USE
This fluorochrome-conjugated antibody allows the identification and enumeration of cell populations expressing the HLA-DR antigen present in human biological samples using flow cytometry.

PRINCIPLE
This test is based on the ability of specific monoclonal antibodies to bind to the antigenic determinants expressed by leucocytes. Specific staining of the leucocytes is performed by incubating the sample with the IOTest reagent. The red cells are then removed by lysis and the leucocytes, which are unaffected by this process, are analyzed by flow cytometry. The flow cytometer measures light diffusion and the fluorescence of cells. It makes possible the delimitation of the population of interest within the electronic window defined on a histogram, which correlates the orthogonal diffusion of light (Side Scatter or SS) and the diffusion of narrow-angle light (Forward Scatter or FS). Other histograms combining two of the different parameters available on the cytometer can be used as supports in the gating stage depending on the application chosen by the user.

EXAMPLES OF CLINICAL APPLICATIONS
The HLA-DR molecule is a useful marker for the identification of certain lymphoproliferative syndromes when used within an extended immunophenotyping panel. Analysis of the expression of the HLA-DR antigen enables blast cells of myeloid origin to be characterized. Their commonly observed phenotype is HLA-DR+ CD7– CD45 weak (1).

STORAGE AND STABILITY
The conjugated liquid forms must be kept at between 2 and 8°C and protected from light, before and after the vial has been opened. Stability of closed vial: see expiry date on vial. Stability of opened vial: the reagent is stable for 90 days.

REAGENT CONTENTS
Contact Beckman Coulter Customer Service to obtain the antibody concentration in the IOTest reagent.

EVIDENCE OF DETERIORATION
In case of packaging deterioration or if data obtained show some performance alteration, please contact your local distributor or use the following e-mail address: immuno-techsup@beckmancoulter.com

PRECAUTIONS
1. Do not use the reagent beyond the expiry date.
2. Do not freeze.
3. Let it come to room temperature (18 – 25°C) before use.
5. Avoid microbial contamination of the reagents, or false results may occur.
6. Antibody solutions containing sodium azide (NaN₃) should be handled with care. Do not take internally and avoid all contact with the skin, mucosa and eyes. Moreover, in an acid medium, sodium azide can form the potentially dangerous hydrazoic acid. If it needs to be disposed of, it is recommended that the reagent be diluted in a large volume of water before pouring it into the drainage system so as to avoid the accumulation of sodium azide in metal pipes and to prevent the risk of explosion.
7. All blood samples must be considered as potentially infectious and must be handled with care (in particular: the wearing of protective gloves, gowns and goggles).
8. Never pipet by mouth and avoid all contact of the samples with the skin, mucosa and eyes.
9. Blood tubes and disposable material used for handling should be disposed of in ad hoc containers intended for incineration.

SAMPLES
Venous blood must be taken using sterile tubes containing an EDTA salt as the anticoagulant. The samples should be kept at room temperature (18 – 25°C) and not shaken. The samples should be homogenized by gentle agitation prior to taking the test sample. The samples must be analyzed within 24 hours of venipuncture.

METHODOLOGY
NECESSARY MATERIAL NOT SUPPLIED
- Sampling tubes and material necessary for sampling.
- Automatic pipettes with disposable tips for 20, 100 and 500 µL.
- Plastic haemolysis tubes.
- Calibration beads: Flow-Set Fluospheres (Ref. 6607007).
- Red cell lysis reagent with washing stage after lysis. For example: VersaLyse (Ref. A09777).
- Leucocyte fixation reagent. For example: IOTest 3 Fixative Solution (Ref. A07800).
- Mouse Isotypic control PE: IOTest reagent (Ref. A07796).
- Buffer (PBS: 0.01 M sodium phosphate; 0.145 M sodium chloride; pH 7.2).
- Centrifuge.
- Automatic agitator (Vortex type).
- Flow cytometer.

PROCEDURE
NOTE: The procedure below is valid for standard applications. Sample and/or VersaLyse volumes for certain Beckman Coulter applications may be different. If such is the case, follow the instructions on the application’s technical leaflet.

For each sample analyzed, in addition to the test tube, one control tube is required in which the cells are mixed in the presence of the isotypic control (Ref. A07796).
1. Add 20 µL of specific IOTest conjugated antibody to each test tube, and 20 µL of the isotypic control to each control tube.
2. Add 100 µL of the test sample to both tubes. Vortex the tubes gently.
3. Incubate for 15 to 20 minutes at room temperature (18 – 25°C), protected from light.
4. Then perform lysis of the red cells, if necessary, by following the recommendations of the lysis reagent used. For example, if you wish to use VersaLyse (Ref. A09777), refer to the leaflet and follow preferably the procedure called “with concomitant fixation”, which consists in adding 1 mL of the “Fix-and-Lyse” mixture prepared extemporaneously. Vortex immediately for one second and incubate for 10 minutes at room temperature, protected from light.
5. If the sample does not contain red cells, add 2 mL of PBS.
6. Centrifuge for 5 minutes at 150 x g at room temperature.
7. Resuspend the supernatant by aspiration.
8. Repeat step 5.
9. Remove the supernatant by aspiration and resuspend the cell pellet using:
   - 0.5 mL or 1 mL of PBS plus 0.1% of formaldehyde if the preparations are to be kept for more than 2 hours and less than 24 hours. (A 0.1% formaldehyde PBS can be obtained by diluting 12.5 µL of the IOTest 3 Fixative Solution (Ref. A07800) at its 10X concentration in 1 mL of PBS).
0.5 mL or 1 mL of PBS without formaldehyde, if the preparations are to be analyzed within 2 hours.

**NOTE:** In all cases, keep the preparations between 2 and 8°C and protected from light.

**PERFORMANCE**

Performance data are obtained using the procedure described above on 24 hour-old blood samples previously collected on sterile tubes with EDTA salt as anticoagulant. Analysis is performed within 2 hours following immunostaining.

**SPECIFICITY**

The monoclonal antibody Immu357 recognizes an epitope carried on a monomorphic 29 - 33 kDa protein identified as HLA-DR. The HLA system (Human Leucocyte Antigen) is the name given to the major histocompatibility complex (MHC) in man. Coded by 5 loci (DM, DO, DP, DQ and DR) of the D locus, HLA class II molecules are also called HLA-DM, HLA-DO, HLA-DP, HLA-DQ and HLA-DR antigens (2, 3). Expression of class II antigens is limited to antigen-presenting cells, i.e. B lymphocytes, monocytes / macrophages, dendritic and Langerhans cells of the skin (3, 4). On T lymphocytes, the HLA-DR antigen is only expressed after activation (5). Stem cells and haemopoietic progenitors express it up to a certain stage in their differentiation (3, 6).

**LINEARITY**

To test the linearity of staining of this reagent, a positive cell line (DAUDI) and a negative cell line (FRN17.4.14.33) were mixed in different proportions with a constant final number of cells, so that the positive line/negative cell line ratio of the mixture ranged from 0 to 100%. Aliquots were stained using the procedure described above and linear regression between the expected values and the observed values was calculated.

### Expected Values

Each laboratory must compile a list of reference values based upon a group of healthy donors from the local population. This must be done by taking age, sex and ethnic group into account, as well as any other potential regional differences.

In our laboratories, the whole blood samples of 50 healthy adults were treated using the reagent described above. The results obtained for the count of the positive events of interest with this reagent are given in the tables below:

<table>
<thead>
<tr>
<th>Lymphocytes</th>
<th>Number</th>
<th>Mean (%)</th>
<th>SD</th>
<th>CV (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>HLA-DR †</td>
<td>50</td>
<td>30.12</td>
<td>10.95</td>
<td>36.37</td>
</tr>
</tbody>
</table>

**Intra-Laboratory Reproducibility**

On the same day and using the same cytometer, 12 measurements of the percentage of staining of a positive target were carried out. The results obtained are summarized in the following table:

<table>
<thead>
<tr>
<th>Positive Target</th>
<th>Number</th>
<th>Mean (%)</th>
<th>SD</th>
<th>CV (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lymphocytes</td>
<td>12</td>
<td>20.01</td>
<td>0.44</td>
<td>2.19</td>
</tr>
</tbody>
</table>

**Limitations of the Technique**

1. Flow cytometry may produce false results if the cytometer has not been aligned perfectly, if fluorescence leaks have not been correctly compensated for and if the regions have not been carefully positioned.
2. It is preferable to use a RBC lysis technique with a washing step as this reagent has not been optimized for "no wash" lysis techniques.
3. Accurate and reproducible results will be obtained as long as the procedures used are in accordance with the technical insert leaflet and compatible with good laboratory practices.

4. The conjugated antibody of this reagent is calibrated so as to offer the best specific signal/non-specific signal ratio. Therefore, it is important to adhere to the reagent volume/sample volume ratio in every test.
5. In the case of a hyperleucocytosis, dilute the blood in PBS so as to obtain a value of approximately 5 x 10⁹ leucocytes/L.
6. In certain disease states, such as severe renal failure or haemoglobinopathies, lysis of red cells may be slow, incomplete or even impossible. In this case, it is recommended to isolate mononucleated cells using a density gradient (Ficoll, for example) prior to staining.

**Miscellaneous**

See the Appendix for examples and references.

**Trademarks**

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APPENDIX TO REF IM1639

EXAMPLES
The graph below is a biparametric representation (Side Scatter versus Fluorescence Intensity) of a lysed normal whole blood sample. Staining is with IOTest HLA-DR-PE Conjugated Antibody (Ref. IM1639). Acquisition is performed with a Beckman Coulter FC 500 flow cytometer equipped with the CXP analysis software.

REFERENCES