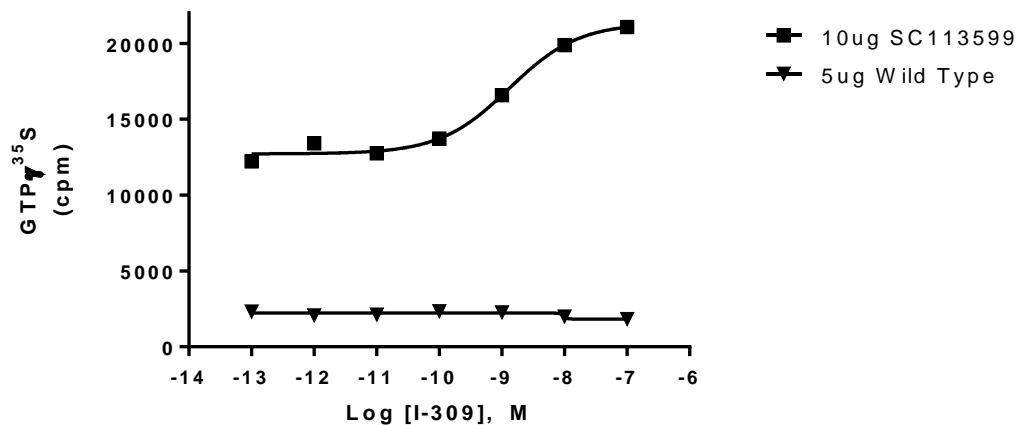


**PRODUCT DATASHEET**
**ChemiScreen™ CCR8 Chemokine Membrane Preparation**

<b>CATALOG NUMBER:</b>	HTS013M	<b>QUANTITY:</b>	200 units
<b>LOT NUMBER:</b>	SC113599	<b>VOLUME/CONCENTRATION:</b>	1 mL, 2 mg/mL

**BACKGROUND:** CCR8 is a GPCR that binds primarily to the chemokine I-309 (CCL1) (Roos *et al.*, 1997). CCR8 is expressed primarily on Th2 cells, although its functional role in T cell recruitment to sites of allergic inflammation is controversial (Chensue *et al.*, 2001; Goya *et al.*, 2003). CCR8+ T-cells are abundant in skin and rare or absent in the GI tract and peripheral blood, indicating a role in skin-homing of T-cells (Schaerli *et al.*, 2004). In addition, monocyte-derived dendritic cells express CCR8 and utilize CCR8 during mobilization from skin to the lymph node (Qu *et al.*, 2004). CCR8 membrane preparations are crude membrane preparations made from our proprietary stable recombinant cell lines to ensure high-level of GPCR surface expression; thus, they are ideal HTS tools for screening of antagonists of CCR8 interactions with I-309.

**APPLICATION:** GTP $\gamma$ S Binding Assay



**Figure 1. Binding of [<sup>35</sup>S]-GTP $\gamma$ S to CCR8 Membrane Preparation.** 10  $\mu$ g/well of CCR8 Membrane Preparation (catalog # HTS013M) was incubated with 0.3 nM [<sup>35</sup>S]-GTP $\gamma$ S and increasing amounts of unlabeled I-309. Bound radioactivity was determined by filtration and scintillation counting. Sample data from a representative lot SC113599.

**SPECIFICATIONS:** 1 unit = 10 µg membrane preparation  
EC50 in GTP $\gamma$ S binding assay by I-309: ~1.3nM  
Signal window: >2500 cpm

**Species:** Human CCR8 (Accession number U45983)

**HOST CELLS:** Chem-1, an adherent mammalian cell line without any endogenous CCR8 expression.

**RECOMMENDED ASSAY CONDITIONS:** Membranes are permeabilized by addition of saponin to an equal concentration by mass, then mixed with [<sup>35</sup>S]-GTP $\gamma$ S (final concentration of 0.3 nM) in assay buffer in a non-binding 96-well plate. Unlabeled I-309 was added to the final concentration indicated in Figure 1 (final volume 100 µL), and incubated for 30 min at 30°C. The binding reaction is transferred to an FB filter plate (EMD Millipore MAHF B1H) previously pre-wetted with water, and washed 3 times (1 mL per well per wash) with cold wash buffer. The plate is dried and counted.

**Binding Buffer:** 20 mM HEPES, pH 7.4/100 mM NaCl/10 mM MgCl<sub>2</sub>/10 µM GDP

**Radioligand:** [<sup>35</sup>S]-GTP $\gamma$ S (PerkinElmer;# NEG030H)

**Wash Buffer:** 10 mM Sodium phosphate, pH 7.4.

One package contains enough membranes for at least 200 assays (units), where a unit is the amount of membrane that will yield greater than 1000 cpm specific I-309-stimulated [<sup>35</sup>S]-GTP $\gamma$ S binding.

**Special Note:** The CCR8 receptor membrane preparation is expected to be functional in a radioligand binding assay with [<sup>125</sup>I]-I-309.

**PRESENTATION:** Liquid in packaging buffer: 50 mM Tris, pH 7.4, 10% glycerol, and 1% BSA with no preservatives.

Packaging method: Membrane proteins were adjusted to the indicated concentration in packaging buffer, rapidly frozen, and stored at -80°C.

**STORAGE/HANDLING:** Store at -70°C. Product is stable for at least 6 months from the date of receipt when stored as directed. Do not freeze and thaw.

**REFERENCES:**

1. Chensue SW *et al.* (2001). Aberrant in vivo T helper type 2 cell response and impaired eosinophil recruitment in CC chemokine receptor 8 knockout mice. *J. Exp. Med.* 193:573-84.
2. Goya I *et al.* (2003). Absence of CCR8 does not impair the response to ovalbumin-induced allergic airway disease. *J. Immunol.* 170:2138-46.
3. Qu C *et al.* (2004.) Role of CCR8 and other chemokine pathways in the migration of monocyte-derived dendritic cells to lymph nodes. *J. Exp. Med.* 200:1231-1241.
4. Roos RS *et al.* (1997). Identification of CCR8, the receptor for the human CC chemokine I-309. *J. Biol. Chem.* 272:17251-17254.
5. Schaerli P *et al.* (2004). A skin-selective homing mechanism for human immune surveillance T cells. *J. Exp. Med.* 199:1265-75.

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