



Recombinant Glypican-3 (GPC3) (Hepatocellular Carcinoma Marker); Clone rGPC3/863 (Concentrate)

Availability/Contents:	<u>Item #</u>	<u>Volume</u>
	RA0669-C.1	0.1 ml
	RA0669-C.5	0.5 ml
	RA0669-C1	1 ml

Description:

Species:	Mouse
Immunogen:	Recombinant full-length human GPC3 protein
Clone:	rGPC3/863
Isotype:	IgG1 / Kappa
Entrez Gene ID:	2719
Hu Chromosome Loc.:	Xq26.2
Synonyms:	Glypican-3, GTR2-2, Intestinal protein OCI-5, MXR7, DGSX; Glypican proteoglycan 3; GPC3; GTR2-2; Heparan sulphate proteoglycan; Intestinal protein OCI-5; MXR7; OCI-5; SDYS; Secreted glypican-3; SGBS1
Mol. Weight of Antigen:	~67kDa
Format:	200ug/ml of antibody purified from Bioreactor Concentrate by Protein A/G. Prepared in 10mM PBS with 0.05% BSA & 0.05% azide.
Specificity:	Recognizes Glypican-3 (GPC3), a glycosylphosphatidyl inositol-anchored membrane protein, which may also be found in a secreted form.
Background:	Anti-GPC3 has been identified as a useful tumor marker for the diagnosis of hepatocellular carcinoma (HCC), hepatoblastoma, melanoma, testicular germ cell tumors, and Wilm s tumor. In patients with HCC, GPC3 is overexpressed in neoplastic liver tissue and elevated in serum, but is undetectable in normal liver, benign liver, and the serum of healthy donors. GPC3 expression is also found to be higher in HCC liver tissue than in cirrhotic liver or liver with focal lesions such as dysplastic nodules and areas of hepatic adenoma (HA) with malignant transformation. In the context of testicular germ cell tumors, GPC3 expression is up regulated in certain histologic subtypes, specifically yolk sac tumors and choriocarcinoma. A high level of GPC3 expression is also found in some types of embryonal tumors, such as Wilm s tumor and hepatoblastoma, with a low or undetectable expression in normal adjacent tissue. In patients with thyroid cancer, expression of GPC3 is dramatically enhanced in certain types of cancers: 100% in follicular carcinoma and 70% in papillary carcinoma. Expression of GPC3 in follicular carcinoma is significantly higher than that of follicular adenoma. In contrast, GPC3 is not expressed in anaplastic carcinoma.
Species Reactivity:	Human, Rat
Positive Control:	HepG2 or 293T cells. Human hepatocellular carcinoma.
Cellular Localization:	Cell membrane

Storage: 2° C  8° C



ScyTek Laboratories, Inc.
 205 South 600 West
 Logan, UT 84321
 U.S.A.

Instructions For Use

RA0669-C-IFU-RUO

Rev. Date: May 7, 2024

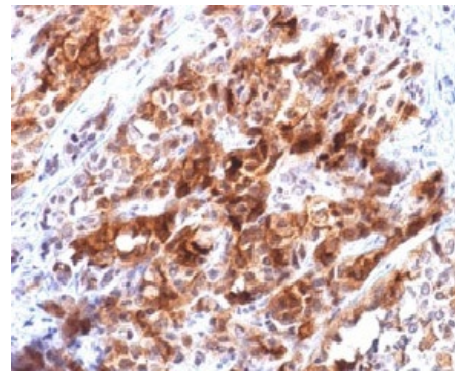
Revision: 1

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Titer/ Working Dilution: Immunohistochemistry (Frozen and Formalin-fixed): 1-2 µg/ml
 Flow Cytometry: 1-2 µg/million cells
 Immunofluorescence: 1-3 µg/ml
 Microbiological State: This product is not sterile.

Uses/Limitations: Not to be taken internally.
 For Research Use Only.
 This product is intended for qualitative immunohistochemistry with normal and neoplastic formalin-fixed, paraffin-embedded tissue sections, to be viewed by light microscopy.
 Do not use if reagent becomes cloudy.
 Do not use past expiration date.
 Non-Sterile.



Formalin-fixed, paraffin-embedded human hepatocellular carcinoma stained with Glypican-3 Mouse Recombinant Monoclonal Antibody (rGPC3/863).

Ordering Information and Current Pricing at www.scytek.com

Procedure:


1. **Tissue Section Pretreatment (Highly Recommended):** Staining of formalin fixed, paraffin embedded tissue sections is significantly enhanced by pretreatment with Tris-EDTA HIER Solution (10x) pH 9.0 (ScyTek catalog# TES500) or Citrate Plus (10x) HIER Solution (ScyTek catalog# CPL500).
2. **Primary Antibody Incubation Time:** We suggest an incubation period of 30 minutes at room temperature. However, depending upon the fixation conditions and the staining system employed, optimal incubation should be determined by the user.
3. **Visualization:** For maximum staining intensity we recommend the “UltraTek HRP Anti-Polyvalent Lab Pack” (ScyTek catalog# UHP125, see IFU for instructions) combined with the “DAB Chromogen/Substrate Bulk Pack (High Contrast)” (ScyTek catalog# ACV500, see IFU for instructions).


Precautions:

Contains Sodium Azide as a preservative (0.09% w/v).
 Do not pipette by mouth.
 Avoid contact of reagents and specimens with skin and mucous membranes.
 Avoid microbial contamination of reagents or increased nonspecific staining may occur.
 This product contains no hazardous material at a reportable concentration according to U.S. 29 CFR 1910.1200, OSHA Hazardous Communication Standard and EC Directive 91/155/EC.

References:

1. Yan, B., et al. 2011. Ann. Diagn. Pathol. 15: 162-169

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Warranty:

No products or “Instructions For Use (IFU)” are to be construed as a recommendation for use in violation of any patents. We make no representations, warranties or assurances as to the accuracy or completeness of information provided on our IFU or website. Our warranty is limited to the actual price paid for the product. ScyTek Laboratories, Inc. is not liable for any property damage, personal injury, time or effort or economic loss caused by our products. Immunohistochemistry is a complex technique involving both histological and immunological detection methods. Tissue processing and handling prior to immunostaining can cause inconsistent results. Variations in fixation and embedding or the inherent nature of the tissue specimen may cause variations in results. Endogenous peroxidase activity or pseudoperoxidase activity in erythrocytes and endogenous biotin may cause non-specific staining depending on detection system used.

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