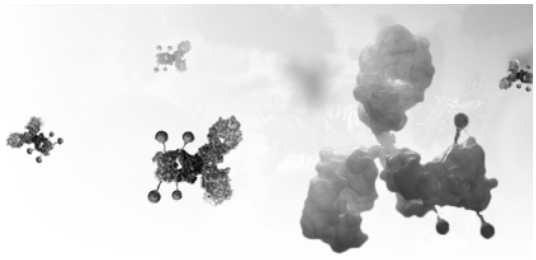

Sheep anti Human Factor VIII polyclonal antibody [HRP] (CABT-L427)

This product is for research use only and is not intended for diagnostic use.

PRODUCT INFORMATION

Specificity	Prior to conjugation, this antibody was specific for F.VIII as demonstrated by immunoelectrophoresis and ELISA. When titrated on vWF-coated plates, the unconjugated SAF8C-IG does not demonstrate any reactivity above the non-immune sheep negative control.
Target	Factor VIII:C
Immunogen	Human F.VIII (F.VIII:C) purified from concentrate.
Isotype	IgG
Source/Host	Sheep
Species Reactivity	Human
Conjugate	HRP
Applications	IEP, ELISA
Format	Liquid
Size	200 µg
Buffer	A buffered stabilizer solution containing 50% (v/v) glycerol.
Preservative	None
Storage	Store between -10 and -20°C. Product will become viscous but will not freeze. Avoid storage in frost-free freezers. Keep vial tightly capped. Allow product to warm to room temperature and gently mix before use. Avoid exposure to sodium azide as this is an inhibitor of peroxidase activity.

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BACKGROUND

Introduction	Factor VIII (formerly referred to as antihemophilic globulin and Factor VIII:C) is a large glycoprotein (320 kDa) that circulates in plasma at approximately 200 ng/ml. Synthesized in the liver, the majority of Factor VIII is cleaved during expression, resulting in a heterogeneous mixture of partially cleaved forms of F.VIII ranging in size from 200-280 kDa. The F.VIII is stabilized by association with von Willebrand Factor to form a F.VIII-vWF complex required for the normal survival of F.VIII in vivo (t1/2 of 8-12 hours). F.VIII is a pro-cofactor that is activated through limited proteolysis by thrombin. In this process F.VIIIa dissociates from vWF to combine with activated Factor IX, calcium and a phospholipid surface where it is an essential cofactor in the assembly of the Factor X activator complex. Once dissociated from vWF, F.VIIIa is susceptible to inactivation by activated Protein C and by non-enzymatic decay. Hemophilia A is a congenital bleeding disorder resulting from an X-chromosome-linked deficiency of F.VIII. The severity of the deficiency generally correlates with the severity of the disease. Some Hemophiliacs (~10%) produce a F.VIII protein that is partially or totally inactive. The production of neutralizing antibodies to F.VIII also occurs in 5-20% of Hemophiliacs.
Keywords	F8;coagulation factor VIII;procoagulant component;AHF;F8B;F8C;HEMA;FVIII;DXS1253E;coagulation factor VIII;factor VIII F8B;antihemophilic factor;coagulation factor VIIIc;

GENE INFORMATION

Entrez Gene ID	2157
UniProt ID	P00451

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