

Anti-TIA-1 [2G9A10F5]

AM529-5M
 AM529-10M
 MU529-UC

Doc. No. 932-529M-EN Rev. B
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Immunogen	Clone	Species	Ig Class	Protein Conc
Human bone marrow malignant cells from a non-B, non-T acute leukemia	2G9A10F5	Mouse	IgG	~50 mg/ml*

*Lot specific Ig concentration available upon request

Catalog No.	Description
AM529-5M	6 ml of Ready-to-Use Antibody for Use with BioGenex Super Sensitive Detection Systems
AM529-10M	10 ml of Ready-to-Use Antibody for Use with BioGenex Super Sensitive Detection Systems and BioGenex Automated Staining Systems
MU529-UC	1 ml of Concentrated Antibody for Use with BioGenex Super Sensitive Detection Systems or Other Equivalent Detection Systems

Intended Use

This antibody is currently available for in vitro diagnostic use. This antibody is designed for the specific localization of TIA-1 in formalin-fixed, paraffin-embedded tissue sections.

Summary and Explanation

The T cell intracellular antigen 1 (TIA-1) is a 17-kDa cytoplasmic granule associated protein also designated asGMP-17, for granule membrane protein of 17 kDa . The GMP-17/TIA-1 molecule is expressed in cells possessing cytolytic potential and could be involved in the signaling cascade of Fas (CD95)-mediated apoptosis . Within hematopoietic cell lines, the 2G9 monoclonal antibody (mAb) reacts with about 90% of CD16+, 50 – 60% of CD8+, and less than 10% of CD4+ normal peripheral blood lymphocytes. It reacts with almost all monocytes and granulocytes . This antibody also reacts with CD4+ activated T-cell clones, activated NK cell clones, and Con A - activated thymocytes, but not with B lymphocytes or B-cell lines . The 2G9 mAb was evaluated during the 5th HLDA Workshop on Human Leucocyte Differentiation Antigens in,Boston, USA, in 1993 (section of monoclonal antibodies reactive with intracellular antigens) .

Principles of the Procedure

The demonstration of antigens by immunohistochemistry (IHC) is a two-step process involving first, the binding of a primary antibody to the antigen of interest, and second, the detection of bound antibody by a chromogen. The primary antibody may be used in IHC using manual techniques or using BioGenex Automated Staining System. BioGenex offers a variety of Super Sensitive detection systems including Link-Label and Polymer-based technologies to detect the chromogenic signal from the stained tissues and cells.

Reagents Provided

Mouse Monoclonal Antibody to TIA-1 Purified Ascites diluted in PBS, pH 7.6, containing 5% BSA and 0.09% sodium azide.

Dilution of Primary Antibody

BioGenex Ready-to-Use antibodies have been optimized for use with the recommended BioGenex Detection System and should not require further dilution. Further dilution may result in loss of sensitivity. The user must validate any such change.

BioGenex Concentrated antibodies must be diluted in accordance with the staining procedure when used with the recommended BioGenex Detection System. Use of any detection methods other than the recommended systems and protocols require validation by the user. Antibody dilutions should be appropriately adjusted and verified according to the detection system used.

Materials Required But Not Provided

All the reagents and materials required for IHC are not provided. Pre-treatment reagents, Super Sensitive detection systems, control slides, control reagents and other ancillary reagents are available from BioGenex. Please refer to the product insert(s) of the BioGenex Super Sensitive IHC detection systems for detailed protocols and instructions.

The IHC procedure may need other lab equipment that are not provided including oven or incubator (capable of maintaining 56-60°C), BioGenex Automated Staining System, Humidity Chamber, Microwave oven, Staining Jars or baths, Timer (capable of 3-20 minute intervals), Wash Bottles, Absorbent Wipes, Microscope slides (pre-treated with poly-L-Lysine), Coverslips, Lens paper and Light microscope with magnification of 200X.

Storage and Handling

Antibodies should be stored at 2-8°C without further dilution. Fresh dilutions, if required, should be made prior to use and are stable for up to one day at room temperature (20-26°C). Unused portions of antibody preparations should be discarded after one day.

This antibody is suitable for use until expiry date when stored at 2-8°C. Do not use product after the expiration date printed on vial. If reagents are stored under a condition other than those specified in the package insert, they must be verified by the user (U.S. Congress, 1992).

The presence of precipitate or an unusual odor indicates that the antibody is deteriorating and should not be used.

Positive and negative controls should be run simultaneously with all patient specimens. If unexpected staining is observed which cannot be explained by variations in laboratory procedures and a problem with the antibody is suspected, contact BioGenex Technical Support at 1.800.421.4149 or your local distributor.

Specimen Collection and Preparation

Tissues fixed in 10% (v/v) formalin are suitable for use prior to paraffin embedding. Consult references (Kiernan, 1981; Sheehan & Hrapchak, 1980) for further details on specimen preparation.

The user is advised to validate the use of the products with their tissue specimens prepared and handled in accordance with their laboratory practices.

Treatment of Tissues Prior to Staining

Pretreatment of tissues, if any, should be done as suggested in the staining procedure section.

Precautions

This antibody contains no hazardous material at a reportable concentration according to U.S. 29 CFR 1910.1200, OSHA Hazard Communication Standard and EC Directive 91/155/EC. However, this product contains

sodium azide, at concentrations of less than 0.1%. Sodium azide is not classified as a hazardous chemical at the product concentrations. However, toxicity information regarding sodium azide at product concentrations has not been thoroughly investigated. Sodium azide may react with lead or 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 for Occupational Safety and Health, 1976). For more information, a Material Safety Data Sheet for sodium azide in pure form is available upon request. Do not pipette reagents by mouth, and avoid contact of reagents and specimens with skin and mucous membranes. If reagents or specimens come in contact with sensitive area, wash with copious amounts of water. Minimize microbial contamination of reagents or increase in nonspecific staining may occur.

Refer to appropriate product inserts for instructions of use and safety information on detection reagents and other materials, which may be used with the antibody.

Staining Procedure

Refer to the following table for conditions specifically recommended for this antibody. Refer to the detection system package insert for guidance on specific staining protocols or other requirements.

Parameter	BioGenex Recommendations
Control Tissue	Anaplastic Large T-cell lymphoma tissue as available from BioGenex FG-529M
Tissue Type	FFPE
Concentrated Dilution	10-30 in HK941
Pretreatment	EZ -ARI, Use Power Block
Incubation Time & Temperature	30 min @ RT
Detection System	POLYMER+HRP

Quality Control

The recommended positive control tissue for this antibody is Anaplastic Large T-cell lymphoma tissue. The user is advised to use the control tissues available from BioGenex for your Quality Control purpose. Refer to the appropriate detection system package inserts for guidance on general quality control procedures.

Troubleshooting

Refer to the troubleshooting section in the package inserts of BioGenex Super Sensitive Detection Systems (or other equivalent detection systems) for remedial actions on detection system related issues, or contact BioGenex Technical Support Department at 1-800-421-4149 or your local distributor to report unusual staining.

Expected Results

This antibody stains Cytoplasm in positive cells in formalin-fixed, paraffin-embedded tissue sections. Interpretation of the staining result is solely the responsibility of the user. Any experimental result should be confirmed by a medically established diagnostic product or procedure.

Limitations of the Procedure

Immunohistochemistry is a complex technique involving both histological and immunological detection methods. Tissue processing and handling prior

to immunostaining can also cause inconsistent results. Variations in fixation and embedding or the inherent nature of the tissue may cause variations in results (Nadji and Morales, 1983). Endogenous peroxidase activity or pseudoperoxidase activity in erythrocytes and endogenous biotin may cause non-specific staining depending on detection system used. Tissues containing Hepatitis B Surface Antigen (HBsAg) may give false positive with horseradish peroxidase systems (Omata et al, 1980). Improper counterstaining and mounting may compromise the interpretation of results.

Performance Characteristics

BioGenex has conducted studies to evaluate the performance of the antibody with BioGenex detection systems and accessories. The antibodies have been found to be sensitive and show specific binding to the antigen of interest with minimal to no binding to non-specific tissues or cells. BioGenex antibodies have shown reproducible and consistent results when used within a single run, between runs, between lots and wherever applicable between manual and automated runs. The products have been determined to be stable for the periods specified on the labels either by standard real time or accelerated methods. BioGenex ensures product quality through 100% quality control for all products released and through surveillance programs.

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