

MLH1 Antibody

Datasheet

For Research Use Only

Description	Catalog No.	Size	
MLH1 Concentrate	FP-A025-01	0.1 ml	
MLH1 Concentrate	FP-A025-10	1 ml	
MLH1 Predilute	FP-A025-70	7 ml	
MLH1 Predilute	FP-A025-250	25 ml	

Description

MutL Homolog 1 (MLH1) is a protein involved in the mismatch-repair pathway. This protein is commonly associated with hereditary non-polyposis colorectal cancer, as the MLH1 gene is frequently mutated in patients with this cancer. Studies have shown MLH1 to be deficient in a high percentage of patients with microsatellite instability, as well as endometrial and ovarian cancers. Use of Anti-MLH1 is optimized when paired in an IHC panel with MSH6, MSH2, and PMS2. Anti-MLH1 is useful in the detection of MLH1 in a number of normal and neoplastic tissues, and for identifying a loss of MLH1 in tumors that are microsatellite-unstable.

Specifications

Clone	IHC409
Source	Mouse Monoclonal
Localization	Nucleus
Formulation	Tris Buffer, pH 7.3 - 7.7, with 1% BSA and <0.1% Sodium Azide

IHC Procedure*

Positive Control Tissue	Colon, Colon Carcinoma	
Dilution Range	1:50 - 1:200	
Pretreatment	Perform heat-induced epitope retrieval (HIER) at pH for 10 to 30 minutes	
Incubation Time and Temp	10 to 30 minutes at room temperature	
Detection	Refer to the corresponding user manual for detection system	

Result

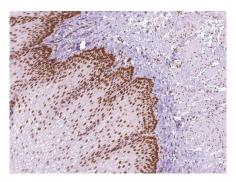


Figure. MLH1 on Esophagus

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Storage and Handling

Must store the reagent at 2-8 °C. Do not freeze. Do not use the reagent after expiration date on vial. To ensure proper stability and delivery of the antibody after each run, replace the cap and immediately place the bottle in a refrigerator in an upright position. Positive and negative controls should be simultaneously run with unknown specimens, as there are no conclusive characteristics to suggest instability of the antibody.

Precautions

The product is for research use only. Do not use for diagnosis purpose. Ensure proper handling procedures are used with all reagents. Always wear laboratory coats, disposable gloves, and other appropriate laboratory equipment when handling reagents. Do not ingest reagents, and avoid contact with eyes and mucous membranes. Wash eyes with copious amounts of water if contact occurs.

References

- 1. **Pal T**, et al. "A review of the clinical relevance of mismatch-repair deficiency in ovarian cancer.
- 2. Wright CL, et al. "Histopathology and mismatch repair status of 458 consecutive colorectal carcinomas.Am J Surg Pathol." 2003; 27:1393-1406.
- 3. **Rigau V**, et al. "Microsatellite instability in colorectal carcinoma. The comparison of immunohistochemistry and molecular biology suggests a role for hMSH6 [correction of hMLH6] immunostaining."Arch Pathol Lab Med. 2003; 127:694-700.
- 4. **Renkonen E**, et al. "Altered expression of MLH1, MSH2, and MSH6 in predisposition to hereditary nonpolyposis colorectal cancer."J Clin Oncol. 2003; 21:3629-37.
- 5. **Hoedema R**, et al. "Genetic testing for hereditary nonpolyposis colorectal cancer." Am Surg. 2003; 69:387-92.
- 6. **Christensen M**, et al. "Antibody-based screening for hereditary nonpolyposis colorectal carcinoma compared with microsatellite analysis and sequencing." Cancer. 2002; 95:2422-30.
- 7. **Wahlberg SS**, et al. "Evaluation of microsatellite instability and immunohistochemistry for the prediction of germ-line MSH2 and MLH1 mutations in hereditary nonpolyposis colon cancer families."Cancer Res. 2002: 62:3485-92.
- 8. **Lanza G**, et al. "Immunohistochemical pattern of MLH1/MSH2 expression is related to clinical and pathological features in colorectal adenocarcinomas with microsatellite instability."Mod Pathol. 2002; 15:741-9.

Technical Support

Contact FemtoPath Technical Support at +886232338585 or email to femtopath@hongjing.com.tw for assistance with more questions regarding this product.