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Product datasheet for BP1001F

Aspergillus Rabbit Polyclonal Antibody

Product data:

Product Type:	Primary Antibodies
Applications:	IF
Recommended Dilution:	**Immunofluorescence:** 1/10-1/50. Fixative: Acetone is recommended.
Host:	Rabbit
Clonality:	Polyclonal
Immunogen:	Soluble extract from *A. fumigates, A. flavus, A. niger* and *A. terreus.*
Specificity:	Reactive with soluble proteins from common *Aspergillus species.*
Formulation:	PBS, pH 7.2 containing 10 mg/ml BSA and 0.09% Sodium Azide as preservative Label: FITC State: Liquid, purified IgG fraction Label: High purity isomer I of has been used. Care has been taken to ensure complete removal of any free fluorescein from the final product
Concentration:	lot specific
Conjugation:	FITC
Storage:	Store the antibody undiluted at 2-8°C for one month or (in aliquots) at -20°C longer. This product is photosensitive and should be protected from light. Avoid repeated freezing and thawing.
Stability:	Shelf life: one year from despatch.

View online »

Background:

The genus Aspergillus includes over 185 species. Around 20 species have been reported as causative agents of opportunistic infections in humans. Among these, Aspergillus fumigatus is the most commonly isolated species, followed by Aspergillus flavus. Aspergillus fumigatus is the major cause of aspergillosis. This organism causes both invasive and allergic aspergillosis. Aspergillus also produce fungal toxins called mycotoxins. Aflatoxin is produced by Aspergillus flavus as it grows on corn and peanuts. The toxin is poisonous to humans by ingestion and causes liver disease. Aspergillus nidulans can produce the mycotoxin sterigmatocystin. This toxin has been shown to produce liver and kidney damage in lab animals. Aspergillus oschraceus,found in grains, soil and salted food products can produce a kidney toxin called oschratoxin A, which may produce oschratoxicosis in humans. Ochratoxin may also be produced by other aspergillus and penicillium species. Other toxins that can be produced by this fungus include penicillic acid, xanthomegnin and viomellein.
Aspergillus infections have a very high mortality rate. Their incidence is growing because of the increased number of immunocompromised patients. Previous to antibodies such as these, special stains were used to identify aspergillus.