

## TRITC-Dextran

Catalog # 4014

*For Research Use Only - Not Human or Therapeutic Use*

DESCRIPTION:	Tetramethylrhodamine isothiocyanate (TRITC) labeled dextran
APPLICATIONS:	<p>Use to assess the permeability of semi-permeable membranes either <i>in vivo</i> or <i>in vitro</i> (1-4).</p> <p>Note 1: It is possible to simultaneously use FITC-dextran and TRITC-dextran of different sizes as FITC and TRITC fluoresce at different wavelengths.</p> <p>Note 2: Black 96-well plates are available for reading fluoresce (Catalog # 9045).</p>
QUANTITY:	5 ml
FORM:	25 mg/ml solution in PBS (Red color).
MOLECULAR WEIGHT:	70 kDa
FLUORESCENT PROPERTIES:	Excitation: 550 nm, Emission: 572 nm
<i>IN VIVO</i> PROTOCOL:	<ol style="list-style-type: none"><li>1. Fast mice 4 hours before the oral feeding, and for the duration of the experiment.</li><li>2. Feed 20 ml/kg by oral gavage.</li><li>3. Maintain fasting conditions and wait 3 hours (may vary depending on individual animals).</li><li>4. Collect blood by retro-orbital bleeding, then spin and collect plasma. Dilute plasma 1:2 (or more) with PBS.</li><li>5. Optional: Prepare a standard curve by making dilutions of the stock TRITC-dextran with diluted (1:2) normal mouse plasma with PBS (12.5 µg/ml is a recommended starting point). See next page.*</li></ol> <p><u>Caution: Protein in the samples may interfere and reduce the fluorescence intensity (FI).</u> Therefore, to ensure an accurate determination of TRITC-dextran permeability, the Plasma to PBS ratio must be consistent throughout the standard curve, as well as with the dilution factor of the sample. Use a diluent prepared by the same ratio of normal mouse plasma to PBS in sample and standard dilution.</p> <ol style="list-style-type: none"><li>6. Transfer 50 or 100 µl of diluted samples to a black 96-well plate and read on a fluorescent plate reader.</li></ol>
<i>IN VITRO</i> PROTOCOL:	Please refer to protocol of choice.
STORAGE TEMPERATURE:	4°C in the dark
STABILITY:	1 year

**REFERENCES:**

1. D. Fernandez-Lopez et al., Blood-brain barrier permeability is increased after acute adult stroke but not neonatal stroke in the rat. *J Neurosci* 32, 9588-9600 (2012).
2. J. W. Kim, J. D. Lindsey, N. Wang, R. N. Weinreb, Increased human scleral permeability with prostaglandin exposure. *Invest Ophthalmol Vis Sci* 42, 1514-1521 (2001).
3. D. B. Pink, W. Schulte, M. H. Parseghian, A. Zijlstra, J. D. Lewis, Real-time visualization and quantitation of vascular permeability in vivo: implications for drug delivery. *PLoS One* 7, e33760 (2012).
4. R. K. Sajja, S. Prasad, L. Cucullo, Impact of altered glycaemia on blood-brain barrier endothelium: an in vitro study using the hCMEC/D3 cell line. *Fluids Barriers CNS* 11, 8 (2014).

**\* Preparation of Standards**

If you use 1:2 dilution for sample dilution, prepare 33% normal mouse plasma in PBS (300  $\mu$ l plasma in 600  $\mu$ l PBS) as a diluent. The diluent should be same dilution of samples with PBS.

1. 10  $\mu$ l of 25 mg/ml TRITC-Dextran in 990  $\mu$ l of PBS (250  $\mu$ g/ml)
2. 15  $\mu$ l of the diluted TRITC-Dextran in 2.85 ml of 33% normal mouse plasma in PBS (12.5  $\mu$ g/ml)
3. Mix 125  $\mu$ l of the 12.5  $\mu$ g/ml solution with an equal volume of 33% mouse normal plasma (6.3  $\mu$ g/ml)
4. Repeat 5 times for the 3.1, 1.6, 0.8, 0.4 and 0.2  $\mu$ g/ml.
5. Use 50  $\mu$ l or 100  $\mu$ l for reading.