Summary

Name CD20/B-lymphocyte antigen CD20

Purity Greater than 95% as determined by reducing SDS-PAGE

Endotoxin level <1 EU/μg as determined by LAL test.

Construction Recombinant Human B-lymphocyte antigen CD20 is produced by our

Mammalian expression system and the target gene encoding Met1-Pro297 is expressed with a 6His, Flag tag at the C-terminus. The product is not recommended for cell based experiments. *The product is not recommended

for cell based experiments.

Accession # P11836

Host Human cells

Species Human

Predicted Molecular Mass 35.1 kDa

Formulation Supplied as a 0.2 µm filtered solution of 50mM HEPES-Na, 150mM NaCl,

0.02%DDM, 0.004%CHS, 5%Glycerol, pH7.5.

Shipping The product is shipped on dry ice/polar packs. Upon receipt, store it immediately

at the temperature listed below.

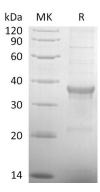
Stability&Storage Store at \leq -70°C, stable for 6 months after receipt. Store at \leq -70°C, stable for 3

months under sterile conditions after opening. Please minimize freeze-thaw

cycles.

Reconstitution

SDS-PAGE image



Background

Alternative Names B-lymphocyte antigen CD20; B-lymphocyte surface antigen B1; Leukocyte surface

Product Name: Recombinant Human CD20 (C-6His-Flag) Enkilife Catalog #: PHH2441

Background

antigen Leu-16; Membrane-spanning 4-domains subfamily A member 1; Bp35; CD20; MS4A1

CD20 is a 33-37 kDa non-glycosylated protein expressed on the surface of normal and malignant B lymphocytes, and belongs to the MS4A (membrane-spanning 4-domain family A) protein family. CD20 protein consists of four hydrophobic transmembrane domains, one intracellular and two extracellular domains (large and small loops) with both N- and C- termini residing within the cytosol. CD20 is also known to be physically coupled to major histocompatibility complex class II (MHCII), CD40 molecule, BCR, and the C-terminal src kinase-binding protein (CBP) that interacts with Src kinases such as LYN, FYN, and LCK. CD20 deficiency resulted in a reduced number of circulating memory B cells, reduced isotype switching of Ig, and decreased IgG antibody levels. In agreement with this observation, challenging the patient' s primary B cells in vitro using T-dependent and Tindependent antigens led to the normal proliferation and secretion of IgM but reduced production of IgG.

Note

For Research Use Only, Not for Diagnostic Use.

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