

Antibody Datasheet

Name: Mouse Anti Herpes Simplex Virus 2 gD (0192)

Product Code: MAB12276-100

Product Description: Mouse monoclonal antibody specific for Herpes Simplex virus gD (0192)

Clone Number: 192

Isotype: IgG1

Batch #:

Amount: 0.1 mg

Concentration: 1.0 mg/ml

Purity: >95%

Presentation: Liquid

Buffer: 0.01 M phosphate buffered saline, pH 7.2

Preservative: 0.1% sodium azide

Purification: Protein A chromatography or sequential differential precipitations.

Specificity: HSV 2, specific for glycoprotein D

Applications: IFA, ELISA, IHC

Application Notes: Working dilution must be determined by the user. Suggested starting ranges are 1:10-1:50 for IFA and 1:20-1:200 for ELISA.

Antigen background: Human herpes simplex virus (HSV), also known as human herpes virus (HHV), is a large enveloped double stranded DNA virus that belongs to the Herpesviridae family, subfamily Alphaherpesvirinae. Human HSV exists as two distinct serotypes, herpes simplex virus type -1 (HSV-1) and type -2 (HSV-2). Both HSV-1 and HSV-2 are neurotrophic viruses that invade the central nervous system (CNS), where they replicate, and have the capacity to establish a latent infection ([Nicoll, MP et al](#)). HSV entry into the host cell requires viral glycoproteins gB, gD, gH and gL. Glycoprotein D (gD) is a structural component of the HSV envelope that has receptor binding activity and can bind specific proteins which mediate viral entry into the host cell.

HSV-1 and HSV-2 are primarily transmitted from human-to-human through contact with mucosal surfaces and damaged skin, which are common sites of primary HSV infection. However, the route and site of infection differs for each serotype with some reported overlap. Typically, HSV-1 is transmitted through oral-to-oral contact giving rise to infection in the lips, eyes and oropharyngeal mucosa but

HSV-1 infection can also occur in the genital tract through oral-genital contact. HSV-2 tends to be sexually transmitted via contact with infected mucosa or damaged skin associated with the genital tract. In most cases, individuals infected with either HSV-1 or HSV-2 for the first time remain asymptomatic or present with painful blisters or ulcers at the site of infection. HSV-1 establishes latency in the trigeminal ganglia, whereas HSV-2 tends to establish latency in the lumbar-sacral ganglia. Reactivation of either HSV-1 or HSV-2 can occur in immunosuppressed individuals or in seropositive individuals in response to a wide range of stimuli including periods of emotional and physical stress. Both HSV-1 and HSV-2 are widespread, lifelong infections. Some symptoms of infection can be alleviated using antiviral medication but currently no prophylactic vaccine exists for either HSV-1 or HSV-2 ([WHO factsheet](#)).

References:

- Nicoll, MP et al. (2012). The molecular basis of herpes simplex virus latency. FEMS Microbiol Rev.36(3): 684–705.
- World Health Organisation –Herpes Simplex Virus facts

Usage Guidelines

Short Term Storage: +2 to +8°C

Long Term Storage: -20°C

Storage Guidelines: Avoid repeated freeze/thaw cycles.

Products are for Research Use or for Further Manufacturing Use only. Not for Diagnostic or Therapeutic Use.