abcam

Product datasheet

Anti-PMP22 antibody [CF1] ab90782

2 Images

Overview

Product name Anti-PMP22 antibody [CF1]

Description Mouse monoclonal [CF1] to PMP22

Host species Mouse

Tested applications Suitable for: Flow Cyt (Intra), IHC-P

Species reactivity Reacts with: Human

Predicted to work with: Rhesus monkey

Immunogen Synthetic peptide:

CRHPEWHLNSDYSYG

corresponding to amino acids 121-133 from the second extracellular domain of Human PMP22

with an N-terminal Cysteine residue linker

Run BLAST with Run BLAST with

Positive control Human nerve section Flow Cyt (Intra): SH-SY5Y cells.

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 Preservative: 0.02% Sodium azide

Constituents: PBS, 0.1% BSA

Purification notes 0.2 µm filtered antibody solution

Monoclonal Clonality

Clone number CF1 Isotype lgG1

Applications

The Abpromise guarantee

Our Abpromise guarantee covers the use of ab90782 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
Flow Cyt (Intra)		Use 1µg for 10 ⁶ cells. ab170190 - Mouse monoclonal lgG1, is suitable for use as an isotype control with this antibody.
IHC-P		Use a concentration of 1 µg/ml.

Target

Function

Involvement in disease

Might be involved in growth regulation, and in myelinization in the peripheral nervous system.

Defects in PMP22 are the cause of Charcot-Marie-Tooth disease type 1A (CMT1A) [MIM:118220]; also known as hereditary motor and sensory neuropathy IA. CMT1A is a form of Charcot-Marie-Tooth disease, the most common inherited disorder of the peripheral nervous system. Charcot-Marie-Tooth disease is classified in two main groups on the basis of electrophysiologic properties and histopathology: primary peripheral demyelinating neuropathy or CMT1, and primary peripheral axonal neuropathy or CMT2. Neuropathies of the CMT1 group are characterized by severely reduced nerve conduction velocities (less than 38 m/sec), segmental demyelination and remyelination with onion bulb formations on nerve biopsy, slowly progressive distal muscle atrophy and weakness, absent deep tendon reflexes, and hollow feet. CMT1A inheritance is autosomal dominant.

Defects in PMP22 are a cause of Dejerine-Sottas syndrome (DSS) [MIM:145900]; also known as Dejerine-Sottas neuropathy (DSN) or hereditary motor and sensory neuropathy III (HMSN3). DSS is a severe degenerating neuropathy of the demyelinating Charcot-Marie-Tooth disease category, with onset by age 2 years. DSS is characterized by motor and sensory neuropathy with very slow nerve conduction velocities, increased cerebrospinal fluid protein concentrations, hypertrophic nerve changes, delayed age of walking as well as areflexia. There are both autosomal dominant and autosomal recessive forms of Dejerine-Sottas syndrome.

Defects in PMP22 are a cause of hereditary neuropathy with liability to pressure palsies (HNPP) [MIM:162500]; an autosomal dominant disorder characterized by transient episodes of decreased perception or peripheral nerve palsies after slight traction, compression or minor traumas.

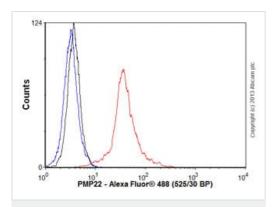
Defects in PMP22 are the cause of Charcot-Marie-Tooth disease type 1E (CMT1E) [MIM:118300]; also known as Charcot-Marie-Tooth disease and deafness autosomal dominant. CMT1E is an autosomal dominant form of Charcot-Marie-Tooth disease characterized by the association of sensorineural hearing loss with peripheral demyelinating neuropathy. Defects in PMP22 may be a cause of inflammatory demyelinating polyneuropathy (IDP) [MIM:139393]. IDP is a putative autoimmune disorder presenting in an acute (AIDP) or chronic form (CIDP). The acute form is also known as Guillain-Barre syndrome.

Sequence similarities

Cellular localization

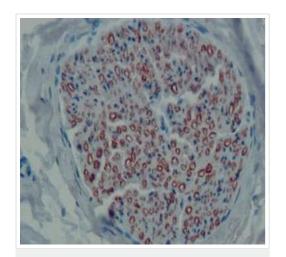
Belongs to the PMP-22/EMP/MP20 family.

Membrane.



Flow Cytometry (Intracellular) - Anti-PMP22 antibody [CF1] (ab90782)

Overlay histogram showing SH-SY5Y cells stained with ab90782 (red line). The cells were fixed with 80% methanol (5 min) and incubated in 1x PBS / 10% normal goat serum / 0.3M glycine to block non-specific protein-protein interactions. The cells were then incubated with the antibody (ab90782, 1µg/1x10⁶ cells) for 30 min at 22°C. The secondary antibody used was Alexa Fluor® 488 goat anti-mouse lgG (H&L) (ab150113) at 1/2000 dilution for 30 min at 22°C. Isotype control antibody (black line) was mouse lgG1 [ICIGG1] (ab91353, 1µg/1x10⁶ cells) used under the same conditions. Unlabelled sample (blue line) was also used as a control. Acquisition of >5,000 events were collected using a 20mW Argon ion laser (488nm) and 525/30 bandpass filter. Please note that Abcam do not have any data for use of this antibody on non-fixed cells. We welcome any customer feedback.



Immunohistochemistry (Formalin/PFA-fixed paraffinembedded sections) - Anti-PMP22 antibody [CF1] (ab90782)

Formalin fixed, paraffin embedded human nerve tissue labelled with ab90782 at 1 μ g/ml. Positive staining of peripheral nerve myelin sheaths can be observed. Image = 20x magnification.

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