BOSTER BIOLOGICAL TECHNOLOGY
3942 B Valley Ave, Pleasanton, CA 94566
888-466-3604 | support@bosterbio.com | www.bosterbio.com

Anti-IL4 Antibody Picoband®

Catalog Number: A00230

About IL4

Interleukin-4 (IL-4), also known as a B-cell stimulatory factor1 (BSF1), is an immunomodulatory cytokine, which can inhibit the growth of tumour cells.1 The human cDNA contains a single open reading frame encoding a protein of 153 amino acids, including a putative signal peptide. IL-4 may act as an autocrine growth factor in pancreatic cancer cells and also give rise to the possibility that cancer-derived IL-4 may suppress cancer-directed immunosurveillance in vivo in addition to its growth-promoting effects, thereby facilitating pancreatic tumor growth and metastasis. The mouse and human genes and their protein products show structural and functional similarities. The human IL-4 gene, which occurs as a single copy in the haploid genome, is mapped on chromosome 5.2. The standard product used in this kit is recombinant human IL-4, consisting of 130 amino acids with the molecular mass of 14KDa.

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Overview

Product Name	Anti-IL4 Antibody Picoband®
Reactive Species	Human
Description	Boster Bio Anti-IL4 Antibody Picoband® catalog # A00230. Tested in ELISA, WB applications. This antibody reacts with Human. The brand Picoband indicates this is a premium antibody that guarantees superior quality, high affinity, and strong signals with minimal background in Western blot applications. Only our best-performing antibodies are designated as Picoband, ensuring unmatched performance.
Application	ELISA, WB
Clonality	Polyclonal
Formulation	Each vial contains 4mg Trehalose, 0.9mg NaCl, 0.2mg Na2HPO4, 0.05mg NaN3.
Storage Instructions	Store at -20˚C for one year from date of receipt. After reconstitution, at 4˚C for one month. It can also be aliquotted and stored frozen at -20˚C for six months. Avoid repeated freeze-thaw cycles.
Host	Rabbit
Uniprot ID	P05112

Technical Details

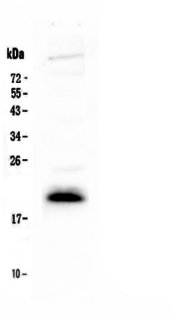
Immunogen	E. coli-derived human IL4 recombinant protein (Position: H25-S153).

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Recommended Detection Systems	Boster recommends Enhanced Chemiluminescent Kit with anti-Rabbit IgG (EK1002) for Western blot.
Cross Reactivity	No cross-reactivity with other proteins.
Isotype	Rabbit IgG
Form	Lyophilized
Concentration	Adding 0.2 ml of distilled water will yield a concentration of 500 ug/ml.
Purification	Immunogen affinity purified.
Suggested Dilutions	Western blot, 0.1-0.5ug/ml ELISA, 0.1-0.5ug/ml

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Anti-IL4 Antibody Picoband® (A00230) Images



Western blot analysis of IL4 using anti-IL4 antibody (A00230). Electrophoresis was performed on a 5-20% SDS-PAGE gel at 70V (Stacking gel) / 90V (Resolving gel) for 2-3 hours. The sample well of each lane was loaded with 50ug of sample under reducing conditions. Lane 1: human CCRF-CEM whole cell lysates. After Electrophoresis, proteins were transferred to a Nitrocellulose membrane at 150mA for 50-90 minutes. Blocked the membrane with 5% Non-fat Milk/ TBS for 1.5 hour at RT. The membrane was incubated with rabbit anti-IL4 antigen affinity purified polyclonal antibody (Catalog # A00230) at 0.5 ug/mL overnight at 4°C, then washed with TBS-0.1%Tween 3 times with 5 minutes each and probed with a goat anti-rabbit IgG-HRP secondary antibody at a dilution of 1:10000 for 1.5 hour at RT. The signal is developed using an Enhanced Chemiluminescent detection (ECL) kit (Catalog # EK1002) with Tanon 5200 system. A specific band was detected for IL4 at approximately 20KD. The expected band size for IL4 is at 17KD.

3 Publications Citing This Product

1. PubMed ID: 25483698, Yan X, Wang D, Liang F, Fu L, Guo C. Hum Vaccin Immunother. 2014;10(12):3491-8. Doi: 10.4161/Hv.36084. Hpv16L1-Attenuated Shigella Recombinant Vaccine Induced Strong Vaginal And Systemic Immune Responses In Guinea Pig Model.

2. PubMed ID: 22387551, Upregulated protein arginine methyltransferase 1 by IL-4 increases eotaxin-1 expression in airway epithelial cells and participates in antigen-induced pulmonary %u2026

3. PubMed ID: 21479676 , Expression of IFN-gamma and IL-4 in the esophageal mucosa of patients with reflux esophagitis and Barrett's esophagus and their relationship with endoscopic and histologic grading

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