

IDO Recombinant Antibody [PD00-62] - Mouse IgG1 (Chimeric)

HA601632



Product Type:	primary antibodies
Species reactivity:	Human
Applications:	WB, IHC-P
Molecular Wt:	Predicted band size: 45 kDa
Clone number:	PD00-62

Description: Indoleamine 2,3-dioxygenase (IDO) is an IFN- γ inducible enzyme that catalyzes the degradation of the essential amino acid L-tryptophan to N-formylkynurenine. The gene encoding human IDO maps to chromosome 8p12-p11. IDO, also known as INDO, is an important modulator of immunological responses and protects allogeneic concepti from alloreactive maternal lymphocytes. IDO mediates an interesting inhibitory effect of HeLa cells co-cultured with human PBLs. The ILN-2-induced proliferation response of PBLs is diminished in the presence of HeLa cells while an IDO inhbitor negates this effect. Flow cytometric analysis indicates both mature and immature CD123-positive dendritic cells suppress T cell activity using IDO. IDO-transfected cells co-cultured with T cells reduces T cell proliferation. Additionally, adopted transfer of donor T cells reduces donor T cell numbers in IDO-transgenic mice. The pharmacological or genetic manipulation of IDO may be useful for supressing undesirable T cell response.

Immunogen: Synthetic peptide derived from the C-terminus of human IDO-1 protein.

Positive control: A549 treated with 50ng/mL IFN-gamma for 24 hours cell lysate.

Subcellular location: Cytoplasm, cytosol.

Database links: SwissProt: P14902 Human

Recommended Dilutions:

WB	1:2,000
IHC-P	1:1,000

Storage Buffer: 1*PBS (pH7.4), 0.1% BSA, 40% Glycerol, 0.2% Proclean 950.

Storage Instruction: Shipped at 4°C. Store at +4°C short term (1-2 weeks). Store at -20°C long term.

Purity: Protein A affinity purified.

Hangzhou Huaan Biotechnology Co., Ltd.

Orders:0086-571-88062880

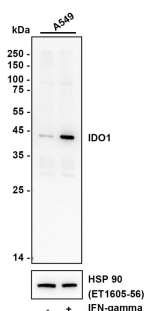
Technical:0086-571-89986345

Service mail:support@huabio.cn

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Applications:WB=Western blot IHC-P=Immunohistochemistry (paraffin) IF-Cell=Immunofluorescence (Cell) IF-Tissue=Immunofluorescence (Tissue) FC=Flow cytometry IP=Immunoprecipitation

Images



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Fig1: Western blot analysis of IDO on different lysates with Mouse anti-IDO antibody (HA601632) at 1/2,000 dilution.

Lane 1: A549 (Human lung adenocarcinoma cell) cell lysate

Lane 2: A549 treated with 50ng/mL IFN-gamma for 24 hours cell lysate

Lysates/proteins at 15 µg/Lane.

Exposure time: 3 minutes; ECL: K1801

Blocking: 5% NFDM/TBST, 1 hour at room temperature

Primary antibody: HA601632, 1/2,000 in primary antibody dilution buffer (K1803), overnight at 4 °C

Secondary antibody: Goat anti-Mouse IgG-HRP (HA1006), 1/50,000 in 5% NFDM/TBST, 1 hour at room temperature

Predicted band size: 45 kDa

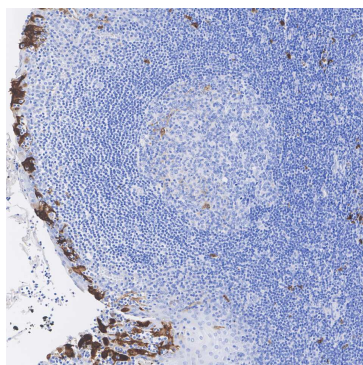
Observed band size: 45 kDa

Fig2: Application: Immunohistochemistry (IHC-P)

Species: Human

Tissue: Tonsil

Sample: Paraffin-embedded section



Antigen retrieval: Heat-mediated, Tris-EDTA buffer (pH 9.0), 20 minutes at 95°C.

Wash buffer: 1× TBST

Endogenous peroxidase blocking: 3% H₂O₂, 10 minutes at room temperature.

Blocking: 1% BSA + 10% normal goat serum, 10 minutes at room temperature.

Primary antibody: HA601632, 1/1,000, 1 hour at room temperature.

Secondary antibody: HA1120, 20 minutes at room temperature.

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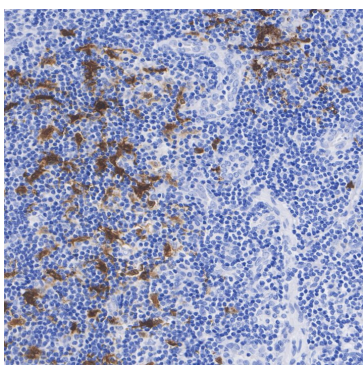


Fig3: Application: Immunohistochemistry (IHC-P)

Species: Human

Tissue: Tonsil

Sample: Paraffin-embedded section

Antigen retrieval: Heat-mediated, Tris-EDTA buffer (pH 9.0), 20 minutes at 95°C.

Wash buffer: 1× TBST

Endogenous peroxidase blocking: 3% H₂O₂, 10 minutes at room temperature.

Blocking: 1% BSA + 10% normal goat serum, 10 minutes at room temperature.

Primary antibody: HA601632, 1/1,000, 1 hour at room temperature.

Secondary antibody: HA1120, 20 minutes at room temperature.

Note: All products are “FOR RESEARCH USE ONLY AND ARE NOT INTENDED FOR DIAGNOSTIC OR THERAPEUTIC USE”.

Background References

1. Fujiwara Y et al. Indoleamine 2,3-dioxygenase (IDO) inhibitors and cancer immunotherapy. Cancer Treat Rev. 2022 Nov
2. Al-Zoubi RM et al. IDO and TDO inhibitors in cancer immunotherapy: mechanisms, clinical development, and future directions. Front Pharmacol. 2025 Sep

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