

# S100A8/S100A9 Heterodimer (human)

## ELISA KIT A05083

- ▣ Broad range of quantification
- ▣ QC included
- ▣ Sandwich format



S100A8 and S100A9 are Ca<sup>2+</sup> binding proteins that belong to the S100 family, called calgranulin. **Calgranulins** are endogenous molecules released in response to environmental triggers and cellular damage. Also known as **Damage-Associated Molecular Pattern Molecules (DAMPs)**, these proteins play an important role in a diverse range of physiological and pathological processes, such as host defense, wound healing, autoimmunity, oncogenesis, and inflammation, among others.

S100A8 (S100 calcium-binding protein A8, calgranulin A, MRP8) and S100A9 (S100 calcium-binding protein A9, calgranulin B, MRP14) subunits are unique within the calgranulin family because they preferentially form a heterodimer. This heterodimer is termed **calprotectin**, based on its role in innate immunity. Human S100A8 and S100A9 are mainly derived from immunocytes, such as neutrophils, macrophages, and monocytes. Extracellular S100A8 and S100A9 bind pattern recognition receptors (PRRs) including Toll-like receptors (TLRs) and receptors for advanced glycation end products (RAGE) to activate the **innate immune system** and mediate **inflammation** by influencing monocyte and macrophage behavior.

Given that S100A8 and S100A9 are intensely upregulated during **trauma, infection, heat, stress,** and many other **inflammatory processes**, their heterodimer is a valuable candidate as both a diagnostic biomarker and a therapeutic target for inflammation-associated diseases. In particular, their prognostic value is studied within the septic shock context (Dubois *et al* 2020). Plasma levels of S100A8/S100A9 and S100A12 were found to be higher in septic shock patients than in healthy volunteers. Furthermore, the high level of plasma calgranulins at admission in septic shock was higher in non-survivors compared to survivors (Dubois *et al* 2019).

# S100A8/S100A9

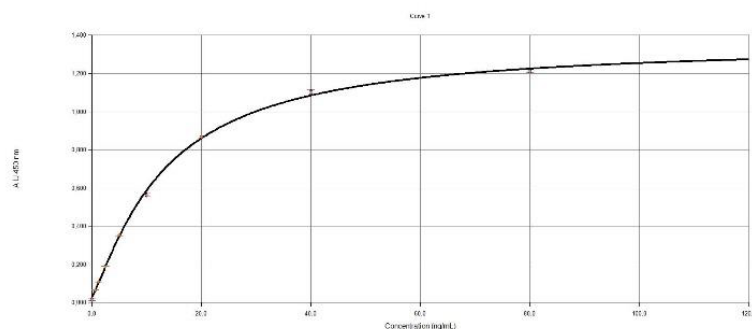
## FOCUS ON THE KIT

This ELISA kit is based on a sandwich technique. The wells of the plate are coated with a **monoclonal** antibody specific to S100A8/S100A9 heterodimer (human) that will bind to S100A8/S100A9 heterodimer (human) introduced into the wells (standard or sample). Then the heterodimer is detected by a second **monoclonal** antibody tagged with biotin also specific to S100A8/S100A9 heterodimer (human).

The two antibodies then form a sandwich by binding on different parts of the S100A8/S100A9 heterodimer (human). The tracer (streptavidin labeled with HRP) will then bind to the biotin. The concentration of S100A8/S100A9 heterodimer (human) is determined by measuring the enzymatic activity of the immobilized tracer using TMB as substrate.

## TECHNICAL FEATURES

- Validated with human serum samples
- Standard range: 0.6 - 80.0 ng/mL
- Inter-assay variation:
  - 6.4% (6.0 ng/mL)
  - 3.9% (14.7 ng/mL)
  - 10.0 % (55.4 ng/mL)
- Tracer label: HRP
- Storage: +4°C
- Sample preparation: dilution of at least at 1:100 in 1x Biotin-free ELISA Buffer
- Limit of detection (LOD):  $\leq 0.6$  ng/mL
- Intra-assay variation:
  - 7.1% (6.1 ng/mL)
  - 4.1% (14.4 ng/mL)
  - 11.3 % (56.5 ng/mL)
- Alias: calprotectin, MRP8/MRP14
- Size: 96 wells



Typical S100A8/S100A9 heterodimer (human) standard curve