



# Factor VIII Monoclonal Antibody

<b>Catalog No</b>	YP-Ab-03395
<b>Isotype</b>	IgG
<b>Reactivity</b>	Human
<b>Applications</b>	WB;ELISA
<b>Gene Name</b>	F8
<b>Protein Name</b>	Coagulation factor VIII
<b>Immunogen</b>	Purified recombinant fragment of Factor VIII expressed in E. Coli.
<b>Specificity</b>	Factor VIII Monoclonal Antibody detects endogenous levels of Factor VIII protein.
<b>Formulation</b>	Ascitic fluid containing 0.03% sodium azide,0.5% BSA, 50%glycerol.
<b>Source</b>	Monoclonal, Mouse
<b>Purification</b>	Affinity purification
<b>Dilution</b>	Western Blot: 1/500 - 1/2000. ELISA: 1/10000. Not yet tested in other applications.
<b>Concentration</b>	1 mg/ml
<b>Purity</b>	≥90%
<b>Storage Stability</b>	-20°C/1 year
<b>Synonyms</b>	F8; F8C; Coagulation factor VIII; Antihemophilic factor; AHF; Procoagulant component
<b>Observed Band</b>	
<b>Cell Pathway</b>	Secreted, extracellular space.
<b>Tissue Specificity</b>	Brain,Hippocampus,Kidney,Plasma,
<b>Function</b>	disease:Defects in F8 are the cause of hemophilia A (HEMA) [MIM:306700]. HEMA is a common recessive X-linked coagulation disorder. The frequency of hemophilia A is 1-2 in 10,000 male births in all ethnic groups. About 50% of patients have severe hemophilia A with F8C activity less than 1% of normal; they have frequent spontaneous bleeding into joints, muscles and internal organs. Moderately severe hemophilia A occurs in about 10% of patients; F8C activity is 2-5% of normal, and there is bleeding after minor trauma. Mild hemophilia A, which occurs in 30-40% of patients, is associated with F8C activity of 5-30% and bleeding occurs only after significant trauma or surgery. Of particular interest for the understanding of the function of F8C is the category of CRM (cross-reacting material) positive patients (approximately 5%) that have considerable amount of F8C in their plasma (at least 30%
<b>Background</b>	This gene encodes coagulation factor VIII, which participates in the intrinsic pathway of blood coagulation; factor VIII is a cofactor for factor IXa which, in the presence of Ca <sup>2+</sup> and phospholipids, converts factor X to the activated form Xa.



This gene produces two alternatively spliced transcripts. Transcript variant 1 encodes a large glycoprotein, isoform a, which circulates in plasma and associates with von Willebrand factor in a noncovalent complex. This protein undergoes multiple cleavage events. Transcript variant 2 encodes a putative small protein, isoform b, which consists primarily of the phospholipid binding domain of factor VIIIc. This binding domain is essential for coagulant activity. Defects in this gene results in hemophilia A, a common recessive X-linked coagulation disorder. [provided by RefSeq, Jul 2008],

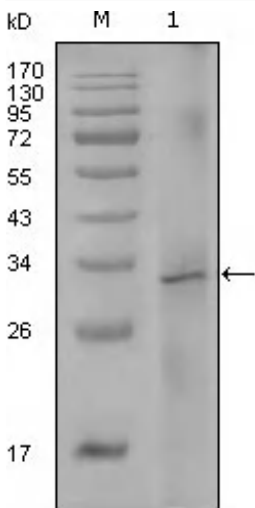
**matters needing attention**

Avoid repeated freezing and thawing!

**Usage suggestions**

This product can be used in immunological reaction related experiments. For more information, please consult technical personnel.

**Products Images**



Western Blot analysis using Factor VIII Monoclonal Antibody against truncated Trx-Factor VIII recombinant protein (1).