SANTA CRUZ BIOTECHNOLOGY, INC.

CKR-2A (C-17): sc-6227



BACKGROUND

C-C or β chemokine family members are characterized by a pair of adjacent cysteine residues and serve as potent chemoattractants and activators of monocytes and T cells. C-C chemokine receptor family members include CKR-1, CKR-2A, CKR-2B, CKR-3, CKR-4, CKR-5, CKR-6, CKR-7, CKR-8, CKR-9, CKR-10 and the Duffy blood group antigen. Each of these receptors are G proteincoupled, seven pass transmembrane domain proteins whose major physiological role is to function in the chemotaxis of T cells and phagocytic cells to areas of inflammation. However, this receptor family has also been shown to facilitate viral infection. CKR-2 (C-C chemokine receptor type 2) is a 374 amino acid multi-pass membrane protein that belongs to the C-C chemokine receptor family and is expressed as 2 isoforms, designated CKR-2A and CKR-2B. Both CKR-2 isoforms function as receptors for a variety of proteins, including MCP-1 and MCP-3, thereby influencing intracellular calcium levels and affecting signal transduction throughout the cell.

REFERENCES

- 1. Schweickart, V.L., et al. 1994. Cloning of human and mouse EBI1, a lymphoid-specific G protein-coupled receptor encoded on human chromosome 17q12-q21.2. Genomics 23: 643-650.
- 2. Deng, H., et al. 1996. Identification of a major co-receptor for primary isolates of HIV-1. Nature 381: 661-666.
- 3. Dragic, T., et al. 1996. HIV-1 entry into CD4+ cells is mediated by the chemokine receptor C-C CKR-5. Nature 381: 667-673.
- 4. Alkhatib, G., et al. 1996. C-C CKR-5: a RANTES, MIP-1α, MIP-1β receptor as a fusion co-factor for macrophage-tropic HIV-1. Science 272: 1955-1958.
- 5. Choe, H., et al. 1996. The β -chemokine receptors CCR-3 and CCR-5 facilitate infection by primary HIV-1 isolates. Cell 85: 1135-1148.

CHROMOSOMAL LOCATION

Genetic locus: CCR2 (human) mapping to 3p21.31.

SOURCE

CKR-2A (C-17) is an affinity purified goat polyclonal antibody raised against a peptide mapping at the C-terminus of CKR-2A of human origin.

PRODUCT

Each vial contains 200 µg lgG in 1.0 ml of PBS with < 0.1% sodium azide and 0.1% gelatin.

Blocking peptide available for competition studies, sc-6227 P, (100 µg peptide in 0.5 ml PBS containing < 0.1% sodium azide and 0.2% BSA).

STORAGE

Store at 4° C, **DO NOT FREEZE**. Stable for one year from the date of shipment. Non-hazardous. No MSDS required.

PROTOCOLS

See our web site at www.scbt.com or our catalog for detailed protocols and support products.

APPLICATIONS

CKR-2A (C-17) is recommended for detection of CKR-2A of human origin by Western Blotting (starting dilution 1:200, dilution range 1:100-1:1000), immunoprecipitation [1-2 µg per 100-500 µg of total protein (1 ml of cell lysate)], immunofluorescence (starting dilution 1:50, dilution range 1:50-1:500) and solid phase ELISA (starting dilution 1:30, dilution range 1:30-1:3000).

Suitable for use as control antibody for CKR-2 siRNA (h): sc-270220, CKR-2 shRNA Plasmid (h): sc-270220-SH and CKR-2 shRNA (h) Lentiviral Particles: sc-270220-V.

Molecular Weight of CKR-2A: 46-52 kDa.

Positive Controls: Hep G2 cell lysate: sc-2227, HeLa whole cell lysate: sc-2200 or ACHN whole cell lysate: sc-364365.

RECOMMENDED SECONDARY REAGENTS

To ensure optimal results, the following support (secondary) reagents are recommended: 1) Western Blotting: use donkey anti-goat IgG-HRP: sc-2020 (dilution range: 1:2000-1:100,000) or Cruz Marker[™] compatible donkey anti-goat IgG-HRP: sc-2033 (dilution range: 1:2000-1:5000), Cruz Marker™ Molecular Weight Standards: sc-2035, TBS Blotto A Blocking Reagent: sc-2333 and Western Blotting Luminol Reagent: sc-2048. 2) Immunoprecipitation: use Protein A/G PLUS-Agarose: sc-2003 (0.5 ml agarose/2.0 ml). 3) Immunofluorescence: use donkey anti-goat IgG-FITC: sc-2024 (dilution range: 1:100-1:400) or donkey anti-goat IgG-TR: sc-2783 (dilution range: 1:100-1:400) with UltraCruz[™] Mounting Medium: sc-24941.

DATA



CKR-2A (C-17): sc-6227. Western blot analysis of CKR-2A expression in Hep G2 (A), HeLa (B) and ACHN (C) whole cell lysates.

SELECT PRODUCT CITATIONS

- 1. Daugherty, A., et al. 2010. Angiotensin II infusion promotes ascending aortic aneurysms: attenuation by CCR2 deficiency in apoE^{-/-} mice. Clin. Sci. 118: 681-689.
- 2. De Paepe, B., et al. 2012. Upregulation of chemokines and their receptors in duchenne muscular dystrophy: potential for attenuation of myofiber necrosis. Muscle Nerve 45: 914-916.

RESEARCH USE

For research use only, not for use in diagnostic procedures.