

Spotlight On:

S100P (16/f5)

Pancreatic ductal adenocarcinoma is the fourth leading cause of cancer deaths in the United States. Until recently, there has been a noticeable lack of pancreatic ductal adenocarcinoma (PDA) markers for IHC, even though PDA makes up over 80% of all the pancreatic cancers. Cell Marque is pleased to announce the release of an *in vitro* diagnostic S100P (placental S100) to aid in differentiating malignant pancreas (PDA and IPMN) from benign pancreas. Recently Cell Marque released IVD IgG4 for sclerosing pancreatitis, and S100P is the next in line of novel pancreatic markers that Cell Marque has developed. This malignant versus benign application in pancreas is not only novel for an IVD antibody, but also is of particular value in cytopathology. In addition, S100P also functions as a transitional carcinoma marker, with a much higher sensitivity than uroplakin III and thrombomodulin.

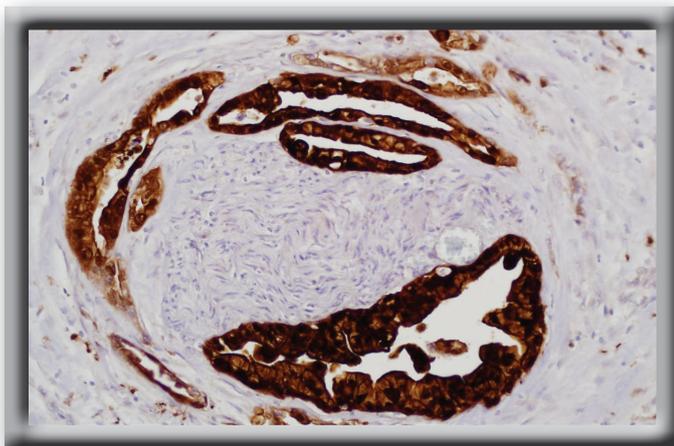
Ordering Information

0.1 ml concentrated.....	376M-94
0.5 ml concentrated.....	376M-95
1 ml concentrated	376M-96
1 ml prediluted	376M-97
7 ml prediluted	376M-98
5 Positive Control Slides.....	376S

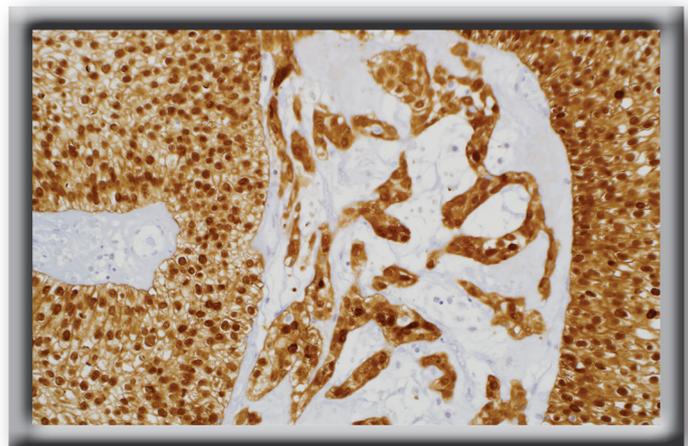
Cell Marque's S100P (*not to be confused with melanoma marker S100*)

features:

- Anti-S100P with nuclear or nuclear/cytoplasmic immunoreactivity can be seen in essentially **100% of pancreatic ductal adenocarcinomas** in pancreatic resection specimens (internal testing results) and fine needle aspiration biopsy specimens (results from published literature).
- S100P is clearly expressed in **intraductal papillary mucinous neoplasms (100%)**, compared to no expression in adjacent ducts.
- Anti-S100P displays no staining in the benign pancreatic ducts and acinar glands in tissues tested.
- Anti-S100P stained 78% of 300 urothelial carcinomas while only 2% of 256 prostatic adenocarcinomas and none of 137 renal cell carcinomas stained.
<http://www.ncbi.nlm.nih.gov/pubmed/17460449>
- S100P is one of the most recent markers for urothelial carcinoma and is seen in 71% to 96% of urothelial carcinomas, with the lower number (still very significant at 71%) for the higher-grade tumors.
http://findarticles.com/p/articles/mi_qa3725/is_201101/ai_n56827828/pg_6/



Anti-S100P antibody is strongly immunoreactive in nuclei and cytoplasm of pancreatic ductal adenocarcinoma. Note that perineural invasion by the carcinoma is present.



S100P antibody strongly stains invasive urothelial carcinoma as well as in situ carcinoma.