abcam

Product datasheet

Anti-IL-2 Receptor alpha antibody [MEM-181] ab8235

★★★★★ **1 Abreviews**　　**5 References**　　2 Images

Overview

Product name	Anti-IL-2 Receptor alpha antibody [MEM-181]
Description	Mouse monoclonal [MEM-181] to IL-2 Receptor alpha
Host species	Mouse
Specificity	CD25 antigen (human).
Tested applications	**Suitable for:** Flow Cyt
Species reactivity	**Reacts with:** Human
Immunogen	Tissue, cells or virus corresponding to Human IL-2 Receptor alpha. PHA-activated peripheral blood leucocytes
Epitope	extracellular
Positive control	Flow Cyt: Jurkat cells
General notes	The Life Science industry has been in the grips of a reproducibility crisis for a number of years. Abcam is leading the way in addressing this with our range of recombinant monoclonal antibodies and knockout edited cell lines for gold-standard validation. Please check that this product meets your needs before purchasing.

If you have any questions, special requirements or concerns, please send us an inquiry and/or contact our Support team ahead of purchase. Recommended alternatives for this product can be found below, along with publications, customer reviews and Q&As |

Properties

Form	Liquid
Storage instructions	Shipped at 4°C. Store at +4°C short term (1-2 weeks). Upon delivery aliquot. Store at -20°C or -80°C. Avoid freeze / thaw cycle.
Storage buffer	pH: 7.40 Preservative: 0.097% Sodium azide Constituent: PBS
Purity	Protein A purified
Purification notes	Purified from TCS. Purity >95% by SDS-PAGE.
Clonality	Monoclonal
Clone number	MEM-181

Isotype	IgG1
Light chain type	unknown

Applications

The Abpromise guarantee   Our **Abpromise guarantee** covers the use of ab8235 in the following tested applications.

The application notes include recommended starting dilutions; optimal dilutions/concentrations should be determined by the end user.

Application	Abreviews	Notes
Flow Cyt		Use a concentration of 2 µg/ml. **ab170190** - Mouse monoclonal IgG1, is suitable for use as an isotype control with this antibody.

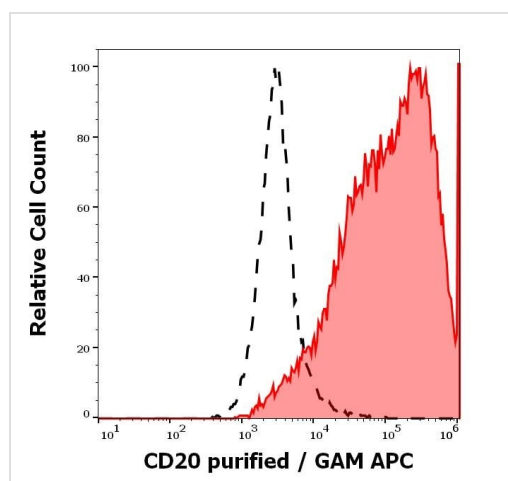## Target

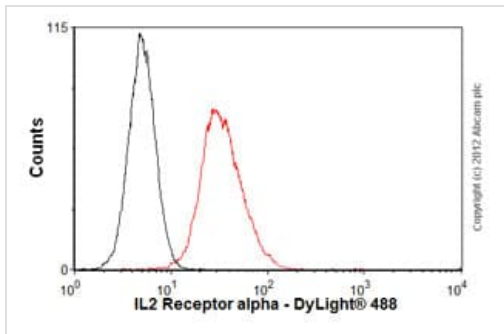|	
Function	Receptor for interleukin-2.
Involvement in disease	Genetic variations in IL2RA are associated with susceptibility to diabetes mellitus insulin-dependent type 10 (IDDM10) [MIM:601942]. A multifactorial disorder of glucose homeostasis that is characterized by susceptibility to ketoacidosis in the absence of insulin therapy. Clinical fetaures are polydipsia, polyphagia and polyuria which result from hyperglycemia-induced osmotic diuresis and secondary thirst. These derangements result in long-term complications that affect the eyes, kidneys, nerves, and blood vessels.
Sequence similarities	Contains 2 Sushi (CCP/SCR) domains.
Cellular localization	Membrane.

Images

Flow Cytometry - Anti-IL-2 Receptor alpha antibody [MEM-181] (ab8235)

Flow cytometry analysis showing separation of human PHA stimulated peripheral blood mononuclear cells stained using ab8235 (concentration in sample 2 µg/ml, GAM APC, red-filled) from human PHA stimulated peripheral blood mononuclear cells unstained by primary antibody (GAM APC, black-dashed).

Flow Cytometry - Anti-IL-2 Receptor alpha antibody [MEM-181] (ab8235)

Overlay histogram showing Jurkat cells stained with ab8235 (red line). The cells were fixed with 80% methanol (5 min) and incubated in 1x PBS / 10% normal goat serum / 0.3M glycine to block non-specific protein-protein interactions. The cells were then incubated with the antibody (ab8235, 1µg/1x10^6 cells) for 30 min at 22ºC. The secondary antibody used was DyLight® 488 goat anti-mouse IgG (H+L) (**ab96879**) at 1/500 dilution for 30 min at 22ºC. Isotype control antibody (black line) was mouse IgG1 [ICIGG1] (**ab91353**, 2µg/1x10^6 cells) used under the same conditions. Acquisition of >5,000 events was performed. This antibody gave a positive result in 4% paraformaldehyde (10 min) fixed Jurkat cells used under the same conditions.

Please note that Abcam do not have any data for use of this antibody on non-fixed cells. We welcome any customer feedback.

Please note: All products are "FOR RESEARCH USE ONLY. NOT FOR USE IN DIAGNOSTIC PROCEDURES"

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