

Human Growth Hormone Receptor, isoform 1 Reporter Assay System (GHR)

384-well Format Assays Product # IB14002

Technical Manual (version 8.0i)

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Human GHR Reporter Assay System 384-well Format Assays

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I. Description

■ The Assay System ■

This assay utilizes proprietary human cells that provide constitutive expression of the **Human Growth Hormone Receptor**, *isoform 1* (GHR).

GHR is a single-pass transmembrane receptor that functions as a homo-dimer. Growth Hormone (GH, *aka* Somatotropin) activates GHR to initiate signal transduction by a variety of pathways, including Ras/ERK, PI3K/Akt, and JAK2/STAT1,3,5,6.¹ The activation of these various pathways may culminate in the activation of cytosolic targets, or in the activation of specific transcription factors and the induction of their respective target genes.

JAK2 dependent phosphorylation and activation of the transcription factor STAT5 is a prominent outcome of GHR activation, and it is the signaling pathway exploited by the reporter cells included in this assay kit. Specifically, INDIGO's Reporter Cells contain the luciferase reporter gene functionally linked to an engineered minimal promoter sequence with upstream tandem STAT5 genetic response element (GRE) sequences. Growth hormone activates the GHR in a dose-dependent manner, thereby triggering the JAK2/STAT signal transduction cascade. Activated STAT5 binds to its consensus GRE's to initiate the formation of a complete transcription complex that drives expression of the Luc reporter gene. Therefore, quantifying changes in luciferase activity from peptide-, drug- or antibody-treated reporter cells relative to that of 'untreated' cells provides a sensitive, dose-dependent surrogate measure of changes in the activity of GHR.

GH / GHR play critical roles in the physiological processes of early bone and muscle development, and the regulation of lipid and carbohydrate metabolism. Also important is the role of GH-dependent activation of GHR in modulating the production and secretion of insulin-like growth factor-1 (IGF-1) within the liver, known as the GH-IGF1 axis. Dysregulation of GH production, either up or down, has significant physiological consequences. The development of body mass and size, insulin sensitivity, oncogenesis, and the onset of obesity, liver disease and age-related diseases are greatly impacted by a chronic imbalance of GH production and/or function.

Not surprisingly, the development of novel GH-like peptide therapeutics, as well as small molecule and antibody modulators of GHR activity, continues to command much interest.² Accordingly, the primary application of this reporter assay is to screen test materials for any functional activity, either agonistic or inhibitory, that they may exert against the human GHR.

INDIGO's Reporter Cells are transiently transfected and prepared as frozen stocks using a proprietary **CryoMite**TM process. This cryo-preservation method allows for the immediate dispensing of healthy, division-competent reporter cells into assay plates. There is no need for intermediate treatment steps such as spin-and-rinse of cells, viability determinations or cell titer adjustments prior to assay setup.

INDIGO's assay kits provide the convenience of an all-inclusive cell-based assay system. In addition to GHR Reporter Cells, provided are two optimized media for use in recovering the cryopreserved cells and for diluting test samples, the physiological activator human growth hormone (GH), Luciferase Detection Reagents, and a cell culture-ready assay plate.

¹ Dehkhoda, F, *et al.* (2018) The growth hormone receptor: mechanism of receptor activation, cell signaling, and physiological aspects. Frontiers in Endocrinology 9:35, 1-23.

² Lu,M, *et al.* (2019) Targeting growth hormone function: strategies and therapeutic applications. Signal Transduction and Targeted Therapy (Springer Nature) 4:3, 1-11.

The Assay Chemistry

INDIGO's nuclear receptor reporter assays capitalize on the low background, highsensitivity, 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).

This assay kit features 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

It is recommended that test materials that are **Protein** or **Poly-peptide** ligands, or **Antibodies**, should be solvated in aqueous buffered solutions with carrier protein (*e.g.*, PBS + 0.1% BSA) at concentrations *no less* than 10x-concentrated relative to the highest desired treatment concentration.

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, and as depicted in Appendix 1a. 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 then considered to be 'single-use' reagents.
- 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, and as depicted in Appendix 1b.

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 reagent available for instrument dead vol.
when using tip dispensing of <u>test cmpds</u> Reporter Cell Suspension 7.5 ml	15 μl / well 5.8 ml / plate	~ 1.7 ml
when using acoustic dispensing of test cmpds 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 hours 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.

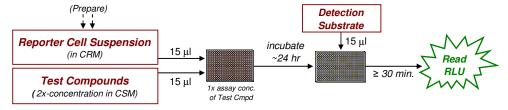
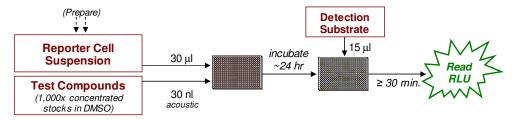


Figure 1b. Assay workflow if using acoustic dispensing of test compounds.



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Human Growth Hormone Receptor Assay 450 400 hGH 350 $EC_{50} \sim 30 \text{ ng/ mL}$ Z' = 0.84Fold-Activation 300 Mock reporter cells 250 200 150 100 50 0.1 1 10 100 1,000 [hGH], ng/mL

Figure 2. GHR Activation assay. Dose-response analyses were performed using tip-based dispensing, according to the protocol provided in this Technical Manual. The concentrated stock of the peptide hGH (provided) was further diluted using CSM to produce 2x-concentrated treatment media at the desired assay concentrations. 15 μl per well of the prepared treatment media were dispensed (n = 4/conc.), including 'untreated' control wells. 'Mock' reporter cells, which contain the STAT5-Luc reporter gene, but lack expression of GHR, were similarly treated with hGH. Following a 22-hour incubation period treatment media were discarded, Detection Substrate was added, and luminescence intensity per well was quantified. Values of average relative light units (RLU) and corresponding values of standard deviation (SD), percent coefficient of variation (%CV), Fold-Activation and Z'³ were determined for each treatment concentration. The least-squares method of non-linear regression was used to plot Fold Activation *vs.* Log₁₀[ng/mL] and an EC₅₀ determination was performed using GraphPad Prism software.

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

³ Zhang JH, *et al.* (1999) A Simple Statistical Parameter for Use in Evaluation and Validation of High Throughput Screening Assays. J Biomol Screen.:4(2), 67-73.

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 cells in dry ice.

The aliquot of Reporter Cells is provided as a single-use reagent. Once thawed, the 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.

Kit Components	<u>Amount</u>	Storage Temp.
• GHR Reporter Cells	1 x 1.0 mL	-80°C
• Cell Recovery Medium (CRM)	1 x 7.0 mL	-20°C
• Compound Screening Medium (CSM)	1 x 45 mL	-20°C
• hGH, 300μg/ml (in PBS/0.1%BSA) (physiological activator of GHR)	1 x 80 μL	-20°C
Detection Substrate (Note: contains DTT)	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
- Instrumentation suitable for dispensing 15 μl volumes
- disposable media basins, sterile.
- sterile multi-channel media basins *or* deep-well plates, *or* appropriate similar vessel for generating dilution series of reference compound(s) and test compound(s).
- Optional: antagonist reference compound / antibody
- Optional: clear 384-well assay plate, cell culture treated, for viewing cells on Day 2.

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 Inhibition-mode assay setups

Receptor inhibition assays expose the Reporter Cells to a fixed, sub-maximal concentration (typically between $EC_{50} - EC_{85}$) of a known agonist AND varying concentrations of the test compound(s) to be evaluated for chemical inhibition. This GHR Assay kit includes a 300 µg/mL stock solution of human Growth Hormone (hGH), the physiological agonist of GHR, that may be used to set up inhibition-mode assays. 60 ng/mL GH approximates EC_{80} in this assay. Hence, it presents a suitable concentration of agonist to use when screening test materials for inhibitory activities.

Adding the reference activator 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 (~ 120 ng / mL) of the challenge activator GH.

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 (~ 60 ng/mL) of the challenge activator GH.

DAY 1 Assay Protocol:

All steps should 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 test 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 μl / well of the prepared treatment media is added to the assay that has been pre-dispensed with 15 μl /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 45 ml of CSM.
- b. Acoustic dispensing method: In Step 6, 30 nl / well of 1,000x-concentrated test compound solutions are added to the assay plate using an acoustic transfer device.
 *NOTE: Stocks of test samples that are small-molecule chemicals / drugs are typically prepared in DMSO and, for acoustic transfer dispensing, we recommend that DMSO (not CSM) is used as the diluent to generate the desired series of 1,000x-treatment concentrations. However, stocks of test samples that are solvated in aqueous solution, such as protein ligands and antibodies, should be further diluted using CSM (not DMSO).

Preparing the positive control: This assay kit includes a concentrated stock of hGH, 300 μ g/ml prepared in PBS/0.1%BSA. The following 7-point treatment series, with concentrations generated using serial 3-fold dilutions, provides a complete dose-response: 300, 100, 33.3, 11.1, 3.70, 1.23, and 0.412 ng/ml. Always include 'no treatment' (or 'vehicle') controls. **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).

(continued ...)

APPENDIX 1b provides an example for generating such a series of 1,000x-concentrated solutions of compounds to be used when performing *acoustic dispensing* (30 nl / well). As noted in *Step 2b*, use CSM to dilute sample and reference stocks that have been prepared in aqueous solutions (*e.g.*, protein ligands, antibodies, *etc.*), or use DMSO to further dilute sample stocks that were initially solvated in DMSO (*e.g.* small molecule chemicals).

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

3.) *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 **6.5 ml** volume of 37°C CRM into the tube of frozen cells. Recap the tube of Reporter 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 Reporter 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 suspension.
- a. for Agonist-mode assays: Dispense 15 μ l / well of cell suspension into the assay plate.

~ or ~

- **b.** for Inhibition-mode assays: Supplement the bulk volume of Reporter Cells suspension with a 2x-concentration of the challenge agonist (refer to "A word about Inhibition-mode assay setup", pg. 8). Dispense 15 μ l / well of cell suspension into the assay plate.
- **6.)** Dispense **15 \mul / 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 (from *Step 2b*) into the assay plate.
- **4.**) *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 **6.5 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 $30 \mu l$ / well of cell suspension into the assay plate that has been pre-dispensed with test compounds.

~ or ~

b. for *Inhibition*-mode assays: First supplement the bulk volume of GHR Reporter Cells suspension with the challenge activator **GH** to achieve an $EC_{50} - EC_{80}$ concentration (refer to "*A word about inhibition-mode assay setups*", pg. 8). Then dispense 30 μ l / well of the supplemented cell suspension into the assay plate that has been pre-dispensed with test compounds.

(continued ...)

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 37°C, humidified, 5% CO₂ incubator for <u>22 24 hours</u>.
 NOTE: Ensure a high-humidity (≥ 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 or in a fume-hood.

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.

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. Program the instrument to perform a single <u>5 second</u> "plate shake" prior to reading the first assay well. The read time is set to 0.5 second (500 mSec) per well, *or less*.
- 11.) Following 22 24 hours of incubation dispense 15 μ l / well of Detection Substrate into all wells of the assay plate.

NOTE: 'Detection Substrate' contains a high concentration of DTT, which produces a strong odor that some users may find objectionable. It is advised to work in a **fume hood** when dispensing it into the assay plate followed by a 'plate rest' period.

NOTE: Scattered micro-bubbles in the assay wells 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. It is advised to perform 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 somewhat 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.
- 14.) Data analyses.

V. Related Products

Product No.	Product Descriptions	
Human Growth Hormone Receptor Assay Products		
IB14001-32	GHR Reporter Assay System 3x 32 assays in 8-well strips (96-well plate format)	
IB14001	GHR Reporter Assay System 1x 96-well format assay	
IB14002	GHR Reporter Assay System 1x 384-well format assays	
Bulk volumes of GHR Assay Reagents may be custom manufactured to accommodate any scale of HTS. Please Inquire.		

LIVE Cell Multiplex (LCM) Assay		
LCM-01	Reagent volumes sufficient to perform 96 Live Cell Assays in 1x96-well, or 2x48-well, or 3x32-well assay plate formats	
LCM-05	Reagent in 5x bulk volume to perform 480 Live Cell Assays contained in 5 x 96-well assay plates	
LCM-10	Reagent in 10x bulk volume to perform 960 Live Cell Assays contained in 10 x 96-well assay plates	

INDIGIo Luciferase Detection Reagent	
LDR-10, -25, -50, -500	INDIGIo Luciferase Detection Reagents in 10 mL, 25 mL, 50 mL, and 500 mL volumes

Please refer to INDIGO Biosciences website for updated product offerings.

www.indigobiosciences.com

VI. Limited Use Disclosures

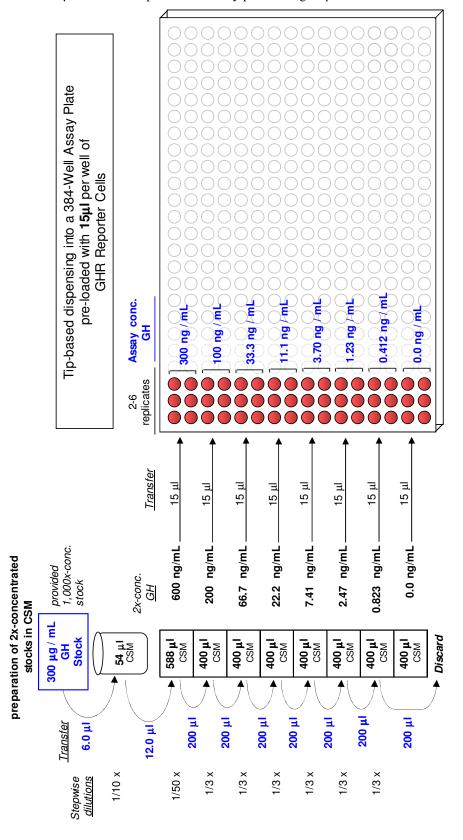
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Product prices, availability, specifications, claims and technical protocols are subject to change without prior notice. The printed Technical Manual provided in the kit box will always be the most current version available.

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APPENDIX 1a for tip-based dispensing. Example scheme for the serial dilution of the reference agonist GH into CSM to generate **2x-concentrated** treatment media. 15 μ l / 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 GH (a protein) into CSM to generate 1,000xconcentrated stocks. 30 nl/well are pre-dispensed into assay plates using an acoustic transfer device. *NOTE: Stocks of small-molecule test drugs are typically prepared in DMSO, and **DMSO** (not CSM) should be further used to generate the desired series of 1,000x-treatment concentrations.

