

CP Antibody (Center)

Purified Rabbit Polyclonal Antibody (Pab) Catalog # AP7340C

Specification

CP Antibody (Center) - Product Information

Application Primary Accession Reactivity	WB, FC, IHC-P,E <u>P00450</u> Mouse, Rat
Host	Rabbit
Clonality	Polyclonal
Isotype	Rabbit IgG
Calculated MW	122219
Antigen Region	547-577

CP Antibody (Center) - Additional Information

Gene ID 1356

Other Names Ceruloplasmin, Ferroxidase, CP

Target/Specificity

This CP antibody is generated from rabbits immunized with a KLH conjugated synthetic peptide between 547-577 amino acids from the Central region of human CP.

Dilution WB~~1:2000 FC~~1:10~50 IHC-P~~1:10~50 E~~Use at an assay dependent concentration.

Format

Purified polyclonal antibody supplied in PBS with 0.09% (W/V) sodium azide. This antibody is purified through a protein A column, followed by peptide affinity purification.

Storage

Maintain refrigerated at 2-8°C for up to 2 weeks. For long term storage store at -20°C in small aliquots to prevent freeze-thaw cycles.

Precautions

CP Antibody (Center) is for research use only and not for use in diagnostic or therapeutic procedures.

CP Antibody (Center) - Protein Information

Name CP (<u>HGNC:2295</u>)



Function Multifunctional blue, copper-binding (6-7 atoms per molecule) glycoprotein. It has ferroxidase activity oxidizing Fe(2+) to Fe(3+) without releasing radical oxygen species. It is involved in iron transport across the cell membrane (PubMed:<u>16150804</u>). Copper ions provide a large number of enzymatic activites. Oxidizes highly toxic ferrous ions to the ferric state for further incorporation onto apo- transferrins, catalyzes Cu(+) oxidation and promotes the oxidation of biogenic amines such as norepinephrin and serotonin (PubMed:<u>14623105</u>, PubMed:<u>4643313</u>, PubMed:<u>5912351</u>). Provides Cu(2+) ions for the ascorbate-mediated deaminase degradation of the heparan sulfate chains of GPC1 (By similarity). Has glutathione peroxidase-like activity, can remove both hydrogen peroxide and lipid hydroperoxide in the presence of thiols (PubMed:<u>10481051</u>). Also shows NO-oxidase and NO2 synthase activities that determine endocrine NO homeostasis (PubMed:<u>16906150</u>).

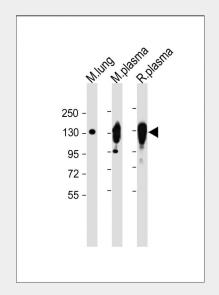
Cellular Location Secreted. Note=Colocalizes with GCP1 in secretory intracellular compartments {ECO:0000250|UniProtKB:P13635}

Tissue Location Expressed by the liver and secreted in plasma.

CP Antibody (Center) - Protocols

Provided below are standard protocols that you may find useful for product applications.

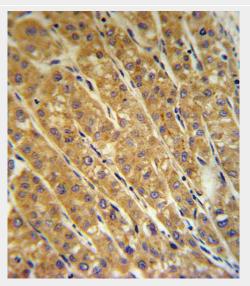
- Western Blot
- <u>Blocking Peptides</u>
- Dot Blot
- <u>Immunohistochemistry</u>
- <u>Immunofluorescence</u>
- Immunoprecipitation
- Flow Cytomety
- <u>Cell Culture</u>
- **CP Antibody (Center) Images**



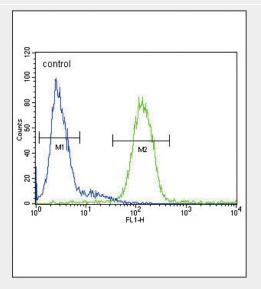
All lanes : Anti-CP Antibody (Center) at 1:2000 dilution Lane 1: Mouse lung lysate Lane 2: Mouse plasma lysate Lane 3: Rat plasma lysate Lysates/proteins at 20 μ g per lane. Secondary Goat Anti-Rabbit IgG, (H+L), Peroxidase conjugated at 1/10000 dilution. Predicted band size : 122 kDa



Blocking/Dilution buffer: 5% NFDM/TBST.



CP Antibody (Center) (Cat. #AP7340c) IHC analysis in formalin fixed and paraffin embedded human hepatocarcinoma followed by peroxidase conjugation of the secondary antibody and DAB staining. This data demonstrates the use of the CP Antibody (Center) for immunohistochemistry. Clinical relevance has not been evaluated.



CP Antibody (Center) (Cat. #AP7340c) flow cytometric analysis of HepG2 cells (right histogram) compared to a negative control cell (left histogram).FITC-conjugated goat-anti-rabbit secondary antibodies were used for the analysis.

CP Antibody (Center) - Background

CP is a metalloprotein that binds most of the copper in plasma and is involved in the peroxidation of Fe(II)transferrin to Fe(III) transferrin. Mutations in this protein cause aceruloplasminemia, which results in iron accumulation and tissue damage, and is associated with diabetes and neurologic abnormalities.

CP Antibody (Center) - References

Park,Y., Lee,I.S. Arch. Pharm. Res. 32 (5), 693-698 (2009) Altamura,C., Squitti,R. Stroke 40 (4), 1282-1288 (2009) Squitti,R., Quattrocchi,C.C. Prion 2 (1), 23-27 (2008)