abcam

Product datasheet

Anti-Hemoglobin antibody ab19363

Overview

Product name Anti-Hemoglobin antibody

Description Goat polyclonal to Hemoglobin

Host species Goat

Tested applications Suitable for: Immunoelectrophoresis, Double Immunodiffusion

Species reactivity Reacts with: Human

Immunogen Full length protein corresponding to Human Hemoglobin. Sheep were immunized with purified

human hemoglobin F of fetal red blood cell origin.

General notesThe 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 pH: 6.8

Preservative: 0.1% Sodium azide

Constituents: 1.21% Tris, 0.02% Sodium chloride

Purity lgG fraction

Purification notes Antiserum was solid phase adsorbed against hemoglobin A to ensure specificity. The antiserum

was fractionated and passed over DEAE to yield an IgG fraction.

Clonality Polyclonal

Isotype IgG

Applications

The Abpromise guarantee Our Abpromise guarantee covers the use of ab19363 in the following tested applications.

1

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

Application	Abreviews	Notes
Immunoelectrophoresis		Use at an assay dependent concentration.
Double Immunodiffusion		Use at an assay dependent concentration.

Target

Function

Tissue specificity

Involvement in disease

Involved in oxygen transport from the lung to the various peripheral tissues.

Red blood cells.

Defects in HBA1/HBA2 may be a cause of Heinz body anemias (HEIBAN) [MIM:140700]. This is a form of non-spherocytic hemolytic anemia of Dacie type 1. After splenectomy, which has little benefit, basophilic inclusions called Heinz bodies are demonstrable in the erythrocytes. Before splenectomy, diffuse or punctate basophilia may be evident. Most of these cases are probably instances of hemoglobinopathy. The hemoglobin demonstrates heat lability. Heinz bodies are observed also with the Ivemark syndrome (asplenia with cardiovascular anomalies) and with glutathione peroxidase deficiency.

Defects in HBA1/HBA2 are the cause of alpha-thalassemia (A-THAL) [MIM:604131]. The thalassemias are the most common monogenic diseases and occur mostly in Mediterranean and Southeast Asian populations. The hallmark of alpha-thalassemia is an imbalance in globin-chain production in the adult HbA molecule. The level of alpha chain production can range from none to very nearly normal levels. Deletion of both copies of each of the two alpha-globin genes causes alpha(0)-thalassemia, also known as homozygous alpha thalassemia. Due to the complete absence of alpha chains, the predominant fetal hemoglobin is a tetramer of gamma-chains (Bart hemoglobin) that has essentially no oxygen carrying capacity. This causes oxygen starvation in the fetal tissues leading to prenatal lethality or early neonatal death. The loss of three alpha genes results in high levels of a tetramer of four beta chains (hemoglobin H), causing a severe and lifethreatening anemia known as hemoglobin H disease. Untreated, most patients die in childhood or early adolescence. The loss of two alpha genes results in mild alpha-thalassemia, also known as heterozygous alpha-thalassemia. Affected individuals have small red cells and a mild anemia (microcytosis). If three of the four alpha-globin genes are functional, individuals are completely asymptomatic. Some rare forms of alpha-thalassemia are due to point mutations (non-deletional alpha-thalassemia). The thalassemic phenotype is due to unstable globin alpha chains that are rapidly catabolized prior to formation of the alpha-beta heterotetramers.

Note=Alpha(0)-thalassemia is associated with non-immune hydrops fetalis, a generalized edema of the fetus with fluid accumulation in the body cavities due to non-immune causes. Non-immune hydrops fetalis is not a diagnosis in itself but a symptom, a feature of many genetic disorders, and the end-stage of a wide variety of disorders.

Sequence similarities

Post-translational modifications

Belongs to the globin family.

The initiator Met is not cleaved in variant Thionville and is acetylated.

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