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# Human IgA / RBITC

Catalog Number: bsR-0360P

Form: Liquid

Applications: Isotype Control, Blocking Assay, etc., Conjugate-Dependent.

Storage: 0.01M TBS (pH7.4) with 1% BSA, 0.02% Proclin300 and 50% glycerol.
Store at -20°C for one year. Avoid repeated freeze/thaw cycles.

Background: Human IgA (immunoglobulin A) is a glycosylated protein of 160 kDa and is produced as a monomer or as a J chain linked dimer. Monomeric IgA constitutes 5-15 % of the serum immunoglobulins whereas dimeric IgA is localized to mucosa surfaces such as saliva, gastrointestinal secretion, bronchial fluids and milk. Mucosal IgA plays a major role in host defence by neutralising infectious agents at mucosal surfaces. The production is usually local and antigen specific IgA producing B cells can be found in regions under the lamina propria where they mature into dimeric IgA producing plasma cells. IgA deficiency is the most common immunodeficiency that may affect both serum and mucosal produced IgA. OR: The secretory component is a component of immunoglobulin A (IgA) which consists of a portion of the polymeric immunoglobulin receptor. Polymeric IgA binds to the polymeric immunoglobulin receptor on the basolateral surface of epithelial cells and is taken up into the cell via transcytosis. The receptor-IgA complex passes through the cellular compartments before being secreted on the luminal surface of the epithelial cells, still attached to the receptor. Proteolysis of the receptor occurs and the dimeric IgA molecule, along with the secretory component, are free to diffuse throughout the lumen.