Datasheet for ABIN1842566

anti-CHRNA7 antibody (Extracellular Domain, N-Term)

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Overview

Quantity:	40 µg
Target:	CHRNA7
Binding Specificity:	Extracellular Domain, N-Term
Reactivity:	Human, Rat, Mouse
Host:	Rabbit
Clonality:	Polyclonal
Conjugate:	This CHRNA7 antibody is un-conjugated
Application:	Western Blotting (WB)

Product Details

Immunogen:	KLH-coupled synthetic peptide from N-terminal extracellular domain of human CHRNA7 P36544
Isotype:	IgG
Specificity:	Rabbit Anti-CHRNA7 Polyclonal Antibody detects endogenous levels of human, mouse, and rat CHRNA7. Positive Control: SH-SY5Y lysate, mouse brain lysate and rat brain lysate
Characteristics:	Rabbit Anti-CHRNA7 Polyclonal Antibody is developed in rabbit using a KLH-coupled synthetic peptide from N-terminal extracellular domain of human CHRNA7 (Swiss Prot: P36544).
Purification:	Immunoaffinity chromatography

Target Details

Target:	CHRNA7
Alternative Name:	CHRNA7 (CHRNA7 Products)
Background:	CHRNA7 (Also known as Nicotinic Acetylcholine Receptor alpha 7) is a major component of brain nicotinic receptors that are blocked by alpha-bungarotoxin. The nicotinic acetylcholine receptors (nAChRs) are members of a superfamily of ligand-gated ion channels that mediate fast signal transmission at synapses. CHRNA7 has a signal peptide, followed by an N-terminal extracellular domain, 3 membrane-spanning regions, an intracellular domain, a fourth transmembrane region, and an extracellular C-terminal tail. The nicotinic acetylcholine receptor alpha-7 subunit is required for acetylcholine inhibition of macrophage TNF release. The nicotinic acetylcholine receptor alpha-7 subunit is essential for inhibiting cytokine synthesis by the cholinergic antiinflammatory pathway. Upregulation of CHRNA7 receptors may be a compensatory response to maintain basocortical cholinergic activity during disease progression or may act with beta-amyloid in disease pathogenesis
UniProt:	P36544
Pathways:	Synaptic Membrane

Application Details

Application Notes:	Working concentrations for specific applications should be determined by the investigator. The appropriate concentrations may be affected by secondary antibody affinity, antigen concentration, the sensitivity of the method of detection, temperature, the length of the incubations, and other factors. The suitability of this antibody for applications other than those listed below has not been determined. The following concentration ranges are recommended starting points for this product. Western blot: 0. 5-1 µg/mL
Restrictions:	For Research Use only

Handling

Format:	Lyophilized
Reconstitution:	Reconstitute the lyophilized antibody with deionized water (or equivalent) to a final antibody concentration of 0.5 mg/mL.
Concentration:	0.5 mg/mL

Handling

Buffer:	lyophilized with PBS, pH 7.4, containing 0.02 % sodium azide
Preservative:	Sodium azide
Precaution of Use:	WARNING: Reagents contain sodium azide. Sodium azide is very toxic if ingested or inhaled. Avoid contact with skin, eyes, or clothing. Wear eye or face protection when handling. If skin or eye contact occurs, wash with copious amounts of water. If ingested or inhaled, contact a physician immediately. Sodium azide yields toxic hydrazoic acid under acidic conditions. Dilute azide-containing compounds in running water before discarding to avoid accumulation of potentially explosive deposits in lead or copper plumbing.
Handling Advice:	Avoid repeated freezing and thawing.
Storage:	-20 °C
Storage Comment:	The antibody is stable in lyophilized form if stored at -20 °C or below. The reconstituted antibody can be stored for 2-3 weeks at 2-8 °C. For long term storage, aliquot and store at -20 °C or below.