

DESCRIPTION

Species Reactivity	Human
Specificity	Detects human CCL16/HCC-4 in direct ELISAs.
Source	Polyclonal Goat IgG
Purification	Antigen Affinity-purified
Immunogen	<i>E. coli</i> -derived recombinant human CCL16/HCC-4 Gln24-Gln120 Accession # O15467
Conjugate	Alexa Fluor 532 Excitation Wavelength: 534 nm Emission Wavelength: 553 nm
Formulation	Supplied 0.2mg/ml in 1X PBS with RDF1 and 0.09% Sodium Azide
*Contains <0.1% Sodium Azide, which is not hazardous at this concentration according to GHS classifications. Refer to the Safety Data Sheet (SDS) for additional information and handling instructions.	

APPLICATIONS

Please Note: Optimal dilutions should be determined by each laboratory for each application. General Protocols are available in the Technical Information section on our website.

Neutralization Optimal dilution of this antibody should be experimentally determined.

PREPARATION AND STORAGE

Shipping	The product is shipped with polar packs. Upon receipt, store it immediately at the temperature recommended below.
Stability & Storage	Protect from light. Do not freeze. 12 months from date of receipt, 2 to 8 °C as supplied

BACKGROUND

Human HCC-4, also named NCC-4, liver-expressed chemokine (LEC), and lymphocyte and monocyte chemoattractant (LMC), is a novel CC chemokine identified through bioinformatics. HCC-4 cDNA encodes a 120 amino acid (aa) residue precursor protein with a 23 aa residue predicted signal peptide that is cleaved to generate a 97 aa residue mature protein. HCC-4 is distantly related to other CC chemokines, exhibiting less than 30% aa sequence identity. Among these CC chemokines, HCC-4 has the most similarity to HCC-1. Two potential polyadenylation signals are present on the human HCC-4 gene, and as a result, two transcripts containing approximately 1,500 base pairs and 500 base pairs have been detected. HCC-4 is expressed weakly by some lymphocytes, including NK cells, γδ T cells, and some T cell clones. The expression of HCC-4 in monocytes is highly upregulated in the presence of IL-10. The HCC-4 gene has been mapped to chromosome 17q where multiple CC chemokines are clustered.

Recombinant HCC-4 has been shown to chemoattract human monocytes and THP-1 cells but not resting lymphocytes or neutrophils. HCC-4 has also been found to suppress proliferation of myeloid progenitor cells. The HCC-4 induced calcium flux in THP-1 cells can be desensitized by prior exposure to RANTES, suggesting that HCC-4 and RANTES share the same receptor in THP-1 cells.

PRODUCT SPECIFIC NOTICES

This product is provided under an agreement between Life Technologies Corporation and R&D Systems, Inc, and the manufacture, use, sale or import of this product is subject to one or more US patents and corresponding non-US equivalents, owned by Life Technologies Corporation and its affiliates. The purchase of this product conveys to the buyer the non-transferable right to use the purchased amount of the product and components of the product only in research conducted by the buyer (whether the buyer is an academic or for-profit entity). The sale of this product is expressly conditioned on the buyer not using the product or its components (1) in manufacturing; (2) to provide a service, information, or data to an unaffiliated third party for payment; (3) for therapeutic, diagnostic or prophylactic purposes; (4) to resell, sell, or otherwise transfer this product or its components to any third party, or for any other commercial purpose. Life Technologies Corporation will not assert a claim against the buyer of the infringement of the above patents based on the manufacture, use or sale of a commercial product developed in research by the buyer in which this product or its components was employed, provided that neither this product nor any of its components was used in the manufacture of such product. For information on purchasing a license to this product for purposes other than research, contact Life Technologies Corporation, Cell Analysis Business Unit, Business Development, 29851 Willow Creek Road, Eugene, OR 97402, Tel: (541) 465-8300. Fax: (541) 335-0354.