

Mouse Anti-Cytokeratin 6 [LHK6]: MC0750, MC0750RTU7

Intended Use: For Research Use Only

Description: The human type II Cytokeratin 6 (CK6; 56 kDa) is well known for its strong induction in stratified epithelia that feature an enhanced cell proliferation rate or abnormal differentiation during wound healing, in several diseases (e.g. psoriasis, actinic keratosis) and in cancer. CK6 is expressed on stratified epithelia including oral mucosa, esophagus, basal layer of epidermis, the outer root sheath of hair follicles, and in glandular epithelia. CK6 is a marker of hyperproliferative and activated keratinocytes found in psoriasis. CK6 paired with CK5 is useful to differentiate mesothelioma (positive) from lung carcinoma (negative) or metastatic carcinoma (negative) in the pleura. CK5/6 has also been used to distinguish usual ductal hyperplasia of the breast (strong staining) from solid papillary DCIS (negative).

Specifications:

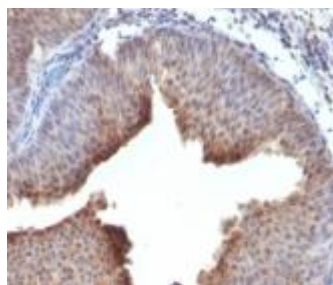
Clone: LHK6
Source: Mouse
Isotype: IgG2a/k
Reactivity: Human, mouse
Immunogen: Synthetic peptide of 11 amino acids (GSSTIKYTTTS) from human CK6 C-terminus
Localization: Cytoplasm
Formulation: Antibody in PBS pH7.4, containing BSA and $\leq 0.09\%$ sodium azide (NaN₃)
Storage: Store at 2°- 8°C
Applications: IHC, Flow Cyt., IF
Package:

Description	Catalog No.	Size
Cytokeratin 6 Concentrated	MC0750	1 ml
Cytokeratin 6 Prediluted	MC0750RTU7	7 ml

IHC Procedure*:

Positive Control Tissue: Skin, SqCC
Concentrated Dilution: 100-500
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 bladder carcinoma stained with anti-CK6 using DAB

References:

1. Histogenesis of keratoacanthoma: histochemical and immunohistochemical study. Wagner VP, et al. Oral Surg Oral Med Oral Pathol Oral Radiol 119:310-7, 2015.
2. Pig dorsum model for examining impaired wound healing at the skin-implant interface of percutaneous devices. Holt BM, et al. J Mater Sci Mater Med 24:2181-93, 2013.

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Rev. A