

IMMUNOHISTOCHEMISTRY

Immunohistochemistry (IHC) is a method for detecting antigens or haptens in cells of a tissue section by exploiting the principle of antibodies binding specifically to antigens in biological tissues

USED FOR:

A) RESEARCH

B) DIAGNOSTICS

-DIAGNOSIS

-PROGNOSIS

-THERAPY

ANTIGENS

ANTIGEN: *Substance that can induce an immune response (proteins, polysaccharides, lipids or nucleic acids.....)*

ANTIGENIC DETERMINANT OR EPITOPE: *s the part of an antigen that is recognized by the immune system (SPECIFIC BINDING SITE)*

ANTIGENICITY: *Antigenicity is the capacity of a chemical structure (either an antigen or hapten) to bind specifically with a specific antibody*

LOSS OF ANTIGENICITY:

-AUTOLYSIS

-FIXATION:

-protein denaturation

-H bond loss (protein stereochemistry modifications)

-loss or re-location of epitopes

-PARAFFIN EMBEDDING: *epitopes' modifications due to heating*

ANTIBODIES

Antibody type and animal where it has been raised

-POLYCLONAL

-MONOCLONAL

AFFINITY: it is the strength of binding of a antibody to its antigen. It is typically measured and reported by the equilibrium dissociation constant (KD), which is used to evaluate and rank order strengths of bimolecular interactions. The binding of an antibody to its antigen is a reversible process, and the rate of the binding reaction is proportional to the concentrations of the reactants..

$$\text{Costante di affinità } K = \frac{[\text{Ab Ag}]}{[\text{Ab}] [\text{Ag}]}$$

MARKERS (label – reporter)

*The antibody binding to an antigen is visualized using an appropriate detection system. The method of detection can be **direct or indirect**, and may generate a fluorescent or chromogenic signal.*

FLUORESCENT COMPOUNDS: EXCITATION EMISSION

Fluorescein isothiocyanate (FITC) 490 nm 525 nm

Tetramethylrhodamine isothiocyanate 530 nm 580 nm

(TRITC, MRITC)

-non permanent slides, no dehydration.

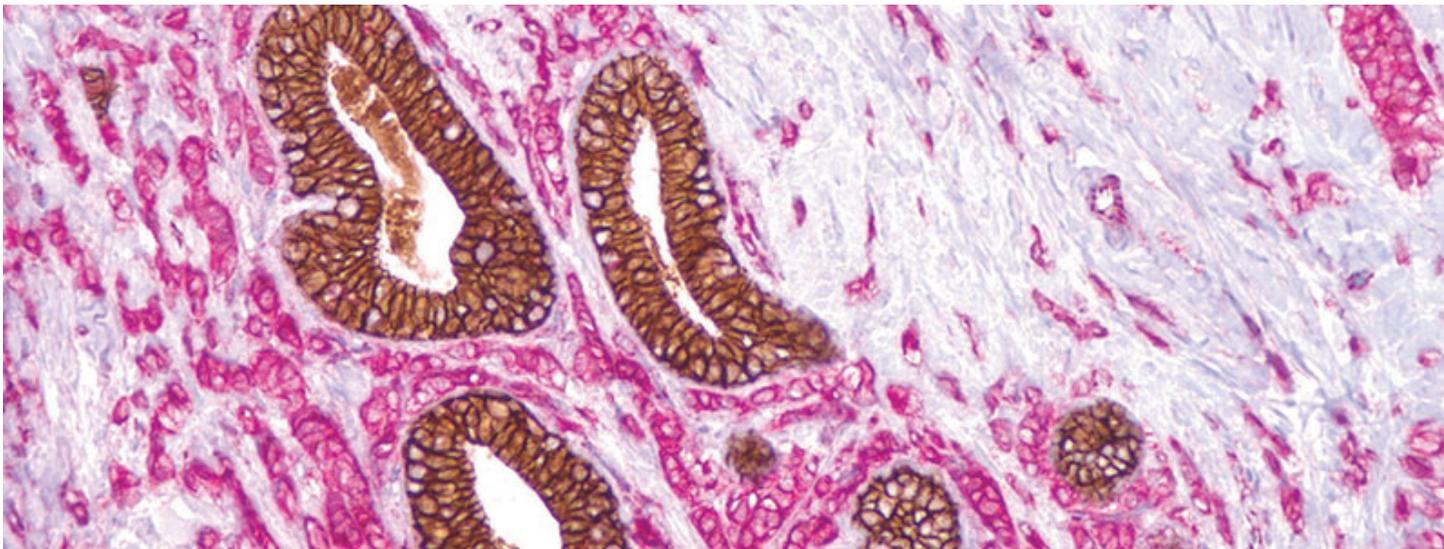
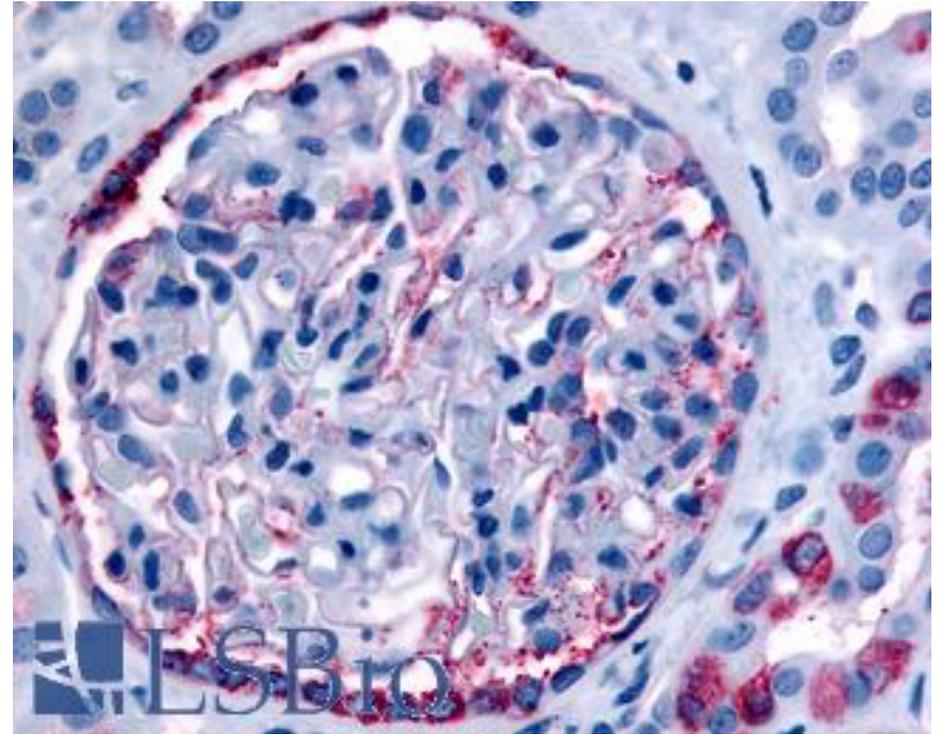
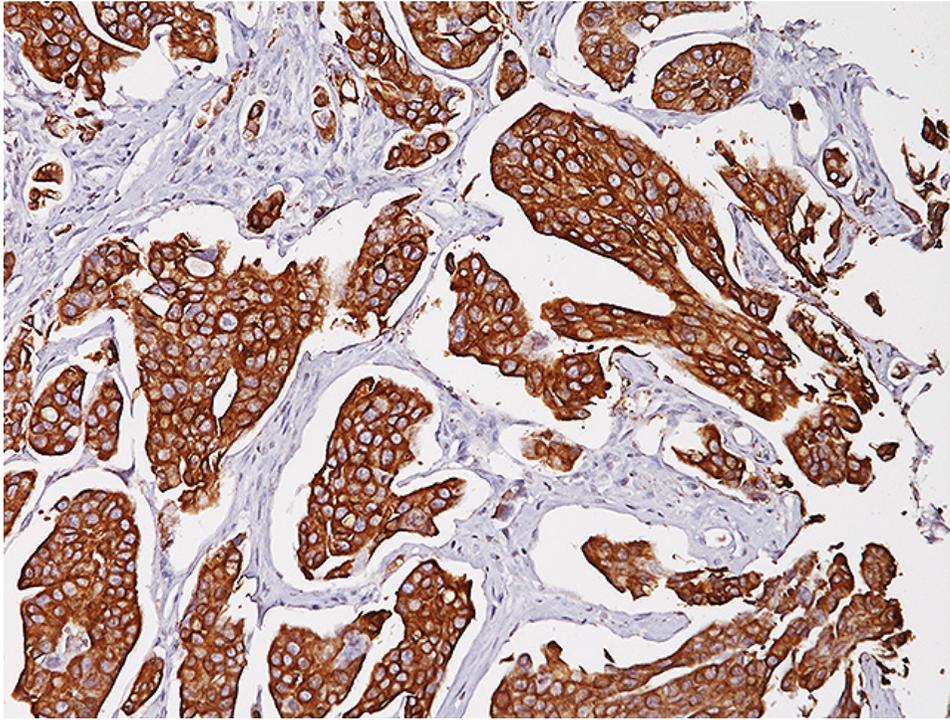
CHROMOGENIC COMPOUNDS:

horseradish peroxidase : *It is a glycoprotein of 40 Kd including an HEME group. It catalyzes the oxidation of various organic substrates by hydrogen peroxide*

It converts 3,3' diaminobenzidine (DAB) into brown products.

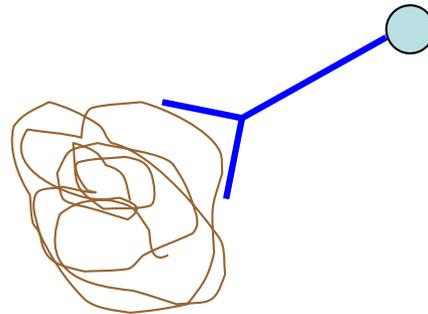
Alkaline phosphatase: *it converts AEC (3-amino-9-ethylcarbazole) into a red product*

IHC



IHC DETECTION METHOD- 1

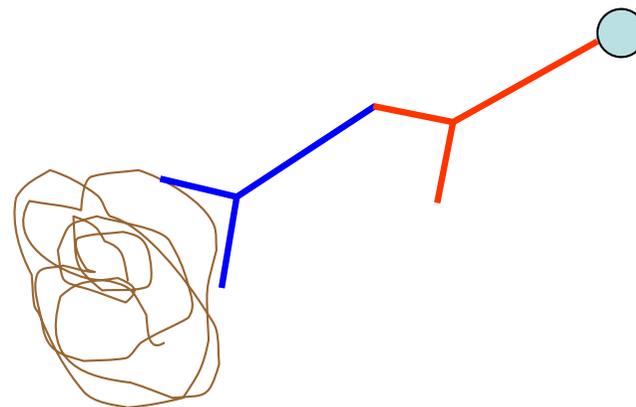
Direct detection methods are known as a one-step process applying a primary antibody, which is directly labeled with reporter molecules, such as biotin, colloidal gold, fluorochromes, or enzymes (each primary antibody needs to be individually conjugated with fluorophores or enzymes, which increases considerably the cost of the whole process- only for highly expressed proteins-less sensitive- not used in diagnostics because of the sensitivity drawbacks)



IHC DETECTION METHOD- 2

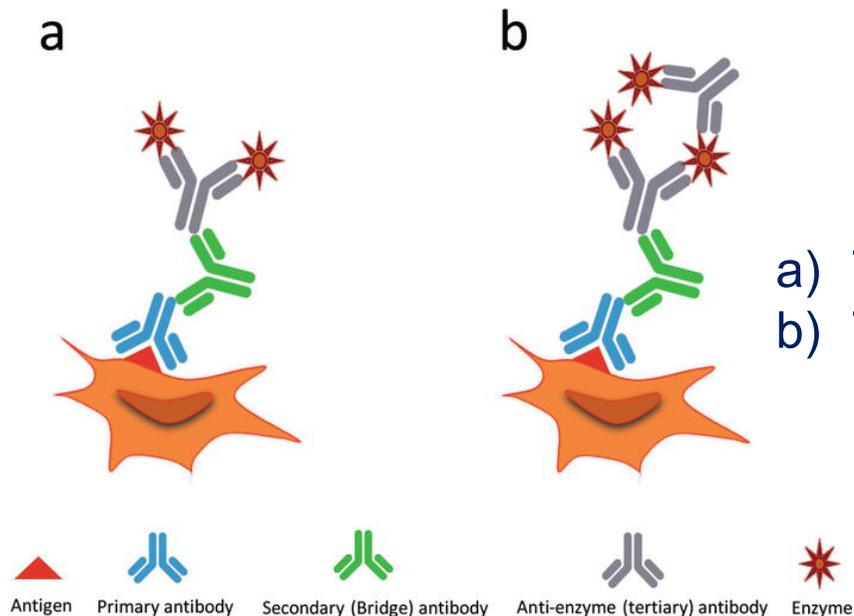
INDIRECT DETECTION METHODS: *This system employs an unlabeled primary antibody as the first layer and the secondary antibody, which is raised against the primary antibody and is labeled with different fluorophores or enzymes.*

In indirect methods, primary antibodies retain full avidity because they remain unlabeled. Indeed, higher number of labels per molecule of primary antibody is achieved in indirect compared to direct detection methods. The later stems from the fact that at least two labeled secondary antibodies can bind to each primary antibody molecule. These factors result in increased reaction intensity and the higher sensitivity in indirect staining methods.



IHC DETECTION METHOD- 3

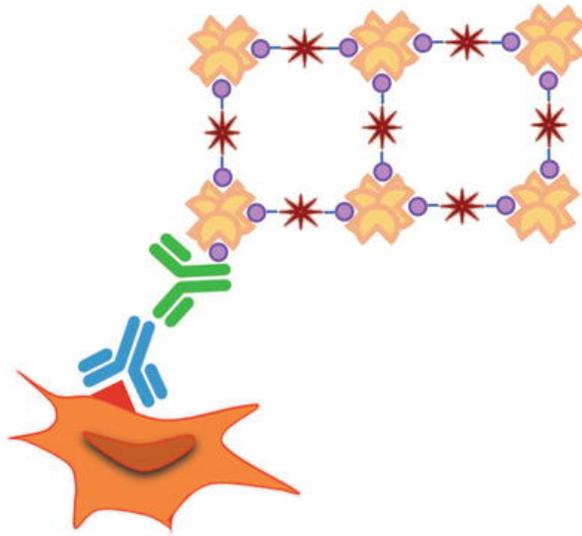
PAP – PEROXIDASE-ANTI-PEROXIDASE –BRIDGE METHOD- Taking advantage of the bivalent properties of IgG binding, a second-step antibody with binding specificity to primary antibody and tertiary antienzyme antibody complexed with the enzyme bridges two layer. The bridge antibody is usually used in excess, so that one of its two identical binding sites interacts with enzyme-coupled tertiary antibody, while the other site interacts with primary antibody. The tertiary antienzyme antibody has the same animal species of origin as the primary antibody. The bridge methods are collectively called as soluble enzyme-antienzyme methods



- a) Two step bridge immunostaining method
- b) Three-step bridge immunostaining method

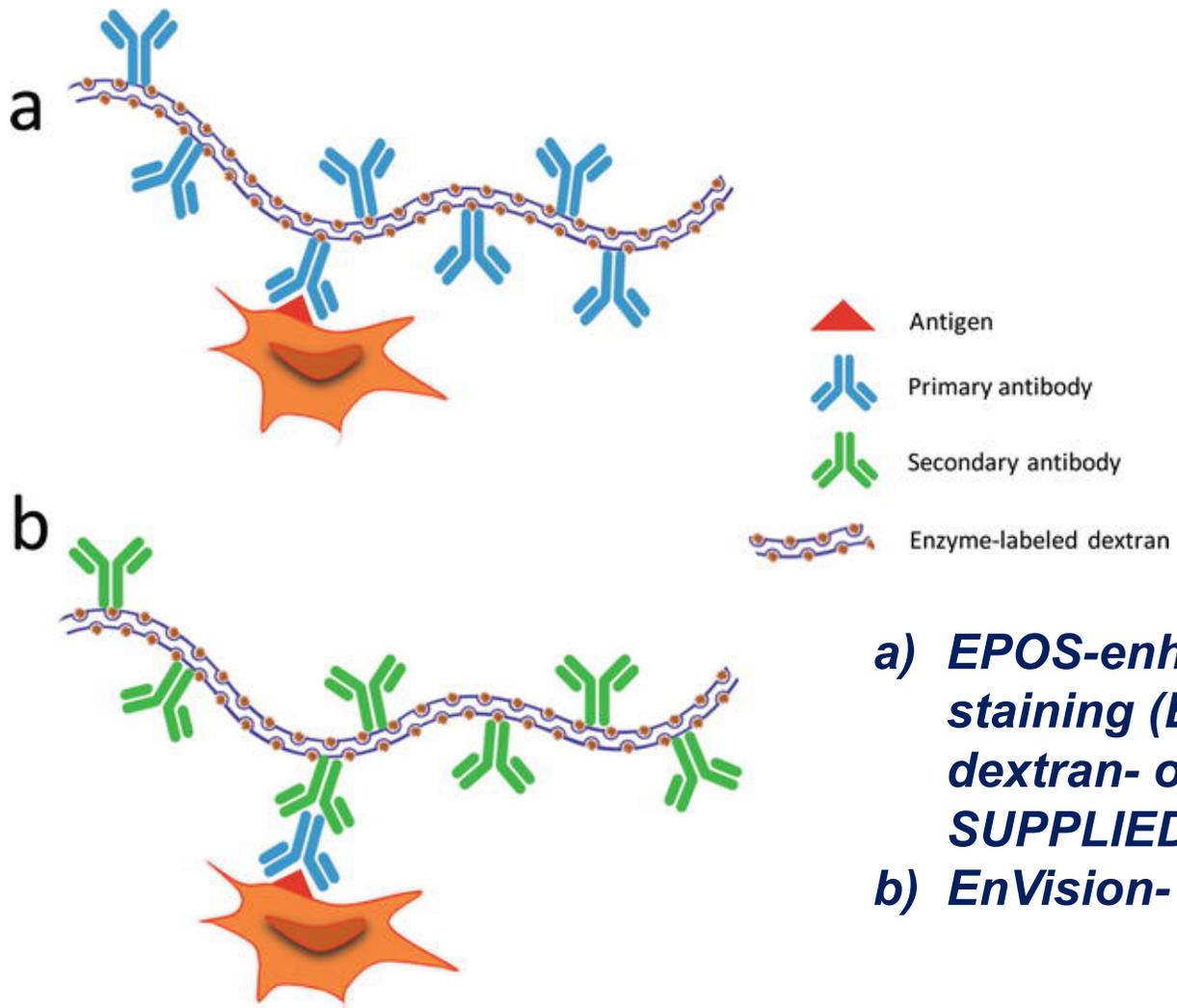
IHC DETECTION METHOD- 4

For signal amplification, the **avidin-biotin complex (ABC)** method was developed, in which a preformed avidin-biotin-peroxidase complex is used as the detection layer. This technique induces three different layers; an unconjugated primary antibody, a biotinylated secondary antibody, and finally a large complex of enzyme-labeled biotin and avidin, which is attached to the biotin molecules conjugated to the secondary antibodies.



IHC DETECTION METHOD- 5

Polymer method – it is a chain polymer-conjugated. Improved sensitivity of this technology is based on using synthetic or natural polymers that increase the capacity for incorporating ligands or enzymes to be coupled to linker antibodies e technology.



- a) **EPOS-enhanced polymer one-step staining (EPOS) system . Polymer is dextran- one step IHC. NOT FOR USER SUPPLIED PRIMARY Ab**
- b) **EnVision- more user friendly**

SENSITIVITY AND EFFICIENCY

SENSITIVITY: *the sensitivity of a detection system refers to the lowest concentration of antigen that are detected. It depends on:*

-Antigen nature: *related to multiple antigen determinants (epitopes)*

-Antigen accessibility: *possible use of antigen retrieval to unmask the antigen*

-Detection method: *direct, indirect PAP, ABC, EnVision*

Antibody efficiency: *It is the minimal amount of Ab needed to detect the antigen*

SPECIFICITY

SPECIFICITY: *it is the capability to immunoreact only with the specific antigen*

IMMUNOLOGIC ASPECIFICITY:

- Sequence homology in different proteins
- Partially similar antigens (ie. glycoproteins, phosphorylated groups , sulfurated groups, ecc...)
- Contamination with other antibodies (impure antigen used for immunization, autoantibodies, antibodies against infectious agents....)

NON IMMUNOLOGIC ASPECIFICITY:

- Non-specific bonds of the primary antibody

-Necrotic areas, tissue margins, connective tissue (fibrotic proteins)

- peroxidase similar (erythrocytes and neutrophils ...)
- Endogenous biotin (kidney, pancreas, liver)
- Peroxidase and avidin non specific bonds (glycoproteins)

Fixation and tissue processing

Under-fixation with formalin

Reduced immunostaining in central areas of sections

Over-fixation with formalin

Non-specific binding of antibodies by free-aldehyde group

Alcohol fixation

Most of CD and some growth factor peptides are poorly reactive

Mercury-based fixatives (B5, Zenkers)

CD4, CD5, CD10, CD23, (CD30) loose immunoreactivity

Dehydration, non-polar solvents and paraffin embedding

Possible change on the conformation of some antigens

Decalcification by 10% formic acid or 5% nitric acid

Decreased antigenicity on many antigens, particularly CD markers

Protease (PIER) and heat-induced epitope retrieval (HIER)

PIER at incorrect pH and/or temperature

Antigens not retrieved (masked)

PIER with strong enzymatic digestion

Potential destruction of antigens

HIER at pH 3.0–6.0

Decrease in staining of Ki67 (Mib1) and ER

HIER on biotin-rich tissues (e.g. mitochondrion-rich cells)

Unmasking of endogenous biotin

HIER by zinc sulphate, citrate (pH 6) and TRIS (pH 9) buffer solutions

Non-specific staining of nuclear proteins

Endogenous enzymes (peroxidase)

Absence of endogenous enzyme inhibition

Non-specific background staining

Strong endogenous enzyme inhibition

Destruction of some antigens (i.e. CD4)

Avidin–biotin system

High ionic attraction of avidin

Non-immune binding to nucleic acids, phospholipids and glycosamin

Binding of avidin to endogenous biotin

Strong background and false positive staining of liver, lung, spleen, tissue, mammary gland, kidney, brain, gestational and post-partum endometrial cells, myelin and mast cells

Primary antibody

Improper reaction buffer

Background staining or absence of antigen binding

Hydrophobicity, polymerisation and aggregation of immunoglobulins

High background staining

Interaction with protein polar groups in tissue sections

High background staining

Protein–antibody complement-mediated binding

High background staining

Attraction of the Fc fragment to basic groups of collagen fibres

Non-specific staining

Binding of immunoglobulins to the cellular Fc receptors^{19 108}

Non-specific staining

High concentrations of antibodies

Background staining or absence of antigen binding (prozone phenon)

Bacterial contamination of antibodies

Antibody agglutination

Detection system

Incorrect pH of the reaction buffer

Absence of staining

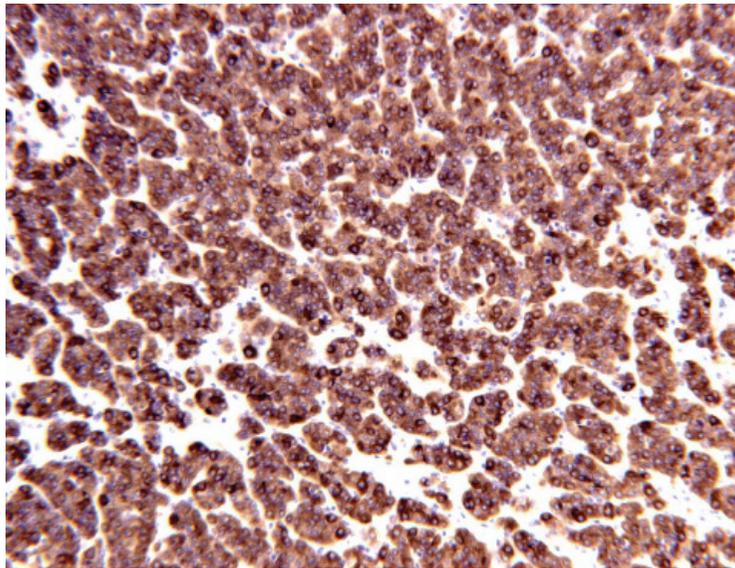
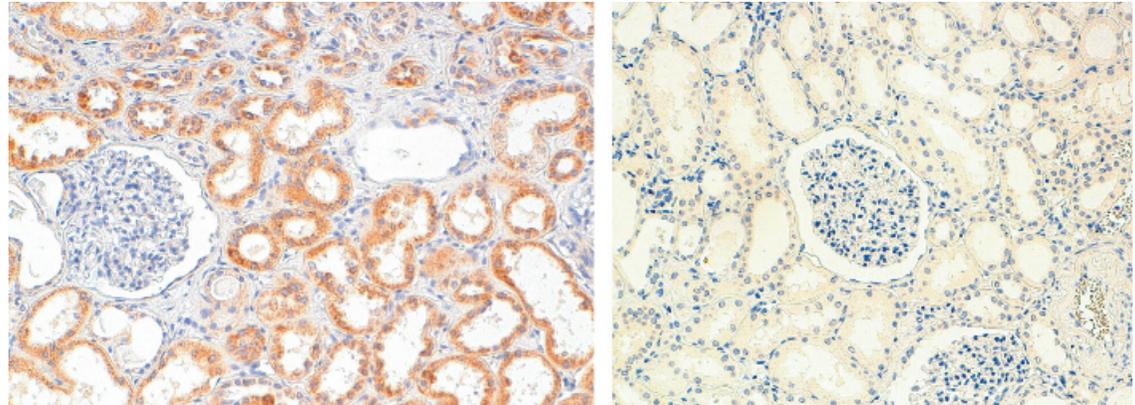
Ionic charges of the polymers

Background staining

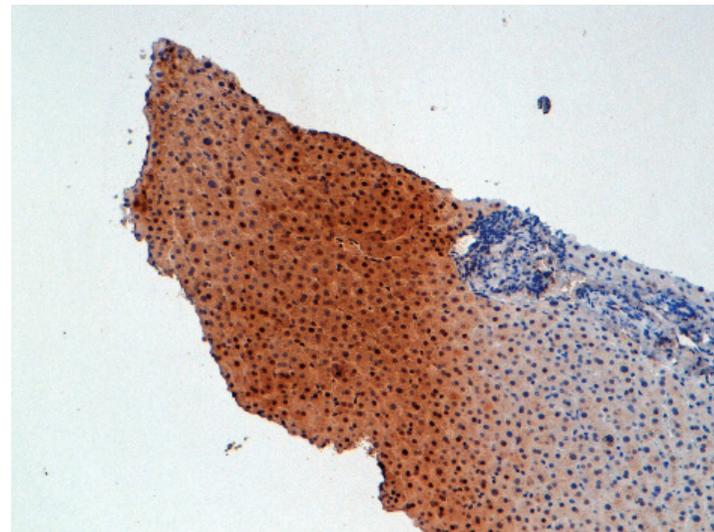
Spontaneous agglutinations of the antisera

Absence of staining

Renal tubules, rich in endogenous biotin, bind avidin, which results in a strong cytoplasmic staining (A). A blocking procedure prevents such spurious staining (B).



Renal oncocytoma. Neoplastic cells are rich in mitochondria. Endogenous biotin (the coenzyme of oxidative enzymes) is retrieved following the HIER procedure, thus causing spurious staining when using avidin-based immunohistochemical methods.



The free edge of histological sections can show non-specific uptake of immunohistochemical staining reagents.

J Clin Pathol 2008;61:1184–1192.
doi:10.1136/jcp.2007.047720

IHC METHOD

- *CUTTING OF THE SECTIONS*
- *ADHESION OF THE SECTIONS ON THE SLIDE*
- *DEWAXING*
- *HYDRATION*
- *PROCEDURES TO INCREASE THE EXPOSURE OF THE ANTIGEN*
- *BLOCKING*
- *INCUBATION WITH THE PRIMARY ANTIBODY*
- *INCUBATION WITH THE SECONDARY ANTIBODY*
- *AVIDIN-BIOTIN - PEROXYDASE- COMPLEX*
- *CROMOGENOUS REACTION-*
- *COUNTERSTAIN*
- *-DEHYDRATION-*
- *CLEARING*
- *MOUNTING*

METHOD DESCRIPTION

-SECTION CUT: *tissue section on the slide are left in oven for 30 – 60 min @ 56-60°C, or at lower temperature for longer time.*

-DEWAXING

- 3 – 4 times in xylene for 4 min*
- 1 time in EtOH Abs*

ENDOGENOUS PEROXIDASE BLOCK (optiona):

- 0.5% H₂O₂ in methanol for 30 min*

HYDRATION:

- 2 times in EtOH Abs for 4 min*
- 2 times in EtOH 95% for 4 min*
- 2 times in water for 4 min*
- 1 time in buffer for 10 min*

ANTIGEN RETRIEVAL

Most formalin-fixed tissues require an antigen retrieval step before immunohistochemical staining.

The longer is the fixation the higher is the masking of the antigenic site.

Methylene bridges formed during fixation cross-link proteins and mask antigenic sites.

Antigen retrieval methods break these methylene bridges and expose antigenic sites, allowing antibodies to bind.

*The two methods for antigen retrieval are **heat induced epitope retrieval (HIER)** and **enzymatic retrieval**.*

ANTIGEN RETRIEVAL- ENZYMATIC

TRYPsinIZATION:

-Trypsin 0.1% in Tris-HCl pH 7.8 including CaCl₂ for 15 min (up to 2h)

DIGESTION WITH DNase:

-DNase I 5 mg/ml in Tris-HCl pH 7.4 with MgSO₄ 0.01M for 15-30 min.

After the enzymatic digestion, slides are rinsed thoroughly with buffer solution

ANTIGEN RETRIEVAL- HIER

*Heat-induced epitope retrieval is most often performed using a **pressure cooker, a microwave, or a vegetable steamer**. Some labs use a water bath set to 60°C and incubate the slides in retrieval solution overnight. This is useful when working with tissue sections that fall off the slide when heated at higher temperatures; in particular bone, cartilage, and skin.*

FOR HIER THE FOLLOWING BUFFERS ARE USED:

- ***Sodium citrate buffer** (10 mM Sodium citrate, 0.05% Tween 20, pH 6.0)*
- ***1 mM EDTA**, pH 8.0*
- ***Tris-EDTA buffer** (10 mM Tris base, 1 mM EDTA solution, 0.05% Tween 20, pH 9.0)*

AFTER TREATMENT RUN COLD WATER FOR AROUND 10 MINUTES AND CONTINUE WITH IHC PROTOCOL

BLOCKING ASPECIFIC REACTION AND STAINING

-TISSUE SLIDES SHOULD NOT DRY (ununiformly stained): humid chamber

-BLOCK of immunoglobulins aspecific bonds:

-10 min **BSA 1% in PBS** (CAN BE INCREASED UP TO 5%)

-10 min with serum of the animal where secondary Ab was raised

-10 min with purified immunoglobulins of the animal where secondary Ab was raised

Incubation with BSA 1% is made before decoration with the primary Ab. Excess is removed without rinsing.

-BLOCK of glycoproteins aspecific bonds (optional): for instace the peroxydase can stain slightly nuclei

-Incubation with a 5% skimmed milk solution for 10 min (BLOTTO).

-WASHING TO REMOVE ASPECIFIC BONDS:

-Wash with buffer including 0.1% di detergents (Triton X-100 o Tween 20) or NaCl 0.5M.

-HOW TO BLOCK ALDEHYDE GROUPS FROM FIXATIVES

- Sodium borohydride 0.1 mg/ml for 10 min.

DECORATION WITH PRIMARY Ab

- Choose the dilution of the primary antibody, for diagnostic Ab it is already reported or prediluted Ab are used For research check the proper one 1:50, 1:100, 1:500
- Ab shall be diluted in the proper diluting solution or in 0.1% di BSA
- Incubation is usually carried out at r.t. in a humid chamber for 30-60 min, or @ 4°C o.n. with the higher Ab dilution.

Washing

- 10 min in buffer (with 0,1% detergent, optional)

DECORATION WITH BIOTINILATED SECONDARY Ab

- 30 min r.t. diluted as reported by the provider in dilution buffer (optional 0.1% BSA)

LAVAGGIO

- 10 min in tampone (con eventualmente 0,1% di detergente)

COMPLX AVIDIN-BIOTIN-PEROXYDASE

- Mix equal volumes of the solution containing avidin and of the one including biotinilated peroxydase just before use (30 min).
- Incubate for 60 min

Washing

- 10 min with buffer

Chromogenic reaction

- Dilute DAB stock solution (5mg/ml) 30:1 in,
- Add 2 drops of 30% H_2O_2 (100 μ l) for 100 ml DAB solution
- Incubate **5-15 min**
- Wash for 5min with tap water
- Distilled water

COUNTERSTAIN

- Mayer's hematoxylin for 3 min (shorter time or diluted hematoxylin for nuclear staining)
- Tap water for 5 min

DEHYDRATION

- Alcohol 95% 1X 4 min
- Alcohol 100% 2X 4 min

CLEARING

- Xylene 2X per 4 min

MOUNTING

CONTROLS

DIAGNOSTIC

- Positive controls*
- Internal controls*

RESEARCH

- Negative Controls*
- Logic controls*

Pre-adsorption test

Use:

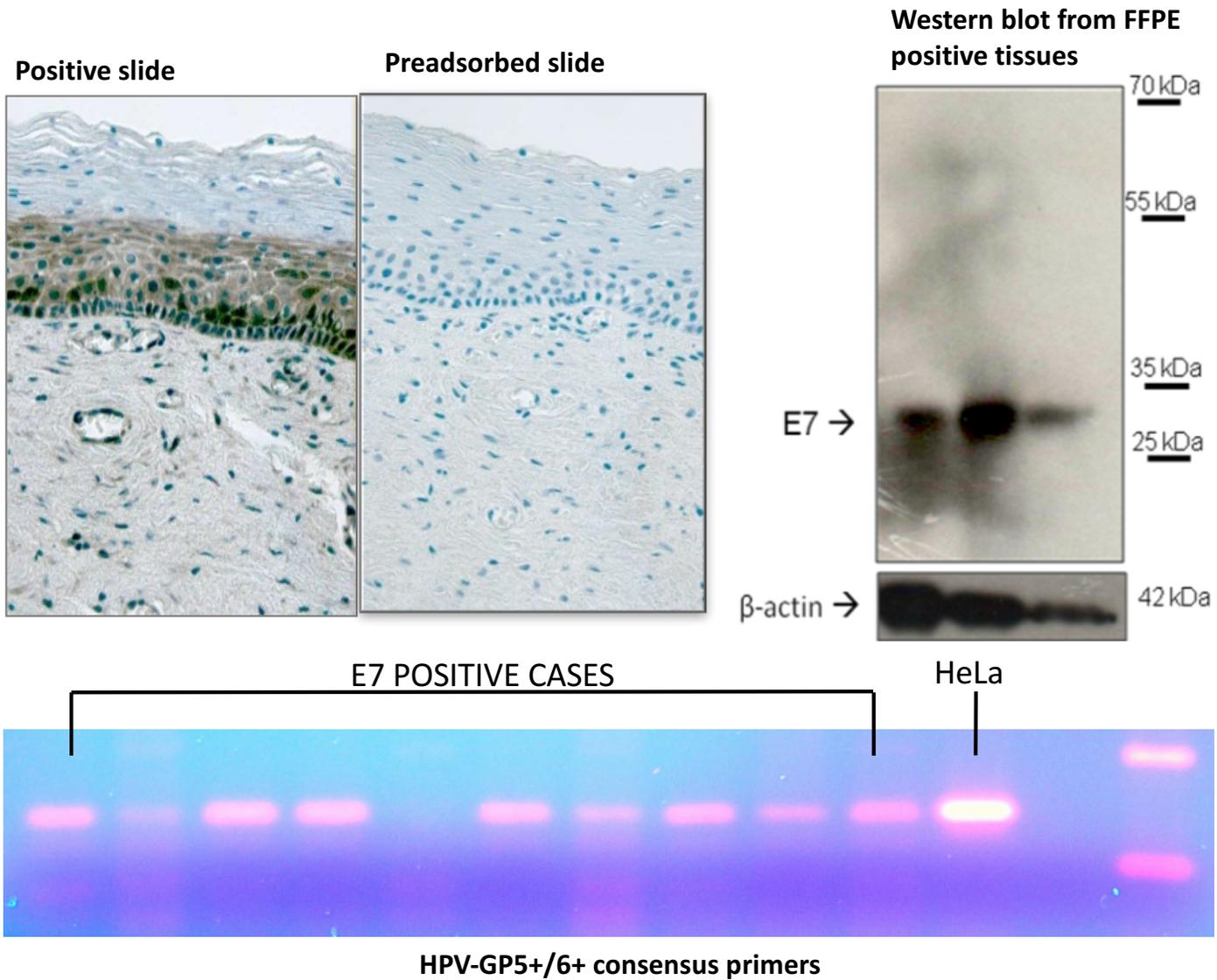
-to test the specificity of the Ab

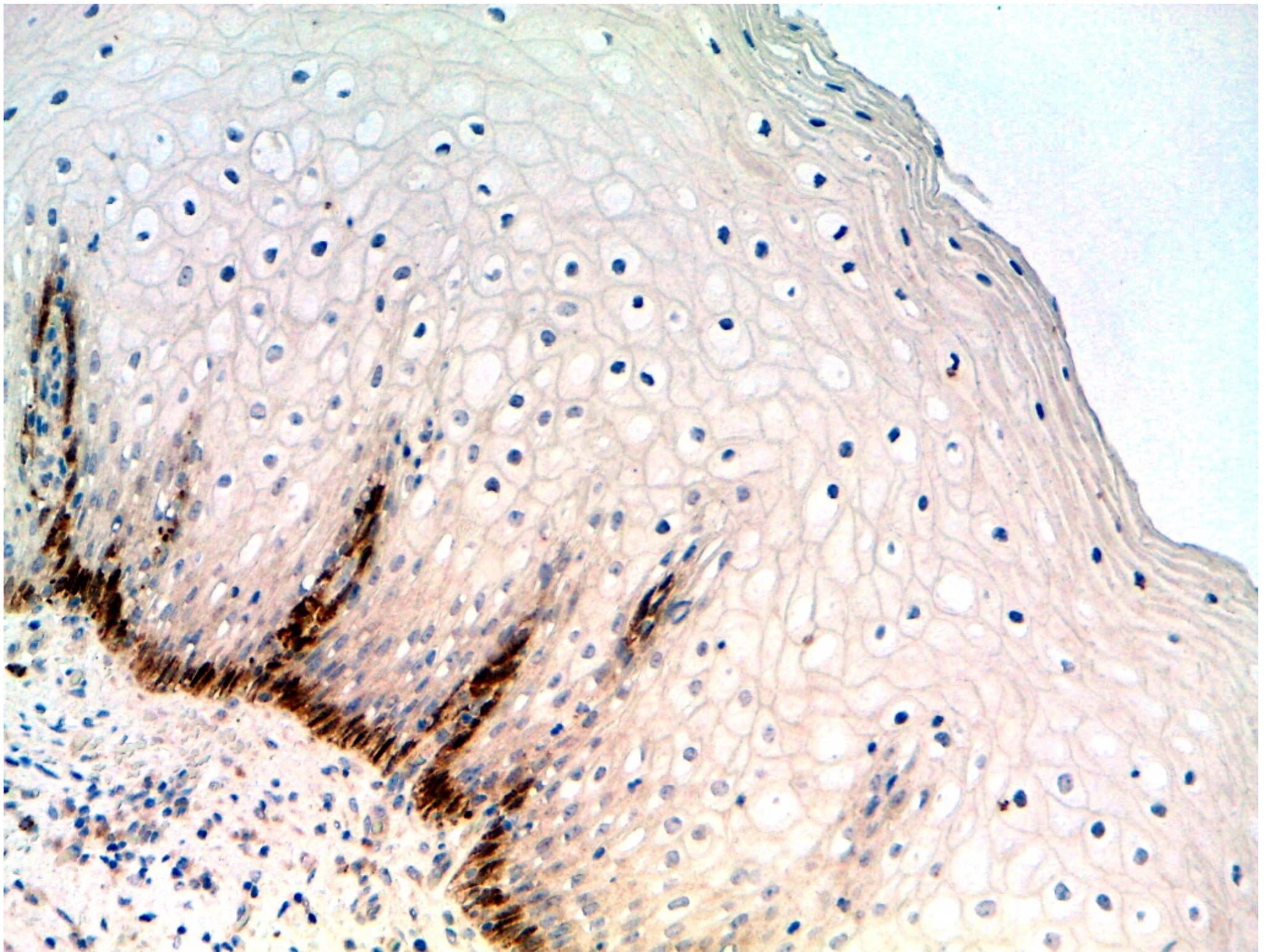
Protocol:

The Ab is blocked by the immunization peptide used to generate the Ab

The test is based on the incubation i solution of the primary Ab + immunization peptide before immunodecoration.

MAb against HPV E7 protein





Other controls

No use of the primary Ab

Use of dilution solution as Ab.

To investigate on the background of the detection system.

It is better to replace the primary Ab with non-immune serum of the same species and isotype of the primary Ab.