



cyTCR β -APC
Ref: CYT-bF1AP

For Research Use Only

INTENDED USE

cyTCR β -APC is a monoclonal antibody (MAb) labelled with allophycocyanine (APC) designed for use as a direct immunofluorescence reagent in the identification and enumeration of cells which express the β chain of the T-cell Receptor (TCR) complex by flow cytometry.

SUMMARY AND EXPLANATION

Flow Cytometry is a powerful tool for the analytical and quantitative characterization of cells which provides rapid, quantitative and multiparametric analysis of heterogeneous cell populations on a cell-by-cell basis. Flow cytometry is performed on cells in liquid suspension that have been incubated with fluorescently-labeled antibodies directed against specific cellular proteins. The relative fluorescence intensity of the positive cells indicates the amount of antibody bound to specific binding sites on the cells, and therefore provides a relative measure of antigen expression.

The 8A3 antibody is specific for human TCR β chain constant region which is expressed by $\alpha\beta$ TCR-expressing thymocytes and peripheral T lymphocytes⁽¹⁻³⁾. It does not react with $\gamma\delta$ TCR-bearing T cells. In the fetal and adult thymus, the TCR β -chain may form homodimers or pair with the pre-TCR α -chain on the surface of immature thymocytes before expression of the TCR α -chain. The 8A3 antibody has been cited in several research papers involving the study of lymphoma. It is most often used for tissue staining and has been used to stain both frozen sections and paraffin-embedded tissue, but is also suitable for immunoprecipitation and flow cytometry⁽⁴⁻⁵⁾.

PRINCIPLES OF THE PROCEDURE

Flow cytometry (FC) is an innovative technology by means of which different cell characteristics are simultaneously analyzed on a single cell basis. This is achieved by means of hydrodynamic focusing of cells that pass aligned one by one in front of a set of light detectors; at the same time they are illuminated by a laser beam. The interaction of the cells with the laser beam generates signals of two different kinds: those generated by dispersed light (FSC/SSC), which mainly reflects the size of the cell and its internal complexity, and those related to the emission of light by the fluorochromes present in the cell. These signals become electric impulses which are amplified and registered as digital signals to be processed by a computer.

When the reagent is added to the sample, the fluorochrome-labelled MAb presents in the reagent bind specifically to the antigens they are directed against, allowing the detection by FC of the cell populations carried by the antigen.

Because each flow cytometer has different operating characteristics each laboratory must determine its optimal operating procedure.

REAGENT COMPOSITION

Purified monoclonal TCR β antibody conjugated with allophycocyanine (APC), supplied in phosphate buffered saline with 0,1% sodium azide.

Clone: 8A3.

Isotype: IgG1.

Amount per 0.5 ml vial: 100 tests (5 μ l MAb per determination)

Reagents are not considered sterile.

STORAGE CONDITIONS

The reagent is stable until the expiration date shown on the label, when stored at 2-8 $^{\circ}$ C. The reagent should not be frozen or exposed to direct light during storage or during incubation with cells. Keep the reagent vial dry. Once opened, the vial must be stored in a vertical position to avoid any possible spillage.

WARNINGS AND RECOMMENDATIONS

1. For research use only.
2. This product is supplied ready to use. If it is altered by dilution or addition of other components, such conditions must be validated by the user.
3. The reagent is stable until the expiration date shown on the label if it is properly stored. Do not use after the expiration date shown on the label. If the reagents are stored in conditions different from those recommended, such conditions must be validated by the user.
4. Alteration in the appearance of the reagent, such as the precipitation or discoloration indicates instability or deterioration. In such cases, the reagent should not be used.
5. It contains 0.1% sodium azide (CAS-Nr. 26628-22-8) as a preservative, but even so care should be taken to avoid microbial contamination of reagent or incorrect results may occur.
 - Sodium azide (NaN₃) is harmful if swallowed (R22), if swallowed, seek medical advice immediately and show this container or label (S46).
 - Wear suitable protecting clothing (S36).
 - Contact with acids liberates very toxic gas (R32).
 - Azide compounds should be flushed with large volumes of water during disposal to avoid deposits in metal drains where explosive conditions may develop.
6. All patient specimens and materials with which they come into contact are considered biohazards and should be handled as if capable of transmitting infection⁽⁶⁾, and disposed according to the legal precautions established for this type of product. Also recommended is handling of the product with appropriate protective gloves and clothing, and its use by personnel sufficiently qualified for the procedures described. Avoid contact of samples with skin and mucous membranes. After contact with skin, wash immediately with plenty of water.
7. Use of the reagent with incubation times or temperatures different from those recommended may cause erroneous results. Any such changes must be validated by the user.

PROCEDURE

Material included

cyTCR β -APC sufficient for 100 determinations (5 μ l MAb per determination).

Material required but not included

- 633 red laser-equipped flow cytometer and appropriate computer hardware and software.
- Test tubes suitable for obtaining samples in the flow cytometer used. Usually tubes with a rounded bottom for 6 mL, 12x 75 mm are used.
- Automatic pipette (100 μ L) and tips.
- Micropipette with tips.
- Chronometer
- Vortex Mixer
- Isotype control reagent
- Cell permeabilization kit
- Wash buffer as phosphate buffered saline (PBS) containing 0,1% sodium azide.

Preparation

Whole blood sample must be taken aseptically by means of a venipuncture ^(7, 8) in a sterilized tube for blood collection containing an appropriate anticoagulant (use of EDTA is recommended). The analysis requires 50 μ l of the whole blood sample per tube, assuming a normal range of approximately 4 to 10 x 10⁵ leucocytes per μ l. For samples with a high white blood cell count, dilute samples with PBS to obtain a concentration of cells approximately equal to 1 x 10⁴ cells/ μ l. Store the blood samples at 18-22°C until they are to be tested. It is advisable to test blood samples within the 24 hours after their extraction. Hemolyzed samples or samples with suspended cell aggregates should be rejected.

1. Transfer 50 μ l of the cell suspension to be analyzed (whole blood, bone marrow or mononuclear cells) to a test tube.
2. In case of use a staining protocol of cell surface antigens and intracellular antigens, add the appropriate volume of antibodies to surface staining. Mix gently by using a vortex mixer and incubate at room temperature for 15 minutes.
3. Add 100 μ l of Fixation Reagent. Mix gently to ensure that the cells are in suspension.
4. Incubate at room temperature for 15 minutes.
5. Add 2 ml PBS and mix gently by using a vortex mixer.
6. Centrifuge at 540g for 5 minutes.
7. Aspirate the supernatant, leaving approximately 50 μ l of fluid.
8. Mix thoroughly by using a vortex mixer to ensure that the cells are in suspension and add 100 μ L of Permeabilization Reagent. Add 5 μ L of CYT-bF1AP. Mix gently
Use a non-reactive antibody of the same isotype, and conjugated with the same fluorochrome, as a negative control.
9. Incubate in the dark at room temperature for 15 minutes.
10. Add 2 ml PBS and mix gently by using a vortex mixer.
11. Centrifuge at 540g for 5 minutes.
12. Aspirate the supernatant, leaving approximately 50 μ l of fluid.
13. Resuspend the cell pellet in 300 μ l PBS.
14. Acquire on a flow cytometer within the first three hours of finishing the sample preparation.

LIMITATIONS

- Blood samples should be stored at 18-22°C and be tested within the 24 hours after they are obtained.
- It is advisable to acquire stained samples to the cytometer as soon as possible to optimize the results. Nonviable cells may stain nonspecifically. Prolonged exposure of whole blood samples to lytic reagents may cause white cell destruction and loss of cells from the target population.
- When using whole blood procedures, all red blood cells may not lyse under following conditions: nucleated red blood cells, abnormal protein concentration or hemoglobinopathies. This may cause falsely decreased results due to unlysed red blood cells being counted as leukocytes.
- Results obtained by flow cytometry may be erroneous if the cytometer laser is misaligned or the gates are improperly set.
- Each laboratory should establish a normal range for β TCR-bearing T cells using its own test conditions.
- Certain patients may present special problems due to altered or very low number of certain cellular population.
- Cells separated from whole blood by means of density gradients may not have the same relative concentrations of cells as unseparated blood. This may be relatively insignificant for samples from individuals with normal white blood cell counts. In leukopenic patients, the selective loss of specific subsets may affect the accuracy of the determination.
- It is important to understand the normal pattern of expression of this antigen and its relation to the expression of other relevant antigens to carry out an adequate analysis ⁽¹⁻⁵⁾.
- Abnormal states of health are not always represented by abnormal percentages of certain leukocyte populations. An individual who may be in an abnormal state of health may show the same leukocyte percentages as a healthy person. For this reason, it is advisable to use the test results in combination with other clinical and diagnosis data.

QUALITY CONTROL

- To obtain optimum results it is advisable to verify the precision of pipettes and that the cytometer is correctly calibrated.
- In multicolor panels fluorochromes emit in different wavelengths but show a certain spectral overlapping which must be corrected by means of electronic compensation. The optimum levels of compensation can be established by analysis in a dot-plot diagram of cells from healthy individuals stained with mutually exclusive monoclonal antibodies conjugated with the fluorochromes to be used in the test.
- To evaluate the non-specific binding of the antibody, an appropriated isotype control tube can be prepared.

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WARRANTY

This product is warranted only to conform to the quantity and contents stated on the label. There are no warranties that extend beyond the description on the label of the product. Cytognos's sole liability is limited to either replacement of the product or refund of the purchase price.

EXPLANATION OF SYMBOLS

	Use by (YYYY-MM)
	Storage temperature limitation
	Consult instructions for use
RUO	For research use only
	Batch code
	Catalogue number
	Manufacturer

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