ATAGENIX LABORATORIES

Catalog Number:ATMP00243HU

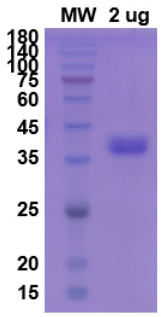
Recombinant Human CD52 protein ,C- Fc Tag

Product Details

Summary

English name	Recombinant Human CD52 protein ,C- Fc Tag
Purity	>90% as determined by SDS-PAGE
Endotoxin level	<1.0 EU per μg of the protein as determined by the LAL method.
Construction	A DNA sequence encoding the human CD52(Met1-Ser36) was fused with the C-terminal Fc Tag
Accession #	P31358
Host	Mammalian cells
Species	Homo sapiens (Human)
Predicted Molecular Mass	29.07kDa
Formulation	Supplied as solution form in PBS pH 7.5 or lyophilized from PBS pH 7.5.
Shipping	In general, proteins are provided as lyophilized powder/frozen liquid. They are shipped out with dry ice/blue ice unless customers require otherwise.
Stability &Storage	Use a manual defrost freezer and avoid repeated freeze thaw cycles. Store at 2 to 8 °C for one week . Store at -20 to -80 °C for twelve months from the date of receipt.
Reconstitution	Reconstitute in sterile water for a stock solution.A copy of datasheet will be provided with the products, please refer to it for details.

SDS-PAGE image



Background

Background	CAMPATH-1 antigen, also known as cluster of differentiation 52 (CD52), is a glycoprotein that in humans is encoded by the CD52 gene.It is widely expressed

	on the cell surface of immune cells, such as mature lymphocytes, natural killer cells (NK), eosinophils, neutrophils, monocytes/macrophages, and dendritic cells (DCs).ligation of cell surface CD52 molecules may offer costimulatory signals for T-cell activation and proliferation.
Alternative Names	CDW52,HE5,CD52,CAMPATH-1 antigen
References	Trindade, Thaniyavarn, Townsend, Klasek, Tsveybel, Kennedy, Goldberg, El-Chemaly (2020) Alemtuzumab as a Therapy for Chronic Lung Allograft Dysfunction in Lung Transplant Recipients With Short Telomeres Frontiers in immunology 11() 1063

Frontier progress

Alemtuzumab, a monoclonal antibody targeting CD52 that causes lymphocyte apoptosis, is a form of advanced immunosuppression that is currently used as a therapy for refractory acute cellular rejection and chronic lung allograft dysfunction in lung transplant recipients (1-3). Side effects of alemtuzumab include bone marrow suppression, infection, and malignancy. Whether alemtuzumab can be safely used in allograft recipients that have an increased propensity for bone marrow suppression due to telomeropathies is unknown. In a retrospective case series, we report outcomes associated with alemtuzumab in three lung allograft recipients with short telomere lengths, comparing endpoints such as leukopenia, transfusion needs, infection, hospitalization and survival to those of 17 patients without known telomeropathies that received alemtuzumab. We show that the use of alemtuzumab in lung transplant recipients with short telomeres is safe, though is associated with an increased incidence of neutropenia, thrombocytopenia and anemia requiring packed red blood cell transfusions. Alemtuzumab appears to be an acceptable advanced immunosuppressive therapy in patients with telomeropathies, though given the design and scope of this study, the actual clinical effect needs further evaluation in larger trials.