

Lamin B1 human specific

Cat.No. HS-404 013; Polyclonal rabbit antibody, 200 µl specific antibody (lyophilized)

Data Sheet

Reconstitution/ Storage	200 µl specific antibody, lyophilized. Affinity purified with the immunogen. Albumin and azide were added for stabilization. For reconstitution add 200 µl H ₂ O. Then aliquot and store at -20°C to -80°C until use. Antibodies should be stored at +4°C when still lyophilized. Do not freeze! For detailed information, see back of the data sheet.
Concentration	0.1 mg/ml
Applications	WB: 1 : 1000 (AP staining) IP: not tested yet ICC: 1 : 100 (see remarks) IHC: 1 : 100 (see remarks) IHC-P (FFPE): 1 : 100
Immunogen	Synthetic peptide corresponding to AA 8 to 19 from human LaminB1 (UniProt Id: P20700)
Reactivity	Reacts with: human (P20700), pig. No signal: mouse (P14733), rat (P70615). Other species not tested yet.
Remarks	ICC: Methanol fixation is recommended. IHC: Antigen retrieval with citrate buffer pH 6 is required.

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

Background

Lamin B1 (LMNB1) is an intermediate filament-type protein of the nuclear lamina and is ubiquitously expressed throughout development. It plays important roles in many cellular processes like the distribution of heterochromatin and the regulation of gene expression and splicing. The maintenance of LMNB1 protein levels is required for DNA replication and repair and thus mutations in B-type lamins are usually lethal.

Duplication of the LMNB1 gene causes adult-onset autosomal-dominant leukodystrophy (ADLD), a rare neurological disorder in which overexpression of LMNB1 causes progressive central nervous system demyelination. Improper Lamin B1 expression is often present in tumor cells and decreased levels are observed for example in colon cancer, breast cancer and B-cell malignancies. Lamin B1 loss is also a senescence-associated biomarker and distinguishes senescent from proliferating cells in pre-neoplastic lesions or marks senescent cells in various age-related pathologies.

Selected References for HS-404 013

Surgical implantation of human adipose derived stem cells attenuates experimentally induced hepatic fibrosis in rats. Nomura M, George J, Hashizume C, Saito T, Ueda Y, Ishigaki Y, Tsuchishima M, Tsutsumi M Molecular medicine (Cambridge, Mass.) (2022) 281: 143. . **IHC-P; tested species: human**

Mesenchymal stem cells derived from human induced pluripotent stem cells improve the engraftment of myogenic cells by secreting urokinase-type plasminogen activator receptor (uPAR). Elhussieny A, Nogami K, Sakai-Takemura F, Maruyama Y, Takemura N, Soliman WT, Takeda S, Miyagoe-Suzuki Y Stem cell research & therapy (2021) 121: 532. . **IHC; tested species: human**

LZTR1 deficiency exerts high metastatic potential by enhancing sensitivity to EMT induction and controlling KLHL12-mediated collagen secretion.

Abe T, Kanno SI, Niihori T, Terao M, Takada S, Aoki Y Cell death & disease (2023) 148: 556. . **IHC-P; tested species: human**

Selected General References

Lamin B1 regulates somatic mutations and progression of B-cell malignancies. Klymenko T et al. Leukemia (2018) PubMed:28804121

SEPT12/SPAG4/LAMINB1 complexes are required for maintaining the integrity of the nuclear envelope in postmeiotic male germ cells.

Yeh CH et al. PLoS ONE (2015) PubMed:25775403

Role of lamin b1 in chromatin instability. Butin-Israeli V et al. Mol. Cell. Biol. (2015) PubMed:25535332

The role of lamin B1 for the maintenance of nuclear structure and function. Camps J et al. Nucleus (2015) PubMed:25602590

Redistribution of the Lamin B1 genomic binding profile affects rearrangement of heterochromatic domains and SAHF formation during senescence.

Sadaie M et al. Genes Dev. (2013) PubMed:23964094

The clinicopathological significance of lamin A/C, lamin B1 and lamin B receptor mRNA expression in human breast cancer. Wazir U et al. Cell. Mol. Biol. Lett. (2013) PubMed:24293108

Lamin B1 loss is a senescence-associated biomarker. Freund A et al. Mol. Biol. Cell (2012) PubMed:22496421

Access the online factsheet including applicable protocols at <https://susy-histosure.com/product/HS-404013> or scan the QR-code.



FAQ - How should I store my antibody?

Shipping Conditions

- All SYSY antibodies and control proteins/peptides are shipped lyophilized (vacuum freeze-dried). In this form, they remain stable 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. **Do not freeze lyophilized antibodies.** Temperatures below 0°C may impair performance.
- **Fluorescence-labeled antibodies** should be reconstituted immediately upon receipt. Long-term storage of lyophilized fluorophore-conjugates may cause aggregation.
- **Control peptides** should be stored at -20°C before reconstitution.

Long Term Storage after Reconstitution (General Considerations)

- **Do not use frost-free (“no-frost”) freezers.** These units periodically warm to remove ice buildup, causing freeze–thaw cycles that can damage antibodies.
- Store vials in areas with minimal temperature fluctuation - preferably toward the back of the freezer, not on the door.
- Aliquot reconstituted antibodies and store at -20°C to -80°C.
- Avoid very small aliquots (<20 µL), as evaporation and adsorption to tube surfaces can reduce antibody concentration and activity.
- Use the smallest practical storage vial to minimize surface area.
- Adding glycerol to a final concentration of 50% prevents freezing at -20°C, allowing storage in liquid form and effectively avoiding freeze–thaw cycles.

Product Specific Hints for Storage

Control proteins / peptides

- Store at -20°C to -80°C

Monoclonal Antibodies

- **Ascites and hybridoma supernatant:** Store at -20°C to -80°C. Prolonged storage at 4°C is not recommended, as proteases present in ascites may degrade antibodies.
- **Purified IgG:** Store at -20°C to -80°C. Adding a carrier protein (e.g., BSA) enhances long-term stability. Many SYSY antibodies already contain carrier proteins - refer to the respective datasheet for details.

Polyclonal Antibodies

- **Crude antisera:** Can be stored at 4°C with antimicrobials added, but -20°C to -80°C is preferred
- **Affinity-purified antibodies:** Less stable than antisera; store at -20°C to -80°C. Adding a carrier protein such as BSA improves long-term stability. Most SYSY antibodies already contain carrier proteins - refer to the respective datasheet for details.

Fluorescence-labeled Antibodies

- Store as a liquid with 1:1 (v/v) glycerol at -20°C, and protect from light exposure

Avoid repeated freeze-thaw cycles for all antibodies!

FAQ - How should I reconstitute my antibody?

Reconstitution

- All purified SYSY antibodies are lyophilized from PBS. To reconstitute the antibody in PBS, add the volume of deionized water specified in the corresponding datasheet. If a larger final volume is desired, first add the recommended amount of water, then adjust with PBS and, if needed, add a stabilizing carrier protein (e.g., BSA) to a final concentration of 2%. Some SYSY antibodies already contain albumin; please take this into account before adding additional carrier protein.

For complete reconstitution, carefully remove the vial cap. After adding water, briefly vortex the solution. To collect the liquid at the bottom of the vial, place the vial inside a 50 ml centrifuge tube padded with paper and centrifuge briefly.

- If desired, small amounts of azide or thimerosal may be added to prevent microbial growth. This is particularly recommended when storing an aliquot at 4°C.
- After reconstitution of fluorescence-labeled antibodies, add glycerol 1:1 (v/v) to achieve a final concentration of 50%. This prevents freezing at -20°C and keeps the antibody in liquid form, effectively avoiding freeze–thaw cycles.
- Glycerol may also be added to unlabeled primary antibodies as a general measure to prevent freeze–thaw damage.
- For further guidance, please refer to our **storage tips** and recommendations for reconstituted antibodies, control peptides, and control proteins.