Datasheet for ABIN454366

# EIF2AK2 ELISA Kit

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## Overview

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| Quantity: | 96 tests |
| Target: | EIF2AK2 |
| Reactivity: | Mouse |
| Method Type: | Competition ELISA |
| Application: | ELISA |

## Product Details

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| Purpose: | This immunoassay kit allows for the in vitro quantitative determination of mouse Anti-nuclear Antibody, ANA concentrations in cell culture supernates, serum, plasma and other biological fluids. |
| Sample Type: | Cell Culture Supernatant, Plasma, Serum |
| Analytical Method: | Quantitative |
| Detection Method: | Colorimetric |
| Specificity: | This assay recognizes recombinant and natural mouse ANA. |
| Cross-Reactivity (Details): | No significant cross-reactivity or interference was observed. |
| Sensitivity: | < 0.78 U/L<br>The sensitivity of this assay, or Lower Limit of Detection (LLD) was defined as the lowest detectable concentration that could be differentiated from zero. |
| Characteristics: | Mus musculus,Mouse,Interferon-induced, double-stranded RNA-activated protein kinase,Eukaryotic translation initiation factor 2-alpha kinase 2,eIF-2A protein kinase 2,Interferon-inducible RNA-dependent |

## Target Details

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| Target: | EIF2AK2 |
| Alternative Name: | Eif2ak2 (EIF2AK2 Products) |
| Target Type: | Antibody |
| Background: | Anti-nuclear antibodies (ANAs, also known as anti-nuclear factor or ANF) are antibodies directed against contents of the cell nucleus.They are present in higher than normal numbers in autoimmune disease. The ANA test measures the pattern and amount of autoantibody which can attack the body's tissues as if they were foreign material. Autoantibodies are present in low titers in the general population, but in about 5% of the population, their concentration is increased, and about half of this 5% have an autoimmune disease. Normal titer of ANA is 1:40. Higher titers are indicative of an autoimmune disease. The presence of ANA is indicative of lupus erythematosus (present in 80-90% of cases), though they also appear in some other auto-immune diseases such as Sj ö gren's syndrome (60%), rheumatoid arthritis, autoimmune hepatitis, scleroderma and polymyositis & dermatomyositis (30%), and various non-rheumatological conditions associated with tissue damage. ANA are also directed to the nuclear pore complex in primary biliary cirrhosis. Other conditions with high ANA titre include Addison disease, Idiopathic thrombocytopenic purpura (ITP), Hashimoto's, Autoimmune hemolytic anemia, Type I diabetes mellitus, Mixed connective tissue disorder. |
| Pathways: | DNA Damage Repair, ER-Nucleus Signaling, Hepatitis C |

## Application Details

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| Sample Volume: | 100 µL |
| Plate: | Pre-coated |
| Protocol: | The microtiter plate provided in this kit has been pre-coated with an antigen specific to ANA. Standards or samples are then added to the appropriate microtiter plate wells with a biotin-conjugated antigen preparation specific for ANA and Avidin conjugated to Horseradish Peroxidase (HRP) is added to each microplate well and incubated. Then a TMB substrate solution is added to each well. Only those wells that contain ANA, biotin-conjugated antigen and enzyme-conjugated Avidin will exhibit a change in color. The enzyme-substrate reaction is terminated by the addition of a sulphuric acid solution and the color change is measured spectrophotometrically at a wavelength of 450 nm ± 2 nm. The concentration of ANA in the samples is then determined by comparing the O.D. 2 of the samples to the standard curve. |
| Restrictions: | For Research Use only |

## Handling

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| Storage: | 4 °C/-20 °C |
| Storage Comment: | The Standard, Detection Reagent A, Detection Reagent B and the 96-well strip plate should be stored at -20 °C upon being received. The other reagents can be stored at 4 °C. |