

# The unknown primary tumour: IHC Classification, antibody selection, protocol optimization, controls and EQA (part II)

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# Secondary panels for **carcinoma** identification/subclassification

- Cell adhesion molecules
  - EpCAM
  - Claudin 4
- **Cytokeratin subtypes**
- Oncofetal proteins
- Transcription factors
- Neuroendocrine proteins
- Hormone receptors
- Secretory proteins
- ...

- "GI-markers"
- "Fem.gen.tract markers"
- "Liver cell markers"
- Neuroendocrine cell markers
- "Breast markers"
- "Lung markers"
- "Urinary tract markers"
- Prostate markers
- Squamous cell markers
- "Mesothelial markers"
- "Adrenal cortical markers"
- Germinal cell markers

General epithelial markers:

Epithelial cell adhesion molecule (Ep-CAM)

Claudin 4

# Ep-CAM

“Epithelial specific antigen”: Glycoproteins located on the cell membrane surface (preferentially basolaterally) and in the cytoplasm of **virtually all epithelial cells** with the exception of

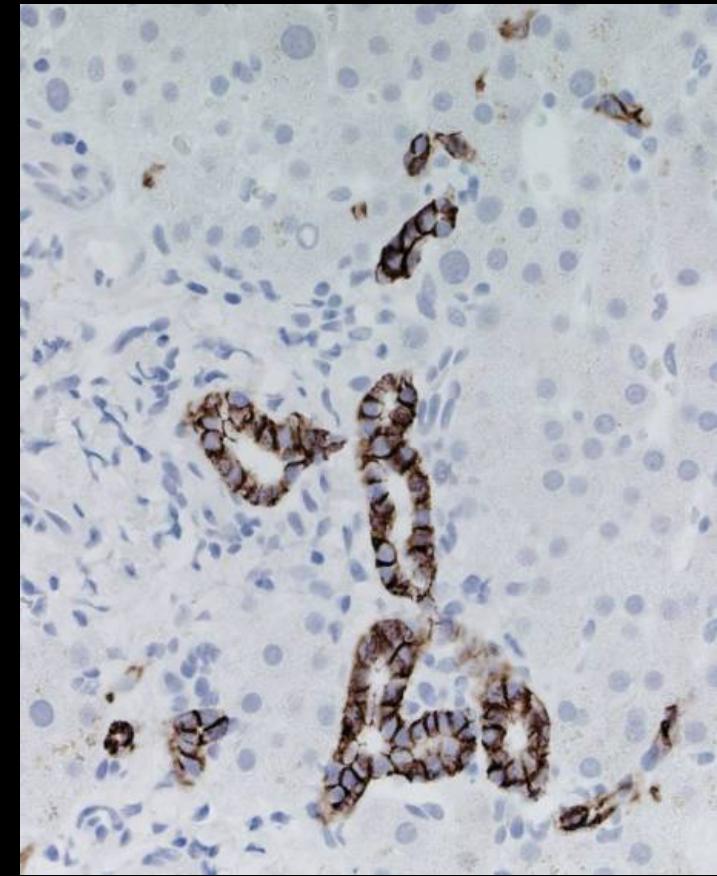
- squamous epithelia (mucosae and reactive focal pos.)
- hepatocytes (pos. in reactive)
- renal proximal tubular cells
- gastric parietal cells
- some endocrine cells

Also negative

- mesothelial cells (pos. in reactive)
- mesenchymal cells
- germ cells
- neural crest cells

(except. olfactory neurons)

Liver



# Ep-CAM

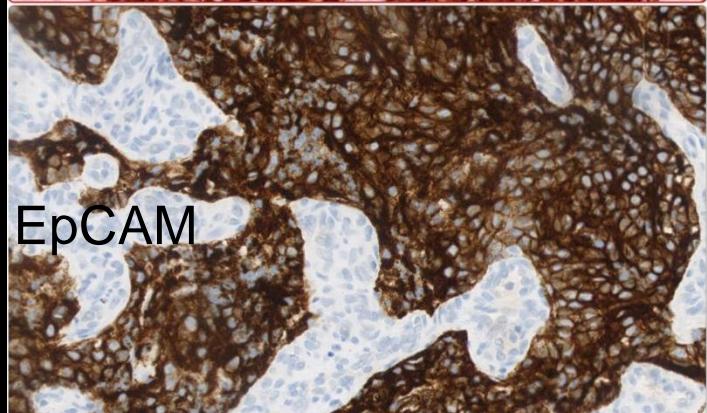
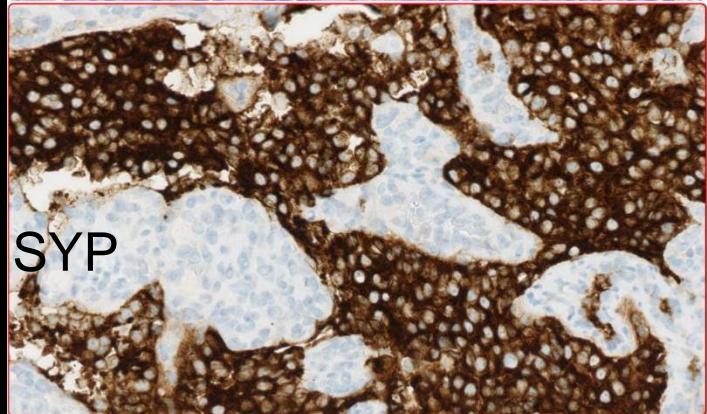
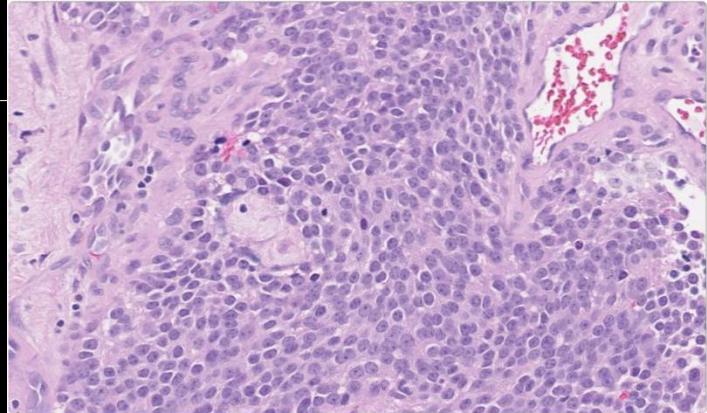
Often upgraded in malignancies

+(-)

- Adenocarcinomas (of most types)
- Neuroendocrine neoplasms

+/-

- Germinal cell tumours
  - (seminoma weak)
- Synovial sarcoma
- Brenner tumour
- Desmoplastic small cell tumour
- Olfactory neuroblastoma



Olfactory neuroblastoma

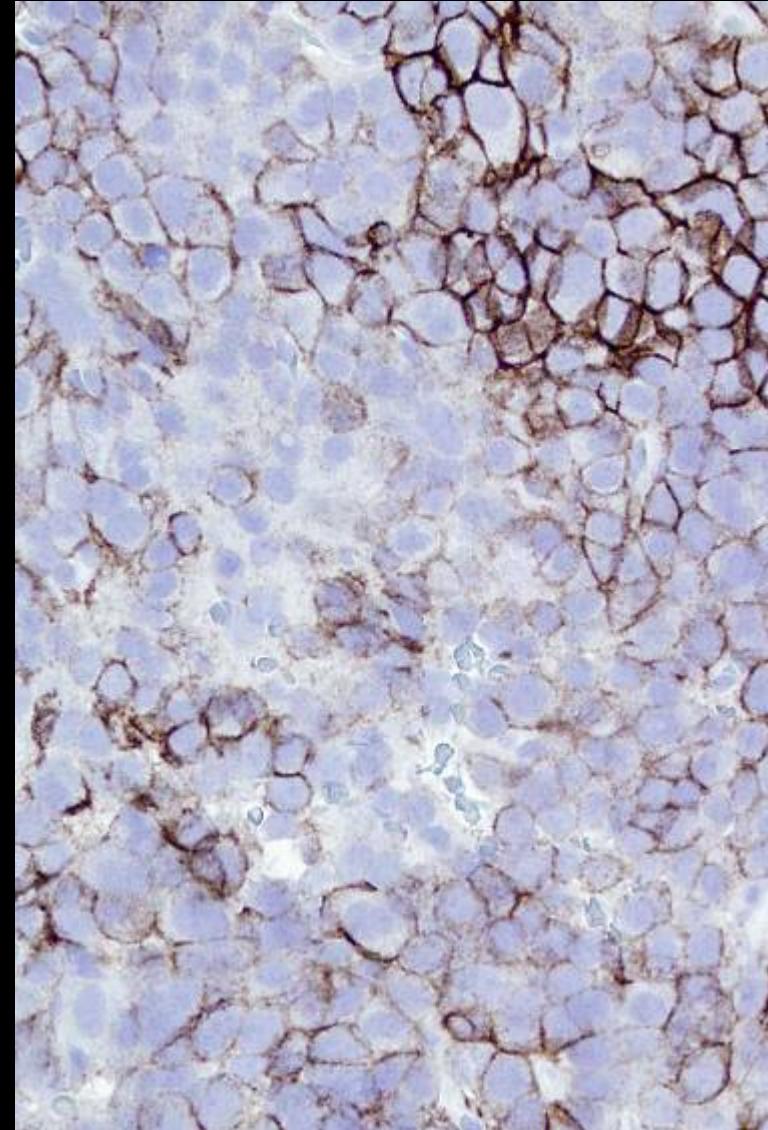
# Ep-CAM

-/+

- Lobular breast carcinoma
- Hepatocellular carcinoma
- Squamous cell carcinoma
- Renal cell carcinoma
- Malignant mesothelioma

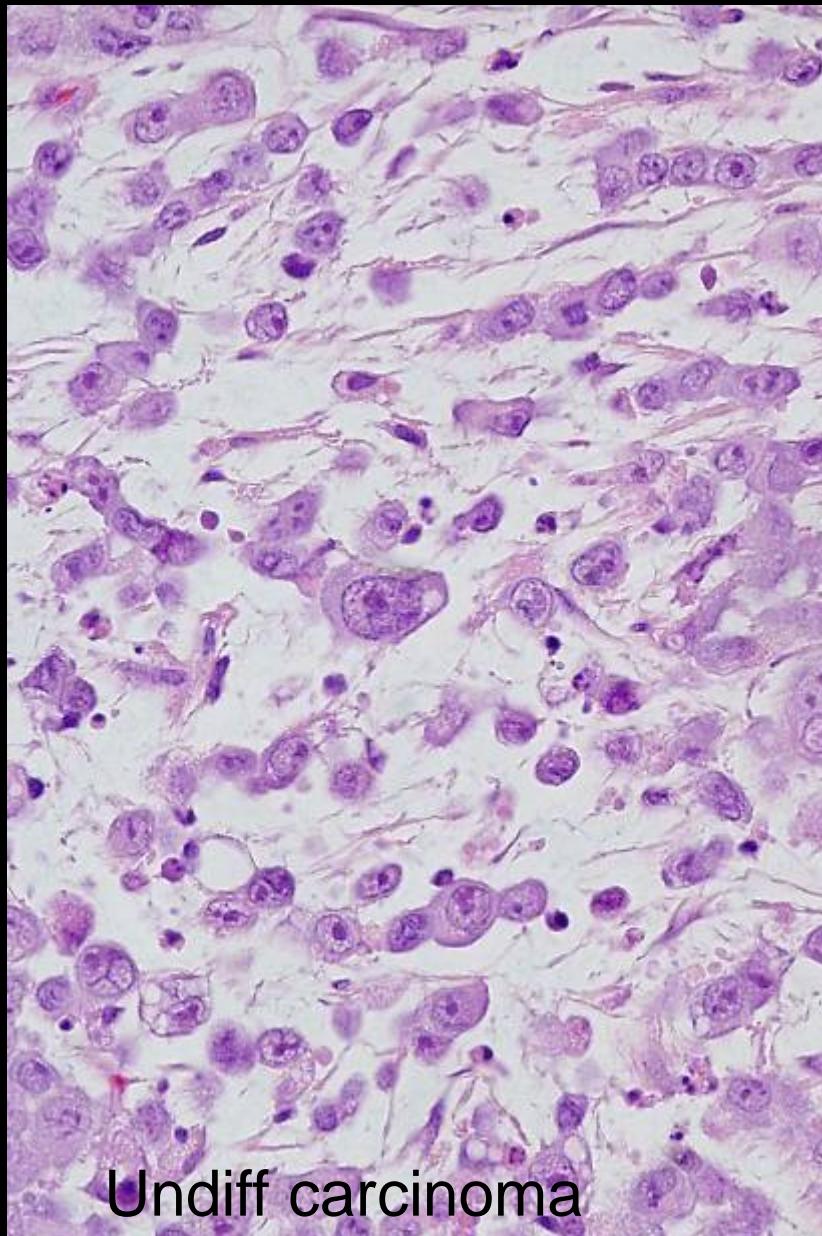
-

- Adrenal cortical carcinoma
- Choroid plexus carcinoma
- Sarcomas (apart from synovial)
- Lymphomas

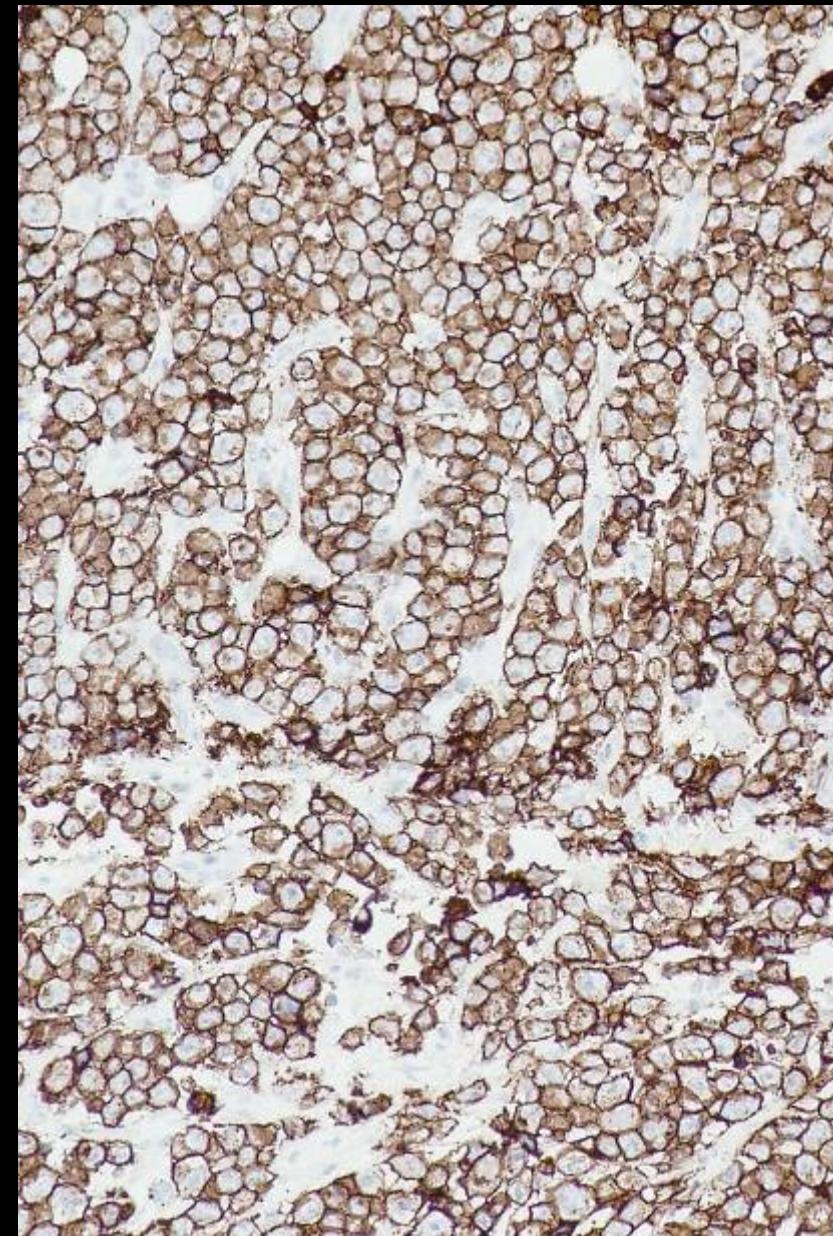


HCC

# Ep-CAM



Undiff carcinoma

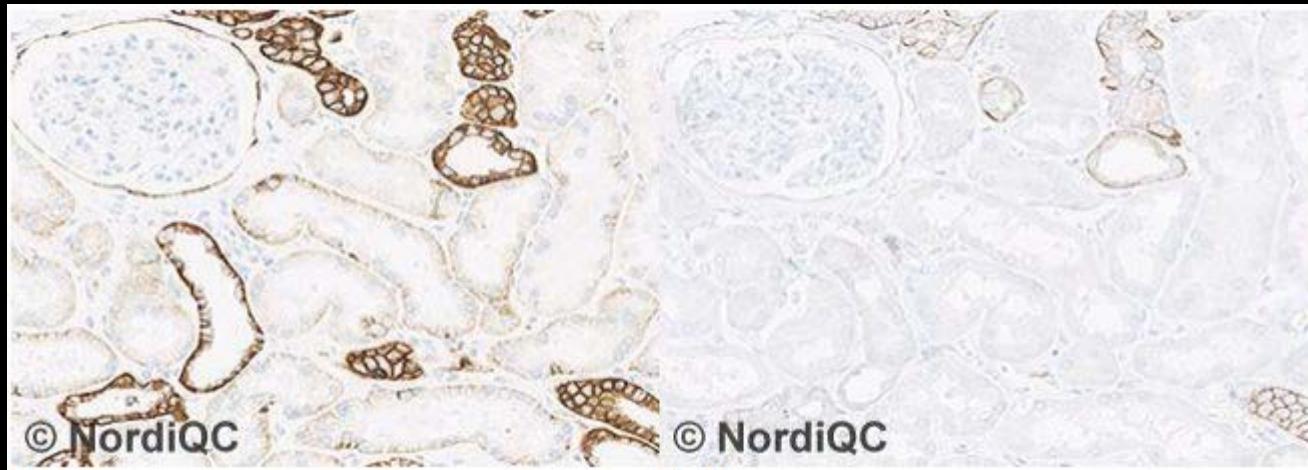


# Ep-CAM run 45 2015

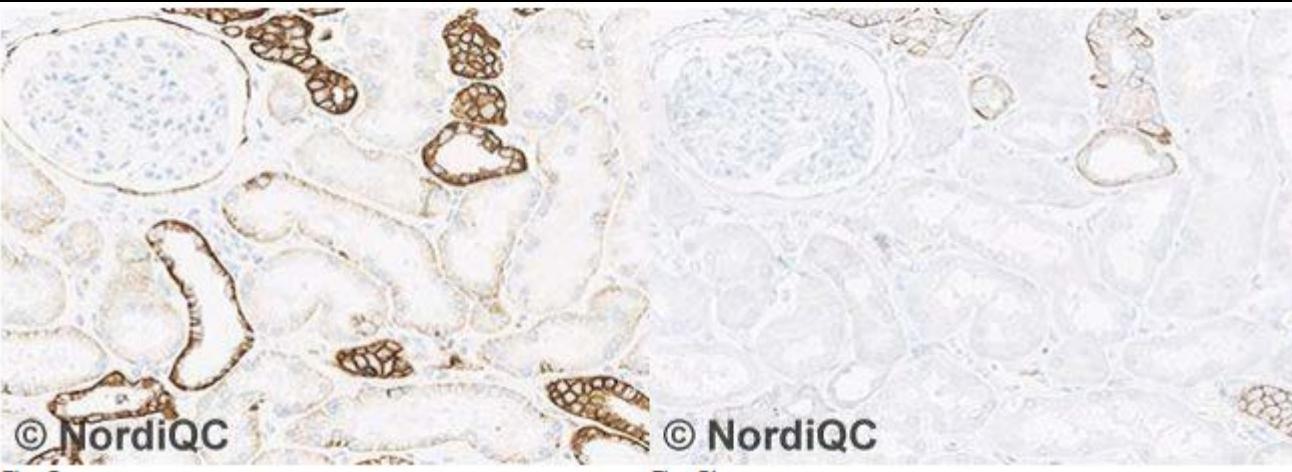
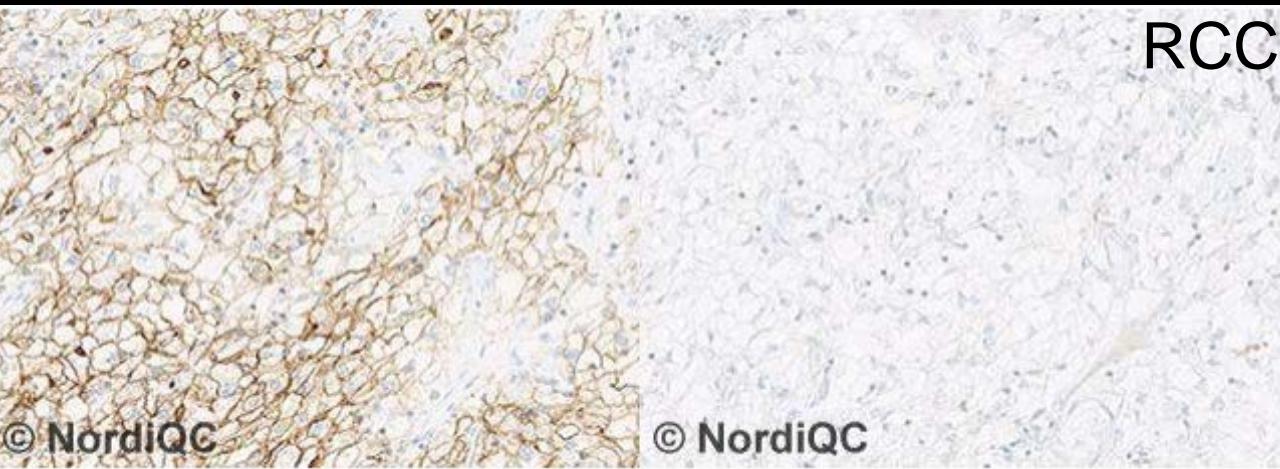
Table 1. Antibodies and assessment marks for Ep-CAM, run 45

Concentrated antibodies	n	Vendor	Optimal	Good	Borderline	Poor	Suff. <sup>1</sup>	Suff. OPS <sup>2</sup>
mAb clone <b>Ber-Ep4</b>	77	Dako						
	2	Diagnostic BioSystems	9	16	38	18	31%	89%
	2	Thermo/NeoMarkers						
mAb clone <b>MOC-31</b>	19	Dako						
	3	Leica/Novocastra	9	6	6	3	63%	100%
	1	Cell Marque						
	1	Monosan						
	2	NordiQC						
Ready-To-Use antibodies								
mAb clone <b>Ber-Ep4 760-4383</b>	36	Ventana/Cell Marque	0	6	21	9	17%	-
mAb clone <b>Ber-Ep4 IR/IS637</b>	19	Dako	4	12	1	2	84%	100%
mAb clone <b>Ber-Ep4 GA637</b>	9	Dako	7	1	1	0	89%	100%

DAKO  
TRS Low  
3-step  
polymer



Ventana  
CC1  
2-step  
multimer



Diva2  
pH6.2  
Thermo

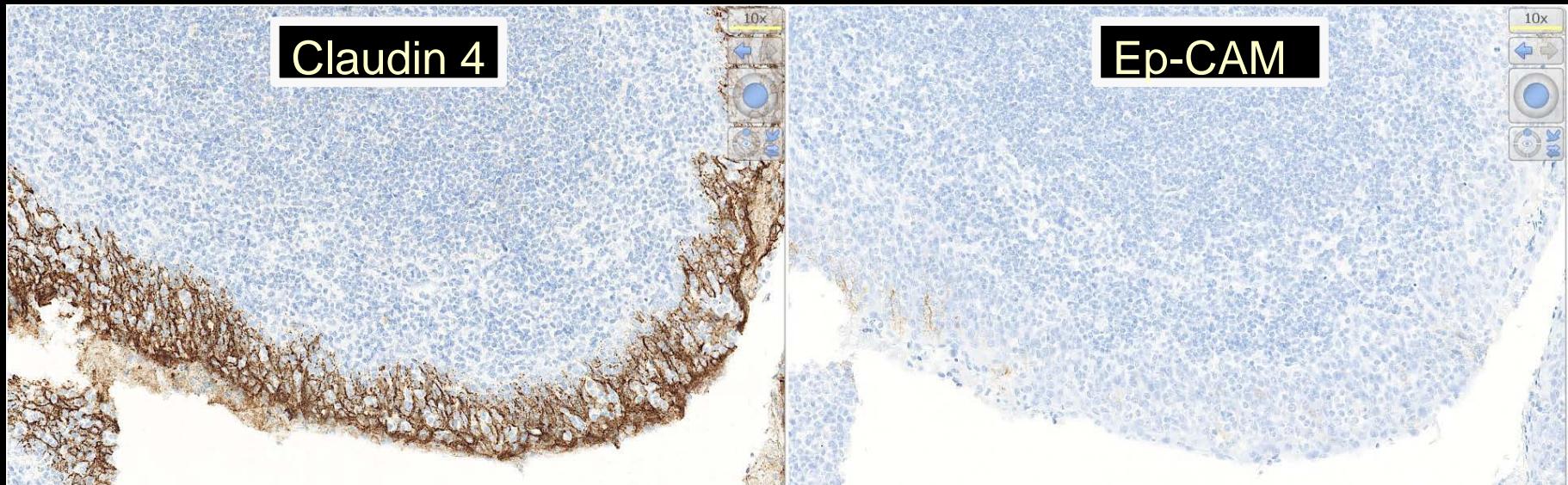
RCC

DAKO  
TRS Low  
3-step  
polymer

Ventana  
CC1  
2-step  
multimer

# Claudin 4

Integral membrane protein, which belongs to the claudin family. The protein is a component of **tight junction** strands and may play a role in internal organ development and function.



Tonsil

# Claudin 4 vs. Ep-CAM

Mesothelioma

Claudin 4

Ep-CAM

20x



# Cytokeratins – a multigene family

- Highly complex family of intermediate filaments
- > 50 distinct types (excl. trichocytic keratins)
- Types CK1-20 diagnostically most relevant:

Class I (type A - Acidic):

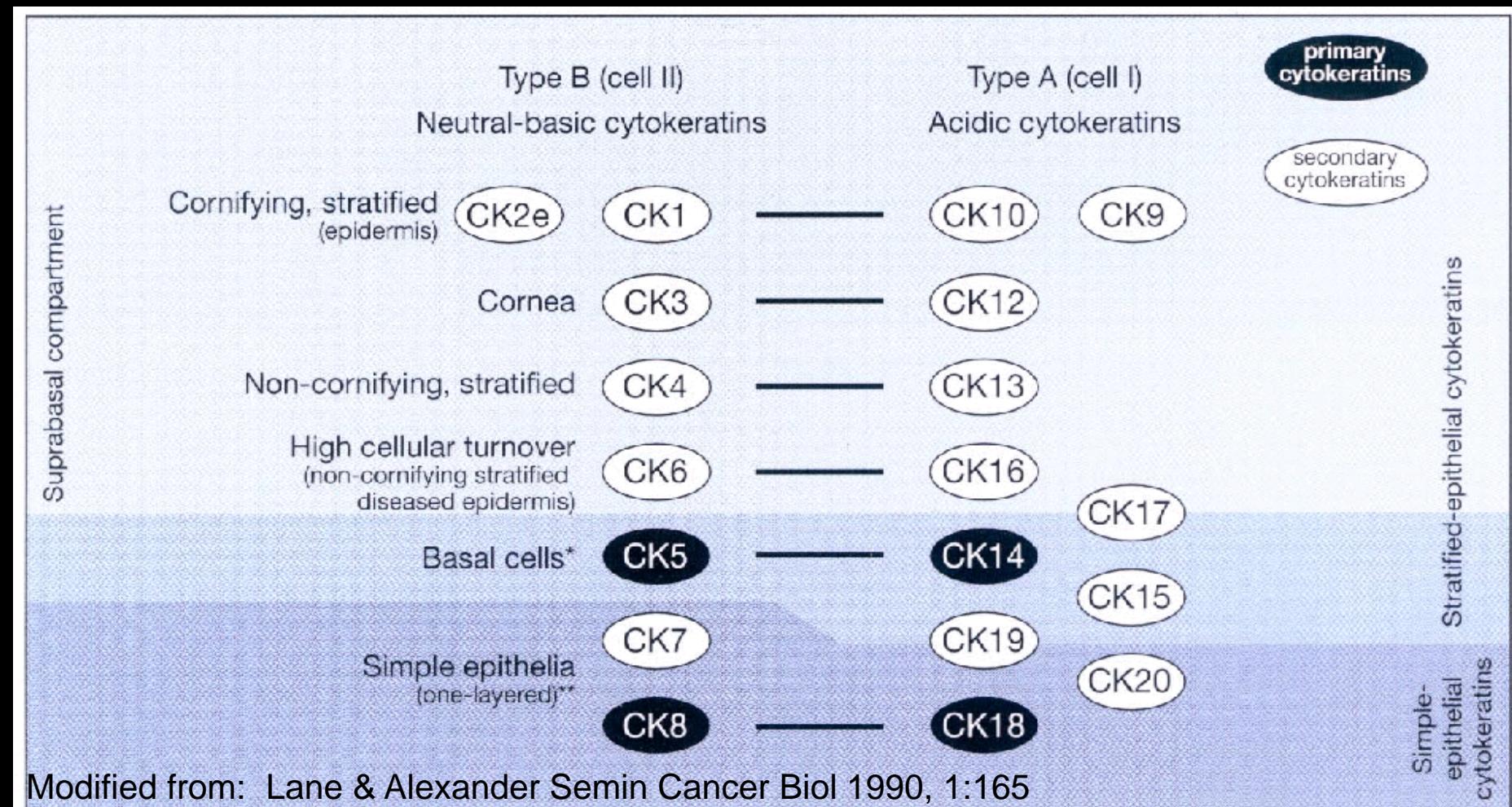
- CK9 (64 kDa) - CK20 (40 kDa)

Class II (type B - Basic/neutral):

- CK1 (68 kDa) - CK8 (52.5 kDa)

# Pairing of cytokeratins

- One CK class I and one CK class II ‘always’ paired
- CK class I in a pair ~ 8 kDa smaller than class II



Modified from: Lane & Alexander Semin Cancer Biol 1990, 1:165

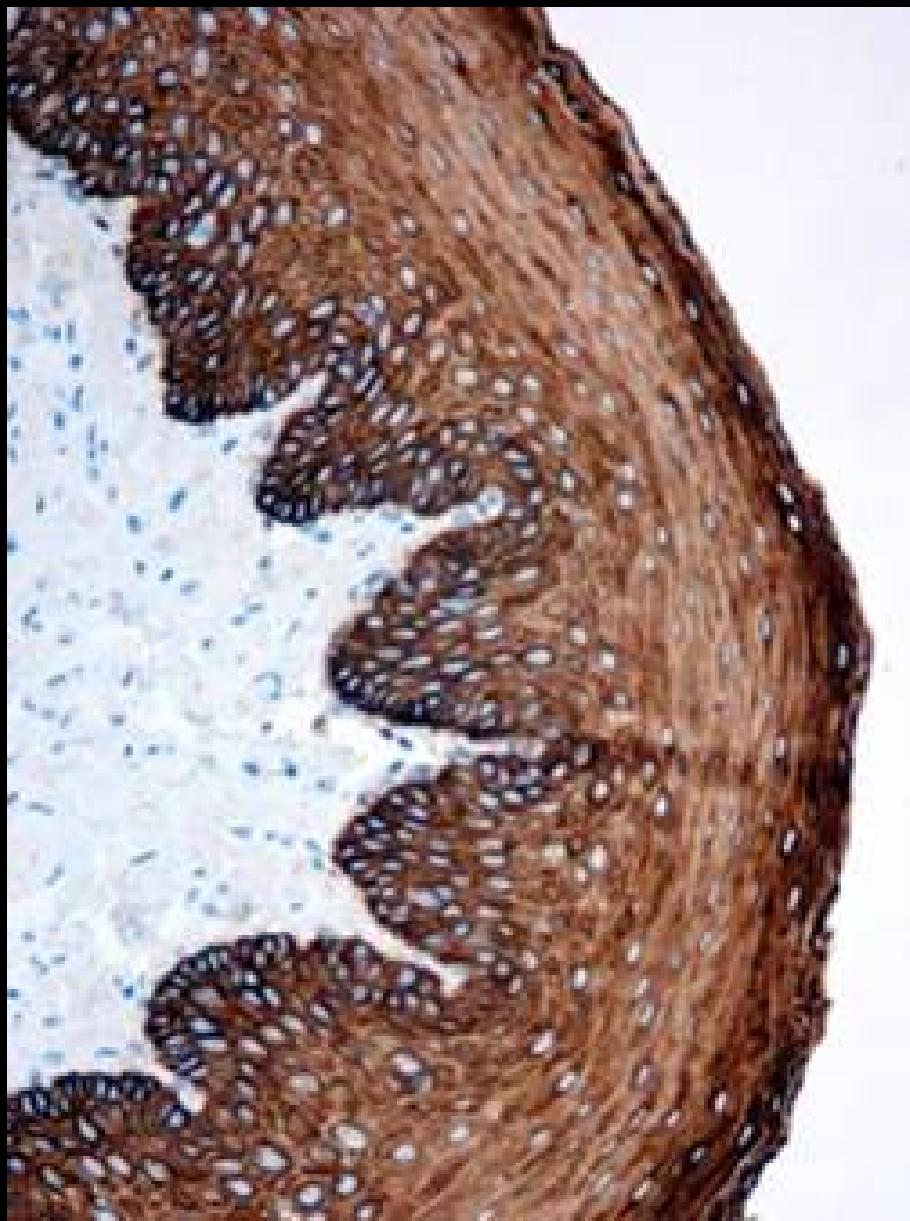
# Cytokeratin types and cell types

Neutral/Basic (B, class II)	1	4	13	5	14	17	19	7	20	8
Acidic (A, class I)	10									18
Squamous epithelia:										
- suprabasal, keratinizing	+++	-	-	+	++	(+)	-	-	-	-
- suprabasal, non-keratinizing	+	+++	+++	+	++	(+)	-	-	-	-
- basal cells ( <sup>1</sup> tonsil, <sup>2</sup> mucosa)	-	-	-	+++	+++	(+) <sup>1</sup>	(++) <sup>12</sup>	(+) <sup>1</sup>	-	(+) <sup>1</sup>
Transit. epith.: superficial cells	-	-	-	-	-	-	+++	+++	++	+++
- intermed. / <sup>3</sup> basal cells	-	(+) <sup>3</sup>	+++	(+++) <sup>3</sup>	-	(++) <sup>3</sup>	+++	+++	(+)	+++
Mesothelium	-	-	-	++	++	+	+++	+++	-	+++
Bronchus, breast, prost., cerv.:										
- basal/myoepithelial cells	-	-	-	+++	++	+++	++	-	-	-
- luminal cells	-	-	-	+	+	+	+++	+++	-	+++
Biliary/pancr. ducts, lung alv., endometr., renal collect. ducts	-	-	-	-	-	-	+++	+++	-	+++
<sup>4</sup> Stomach (foveola), intestine	-	-	-	-	-	-	+++	(+) <sup>4</sup>	+++	+++
Hepatocytes, pancr. acini, prox. renal tubules	-	-	-	-	-	-	-	-	-	+++
Endocrine cells ( <sup>5</sup> Merkel, <sup>6</sup> thyro.)	-	-	-	-	-	-	(+++) <sup>5</sup>	(++) <sup>6</sup>	(+++) <sup>5</sup>	+++
Smooth muscle (vasc., myom.), myofibrobl., <sup>7</sup> sm.ves.endothelia	-	-	-	-	-	-	+	(++) <sup>7</sup>	-	++

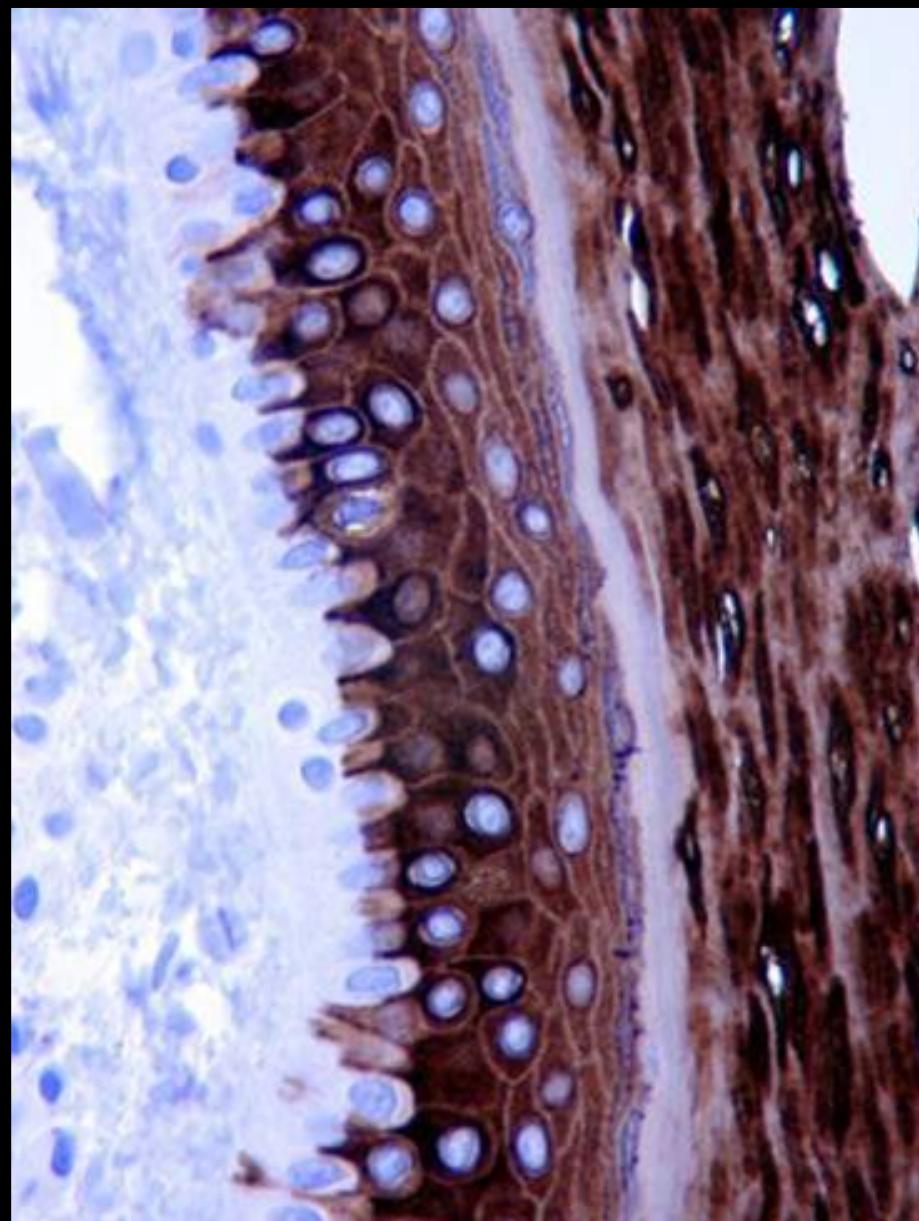
# HMW Cytokeratin types - squamous epithelia

	1	4	Neutral/Basic (B, class II)	13	5	14	17	19	7	20	8
	10		Acidic (A, class I)								18
<b>Squamous epithelia:</b>											
- suprabasal, keratinizing	+++	-	-	-	+	++	(+)	-	-	-	-
- suprabasal, non-keratinizing	+	+++	+++	+	++	(+)	-	-	-	-	-
- basal cells ( <sup>1</sup> tonsil, <sup>2</sup> mucosa)	-	-	-	+++	+++	(+) <sup>1</sup>	(++) <sup>12</sup>	(+) <sup>1</sup>	-	(+) <sup>1</sup>	
Transit. epith.: superficial cells	-	-	-	-	-	-	-	+++	+++	++	+++
- intermed. / <sup>3</sup> basal cells	-	(+) <sup>3</sup>	+++	(+++) <sup>3</sup>	-	(++) <sup>3</sup>	+++	+++	(+)	+++	
Mesothelium	-	-	-	++	++	+	+++	+++	-	+++	
Bronchus, breast, prost., cerv.:											
- basal/myoepithelial cells	-	-	-	+++	++	+++	++	-	-	-	-
- luminal cells	-	-	-	+	+	+	+++	+++	-	+++	
Biliary/pancr. ducts, lung alv., endometr., renal collect. ducts	-	-	-	-	-	-	+++	+++	-	+++	
<sup>4</sup> Stomach (foveola), intestine	-	-	-	-	-	-	+++	(+) <sup>4</sup>	+++	+++	
Hepatocytes, pancr. acini, prox. renal tubules	-	-	-	-	-	-	-	-	-	+++	
Endocrine cells ( <sup>5</sup> Merkel, <sup>6</sup> thyro.)	-	-	-	-	-	-	(+++) <sup>5</sup>	(++) <sup>6</sup>	(+++) <sup>5</sup>	+++	
Smooth muscle (vasc., myom.), myofibrobl., <sup>7</sup> sm.ves.endothelia	-	-	-	-	-	-	+	(++) <sup>7</sup>	-	++	

# HMW Cytokeratin types - squamous epithelia



CK5: esophagus

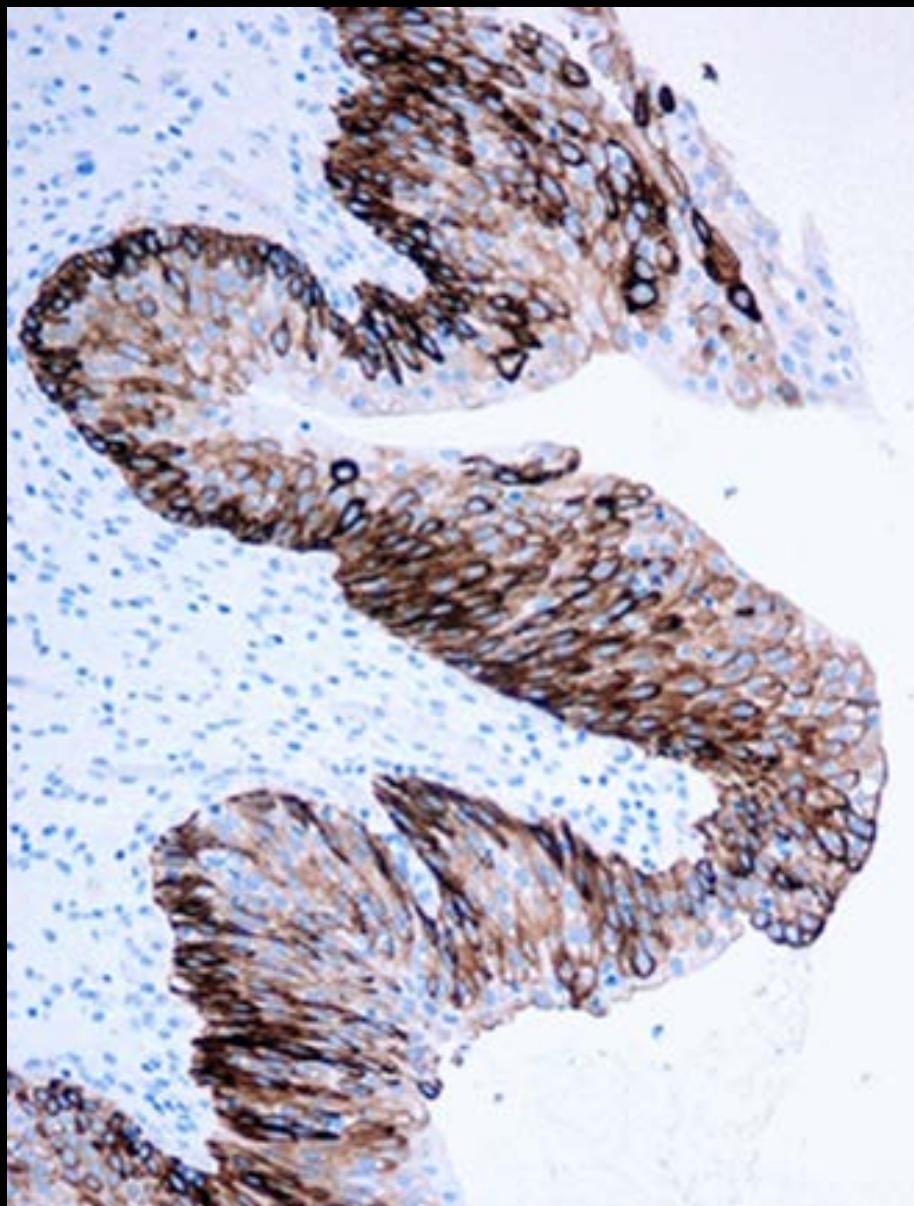


CK4: esophagus

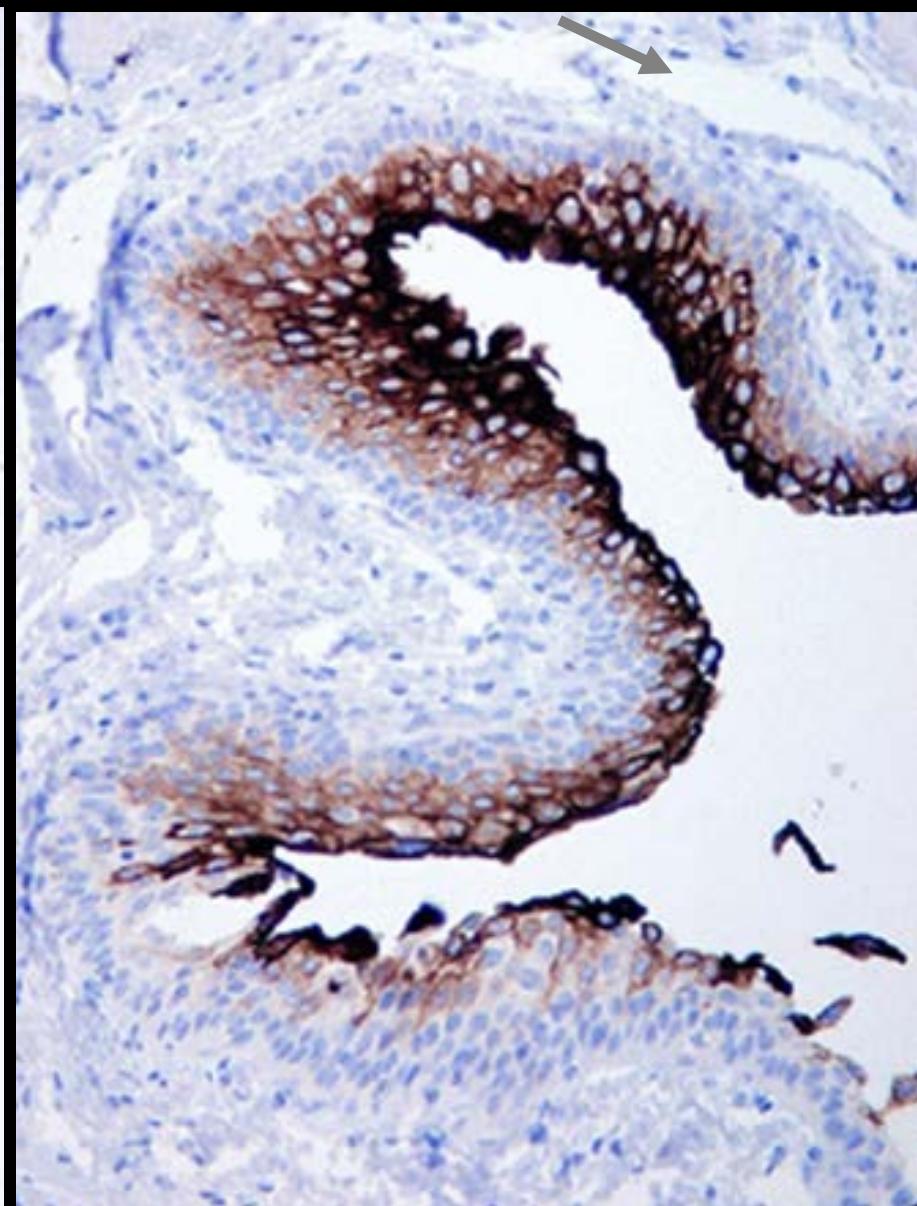
# Cytokeratin types - urothelium

	1	4	5	14	17	19	7	20	8 18
Neutral/Basic (B, class II)	10								
Acidic (A, class I)									
Squamous epithelia:									
- suprabasal, keratinizing	+++	-	-	+	++	(+)	-	-	-
- suprabasal, non-keratinizing	+	+++	+++	+	++	(+)	-	-	-
- basal cells ( <sup>1</sup> tonsil, <sup>2</sup> mucosa)	-	-	-	+++	+++	(+) <sup>1</sup>	(++) <sup>12</sup>	(+) <sup>1</sup>	-
Transit. epith.: superficial cells	-	-	-	-	-	-	+++	+++	++
- intermed. / <sup>3</sup> basal cells	-	(+) <sup>3</sup>	+++	(++) <sup>3</sup>	-	(++) <sup>3</sup>	+++	+++	(+)
Mesothelium	-	-	-	++	++	+	+++	+++	-
Bronchus, breast, prost., cerv.:									
- basal/myoepithelial cells	-	-	-	+++	++	+++	++	-	-
- luminal cells	-	-	-	+	+	+	+++	+++	-
Biliary/pancr. ducts, lung alv., endometr., renal collect. ducts	-	-	-	-	-	-	+++	+++	-
<sup>4</sup> Stomach (foveola), intestine	-	-	-	-	-	-	+++	(+) <sup>4</sup>	+++
Hepatocytes, pancr. acini, prox. renal tubules	-	-	-	-	-	-	-	-	+++
Endocrine cells ( <sup>5</sup> Merkel, <sup>6</sup> thyro.)	-	-	-	-	-	(+++) <sup>5</sup>	(++) <sup>6</sup>	(+++) <sup>5</sup>	+++
Smooth muscle (vasc., myom.), myofibrobl., <sup>7</sup> sm.ves.endothelia	-	-	-	-	-	-	+	(++) <sup>7</sup>	-

# Cytokeratin types - urothelium



CK5 (+CK13)

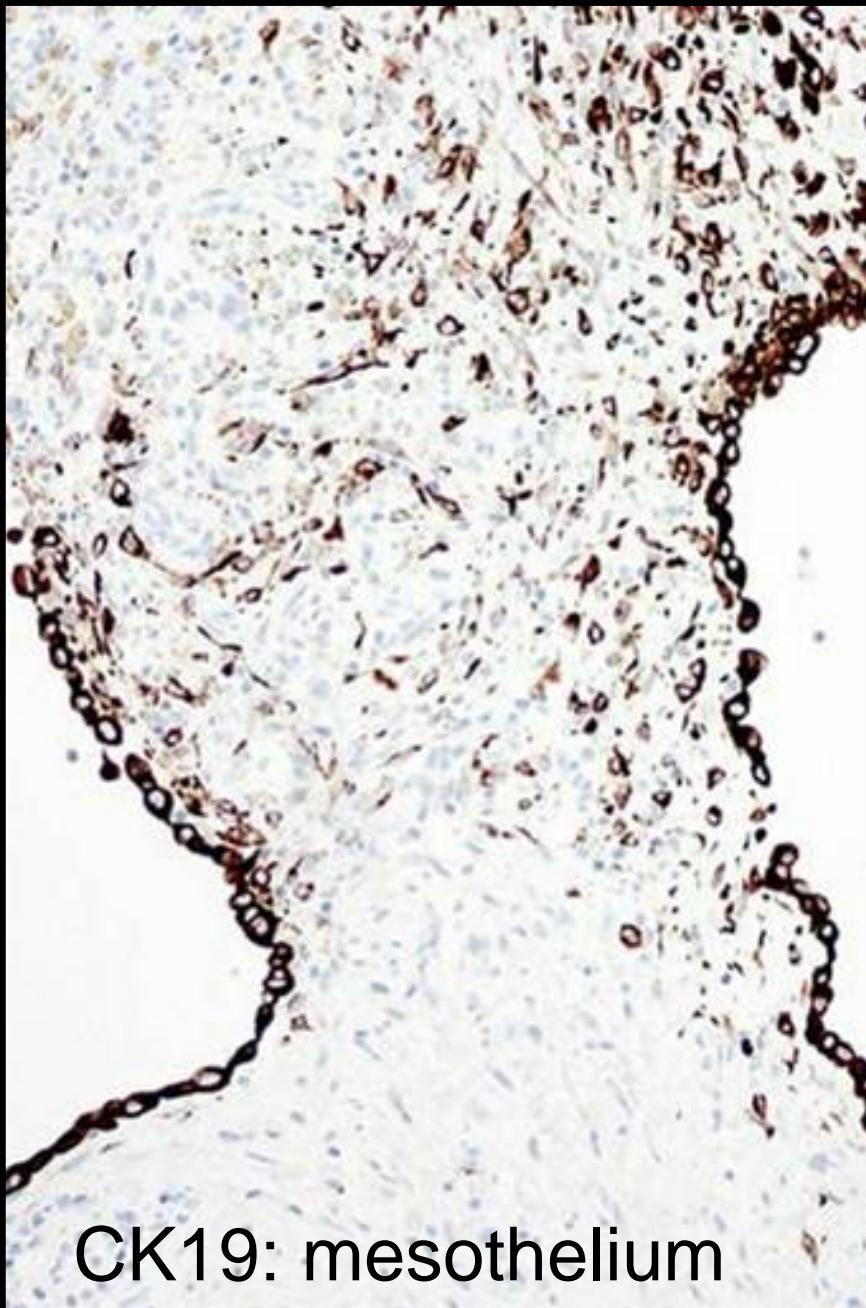


CK20

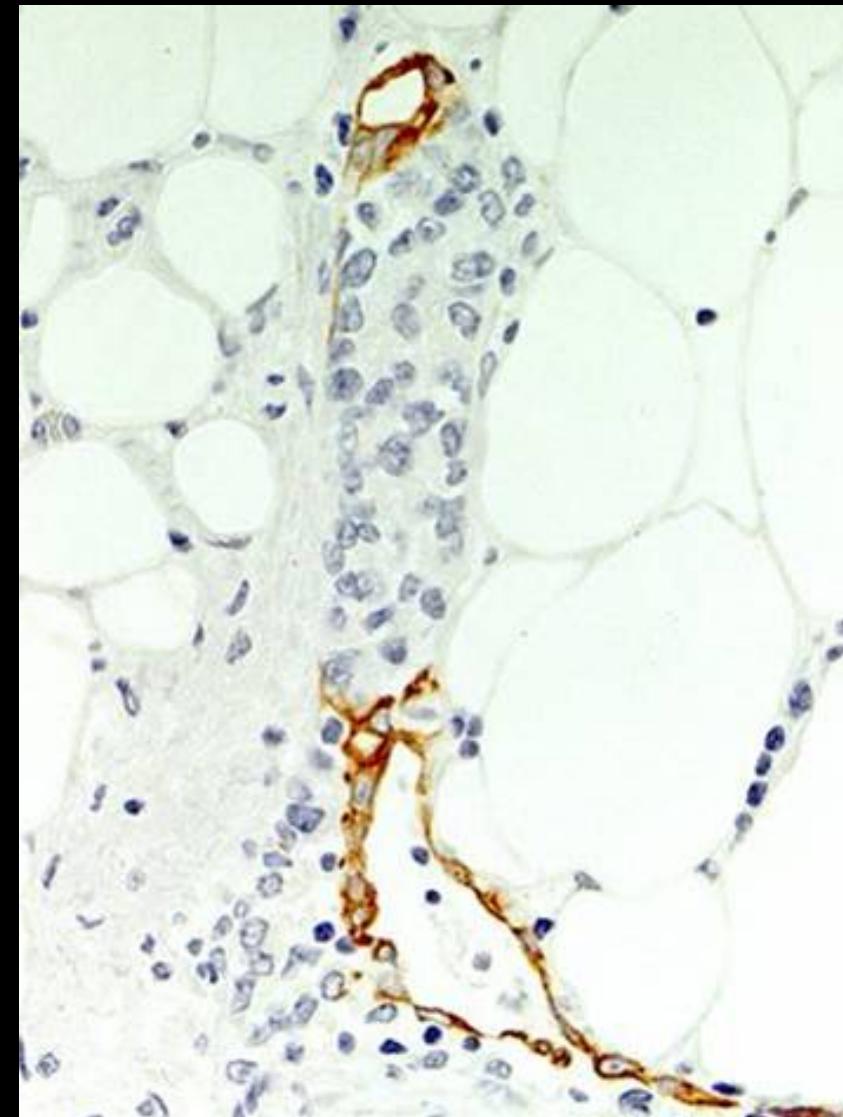
# Cytokeratin types - mesothelium

	1	4	13	5	14	17	19	7	20	8	18
Neutral/Basic (B, class II)	10										
Acidic (A, class I)											
Squamous epithelia:											
- suprabasal, keratinizing	+++	-	-	+	++	(+)	-	-	-	-	-
- suprabasal, non-keratiniz.ep.	+	+++	+++	+	++	(+)	-	-	-	-	-
- basal cells ( <sup>1</sup> tonsil, <sup>2</sup> mucosa)	-	-	-	+++	+++	(+) <sup>1</sup>	(++) <sup>12</sup>	(+) <sup>1</sup>	-	(+) <sup>1</sup>	
Transit. epith.: superficial cells	-	-	-	-	-	-	+++	+++	++	+++	
- intermed. / <sup>3</sup> basal cells	-	(+) <sup>3</sup>	+++	(++) <sup>3</sup>	-	(++) <sup>3</sup>	+++	+++	(+)	+++	
<b>Mesothelium</b>	-	-	-	++	++	+	+++	+++	-	+++	
Bronchus, breast, prost., cerv.:											
- basal/myoepithelial cells	-	-	-	+++	++	+++	++	-	-	-	-
- luminal cells	-	-	-	+	+	+	+++	+++	-	+++	
Biliary/pancr. ducts, lung alv., endometr., renal collect. ducts	-	-	-	-	-	-	+++	+++	-	+++	
<sup>4</sup> Stomach (foveola), intestine	-	-	-	-	-	-	+++	(+) <sup>4</sup>	+++	+++	
Hepatocytes, pancr. acini, prox. renal tubules	-	-	-	-	-	-	-	-	-	+++	
Endocrine cells ( <sup>5</sup> Merkel, <sup>6</sup> thyr.)	-	-	-	-	-	-	(++) <sup>5</sup>	(++) <sup>6</sup>	(++) <sup>5</sup>	+++	
Smooth muscle (vasc., myom.), myofibrobl., <sup>7</sup> sm.ves.endothelia	-	-	-	-	-	-	+	(++) <sup>7</sup>	-	++	

# Cytokeratin types - mesothelium



CK19: mesothelium

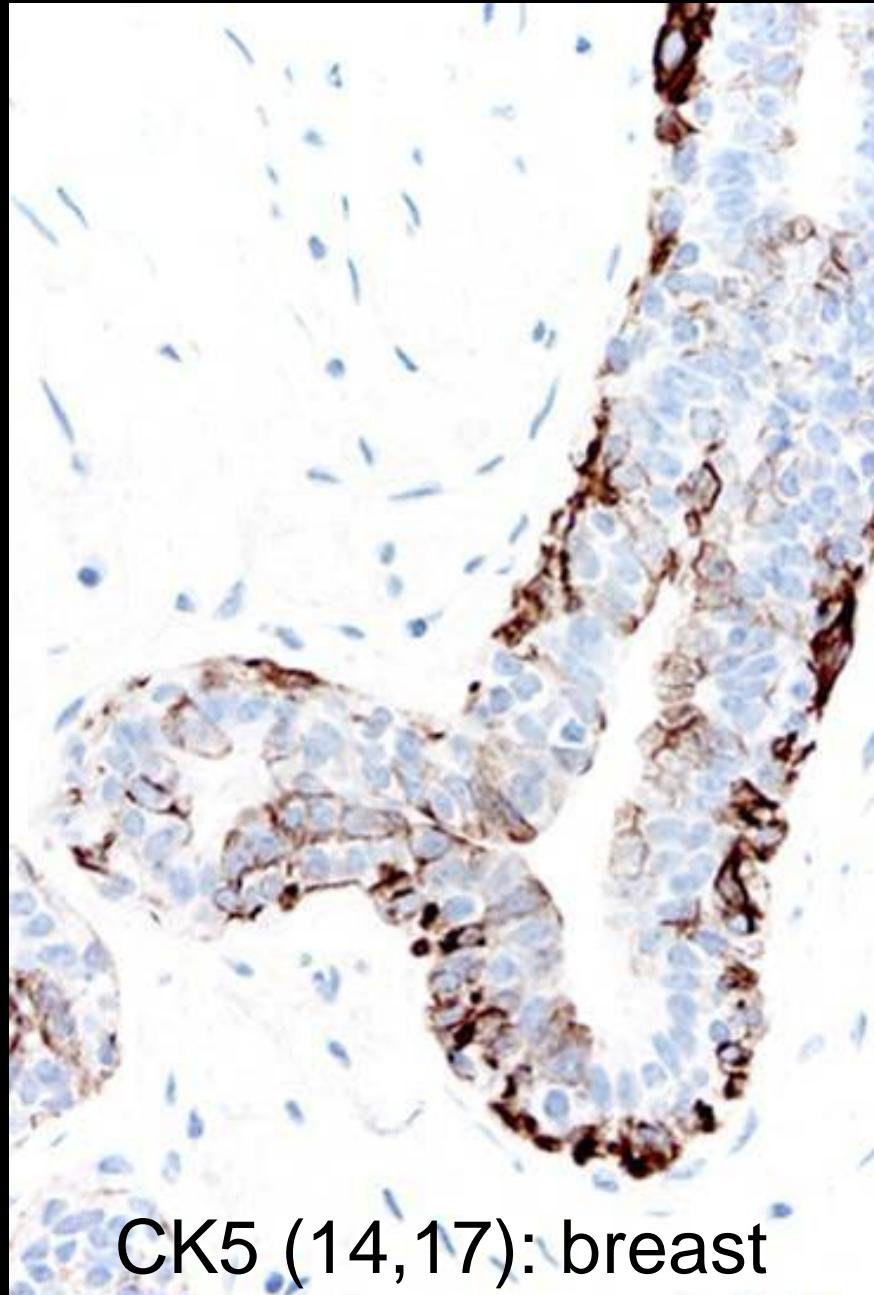


CK5: mesothelium  
(adenocarcinoma neg.)

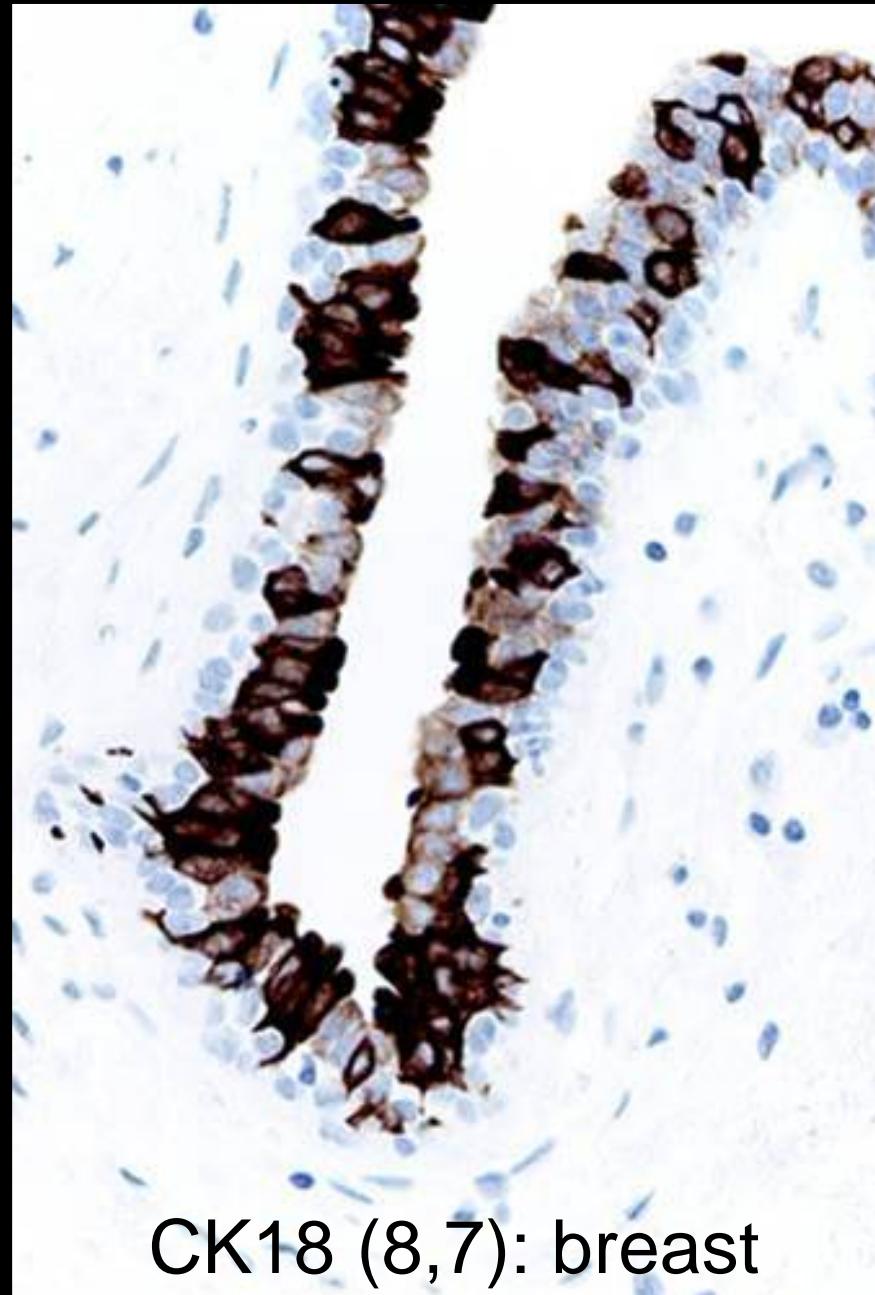
# Cytokeratin types - complex epithelia

	1	4	13	5	14	17	19	7	20	8 18
Neutral/Basic (B, class II)	10									
Acidic (A, class I)										
Squamous epithelia:										
- suprabasal, keratinizing	+++	-	-	+	++	(+)	-	-	-	-
- suprabasal, non-keratinizing	+	+++	+++	+	++	(+)	-	-	-	-
- basal cells ( <sup>1</sup> tonsil, <sup>2</sup> mucosa)	-	-	-	-	+++	(+) <sup>1</sup>	(++) <sup>12</sup>	(+) <sup>1</sup>	-	(+) <sup>1</sup>
Transit. epith.: superficial cells	-	-	-	-	-	-	+++	+++	++	+++
- intermed. / <sup>3</sup> basal cells	-	(+) <sup>3</sup>	+++	(+++) <sup>3</sup>	-	(++) <sup>3</sup>	+++	+++	(+)	+++
Mesothelium	-	-	-	++	++	+	+++	+++	-	+++
Bronchus, breast, prost., cerv.:										
- basal/myoepithelial cells	-	-	-	+++	++	+++	++	-	-	-
- luminal cells	-	-	-	+	+	+	+++	+++	-	+++
Biliary/pancr. ducts, lung alv., endometr., renal collect. ducts	-	-	-	-	-	-	+++	+++	-	+++
<sup>4</sup> Stomach (foveola), intestine	-	-	-	-	-	-	+++	(+) <sup>4</sup>	+++	+++
Hepatocytes, pancr. acini, prox. renal tubules	-	-	-	-	-	-	-	-	-	+++
Endocrine cells ( <sup>5</sup> Merkel, <sup>6</sup> thyro.)	-	-	-	-	-	-	(+++) <sup>5</sup>	(++) <sup>6</sup>	(+++) <sup>5</sup>	+++
Smooth muscle (vasc., myom.), myofibrobl., <sup>7</sup> sm.ves.endothelia	-	-	-	-	-	-	+	(++) <sup>7</sup>	-	++

# Cytokeratin types - complex epithelia



CK5 (14,17): breast

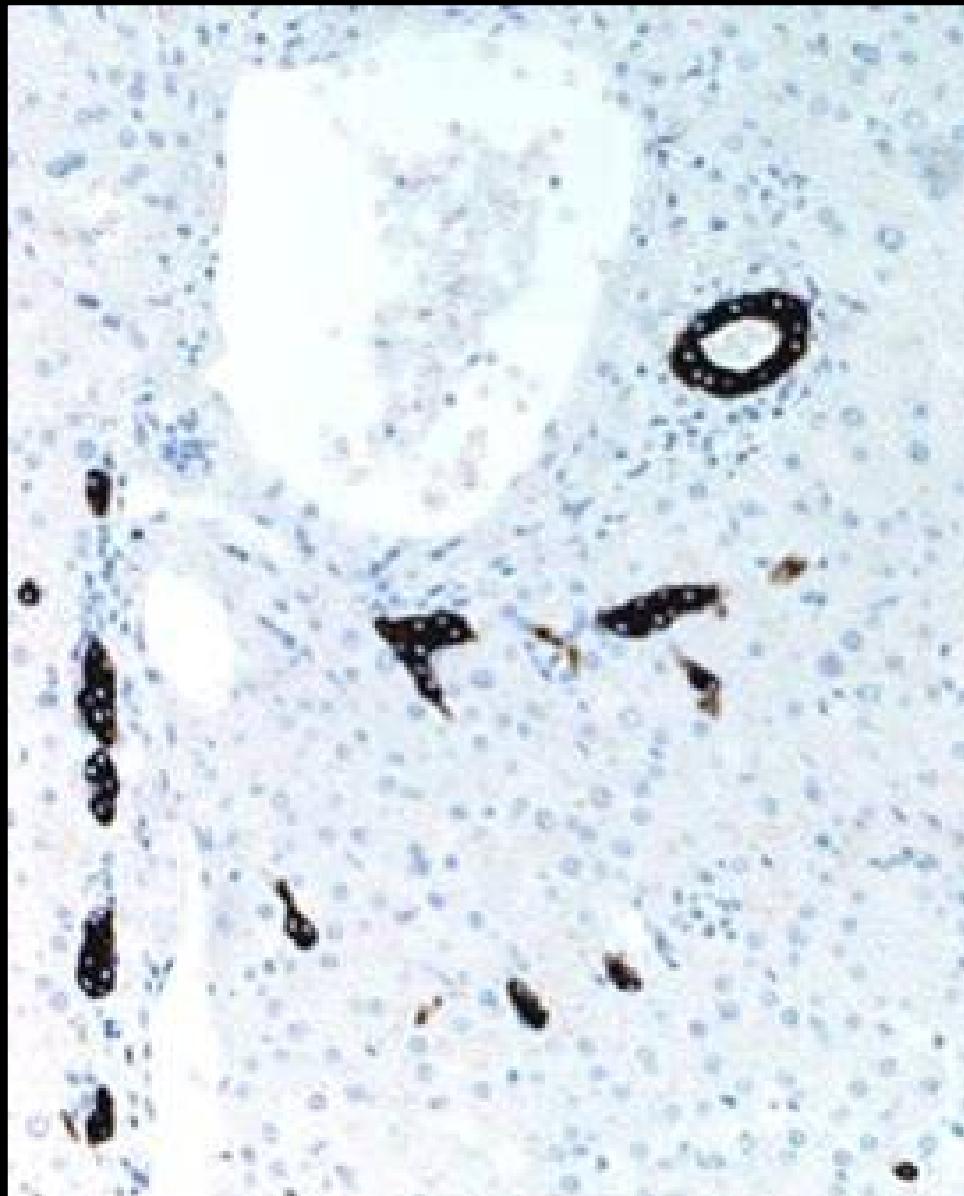


CK18 (8,7): breast

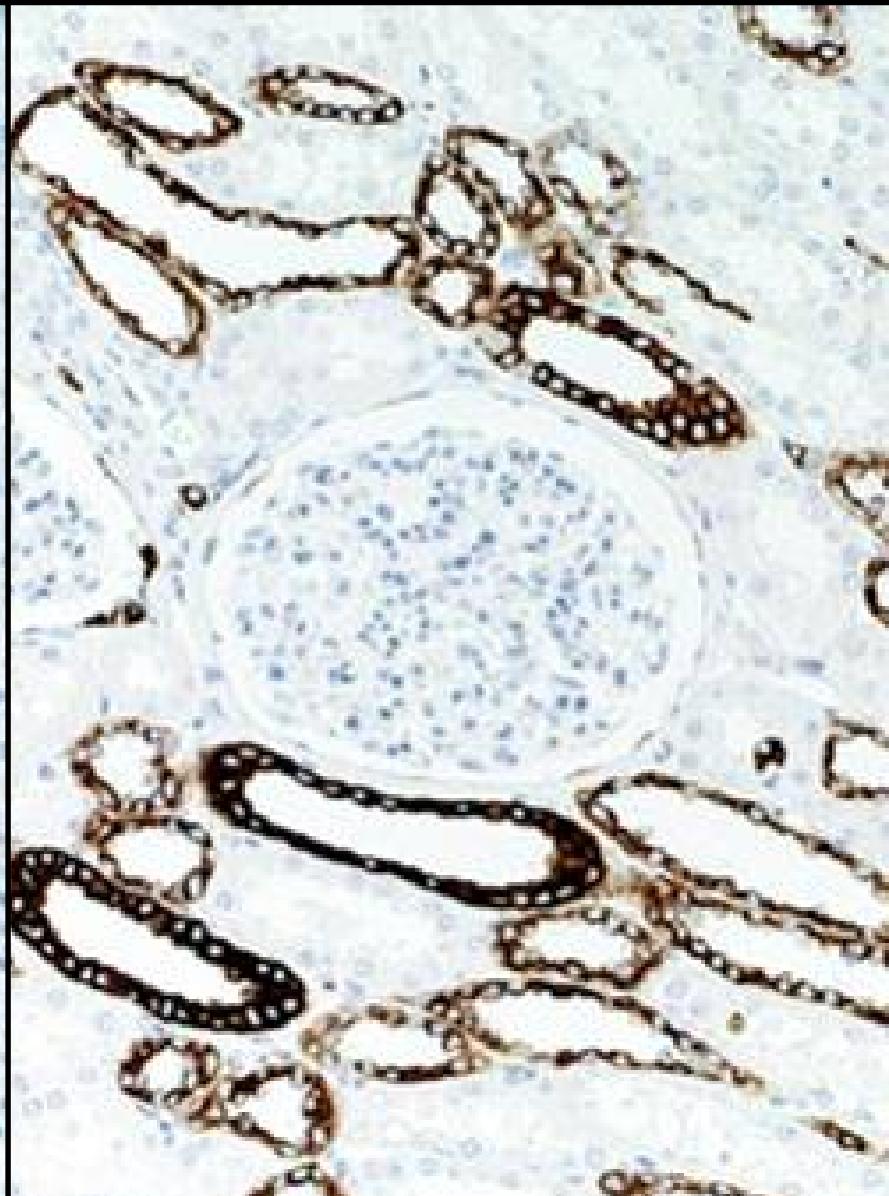
# Cytokeratin types - simple epithelia

	1	4	5	14	17	19	7	20	8 18
Neutral/Basic (B, class II)	10								
Acidic (A, class I)									
Squamous epithelia:									
- suprabasal, keratinizing	+++	-	-	+	++	-(+)	-	-	-
- suprabasal, non-keratinizing	+	+++	+++	+	++	(+)	-	-	-
- basal cells ( <sup>1</sup> tonsil, <sup>2</sup> mucosa)	-	-	-	-	+++	-(+) <sup>1</sup>	(++) <sup>12</sup>	-(+) <sup>1</sup>	-(-+) <sup>1</sup>
Transit. epith.: superficial cells	-	-	-	-	-	-	+++	+++	++
- intermed. / <sup>3</sup> basal cells	-	(+) <sup>3</sup>	+++	(+++) <sup>3</sup>	-	(++) <sup>3</sup>	+++	+++	(+)
Mesothelium	-	-	-	++	++	+	+++	+++	-
Bronchus, breast, prost., cerv.:									
- basal/myoepithelial cells	-	-	-	+++	++	+++	++	-	-
- luminal cells	-	-	-	+	+	+	+++	+++	-
<b>Biliary/pancr. ducts, lung alv., endometr., renal collect. ducts</b>	-	-	-	-	-	-	+++	+++	-
<sup>4</sup> Stomach (foveola), intestine	-	-	-	-	-	-	+++	(+) <sup>4</sup>	+++
Hepatocytes, pancr. acini, prox. renal tubules	-	-	-	-	-	-	-	-	+++
Endocrine cells ( <sup>5</sup> Merkel, <sup>6</sup> thyro.)	-	-	-	-	-	-	(+++) <sup>5</sup>	(++) <sup>6</sup>	(+++) <sup>5</sup>
Smooth muscle (vasc., myom.), myofibrobl., <sup>7</sup> sm.ves.endothelia	-	-	-	-	-	-	+	(++) <sup>7</sup>	-

# Cytokeratin types - simple epithelia (liver, kidney)



CK7(19): bile ducts

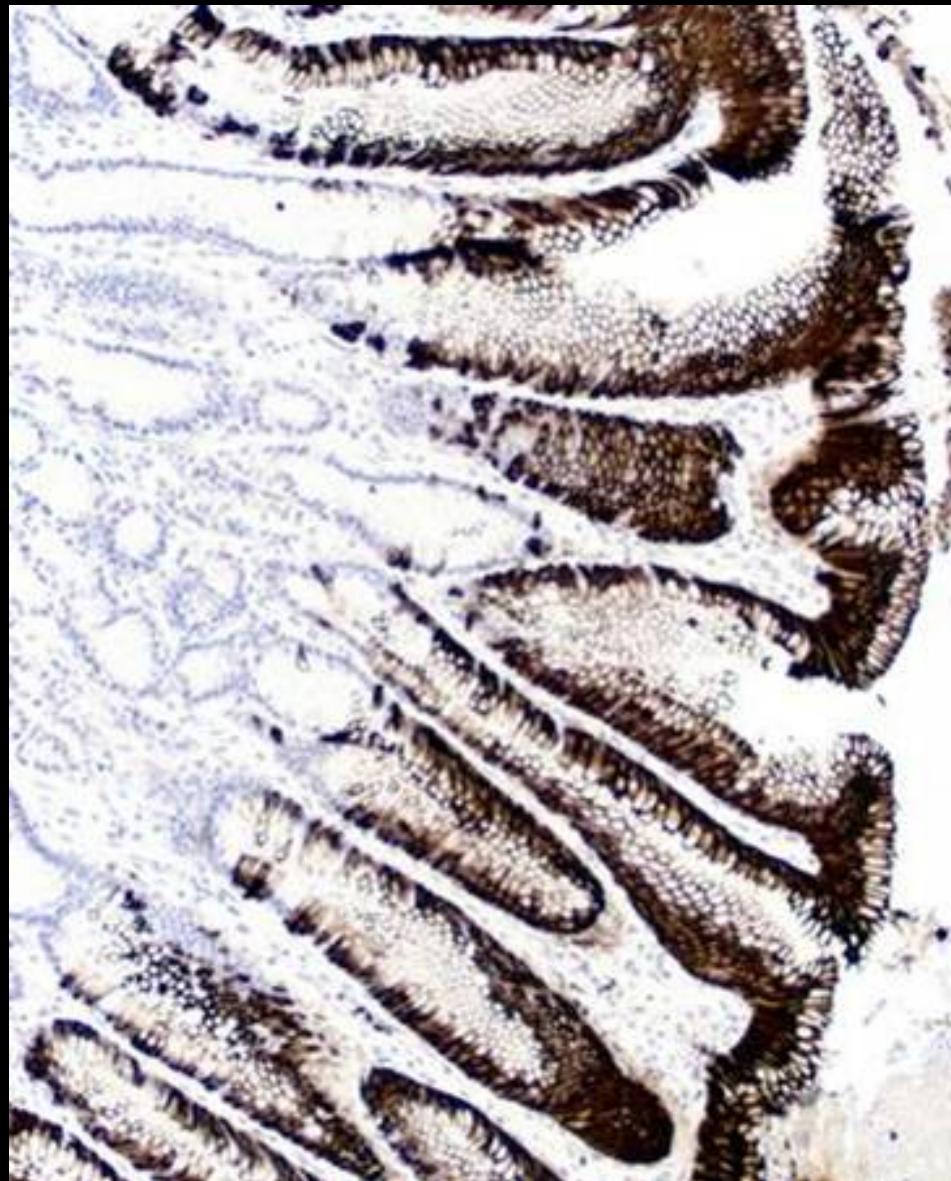


CK7(19): renal col.

# Cytokeratin types - simple epithelia

	1	4	5	14	17	19	7	20	8 18
Neutral/Basic (B, class II)	10								
Acidic (A, class I)									
Squamous epithelia:									
- suprabasal, keratinizing	+++	-	-	+	++	-(+)	-	-	-
- suprabasal, non-keratinizing	+	+++	+++	+	++	(+)	-	-	-
- basal cells ( <sup>1</sup> tonsil, <sup>2</sup> mucosa)	-	-	-	-	+++	-(+) <sup>1</sup>	(++) <sup>12</sup>	-(+) <sup>1</sup>	-
Transit. epith.: superficial cells	-	-	-	-	-	-	+++	+++	++
- intermed. / <sup>3</sup> basal cells	-	(+) <sup>3</sup>	+++	(+++) <sup>3</sup>	-	(++) <sup>3</sup>	+++	+++	(+)
Mesothelium	-	-	-	++	++	+	+++	+++	-
Bronchus, breast, prost., cerv.:									
- basal/myoepithelial cells	-	-	-	+++	++	+++	++	-	-
- luminal cells	-	-	-	+	+	+	+++	+++	-
Biliary/pancr. ducts, lung alv., endometr., renal collect. ducts	-	-	-	-	-	-	+++	+++	-
<sup>4</sup> Stomach (foveola), intestine	-	-	-	-	-	-	+++	(+) <sup>4</sup>	+++
Hepatocytes, pancr. acini, prox. renal tubules	-	-	-	-	-	-	-	-	+++
Endocrine cells ( <sup>5</sup> Merkel, <sup>6</sup> thyro.)	-	-	-	-	-	-	(+++) <sup>5</sup>	(++) <sup>6</sup>	(+++) <sup>5</sup>
Smooth muscle (vasc., myom.), myofibrobl., <sup>7</sup> sm.ves.endothelia	-	-	-	-	-	-	+	(++) <sup>7</sup>	-

# Cytokeratin types - simple epithelia



CK20: gastric foveolae

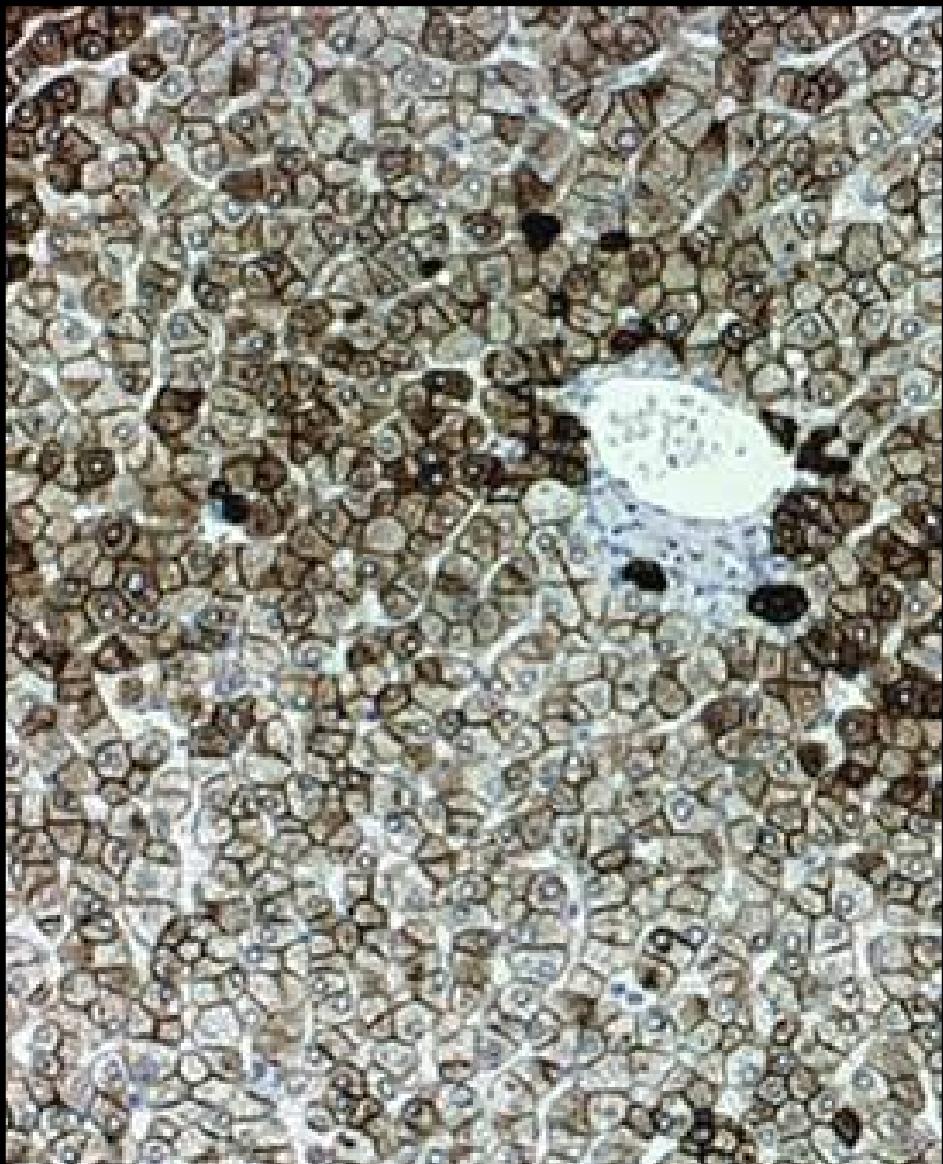


CK20: colon

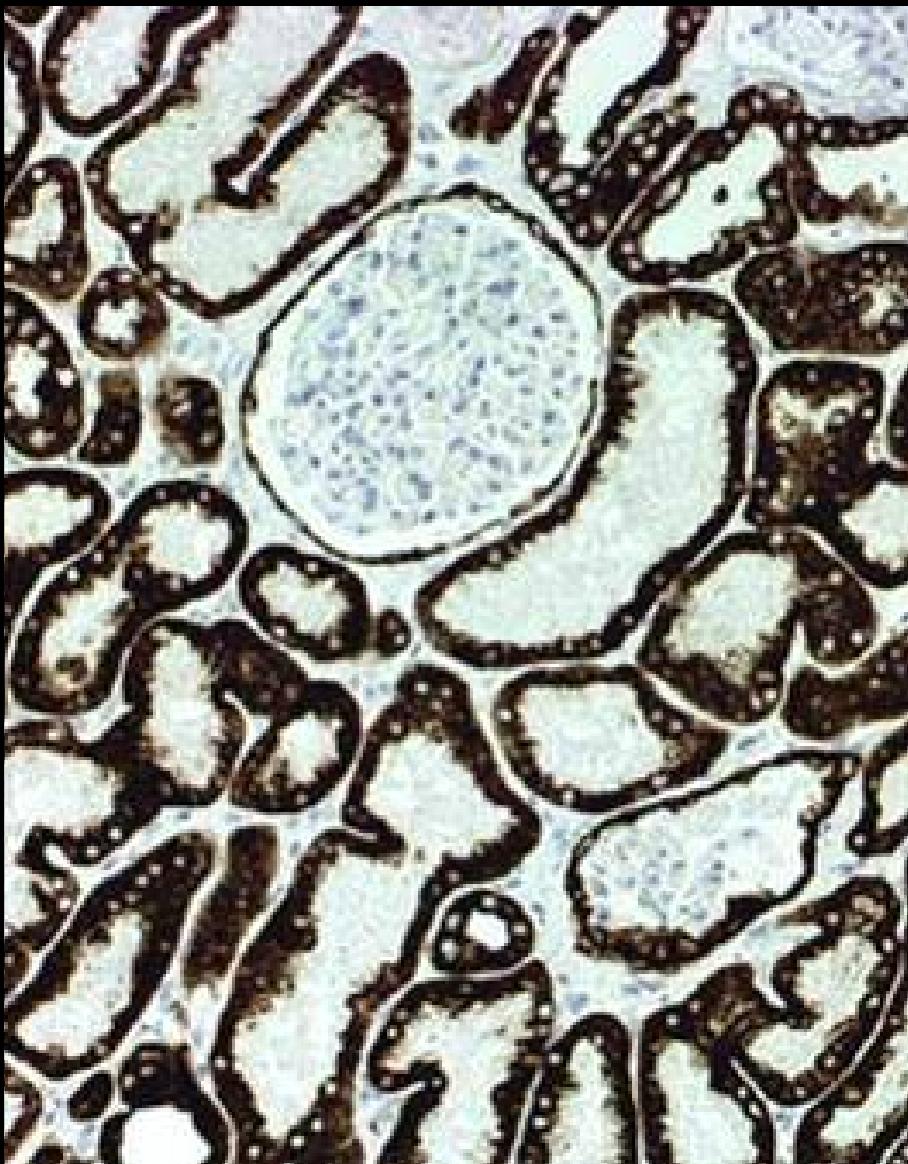
# Cytokeratin types - simple epithelia

	1	4	13	5	14	17	19	7	20	8	18
Neutral/Basic (B, class II)	10										
Acidic (A, class I)											
Squamous epithelia:											
- suprabasal, keratinizing	+++	-	-	+	++	-(+)	-	-	-	-	-
- suprabasal, non-keratinizing	+	+++	+++	+	++	(+)	-	-	-	-	-
- basal cells ( <sup>1</sup> tonsil, <sup>2</sup> mucosa)	-	-	-	-	+++	-(+) <sup>1</sup>	(++) <sup>12</sup>	-(+) <sup>1</sup>	-	-(+) <sup>1</sup>	
Transit. epith.: superficial cells	-	-	-	-	-	-	+++	+++	++	+++	
- intermed. / <sup>3</sup> basal cells	-	(+) <sup>3</sup>	+++	(+++) <sup>3</sup>	-	(++) <sup>3</sup>	+++	+++	(+)	+++	
Mesothelium	-	-	-	++	++	+	+++	+++	-	+++	
Bronchus, breast, prost., cerv.:											
- basal/myoepithelial cells	-	-	-	+++	++	+++	++	-	-	-	-
- luminal cells	-	-	-	+	+	+	+++	+++	-	+++	
Biliary/pancr. ducts, lung alv., endometr., renal collect. ducts	-	-	-	-	-	-	+++	+++	-	+++	
<sup>4</sup> Stomach (foveola), intestine	-	-	-	-	-	-	+++	(+) <sup>4</sup>	+++	+++	
<b>Hepatocytes, pancr. acini, prox. renal tubules</b>	-	-	-	-	-	-	-	-	-	+++	
Endocrine cells ( <sup>5</sup> Merkel, <sup>6</sup> thyro.)	-	-	-	-	-	-	(+++) <sup>5</sup>	(++) <sup>6</sup>	(+++) <sup>5</sup>	+++	
Smooth muscle (vasc., myom.), myofibrobl., <sup>7</sup> sm.ves.endothelia	-	-	-	-	-	-	+	(++) <sup>7</sup>	-	++	

# Cytokeratin types - simple epithelia



CK8: liver



CK8: kidney

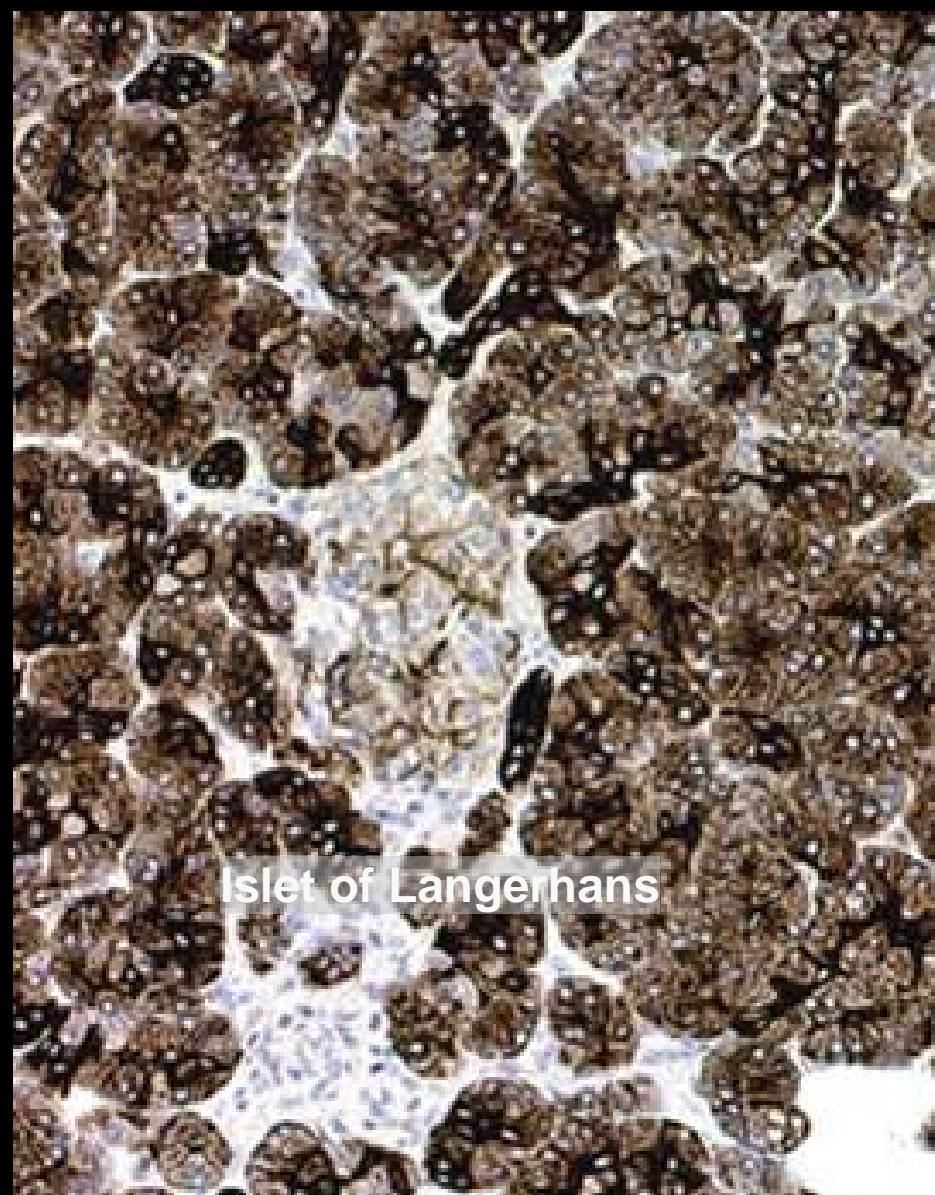
# Cytokeratin types - simple epithelia

	1	4	5	14	17	19	7	20	8 18
Neutral/Basic (B, class II)	10								
Acidic (A, class I)									
Squamous epithelia:									
- suprabasal, keratinizing	+++	-	-	+	++	-(+)	-	-	-
- suprabasal, non-keratinizing	+	+++	+++	+	++	(+)	-	-	-
- basal cells ( <sup>1</sup> tonsil, <sup>2</sup> mucosa)	-	-	-	-	+++	-(+) <sup>1</sup>	(++) <sup>12</sup>	-(+) <sup>1</sup>	-(-+) <sup>1</sup>
Transit. epith.: superficial cells	-	-	-	-	-	-	+++	+++	++
- intermed. / <sup>3</sup> basal cells	-	(+) <sup>3</sup>	+++	(+++) <sup>3</sup>	-	(++) <sup>3</sup>	+++	+++	(+)
Mesothelium	-	-	-	++	++	+	+++	+++	-
Bronchus, breast, prost., cerv.:									
- basal/myoepithelial cells	-	-	-	+++	++	+++	++	-	-
- luminal cells	-	-	-	+	+	+	+++	+++	-
Biliary/pancr. ducts, lung alv., endometr., renal collect. ducts	-	-	-	-	-	-	+++	+++	-
<sup>4</sup> Stomach (foveola), intestine	-	-	-	-	-	-	+++	(+) <sup>4</sup>	+++
Hepatocytes, pancr. acini, prox. renal tubules	-	-	-	-	-	-	-	-	+++
<b>Endocrine cells (<sup>5</sup>Merkel, <sup>6</sup>thyro.)</b>	-	-	-	-	-	(+++) <sup>5</sup>	(++) <sup>6</sup>	(+++) <sup>5</sup>	+++
Smooth muscle (vasc., myom.), myofibrobl., <sup>7</sup> sm.ves.endothelia	-	-	-	-	-	-	+	(++) <sup>7</sup>	-

# Cytokeratin types - simple epithelia



CK20: Merkel cells

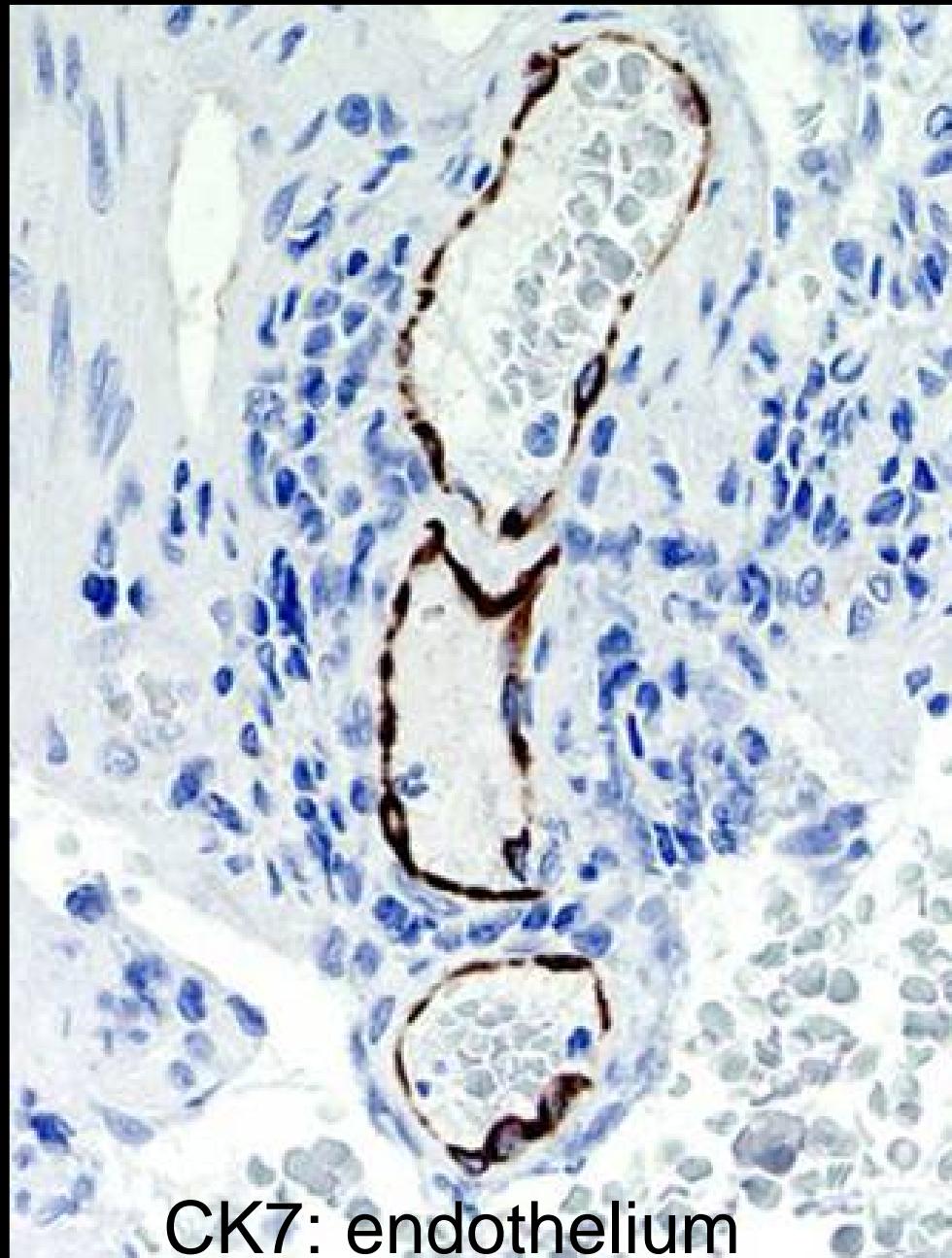


CK8: Pancreas

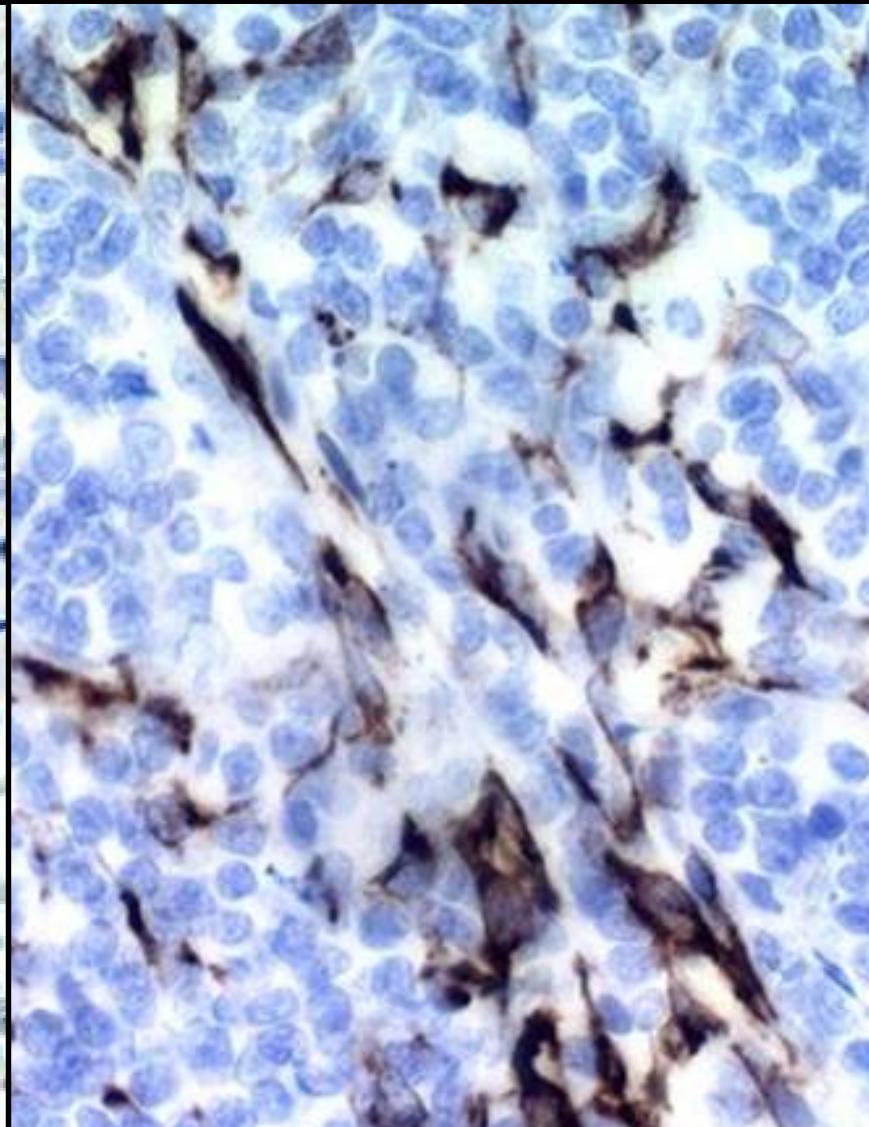
# Cytokeratin types - mesenchymal cells

	1	4	13	5	14	17	19	7	20	8 18
Neutral/Basic (B, class II)	10									
Acidic (A, class I)										
Squamous epithelia:										
- suprabasal, keratinizing	+++	-	-	+	++	-(+)	-	-	-	-
- suprabasal, non-keratinizing	+	+++	+++	+	++	(+)	-	-	-	-
- basal cells ( <sup>1</sup> tonsil, <sup>2</sup> mucosa)	-	-	-	-	+++	-(+) <sup>1</sup>	(++) <sup>12</sup>	-(+) <sup>1</sup>	-	-(+) <sup>1</sup>
Transit. epith.: superficial cells	-	-	-	-	-	-	+++	+++	++	+++
- intermed. / <sup>3</sup> basal cells	-	(+) <sup>3</sup>	+++	(+++) <sup>3</sup>	-	(++) <sup>3</sup>	+++	+++	(+)	+++
Mesothelium	-	-	-	++	++	+	+++	+++	-	+++
Bronchus, breast, prost., cerv.:										
- basal/myoepithelial cells	-	-	-	+++	++	+++	++	-	-	-
- luminal cells	-	-	-	+	+	+	+++	+++	-	+++
Biliary/pancr. ducts, lung alv., endometr., renal collect. ducts	-	-	-	-	-	-	+++	+++	-	+++
<sup>4</sup> Stomach (foveola), intestine	-	-	-	-	-	-	+++	(+) <sup>4</sup>	+++	+++
Hepatocytes, pancr. acini, prox. renal tubules	-	-	-	-	-	-	-	-	-	+++
Endocrine cells ( <sup>5</sup> Merkel, <sup>6</sup> thyro.)	-	-	-	-	-	-	(+++) <sup>5</sup>	(++) <sup>6</sup>	(+++) <sup>5</sup>	+++
<b>Smooth muscle (vasc., myom.), myofibrobl., <sup>7</sup>sm.ves.endothelia</b>	-	-	-	-	-	-	+	(++) <sup>7</sup>	-	++

# Cytokeratin types - mesenchymal cells



CK7: endothelium



CK8: lymph node  
fibroblastic reticulum cells

# Cytokeratins in epithelial neoplasias

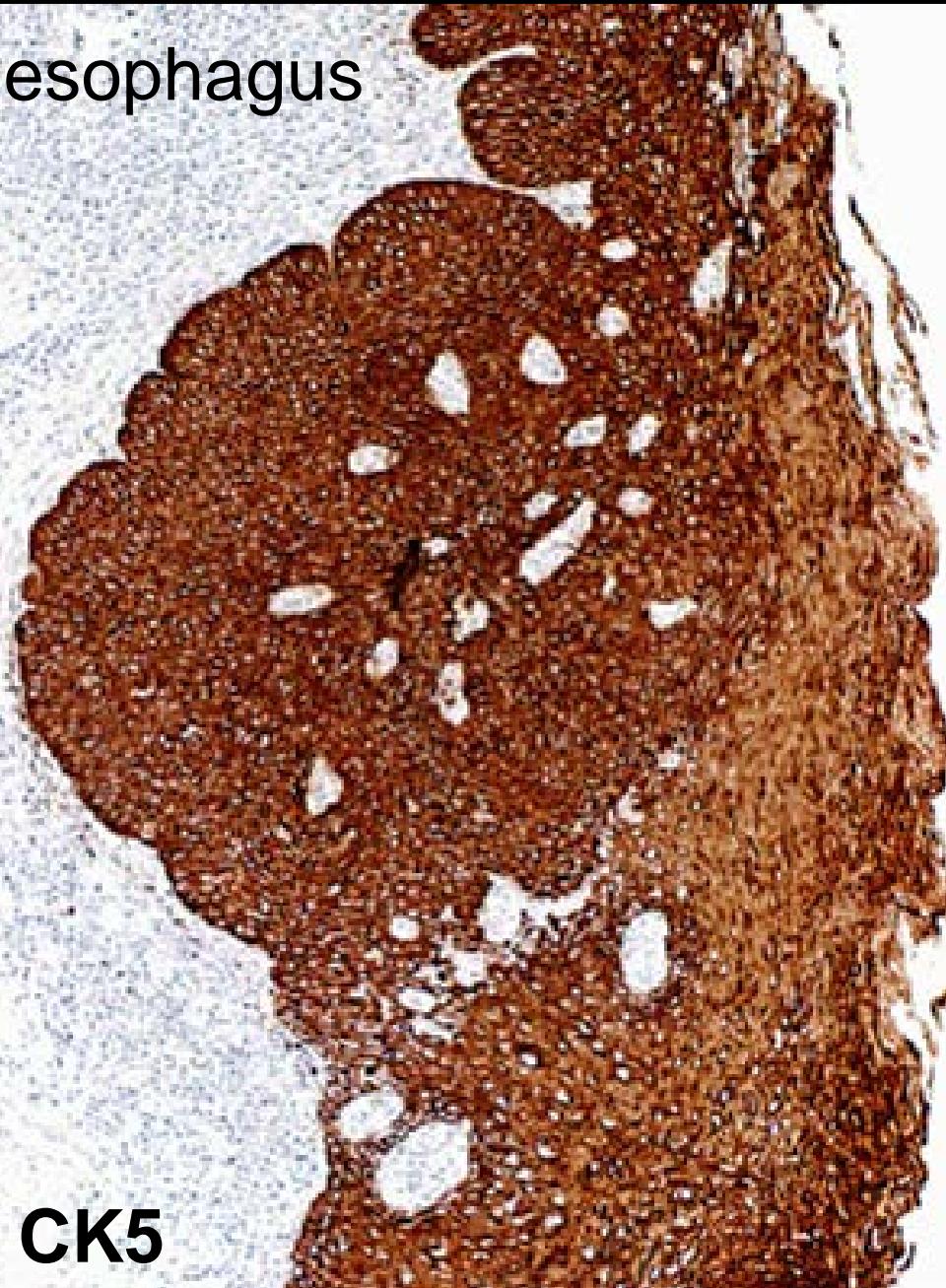
	1 10	4	13	5	14	17	19	7	20	8 18
Neutral/Basic (B, class II)										
Acidic (A, class I)										
Squamous cell carcinoma	(+)	+	+	++	++	(+)	(+)	(+)	-	(+)
Transitional cell tumour	-	+	+	+	+	+	++	++	++	++
Malignant mesothelioma	-	-	-	++	++	+	++	+	-	++
Adenocarcinoma: complex epithelia (lung, breast)	-	-	-	(+)	(+)	(+)	++	++	-	++
Adenocarc.: biliary tract, pancr., endom., ovary	-	-	-	(+)	(+)	(+)	++	++	(+)	++
Adenocarc.: stomach	-	-	-	-	-	-	++	+	+	++
Adenocarc.: intestine	-	-	-	-	-	-	++	+	++	++
Hepatocellular carcinoma										
Renal cell carcinoma	-	-	-	-	-	-	-	+	-	++
Endocrine tumours: carcinoids	-	-	-	-	-	-	+	+	-	++
- Merkel cell carcinoma	-	-	-	-	-	-	+	-	++	++
- Thyroid carcinoma	-	-	-	-	-	-	+	++	-	++

# Cytokeratins in squamous cell carcinoma

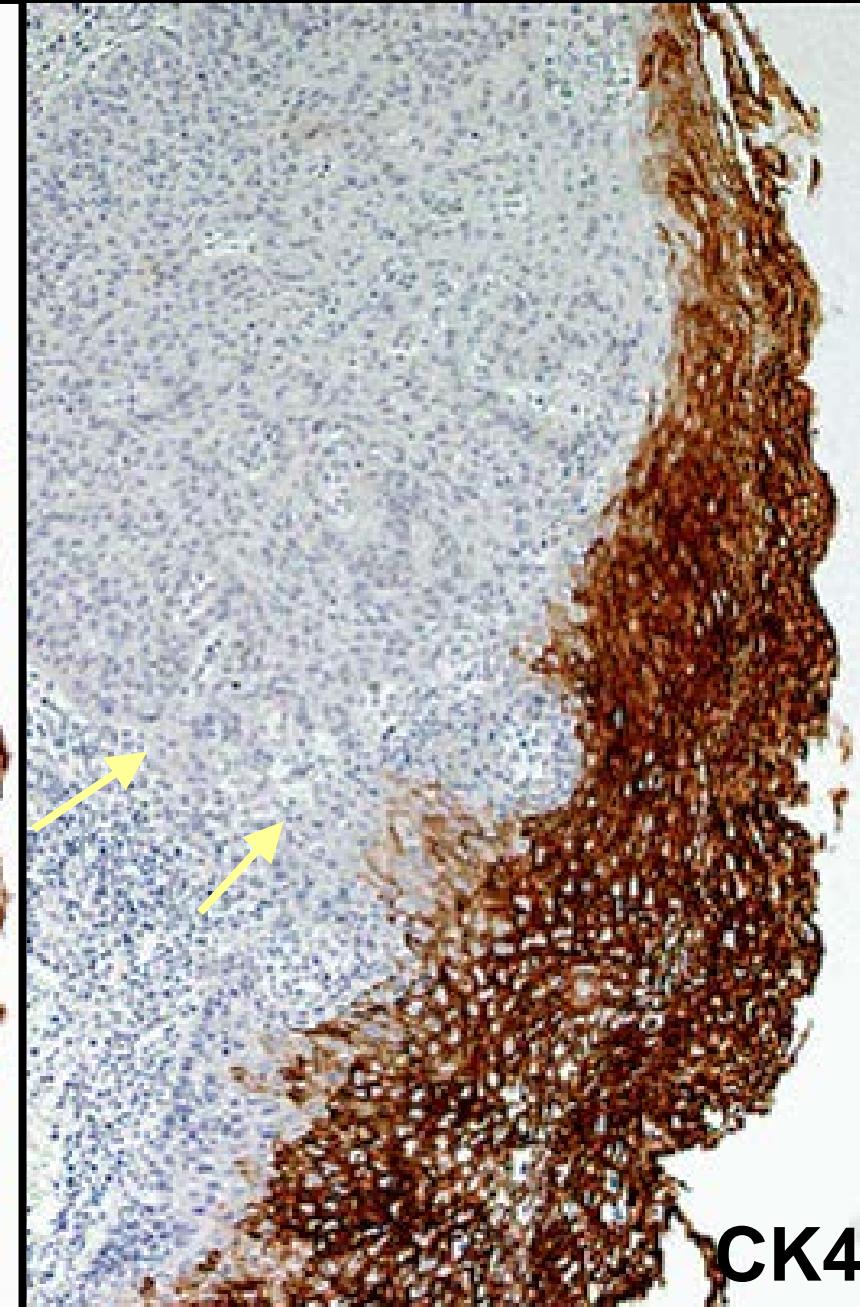
	1	4	5	14	17	19	7	20	8
Neutral/Basic (B, class II)	10		13						18
Acidic (A, class I)									
<b>Squamous cell carcinoma</b>	+	+	+	++	++	+	+	-	+
Transitional cell tumour	-	+	+	+	+	+	++	++	++
Malignant mesothelioma	-	-	-	++	++	+	++	+	-
Adenocarcinoma: complex epithelia (lung, breast)	-	-	-	(+)	(+)	(+)	++	++	-
Adenocarc.: biliary tract, pancr., endom., ovary	-	-	-	(+)	(+)	(+)	++	++	(+)
Adenocarc.: stomach	-	-	-	-	-	-	++	+	+
Adenocarc.: intestine	-	-	-	-	-	-	++	+	++
Hepatocellular carcinoma									
Renal cell carcinoma	-	-	-	-	-	-	-	+	-
Endocrine tumours: carcinoids	-	-	-	-	-	-	+	+	-
- Merkel cell carcinoma	-	-	-	-	-	-	+	-	++
- Thyroid carcinoma	-	-	-	-	-	-	+	++	-

# Cytokeratins in squamous cell carcinoma

esophagus



CK5

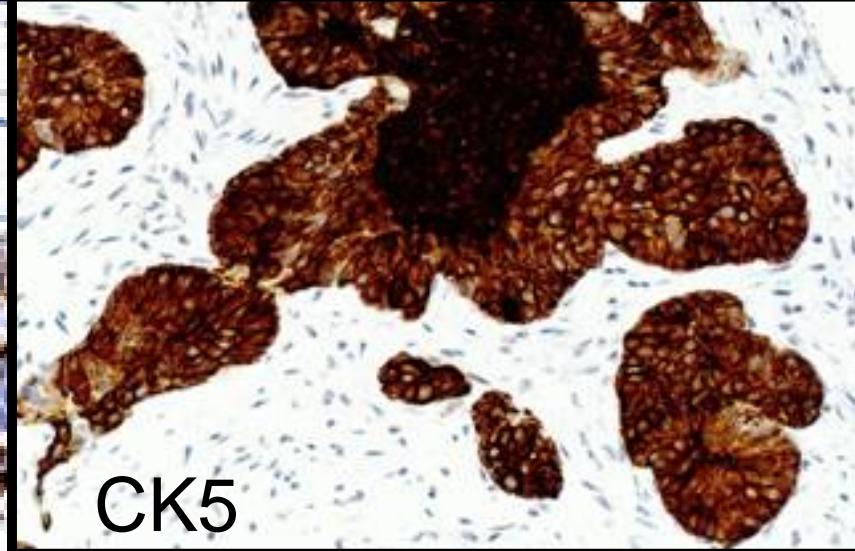
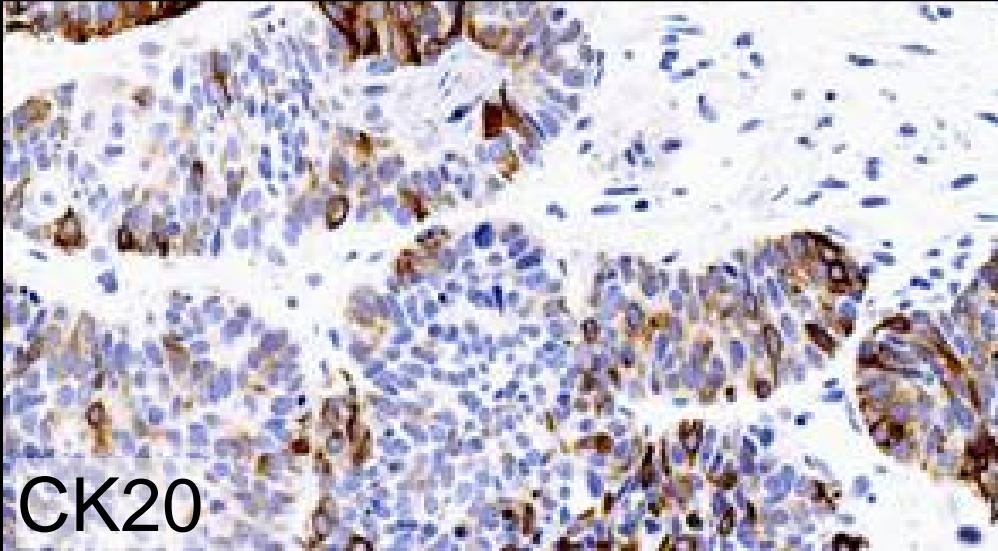
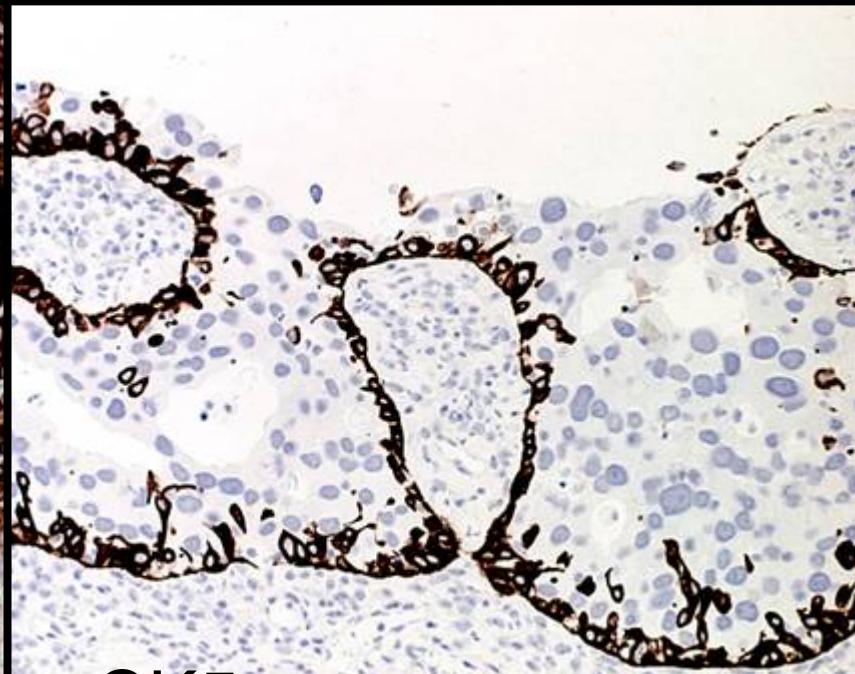
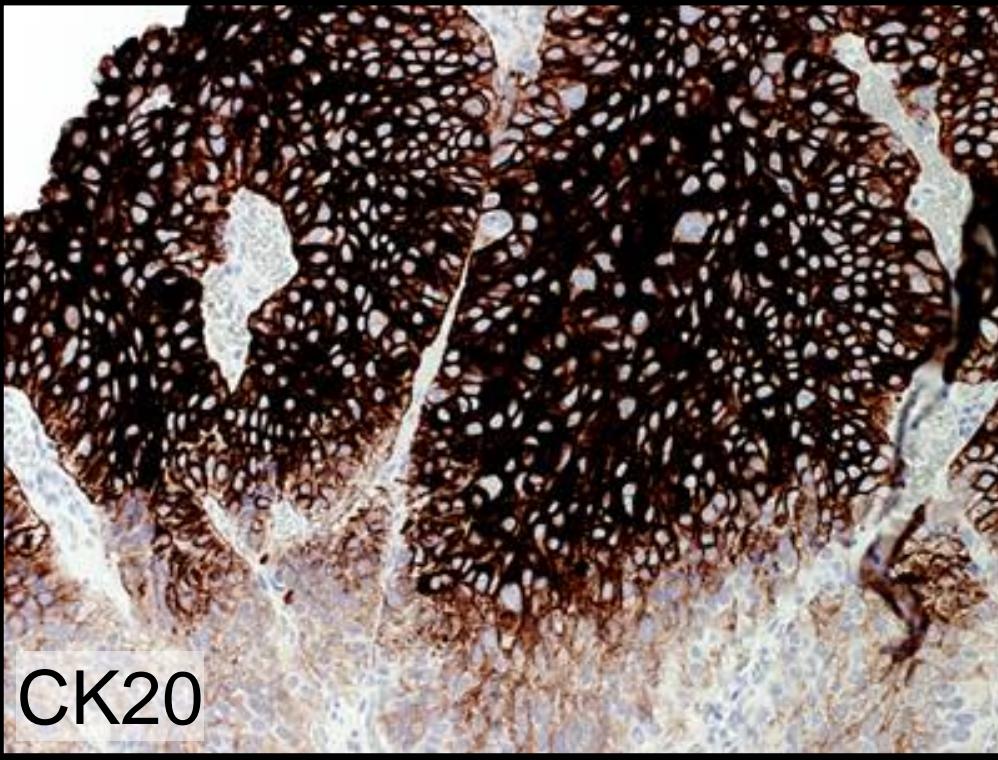


CK4

# Cytokeratins in urothelial carcinoma

	1	4	13	5	14	17	19	7	20	8
Neutral/Basic (B, class II)	10									18
Acidic (A, class I)										
Squamous cell carcinoma	+	+	+	++	++	+	+	+	-	+
<b>Transitional cell tumour</b>	-	+	+	<b>++</b>	<b>+ !</b>	<b>+ !</b>	<b>++</b>	<b>++</b>	<b>++</b>	<b>++</b>
Malignant mesothelioma	-	-	-	++	++	+	++	+	-	++
Adenocarcinoma: complex epithelia (lung, breast)	-	-	-	(+)	(+)	(+)	++	++	-	++
Adenocarc.: biliary tract, pancr., endom., ovary	-	-	-	(+)	(+)	(+)	++	++	(+)	++
Adenocarc.: stomach	-	-	-	-	-	-	++	+	+	++
Adenocarc.: intestine	-	-	-	-	-	-	++	+	++	++
Hepatocellular carcinoma										
Renal cell carcinoma	-	-	-	-	-	-	-	+	-	++
Endocrine tumours: carcinoids	-	-	-	-	-	-	+	+	-	++
- Merkel cell carcinoma	-	-	-	-	-	-	+	-	++	++
- Thyroid carcinoma	-	-	-	-	-	-	+	++	-	++

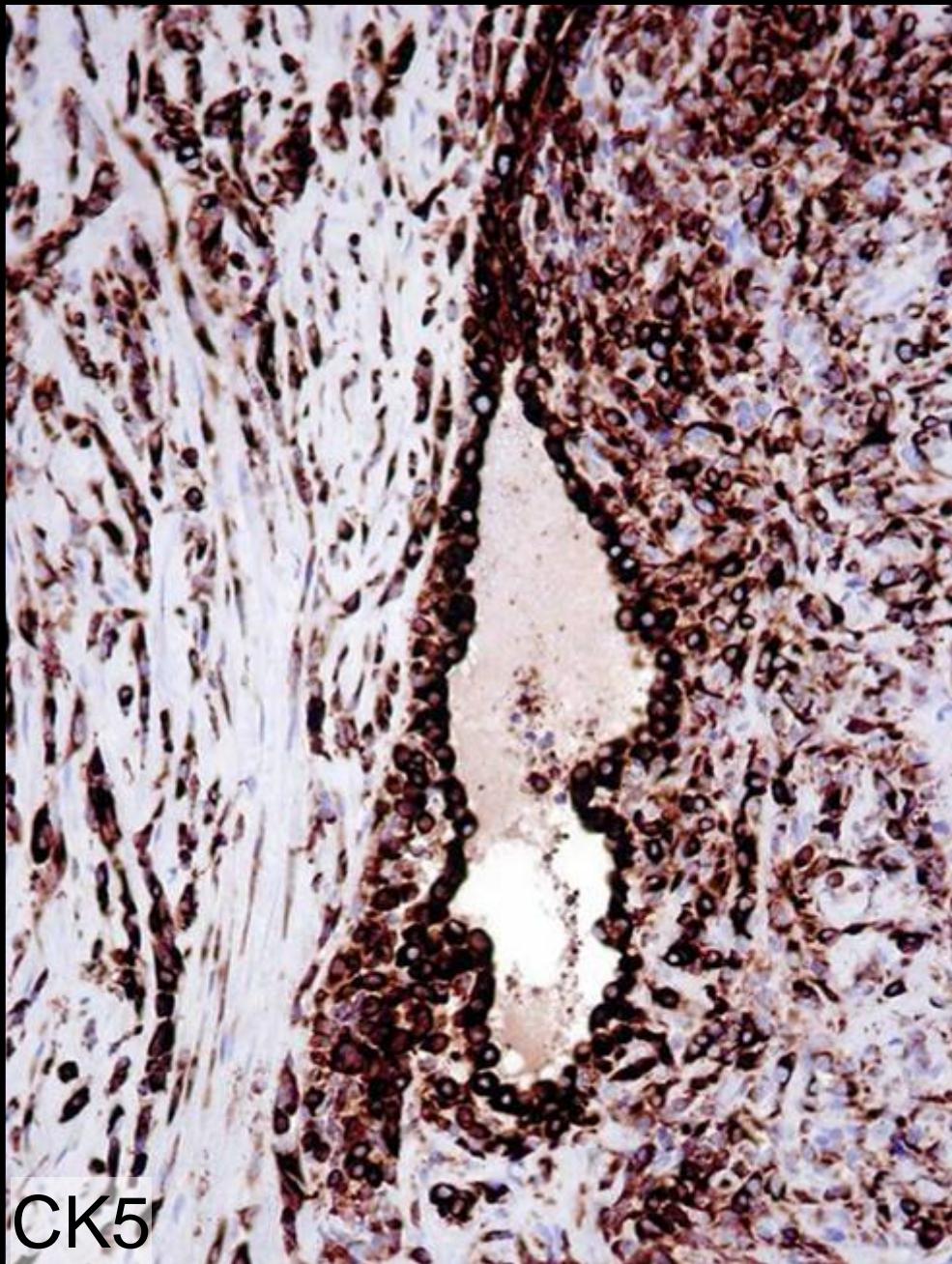
# Cytokeratins in urothelial carcinoma



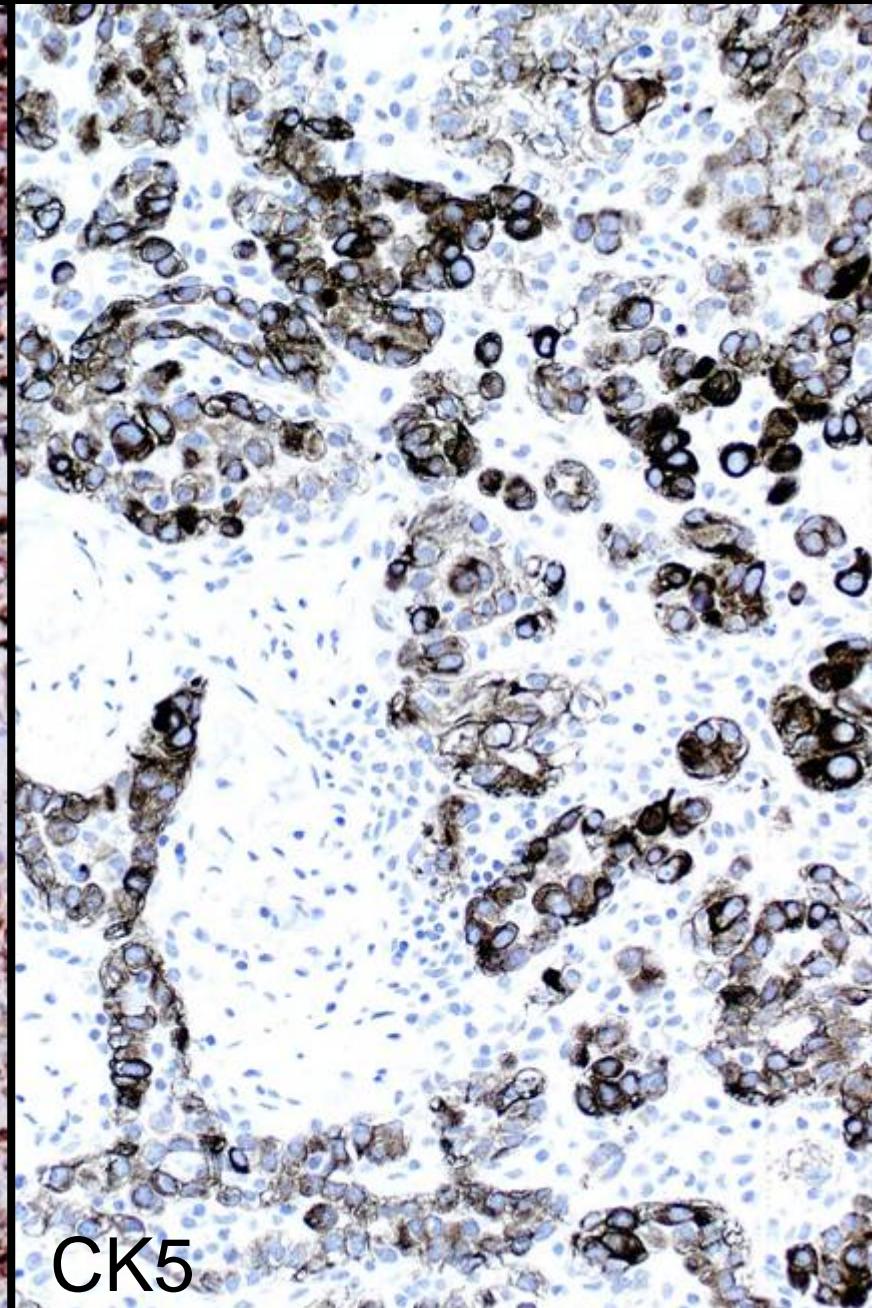
# Cytokeratins in malignant mesothelioma

	1 10	4	13	5	14	17	19	7	20	8 18
Neutral/Basic (B, class II)										
Acidic (A, class I)										
Squamous cell carcinoma	(+)	+	+	++	++	(+)	(+)	(+)	-	(+)
Transitional cell tumour	-	+	+	+	+	+	++	++	++	++
<b>Malignant mesothelioma</b>	-	-	-	++	++	+	++	+	-	++
Adenocarcinoma: complex epithelia (lung, breast)	-	-	-	(+)	(+)	(+)	++	++	-	++
Adenocarc.: biliary tract, pancr., endom., ovary	-	-	-	(+)	(+)	(+)	++	++	(+)	++
Adenocarc.: stomach	-	-	-	-	-	-	++	+	+	++
Adenocarc.: intestine	-	-	-	-	-	-	++	+	++	++
Hepatocellular carcinoma										
Renal cell carcinoma	-	-	-	-	-	-	-	+	-	++
Endocrine tumours: carcinoids	-	-	-	-	-	-	+	+	-	++
- Merkel cell carcinoma	-	-	-	-	-	-	+	-	++	++
- Thyroid carcinoma	-	-	-	-	-	-	+	++	-	++

# Cytokeratins in malignant mesothelioma



CK5

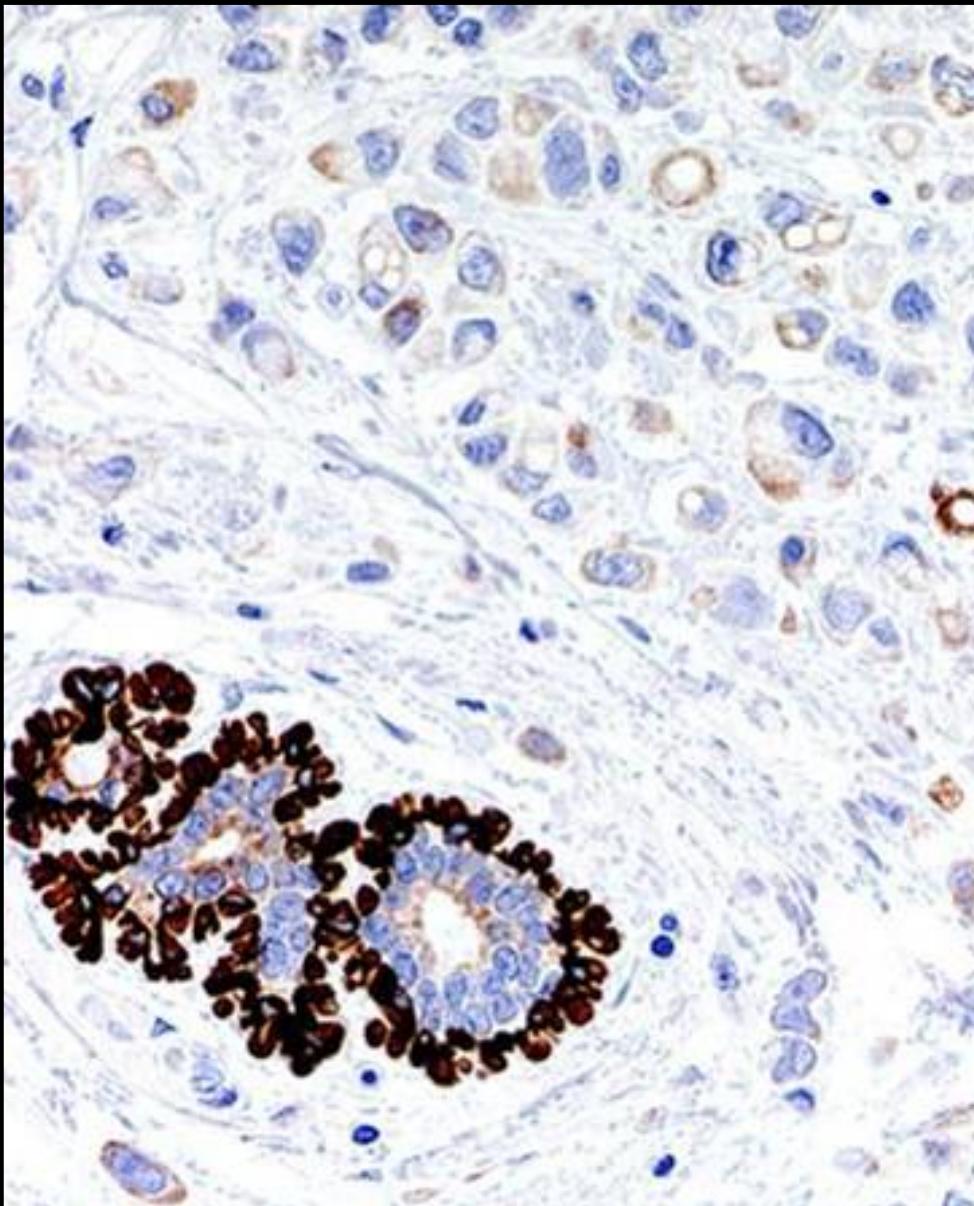


CK5

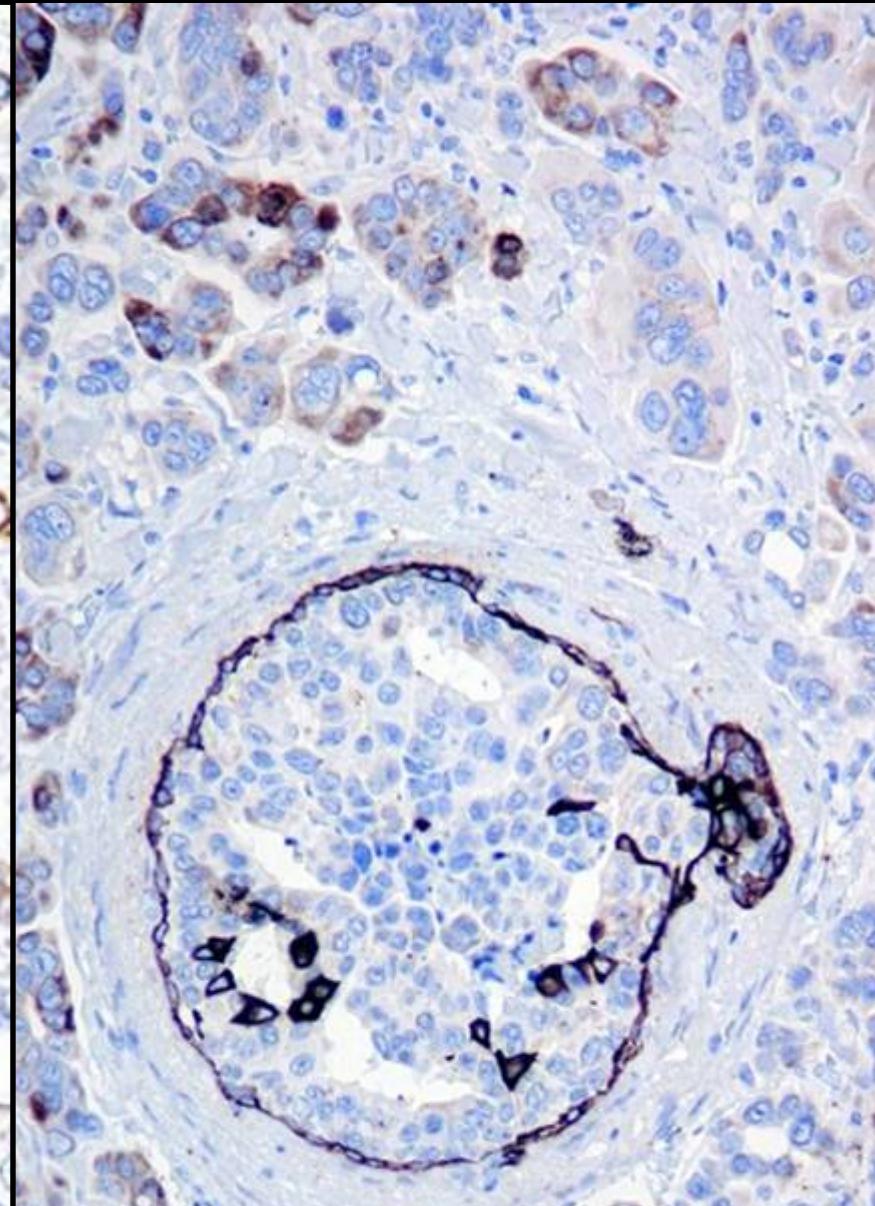
# Cytokeratins in adenocarcinomas

	1 10	4	13	5	14	17	19	7	20	8 18
Neutral/Basic (B, class II)										
Acidic (A, class I)										
Squamous cell carcinoma	(+)	+	+	++	++	(+)	(+)	(+)	-	(+)
Transitional cell tumour	-	+	+	+	+	+	++	++	++	++
Malignant mesothelioma	-	-	-	++	++	+	++	+	-	++
<b>Adenocarcinoma: complex epith. (lung, breast)</b>	-	-	-	(+)	(+)	(+)	++	++	-	++
Adenocarc.: biliary tract, pancr., endom., ovary	-	-	-	(+)	(+)	(+)	++	++	(+)	++
Adenocarc.: stomach	-	-	-	-	-	-	++	+	+	++
Adenocarc.: intestine	-	-	-	-	-	-	++	+	++	++
Hepatocellular carcinoma										
Renal cell carcinoma	-	-	-	-	-	-	-	+	-	++
Endocrine tumours: carcinoids	-	-	-	-	-	-	+	+	-	++
- Merkel cell carcinoma	-	-	-	-	-	-	+	-	++	++
- Thyroid carcinoma	-	-	-	-	-	-	+	++	-	++

# Cytokeratins in adenocarcinomas



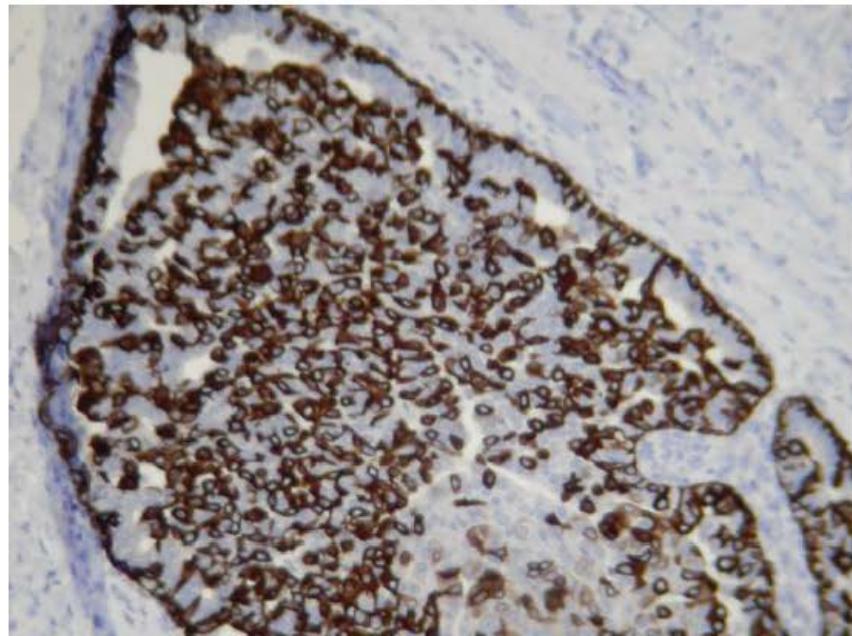
CK5: Breast lob. carcinoma



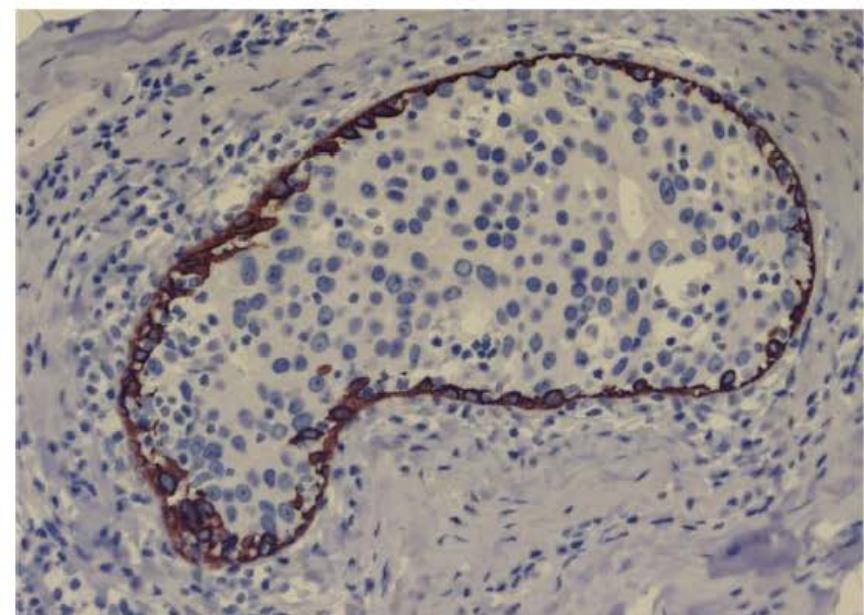
CK5: Breast duct. carc.

# Ductal Carcinoma In Situ

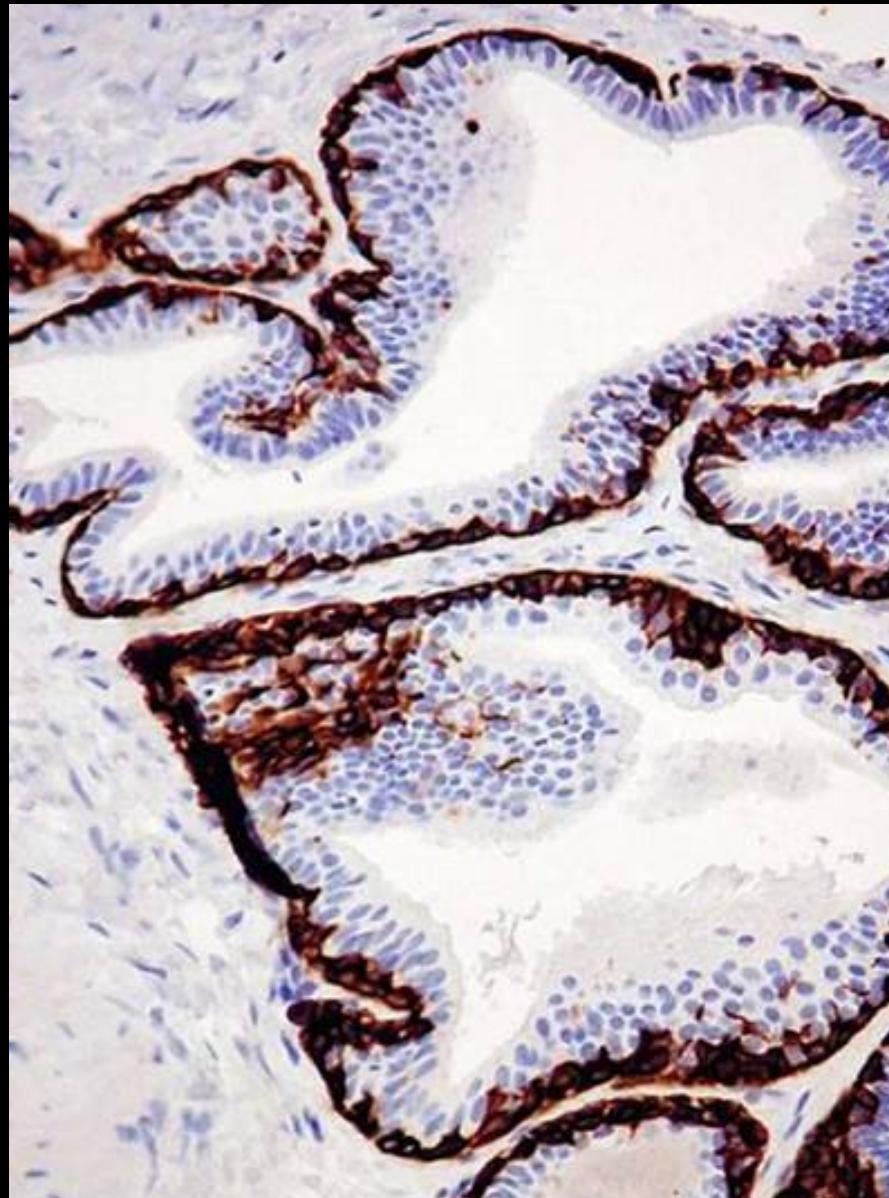
**CK14 Ductal Hyperplasia (UDH)**



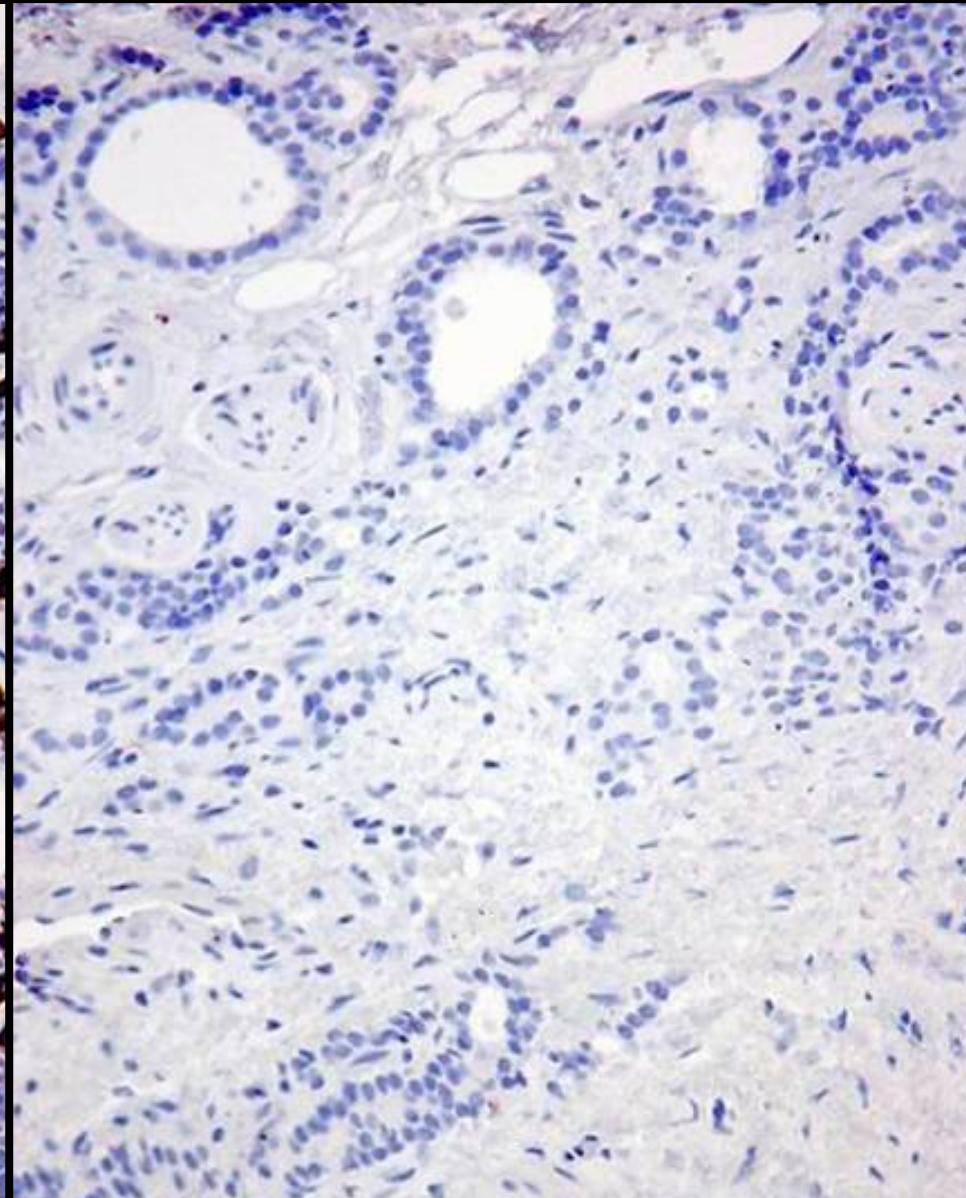
**CK14 Ductal Carcinoma In Situ**



# Cytokeratins in adenocarcinomas



CK5: Prostate hyperplasia

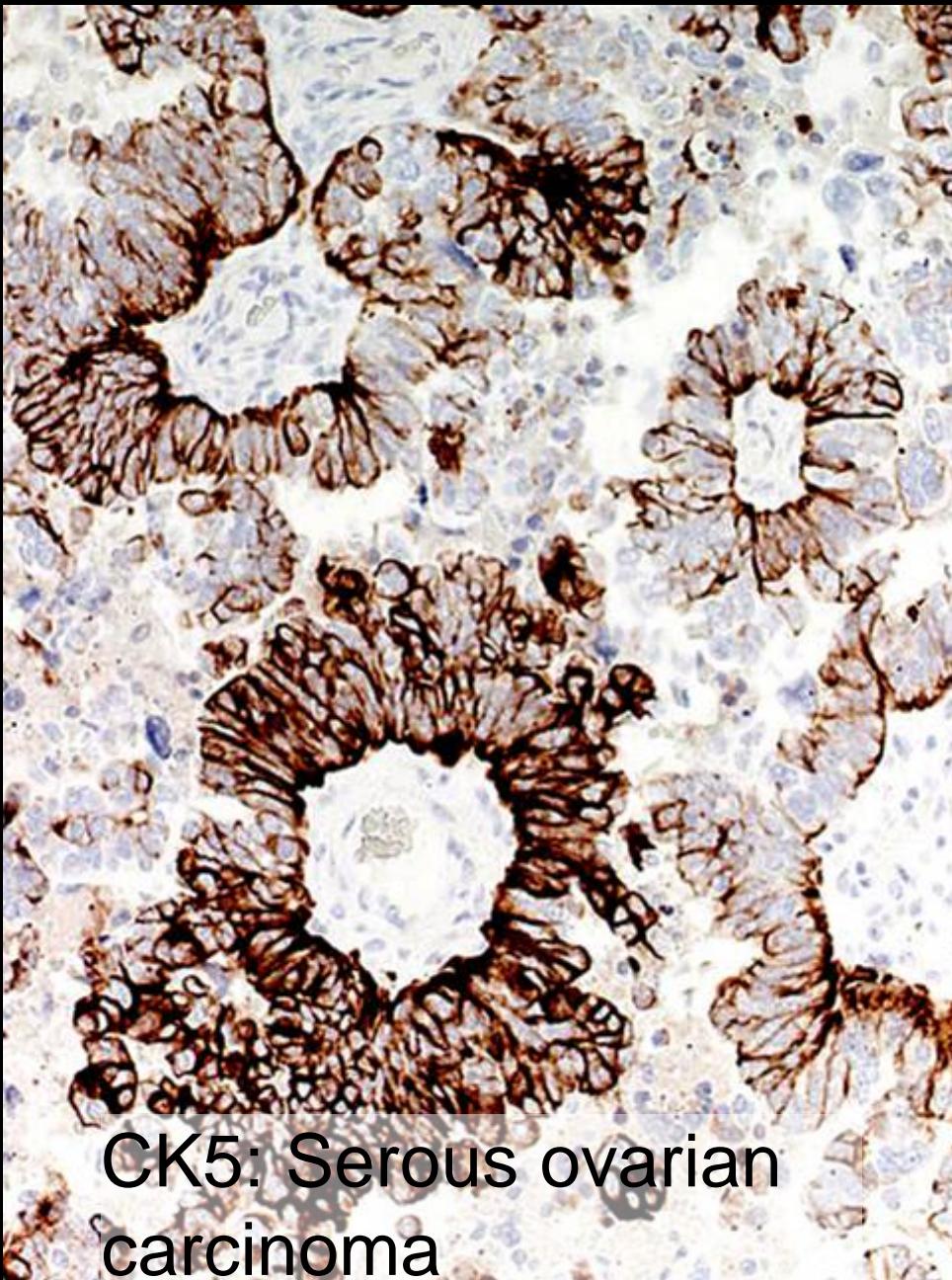


CK5: prostate adenocarc.

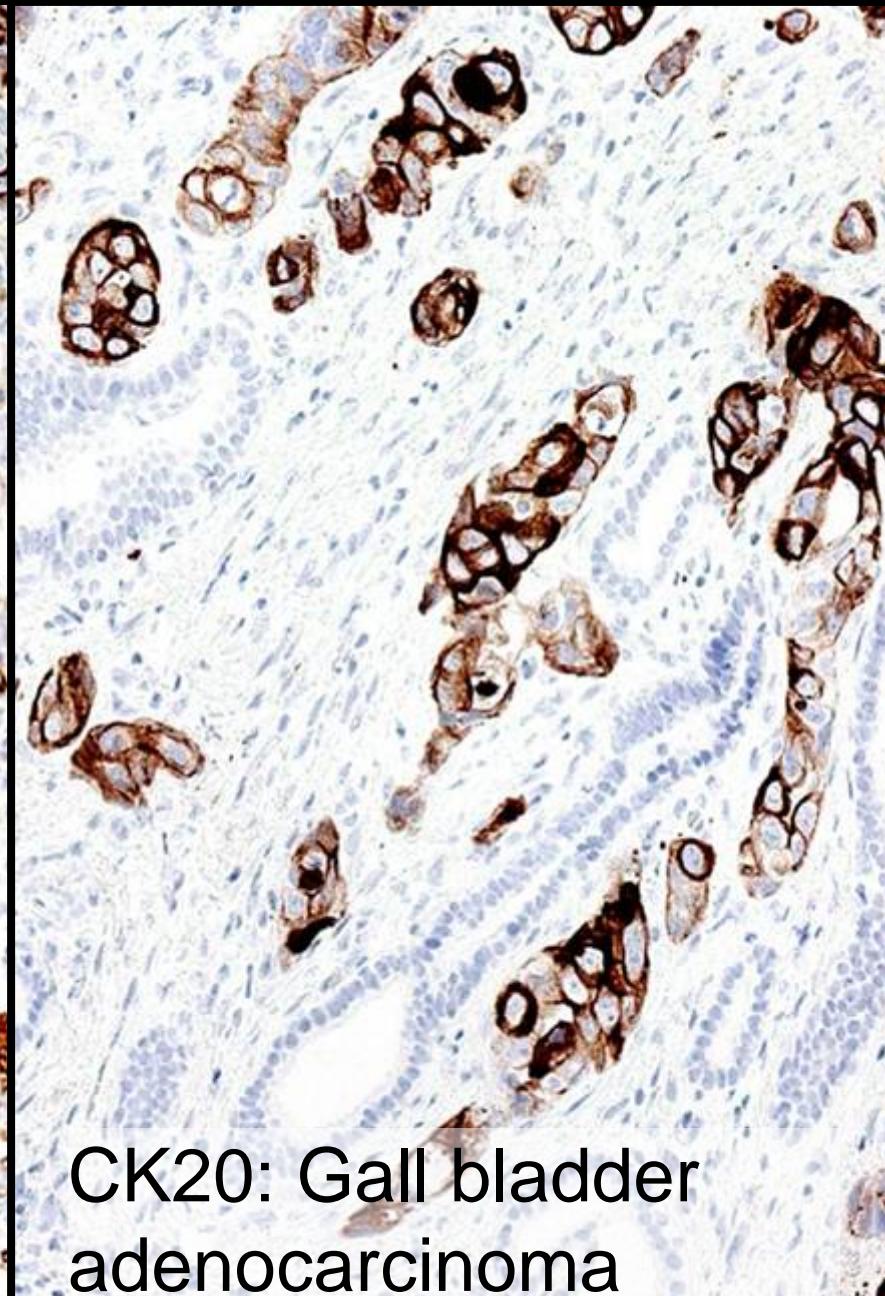
# Cytokeratins in adenocarcinomas

	1 10	4	13	5	14	17	19	7	20	8 18
Neutral/Basic (B, class II)										
Acidic (A, class I)										
Squamous cell carcinoma	(+)	+	+	++	++	(+)	(+)	(+)	-	(+)
Transitional cell tumour	-	+	+	+	+	+	++	++	++	++
Malignant mesothelioma	-	-	-	++	++	+	++	+	-	++
Adenocarcinoma: complex epith. (lung, breast)	-	-	-	(+)	(+)	(+)	++	++	-	++
<b>Adenocarc.: biliary tract, pancr., endom., ovary</b>	-	-	-	(+) !	(+) !	(+) !	++	++	(+) !	++
Adenocarc.: stomach	-	-	-	-	-	-	++	+	+	++
Adenocarc.: intestine	-	-	-	-	-	-	++	+	++	++
Hepatocellular carcinoma										
Renal cell carcinoma	-	-	-	-	-	-	-	+	-	++
Endocrine tumours: carcinoids	-	-	-	-	-	-	+	+	-	++
- Merkel cell carcinoma	-	-	-	-	-	-	+	-	++	++
- Thyroid carcinoma	-	-	-	-	-	-	+	++	-	++

# Cytokeratins in adenocarcinomas



CK5: Serous ovarian carcinoma

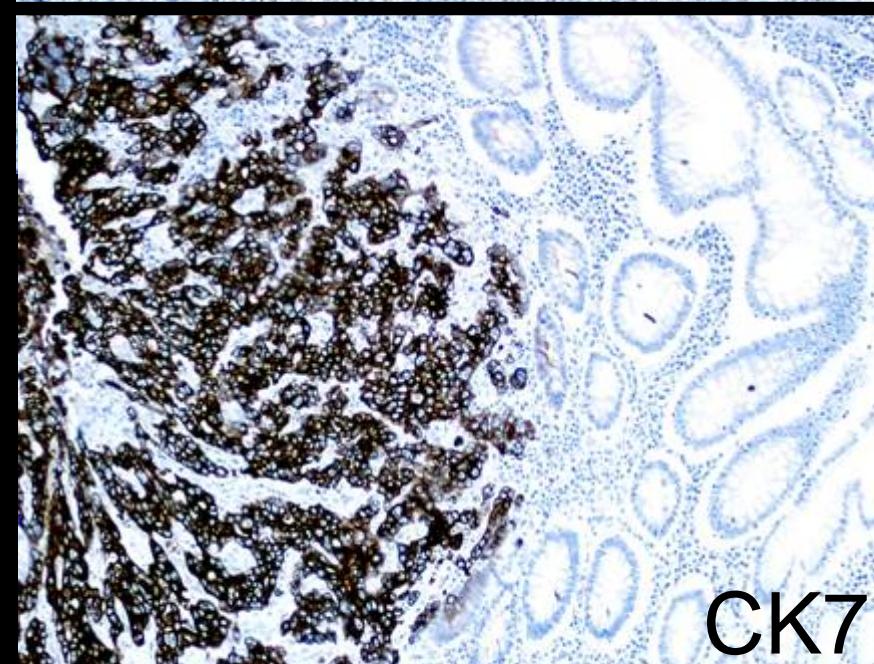
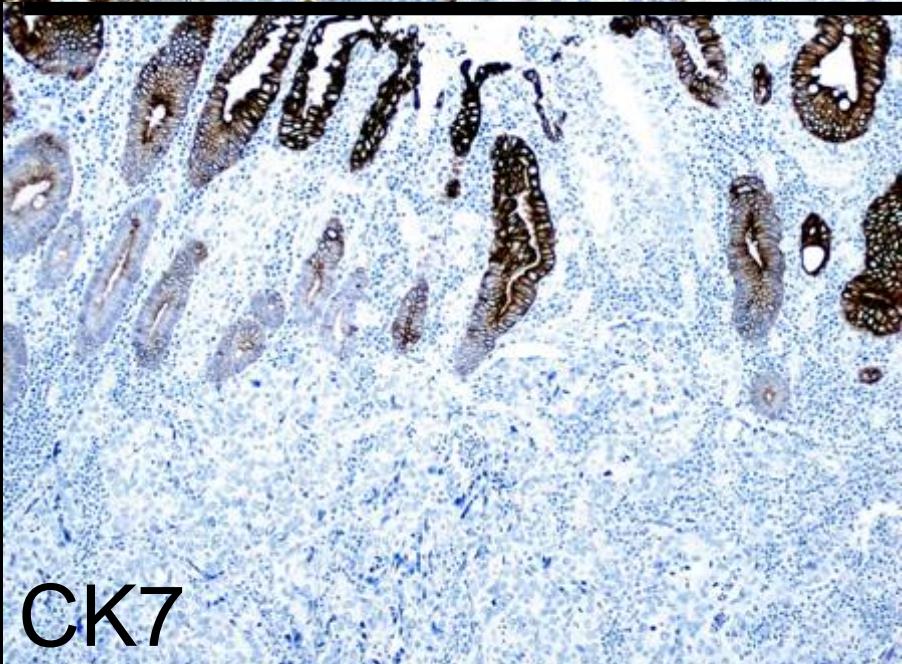
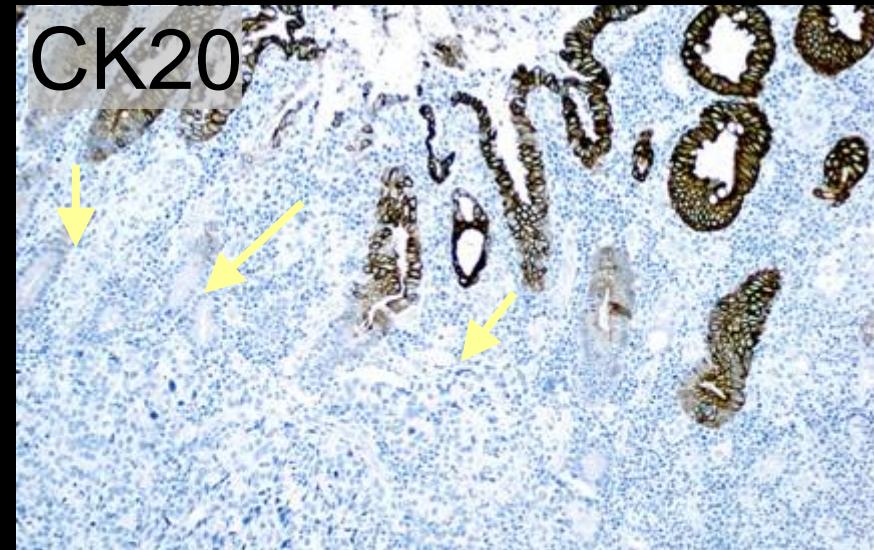
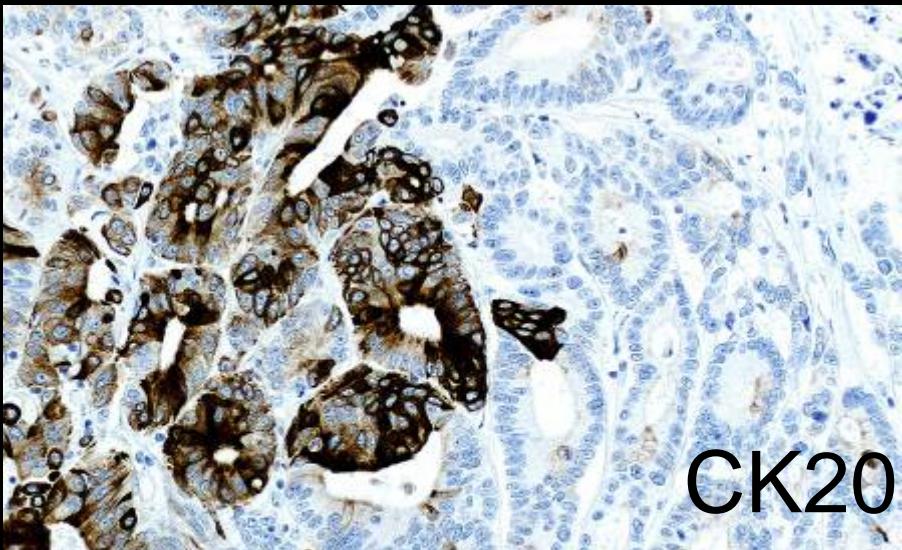


CK20: Gall bladder adenocarcinoma

# Cytokeratins in adenocarcinomas

	1 10	4	13	5	14	17	19	7	20	8 18
Neutral/Basic (B, class II)										
Acidic (A, class I)										
Squamous cell carcinoma	(+)	+	+	++	++	(+)	(+)	(+)	-	(+)
Transitional cell tumour	-	+	+	+	+	+	++	++	++	++
Malignant mesothelioma	-	-	-	++	++	+	++	+	-	++
Adenocarcinoma: complex epith. (lung, breast)	-	-	-	(+)	(+)	(+)	++	++	-	++
Adenocarc.: biliary tract, pancr., endom., ovary	-	-	-	(+)	(+)	(+)	++	++	(+)	++
<b>Adenocarc.: stomach</b>	-	-	-	-	-	-	++	+	+	++
<b>Adenocarc.: intestine</b>	-	-	-	-	-	-	++	+	++	++
Hepatocellular carcinoma										
Renal cell carcinoma	-	-	-	-	-	-	-	+	-	++
Endocrine tumours: carcinoids	-	-	-	-	-	-	+	+	-	++
- Merkel cell carcinoma	-	-	-	-	-	-	+	-	++	++
- Thyroid carcinoma	-	-	-	-	-	-	+	++	-	++

# Cytokeratins in adenocarcinomas



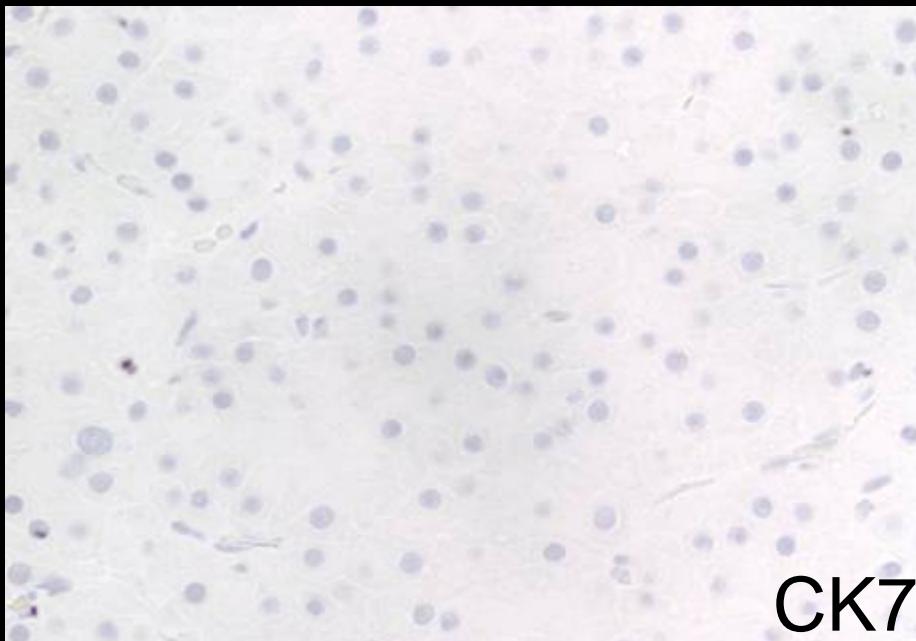
Colon: Typical

Colon: Deviant

# Cytokeratins in adenocarcinomas

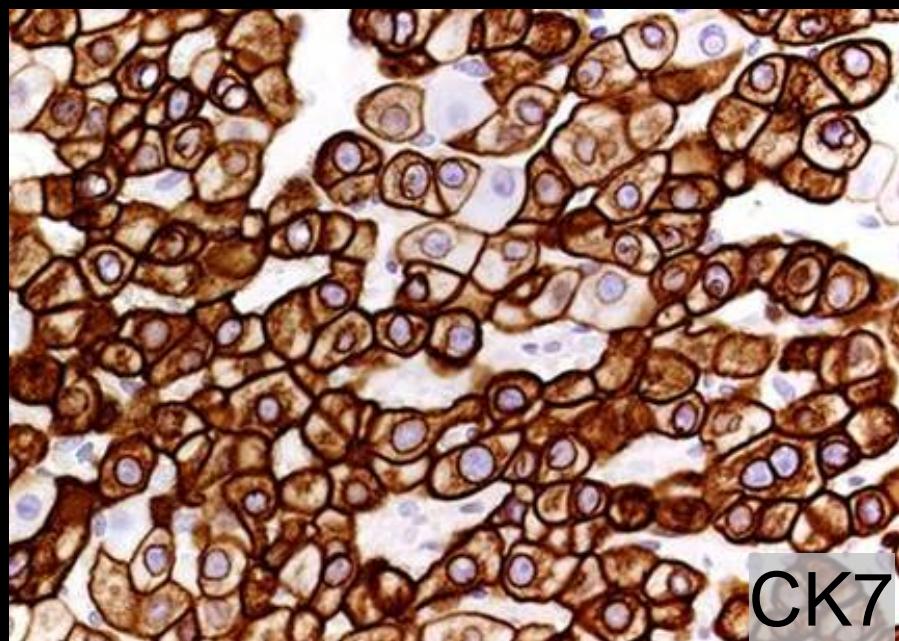
	1 10	4	13	5	14	17	19	7	20	8 18
Neutral/Basic (B, class II)										
Acidic (A, class I)										
Squamous cell carcinoma	(+)	+	+	++	++	(+)	(+)	(+)	-	(+)
Transitional cell tumour	-	+	+	+	+	+	++	++	++	++
Malignant mesothelioma	-	-	-	++	++	+	++	+	-	++
Adenocarcinoma: complex epith. (lung, breast)	-	-	-	(+)	(+)	(+)	++	++	-	++
Adenocarc.: biliary tract, pancr., endom., ovary	-	-	-	(+)	(+)	(+)	++	++	(+)	++
Adenocarc.: stomach	-	-	-	-	-	-	++	+	+	++
Adenocarc.: intestine	-	-	-	-	-	-	++	+	++	++
<b>Hepatocellular carcinoma</b>										
<b>Renal cell carcinoma</b>	-	-	-	-	-	-	-	+	-	++
Endocrine tumours: carcinoids	-	-	-	-	-	-	+	+	-	++
- Merkel cell carcinoma	-	-	-	-	-	-	+	-	++	++
- Thyroid carcinoma	-	-	-	-	-	-	+	++	-	++

# Cytokeratins in adenocarcinomas



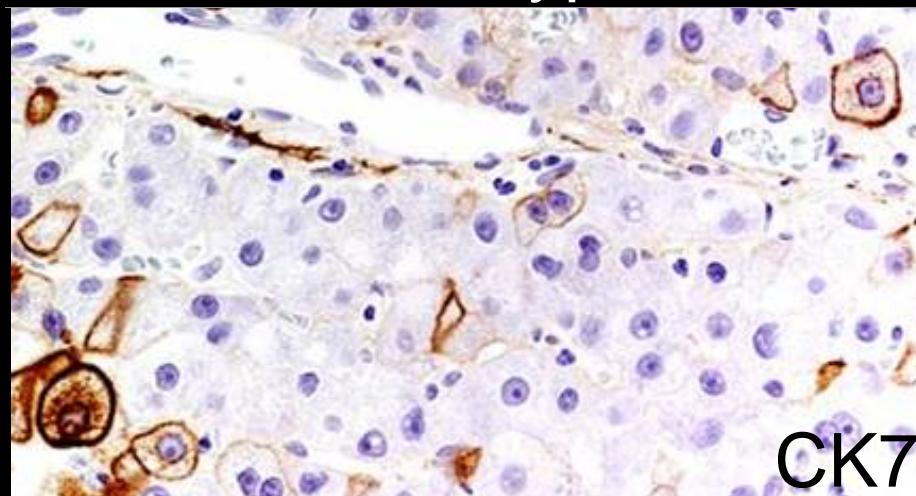
CK7

HCC: typical



CK7

HCC: deviant



CK7



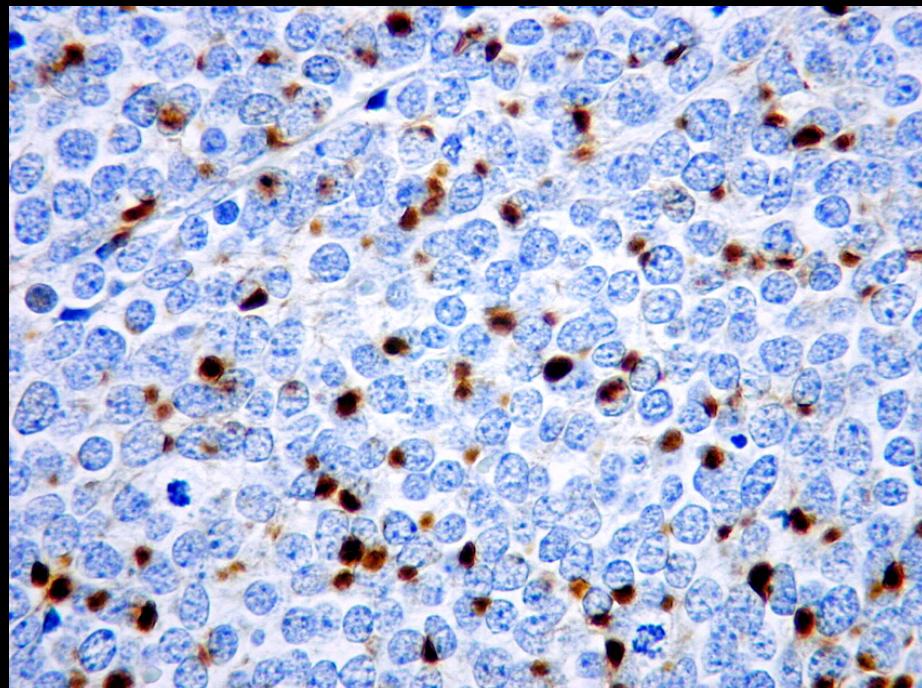
Mallory body

CK20

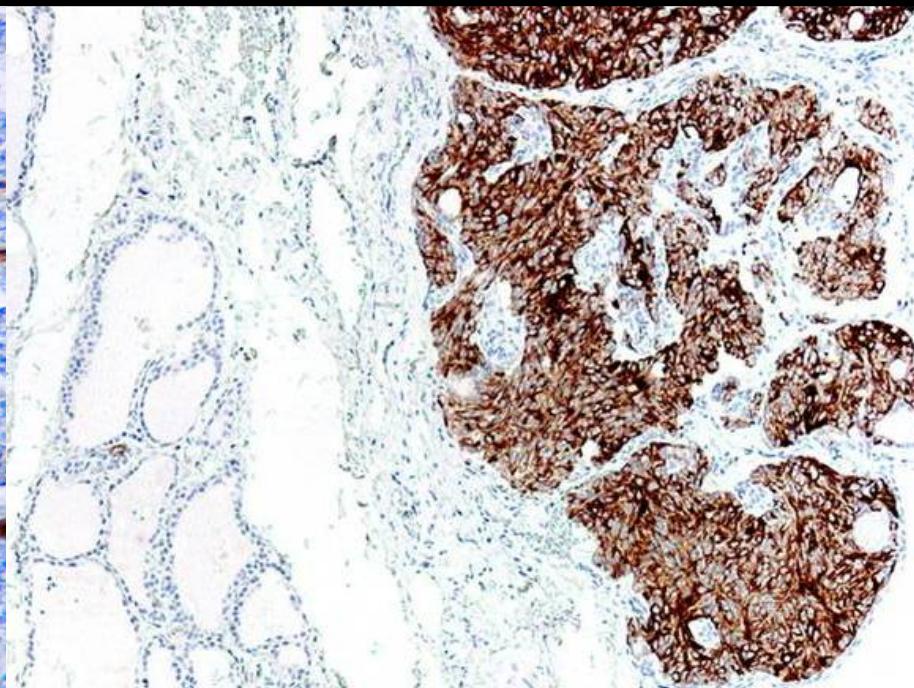
# Cytokeratins in endocrine tumours

Neutral/Basic (B, class II)	1 10	4	13	5	14	17	19	7	20	8 18
Acidic (A, class I)										
Squamous cell carcinoma	(+)	+	+	++	++	(+)	(+)	(+)	-	(+)
Transitional cell tumour	-	+	+	+	+	+	++	++	++	++
Malignant mesothelioma	-	-	-	++	++	+	++	+	-	++
Adenocarcinoma: complex epith. (lung, breast)	-	-	-	(+)	(+)	(+)	++	++	-	++
Adenocarc.: biliary tract, pancr., endom., ovary	-	-	-	(+)	(+)	(+)	++	++	(+)	++
Adenocarc.: stomach	-	-	-	-	-	-	++	+	+	++
Adenocarc.: intestine	-	-	-	-	-	-	++	+	++	++
Hepatocellular carcinoma										
Renal cell carcinoma	-	-	-	-	-	-	-	+	-	++
<b>Endocr. tumours: carcinoids</b>	-	-	-	-	-	-	+	+	-	++
<b>- Merkel cell carcinoma</b>	-	-	-	-	-	-	+	-	++	++
<b>- Thyroid carcinoma</b>	-	-	-	-	-	-	+	++	-	++

# Cytokeratins in endocrine tumours



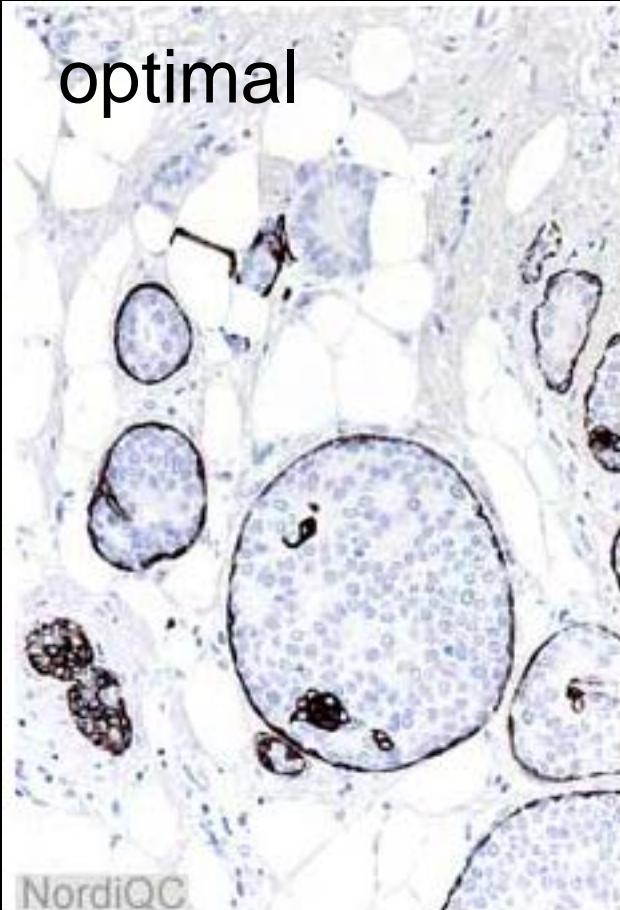
CK20: Merkel cell carc.



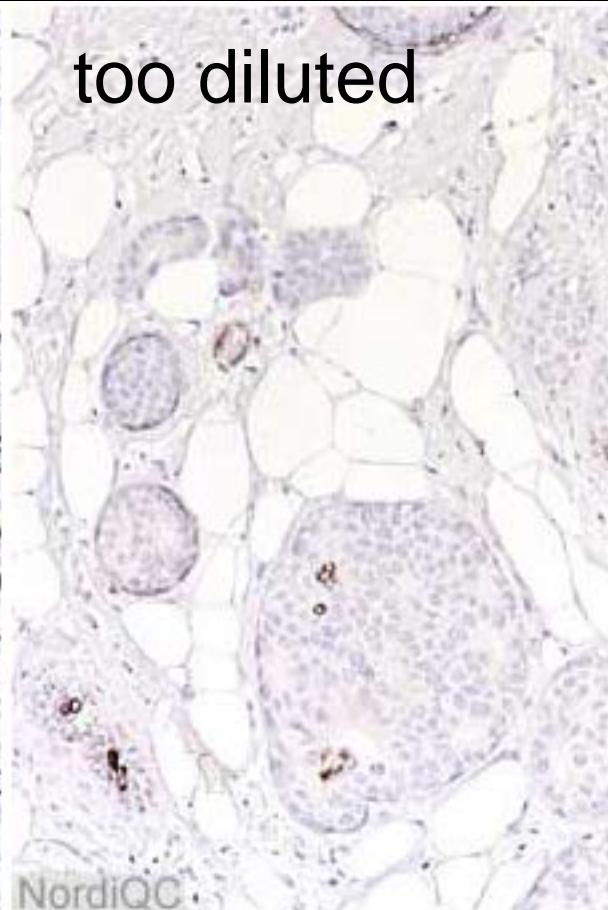
CK19: Thyr. papill. carc.

# Cytokeratins: Selection of antibodies

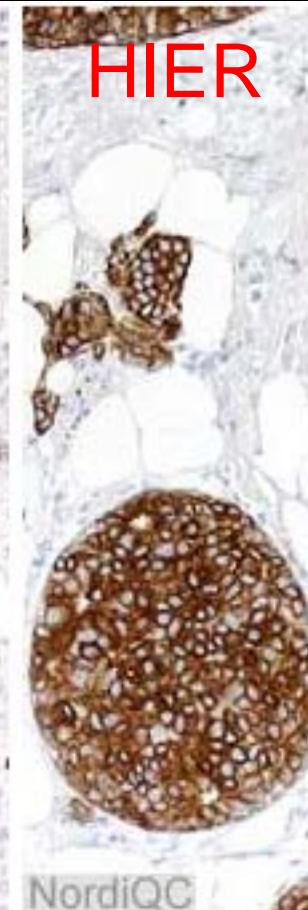
optimal



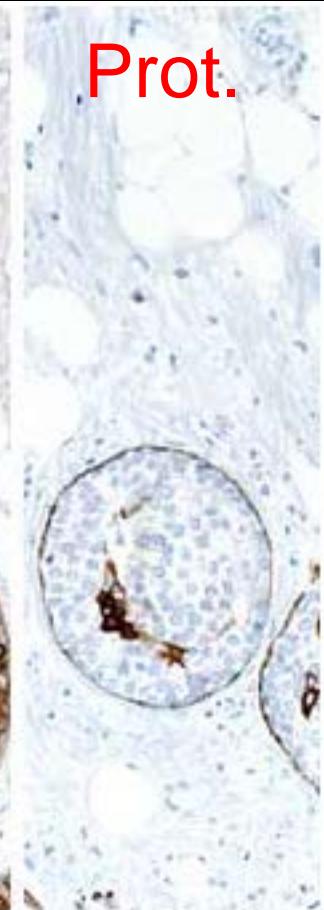
too diluted



HIER



Prot.



**CK5:** XM-26

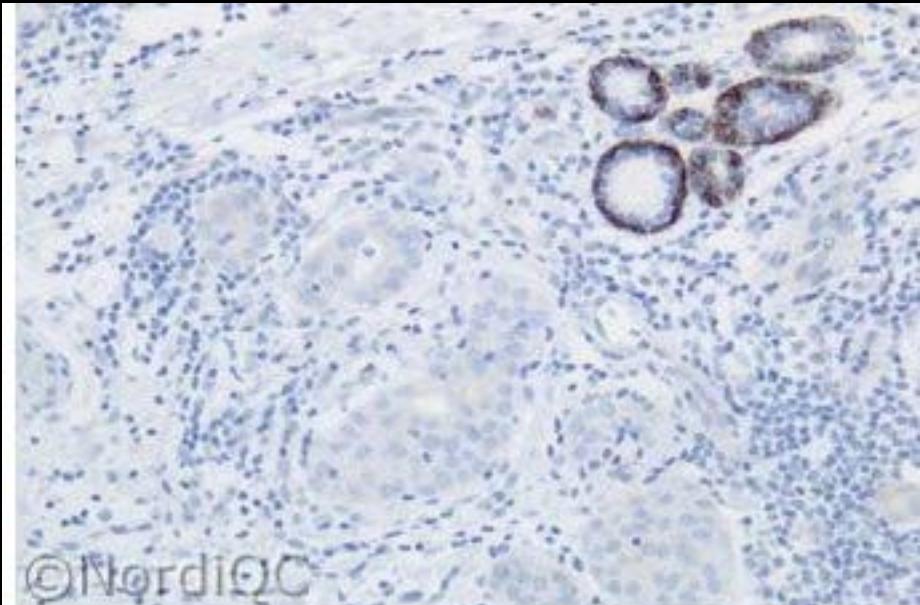
**CK5/6:** clone D5/16 B4



**34BE12:**

**CK5/14/1/10/19?**

# Cytokeratins: Selection of antibodies



**CK5:** XM-26

**CK5/6:** clone D5/16 B4



**34BE12:**

**CK5/14/1/10/19?**



## RESEARCH ARTICLE

*(Appl Immunohistochem Mol Morphol 2017;25:673–678)*

## NordiQC Assessments of Low Molecular Weight Keratin 8/18 Immunoassays

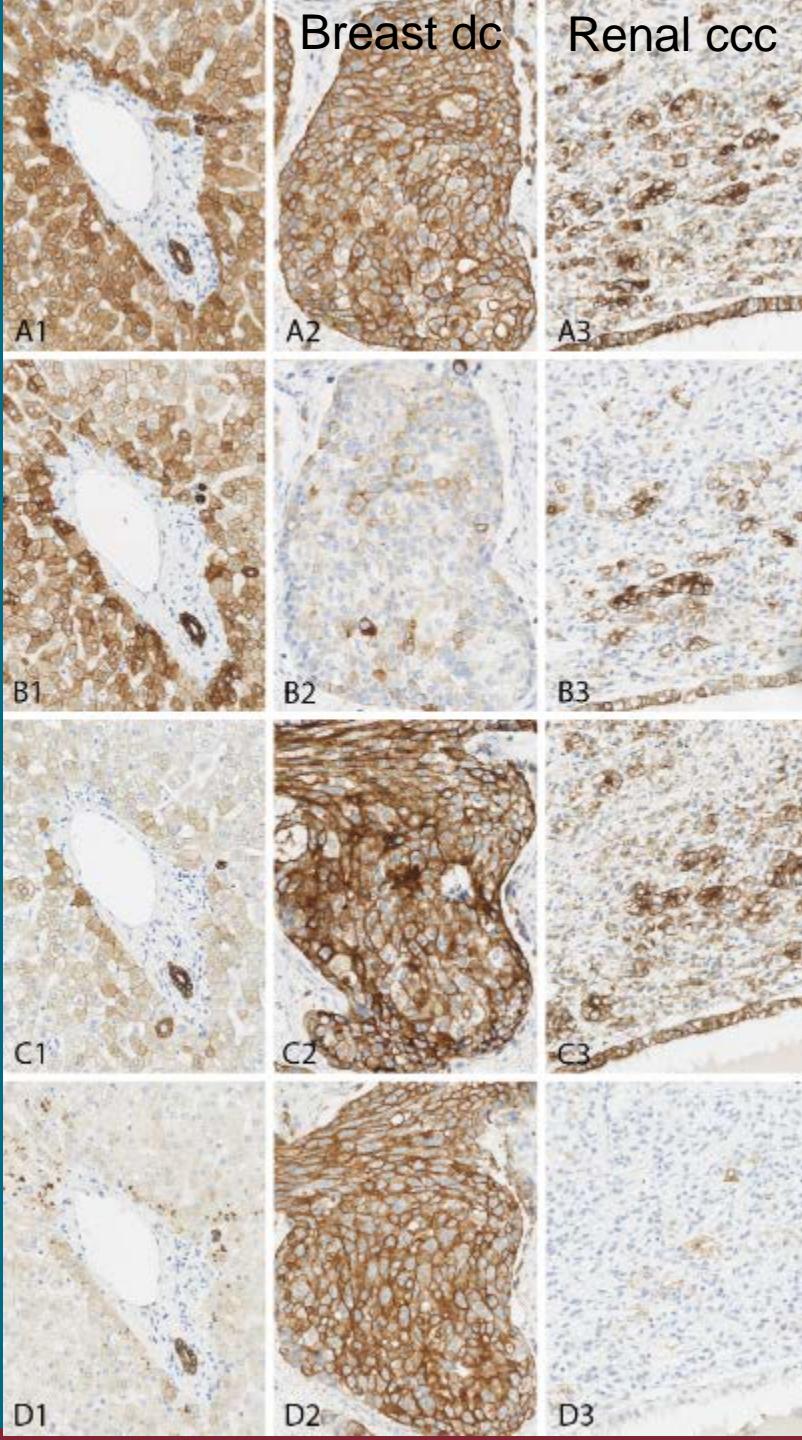
Mogens Vyberg, MD,\*† Charlotte Diernæs, MD,\* Rasmus Røge, MD,\*† and Søren Nielsen, HT\*

ISIMM-NordiQC Immunoassay Performance Assessment Series, No. 2

Clone Concentrates	Epitope	No.	% suff.
rmAb EP17 (/EP30)	K8(/K18)	17	100
mmAbs B22.1/B23.1	K8/18	12	84
mmAb DC10	K18	93	83
mmAb TS1	K8	16	75
mmAb 5D3	K8/18	88	55
mmAb CAM5.2	K8/7	59	44

Clone RTUs			
rmAbs EP17/EP30	K8/18	16	100
mmAbs B22-1/B23.1	K8/18	59	83
mmAb DC10	K18	36	83
mmAb 5D3	K8/18	16	70
mmAb CAM5.2	K8/7	35	31
mmAb 35betaH11	K8	15	5



K8: EP17 (Epitomics)

K8/18: EP17/EP30 (Agilent)

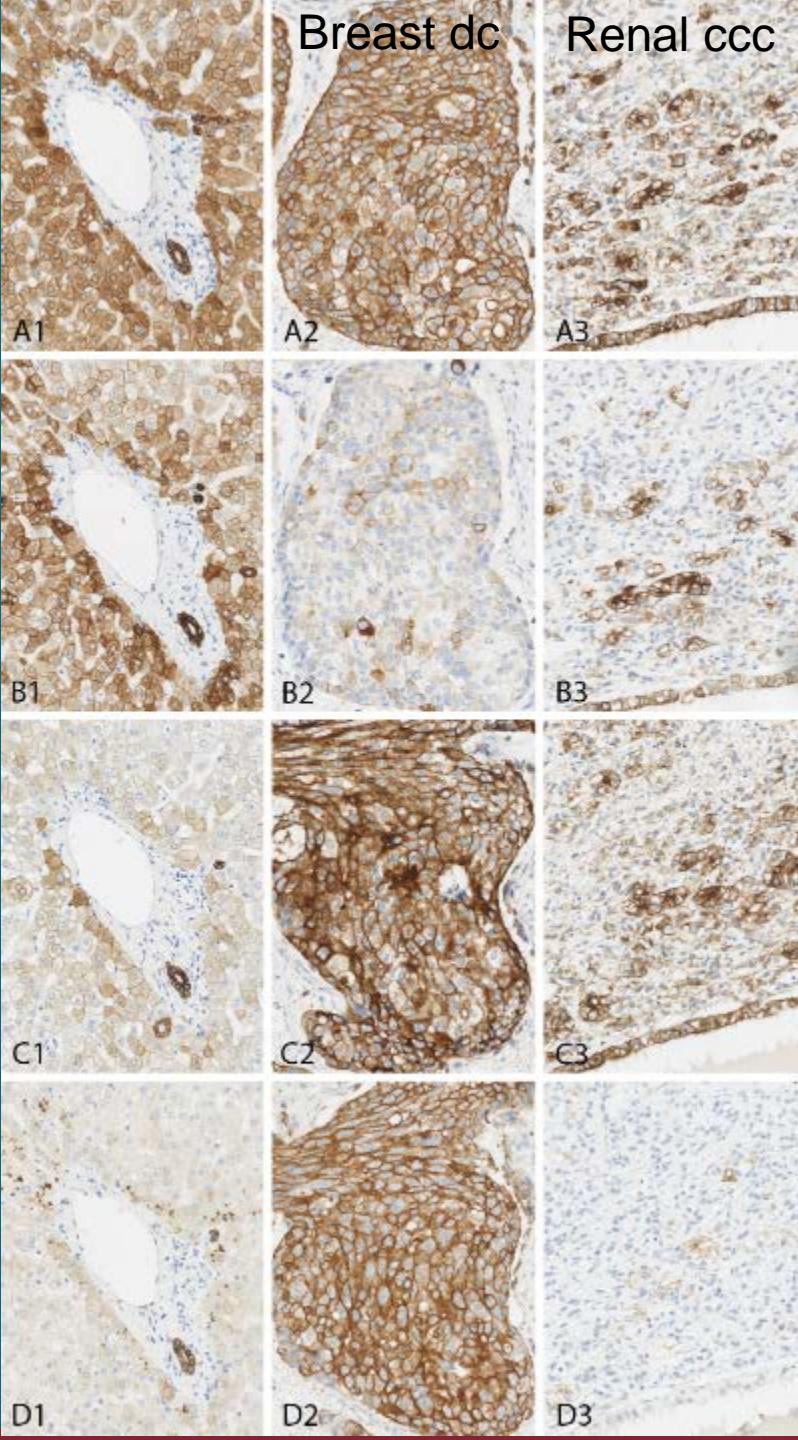
K8/18: B22.1/B23.1 (Roche, CM)



K18: DC10 (several)

K8(7): CAM5.2 (several)

K8: 35 $\beta$ H11 (Roche)



K8: EP17 (Epitomics)

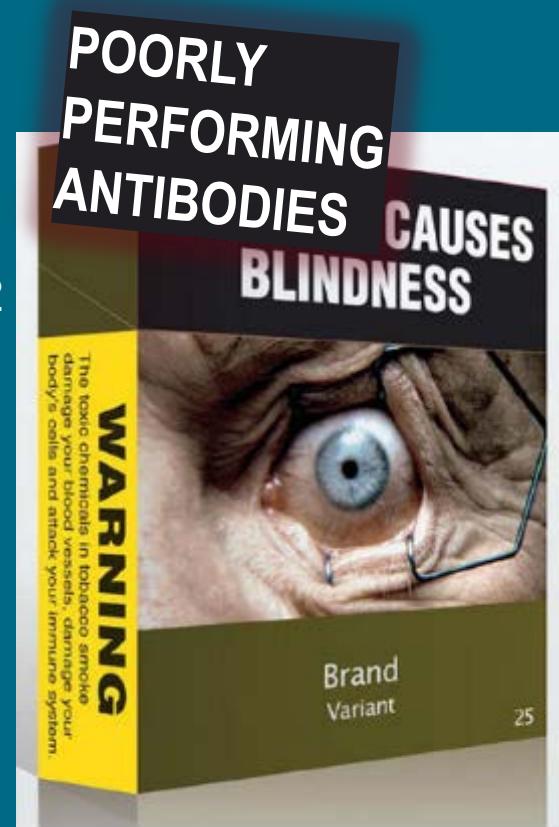
K8/18: EP17/EP30 (Agilent)

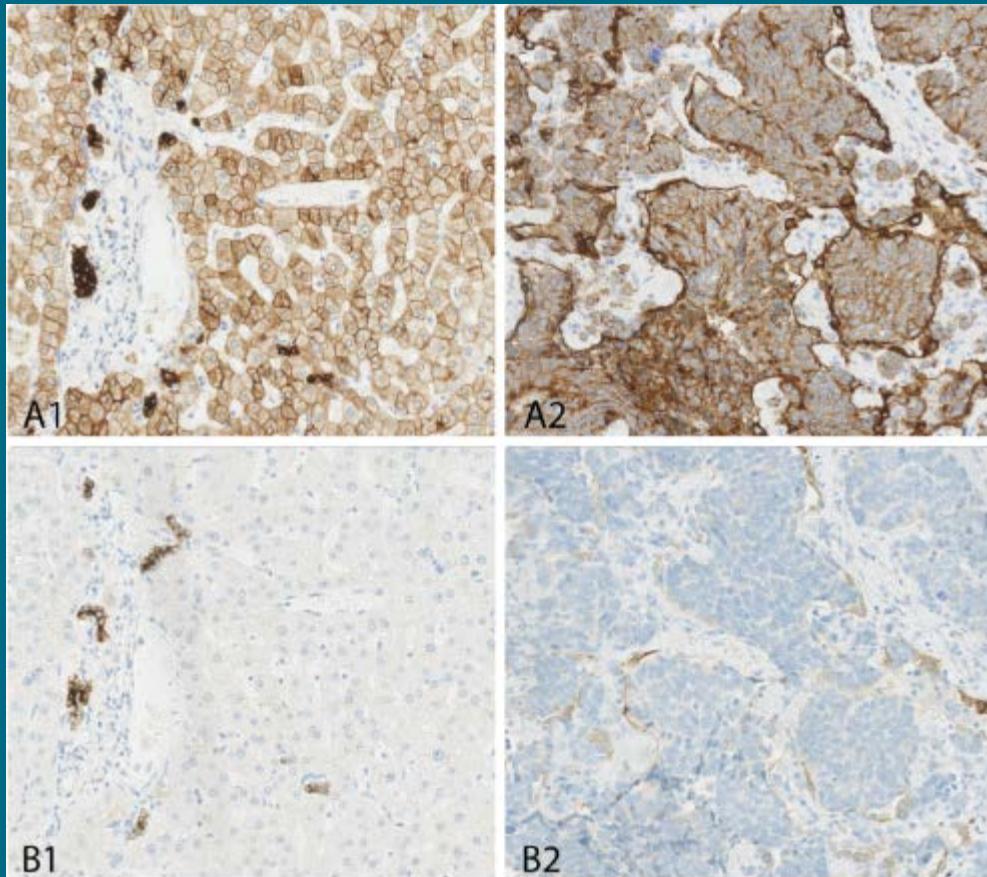
K8/18: B22.1/B23.1 (Roche, CM)

K18: DC10 (several)

K8(7): CAM5.2

K8: 35 $\beta$ H11

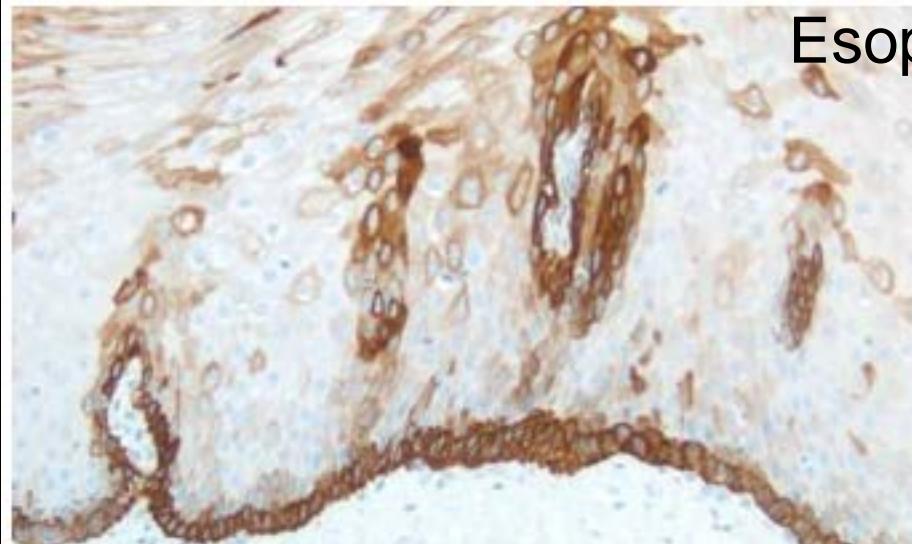




Comparison of **clone 5D3** used with optimized protocols on two platforms: **Leica Bond (A)** and **Ventana BenchMark (B)** to detect LMW Ks in serial sections of **liver (1)** and **breast ductal carcinoma (2)**.

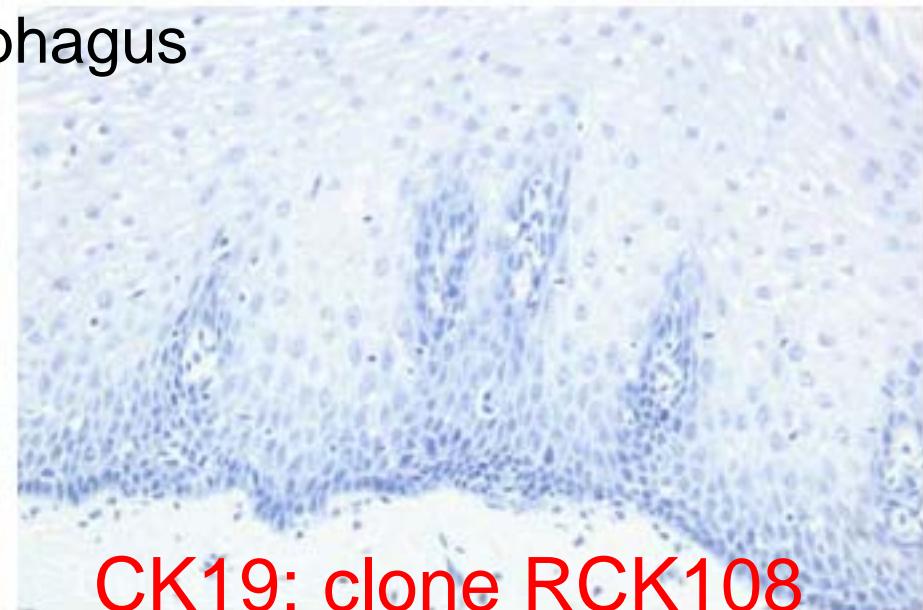
Clone 5D3 gives strong reactions on Leica Bond but consistently **poor** reactions when used on **BenchMark**.

# Cytokeratins: Selection of antibodies

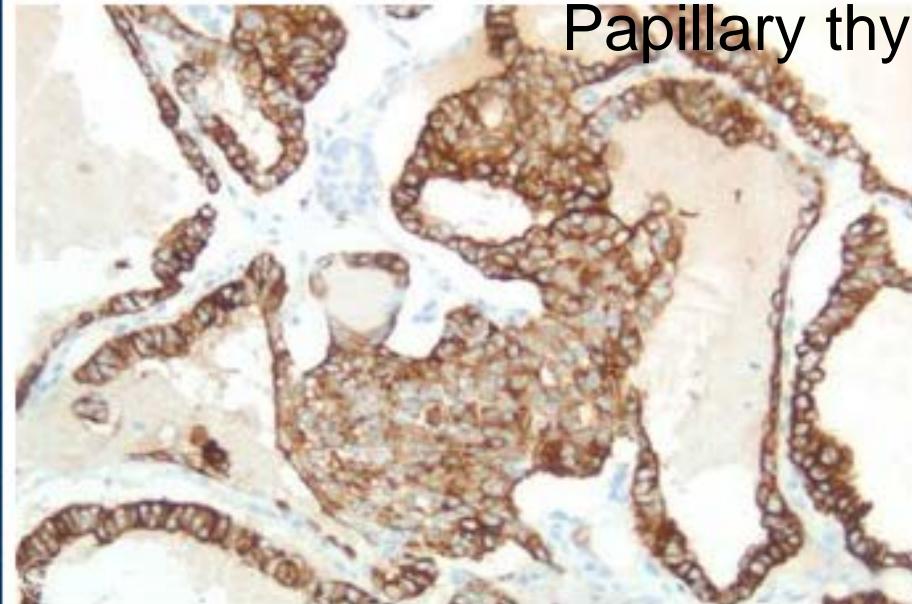


Esophagus

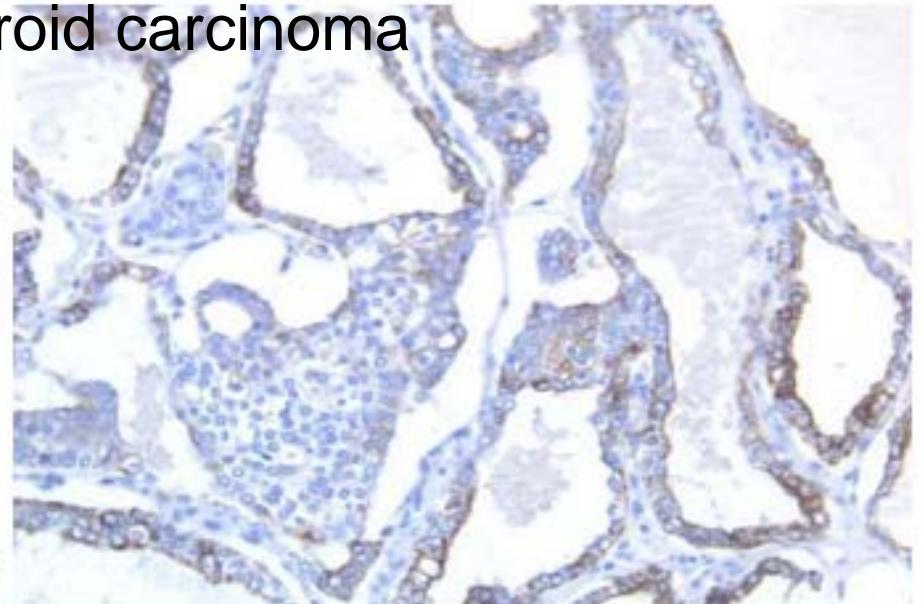
**CK19: clone A53-B/A2.26**



**CK19: clone RCK108**



Papillary thyroid carcinoma



## Secondary panels for ‘**carcinoma**’ identification/subclassification

- Apart from cytokeratins and "general epithelial markers" (EpCAM, Cl4)
- "GI-markers" CDX2, CAD17, SATB2, SMAD4, CEA
- "Fem.gen.tract markers" CA125, PAX8, WT1, ER, p53
- "Liver cell markers" Arginase, Glypican3, GlutSynt, canCD66a, canCD10, AFP
- Neuroendocr. markers Synaptophysin, Chromogranin
- "Breast markers" GATA3, ER, GCDFP15, Mam.glob.

## Secondary panels for **carcinoma** identification/subclassification

- "Lung markers"                            TTF-1, Napsin, p40
- "Mesothelioma makers"                Calretinin, Popoplakin, WT1, CA125
- "Adrenal cortic.markers"            Inhibin, Melan A, Synaptophysin
- Germinal cell markers                  SALL4, OCT3/4, PLAP, AFP, CD117, CD30
- Prostate markers                        NKX3.1, PSA, Prostein, AMACR, ERG
- Urinary tract markers                Uroplakin II, GATA3, (CK5, CK20)

# “GI markers”

CDX2

CEA

CAD17

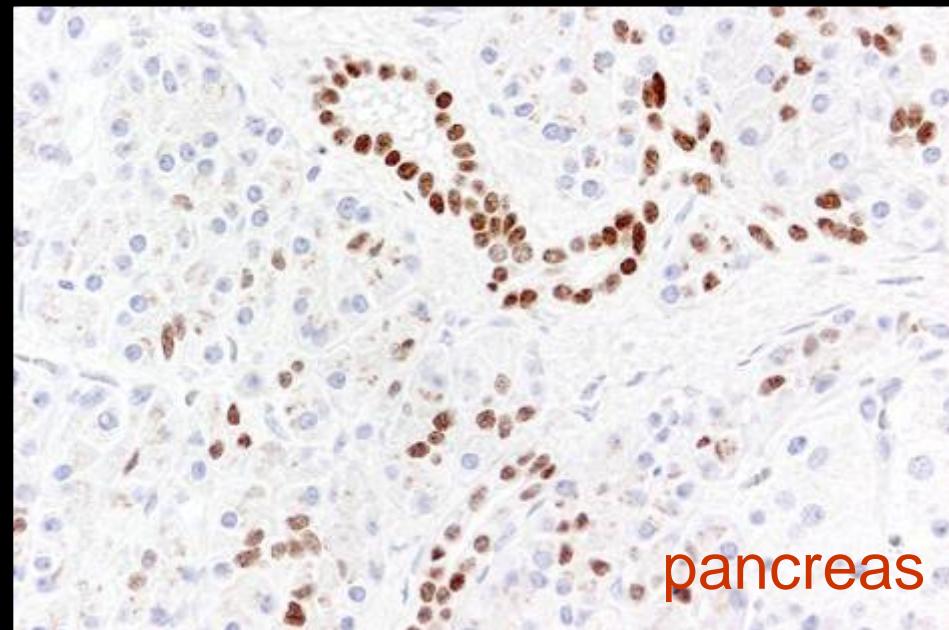
SATB2

SMAD4

# CDX-2 protein

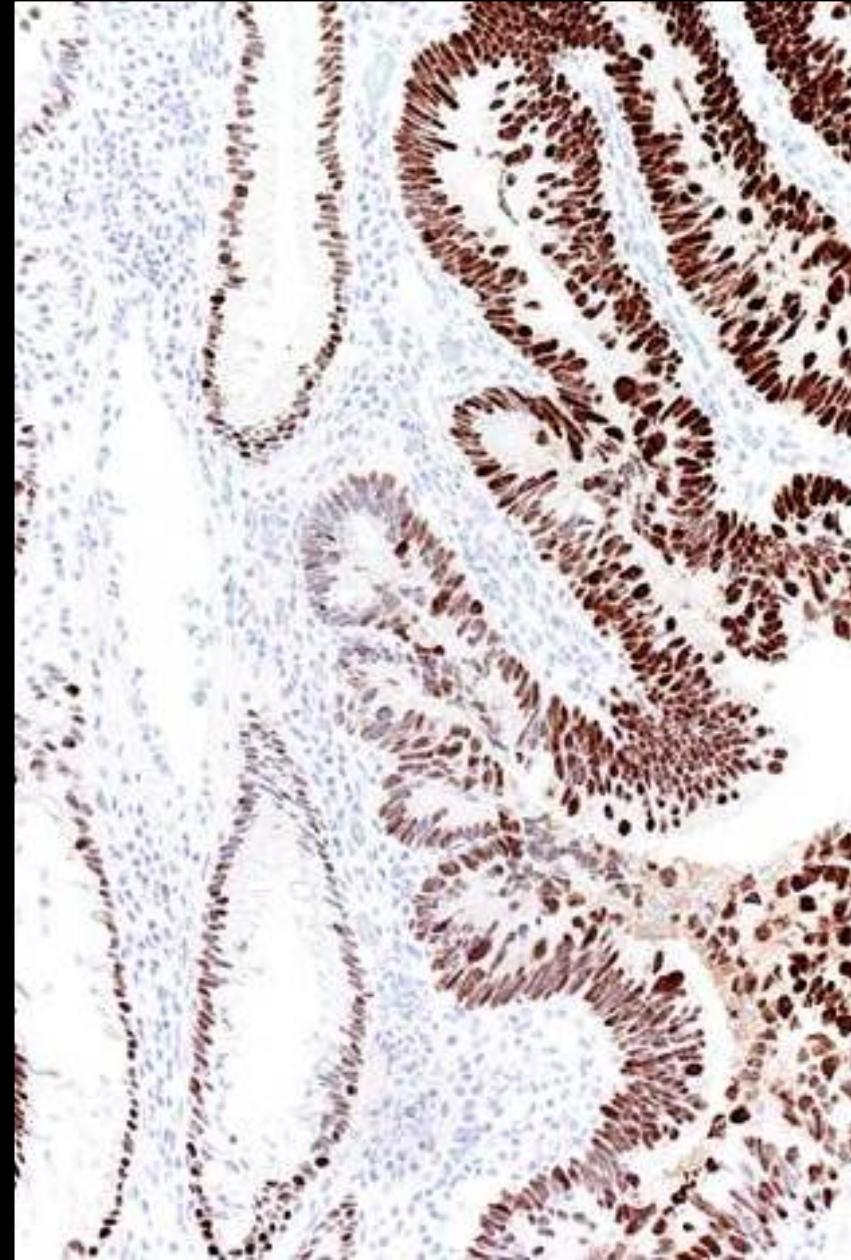
Drosophila caudal related homeobox gene 2 product:  
Nuclear transcription factor for intestinal differentiation

- Intestine
  - all cell types incl. endocrine
- Intestinal metaplasia
  - chronic gastritis
  - Barrett's esophagus
- Pancreas/bil.tract
  - heterogenous



# CDX-2 protein in adenocarcinoma

- Colorectum +(-)
- Mucinous ovar. +(-)
- Yolk sac tumour +
- Esoph./Stom. +/-
- Pancr./biliary -/+
- Lung -/+
- Prostate -(+)
- Urothelial -(+)
- Endometrioid -(+)



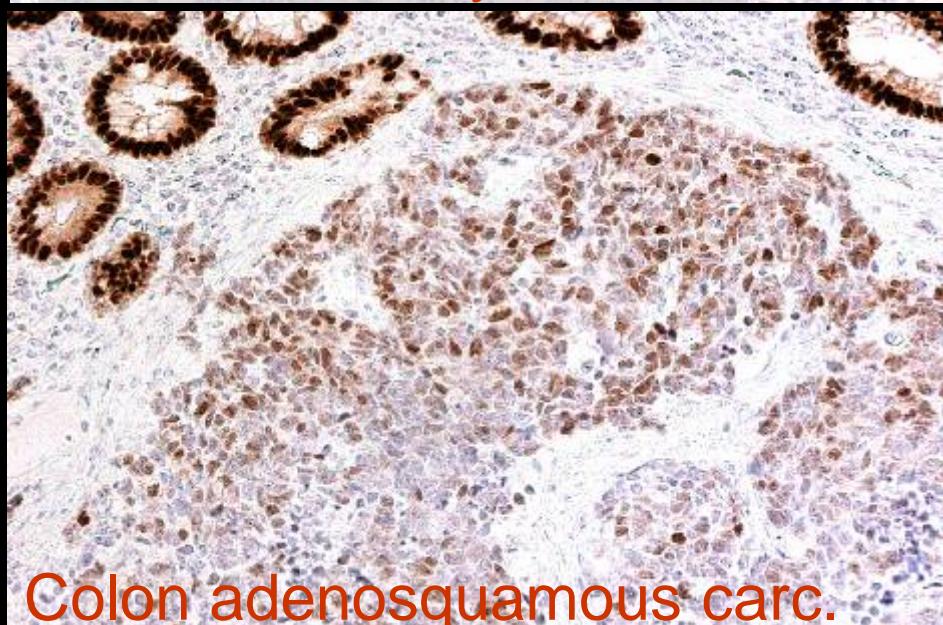
Colon adenocarcinoma

# CDX-2 protein in adenocarcinoma

- Colorectum +(-)
- Mucinous ovar. +(-)
- Yolk sac tumour +
- Esoph./Stom. +/-
- Pancr./biliary -/+
- Lung -/+
- Prostate -(+)
- Urothelial -(+)
- Endometrioid -(+)

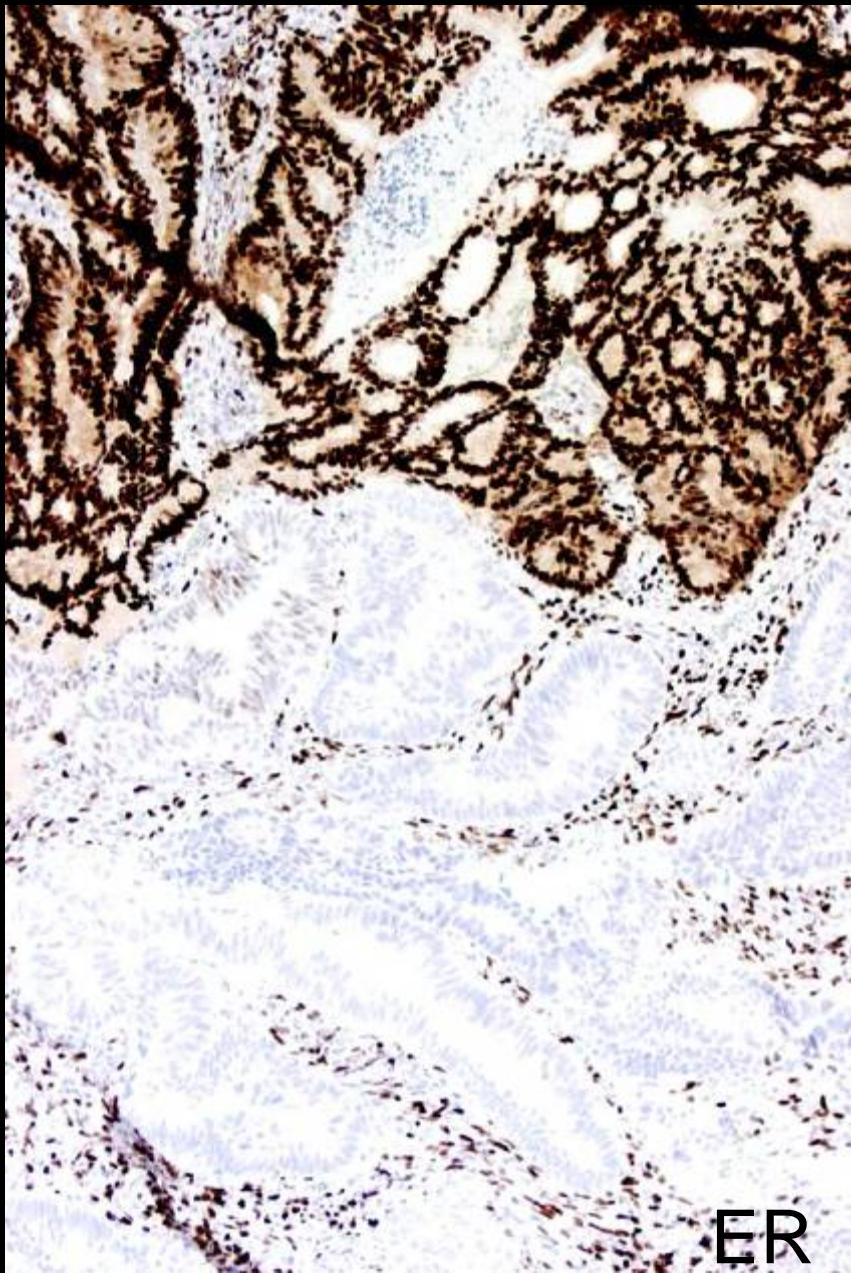


Colon medullary adenoc.

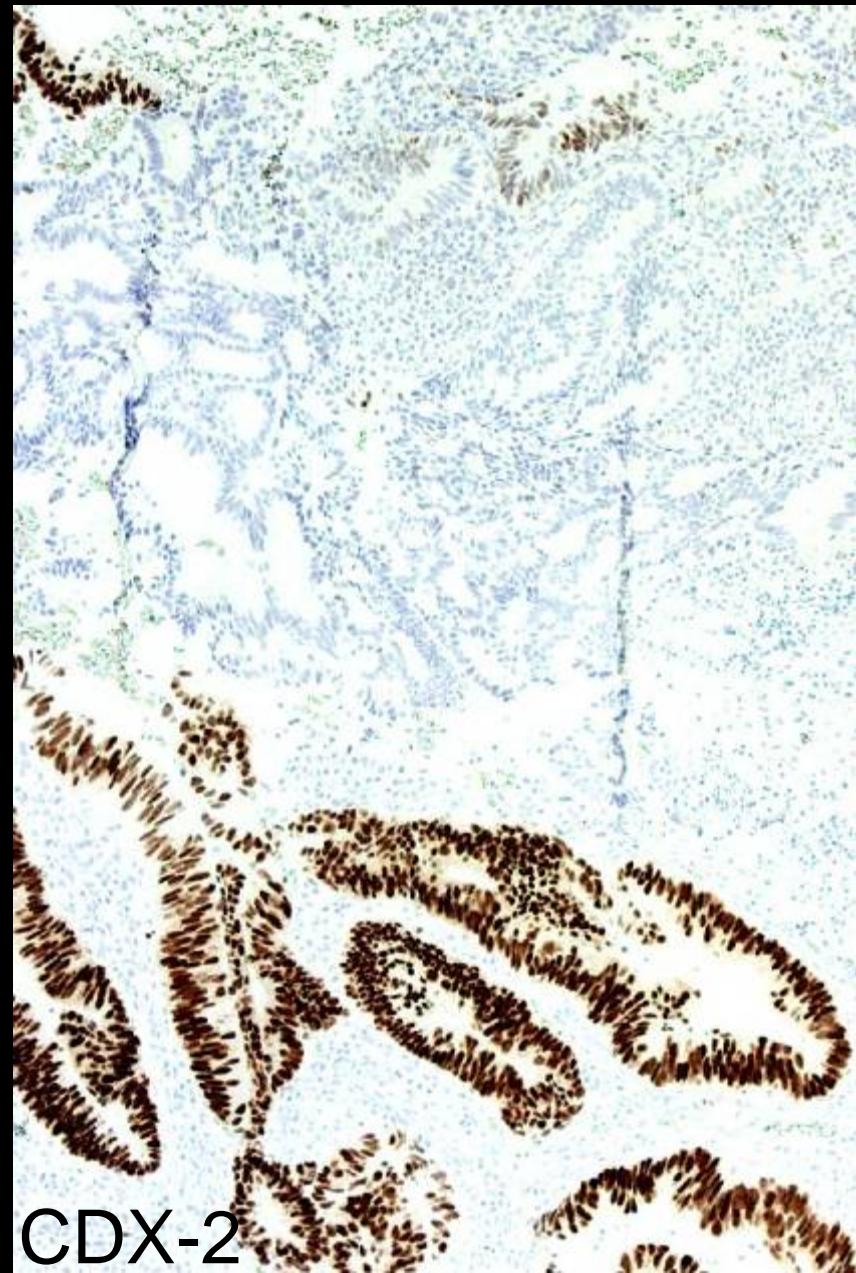


Colon adenosquamous carc.

# Endometrioid carcinoma: ER & CDX-2



ER



CDX-2

**Table 1. Antibodies and assessment marks for CDX2, run 48**

Concentrated antibodies	n	Vendor	Optimal	Good	Borderline	Poor	Suff. <sup>1</sup>	Suff. OPS <sup>2</sup>
mAb clone <b>AMT28</b>	2	Leica/Novocastra	0	0	0	2	-	-
mAb clone <b>CDX2-88</b>	2	Biocare	0	0	1	3	48%	57%
	2	Biogenex						
mAb clone <b>DAK-CDX2</b>	31	Agilent/Dako	6	9	7	9		
	31	Cell Marque						
	5	Thermo/Neomarkers						
	4	Immunologic						
	4	Zytmmed						
rmAb clone <b>EPR2764Y</b>	2	Monosan	28	14	7	3	81%	81%
	2	Zeta Corporation						
	1	A.Menarini						
	1	Abcam						
	1	Nordic Biosite						
	1	Thermo/Pierce						

**Table 2. Proportion of sufficient results for CDX2 in the five NordiQC runs performed**

	Run 22 2008	Run 27 2009	Run 33 2011	Run 38 2013	Run 48 2016
Participants, n=	56	93	148	200	268
Sufficient results	64%	46%	51%	73%	80%

## Demonstration of CDX2 is Highly Antibody Dependant

*Martine Borrisholt, MS, Søren Nielsen, HT, and Mogens Vyberg, MD*

(Appl Immunohistochem Mol Morphol 2013;21:64–72)

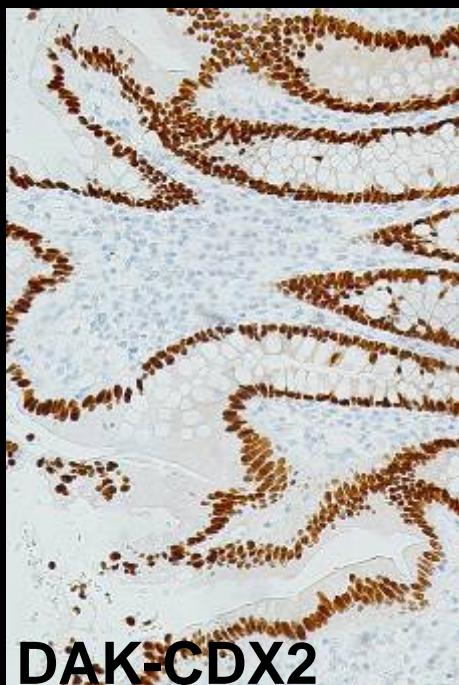
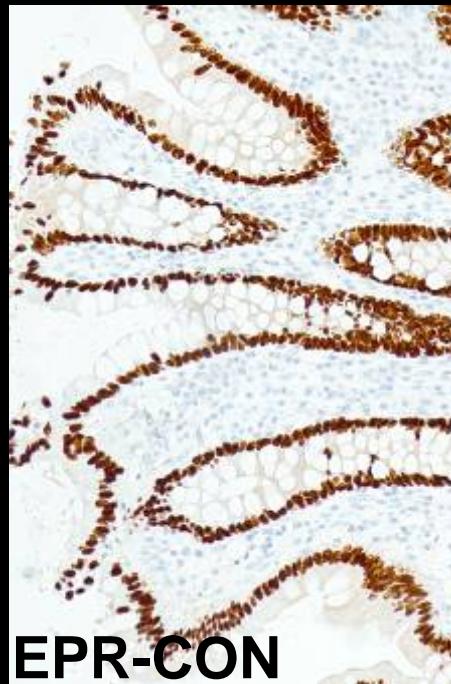
CDX2

Normal

colon 1

Optimized  
protocols

EPR =  
EPR2764Y



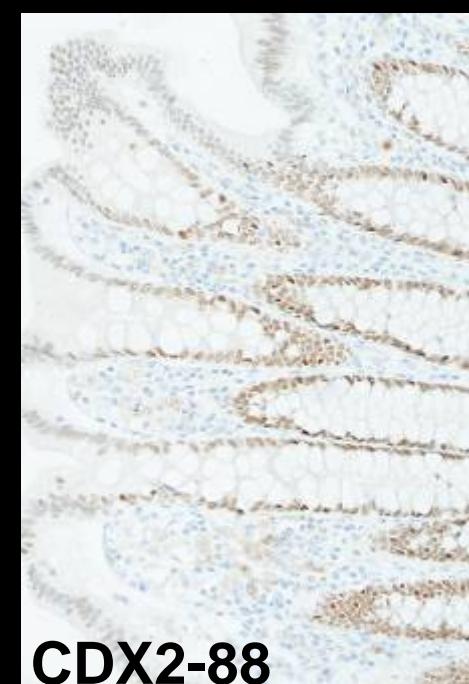
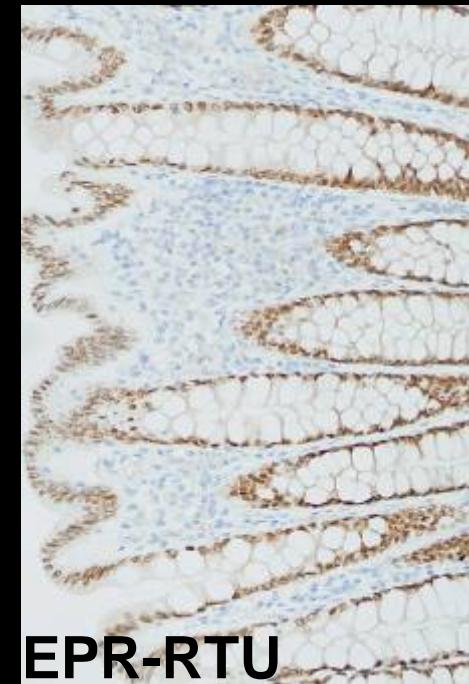
CDX2

Normal

colon 2

Optimized  
protocols

EPR =  
EPR2764Y



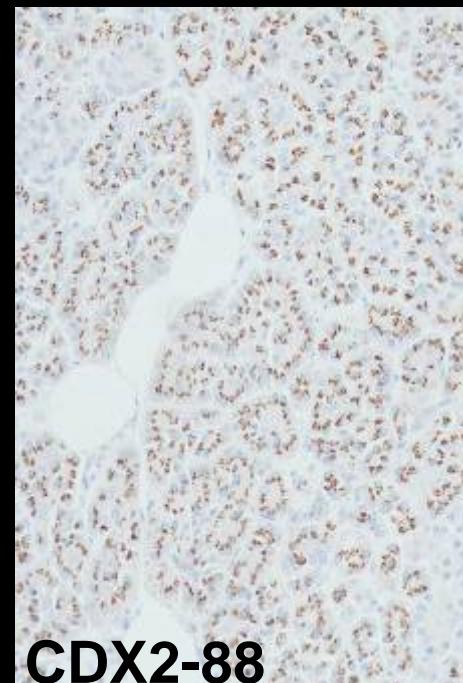
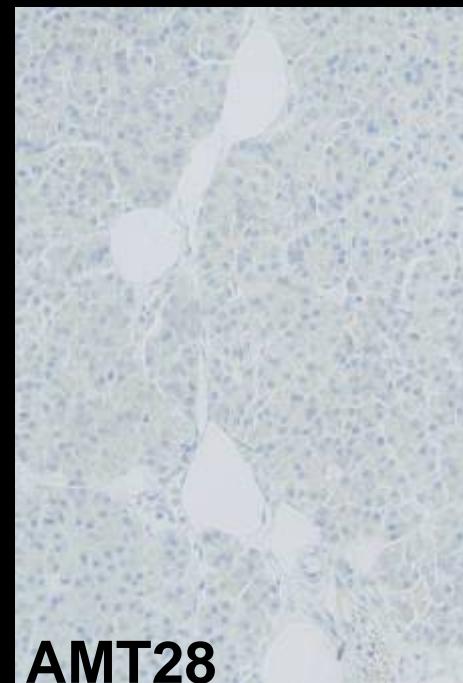
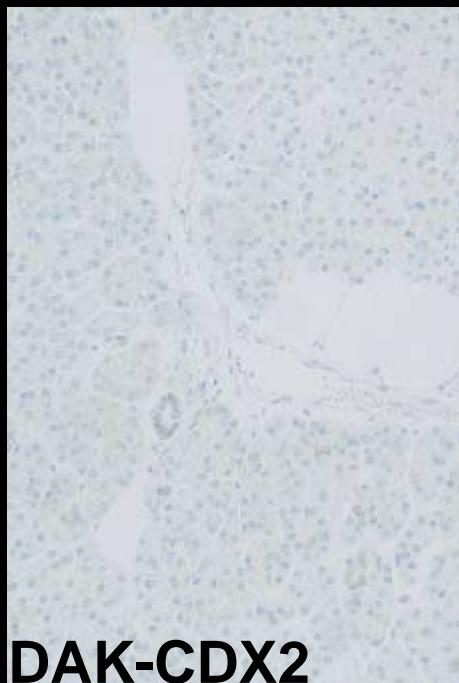
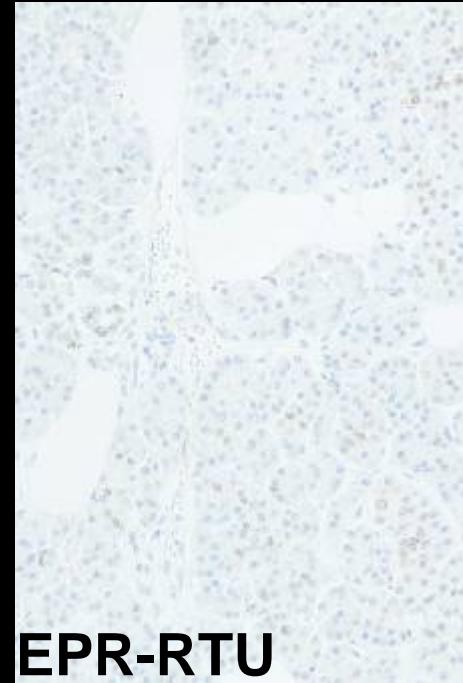
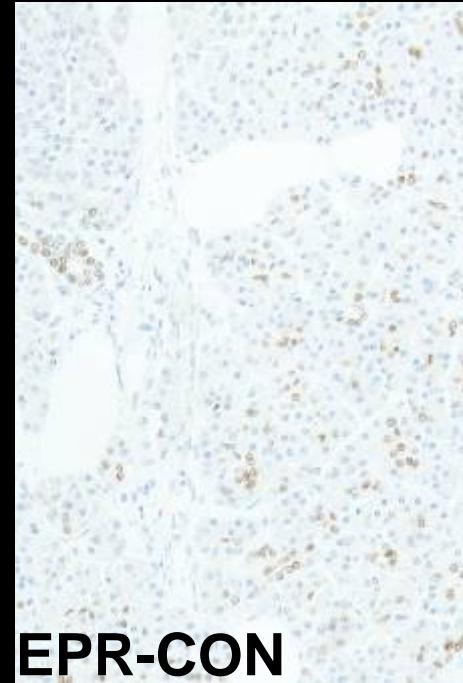
CDX2

Normal

pancreas

Optimized  
protocols

EPR =  
EPR2764Y



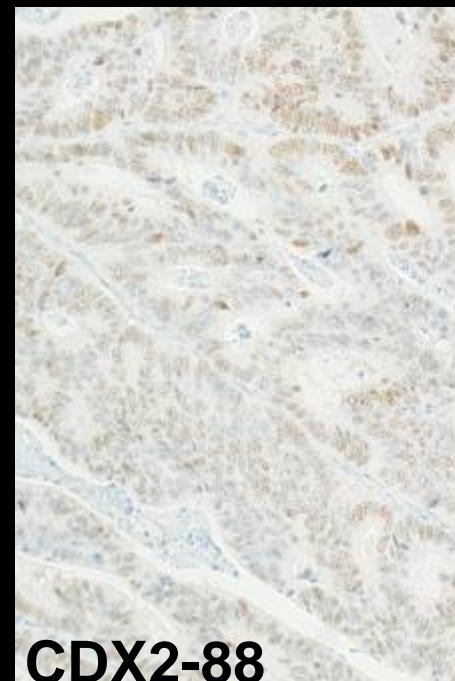
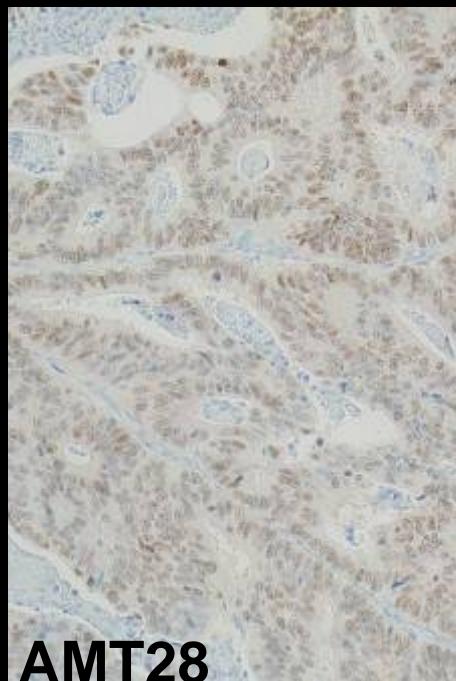
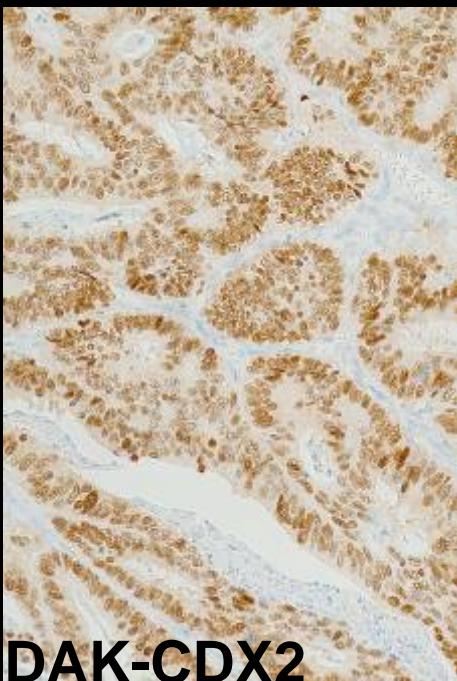
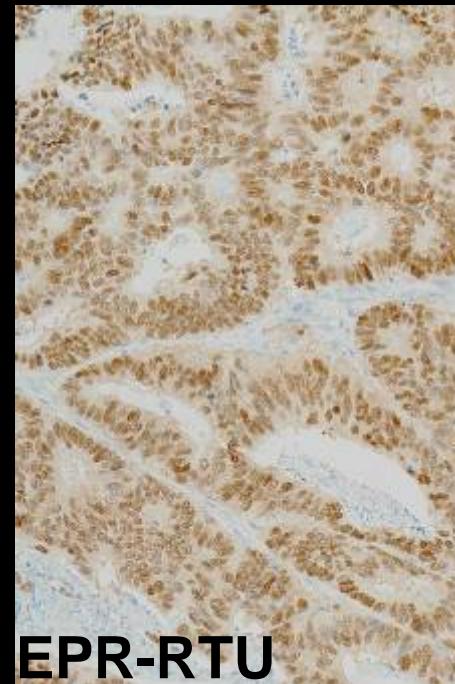
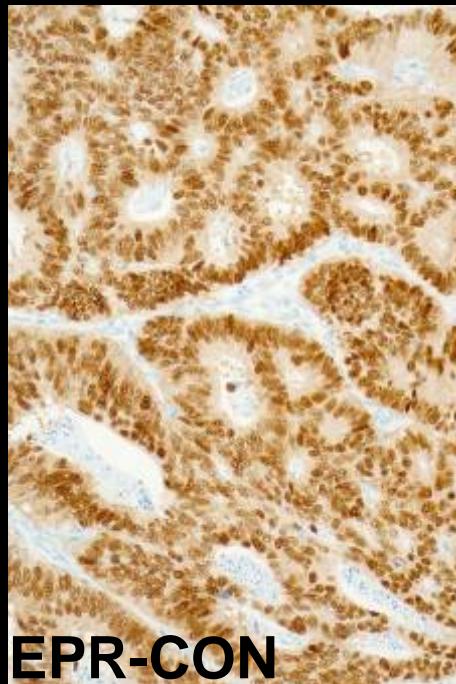
CDX2

Colon

adenocarc.1

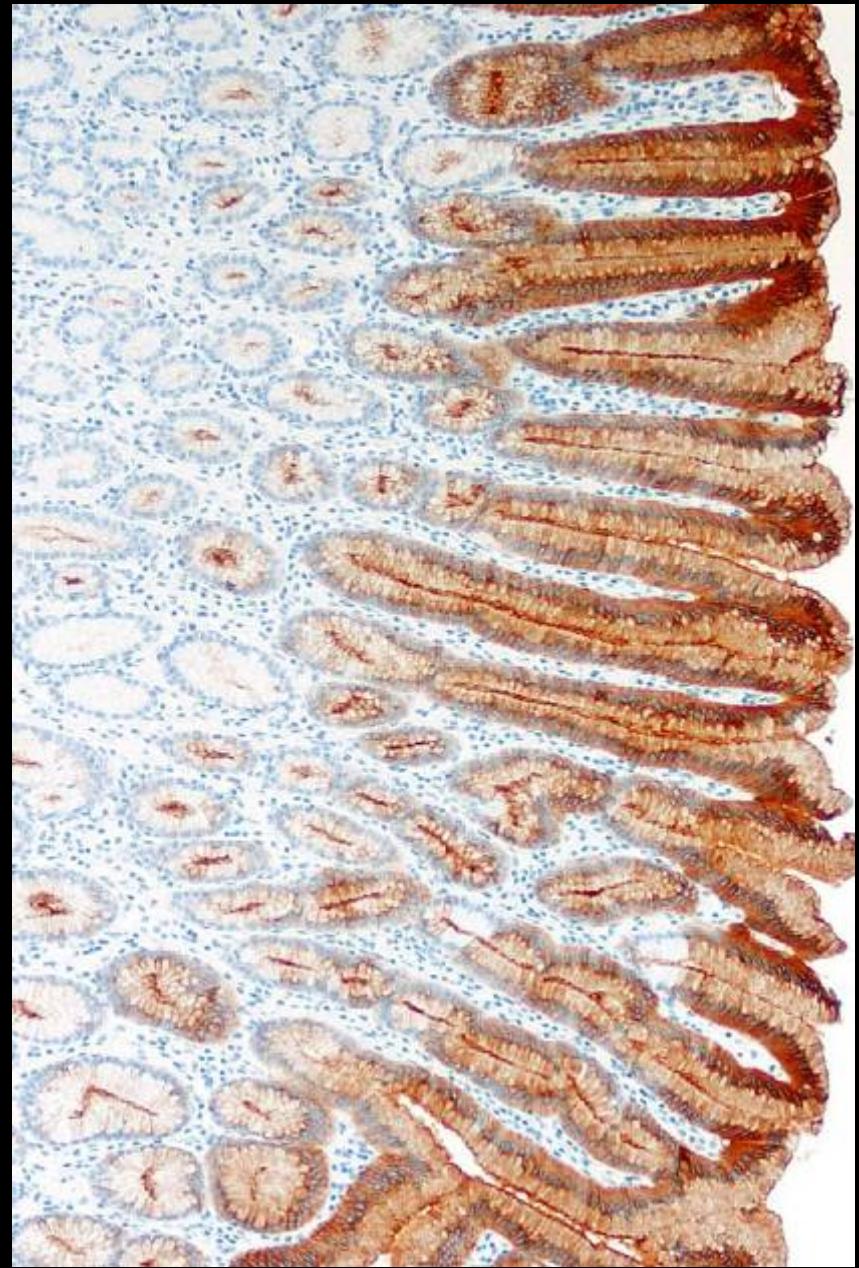
Optimized  
protocols

EPR =  
EPR2764Y



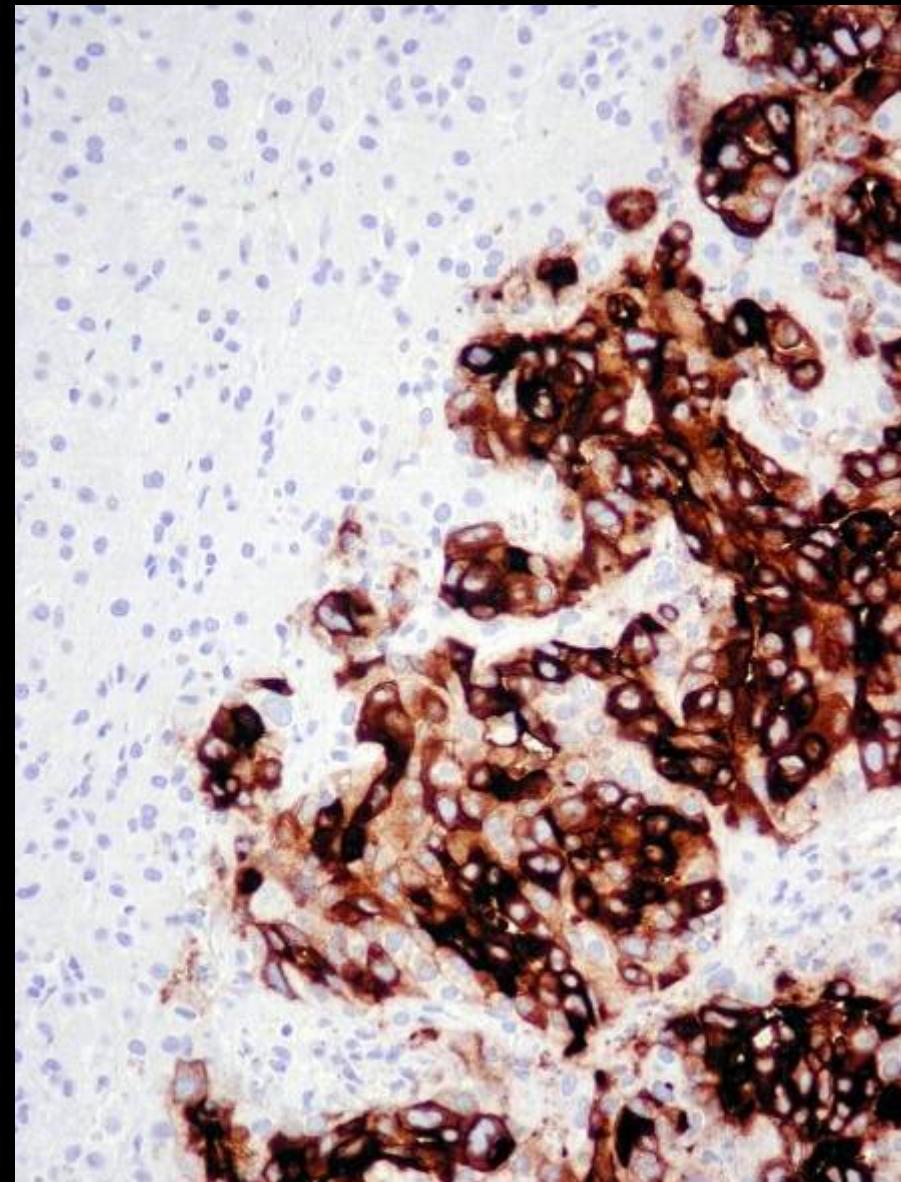
# Carcinoembryonic antigen (CD66e)

- Adhesion molecule esp.  
associated with intestine



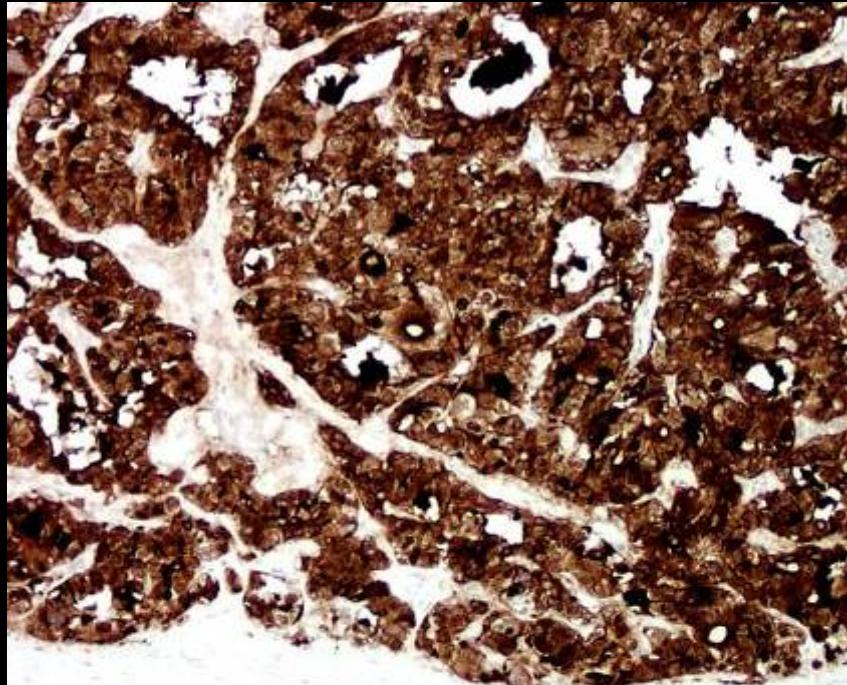
# Carcinoembryonic antigen (CD66e) in adenocarcinomas

■ Colorectal	+
■ Medull. thyroid	+
■ Pancreas/biliary tract	+/-
■ Stomach	+/-
■ Lung	+/-
■ Ovary, mucinous	+/-
■ Ovary, non-muc.	-/+
■ Prostate	-
■ Kidney	-
■ Liver (!)	-

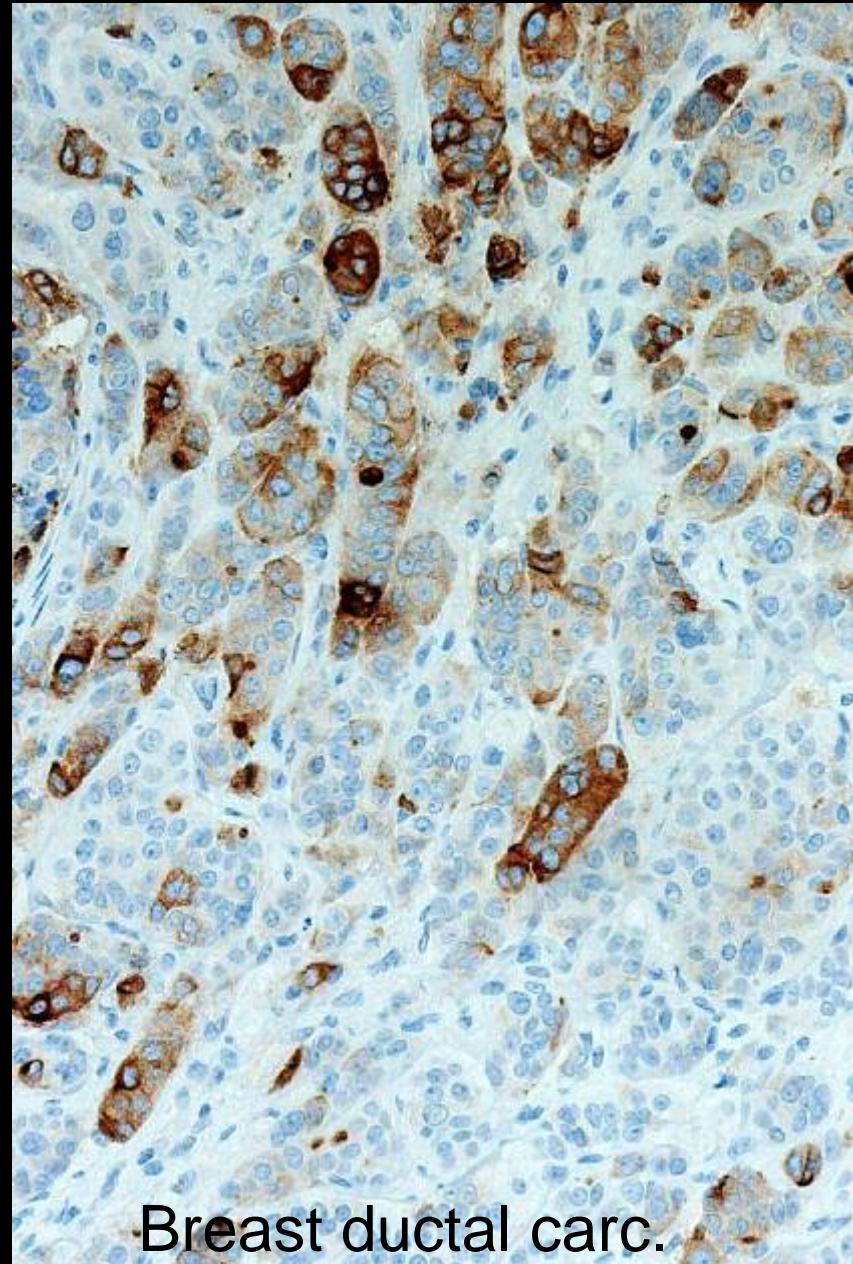


metast. colon adenoc

# Carcinoembryonic antigen



Medul. thyroid carc.



Breast ductal carc.

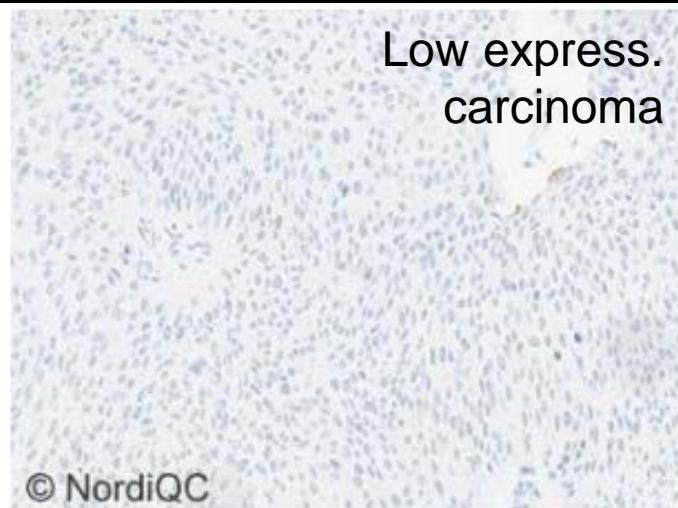
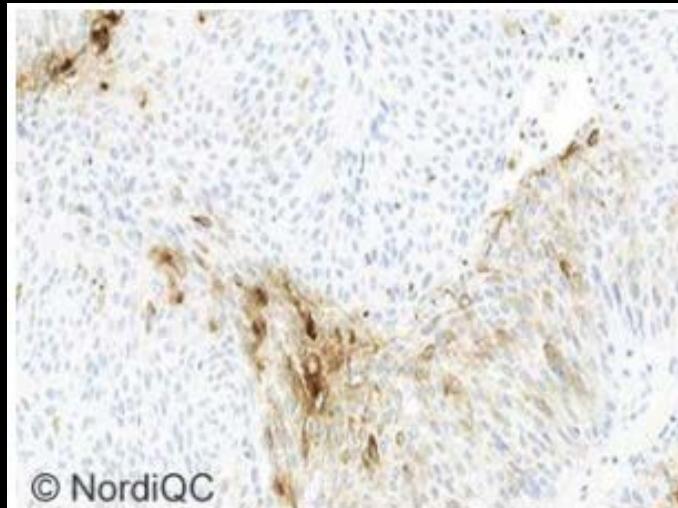
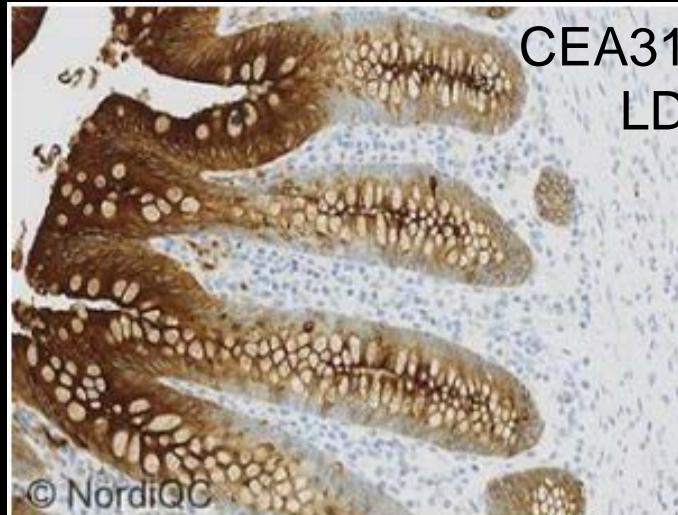
**Table 1. Antibodies and assessment marks for CEA, run 47**

Concentrated Antibodies	n	Vendor	Optimal	Good	Borderline	Poor	Suff. <sup>1</sup>	Suff. OPS <sup>2</sup>
mAb clone <b>12-140-10</b>	3	Leica/Novocastra	0	0	0	3	-	-
mAb clone <b>CEA31</b>	9	Cell Marque BioSB	6	0	3	1	67%	75%
mAb <b>COL-1</b>	6 5 5 2 1 1	Thermo/Neomarkers Invitrogen/Zymed Biocare Immunologic Zytomed GeneTex	11	7	2	0	90%	94%
mAb <b>II-7</b>	85	Dako/Agilent	2	19	60	4	25%	58%
Ready-To-Use Antibodies								
mAb clone <b>CEA31 760-4594</b>	53	Ventana/Cell Marque	22	26	5	0	91%	100%
mAb clone <b>II-7 IR/IS622/GA622</b>	47	Dako/Agilent	0	6	40	1	13%	-
mAb clone <b>II-7 PA0004</b>	12	Leica	0	5	6	1	42%	-
mAb clone <b>TF3H8-1 760-2507</b>	13	Ventana/Roche	0	0	0	13	0%	-
Total	255		43	65	122	25	-	
Proportion			17%	25%	48%	10%	42%	

## Carcinoembryonic antigen (CEA)

Table 2. Proportion of sufficient results for CEA in the four NordiQC runs performed

	Run 12 2004	Run 27 2009	Run 37 2013	Run 47 2016
Participants, n=	60	123	190	255
Sufficient results	86%	75%	59%	42%

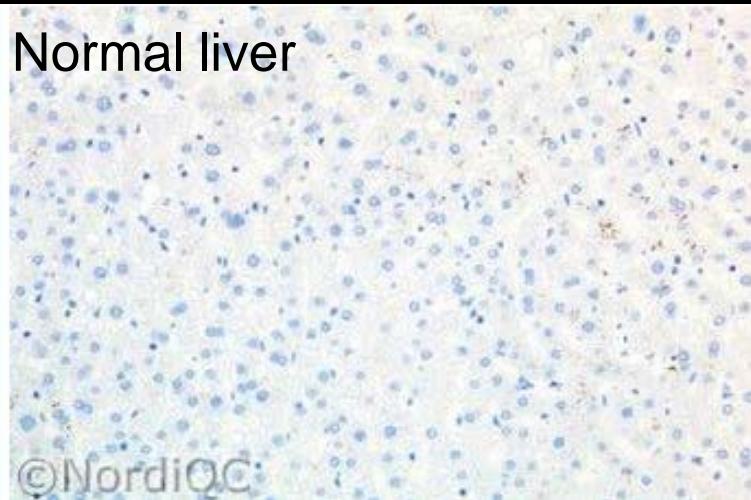


## Carcinoembryonic antigen (CEA)

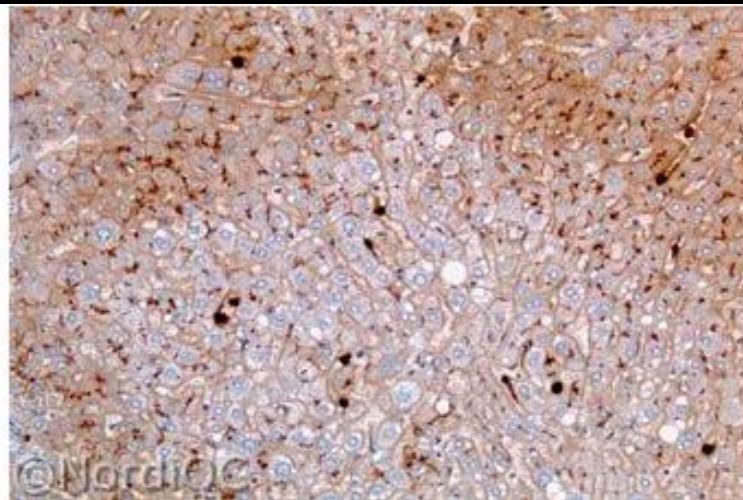
Table 2. Proportion of sufficient results for CEA in the four NordiQC runs performed

	Run 12 2004	Run 27 2009	Run 37 2013	Run 47 2016
Participants, n=	60	123	190	255
Sufficient results	86%	75%	59%	42%

Normal liver



©NordiQC



©NordiQC

II-7

TF3H8-1

# “Female genital tract markers”

PAX8

CA125

WT1

p53

ER

# PAX8

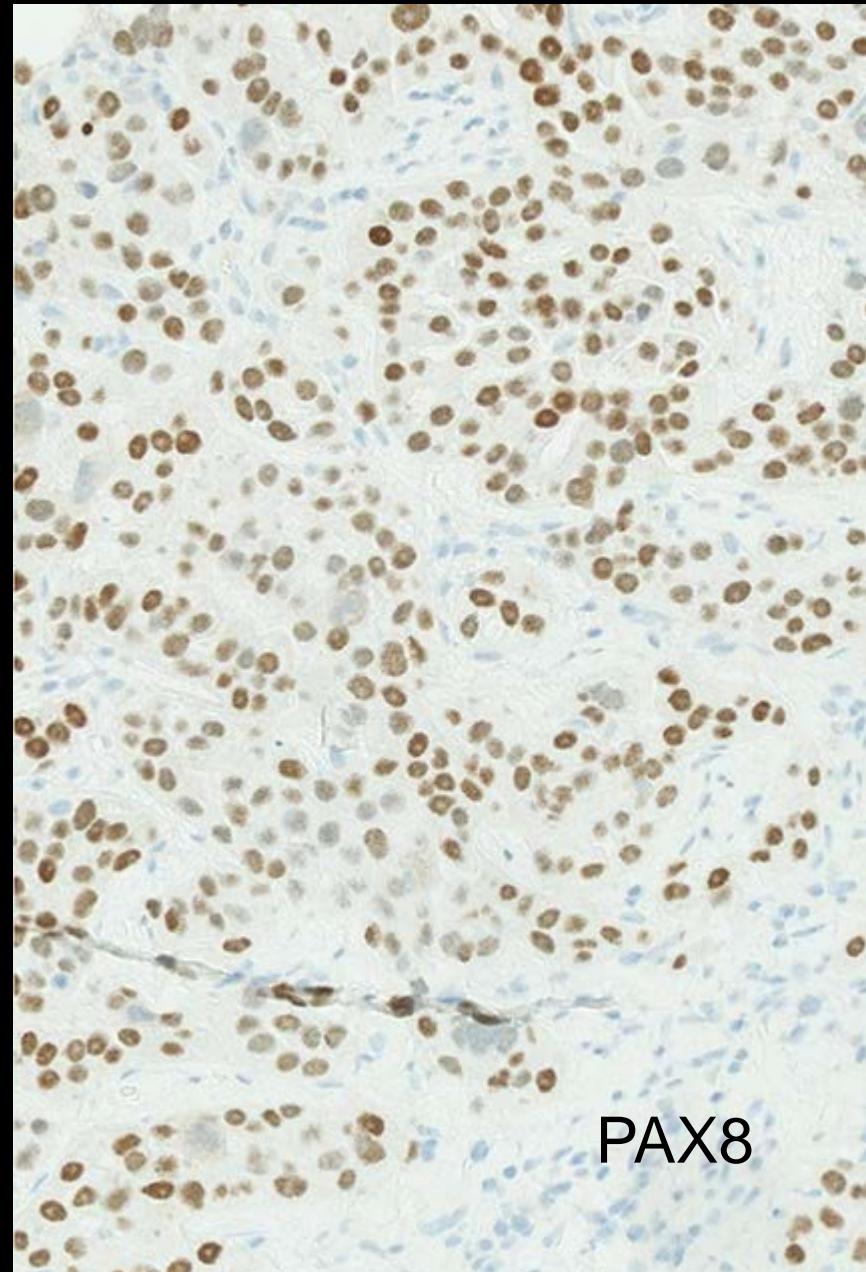
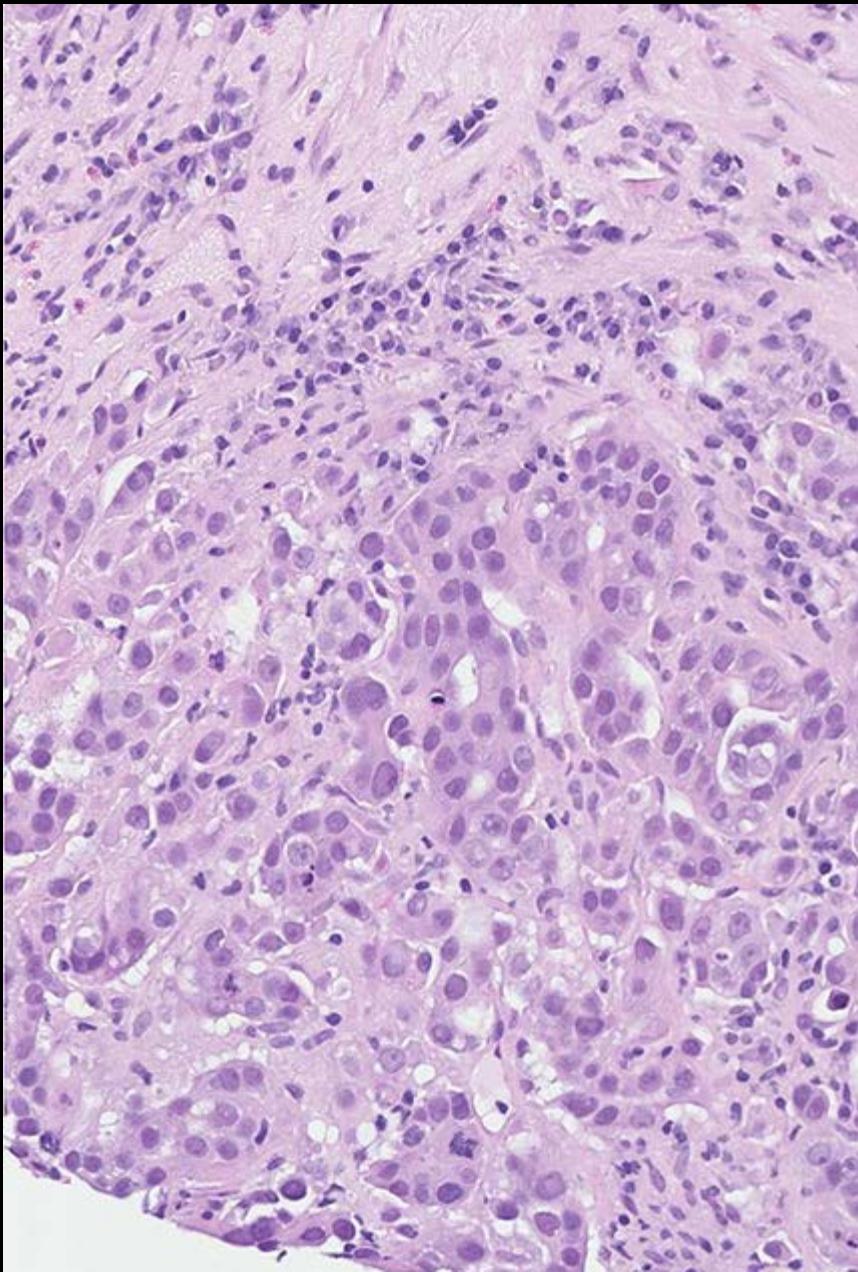
Crucial to the organogenesis and development of

- Urogenital tract
- Adult genital tract
- Thyroid
- Neuroendocrine system

# PAX8

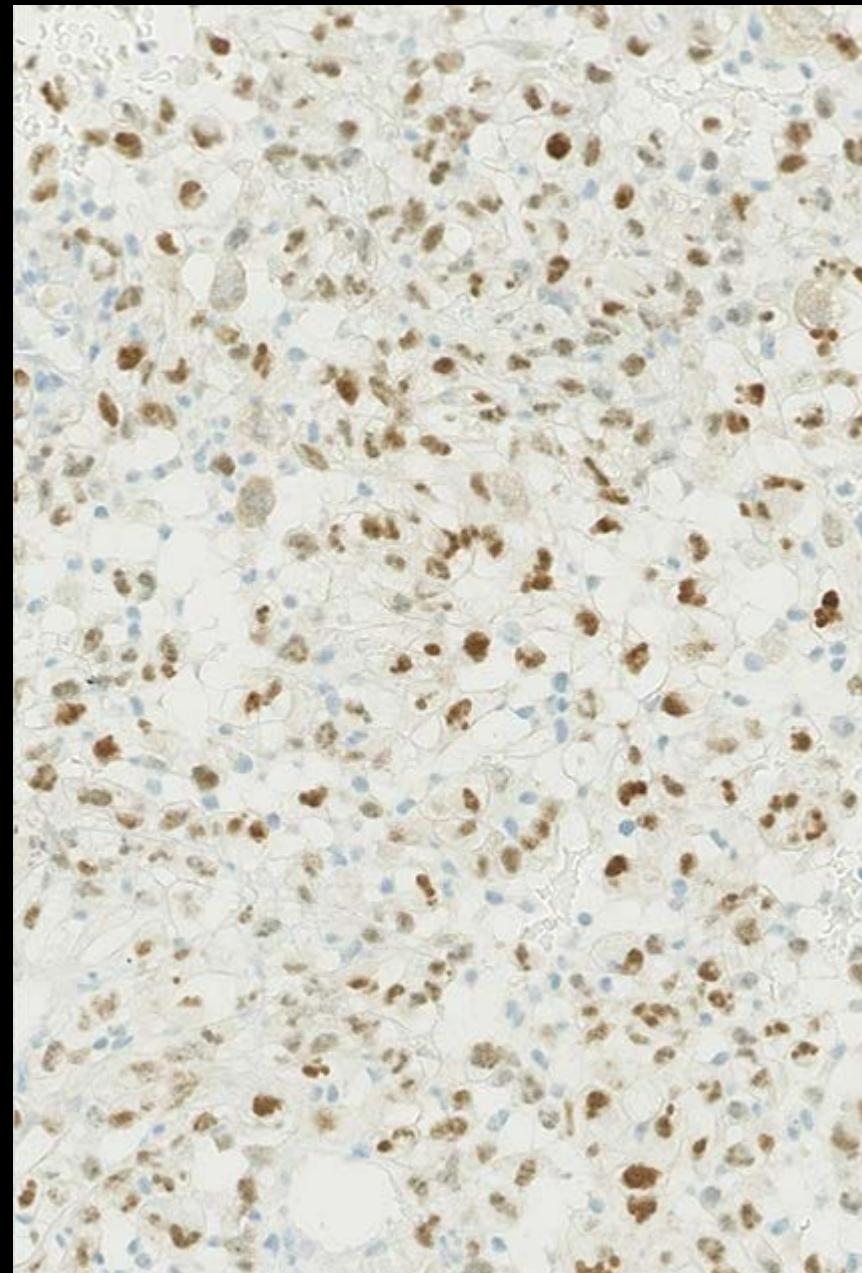
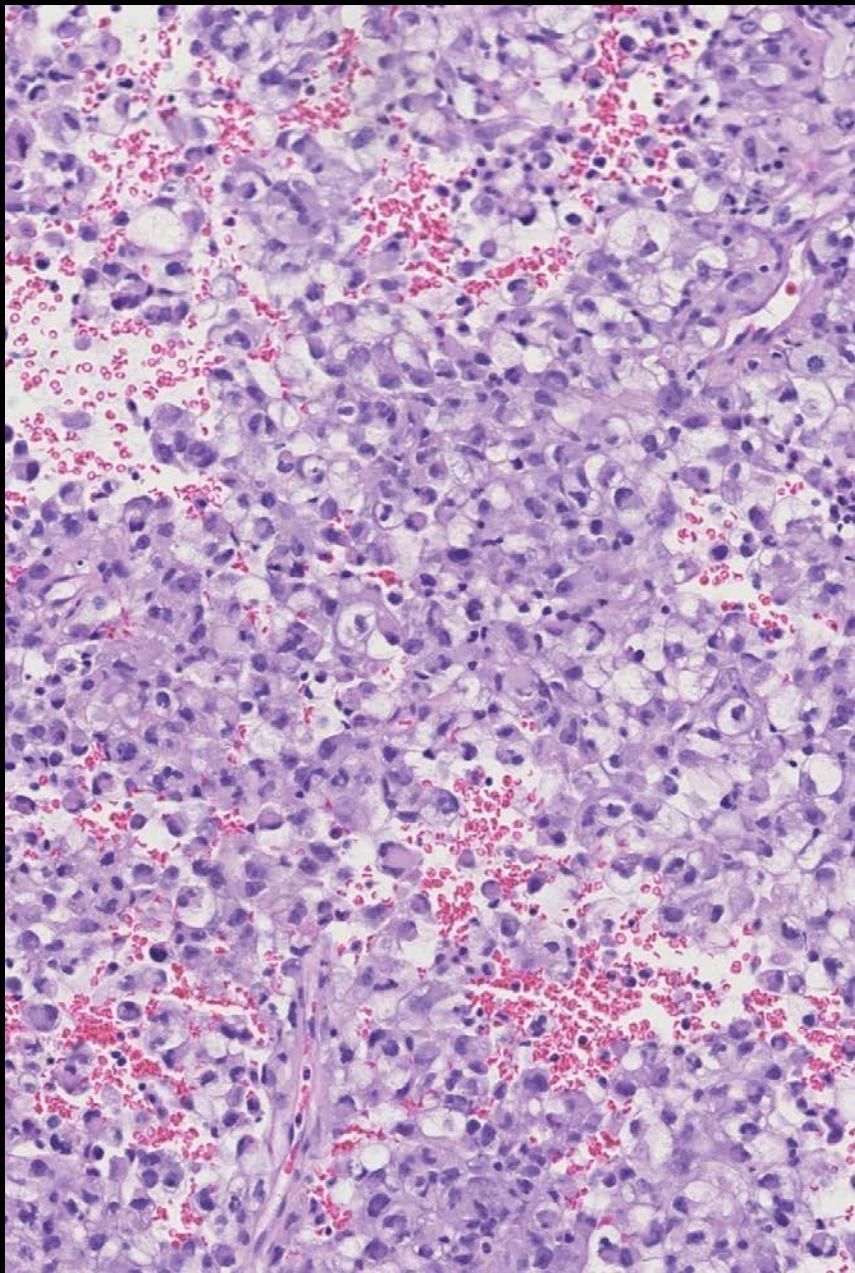
Ovary - serous carcinoma LG	+
- serous carcinoma HG / clear cell	+
- endometrioid carcinoma	+/-
- mucinous carcinoma	-(+)
Kidney - clear cell / papillary carcinoma	+
- chromophobe / collect. duct carc.	+
- RCC, sarcomatoid	+/-
NET - pancreas, duodenum, rectum	-(+)?
Thyroid carcinoma	+
Other carcinomas	-(+)
Malignant mesothelioma	-

# Ovarian serous carcinoma



PAX8

# PAX8 in clear cell renal cell carcinoma



**Table 1. Antibodies and assessment marks for PAX8, run 51**

Concentrated antibodies	n	Vendor	Optimal	Good	Borderline	Poor	Suff. <sup>1</sup>	Suff. <sup>2</sup> CPS <sup>2</sup>
mAb clone <b>BC12</b>	11 1	Biocare Zytomed Systems	1	4	0	7	42%	100%
mAb clone <b>DBM15.48</b>	1	Diagnostic Biostems	0	1	0	0	-	-
mAb clone <b>MRQ-50</b>	63 1	Cell Marque Menarini Diagnostics	17	24	13	10	64%	69%
mAb clone <b>PAX8R1</b>	2	abcam	0	0	2	0		
rmAb clone <b>EP298</b>	4 2 1	Cell Marque Epitomics BIO SB	3	3	0	1	86%	100%
rmAb clone <b>SP348</b>	1	Spring Biosciences	1	0	0	0	-	-
rmAb clone <b>ZR-1</b>	3 1 1	Zeta Corporation Abcam Nordic Biosite	2	2	1	0	80%	100%
pAb, <b>10336-1-AP</b>	29	Protein Tech	8	10	9	2	62%	83%

Ready-To-Use antibodies								
mAb clone <b>MRQ-50 760-4618</b>	11	Ventana/Cell Marque	0	4	5	2	36%	-
mAb clone <b>MRQ-50 363M</b>	68	Cell Marque	3	25	27	13	41%	55%
mAb clone <b>PAX8/1492 MAD-000753QD/V</b>	2	Master Diagnostica	2	0	0	0	-	-

(*Appl Immunohistochem Mol Morphol* 2018;26:221–224)

# NordiQC Assessments of PAX8 Immunoassays

Rasmus Røge, MD,\*† Ole Nielsen, HT,‡ Michael Bzorek, HT,§ Søren Nielsen, HT,\* and Mogens Vyberg, MD\*†

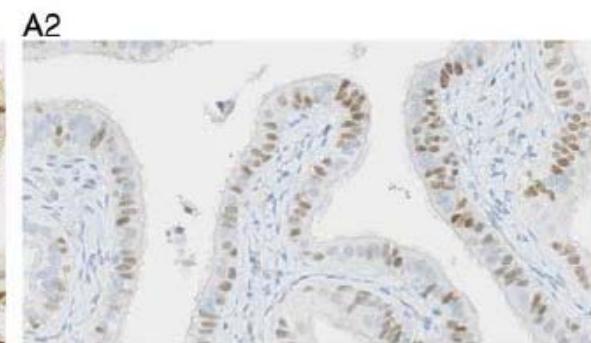
## KEY POINTS FOR PAX8 IMMUNOASSAY

- Older clones, especially MRQ-50, are challenging especially on fully automated platforms (as Ventana Benchmark and Dako Omnis).
- Efficient HIER and use of sensitive 3-step detection systems are required.
- Fallopian tube, kidney, and tonsil are recommendable as on-slide controls.
- Caution when interpreting staining reaction, since some antibodies cross-react with other members of the PAX transcription factor family.

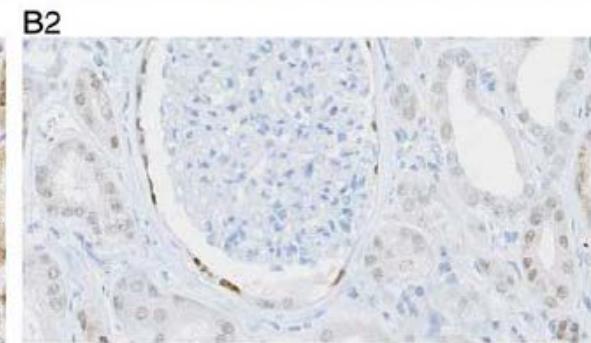
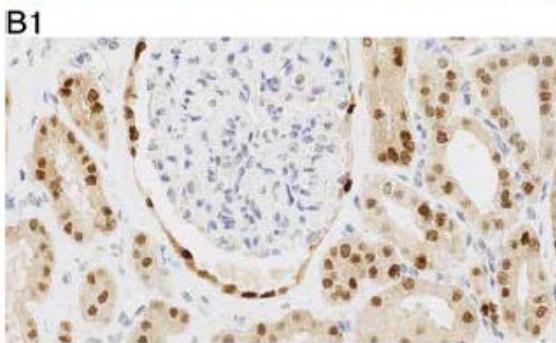
Optimal

Too weak

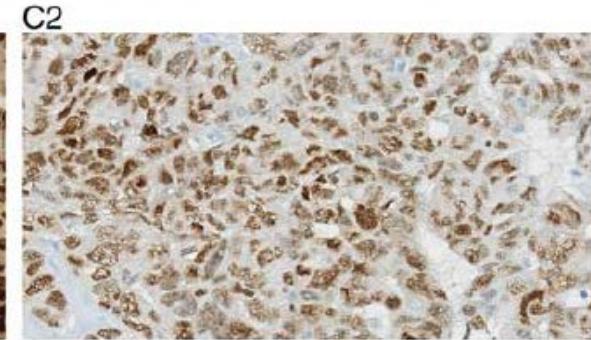
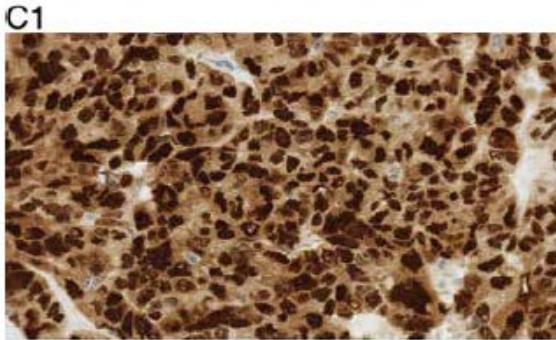
Fallopian tube



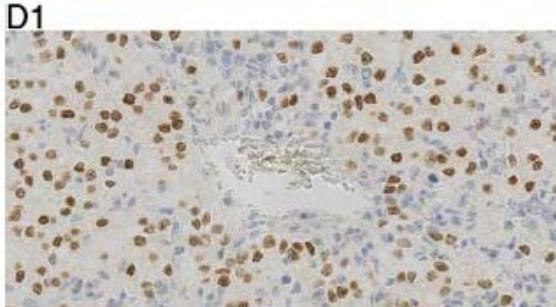
Kidney



Ovarian serous carcinoma



Clear cell renal cell carcinoma



# The unknown primary tumour: IHC Classification, antibody selection, protocol optimization, controls and EQA (part II)

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