

PE Anti-Human CD192/CCR2 Antibody[K036C2]

Catalog Number: E-AB-F1385D

Note: Centrifuge before opening to ensure complete recovery of vial contents.

Description

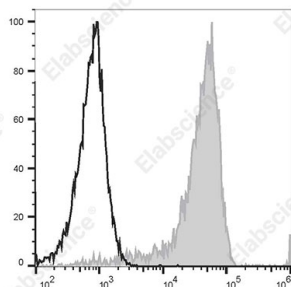
Reactivity	Human
Host	Mouse
Isotype	Mouse IgG2a, κ
Clone No.	K036C2
Isotype Control	PE Mouse IgG2a, κ Isotype Control[C1.18.4] [Product E-AB-F09802D]
Conjugation	PE
Conjugation Information	PE is designed to be excited by the Blue (488 nm), Green (532 nm) and Yellow-Green (561 nm) lasers and detected using an optical filter centered near 575 nm (e.g., a 585/42 nm bandpass filter).
Storage Buffer	Phosphate buffered solution, pH 7.2, containing 0.09% stabilizer.

Applications

Recommended usage

FCM	Each lot of this antibody is quality control tested by flow cytometric analysis. The amount of the reagent is suggested to be used 5 μL of antibody per test (million cells in 100 μL staining volume or per 100 μL of whole blood). Please check your vial before the experiment. Since applications vary, the appropriate dilutions must be determined for individual use.
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Data



Staining of normal human peripheral blood cells with PE Anti-Human CD192/CCR2 Antibody[K036C2] (filled gray histogram) or PE Mouse IgG2a, κ Isotype Control (empty black histogram). Cells in the monocytes gate were used for analysis.

Preparation & Storage

Storage	Keep as concentrated solution. This product can be stored at 2-8°C for 24 months. Please protected from prolonged exposure to light and do not freeze.
Shipping	Ice bag

Antigen Information

Alternate Names	CC-CKR-2;CCR2A;CCR2B;CKR2;CKR2A;CKR2B;CMKBR2;MCP-1-R
Uniprot ID	P41597

For Research Use Only

Gene ID

729230

Background

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 CCR2 B). 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.