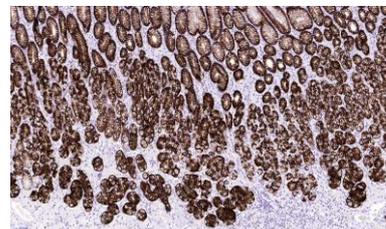


## Anti-CA9, rabbit monoclonal (BSR2)

BSH-3018-100 (0,1ml), BSH-3018-1 (1ml)



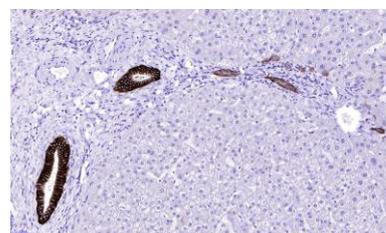
<b>Clonality:</b>	Rabbit monoclonal antibody
<b>Clone:</b>	BSR2
<b>Application:</b>	IHC-P (1:100 – 1:400)
<b>Species Reactivity:</b>	Human
<b>Control tissues:</b>	Gastric epithelia, liver
<b>Alias names:</b>	CAIX, Carbonic anhydrase 9
<b>Buffer:</b>	TRIS with 0.03% sodium azide, pH 7,2
<b>Storage:</b>	Store at 4°C



Gastric mucosa section has been stained using CA9 optibody (Clone: BSR2) with 1:200 dilution. Foveolar epithelium of gastric tissue is strongly stained.

### Description

Carbonic anhydrase 9 (CA9) is a member of the zinc metalloenzymes that catalyse the reversible hydration of carbon dioxide and is anchored to cell membrane. CA9 is expressed in human gastrointestinal tract, chiefly in stomach, and bile ducts of liver. In neoplasia, high expression levels have been reported in different carcinomas, especially in clear-cell renal cell carcinoma. CA9 is also upregulated in hypoxia.

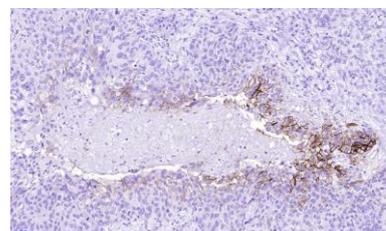


Liver section has been stained using CA9 optibody (Clone: BSR2) with 1:200 dilution. Bile duct epithelium has strong to moderate staining reaction.

### Protocol

After paraffin removing and rehydration:

1. Pretreatment: HIER pH9
2. Wash (TBS-Tween)
3. Primary antibody: CA9 1:100 - 1:400, 30 min.
4. Wash
5. 3% H<sub>2</sub>O<sub>2</sub>, 10 min.\*
6. Wash
7. BioSite Histo HRP One-Step Polymer (KDB-10046), 30 min
8. Wash
9. Wash
10. DAB high contrast Kit (BCB-20032), 10 min
11. Aqua
12. CuSO<sub>4</sub> -post enhancement, 5 min
13. Aqua
14. Counter staining in diluted Mayer, 1 min
15. Bluing, 7 min in tap water
16. Dehydration, clearing and mounting



Breast carcinoma has been stained using CA9 optibody (Clone: BSR2) with 1:200 dilution. Cells with tumor hypoxia have moderate to strong CA9 positivity.

Dilution of this concentrated antibody depends on the detection system used and the final working dilution need to always be determined by the user.

\* Optional; Endogenous peroxidase blocking can also be done before primary antibody incubation.