Anti-Insulin, mouse monoclonal (BS22)

BSH-2010-100 (0.1 ml), BSH-2010-1 (1 ml)

Clonality:	Mouse monoclonal antibody
Clone:	BS22
Application:	IHC-P (1:100 – 1:400)
Species Reactivity:	Human
Control tissues:	Pancreas
Buffer:	TRIS with 0.03% sodium azide, pH 7.2
Storage:	Store at 4°C

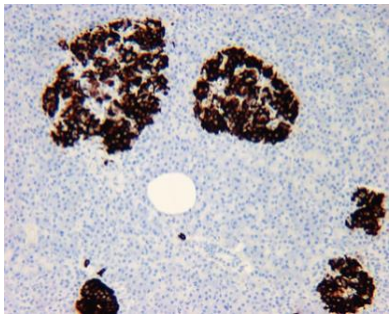
Description

Insulin is a pancreatic hormone that regulates glucose level in blood and it is involved in the synthesis of proteins and fat. Insulin increases cell permeability to monosaccharides, amino acids, and fatty acids. It accelerates glycolysis, the pentose phosphate cycle, and glycogen synthesis in liver. Insulin is a heterodimer of a B chain and A chain linked by two disulfide bonds. Defects in Insulin is the cause of familial hyperproinsulinemia. Insulin is present on the insulin secreted beta cells in islets of Langerhans.

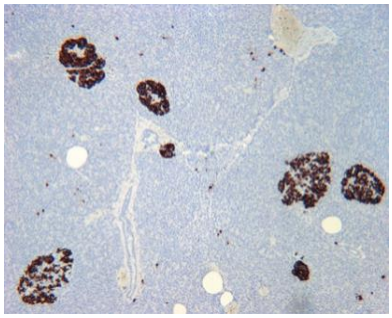
Protocol

1. Deparaffinize and rehydrate tissue section
2. Wash: aqua dest, 2×5 min
3. Pre-treatment: PT-module HIER pH 9.0 (20min at 98°C)
4. H_2O_2 (concentration 3%), 10 min
5. Wash: PBS or TBS buffer, 2×5 min
6. Primary antibody diluted as recommended, 30 min
7. Wash: PBS or TBS buffer, 2×5 min
8. One step HRP-polymer detection, 30 min
9. Wash: PBS or TBS buffer, 2×5 min
10. DAB Substrate, 8 min
11. Wash: aqua dest, 2×2 min
12. Counterstain, dehydrate and coverslip

Dilution of concentrated antibody depends on the pre-treatment method and detection system used. Above protocol used in Optibodies evaluation and is meant as a reference. Final working dilution and protocol applied needs to be determined by the user always.



Pancreas section has been stained using insulin optibody (Clone: BS22) with 1:200 dilution. Insulin secreted beta cells have strong label in islets of Langerhans.



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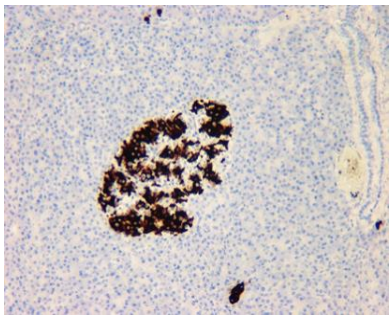

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