

Product Datasheet

TLR7 Antibody - BSA Free NBP2-24906

Unit Size: 0.1 mg

Store at 4C short term. Aliquot and store at -20C long term. Avoid freeze-thaw cycles.

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Updated 4/15/2024 v.20.1

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NBP2-24906

TLR7 Antibody - BSA Free

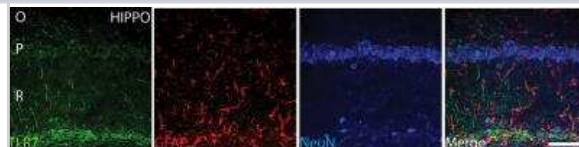
| Product Information | |
|---------------------|--|
| Unit Size | 0.1 mg |
| Concentration | 1.0 mg/ml |
| Storage | Store at 4C short term. Aliquot and store at -20C long term. Avoid freeze-thaw cycles. |
| Clonality | Polyclonal |
| Preservative | 0.02% Sodium Azide |
| Isotype | IgG |
| Purity | Immunogen affinity purified |
| Buffer | PBS |

| Product Description | |
|---------------------|---|
| Host | Rabbit |
| Gene ID | 51284 |
| Gene Symbol | TLR7 |
| Species | Human, Mouse, Rat |
| Reactivity Notes | Use in Human reported in scientific literature (PMID:33806288). |
| Immunogen | Partial synthetic peptide made to an internal portion of the human TLR7 protein (between amino acids 700-750) [UniProt 9NYK1] |

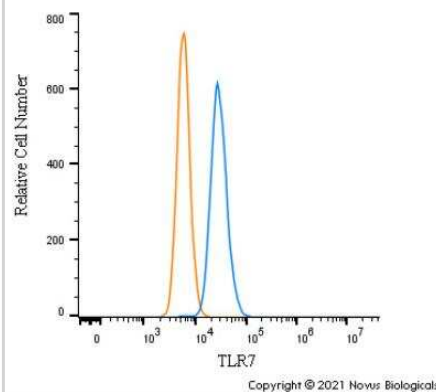
| Product Application Details | |
|-----------------------------|--|
| Applications | Western Blot, Dot Blot, Flow Cytometry, Flow (Intracellular), Immunocytochemistry/ Immunofluorescence, Immunohistochemistry, Immunohistochemistry-Frozen, Immunohistochemistry-Paraffin, Immunoprecipitation, Proximity Ligation Assay, Bioactivity |
| Recommended Dilutions | Western Blot 1-3 ug/ml, Flow Cytometry 2-5 ug/ 1x10 ⁶ cells, Immunohistochemistry 1:200. Use reported in scientific literature (PMID 28219705), Immunocytochemistry/ Immunofluorescence 1:10-1:2000, Immunoprecipitation reported in scientific literature (PMID 17452530), Immunohistochemistry-Paraffin 1:200. Use reported in scientific literature (PMID 25264223), Immunohistochemistry-Frozen 1:10-1:2000. Use reported by customer review, Proximity Ligation Assay reported in scientific literature (PMID 30579042), Dot Blot reported in scientific literature (PMID 27248820), Flow (Intracellular), Bioactivity reported in scientific literature (PMID 28894449) |

Images

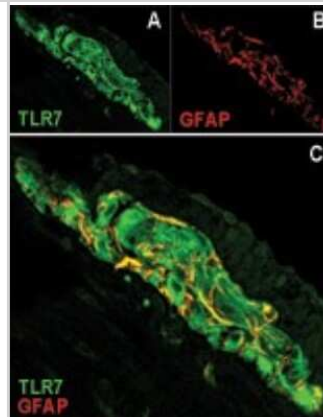
Immunohistochemistry: TLR7 Antibody [NBP2-24906] - The expression of TLR-7 in the hippocampal brain region. The immunofluorescence of TLR7 recognized by Alexa 488, green. GFAP recognized by Alexa 594, red. NEUN recognized by Alexa 633, (blue) and merged image in the hippocampal region. NeuN and GFAP were applied to show the distribution of TLR7 within neuronal and supportive tissue populations. Scale bar 80 um. Image collected and cropped by CiteAb from the following publication ([//doi.org/10.1371/journal.pone.0222818](https://doi.org/10.1371/journal.pone.0222818)) licensed under a CC-BY license.



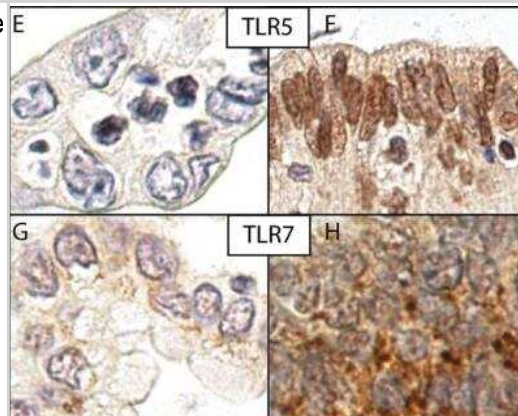
Flow Cytometry: TLR7 Antibody [NBP2-24906] - An intracellular stain was performed on THP-1 cells with NBP2-24906 (blue) and a matched isotype control NBP2-24891 (orange). Cells were fixed with 4% PFA and then permeabilized with 0.1% saponin. Cells were incubated in an antibody dilution of 1 ug/mL for 30 minutes at room temperature, followed by Rabbit IgG (H+L) Cross-Adsorbed Secondary Antibody, Dylight 550 (SA5-10033, Thermo Fisher).



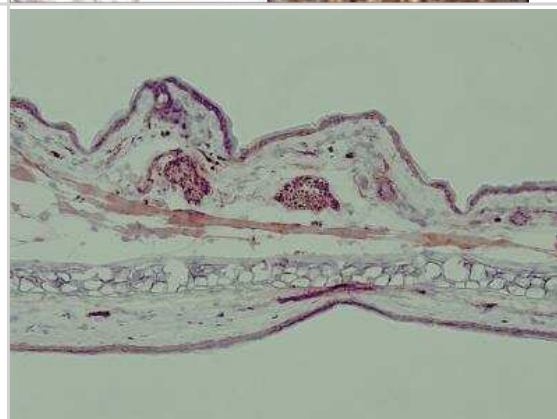
Immunocytochemistry/Immunofluorescence: TLR7 Antibody [NBP2-24906] - Immunolocalization of TLR7 (A) and glial fibrillary acidic protein (GFAP) (B) in murine myenteric plexus. Most of the GFAP positive cells were also positive for TLR7 in the merged image (C, yellow staining). (Courtesy of Barajon I, et al., Journal of Histochemistry and Cytochemistry, 57(11): 1013-;1023, 2009.)



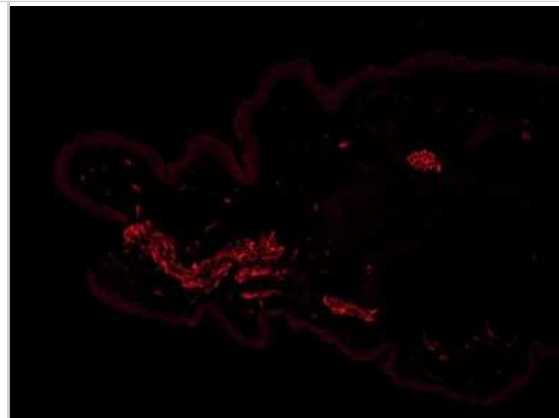
Immunohistochemistry: TLR7 Antibody [NBP2-24906] - Expression of the TLRs 5 and 7 were evaluated in the PDAC tissue by their staining intensity using TLR5 antibody (NBP2-24787) and TLR7 antibody (NBP2-24906). Note negative staining in E and G; positive staining in F and H. For TLR7 immunopositivity was detectable in the cytoplasm with no notable membranous or nuclear positivity. TLR5 showed distinctive nuclear positivity, and detectable positivity in the cytoplasm in some samples. Image collected and cropped by CiteAb from the following publication ([//doi.org/10.1371/journal.pone.0219245](https://doi.org/10.1371/journal.pone.0219245)) licensed under a CC-BY license.



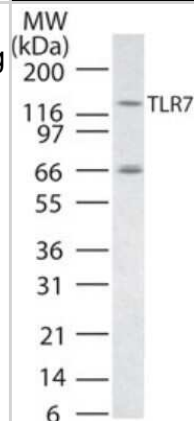
Immunohistochemistry-Frozen: TLR7 Antibody [NBP2-24906] - analysis of frozen mouse ear skin tissue using anti-TLR7 antibody. Image from verified customer review.



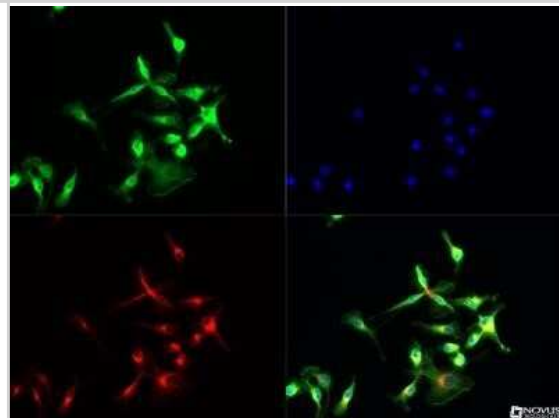
Immunohistochemistry-Frozen: TLR7 Antibody [NBP2-24906] - analysis of TLR7 in acetone-fixed, frozen mouse ear skin section using anti-TLR7 antibody. Image from verified customer review.



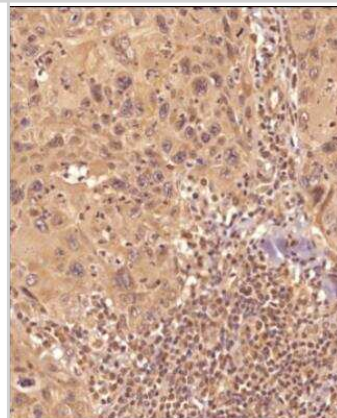
Western Blot: TLR7 Antibody [NBP2-24906] - Analysis using the Azide Free version of NBP2-24906. Detection of TLR7 in RAW cell lysate using this antibody.



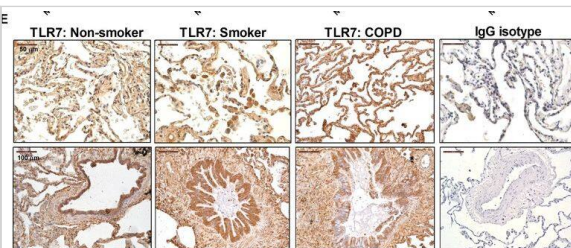
Immunocytochemistry/Immunofluorescence: TLR7 Antibody [NBP2-24906] - Analysis using the Azide Free version of NBP2-24906. Staining of Raw 246.7 cells with Dylight 488 (green). Nuclei and alpha-tubulin were counterstained with DAPI (blue) and Dylight 550 (red). Image objective 40x. An antibody dilution of 1:10 was used.



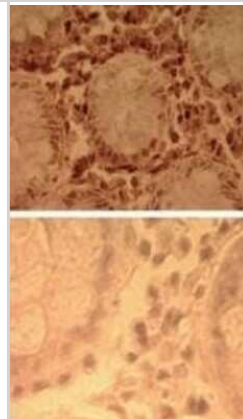
Immunohistochemistry-Paraffin: TLR7 Antibody - BSA Free [NBP2-24906] - Analysis of a FFPE tissue section of human skin using 1:200 dilution of TLR7 antibody (NBP2-24906). The staining was developed using HRP labeled anti-rabbit secondary antibody and DAB reagent, and nuclei of cells were counter-stained with hematoxylin.



Expression of TLR7 in lung tissues of non-smokers, smokers, and COPD patients. Total protein and mRNA were obtained from lung tissues of non-smokers (n = 15), smokers (n = 12), and COPD patients (n = 15). (E) Representative immunohistochemistry images are shown. The control IgG isotype showed negative staining. Data are presented as individual values and mean \pm standard deviation. Exact P values were obtained using Kruskal-Wallis and Dunn's post-hoc tests. Image collected and cropped by CiteAb from the following publication (<https://respiratory-research.biomedcentral.com/articles/10.1186/s12931-015-0179-5>), licensed under a CC-BY licence.



Immunohistochemistry-Paraffin: TLR7 Antibody - BSA Free [NBP2-24906] - Analysis of human colon tissue using NBP2-24905 (top) and an isotype control (bottom) at 5 ug/ml.



Publications

Marie Rouanet, Naima Hanoun, Hubert Lulka, Cindy Ferreira, Pierre Garcin, Martin Sramek, Godefroy Jacquemin, Agnès Coste, Delphine Pagan, Carine Valle, Emeline Sarot, Vera Pancaldi, Frédéric Lopez, Louis Buscail, Pierre Cordelier The antitumoral activity of TLR7 ligands is corrupted by the microenvironment of pancreatic tumors. *Molecular therapy : the journal of the American Society of Gene Therapy* 2022-04-11 [PMID: 35038581]

Liu G, Haw TJ, Starkey MR et al. TLR7 promotes smoke-induced experimental lung damage through the activity of mast cell tryptase *Nature communications* 2023-11-14 [PMID: 37963864] (WB, IHC, Mouse)

Details:

IB Dilution 1:2000; IHC Dilution 1:100

Deng L, Gao R, Chen H et al. Let-7b-TLR7 Signaling Axis Contributes to the Anesthesia/Surgery-Induced Cognitive Impairment *Molecular neurobiology* 2023-10-02 [PMID: 37782443]

Liu J, Ke P, Guo H et al. Activation of TLR7-mediated autophagy increases epileptic susceptibility via reduced KIF5A-dependent GABAA receptor transport in a murine model *Experimental & molecular medicine* 2023-06-01 [PMID: 37258573] (IHC, WB, Mouse)

Lanki M Prognostic and Differential Diagnostic Biomarkers in Pancreatic Ductal Adenocarcinoma Thesis 2023-01-01 (IHC-P, Human)

Zhang L, Cen Y, Huang Q et al. Computational Flow Cytometric Analysis to Detect Epidermal Subpopulations In Human Skin *Biomed Eng Online* 2021-02-18 [PMID: 33596908]

Makinen, LK. Matrix metalloproteinases and toll-like receptors in early-stage oral tongue squamous cell carcinoma *J Oral Pathol Med* 2018-05-11 [PMID: 29747237]

Hayakawa K, Fujishiro M, Yoshida Y et al. Exposure of female NZBWF1 mice to imiquimod induced lupus nephritis at an early age via a unique mechanism that differed from spontaneous onset *Clinical and Experimental Immunology* 2022-02-02 [PMID: 35260898] (WB)

Zhu Y, Wu Z, Yan W et al. Allosteric inhibition of SHP2 uncovers aberrant TLR7 trafficking in aggravating psoriasis *EMBO molecular medicine* 2021-12-22 [PMID: 34936223] (IHC-P, ICC/IF, Mouse, Human)

Hernandez, C M, Cortez, I Et al. Research tool: Validation of floxed alpha 7 nicotinic acetylcholine receptor conditional knockout mice using in vitro and in vivo approaches. *J Physiol* 2014-08-01 [PMID: 24879866] (Mouse)

Branchi V, Esser L, Boden C et al. A Combined TLR7/TLR9/GATA3 Score Can Predict Prognosis in Biliary Tract Cancer Diagnostics (Basel, Switzerland) 2021-09-01 [PMID: 34573939] (IF/IHC, Human)

Proskocil BJ, Wai K, Lebold KM et al. TLR7 is expressed by support cells, but not sensory neurons, in ganglia *Journal of neuroinflammation* 2021-09-16 [PMID: 34530852] (IHC-P, Mouse)

More publications at <http://www.novusbio.com/NBP2-24906>

Procedures

Flow (Intracellular) Protocol for TLR7 Antibody (NBP2-24906)

Protocol for Flow Cytometry Intracellular Staining

Sample Preparation.

1. Grow cells to 60-85% confluency. Flow cytometry requires between 2×10^5 and 1×10^6 cells for optimal performance.
2. If cells are adherent, harvest gently by washing once with staining buffer and then scraping. Avoid using trypsin as this can disrupt certain epitopes of interest. If enzymatic harvest is required, use Accutase, Collagenase, or TrypLE Express for a less damaging option.
3. Reserve 100 μ L for counting, then transfer cell volume into a 50 mL conical tube and centrifuge for 8 minutes at 400 RCF.
 - a. Count cells using a hemocytometer and a 1:1 trypan blue exclusion stain to determine cell viability before starting the flow protocol. If cells appear blue, do not proceed.
4. Re-suspend cells to a concentration of 1×10^6 cells/mL in staining buffer (NBP2-26247).
5. Aliquot out 100 μ L samples in accordance with your experimental samples.

Tip: When cell surface and intracellular staining are required in the same sample, it is advisable that the cell surface staining be performed first since the fixation and permeabilization steps might reduce the availability of surface antigens.

Intracellular Staining.

Tip: When performing intracellular staining, it is important to use appropriate fixation and permeabilization reagents based upon the target and its subcellular location. Generally, our Intracellular Flow Assay Kit (NBP2-29450) is a good place to start as it contains an optimized combination of reagents for intracellular staining as well as an inhibitor of intracellular protein transport (necessary if staining secreted proteins). Certain targets may require more gentle or transient permeabilization protocols such as the commonly employed methanol or saponin-based methods.

Protocol for Cytoplasmic Targets:

1. Fix the cells by adding 100 μ L fixation solution (such as 4% PFA) to each sample for 10-15 minutes.
2. Permeabilize cells by adding 100 μ L of a permeabilization buffer to every 1×10^6 cells present in the sample. Mix well and incubate at room temperature for 15 minutes.
 - a. For cytoplasmic targets, use a gentle permeabilization solution such as 1X PBS + 0.5% Saponin or 1X PBS + 0.5% Tween-20.
 - b. To maintain the permeabilized state throughout your experiment, use staining buffer + 0.1% of the permeabilization reagent (i.e. 0.1% Tween-20 or 0.1% Saponin).
3. Following the 15 minute incubation, add 2 mL of the staining buffer + 0.1% permeabilizer to each sample.
4. Centrifuge for 1 minute at 400 RCF.
5. Discard supernatant and re-suspend in 100 μ L of staining buffer + 0.1% permeabilizer.
6. Add appropriate amount of each antibody (eg. 1 test or 1 μ g per sample, as experimentally determined).
7. Mix well and incubate at room temperature for 30 minutes- 1 hour. Gently mix samples every 10-15 minutes.
8. Following the primary/conjugate incubation, add 1-2 mL/sample of staining buffer +0.1% permeabilizer and centrifuge for 1 minute at 400 RCF.
9. Wash twice by re-suspending cells in staining buffer (2 mL for tubes or 200 μ L for wells) and centrifuging at 400 RCF for 5 minutes. Discard supernatant.
10. Add appropriate amount of secondary antibody (as experimentally determined) to each sample.
11. Incubate at room temperature in dark for 20 minutes.
12. Add 1-2 mL of staining buffer and centrifuge at 400 RCF for 1 minute and discard supernatant.
13. Wash twice by re-suspending cells in staining buffer (2 mL for tubes or 200 μ L for wells) and centrifuging at 400 RCF for 5 minutes. Discard supernatant.
14. Resuspend in an appropriate volume of staining buffer (usually 500 μ L per sample) and proceed with analysis on your flow cytometer.



Immunohistochemistry-Paraffin Protocol for TLR7 Antibody (NBP2-24906)

Immunohistochemistry-Paraffin Embedded Sections

Antigen Unmasking:

Bring slides to a boil in 10 mM sodium citrate buffer (pH 6.0) then maintain at a sub-boiling temperature for 10 minutes. Cool slides on bench-top for 30 minutes (keep slides in the sodium citrate buffer all the time).

Staining:

1. Wash sections in deionized water three times for 5 minutes each.
2. Wash sections in PBS for 5 minutes.
3. Block each section with 100-400 ul blocking solution (1% BSA in PBS) for 1 hour at room temperature.
4. Remove blocking solution and add 100-400 ul diluted primary antibody. Incubate overnight at 4 C.
5. Remove antibody solution and wash sections in wash buffer three times for 5 minutes each.
6. Add 100-400 ul HRP polymer conjugated secondary antibody. Incubate 30 minutes at room temperature.
7. Wash sections three times in wash buffer for 5 minutes each.
8. Add 100-400 ul DAB substrate to each section and monitor staining closely.
9. As soon as the sections develop, immerse slides in deionized water.
10. Counterstain sections in hematoxylin.
11. Wash sections in deionized water two times for 5 minutes each.
12. Dehydrate sections.
13. Mount coverslips.





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Products Related to NBP2-24906

| | |
|----------------|---|
| NBP2-26228-1mg | Imiquimod, TLR7 ligand |
| HAF008 | Goat anti-Rabbit IgG Secondary Antibody [HRP] |
| NB7160 | Goat anti-Rabbit IgG (H+L) Secondary Antibody [HRP] |
| NBP2-24891 | Rabbit IgG Isotype Control |

Limitations

This product is for research use only and is not approved for use in humans or in clinical diagnosis. Primary Antibodies are guaranteed for 1 year from date of receipt.

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