

Advancing Cancer Diagnostic
Improving Lives

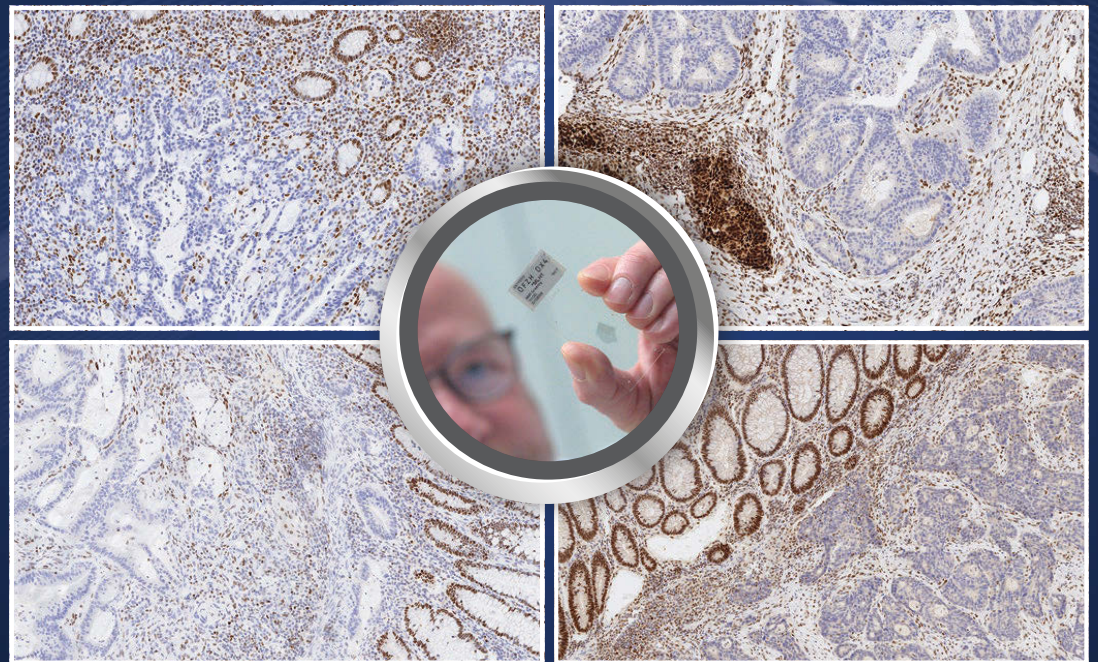


L E I C A B I O S Y S T E M S A D V A N C E D S T A I N I N G R E A G E N T S

BOND

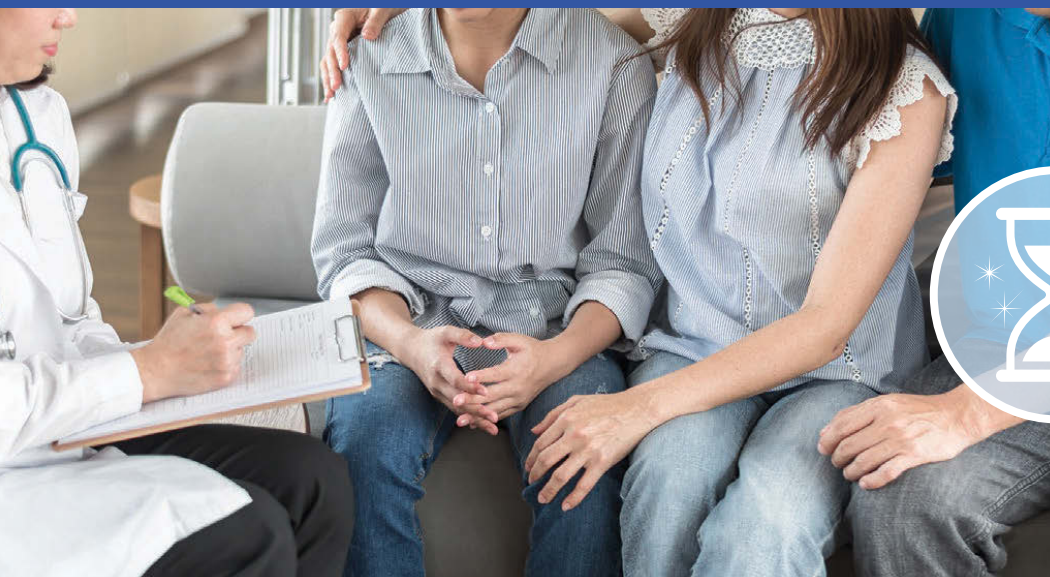
MMR ANTIBODY PANEL

INDICATED FOR GASTROINTESTINAL PATHOLOGY



ACHIEVE ACCURATE RESULTS IN ONLY 2.5 HOURS
WITH 4 READY-TO-USE US FDA CLASS II ANTIBODIES

FOR IN VITRO DIAGNOSTIC USE



TIME IS UNCERTAIN FOR THE PATIENT AND THEIR FAMILY

Colorectal Cancer (CRC) is the third most common cancer and second leading cause of cancer-related deaths in the United States.

- » The most common form of hereditary colorectal cancer is Lynch Syndrome (LS).
- » Identifying patients with LS is clinically important because these patients have up to 80 percent lifetime risk of colorectal cancer.
- » There is also concern for relatives of LS patients who may have inherited LS mutations.

Immunohistochemistry (IHC) assessment for MMR proteins MLH1, MSH2, MSH6 and PMS2 in CRC tumor tissue is used as a first line screen for MMR deficiency in cases of CRC. The results can indicate whether more specific germline genetic testing for LS should be considered to best serve the patient and their families.

FAST

A 2.5-hour turnaround time gets clinicians to the molecular reflex decision point faster than other cleared IHC panels giving patients shorter wait times for results.

EFFICIENT

A complete solution integrating independently benchmarked BOND Ready-to-Use Antibodies with the benefits of a plug and play workflow for improved productivity.

ACCURATE

Comparison using this panel with molecular analysis showed 94.7 overall percentage agreement, giving confidence for the identification of proteins with MMR deficiencies.



TIME IS UNCOMPROMISING FOR CLINICIANS AND THEIR STAFF

Pathology laboratories are facing dynamic changes. Advancements must be deployed to achieve the requirements of greater accountability, workflow efficiencies, and faster turnaround time.

INTRODUCING THE BOND MMR ANTIBODY PANEL

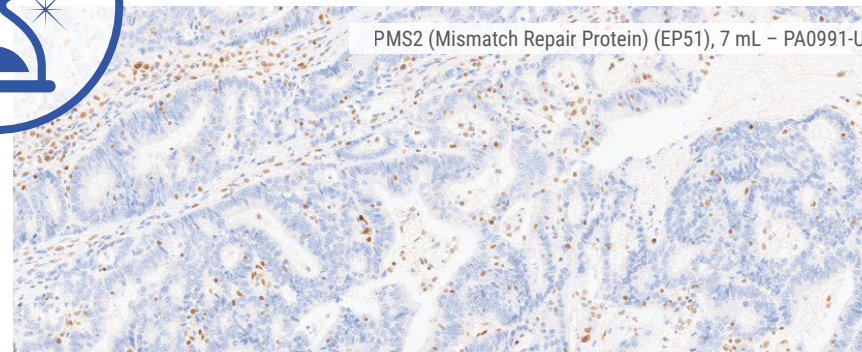
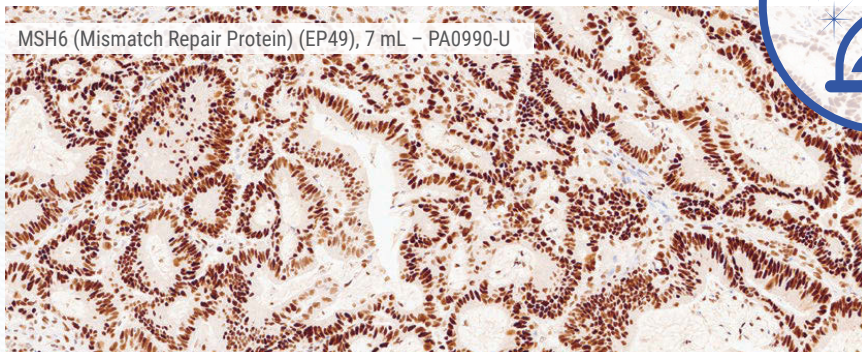
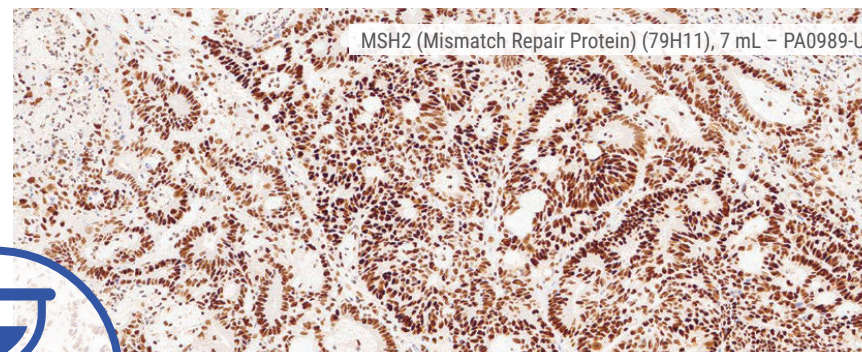
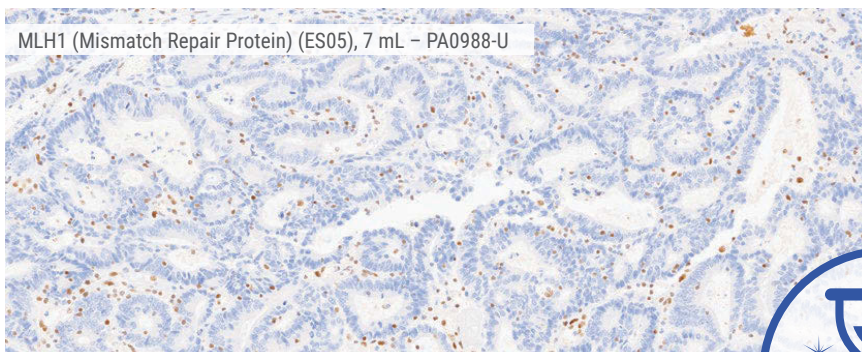
For the detection of MMR protein deficiency as an aid in the differential diagnosis of Lynch Syndrome CRC in patients diagnosed with CRC.

It is intended to be used for the qualitative identification by light microscopy of human mismatch repair (MMR) proteins MLH1, MSH2, MSH6 and PMS2 in formalin-fixed, paraffin-embedded (FFPE) colorectal cancer (CRC) tissue sections by immunohistochemical staining.

TAKE CONTROL OF TIME WHILE ACHIEVING ACCURATE RESULTS

See for yourself how the BOND MMR Antibody Panel enables you to operate more efficiently giving you rapid results to make critical decisions with confidence.

Only 2.5 hours with these 4 NOVOCASTRA Ready-to-Use US FDA Class II MMR antibodies.

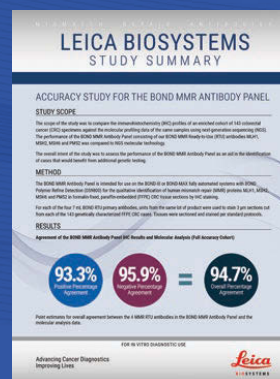
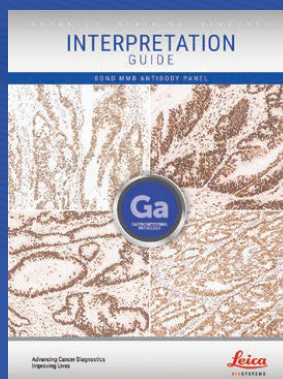


COLORECTAL CANCER CASE STAINED WITH THE BOND MMR ANTIBODY PANEL, DEMONSTRATING COMBINED LOSS OF MLH1 AND PMS2 PROTEINS AND RETAINED EXPRESSION OF MSH2 AND MSH6 PROTEINS

SCAN OR CLICK...

THE QR CODE TO
ACCESS THE BOND MMR
ANTIBODY PANEL:

- » INTERPRETATION GUIDE
- » ACCURACY STUDY
- » IMAGE GALLERY



The BOND MMR Antibody Panel is intended for use on the BOND-III or BOND-MAX fully automated systems with BOND Polymer Refine Detection (DS9800)

REFERENCES:

- Arnold M et al., (2017). Global patterns and trends in colorectal cancer incidence and mortality. *Gut* 66, 683-691.
- Arnold M, Sierra MS, Laversanne M, Soerjomataram I, Jemal A, Bray F. Global patterns and trends in colorectal cancer incidence and mortality. *Gut*. 2017;66:683-91. [PubMed] [Google Scholar]
- Bhattacharya P, McHugh TW. Lynch Syndrome. [Updated 2022 Jul 18]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan-. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK431096/>
- Vasen HF et al., (2013) Revised guidelines for the clinical management of Lynch syndrome (HNPCC): recommendations by a group of European experts. *Gut* 62, 812-23.
- Hampel H et al., (2008). Feasibility of screening for Lynch syndrome among patients with colorectal cancer. *Journal of Clinical Oncology* 26, 5783-8.

BOND MMR ANTIBODY PANEL ORDERING INFORMATION

CODE	NAME	CONFIGURATION
PA0988-U	MLH1 (Mismatch Repair Protein) (ES05)	BOND Ready-to-Use
PA0989-U	MSH2 (Mismatch Repair Protein) (79H11)	BOND Ready-to-Use
PA0990-U	MSH6 (Mismatch Repair Protein) (EP49)	BOND Ready-to-Use
PA0991-U	PMS2 (Mismatch Repair Protein) (EP51)	BOND Ready-to-Use

NOVOCASTRA PRIMARY ANTIBODIES



NOVOCASTRA BOND RTU

The BOND MMR Antibody Panel is part of the larger antibody offering by Leica Biosystems within our Gastrointestinal Pathology specialty.

Spanning 14 pathology menus, Leica Biosystems offers laboratories a comprehensive range of clinically relevant antibodies for the most demanding workload. BOND Ready-to-Use antibodies are optimized to deliver high-quality staining results on BOND systems. This format eliminates variability that can occur with manual antibody dilutions and also reduces preparation time. Pre-optimized reagents and automated protocols deliver consistent results you can depend on*.

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* Independent analysis commissioned by Leica Biosystems according to the manufacturers' instructions for use and on the corresponding staining platform. For recommended protocols see instructions for use. Any deviation from recommended conditions must be validated by the user.