

**Rabbit Anti-Myeloperoxidase (MPO) Polyclonal: RC0291, RC0291RTU7**

**Intended Use:** For Research Use Only

**Description:** Myeloperoxidase (MPO), a heme protein, is a major component of azurophilic granules of neutrophil granulocytes (NGs). Optimal oxygen-dependent microbicidal activity depends on MPO as the critical enzyme for the generation of hypochlorous acid and other toxic oxygen products, which are proposed to contribute to tissue damage during inflammation. MPO is a marker for myeloid cells. It may also be weakly expressed in cells of monocytic origin. It is useful for differentiating acute myelogenous leukemia from acute lymphoblastic leukemia, In addition, MPO is thought to be involved in the pathology Alzheimer's disease.

**Specifications**

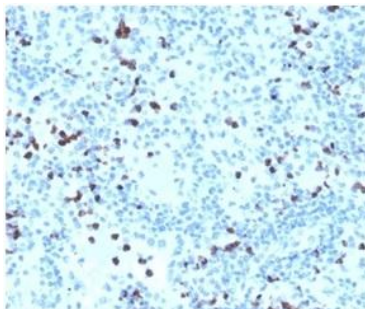
Clone: Polyclonal  
Source: Rabbit  
Reactivity: Human  
Immunogen: Synthetic peptide aa150-250 of Myeloperoxidase  
Isotype: IgG  
Localization: Cytoplasm  
Formulation: Purified antibody in PBS pH7.4, containing BSA and ≤ 0.09% sodium azide (NaN<sub>3</sub>)  
Storage: Store at 2°- 8°C  
Applications: IHC  
Package:

Description	Catalog No.	Size
Myeloperoxidase (MPO) Concentrated	RC0291	1 ml
Myeloperoxidase (MPO) Prediluted	RC0291RTU7	7 ml

**IHC Procedure\***

Positive Control Tissue: Spleen, tonsil  
Concentrated Dilution: 25-200  
Pretreatment: Tris EDTA pH9.0, 15 minutes using Pressure Cooker, or 30-60 minutes using water bath at 95°-99°C  
Incubation Time and Temp: 30-60 minutes @ RT  
Detection: Refer to the detection system manual

\* Result should be confirmed by an established diagnostic procedure.



FFPE human spleen stained with anti-MPO using DAB

**References:**

1. Myeloperoxidase Enhances Etoposide and Mitoxantrone-Mediated DNA Damage: A Target for Myeloprotection in Cancer Chemotherapy. Atwal M, et al. Mol Pharmacol 91:49-57, 2017.
2. Pathogenesis of ELANE-mutant severe neutropenia revealed by induced pluripotent stem cells. Nayak RC, et al. J Clin Invest 125:3103-16 2015.
3. Pre-treatment neutrophil-to-lymphocyte ratio is associated with neutrophil and T-cell infiltration and predicts clinical outcome in patients with glioblastoma. Han S, et al. BMC Cancer 15:617, 2015.