

Anti-IgA Antibody [JM10-42]

ET1703-10



Product Type:	Recombinant Rabbit monoclonal IgG, primary antibodies
Species reactivity:	Human
Applications:	WB, IF-Cell, IF-Tissue, IHC-P, IP
Molecular Wt:	Predicted band size: 38 kDa
Clone number:	JM10-42

Description: Immunoglobulin A (IgA, also referred to as sIgA in its secretory form) is an antibody that plays a role in the immune function of mucous membranes. The amount of IgA produced in association with mucosal membranes is greater than all other types of antibody combined. In absolute terms, between three and five grams are secreted into the intestinal lumen each day. This represents up to 15% of total immunoglobulins produced throughout the body. IgA has two subclasses (IgA1 and IgA2) and can be produced as a monomeric as well as a dimeric form. The IgA dimeric form is the most prevalent and is also called secretory IgA (sIgA). sIgA is the main immunoglobulin found in mucous secretions, including tears, saliva, sweat, colostrum and secretions from the genitourinary tract, gastrointestinal tract, prostate and respiratory epithelium. It is also found in small amounts in blood. The secretory component of sIgA protects the immunoglobulin from being degraded by proteolytic enzymes; thus, sIgA can survive in the harsh gastrointestinal tract environment and provide protection against microbes that multiply in body secretions. sIgA can also inhibit inflammatory effects of other immunoglobulins. IgA is a poor activator of the complement system, and opsonizes only weakly.

Immunogen: Recombinant full length protein of Human IgA aa 1-353 / 353.

Positive control: Human plasma lysates, HepG2, human tonsil tissue, human spleen tissue.

Subcellular location: Cell membrane, Secreted.

Database links: SwissProt: P01876 Human | P01877 Human

Recommended Dilutions:

WB	1:1,000
IF-Cell	1:50-1:200
IF-Tissue	1:50-1:200
IHC-P	1:50-1:200
IP	Use at an assay dependent concentration.

Storage Buffer: 1*TBS (pH7.4), 0.05% BSA, 40% Glycerol. Preservative: 0.05% Sodium Azide.

Storage Instruction: Shipped at 4°C. Store at +4°C short term (1-2 weeks). It is recommended to aliquot into single-use upon delivery. Store at -20°C long term.

Purity: Protein A affinity purified.

Hangzhou Huaan Biotechnology Co., Ltd.

Orders:0086-571-88062880

Technical:0086-571-89986345

Service mail:support@huabio.cn

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Images

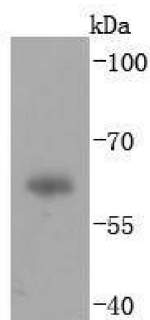


Fig1: Western blot analysis of IgA on human plasma lysates. Proteins were transferred to a PVDF membrane and blocked with 5% BSA in PBS for 1 hour at room temperature. The primary antibody (ET1703-10, 1/500) was used in 5% BSA at room temperature for 2 hours. Goat Anti-Rabbit IgG - HRP Secondary Antibody (HA1001) at 1:5,000 dilution was used for 1 hour at room temperature.

Predicted band size: 38 kDa

Observed band size: 60 kDa

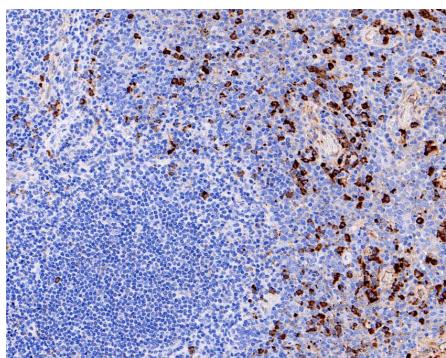


Fig2: Immunohistochemical analysis of paraffin-embedded human tonsil tissue using anti-IgA antibody. The section was pre-treated using heat mediated antigen retrieval with Tris-EDTA buffer (pH 8.0-8.4) for 20 minutes. The tissues were blocked in 5% BSA for 30 minutes at room temperature, washed with ddH₂O and PBS, and then probed with the primary antibody (ET1703-10, 1/200) for 30 minutes at room temperature. The detection was performed using an HRP conjugated compact polymer system. DAB was used as the chromogen. Tissues were counterstained with hematoxylin and mounted with DPX.

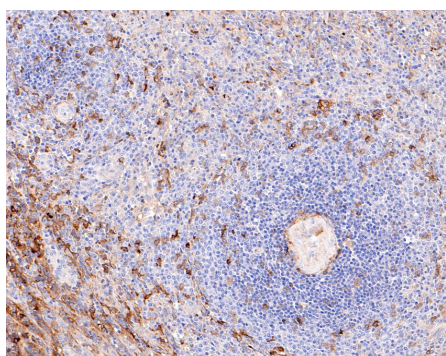


Fig3: Immunohistochemical analysis of paraffin-embedded human spleen tissue using anti-IgA antibody. The section was pre-treated using heat mediated antigen retrieval with Tris-EDTA buffer (pH 8.0-8.4) for 20 minutes. The tissues were blocked in 5% BSA for 30 minutes at room temperature, washed with ddH₂O and PBS, and then probed with the primary antibody (ET1703-10, 1/200) for 30 minutes at room temperature. The detection was performed using an HRP conjugated compact polymer system. DAB was used as the chromogen. Tissues were counterstained with hematoxylin and mounted with DPX.

Note: All products are "FOR RESEARCH USE ONLY AND ARE NOT INTENDED FOR DIAGNOSTIC OR THERAPEUTIC USE".

Background References

1. Fahrbach KM et al. Differential binding of IgG and IgA to mucus of the female reproductive tract. PLoS One 8:e76176 (2013).
2. Kang S., et al. In situ identification and localization of IGHA2 in the breast tumor microenvironment by mass spectrometry. J. Proteome Res. 11:4567-4574(2012).

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