

# **Product Name: ApoA-I Rabbit Polyclonal Antibody**

Catalog #: APRab07020

For research use only.

### **Summary**

**Description** Rabbit polyclonal Antibody

**Host** Rabbit

Application WB,IHC,ICC/IF,ELISA

Reactivity Human, Mouse
Conjugation Unconjugated
Modification Unmodified

**Isotype** IgG

Clonality Polyclonal
Form Liquid
Concentration 1mg/ml

**Storage** Aliquot and store at -20°C (valid for 12 months). Avoid freeze/thaw cycles.

**Shipping** Ice bags

Liquid in PBS containing 50% glycerol, 0.5% protective protein and 0.02% New type **Buffer** 

preservative N.

**Purification** Affinity purification

## **Application**

**Dilution Ratio** WB 1:500-1:2000,IHC 1:100-1:300,ICC/IF 1:50-1:200,ELISA 1:10000-1:20000

Molecular Weight 31kDa

## **Antigen Information**

Gene Name APOA1

Alternative Names APOA1; Apolipoprotein A-I; Apo-AI; ApoA-I; Apolipoprotein A1

 Gene ID
 335.0

 SwissProt ID
 P02647

The antiserum was produced against synthesized peptide derived from the Internal region of Immunogen

human APOA1. AA range:81-130

## **Background**

This gene encodes apolipoprotein A-I, which is the major protein component of high density lipoprotein (HDL) in plasma. The

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encoded preproprotein is proteolytically processed to generate the mature protein, which promotes cholesterol efflux from tissues to the liver for excretion, and is a cofactor for lecithin cholesterolacyltransferase (LCAT), an enzyme responsible for the formation of most plasma cholesteryl esters. This gene is closely linked with two other apolipoprotein genes on chromosome 11. Defects in this gene are associated with HDL deficiencies, including Tangier disease, and with systemic non-neuropathic amyloidosis. Alternative splicing results in multiple transcript variants, at least one of which encodes a preproprotein. [provided by RefSeq, Dec 2015], disease: Defects in APOA1 are a cause of amyloidosis type 8 (AMYL8) [MIM:105200]; also known as systemic non-neuropathic amyloidosis or Ostertag-type amyloidosis. AMYL8 is a hereditary generalized amyloidosis due to deposition of apolipoprotein A1, fibrinogen and lysozyme amyloids. Viscera are particularly affected. There is no involvement of the nervous system. Clinical features include renal amyloidosis resulting in nephrotic syndrome, arterial hypertension, hepatosplenomegaly, cholestasis, petechial skin rash.,disease:Defects in APOA1 are a cause of high density lipoprotein deficiency type 2 (HDLD2) [MIM:604091]; also known as familial hypoalphalipoproteinemia (FHA). Inheritance is autosomal dominant, disease: Defects in APOA1 are a cause of the low HDL levels observed in high density lipoprotein deficiency type 1 (HDLD1) [MIM:205400]; also known as analphalipoproteinemia or Tangier disease (TGD). HDLD1 is a recessive disorder characterized by the absence of plasma HDL, accumulation of cholesteryl esters, premature coronary artery disease, hepatosplenomegaly, recurrent peripheral neuropathy and progressive muscle wasting and weakness. In HDLD1 patients, ApoA-I fails to associate with HDL probably because of the faulty conversion of pro-ApoA-I molecules into mature chains, either due to a defect in the converting enzyme activity or a specific structural defect in Tangier ApoA-I., disease: Defects in APOA1 are the cause of amyloid polyneuropathy-nephropathy lowa type (AMYLIOWA) [MIM:107680]; also known as amyloidosis van Allen type or familial amyloid polyneuropathy type III. AMYLIOWA is a hereditary generalized amyloidosis due to deposition of amyloid mainly constituted by apolipoprotein A1. The clinical picture is dominated by neuropathy in the early stages of the disease and nephropathy late in the course. Death is due in most cases to renal amyloidosis. Severe peptic ulcer disease can occurr in some and hearing loss is frequent. Cataracts is present in several, but vitreous opacities are not observed, function: Participates in the reverse transport of cholesterol from tissues to the liver for excretion by promoting cholesterol efflux from tissues and by acting as a cofactor for the lecithin cholesterol acyltransferase (LCAT). As part of the SPAP complex, activates spermatozoa motility.,online information: The Singapore human mutation and polymorphism database,PTM:Palmitoylated,,similarity:Belongs to the apolipoprotein A1/A4/E family,,subunit:Interacts with APOA1BP and CLU. Component of a sperm activating protein complex (SPAP), consisting of APOA1, an immunoglobulin heavy chain, an immunoglobulin light chain and albumin, tissue specificity: Major protein of plasma HDL, also found in chylomicrons. Synthesized in the liver and small intestine.,

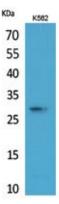
#### Research Area

PPAR;

#### **Image Data**

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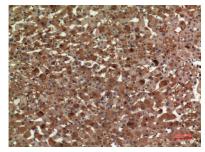




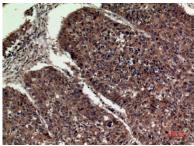
Western Blot analysis of K562 cells using ApoA-I Polyclonal Antibody.. Secondary antibody was diluted at 1:20000



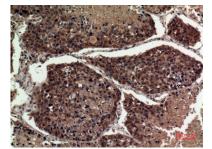
Immunohistochemical analysis of paraffin-embedded human-liver, antibody was diluted at 1:100



Immunohistochemical analysis of paraffin-embedded human-liver, antibody was diluted at 1:100



Immunohistochemical analysis of paraffin-embedded human-lung, antibody was diluted at 1:100



Immunohistochemical analysis of paraffin-embedded human-lung, antibody was diluted at 1:100