

Mouse Anti-Pneumocystis carinii/P. jiroveci [3F6]: MC0180, MC0180RTU7

Intended Use: For Research Use Only

Description: Pneumocystis is a genus of fungi which can be pathogenic in mammals. Pneumocystis carinii, also referred to as Pneumocystis jiroveci, is a microscopic fungus that exists in the lungs of many humans. This fungus is normally benign, but it can cause Pneumocystis carinii pneumonia (PCP) in immunocompromised individuals. During PCP, Pneumocystis carinii deteriorates the basement membrane of the lung, causing a rise in LDH levels and compromising gas exchange. Oxygen is less able to diffuse into the blood, leading to hypoxia, which, along with high arterial CO₂ levels, stimulates ventilation, thereby causing dyspnea. The fungus can also invade other visceral organs, such as the liver, spleen and kidney. Symptoms of Pneumocystis carinii infection include shortness of breath, non-productive cough, low grade fever, weight loss and night sweats. This disease can be fatal if not treated aggressively. This antibody reacts with a 82 kDa polypeptide specific to P. carinii. It does not cross-react with G. lamblia, T. gondii, T. cruzi, L. tropica, E. histolytica, C. albicans and P. falciparum.

Specifications:

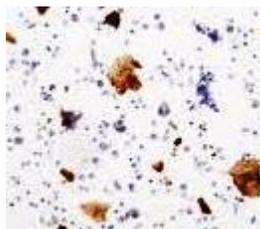
Clone: 3F6
 Source: Mouse
 Isotype: IgM
 Reactivity: Pneumocystis carinii
 Localization: Alveolar spaces
 Formulation: Antibody in PBS pH7.4, containing BSA and ≤ 0.09% sodium azide (NaN₃)
 Storage: Store at 2°- 8°C
 Applications: IHC, ICC/IF
 Package:

Description	Catalog No.	Size
Pneumocystis carinii/P. jiroveci Concentrated	MC0180	1 ml
Pneumocystis carinii/P. jiroveci Prediluted	MC0180RTU7	7 ml

IHC Procedure*:

Positive Control Tissue: Pneumocystis carinii infected human lung
 Concentrated Dilution: 25-100
 Pretreatment: Citrate pH6.0 or EDTA pH8.0 15 minutes using Pressure Cooker, or 30-60 minutes using water bath at 95°-99°C
 Incubation Time and Temp: 30-60 minutes @ RT
 Detection: Refer to the detection system manual

* Result should be confirmed by an established diagnostic procedure.



FFPE human lung tissue stained with anti-Pneumocystis carinii using DAB

References:

1. Pneumocystis carinii carriage in immunocompromised patients with and without human immunodeficiency virus infection. J. Takahashi, T., et al. Med. Microbiol. 51: 611-614, 2002.
2. A new name (Pneumocystis jiroveci) for Pneumocystis from humans Stringer, J.R., et al. Emerging Infect. Dis. 8: 891-896, 2002.
3. Analysis of underlying diseases and prognosis factors associated with Pneumocystis carinii pneumonia in immunocompromised HIV-negative patients. Roblot, F., et al. Eur. J. Clin. Microbiol. Infect. Dis. 21: 523-531, 2002.

Doc. 100-MC0180
Rev. A