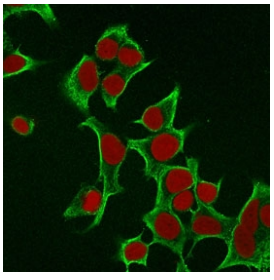
Cytokeratin 8 Antibody / CK8 [clone B22.1] (V2662)

Catalog No.	Formulation	Size
V2662-100UG	0.2 mg/ml in 1X PBS with 0.1 mg/ml BSA (US sourced) and 0.05% sodium azide	100 ug
V2662-20UG	0.2 mg/ml in 1X PBS with 0.1 mg/ml BSA (US sourced) and 0.05% sodium azide	20 ug
V2662SAF-100UG	1 mg/ml in 1X PBS; BSA free, sodium azide free	100 ug
V2662IHC-7ML	Prediluted in 1X PBS with 0.1 mg/ml BSA (US sourced) and 0.05% sodium azide; *For IHC use only*	7 ml

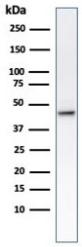
Citations (4)

Bulk quote request

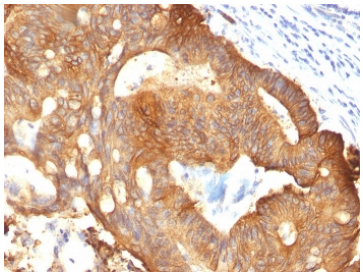
Availability	1-3 business days
Species Reactivity	Human
Format	Purified
Clonality	Monoclonal (mouse origin)
Isotype	Mouse IgG1, kappa
Clone Name	B22.1
Purity	Protein G affinity chromatography
UniProt	P05787
Localization	Cytoplasmic
Applications	Flow Cytometry : 0.5-1ug/million cells Immunofluorescence : 1-2ug/ml Immunohistochemistry (FFPE) : 0.5-1ug/ml for 30 min at RT Western Blot : 1-2ug/ml
Limitations	This Cytokeratin 8 antibody is available for research use only.



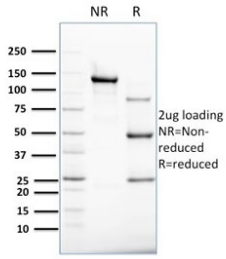
Immunofluorescent staining of permeabilized human MCF7 cells with Cytokeratin 8 antibody (clone B22.1, green) and Reddot nuclear stain (red).



Western blot testing of human HCT-116 cell lysate with Cytokeratin 8 antibody (clone B22.1).



IHC: Formalin-fixed, paraffin-embedded colon carcinoma stained with Cytokeratin 8 antibody (clone B22.1). HIER: boil tissue sections in pH 9 10mM Tris with 1mM EDTA for 20 min and allow to cool before testing.



SDS-PAGE analysis of purified, BSA-free Cytokeratin 8 antibody (clone B22.1) as confirmation of integrity and purity.

Description

Cytokeratin 8 (CK8) belongs to the type II (or B or basic) subfamily of high molecular weight cytokeratins and exists in combination with cytokeratin 18 (CK18). CK8 is primarily found in the non-squamous epithelia and is present in majority of adenocarcinomas and ductal carcinomas. It is absent in squamous cell carcinomas. Hepatocellular carcinomas are defined by the use of antibodies that recognize only cytokeratin 8 and 18. CK8 exists on several types of normal and neoplastic epithelia, including many ductal and glandular epithelia such as colon, stomach, small intestine, trachea, and esophagus as well as in transitional epithelium. Anti-CK8 does not react with skeletal muscle or nerve cells. Epithelioid sarcoma, chordoma, and adamantinoma show strong positivity corresponding to that of simple epithelia (with antibodies against CK8, CK18 and CK19). Reportedly, anti-CK8 is useful for the differentiation of lobular (ring-like, perinuclear) from ductal (peripheral-predominant) carcinoma of the breast.

Application Notes

Optimal dilution of the Cytokeratin 8 antibody should be determined by the researcher.

1. Staining of formalin-fixed tissues requires boiling tissue sections in 10mM Citrate buffer, pH 6.0, for 10-20 min followed by cooling at RT for 20 min
2. The prediluted format is supplied in a dropper bottle and is optimized for use in IHC. After epitope retrieval step (if required), drip mAb solution onto the tissue section and incubate at RT for 30 min.

Immunogen

A cytoskeletal preparation from HeLa cells was used as the immunogen for the Cytokeratin 8 antibody.

Storage

Store the Cytokeratin 8 antibody at 2-8oC (with azide) or aliquot and store at -20oC or colder (without azide).