

## PRODUCT INFORMATION SHEET

### Monoclonal antibodies detecting human antigens

#### **CD117**

R-PE

[RUO]

[REF]

IQP-558R

▼ 100 tests

[REF] IQP-558R50

▼ 50 tests

[RUO]

**For Research Use Only**



#### Description

##### Clone

104-D2

##### Isotype

murine IgG1

##### Specificity

c-Kit (mast/stem cell factor receptor, SCFR) recognizes a 145 kD receptor tyrosine kinase

##### Antigen distribution

c-Kit is expressed on pluripotent hematopoietic progenitor cells, mast cells and various cancer cells, e.g. acute myeloid leukemia cells.

##### Summary

c-Kit can be present in blood in two forms, the surface bound and the soluble form of the molecule. c-Kit is an important cell surface marker used to identify certain types of hematopoietic (blood) progenitors in the bone marrow and in peripheral blood in case of various cancers. In bone marrow the molecule is expressed in high levels on common myeloid progenitors (CMP), hematopoietic stem cells (HSC), multipotent progenitors (MPP). The molecule is expressed in low surface levels on common lymphoid progenitors (CLP). Apart from these hematopoietic cells also mast cells, melanocytes in the skin, and certain types of interstitial cells in the digestive tract express CD117. In mice the molecule is also expressed on prostate stem cells.

c-Kit receptor is a receptor tyrosine kinase that regulates cell proliferation, adhesion, chemotaxis, apoptosis and other cell processes. Mutations of the molecule can lead to growth and progression of tumours, like mast cell disease, melanoma, gastrointestinal stromal tumors, testicular seminoma, acute myeloid leukemia (AML).

##### 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.

*This antibody (104-D2) is cross-reactive with non-human primate and bovine c-Kit.*

##### Applications

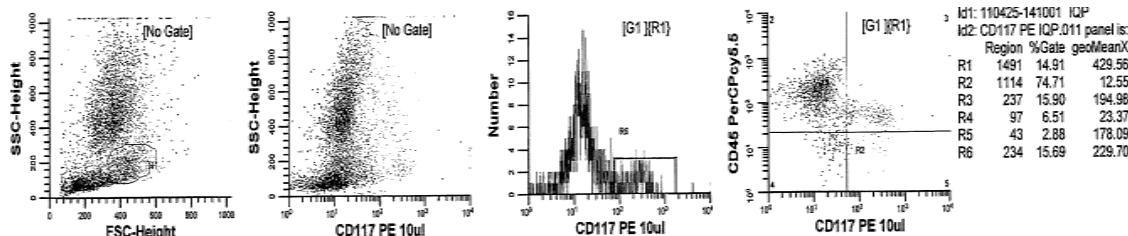
CD117 (104-D2) can be applied in flow cytometry for analysis of blood and bone marrow samples or in immunohistochemistry on frozen or paraffin embedded tissue sections.

##### HLDA Workshop

Leukocyte Typing VI., Kishimoto T. et al. (Eds.), Garland Publishing Inc. (1997).

##### Representative Data

Staining with CD 117 (clone 104-D2) monoclonal antibodies is illustrated by flow cytometry analysis of a patient sample. Direct staining was performed using 10 µl of the R-PE-conjugated antibody and 100 µl blood sample.



## **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 with 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 Starfix - fixation and permeabilization solution (IQP-200)
8. PBS (phosphate-buffered saline) pH 7.2
9. 1% paraformaldehyde solution in PBS (store at 2 to 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, APC, PerCP, PerCP-Cy5.5) 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) resp. 50 tests per vial (0.5 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 (NaN<sub>3</sub>). 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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### Explanation of used symbols

	Consult Instructions for use
	Catalogue number
	Sufficient for
	In Vitro Diagnostic medical device
	Caution, consult accompanying document
	Keep away from (sun-) light
	Biological Risks
	Temperature limitation (°C)
	For Research Use Only
	Batch code
	Use by yyyy-mm-dd
	Manufacturer
	Authorised Representative in the European Community

		Label - tandem	Ex -max (nm)	Em -max (nm)
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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### References

1. Broudy VC, et al. 1998. Blood. Feb 1;91(3):898-906.
2. Broudy VC, et al. 1999. Blood. Sep 15;94(6):1979-86.
3. Blair A, et al. 2000. Exp Hematol. Jun;28(6):660-71.
4. Leukocyte Typing VI., Kishimoto T. et al. (Eds.), Garland Publishing Inc. (1997).



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