




















Key Antibodies For Skin Cancer



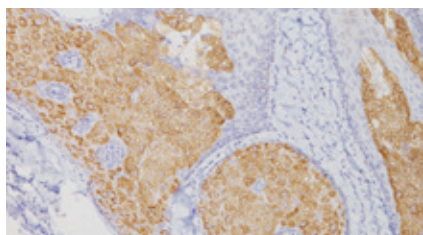
Skin cancers are the 6th most diagnosed cancers in the United States, with about 4.5% of all new cancer cases classified as melanoma of the skin, resulting in approx. 1.7% of cancer deaths yearly. As of 2012, there were approximately 997,000 people living with skin cancers in the United States. Those diagnosed with skin cancer have a 5 year survival rate of 91.5%. Over the last 10 years, the new cancer case rate has risen an average of 1.4% each year but the death rate has been stable. Biocare Medical is proud to offer key dermatopathology antibodies that may aid in the identification of their respective proteins by IHC in FFPE tissues.

SEER Cancer Statistics Factsheets: Melanoma of the Skin. National Cancer Institute. Bethesda, MD, <http://seer.cancer.gov/statfacts/html/melan.html>

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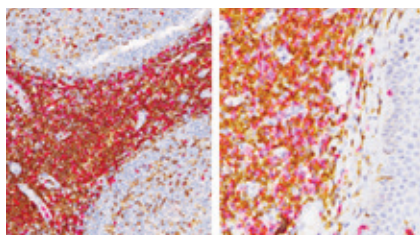
Product Name	Source	Clone	Catalog Number
Adipophilin		Polyclonal	ACI 3138; API 3138
CD4 + CD8	 	4B12 + SP16	API 3157DS
HMB45 + MART-1 + Tyrosinase	   	HMB45 + M2-7C10/M2-9E3 + T311	CM 165; PM 165; IPI 165; VP 165
Microphthalmia Transcription Factor		34CA5	CM 423; PM 423
Nerve Growth Factor Receptor		EP31	ACI 369
Pan Melanoma + Ki-67	   	M2-7C10/M2-9E3 + T311 + SP6	PM 362DS
Pan Melanoma + S100	   	M2-7C10/M2-9E3 + T311 + N/A	PPM 213DS
pHH3 (RM)		BC37	ACI 3130; API 3130
SOX10 (M)		BC34	ACI 3099; API 3099; IPI 3099; AVI 3099; OAI 3099

Key Antibodies for Skin



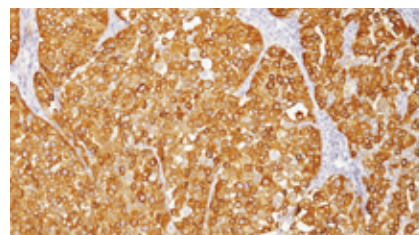
Adipophilin

Adipophilin may be a useful marker of intracytoplasmic lipids, as seen in sebaceous lesions. It exhibits membranous staining in sebaceous adenomas and carcinomas with uptake in intracytoplasmic lipid vacuoles. In poorly differentiated sebaceous carcinoma, it also highlights sebocytes and xanthelasma.



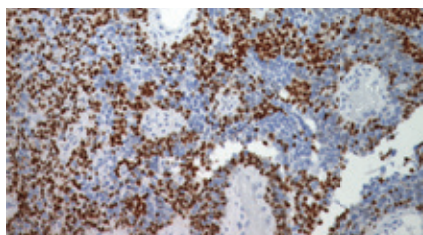
CD4 + CD8

The expression or loss of both CD4 and CD8 is more likely in *mycosis fungoides*-type cutaneous T-cell lymphomas than reactive T-cell infiltrates. A CD4:CD8 ratio greater than 2 may also be helpful in distinguishing mycosis fungoides from its inflammatory mimics.



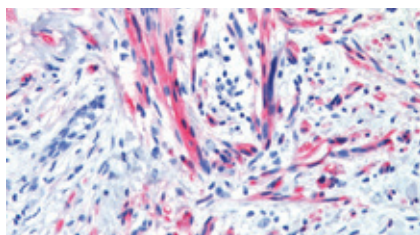
HMB45 + MART-1 + Tyrosinase

HMB45 + MART-1 + Tyrosinase is an antibody cocktail suitable as a pan melanoma screener. HMB45 is relatively specific for melanomas. MART-1/Melan A is specific to melanocytic lesions and labels metastatic melanomas. Tyrosinase labels a high percentage of desmoplastic melanomas.



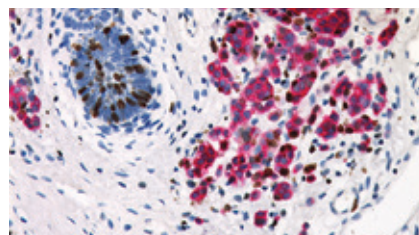
Microphthalmia Transcription Factor

Microphthalmia Transcription Factor (MITF) is a sensitive and specific marker for malignant melanoma, including some spindle-cell variants. MITF may be useful for identification of melanoma, melanocytic soft tissue tumors and the perivascular epithelioid cell family of tumors (PEComas).



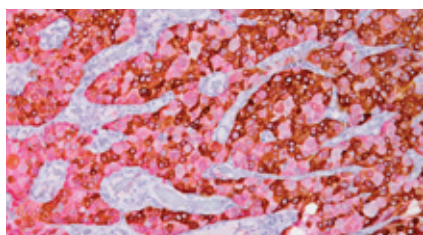
Nerve Growth Factor Receptor (NGFR)

Nerve Growth Factor Receptor (NGFR), along with S100, may diagnose desmoplastic and neurotrophic malignant melanomas, which are often negative for other melanocytic markers (HMB45, MART-1/Melan-A). Also known as p75, it is expressed on Schwann cells, neuronal axons and perineural cells.



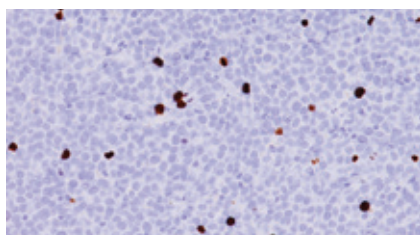
Pan Melanoma + Ki-67

Pan Melanoma (MART-1 + Tyrosinase) + Ki-67 aids to identify the proliferation rate of melanocytic lesions in cases with sparse melanocytes, dense lymphocytic infiltrates or melanocytes mixed with fibroblasts. In general, a higher proliferative fraction is seen in melanoma than in melanocytic nevi.



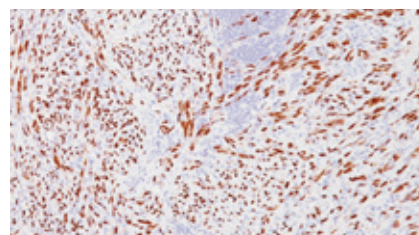
Pan Melanoma + S100

Pan Melanoma (MART-1 + Tyrosinase) + S100 may aid in identifying metastatic melanoma. MART-1 is specific for melanocytic lesions while tyrosinase is a sensitive marker labeling a high percentage of desmoplastic melanomas. S100 stains almost all benign and malignant melanomas and their metastases.



pHH3 (RM)

Phosphohistone H3 (pHH3) (RM) is a sensitive marker specific for cells undergoing mitosis. IHC with pHH3 may provide a more accurate assessment of all mitotic cells compared to H&E. Prognostic significance of the mitotic index has been reported to be of great value in melanoma.



SOX10 (M)

SOX10 is an important marker in melanoma, gliomas and benign tumors such as schwannomas. It is expressed in 97-100% of desmoplastic and spindle cell melanomas and in 100% of nevi. The majority of oligodendrogliomas, astrocytomas, and poorly differentiated glioblastomas also express SOX10.