

Quantibody[®] Human Periodontal Disease

Array 1 --Quantitative measurement of 20 human periodontal disease associated cytokines

Patent Pending Technology

User Manual (Version Oct 2012)

Cat # QAH-PDD-1



**We Provide You With Excellent
Protein Array Systems and Service**

**Tel:(Toll Free) 1-888-494-8555 or 770-729-2992; Fax: 1-888-547-0580;
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Cytokine Detected (20)	CRP, IFN γ , IL-1 α , IL-1 β , IL-2, IL-4, IL-6, IL-8, IL-10, IL-12, IL-17, MIP-1 α , MMP-9, MMP-13, OPG, OPN, Osteoactivin, RANK, TGF β 1, TNF α
Format	One standard glass slide is spotted with 16 wells of identical cytokine antibody arrays. Each antibody is arrayed in quadruplicate.
Detection Method	Fluorescence with laser scanner: Cy3 equivalent dye
Sample Volume	50 – 100 μ l per array
Reproducibility	CV <20%
Assay duration	6 hrs

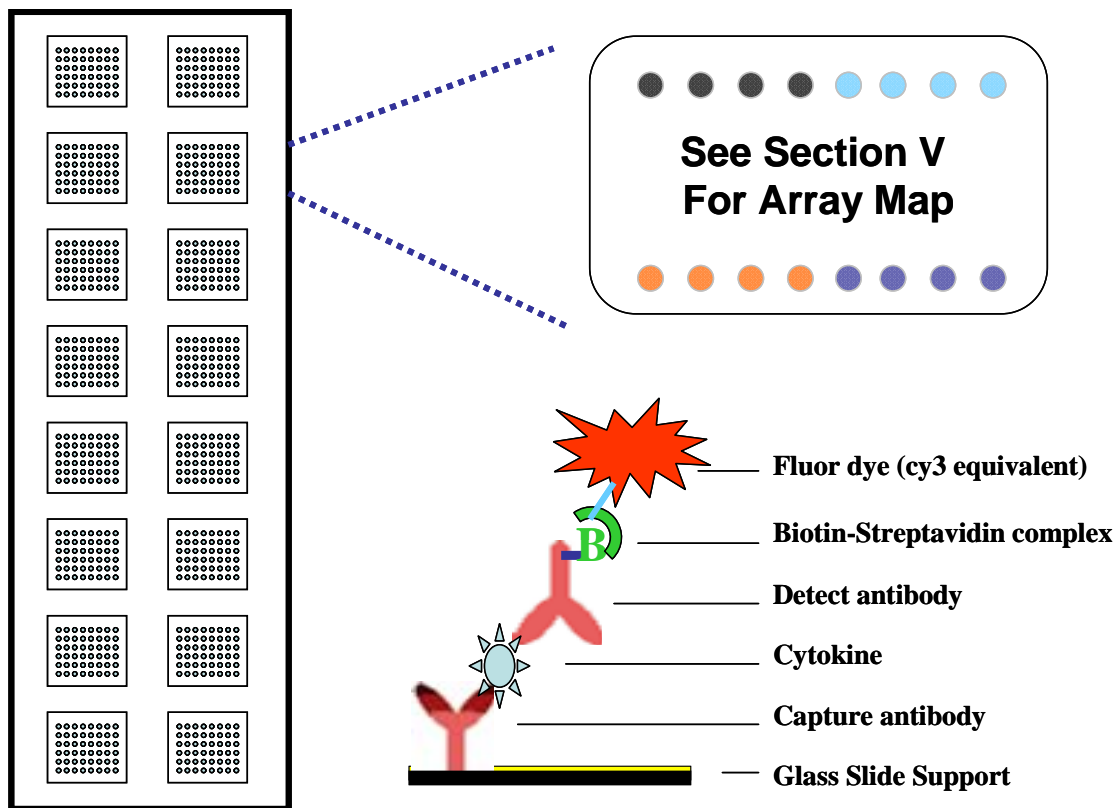


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I. Introduction

Periodontal disease is a gum disease. The symptom ranges from simple gum inflammation (gingivitis) to periodontitis which results in major damage to the soft tissue and bone that support the teeth. In the worst cases, teeth are lost. Because of the irreversible nature of periodontitis, early diagnosis and treatment is critical. Clinical measurements include probing pocket depth, bleeding on probing, clinical attachment loss, plaque index, and radiographs etc. While such methods are useful for the staging of periodontal disease, they are only indicators of previous disease status rather than the present disease activity. There is a need for the development of new diagnostic tests that can reflect the active disease state, which will be useful for disease diagnosis, prognosis, and monitoring the effectiveness of periodontal therapy. Gingival crevicular fluid (GCF) is a tiny amount bodily fluid transuded from periodontal tissues into the gingival crevice and periodontal pocket. The constituents of GCF originate from serum, gingival tissues, and from both bacterial and host response cells, which reflect the biology and physiology of the local tissues. Meanwhile, GCF could be easily collected by noninvasive means such as paper strips, absorbent points and micropipettes. As a result, proteins in GCF have been the ideal and hot targets pursued for candidate disease specific biomarker research for the last several decades.

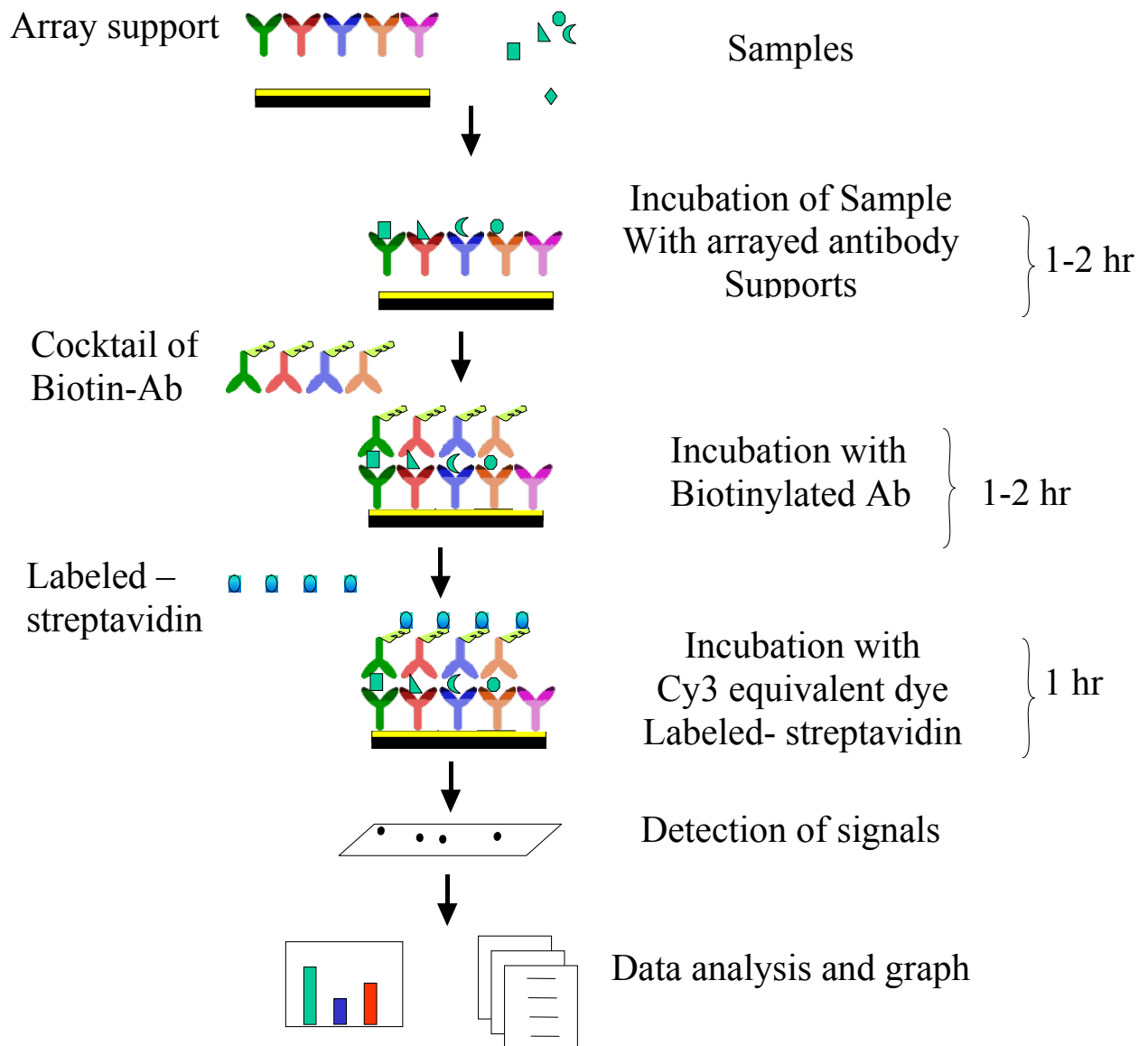
Most analyzed periodontal disease related proteins in GCF are inflammatory cytokines (eg. IL-1b, IL-6, IL-8, IL-10, IL-12, IFNg, TNFa, and CRP); matrix metalloproteinases (eg. MMP-8, MMP-9, and MMP-13) and their inhibitors (TIMPs); bone metabolism related cytokines (eg. OPG, OPN, RANK, and RANKL); and enzymes (eg. alkaline phosphatase and aspartate aminotransferase). Because of the limited availability of sample volumes, most of the previous research only worked on one or several targets. The traditional method for cytokine detection and quantification is through the use of an enzyme-linked immunosorbent array (ELISA). While the traditional method works well for a single protein, the overall procedure is time consuming and requires a lot of sample. Take the advantage of advancement in microarray technology over the last decade; Raybiotech, has pioneered the development of cytokine antibody arrays, which has now been widely applied in the research community with hundreds of peer reviewed publications such as in Cell and Nature.

Quantibody[®] array, our quantitative array platform, uses the multiplexed sandwich ELISA-based technology and enables researchers to accurately determine the concentration of multiple cytokines simultaneously. It combines the advantages of the high detection sensitivity / specificity of ELISA and the high throughput of the arrays. Like a traditional sandwich-based ELISA, it uses a pair of cytokine specific antibodies for detection. A capture antibody is first bound to the glass surface. After incubation with the sample, the target cytokine is trapped on the solid surface. A second biotin-labeled detection antibody is then added, which can recognize a different isotope of the target cytokine. The cytokine-antibody-biotin complex can then be visualized through the addition of the streptavidin-labeled Cy3 equivalent dye using a laser scanner. Unlike the traditional ELISA, Quantibody products use array format. By arraying multiple cytokine specific capture antibodies onto a glass support, multiplex detection of cytokines in one experiment is made possible.

In detail, one standard glass slide is spotted with 16 wells of identical cytokine antibody arrays. Each antibody, together with the positive controls is arrayed in quadruplicate. The slide comes with a 16-well removable gasket which allows for the process of 16 samples in one slide. Four slide chips can be nested into a tray, which matches a standard microplate and allows for automated robotic high throughput process of 64 arrays simultaneously. For cytokine quantification, the array specific cytokine standards, whose concentration has been predetermined, are provided to generate a standard curve for each cytokine. In a real experiment, standard cytokines and samples will be assayed in each array simultaneously through a sandwich ELISA procedure. By comparing signals from unknown samples to the standard curve, the cytokine concentration in the samples will be determined.

Quantibody[®] array kits have been confirmed to have similar detection sensitivity as traditional ELISA. Our current high density Quantibody kits allow scientists to quantitatively determine the concentration of 320 human or 160 mouse cytokines in a single experiment. This is not only one of the most efficient products on the market for cytokine quantification, but makes it more affordable for quantification of large number of proteins. Simultaneous detection of multiple cytokines undoubtedly provides a powerful tool for drug and biomarker discovery.

How It Works



II. Materials Provided

Upon receipt, all components of the Quantibody® Array kit should be stored at -20°C. At -20°C the kit will retain complete activity for up to 6 months. Once thawed, the glass chip, cytokine standard mix, detection antibody cocktail and Cy3 equivalent dye-conjugated Streptavidin should be kept at -20°C and all other components may be stored at 4°C. The entire kit should be used within 6 months of purchase.

Components

Item	Description	1-Slide kit	2-Slide kit
1	Quantibody® Array Glass Chip	1	2
2	Sample Diluent	1	1
3	20X Wash Buffer I	2	3
4	20X Wash Buffer II	1	1
5	Lyophilized cytokine standard mix *	1	1
6	Detection antibody cocktail	1	2
7	Cy3 equivalent dye-conjugated Streptavidin	1	2
8	Slide Washer/Dryer	1	1
9	Adhesive device sealer	5	10
10	Manual	1	1

** See Section VI for detailed cytokine concentrations after reconstitution.*

Additional Materials Required

- Orbital shaker
- Laser scanner for fluorescence detection
- Aluminum foil
- Distilled water
- 1.5ml Polypropylene microcentrifuge tubes

III. General Considerations

A. Preparation of Samples

- GCF collection was most commonly performed using paper strips inserted into the gingival crevice until mild tissue resistance is felt. A sampling period of 30s has been adopted by most investigators. Subsequently the volume of GCF collected on the paper strip is quantified by an electronic device (eg. Periotron 8000). GCF samples can be either eluted immediately or stored frozen and eluted subsequently with sample diluent buffer.
- We recommend the following parameters for other samples: 50 to 100 μ l of original or diluted serum, plasma, cell culture media, or other body fluid, or 50-500 μ g/ml of protein for cell and tissue lysates.

B. Handling glass chips

- Do not touch the surface of the slides, as the microarray slides are very sensitive. Hold the slides by the edges only.
- Handle all buffers and slides with latex free gloves.
- Handle glass chip in clean environment.
- Because there is no barcode on the slide, transcribe the slide serial number from the slide bag to the back of the slide with a permanent marker before discarding the slide bag. Once the slide is disassembled, you might not have enough info to distinguish one slide from the other.

C. Incubation

- Completely cover array area with sample or buffer during incubation.
- Avoid foaming during incubation steps.
- Perform all incubation and wash steps under gentle rotation.
- Cover the incubation chamber with adhesive film during incubation, particularly when incubation is more than 2 hours or <70 μ l of sample or reagent is used.
- Several incubation steps such as step 6 (blocking), step 7 (sample incubation), step 10 (detection antibody incubation), or step 13 (Cy3 equivalent dye-streptavidin incubation) may be done overnight at 4⁰C. Please make sure to cover the incubation chamber tightly to prevent evaporation.

IV. Protocol

A. Completely air dry the glass chip

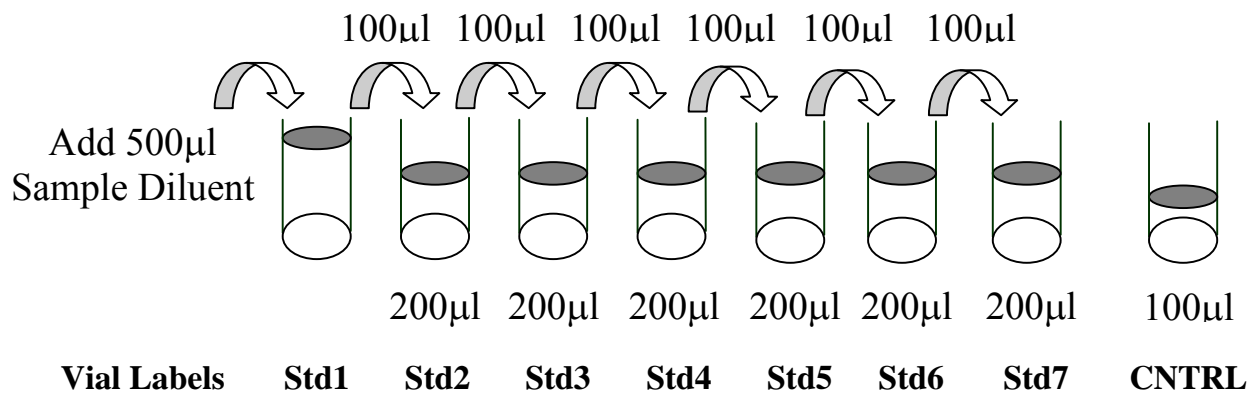
1. Take out the glass chip from the box, and let it equilibrate to room temperature inside the sealed plastic bag for 20-30 minutes. Remove slide from the plastic bag; peel off the cover film, and let it air dry at room temperature for another 1-2 hours.

Note: Incomplete drying of slides before use may cause the formation of “comet tails”.

B. Prepare Cytokine Standard Dilutions

Note: There is only one vial of standard provided in the two-slide kit, which is enough for making two standard curves. Reconstitute the lyophilized standard within one hour of usage. If you must use the standard for two different days, store only the Std1 dilution at -80°C .

Prepare serial dilution of cytokine standards



2. Reconstitute the Cytokine Standard Mix (lyophilized) by adding 500 µl Sample Diluent to the tube. For best recovery, always quick-spin vial prior to opening. Dissolve the powder thoroughly by a gentle mix. Labeled the tube as Std1.

3. Label 6 clean microcentrifuge tubes as Std2 to Std7. Add 200µl Sample Diluent to each of the tubes.
4. Pipette 100µl Std1 into tube Std2 and mix gently. Perform 5 more serial dilutions by adding 100ul Std2 to tube Std3 and so on.
5. Add 100µl Sample Diluent to another tube labeled as CNTRL. Do not add standard cytokines or samples to the CNTRL tube, which will be used as negative control. For best results, include a set of standards in each slide.

Note: Since the starting concentration of each cytokine is different, the serial concentrations from Std1 to Std7 for each cytokine are varied which can be found in section VI.

C. Blocking and Incubation

6. Add 100µl Sample Diluent into each well and incubate at room temperature for 30 min to block slides.
7. Decant buffer from each well. Add 100µl standard cytokines or samples to each well. Incubate arrays at room temperature for 1-2 hour. (Longer incubation time is preferable for higher signals)

Note: GCF samples can be either eluted immediately or stored frozen and eluted subsequently with same ratio of sample diluent buffer. We recommend using 50 to 100 µl of original or diluted serum, plasma, conditioned media, or other body fluid, or 50-500 µg/ml of protein for cell and tissue lysates. Cover the incubation chamber with adhesive film during incubation if less than 70 ul of sample or reagent is used.

Note: This step may be done overnight at 4⁰C for best results.

8. Wash:
 - Decant the samples from each well, and wash 5 times (5 min each) with 150 µl of 1x Wash Buffer I at room temperature with gentle

shaking. Completely remove wash buffer in each wash step. Dilute 20x Wash Buffer I with H₂O.

- (*Optional for Cell and Tissue Lysates*) Put the glass chip with frame into a box with 1x Wash Buffer I (cover the whole glass slide and frame with Wash Buffer I), and wash at room temperature with gentle shaking for 20 min.
- Decant the 1x Wash Buffer I from each well, wash 2 times (5 min each) with 150 µl of 1x Wash Buffer II at room temperature with gentle shaking. Completely remove wash buffer in each wash step. Dilute 20x Wash Buffer II with H₂O.

D. Incubation with detection antibody cocktail and wash.

9. Reconstitute the detection antibody by adding 1.4 ml of Sample Diluent to the tube. Spin briefly.
10. Add 80 µl of the detection antibody cocktail to each well. Incubate at room temperature for 1-2 hour. (*Longer incubation time is preferable for higher signals and backgrounds*)
11. Decant the samples from each well, and wash 5 times with 150 µl of 1x Wash Buffer I and then 2 times with 150 µl of 1x Wash Buffer II at room temperature with gentle shaking. Completely remove wash buffer in each wash step.

E. Incubation with Cy3 equivalent dye -Streptavidin and wash

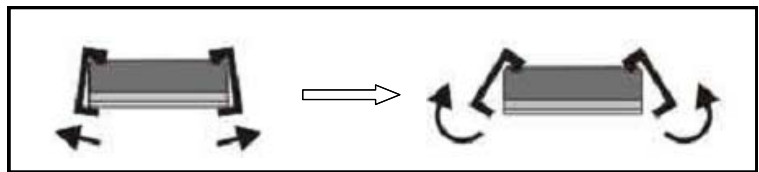
12. After briefly spinning down, add 1.4 ml of Sample Diluent to Cy3 equivalent dye-conjugated streptavidin tube. Mix gently.
13. Add 80 µl of Cy3 equivalent dye-conjugated streptavidin to each well. Cover the device with aluminum foil to avoid exposure to light or incubate in dark room. Incubate at room temperature for 1 hour.

14. Decant the samples from each well, and wash 5 times with 150 μ l of 1x Wash Buffer I at room temperature with gentle shaking. Completely remove wash buffer in each wash step.

F. Fluorescence Detection

15. Disassemble the device by pushing clips outward from the slide side. Carefully remove the slide from the gasket.

(Be careful not to touch the surface of the array side)

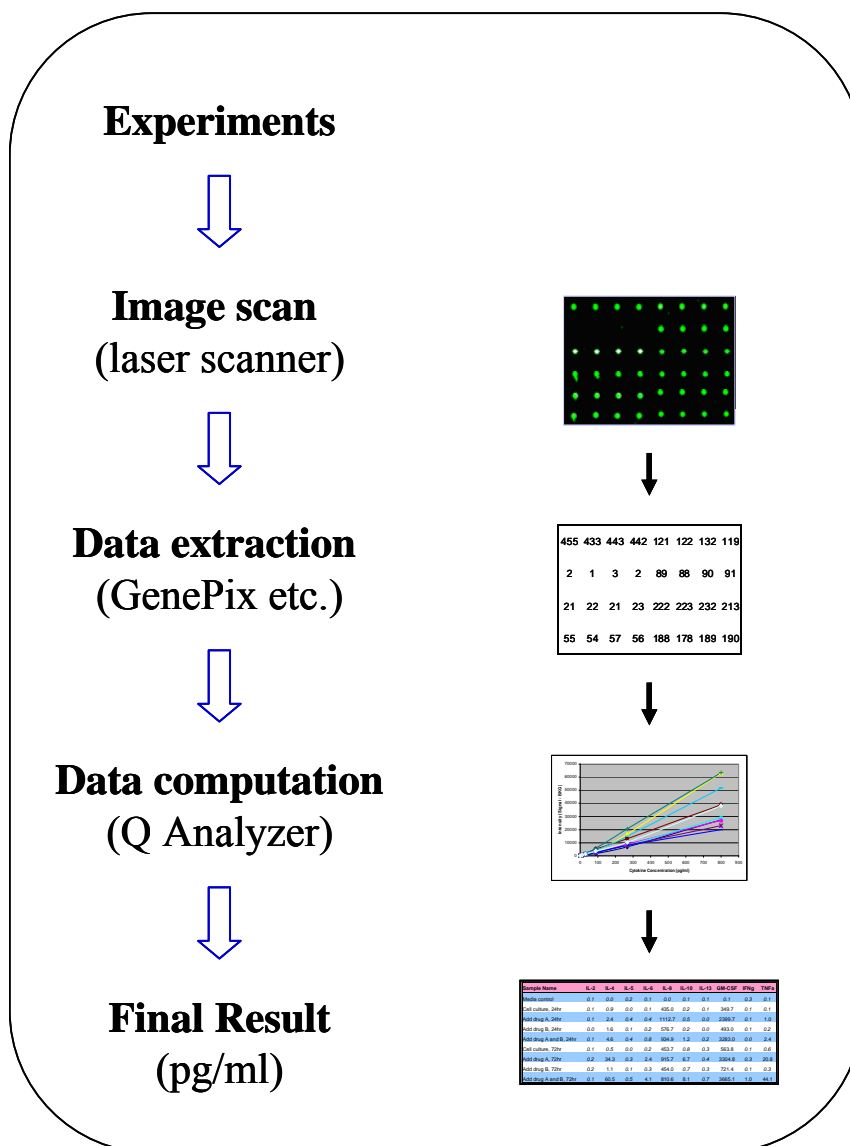


16. Place the slide in the slide Washer/Dryer (a 4-slide holder/centrifuge tube), add enough 1x Wash Buffer I (about 30 ml) to cover the whole slide, and then gently shake at room temperature for 15 minutes. Decant Wash Buffer I. Wash with 1x Wash Buffer II (about 30 ml) with gentle, and gently shake at room temperature for 5 minutes.
17. Remove water droplets completely by one of the following ways:
- Put the glass chip into the Slide Washer/Dryer, and dry the glass chip by centrifuge at 1,000 rpm for 3 minutes without cap.
 - Or, dry the glass chip by a compressed N₂ stream.
 - Or gently apply suction with a pipette to remove water droplets. Do not touch the array, only the sides.
18. Imaging: The signals can be visualized through use of a laser scanner equipped with a Cy3 wavelength such as Axon GenePix. Make sure that the signal from the well containing the highest standard concentration (Std1) receives the highest possible reading, yet remains unsaturated.

Note: In case the signal intensity for different cytokine varies greatly in the same array, we recommend using multiple scans, with a higher PMT for low signal cytokines, and a low PMT for high signal cytokines.

G. Data Analysis

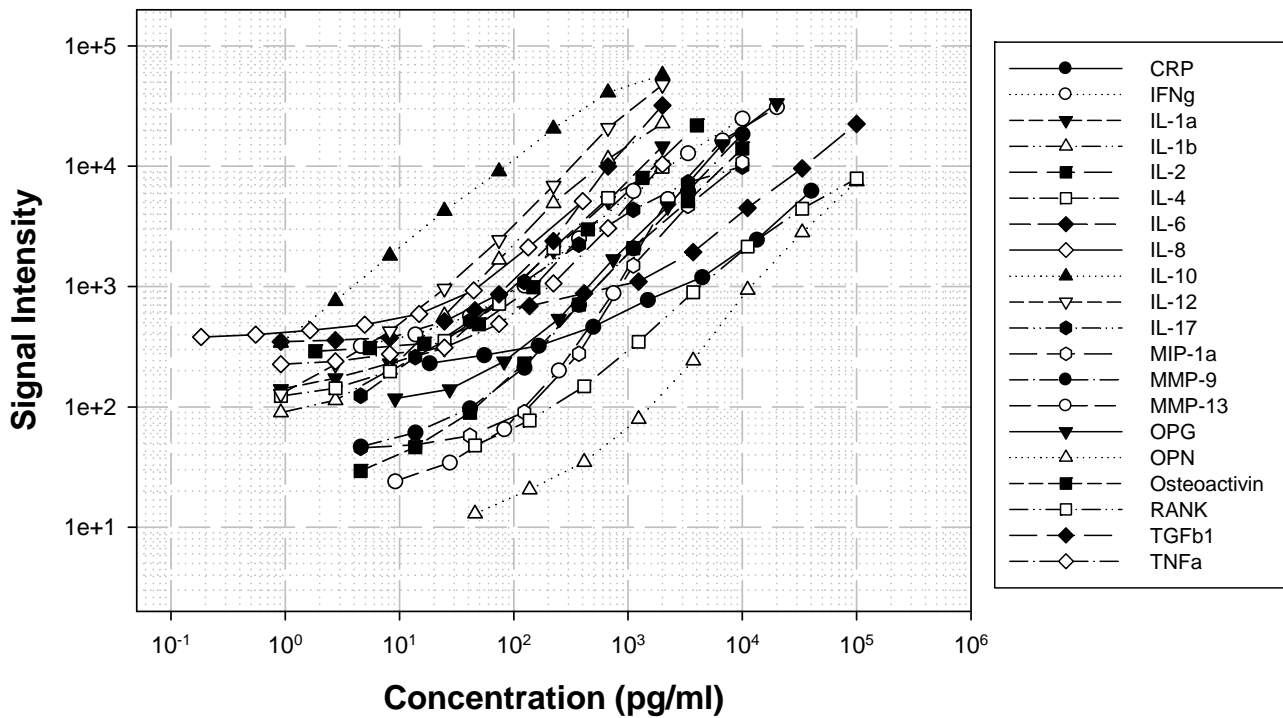
19. Data extraction can be done with most of the microarray analysis software (GenePix, ScanArray Express, ArrayVision, or MicroVigene). For quantitative data analysis, our Quantibody[®] Q-Analyzer software is available. It gives visual output as well as digital values. More information can be found in section VIII.



V. Cytokine Array Map & Standard Curves

POS1	POS2
CRP	IFN γ
IL-1 α	IL-1 β
IL-2	IL-4
IL-6	IL-8
IL-10	IL-12
IL-17	MIP-1 α
MMP-9	MMP-13
OPG	OPN
Osteoactivin	RANK
TGF β 1	TNF α

QAH-PDD-1 Standard Curves



VI. 8-Point Standards

After reconstitution of the lyophilized cytokine standard mix, the 8-point cytokine concentration used for generating the standard curve of a given antigen is listed below. The detection sensitivity of each protein in one experiment is user dependent. Try our array specific Quantibody Q-Analyzer to see your Limit of Detection (LOD). (Section VIII).

Serial standard concentration (pg/ml)

(pg/ml)	Cntrl	Std7	Std6	Std5	Std4	Std3	Std2	Std1
CRP	0	55	165	494	1,481	4,444	13,333	40,000
IFN γ	0	14	41	123	370	1,111	3,333	10,000
IL-1 α	0	3	8	25	74	222	667	2,000
IL-1 β	0	3	8	25	74	222	667	2,000
IL-2	0	5	16	49	148	444	1,333	4,000
IL-4	0	3	8	25	74	222	667	2,000
IL-6	0	3	8	25	74	222	667	2,000
IL-8	0	1	2	5	15	44	133	400
IL-10	0	3	8	25	74	222	667	2,000
IL-12	0	3	8	25	74	222	667	2,000
IL-17	0	14	41	123	370	1,111	3,333	10,000
MIP-1 α	0	14	41	123	370	1,111	3,333	10,000
MMP-9	0	14	41	123	370	1,111	3,333	10,000
MMP-13	0	27	82	247	741	2,222	6,667	20,000
OPG	0	27	82	247	741	2,222	6,667	20,000
OPN	0	137	412	1,235	3,704	11,111	33,333	100,000
Osteoactivin	0	14	41	123	370	1,111	3,333	10,000
RANK	0	137	412	1,235	3,704	11,111	33,333	100,000
TGF β 1	0	137	412	1,235	3,704	11,111	33,333	100,000
TNF α	0	3	8	25	74	222	667	2,000

VII. System Recovery

The antibody pairs used in the kit have been tested to recognize their specific antigen. The spiking recovery rate of the cytokines by the kit in 2x diluted Human serum and 2x diluted Human cell culture media (CM) is listed in the following table.

The spiking recovery rate for culture media and serum

(pg/ml)	Spiking	CM	CM + Ag	CM%	Serum	Serum + Ag	Serum%
CRP	20,000	0	14,411	72%	7,444	20,945	68%
IFN γ	5,000	391	4,425	81%	27	3,607	72%
IL-1 α	1,000	21	746	72%	10	654	64%
IL-1 β	1,000	0	631	63%	0	513	51%
IL-2	2,000	432	2,536	105%	49	2,152	105%
IL-4	1,000	14	1,244	123%	10	1,361	135%
IL-6	1,000	1,726	2,436	71%	27	1,023	100%
IL-8	1,000	159	1,156	100%	6	956	95%
IL-10	1,000	9	726	72%	1	590	59%
IL-12	1,000	2	1,198	120%	2	857	85%
IL-17	5,000	0	3,461	69%	2	3,255	65%
MIP-1 α	5,000	110	7,134	140%	0	3,934	79%
MMP-9	5,000	15	2,587	51%	3,368	4,067	14%
MMP-13	10,000	129	9,919	98%	6	6,128	61%
OPG	10,000	34,602	39,009	44%	23	12,799	128%
OPN	50,000	958	47,043	92%	203	28,861	57%
Osteoactivin	5,000	89	4,993	98%	2,493	4,538	41%
RANK	25,000	68	19,119	76%	21	17,503	70%
TGF β 1	50,000	313	54,434	108%	0	60,182	120%
TNF α	1,000	42	765	72%	16	1,301	128%

VIII. Quantibody® Q-Analyzer

Quantibody Q-Analyzer is an array specific, Excel-based program. However, it is not a simple calculation macro as it contains sophisticated data analysis.

Key features:

- Simplicity: Easy to operate and requires no professional training. With a simple copy and paste process, the cytokine concentration is determined.
- Outlier Marking & Removing: The software can automatically mark and remove the outlier spots for more accurate data analysis
- Normalization: The program allows for intra- and inter-slide normalization for large number of samples.
- Two Positive Controls: The program takes the two positive controls in each array for normalization.
- Two Analytical Algorithms: Users can choose either linear regression or log-log algorithms to meet their analytical needs.
- Two Data Outputs: standard curves and digital concentration.
- User Intervention: The program allows for user manual handling of those outliers and other analytical data.
- Lower and Upper Limits Determination: The program automatically marks out the values below or above the detection range.
- Standard Deviation: The program outputs the standard deviations of the quadruplicate spots for data accuracy.
- Analytical Tips: Q-Analyzer analysis tips are included in the program.

IX. Troubleshooting guide

Problem	Cause	Recommendation
Weak Signal	Inadequate detection	Increase laser power and PMT parameters
	Inadequate reagent volumes or improper dilution	Check pipettes and ensure correct preparation
	Short incubation time	Ensure sufficient incubation time and change sample incubation step to overnight
	Too low protein concentration in sample	Don't make too low dilution or concentrate sample
	Improper storage of kit	Store kit as suggested temperature. Don't freeze/thaw the slide.
Uneven signal	Bubble formed during incubation	Avoid bubble formation during incubation
	Arrays are not completely covered by reagent	Completely cover arrays with solution
	Reagent evaporation	Cover the incubation chamber with adhesive film during incubation
Poor standard curve	Cross-contamination from neighboring wells	Avoid overflowing wash buffer
	Comet tail formation	Air dry the slide for at least 1 hour before usage
	Inadequate standard reconstitution or Improper dilution	Reconstitute the lyophilized standard well at the room temperature before making serial dilutions. Check pipettes and ensure proper serial dilutions.
	Inadequate detection	Increase laser power that the highest standard concentration for each cytokine receives the highest possible reading yet remains unsaturated.
	Use freeze-thawed cytokine standards	Always use new cytokine standard vial for new set of experiment. Discard any leftover.
High background	Overexposure	Lower the laser power
	Dark spots	Completely remove wash buffer in each wash step.
	Insufficient wash	Increase wash time and use more wash buffer
	Dust	Work in clean environment
	Slide is allowed to dry out	Don't dry out slides during experiment.

X. Select Quantibody Publications

1. Stechova, et al. Influence of Maternal Hyperglycaemia on Cord Blood Mononuclear Cells in Response to Diabetes-associated Autoantigens. *Scandinavian Journal of Immunology*. 2009. 70(2):149-158
2. Willingham, SB et al. NLRP3 (NALP3, Cryopyrin) facilitates in vivo caspase-1 activation, necrosis, and HMGB1 release via inflammasome-dependent and -independent pathways. *J Immunol*. 2009; 183(3):2008-15
3. El Karim et al. Neuropeptides Regulate Expression of Angiogenic Growth Factors in Human Dental Pulp Fibroblasts. *Journal of Endodontics*, 2009; 35(6): 829-833
4. Souquière S. et al. T-Cell tropism of simian T-cell leukaemia virus type 1 and cytokine profiles in relation to proviral load and immunological changes during chronic infection of naturally infected mandrills (*Mandrillus sphinx*). *J Med Primatol*. 2009; 38(4):279-89
5. Sharma, et al. Induction of multiple pro-inflammatory cytokines by respiratory viruses and reversal by standardized *Echinacea*, a potent antiviral herbal extract. *Antiviral Research*. 2009; 83(2)165-170.
6. Altamirano-Dimas, et al. *Echinacea* and anti-inflammatory cytokine responses: Results of a gene and protein array analysis. *Pharmacuetical Biology*. 2009; 47(6): 500-508.
7. Cheung, et al. Cordysinocan, a polysaccharide isolated from cultured *Cordyceps*, activates immune responses in cultured T-lymphocytes and macrophages: Signaling cascade and induction of cytokines. *Journal of Ethonopharmacology*. 2009; 124(1): 61-68.
8. Du, et al. P2-380: Identification and characterization of human autoantibodies that may be used for the treatment of prion diseases. *Alzheimer's and Dementia*. 2009; 4(4): T484-T484.
9. Van Rossum et al. Granulocytosis and thrombocytosis in renal cell carcinoma: a pro-inflammatory cytokine response originating in the tumour. *Neth J Med*. 2009; 67(5):191-4.
10. Zhai, et al. Coordinated Changes in mRNA Turnover, Translation, and RNA Processing Bodies in Bronchial Epithelial Cells following Inflammatory Stimulation. *Molecular and Cellular Biology*. 2008; 28(24): 7414-7426.
11. Gao, et al. A Chinese herbal decoction, Danggui Buxue Tang, activates extracellular signal-regulated kinase in cultured T-lymphocytes. *FEBS Letters*, 2007; 581(26): 5087-5093. (This reference validates multiplex ELISA results for several analytes with standard ELISA test results).
12. Piganelli, et al: Autoreactive T-cell responses: new technology in pursuit of an old nemesis. (Editorial Review) *Pediatric Diabetes* 2007; 8: 249–251

XI. Experiment Record Form

Date: _____

File Name: _____

Laser Power: _____

PMT: _____

Well No.	Sample Name	Dilution factor
1	CNTRL	
2	Std7	
3	Std6	
4	Std5	
5	Std4	
6	Std3	
7	Std2	
8	Std1	
9		
10		
11		
12		
13		
14		
15		
16		

1	2
3	4
5	6
7	8

XII. How to Choose Quantibody® Products?

Species-based selection:

- **Human:** (QAH-)
- **Mouse:** (QAM-)
- **Rat:** QAR-CYT-1, QAR-CYT-2, QAR-CYT-3, QAR-INF-1
- **Porcine:** QAP-CYT-1
- **Non-Human Primates (NHP):** QAN-CYT-1

Function-based selection:

- **TH1/TH2/TH17 Array:** QAH-TH-1, QAH-TH17, QAM-TH17
- **Inflammation Arrays:** QAH-INF-1, QAH-INF-2, QAH-INF-3; QAM-INF-1; QAR-INF-1
- **Angiogenesis Arrays:** QAH-ANG-1, QAH-ANG-2, QAH-ANG-3, QAH-ANG-1000
- **Chemokine Arrays:** QAH-CHE-1, QAM-CHE-1
- **MMP Array:** QAH-MMP-1
- **Immunoglobulin Isotype Array:** QAH-ISO-1; QAM-ISO-G1

Cytokine Number-based selection:

- **320 cytokines:** QAH-CAA-7000
- **280 cytokines:** QAH-CAA-6000
- **240 cytokines:** QAH-CAA-5000
- **200 cytokines:** QAH-CAA-4000
- **160 cytokines:** QAH-CAA-3000, QAM-CAA-3000
- **120 cytokines:** QAH-CAA-2000; QAM-CAA-2000
- **80 cytokines:** QAH-CAA-1000; QAM-CAA-1000
- **60 cytokines:** QAH-ANG-1000; QAM-CYT-Q2000
- **40 cytokines:** QAH-INF-3, QAH-CHE-1, QAH-GF-1, QAH-REC-1, QAH-CYT-4, QAH-CYT-5, QAH-CYT-6, QAH-CYT-7, QAM-INF-1, QAM-CYT-4, QAM-CYT-5, QAM-CYT-6
- **30 cytokines:** QAH-ANG-2, QAH-ANG-3, QAM-INT-1000, QAR-CYT-3, QAM-CHE-1
- **20 cytokines:** QAH-CYT-1, QAH-CYT-2, QAM-CYT-1, QAM-CYT-2, QAM-CYT-3, QAM-INT-1, QAH-TH17-1, QAM-TH17-1
- **10 cytokines:** QAH-TH-1, QAH-INF-1, QAH-INF-2, QAH-ANG-1, QAH-MMP-1, QAH-ADI-1, QAM-INT-2, QAR-CYT-1, QAR-CYT-2, QAR-INF-1, QAN-CYT-1, QAP-CYT-1, QAH-IGF-1
- **less than 10 cytokines:** QAH-ISO-1, QAH-ADI-2, QAP-CYT-1, QAM-ISO-G1

Purpose-based selection --- Custom Arrays

- Choose from over 500 cytokine pool; Any kind; Any number
- Order slide only or full service in house
- Desired marker not in our pool? No problem! For certain developmental fee, we may be able to add the marker to your panel if the paired antibodies are available on the market.

Check our website regularly for updated Quantibody® products

Note:

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Cytokine protein arrays are RayBiotech patent-pending technology.

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