

Caldesmon clone EP19

Rabbit Monoclonal Antibody

Instructions For Use

Specification:

Recognizes a protein of 150kDa, which is identified as the high molecular weight variant of Caldesmon. Two closely related variants of human caldesmon have been identified which are different in their electrophoretic mobility and cellular distribution. The h-caldesmon variant (120–150kDa) is predominantly expressed in smooth muscle whereas l-caldesmon (70–80kDa) is found in non-muscle tissue and cells. Neither of the two variants has been detected in skeletal muscle. This MAb recognizes only the 150kDa variant (h-caldesmon) in Western blots of human aortic media extracts and is unreactive with fibroblast extracts from cultivated human foreskin. Caldesmon is a developmentally regulated protein involved in smooth muscle and non-muscle contraction.

Availability:

Catalog No.	Contents	Volume
ILM2119-C01	Caldesmon clone EP19	0,1 ml concentrate
ILM2119-C05	Caldesmon clone EP19	0,5 ml concentrate
ILM2119-C1	Caldesmon clone EP19	1,0 ml concentrate

Intended use: For Research Use Only

Reactivity: Human, others not known

Clone: EP19

Species of origin: Rabbit

Isotype: IgG

Control tissue: Uterus, Colon carcinoma

Staining: Cytoplasmic

Presentation: Purified antibody diluted in Tris-HCl buffer containing stabilizing protein and <0.1% sodium Azide.

Immunogen: A synthetic phospho-peptide corresponding to residues surrounding Ser789 of human Caldesmon.

Application and suggested dilutions:

Heat induced epitope retrieval in 10 mM citrate buffer, pH6.0, for 20 minutes is required for IHC staining on formalin-fixed, paraffin embedded tissue sections.

- Paraffin embedded tissue section, dilution up to 1:50-1:100

The optimal dilution for a specific application should be determined by the investigator.

Note: Dilution of the antibody in 10% normal goat serum followed by a goat anti-Rabbit secondary antibody-based detection is recommended.

Storage & Stability: Store at 2-8 °C. Do not use after expiration date printed on the vial.

References:

- 1) Miettinen M, et al. Arch Pathol Lab Med. 2006; 130:1466-78.
- 2) Watanabe K, et al. Hum Pathol. 1999; 30:392-6.
- 3) Comin CE, et al. Am J Surg Pathol. 2006; 30:463-9.