

Product datasheet for **AM32256SU-N**

Blood Group Lewis Y (BG8) Mouse Monoclonal Antibody [Clone ID: F3]

Product data:

Product Type:	Primary Antibodies
Clone Name:	F3
Applications:	IHC
Recommended Dilution:	Immunohistochemistry on Frozen Sections. Immunohistochemistry on Paraffin Sections. <i>Recommended Dilution:</i> 1/10-1/50. <i>Positive Control:</i> Breast, Breast carcinoma, Adenocarcinoma of lung. <i>Staining Pattern:</i> Cytoplasmic. <i>Preparation and Pretreatment:</i> 1. Cut 3-4 μm section of formalin-fixed paraffin-embedded tissue and place on positively charged slides; dry overnight at 58°C. 2. Deparaffinize, rehydrate, and epitope retrieve; the preferred method is the use of Heat Induced Epitope Retrieval (HIER) techniques in conjunction with a pressure cooker. The preferred method allows for simultaneous deparaffinization, rehydration, and epitope retrieval. Upon completion, rinse with 5 changes of distilled or deionized water. 3. If using HRP detection system, place slides in peroxide block for 10 minutes; rinse. If using AP detection system, omit this step.
Reactivity:	Human
Host:	Mouse
Isotype:	IgM
Clonality:	Monoclonal
Specificity:	Detects Blood Group Lewis Y, BG8 from Human samples.
Formulation:	PBS, pH 7.4 State: Supernatant State: Liquid Tissue Culture Supernatant Stabilizer: 0.9% BSA Preservative: 0.09% Sodium Azide
Conjugation:	Unconjugated
Storage:	Store the antibody undiluted at 2-8°C for one month or (in aliquots) at -20°C for longer. Avoid repeated freezing and thawing.



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Stability: Shelf life: one year from despatch.

Background: Blood group antigens have been examined as potential discriminators between pulmonary adenocarcinoma (PACA) and epithelioid mesothelioma (EM). Lewisy is the only one of these that appears to have some merit. BG8 is raised from the SK-LU-3 lung cancer line and its ability to distinguish between PACA and EM was first reported by Jordon and colleagues in 1989. Three groups have since reported their results. These studies included 231 cases of PACA and 197 cases of EM. Sensitivity and specificity for PACA were both 93%. Yaziji H et al. reported a sensitivity of nonmesothelial antigens for adenocarcinoma as organ dependent, with BG8 performing at 98% in the breast cancer group, and 100% in the lung cancer group. The specificity of the nonmesothelial (non-EM) antigens for adenocarcinoma was 98% for BG8. They concluded using logical regression analysis that a three-antibody immunohistochemical panel including calretinin, BG8, and MOC-31 would provide 96% sensitivity and specificity for distinguishing EM from adenocarcinoma from a variety of sources (lung, ovary, breast, stomach).