

## **CP Antibody (Center)**

Purified Rabbit Polyclonal Antibody (Pab) Catalog # AP7340C

## **Specification**

## **CP Antibody (Center) - Product Information**

Application WB, IHC-P, FC,E **Primary Accession** P00450 Reactivity 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 IHC-P~~1:10~50 FC~~1:10~50

#### **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 (HGNC:2295)

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:16150804). 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:5912351, PubMed:14623105). 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:10481051). Also shows NO-oxidase and NO2 synthase activities that determine endocrine NO homeostasis (PubMed:16906150).

#### **Cellular Location**

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

## **Tissue Location**

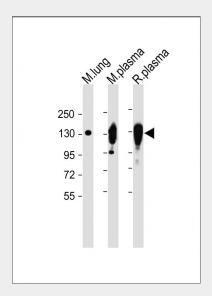
Expressed by the liver and secreted in plasma.

## **CP Antibody (Center) - Protocols**

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

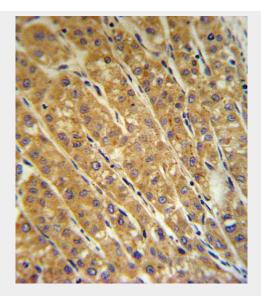
- Western Blot
- Blocking Peptides
- Dot Blot
- <u>Immunohistochemistry</u>
- Immunofluorescence
- Immunoprecipitation
- Flow Cytomety
- Cell Culture

#### CP Antibody (Center) - Images

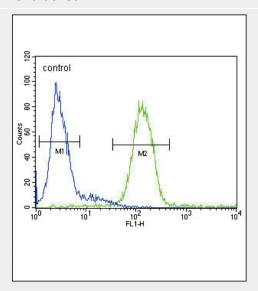


All lanes: Anti-CP Antibody (Center) at 1:2000 dilution Lane 1: Mouse lung lysate Lane 2: Mouse plasma lysate Lane 3: Rat plasma lysate Lysates/proteins at 20 µg per lane. Secondary Goat Anti-Rabbit IgG, (H+L), Peroxidase conjugated at 1/10000 dilution. Predicted band size: 122 kDa Blocking/Dilution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