

Anti-GM-CSF/CSF2 Antibody (6J807)

Product Details

Ig Type:	Rabbit IgG
Reactivity:	Human
Conjugation:	Unconjugated
Clone:	6J807
Purification:	Protein A

Applications

Application:	ELISA
Recommended	ELISA: 1:5000-1:10000

Properties

Stability & Storage:	Store at 2°C-8°C for 1 month. Store at -20°C or -80°C for 12 months. Avoid repeated freeze-thaw cycles. Preservative-Free.
Shipping:	Shipping with blue ice.

Antigen Details

Immunogen:	Recombinant Protein: Human GM-CSF / CSF2 protein (TMPY-02466)
Antigen Species:	Human
Synonyms:	GM-CSF;CSF2;GMCSF;colony stimulating factor 2 (granulocyte-macrophage)
Biology Area:	Cancer Drug Targets

Research Background

Granulocyte-macrophage colony-stimulating factor (GM-CSF) is one of an array of cytokines with pivotal roles in embryo implantation and subsequent development. Several cell lineages in the reproductive tract and gestational tissues synthesise GM-CSF under direction by ovarian steroid hormones and signalling agents originating in male seminal fluid and the conceptus. The pre-implantation embryo, invading placental trophoblast cells and the abundant populations of leukocytes controlling maternal immune tolerance are all subject to GM-CSF regulation. GM-CSF stimulates the differentiation of hematopoietic progenitors to monocytes and neutrophils, and reduces the risk for febrile neutropenia in cancer patients. GM-CSF also has been shown to induce the differentiation of myeloid dendritic cells (DCs) that promote the development of T-helper type 1 (cellular) immune responses in cognate T cells. The active form of the protein is found extracellularly as a homodimer, and the encoding gene is localized to a related gene cluster at chromosome region 5q31 which is known to be associated with 5q-syndrome and acute myelogenous leukemia. As a part of the immune/inflammatory cascade, GM-CSF promotes Th1 biased immune response, angiogenesis, allergic inflammation, and the development of autoimmunity, and thus worthy of consideration for therapeutic target. GM-CSF has been utilized in the clinical management of multiple disease processes. Most recently, GM-CSF has been incorporated into the treatment of malignancies as a sole therapy, as well as a vaccine adjuvant. While the benefits of GM-CSF in this arena have been promising, recent reports have suggested the potential for GM-CSF to induce immune suppression and, thus, negatively impact outcomes in the management of cancer patients. GM-CSF deficiency in pregnancy adversely impacts fetal and placental development, as well as progeny viability and growth after birth, highlighting this cytokine as a central maternal

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determinant of pregnancy outcome with clinical relevance in human fertility. Cancer Immunotherapy Immune Checkpoint Immunotherapy Targeted Therapy

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