



## Polyclonal Anti-CD40L Sepharose Bead Conjugate)

**Catalogue No.** PA1020-S

**Lot No.** 09J02

**Ig type:** rabbit IgG

**Size:** 100µg/vial

### Specificity

Human, mouse, rat. No cross reactivity with other proteins..

### Recommended application

*(Immunoprecipitation(IP)*

### Immunogen

A synthetic peptide corresponding to a sequence at the N-terminal of human CD40L, different from the relative mouse sequence by three amino acids, rat sequence by four amino acids.

### Purification

Immunogen affinity purified.

### Formulation

50% slurry in PBS pH 7.2 with 0.01mg NaN<sub>3</sub> preservative.

### Storage

Store at 4 °C for frequent use.

### Description:

This Antagene antibody is immobilized via covalent binding of primary amino groups to N-hydroxysuccinimide (NHS)-activated sepharose

## BACKGROUND

CD40 ligand(CD40L) is a type II membrane protein of 261 amino acids on activated T cells that induces B cell proliferation and immunoglobulin secretion. It has homology with tumour necrosis factor-alpha and -beta, and has important functions in B-cell activation and differentiation. Human CD40L with 5 exons, is mapped to the proximal region of the mouse X chromosome on Xq26.3-27.1, and can be detected on T cells but is absent from B cells and monocytes. Since CD40L is expressed on platelets and released from them on activation, its predictive value as a marker for clinical outcome and the therapeutic effect of inhibition of glycoprotein IIb /IIIa receptor in patients with acute coronary syndromes was investigated. The soluble CD40L may be involved in the process of restenosis and that it exerts its effect by triggering a complex group of inflammatory reactions on endothelial and mononuclear cells. CD40L plays a central role in the pathophysiology of acute coronary syndromes, and has a role in the pathogenesis of coronary artery lesions.

## REFERENCE

- 1.Allen,R.C.;Armitage,R.J.;Conley,M.E.;Rosenblatt,H.;Jenkins,N.A.;Copeland,N.G.;Bedell,M.A.;Edelhoff,S.;Disteche,C.M.;Simoneaux,D.K.;Fanslow,W.C.;Belmont,J.;Spriggs,M.K.:CD40 ligand gene defects responsible for X-linked hyper-IgM syndrome. Science 259: 990-993, 1993.
- 2.Cipollone,F.;Ferri,C.;Desideri,G.;Paloscia,L.;Materazzo,G.;Mascellanti,M.;Fazia,M.;Iezzi,A.;Cuccurullo,C.;Pini,B.;Bucci,M.;Santucci,A.;Cuccurullo,F.;Mezzetti,A.:Preprocedural level of soluble CD40L is predictive of enhanced inflammatory response and restenosis after coronary angioplasty. Circulation 108: 2776-2782, 2003.

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