# abcam

### Product datasheet

# Alexa Fluor® 405 Anti-GFAP antibody [EPR1034Y] ab206586

Recombinant RabMAb

# 2 References 2 Images

#### Overview

Product name Alexa Fluor® 405 Anti-GFAP antibody [EPR1034Y]

**Description** Alexa Fluor® 405 Rabbit monoclonal [EPR1034Y] to GFAP

Host species Rabbit

**Conjugation** Alexa Fluor® 405. Ex: 402nm, Em: 421nm

Tested applications

Suitable for: IHC-Fr

Species reactivity

Reacts with: Rat

Predicted to work with: Mouse, Human

**Immunogen** Synthetic peptide within Human GFAP aa 1-100 (N terminal). The exact sequence is proprietary.

Database link: P14136

Positive control IHC-Fr: Rat Brain (Normal).

**General notes**This product is a recombinant monoclonal antibody, which offers several advantages including:

- High batch-to-batch consistency and reproducibility
- Improved sensitivity and specificity
- Long-term security of supply
- Animal-free production

For more information see here.

Our RabMAb<sup>®</sup> technology is a patented hybridoma-based technology for making rabbit monoclonal antibodies. For details on our patents, please refer to **RabMAb**<sup>®</sup> **patents**.

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1

Life Technologies Corporation, 5781 Van Allen Way, Carlsbad, CA 92008 USA or **outlicensing@thermofisher.com**.

#### **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.

Avoid freeze / thaw cycle. Store In the Dark.

Storage buffer pH: 7.40

Preservative: 0.02% Sodium azide

Constituents: 30% Glycerol (glycerin, glycerine), 1% BSA, PBS

Purity Protein A purified

Clonality Monoclonal
Clone number EPR1034Y

**Isotype** IgG

#### **Applications**

The Abpromise guarantee Our Abpromise guarantee covers the use of ab206586 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-Fr		1/100.

## **Target**

**Function** GFAP, a class-Ill intermediate filament, is a cell-specific marker that, during the development of

the central nervous system, distinguishes astrocytes from other glial cells.

**Tissue specificity** Expressed in cells lacking fibronectin.

Involvement in disease Defects in GFAP are a cause of Alexander disease (ALEXD) [MIM:203450]. Alexander disease

is a rare disorder of the central nervous system. It is a progressive leukoencephalopathy whose hallmark is the widespread accumulation of Rosenthal fibers which are cytoplasmic inclusions in astrocytes. The most common form affects infants and young children, and is characterized by progressive failure of central myelination, usually leading to death usually within the first decade. Infants with Alexander disease develop a leukoencephalopathy with macrocephaly, seizures, and psychomotor retardation. Patients with juvenile or adult forms typically experience ataxia, bulbar

signs and spasticity, and a more slowly progressive course.

**Sequence similarities** Belongs to the intermediate filament family.

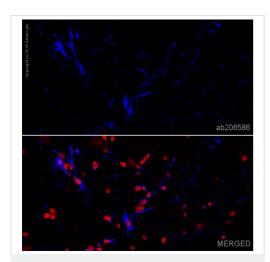
Post-translational modifications

Phosphorylated by PKN1.

Cellular localization

Cytoplasm. Associated with intermediate filaments.

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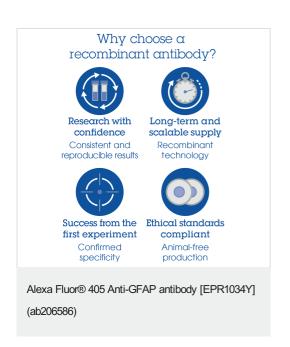
Immunohistochemistry (Frozen sections) - Alexa Fluor® 405 Anti-GFAP antibody [EPR1034Y] (ab206586)

IHC image of GFAP staining in a section of frozen normal rat adult brain.

The section was fixed using 10% formaldehyde in 1XPBS for 10 minutes. No antigen retrieval step was performed prior to staining. Non-specific protein-protein interactions were then blocked in TBS containing 0.025% (v/v) Triton X-100, 0.3M (w/v) glycine and 1% (w/v) BSA for 1h at room temperature. The section was then incubated overnight at +4°C in TBS containing 0.025% (v/v) Triton X-100 and 1% (w/v) BSA with ab206586 at 1/100 (shown in blue). Nuclear DNA was labelled with <u>ab108410</u>, DRAQ5™ at 1.25uM (1/4000 dilution) (shown in red). The section was then mounted using Fluoromount<sup>®</sup>.

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

For other IHC staining systems (automated and non-automated), customers should optimize variable parameters such as antigen retrieval conditions, antibody concentrations and incubation times.



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