

## Anti-Annexin V/ANXA5 Antibody (1V816)

### Product Details

Ig Type:	Mouse IgG2a
Reactivity:	Human
Conjugation:	Unconjugated
Clone:	1V816
Purification:	Protein A

### Applications

Verified Activity:	<p>Anti-Annexin V/ANXA5 mouse monoclonal antibody at 1:500 dilution.</p> <ul style="list-style-type: none"><li>-Lane A: HepG2 Whole Cell Lysate.</li><li>-Lane B: Hela Whole Cell lysate.</li><li>-Lysates/proteins at 30 µg per lane.</li><li>-Secondary</li></ul>
Application:	<p>-Goat Anti-Mouse IgG (H+L)/HRP at 1/10000 dilution.</p> <p>-Developed using the ECL technique.</p> <p>-Performed under reducing conditions.</p> <p>-Predicted band size:35 kDa.</p> <p>-Observed band size:35 kDa</p>
Recommended	<p>ELISA,WB</p> <p>WB: 1:500-1:2000; ELISA: 1:1000-1:2000</p>

### Properties

Stability & Storage:	Store at 2°C-8°C for 1 month. Store at -20°C or -80°C for 12 months. Avoid repeated freeze-thaw cycles. Preservative-Free.
Shipping:	Shipping with blue ice.

### Antigen Details

Immunogen:	Recombinant Protein: Human Annexin V/ANXA5 Protein (TMPY-02540)
Antigen Species:	Human
Synonyms:	HEL-S-7;ENX2;PP4;ANX5;annexin A5;RPRGL3

### Research Background

The placental anticoagulant protein Annexin A5 (ANXA5) is a multifunctional protein that is highly expressed on the apical surfaces of syncytiotrophoblasts, and plays an important role in haemostatic regulations, maintaining blood fluidity of the placenta. Annexin A5 (ANXA5) is a protein abundantly expressed in normal placenta where it contributes to the healthy outcome of a pregnancy. Lower ANXA5 levels have been observed in M2/ANXA5 haplotype carrying chorion. The association found between the maternal carriage of the M2/ANXA5 haplotype and an elevated risk of IUGR and/or PE supports the hypothesis that carrier status of this haplotype and the consequently reduced placental ANXA5 expression might be responsible, at least partially, for the onset of these gestational vascular complications. ANXA5 could be used as a biomarker for the early detection of PE and for the prediction of its severity. ANXA5 as an embryonic anticoagulant that appears deficient in contiguous specter of thrombophilia-

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related pregnancy complications culminating more frequently in miscarriage in a maternal M2 carrier background. As a potential indicator for malignancy and lymphatic metastasis, ANXA5 overexpression increases in vitro migration and invasion of Hca-P cell, promotes in vivo malignancy, LNM rate and level of Hca-P-transplanted mice. Hereditary thrombophilias can impair vascular placental functions and predispose to the birth of small-for-gestational age (SGA) babies. The placental anticoagulant protein annexin A5 (ANXA5) may contribute to this process. A functional haplotype (M2) within the ANXA5 gene is associated with fetal loss and venous thrombosis.

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