




## Product datasheet

# Anti-Malignant fibrous histiocytoma antibody ab185289

[1 References](#) [3 Images](#)

### Overview

<b>Product name</b>	Anti-Malignant fibrous histiocytoma antibody
<b>Description</b>	Rabbit polyclonal to Malignant fibrous histiocytoma
<b>Host species</b>	Rabbit
<b>Tested applications</b>	<b>Suitable for:</b> ICC/IF, WB, IHC-P
<b>Species reactivity</b>	<b>Reacts with:</b> Human <b>Predicted to work with:</b> Mouse, Rat 
<b>Immunogen</b>	Recombinant fragment corresponding to Human Malignant fibrous histiocytoma aa 950-1050. Database link: <a href="#">Q9Y4C4</a> <div>  <a href="#">Run BLAST with</a>  <a href="#">Run BLAST with</a> </div>
<b>Positive control</b>	IHC-P: Human rectum tissue; WB: RT-4 and U-251 MG whole cell lysate; ICC: U-2 OS whole cells.
<b>General notes</b>	<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&amp;As</p>

### Properties

<b>Form</b>	Liquid
<b>Storage instructions</b>	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.
<b>Storage buffer</b>	pH: 7.20 Preservative: 0.02% Sodium azide Constituents: 59% PBS, 40% Glycerol (glycerin, glycerine)
<b>Purity</b>	Immunogen affinity purified
<b>Clonality</b>	Polyclonal
<b>Isotype</b>	IgG

## Applications

### The Abpromise guarantee

Our **Abpromise guarantee** covers the use of ab185289 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
ICC/IF		Use a concentration of 0.25 - 2 µg/ml. Fixation/Permeabilization: PFA/Triton X-100
WB		Use a concentration of 0.04 - 0.4 µg/ml. Predicted molecular weight: 117 kDa.
IHC-P		1/20 - 1/50. Perform heat mediated antigen retrieval with citrate buffer pH 6 before commencing with IHC staining protocol.

## Target

### Tissue specificity

Ubiquitously expressed. Overexpressed in malignant fibrous histiocytomas.

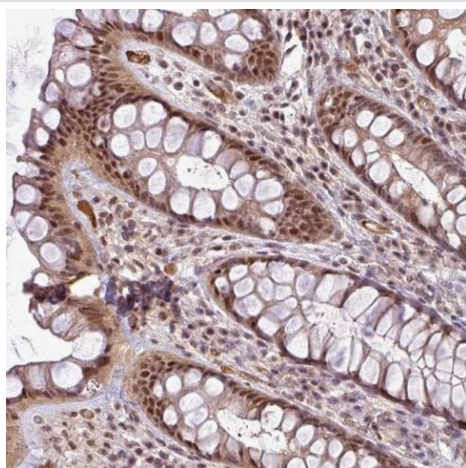
### Involvement in disease

A chromosomal aberration involving MFHAS1 may be a cause of B-cell lymphoma. Translocation t(8;14)(p23.1;q21) with a cryptic exon named '14q21 element'. The resulting fusion protein named 'chimeric MASL1' is tumorigenic in nude mice.

### Sequence similarities

Contains 13 LRR (leucine-rich) repeats.  
Contains 1 Roc domain.

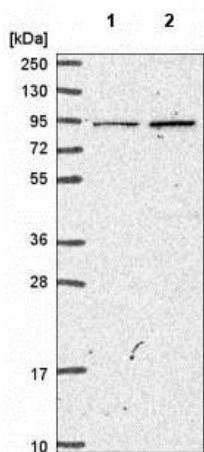
## Images



Immunohistochemical analysis of paraffin-embedded human rectum tissue labeling malignant fibrous histiocytoma in the nucleus and cytoplasm of glandular cells with ab185289 at a 1/20 dilution.

Performed heat mediated antigen retrieval with citrate buffer pH 6 before commencing with IHC staining protocol.

Immunohistochemistry (Formalin/PFA-fixed paraffin-embedded sections) - Anti-Malignant fibrous histiocytoma antibody (ab185289)



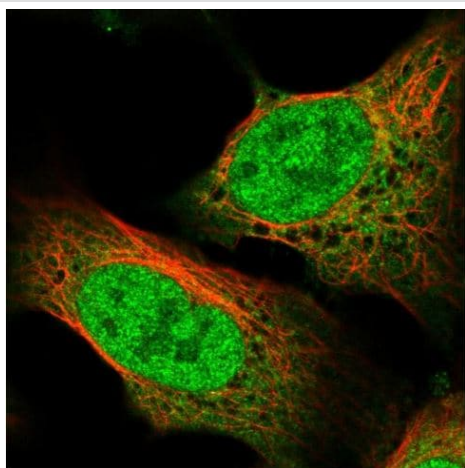
Western blot - Anti-Malignant fibrous histiocytoma antibody (ab185289)

**All lanes :** Anti-Malignant fibrous histiocytoma antibody (ab185289) at 1/100 dilution

**Lane 1 :** RT4 (human urinary bladder cancer cell line) whole cell lysate

**Lane 2 :** U-251 MG (human brain glioma cell line) whole cell lysate

**Predicted band size:** 117 kDa



Immunocytochemistry/ Immunofluorescence - Anti-Malignant fibrous histiocytoma antibody (ab185289)

Immunocytochemistry analysis of U-2 OS (human bone osteosarcoma epithelial cell line) whole cells labeling malignant fibrous histiocytoma in the nucleoplasm and cytosol with ab185289 at 2 µg/ml.

**Please note:** All products are "FOR RESEARCH USE ONLY. NOT FOR USE IN DIAGNOSTIC PROCEDURES"

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