Product Info. Antibody Ver. 20-09/2021



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SARS-CoV-2 Spike S2 monoclonal antibody (S223)

ANT0094 100μg

Description	Coronavirus disease 2019 is a newly emerging infectious disease currently spreading across the world. It is caused by a novel coronavirus, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The spike (S) protein of SARS-CoV-2, which plays a key role in the receptor recognition and cell membrane fusion process, is composed of two subunits, S1 and S2. The S1 subunit contains a receptor-binding domain that recognizes and binds to the host receptor angiotensin-converting enzyme 2, while the S2 subunit mediates viral cell membrane fusion by forming a six-helical bundle via the two-heptad repeat domain. The specific antibodies against different subunits of spike (S) protein of SARS-CoV-2 are excellent research tools for research against coronavirus
Product type	Monoclonal antibody
Immunogen	Spike1 (S)
Source	Mouse
Reacts with	Conformational SARS-CoV-2 Spike2 domain
Specificity	Anti SARS CoV-2 Spike2 monoclonal antibody detects conformational SARS CoV-2 Spike2. The antibody does not cross react with SARS CoV-2 Spike1 and SARS CoV-2 Spike1-RBD domain.
Tested applications	WB, ELISA.
Recommended dilutions	Recommended starting dilutions can vary lot-to-lot. Consult the product information label in the package for lot specific values.
	Note: When using any primary antibody or fluorescence-labelled secondary antibody for the first time, titrate out the antibody to determine which dilution allows the strongest specific signal with the lowest background for your sample.
Purity	Mouse monoclonal immunoglobulins IgG1 subclass were purified by protein L affinity chromatography and stabilized with 0.05% of glycerol.
Form	Liquid. Supplied in 100mM sodium citrate, 50mM Tris and 0.05% v/v glycerol. Neutral pH.
Storage instructions	Shipped at -20°C When stored at -20°C, the antibody is stable for 12 months. Note: Avoid repeated freezing and thawing cycles. It is recommended aliquoting the product upon arrival
References	Clinical and Analytical Performance of an Automated Serological Test That Identifies S1/S2- Neutralizing IgG in COVID-19 Patients Semiquantitatively. Bonelli F, Sarasini A, Zierold C, Calleri M, Bonetti A, Vismara C, Blocki FA, Pallavicini L, Chinali A, Campisi D, Percivalle E, DiNapoli AP, Perno CF, Baldanti F.
	Structures and distributions of SARS-CoV-2 spike proteins on intact virions. Ke Z, Oton J, Qu K, Cortese M, Zila V, McKeane L, Nakane T, Zivanov J, Neufeldt CJ, Cerikan B, Lu JM, Peukes J, Xiong X, Kräusslich HG, Scheres SHW, Bartenschlager R, Briggs JAG. Nature. 2020 Dec;588(7838):498-502. doi: 10.1038/s41586-020-2665-2. Epub 2020 Aug 17.
	SARS-CoV-2-specific virulence factors in COVID-19. Kumar A, Prasoon P, Kumari C, Pareek V, Faiq MA, Narayan RK, Kulandhasamy M, Kant K. J Med Virol. 2021 Mar;93(3):1343-1350. doi: 10.1002/jmv.26615. Epub 2020 Nov 1.