

Product Information

Anti-Fas (CD95/Apo-1) antibody, Mouse monoclonal
clone DX2, purified from hybridoma cell culture

Product Number **F4424**

Product Description

Anti-Fas (CD95/Apo-1) (mouse IgG1 isotype) is derived from the DX2 hybridoma produced by the fusion of mouse myeloma cells and splenocytes from C3H mice immunized with murine

L cells transfected by a human Fas/CD95 cDNA.¹ The isotype is determined using Sigma ImmunoType™ Kit (Product Code ISO-1) and by a double diffusion immunoassay using Mouse Monoclonal Antibody Isotyping Reagents (Product Code ISO-2). The antibody is purified from culture supernatant of hybridoma cells grown in a bioreactor.

Anti-Fas (CD95/Apo-1) reacts specifically with the functional epitope of human Fas (CD95/Apo-1) antigen.¹ By immunoblotting, the antibody recognizes the denatured non-reduced 1-173 amino acid residues of a recombinant human Fas preparation. Monoclonal Anti-Human Fas may be used for various immunoassays including immunoblotting, flow cytometry,¹⁻⁵ and may be reactive in the induction of apoptosis.¹

Homeostasis of multicellular organisms is controlled not only by the proliferation and differentiation of cells, but also by cell death. The death of cells during embryogenesis, metamorphosis, endocrine-dependent tissue atrophy, a variety of pathologic conditions, and normal tissue turnover, is called programmed cell death (PCD). Most of PCD proceeds by apoptosis, a process that includes condensation and segmentation of nuclei, condensation and fragmentation of the cytoplasm, and often extensive fragmentation of chromosomal DNA into nucleosome units.⁶ Many cells can be activated to undergo apoptosis following the interaction of selected ligands with cell surface receptors. The most well studied receptors are CD95/Fas/Apo-1 (apoptosis inducing protein 1) and tumor necrosis factor receptor 1

(TNFR1). Apoptosis mediated by both signaling cascades result in activation of a family of cysteine proteases known as Caspases. However, Fas-mediated death occurs much more rapidly than that triggered by the TNFR1. Engagement of Fas by its ligand (Fas ligand, FasL, CD95L), or by an appropriate antibody, results in the rapid induction of PCD in susceptible cell lines. This process bypasses the usual long sequence of signaling enzymes and immediately activates preexisting Caspases.⁷ The action of Fas is mediated via FADD (Fas-associated death domain)/MORT1, an adapter protein that has a death domain at its C-terminus and binds to the cytoplasmic death domain of Fas. Human CD95/Fas/Apo-1 antigen is a single transmembrane glycoprotein receptor of 325 amino acids (45-48 kDa).^{8,9} Primary sequence analysis of the extracellular portion of CD95/Fas/Apo-1 has revealed strong homologies with the extracellular domain of receptors belonging to the TNF receptor family, which includes TNF receptor types 1 and 2 (TNFR1/2), the low affinity nerve growth factor receptor, and lymphocyte receptors such as CD27, CD30, CD40, and OX40.^{8,9} An integral membrane protein, with strong homology to TNF- α and - β , has been identified as Fas ligand.¹ A moderate degree of homology (26% identity in a stretch of 65 amino acids) between the intracellular portion of the human CD95 and the 55 kDa TNFR1, has been observed. Mutational analysis of this domain has revealed its involvement in the generation of the apoptotic signal from both CD95 and TNFR1.¹ Thus, a common effector may transduce the apoptotic signal from both receptors.

The cellular pathways that control apoptosis are critical to the maturation, selection, and survival of lymphocytes. Apoptosis, or cell suicide, is the physiological mode of lymphoid cell death in circumstances like negative selection of T cells in the thymus, ligation of CD4 and CD3 in mature T cells, downregulation of the immune response, clonal deletion

of B cells by antigen, death of killer cell targets, cytokine-mediated killing, and tumor regression. Fas is expressed on a number of lymphoma cell lines, on Epstein-Barr virus-transformed B lymphoblasts, and on a proportion of activated B and T cells. Upon contact with an anti-Fas antibody, some lymphocytes expressing Fas antigen undergo apoptosis.^{10,11} Fas has also been detected in soluble form and this form of the protein is thought to play a role in regulating certain aspects of immune system function. Elevated levels of soluble Fas have been detected in sera from patients with leukemic diseases, as well as in patients with systemic lupus erythematosus. Therefore, altered levels of secreted Fas protein is likely to be involved in the abnormal growth regulation of lymphoid cells. The production of excess soluble Fas protein would prevent cells from undergoing Fas ligand induced apoptosis and thereby permit tumor cells to escape immunosurveillance. Antibodies reacting specifically with CD95 (Fas, Apo-1) are useful tools in the study of the intracellular pathways leading from membrane receptor engagement to apoptotic cell death, the tissue distribution and developmental expression pattern of Fas, and its essential role during mammalian development especially in immune system homeostasis.

Reagent

Monoclonal Anti-Human Fas (CD95/Apo-1) is supplied as a solution in 0.01 M phosphate buffered saline, pH 7.4, containing 15 mM sodium azide.

Antibody Concentration: Approx. 2 mg/ml

Precautions and Disclaimer

For R&D use only. Not for drug, household, or other uses. Please consult the Material Safety Data Sheet for information regarding hazards and safe handling practices

Storage/Stability

For continuous use, store at 2-8 °C for up to one month. For extended storage, freeze in working aliquots. Repeated freezing and thawing is not recommended. Storage in "frost-free" freezers is not recommended. If slight turbidity occurs upon prolonged storage, clarify the solution by centrifugation before use.

Product Profile

Working concentration is 4-20 µg/ml as determined by flow cytometry, using cultured human Burkitt's lymphoma Raji cells. When assayed by flow cytometric analysis (with a FACScan flow cytometer), using 10 µl of antibody at working concentration, to stain 1x10⁶ cells/0.1ml/test, a fluorescent intensity is observed similar to that obtained with saturating antibody levels. The percentage population positive is also at the maximum percentage positive, using saturating antibody levels.

Note: In order to obtain the best results in various techniques and preparations, we recommend determining optimal working dilutions by titration test.

References

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