

**Human Retinoid X Receptor Gamma
(NR2B3, RXRG, RXR γ)
Reporter Assay System**

384-well Format Assays
Product # IB00822

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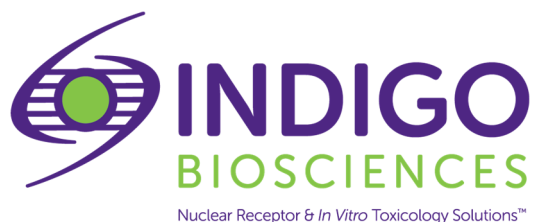
Technical Manual
(version 8.0b)

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Human RXR γ Reporter Assay System 384-well Format Assays

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I. Description

▪ **The Assay System** ▪

This nuclear receptor assay utilizes proprietary non-human cells engineered to provide constitutive, high-level expression of the **Human Retinoid X Receptor Gamma** (NR2B3), a ligand-dependent transcription factor commonly referred to as RXRG or **RXR γ** .

INDIGO's Reporter Cells include the luciferase reporter gene functionally linked to a RXR γ -responsive promoter. Thus, quantifying changes in luciferase expression in the treated reporter cells provides a sensitive surrogate measure of the changes in RXR γ activity. The principal application of this assay is in the screening of test samples to quantify any functional activity, either agonist or antagonist, that they may exert against human RXR γ .

RXR γ Reporter Cells are prepared using INDIGO's proprietary **CryoMite™** process. This cryo-preservation method yields exceptional cell viability post-thaw, and provides the convenience of immediately dispensing healthy, division-competent reporter cells into assay plates. There is no need for cumbersome intermediate treatment steps such as spin-and-rinse of cells, viability determinations, cell titer adjustments, or the pre-incubation of reporter cells prior to assay setup.

INDIGO Bioscience's Nuclear Receptor Assays are all-inclusive cell-based assay systems. In addition to RXR γ Reporter Cells, this kit provides two optimized media for use during cell culture and in diluting the user's test samples, a reference agonist, Luciferase Detection Reagent, and a cell culture-ready assay plate.

▪ **The Assay Chemistry** ▪

INDIGO's nuclear receptor reporter assays capitalize on the extremely low background, high-sensitivity, and broad linear dynamic range of bio-luminescence reporter gene technology.

Reporter Cells incorporate the cDNA encoding beetle luciferase, a 62 kD protein originating from the North American firefly (*Photinus pyralis*). Luciferase catalyzes the mono-oxidation of D-luciferin in a Mg⁺²-dependent reaction that consumes O₂ and ATP as co-substrates, and yields as products oxyluciferin, AMP, PP_i, CO₂, and photon emission. Luminescence intensity of the reaction is quantified using a luminometer and is reported in terms of Relative Light Units (RLU's).

INDIGO's Nuclear Receptor Assays feature a luciferase detection reagent specially formulated to provide stable light emission between 30 and 100+ minutes after initiating the luciferase reaction. Incorporating a 30-minute reaction-rest period ensures that light emission profiles attain maximal stability, thereby allowing assay plates to be processed in batch. By doing so, the signal output from all sample wells, from one plate to the next, may be directly compared within an experimental set.

▪ **Considerations for the Preparation and Automated Dispensing of Test compounds** ▪

Small molecule compounds are typically solvated at high concentration (ideally 1,000x-concentrated) in DMSO and stored frozen as master stocks. For **384-well format assays** these master stocks will be diluted by one of two alternative methods, the selection of which will be dictated by the type of dispensing instrument that is to be used. This Technical Manual provides detailed protocols for each of these two alternative methods:

- a.) Assay setups in which a conventional **tip-based** instrument is used to dispense test compounds into assay wells (in black text). Use **Compound Screening Medium (CSM)** to generate a series of **2x-concentration** test compound treatment media, as described in *Step 2a* of the **Assay Protocol**. The final concentration of DMSO carried over into assay reactions should not exceed 0.4%; strive to use 1,000x-concentrated stocks when they are prepared in DMSO.

NOTE: CSM is formulated to help stabilize hydrophobic test compounds in the aqueous environment of the assay mixture. Nonetheless, high concentrations of extremely hydrophobic test compounds diluted in CSM may lack long-term stability and/or solubility, especially if further stored at low temperatures. Hence, it is recommended that test compound dilutions are prepared in CSM immediately prior to assay setup and are considered to be 'single-use' reagents.

and,

- b.) Assay setups in which an **acoustic transfer** device is used to dispense test compounds into assay wells (text highlighted in blue). Use DMSO to make a series of **1,000x-concentrated** test compound stocks that correspond to each desired final assay concentrations, as described in *Step 2b* of the **Assay Protocol**.

▪ **Considerations for Automated Dispensing of Other Assay Reagents** ▪

When dispensing into a small number of assay plates, first carefully consider the dead volume requirement of your tip-based dispensing instrument before committing assay reagents to its setup. In essence, "dead volume" is the volume of reagent that is dedicated to the instrument; it will *not* be available for final dispensing into assay wells. The following Table provides information on reagent volume requirements, and available excesses on a *per kit* basis. Always pool the individual reporter cell suspensions and all other respective assay kit reagents before processing multiple 384-well assay plates.

Stock Reagent & Volume provided	Volume to be Dispensed (384-well plate)	Excess rgt. volume available for instrument dead volume
<i>when using tip dispensing of test cmpds</i> Reporter Cell Suspension 7.5 ml	15 µl / well 5.8 ml / plate	~ 1.7 ml
<i>when using acoustic dispensing of test cmpds</i> Reporter Cell Suspension 15 ml	30 µl / well 11.5 ml / plate	~ 3.4 ml
Detection Substrate 7.8 ml	15 µl / well 5.8 ml / plate	~ 2 ml

▪ Assay Scheme ▪

The *Day 1* preparation, volumes, and chronology of dispensed cells and test compounds are different between assay setups using a *tip-based dispenser* (**1a**) and those using an *acoustic transfer device* (**1b**). Following 22 -24 hr incubation Detection Substrate is added. Light emission from each assay well is quantified using a plate-reading luminometer.

Figure 1a. Assay workflow if using conventional **tip-based** dispensing of test compounds.

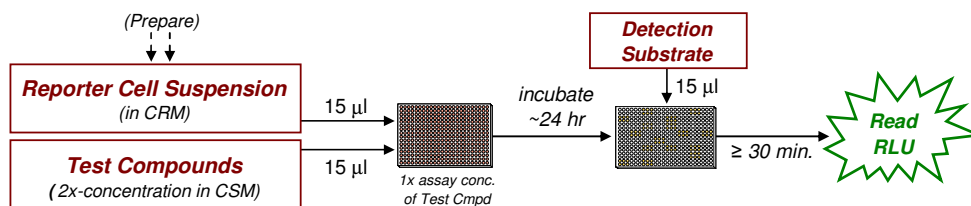
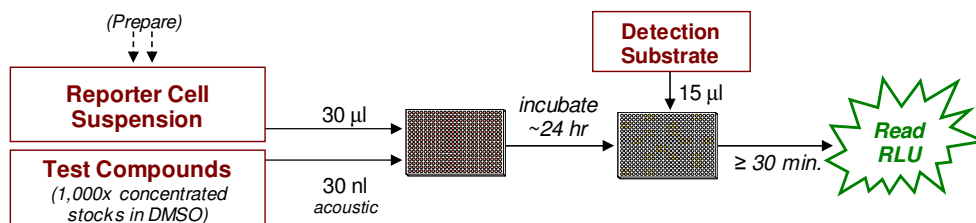


Figure 1b. Assay workflow if using **acoustic** dispensing of test compounds.



▪ Assay Performance ▪

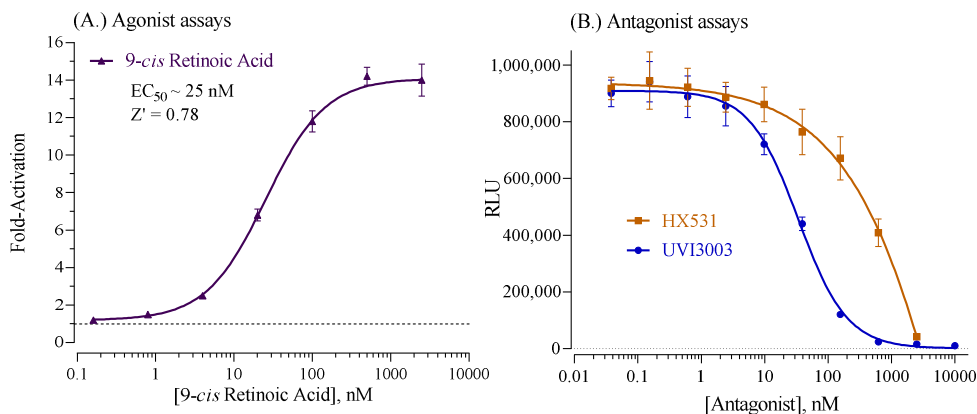


Figure 2. Dose-response analyses of the Human RXR α assay.

(A.) *Agonist assays.* RXR β Reporter Cells using 9-*cis*-Retinoic Acid (provided).

(B.) *Antagonist assays.* Reporter cells were co-treated with 100 nM (EC₇₀₋₈₀) of 9-*cis*-Retinoic Acid and varying concentrations of either UVI3003 or HX531 (Tocris).

Luminescence was quantified and average relative light units (RLU) and corresponding standard deviation (SD) values were determined for each treatment concentration ($n \geq 4$). Z' values were calculated as described by Zhang, *et al.* (1999)¹. Non-linear regression and EC₅₀ analyses were performed using GraphPad Prism software.

NOTE: RLU values will vary between different production lots of reporter cells and can vary *significantly* between different makes and models of luminometers.

¹ Zhang JH, Chung TD, Oldenburg KR. (1999) A Simple Statistical Parameter for Use in Evaluation and Validation of High Throughput Screening Assays. *J Biomol Screen.*;4(2), 67-73.

$$Z' = 1 - [3 * (SD^{Ref} + SD^{Bkg}) / (RLU^{Ref} - RLU^{Bkg})]$$

II. Product Components & Storage Conditions

This assay kit contains materials to perform assays in a single 384-well assay plate.

Cryopreserved mammalian cells are temperature sensitive! To ensure maximal viability the tube of Reporter Cells must be maintained at -80°C until immediately prior to the rapid-thaw procedure described in this protocol.

Assay kits are shipped on dry ice. Upon receipt of the kit transfer it to -80°C storage. If you wish to first inventory the individual kit components be sure to first transfer and submerge the tube of reporter cells in dry ice.

The aliquot of Reporter Cells is provided as a single-use reagent. Once thawed, cells can NOT be refrozen. Nor can they be maintained in extended culture with any hope of retaining downstream assay performance. Therefore, extra volumes of these reagents should be discarded after assay setup.

The date of product expiration is printed on the Product Qualification Insert (PQI) enclosed with each kit.

<u>Kit Components</u>	<u>Amount</u>	<u>Storage Temp.</u>
▪ RXR γ Reporter Cells	1 x 2.0 mL	-80°C
▪ Cell Recovery Medium (CRM)	1 x 7 mL	-20°C
▪ Compound Screening Medium (CSM)	1 x 35 mL	-20°C
▪ 9- <i>cis</i> -Retinoic Acid, 10 mM (in DMSO) (reference agonist for RXR γ)	1 x 30 μ L	-20°C
▪ Detection Substrate	1 x 7.8 mL	-80°C
▪ 384-well assay plate (white, sterile, cell-culture ready)	1	ambient

III. Materials to be Supplied by the User

The following materials must be provided by the user, and should be made ready prior to initiating the assay procedure:

DAY 1

- dry ice container
- cell culture-rated laminar flow hood.
- 37°C, humidified 5% CO₂ incubator for mammalian cell culture.
- 37°C water bath.
- 70% alcohol wipes
- 8-channel electronic, repeat-dispensing pipettes & tips suitable for dispensing 15 μ l.
- disposable media basins, sterile.
- sterile multi-channel media basins (such as the Heathrow Scientific "Dual-Function Solution Basin"), *or* sterilized 96 deep-well blocks (*e.g.*, Axygen Scientific, #P-2ML-SQ-C-S), *or* appropriate similar vessel for generating dilution series of reference and test compound(s).
- antagonist reference compound (*optional*).

DAY 2 plate-reading luminometer.

IV. Assay Protocol

Review the entire Assay Protocol before starting. Completing the assay requires an overnight incubation. *Steps 1-8* are performed on **Day 1**, requiring less than 2 hours to complete. *Steps 9-13* are performed on **Day 2** and require less than 1 hour to complete.

▪ A word about Antagonist-mode assay setup ▪

Receptor inhibition assays expose the Reporter Cells to a constant, sub-maximal concentration (typically between EC₅₀ – EC₈₅) of a known agonist AND varying concentrations of the test compound(s) to be evaluated for antagonist activity. This RXR γ Reporter Assay kit includes a 10 mM stock solution of **9-cis-Retinoic Acid**, an agonist of RXR γ that may be used to setup antagonist-mode assays. 100 nM 9-cis-Retinoic Acid typically approximates EC₇₀₋₈₀ in this assay. Hence, it presents an appropriate assay concentration of agonist to be used when screening test compounds for inhibitory activity. Adding the reference agonist to the bulk suspension of Reporter Cells (*i.e.*, prior to dispensing into assay wells) is the most efficient and precise method of setting up antagonist assays, and it is the method presented in *Step 5b* of the protocol when performing tip-based dispensing, and *Step 6b of the protocol when using an acoustic transfer device to dispense test compounds*.

Note that when using a *tip-based instrument* for the dispensing of 2x-concentrated test compounds the cell suspension must also be supplemented with a **2x**-concentration of the challenge agonist 9-cis-retinoic acid.

When using an acoustic transfer device for the dispensing of 1,000x-concentrated test compounds the cell suspension should be supplemented with a 1x-concentration of the challenge agonist 9-cis-retinoic acid.

DAY 1 Assay Protocol:

All steps must be performed using proper aseptic technique.

- 1.) Remove **Cell Recovery Medium (CRM)** and **Compound Screening Medium (CSM)** from freezer storage and thaw in a 37°C water bath.
- 2.) **Prepare dilutions of treatment compounds:** Prepare Test Compound treatment media for *Agonist-* or *Antagonist-mode* screens. NOTE that test and reference compounds will be prepared differently when using tip-dispensing vs. *acoustic dispensing*. Regardless of the method, the total DMSO carried over into assay reactions should not exceed 0.4%.
 - a. *Tip dispensing method:* In *Step 6*, 15 μ l / well of the prepared treatment media is added to the assay that has been pre-dispensed with 15 μ l /well of Reporter Cells. Hence, to achieve the desired *final* assay concentrations one must prepare treatment media with a **2x**-concentration of the test and reference material(s). Use **CSM** to prepare the appropriate dilution series. Plan dilution volumes carefully; this assay kit provides 35 ml of CSM.
 - b. *Acoustic dispensing method:* In *Step 6*, 30 nl / well of **1,000x**-concentrated test compound solutions (prepared in DMSO) are added to the assay plate using an acoustic transfer device.

Preparing the positive control: This RXR γ Assay kit includes a 10 mM stock solution of **9-cis-Retinoic Acid**, a reference agonist of RXR γ . The following 7-point treatment series, with concentrations presented in 5-fold decrements, provides a suitable dose-response: 2500, 500, 100, 20.0, 4.00, 0.800, and 0.160 nM, and including a 'no treatment' control.

APPENDIX 1a provides an example for generating such a dilution series to be used when *tip-dispensing* compound solutions prepared in CSM (15 μ l / well).

APPENDIX 1b provides an example for generating such a series of 1,000x-concentrated solutions of compounds prepared in DMSO to be used when performing *acoustic dispensing* (30 nl / well).

When using *tip-based* instrumentation for dispensing test compounds ...

3.) Prepare Reporter Cell suspension. *First*, retrieve the tube of **CRM** from the 37°C water bath, sanitize the outside with a 70% ethanol swab;

Second, retrieve **Reporter Cells** from -80°C storage and immerse in dry ice to transport the tube to a laminar flow hood. Perform a *rapid thaw* of the frozen cells by transferring a 5.5 ml volume of 37°C CRM into the tube of frozen cells. Recap the tube of cells and place it in a 37°C water bath for 5 - 10 minutes. The resulting volume of cell suspension will be 7.5 ml.

4.) Retrieve the tube of cell suspension from the water bath. Sanitize the outside surface of the tube with a 70% alcohol swab, then transfer it into the cell culture hood.

5.) Gently invert the tube of cells several times to gain a homogenous cell suspension.

a. for Agonist-mode assays: Dispense **15 µl / well** of cell suspension into the Assay Plate.

~ or ~

b. for Antagonist-mode assays: Supplement the bulk volume of Reporter Cells suspension with a 2x-concentration of the challenge agonist (refer to "A word about antagonist-mode assay setup", pg. 7). Dispense **15 µl / well** of cell suspension into the Assay Plate.

6.) Dispense **15 µl / well** of 2x-concentrated treatment media (from *Step 2a*) into the assay plate.

When using an *acoustic transfer* device for dispensing test compounds ...

3.) Dispense **30 nl / well** of the 1,000x-concentrated compounds (in DMSO solutions, from *Step 2b*) into the assay plate.

4.) Prepare Reporter Cell suspension. *First*, retrieve the tube of **CRM** from the 37°C water bath, sanitize the outside with a 70% ethanol swab;

Second, retrieve **Reporter Cells** from -80°C storage and immerse in dry ice to transport the tube to a laminar flow hood. Transfer the tube of cells into a rack and, without delay, perform a *rapid thaw* of the cells by transferring a **5.5 ml** volume of 37°C CRM into the tube of frozen cells. Recap the tube of cells and place it in a 37°C water bath for 5 - 10 minutes.

5.) Retrieve the tube of cell suspension from the water bath. Sanitize the outside surface of the tube with a 70% alcohol swab. Add an additional **7.5 ml** of CSM to the tube. The resulting volume of cell suspension will be 15 ml.

6.) Gently invert the tube of cells several times to gain a homogenous cell suspension.

a. for Agonist-mode assays: Dispense **30 µl / well** of cell suspension into the Assay Plate that has been pre-dispensed with test compounds.

~ or ~

b. for Antagonist-mode assays: First supplement the bulk volume of Reporter Cells suspension with the challenge agonist **9-cis Retinoic Acid** to achieve an EC₅₀ – EC₈₀ concentration (refer to "A word about antagonist-mode assay setup", pg. 7). Then dispense **30 µl / well** of cell suspension into the Assay Plate that has been pre-dispensed with test compounds.

NOTE: Take special care to prevent cells from settling during the dispensing period. Allowing cells to settle during the transfer process, and/or lack of precision in dispensing uniform volumes across the assay plate *will* cause well-to-well variation (= increased Standard Deviation) in the assay.

NOTE: Following the dispensing of Reporter Cells and test compounds INDIGO recommends performing a *low-speed* spin of the assay plate (with lid) for 1 minute using a room temperature centrifuge fitted with counter-balanced plate carriers.

7.) Transfer the assay plate into a cell culture incubator (37°C, humidified, 5% CO₂) for 22 - 24 hours.

NOTE: Ensure a high-humidity ($\geq 70\%$) environment within the cell culture incubator. This is critical to prevent the onset of deleterious "edge-effects" in the assay plate.

8.) For greater convenience on *Day 2*, retrieve **Detection Substrate** from freezer storage and place in a dark refrigerator (4°C) to thaw overnight.

DAY 2 Assay Protocol:

Subsequent manipulations do *not* require special regard for aseptic technique and may be performed on a bench top.

9.) Approximately 30 minutes before intending to quantify receptor activity remove **Detection Substrate** from the refrigerator and place it in a low-light area so that it may equilibrate to room temperature. Gently invert the tube several times to ensure a homogenous solution.

NOTE: Do NOT actively warm Detection Substrate above room temperature. If this solution was not allowed to thaw overnight at 4°C, a room temperature water bath may be used to expedite thawing.

10.) Set the plate-reader to "luminescence" mode. Set the instrument to perform a single 5 second "plate shake" prior to reading the first assay well. Read time may be set to 0.5 second (500 mSec) per well, *or less*.

11.) Following 22 - 24 hours of incubation dispense **15 µl / well** of **Detection Substrate** to the assay plate.

NOTE: Perform this reagent transfer carefully to avoid bubble formation!

Scattered micro-bubbles will not pose a problem. However, bubbles covering the surface of the reaction mix, or large bubbles clinging to the side walls of the well, will cause lens-effects that will degrade the accuracy and precision of the assay data. INDIGO recommends performing a final *low-speed* spin of the assay plate (with lid) for 1 minute using a room temperature centrifuge fitted with counter-balanced plate carriers.

12.) Allow the plate(s) to rest at room temperature for 30 minutes. Do not shake the assay plate(s) during this period.

NOTE: the luminescent signal is unstable during the first 30 minutes of the luciferase reaction, however, after the initial 30-minute reaction period the luminescence signal achieves a stable emission output.

13.) Quantify luminescence.

V. Related Products

RXRγ Family of Assay Products	
<i>Product No.</i>	<i>Product Descriptions</i>
IB00821-32	Human RXR γ Reporter Assay System 3x 32 assays in 96-well format
IB00821	Human RXR γ Reporter Assay System 1x 96-well format assay
IB00822	Human RXR γ Reporter Assay System 1x 384-well format assays
Bulk volumes of Assay Reagents may be custom manufactured to accommodate any scale of HTS. Please Inquire.	

Please refer to INDIGO Biosciences website for updated product offerings.

www.indigobiosciences.com

VI. Limited Use Disclosures

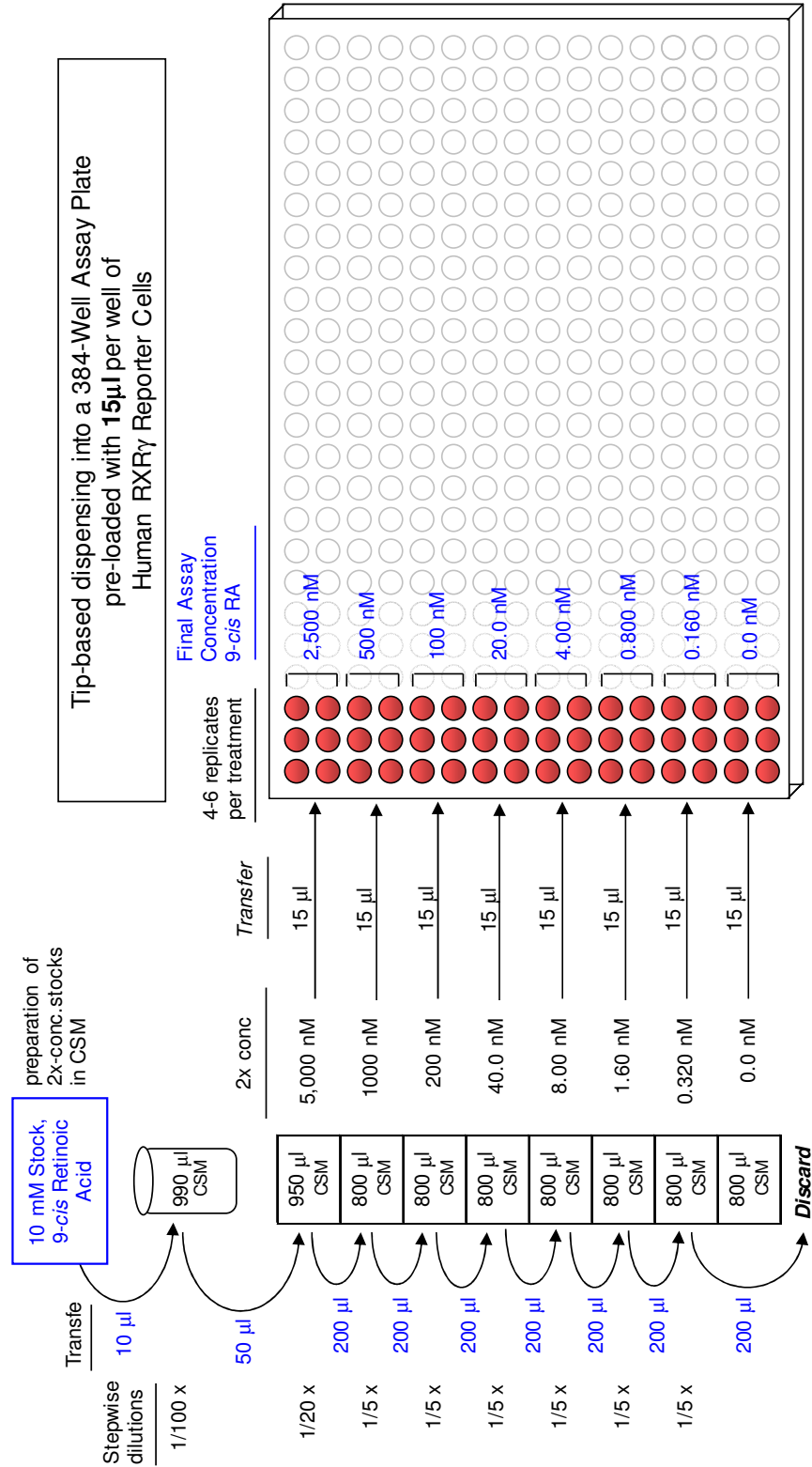
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Product prices, availability, specifications, claims and technical protocols are subject to change without prior notice. The printed Technical Manual provided in the kit box will always be the most current version available.

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APPENDIX 1a for tip-based dispensing. Example scheme for the serial dilution of the reference agonist 9-*cis* Retinoic Acid into CSM to generate **2x-concentrated** treatment media. 15 µl / well are dispensed into assay plates using a *tip-based* instrument.



APPENDIX 1b for acoustic dispensing. Example scheme for the serial dilution of the reference agonist 9-*cis* Retinoic Acid into DMSO to generate **1,000x-concentrated** stocks. 30 nl / well are pre-dispensed into assay plates using an acoustic transfer device.

