OriGene Technologies, Inc.
9620 Medical Center Drive, Ste 200
Rockville, MD 20850, US
Phone: +1-888-267-4436
https://www.origene.com
techsupport@origene.com
EU: info-de@origene.com
CN: techsupport@origene.cn

Product datasheet for AM09231PU-N

Mycobacterium tuberculosis (38 kDa Ag) Mouse Monoclonal Antibody [Clone ID: A2H8]

Product data:

Product Type:	Primary Antibodies
Clone Name:	A2H8
Applications:	ELISA, WB
Recommended Dilution:	**ELISA:** Reactive to the immunogen in ELISA assay. The monoclonal antibody reacts with the recombinant *M. tuberculosis* (TB) protein in ELISA assay. **Western Blotting:** The monoclonal antibody detects the recombinant *M. tuberculosis* (TB) protein on Western blot. A band corresponding to the immunogen is detected.
Reactivity:	Mycobacterium tuberculosis
Host:	Mouse
Isotype:	IgG1
Clonality:	Monoclonal
Immunogen:	A recombinant M. tuberculosis protein cloned from virulent strain H37Rv with primers targeting the 38Kd antigen.
Specificity:	This *M. tuberculosis* antibody is reactive with the recombinant immunogen (M. tuberculosis 38Kd antigen). Reactivity with the native 38KD antigen in TB H37Rv has not been tested.
Formulation:	0.01M PBS, pH 7.0 without preservatives State: Aff - Purified State: Lyophilized purified IgG fraction
Reconstitution Method:	Restore with Double distillated water to adjust the final concentration to 1.0 mg/ml.
Purification:	Affinity Chromatography on Protein G
Conjugation:	Unconjugated
Storage:	Upon receipt, store undiluted (in aliquots) at -20°C. Avoid repeated freezing and thawing.
Stability:	Shelf life: one year from despatch.

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Background: Mycobacterium tuberculosis is the most common cause of tuberculosis. Primary infection begins with inhalation of 1 to 10 aerosolised bacilli. The pathogenicity of the organism is determined by its ability to escape host immune responses as well as eliciting delayed hypersensitivity. Alveolar macrophages engulf the invading cells but are unable to mount an effective defense. Several virulence factors are responsible for this apparent failure; most notably in the mycobacterial cell wall are the cord factor, lipoarabinomannan, and the 65 kd heat shock protein or HSP65.
The emergence of new strains of resistant Mycobacterium tuberculosis has created new interest in clinical diagnosis. Studies have shown immunohistochemical techniques to be superior to conventional special stains. Thus the demonstration of mycobacterial antigens are not only useful in establishing mycobacterial aetiology, but can also be used as an alternative method to the conventional Ziehl-Neelsen method.

Synonyms: M. tuberculosis, TB