Data Sheet (Cat.No.TMAY-00585H)

TargetMol

Anti-Coagulation factor XI/F11 Antibody-HRP (9T435)

Product Details

Ig Type:	Rabbit IgG
Reactivity:	Human
Conjugation:	HRP
Clone:	9T435
Purification:	Protein A

Applications

Application:	ELISA
Recommended	ELISA: 0.1-1 μg/ml

Properties

Stability & Storage:	Store at 2°C-8°C for 6 months, do not freeze. Keep away from direct sunlight.
Shipping:	Shipping with blue ice.

Antigen Details

Immunogen:	Recombinant Protein: Human Coagulation Factor XI / F11 protein (TMPY-01104)
Antigen Species:	Human
Synonyms:	coagulation factor XI;coagulation factor 11;FXI
Biology Area:	Serine Proteases and Regulators

Research Background

Factor XI (plasma thromboplastin antecedent) is a plasma glycoprotein, and a zymogen acting as a serine protease which participates in blood coagulation as a catalyst in the conversion of factor IX to factor IXa in the presence of calcium ions. It is an unusual dimeric protease, with structural features that distinguish it from vitamin K-dependent coagulation proteases. The factor XI is synthesized in the liver as a single polypeptide chain with a molecular weight estimated between 125 ~160 kDa and then is processed into a disulfide-bond linked homodimer. FXI is a homodimer, with each subunit containing four apple domains and a protease domain. The apple domains form a disk structure with binding sites for platelets, high molecular weight kininogen, and the substrate factor IX (FIX). FXI is converted to the active protease FXIa by cleavage of the Arg369-Ile370 bond on each subunit. After the activation reaction, Factor XIa is composed of two heavy and two light chains held together by three disulfide bonds. The heavy chains are derived from the amino termini of the zymogen and responsible for the binding of factor XI to high molecular weight kininogen and for the activation of factor IX, while the light chain contains the catalytic portion of the enzyme and is homologous to the trypsin family of serine proteases. FXI deficiency is a disorder characterized by a mild or no bleeding tendency. Severe FXI deficiency is an injury-related bleeding disorder common in Ashkenazi Jews and rare worldwide.

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