

Tau

Cat.No. 314-1P; control protein, 100 µg protein (lyophilized)

Data Sheet

Reconstitution/ Storage	100 µg protein, lyophilized. For reconstitution add 100 µl H ₂ O to get a 1mg/ml solution in TBS. Then aliquot and store at -20°C to -80°C until use. Control proteins should be stored at +4°C when still lyophilized. Do not freeze! For detailed information, see back of the data sheet.
Immunogen	Recombinant protein corresponding to AA 1 to 44 from human TauE (UniProt Id: P10636-7)
Recommended dilution	Optimal concentrations should be determined by the end-user.
Remarks	This control protein consists of the recombinant protein (aa 1 - 44 of human tau) that has been used for immunization. It has been tested in preadsorption experiments and blocks efficiently and specifically the corresponding signal in Western blots. The amount of protein needed for efficient blocking depends on the titer and on the affinity of the antibody to the antigen.

TO BE USED IN VITRO / FOR RESEARCH ONLY
NOT TOXIC, NOT HAZARDOUS, NOT INFECTIOUS, NOT CONTAGIOUS

Background

There are two major classes of heat-stable microtubule-associated proteins (MAPs): MAP2 and Tau (MAPT).

Tau is expressed in several isoforms in human brain (Tau-A, 2N4R/Tau-F, 1N4R/Tau-E, 0N4R/Tau-D, 2N3R/Tau-C, 1N3R/Tau-B, 0N3R) and rodents (Tau-A, 2N4R/Tau-F, 1N4R/Tau-E, 0N4R/Tau-D) (1). Tau helps to stabilize axonal microtubules and modulate axonal transport, with isoform diversity and phosphorylation status determining their dynamics and affinity for microtubules. Tauopathies, often associated with abnormal phosphorylation (2, 3), can be classified according to the Tau isoforms present in the pathological inclusions. For instance, Pick's disease (PiD) is characterized by tangles containing 3R-Tau isoforms (0N3R, 1N3R, and 2N3R), whereas 4R-Tau (0N4R, 1N4R, and 2N4R) accumulates in disorders like progressive supranuclear palsy (PSP) and corticobasal degeneration (CBD). In Alzheimer's disease (AD) aggregates consist of all Tau isoforms (1).

Tau is abundantly expressed in the central and peripheral nervous system. Compared to the CNS, the PNS shows a predominance of 4R Tau isoforms (0N4R, 1N4R, 2N4R), which are thought to provide stronger microtubule binding and stability needed for long peripheral axons (1, 4).

Since microtubule dynamics are central to cell division, migration, and morphology, aberrations in Tau expression have been implicated in several types of cancer (5). Notably, Tau is increasingly recognized for its role in tumor progression and resistance to cancer therapy, with glioblastoma (GBM), making Tau a potential biomarker and therapeutic target (6,7).

Selected General References

The six brain-specific TAU isoforms and their role in Alzheimer's disease and related neurodegenerative dementia syndromes. Buchholz S et al. *Alzheimers Dement* (2024) PubMed:38556838

Big Tau: What We Know, and We Need to Know. Fischer I et al. *eNeuro* (2023) PubMed:37164636

Tau Protein as Therapeutic Target for Cancer? Focus on Glioblastoma. Hedna R et al. *Cancers (Basel)* (2022) PubMed:36358803

Tau regulates the microtubule-dependent migration of glioblastoma cells via the Rho-ROCK signaling pathway. Breuzard G et al. *J Cell Sci* (2019) PubMed:30659115

Physiological and pathological phosphorylation of tau by Cdk5. Kimura T et al. *Front Mol Neurosci* (2014) PubMed:25076872

Expression and silencing of the microtubule-associated protein Tau in breast cancer cells. Spicakova T et al. *Mol Cancer Ther* (2010) PubMed:21062914

Tau phosphorylation: physiological and pathological consequences. Stoothoff WH et al. *Biochim Biophys Acta* (2005) PubMed:15615646

Access the online factsheet including applicable protocols at <https://sysy.com/product/314-1P> or scan the QR-code.



FAQ - How should I store my antibody?

Shipping Conditions

- All our antibodies and control proteins / peptides are shipped lyophilized (vacuum freeze-dried) and are stable in this form without loss of quality at ambient temperatures for several weeks.

Storage of Sealed Vials after Delivery

- **Unlabeled** and **biotin-labeled antibodies** and **control proteins** should be stored at 4°C before reconstitution. **They must not be stored in the freezer when still lyophilized!** Temperatures below zero may cause loss of performance.
- **Fluorescence-labeled antibodies** should be reconstituted immediately upon receipt. Long term storage (several months) may lead to aggregation.
- **Control peptides** should be kept at -20°C before reconstitution.

Long Term Storage after Reconstitution (General Considerations)

- The storage freezer must not be of the frost-free variety ("no-frost freezer"). This cycle between freezing and thawing (to reduce frost-build-up), which is exactly what should be avoided. For the same reason, antibody vials should be placed in an area of the freezer that has minimal temperature fluctuations, for instance towards the back rather than on a door shelf.
- Aliquot the antibody and store frozen (-20°C to -80°C). Avoid very small aliquots (below 20 µl) and use the smallest storage vial or tube possible. The smaller the aliquot, the more the stock concentration is affected by evaporation and adsorption of the antibody to the surface of the storage vial or tube. Adsorption of the antibody to the surface leads to a substantial loss of activity.
- The addition of glycerol to a final concentration of 50% lowers the freezing point of your stock and keeps your antibody at -20°C in liquid state. This efficiently avoids freeze and thaw cycles.

Product Specific Hints for Storage

Control proteins / peptides

- Store at -20°C to -80°C.

Monoclonal Antibodies

- **Ascites** and **hybridoma supernatant** should be stored at -20°C up to -80°C. **Prolonged storage at 4°C is not recommended!** Unlike serum, ascites may contain proteases that will degrade the antibodies.
- **Purified IgG** should be stored at -20°C up to -80°C. Adding a carrier protein like BSA will increase long term stability. Many of our antibodies already contain carrier proteins. Please refer to the data-sheet for detailed information.

Polyclonal Antibodies

- **Crude antisera:** With anti-microbials added, they may be stored at 4°C. However, frozen storage (-20°C up to -80°C) is preferable.
- **Affinity purified antibodies:** Less robust than antisera. Storage at -20°C up to -80°C is recommended. Adding a carrier protein like BSA will increase long term stability. Most of our antibodies already contain carrier proteins. Please refer to the data-sheet for detailed information.

Fluorescence-labeled Antibodies

- Store as a liquid with 1 : 1 (v/v) glycerol at -20°C. Protect these antibodies from light exposure.

Avoid repeated freeze-thaw cycles for all antibodies!

FAQ - How should I reconstitute my antibody?

Reconstitution

- All our purified antibodies are lyophilized from PBS. To reconstitute the antibody in PBS, add the amount of deionized water given in the respective datasheet. If higher volumes are preferred, add water as mentioned above and then the desired amount of PBS and a stabilizing carrier protein (e.g. BSA) to a final concentration of 2%. Some of our antibodies already contain albumin. Take this into account when adding more carrier protein. For complete reconstitution, carefully remove the lid. After adding water, briefly vortex the solution. You can spin down the liquid by placing the vial into a 50 ml centrifugation tube filled with paper.
- If desired, add small amounts of azide or thimerosal to prevent microbial growth. This is especially recommended if you want to keep an aliquot a 4°C.
- After reconstitution of fluorescence-labeled antibodies, add 1 : 1 (v/v) glycerol to a final concentration of 50%. This lowers the freezing point of your stock and keeps your antibody in liquid state at -20°C.
- Glycerol may also be added to unlabeled primary antibodies. It is a suitable way to avoid freeze-thaw cycles.
- Please refer to our **tips and hints for subsequent storage** of reconstituted antibodies and control peptides and proteins.