

Quantification of complement-dependent cytotoxicity using *iLite*[®] CD20 (+) Svar Luc Assay Ready Cells

For research and professional use only. Not for use in diagnostic procedures.

*This application note contains a suggested protocol and performance data.
Each individual laboratory must set up their own method and perform relevant validations.*

Background

Complement-dependent cytotoxicity (CDC) is an important mechanism for clearance of antibody target cells. It is initiated when the complement factor C1q is bound to the Fc-domain of target-bound antibodies (1). This results in C1q complex that triggers the classical complement cascade and activates C3 and C5 convertase. This leads to formation of the membrane attack complex (MAC), which is destructing the cell membrane with pores resulting in lysis of the target cell (2,3).

CDC has an important role in the human immune response by eliminating pathogens, including bacteria, extracellular organisms, and tumor cells that would otherwise promote illness. Furthermore, CDC is a mechanism where therapeutic antibodies for cancer, targeting for example CD20 or CD38, may mediate their effect. Therefore, studying CDC activity can be a useful for investigating potential therapeutic antibodies that have anti-cancer effects (4,5).

Principle of the assay

The *iLite*[®] CD20 (+) Svar Luc Assay Ready Cells are cells engineered for constitutive expression of Svar luciferase. The luciferase signal can be measured in a luminometer following addition and incubation of luciferase substrate. The luciferase signal is proportional to complement-dependent cytotoxicity, in this application note triggered by the anti-CD20 antibody Rituximab (Fig.1).

Specimen collection

The *iLite*[®] CD20 (+) Svar Luc Assay Ready Cells can be used for detection of complement-dependent cytotoxicity in test samples containing human serum.

Material and equipment needed

Material and equipment	Suggested supplier	Reference
<i>iLite</i> [®] CD20 (+) Svar Luc Assay Ready Cells	Svar Life Science	BM5028
Diluent (RPMI 1640 containing 9% heat inactivated FBS + 1% Penicillin-Streptomycin)	Gibco	61870 (RPMI) 26140-079 (FBS) 15140-122 (Penicillin-Streptomycin)
Complement preserved human serum	NA	NA
Rituximab or analogues	Roche	NA
Svar luciferase substrate	Invivogen	Rep-qlc4lg, Quanti-luc 4 Lucia/Gaussia
Plate; White walled micro well plate suitable for luminescence	PerkinElmer	6005680
Microplate Luminometer with appropriate reading software – no filter on luminometer	Contact Svar Life Science for list of recommended suppliers	NA
Incubator, 37 °C with 5% CO ₂	NA	NA
Water bath, 37 °C	NA	NA
Single-channel and multi-channel pipettes with polypropylene disposable tips	NA	NA
Polypropylene tubes or plate for dilution	NA	NA
Single-use polypropylene reservoir	NA	NA
Timer	NA	NA

Protocol

Preparation of calibrator

Rituximab from Roche has successfully been used to activate the *iLite*[®] CD20 (+) Svar Luc Assay Ready Cells. The below table shows the dilutions of Rituximab, used for QC release of the *iLite*[®] CD20 (+) Svar Luc Assay Ready Cells.

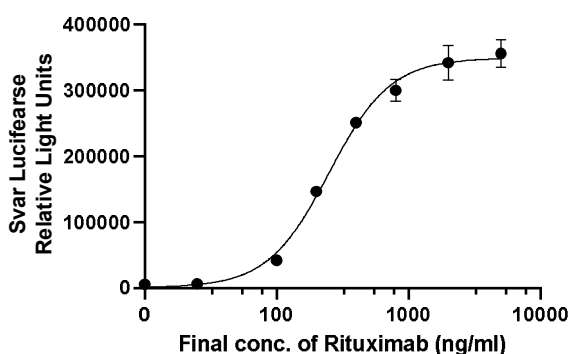


Figure 1. Example of Rituximab curve.

Calibrator	Rituximab
	Calibrator solution conc. (ng/ml)
A	12 500
B	5 000
C	2 000
D	1 000
E	500
F	250
G	63
H	0

Table 1. Suggested calibrator solution concentrations for Rituximab.

Assay preparation and incubation

1. Design a plate layout. It is recommended to perform the test at least in duplicates.
2. Dilute the antibody calibrator, **in assay values** in the example is 0 – 5000 ng/ml.
3. Thaw the vial *iLite*[®] CD20 (+) Svar Luc Assay Ready Cells in a 37°C water bath with gentle agitation for 1 minute. The cell suspension is mixed **very carefully** ten times with pipette to ensure a homogeneous distribution of cells.
4. Dilute 250 µL cell suspension with 2.75 mL diluent.
5. Add 20 µL antibody in duplicate to assigned wells.
6. Add 20 µL diluted cells to assigned wells containing 20µL stimulator. **Critical step: when the cell suspension is added into the rituximab solution in the wells, no mixing is needed. DO NOT USE plate-shaker.**
7. Place a lid on the plate and incubate for 30 minutes at 37 °C with 5% CO₂.
8. Dilute serum samples with diluent (1:4 with diluent)
9. Add 10 µL of diluted serum sample to assigned wells and mix by gentle pipetting with a higher volume than 10 µL. **Critical step: Mix gently to avoid damage to cells. DO NOT USE plate-shaker.**
10. Place a lid on the plate and incubate for 5 hours at 37 °C with 5% CO₂.

Adding substrate solutions

11. Equilibrate the plate and the substrate solution to room temperature.
12. Prepare the Svar luciferase substrate according to the manufacturer's instructions and add 75 µL per well. Mix by gentle pipetting and protect the plate from light. After 10 minutes incubation at room temperature read in a luminometer with read time 0.1 seconds. **Critical step: Mix gently to avoid damage to cells. DO NOT USE plate-shaker.**

Considerations to be taken into account

- **When handling of cells** – It is important to handle these cells with care since the constitutive expression of Svar luciferase causes increased assay background if handling induced cell rupture occurs. To avoid cell damage, pipette gently and sparsely, avoid creating bubbles, and do not use a plate shaker. Keep the cells on dry ice until antibody solutions have been plated.
- **When handling of serum samples** – To ensure preservation of complement activity in the serum, keep the serum samples on ice until use. Do not thaw serum using water warmer than 37°C and do not use repeatedly freeze-thawed serum.
- **Serum sample dilution** – CDC activity does not show a simple directly proportionality to the serum concentration in assay. As seen in Figure 2, high serum concentrations do inhibit the CDC activity. The serum dilution used in this application note is 1:4, shown in black in Figure 2.

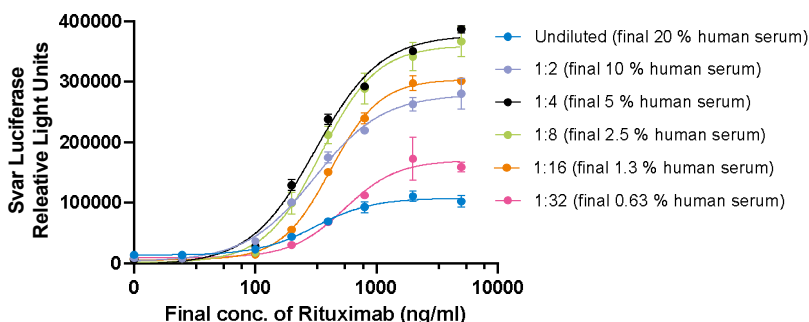


Figure 2. CDC activity using human serum in variable dilution.

Precautions

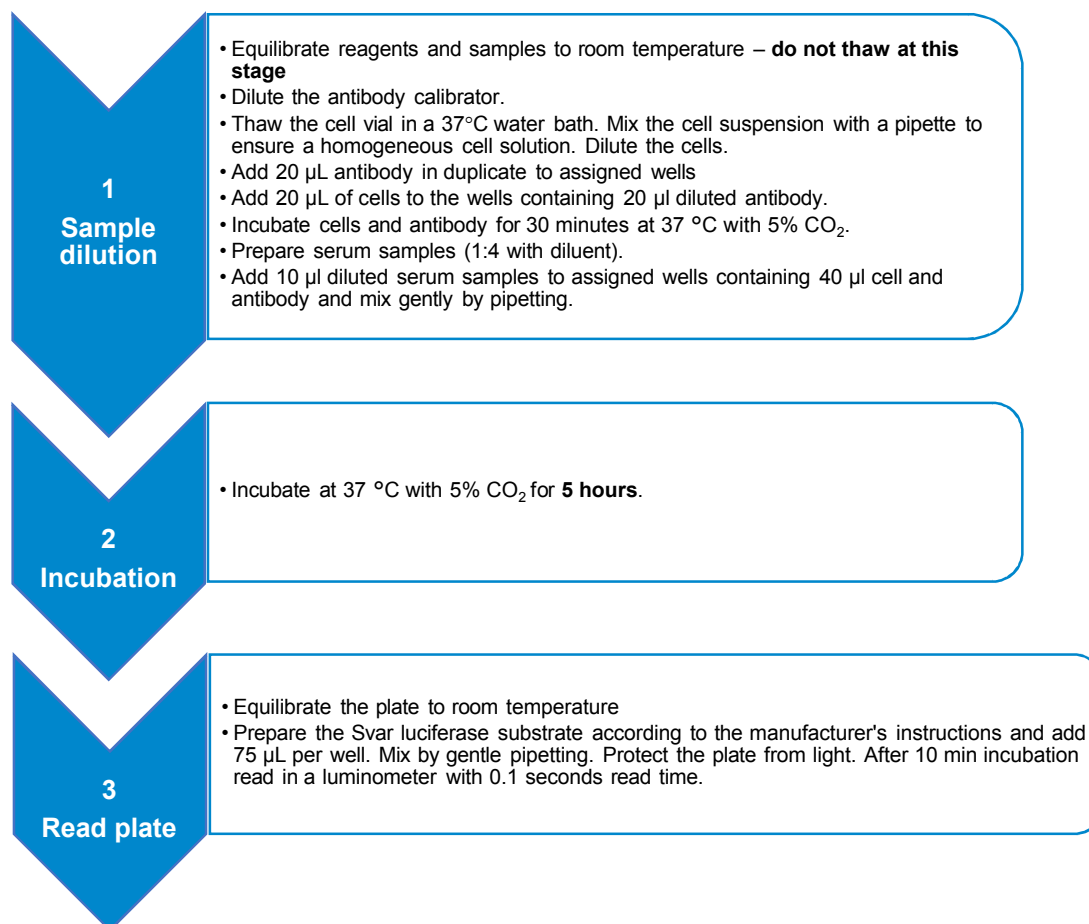
- This application note is intended for professional laboratory research use only. The data and results originating from following the Application Note should not be used either in diagnostic procedures or in human therapeutic applications.
- Use and handle the material and instruments referenced according to the supplier's/ manufacturer's instructions or product specifications accompanying the individual material and instruments.
- Dispose of all sample specimens, infected or potentially infected material in accordance with good microbiological practice. All such materials should be handled and disposed as though potentially infectious.
- Residues of chemicals and preparations are generally considered as biohazardous waste and should be inactivated prior to disposal by autoclaving or using bleach. All such materials should be disposed of in accordance with established safety procedures.

Proprietary Information

In accepting delivery of *iLite*[®] Assay Ready Cells the recipient agrees not to sub-culture these cells, attempt to sub-culture them or to give them to a third-party recipient, and only to use them directly in assays. *iLite*[®] cell-based products are covered by patents which are the property of Svar Life Science AB and any attempt to reproduce the delivered *iLite*[®] Assay Ready Cells is an infringement of these patents.

QUICK GUIDE

Quantification of complement-dependent cytotoxicity using *iLite*[®] CD20 (+) Svar Luc Assay Ready Cells



Troubleshooting and FAQ

Please consult the Svar Life Science website www.svarlifescience.com

References

1. Lara S, Heilig J, Virtanen A, Kleinau S. Exploring complement-dependent cytotoxicity by rituximab isotypes in 2D and 3D-cultured B-cell lymphoma. *BMC Cancer*. 2022 Dec;22(1):678.
2. Noris M, Remuzzi G. Overview of Complement Activation and Regulation. *Semin Nephrol*. 2013 Nov;33(6):479–92.
3. Reis ES, Mastellos DC, Ricklin D, Mantovani A, Lambris JD. Complement in cancer: untangling an intricate relationship. *Nat Rev Immunol*. 2018 Jan;18(1):5–18.
4. Hogarth PM, Pietersz GA. Fc receptor-targeted therapies for the treatment of inflammation, cancer and beyond. *Nat Rev Drug Discov*. 2012 Apr;11(4):311–31.
5. Wang SY, Weiner G. Complement and cellular cytotoxicity in antibody therapy of cancer. *Expert Opin Biol Ther*. 2008 Jun;8(6):759–68.