

Anti-IDH1 R132H

Catalog No.	Description		
AND64-5M	6 ml of Ready-to-Use Antibody for use with BioGenex Super Sensitive TM Detection Systems OR equivalent detection system		
AND64-10M	10 ml of Ready-to-Use Antibody in a barcode labeled vial for use with BioGenex Super Sensitive TM Detection Systems and i6000 TM Automated Staining Systems		
AYD64-YCD Ready-to-Use Antibody in Barcode labeled vial for use on the Xmatrx® Elite Staining System, 160 tests			
AYD64-50D Ready-to-Use Antibody in Barcode labele vial for use on the Xmatrx® Elite Staining System, 50 tests			
AYD64-4M Ready-to-Use Antibody in Barcode label vial for use on the NanoVIP® Staining System, 50 tests			

Clone	Species	Ig Class
MRQ-67	Rabbit	IgG

Intended Use

For In Vitro Diagnostic Use. This antibody is designed for the specific localization of human IDH1 R132H in formalin-fixed, paraffin-embedded (FFPE) tissue sections. Evaluation must be performed by a qualified pathologist.

Summary and Explanation

IDH1 (Isocitrate Dehydrogenase 1), a cytosolic enzyme in the Krebs citric acid cycle, exhibits the R132H mutation often seen in astrocytomas and oligodendroglial tumors, correlating with improved patient outcomes. This mutation causes abnormal IDH1 activity and the production of oncometabolite 2-hydroxyglutarate, promoting glioma formation and progression. IDH1 R132H aids in diagnosing different glioma grades and serves as a prognostic marker for gliomas and secondary glioblastoma multiforme, contributing to refining the molecular classification of adult gliomas when combined with other markers.

Storage and Handling

Store at 2-8°C. Fresh dilutions, if required, should be prepared prior to use and are stable and steady for up to one day at room temperature (20-26°C). Diluted antibody preparations can be refrigerated or frozen for extended shelf life.

Principles of the Procedure

Antigen detection by immunohistochemistry (IHC) is a two-step process wherein the primary antibody binds to the antigen of interest and that binding is detected by a chromogen. The <u>primary antibody</u> may be used in IHC using manual techniques or BioGenex

Automated Staining System. Positive and negative controls should always be run simultaneously with all patient specimens.

Reagents Provided

Rabbit Monoclonal Antibody human IDH1 R132H is affinity purified and diluted in PBS, pH 7.2, containing 1% BSA and 0.09% sodium azide.

Dilution of Primary Antibody

BioGenex Ready-to-Use antibodies have been optimized for use with the recommended BioGenex Detection System and should not require further dilution.

BioGenex concentrated antibodies must be diluted in accordance with the recommended protocol when used with the recommended BioGenex Detection System.

Recommended Protocol

Refer to the following table for conditions specifically recommended for this antibody. Refer to the BioGenex website for guidance on specific staining protocols or other requirements.

Parameter	BioGenex	
1 ar ameter	Recommendations	
Control Tissue	Astrocytoma, Oligodendroglioma, Glioblastoma, Acute Myeloid leukemia tissues as available	
	with Biogenex FB-D64N* & FG-D64N*	
Recommended Dilution for Concentrated Antibody	N/A	
Recommended Pretreatment (Manual/i6000)**	EZ-AR2 (HK522-XAK)	
Recommended	EZ-AR2 Elegance	
Pretreatment (Xmatrx & NanoVIP)	(HX032-YCD & HX046- 08XN)	
Antibody Incubation (Manual/i6000)	30-60 Min at RT	
Antibody Incubation (Xmatrx & NanoVIP)	30-60 Min at 25°C	
	Use BioGenex Two-Step OR	
Detection System for	One-Step Super Sensitive TM	
Manual, Xmatrx, NanoVIP	Polymer-HRP IHC Detection	
& i6000 systems***	System/DAB; see p. 2 for more information	

^{*}FB: positive control micro chamber slides, FG: positive control microscopic slides. Xmatrx & NanoVIP requires micro chamber slides.

^{**}Pretreatment times will vary based on individual microwave power. ***For automation systems (Xmatrx-Elite, NanoVIP & i6000 Diagnostics), refer to the factory protocols provided with the instrument.

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Detection	Two-Step	One-Step	Link and
System	HRP Kit	HRP Kit	Label Kit
,	QD440-XAKEN (1000 Test) QD630-XAKEN (1000 Test) (1000 Test)		QP300- XAKE (1000 Test)
Manual	QD420-YIKEN (500 Test) QD400-60KEN (60 Test)	QD620-XAKEN (500 Test)	QP900- 9LE (500 Test)
Xmatrx -	QD550-YCDEN	QD610-YADEN	N/A
Automation	(200 Test)	(200 Test)	
NanoVIP-	QD551-YCDEN	QD611-YADEN	N/A
Automation	(100 Test)	(100 Test)	
i6000 -	QD410-YAXEN	QD610-YAXEN	N/A
Automation	(200 Test)	(200 Test)	
For more information, visit www.biogenex.com.			

Precautions

This product contains sodium azide at concentrations of less than 0.1%. Sodium azide is not classified as a hazardous chemical at the product concentrations, but proper handling protocols should be observed. For more information, a Safety Data Sheet (SDS) for sodium azide is available upon request. Dispose of unused reagents according to Local, State and Federal Regulations. Wear suitable Personal Protective Equipment, do not pipette reagents by mouth, and avoid contact of reagents and specimens with skin and mucous membranes. If reagents or specimens come in contact with sensitive area, wash with copious amounts of water.

Quality Control

Refer to BioGenex detection system documents for guidance on general quality control procedures.

Troubleshooting

Refer to the troubleshooting section in the documentation for BioGenex Detection Systems (or equivalent detection systems) for remedial actions on detection system related issues, or contact BioGenex Technical Support Department at 1-800-421-4149 or support@biogenex.com or your local distributor to report unusual staining.

Expected Results

This antibody stains cytoplasm in positive cells in formalin-fixed, paraffin embedded tissue sections. An example image of a tissue section stained with this antibody can be found on the product page on the BioGenex website. Interpretation of the staining result is solely the responsibility of the user. Experimental results should be confirmed by a medically-established diagnostic product or procedure.

Limitations of the Procedure

Improper tissue handling and processing prior to immunostaining can lead to inconsistent results. Variations in embedding and fixation or the nature of the tissue may lead to variations in results. Endogenous peroxidase activity or pseudo peroxidase activity in erythrocytes and tissue biotin may result in non-specific staining based on the detection system employed. Tissues containing Hepatitis B Surface Antigen (HBsAg) may give false positive with horseradish peroxidase systems. Improper counterstaining and mounting may compromise the interpretation of results.

Bibliography

- 1. Yang, H, et al. IDH1 and IDH2 mutations in tumorigenesis: mechanistic insights and clinical perspectives. Clin Cancer Res. 2012; 18:5562-5571.
- 2. Balss, J, et al. Analysis of the IDH1 codon 132 mutation in brain tumors. Acta Neuropathol. 2008; 116:597–602.
- Watanabe, T, et al. IDH1 mutations are early events in the development of astrocytomas and oligodendrogliomas. Am. J. Pathol. 2009; 174:1149-1153.
- Louis, D.N., et al. The 2016 World Health Organization Classification of Tumors of the Central Nervous System: A summary. Acta Neuropathol. 2016; 131:803-820.

2°C 8°C	Temperature Limitation	IVD	In Vitro Diagnostic Medical Device
\boxtimes	Use By Date	LOT	Batch Code
NON STERILE	Non-Sterile	[]i	Consult Instructions for Use
EC REP	Representative in the European Community	***	Manufacturer

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