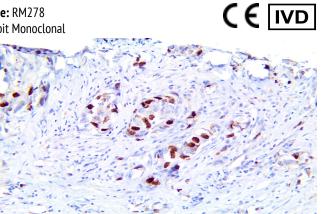
Aurora B

Clone: RM278 Rabbit Monoclonal



Inset: IHC of Aurora B on a FFPE Lung Adenocarcinoma Tissue

Intended Use

For In Vitro Diagnostic Use.

This antibody is intended for use in Immunohistochemical applications on formalin-fixed paraffin-embedded tissues (FFPE), frozen tissue sections, and cell preparations. Interpretation of results should be performed by a gualified medical professional.

Immunogen

Synthetic peptide corresponding to the N-terminus of human Aurora kinase B.

Summary and Explanation

Aurora B kinase, a 39.3 kDa sized serine-threonine kinase, is a member of the Aurora family of mitotic kinases. The enzymatic activity of Aurora B kinase prevents stable kinetochore-microtubule attachments in early mitosis and promotes stabilization of the attachments in later mitosis due to low activity. The gene for Aurora B kinase (AURKB) is located on chromosome 17p13.1.

Abnormal expression of Aurora B kinase has been found in many cancer types, such as Non-Small Cell Lung Carcinoma, Mesothelioma, Glioblastoma, Oral Cancer and Hepatocellular Carcinoma. In Prostate and Colorectal Cancer, Aurora B expression directly correlates with the progression of cancer. In a study investigating the expression of Aurora B kinase in Thyroid Carcinoma, abundant expression of Aurora B kinase was detected in Anaplastic Carcinomas via IHC. A higher expression of Aurora B kinase in Anaplastic Thyroid Cancer than in differentiated Thyroid Cancer therefore suggests its use as a prognostic marker. In another immunohistochemical analysis, Aurora B kinase showed nuclear overexpression in high Gleason-grade Prostate Cancer, compared to low and intermediate grade cases. Additionally, there are numerous studies that indicate the use of Aurora B kinase as a prognostic marker in Ovarian Cancer. A study found that Aurora-B expression was correlated with the proliferation index (P < 0.001) and p53 expression (P = 0.014) in Breast cancer tissues and its expression was associated with lymph node metastasis (P = 0.002) and histological grade (P = 0.001). In conclusion, elevated Aurora-B expression in Breast Cancer patients contributes to chemoresistance and predicts poor prognosis.

Antibody Type	Rabbit Monoclonal	Clone	RM278		
lsotype	lsotype lgG		Paraffin, Frozen		
Localization	Nuclear, Cytoplasmic	Species Reactivity	Human		
Control	Tonsil, Colon, Stomach, Skin, Transitional Cell Carcinoma, T Cell Lymphoblastic Lymphoma				
Application	Prostate Cancer, Ovarian Cancer, Colon and Gastrointestinal Cancer, Thyroid & Parathyroid Cancer, Neural & Neuroendocrine Cancer, Lung Cancer, Liver Cancer				

Presentation

Anti-Aurora B is a Rabbit Monoclonal antibody derived from cell culture supernatant that is concentrated, dialyzed, filter sterilized and diluted in buffer pH 7.5, containing BSA and sodium azide as a preservative.

Catalog No.	Presentation	Dilution	Volume	
BSB-3712-3	Predilute	Ready-to-Use	3.0 mL	
BSB-3712-7	Predilute	Ready-to-Use	7.0 mL	
BSB-3712-15	Predilute	Ready-to-Use	15.0 mL	
BSB-3712-01	Concentrate	1:50-1:200	0.1 mL	
BSB-3712-05	Concentrate	1:50-1:200	0.5 mL	
BSB-3712-1	Concentrate	1:50-1:200	1.0 mL	

Control Slides Available

Catalog No.	Quantity			
BSB-9023-CS	5 slides			

Storage Store at 2-8°C (Control Slides: Store at 20-25°C)

Precautions

1. For professional users only. Results should be interpreted by a qualified medical professional.

2. This product contains <0.1% sodium azide (NaN₃) as a preservative. Ensure proper handling procedures are used with this reagent.

3. Always wear personal protective equipment such as a laboratory coat, goggles, and gloves when handling reagents.

4. Dispose of unused solution with copious amounts of water.

5. Do not ingest reagent. If reagent is ingested, seek medical advice immediately.

6. Avoid contact with eyes. If contact occurs, flush with large quantities of water.

7. Follow safety precautions of the heating device used for epitope retrieval (TintoRetriever Pressure Cooker or similar).

8. For additional safety information refer to Safety Data Sheet for this product.

9. For complete recommendations for handling biological specimens, please refer to the CDC document, "Guidelines for Safe Work Practices in Human and Animal Medical Diagnostic Laboratories" (see References in this document).

Stability

This product is stable up to the expiration date on the product label. Do not use after expiration date listed on the package label. Temperature fluctuations should be avoided. Store appropriately when not in use, and avoid prolonged exposure to room temperature conditions.

Specimen Preparation

Paraffin sections: The antibody can be used on formalin-fixed paraffin-embedded (FFPE) tissue sections. Ensure tissue undergoes appropriate fixation for best results. Pre-treatment of tissues with heat-induced epitope retrieval (HIER) is recommended using Bio SB ImmunoDNA Retriever with Citrate (BSB 0020-BSB 0023), ImmunoDNA Retriever with EDTA (BSB 0030-BSB 0033), or ImmunoDNA Digestor (BSB 0108-0112). See reverse side for complete protocol. Tissue should remain hydrated via use of Bio SB Immuno/DNA Washer solutions (BSB 0029 & BSB 0042).

Frozen sections and cell preparations: The antibody can be used on acetone-fixed frozen sections and acetone-fixed cell preparations.

IHC Protocol

1. Cut and mount 3-5 micron formalin-fixed paraffin-embedded tissues on positively charged slides such as Bio SB Hydrophilic Plus Slides (BSB 7028).

2. Air dry for 2 hours at 58° C.

3. Deparaffinize, dehydrate and rehydrate tissues.

4. Subject tissues to heat induced epitope retrieval (HIER) using a suitable retrieval solution such as ImmunoDNA Retriever with Citrate (BSB 0020-BSB 0023) or EDTA (BSB 0030-BSB 0033).

5. Any of three heating methods may be used:

a. TintoRetriever Pressure Cooker or Equivalent

Place tissues/slides in a staining dish or coplin jar containing the ImmunoDNA Retriever with Citrate or EDTA and place on trivet in the pressure cooker. Add 1-2 inches of distilled water to the pressure cooker and turn heat to high. Incubate for 15 minutes. Open and immediately transfer slides to room temperature.

b. TintoRetriever PT Module or Water Bath Method

Place tissues/slides in a pre-warmed staining dish or coplin jar containing the ImmunoDNA Retriever with Citrate or EDTA at 95°-99° C. Incubate for 30-60 minutes.

c. Conventional Steamer Method

Place tissues/slides in a pre-warmed staining dish or coplin jar containing the ImmunoDNA Retriever with Citrate or EDTA in a steamer, cover and steam for 30-60 minutes.

6. After heat treatment, transfer slides in ImmunoDNA Retriever with Citrate or EDTA to room temperature and let stand for 15-20 minutes. 7. For manual IHC, perform antibody incubation at ambient temperature. For automated IHC methods, perform antibody incubation according to instrument manufacturer's instructions.

8. Wash slides with ImmunoDNA washer or DI water.

9. Continue IHC protocol. Wash slides between each step with ImmunoDNA washer solution.

Abbreviated Immunohistochemical Protocol

Step	ImmunoDetector AP/HRP	PolyDetector AP/HRP	PolyDetector Plus HRP	
Peroxidase/AP Blocker	5 min.	5 min.	5 min	
Primary Antibody	30-60 min.	30-60 min.	30-60 min.	
1st Step Detection	10 min.	30-45 min.	15 min.	
2nd Step Detection	10 min.	Not Applicable	15 min.	
Substrate- Chromogen	5-10 min.	5-10 min.	5-10 min.	
Counterstain / Coverslip	Varies	Varies	Varies	

Mounting Protocols

For detailed instructions using biodegradable permanent mounting media such as XyGreen PermaMounter (BSB 0169-0174) or organic solvent based resin such as PermaMounter (BSB 0094-0097), refer to PI0174 or PI0097.

Product Limitations

Due to inherent variability present in immunohistochemical procedures (including fixation time of tissues, dilution factor of antibody, retrieval method utilized, and incubation time), optimal performance should be established through the use of positive and negative controls. Results should be interpreted by a gualified medical professional.

References

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8. U.S. Department of Health and Human Services: Centers for Disease Control and Prevention. Guidelines for Safe WorkPractices in Human and Animal Medical Diagnostic Laboratories. Supplement / Vol. 61, January 6, 2012. https://www.cdc.gov/mmwr/pdf/other/su6101.pdf

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