

PE/iF594 Anti-Human CD20 Antibody

Catalog Number:	105621, 105622
Size:	25 tests, 100 tests
Target Name:	CD20, MS4A-1, MS4A1
Regulatory Status:	RUO

PRODUCT DETAILS

Clone:	2H7
Application:	Flow Cytometry
Reactivity:	Human
Format:	PE/iF594
Isotype:	Mouse IgG2b
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. PE/iF594 has an excitation max at 565 nm and an emission max at 603 nm.
Excitation Laser:	Blue Laser (488 nm) Green/Yellow laser (532/561nm)
Isotype Control:	301625

BACKGROUND INFORMATION

CD20 is a B cell-specific surface molecule that plays a key role in B cell activation and regulation and is best known as one of the most successful therapeutic targets in immunology and oncology. It is expressed on B cells from the late pre-B cell stage through mature and memory B cells but is absent on early pro-B cells and terminally differentiated plasma cells. This expression pattern makes CD20 an ideal marker for identifying and targeting the majority of circulating and tissue-resident B cells.

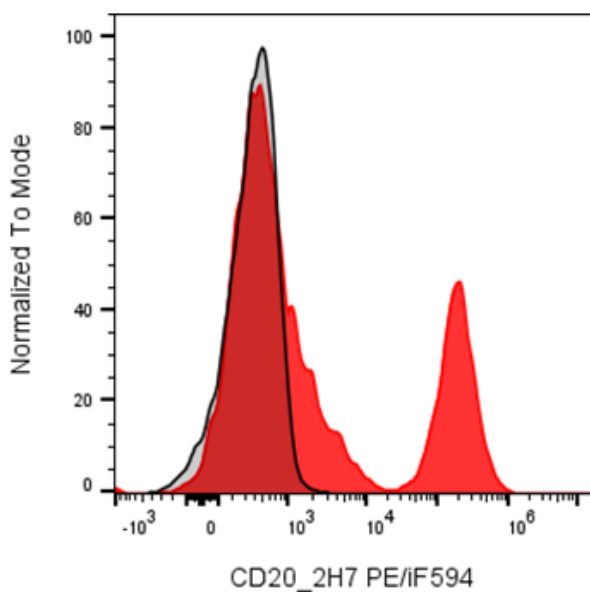
Structurally, CD20 is a small, non-glycosylated integral membrane protein with four transmembrane helices, two extracellular loops, and intracellular N- and C-terminal domains. Unlike many CD molecules, CD20 does not belong to the immunoglobulin superfamily and lacks a long cytoplasmic signaling motif. Instead, CD20 is thought to function as part of a membrane complex involved in ion transport, particularly calcium flux, which is critical for B cell activation and proliferation. Functionally, CD20 contributes to the regulation of B cell receptor (BCR) signaling by influencing calcium entry following antigen engagement. Through modulation of intracellular calcium levels, CD20 affects B cell activation, cell cycle progression, and differentiation. While CD20 is not essential for

B cell development, it plays an important role in optimizing B cell responses during immune activation. A notable feature of CD20 is that it does not have a clearly defined natural ligand. Its activity appears to be mediated through homotypic interactions, association with other membrane proteins, and organization within lipid rafts rather than classical ligand-receptor binding. This lack of ligand has not limited its therapeutic utility, as CD20 is stably expressed and poorly internalized, properties that are advantageous for antibody-based targeting.

CD20 is implicated in a range of diseases characterized by pathological B cell activity. It is highly expressed on most B cell non-Hodgkin lymphomas and chronic lymphocytic leukemia, making it a valuable diagnostic marker. In autoimmune diseases such as rheumatoid arthritis, multiple sclerosis, and systemic lupus erythematosus, autoreactive CD20⁺ B cells contribute to disease progression through autoantibody production and antigen presentation.

Therapeutically, CD20 has revolutionized the treatment of B cell-mediated diseases. Monoclonal antibodies targeting CD20 deplete B cells through mechanisms including antibody-dependent cellular cytotoxicity, complement-dependent cytotoxicity, and induction of apoptosis. CD20-targeted therapies are widely used in hematologic malignancies and autoimmune disorders and have established B cell depletion as a powerful and durable therapeutic strategy.

PRODUCT DATA



Human peripheral blood lymphocytes were stained with PE/iF594 Anti-Human CD20 clone 2H7 (color-filled histogram) or an isotype control (gray histogram).

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