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InnoCyto Inc.

15375 Barranca Pkwy, Suite I-103
Irvine, CA 92618
Email: info@innocyto.com
Phone: 1-949-418-7543

# iF488 Anti-Human CD64 (FcγRI) Antibody

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| **Catalog Number:** | 109305, 109306 |
| **Size:** | 25 tests, 100 tests |
| **Target Name:** | CD64, FCGR1A, FCG1, FCGR1, IGFR1 |
| **Regulatory Status:** | RUO |

## PRODUCT DETAILS

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| **Clone:** | H22 |
| **Application:** | Flow Cytometry |
| **Reactivity:** | Human |
| **Format:** | iF488 |
| **Isotype:** | Mouse IgG1 |
| **Antibody Type:** | Monoclonal |
| **Formulation:** | Phosphate-buffered solution, pH 7.2, containing 0.09% sodium azide and 0.2% (w/v) BSA |
| **Protein Concentration:** | Supplied at a lot-specific concentration. |
| **Storage&Handling:** | The antibody solution should be stored undiluted between 2°C and 8°C, and protected from prolonged exposure to light. Do not freeze. |
| **Recommended Usage:** | For flow cytometric staining, it is recommended to use 5 µL of this reagent per 0.5-1.0 million cells in a 100 µL volume. Optimal reagent performance should be determined by titration for each specific application. iF488 has an excitation max at 491 nm and an emission max at 516 nm. |
| **Excitation Laser:** | Blue Laser (488 nm) |
| **Isotype Control:** | 301409 |
| **RRID:** | AB_3738897 |

## BACKGROUND INFORMATION

CD64, also known as Fc gamma receptor I (FcγRI), is a high-affinity receptor for immunoglobulin G (IgG) and plays a central role in antibody-mediated immune responses. It is primarily expressed on myeloid lineage cells, including monocytes, macrophages, dendritic cells, and activated neutrophils. Through its ability to bind IgG-opsonized targets, CD64 enables these cells to detect, internalize, and eliminate pathogens and immune complexes, making it a key link between the adaptive humoral immune response and innate effector functions.

Structurally, CD64 is a type I transmembrane glycoprotein belonging to the immunoglobulin superfamily. Its extracellular region consists of three Ig-like domains, which confer its uniquely high affinity for the Fc portion of IgG, allowing it to bind monomeric IgG in addition to immune complexes. CD64 has a short cytoplasmic tail that lacks intrinsic signaling motifs and therefore associates non-covalently with the Fc receptor common γ-chain (FcRγ). This accessory chain contains immunoreceptor tyrosine-based

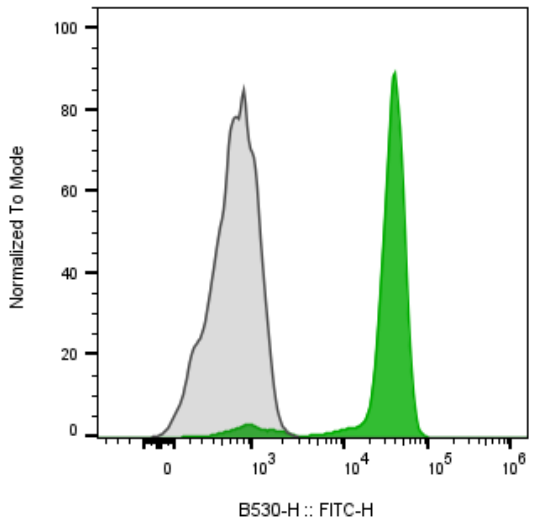
activation motifs (ITAMs) that are essential for signal transduction following receptor engagement.

The principal ligands for CD64 are IgG antibodies, with particularly strong binding to human IgG1 and IgG3 subclasses. When CD64 binds IgG-coated microbes, tumor cells, or immune complexes, it triggers intracellular signaling through FcRγ, leading to phagocytosis, antibody-dependent cellular cytotoxicity (ADCC), production of reactive oxygen species, and secretion of pro-inflammatory cytokines. Through these mechanisms, CD64 contributes to host defense against infection and to the clearance of antibody-tagged targets.

CD64 expression and function are implicated in several disease contexts. In infectious and inflammatory diseases, CD64 is strongly upregulated on neutrophils and monocytes in response to cytokines such as interferon-γ. Neutrophil CD64 expression has become a widely used biomarker for systemic bacterial infection and sepsis, reflecting heightened innate immune activation. In autoimmune diseases, excessive engagement of CD64 by immune complexes can contribute to chronic inflammation and tissue damage. CD64 is also expressed on tumor-associated macrophages, where it may influence antibody-based antitumor immunity.

Therapeutically, CD64 has attracted interest as both a biomarker and a potential target. Its restricted expression pattern on myeloid cells makes it an appealing target for antibody-drug conjugates or immunotoxins aimed at selectively depleting pathogenic macrophages in cancer or inflammatory disease. In addition, the effectiveness of many therapeutic antibodies relies in part on Fcγ receptor engagement, and CD64 expression levels can influence clinical responses. As a result, CD64 remains an important focus in immunology, diagnostics, and the design of next-generation antibody therapies.

## PRODUCT DATA




Human peripheral blood monocytes stained either with iF488 Anti-Human CD64 clone H22 (color-filled histogram) or an isotype control (gray histogram).

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