

# **Product datasheet for AP21256BT-N**

#### OriGene Technologies, Inc.

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## **Fumarase Rabbit Polyclonal Antibody**

#### **Product data:**

Product Type: Primary Antibodies

Applications: ELISA, ID, IF, IP, R, WB

**Recommended Dilution:** This product is intended for use in precipitating and non-precipitating antibody-binding

assays (such as e.g., ELISA and Western blotting and Immunofluorescence or Histochemical

techniques).

Working dilutions in non-precipitating antibody-binding techniques: 1/1,000-1/5,000.

Reactivity: Porcine
Host: Rabbit
Isotype: IgG

Clonality: Polyclonal

**Immunogen:** Fumarase is isolated and purified from Porcine heart

Freund's complete adjuvant is used in the first step of the immunization procedure.

**Specificity:** The antibody recognizes Fumarase from Porcine heart.

The reagents were evaluated for potency, purity and specificity using most or all of the following techniques: Immunoelectrophoresis, Cross-Immunoelectrophoresis, single Radial

Immunodiffusion (Ouchterlony), block titration, ELISA, Immunoblotting and Enzyme

Inhibition.

Cross-reactivities against enzymes of other sources may occur but have not been

determined.

**Formulation:** PBS, pH 7.2 without preservatives and foreign proteins

Label: Biotin

State: Lyophilized hyperimmune IgG fraction

Molar radio: Biotin/IgG ~7.6

**Reconstitution Method:** Restore by adding 1.0 ml of sterile distilled water

**Concentration:** lot specific

**Purification:** Ammonium Sulphate Precipitation and Ion Exchange Chromatography

**Conjugation:** Biotin





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**Storage:** Store the antibody lyophilized at 2-8°C and reconstituted at 2-8°C for one week or (in aliquots)

at -20°C for longer.

If a slight precipitation occurs upon storage, this should be removed by centrifugation.

**Stability:** Shelf life: one year from despatch.

Database Link: P10173

**Background:** Defects in FH are the cause of fumarase deficiency (FHD) [MIM:606812]; also known as

fumaricaciduria. FHD is characterized by progressive encephalopathy, developmental delay,

hypotonia, cerebral atrophy and lactic and pyruvic acidemia.

Defects in FH are the cause of multiple cutaneous and uterine leiomyomata (MCUL1) [MIM:150800]. MCUL1 is an autosomal dominant condition in which affected individuals develop benign smooth muscle tumors (leiomyomata) of the skin. Affected females also

usually develop leiomyomata of the uterus (fibroids).

Defects in FH are the cause of hereditary leiomyomatosis and renal cell cancer (HLRCC)

[MIM:605839].

Synonyms: HLRCC, LRCC, MCL, MCUL1