

Product datasheet for AM09289PU-N

OriGene Technologies, Inc.

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Serum Amyloid A (SAA1) Mouse Monoclonal Antibody [Clone ID: 132]

Product data:

Product Type: Primary Antibodies

Clone Name: 132
Applications: ELISA
Recommended Dilution: ELISA.

Western Blot: Use of this SSA antibody at a concentration of 0.1-0.5 µg will allow visualization

of 100 ng/lane of recombinant Human SAA.

Reactivity: Human
Host: Mouse
Isotype: IgG3

Clonality: Monoclonal

Immunogen: Highly purified recombinant Human SAA.

Specificity: Reacts with natural and recombinant Human SAA.

Does not show any cross-reaction with other Human Cytokines or Growth Factors tested such

as IL1 beta, IL-8, MCAF, TGF beta and EGF.

Formulation: 0.01 M PBS, pH 7.2 without preservatives

State: Purified

State: Lyophilized purified IgG fraction

Reconstitution Method: Restore with Double distillated water to adjust the final concentration to 1.0 mg/ml.

Purification: Affinity Chromatography on Protein G

Conjugation: Unconjugated

Storage: Store the antibody at -20°C.

Avoid repeated freezing and thawing.

Stability: Shelf life: one year from despatch.

Gene Name: serum amyloid A1

Database Link: Entrez Gene 6288 Human

P0DJ18





Background:

The Serum Amyloid A (SAA) family comprises a number of differentially expressed lipoproteins, acute phase SAA1 and SAA2, the former being a major component in plasma, and constitutive SAA's (C-SAAs). Although the liver is the primary site of synthesis of both SAA types, extrhepatic production has been reported. The in vivo concentrations increase by as much as 1000 fold during inflammation. Several studies have expressed it's importance in the diagnosis and monitoring of various diseases. Pathological SAA values are often detected in association with normal CRP concentrations. SAA rises earlier and more sharply than CRP. SAA enhances the binding of HDL's to macrophages and thus helps the delivery of lipid to sites of injury for use in tissue repair. It is thus thought to be an integral part of the disease process. In addition, recent experiments suggest that SAA may play a "houekeeping" role in normal human tissues. Elevated levels of SAA over time predispose secondary amyloidosis, extracellular accumulation of amyloid fibrils, derived from a circulating precursor, in various tissues and organs. The most common form of amyloidosis occurs secondary to chronic inflammatory disease, particularly rheumatoid artheritis.

Synonyms:

SAA1, SAA2