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# Biotin Human CD22 Protein (C-Fc-Avi)

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| **Catalog Number:** | 801903, 801904 |
| **Size:** | 25 ug, 100 ug |
| **Target Name:** | CD22, SIGLEC2, BL-CAM |
| **Regulatory Status:** | RUO |

## PRODUCT DETAILS

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| **Application:** | ELISA, BLI |
| **Format:** | Liquid, Biotinylated |
| **Expression Host:** | CHO |
| **Species:** | Human |
| **Sources:** | Human CD22 protein (Asp20-Arg687) with C-terminus Fc-Avi tag is expressed in CHO cells. This protein was site-specifically labeled with Biotin by BirA ligase. |
| **Accession Number:** | P20273 |
| **Molecular Weight:** | The protein has a predicted molecular weight of 103 kDa. Under DTT-reducing conditions, it migrates at approximately 130-150 kDa on SDS-PAGE. |
| **Affinity Tag:** | C-Fc-Avi |
| **Purity:** | >95% based on SDS-PAGE under reducing condition |
| **Formulation:** | 1xPBS buffer, pH7.4, 0.22 μm filtered |
| **Endotoxin level:** | Not tested |
| **Protein Concentration:** | 25μg size is bottled at 0.2mg/mL concentration. 100 μg size is supplied at a lot-specific concentration. |
| **Storage and Handling:** | Briefly centrifuge the vial upon receipt. An unopened vial can be stored at 4°C for up to 2 weeks, or at -20°C or below for up to six months. The protein may be further diluted to 0.1 mg/mL using 0.22 μm-filtered PBS buffer (pH 7.4). For long-term storage, the diluted stock solution should be aliquoted and stored at ≤ –70°C to minimize freeze-thaw cycles. If additional dilution is required, carrier proteins such as FBS or BSA should be added to maintain protein stability. |
| **Recommended Usage:** | For detection, use a secondary reagent with this product. |

## BACKGROUND INFORMATION

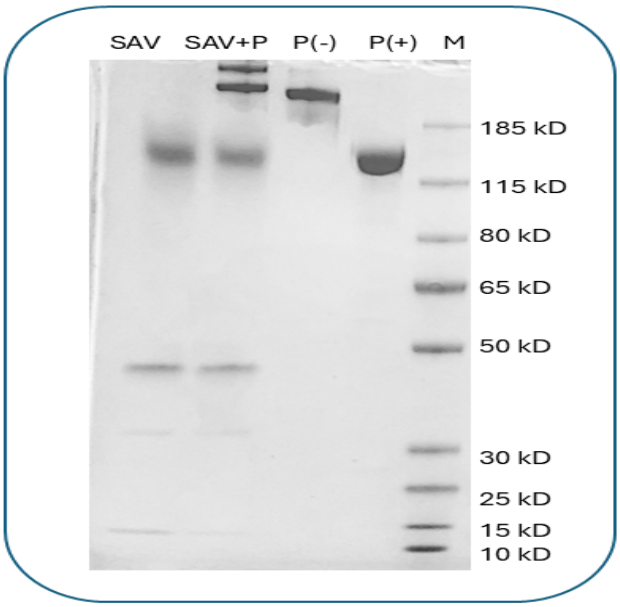
CD22 is a B cell–specific transmembrane glycoprotein that functions as an important regulator of B cell receptor (BCR) signaling and immune tolerance. Also known as Siglec-2, CD22 belongs to the sialic acid–binding immunoglobulin-like lectin (Siglec) family and is expressed almost exclusively on mature B cells, with expression increasing as B cells progress from the naïve to mature stages. Through its inhibitory signaling capacity, CD22 helps fine-tune B cell activation and prevent inappropriate immune responses.

Structurally, CD22 is a type I transmembrane protein with a large extracellular region composed of seven immunoglobulin-like domains. The N-terminal domain mediates binding to sialic acid–containing glycans, which serve as its primary ligands. CD22 preferentially recognizes α2,6-linked sialic acids that are commonly present on glycoproteins and glycolipids expressed on B cells themselves (cis interactions) as well as on neighboring cells (trans interactions). The cytoplasmic tail of CD22 contains multiple immunoreceptor tyrosine-based inhibitory motifs (ITIMs), which are essential for its signaling function. Functionally, CD22 acts as a negative regulator of BCR signaling. Upon BCR engagement, CD22 becomes phosphorylated and recruits phosphatases such as SHP-1 to its ITIM motifs. These phosphatases attenuate downstream signaling pathways, thereby raising the threshold for B cell activation. Through this mechanism, CD22 contributes to the maintenance of B cell tolerance and limits excessive antibody production. CD22 also influences B cell survival, migration, and interactions within lymphoid tissues.

Dysregulation of CD22 expression or signaling has been linked to immune-mediated diseases and malignancy. Reduced CD22 function can lead to hyperactive B cells and has been associated with autoimmune diseases such as systemic lupus erythematosus. In contrast, CD22 is frequently overexpressed on B cell malignancies, including B cell acute lymphoblastic leukemia (B-ALL) and certain non-Hodgkin lymphomas, making it an attractive diagnostic and therapeutic target.

CD22 plays a significant role in therapeutics, particularly in the treatment of B cell cancers. Antibody-based therapies targeting CD22 have been developed to selectively eliminate malignant B cells. Notably, antibody–drug conjugates and immunotoxins that bind CD22 deliver cytotoxic agents directly to cancerous B cells, sparing most non–B cell populations. CD22 is also being explored as a target for engineered cell therapies and for strategies aimed at modulating B cell activity in autoimmune disease. Together, these approaches highlight CD22 as a key molecule at the intersection of B cell biology, disease, and targeted therapy.

## PRODUCT DATA




Human CD22 (C-Fc-Avi) was biotinylated in vitro using BirA ligase. SDS-PAGE analysis under reducing (P+) and non-reducing (P−) conditions shows the protein has a purity greater than 95%. A gel shift assay using co-incubation with streptavidin indicates that the biotinylation efficiency of the CD22 protein exceeds 90%.

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