


Product datasheet

HRP Anti-Desmin antibody [Y66] - Cytoskeleton Marker ab195178

Recombinant RabMAb

2 Images

Overview

Product name	HRP Anti-Desmin antibody [Y66] - Cytoskeleton Marker
Description	HRP Rabbit monoclonal [Y66] to Desmin - Cytoskeleton Marker
Host species	Rabbit
Conjugation	HRP
Tested applications	Suitable for: IHC-P
Species reactivity	Reacts with: Human Predicted to work with: Mouse, Rat, Guinea pig 
Immunogen	Synthetic peptide. This information is proprietary to Abcam and/or its suppliers.
Epitope	ab32362 reacts with an epitope located in the C terminal region of desmin.
Positive control	IHC/P: Normal human skeletal muscle tissue.
General notes	Our RabMAb [®] technology is a patented hybridoma-based technology for making rabbit monoclonal antibodies. For details on our patents, please refer to <u>RabMAb[®] patents</u> .

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: 0.1% Proclin 300 Solution Constituents: 30% Glycerol (glycerin, glycerine), 1% BSA, PBS
Purity	Protein A purified
Clonality	Monoclonal
Clone number	Y66
Isotype	IgG

Applications

The Abpromise guarantee

Our **Abpromise guarantee** covers the use of ab195178 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-P		1/70. Perform heat mediated antigen retrieval with citrate buffer pH 6 before commencing with IHC staining protocol.

Target

Function

Desmin are class-III intermediate filaments found in muscle cells. In adult striated muscle they form a fibrous network connecting myofibrils to each other and to the plasma membrane from the periphery of the Z-line structures.

Involvement in disease

Defects in DES are the cause of myopathy myofibrillar desmin-related (MFM-DES) [MIM:601419]; also known as desmin-related myopathy (DRM). A neuromuscular disorder characterized by skeletal muscle weakness associated with cardiac conduction blocks, arrhythmias, restrictive heart failure, and by myofibrillar destruction with intracytoplasmic accumulation of desmin-reactive deposits in cardiac and skeletal muscle cells.

Defects in DES are the cause of cardiomyopathy dilated type 1I (CMD1I) [MIM:604765]. Dilated cardiomyopathy is a disorder characterized by ventricular dilation and impaired systolic function, resulting in congestive heart failure and arrhythmia. Patients are at risk of premature death.

Defects in DES are the cause of neurogenic scapuloperoneal syndrome Kaeser type (Kaeser syndrome) [MIM:181400]. Kaeser syndrome is an autosomal dominant disorder with a peculiar scapuloperoneal distribution of weakness and atrophy. A large clinical variability is observed ranging from scapuloperoneal, limb girdle and distal phenotypes with variable cardiac or respiratory involvement. Facial weakness, dysphagia and gynaecomastia are frequent additional symptoms. Affected men seemingly bear a higher risk of sudden, cardiac death as compared to affected women. Histological and immunohistochemical examination of muscle biopsy specimens reveal a wide spectrum of findings ranging from near normal or unspecific pathology to typical, myofibrillar changes with accumulation of desmin.

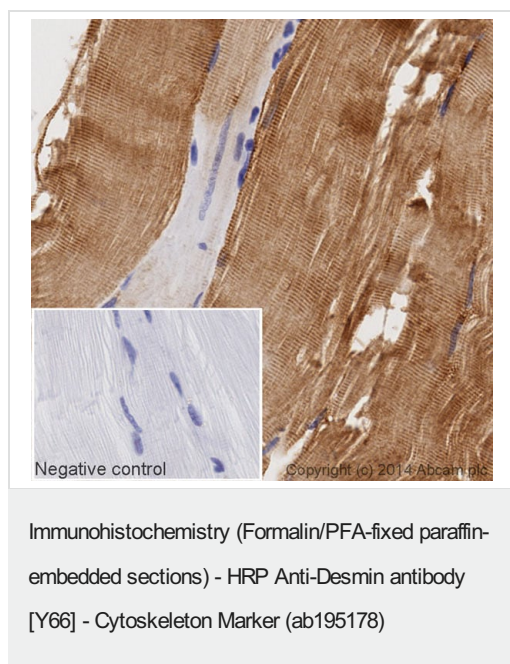
Sequence similarities

Belongs to the intermediate filament family.

Cellular localization

Cytoplasm.

Images



IHC image of Desmin staining in a section of formalin-fixed paraffin-embedded normal human skeletal muscle*, performed on a Leica BOND. The section was pre-treated using heat mediated antigen retrieval with sodium citrate buffer (pH6, epitope retrieval solution 1) for 20mins. The section was then incubated with ab195178 at 1/70 dilution, for 15 mins at room temperature. DAB was used as the chromogen. The section was then counterstained with haematoxylin and mounted with DPX. The inset negative control image is taken from an identical assay without primary antibody.

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

*Tissue obtained from the Human Research Tissue Bank, supported by the NIHR Cambridge Biomedical Research Centre

Why choose a recombinant antibody?

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

HRP Anti-Desmin antibody [Y66] - Cytoskeleton Marker (ab195178)

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