Desmoglein 3
Concentrated and Prediluted Monoclonal Antibody
901-419-030518

Desmoglein 3 [BC11] is a mouse monoclonal antibody that is intended for laboratory use in the qualitative identification of desmoglein 3 protein by immunohistochemistry (IHC) in formalin-fixed paraffin-embedded (FFPE) human tissues. The clinical interpretation of any staining or its absence should be complemented by morphological studies using proper controls and should be evaluated within the context of the patient’s clinical history and other diagnostic tests by a qualified pathologist.

Summary and Explanation:
Desmoglein 3 (DSG3) is a calcium-binding transmembrane glycoprotein component of desmosomes in vertebrate epithelial cells. Desmosomes are cell-cell junctions between epithelial, myocardial, and certain other cell types. Currently, three desmoglein subfamily members have been identified and are members of the cadherin cell adhesion molecule superfamily. These desmoglein gene family members are located in a cluster on chromosome 18. This protein has been identified as the auto antigen of the autoimmune skin blistering disease pemphigus vulgaris. Lung studies have shown that DSG3 had a sensitivity and specificity of 83% and 100% respectively, in detecting squamous cell carcinoma (SqCC) versus adenocarcinoma. Thus, DSG3 is a first class marker for lung SqCC and can be a useful ancillary marker to separate SqCC from other subtypes of lung cancer. Other studies have shown that DSG3 expression in lung SqCC indicated a poor prognosis in lung cancers and portends a more aggressive clinical outcome.

Principle of Procedure:
Antigen detection in tissues and cells is a multi-step immunohistochemical process. The initial step binds the primary antibody to its specific epitope. After labeling the antigen with a primary antibody, a secondary antibody is added to bind to the secondary antibody; this detection of the bound antibody is evidenced by a colorimetric reaction.

Source: Mouse monoclonal
Species Reactivity: Human; others not tested
Clone: BC11
Isotype: IgG1
Total Protein Concentration: ~10 mg/ml. Call for lot specific Ig concentration.
Epitope/Antigen: Desmoglein 3
Cellular Localization: Cell membrane
Positive Tissue Control: Lung squamous cell carcinoma
Known Applications:
Immunohistochemistry (formalin-fixed paraffin-embedded tissues)
Supplied As: Buffer with protein carrier and preservative
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.
Protocol Recommendations:
Peroxide Block: Block for 5 minutes with Biocare’s Peroxidazed 1.

Intended Use:
For In Vitro Diagnostic Use

Catalog Number: CM 419 A, C
Description: 0.1, 1.0 ml, concentrated
Dilution: 1:100
Diluent: Renoir Red

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Description: 6.0 ml, prediluted
Dilution: Ready-to-use

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Protocol Recommendations Cont’d:
Preparation: Perform heat retrieval using Biocare’s Diva Decloaker (preferred) or Reveal Decloaker. Refer to the Diva or Reveal Decloaker data sheet for specific instructions.

Block (Optional): Incubate for 5-10 minutes at RT with Biocare’s Background Punisher.

Primary Antibody: Incubate for 30 minutes at RT.

Probe: Incubate for 10 minutes at RT with a MACH 4 Probe.

Polymer: Incubate for 10-20 minutes at RT with a MACH 4 Polymer.

Chromogen: Incubate for 5 minutes at RT with Biocare’s DAB – OR – Incubate for 5-7 minutes at RT with Biocare’s Warp Red.

Counterstain: Counterstain with hematoxylin. Rinse with deionized water. Apply Tacha’s Bluing Solution for 1 minute. Rinse with deionized water.

Technical Notes:
1. This antibody has been standardized with Biocare’s MACH 4 detection system. Use TBS buffer for washing steps.
2. If used with PulmoPanel™ it is strongly recommended that Diva + MACH 4 detection be used.

Limitations:
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 titer listed are not applicable to other detection systems, as results may vary. The data sheet recommendations and protocols are based on exclusive use of Biocare products. Ultimately, it is the responsibility of the investigator to determine optimal conditions. The clinical interpretation of any positive or negative staining should be evaluated within the context of clinical presentation, morphology and other histopathological criteria by a qualified pathologist. The clinical interpretation of any positive or negative staining should be complemented by morphological studies using proper positive and negative internal and external controls as well as other diagnostic tests.

Quality Control:

Precautions:
1. 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 buildup in plumbing. (Center for Disease Control, 1976, National Institute of Occupational Safety and Health, 1976) (6)
2. 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 into contact with sensitive areas, wash with copious amounts of water.

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Precautions Cont’d:
3. Microbial contamination of reagents may result in an increase in nonspecific staining.
4. Incubation times or temperatures other than those specified may give erroneous results. The user must validate any such change.
5. Do not use reagent after the expiration date printed on the vial.
6. The SDS is available upon request and is located at http://biocare.net.

Troubleshooting:
Follow the antibody specific protocol recommendations according to data sheet provided. If atypical results occur, contact Biocare’s Technical Support at 1-800-542-2002.

References: