A Panel of Rabbit Monoclonal Antibody Marker for Prostate Cancer

Aihua Li, Anuradha Munagala, Emmie Fernandez, Getachew Sequar, and Taiying Chen Epitomics Inc., Burlingame, CA

Abstract

Tumor markers are useful in identification of tumor origin and in analysis of the biological characteristics of specific tumor. The objective of this study was to determine the immunohistochemical application of a panel of rabbit monoclonal antibodies against human prostate tumor specific antigens Alpha-methylacyl-CoA racemase (AMACR or P504s), androgen receptor (AR), ETS-related gene (ERG), prostatic acid phosphatase (PAP) and prostate specific antigen (PSA) on formalin-fixed and paraffin-embedded tissues. These antibodies were developed with a unique and proprietary RabMAb® technology, designated as EP clone product line (EP ClonesTM). All the antibodies showed excellent signalto-noise ratio in immunohistochemical staining on formalin-fixed and paraffin-embedded tissues. Rabbit monoclonal antihuman AMACR, AR, ERG, PAP and PSA are valuable for immunohistochemical analysis of prostate cancer. (The J Histotechnol 33(4):179-181, 2010)

Key words: immunohistochemistry (IHC), prostate cancer, rabbit monoclonal antibodies

Introduction

Prostate cancer is one of the most common cancers in men worldwide and a leading cause of death among all cancer types (1). Immunohistochemical analysis of tumor markers has been useful in pathological diagnosis and understanding the biological characteristics of tumor. Alpha-methylacyl-CoA racemase (AMACR or P504s), androgen receptor (AR), ETS-related gene (ERG), prostatic acid phosphatase (PAP) and prostatespecific antigen (PSA) are specific markers for prostate cancer (2–4). Individual use of these markers has been helpful in prostate cancer analysis. Combined use of these markers provides improved management for prostate cancer.

At Epitomics Inc., (Burlingame, CA), RabMAb[®], a unique and proprietary method for making monoclonal antibodies from rabbits rather than the conventional method of starting with mice, has been established. RabMAb[®] technology offers the combined benefits of superior antigen recognition with the specificity and consistency of a monoclonal antibody, yielding the greatest possible quality antibody. A panel of rabbit monoclonal antibodies directed against human

AMACR, AR, ERG, PAP, and PSA was developed with the use of RabMAb[®] technology. These uniquely characterized rabbit monoclonal antibodies, designated as EP clone product line (EP ClonesTM), are ideal for immunohistochemical detection of target proteins in formalin-fixed and paraffinembedded (FFPE) tissues. MACR or P504s), (ERG), prostatic fic antigen (PSA) d tissues. These e and proprietary lone product line

Human Tissues

Human prostate tissue microarray constructed with FFPE tissue was used for immunohistochemical staining. The tissue microarray contains five normal prostate, 18 prostate hyperplasia, and seven prostate adenocarcinoma tissue samples.

Detection Systems and Ancillary Reagents

All detection systems and ancillary reagents were from Epitomics, Inc. EpiPrecisionTM Rabbit HRP Kits, a Streptavidin-HRP Biotin Detection system (cat. no. DK-0001, DK-0003), and EpiVisionTM Rabbit HRP Kits, a polymer detection system (cat. no. DK-0002, DK-0004), were used in this study.

Immunohistochemistry

Tissue sections (4 µM) were deparaffinized in xylene and rehydrated through a serials of graded ethanol. Epitope retrieval was performed using either Citrate buffer (Epitomics) or Tris EDTA buffer (Epitomics) with a pressure cooker (Biocare, Concord, CA) according to the manufacturer's instruction. Endogenous peroxidase activity was blocked by peroxidase solution (Epitomics) for 10 min at room temperature. After blocking with Blocking solution (Epitomics), sections were incubated with primary antibodies (Table 1) for 30 min at room temperature. All concentrated primary antibodies were diluted in primary antibody dilution buffer (Epitomics) at 1:100 dilution. Immunoreactivity was detected with EpiPrecisionTM or EpiVisionTM following the manufacturer's instruction. Staining was visualized by DAB (Epitomics). Photographs were taken with a Leica microscope and image system (Leica, Bannockburn, IL).

Address reprint requests to Aihua Li, In Vitro Diagnostics, Epitomics, Burlingame, CA 94010. E-mail: Aihua.li@epitomics.com

Table 1.	Primary	antibodies	for	antigen	detection
Ianic I.	1 I IIIIaI y	announce	IUL	anugun	ucicciion

•					
Clone No.	Cat. No. (concentrated)	Cat. No. (prediluted)			
EP37	AC-0036	AP-0036			
EP120	AC-0070	AP-0070			
EP111	AC-0071	AP-0071			
EP53	AC-0051	AP-0051			
EP109	AC-0070	AP-0070			
	EP37 EP120 EP111 EP53	Clone No. (concentrated) EP37 AC-0036 EP120 AC-0070 EP111 AC-0071 EP53 AC-0051			

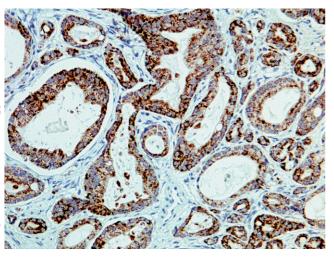


Figure 1. Staining of AMACR in human prostate cancer. Pretreatment: citrate; detection: EpiPrecisionTM.

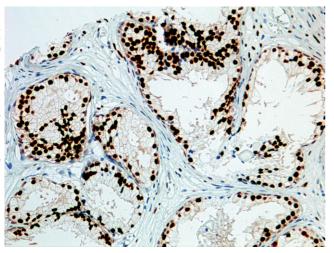


Figure 2. Staining of AR in human prostate hyperplasia. Pretreatment: citrate; detection: $EpiPrecision^{TM}$.

Results

The staining for all five antibodies in respective tissues showed clear signal; no background staining was observed. Anti-AMACR (Figure 1) and anti-ERG (Figure 3) showed immunoreactivity in cancer cells but not in normal prostate epithelial cells. Anti-AMACR stained cytoplasm of cancer cells in a granular pattern, whereas ERG was localized in nuclear of cancer cells. Anti-AR labeled nuclear of both normal prostate epithelial cells and tumor cells, with strong staining seen in cancer cells (Figure 2). Antibody to PAP (Figure 4) or PSA (Figure 5) strongly

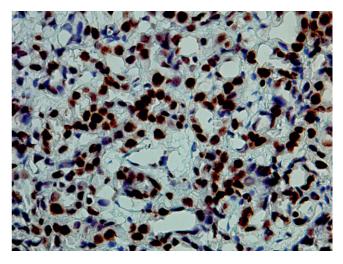


Figure 3. Staining of ERG in human prostate cancer. Pretreatment: Tris-ethylene diamine tetraacetic acid; detection: Epivision™.

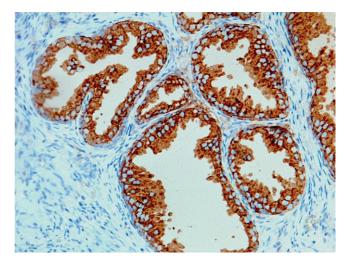


Figure 4. Staining of PAP in human prostate hyperplasia. Pretreatment: citrate; detection: EpiPrecisionTM.

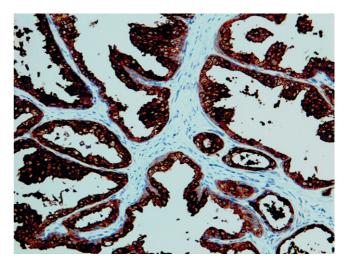


Figure 5. Staining of PSA in human prostate hyperplasia. Pretreatment: citrate; detection: $EpiPrecision^{TM}$.

stained cytoplasm of both normal prostate and tumor cells.

Conclusions

All five antibodies provided respective specific staining for their target proteins in benign and/or malignant prostate tissues. Antibody against AR or ERG gave nuclear staining whereas anti-AMACR, PAP and PSA gave cytoplasmic staining with the use of detection systems tailored to each antibody. These antibodies and detection systems give the excellent signal-to-noise ratio for all the tissue sections stained in this study. In conclusion, rabbit monoclonal antihuman AR, AMACR, ERG, PAP, and PSA are excellent antibodies for immunohistochemical analysis of prostate cancer in FFPE tissue.

References

- Haas GP, Delongchamps N, Brawley OW, Wang CY, de la Roza G: The worldwide epidemiology of prostate cancer: Perspectives from autopsy studies. <u>*Can J Urol* 15:3866–3871</u>, 2008.
- Hameed O, Humphrey PA: Immunohistochemistry in diagnostic surgical pathology of the prostate. <u>Semin Diagn Pathol</u> 22:88–104, 2005.
- 3. Demura T, Kuzumaki N, Oda A, Fujita H, Taniguchi N, Asano Y, et al.: Establishment of monoclonal antibody to human androgen receptor and its clinical application for prostatic cancers. *Am J Clin Oncol* 11(Suppl 2):S23–S26, 1998.
- Mackinnon AC, Yan BC, Joseph LJ, Al-Ahmadie HA: Molecular biology underlying the clinical heterogeneity of prostate cancer: an update. <u>Arch Pathol Lab Med 133:1033–</u> 1040, 2009.