

Anti-CD2AP antibody **ab205017**

[1 References](#) [2 Images](#)

Overview

Product name	Anti-CD2AP antibody
Description	Rabbit polyclonal to CD2AP
Host species	Rabbit
Tested applications	Suitable for: WB, IP
Species reactivity	Reacts with: Human
Immunogen	Recombinant fragment within Human CD2AP. The exact sequence is proprietary. NP_036252.1. Database link: Q9Y5K6
Positive control	HeLa, Jurkat and 293T whole cell lysates.
General notes	<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). Upon delivery aliquot. Store at -20°C long term. Avoid freeze / thaw cycle.
Storage buffer	<p>pH: 7</p> <p>Preservative: 0.09% Sodium azide</p> <p>Constituent: 99% Tris citrate/phosphate</p>
Purity	pH 7 - 8
Clonality	Immunogen affinity purified
Isotype	Polyclonal
	IgG

Applications

The Abpromise guarantee

Our **Abpromise guarantee** covers the use of ab205017 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
WB		1/2000 - 1/10000. Predicted molecular weight: 71 kDa.
IP		Use at 2-10 µg/mg of lysate.

Target

Function

Seems to act as an adapter protein between membrane proteins and the actin cytoskeleton. May play a role in receptor clustering and cytoskeletal polarity in the junction between T-cell and antigen-presenting cell. May anchor the podocyte slit diaphragm to the actin cytoskeleton in renal glomerulus. Also required for cytokinesis.

Tissue specificity

Widely expressed in fetal and adult tissues.

Involvement in disease

Defects in CD2AP are the cause of susceptibility to focal segmental glomerulosclerosis type 3 (FSGS3) [MIM:607832]. A renal pathology defined by the presence of segmental sclerosis in glomeruli and resulting in proteinuria, reduced glomerular filtration rate and edema. Renal insufficiency often progresses to end-stage renal disease, a highly morbid state requiring either dialysis therapy or kidney transplantation.

Sequence similarities

Contains 3 SH3 domains.

Domain

The Pro-rich domain may mediate binding to SH3 domains.
Potential homodimerization is mediated by the coiled coil domain.

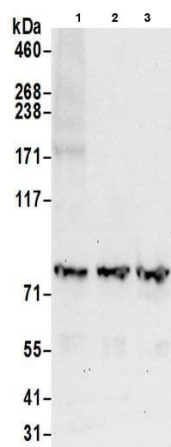
Post-translational modifications

Phosphorylated on tyrosine residues; probably by c-Abl, Fyn and c-Src.

Cellular localization

Cytoplasm > cytoskeleton. Cell projection > ruffle. Colocalizes with F-actin and BCAR1/p130Cas in membrane ruffles. Located at podocyte slit diaphragm between podocyte foot processes (By similarity). During late anaphase and telophase, concentrates in the vicinity of the midzone microtubules and in the midbody in late telophase.

Images



Western blot - Anti-CD2AP antibody (ab205017)

All lanes : Anti-CD2AP antibody (ab205017) at 0.1 µg/ml

Lane 1 : HeLa whole cell lysate

Lane 2 : 293T whole cell lysate

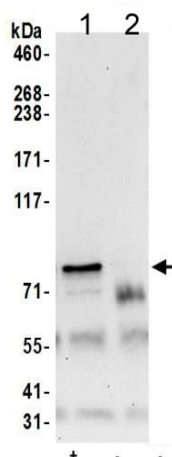
Lane 3 : Jurkat whole cell lysate

Lysates/proteins at 50 µg per lane.

Developed using the ECL technique.

Predicted band size: 71 kDa

Exposure time: 30 seconds



Immunoprecipitation - Anti-CD2AP antibody
(ab205017)

Detection of CD2AP in Immunoprecipitates of 293T whole cell lysates (1 mg for IP, 20% of IP loaded) using ab205017 at 6 µg/mg lysate for IP (Lane 1). For WB detection an ab205017 was used at 0.4 µg/ml. Lane 2 represents control IgG IP. Detection: Chemiluminescence with an exposure time of 30 seconds.

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

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