

## IL-36 beta/IL-1F8 Protein, Human (His)

Cat. No.:	HY-P74803
Synonyms:	Il36b; Fil1e; Il1f8; Interleukin-36 beta; Interleukin-1 family member 8; IL-1F8
Species:	Human
Source:	E. coli
Accession:	Q9NZH7-2 (K5-E157)
Gene ID:	27177
Molecular Weight:	Approximately 20 kDa

PROPERTIES	
Appearance	Lyophilized powder.
Formulation	Lyophilized from a 0.2 μm filtered solution of PBS, pH 7.4. Normally 5 % - 8 % trehalose, mannitol and 0.01% Tween 80 are added as protectants before lyophilization.
Endotoxin Level	<1 EU/µg, determined by LAL method.
Reconsititution	It is not recommended to reconstitute to a concentration less than 100 $\mu\text{g}/\text{mL}$ in ddH_2O.
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	
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Background	<ul> <li>IL-36 beta (IL-1F8), a subform of IL-36 family, belongs to IL-1 superfamily. IL-36 beta is expressed in monocytes, T/B-lymphocytes, bone-marrow, tonsils, heart, lung, testis, colon, neuron cells, glial cells<sup>[3]</sup>.</li> <li>The sequence of amino acids in IL-36 beta differs in different species. Human IL-36 beta shares &lt;40% as sequence identity with mouse.</li> <li>L-36 beta binds to IL-36R and recruits the co-receptor IL-1RAcP. So that heterodimeric signaling complex brings Toll/IL-1R (TIR) domains of the 2 receptor chains in close proximity, and thereby activating NF-κB and MAPK signaling pathways<sup>[1]</sup>. But the activation requires N-terminal cleavage at Arg5 by neutrophil granule-derived proteases, such as cathepsin G, elastase and proteinase-3<sup>[2]</sup>. IL-36β plays a role cell maturation in human bone marrow mononuclear cells and DC cells. IL-36β is associated with the development of inflammatory bowel disease (IBD). The serum levels of IL36β are usually higher in patients with IBD<sup>[4]</sup>.</li> <li>IL-36 beta is a pro-inflammatory factor. IL-36 beta mediates inflammatory response through the activation of NF-κB and MAPK signaling pathway<sup>[2]</sup>.</li> </ul>

[1]. Bassoy EY, et al. Regulation and function of interleukin-36 cytokines. Immunol Rev. 2018 Jan;281(1):169-178.

[2]. Zhou L,et al. Interleukin-36: Structure, Signaling and Function. Adv Exp Med Biol. 2021;21:191-210.

[3]. Gresnigt MS, et al. Biology of IL-36 cytokines and their role in disease. Semin Immunol. 2013 Dec 15;25(6):458-65.

[4]. Zhu J, et al. Interleukin-36β exacerbates DSS-induce acute colitis via inhibiting Foxp3+ regulatory T cell response and increasing Th2 cell response. Int Immunopharmacol. 2022 Jul;108:108762.

[5]. Carrier Y, et al. Inter-regulation of Th17 cytokines and the IL-36 cytokines in vitro and in vivo: implications in psoriasis pathogenesis. J Invest Dermatol. 2011 Dec;131(12):2428-37.

[6]. Penha R, et al. IL-36 receptor is expressed by human blood and intestinal T lymphocytes and is dose-dependently activated via IL-36β and induces CD4+ lymphocyte proliferation. Cytokine. 2016 Sep;85:18-25.

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

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