Anti-Calsequestrin, cardiac
Developed in Rabbit, IgG fraction of antiserum

Product Number C 2491

Product Description
Anti-Calsequestrin, cardiac was developed in rabbit using a synthetic peptide corresponding to amino acids 39-48 (ESVSSDKVAQ) of mature canine calsequestrin (cardiac) as the immunogen. The antibody was purified by protein A affinity chromatography.

Anti-Calsequestrin, cardiac recognizes calsequestrin in a mouse heart preparation by immunoblotting, and shows positive immunostaining for calsequestrin in frozen sections of rat heart by immunofluorescence. It is predicted to cross-react with human, based on 80% sequence homology.

Calsequestrin is the most abundant calcium binding protein in skeletal and cardiac muscle.\(^1\) It is a high-capacity calcium binding protein, expressed inside the sarcoplasmic reticulum (SR), an intracellular release and storage organelle. Calsequestrin has been shown to be of major importance in the regulation of cardiac excitation-contraction coupling. Mutations in the cardiac calsequestrin gene have been linked to arrhythmias and sudden death.\(^2\)

Reagent
Anti-Calsequestrin, cardiac is supplied as 200 µg of protein A purified rabbit IgG in 200 µL of 0.1M Tris-glycine, pH 7.4, 0.15M NaCl, 0.05% sodium azide, before the addition of glycerol to 30%. It is a liquid at \(-20^\circ C\).

Precautions and Disclaimer
Due to the sodium azide content, a material safety data sheet (MSDS) for this product has been sent to the attention of the safety officer of your institution. Consult the MSDS for information regarding hazards and safe handling.

Storage/Stability
Store at \(-20^\circ C\). For extended storage, freeze in working aliquots. Avoid repeated freezing and thawing. Storage in "frost-free" freezers is not recommended. Centrifuge before use. Working dilution samples should be discarded if not used within 12 hours.

Product Profile
The recommended working dilution is 0.5 µg/ml for immunoblotting, 5 µg/ml for immunoprecipitation, and 10 µg/ml for immunocytochemistry.

Note: In order to obtain best results in different techniques and preparations we recommend determining optimal working concentration by titration test.

References

MCT/PHC 10/04