

## Anti-Prion Protein Antibody Catalog # AN1918

### Specification

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#### Anti-Prion Protein Antibody - Product Information

Application	WB
Primary Accession	<a href="#">P04156</a>
Host	Mouse
Clonality	Mouse Monoclonal
Isotype	IgG2a
Calculated MW	27661

#### Anti-Prion Protein Antibody - Additional Information

Gene ID	5621
<b>Other Names</b>	
PrP, PrPsc, PrPc	

#### Storage

Maintain refrigerated at 2-8°C for up to 6 months. For long term storage store at -20°C in small aliquots to prevent freeze-thaw cycles.

#### Precautions

Anti-Prion Protein Antibody is for research use only and not for use in diagnostic or therapeutic procedures.

#### Shipping

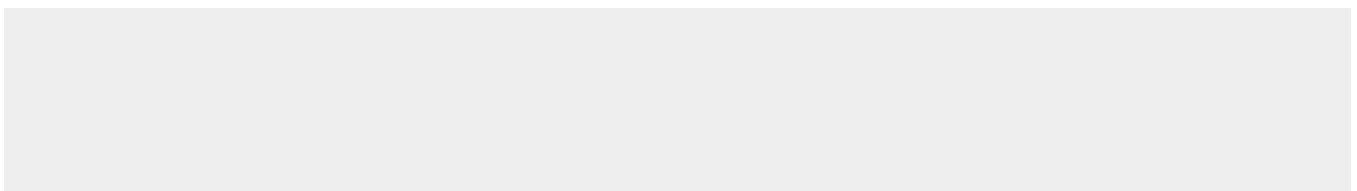
Blue Ice

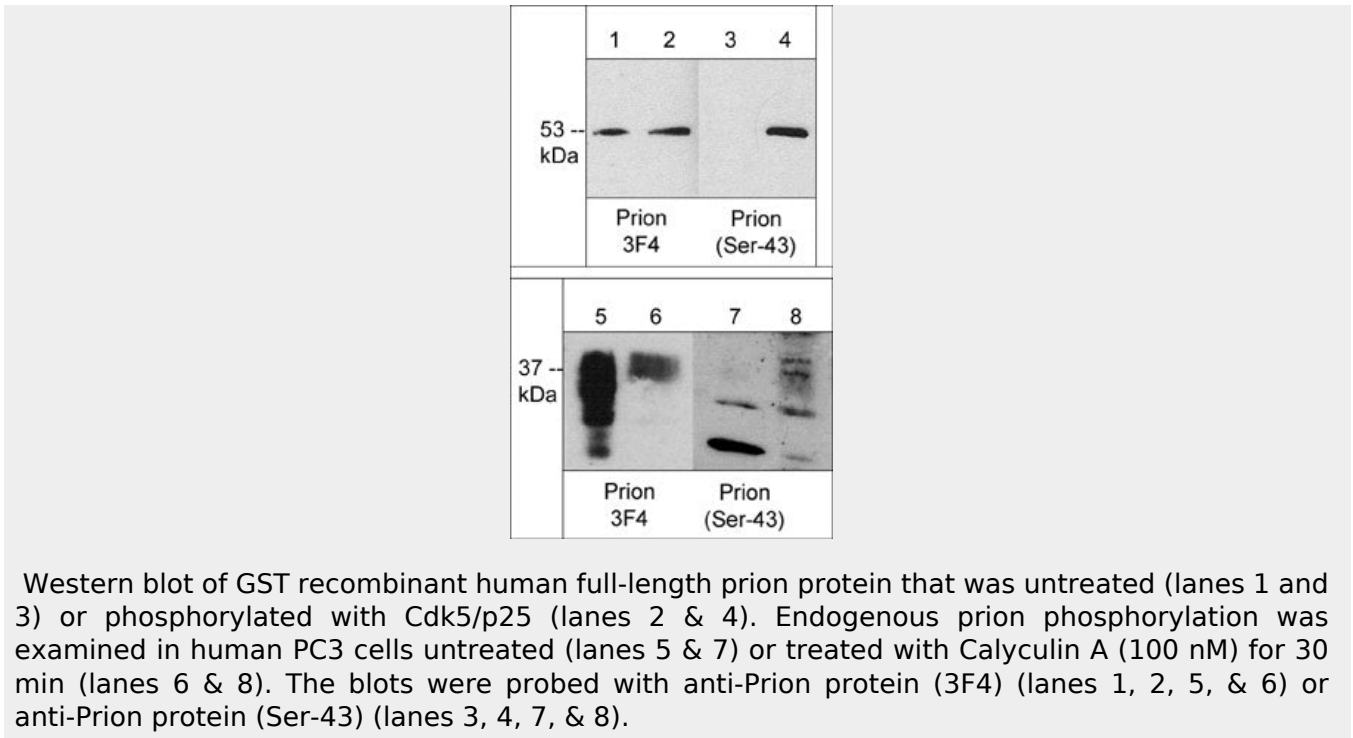
#### Anti-Prion Protein Antibody - Protocols

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

- [Western Blot](#)
- [Blocking Peptides](#)
- [Dot Blot](#)
- [Immunohistochemistry](#)
- [Immunofluorescence](#)
- [Immunoprecipitation](#)
- [Flow Cytometry](#)
- [Cell Culture](#)

#### Anti-Prion Protein Antibody - Images





**Anti-Prion Protein Antibody - Background**

Prion related neurodegenerative diseases, called transmissible spongiform encephalopathies, are observed in many animal species. These diseases involve conversion of normal cellular prion protein (PrP<sup>c</sup>) into a form that is insoluble and resistant to proteases (PrP<sup>Sc</sup>). The protease resistant form can polymerize into fibrils which accumulate in infected tissues and cause cell death and tissue damage. PrPs have an N-terminal signal sequence and a C-terminal linkage to glycosylphosphatidylinositol anchor. The mature protein is a glycosylated protein that associates with cell membranes. Phosphorylation of PrP<sup>c</sup> at Ser-43 by Cdk5 promotes proteinase K resistance, prion aggregation, and fibril formation in vitro. In addition, Ser-43 phosphorylation is upregulated in scrapie-infected mouse brain relative to controls. Thus, phosphorylation of Ser-43 may be an important mechanism leading conversion of PrP<sup>c</sup> to PrP<sup>Sc</sup> and the onset of disease.