

# **Screening Libraries**

**Proteins** 



# **Product** Data Sheet



# IL-8/CXCL8 Protein, Human (HEK293, His)

Cat. No.: HY-P70569

Synonyms: Interleukin-8; IL-8; C-X-C Motif Chemokine 8; CXCL8; Emoctakin; Granulocyte Chemotactic

Protein 1; GCP-1; Monocyte-Derived Neutrophil Chemotactic Factor; MDNCF; Monocyte-Derived

Neutrophil-Activating Peptide; MONAP; Neutrophil-Activating Protein 1; NAP-1

Species: Human **HEK293** Source:

P10145 (E21-S99) Accession:

Gene ID: 3576

Molecular Weight: Approximately 14.0 kDa

# **PROPERTIES**

**AA Sequence** 

EGAVLPRSAK ELRCQCIKTY SKPFHPKFIK ELRVIESGPH CANTEIIVKL SDGRELCLDP KENWVORVVE KFLKRAENS

**Appearance** 

Lyophilized powder.

**Formulation** 

Lyophilized from a 0.2 µm filtered solution of 20 mM PB, 150 mM NaCl, pH 7.4.

**Endotoxin Level** 

<1 EU/µg, determined by LAL method.

Reconsititution

It is not recommended to reconstitute to a concentration less than 100 µg/mL in ddH<sub>2</sub>O. For long term storage it is recommended to add a carrier protein (0.1% BSA, 5% HSA, 10% FBS or 5% Trehalose).

Storage & Stability

Stored at -20°C for 2 years. After reconstitution, it is stable at 4°C for 1 week or -20°C for longer (with carrier protein). It is recommended to freeze aliquots at -20°C or -80°C for extended storage.

**Shipping** 

Room temperature in continental US; may vary elsewhere.

# **DESCRIPTION**

Background

IL-8 (CXCL8) belongs to the ELR<sup>+</sup> CXC chemokines family. IL-8 is initially produced as a protein of 99 amino acids that undergoes cleavage to form active IL-8 isoforms, a 77 amino acid peptide in non-immune cells or a 72 amino acid peptide in monocytes and macrophages. The gene encoding IL-8 is located on chromosome 4q13-q21. Dimerisation of IL-8 forms the structural basis for receptor binding. IL-8 is expressed by various cells including monocytes, macrophages, leukocytes, endothelial cells, and epithelial cells<sup>[1][2][3]</sup>.

Mature human IL-8/CXCL8 shares 75% amino acid sequence identity with canine IL-8/CXCL8. While, human IL-8 shares 94.95% aa sequence identity with Rhesus Macaque IL-8 protein.

IL-8 is responsible for the recruitment and activation of neutrophils and granulocytes to the site of inflammation. IL-8 is almost undetectable in physiological states, but is rapidly induced by pro-inflammatory cytokines such as TNF $\alpha$  and IL-1 $\beta$ . The function of IL-8 mainly relies on its interaction with specific cell surface GPCR, CXCR1 and CXCR2. In addition, IL-8 is

Page 1 of 2

reported to promote integrin β3 upregulation and the invasion of hepatocellular carcinoma cells through activation of the PI3K/Akt pathway. In odontogenic lesions, IL-8 has been proven to be highly expressed in ameloblastoma epithelial cells and irreversible pulpitis. In rheumatoid arthritis and other inflammatory joint diseases IL-8 could bring about the accumulation of neutrophils, which are considered a major source of cartilage-degrading enzymes. IL-8 stimulates the MAPK and tyrosine phosphorylation of cellular proteins. Tumour cells and fibroblasts communicate with each other, including autocrine and paracrine factors, including IL-8, resulting in the upregulation of MMP2 and MMP9 degradable extracellular matrix (ECM) components that trigger tumour invasion<sup>[1][2][3][4]</sup>.

IL-8 is typically known to promote angiogenesis, but it also activates matrix metalloproteinase (MMP) that is involved in metastasisrelated tissue remodelling. IL-8 is induced in lipopolysaccharide (LPS)-stimulated monocytes and shown to induce neutrophil migration. IL-8 exerts multiple effects on biological activities of tumour cells including proliferation, invasion and migration. IL-8 also increases the expression of Akt in androgen-independent prostate cancer (AIPC) cell lines. IL-8 activates MAPK signalling via PI3K in neutrophils, and via transactivation of EGFR resulting in Ras-GTPase activation in ovarian and lung cancer cell lines. There is substantial amount of experimental data suggesting that IL-8 and receptors contribute to elimination of pathogens, but may also contribute significantly to disease-associated processes, including tissue injury, fibrosis, angiogenesis and tumorigenesis<sup>[3][5]</sup>.

# **REFERENCES**

- [1]. M Baggiolini, et al. Neutrophil-activating peptide-1/interleukin 8, a novel cytokine that activates neutrophils. J Clin Invest. 1989 Oct;84(4):1045-9.
- [2]. M Wolf, et al. Granulocyte chemotactic protein 2 acts via both IL-8 receptors, CXCR1 and CXCR2. Eur J Immunol. 1998 Jan;28(1):164-70.
- [3]. Qian Liu, et al. The CXCL8-CXCR1/2 pathways in cancer. Cytokine Growth Factor Rev. 2016 Oct;31:61-71.
- [4]. Jian-Feng Liu, et al. IL-8 Is Upregulated in the Tissue-Derived EVs of Odontogenic Keratocysts. Biomed Res Int. 2022 Jul 30;2022:9453270.
- [5]. Remo C Russo, et al. The CXCL8/IL-8 chemokine family and its receptors in inflammatory diseases. Expert Rev Clin Immunol. 2014 May;10(5):593-619.
- [6]. Hai Jiang, et al. CXCL8 promotes the invasion of human osteosarcoma cells by regulation of PI3K/Akt signaling pathway. APMIS. 2017 Sep;125(9):773-780.
- [7]. L Laterveer, et al. Rapid mobilization of hematopoietic progenitor cells in rhesus monkeys by a single intravenous injection of interleukin-8. Blood. 1996 Jan 15:87(2):781-8.

Caution: Product has not been fully validated for medical applications. For research use only.

Tel: 609-228-6898 Fax: 609-228-5909 E-mail: tech@MedChemExpress.com Address: 1 Deer Park Dr, Suite Q, Monmouth Junction, NJ 08852, USA

Page 2 of 2 www.MedChemExpress.com