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# Anti-Human IL-8 Azide Free PRODUCT SPECIFICATIONS

**Catalogue N°** | 857.170.000 - 200μg / 200μl

857.170.005 - 500µg / 500µl

Target species | Human

**Specificity** Recognises both natural and recombinant

human IL-8

Clone B-B49

Application | ELISA

**Origin** Recombinant antibody from a phage display

library

Immunisation | Recombinant human IL-8

Quantity 200µg or 500µg (Discovery Size also available

please enquire)

**Isotype** | Mouse IgG1 Kappa light chain

**Format** Phosphate-buffered saline. Sterile-filtered

through 0.22 µm. Carrier and preservative free

**Storage** Stable at +2-8°C for 12 months. For longer

storage freeze aliquots.

Synonym | CXCL8

#### **BACKGROUND**

Interleukin 8 (IL-8) or CXCL8, Monocyte-Derived Neutrophil Chemotactic Factor (MDNCF), Neutrophil Activating Factor (NAF) and NAD-P1 is a chemokine secreted by monocytes, macrophages and endothelial cells. IL-8 chemoattracts and activates neutrophils.

The predominant form of IL-8 is a 8.4kDa protein containing 72 amino acid residues, which includes five additional N-Terminal amino-acids. IL-8 contains the four conserved cysteine residues present in CXC chemokines and also contains the "ELR" motif common to CXC chemokines that binds to CXCR1 and CXCR2.

Data indicate that IL-8 may participate in the pathogenesis of rheumatoid arthritis via the induction of neutrophil-mediated cartilage damage, and psoriasis. A causative involvement of IL-8 is found within a broad range of clinico-pathological conditions: adult respiratory distress syndrome, asthma, bacterial infections, bladder cancer, graft rejection and influenza infection, due to the now known biological properties of IL-8. This cytokine especially in combinations with other

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neutrophil activating agents, may prove helpful in the treatment of patients suffering from granulocytopenia, severe infections against which antibiotics are not effective, and immunodeficiency caused by HIV.

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