Product Data Sheet

Anifrolumab

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	 Anifrolumab (67.7 nM; 20 min) induces sustained reduction of surface IFNAR1 and abrogates STAT1 phosphorylation^[2]. Anifrolumab (1 and 10 µg/mL; 6 or 7 d) suppresses differentiation of B cells into plasma cells^[2]. Anifrolumab inhibits type I IFN-induced ISRE signaling, with IC₅₀s ranging from 0.004 to 0.3 nM for the IFN-α subtypes, and 0.03 nM and 0.07 nM for IFN-β and IFN-ω, respectively^[2]. Anifrolumab (67.7 nM) dose-dependently inhibits IFN-α production from pDCs in response to CpG-A or DNA-IC stimulation, inhibiting 87-95% of IFN-α production^[2]. MCE has not independently confirmed the accuracy of these methods. They are for reference only. Western Blot Analysis^[2] 	
Cell Line:	Peripheral blood mononuclear cells (PBMCs)	
Concentration:	67.7 nM	
Incubation Time:	20 min	
Result:	Abrogated IFN- α 2-dependent and pDC supernatant-dependent STAT1 phosphorylation.	
Cell Differentiation Assay ^[2]		
Cell Line:	Plasmacytoid dendritic cell (pDC)	
Concentration:	1 and 10 μg/mL	
Incubation Time:	6 or 7 days	
Result:	Inhibited pDC-mediated plasma cell differentiation in a dose-dependent manner, with a mean 76% reduction in plasma cell number relative to control antibody.	

REFERENCES



[1]. Furie R, et al. Anifrolumab, an Anti-Interferon-α Receptor Monoclonal Antibody, in Moderate-to-Severe Systemic Lupus Erythematosus. Arthritis Rheumatol. 2017 Feb;69(2):376-386.

[2]. Riggs JM, et al. Characterisation of anifrolumab, a fully human anti-interferon receptor antagonist antibody for the treatment of systemic lupus erythematosus. Lupus Sci Med. 2018 Apr 5;5(1):e000261.

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

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