Product Data Sheet

PE/Dazzle™ 594 anti-human CD192 (CCR2)

Catalog # / Size: 2386105 / 25 tests

2386110 / 100 tests

Clone: K036C2

Isotype: Mouse IgG2a, κ

Immunogen: CCR2 DNA immunogen

Reactivity: Human

Preparation: The antibody was purified by affinity

chromatography and conjugated with PE/Dazzle™ 594 under optimal conditions. The solution is free of unconjugated PE/Dazzle™ 594 and

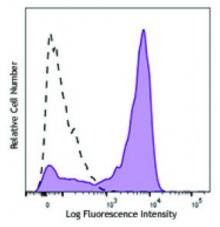
unconjugated antibody.

Formulation: Phosphate-buffered solution, pH 7.2,

containing 0.09% sodium azide and

0.2% (w/v) BSA (origin USA).

Concentration: Lot-specific



Human peripheral blood monocytes were stained with CD192 (clone K036C2) PE/Dazzle™ 594 (filled histogram) or mouse IgG2a, κ PE/Dazzle™ 594 isotype control (open histogram).

Applications:

Applications: Flow Cytometry

Recommended

Usage:

Each lot of this antibody is quality control tested by immunofluorescent staining with flow cytometric analysis. For flow cytometric staining, the suggested use of this reagent is 5 microL per million cells or 5 microL per 100 microL of whole blood. It is recommended that the reagent be titrated for optimal performance for each application.

* PE/Dazzle $^{\text{\tiny M}}$ 594 has a maximum excitation of 566 nm and a maximum emission of 610 nm.

Description: CCR2 is a chemokine receptor that binds monocyte chemoattractant proteins

(MCP-1, 2, 3 and 4). Two spliced variants were initially described for CCR2 (CCR2A and CCR2B). These variants differ in their terminal carboxyl tails. Monocyte adhesion to the arterial endothelium and subsequent migration into the intima are central events in the pathogenesis of atherosclerosis. CCR2 and MCP-1 have been associated to atherosclerotic plaques. MCP-1 is induced by modified-LDL in endothelial cells and may trigger firm adhesion of monocytes to vascular endothelium under flow conditions. Local overexpression of MCP-1 at vessel walls induces infiltration of macrophages and formation of atherosclerotic lesions. Obesity induces an inflammatory state that is implicated in many clinically important complications, including insulin resistance, diabetes, atherosclerosis, and non-alcoholic fatty liver disease. CCR2 influences the development of obesity and associated adipose tissue inflammation.

Antigen References:

1. Wong LM, et al. 1997. J. Biol. Chem. 272:1038.

2. Papadopoulou C, et al. 2008. Cytokine 43:181.

3. Barlic J, et al. 2007. J. Leukoc. Biol. 82:226.

4. Gu L, et al. 1998. Mol.