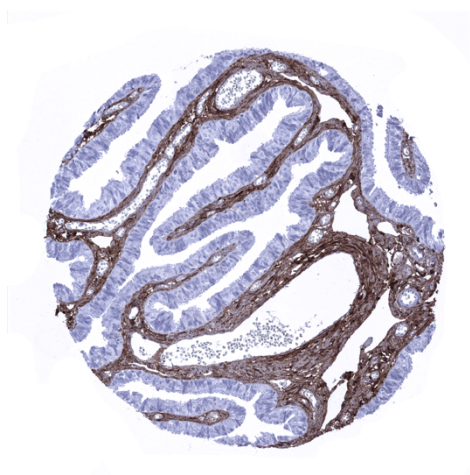


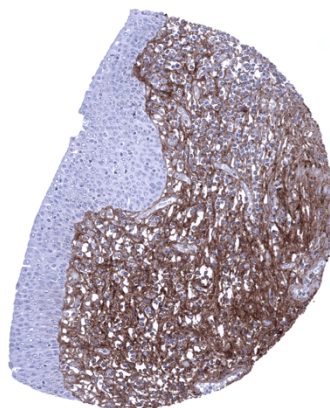
Anti- Decorin Antibody MSVA-537R / Recombinant Rabbit monoclonal

Human SwissProt	P07585
Human Gene Symbol	DCN
Synonyms	Bone proteoglycan II; CSCD; Dermatan sulphate proteoglycans II (DSPG2); PG40; PGII; PGS2; Proteoglycan core protein; SLRR1B; Small leucine rich protein 1B
Specificity	Decorin
Immunogen	Recombinant human decorin fragment
Isotype	Rabbit / IgG
Species Reactivity	Human

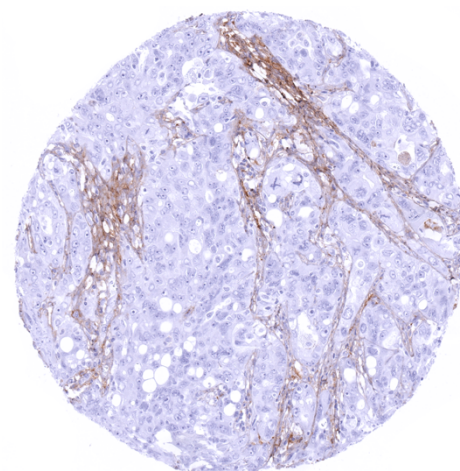
Localization	Secreted
Storage & Stability	Antibody with azide – store at 2 to 8 C. Antibody without azide – store at -20 to -80 C. Antibody is stable for 24 months. Non-hazardous. No MSD required.
Supplied As	200ug/ml of Ab Purified from Bioreactor Concentrate by Protein A/G. Prepared in 10mM PBS with 0.05% BSA & 0.05% azide. Also available without BSA
Positive Control	Fallopian tube: A strong staining should be seen in the stroma while epithelial cells remain negative.
Negative Control	Fallopian tube: Epithelial cells should not show any staining.



Strong decorin immunostaining in the stroma while staining is completely lacking in epithelial cells of the fallopian tube.



Strong decorin staining of the stroma while urothelium remains unstained in the urinary bladder.



Serous high-grade carcinoma of the ovary showing decorin staining of the stroma.

Biology

Decorin, a proteoglycan coded by the DCN gene on chromosome 12q21.33, is a member of the small leucine-rich proteoglycan (SLRP) family and represents a significant molecule of the extracellular matrix. It is mainly expressed by fibroblasts and myofibroblasts. Decorin is closely related to biglycan, another component of connective tissue involved in matrix assembly. Decorin appears to influence fibrillogenesis but also interacts with multiple signaling proteins such as fibronectin, thrombospondin, the complement component C1q, and transforming growth factor-beta (TGF-beta) as well as with multiple receptor tyrosine kinases such as epidermal growth factor receptor (EGFR), Met, and VEGFR. Through these interactions decorin exerts a multitude of oncosuppressive functions including growth inhibition, tumor cell mitophagy, and angiostasis. Decorin is thus considered a possible therapeutic target for solid malignancies. In normal tissues, decorin immunostaining is seen in the stroma of most normal tissues although its quantity is variable. Intracellular decorin immunostaining occurs in decidua cells, heart muscle and (rarely) in epithelial cells, potentially in case of a focal tissue damage. Squamous epithelial cells - mainly in the granular layer - can show a weak to moderate cytoplasmic staining. A decorin immunostaining of variable intensity can be seen in the stroma of cancers from various different tumor entities. More rarely, decorin expression occurs in tumor cells. It has been suggested that a low level of decorin staining in the tumor stroma may be linked to unfavorable prognosis.

Potential Research Applications

- The clinical significance of decorin interactions is not clarified yet.
- The prognostic impact of decorin immunostaining of cancer cells and tumor stroma is unclear.

Protocol Suggestions

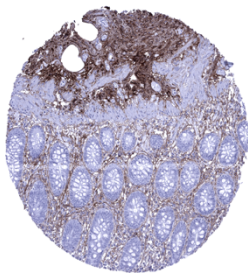
Dilution: 1:450. pH 7,8 is optimal. Freshly cut sections should be used (more than 10 days between cutting and staining deteriorates staining intensity for most antibodies in IHC).

Limitations

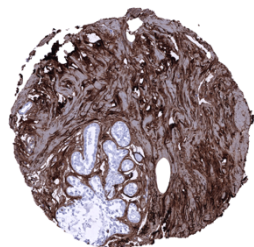
This antibody is available for **research use only** and is not approved for use in diagnostics.

Warranty

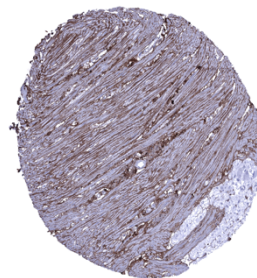
There are no warranties, expressed or implied, which extend beyond this description. MSVA is not liable for any personal injury or economic loss resulting from this product.



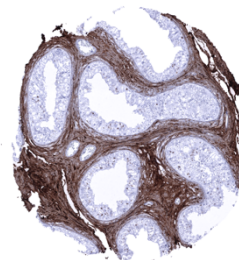
Appendix, mucosa



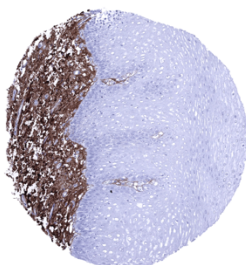
Breast - Strong decorin staining in the stroma but the epithelial cells are not stained



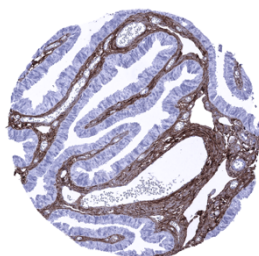
Colon descendens, muscular wall - Intense decorin staining of the muscular wall while a ganglion remains decorin negative



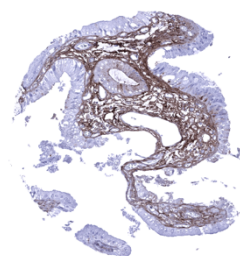
Epididymis



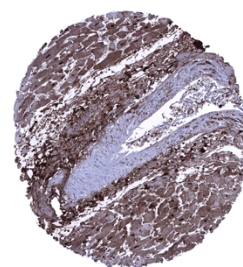
Esophagus, squamous epithelium



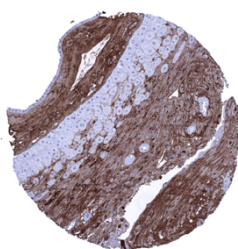
Fallopian tube, mucosa - Strong decorin immunostaining in the stroma while staining is completely lacking in epithelial cells



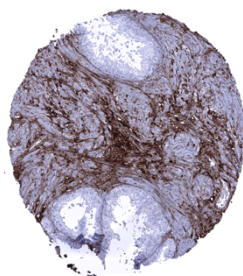
Gallbladder, epithelium - Weak to moderate decorin immunostaining in one gland of this sample. Decorin staining is strong in the stroma



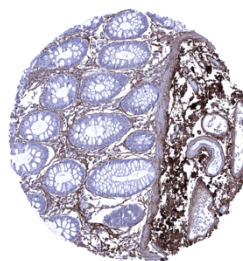
Heart muscle - Strong decorin immunostaining of heart muscle cells in this sample



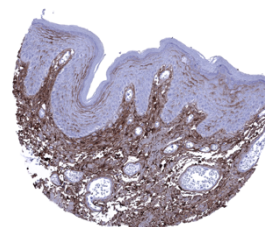
Placenta, mature, amnion and chorion - Strong decorin staining of stroma and possibly decidua cells but amnion and chorion cells are unstained



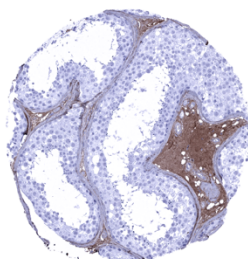
Prostate - Strong decorin staining in the stroma but epithelial cells are unstained



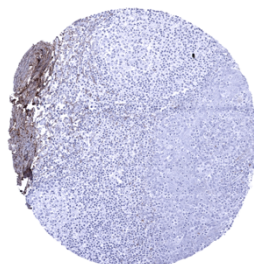
Rectum, mucosa



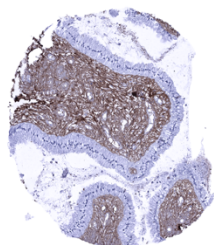
Skin - A weak to moderate cytoplasmic decorin staining is seen in the granular layer of squamous epithelium of the skin. Decorin staining is strong in the dermis



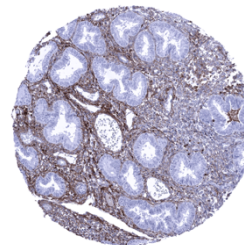
Testis



Tonsil



Uterus, endocervix - Significant cytoplasmic decorin staining in decidua cells and very intense staining of the intercellular space. Epithelial cells remain unstained



Uterus, endometrium (proliferation)