

## PRODUCT INFORMATION SHEET

### Monoclonal antibodies detecting human antigens

#### CD56

PURE	<span style="border: 1px solid black; padding: 2px;">RUO</span>	<span style="border: 1px solid black; padding: 2px;">REF</span>	IQP-114P	▽	100 tests
R-PE	<span style="border: 1px solid black; padding: 2px;">IVD</span>	<span style="border: 1px solid black; padding: 2px;">REF</span>	IQP-114R	▽	100 tests

RUO IVD CE **For Research Use Only**  
**In Vitro Diagnostic medical device**



#### Description

**Clone** MOC-1

**Isotype** murine IgG1

**Specificity** MOC-1 detects an isoform of the neural cell adhesion molecule (NCAM) expressed on natural killer (NK) cells of approximately 145 kDa.

#### Antigen distribution

NK cells make up approximately 10% - 25% of peripheral blood lymphocytes. In addition, NCAM is expressed on a variety of neural tissues and some tumors of neuro-endocrine origin, such as small cell lung cancer (SCLC). The CD56 antigen is not expressed on other immune cells.

#### Summary

NK cells form a distinct subpopulation of lymphocytes, which are capable of performing their cytotoxic activity without MHC restriction. Target cells may include virally infected cells or transformed cells and CD56 appears to be involved in the cytotoxic activity of NK cells. Certain subtypes of T cell lymphomas may express the CD56 antigen. These include peripheral T cell lymphoma (NK cell lymphoma: CD56+, EBV+) and T lymphocytic lymphoma (CD56+/-).

#### Applications

CD56 (MOC-1) can be applied in flow cytometry for analysis of blood samples and in immunohistochemistry using frozen tissue sections and bone marrow aspirates. CD56 is applied in flow cytometry for the detection of NK cells in immune monitoring. In addition, the neoplastic counterpart of the NK cell can be characterized as T gamma lymphocytosis, showing expression of a number of antigens, e.g. CD56+, CD7+, CD16+, CD2+/- and CD8+/- . Co-expression of CD56 and CD138 (B-B4) is an indication of plasma cell malignancy in multiple myeloma, although it does not occur in all samples. In lung tumors, MOC-1 antibody is helpful in discriminating SCLC from non-SCLC.

#### Usage

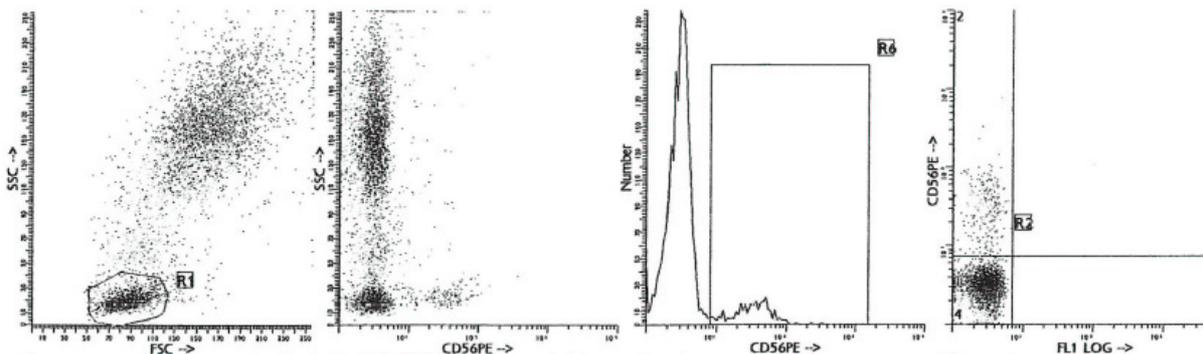
All these reagents are effectively formulated for direct immunofluorescent staining of human tissue for flow cytometric analysis using 10 µl/10<sup>6</sup> leukocytes for singles and 20 µl/10<sup>6</sup> leukocytes in case of dual and triple combinations. Since applications vary, each investigator should titrate the reagent to obtain optimal results.

#### HLDA Workshop

6<sup>th</sup> Leukocyte Typing Workshop - Kishimoto et al. eds. 1998.

#### Representative Data

Staining with clone MOC-1 (CD56) monoclonal antibodies is illustrated by flow cytometry analysis of normal blood cells. Direct staining was performed using 10 µl of the R-PE-conjugated antibody and 100 µl blood sample.



## Reproducibility

Monoclonal antibodies from IQ Products were tested by flow cytometry using a 'lyse-wash' method on whole blood from healthy donors. Obtained data support the premise that these reagents are equivalent in their reactivity with peripheral blood lymphocytes. Values are expressed in terms of % of the total lymphocyte count (see table).

Reagent	n	Mean % positive	S.D.	% CV	Product code
CD56 R-PE	10	12,74	3,55	27,85	IQP-114R

## Limitations

1. Conjugates with brighter fluorochromes, like PE and APC, will have a greater separation than those with dyes like FITC and CyQ. When populations overlap, the percentage of positive cells using a selected marker can be affected by the choice of fluorescent label.
2. Use of monoclonal antibodies in patient treatment can interfere with antigen target recognition by this reagent. This should be taken into account when samples are analyzed from patients treated in this fashion. IQ Products has not characterized the effect of the presence of therapeutic antibodies on the performance of this reagent.
3. Reagents can be used in different combinations, therefore laboratories need to become familiar performance characteristics of each antibody in relation with the combined markers in normal and abnormal samples.
4. Reagent data performance is based on EDTA-treated blood. Reagent performance can be affected by the use of other anticoagulants.

## Reagents and materials required but not supplied

1. Flow cytometer
2. Flow cytometry disposable 12 x 75-mm capped polystyrene test tubes
3. Micropipette with disposable tips
4. Vortex mixer
5. Centrifuge
6. IQ Lyse - erythrocyte lysing solution (IQP-199)
7. IQ Starfiqs – fixation and permeabilization solution (IQP-200)
8. PBS (phosphate-buffered saline)
9. 1% paraformaldehyde solution in PBS (store at 2-8 °C in amber glass for up to 1 week)

## Immunofluorescence staining and lysing protocol

### - A - Flow cytometry method for use with purified monoclonal antibodies

1. Add 100 µl of EDTA-treated blood (i.e. approx.  $10^6$  leukocytes) to a 5 ml reagent tube. The content of one tube is sufficient to perform one test.
2. Add to each tube 10 µl of purified monoclonal antibody\*. Vortex the tube to ensure thorough mixing of antibody and cells.
3. Incubate the tube for 15 minutes at room temperature in the dark.
4. Wash the labeled cells by adding 2 ml of PBS containing 0.001% (v/v) Heparin, vortexing and centrifuging (2 min 1000 x g.) and discard the supernatant.
5. Add 50 µl of 1:10 dilution of IQ Products F(ab)<sub>2</sub> Rabbit Anti Mouse IgG fluorescent conjugate, [FITC (IQP-190F); R-PE (IQP-190R)] in PBS containing 0.001% (v/v) Heparin to the tube. It is recommended that the tube is protected from light.
6. Mix by vortexing and incubate for 15 minutes at room temperature in the dark.
7. Add 100 µl of IQ Lyse (IQP-199 ready-to-use) and mix immediately.
8. Incubate for 10 minutes at room temperature in the dark.
9. Add 2 ml of demineralized water and incubate for 10 minutes in the dark.
10. Centrifuge the labeled cell suspension for 2 minutes at 1000 x g.
11. Remove the supernatant and resuspend the cells in 200 µl of PBS\*\*.
12. Analyze by flow cytometry within four hours (alternatively, the cells may be fixed by 0.05% of formaline in buffered saline for analysis the next day. Some antigens are readily destroyed upon fixation and this should be taken into account when using this alternative).

- B - Flow cytometry method for use with labeled (FITC, R-PE, CyQ or APC) monoclonal antibodies

1. Add 100 µl of EDTA-treated blood (i.e. approx.  $10^6$  leukocytes) to a 5 ml reagent tube. The content of one tube is sufficient to perform one test.
2. Add to each tube 10 µl of labeled monoclonal antibody\*. Vortex the tube to ensure thorough mixing of antibody and cells.
3. Incubate the tube for 15 minutes at room temperature in the dark.
4. Add 100 µl of IQ Lyse (IQP-199 ready-to-use) and mix immediately.
5. Incubate for 10 minutes at room temperature in the dark.
6. Add 2 ml of demineralized water and incubate for 10 minutes in the dark.
7. Centrifuge the labeled cell suspension for 2 minutes at 1000 x g.
8. Remove the supernatant and resuspend the cells in 200 µl of PBS\*\*.
9. Analyze by flow cytometry within four hours (alternatively, the cells may be fixed by 0.05% of formaline in buffered saline for analysis the next day. Some antigens are readily destroyed upon fixation and this should be taken into account when using this alternative).

- C - Flow cytometry method for use with dual and triple combinations

1. Add 100 µl of EDTA-treated blood (i.e. approx.  $10^6$  leukocytes) to a 5 ml reagent tube. The content of one tube is sufficient to perform one test.  
**For combinations with anti-kappa and/or anti-lambda Ig see application note below**
2. Add to each tube 20 µl of labeled monoclonal antibody combination\*.
3. Vortex the tube to ensure thorough mixing of antibody and cells.
4. Incubate the tube for 15 minutes at room temperature in the dark.
5. Add 100 µl of IQ Lyse (IQP-199 ready-to-use) and mix immediately.
6. Incubate for 10 minutes at room temperature in the dark.
7. Add 2 ml of demineralized water and incubate for 10 minutes in the dark.
8. Centrifuge the labeled cell suspension for 2 minutes at 1000 x g.
9. Remove the supernatant and resuspend the cells in 200 µl of PBS\*\*.
10. Analyze by flow cytometry within four hours (alternatively, the cells may be fixed by 0.05% of formaline in buffered saline for analysis the next day. Some antigens are readily destroyed upon fixation and this should be taken into account when using this alternative).

\* Appropriate mouse Ig isotype control samples should always be included in any labeling study

\*\* PBS: Phosphate Buffered Saline, pH 7.2

**Application note for anti-kappa and/or anti-lambda Ig combinations**

Add 2 ml of PBS containing 0.001% (v/v) Heparin (**prewarmed to 37 °C**) to the cell suspension  
Vortex, centrifuge (2 min at 300x g) and discard the supernatant  
Repeat this step twice  
Resuspend the pelleted blood cells in 100 µl PBS containing 0.001% (v/v) Heparin



**Handling and Storage**

Antibodies are supplied either as 100 tests per vial (1 ml) for singles or 50 tests per vial (1 ml) for dual and triple combinations. They are supplied in 0.01 M sodium phosphate, 0.15 M NaCl; pH 7.3, 0.2% BSA, 0.09% sodiumazide ( $\text{NaN}_3$ ). Store the vials at 2-8 °C. Monoclonal antibodies should be protected from prolonged exposure to light. Reagents are stable for the period shown on the vial label when stored properly.

**Warranty** Products sold hereunder are warranted only to conform to the quantity and contents stated on the label at the time of delivery to the customer. There are no warranties, expressed or implied, which extend beyond the description on the label of the product. IQ Products is not liable for property damage, personal injury, or economic loss caused by the product.

**Characterization**

To ensure consistently high-quality reagents, each batch of monoclonal antibody is tested for conformance with characteristics of a standard reagent. Representative flow cytometric data is included in this data sheet.

**Warning** All products contain sodiumazide. This chemical is poisonous and hazardous. Handling should be done by trained staff only.

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## References

1. De Leij, L., et al., 1985. Cancer Research 45: 2192-2200
  2. De Leij, L., et al., 1987. CHEST 91S: 9-11
  3. Berendsen, H.H.,etal., 1988. Clin. Pathol. 41: 273-276
  4. Berendsen, H.H., et al., 1988. Eur. J. Cancer Clin. Oncol. 24: 915-922
  5. Berendsen, H.H., et al., 1989. J. Clin Oncology 7: 1614-1620
  6. Van Camp, B., 1990. Blood, 76, 377-382
  7. Kishimoto et al. eds. 1998. Leukocyte Typing VI. Kobe, Japan
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## Explanation of used symbols



REF

Consult instructions for use

REF

Catalogue number

IVD

Sufficient for

IVD

In Vitro Diagnostic medical device

⚠

Caution, consult accompanying document

☀

Keep away from (sun)light

⚠

Biological risks

🌡

Temperature limitation (°C)

RUO

For Research Use Only

LOT

Batch code

🕒

Use by yyyy-mm-dd

🏭

Manufacturer

EC REP

Authorized Representative in the European Community

CE

Conformité Européenne (European Conformity)

		<b>Label - tandem</b>	<b>Ex -max (nm)</b>	<b>Em -max (nm)</b>
P	PURE	purified material	-	-
F	FITC	FITC	488	519
R	R-PE	PE	488, 532	578
C	CyQ	PE-Cy5.18	488, 532	667
A	APC		595, 633, 635, 647	660
PC	PerCP		488, 532	678
PCC	PerCP-Cy5.5		488, 532	695



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