Data Sheet

Mouse Monoclonal
APOLIPOPROTIEIN - D (GCDFP-24)
CLONE: 8CD6

INTRODUCTION: Apolipoprotein-D (APO-D), a progesterone binding glycoprotein of 24,000 dalton monomer molecular size, is a member of the lipocalin family & a constituent of high density lipoprotein in plasma. Lipocalins bind to small ligands such as retinol, pregnenolone, odorants, are involved in cell regulation and include proteins such as retinol & retinoic acid binding proteins. Recent literature has shown increased levels of Apo-D in CSF & hippocampus of aging brain and Alzheimer’s dementia. Apo-D has also been implicated in schizophrenia, Niemann-Pick Disease and in neuronal degeneration/regeneration. Increased expression of Apo-D in response to traumatic brain injury or kainite excitotoxicity has been reported. Apolipoprotein D was first isolated in large quantity as GCDFP-24, the major protein component of most human breast cyst fluids. Later, Apo-D immunoreactivity has been shown to be an early indicator of prostate cancer and advanced primary prostate tumors.

REAGENTS PROVIDED:

Tissue Culture Supernatant (Ammonium sulfate precipitated & dialyzed in PBS) (no preservatives).

Isotype: IgG1
Concentration: Approximately 1mg/ml (Mouse IgG ELISA)

Concentrated Format:
Cat No. 9780-02[200µl], 9780-05[500µl], and 9780-10[1ml] may be used with any detection system with final working dilutions optimized by the user.

IMMUNOGEN: APO-D, a progesterone binding glycoprotein of 24,000 dalton monomer molecular size.

SPECIFICITY: APO-D is localized to steroid-responsive tissues (adrenal cortex, ovary, endometrium, prostate, and pituitary). Apocrine epithelium within axillary skin exhibited strongly positive staining for APO-D, and peripheral nerves, pituitary and renal tubules were also immunoreactive. Expression of Apo-D in the non-malignant prostate gland has not been reported. In paraffin-embedded tissues, Apo-D demonstrates a cytoplasmic staining pattern in some prostate carcinomas.

USES:
- ELISA: Highly sensitive Apolipoprotein D capture assay in combination with clone 8BG4 as conjugate (8BG4*HRP), Cat # 8910 (Matched pair), 8920 (ELISA Kit). Typical concentration for clone 8CD6 as coating reagent is 2.5 to 10ug/ml.
- Western/Dot Blot: Not tested.
- Immunohistochemistry: Formalin-fixed paraffin-embedded human tissue sections (protocol below).

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IMMUNOHISTOCHEMISTRY:

- **Tissue sections:** Formalin-fixed, paraffin-embedded tissues.
- **Pretreatment:** For optimal staining, the sections should be pretreated with an antigen unmasking solution such as Retrieve-All™ 1 (Cat No. 1910) or Sodium Citrate (Cat No. 1932).
- **Dilutions:** Clone 8CD6 (1mg/ml) may be diluted 1/200 for Biotin based detection systems such as SIGNET’s USA™ ULTRA STREPTAVIDIN DETECTION [Cat No. 2250]. For optimal staining, the primary antibody should be incubated 20-60 minutes at room temperature.

*The above recommended dilution is a guideline. Optimal antibody dilution is a function of incubation time, temperature, and detection system sensitivity, and should be determined by the investigator.*

*For Research Use Only. Not for human or in vivo use.*

STORAGE:

Store at -20°C. It is suggested that the total volume is aliquotted upon initial thaw.

REFERENCES: