Human vWF-A1 (Research grade Caplacizumab Biosimilar) Antibody

Recombinant Monoclonal Llama V_HH domain Clone # Hu142

Catalog Number: MAB10591

DESCRIPTION

Species Reactivity	Human
Specificity	VHH antibody detecting vWF-A1
Source	Recombinant Monoclonal Llama V_HH domain Clone # Hu142
Purification	Protein A or G purified from cell culture supernatant
Immunogen	vWF-A1 protein
Formulation	Lyophilized from a 0.2 µm filtered solution in PBS with Trehalose.

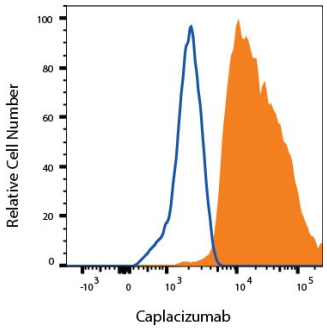
APPLICATIONS

Please Note: *Optimal dilutions should be determined by each laboratory for each application. General Protocols are available in the Technical Information section on our website.*

	Recommended Concentration	Sample
Intracellular Staining by Flow Cytometry	0.25 µg/10^6 cells	HUVEC Human umbilical vein endothelial cells

DATA

Intracellular Staining by Flow Cytometry



Detection of vWF-A1 in HUVECS cells by Flow Cytometry. HUVECS cells treated with 5 ug/mL Brefeldin A for 5 hours were stained with Human vWF-A1 (RUO grade Caplacizumab Biosimilar) Antibody (Catalog # MAB10591, Filled histogram) or isotype control antibody Llama IgG (open histogram), followed by Goat anti Alpaca Rhodamine Red. To facilitate intracellular staining, cells were fixed with Flow Cytometry Fixation Buffer (Catalog # FC004) and permeabilized with Flow Cytometry Permeabilization/Wash Buffer I (Catalog # FC005). View our protocol for Staining Intracellular Molecules.

PREPARATION AND STORAGE

Reconstitution	Reconstitute at 0.5 mg/mL in sterile PBS.
Shipping	The product is shipped at ambient temperature. Upon receipt, store it immediately at the temperature recommended below.
Stability & Storage	**Use a manual defrost freezer and avoid repeated freeze-thaw cycles.** • 12 months from date of receipt, -20 to -70 °C as supplied. • 1 month, 2 to 8 °C under sterile conditions after reconstitution. • 6 months, -20 to -70 °C under sterile conditions after reconstitution.

BACKGROUND

Caplacizumab is a humanized VHH immunoglobulin that binds to the A1 domain of the large von Willdebrand factor resulting in the inhibition of the interaction of glycoprotein GPIb-IX-V receptor on platelet surface. The result of neutralizing of the von Willedebrand factor is reduced platelet aggregation. Caplacizumab has been approved for the treatment of acute thrombotic thrombocytopenic purpura (aTTP), and has been shown to reduce the occurrence of thromboembolic events.

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