

# Datasheet: 2222-8004 BATCH NUMBER 162066

Description:	MOUSE ANTI HUMAN C4d		
Specificity:	C4d		
Other names:	COMPLEMENT COMPONENT 4d		
Format:	Purified		
Product Type:	Monoclonal Antibody		
Clone:	10-11		
lsotype:	lgG1		
Quantity:	0.1 mg		

## **Product Details**

Applications

This product has been reported to work in the following applications. This information is derived from testing within our laboratories, peer-reviewed publications or personal communications from the originators. Please refer to references indicated for further information. For general protocol recommendations, please visit <u>www.bio-rad-antibodies.com/protocols</u>.

	Yes	No	Not Determined	Suggested Dilution
Immunohistology - Frozen	-			1/100 - 1/750
Immunohistology - Paraffin (1)	-			
ELISA	-			1/5000 - 1/20000
Western Blotting	-			
Immunofluorescence				1/250 - 1/600

Where this product has not been tested for use in a particular technique this does not necessarily exclude its use in such procedures. Suggested working dilutions are given as a guide only. It is recommended that the user titrates the product for use in their own system using the appropriate negative/positive controls.

(1)It has been reported that this antibody works very well on acetone-fixed, frozen renal biopsies. Strong staining is observed in the glomeruli and in some cases the peritubular capillaries.

Clone 10-11 has given variable results on formalin-fixed, paraffin-embedded sections. It has been observed that pre-treatment with 88% formic acid for 20 minutes at room temperature is beneficial (6).

Target Species	Human
Species Cross	Does not react with:Mouse, Dog, Bovine, Cat, Rabbit, Rat, Guinea Pig, Sheep

#### Reactivity

liculating								
Product Form	Purified IgG - liquid							
Preparation	Purified IgG prepared by Fast protein liquid chromatography (FPLC)							
Buffer Solution	Borate buffered saline							
Preservative Stabilisers	<0.1% Sodium Azide (NaN <sub>3</sub> )							
Approx. Protein Concentrations	IgG concentration 1.0 mg/ml							
Immunogen	Native, from human plasma							
External Database Links	UniProt:P0C0L4Related reagentsP0C0L5Related reagents							
	Entrez Gene:							
	720C4ARelated reagents721C4BRelated reagents							
Synonyms	CO4, CPAMD2, CPAMD3							
RRID	AB_620117							
Specificity	<ul> <li>Mouse anti Human C4d antibody, clone 10-11 recognizes the secreted protein complement component 4d (C4d). The presence of C4d in renal peritubular capillaries is a key indicator for acute antibody-mediated rejection [AMR] (<u>Collins <i>et al.</i> 1999.</u>).</li> <li>C4d was accepted in 2003 into the Banff classification for identification of acute AMR (<u>Racusen <i>et al.</i> 2003</u>). Mouse anti Human C4d antibody, clone 10-11 is specific for C4d, a marker that can be used in the detection of acute AMR for kidney, heart, pancreas and lung allografts. C4d is regarded as a key marker of antibody-mediated cell injury and</li> </ul>							
	humoral rejection ( <u>Sacks and Chowdhury 2002</u> ).							
	Complement 1 complex cleaves complement 4 (C4) to form C4b and C4a. C4b levels are strictly regulated. Single site cleavage of the C4b's alpha chain by Factor I forms iC4b and blocks C3 convertase, inhibiting opsonization and activation of the classical pathway. This requires C4 binding protein or CR1 as a cofactor. iC4b is further degraded into C4d and C4c. C4b's short half life means that C4d is present in serum at high enough concentrations to make it a useful marker for classical complement activation ( <u>Collins <i>et</i></u> <u>al. 1999</u> ).							
	Mouse anti Human C4d antibody, clone 10-11 is used to detect the biomarker C4d which							

Mouse anti Human C4d antibody, clone 10-11 is used to detect the biomarker C4d which has been described as a "footprint" of antibody mediated tissue rejection (<u>Sacks and</u>

Chowdhury 2002). The internal thioester of C4b becomes exposed during cleavage to C4d and forms a covalent bond with the cell surface. The longer half-life of covalently bound C4d makes it a footprint of complement activation long after weakly bound antibodies have been cleared by the blood stream (Sacks and Chowdhury 2002). C4 has also been linked to susceptibility to systemic lupus erythematosus (Yang et al. 2004) and rheumatoid arthritis (Makinde et al. 1989). References 1. Mauiyyedi, S. et al. (2002) Acute humoral rejection in kidney transplantation: II. Morphology, immunopathology, and pathologic classification. J Am Soc Nephrol. 13 (3): 779-87. 2. Collins, A.B. et al. (1999) Complement activation in acute humoral renal allograft rejection: diagnostic significance of C4d deposits in peritubular capillaries. J Am Soc Nephrol. 10 (10): 2208-14. 3. Knechtle, S.J. et al. (2003) Campath-1H induction plus rapamycin monotherapy for renal transplantation: results of a pilot study. Am J Transplant. 3 (6): 722-30. 4. Mauiyyedi, S. et al. (2001) Chronic humoral rejection: identification of antibodymediated chronic renal allograft rejection by C4d deposits in peritubular capillaries. J Am Soc Nephrol. 12 (3): 574-82. 5. Rogers, J. et al. (1992) Complement activation by beta-amyloid in Alzheimer disease. Proc Natl Acad Sci U S A. 89 (21): 10016-20. 6. Troxell, M.L. et al. (2010) Pancreas allograft rejection: analysis of concurrent renal allograft biopsies and posttherapy follow-up biopsies. Transplantation. 90: 75-84. 7. Rowe, P. et al. (2013) Increased complement activation in human type 1 diabetes pancreata. Diabetes Care. 36 (11): 3815-7. 8. Johnson, R.K. et al. (2013) Acute tubular injury is an important component in type I acute antibody-mediated rejection. Transplant Proc. 45: 3262-8. 9. Roden, A.C. et al. (2016) Transbronchial Cryobiopsies in the Evaluation of Lung Allografts: Do the Benefits Outweigh the Risks? Arch Pathol Lab Med. 140 (4): 303-11. 10. Verghese, P.S. et al. (2016) The clinical implications of the unique glomerular complement deposition pattern in transplant glomerulopathy. J Nephrol. Nov 15. [Epub ahead of print] 11. Troxell, M.L. & Lanciault, C. (2016) Practical Applications in Immunohistochemistry: Evaluation of Rejection and Infection in Organ Transplantation. Arch Pathol Lab Med. 140 (9): 910-25. 12. Jain, D. et al. (2017) Detection of T and B cells specific complement-fixing alloantibodies using flow cytometry: A diagnostic approach for a resource limited laboratory. Asian J Transfus Sci. 11 (2): 171-9. 13. Dugum, M. et al. (2014) Re-examination of sinusoidal deposition of complement 4d in liver allografts: experience from a single institution. Int J Clin Exp Pathol. 7 (2): 784-91. 14. Sánchez-escuredo, A. et al. (2016) Borderline rejection in ABO-incompatible kidney transplantation. Clin Transplant. 30 (8): 872-9. 15. Lattenist, L. et al. (2013) Renal and urinary levels of endothelial protein C receptor correlate with acute renal allograft rejection. PLoS One. 8 (5): e64994. 16. Verghese, P. et al. (2013) The impact of C4d and microvascular inflammation before we knew them. Clin Transplant. 27 (3): 388-96.

Further Reading	<ol> <li>Stoltzner, S.E. <i>et al.</i> (2000) Temporal accrual of complement proteins in amyloid plaques in Down's syndrome with Alzheimer's disease. <u>Am J Pathol. 156 (2): 489-99.</u></li> <li>Sacks, S.H. &amp; Chowdhury, P. (2002) Footprints of humoral rejection. <u>Curr Opin Nephrol Hypertens. 11 (6): 627-8.</u></li> <li>Racusen, L.C. <i>et al.</i> (2003) Antibody-mediated rejection criteria - an addition to the Banff 97 classification of renal allograft rejection. <u>Am J Transplant. 3 (6): 708-14.</u></li> <li>Yang, Y. <i>et al.</i> (2004) The intricate role of complement component C4 in human systemic lupus erythematosus. <u>Curr Dir Autoimmun. 7: 98-132.</u></li> <li>Makinde, V.A. <i>et al.</i> (1989) Reflection of disease activity in rheumatoid arthritis by indices of activation of the classical complement pathway. <u>Ann Rheum Dis. 48 (4): 302-6.</u></li> </ol>			
Storage	This product is shipped at ambient temperature. It is recommended to aliquot and store at -20°C on receipt. When thawed, aliquot the sample as needed. Keep aliquots at 2-8°C for short term use (up to 4 weeks) and store the remaining aliquots at -20°C. Avoid repeated freezing and thawing as this may denature the antibody. Storage in frost-free freezers is not recommended.			
Guarantee	12 months from date of despatch			
Health And Safety Information	Material Safety Datasheet documentation #10077 available at: https://www.bio-rad-antibodies.com/SDS/2222-8004 10077			
Regulatory	For research purposes only			

## **Related Products**

### **Recommended Secondary Antibodies**

Rabbit A	nti Mouse IgG (STAR12)	RP	E		
Goat Anti Mouse IgG IgA IgM (STAR87)			<u>P</u>		
Goat Anti Mouse IgG (STAR76)		RPE			
Goat Anti Mouse IgG (STAR70)		FITC			
Goat Anti Mouse IgG (H/L) (STAR117)		<u>Alk. Phos., DyLight®488, DyLight®550,</u>			
		DyL	<u>ight®650</u> , <u>DyLight®680</u> , <u>DyLight®80</u>	<u>10</u> ,	
		<u>FIT</u>	<u>C, HRP</u>		
Rabbit A	nti Mouse IgG (STAR13)	HR	<u>P</u>		
Goat Anti Mouse IgG (Fc) (STAR120)		FITC, HRP			
Rabbit Anti Mouse IgG (STAR9)		<u>FITC</u>			
Goat Anti Mouse IgG (STAR77)		HRP			
North & South America	Tel: +1 800 265 7376 Worldwin Fax: +1 919 878 3751 Email: antibody_sales_us@bio-rad.com	de	Tel: +44 (0)1865 852 700 <b>Europe</b> Fax: +44 (0)1865 852 739 Email: antibody_sales_uk@bio-rad.com	Tel: +49 (0) 89 8090 95 21 Fax: +49 (0) 89 8090 95 50 Email: antibody_sales_de@bio-rad.com	

To find a batch/lot specific datasheet for this product, please use our online search tool at: bio-rad-antibodies.com/datasheets 'M392099:211020' © 2024 Bio-Rad Laboratories Inc | Legal | Imprint