

Recombinant Human Interleukin-2 (IL-2), Animal Component-Free

Cat. No. :	H005C
Alternative Names:	IL2; Interleukin-2; IL-2; Interleukin 2; T-cell growth factor; TCGF; Aldesleukin
Species:	Human
Accession No.:	P60568
Expression System:	CHO
Protein Sequence:	Ala21-Thr153
Theoretical MW:	15.42 kDa
Theoretical pI:	7.05
Tag:	Tag-Free.
Formulation buffer:	PBS, 5% Mannitol and 0.01% Tween 80, pH7.4.
Appearance:	Lyophilized Powder.
Purity:	≥95% as determined by SDS-PAGE.
Bioactivity:	It has a specific activity of $\geq 1 \times 10^7$ IU/mg, as determined by a cell proliferation assay using CTLL-2 murine cytotoxic T cells.
Endotoxin Level:	≤0.01 EU/μg, as determined by the LAL assay.
Application:	Cell Culture; Activity Assays.

Preparation & Storage

Reconstitution:	<p>Reconstitute with sterile double-distilled water (ddH₂O).</p> <p>⚠ Centrifuge the vial briefly before opening to ensure full recovery of the solution. Avoid vortexing and minimize vigorous pipetting to maintain protein stability.</p> <p>❄ Immediately aliquot the reconstituted protein solution and store under recommended conditions. Avoid repeated freeze-thaw cycles.</p>
Shipping:	Shipped on dry ice. Short-term transit on cold packs (2-8°C) is acceptable.
Storage:	<p>Use a manual defrost freezer and avoid repeated freeze-thaw cycles.</p> <ul style="list-style-type: none"> ● 12 months from date of receipt, -20 to -80°C as supplied. ● 2-7 days at 2 to 8°C under sterile conditions after reconstitution. ● 3-6 months at -20 to -80°C under sterile conditions after reconstitution.

Protein Description

Background: Interleukin-2 (IL-2) is a 15.5 kDa cytokine primarily secreted by activated CD4⁺ T cells and essential for T-cell proliferation, differentiation, and immune regulation. It signals through a receptor complex composed of IL-2Rα (CD25), IL-2Rβ (CD122), and the common γ-chain (γc, CD132). High-affinity binding (requiring all three subunits) is constitutively expressed on regulatory T cells (Tregs), making them highly sensitive to low IL-2 levels for survival and suppressive function. In contrast, effector T cells and NK cells express only the intermediate-affinity βγ dimer and require high-dose IL-2 for activation and cytotoxicity.

Thus, IL-2 uniquely bridges immune activation and tolerance. Clinically, recombinant IL-2 (aldesleukin) is approved for metastatic melanoma and renal cell carcinoma but limited by toxicity and Treg-mediated immunosuppression. Next-generation “biased” IL-2 variants engineered to selectively engage CD122/γc-sparing CD25—are in development to enhance anti-tumor immunity while minimizing Treg expansion.

References:

1. Smith, K. A. (1988). Interleukin-2: inception, impact, and implications. *Science*, 240(4856), 1169-1176.
2. Malek, T. R., & Castro, I. (2010). Interleukin-2 receptor signaling: at the interface between tolerance and immunity. *Immunity*, 33(2), 153-165.
3. Boyman, O., & Sprent, J. (2012). The role of interleukin-2 in autoimmunity and cancer. *Nature Reviews Immunology*, 12(3), 180-190.
4. Charych, D. H., et al. (2016). NKTR-214, an engineered cytokine with biased IL-2 receptor binding. *Clinical Cancer Research*, 22(3), 680-690.
5. Waldmann, T. A. (2006). The biology of interleukin-2 and interleukin-15. *Nature Reviews Immunology*, 6(8), 595-601.

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