

Quantikine[®] ELISA

Human IL-16 Immunoassay

Catalog Number D1600

For the quantitative determination of human Interleukin 16 (IL-16) concentrations in cell culture supernates, serum, and plasma.

This package insert must be read in its entirety before using this product.
For research use only. Not for use in diagnostic procedures.

TABLE OF CONTENTS

SECTION	PAGE
INTRODUCTION	1
PRINCIPLE OF THE ASSAY	2
LIMITATIONS OF THE PROCEDURE	2
TECHNICAL HINTS	2
MATERIALS PROVIDED & STORAGE CONDITIONS	3
OTHER SUPPLIES REQUIRED	3
PRECAUTIONS	4
SAMPLE COLLECTION & STORAGE	4
REAGENT PREPARATION	5
ASSAY PROCEDURE	6
CALCULATION OF RESULTS	7
TYPICAL DATA	7
PRECISION	8
RECOVERY	8
SENSITIVITY	8
LINEARITY	9
CALIBRATION	9
SAMPLE VALUES	9
SPECIFICITY	10
REFERENCES	11
PLATE LAYOUT	12

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INTRODUCTION

Interleukin 16 (IL-16), formerly known as lymphocyte chemoattractant factor or LCF, is a proinflammatory cytokine that is chemotactic for CD4⁺ T lymphocytes, monocytes and eosinophils (1, 2). In addition, IL-16 can upregulate IL-2 receptor and HLA-DR expression (3, 4), inhibit T cell receptor (TcR)/CD3-dependent activation (5, 6) and promote repression of HIV-1 transcription (7). IL-16 is a unique cytokine with no significant sequence homology to other well-characterized cytokines or chemokines.

IL-16 was originally identified as a homotetramer consisting of individual 14 kDa monomers of 130 amino acids (aa) each (8). It is synthesized as a precursor molecule (pro-IL-16) of approximately 68 kDa and 631 aa lacking a signal peptide (9, 10). The gene for human IL-16 maps to chromosome 15 and the sequence displays > 90% homology to those of various nonhuman primates (11, 12).

Recombinant pro-IL-16 polypeptides are specifically cleaved in CD8⁺ cell lysates suggesting that the actual secreted form of IL-16 may be smaller than the originally published 130 aa form (9). In CD8⁺ T cells, active caspase-3 cleaves pro-IL-16 producing a biologically active, secreted form of IL-16 (*i.e.* representing 121 C-terminal aa residues of pro-IL-16) (13). The mechanism of release or secretion of IL-16, however, is currently unknown but does not appear to correlate with apoptosis (14).

CD4 serves as a signal-transducing receptor for IL-16. Expression of CD4 is required for mediating IL-16 functions (3, 4, 15-17). Interaction between IL-16 and CD4 can specifically initiate an increase in intracytoplasmic calcium and inositol trisphosphate (3), activation of p56^{lck} (15), and translocation of protein kinase C from the cytosol to the cell membrane (17). The region of CD4 that binds IL-16 has been identified within the D4 domain, overlapping the structure involved in CD4 dimer formation (18).

Sources of IL-16 include epithelial cells, mast cells, lymphocytes, macrophages, synovial fibroblasts, and eosinophils (14, 19-31). IL-16 mRNA is constitutively expressed in both CD4⁺ and CD8⁺ cells (28); however, transcription is induced in T lymphocytes upon exposure to antigen or mitogen (1). IL-16 may also be secreted by activated CD8⁺ cells in response to histamine or serotonin. IL-16 expression has been linked to inflammation processes in asthma, rheumatoid arthritis, systemic lupus erythematosus, colitis, atopic dermatitis, and multiple sclerosis (20-24, 30, 32-38). For example, the expression of IL-16 directly correlates with the number of infiltrating CD4⁺ T cells in asthmatic epithelium (22, 39).

The Quantikine[®] Human IL-16 Immunoassay is a 4.5 hour solid phase ELISA designed to measure human IL-16 in cell culture supernates, serum, and plasma. It contains *E. coli*-expressed recombinant human IL-16 and antibodies raised against the recombinant factor. It has been shown to accurately quantitate recombinant human IL-16. Results obtained using natural human IL-16 showed linear curves that were parallel to the standard curves obtained using the Quantikine[®] kit standards. These results indicate that this kit can be used to determine relative mass values for natural human IL-16.

PRINCIPLE OF THE ASSAY

This assay employs the quantitative sandwich enzyme immunoassay technique. A monoclonal antibody specific for human IL-16 has been pre-coated onto a microplate. Standards and samples are pipetted into the wells and any IL-16 present is bound by the immobilized antibody. After washing away any unbound substances, an enzyme-linked polyclonal antibody specific for human IL-16 is added to the wells. Following a wash to remove any unbound antibody-enzyme reagent, a substrate solution is added to the wells and color develops in proportion to the amount of IL-16 bound in the initial step. The color development is stopped and the intensity of the color is measured.

LIMITATIONS OF THE PROCEDURE

- FOR RESEARCH USE ONLY. NOT FOR USE IN DIAGNOSTIC PROCEDURES.
- The kit should not be used beyond the expiration date on the kit label.
- Do not mix or substitute reagents with those from other lots or sources.
- If samples generate values higher than the highest standard, dilute the samples with the appropriate calibrator diluent and repeat the assay.
- Any variation in diluent, operator, pipetting technique, washing technique, incubation time or temperature, and kit age can cause variation in binding.
- Variations in sample collection, processing, and storage may cause sample value differences.
- This assay is designed to eliminate interference by other factors present in biological samples. Until all factors have been tested in the Quantikine® Immunoassay, the possibility of interference cannot be excluded.

TECHNICAL HINTS

- When mixing or reconstituting protein solutions, always avoid foaming.
- To avoid cross-contamination, change pipette tips between additions of each standard level, between sample additions, and between reagent additions. Also, use separate reservoirs for each reagent.
- To ensure accurate results, proper adhesion of plate sealers during incubation steps is necessary.
- When using an automated plate washer, adding a 30 second soak period following the addition of Wash Buffer, and/or rotating the plate 180 degrees between wash steps may improve assay precision.
- Substrate Solution should remain colorless until added to the plate. Keep Substrate Solution protected from light. Substrate Solution should change from colorless to gradations of blue.
- Stop Solution should be added to the plate in the same order as the Substrate Solution. The color developed in the wells will turn from blue to yellow upon addition of the Stop Solution. Wells that are green in color indicate that the Stop Solution has not mixed thoroughly with the Substrate Solution.

MATERIALS PROVIDED & STORAGE CONDITIONS

Store the unopened kit at 2-8 °C. Do not use past kit expiration date.

PART	PART #	DESCRIPTION	STORAGE OF OPENED/ RECONSTITUTED MATERIAL
Human IL-16 Microplate	890751	96 well polystyrene microplate (12 strips of 8 wells) coated with a monoclonal antibody specific for human IL-16.	Return unused wells to the foil pouch containing the desiccant pack. Reseal along entire edge of the zip-seal. May be stored for up to 1 month at 2-8 °C.*
Human IL-16 Conjugate	890752	21 mL of a polyclonal antibody specific for human IL-16 conjugated to horseradish peroxidase with preservative.	May be stored for up to 1 month at 2-8 °C.*
Human IL-16 Standard	890753	Recombinant human IL-16 in a buffered protein base with preservative; lyophilized. <i>Refer to the vial label for reconstitution volume.</i>	
Assay Diluent RD1W	895117	11 mL of a buffered protein base with preservative.	
Calibrator Diluent RD5R	895190	21 mL of a buffered protein base with preservative. <i>For cell culture supernate samples.</i>	
Calibrator Diluent RD6-27	895339	21 mL of animal serum with preservative. <i>For serum/plasma samples.</i>	
Wash Buffer Concentrate	895003	21 mL of a 25-fold concentrated solution of buffered surfactant with preservative. <i>May turn yellow over time.</i>	
Color Reagent A	895000	12 mL of stabilized hydrogen peroxide.	
Color Reagent B	895001	12 mL of stabilized chromogen (tetramethylbenzidine).	
Stop Solution	895032	6 mL of 2 N sulfuric acid.	
Plate Sealers	N/A	Adhesive strips.	

* Provided this is within the expiration date of the kit.

OTHER SUPPLIES REQUIRED

- Microplate reader capable of measuring absorbance at 450 nm, with the correction wavelength set at 540 nm or 570 nm.
- Pipettes and pipette tips.
- Deionized or distilled water.
- Squirt bottle, manifold dispenser, or automated microplate washer.
- 500 mL graduated cylinder.
- Test tubes for dilution of standards.
- Human IL-16 Controls (optional; R&D Systems®, Catalog # QC21).

PRECAUTIONS

IL-16 is detectable in saliva and sweat. Take precautionary measures to prevent contamination of kit reagents while running this assay.

Calibrator Diluent RD6-27 contains sodium azide, which may react with lead and copper plumbing to form explosive metallic azides. Flush with large volumes of water during disposal.

The Stop Solution provided with this kit is an acid solution.

Some components in this kit contain a preservative which may cause an allergic skin reaction. Avoid breathing mist.

Color Reagent B may cause skin, eye, and respiratory irritation. Avoid breathing fumes.

Wear protective gloves, clothing, eye, and face protection. Wash hands thoroughly after handling. Refer to the MSDS on our website prior to use.

SAMPLE COLLECTION & STORAGE

The sample collection and storage conditions listed below are intended as general guidelines. Sample stability has not been evaluated.

Cell Culture Supernates - Remove particulates by centrifugation and assay immediately or aliquot and store samples at ≤ -20 °C. Avoid repeated freeze-thaw cycles.

Serum - Use a serum separator tube (SST) and allow samples to clot for 30 minutes at room temperature before centrifugation for 15 minutes at 1000 x g. Remove serum and assay immediately or aliquot and store samples at ≤ -20 °C. Avoid repeated freeze-thaw cycles.

Plasma - Collect plasma using EDTA or heparin as an anticoagulant. Centrifuge for 15 minutes at 1000 x g within 30 minutes of collection. Assay immediately or aliquot and store samples at ≤ -20 °C. Avoid repeated freeze-thaw cycles.

Note: *Citrate plasma has not been validated for use in this assay.
Hemolyzed samples are not suitable for use in this assay*

REAGENT PREPARATION

Bring all reagents to room temperature before use.

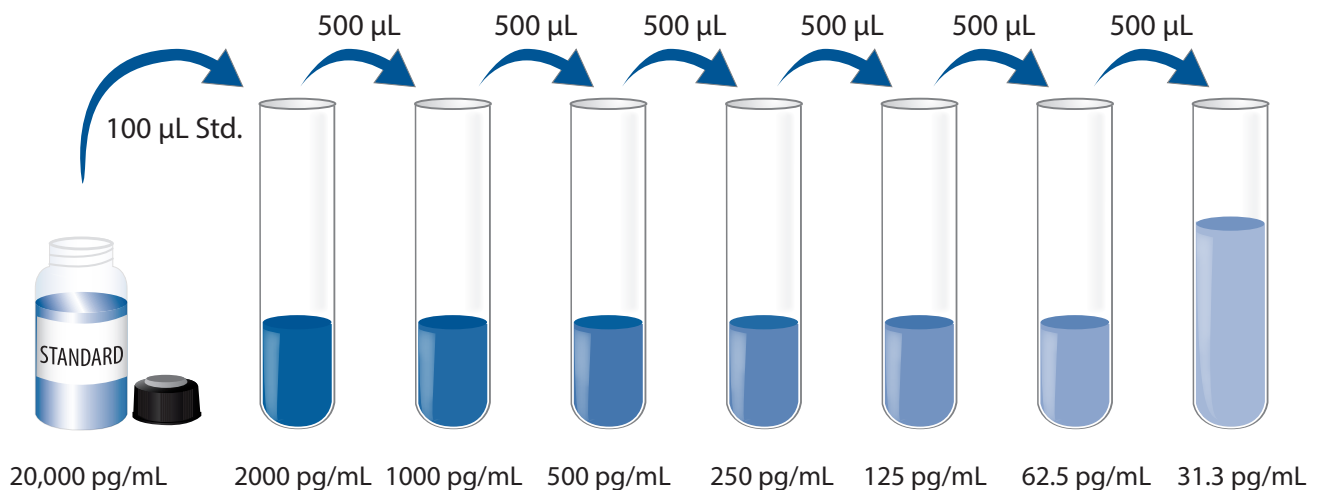
Note: *IL-16 is detectable in saliva and sweat. Take precautionary measures to prevent contamination of kit reagents while running this assay.*

Wash Buffer - If crystals have formed in the concentrate, warm to room temperature and mix gently until the crystals have completely dissolved. Add 20 mL of Wash Buffer Concentrate to deionized or distilled water to prepare 500 mL of Wash Buffer.

Substrate Solution - Color Reagents A and B should be mixed together in equal volumes within 15 minutes of use. Protect from light. 200 μ L of the resultant mixture is required per well.

Human IL-16 Standard - Refer to the vial label for reconstitution volume. Reconstitute the Human IL-16 Standard with deionized or distilled water. This reconstitution produces a stock solution of 20,000 pg/mL. Allow the standard to sit for a minimum of 15 minutes with gentle agitation prior to making dilutions.

Pipette 900 μ L of Calibrator Diluent RD5R (*for cell culture supernate samples*) or Calibrator Diluent RD6-27 (*for serum/plasma samples*) into the 2000 pg/mL tube. Pipette 500 μ L of the appropriate calibrator diluent into the remaining tubes. Use the stock solution to produce a dilution series (below). Mix each tube thoroughly before the next transfer. The 2000 pg/mL standard serves as the high standard. The appropriate calibrator diluent serves as the zero standard (0 pg/mL).



ASSAY PROCEDURE

Bring all reagents and samples to room temperature before use. It is recommended that all standards, samples, and controls be assayed in duplicate.

Note: *IL-16 is detectable in saliva and sweat. Take precautionary measures to prevent contamination of kit reagents while running this assay.*

1. Prepare all reagents and working standards as directed in the previous sections.
2. Remove excess microplate strips from the plate frame, return them to the foil pouch containing the desiccant pack, and reseal.
3. Add 100 μ L of Assay Diluent RD1W to each well.
4. Add 100 μ L of standard, control, or sample per well. Cover with the adhesive strip provided. Incubate for 2 hours at room temperature. A plate layout is provided to record standards and samples assayed.
5. Aspirate each well and wash, repeating the process three times for a total of four washes. Wash by filling each well with Wash Buffer (400 μ L) using a squirt bottle, manifold dispenser, or autowasher. Complete removal of liquid at each step is essential to good performance. After the last wash, remove any remaining Wash Buffer by aspirating or decanting. Invert the plate and blot it against clean paper towels.
6. Add 200 μ L of Human IL-16 Conjugate to each well. Cover with a new adhesive strip. Incubate for 2 hours at room temperature.
7. Repeat the aspiration/wash as in step 5.
8. Add 200 μ L of Substrate Solution to each well. Incubate for 30 minutes at room temperature. **Protect from light.**
9. Add 50 μ L of Stop Solution to each well. The color in the wells should change from blue to yellow. If the color in the well is green or if the color change does not appear uniform, gently tap the plate to ensure thorough mixing.
10. Determine the optical density of each well within 30 minutes, using a microplate reader set to 450 nm. If wavelength correction is available, set to 540 nm or 570 nm. If wavelength correction is not available, subtract readings at 540 nm or 570 nm from the readings at 450 nm. This subtraction will correct for optical imperfections in the plate. Readings made directly at 450 nm without correction may be higher and less accurate.

CALCULATION OF RESULTS

Average the duplicate readings for each standard, control, and sample and subtract the average zero standard optical density (O.D.).

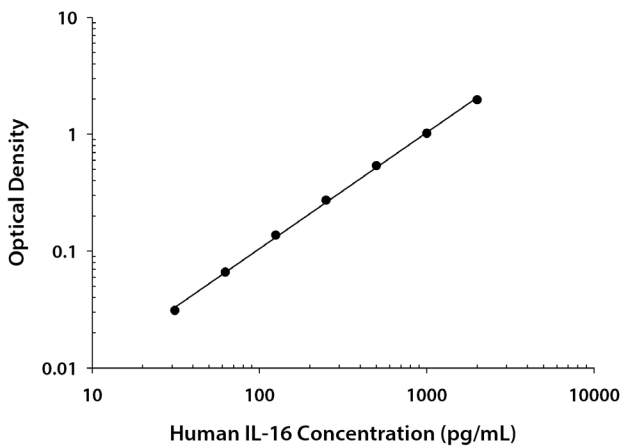
Create a standard curve by reducing the data using computer software capable of generating a log/log curve-fit. As an alternative, construct a standard curve by plotting the mean absorbance for each standard on the y-axis against the concentration on the x-axis and draw a best fit curve through the points on a log/log graph. The data may be linearized by plotting the log of the human IL-16 concentrations versus the log of the O.D. on a linear scale, and the best fit line can be determined by regression analysis.

If samples have been diluted, the concentration read from the standard curve must be multiplied by the dilution factor.

TYPICAL DATA

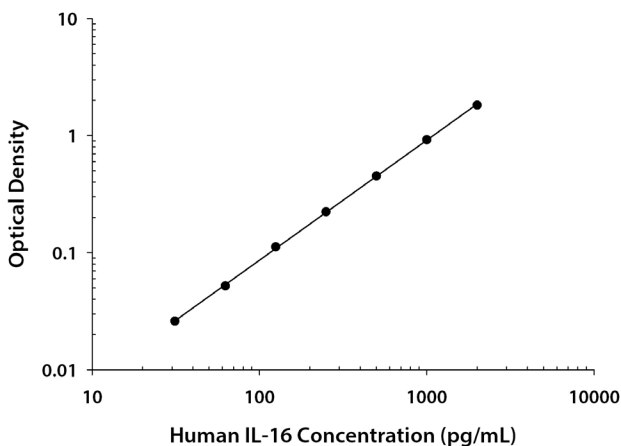
These standard curves are provided for demonstration only. A standard curve should be generated for each set of samples assayed.

CELL CULTURE SUPERNATE ASSAY



(pg/mL)	O.D.	Average	Corrected
0	0.075	0.075	—
	0.075		
31.3	0.106	0.106	0.031
	0.106		
62.5	0.142	0.141	0.066
	0.140		
125	0.210	0.212	0.137
	0.215		
250	0.345	0.347	0.272
	0.349		
500	0.598	0.613	0.538
	0.628		
1000	1.078	1.092	1.017
	1.107		
2000	2.016	2.045	1.970
	2.074		

SERUM/PLASMA ASSAY



(pg/mL)	O.D.	Average	Corrected
0	0.068	0.068	—
	0.067		
31.3	0.093	0.093	0.025
	0.093		
62.5	0.123	0.120	0.052
	0.118		
125	0.183	0.180	0.112
	0.178		
250	0.297	0.290	0.222
	0.283		
500	0.544	0.520	0.452
	0.495		
1000	0.971	0.987	0.919
	1.003		
2000	1.931	1.886	1.818
	1.842		

PRECISION

Intra-assay Precision (Precision within an assay)

Three samples of known concentration were tested twenty times on one plate to assess intra-assay precision.

Inter-assay Precision (Precision between assays)

Three samples of known concentration were tested in forty separate assays to assess inter-assay precision. Assays were performed by at least three technicians using two lots of components.

CELL CULTURE SUPERNATE ASSAY

Sample	Intra-Assay Precision			Inter-Assay Precision		
	1	2	3	1	2	3
n	20	20	20	40	40	40
Mean (pg/mL)	205	615	1066	199	588	1135
Standard deviation	11.4	20.6	32.5	10.7	34.3	63.8
CV (%)	5.6	3.3	3.0	5.4	5.8	5.6

SERUM/PLASMA ASSAY

Sample	Intra-Assay Precision			Inter-Assay Precision		
	1	2	3	1	2	3
n	20	20	20	40	40	40
Mean (pg/mL)	241	747	1456	230	672	1315
Standard deviation	12.3	38.4	59.9	27.5	77.1	156
CV (%)	5.1	5.1	4.1	12.0	11.5	11.9

RECOVERY

The recovery of human IL-16 spiked to levels throughout the range of the assay in various matrices was evaluated.

Sample Type	Average % Recovery	Range
Cell culture media (n=4)	100	94-106%
Serum (n=6)	103	94-113%
EDTA plasma (n=6)	105	96-117%
Heparin plasma (n=6)	102	86-112%

SENSITIVITY

Forty-three assays were evaluated and the minimum detectable dose (MDD) of human IL-16 ranged from 2.7-13.4 pg/mL. The mean MDD was 6.2 pg/mL.

The MDD was determined by adding two standard deviations to the mean O.D. value of twenty zero standard replicates and calculating the corresponding concentration.

LINEARITY

To assess linearity of the assay, samples containing and/or spiked with high concentrations of human IL-16 were diluted with the appropriate calibrator diluent to produce samples with values within the dynamic range of the assay.

		Cell culture media (n=7)	Serum (n=7)	EDTA plasma (n=7)	Heparin plasma (n=7)
1:2	Average % of Expected	102	102	102	100
	Range (%)	98-105	100-104	98-107	99-106
1:4	Average % of Expected	106	102	102	104
	Range (%)	100-113	98-110	95-106	98-115
1:8	Average % of Expected	100	100	101	100
	Range (%)	92-110	96-109	99-105	94-114
1:16	Average % of Expected	95	97	98	98
	Range (%)	87-107	92-111	92-102	91-109

CALIBRATION

This immunoassay is calibrated against highly purified *E. coli*-expressed recombinant human IL-16 produced at R&D Systems®.

SAMPLE VALUES

Serum/Plasma - Samples from apparently healthy volunteers were evaluated for the presence of human IL-16 in this assay. No medical histories were available for the donors used in this study.

Sample Type	Mean (pg/mL)	Range (pg/mL)	Standard Deviation (pg/mL)
Serum (n=59)	171	77-280	50
EDTA plasma (n=35)	204	71-480	79
Heparin plasma (n=35)	122	62-206	33

Note: One serum, EDTA, and heparin plasma sample measured 3817, 3473, and 3938 pg/mL respectively and were not included in the range.

Cell Culture Supernates - Human peripheral blood mononuclear cells (5×10^6 cells/mL) were cultured in RPMI supplemented with 5% fetal bovine serum, 50 μ M β -mercaptoethanol, 2 mM L-glutamine, 100 U/mL penicillin, and 100 μ g/mL streptomycin sulfate. The cells were cultured unstimulated or stimulated with 10 μ g/mL PHA. Aliquots of the cell culture supernate were removed on days 1 and 5 and assayed for levels of human IL-16.

Condition	Day 1 (pg/mL)	Day 5 (pg/mL)
Unstimulated	143	638
Stimulated	482	1962

SPECIFICITY

This assay recognizes natural and recombinant human IL-16.

The factors listed below were prepared at 50 ng/mL in calibrator diluent and assayed for cross-reactivity. Preparations of the following factors prepared at 50 ng/mL in a mid-range recombinant human IL-16 standard were assayed for interference. No significant cross-reactivity or interference was observed.

Recombinant human:

ANG	IL-5 R β
AR	IL-6
CD4	IL-6 R
CD8	IL-7
CNTF	IL-8
β -ECGF	IL-9
EGF	IL-10
Epo	IL-11
FGF acidic	IL-12
FGF basic	IL-13
FGF-4	KGF/FGF-7
FGF-5	LAP (TGF- β 1)
FGF-6	LIF
G-CSF	M-CSF
GM-CSF	MCP-1
gp130	MIP-1 α
GRO α	MIP-1 β
GRO β	β -NGF
GRO γ	OSM
HB-EGF	PD-ECGF
HGF	PDGF-AA
IFN- γ	PDGF-AB
IGF-I	PDGF-BB
IGF-II	PTN
IL-1 α	RANTES
IL-1 β	SCF
IL-1ra	SLPI
IL-1 RI	TGF- α
IL-1 RII	TGF- β 1
IL-2	TGF- β 2
IL-2 Ra	TGF- β 3
IL-3	TGF- β RII
IL-3 Ra	TNF- α
IL-4	TNF- β
IL-4 R	TNF RI
IL-5	TNF RII
IL-5 Ra	VEGF

Recombinant mouse:

IL-1 α
IL-1 β
IL-3
IL-4
IL-5
IL-6
IL-7
IL-9
IL-10
IL-13
GM-CSF
LIF
MIP-1 α
MIP-1 β
SCF
TNF- α

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PLATE LAYOUT

Use this plate layout to record standards and samples assayed.

12									
11									
10									
9									
8									
7									
6									
5									
4									
3									
2									
1									
	A	B	C	D	E	F	G	H	

NOTES

NOTES

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