abcam

Product datasheet

Anti-Factor VIII antibody [2.2.32] ab41187

1 Image

Overview

Product name	Anti-Factor VIII antibody [2.2.32]
Description	Mouse monoclonal [2.2.32] to Factor VIII
Host species	Mouse
Specificity	ab41187 recognises full-length human Factor VIII.
Tested applications	**Suitable for:** ICC/IF, WB, ELISA
Species reactivity	**Reacts with:** Human
Immunogen	Purified human Factor VIII.
Positive control	This antibody gave a positive result when used in the following formaldehyde fixed cell lines: HeLa.
General notes	Stable for at least 1 year at -20°C to -70°C. Abcam is committed to meeting high standards of ethical manufacturing and has decided to discontinue this product by June 2019 as it has been generated by the ascites method. We are sorry for any inconvenience this may cause. We would recommend antibody ab139391 as a replacement.

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	Preservative: None Constituents: PBS, pH 7.4
Purity	Protein G purified
Clonality	Monoclonal
Clone number	2.2.32
Isotype	IgG1

Applications

Our Abpromise guarantee covers the use of **ab41187** in the following tested applications.

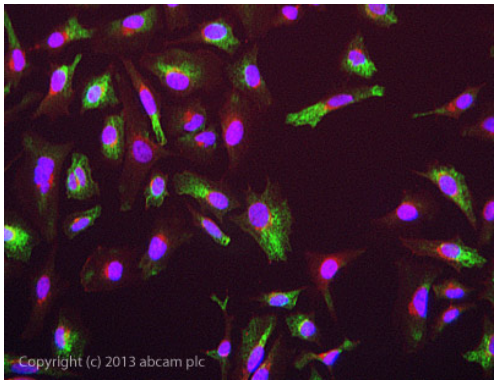
The application notes include recommended starting dilutions; optimal dilutions/concentrations should be determined by the end user.

Application	Abreviews	Notes
ICC/IF		Use a concentration of 5 µg/ml.
WB		Use at an assay dependent dilution. Predicted molecular weight: 267 kDa.
ELISA		1/32000.

Target

Function	Factor VIII, along with calcium and phospholipid, acts as a cofactor for factor IXa when it converts factor X to the activated form, factor Xa.
Involvement in disease	Defects in F8 are the cause of hemophilia A (HEMA) [MIM:306700]. A disorder of blood coagulation characterized by a permanent tendency to hemorrhage. About 50% of patients have severe hemophilia resulting in frequent spontaneous bleeding into joints, muscles and internal organs. Less severe forms are characterized by bleeding after trauma or surgery. Note=Of particular interest for the understanding of the function of F8 is the category of CRM (cross-reacting material) positive patients (approximately 5%) that have considerable amount of F8 in their plasma (at least 30% of normal), but the protein is non-functional; i.e., the F8 activity is much less than the plasma protein level. CRM-reduced is another category of patients in which the F8C antigen and activity are reduced to approximately the same level. Most mutations are CRM negative, and probably affect the folding and stability of the protein.
Sequence similarities	Belongs to the multicopper oxidase family. Contains 3 F5/8 type A domains. Contains 2 F5/8 type C domains. Contains 6 plastocyanin-like domains.
Domain	Domain F5/8 type C 2 is responsible for phospholipid-binding and essential for factor VIII activity.
Post-translational modifications	Sulfation on Tyr-1699 is essential for binding vWF.
Cellular localization	Secreted > extracellular space.

Images



Immunocytochemistry/ Immunofluorescence - Anti-Factor VIII antibody [2.2.32] (ab41187)

ICC/IF image of ab41187 stained HeLa cells. The cells were 4% formaldehyde fixed (10 min) and then incubated in 1%BSA / 10% normal goat serum / 0.3M glycine in 0.1% PBS-Tween for 1h to permeabilise the cells and block non-specific protein-protein interactions. The cells were then incubated with the antibody ab41187 at 5µg/ml overnight at +4°C. The secondary antibody (green) was DyLight® 488 goat anti- mouse (ab96879) IgG (H+L) used at a 1/250 dilution for 1h. Alexa Fluor® 594 WGA was used to label plasma membranes (red) at a 1/200 dilution for 1h. DAPI was used to stain the cell nuclei (blue) at a concentration of 1.43µM.

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