

Mouse Anti-Adenovirus Monoclonal Antibody

Mouse, Monoclonal (Adenovirus)

Cat. No. DMAB2925

Lot. No. (See product label)

PRODUCT INFORMATION

Product Overview: Monoclonal Antibody to Adenovirus
Specificity: Specific for the hexon group antigen of many Adenovirus serotypes. Known reactivity with 34 serotypes of Adenovirus including types 40 and 41 (40, 41, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 14, 16, 18, 19, 20, 26, 31, 34, 35, 36 and 37). Does not react with Influenza A, Influenza B, RSV, Parainfluenza 1, 2 & 3, Mycoplasma pneumonia, H. pylori and Mammalian cells
Immunogen: Infected cell extract with adenovirus type 6
Clone: A144
Isotype: IgG1
Source: Ascites
Host animal: Mouse
Format: FITC, Liquid
Applications: Suitable for use in ELISA and IFA. Direct FA staining of target antigen in a permissive tissue culture system. Acetone fixation of the antigen source is recommended prior to staining. Each laboratory should determine an optimum working titer for use in its particular application. Other applications have not been tested but use in such assays should not necessarily be excluded.
Purification: IgG fraction conjugated with high purity isomer I of fluorescein isothiocyanate. Care is taken to ensure complete removal of any free fluorescein from the final product.
Affinity Constant: Not determined

PACKAGING

Concentration: 100ug/ml (OD280nm, E0.1% = 1.3)
Buffer: 0.01M PBS, pH 7.2 containing 10mg/ml BSA
Preservative: 0.1% Sodium azide
Storage: Short-term (up to 6 months) store at 2–8°C. Long term, aliquot and store at -20°C. Avoid multiple freeze/thaw cycles
Warning: This product contains sodium azide, which has been classified as Xn (Harmful), in European Directive 67/548/EEC in the concentration range of 0.1–1.0 %. When disposing of this reagent through lead or copper plumbing, flush with copious volumes of water to prevent azide build-up in drains.

BACKGROUND

Introduction: Adenoviruses are DNA viruses generally widespread in nature that are frequently the cause of acute upper respiratory tract infections (i.e. common colds). Forty-seven known serotypes have been isolated since they were first discovered in 1953 with 3 types known to cause gastroenteritis. Several types have oncogenic potential though most cause self-limiting febrile illnesses characterised by inflammation of conjunctivae and the respiratory tract. The virus can be isolated from the majority of tonsils/adenoids surgically removed, indicating latent infections. It is not known how long the virus can persist in the body, or whether it is capable of reactivation after long periods. In patients experiencing immunosuppression (e.g. AIDS) it can be reactivated causing disease.
Keywords: Adenovirus; Adenoviridae; Aviadenovirus; ADE-NOVIRUS; ADENOVIRUS F

REFERENCES

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2. Robinson CM, Singh G, Henquell C, Walsh MP, Peigue-Lafeuille H, Seto D, Jones MS, Dyer DW, Chodosh. Computational analysis and identification of an emergent human adenovirus pathogen implicated in a respiratory fatality. J. Virology. 2011 Jan 20;409(2):141-7.
3. Zhang, Q., et al., (2004), "Effective Gene-Viral Therapy for Telomerase-Positive Cancers by selective Replicative-Competent Adenovirus Combining with Endostatin Gene", Cancer Research, 64: 5390-5397