

\$100A8/\$100A9 heterodimer (human) ELISA KIT

Cat# A05083

- Broad range of quantification
- QC included
- Sandwich format



\$100A8 and \$100A9 are Ca²⁺ binding proteins that belong to the \$100 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.

\$100A8 (\$100 calcium-binding protein A8, calgranulin A, MRP8) and \$100A9 (\$100 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 \$100A8 and \$100A9 are mainly derived from immunocytes, such as neutrophils, macrophages and monocytes. Extracellular \$100A8 and \$100A9 bind pattern recognition receptors (PRRs) including Toll-like receptors (TLRs) and receptor for advanced glycation end products (RAGE) to activate the **innate immune system** and mediate **inflammation** by influencing monocyte and macrophage behavior.

Given that \$100A8 and \$100A9 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 septic shock context (Dubois *et al* 2020). Plasma levels of \$100A8/\$100A9 and \$100A12 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, were higher in non-survivors compared to survivors (Dubois *et al* 2019).



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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 \$100A8/\$100A9 heterodimer (human) that will bind to \$100A8/\$100A9 heterodimer (human) introduced into the wells (standard or sample). Then the heterodimer is detected by a second **monoclonal** antibody tagged with biotin also specific of \$100A8/\$100A9 heterodimer (human).

The two antibodies then form a sandwich by binding on different parts of the \$100A8/\$100A9 heterodimer (human). The tracer (streptavidin labelled with HRP) will then bind to the biotin. The concentration of \$100A8/\$100A9 heterodimer (human) is determined by measuring the enzymatic activity of 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 at least at

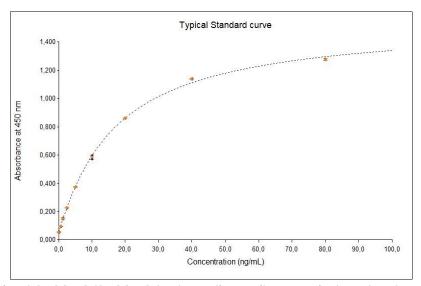
1:100 in 1x Biotin-free ELISA Buffer

Limit of detection (LOD): ≤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 \$100A8/\$100A9 heterodimer (human) standard curve

