

Anti-TNF alpha antibody [MP6-XT3] ab11564

[9 References](#) [1 Image](#)

Overview

Product name	Anti-TNF alpha antibody [MP6-XT3]
Description	Rat monoclonal [MP6-XT3] to TNF alpha
Host species	Rat
Specificity	ab11564 recognises murine TNF alpha. Reactivity with murine TNF Beta has not yet been determined.
Tested applications	Suitable for: ELISA
Species reactivity	Reacts with: Recombinant fragment
Immunogen	Recombinant full length protein corresponding to Mouse TNF alpha. Expressed in E. coli. Database link: P06804
General notes	<p>This product should be stored undiluted. Should this product contain a precipitate we recommend microcentrifugation before use.</p> <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). Store at -20°C or -80°C. Avoid freeze / thaw cycle.
Storage buffer	pH: 7.40 Preservative: 0.09% Sodium azide Constituent: PBS
Purity	Protein G purified
Purification notes	Purified IgG prepared by affinity chromatography from tissue culture supernatant.
Clonality	Monoclonal
Clone number	MP6-XT3

Isotype

IgG1

Applications

The Abpromise guarantee

Our **Abpromise guarantee** covers the use of ab11564 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 a concentration of 5 µg/ml.

Target

Function

Cytokine that binds to TNFRSF1A/TNFR1 and TNFRSF1B/TNFR. It is mainly secreted by macrophages and can induce cell death of certain tumor cell lines. It is potent pyrogen causing fever by direct action or by stimulation of interleukin-1 secretion and is implicated in the induction of cachexia. Under certain conditions it can stimulate cell proliferation and induce cell differentiation.

Involvement in disease

Genetic variations in TNF are a cause of susceptibility psoriatic arthritis (PSORAS) [MIM:607507]. PSORAS is an inflammatory, seronegative arthritis associated with psoriasis. It is a heterogeneous disorder ranging from a mild, non-destructive disease to a severe, progressive, erosive arthropathy. Five types of psoriatic arthritis have been defined: asymmetrical oligoarthritis characterized by primary involvement of the small joints of the fingers or toes; asymmetrical arthritis which involves the joints of the extremities; symmetrical polyarthritis characterized by a rheumatoidlike pattern that can involve hands, wrists, ankles, and feet; arthritis mutilans, which is a rare but deforming and destructive condition; arthritis of the sacroiliac joints and spine (psoriatic spondylitis).

Sequence similarities

Belongs to the tumor necrosis factor family.

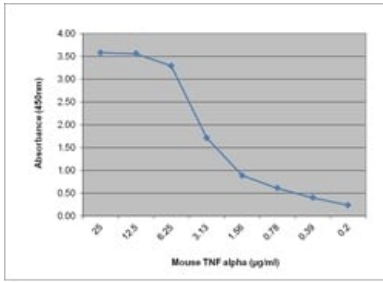
Post-translational modifications

The soluble form derives from the membrane form by proteolytic processing.
The membrane form, but not the soluble form, is phosphorylated on serine residues.
Dephosphorylation of the membrane form occurs by binding to soluble TNFRSF1A/TNFR1.
O-glycosylated; glycans contain galactose, N-acetylgalactosamine and N-acetylneuraminic acid.

Cellular localization

Secreted and Cell membrane.

Images



ELISA - Anti-TNF alpha antibody [MP6-XT3]
(ab11564)

Recombinant Mouse TNF alpha detected in a sandwich assay with Rat anti Mouse TNF alpha (ab11564) as the coating antibody; Rabbit anti Mouse TNF alpha:Biotin as the detection antibody and Streptavidin:HRP as the final layer.

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

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