Product datasheet

Anti-Factor VIII antibody ab61370

Overview

Product name: Anti-Factor VIII antibody
Description: Sheep polyclonal to Factor VIII
Host species: Sheep
Tested applications: Suitable for: ELISA, Inhibition Assay
Species reactivity: Reacts with: Human
Immunogen: Recombinant full length Human Factor VIII

General notes: 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.

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

Properties

Form: Liquid
Storage instructions: Shipped at 4°C. Upon delivery aliquot and store at -20°C. Avoid freeze / thaw cycles.
Storage buffer: Constituents: 50% Water, 50% Glycerol (glycerin, glycerine)

Purity: Ion Exchange Chromatography
Purification notes: Salt fractionation followed by ion exchange chromatography.
Clonality: Polyclonal
Isotype: IgG

Applications

The Abpromise guarantee: Our Abpromise guarantee covers the use of ab61370 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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ELISA | Use at an assay dependent concentration. | |
Inhibition Assay | Use at an assay dependent concentration. Binds FVIII/vWF complex in plasma. | |

**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**


**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.

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

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