipsia, polyphagia and polyuria which result from hyperglycemia-induced osmotic diuresis and secondary thirst. These derangements result in long-term complications that affect the eyes, kidneys, nerves, and blood vessels. Defects in INS are a cause of diabetes mellitus permanent neonatal (PNDM) [MIM:606176]. PNDM is a rare form of diabetes distinct from childhood-onset autoimmune diabetes mellitus type 1. It is characterized by insulin-requiring hyperglycemia that is diagnosed within the first months of life. Permanent neonatal diabetes requires lifelong therapy. Defects in INS are a cause of maturity-onset diabetes of the young type 10 (MODY10) [MIM:613370]. MODY10 is a form of diabetes that is characterized by an autosomal dominant mode of inheritance, onset in childhood or early adulthood (usually before 25 years of age), a primary defect in insulin secretion and frequent insulin-independence at the beginning of the disease.

Sequence similarities Belongs to the insulin family.

Cellular localization Secreted.

Images



Immunohistochemistry (Formalin/PFA-fixed paraffin-embedded sections) analysis of human pancreas tissue labelling insulin with ab6995 at 1/25 dilution.

Immunohistochemistry (Formalin/PFA-fixed paraffin-embedded sections) - Anti-Insulin antibody [K36aC10] (ab6995)

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