

1A-492-T100

Monoclonal Antibody to CD2 Allophycocyanin (APC) conjugated (100 tests)

Clone:	LT2
Isotype:	Mouse IgG2b
Specificity:	The antibody LT2 reacts with CD2, a 50 kDa glycoprotein present on the human peripheral blood T lymphocytes and NK cells; also expressed by all thymocytes. HLDA VI; WS Code T 6T-008
Regulatory Status:	RUO
Immunogen:	Normal human blood lymphocytes.
Species Reactivity:	Human
Preparation:	The purified antibody is conjugated with cross-linked Allophycocyanin (APC) under optimum conditions. The conjugate is purified by size-exclusion chromatography and adjusted for direct use. No reconstitution is necessary.
Storage Buffer:	The reagent is provided in stabilizing phosphate buffered saline (PBS) solution containing 15mM sodium azide.
Storage / Stability:	Store in the dark at 2-8°C. Do not freeze. Avoid prolonged exposure to light. Do not use after expiration date stamped on vial label.
Usage:	The reagent is designed for Flow Cytometry analysis of human blood cells using 10 µl reagent / 100 µl of whole blood or 10 ⁶ cells in a suspension. The content of a vial (1 ml) is sufficient for 100 tests.
Expiration:	See vial label
Lot Number:	See vial label
Background:	CD2 belongs to T lymphocyte glycoproteins of immunoglobulin superfamily. Its interaction with CD58 stabilizes adhesion between T cells and antigen presenting or target cells. Relatively low affinity of CD2 to CD58 (as measured in solution) is compensated within the two-dimensional cell-cell interface to provide tight adhesion. Moreover, T cell activation induces increased CD2 expression and its lateral mobility, making easier contact between CD2 and CD58. Subsequently, T cell activation causes fixation of CD58-CD2 at sites of cell-cell contact, thereby strengthening intercellular adhesion. CD2 deficiency reduces intestinal inflammation and helps to control infection.

For laboratory research only, not for drug, diagnostic or other use.



Antibodies

References:

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- *Lin CW, Liu TY, Chen SU, Wang KT, Medeiros LJ, Hsu SM: CD94 1A transcripts characterize lymphoblastic lymphoma/leukemia of immature natural killer cell origin with distinct clinical features. *Blood.* 2005 Nov 15;106(10):3567-74.

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EXBIO Praha | Nad Safinou II 341 | 252 50 Vestec u Prahy | Czech Republic
Tel: +420 261 090 666 | Fax: +420 261 090 660 | orders@exbio.cz | www.exbio.cz