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FOXP3 Monoclonal Antibody (3G3), Alexa

Fluor[™] 647

Catalog Number MA5-18160

Product data sheet

Details		Species Reactivity	
Size	100 µg	Species reactivity	Human, Mouse
Host/Isotope	Mouse / IgG1, kappa	Published species	Mouse, Not Applicable
Class	Monoclonal	Tested Applications	Dilution *
Туре	Antibody	Flow Cytometry (Flow)	1-5 μg/mL
Clone	3G3	Western Blot (WB)	Assay-dependent
Immunogen	Full-length His-tagged recombinant murine FoxP3	Published Applications Flow Cytometry (Flow)	See 1 publications below
Conjugate	Alexa Fluor™ 647	* Suggested working dilutions are given as a guide only. It is recommended that the user titrate the product for use in their own experiment using appropriate negative and positive controls.	
Form	Liquid		
Concentration	0.5 mg/mL		
Purification	Size-exclusion chromatography		
Storage buffer	PBS		
Contains	15mM sodium azide		
Storage Conditions	4° C, store in dark, DO NOT FREEZE!		

Product specific information

This antibody recognizes N-terminal region of FoxP3, a 47-55 kDa transcription factor (intracellular antigen), which is the master regulator in the development and function of regulatory T cells.

Background/Target Information

FOXP3 (Forkhead box protein 3) is a member of the forkhead/winged-helix family of transcriptional regulators, highly conserved across mammals, and essential for normal immune homeostasis. FOXP3 is 381 amino acids long, stably and constitutively expressed at a high level in CD25 + CD4 positive regulatory T cells, a low level in CD4-positive/CD25-negative cells, and is absent in CD4-negative/CD8-positive T cells. FOXP3 may be a master regulatory gene, and a more specific marker of regulatory T cells. Defects in the gene encoding FOXP3 protein cause the scurfy phenotype in mice. In humans FOXP3 defects play a role in IPEX syndrome (immune dysfunction, polyendocrinopathy, enteropathy, X-linked syndrome), also known as X-linked autoimmunity-allergic dysregulation (XLAAD) syndrome. Transcript variants of FOXP3 encoding different isoforms have been identified. In human breast and colon cancer cells, expression of FOXP3 is regulated by p53 in response to the DNA damage.

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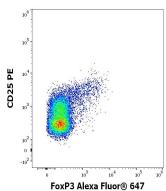
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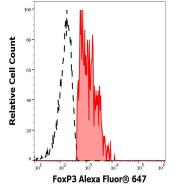


Product Images For FOXP3 Monoclonal Antibody (3G3), Alexa Fluor™ 647



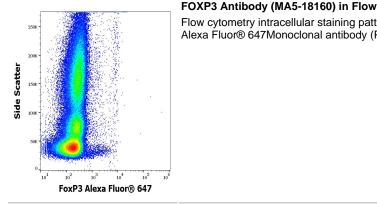
FOXP3 Antibody (MA5-18160) in Flow

Flow cytometry multicolor surface staining of human CD4 positive lymphocytes using anti-human CD25 (MEM-181) PE antibody (20 μL reagent / 100 μL of peripheral whole blood) and intracellular staining of human CD4 positive lymphocytes using anti-human FoxP3 (3G3) Alexa Fluor® 647 Monoclonal antibody (Product # MA5-18160), concentration in sample 3 μg/mL.



FOXP3 Antibody (MA5-18160) in Flow

Separation of FoxP3 positive CD25 positive CD4 positive lymphocytes (red-filled) from FoxP3 negative CD25 negative CD4 positive lymphocytes (black-dashed) in flow cytometry analysis (intracellular staining) of human peripheral whole blood stained using anti-human FoxP3 (3G3) Alexa Fluor® 647 Monoclonal antibody (Product # MA5-18160), concentration in sample 3 µg/mL.



Flow cytometry intracellular staining pattern of human peripheral whole blood stained using anti-human FoxP3 (3G3) Alexa Fluor® 647Monoclonal antibody (Product # MA5-18160), concentration in sample 3 µg/mL.

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PubMed References	For FOXP3 Monoclonal Antibody (3G3), Alexa Fluor™ 647
1 Flow Cytometry Refe	rences
Species / Dilution	Summary
	MA5-18160 was used in Flow cytometry/Cell sorting to identify a small-molecule inhibitor that can be used to block type I IFN signaling during established infection and acts synergistically with conventional anti-parasitic drugs to improve parasite clearance and enhance anti-parasitic CD4+ T cell responses in mice and humans.
Mouse / Not Cited	Cell reports (2020; 30: 2512) "Type I Interferons Suppress Anti-parasitic Immunity and Can Be Targeted to Improve Treatment of Visceral Leishmaniasis." Author(s):Kumar R,Bunn PT,Singh SS,Ng SS,Montes de Oca M,De Labastida Rivera F,Chauhan SB,Singh N,Faleiro RJ, Edwards CL,Frame TCM,Sheel M,Austin RJ,Lane SW,Bald T,Smyth MJ,Hill GR,Best SE,Haque A,Corvino D,Waddell N, Koufariotis L,Mukhopadhay P,Rai M,Chakravarty J,Singh OP,Sacks D,Nylen S,Uzonna J,Sundar S,Engwerda CR PubMed Article URL:http://dx.doi.org/10.1016/j.celrep.2020.01.099

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