

Human IL-36Ra/IL-1F5 Antibody

Antigen Affinity-purified Polyclonal Goat IgG Catalog Number: AF1275

DESCRIPTION		
Species Reactivity	Human	
Specificity	Detects human IL-36Ra/IL-1F5 in direct ELISAs and Western blots. In direct ELISAs, less than 1% cross-reactivity with recombinant human (rh) IL-1F6, rhIL-1F8, rhIL-1β, rhIL-1β and rhIL-18 is observed.	
Source	Polyclonal Goat IgG	
Purification	Antigen Affinity-purified	
Immunogen	E. coli-derived recombinant human IL-36Ra/IL-1F5 Val2-Asp155 Accession # Q9UBH0	
Endotoxin Level	<0.10 EU per 1 µg of the antibody by the LAL method.	
Formulation	Lyophilized from a 0.2 µm filtered solution in PBS with Trehalose. See Certificate of Analysis for details.	

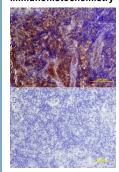
APPLICATIONS

Please Note: Optimal dilutions should be determined by each laboratory for each application. General Protocols are available in the Technical Information section on our website.

	Recommended Concentration	Sample
Western Blot	0.1 μg/mL	Recombinant Human IL-36Ra/IL-1F5 (Catalog # 1275-IL)
Immunohistochemistry	5-15 μg/mL	See Below
Blockade of Receptor-ligand Interaction	Human IL-1 Rrp2 Fc (immobilized Recombir	0.5-2 µg/mL of this antibody will block 50% of the binding of 5 µg/mL of Recombinant Chimera or Recombinant Mouse IL-1 Rrp2 Fc Chimera (Catalog # 872-RP or 2354-RP) to nant Human IL-36Ra/IL-1F5 or Recombinant Mouse IL-36Ra/IL-1F5, respectively (Catalog # oated at 1 µg/mL (100 µL/well). At 100 µg/mL, this antibody will block >90% of the binding.

DATA

Immunohistochemistry



IL-36Ra/IL-1F5 in Human Lymph Node.

L-36Ra/IL-1F5 was detected in immersion fixed paraffinembedded sections of human lymph node using Human L-36Ra/IL-1F5 Antigen Affinity-purified Polyclonal Antibody (Catalog # AF1275) at 15 µg/mL overnight at 4 °C. Tissue was stained using the Anti-Goat HRP-DAB Cell & Tissue Staining Kit (brown; Catalog # CTS008) and counterstained with hematoxylin (blue). Lower panel shows a lack of labeling if primary antibodies are omitted and tissue is stained only with secondary antibody followed by incubation with detection reagents. View our protocol for Chromogenic IHC Staining of Paraffin-embedded Tissue Sections.

PREPARATION AND STORA	AGE
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FREFARATION AND STORAGE		
Reconstitution	Reconstitute at 0.2 mg/mL in sterile PBS.	
Shipping	The product is shipped at ambient temperature. Upon receipt, store it immediately at the temperature recommended below.	
Stability & Storage	Use a manual defrost freezer and avoid repeated freeze-thaw cycles.	
	 12 months from date of receipt, -20 to -70 °C as supplied. 	
	 1 month, 2 to 8 °C under sterile conditions after reconstitution. 	
	 6 months, -20 to -70 °C under sterile conditions after reconstitution. 	





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BACKGROUND

Human Interleukin-36 receptor antagonist protein [IL36Ra; also named interleukin 1 family member 5, IL-1F5, FIL-1δ (delta), IL36RN, IL-1HY1, IL-1H3, and IL-1L1] is a member of the IL-1 family of proteins (1-6). IL-1 family members include IL-1β, IL-1α, IL-1ra, IL-18 and IL-1F5-F10 (6, 7). All family members show a 12 β-strand, β-trefoil configuration, and all family members are believed to have arisen from a common ancestral gene that underwent multiple duplications (7). The human IL-1F5 gene is in closest proximity to the gene for IL-1ra and is likely a relatively recent duplication of the IL-1ra gene (2, 3). IL-1F5 is synthesized as a 155 amino acid (aa) protein that contains no signal sequence, no prosegment and no potential N-linked glycosylation site(s) (2-5). Nevertheless, it appears to be secreted as a 17 kDa monomer (5). There is an alternate start site that potentially gives rise to an alternate splice form (5). The translated product, however, has a premature stop codon, resulting in a truncated 16 aa peptide. Human to mouse, full length IL-1F5 has 90% aa identity. Within the family, IL-1F5 is 50% aa identical to IL-1ra, and 32%, 31%, 35%, 37%, 32% and 42% aa identical to IL-1β, IL-1F6, F7, F8, F9 and F10, respectively. Cells reported to express IL-1F5 include monocytes, B cells, dendritic cells/Langerhans cells, keratinocytes, and gastric fundus Parietal and Chief cells (1, 8). The receptor for IL-1F5 has not been positively identified. Indirect evidence suggests it is IL-1 Rrp2 and/or IL-1 RACP (9). In either case, activity association with receptor binding is also unclear. It was initially reported to be an antagonist of IL-1F9 activity (4, 7). This would be consistent with its hypothesized relationship to IL-1ra. Studies, however, find IL-1F5 antagonist activity difficult to demonstrate (9).

References:

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- 7. Dunn, E. et al. (2001) Trends Immunol. 22:533.
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