

## Product datasheet

# Anti-MLH1 antibody [EPR3894] (Alexa Fluor® 488) ab199237

Recombinant RabMAb

★★★★☆ 1 Abreviews 2 Images

### Overview

<b>Product name</b>	Anti-MLH1 antibody [EPR3894] (Alexa Fluor® 488)
<b>Description</b>	Rabbit monoclonal [EPR3894] to MLH1 (Alexa Fluor® 488)
<b>Host species</b>	Rabbit
<b>Conjugation</b>	Alexa Fluor® 488. Ex: 495nm, Em: 519nm
<b>Tested applications</b>	<b>Suitable for:</b> ICC/IF
<b>Species reactivity</b>	<b>Reacts with:</b> Human <b>Predicted to work with:</b> Mouse, Rat
<b>Immunogen</b>	A synthetic peptide corresponding to residues in Human MLH1 (UniProt ID: P40692).
<b>Positive control</b>	ICC/IF: HCT116 cells
<b>General notes</b>	<p>Alternative versions available:  <a href="#">Anti-MLH1 antibody [EPR3894] (ab92312)</a> - <b>Knockout validated</b></p> <p>This product is a recombinant monoclonal antibody, which offers several advantages including:</p> <ul style="list-style-type: none"> <li>- High batch-to-batch consistency and reproducibility</li> <li>- Improved sensitivity and specificity</li> <li>- Long-term security of supply</li> <li>- Animal-free production</li> </ul> <p>For more information <a href="#">see here</a>.</p> <p>Our RabMAb® technology is a patented hybridoma-based technology for making rabbit monoclonal antibodies. For details on our patents, please refer to <a href="#">RabMAb® patents</a>.</p> <p>Alexa Fluor® is a registered trademark of Molecular Probes, Inc, a Thermo Fisher Scientific Company. The Alexa Fluor® dye included in this product is provided under an intellectual property license from Life Technologies Corporation. As this product contains the Alexa Fluor® dye, the purchase of this product conveys to the buyer the non-transferable right to use the purchased product and components of the product only in research conducted by the buyer (whether the buyer is an academic or for-profit entity). As this product contains the Alexa Fluor® dye the sale of this product is expressly conditioned on the buyer not using the product or its components, or any materials made using the product or its components, in any activity to generate revenue, which may include, but is not limited to use of the product or its components: in manufacturing; (ii) to provide a service, information, or data in return for payment (iii) for therapeutic, diagnostic or</p>

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Reproducibility is key to advancing scientific discovery and accelerating scientists' next breakthrough.

Abcam is leading the way with our range of recombinant antibodies, knockout-validated antibodies and knockout cell lines, all of which support improved reproducibility.

We are also planning to innovate the way in which we present recommended applications and species on our product datasheets, so that only applications & species that have been tested in our own labs, our suppliers or by selected trusted collaborators are covered by our Abpromise™ guarantee.

In preparation for this, we have started to update the applications & species that this product is Abpromise guaranteed for.

We are also updating the applications & species that this product has been "predicted to work with," however this information is not covered by our Abpromise guarantee.

Applications & species from publications and Abreviews that have not been tested in our own labs or in those of our suppliers are not covered by the Abpromise guarantee.

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, as well as customer reviews and Q&As.

## Properties

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<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. Avoid freeze / thaw cycle. Store In the Dark.
<b>Storage buffer</b>	pH: 7.40 Preservative: 0.02% Sodium azide Constituents: PBS, 30% Glycerol, 1% BSA
<b>Purity</b>	Protein A purified
<b>Clonality</b>	Monoclonal
<b>Clone number</b>	EPR3894
<b>Isotype</b>	IgG

## Applications

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Our [Abpromise guarantee](#) covers the use of **ab199237** 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
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Application	Abreviews	Notes
ICC/IF	★★★★☆	1/250. This product gave a positive signal in HCT116 cells fixed with 4% formaldehyde (10 min)

## Target

### Function

Heterodimerizes with PMS2 to form MutL alpha, a component of the post-replicative DNA mismatch repair system (MMR). DNA repair is initiated by MutS alpha (MSH2-MSH6) or MutS beta (MSH2-MSH6) binding to a dsDNA mismatch, then MutL alpha is recruited to the heteroduplex. Assembly of the MutL-MutS-heteroduplex ternary complex in presence of RFC and PCNA is sufficient to activate endonuclease activity of PMS2. It introduces single-strand breaks near the mismatch and thus generates new entry points for the exonuclease EXO1 to degrade the strand containing the mismatch. DNA methylation would prevent cleavage and therefore assure that only the newly mutated DNA strand is going to be corrected. MutL alpha (MLH1-PMS2) interacts physically with the clamp loader subunits of DNA polymerase III, suggesting that it may play a role to recruit the DNA polymerase III to the site of the MMR. Also implicated in DNA damage signaling, a process which induces cell cycle arrest and can lead to apoptosis in case of major DNA damages. Heterodimerizes with MLH3 to form MutL gamma which plays a role in meiosis.

### Tissue specificity

Colon, lymphocytes, breast, lung, spleen, testis, prostate, thyroid, gall bladder and heart.

### Involvement in disease

Defects in MLH1 are the cause of hereditary non-polyposis colorectal cancer type 2 (HNPCC2) [MIM:609310]. Mutations in more than one gene locus can be involved alone or in combination in the production of the HNPCC phenotype (also called Lynch syndrome). Most families with clinically recognized HNPCC have mutations in either MLH1 or MSH2 genes. HNPCC is an autosomal, dominantly inherited disease associated with marked increase in cancer susceptibility. It is characterized by a familial predisposition to early onset colorectal carcinoma (CRC) and extra-colonic cancers of the gastrointestinal, urological and female reproductive tracts. HNPCC is reported to be the most common form of inherited colorectal cancer in the Western world, and accounts for 15% of all colon cancers. Cancers in HNPCC originate within benign neoplastic polyps termed adenomas. Clinically, HNPCC is often divided into two subgroups. Type I: hereditary predisposition to colorectal cancer, a young age of onset, and carcinoma observed in the proximal colon. Type II: patients have an increased risk for cancers in certain tissues such as the uterus, ovary, breast, stomach, small intestine, skin, and larynx in addition to the colon. Diagnosis of classical HNPCC is based on the Amsterdam criteria: 3 or more relatives affected by colorectal cancer, one a first degree relative of the other two; 2 or more generation affected; 1 or more colorectal cancers presenting before 50 years of age; exclusion of hereditary polyposis syndromes. The term 'suspected HNPCC' or 'incomplete HNPCC' can be used to describe families who do not or only partially fulfill the Amsterdam criteria, but in whom a genetic basis for colon cancer is strongly suspected.

Defects in MLH1 are a cause of mismatch repair cancer syndrome (MMRCS) [MIM:276300]; also known as Turcot syndrome or brain tumor-polyposis syndrome 1 (BTPS1). MMRCS is an autosomal dominant disorder characterized by malignant tumors of the brain associated with multiple colorectal adenomas. Skin features include sebaceous cysts, hyperpigmented and cafe au lait spots.

Defects in MLH1 are a cause of Muir-Torre syndrome (MuToS) [MIM:158320]; also abbreviated MTS. MuToS is a rare autosomal dominant disorder characterized by sebaceous neoplasms and visceral malignancy.

Note=Defects in MLH1 may contribute to lobular carcinoma in situ (LCIS), a non-invasive

neoplastic disease of the breast.

Defects in MLH1 are a cause of susceptibility to endometrial cancer (ENDMC) [MIM:608089]. Note=Some epigenetic changes can be transmitted unchanged through the germline (termed 'epigenetic inheritance'). Evidence that this mechanism occurs in humans is provided by the identification of individuals in whom 1 allele of the MLH1 gene is epigenetically silenced throughout the soma (implying a germline event). These individuals are affected by HNPCC but does not have identifiable mutations in MLH1, even though it is silenced, which demonstrates that an epimutation can phenocopy a genetic disease.

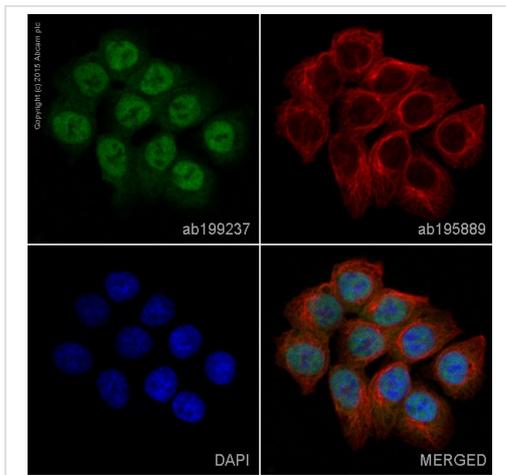
**Sequence similarities**

Belongs to the DNA mismatch repair mutL/hexB family.

**Cellular localization**

Nucleus.

**Images**



ab199237 staining MLH1 in HCT116 cells. The cells were fixed with 4% formaldehyde (10 min), permeabilized with 0.1% Triton X-100 for 5 minutes and then blocked with 1% BSA/10% normal goat serum/0.3M glycine in 0.1% PBS-Tween for 1h. The cells were then incubated overnight at +4°C with ab199237 at 1/250 dilution (shown in green) and ab195889, Mouse monoclonal to alpha Tubulin (Alexa Fluor® 594), at 1/250 dilution (shown in red). Nuclear DNA was labelled with DAPI (shown in blue).

Image was taken with a confocal microscope (Leica-Microsystems, TCS SP8).

Immunocytochemistry/ Immunofluorescence - Anti-MLH1 antibody [EPR3894] (Alexa Fluor® 488) (ab199237)

Why choose a recombinant antibody?

- Research with confidence**  
Consistent and reproducible results
- Long-term and scalable supply**  
Recombinant technology
- Success from the first experiment**  
Confirmed specificity
- Ethical standards compliant**  
Animal-free production

Anti-MLH1 antibody [EPR3894] (Alexa Fluor® 488) (ab199237)

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

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