PTH (Parathyroid Hormone) (77/78)

Mouse anti-human Parathyroid Hormone (PTH) Monoclonal Antibody (Clone 77/78)

REFERENCES AND PRESENTATIONS[1]

- **ready-to-use (manual or LabVision AutoStainer)**
  MAD-001361QD–3
  MAD-001361QD–7
  MAD-001361QD–12
- **Ready-to-use (MD-Stainer)**[2]
  MAD-001361QD-3/V
  MAD-001361QD/V
- **concentrated**
  MAD-001361Q - 1:50 recommended dilution

COMPOSITION
Anti-human parathyroid hormone (PTH) mouse monoclonal antibody purified from serum and prepared in 10mM PBS, pH 7.4, with 0.2% BSA and 0.09% sodium azide
INTENDED USE IVD: Immunohistochemistry (IHC) on paraffin embedded tissues. Not tested on frozen tissues or Western-Blotting
CLONE: 77/78
Ig ISOTYPE: Mouse IgG_1
IMMUNOGEN: Amino acids 1-37 of PTH of human origin.
SPECIES REACTIVITY: In vitro diagnostics in humans. Not tested in other species
DESCRIPTION AND APPLICATIONS: The PTH is a major regulator of serum calcium and is essential for life, unlike calcitonin, which acts as a complementary regulatory mechanism. Chromophobe cells responsible for the secretion of PTH, are the most abundant in the gland. This antibody is useful for immunohistochemical detection of parathyroid hormone, and used in conjunction with antibodies to thyroglobulin allows the differential diagnosis of lesions of thyroid and parathyroid origin.

IHC POSITIVE CONTROL: Normal parathyroid
VISUALIZATION: Cytoplasm

IHC RECOMMENDED PROCEDURE:
- 4µm thick section should be taken on charged slides; dry overnight at 60ºC
- Deparaffinise, rehydrate and HIER (heat induced epitope retrieval) – boil tissue in the Pt Module using Vitro S.A EDTA buffer pH8[3] for 20 min at 95ºC. Upon completion rinse with 3-5 changes of distilled or deionised water followed by cooling at RT for 20 min
- Endogenous peroxidase block - Blocking for 10 minutes at room temperature using peroxidase solution (ref. MAD-021540Q-125)
- Primary antibody: incubate for 20 minutes [The antibody dilution (when concentrated) and protocol may vary depending on the specimen preparation and specific application. Optimal conditions should be determined by the individual laboratory]
- For detection use Master Polymer Plus Detection System (HRP) (DAB included; ref. MAD-000237QK)
- Counterstaining with haematoxylin and final mounting of the slide

STORAGE AND STABILITY: Stored at 2-8ºC. Do not freeze. Once the packaging has been opened it can be stored until the expiration date of the reagent indicated on the label. If the reagent has been stored under other conditions to those indicated in this document, the user must first check its correct performance taking into account the product warranty is no longer valid.

WARNINGS AND PRECAUTIONS:
1. Avoid contact of reagents with eyes and mucous membranes. If reagents come into contact with sensitive areas, wash with copious amounts of water.
2. This product is harmful if swallowed.
3. Consult local or state authorities with regard to recommended method of disposal.
4. Avoid microbial contamination of reagents.

SAFETY RECOMMENDATIONS
This product is intended for laboratory professional use only. The product is NOT intended to be used as a drug or for domestic purposes. The current version of the Safety Data Sheet for this product can be downloaded by searching the reference number at www.vitro.bio or can be requested at regulatory@vitro.bio.

[1] These references are for presentation in vials of Low Density Polyethylene (LDPE) dropper. In case the products are used in automated stainers, a special reference is assigned as follows:
- / L: Cylindrical screw-cap vials (QD-3 / L, QD-7 / L, QD-12 / L).
- / N: Polygonal screw-cap vials (QD-3 / N, QD-7 / N, QD-12 / N).
For different presentations (references / volumes) please contact the supplier.

[2] For Technical specifications for MD-Stainer, please contact your distributor.

[3] Ref: MAD-004072R/D

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CE IVD

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BIBLIOGRAPHY

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2. Loh K C, Duh Q Y, Shoback D, et al.. Clinical profile of primary hyperparathyroidism in adolescents and young adults. Clin Endocrinol.48(4): 435-443 (1998).
3. Westra W H, Pritchett D D, Udelsman R. Intraoperative confirmation of parathyroid tissue during parathyroid exploration: a retrospectiveevaluation of the frozen section. Am J Surg Pathol. 22(5): 538-544 (1998).
4. Luts L, Bergenfelz A, Alumets J, et al.. Parathyroid function and histology in patients with parathyroid adenoma: correlation of clinical andmorphologic findings. World J Surg. 21(5): 553-563 (1997).
5. Matsushita H, Usui M, Hara M, et al.. Co-secretion of parathyroid hormone and parathyroid-hormone-related protein via a regulated pathway in human parathyroid adenoma cells. Am J Pathol. 150(3): 861-871 (1997).
6. Bergenfelz A, Valdemarsson S, Tibblin S. Persistent elevated serum levels of intact parathyroid hormone after operation for sporadic parathyroid adenoma: evidence of detrimental effects of severe parathyroid disease. Surgery. 119(6): 624-633 (1996).
7. Weber C J, Russell J, Chryssochoos J T, et al.. Parathyroid hormone content distinguishes true normal parathyroids from parathyroids ofpatients with primary hyperparathyroidism. World J Surg. 20(8): 1010-1014 (1996).

LABEL AND BOX SYMBOLS

Explanation of the symbols of the product label and box:

	Expiration date
	Temperature limit
	Manufacturer
	Sufficient content for <n> assays
	Catalog number
	Lot code
	Refer to the instructions of use
	Medical product for *in vitro* diagnosis.
	Material safety data sheet