

3050 Spruce Street, St. Louis, MO 63103 USA
Tel: (800) 521-8956 (314) 771-5765 Fax: (800) 325-5052 (314) 771-5757
email: techservice@sial.com sigma-aldrich.com

# **Product Information**

# Monoclonal Anti-Interleukin-2 Soluble Receptor $\alpha$ , clone 22722

produced in mouse. purified immunoglobulin

Catalog Number I5652

# **Product Description**

Monoclonal Anti-Interleukin-2 Soluble Receptor  $\alpha$  (IL-2 sR $\alpha$ ) (mouse IgG1 isotype) is derived from the 22722 hybridoma produced by the fusion of mouse myeloma cells and splenocytes from a Balb/c mouse immunized with recombinant human IL-2 sR $\alpha$ , expressed in Sf21 cells. The antibody is purified from ascites fluid using protein A chromatography.

Monoclonal Anti-Human IL-2 sR $\alpha$  may be used to neutralize the biological activity mediated by IL-2 sR $\alpha$ . The antibody may also be used in immunohistochemistry and immunocytochemistry. By immunoblotting, the antibody show < 4% cross reactivity with recombinant human IL-2 R $\beta$ , and no cross-reactivity with recombinant human IL-2 R $\gamma$  IL-1 RI, IL-1 RII, IL-4 R, IL-5 R $\alpha$ , IL-6 R, IL-7 R, IL-9 R and IL-10 R.

The biological effects of IL-2R signals are much more complex than simply mediating T-cell growth. Depending on the set of conditions, IL-2R signals may also promote cell survival, effector function, and apoptosis. These sometimes contradictory effects underscore the fact that a diversity of intracellular signaling pathways are potentially activated by IL-2R. There are at least 3 components of the IL-2 receptor, IL-2 R $\alpha$ , IL-2 R $\beta$ , and IL-2 R $\gamma$  chains. The IL-2 R $\gamma$  chain is shared by IL-2, IL-4 and IL-7. The low affinity  $\alpha$ chain is a 55 kDa polypeptide. It is incapable of transmitting intracellular signals due to its short cytoplasmic tail. However, it can bind IL-2 rapidly to the cell membrane. The  $\beta$  chain (75 kDa) and the  $\gamma$  chain (64 kDa) form a complex that can bind IL-2 with high affinity and slow dissociation and can mediate signal transduction.3

Alternative names for IL-2R alpha include CD25, p55 and Tac antigen (for activated T-cell). Cells known to express  $\alpha$ -chains include activated and resting CD4+ and CD8+ T cells, entering and activated B cells, mature thymocytes, endothelium, embryonic fibroblasts, displayed glioblastoma (oligodendroglial) cells, activated monocytes, Kupffer cells, macrophages and Langerhans cells,  $^{14,15}$  and various tumor cells.

### Reagents

The product is supplied lyophilized from a 0.2  $\mu m$  filtered solution in phosphate buffered saline with 5% trehalose.

Endotoxin level is 0.1 EU per 1  $\mu$ g of the antibody as determined by the LAL method.

# **Preparation Instructions**

To one vial of lyophilized powder, add 1 ml of 0.2  $\mu$ m-filtered PBS to produce a 0.5 mg/ml stock solution of antibody. If aseptic technique is used, no further filtration should be needed for use in cell culture environments.

#### Storage/Stability

Prior to reconstitution, store at -20 °C. Reconstituted product may be stored at 2-8 °C for up to one month. For prolonged storage, freeze in working aliquots at -20 °C. Avoid repeated freezing and thawing.

#### **Procedure**

Anti-Human IL-2 sR $\alpha$  is tested for its ability to neutralize human cell surface IL-2 R $\alpha$  mediated IL-2 bioactivity in a  $^3$ H-thymidine incorporation assay using human N-1186 cells. The ND $_{50}$  of the antibody is defined as the concentration of antibody resulting in a one-half maximal inhibition of the cell surface IL-2 R $\alpha$  mediated recombinant human IL-2 response on a responsive cell line.

#### **Product Profile**

<u>Neutralization</u>: a working concentration of 0.5-1 μg/ml of Monoclonal Anti-IL-2 sR $\alpha$  will block 50% of the bioactivity due to 1 ng/ml recombinant human IL-2 in a  $^3$ H-thymidine incorporation assay using human N-1186 cells.

Immunoblotting: a working concentration of ~1  $\mu$ g/ml is determined using recombinant human IL-2 R $\alpha$  under non-reducing conditions only.

<u>Immunohistochemistry</u>: a working antibody concentration of 8-25  $\mu$ g/ml is recommended in frozen human tissue sections.

Immunocytochemistry: a working antibody concentration of 8-25 μg/ml is recommended in human PBMCs.

**Note**: In order to obtain best results in various techniques and preparations we recommend determining optimal working dilutions by titration test.

#### References

- 1. Noguchi, M., et al., Science, 262, 1877 (1993)
- 2. Russel, S.M., et al., Science, 262, 1880 (1993).
- 3. Nakamura, Y., et al., *Nature*, **369**, 330 (1994).
- 4. Uchiyama, T., et al., J. Immunol., 126, 1393 (1981).
- 5. Taniguchi, T. and Minami, Y., Cell, 73, 5 (1993).
- Vanham, G., et al., Clin. Immunol. Immunopathol., 71, 60 (1994).
- 7. Caligiuri, M.A., et al., *J. Exp. Med.*, **171**, 1509 (1990).
- Nakanishi, K., et al., Proc. Natl. Acad. Sci. USA, 89, 3551 (1992).
- 9. Leclercq, G., et al., Int. Immunol., 7, 843 (1995).
- 10. Hicks, C., et al., *Growth Factors*, **5**, 201 (1991).
- 11. Plaisance, S., et al., Int. Immunol., 4, 739 (1992).
- 12. Benveniste, E.N., et al., *J. Neuroimmunol.*, **17**, 301 (1988).
- 13. Espinoza-Delgado, I., et al., *J. Leukoc. Biol.*, **57**, 13 (1995).
- 14. Waldmann, T.A., Science, 232, 727 (1986).
- 15. Herrmann, F., et al., *J. Exp. Med.*, **162**, 1111 (1985).
- 16. Weidmann, E., et al., *Cancer Res.*, **52**, 5963 (1992).

KAA,PHC 12/11-1