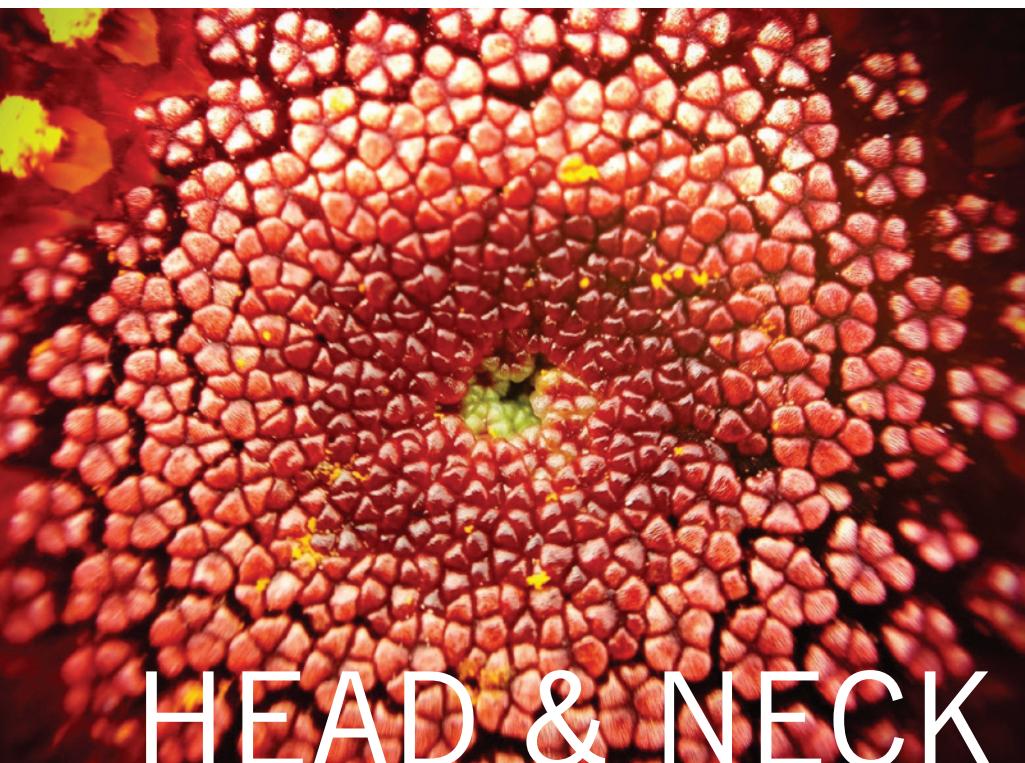


Key Antibodies For










Head & Neck Cancer



Head and neck cancers are rare diagnosed cancers in the United States, with about 2.5% of all new cancer cases classified as oral cavity and pharynx, contributing approx. 1.4% of cancer deaths yearly. As of 2011, there were approximately 282,000 people living with head and neck cancers in the United States. Those diagnosed with head and neck cancers have a 5 year survival rate of 62.7%. Over the last 10 years, both the new cancer case rate and the death rate have been stable. Biocare Medical is proud to offer key head and neck antibodies that may aid in the identification of their respective proteins by IHC in FFPE tissues.

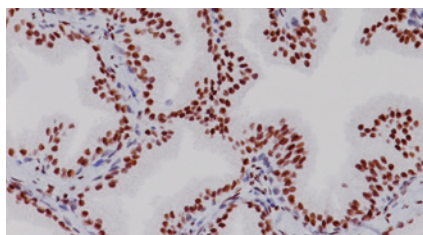
SEER Cancer Statistics Factsheets: Oral Cavity and Pharynx Cancer. National Cancer Institute. Bethesda, MD, <http://seer.cancer.gov/statfacts/html/oralcav.html>

Key Antibodies for Head & Neck Cancer

Product Name	Source	Clone	Catalog Number
Androgen Receptor		AR441	ACI 109, API 109
Calponin		CALP	CM 172; PM 172
CD117/c-kit		EP10	CME 296; PME 296; IP 296; OAI 296
CK7		BC1	CRM 339; PRM 339; IP 339
DOG1		DOG1.1	CM 385; PM 385; OAI 385
GFAP		GA-5	CM 065; PM 065
HPV-16		CAMVIR-1	CM 186
p63		4A4	CM 163; PM 163; IP 163; OAI 163; VP 163
SOX10 (M)		BC34	ACI 3099; API 3099; IPI 3099; OAI 3099; AVI 3099

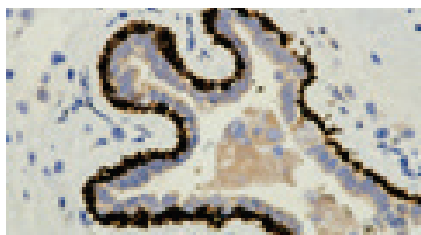
www.biocare.net/head-neck

Key Antibodies for Head & Neck Cancer



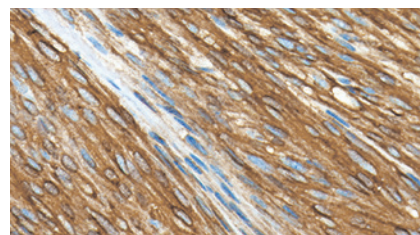
Androgen Receptor

Androgen receptor is expressed in salivary duct carcinomas but not in other salivary gland tumors. When it is expressed along with CK7, GCDPF-15 and high molecular weight cytokeratins, it supports a diagnosis of salivary duct carcinoma in men with unknown PSA positive metastatic carcinoma.



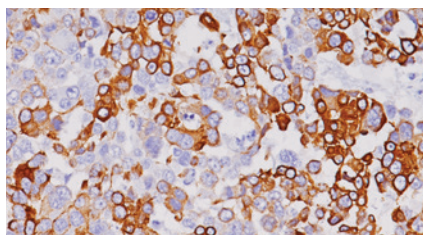
Calponin

Calponin appears to be a sensitive and specific marker to identify myoepithelial differentiation for myoepithelial carcinoma. It is also expressed in adenoid cystic carcinoma and epithelial-myoepithelial carcinoma but not in other head and neck tumors.



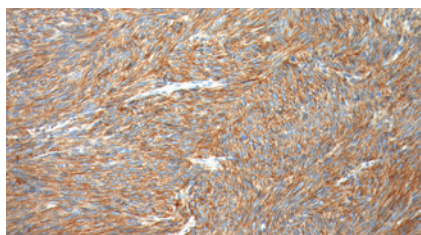
CD117/c-kit

Most adenoid cystic carcinomas show strong and diffuse expression of c-kit. It may be useful in differentiating adenoid cystic carcinoma from some of its mimics. c-kit may also be expressed in some salivary gland tumors such as basal cell adenocarcinoma.



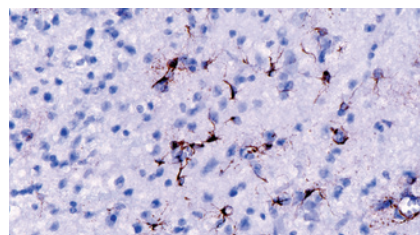
CK7

Cytokeratin 7 (CK7) is expressed in the majority of salivary gland tumors with the exception of some mucoepidermoid and myoepithelial carcinomas. Most acinic cell carcinomas, adenoid cystic carcinomas, and salivary duct carcinomas express CK7.



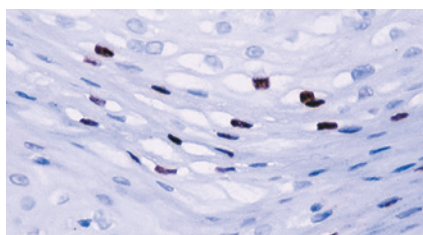
DOG1

DOG1 has variable expression in various salivary gland tumors. It is positive in acinic cell carcinomas with diffuse staining and negative in salivary duct carcinomas, oncocytomas/oncocytic carcinomas and myoepitheliomas. It may distinguish acinic cell carcinomas from morphologic mimics.



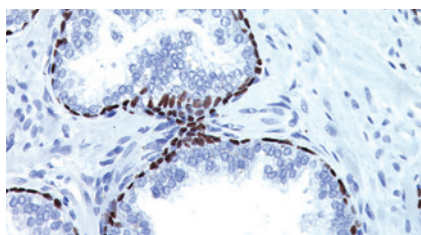
GFAP

GFAP may be helpful in distinguishing pleomorphic low-grade adenocarcinoma from pleomorphic adenoma/canalicular adenoma. Most pleomorphic adenomas show strong GFAP expression, while only rare polymorphous low-grade adenocarcinomas show faint reactivity for GFAP.



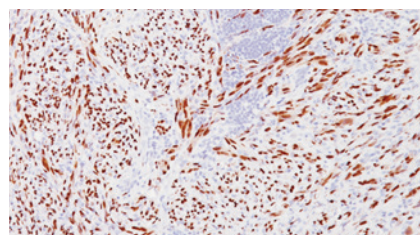
HPV-16

HPV-16 infection has been identified in a subset of patients with head and neck squamous cell carcinomas especially carcinomas of oropharynx and base of tongue. Evidence supports a causal role of HPV in oral carcinomas, which may be an important factor in determining treatment options.



p63

p63 is negative in acinic cell carcinomas and salivary duct carcinomas. It is expressed in epithelial-myoepithelial, mucoepidermoid, and clear cell carcinomas. Oncocytic mucoepidermoid carcinomas express p63 but not oncocytoma/oncocytic carcinomas.



SOX10 (M)

SOX10 exhibits differential expression in salivary gland tumors. Acini and intercalated duct tumors show high expression while striated and excretory duct tumors show no expression. SOX10 may be a potential marker for acinar and intercalated duct differentiation in the diagnosis of salivary gland tumors.