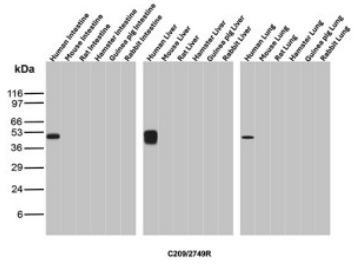
DC-SIGN Antibody for Western Blot [clone C209/2749R] (V7418)

Catalog No.	Formulation	Size
V7418-100UG	0.2 mg/ml in 1X PBS with 0.1 mg/ml BSA (US sourced) and 0.05% sodium azide	100 ug
V7418-20UG	0.2 mg/ml in 1X PBS with 0.1 mg/ml BSA (US sourced) and 0.05% sodium azide	20 ug
V7418SAF-100UG	1 mg/ml in 1X PBS; BSA free, sodium azide free	100 ug
V7418IHC-7ML	Prediluted in 1X PBS with 0.1 mg/ml BSA (US sourced) and 0.05% sodium azide; *For IHC use only*	7 ml

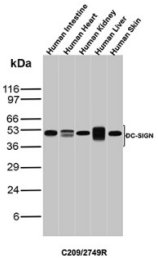
Recombinant RABBIT MONOCLONAL

Bulk quote request

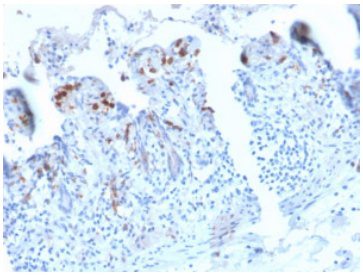
Availability	1-3 business days
Species Reactivity	Human
Format	Purified
Host	Rabbit
Clonality	Recombinant Rabbit Monoclonal
Isotype	Rabbit IgG, kappa
Clone Name	C209/2749R
Purity	Protein A affinity chromatography
UniProt	Q9NNX6
Localization	Plasma membrane, secreted
Applications	Immunohistochemistry (FFPE) : 0.5-1ug/ml for 30 min at RT Western Blot : 2-4ug/ml
Limitations	This DC-SIGN Antibody for Western Blot is available for research use only.



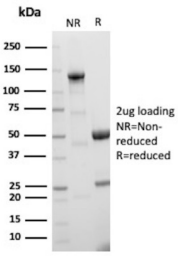
DC-SIGN Antibody C209/2749R in Human, Mouse, Rat, Hamster, Guinea Pig and Rabbit Tissues WB. Western blot testing of recombinant clone C209/2749R in intestine, liver and lung tissue lysates from human, mouse, rat, hamster, guinea pig and rabbit. A prominent DC-SIGN/CD209 band is observed at approximately 48-50 kDa in human intestine, liver and lung, while no corresponding signal is detected in the tested non-human species. These results demonstrate human-specific detection of DC-SIGN by clone C209/2749R under the tested conditions.



DC-SIGN Antibody C209/2749R in Human Intestine, Heart, Kidney, Liver and Skin WB. Western blot testing of recombinant clone C209/2749R in human intestine, heart, kidney, liver and skin tissue lysates. A prominent DC-SIGN/CD209 band is observed at approximately 48-50 kDa across the tested tissues, with particularly strong signal in liver. The observed migration is consistent with the glycosylated nature of DC-SIGN, a C-type lectin receptor with a predicted molecular weight of approximately 46 kDa.



DC-SIGN Antibody C209/2749R in Human Small Intestine IHC. Immunohistochemistry testing of recombinant clone C209/2749R in FFPE human small intestine tissue. HIER was performed by boiling tissue sections in 10 mM Tris with 1 mM EDTA, pH 9, for 10-20 min followed by cooling at RT for 20 min. Distinct immunoreactivity is observed in scattered cells within the intestinal mucosa, while the secondary-only control inset shows minimal background staining.



Purified DC-SIGN Antibody C209/2749R SDS-PAGE. Electrophoretic analysis of 2.5 ug of purified, BSA-free recombinant clone C209/2749R under non-reducing (NR) and reducing (R) conditions. The non-reduced sample shows predominantly intact antibody at approximately 100 kDa under the conditions shown, while reduction produces the expected immunoglobulin heavy and light chain bands at approximately 50 and 25 kDa, respectively, demonstrating the integrity and purity of the antibody preparation.

Description

DC-SIGN Antibody for Western Blot products provide researchers with antibodies validated for detection of DC-SIGN, also known as CD209, by Western blot. DC-SIGN is a type II transmembrane C-type lectin receptor encoded by the CD209 gene. It is expressed prominently by subsets of dendritic cells and macrophages and participates in cell adhesion, immune recognition and interactions between antigen-presenting cells and pathogens.

DC-SIGN contains an intracellular N-terminal region, a transmembrane domain, an extracellular neck region and a C-terminal carbohydrate recognition domain. The receptor recognizes mannose- and fucose-containing glycans on endogenous proteins as well as glycan structures displayed by numerous microorganisms. Through these carbohydrate-dependent interactions, DC-SIGN contributes to pathogen recognition and modulation of innate and adaptive immune responses. CD209 can also interact with cellular ligands including ICAM proteins, linking the receptor to dendritic cell adhesion and immune-cell communication.

Western blot analysis provides a useful approach for examining DC-SIGN protein expression in cell and tissue lysates. The human CD209 polypeptide has a calculated molecular weight of approximately 46 kDa, although DC-SIGN is glycosylated and can migrate at a higher or somewhat heterogeneous apparent molecular weight by SDS-PAGE. Researchers should therefore consider both the predicted protein mass and the established post-translational processing of the receptor when interpreting DC-SIGN Western blot results.

NSJ Bioreagents offers multiple DC-SIGN Antibody for Western Blot options, including monoclonal, recombinant monoclonal and polyclonal antibodies validated using human cells and tissues. Available Western blot data include detection in samples such as intestine, lung and liver, providing researchers with experimental evidence to help select an antibody appropriate for their study. Individual product pages provide antibody-specific validation images, sample information and recommended testing conditions.

Selection of a CD209 antibody for Western blot should consider factors including antibody format, clone, species reactivity, sample type and observed banding pattern. Recombinant monoclonal antibodies can provide a sequence-defined reagent for studies requiring consistent long-term antibody production, while conventional monoclonal and polyclonal reagents provide additional options for different experimental requirements. Reviewing WB validation from biologically relevant samples can help researchers identify the most appropriate reagent for their experimental system.

Beyond its value as an immune-cell marker, DC-SIGN is widely studied in dendritic cell biology, innate immunity, infectious disease and host-pathogen interactions. Its ability to recognize diverse glycan-containing ligands has made CD209 particularly important for investigating mechanisms through which pathogens interact with antigen-presenting cells and influence immune responses. A DC-SIGN Antibody for Western Blot enables researchers to examine expression of this C-type lectin receptor while complementing studies using immunohistochemistry, immunofluorescence and other antibody-based methods.

For broader research on CD209 expression, dendritic cell biology and pathogen recognition, see our DC-SIGN Antibody / Dendritic Cell Marker Antibody page.

Application Notes

Optimal dilution of the DC-SIGN Antibody for Western Blot should be determined by the researcher.

1. The prediluted format is supplied in a dropper bottle and is optimized for use in IHC. After epitope retrieval step (if required), drip mAb solution onto the tissue section and incubate at RT for 30 min.

Immunogen

Recombinant human protein was used as the immunogen for the DC-SIGN antibody.

Storage

Store the DC-SIGN antibody at 2-8oC (with azide) or aliquot and store at -20oC or colder (without azide).

Alternate Names

CD209 Antibody for Western Blot, DC-SIGN1 Antibody for Western Blot, Dendritic Cell-Specific ICAM-3-Grabbing Non-Integrin Antibody for Western Blot, C-Type Lectin Domain Family 4 Member L Antibody for Western Blot, CLEC4L Antibody for Western Blot, CD209 Antibody for WB

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