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anti-SAA antibody

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Overview

Quantity:	100 μg
Target:	SAA
Reactivity:	Human
Host:	Mouse
Clonality:	Monoclonal
Conjugate:	This SAA antibody is un-conjugated
Application:	Western Blotting (WB), Immunohistochemistry (Paraffin-embedded Sections) (IHC (p)), Immunoassay (IA), Immunohistochemistry (Frozen Sections) (IHC (fro))

Product Details

Clone:	Reu86-5
Sterility:	0.2 μm filtered

Target Details

Target:

SAA

Alternative Name:	Serum Amyloid A (SAA Products)
Background:	The serum amyloid A (SAA) family comprises a number of differentially expressed
	apolipoproteins, acute- phase SAA1 and SAA2, the former being the major component in
	plasma, and constitutive SAAs (C-SAAs). Although the liver is the primary site of synthesis of
	both SAA types extrahepatic production has been reported. The in vivo concentrations increase
	by as much as 1000-fold during inflammation. Several studies have stressed its 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. Recently, a broader view of SAA expression and function has been emerging. Expression studies show production of SAA proteins in histologically normal, atherosclerotic, Alzheimer, inflammatory, and tumor tissues. SAA has been found to have binding sites for high density lipoproteins, calcium, laminin, and heparin/heparan-sulfate. Also adhesion motifs were identified and new functions, affecting cell adhesion, migration, proliferation and aggregation discovered. These findings emphasize the importance of SAA in various physiological and pathological processes, including inflammation, atherosclerosis, thrombosis, AA- amyloidosis, rheumatoid arthritis, and neoplasia. SAA has also a number of immunomodulatory roles, it can induce chemotaxis and adhesion molecule expression, has cytokine-like properties and can promote the upregulation of metalloproteinases. It enhances the binding of high-density lipoprotein to macrophages and thus helps in the delivery of lipids to sites of injury for use in tissue repair. It is thus thought to be an integral part of the disease processes. In addition, recent experiments suggest that SAA may play a "housekeeping" role in normal human tissues. Elevated levels of SAA over time predispose to secondary amyloidosis, extracellular accumulation of amyloid fibrils, derived from a circulating precursor, in various tissue and organs. The most common form of amyloidosis occurs secondary to chronic inflammatory disease, particularly rheumatoid arthritis. The antibody is raised against human SAA and Helix Pomatia Haemocyanine. It reacts with SAA-1 type.

Application Details

Application Notes:	For western blotting, immunohistology dilutions to be used depend on detection system applied. It is recommended that users test the reagent and determine their own optimal dilutions. The typical starting working dilution is 1:10.
Restrictions:	For Research Use only
Handling	
Buffer:	PBS, containing 0.02 % sodium azide and 0.1 % bovine serum albumin.
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Preservative:	Sodium azide

Handling

Storage Comment:

Product should be stored at 4 °C. Under recommended storage conditions, product is stable for one year.

Expiry Date:

12 months

Publications

Product cited in:

Feucht, Schneeberger, Hillebrand, Burkhardt, Weiss, Riethmüller, Land, Albert: "Capillary deposition of C4d complement fragment and early renal graft loss." in: **Kidney international**, Vol. 43, Issue 6, pp. 1333-8, (1993) (PubMed).

Zwirner, Felber, Herzog, Riethmüller, Feucht: "Classical pathway of complement activation in normal and diseased human glomeruli." in: **Kidney international**, Vol. 36, Issue 6, pp. 1069-77, (1990) (PubMed).