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FITC Anti-Human CD20 Antibody

Catalog Number:	101307, 101308
Size:	25 tests, 100 tests
Target Name:	CD20, MS4A-1
Regulatory Status:	RUO

PRODUCT DETAILS

Clone:	020AR1
Application:	Flow Cytometry
Reactivity:	Human
Format:	FITC
Isotype:	Rat IgG1
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. FITC has an excitation max at 493 nm and an emission max at 525 nm.
Excitation Laser:	Blue Laser (488 nm)
Isotype Control:	303405
GeneID:	931
RRID:	AB_3758797

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.

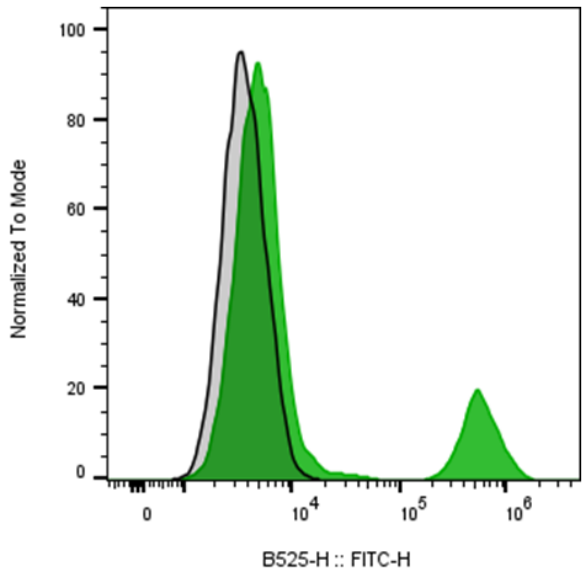
Structurally, CD20 is a small, non-glycosylated integral membrane protein with four transmembrane helices, two extracellular loops, and intracellular N- and C-terminal domains. Unlike many CD molecules, CD20 does not belong to the immunoglobulin superfamily and lacks a long cytoplasmic signaling motif. 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 Mononuclear Cells was stained with FITC Anti-Human CD20 clone 020AR1 (color-filled histogram) or an isotype control (gray histogram).

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