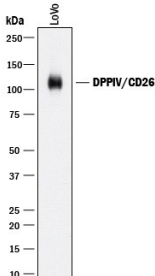


DESCRIPTION	
Species Reactivity	Human
Specificity	Detects human DPPIV/CD26 in ELISAs and Western blots. In ELISAs and Western blots, no cross-reactivity with recombinant human Cathepsin A or recombinant mouse DPPIV is observed.
Source	Monoclonal Rat IgG _{2A} Clone # 222113
Purification	Protein A or G purified from hybridoma culture supernatant
Immunogen	Mouse myeloma cell line NS0-derived recombinant human DPPIV/CD26 Asp34-Pro766 Accession # Q53TN1
Formulation	Lyophilized from a 0.2 µm filtered solution in PBS with Trehalose. See Certificate of Analysis for details. *Small pack size (-SP) is supplied as a 0.2 µm filtered solution in PBS.

APPLICATIONS	
Please Note: Optimal dilutions should be determined by each laboratory for each application. <i>General Protocols</i> are available in the <i>Technical Information</i> section on our website.	
	Recommended Concentration
	Sample
Western Blot	2 µg/mL See Below
Flow Cytometry	0.25 µg/10 ⁶ cells Human whole blood lymphocytes
Human DPPIV/CD26 Sandwich Immunoassay	Reagent
ELISA Capture	2-8 µg/mL Human DPPIV/CD26 Antibody (Catalog # MAB1180)
ELISA Detection Standard	0.1-0.4 µg/mL Human DPPIV/CD26 Biotinylated Antibody (Catalog # BAF1180) Recombinant Human DPPIV/CD26 (Catalog # 1180-SE)
CyTOF-ready	Ready to be labeled using established conjugation methods. No BSA or other carrier proteins that could interfere with conjugation.

DATA	
<p>Western Blot</p> 	<p>Detection of Human DPPIV/CD26 by Western Blot. Western blot shows lysate of LoVo human colorectal adenocarcinoma cell line. PVDF membrane was probed with 2 µg/mL of Rat Anti-Human DPPIV/CD26 Monoclonal Antibody (Catalog # MAB1180) followed by HRP-conjugated Anti-Rat IgG Secondary Antibody (Catalog # HAF005). A specific band was detected for DPPIV/CD26 at approximately 110 kDa (as indicated). This experiment was conducted under reducing conditions and using Immunoblot Buffer Group 1.</p>

PREPARATION AND STORAGE	
Reconstitution	Reconstitute at 0.5 mg/mL in sterile PBS.
Shipping	The product is shipped at ambient temperature. Upon receipt, store it immediately at the temperature recommended below. *Small pack size (-SP) is shipped with polar packs. Upon receipt, store it immediately at -20 to -70 °C
Stability & Storage	Use a manual defrost freezer and avoid repeated freeze-thaw cycles. <ul style="list-style-type: none"> ● 12 months from date of receipt, -20 to -70 °C as supplied. ● 1 month, 2 to 8 °C under sterile conditions after reconstitution. ● 6 months, -20 to -70 °C under sterile conditions after reconstitution.

BACKGROUND

DPPIV/CD26 (EC 3.4.14.5) is a serine exopeptidase that releases Xaa-Pro dipeptides from the N-terminus of oligo- and polypeptides (1, 2). It is a type II membrane protein consisting of a short cytoplasmic tail, a transmembrane domain, and a long extracellular domain (3-5). The extracellular domain contains glycosylation sites, a cysteine-rich region and the catalytic active site (Ser, Asp and His charge relay system). The amino acid sequence of the mouse DPPIV/CD26 extracellular domain is 84% and 91% identical to the human and rat counterparts, respectively. In the native state, DPPIV/CD26 is present as a noncovalently linked homodimer on the cell surface of a variety of cell types. The soluble form is also detectable in human serum and other body fluids, the levels of which may have clinical significance in patients with cancer, liver and kidney diseases, and depression. DPPIV/CD26 plays an important role in many biological and pathological processes. It functions as T cell-activating molecule (THAM). It serves as a cofactor for entry of HIV in CD4⁺ cells (6). It binds adenosine deaminase, the deficiency of which causes severe combined immunodeficiency disease in humans (7). It cleaves chemokines such as stromal-cell-derived factor 1 α and macrophage-derived chemokine (8, 9). It degrades peptide hormones such as glucagon (10). It truncates procalcitonin, a marker for systemic bacterial infections with elevated levels detected in patients with thermal injury, sepsis and severe infection, and in children with bacterial meningitis (11).

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