### Overview

**Product name**
Anti-Human Polyoma virus JCV capsid protein VP1 antibody [8E8] ab34756

**Description**
Mouse monoclonal [8E8] to Human Polyoma virus JCV capsid protein VP1

**Host species**
Mouse

**Tested applications**
Suitable for: Indirect ELISA, WB, ICC/IF

**Species reactivity**
Reacts with: Other species

**Immunogen**
Recombinant full length protein corresponding to Human Polyoma virus JCV capsid protein VP1. Recombinant full length purified major capsid protein VP1 of human polyomavirus JCV expressed in yeast S.cerevisiae.

**General notes**
This product was changed from ascites to tissue culture supernatant on 28/11/2017. Lot numbers higher than GR48370-3, GR185137-5, GR185137-7 and GR185137-8 will be from tissue culture supernatant. Please note that the dilutions may need to be adjusted accordingly.

### Properties

**Form**
Liquid

**Storage instructions**
Shipped at 4°C. Store at +4°C short term (1-2 weeks). Upon delivery aliquot. Store at -20°C or -80°C. Avoid freeze / thaw cycle.

**Storage buffer**
Preservative: 0.1% Sodium Azide
Constituents: PBS, pH 7.4

**Purity**
Protein A purified

**Clonality**
Monoclonal

**Clone number**
8E8

**Myeloma**
Sp2/0

**Isotype**
IgG2a

### Applications

Our Abpromise guarantee covers the use of ab34756 in the following tested applications.

The application notes include recommended starting dilutions; optimal dilutions/concentrations should be determined by the end user.
**Relevance**

The human polyomavirus JC virus (JCV) infects greater than 80% of the human population. The JC virus is a small (38-40 nm in diameter) double stranded, circular DNA virus covered by an icosahedral capsid. Infection with JCV is asymptomatic and it occurs in early childhood. After the primary infection, the virus remains in latent state in the kidney, until it's reactivation under immunosuppressive conditions to result in Progressive Multifocal Leukoencephalopathy (PML), a fatal demyelinating disease. 70% of all HIV-1-infected patients will exhibit neurological disorders and between 5 and 8% of all HIV-1-infected patients will develop PML. Similar to other polyomaviruses, JCV can cause tumors when intracerebrally inoculated at high titers into developing rodent. Several reports suggest the association of viruses, especially of the polyomavirus family with different types of human brain tumors. Tumorigenecity of JCV is most likely induced by the viral early gene product T-antigen. T-antigen has the capacity to interact with several tumor suppressor proteins, most notably p53, and functionally inactivate these proteins.

**Target**

**Relevance**

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<table>
<thead>
<tr>
<th>Application</th>
<th>Abreviews</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indirect ELISA</td>
<td>1/1000 - 1/10000.</td>
<td></td>
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<tr>
<td>WB</td>
<td>1/1000 - 1/5000.</td>
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<tr>
<td>ICC/IF</td>
<td>⭐⭐⭐⭐ ⭐</td>
<td>Use at an assay dependent concentration. PubMed: 25155602</td>
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</tbody>
</table>

**Images**

Immunoblot of recombinant major capsid protein VP1 (500 ng per lane) of human polyomavirus JCV using monoclonal antibody ab34756 at a concentration of 1 µg/mL.

Western blot - Anti-Human Polyoma virus JCV capsid protein VP1 antibody [8E8] (ab34756)
ab34756 staining Human Polyoma virus JCV capsid protein VP1 in human fetal glial cell (SVG-A) by ICC/IF (Immunocytochemistry/immunofluorescence). Cells were fixed with methanol and blocked with 2% BSA for 30 minutes at 22°C. Samples were incubated with primary antibody (1/1000 in PBS + BSA) for 1 hour at 37°C. An Alexa Fluor® 488-conjugated goat anti-mouse IgG (H+L) polyclonal (1/1000) was used as the secondary antibody.

Please note: All products are "FOR RESEARCH USE ONLY. NOT FOR USE IN DIAGNOSTIC PROCEDURES"

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