Precipitation of immunoglobulin (Lab6)

Protocol

1- Allow serum or ascetic fluid to thaw, and centrifuge at 3000gfor 30 minutes.

2- Transfer sample to beaker containing astir bar and place on magnetic stirrer.

3-While sample is stirring; slowly add saturated ammonium sulfate to bring final concentration to 50% saturation (**why**)?

- a. Volume of ammonium sulfate is equal to volume of sample
- b. Prevent exceeding the desired concentration.

4- Total volume ammonium sulfate is added, move beaker at 4C for 6 hours or overnight.

5- Transfer to conical tube and centrifuge the precipitate at 3000gfor 30 minutes.

6- Carefully remove and discard supernatant, Invert conical tube and drain well.

Note : for serum resuspend pellet in 30%-50% of the starting volume in 1x(PBS) while for monoclonal antibody tissue culture supernatants , resuspend pellet in 10% of the starting volume in 1x(PBS).

7-Transfer antibody solution to dialysis tube (why)?

To get rid of the ammonium sulfate residues that has been precipitate.

8- Remove antibody solution from tubing and centrifuge to remove any remaining debris.

9- Determine the concentration and store at -80C for long term storage

Clinical uses of intravenous immunoglobulin

1- Treatment of neurological disorder including dermatomyositis, Guillain Barre Syndrome, and chronic inflammatory.

2- In hematology it is used to treat cytopenia, and chronic lymphatic leukemia

3- In immunology is used to treat systemic lupus erythematosus

4- In dermatology is used to treat Kawasaki syndrome

5-Nephrology is used to treat Vasculitis.