

# Anti-Human CD25 PE

Catalog Number: 07311-60

RUO: For Research Use Only. Not for use in diagnostic procedures.

#### **Product Information**

Clone: BC96

Format/Conjugate: PE

Concentration: 5 uL (0.06 ug)/test

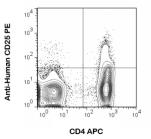
Reactivity: Human

Laser: Blue (488nm), Yellow/Green (532-561nm)

**Peak Emission:** 578nm **Peak Excitation:** 496nm

**Filter:** 585/40

**Brightness (1=dim,5=brightest):** 5



Human peripheral blood lymphocytes were stained with PE BC96 and APC OKT4

**Isotype:** Mouse IgG1, kappa

Formulation: Phosphate-buffered aqueous solution, ≤0.09% Sodium azide, may contain carrier protein/stabilizer, ph7.2.

Storage: Product should be kept at 2-8°C and protected from prolonged exposure to light.

**Applications:** FC

## **Description**

The BC96 monoclonal antibody specifically reacts with the 55 kDa type I transmembrane glycoprotein known as the interleukin-2 receptor  $\alpha$  (IL-2R  $\alpha$ , also known as CD25). CD25 is expressed by the early progenitors of T and B lymphocytes lineage, and by activated mature T and B lymphocytes. CD25 is a low affinity interleukin-2 receptor, but its association with the IL-2 receptor  $\beta$  chain (CD122) and the common  $\gamma$  chain (CD 132) results in a high affinity IL-2R complex. CD25 plays an important role in B and T cell proliferation, differentiation, and activation.

#### **Preparation & Storage**

The product should be stored undiluted at 4°C and should be protected from prolonged exposure to light. Do not freeze. The monoclonal antibody was purified utilizing affinity chromatography and unreacted dye was removed from the product.

### **Application Notes**

The antibody has been analyzed for quality through the flow cytometric analysis of the relevant cell type. The antibody can be used at less than or equal to 5  $\mu$ L per test. A test is the amount of antibody required to stain a cell sample in the final volume of 100  $\mu$ L.

#### References

- 1. Schlossman, S., L. Bloumsell, et al. eds (1995). Leucocyte Typing V: White Cell Differentiation Antigens. Oxford University Press. New York
- 2. Zhang, B., Zhang, X., Tang, F. L., Zhu, L. P., Liu, Y., Lipsky, P. E. (2008). Clinical significance of increased CD4+ CD25- Foxp3+ T cells in patients with new-onset systemic lupus erythematosus.; Annals of the rheumatic diseases, 67(7), 1037-1040.
- 3. Chapel, A., Bensussan, A., Vilmer, E., Dormont, D. (1992). Differential human immunodeficiency virus expression in CD4+ cloned lymphocytes: from

viral latency to replic	cation.;Journal of virology,;66(6), 3966-3970.
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