

## Human PAI1 Antibody Pair Set

<b>Catalog No.</b>	E-KAB-0201	<b>Applications</b>	ELISA
<b>Synonyms</b>	SERPINE1, PAI, PAI-1, PLANH1, Endothelial Plasminogen Activator Inhibitor		

### Kit components & Storage

Title	Specifications	Storage
Human PAI1 Capture Antibody	1 vial, 100 µg	Store at -20℃ for one year. Avoid freeze / thaw cycles.
Human PAI1 Detection Antibody (Biotin)	1 vial, 50 µL	Store at -20℃ for one year. Avoid freeze / thaw cycles.

**Note:** Centrifuge before opening to ensure complete recovery of vial contents.

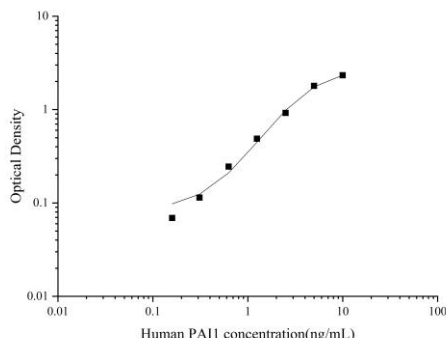
### Product Information

Items		Characteristic (E-KAB-0201)	
		Human PAI1 Capture Antibody	Human PAI1 Detection Antibody (Biotin)
Immunogen Information	Immunogen	Recombinant Human PAI1 protein	Recombinant Human PAI1 protein
	Swissprot	P05121	
Product details	Reactivity	Human	Human
	Host	Goat	Goat
	Conjugation	Unconjugated	Biotin
	Concentration	0.5mg/mL	/
	Buffer	PBS with 0.04% Proclin 300, 50% glycerol, pH 7.4	PBS with 0.04% Proclin 300, 1% protective protein, 50% glycerol, pH 7.4
	Purify	Antigen Affinity	Antigen Affinity
	Specificity	Detects Human PAI1 in ELISAs.	

### For Research Use Only

## Applications

### Human PAI1 Sandwich ELISA Assay:

	Recommended Concentration/Dilution	Reagent	Images
ELISA Capture	0.5-4μg/mL	Human PAI1 Capture Antibody	
ELISA Detection	1:1000-1:10000	Human PAI1 Detection Antibody (Biotin)	

**Note:** This standard curve is only for demonstration purposes. A standard curve should be generated for each assay!

## Background

Plasminogen activator inhibitor 1, also known as PAI-1, Endothelial plasminogen activator inhibitor, SerpinE1 and PLANH1, is a secreted glycoprotein that belongs to the serpin family. SerpinE1 is the primary physiological inhibitor of the two plasminogen activators urokinase (uPA) and tissue plasminogen activator (tPA). Its rapid interaction with TPA may function as a major control point in the regulation of fibrinolysis. Defects in SerpinE1 are the cause of plasminogen activator inhibitor-1 deficiency (PAI-1 deficiency) which is characterized by abnormal bleeding due to SerpinE1 defect in the plasma. High concentrations of SerpinE1 have been associated with thrombophilia which is an autosomal dominant disorder in which affected individuals are prone to develop serious spontaneous thrombosis. Studies of PAI-1 have contributed significantly to the elucidation of the protease inhibitory mechanism of serpins, which is based on a metastable native state becoming stabilised by insertion of the RCL into the central beta-sheet A and formation of covalent complexes with target proteases. Greater expression of PAI-1 has been associated with increased survival of cells and resistance to apoptosis. PAI-1 appears to influence apoptosis by decreasing cell adhesion (anoikis) as well as its effect on intracellular signaling. PAI-1, in its active state, also binds to the extracellular protein vitronectin. When in complex with its target proteases, it binds with high affinity to endocytosis receptors of the low density receptor family. The mechanisms of PAI-1 overexpression during obesity are complex, and it is conceivable that several inducers are involved at the same time at several sites of synthesis. PAI-1 is also implicated in adipose tissue development. It suggests that PAI-1 inhibitors serve in the control of atherothrombosis.

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