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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 CD25 (IL-2Rα) Antibody

Catalog Number:	107503, 107504
Size:	25 tests, 100 tests
Target Name:	IL-2 receptor α chain, Low affinity IL-2R, IL-2Rα chain
Regulatory Status:	RUO

PRODUCT DETAILS

Clone:	M-A251
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_3738781

BACKGROUND INFORMATION

CD25, also known as the interleukin-2 receptor alpha chain (IL-2Rα), is a transmembrane glycoprotein that plays a central role in regulating immune responses. It functions as part of the interleukin-2 (IL-2) receptor complex, which is essential for T cell proliferation, survival, and differentiation. CD25 itself has low affinity for IL-2 when expressed alone, but when combined with IL-2 receptor beta (CD122) and the common gamma chain (CD132), it forms the high-affinity IL-2 receptor complex capable of effective signal transduction.

Structurally, CD25 is a single-pass type I membrane protein composed of an extracellular domain of approximately 219 amino acids responsible for IL-2 binding, a hydrophobic transmembrane segment, and a short cytoplasmic tail that lacks intrinsic signaling domains. The extracellular region is heavily glycosylated, which stabilizes its conformation and facilitates ligand interaction. Because the alpha chain alone is not signaling-competent, it acts primarily to increase the receptor complex’s affinity for IL-2 and to

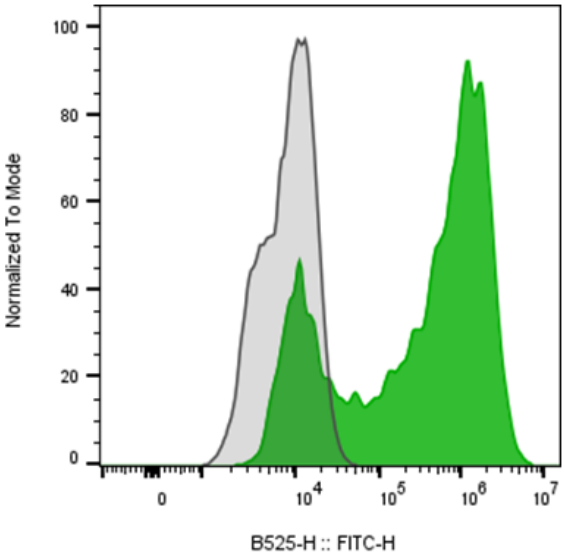
expand the range of cells responsive to low cytokine concentrations.

CD25's main ligand, IL-2, is a cytokine crucial for T lymphocyte expansion and immune tolerance. Engagement of IL-2 with the high-affinity receptor triggers the JAK-STAT signaling pathway, leading to cell proliferation, differentiation, and regulatory T cell (Treg) function. CD25 is constitutively expressed on Tregs and upregulated on activated CD4+ and CD8+ T cells, making it a marker of immune activation as well as immune regulation.

Aberrant CD25 expression or IL-2 signaling contributes to immune dysregulation and disease. In autoimmune disorders such as multiple sclerosis and type 1 diabetes, alterations in the IL-2/CD25 axis impair Treg function and tolerance mechanisms. Elevated CD25 expression is also found in certain malignancies, particularly adult T-cell leukemia/lymphoma and Hodgkin lymphoma, where it may serve as a biomarker of malignant proliferation. Moreover, soluble CD25, released from cell surfaces, can act as a decoy receptor, modulating IL-2 availability and contributing to immune suppression in cancer and chronic inflammation.

Therapeutically, CD25 is a prominent target for immune modulation. Monoclonal antibodies such as basiliximab and daclizumab have been developed to block IL-2 binding, preventing T cell activation and mitigating graft rejection in organ transplantation. Conversely, IL-2 or CD25-targeted therapies that enhance regulatory T cell function are being explored to treat autoimmune diseases and promote immune tolerance. Thus, CD25 remains a critical immunological node, balancing activation and regulation within the immune system.

PRODUCT DATA



Anti-human CD3 and Anti-Human CD28 stimulated human peripheral blood lymphocytes was stained with iF488 Anti-Human CD25 clone M-A251 (color-filled histogram) or an isotype control (gray histogram).

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