

# Secretory Component; Clone SC05 (Concentrate)

<b>Availability/Contents:</b>	<u>Item #</u> A00127-C	<u>Volume</u> 1 ml
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**Description:**

Species: Mouse  
 Immunogen: Partially purified secretory component from human colostrums was used as immunogen to inject into BALB/c mice to generate this antibody.  
 Clone: SC05  
 Isotype: IgG1, Kappa  
 Format: This antibody is provided in a phosphate buffered saline containing 1% BSA.  
 Specificity: This antibody reacts with both free and bound secretory component to secretory IgA.


Background: The Secretory component is a component of immunoglobulin A (IgA) which consists of a portion of the polymeric immunoglobulin receptor ( plgR). Polymeric IgA binds to the plgR on the basolateral surface of epithelial cells and is taken up into the cell via transcytosis. The receptor-IgA complex passes through the cellular compartments before being secreted on the luminal surface of the epithelial cells, still attached to the receptor. Proteolysis of the receptor takes place and the dimeric IgA molecule, along with the secretory component, are free to diffuse throughout the lumen.

Secretory Component is an epithelial transport receptor for polymeric IgA and IgM. The complex regulation of plgR expression and vesicular transport by host and microbial factors is finely tuned to optimize the role of SIgA in mucosal immunity. Recent reports have defined the dynamic cross-talk between plgR, SIgA and the microbial niches that populate our mucosal surfaces. plgR plays the dual role of transporting locally produced dimeric IgA across mucosal epithelia and serving as the precursor of the secretory component moiety of SIgA. The function and regulation of plgR and SIgA may offer new insights into the prevention and treatment of diseases that originate at mucosal surfaces.

Dysregulation of plgR expression and/or function can result in severe consequences for the pathogenesis of infectious, inflammatory and neoplastic diseases. Several reports described the presence of disease-specific secretory IgA autoantibodies in the saliva of patients exhibiting Sjögren's syndrome (SS) and other immune related disorders. Secretory component deficiency is also linked with pernicious anemia, insulin-dependent diabetes mellitus, pancreatic insufficiency, lymphopenia, intestinal candidiasis, and anti-intestinal antibody. This antibody can be used to indirectly assess SIgA expression and for identifying glandular carcinomas.

Species Reactivity: Human, Rat. Others not tested.  
 Positive Control: Breast carcinoma, Lung, Stomach.  
 Cellular Localization: Cytoplasm and Cell Surface.  
 Titer/Working Dilution: Immunohistochemistry: 1:100 – 1:200  
 Microbiological State: This product is not sterile.

Storage: 2° C  8° C

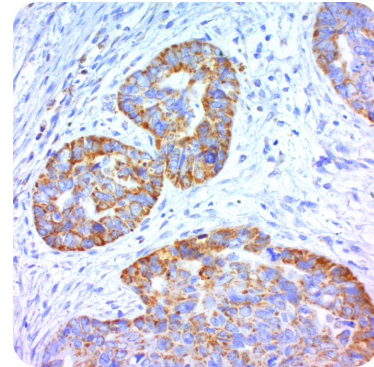


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 Logan, UT 84321  
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 Molsnstraat 15  
 2513 BH Hague, The Netherlands

**Uses/Limitations:** Not to be taken internally.  
 For Research Use Only.  
 This product is intended for qualitative immunohistochemistry with normal and neoplastic formalin-fixed, paraffin-embedded tissue sections, to be viewed by light microscopy.  
 Do not use if reagent becomes cloudy.  
 Do not use past expiration date.  
 Non-Sterile.



Human breast carcinoma stained with Ultra-Tek HRP and DAB Chromogen.

**Ordering Information and Current Pricing at [www.scytek.com](http://www.scytek.com)**

**Procedure:**

1. **Tissue Section Pretreatment (Highly Recommended):** Staining of formalin fixed, paraffin embedded tissue sections is enhanced by pretreatment with Citrate Plus (ScyTek catalog# CPL500).
2. **Primary Antibody Incubation Time:** We suggest an incubation period of 30 minutes at room temperature. However, depending upon the fixation conditions and the staining system employed, optimal incubation should be determined by the user.
3. **Visualization:** For maximum staining intensity we recommend the “UltraTek HRP Anti-Polyvalent Lab Pack” (ScyTek catalog# UHP125, see IFU for instructions) combined with the “DAB Chromogen/Substrate Bulk Pack (High Contrast)” (ScyTek catalog# ACV500, see IFU for instructions).

**Precautions:** Contains Sodium Azide as a preservative (0.09% w/v).  
 Do not pipette by mouth.  
 Avoid contact of reagents and specimens with skin and mucous membranes.  
 Avoid microbial contamination of reagents or increased nonspecific staining may occur.  
 This product contains no hazardous material at a reportable concentration according to U.S. 29 CFR 1910.1200, OSHA Hazardous Communication Standard and EC Directive 91/155/EC.


**References:**

1. Al-Sam SZ, Davies JD. Phenotypic expression of immune secretory function in focal pregnancy-like change of the human breast. *Virch Arch* 1987;410:515-21.
2. Nagata N, Dairaku M, Sueishi K, Tanaka K. Sclerosing hemangioma of the lung. An epithelial tumor composed of immunohistochemically heterogenous cells. *Am J Clin Pathol* 1987; 88: 552-9.
3. Horsfall AC, Rose LM, Maini RN. Autoantibody synthesis in salivary glands of Sjögren's syndrome patients. *J Autoimmun.* 1989; 2:559–68.
4. Halse AK, Martinhussen MC, Wahren-Herlenius M, Jonsson R. Isotype distribution of anti-Ro/SS-A and anti- La/SS-B antibodies in plasma and saliva of patients with Sjögren's syndrome. *Scand J Rheumatol.* 2000; 29:13–19.


**Warranty:**

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Storage: 2° C  8° C

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