**Product Code:**
MP-333-CMK01 (0.1ml conc)

**Product Description:**
β-Amyloid
Concentrated Monoclonal Antibody
Control Number: 901-333-112509
ISO 9001:2000 CERTIFIED

**Summary and Explanation:**
Antigen detection, in tissues and cells, is a multi-step immunohistochemical process. The initial step binds the primary antibody to its specific epitope. After labelling the antigen with a primary antibody, a universal, affinity-purified, secondary antibody is added to bind to the primary antibody. An enzyme label is then added to bind to the secondary antibody; this detection of the bound antibody is evidenced by a colorimetric reaction.

Beta amyloid fragments tend to accumulate in Alzheimer's disease (AD) to form hard insoluble plaques between neurons in the hippocampus and neocortex of the brain. Presence of these plaques and the associated senile dementia that ensue are hallmarks of this disease. Beta amyloid antibody clone 6E10 can be used to determine the level of plaque burden in AD brain tissue since it specifically reacts with amino acid residues 1-16 of the beta amyloid peptide.

**Intended Use:** For In Vitro Diagnostic Use

**Source:** Mouse monoclonal

**Species Reactivity:** Human

**Clone:** 6E10

**Isotype:** IgG1

**Total Protein Concentration:** ~10 mg/ml. Call for lot specific Ig Concentration.
Epitope/Antigen: β-Amyloid

Cellular Localization: Cytoplasmic

Positive Control: Alzheimer's diseased brain

Normal Tissue: N/A

Abnormal Tissue: Alzheimer's diseased brain

Known Applications: Immunohistochemistry (formalin-fixed paraffin-embedded tissues)

Supplied As: Buffer with protein carrier and preservative. Universal Antibody Diluent (MP-900)

Storage and Stability:
Store at 2ºC to 8ºC. Do not use after expiration date printed on vial. If reagents are stored under conditions other than those specified in the package insert, they must be verified by the user. Diluted reagents should be used promptly; any remaining reagent should be stored at 2ºC to 8ºC.
Instructions for Use:

**Endogenous Peroxidase Block**
Block all endogenous peroxidase activity by incubating the sections for 5 minutes with the MenaPath Peroxide Block. Rinse slides in water, and then rinse well in buffer.

**Pretreatment Protocol:**
Retrieve sections with MenaPath Access Supreme Solution using the MenaPath Access Retrieval Unit followed by a wash in distilled water. Retrieve sections at 80°C for 1 hour

Alternatively, steam tissue sections for 45-60 minutes. Allow solution to cool for 20 minutes then wash in distilled water.

**Protein Block**
Incubate sections for 10-15 minutes at room temperature with the MenaPath Background Blocker with Casein

**Primary Antibody**
Dilute antibody 1:500-1:750 with MenaPath Universal Antibody Diluent. Incubate sections for 60 minutes at room temperature. Rinse slides x3 with buffer.

**Universal Probe**
Incubate sections for 10-20 minutes at room temperature with the MenaPath X-Cell Plus Universal Probe. Rinse slides x3 with buffer

**HRP Polymer**
Incubate sections for 10-25 minutes at room temperature with the MenaPath X-Cell Plus HRP Polymer. Rinse slides x3 in buffer.

**Chromogen**
Incubate sections for 5 minutes at room temperature with MenaPath X-Cell Plus Liquid Stable DAB. Rinse x3 with buffer.

**Counterstain:**
Incubate for 30-60 seconds with MenaPath Haematoxylin. Rinse with deionized water. Apply Bluing solution for 1 minute. Dehydrate, Clear and Mount
**Technical Note:** Use TBS buffer for wash steps. A standard PBS diluent (pH 7.2-7.4) is not recommended for this antibody.

**Performance Characteristics:** The optimum antibody dilution and protocols for a specific application can vary. These include, but are not limited to: fixation, heat-retrieval method, incubation times, tissue section thickness and detection kit used. Due to the superior sensitivity of these unique reagents, the recommended incubation times and titers listed are not applicable to other detection systems, as results may vary. The data sheet recommendations and protocols are based on exclusive use of MenaPath products. Ultimately, it is the responsibility of the investigator to determine optimal conditions. These products are tools that can be used for interpretation of morphological findings in conjunction with other diagnostic tests and pertinent clinical data by a qualified pathologist.

**Quality Control:** Refer to NCCLS Quality Assurance for Immunocytochemistry approved guidelines, December 1999 MM4-A Vol.19 No.26 for more information about Tissue Controls.

**Precautions:** This antibody contains less than 0.1% sodium azide. Concentrations less than 0.1% are not reportable hazardous materials according to U.S. 29 CFR 1910.1200, OSHA Hazard communication and EC Directive 91/155/EC. Sodium azide (NaN3) used as a preservative is toxic if ingested. Sodium azide may react with lead and copper plumbing to form highly explosive metal azides. Upon disposal, flush with large volumes of water to prevent azide build-up in plumbing. (Center for disease control, 1976, National Institute of Occupational Safety and Health, 1976)

Specimens, before and after fixation and all materials exposed to them, should be handled as if capable of transmitting infection and disposed of with proper precautions. Never pipette reagents by mouth and avoid contacting the skin and mucous membranes with reagents and specimens. If reagents or specimens come in contact with sensitive areas, wash with copious amounts of water.

Microbial contamination of reagents may result in an increase in nonspecific staining. Incubation times or temperatures other than those specified may give erroneous results. The user must validate any such change. The MSDS is available upon request.

**Troubleshooting:** Follow the antibody specific protocol recommendations according to data sheet provided. If atypical results occur, contact Menarini’s Technical Service Helpline: on 01189 444130.
Limitations and Warranty
There are no warranties, expressed or implied, which extend beyond this description. Menarini is not liable for damages of any kind including: personal injury, or economic loss caused by this product.

Reference: