

**THE UNIVERSITY OF WESTERN ONTARIO**  
**BIOLOGICAL AGENTS REGISTRY FORM**  
 Approved Biohazards Subcommittee: October 14, 2010  
 Biosafety Website: [www.uwo.ca/humanresources/biosafety/](http://www.uwo.ca/humanresources/biosafety/)

This form must be completed by each Principal Investigator holding a grant administered by the University of Western Ontario (UWO) or in charge of a laboratory/facility where the use of Level 1, 2 or 3 biological agents is described in the laboratory or animal work proposed. The form must also be completed if any work is proposed involving animals carrying zoonotic agents infectious to humans or involving plants, fungi, or insects that require Public Health Agency of Canada (PHAC) or Canadian Food Inspection Agency (CFIA) permits.

This form must be updated at least every 3 years or when there are changes to the biological agents being used.

Containment Levels will be established in accordance with Laboratory Biosafety Guidelines, 3rd edition, 2004, Public Health Agency of Canada (PHAC) or Containment Standards for Veterinary Facilities, 1<sup>st</sup> edition 1996, Canadian Food Inspection Agency (CFIA).

Completed forms are to be returned to Occupational Health and Safety, (OHS), (Support Services Building, Room 4190) for distribution to the Biohazards Subcommittee. For questions regarding this form, please contact the Biosafety Officer at extension 81135 or [biosafety@uwo.ca](mailto:biosafety@uwo.ca). If there are changes to the information on this form (excluding grant title and funding agencies), contact Occupational Health and Safety for a modification form. See website: [www.uwo.ca/humanresources/biosafety/](http://www.uwo.ca/humanresources/biosafety/)

PRINCIPAL INVESTIGATOR	<u>Rennian Wang</u>
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EMAIL	<u><a href="mailto:rwang@uwo.ca">rwang@uwo.ca</a></u>

Location of experimental work to be carried out: Building(s)  
 VRL-WC\_ Room(s) \_ A7-level, Animal Care; 5th floor, A5-116, Wang's lab Bay2

\*For work being performed at Institutions affiliated with the University of Western Ontario, the Safety Officer for the Institution where experiments will take place must sign the form prior to its being sent to the University of Western Ontario Biosafety Officer (See Section 15.0, Approvals).

FUNDING AGENCY/AGENCIES: \_CDA, CIHR and NSERC\_

GRANT TITLE(S):

- Development of Human Fetal Pancreas (CDA);
- Role of c-Kit in mediating islet cell growth and function (CIHR),
- Integrin/ECM in islet cell survival and function (NSERC)

List all personnel working under Principal Investigators supervision in this location:

<u>Name</u>	<u>UWO E-mail Address</u>	<u>Date of Biosafety Training</u>
<u>Jinming Li</u>	<u><a href="mailto:Jli64@uwo.ca">Jli64@uwo.ca</a></u>	<u>Sept. 19, 2006</u>
<u>Matthew Riopel</u>	<u><a href="mailto:mriopel3@uwo.ca">mriopel3@uwo.ca</a></u>	<u>July 15, 2009</u>
<u>Zhi Chao Feng</u>	<u><a href="mailto:zfeng5@uwo.ca">zfeng5@uwo.ca</a></u>	<u>June 16, 2009</u>
<u>Jamie Belo</u>	<u><a href="mailto:jbelo@uwo.ca">jbelo@uwo.ca</a></u>	<u>Sept. 15, 2008</u>
<u>Jessica Lynn Dubrick</u>	<u><a href="mailto:jdubric2@uwo.ca">jdubric2@uwo.ca</a></u>	<u>Jan. 13, 2010</u>

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**Please explain the biological agents and/or biohazardous substances used and how they will be stored, used and disposed of. Projects without this description will not be reviewed.**

--Human fetal pancreatic tissue stored either at specific locked -80 freezer or a locked cabinet.

--Human PANC-1, rat INS-1 and AR42J, HEK293 cell lines are stored at the liquid nitrogen tank.

--Streptozotocin: Purchased from Sigma and stored at -20 degree in a container with a specific label. To induce STZ-diabetes, mice will be received 75ug/g body weight (i.p) injection. Staff will use standard precautions of reagent usage and wear appropriate protective clothing, gloves and mask. When animals are injected with STZ, lab coat, mask and eye protection will be worn, and care taken with handling of the needle and syringe. Injectable solution is to be made in fume hood with bench coat covering the bench. Bench coat, needles and syringes, tubes for preparing the solution and gloves will be disposed of as a cytotoxic waste placed into the red 10Gal Biomedical waste pail and labeled with cytotoxic stickers as per LHSC waste handling procedures.

--Tamoxifen: Purchased from Sigma and stored at 4 degree in a container with a specific label. To induce conditional beta1 integrin knock-out, mice will be received 1mg/mouse/per for 5 days i.p injection. Injection will be taken at Conventional area (require non sterile micro isolators). Used dirty cages are never to be taken out of the room. Removal from the animal room to the conventional area can only occur on the 6th day. Handling of mice is double gloved (or forceps) by ACVS staff. Staff will use standard precautions of reagent usage and wear appropriate protective clothing, gloves and mask. When animals are injected with Tamoxifen, lab coat, mask and eye protection will be worn, and care taken with handling of the needle and syringe. Bench coat, needles and syringes, tubes for preparing the solution and gloves will be disposed of as a cytotoxic waste placed into the red 10Gal Biomedical waste pail and labeled with cytotoxic stickers as per LHSC waste handling procedures.

**Please include a one page research summary or teaching protocol.**

We have shown that stem cell factor (SCF)/c-Kit and beta1 integrin/ECM is involved the proliferation, differentiation and function of b-cell in both rodent and human and will continue to determine the underlying mechanisms and subsequent intracellular signaling pathways.

**Rationale:**

Extracellular matrix (ECM) has a major role to play in tissue morphogenesis and homeostasis, and exerts its influence through the integrin family of receptors. Recent evidence suggests that interactions between integrins and ECM can profoundly impact beta-cell survival and insulin-production. While, c-Kit, a transmembrane receptor tyrosine kinase and its ligand, stem cell factor (SCF) has also been implicated its critical for early stem cell differentiation in haematopoiesis and gametogenesis and important for both rodent and human pancreatic islets development.

During our previous funding period we demonstrated integrin/ECM to be an important variable in determining whether putative endocrine progenitor cells proliferate or differentiate.

Our studies on c-Kit receptor interacted with SCF suggest that c-Kit is not only a marker of beta-cell precursors, but is also critical for beta-cell proliferation, maturation, function and survival. We will further investigate, at the cellular and molecular level, the mechanisms by which the c-Kit receptor interact with SCF and cross-talking with integrin receptors, and its intracellular signaling pathways regulate beta-cell proliferation, differentiation, function and survival.

To study the developing human fetal pancreas, we characterized the transcription factor profiles of

human fetal (8-21wk) pancreas, focusing on FOXO1, SOX9 and RFX61. However, our ability to identify human fetal islet progenitors as well as the signals that regulate islet cell differentiation remains incomplete.

### Hypothesis

The c-Kit receptor is critical for beta-cell proliferation, differentiation, metabolic homeostasis and survival through the activation of specific intracellular pathways within islet beta-cells and islet endothelial cells, and through crosstalk with integrin receptors.

### Objectives:

- 1) To characterize the intracellular signaling pathways by which SCF/c-Kit and integrin/ECM regulate the islet cell growth.
- 2) To determine if increased or down-regulated levels of c-Kit or beta1 integrin in islet-cells influence islet-cell development, function and survival in normal and diabetic models.
- 3) To examine the interactions of c-Kit and beta1 integrin in islet cell differentiation, survival and function in vitro and in vivo.
- 4) To identify a specific transcription factor in regulating human islet cell differentiation.

### Approach/Research Plan

- 1) Examine the metabolic changes in the wild-type and mutant mice [C57BL/6J, c-Kit W-v, c-Kit W-v/Fas lpr double mutation mice with C57BL/6J background, and ROSA26-LacZ/B6;129-Itgbl1tm1Efu/J mice with Tamoxifen injection]: glucose tolerance (IPGTT) and insulin tolerance (IPITT) tests
- 2) Generate the diabetic mouse models: High-fat diet (represent to T2D) and Streptozotocin (represent to T1D)
- 3) Examine the intracellular signaling pathways and function of the islet cells: isolated mice islets and INS-1 cell line, glucose-stimulated insulin secretion (GSIS) and culture.
- 4) Investigate the functional role of c-Kit and beta-1 integrin in islet cell differentiation of human fetal pancreas and PANC-1 cell line as well as AR42J cell line.

## 1.0 Microorganisms

1.1 Does your work involve the use of biological agents?  YES  NO  
(non-pathogenic and pathogenic biological agents including but not limited to bacteria and other microorganisms, viruses, prions, parasites or pathogens of plant or animal origin)? If no, please proceed to Section 2.0

Do you use microorganisms that require a permit from the CFIA?  YES  NO

If YES, please give the name of the species. \_\_\_\_\_

What is the origin of the microorganism(s)? \_\_\_\_\_

Please describe the risk (if any) of escape and how this will be mitigated:

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Please attach the CFIA permit.

Please describe any CFIA permit conditions:

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1.2 Please complete the table below:

Name of Biological Agent(s)* (Be	Is it known to be a human	Is it known to be an animal	Is it known to be a zoonotic	Maximum quantity to be cultured	Source/ Supplier	PHAC or CFIA Containment
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specific)	pathogen? YES/NO	pathogen? YES/NO	agent? YES/NO	at one time? (in Litres)		Level
	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No			<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 2+ <input type="radio"/> 3
	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No			<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 2+ <input type="radio"/> 3
	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No			<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 2+ <input type="radio"/> 3
	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No			<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 2+ <input type="radio"/> 3

\*Please attach a Material Safety Data Sheet or equivalent from the supplier.

## 2.0 Cell Culture

2.1 Does your work involve the use of cell cultures?  YES  NO  
If no, please proceed to Section 3.0

2.2 Please indicate the type of primary cells (i.e. derived from fresh tissue) that will be grown in culture:

Cell Type	Is this cell type used in your work?	Source of Primary Cell Culture Tissue	AUS Protocol Number
Human	<input checked="" type="radio"/> Yes <input type="radio"/> No	Fetal pancreas and duodenum	Human, #10060
Rodent	<input checked="" type="radio"/> Yes <input type="radio"/> No	Rat & mouse pancreatic islets	2008-038-04
Non-human primate	<input type="radio"/> Yes <input checked="" type="radio"/> No		
Other (specify)	<input type="radio"/> Yes <input checked="" type="radio"/> No		

2.3 Please indicate the type of established cells that will be grown in culture in:

Cell Type	Is this cell type used in your work?	Specific cell line(s)*	Containment Level of each cell line	Supplier / Source of cell line(s)
Human	<input checked="" type="radio"/> Yes <input type="radio"/> No	PANC-1	2	ATCC
Rodent	<input checked="" type="radio"/> Yes <input type="radio"/> No	INS-1, AR42J, HEK293	2 2 2	Dr. Savita Dhanvantari Dr. Tianru Jin InVitrogen
Non-human primate	<input type="radio"/> Yes <input checked="" type="radio"/> No			
Other (specify)	<input type="radio"/> Yes <input checked="" type="radio"/> No			

\*Please attach a Material Safety Data Sheet or equivalent from the supplier. (For more information, see [www.atcc.org](http://www.atcc.org))

2.4 For above named cell types(s) indicate PHAC or CFIA containment level required  1  2  2+  3

## 3.0 Use of Human Source Materials

3.1 Does your work involve the use of human source materials?  YES  NO  
If no, please proceed to Section 4.0

3.2 Indicate in the table below the Human Source Material to be used.

Human Source Material	Source/Supplier /Company Name	Is Human Source Material Infected	Name of Infectious	PHAC or CFIA Containment
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		<b>With An Infectious Agent? YES/UNKNOWN</b>	<b>Agent (If applicable)</b>	<b>Level (Select one)</b>
Human Blood (whole) or other Body Fluid		<input type="radio"/> Yes <input type="radio"/> Unknown		<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 2+ <input type="radio"/> 3
Human Blood (fraction) or other Body Fluid		<input type="radio"/> Yes <input type="radio"/> Unknown		<input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 2+ <input type="radio"/> 3
Human Organs or Tissues (unpreserved)	LHSC-OB/GY	<input type="radio"/> Yes <input type="radio"/> Unknown		<input type="radio"/> 1 <input checked="" type="radio"/> 2 <input type="radio"/> 2+ <input type="radio"/> 3
Human Organs or Tissues (preserved)	LHSC- Pathology	Not Applicable		Not Applicable

#### 4.0 Genetically Modified Organisms and Cell lines

4.1 Will genetic modifications be made to the microorganisms, biological agents, or cells described in Sections 1.0 and 2.0?  YES  NO If no, please proceed to Section 5.0

4.2 Will genetic modification(s) involving plasmids be done?  YES, complete table below  NO

Bacteria Used for Cloning *	Plasmid(s) **	Source of Plasmid	Gene Transfected	Describe the change that results from transformation or tranfection

\* Please attach a Material Data Sheet or equivalent if available.

\*\* Please attach a plasmid map.

4.3 Will genetic modification(s) of bacteria and/or cells involving viral vectors be made?

YES, complete table below  NO

Virus Used for Vector Construction	Vector(s) *	Source of Vector	Gene(s) Transduced	Describe the change that results from transduction

\* Please attach a Material Safety Data Sheet or equivalent.

4.4 Will genetic sequences from the following be involved?

- ◆ HIV  YES, please specify \_\_\_\_\_  NO
- ◆ HTLV 1 or 2 or genes from any Level 1 or Level 2 pathogens  YES, specify \_\_\_\_\_  NO
- ◆ SV 40 Large T antigen  YES  NO
- ◆ E1A oncogene  YES  NO
- ◆ Known oncogenes  YES, please specify \_\_\_\_\_  NO
- ◆ Other human or animal pathogen and or their toxins  YES, please specify \_\_\_\_\_  NO

4.5 Will virus be replication defective?  YES  NO

4.6 Will virus be infectious to humans or animals?  YES  NO

4.7 Will this be expected to increase the containment level required?  YES  NO

#### 5.0 Human Gene Therapy Trials

5.1 Will human clinical trials be conducted involving a biological agent?  YES  NO  
(including but not limited to microorganisms, viruses, prions, parasites or pathogens of plant or animal origin)  
If no, please proceed to Section 6.0

5.2 If YES, please specify which biological agent will be used: \_\_\_\_\_  
Please attach a full description of the biological agent.

5.2 Will the biological agent be able to replicate in the host?  YES  NO

5.3 How will the biological agent be administered? \_\_\_\_\_ N/A \_\_\_\_\_

5.4 Please give the Health Care Facility where the clinical trial will be conducted: \_\_\_\_\_ N/A \_\_\_\_\_

5.5 Has human ethics approval been obtained?  YES, number: 10600  NO  PENDING

### 6.0 Animal Experiments

6.1 Will live animals be used?  YES  NO If no, please proceed to section 7.0

6.2 Name of animal species to be used B6 mice

6.3 AUS protocol # 2008-038-4

6.4 Will any of the agents listed in section 4.0 be used in live animals  YES, specify: \_\_\_\_\_  NO

6.5 Will the agent(s) be shed by the animal:  YES  NO, please justify:  
\_\_\_\_\_  
\_\_\_\_\_

### 7.0 Use of Animal species with Zoonotic Hazards

7.1 Will any animals with zoonotic hazards or their organs, tissues, lavages or other body fluids including blood be used (see list below)?  YES  No If no, please proceed to section 8.0

7.2 Will live animals be used?  YES  No

7.3 If yes, please specify the animal(s) used:

- ◆ Pound source dogs  YES  NO
- ◆ Pound source cats  YES  NO
- ◆ Cattle, sheep or goats  YES, please specify species \_\_\_\_\_  NO
- ◆ Non-human primates  YES, please specify species \_\_\_\_\_  NO
- ◆ Wild caught animals  YES, please specify species & colony # \_\_\_\_\_  NO
- ◆ Birds  YES, please specify species \_\_\_\_\_  NO
- ◆ Others (wild or domestic)  YES, please specify \_\_\_\_\_  NO

7.4 If no live animals are used, please specify the source of the specimens:  
\_\_\_\_\_

### 8.0 Biological Toxins

8.1 Will toxins of biological origin be used?  YES  NO If no, please proceed to Section 9.0

8.2 If YES, please name the toxin(s) Streptozotocin and Tamoxifen  
Please attach information, such as a Material Safety Data Sheet, for the toxin(s) used.

8.3 What is the LD<sub>50</sub> (specify species) of the toxin \_\_\_STZ 50 to100mg/kg, i.p. \_\_\_\_\_

8.4 How much of the toxin is handled at one time\*? \_STZ 75mg/kg, i.p.,; Tamoxifen 1mg/mouse \_\_\_\_\_

8.5 How much of the toxin is stored\*? \_\_\_\_\_1g\_ each \_\_\_\_\_

8.6 Will any biological toxins be used in live animals? xO YES, Please provide details: \_\_

1. To STZ-induced diabetes: mice will be received STZ 75ug/g body weight with i.p injection by research staff.

2. To induce the conditional beta1 integrin knock-out mice, Tamoxifen Injected i.p. once a day for 5 days at 1mg/mouse by research staff.

\_\_\_\_\_ O NO

\*For information on biosecurity requirements, please see:

[http://www.uwo.ca/humanresources/docandform/docs/healthandsafety/biosafety/Biosecurity\\_Requirements.pdf](http://www.uwo.ca/humanresources/docandform/docs/healthandsafety/biosafety/Biosecurity_Requirements.pdf)

## 9.0 Insects

9.1 Do you use insects?  YES  NO If no, please proceed to Section 10.0

9.2 If YES, please give the name of the species. \_\_\_\_\_

9.3 What is the origin of the insect? \_\_\_\_\_

9.4 What is the life stage of the insect? \_\_\_\_\_

9.5 What is your intention?  Initiate and maintain colony, give location: \_\_\_\_\_

"One-time" use, give location: \_\_\_\_\_

9.6 Please describe the risk (if any) of escape and how this will be mitigated:

\_\_\_\_\_  
\_\_\_\_\_

9.7 Do you use insects that require a permit from the CFIA permit?  YES  NO

If YES, Please attach the CFIA permit & describe any CFIA permit conditions:

\_\_\_\_\_  
\_\_\_\_\_

## 10.0 Plants

10.1 Do you use plants?  YES  NO If no, please proceed to Section 11.0

10.2 If YES, please give the name of the species. \_\_\_\_\_

10.3 What is the origin of the plant? \_\_\_\_\_

10.4 What is the form of the plant (seed, seedling, plant, tree...)? \_\_\_\_\_

10.5 What is your intention?  Grow and maintain a crop  "One-time" use

10.6 Do you do any modifications to the plant?  YES  NO

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

10.7 Please describe the risk (if any) of loss of the material from the lab and how this will be mitigated:

\_\_\_\_\_  
\_\_\_\_\_

10.8 Is the CFIA permit attached?  YES  NO  
 If YES, Please attach the CFIA permit & describe any CFIA permit conditions:

**11.0 Import Requirements**

11.1 Will any of the above agents be imported?  YES, please give country of origin \_\_\_\_\_  NO  
 If no, please proceed to Section 12.0

11.2 Has an Import Permit been obtained from HC for human pathogens?  YES  NO

11.3 Has an import permit been obtained from CFIA for animal or plant pathogens?  YES  NO

11.4 Has the import permit been sent to OHS?  YES, please provide permit # \_\_\_\_\_  NO

**12.0 Training Requirements for Personnel Named on Form**

All personnel named on the above form who will be using any of the above named agents are required to attend the following training courses given by OHS:

- ◆ Biosafety
- ◆ Laboratory and Environmental/Waste Management Safety
- ◆ WHMIS (Western or equivalent)
- ◆ Employee Health and Safety Orientation

As the Principal Investigator, I have ensured that all of the personnel named on the form who will be using any of the biological agents in Sections 1.0 to 9.0 have been trained.

SIGNATURE *R. Way* March 14, 2011

**13.0 Containment Levels**

13.1 For the work described in sections 1.0 to 9.0, please indicate the highest HC or CFIA Containment Level required.  1  2  2+  3

13.2 Has the facility been certified by OHS for this level of containment?  
 YES, date of most recent biosafety inspection: MARCH 29, 2011  
 NO, please certify  
 NOT REQUIRED for Level 1 containment

13.3 Please indicate permit number (not applicable for first time applicants): BIO-LHRI-0046

**14.0 Procedures to be Followed**

14.1 Please describe additional risk reduction measures will be taken beyond containment level 1, 2, 2+ or 3 measures, that are unique to this agent.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

14.2 Please outline what will be done if there is an exposure to the biological agents listed, such as a needlestick injury or an accidental splash:

For STZ: Staff will use standard precautions of regant usage and wear appropriate protective clothing, gloves and mask. When animals are injected with STZ, lab coat, mask and eye protection will be worn, and care taken with handling of th needle and syringe. Injectable solution is to be made in fum hood with bech coat covering the bench. Bech coat is to be disposed of as a potentially contaminated waste.

For TAMOXIFEN: it may cause abortions in humans, congenital malformation in fetus; eye,skin and respiratory irritation; impair fertility; reproductive disorders. Pregnant women should avoid exposure to this compound Very Toxic, Carcinogen, excreted by mice.

Injection will be taken at Conventional area(require non sterile micro isolators). Used dirty cages are never to be taken out of the room. Removal from the animal room to the conventional area can only occur on the 6th day. Handling of mice is double gloved (or forceps) by ACVS staff.

Dirty bedding scraped clean from cages with a spatula in the BSC, and sent for incineration. Dirty cages should be free ( or as free as possible) from bedding for cagewash staff, with dunking out of the room unnecessary as these are chemical hazard s( both)

14.3 As the Principal Investigator, I will ensure that this project will follow the Western Biosafety Guidelines and Procedures Manual for Containment Level 1 & 2 Laboratories (and the Level 3 Facilities Manual for Level 3 projects). I will ensure that UWO faculty, staff and students working in my laboratory have an up-to-date Hazard Communication Form, found at <http://www.wph.uwo.ca/>

SIGNATURE R. Wang Date: March 14, 2011

**15.0 Approvals**

1) UWO Biohazards Subcommittee: SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

2) Safety Officer for the University of Western Ontario SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

3) Safety Officer for Institution where experiments will take place (if not UWO): SIGNATURE: M. Ryden Date: MARCH 21, 2011

Approval Number: \_\_\_\_\_ Expiry Date (3 years from Approval): \_\_\_\_\_

Special Conditions of Approval:

# Info on Cell Line(s)

## Description of Cell Lines and Sources.

### **INS-1 832/13**

Dr. Chris Newgard, Duke University Medical Center

INS-1 cells were originally derived from a rat insulinoma (1). These cells were stably transfected with the human proinsulin gene and maintain expression through 66 population doublings (2). They exhibit glucose-stimulated insulin secretion and are a good model to study beta cell physiology.

### **$\alpha$ TC1-6**

Dr. C. Bruce Verchere, University of British Columbia

$\alpha$ TC1 cells were derived from an SV40 large T antigen transgenic mouse (3). Clonal population 6 showed proglucagon gene expression and no proinsulin or prosomatostatin gene expression. These cells represent a pure population of pancreatic alpha cells and are useful for the study of alpha cell physiology.

### **InR1-G9**

Dr. Patricia Brubaker, University of Toronto.

InR1 cells were derived from a BK-induced hamster glucagonoma. Clone G9 expresses proglucagon very strongly, and processes proglucagon to glucagon, similar to normal alpha cells (4).

### **GLUtag**

Dr. Dan Drucker, The Toronto Hospital and University of Toronto

These cells were derived from a transgenic mouse expressing the SV40 large T antigen in the L cells of the intestine (5). They express proglucagon and process it to the intestinal peptides GLP-1 and GLP-2. These cells are a good model for the study of GLP1-synthesis and secretion (6).

### **Neuro2A**

Dr. Y Peng Loh, National Institutes of Health, Bethesda, MD

Neuro 2A cells were derived from a mouse neuroblastoma. They do not express any prohormone processing enzymes and are ideal for the study of hormone processing and sorting (7).

### **CHO-GLP1R**

Dr. Michael Wheeler, University of Toronto.

CHO cells are derived from Chinese hamster ovary, and these cells have been stably transfected with the human GLP-1 receptor (8). They are used for *in vitro* receptor binding assays.

## PC12

Dr. Walter Rushlow, The University of Western Ontario

PC12 cells are originally derived from rat pheochromocytoma. We are using them for the study of hormone processing and sorting.

1. **Asfari M, Janjic D, Meda P, Li G, Halban PA, Wollheim CB** 1992 Establishment of 2-mercaptoethanol-dependent differentiated insulin-secreting cell lines. *Endocrinology* 130:167-178
2. **Hohmeier HE, Mulder H, Chen G, Henkel-Rieger R, Prentki M, Newgard CB** 2000 Isolation of INS-1-derived cell lines with robust ATP-sensitive K<sup>+</sup> channel-dependent and -independent glucose-stimulated insulin secretion. *Diabetes* 49:424-430
3. **Powers AC, Efrat S, Mojsov S, Spector D, Habener JF, Hanahan D** 1990 Proglucagon processing similar to normal islets in pancreatic alpha-like cell line derived from transgenic mouse tumor. *Diabetes* 39:406-414
4. **Drucker DJ, Philippe J, Mojsov S** 1988 Proglucagon gene expression and posttranslational processing in a hamster islet cell line. *Endocrinology* 123:1861-1867
5. **Drucker DJ, Jin T, Asa SL, Young TA, Brubaker PL** 1994 Activation of proglucagon gene transcription by protein kinase-A in a novel mouse enteroendocrine cell line. *Mol Endocrinol* 8:1646-1655
6. **Brubaker PL, Schloos J, Drucker DJ** 1998 Regulation of glucagon-like peptide-1 synthesis and secretion in the GLUTag enteroendocrine cell line. *Endocrinology* 139:4108-4114.
7. **Zhang CF, Dhanvantari S, Lou H, Loh YP** 2003 Sorting of carboxypeptidase E to the regulated secretory pathway requires interaction of its transmembrane domain with lipid rafts. *Biochem J* 369:453-460
8. **Xiao Q, Giguere J, Parisien M, Jeng W, St-Pierre SA, Brubaker PL, Wheeler MB** 2001 Biological activities of glucagon-like peptide-1 analogues in vitro and in vivo. *Biochemistry* 40:2860-2869

# Isolation of INS-1-Derived Cell Lines With Robust ATP-Sensitive $K^+$ Channel-Dependent and -Independent Glucose-Stimulated Insulin Secretion

Hans E. Hohmeier, Hindrik Mulder, Guoxun Chen, Rosemarie Henkel-Rieger, Marc Prentki, and Christopher B. Newgard

The biochemical mechanisms involved in regulation of insulin secretion are not completely understood. The rat INS-1 cell line has been used to gain insight in this area because it secretes insulin in response to glucose concentrations in the physiological range. However, the magnitude of the response is far less than that seen in freshly isolated rat islets. In the current study, we have stably transfected INS-1 cells with a plasmid containing the human proinsulin gene. After antibiotic selection and clonal expansion, 67% of the resultant clones were found to be poorly responsive to glucose in terms of insulin secretion ( $\leq 2$ -fold stimulation by 15 mmol/l compared with 3 mmol/l glucose), 17% of the clones were moderately responsive (2- to 5-fold stimulation), and 16% were strongly responsive (5- to 13-fold stimulation). The differences in responsiveness could not be ascribed to differences in insulin content. Detailed analysis of one of the strongly responsive lines (832/13) revealed that its potent response to glucose (average of 10-fold) was stable over 66 population doublings ( $\sim 7.5$  months of tissue culture) with half-maximal stimulation at 6 mmol/l glucose. Furthermore, in the presence of 15 mmol/l glucose, insulin secretion was potentiated significantly by 100  $\mu$ mol/l isobutylmethylxanthine (320%), 1 mmol/l oleate/palmitate (77%), and 50 nmol/l glucagon-like peptide 1 (60%), whereas carbachol had no effect. Glucose-stimulated insulin secretion was also potentiated by the sulfonylurea tolbutamide (threefold at 3 mmol/l glucose and 50% at 15 mmol/l glucose) and was abolished by diazoxide, which demonstrates the operation of the ATP-sensitive  $K^+$  channel ( $K_{ATP}$ ) in 832/13 cells. Moreover, when the  $K_{ATP}$  channel was bypassed by incubation of

cells in depolarizing  $K^+$  (35 mmol/l), insulin secretion was more effectively stimulated by glucose in 832/13 cells than in parental INS-1 cells, which demonstrates the presence of a  $K_{ATP}$  channel-independent pathway of glucose sensing. We conclude that clonal selection of INS-1 cells allows isolation of cell lines that exhibit markedly enhanced and stable responsiveness to glucose and several of its known potentiators. These lines may be attractive new vehicles for studies of  $\beta$ -cell function. *Diabetes* 49:424-430, 2000

The biochemical mechanisms involved in fuel-stimulated insulin secretion are not completely understood (1-3). One impediment to gaining full understanding in this area has been the procurement of insulinoma cell lines that faithfully and stably mimic the performance of  $\beta$ -cells within the normal pancreatic islets of Langerhans. Numerous rodent  $\beta$ -cell lines exhibiting different degrees of differentiation have been reported (3,4). These range from the poorly differentiated RINm5F cell line, which has a low insulin content and no glucose-stimulated insulin secretion (5), to rat cell lines such as INS-1 and mouse cell lines such as MIN-6,  $\beta$ TC6-F7, and  $\beta$ HC9, which have an insulin content closer to that of normal islets and retain some glucose-stimulated insulin secretion (6-10). However, even the best rodent cell lines are imperfect. For example, INS-1 cells generally exhibit only a 2- to 4-fold increase in insulin secretion in response to glucose (6,11,12), which is far less than the 15-fold responses achievable with freshly isolated primary islets (13). Also, MIN-6 cells exhibit secretory responses to pyruvate, which is not a secretagogue for normal islets (14), and  $\beta$ HC9 cells grow very slowly and are thus difficult to study. Finally, loss of differentiated features as a function of time in tissue culture has been reported for several rodent cell lines, including RIN1046-38 and  $\beta$ TC6 (8,15,16). Genetic engineering of RIN1046-38 cells results in clones with stable glucose responsiveness but with maximal insulin secretion occurring at subphysiological glucose concentrations because of a high level of low  $K_m$  hexokinase activity in these cells (16-18). Stable glucose responsiveness has also been reported for  $\beta$ TC cells after clonal selection in soft agar (8), but even these cloned cell lines (e.g.,  $\beta$ TC6-F7) appear to lose glucose responsiveness after prolonged tissue culture (19).

We have worked extensively with INS-1 cells as a model for metabolic signaling mechanisms in the  $\beta$ -cell (11,12,20,21) and have found that fresh aliquots of these cells at relatively low

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GLP-1, glucagon-like peptide 1; HBSS, HEPES balanced salt solution; HPLC, high-performance liquid chromatography; IBMX, isobutylmethylxanthine;  $K_{ATP}$ , ATP-sensitive  $K^+$  channel; PD, population doubling; RIA, radioimmunoassay.

passage numbers exhibit two- to fourfold responses to glucose over the physiological range, as reported in the study by Asfari et al. (6) that described their isolation. However, further growth of these cells in culture for 2–3 months results in a reduction of the glucose response to twofold or less. INS-1 cells were originally isolated by dispersion of a transplantable radiation-induced INS tumor from NEDH rats into a tissue culture medium containing  $\beta$ -mercaptoethanol (6). Based on the description of methods used in this process (6), INS-1 cells may not be clonal and may instead represent a mixture of endocrine cells with distinct phenotypes. If this is correct, then the loss of differentiated function that we have experienced with INS-1 cells may be explained by preferential expansion of a glucose-unresponsive subpopulation of cells from an initial polyclonal mixture.

To test this possibility, we used a stable transfection strategy to isolate a large number of discrete INS-1-derived colonies. Analysis of the resultant clones shows that the original INS-1 cell line is clonally heterogeneous but also that cell lines with robust secretory responses to glucose can be derived from stable transfection of the original population. These new lines may serve as improved models for studies of  $\beta$ -cell function.

## RESEARCH DESIGN AND METHODS

**Reagents.** All reagents were from Sigma (St. Louis, MO) unless otherwise noted and were used at the concentrations shown in the legends to the figures.

**Cell culture.** Parental INS-1 cells (6) were a generous gift from Dr. Claes Wollheim (Geneva). These cells and new cell lines derived from them by stable transfection were grown in 10-cm tissue culture dishes at 37°C and 5% CO<sub>2</sub> in a humidified atmosphere. The cells were passaged every 5 days by using 1 ml 0.05% trypsin-EDTA. The culture medium was RPMI-1640 with 11.1 mmol/l D-glucose supplemented with 10% fetal bovine serum, 100 U/ml penicillin, 100  $\mu$ g/ml streptomycin, 10 mmol/l HEPES, 2 mmol/l L-glutamine, 1 mmol/l sodium pyruvate, and 50  $\mu$ mol/l  $\beta$ -mercaptoethanol.

**Isolation of new INS-1-derived cell lines with a stable transfection approach.** To investigate clonal heterogeneity in INS-1 cells while increasing insulin content, the parental cells were stably transfected with the plasmid pCMV8/INS/RES/Neo containing the human insulin cDNA as previously described (17). Two independent transfection experiments were performed, each yielding 50–60 discrete colonies that appeared under selection with G418. These colonies were isolated and expanded for further analysis.

**Secretion assays.** Parental INS-1 cells or cell lines derived from them by using stable transfection were used in these studies. In studies involving the new cell line 832/13, population doublings (PDs) 26–92 were used. The cells were plated onto 24-well plates at a density of  $\sim 0.5 \times 10^6$  cells/well and were grown to 100% confluence before assay. At 18 h before secretion experiments, the standard tissue culture medium containing 11.1 mmol/l glucose was switched to fresh medium containing 5 mmol/l glucose. Insulin secretion was assayed in HEPES balanced salt solution (HBSS) (114 mmol/l NaCl, 4.7 mmol/l KCl, 1.2 mmol/l KH<sub>2</sub>PO<sub>4</sub>, 1.16 mmol/l MgSO<sub>4</sub>, 20 mmol/l HEPES, 2.5 mmol/l CaCl<sub>2</sub>, 25.5 mmol/l NaHCO<sub>3</sub>, and 0.2% bovine serum albumin [essentially fatty acid free], pH 7.2). Cells were washed in 1 ml HBSS with 3 mmol/l glucose followed by a 2-h preincubation in 2 ml of the same buffer. Insulin secretion was then measured by using static incubation for a 2-h period in 0.8 ml of HBSS containing the glucose concentrations and/or secretagogues indicated in the figure legends. For studies of K<sub>ATP</sub> channel-independent insulin secretion (22,23), assays were performed as described above except that 35 mmol/l KCl (depolarizing K<sup>+</sup>) was included; consequently, the Na<sup>+</sup> concentration was reduced from 120 to 89.8 mmol/l to maintain osmolality.

**Insulin radioimmunoassay.** For determination of total insulin content and for measurement of absolute output of insulin during glucose stimulation of INS-1 lines, samples were analyzed by radioimmunoassay (RIA) with the ImmunoChem Coated Tube Insulin RIA kit (ICN Pharmaceuticals, Costa Mesa, CA). According to the manufacturer, this assay detects both human and rat insulins with a relative reactivity toward rat insulin of 90% compared with human insulin. In all other secretion experiments in which data are expressed as fold increases, the Coat-a-Count kit (Diagnostic Products, Los Angeles, CA) was used as previously described (17,18). This assay uses antibodies to human insulin that cross-react  $\sim 20\%$  with rat insulin. Human insulin (referenced to U.S. Pharmacopoeia, Rockville, MD, insulin lot G) was used for standard curves in both assays.

**Insulin content and proinsulin processing.** To measure cellular insulin content, cell pellets were sonicated in 1 mol/l acetic acid containing 0.1% bovine serum albumin. Aliquots of acid extracts were subjected to RIA with an assay that detects both rat and human insulin (ICN kit) as described above. The extent of proinsulin processing was evaluated by preparing acetic acid extracts of whole cells or culture medium and by analyzing these samples with high-performance liquid chromatography (HPLC) as previously described (17,24).

## RESULTS

Clonal heterogeneity of INS-1 cells revealed by stable transfection with the human insulin gene and isolation of individual clones. Parental INS-1 cells were transfected with a plasmid containing the human insulin gene under control of the cytomegalovirus promoter and a neomycin resistance gene. A total of 58 independent colonies were isolated after selection with G418. Colonies in G418-containing medium were discrete and well separated and likely represented populations derived from individual clones. All 58 cell lines were screened by measuring the fold increase in insulin secretion at 15 vs. 3 mmol/l glucose. As shown in Fig. 1, 67% of the clones (39 clones) were poorly responsive to glucose ( $\leq 2$ -fold stimulation by high glucose), 17% of the clones (10 clones) were moderately responsive (2- to 5-fold stimulation), and 16% (9 clones) were strongly responsive (5- to 13-fold stimulation). These results are representative of two independent transfection experiments and indicate that parental INS-1 cells consist of a mixture of cells with different glucose-sensing capacity.

To validate the results obtained in the screen shown in Fig. 1, glucose-stimulated insulin secretion was reevaluated in four "poorly responsive" clones (lines 832/1, 832/2, 832/7, and 832/23) and in four "strongly responsive" clones (lines 832/3, 832/13, 832/21, and 832/24). Insulin secretion was measured with an RIA that detects rat and human insulin equally. The data in Fig. 2 confirm the distinction between the two groups of clones in that the poorly responsive lines were similar to or less responsive than the parental cells, which exhibited a threefold increase in insulin secretion as glucose was increased from 3 to 15 mmol/l. In contrast, all four of the strongly responsive clones exhibited better respon-

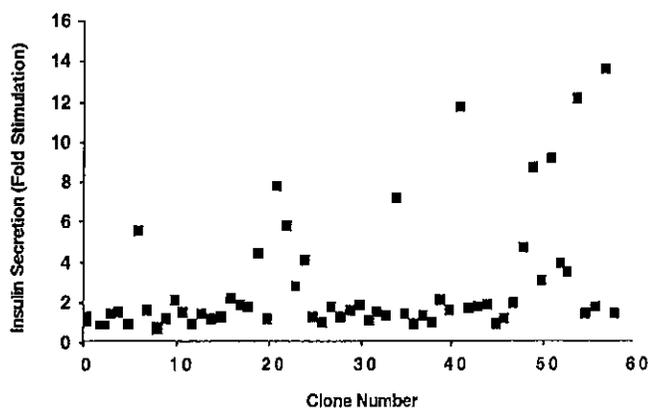


FIG. 1. Screen for glucose-responsive INS-1-derived clones. Parental INS-1 cells were stably transfected with a plasmid containing the human proinsulin gene as described in RESEARCH DESIGN AND METHODS. After antibiotic selection, individual colonies were isolated, expanded, and screened by measuring the fold increase in insulin secretion at 15 vs. 3 mmol/l glucose. Data for 58 individual clones are presented and represent the means of three independent measurements per clone.

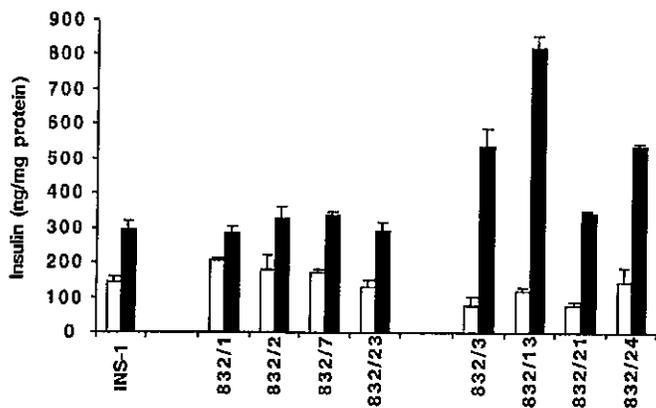


FIG. 2. Glucose-stimulated insulin secretion in INS-1-derived clones. Based on the screen shown in Fig. 1, four clones with poor glucose responsiveness (832/1, 832/2, 832/7, and 832/23) and four strongly responsive clones (832/3, 832/13, 832/21, and 832/24) were selected for further analysis. Insulin secretion was measured at 3 (□) and 15 (■) mmol/l glucose with an RIA that detects both human and rat insulins with a relative reactivity toward rat insulin of 90% compared with human insulin. Data represent the means ± SE for three independent experiments, each of which was performed in triplicate.

siveness than parental INS-1 cells (range of 4.4- to 8-fold responses to glucose). Among the highly responsive clones, line 832/13 secreted the largest amount of insulin during glucose stimulation (800 ng · mg<sup>-1</sup> protein · h<sup>-1</sup>) and was chosen for further study.

**Insulin content of selected INS-1 cell lines.** We next investigated whether the superior performance of the strongly responsive group could be related to insulin content. To evaluate this possibility, we measured total insulin content (rat + human insulin) in the clones described in Fig. 2. As shown in Table 1, insulin content was generally increased in the two groups of clones derived from stable transfection of the human insulin gene compared with parental INS-1 cells,

TABLE 1  
Insulin content of INS-1-derived cell lines

Response	Cell line	Insulin content (ng/10 <sup>6</sup> cells)
2- to 4-fold	Parental INS-1	866 ± 108
Poor (≤2-fold)	832/1	1,265 ± 332
	832/2	1,322 ± 308
	832/7	2,183 ± 254
	832/23	1,722 ± 246
Strong (5- to 13-fold)	832/2	1,165 ± 281
	832/13	1,440 ± 348
	832/21	824 ± 96
	832/24	1,405 ± 111

Data are means ± SE for four independent determinations. Insulin content was measured using an RIA that detects both human and rat insulins with a relative reactivity toward rat insulin of 90% compared with human insulin. Note that, although all but one of the transfected clones (832 series) contained more insulin than the parental INS-1 cells, no consistent difference was evident in content between poorly (first group of four lines) and strongly (second group of four lines) responsive cells.

but no consistent difference between the two groups of transfected cells was evident. In particular, the insulin content of clone 832/13, the strongly responsive line that was chosen for further study, was 1.5 μg/10<sup>6</sup> cells, which is similar to the content of the four poorly responsive clones (range 1.3–2.3 μg/10<sup>6</sup> cells).

Stable glucose response and proinsulin processing in a clonal INS-1 cell line. To determine whether clone 832/13 was capable of maintaining potent glucose responsiveness in a stable fashion, insulin secretion assays were performed at 26, 64, and 92 PDs, which represent a total interval of ~7.5 months of tissue culture. As shown in Fig. 3, insulin secretion was stimulated 8-fold at 15 mmol/l glucose relative to secretion at 3 mmol/l glucose in cells at PD 26, 11-fold at PD 64, and 10-fold at PD 92. These results indicate that glucose responsiveness of the selected INS-1 cell line is stably maintained.

We also studied proinsulin processing by using HPLC analysis. As shown in Fig. 4A, parental INS-1 cells contained two prominent absorbance peaks. One comigrated with rat insulin I (17), and the other likely represents rat insulin II based on previous studies of INS-1 cells by Asfari et al. (6) and because insulin was measured in both peaks by RIA. Proinsulin was present at very low levels in the parental INS-1 cells, which suggests that efficient processing of the endogenous rat proinsulin occurred in our starting population (Fig. 4A). The 832/13 cells at PD 26 retained the rat insulin I and II peaks and also exhibited a smaller peak comigrating with a human insulin standard, which confirms expression of the stably introduced human insulin transgene (Fig. 4B). Again, no significant accumulation of proinsulin was evident despite overexpression of the human proinsulin gene. Importantly, human insulin expression and the efficiency of proinsulin processing were identical in 832/13 cells at PD 42 to those at PD 26 (Fig. 4B and C). This provides further evidence of a stable phenotype in cell populations selected by stable transfection.

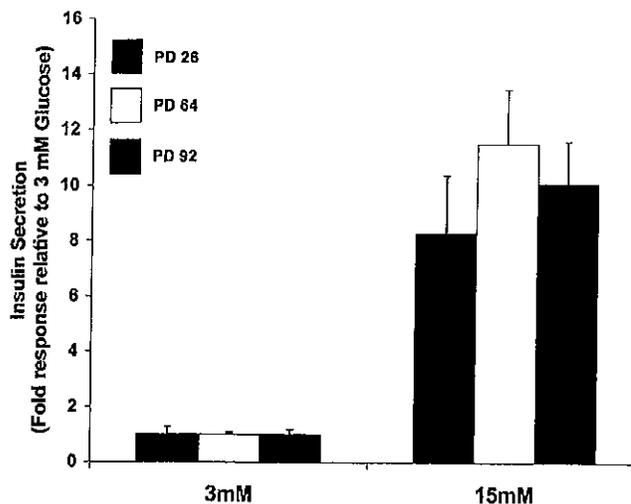


FIG. 3. Stable phenotype of INS-1-derived clone 832/13. Insulin secretion in response to 3 and 15 mmol/l glucose was measured in clone 832/13 at PD 26, PD 64, and PD 92, which indicate a total time interval of ~7.5 months of tissue culture. Insulin secreted into the medium was measured with RIA, was normalized to total cellular protein, and was expressed as fold increase relative to insulin secreted at 3 mmol/l glucose. Data represent the means ± SE of two independent experiments, each of which was performed in triplicate.

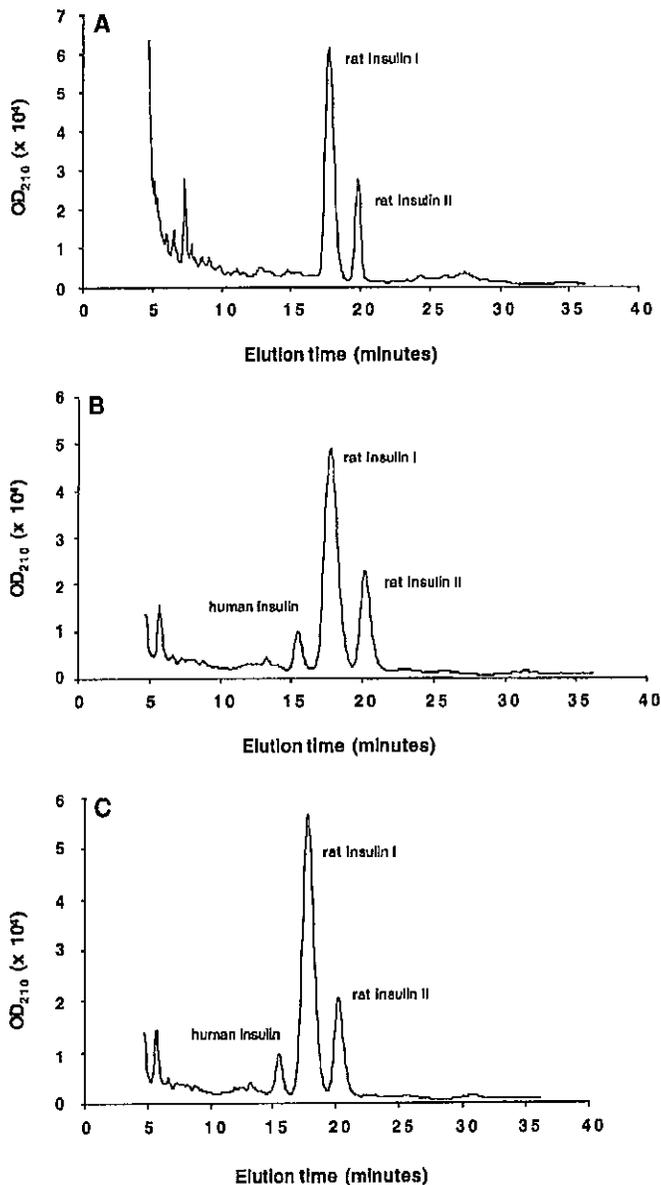


FIG. 4. HPLC analysis of proinsulin processing in INS-1-derived clones. Extracts were prepared as described in RESEARCH DESIGN AND METHODS from parental INS-1 cells (A), clone 832/13 at PD 26 (B), and clone 832/13 at PD 42 (C) and were subjected to HPLC analysis. Parental INS-1 cells contain two prominent absorption peaks, the larger one comigrating with rat insulin I and the other likely representing rat insulin II based on the RIA of fractions from this peak. In clone 832/13 at either PD 26 or 42, the rat insulin peaks remain, and a new peak that comigrates with human insulin appears. Importantly, these fractions contain very little proinsulin, and the HPLC profile is unaltered in 832/13 cells at PD 42 compared with PD 26, which provides further evidence of the phenotypic stability of these cells.

Glucose dose response in the 832/13 INS-1 cell line. We next evaluated insulin secretion in response to a range of glucose concentrations in 832/13 cells. As shown in Fig. 5, insulin secretion was unchanged as glucose was increased from 0 to 3 mmol/l glucose. Insulin secretion was doubled at 4 mmol/l glucose relative to secretion at 0 or 3 mmol/l and then continued to increase as the glucose concentration increased until a maximal response of 13-fold above baseline was

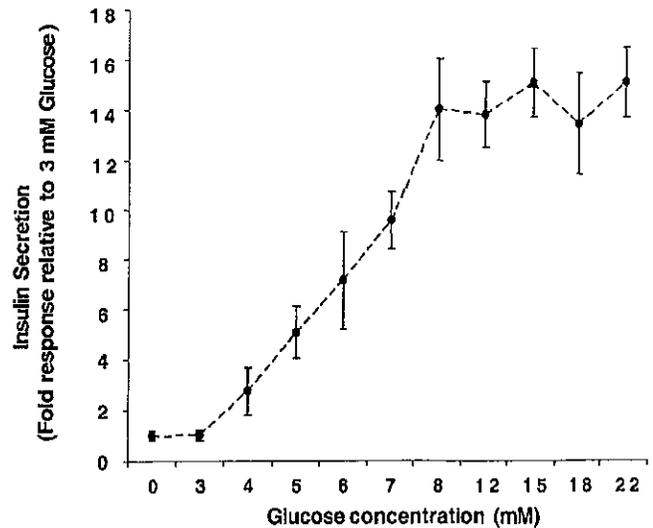


FIG. 5. Glucose dose-response curve for INS-1-derived clone 832/13. The 832/13 cells were incubated at the indicated concentrations of glucose for 2 h. Insulin secreted into the medium was measured with RIA, was normalized to total cellular protein, and was expressed as fold increase relative to insulin secreted at 3 mmol/l glucose. Data represent the means  $\pm$  SE for five independent experiments.

attained at 8 mmol/l glucose. Further increases in glucose caused no additional enhancement in insulin secretion. The magnitude of the response to glucose exhibited by 832/13 cells compares favorably with the responses reported for freshly isolated rat islets (13). However, the glucose dose response was slightly shifted to the left compared with rat islets, which have a threshold for glucose response of 5.5 mmol/l and maximal responses that occur at 16–20 mmol/l glucose (2,3). Effect of glucose potentiators on the 832/13 INS-1 cell line. Glucose regulates insulin secretion from normal pancreatic islets in concert with numerous physiologically relevant potentiators (1–3). We therefore evaluated the capacity of the 832/13 cell line to respond to such agents. Consistent with the data in Figs. 4 and 5, insulin secretion was stimulated ninefold as glucose was increased from 3 to 15 mmol/l (Fig. 6). Relative to the amount of insulin secreted at 15 mmol/l glucose, further increases of 320, 77, and 60% were achieved by the inclusion of 100  $\mu$ mol/l of isobutylmethylxanthine (IBMX), 1 mmol/l oleate/palmitate (2:1 molar ratio), or 50 nmol/l glucagon-like peptide 1 (GLP-1), respectively. In contrast to the clear effects of these agents, glucose-stimulated insulin secretion was not potentiated by the inclusion of a muscarinic receptor agonist (100  $\mu$ mol/l carbachol) (Fig. 6). The lack of effect of carbachol on INS-1 cells is consistent with our previous studies and contrasts with other rat cell lines such as RIN1046-38 and its derivatives, which exhibit a potent carbachol response (21).

$K_{ATP}$  channel-dependent and -independent pathways of insulin secretion in the 832/13 INS-1 cell line. We next investigated the involvement of the  $K_{ATP}$  channel in the glucose response of line 832/13 by performing experiments in the presence of a sulfonylurea (tolbutamide), which interacts with the sulfonylurea receptor to cause channel closure, and diazoxide, an opener of the channel. As shown in Fig. 7, treatment of 832/13 cells with 250  $\mu$ mol/l diazoxide completely blocked the stimulation of insulin secretion caused by

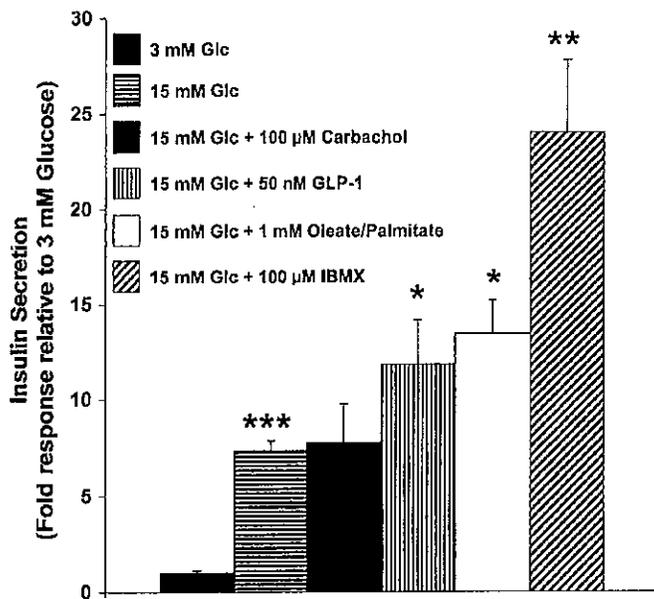


FIG. 6. Potentiation of glucose-stimulated insulin secretion in the INS-1-derived clone 832/13. The 832/13 cells were incubated in low (3 mmol/l) or high (15 mmol/l) glucose (Glc) in the presence and absence of known potentiators of insulin secretion as indicated in the legend. Data represent the means  $\pm$  SE for five independent experiments. Paired two-tailed analyses were performed by comparing the 15 and 3 mmol/l glucose groups or by comparing 15 mmol/l glucose + potentiator groups with 15 mmol/l glucose alone. \* $P$  < 0.05; \*\* $P$  < 0.01; \*\*\* $P$  < 0.001.

15 mmol/l glucose. In contrast, 200  $\mu$ mol/l tolbutamide stimulated insulin secretion by threefold at 3 mmol/l glucose and by 50% at 15 mmol/l glucose, although the effect at high glucose did not quite reach statistical significance. The lesser effect of tolbutamide at high glucose is consistent with the very effective action of glucose alone on  $K_{ATP}$  channel closure.

In addition to the  $K_{ATP}$ -channel-dependent pathway, glucose has been shown to regulate insulin secretion from normal islets in which the  $K_{ATP}$  channel was bypassed by treatment with depolarizing  $K^+$  (22,23). We investigated whether this  $K_{ATP}$  channel-independent pathway was operative in our new cell lines.

Figure 8 shows insulin secretion from parental INS-1 cells, a representative "poorly responsive" transfected INS-1 clone (834/105), and the "strongly responsive" 832/13 cell line in the presence of 35 mmol/l  $K^+$ . This high concentration of  $K^+$  depolarizes the plasma membrane directly, circumventing the requirement for glucose-induced closure of  $K_{ATP}$  channels. Under these conditions, both the parental INS-1 cells and the poorly responsive clone exhibited less than a doubling of insulin secretion as glucose was increased from 3 to 15 mmol/l, and opening the  $K_{ATP}$  channels with diazoxide did not affect either the basal or stimulated insulin output as expected in the presence of depolarizing  $K^+$ . Compared with either of these populations, 832/13 cells exhibited much better  $K_{ATP}$  channel-independent signaling in that 15 mmol/l glucose stimulated insulin secretion by 4.5-fold relative to output at 3 mmol/l glucose; diazoxide was again without effect. We also studied the glucose concentration dependence for stimulation of insulin secretion from 832/13 cells by the  $K_{ATP}$  channel-independent pathway (in the presence of 35 mmol/l  $K^+$  and diazoxide). We found that the

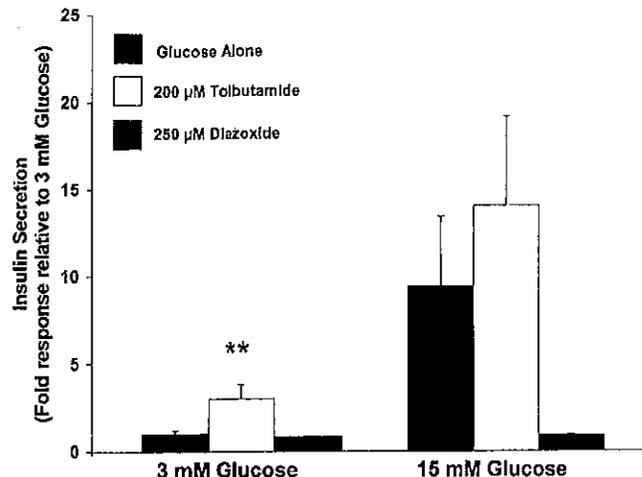


FIG. 7. Evidence for operation of the  $K_{ATP}$  channel system in the INS-1-derived clone 832/13. The 832/13 cells were incubated at 3 or 15 mmol/l glucose in the presence or absence of 200  $\mu$ mol/l tolbutamide or 250  $\mu$ mol/l diazoxide. Data represent the means  $\pm$  SE for six independent experiments. \*\*Insulin secretion in the 3 mmol/l glucose + tolbutamide-treated cells was greater than in cells treated with 3 mmol/l glucose alone ( $P$  < 0.01).

concentration dependence was virtually identical in cells studied at 35 mmol/l  $K^+$  (Fig. 9) compared with cells studied at 4.8 mmol/l  $K^+$  (Fig. 5), although the fold stimulation of insulin secretion was less in the former than in the latter experiments. These data in combination with the experiments in Fig. 7 provide clear evidence of the presence of both  $K_{ATP}$  channel-dependent and -independent mechanisms of glucose-stimulated insulin secretion in 832/13 cells.

## DISCUSSION

Dual motivations exist for developing INS cell lines that faithfully mimic the function of normal pancreatic islet  $\beta$ -cells. First, our understanding of the precise biochemical mechanisms of fuel-stimulated insulin secretion has developed relatively slowly because of the difficulty inherent in isolating fully functional pancreatic islets from humans or animals. In addition, secretory responses to glucose and its potentiators begin to wane within hours of islet isolation and maintenance in tissue culture. Thus, a cell line that stably responds to physiologically relevant secretagogues could be valuable for defining mechanisms involved in the regulation of insulin secretion, which may possibly lead to the development of new pharmaceutical reagents for treating diabetes. Second, cell lines that faithfully mimic the function of normal pancreatic islets could serve as surrogates for islets in transplantation therapy for type 1 diabetes (25,26). To fulfill this role, candidate cell lines must secrete insulin over the physiological range of glucose concentrations and should also be responsive to known potentiators of glucose signaling. Most importantly, these responses must be stably maintained in both in vitro and in vivo settings. In the present study, we demonstrate that the commonly used INS-1 cell line consists of a mixture of glucose-responsive and -unresponsive cells. We further show that stable transfection of parental INS-1 cells and isolation of discrete colonies result in new cell lines with markedly improved function compared with the original pop-

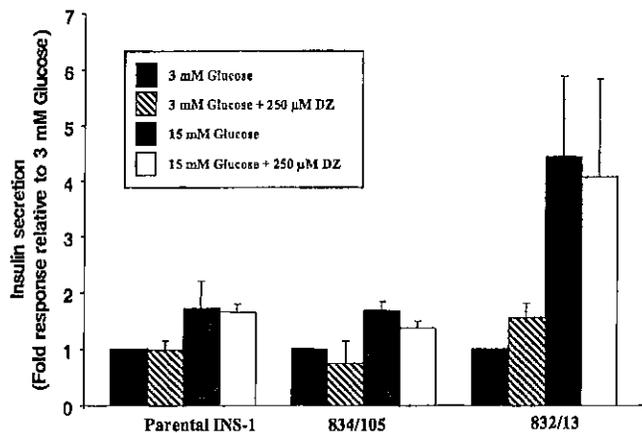


FIG. 8. Improved  $K_{ATP}$  channel-independent pathway of glucose-stimulated insulin secretion in INS-1-derived clones. Insulin secretion from parental INS-1 cells, a representative clone poorly responsive to glucose (834/105), and a representative clone strongly responsive to glucose (832/13) was measured in the presence of a depolarizing concentration of  $K^+$  (35 mmol/l), which provides a measure of  $K_{ATP}$  channel-independent glucose signaling. Secretion was measured in cells exposed to low (3 mmol/l) or high (15 mmol/l) glucose in the presence and absence of 250  $\mu$ mol/l diazoxide (DZ) as indicated in the legend. Insulin secreted into the medium was measured with RIA, was normalized to total cellular protein, and was expressed as fold increase relative to insulin secreted at 3 mmol/l glucose. Data represent the means  $\pm$  SE for three independent experiments.

ulation. The enhanced secretory responsiveness to glucose is maintained for at least 7.5 months in tissue culture, which suggests that the newly derived lines may be a useful new tool for studying the mechanisms of insulin secretion and pre-clinical transplantation studies in animal models of diabetes.

The apparent clonal heterogeneity of the original INS-1 cell line is understandable in the light of the methods used for its isolation. Asfari et al. (6) dispersed cells from transplantable X-ray-induced INS tumors from NEDH rats and then separated viable cells from aggregates and debris by Percoll gradient centrifugation. The resultant preparation of cells was cocultured with lymphocytes in the presence of  $\beta$ -mercaptoethanol, which was added to enhance survival and proliferation of lymphocytic cells. INS-1 cells were isolated as free-floating cell aggregates from these coculture experiments. Based on this description of methods, such aggregates may have contained cells of different origin and degree of differentiation.

In addition to robust glucose responsiveness, the new INS-1 cell lines isolated with stable transfection exhibit other attractive features. First, the glucose effect is potentiated effectively by agents known to enhance glucose-stimulated insulin secretion from normal pancreatic islets such as IBMX, GLP-1, free fatty acids (a 2:1 oleate/palmitate mixture), and the sulfonylurea tolbutamide. Second, in the presence of physiological  $K^+$  concentrations, the new lines exhibit a complete inhibition of insulin secretion by the  $K_{ATP}$  channel opener diazoxide, which indicates that regulation of this channel is an important component of their glucose response, as is the case in normal islets. Third, the new lines have a much more pronounced  $K_{ATP}$  channel-independent glucose-sensing pathway than parental INS-1 cells such that the new cells have responses similar to those noted in normal

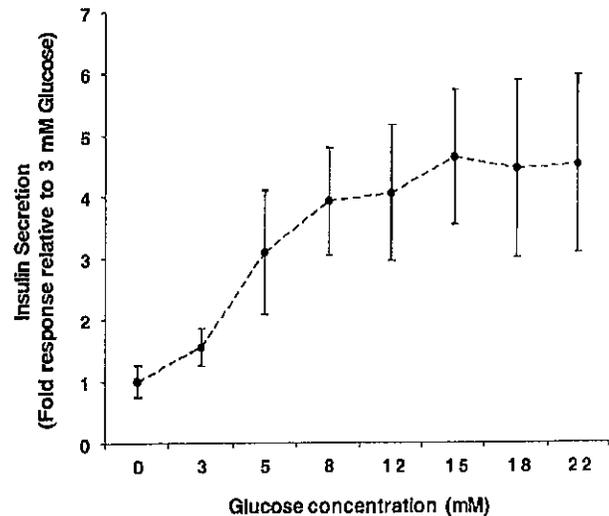


FIG. 9. Glucose dose-response curve for  $K_{ATP}$  channel-independent secretion from INS-1-derived clone 832/13. The 832/13 cells were incubated at the indicated concentrations of glucose for 2 h in the presence of 35 mmol/l  $K^+$  and 250  $\mu$ mol/l diazoxide to allow measurement of  $K_{ATP}$  channel-independent signaling. Insulin secreted into the medium was measured with RIA, was normalized to total cellular protein, and was expressed as fold increase relative to insulin secreted at 3 mmol/l glucose. Data represent the means  $\pm$  SE for four independent experiments.

islets by Gembal et al. (22). These findings suggest that the new lines will be improved models for studying key issues in  $\beta$ -cell stimulus/secretion coupling. For example, our recent study showing a lack of effect of a malonyl CoA decarboxylase adenovirus or the drug triacsin C on glucose-stimulated insulin secretion argues against the long-chain acyl CoA hypothesis of glucose sensing (12). However, these studies can be justifiably criticized because the parental INS-1 cells used exhibited only 2- to 4-fold responses to glucose, which are well below the 15-fold response of normal islets. Furthermore, based on the work described herein, we now know that parental INS-1 cells have a very limited  $K_{ATP}$  channel-independent pathway of glucose sensing, and regulation by long-chain acyl CoAs could occur primarily via this pathway. The robust glucose-stimulated  $K_{ATP}$  channel-dependent and -independent responses coupled with the clear potentiating effect of free fatty acids suggest that the new cell lines will be useful for more rigorous and relevant testing of this and other models in the future.

The new 832/13 cell line differs in some fundamental respects from normal islets. First, the cells begin to respond to glucose at a slightly lower threshold concentration (4 mmol/l) than normal rat islets (5.5 mmol/l) and are also maximally responsive at 8 mmol/l glucose, whereas normal rat islets continue to respond to concentrations of  $\geq 15$  mmol/l. Second, unlike normal islets, 832/13 cells do not exhibit potentiation of glucose-stimulated insulin secretion by carbachol, a muscarinic receptor agonist. One possible explanation for the shift in glucose responsiveness in 832/13 cells relative to normal islets could be the use of RPMI medium containing 11.1 mmol/l glucose to grow the cell lines used in this study. Thus, culturing parental INS-1 cells (27) or human pancreatic islets (28) at elevated glucose levels

(11–25 mmol/l) causes a modest left shift in glucose dose dependence for insulin secretion. Possible mechanisms by which a left shift may occur include a change in the ratio between glucokinase and low  $K_m$  hexokinases (27) or altered expression of more global factors such as HNF-1 $\alpha$ . A recent study has shown that mice with heterozygous knockout of HNF-1 $\alpha$  have a slightly left-shifted glucose dose-response profile compared with normal islets, although islets from the HNF (+/-) animals did maintain responsiveness at glucose concentrations >8 mmol/l (29). The lack of responsiveness to carbachol is more difficult to explain. We have previously shown that carbachol effectively elevates inositol phosphates in INS-1 cells, which provides evidence that muscarinic receptor signaling is normal in these cells (21). Perhaps INS-1 cells have low or absent levels of expression of the atypical protein kinase C isozyme (Z) that has been implicated in carbachol-stimulated insulin secretion in RIN cells (30).

Further investigation will be necessary to understand the mechanisms underlying the differences in phenotype between the new INS-1 lines and normal rat islets. Nevertheless, the INS-1-derived cell lines described herein appear to be an attractive new tool for investigating metabolic signaling mechanisms in islet  $\beta$ -cells. Future studies will focus on understanding the molecular mechanisms responsible for the subtle differences in glucose responsiveness between the new INS-1 cell lines and normal rat islets and the more pronounced differences between the strongly responsive and poorly responsive INS-1 cell clones.

#### ACKNOWLEDGMENTS

The work was supported in part by National Institutes of Diabetes and Digestive and Kidney Diseases Grant DK-42582 and a National Institutes of Health/Juvenile Diabetes Foundation International Research Program Grant (C.B.N.) and grants from the Medical Research Council of Canada, the Canadian Diabetes Association, and the Juvenile Diabetes Foundation International (M.P.). In addition, H.M. received fellowship support from the Juvenile Diabetes Foundation International, and G.C. received partial support from NIH Training Grant T-32-GM-08203.

The authors thank Drs. Roger Unger and Anice Thigpen for critical reading of the manuscript and Teresa Eversole for expert technical assistance.

#### REFERENCES

- Newgard CB, McGarry JD: Metabolic coupling factors in pancreatic beta-cell signal transduction. *Annu Rev Biochem* 64:689–719, 1995
- Prentki M: New insight into pancreatic beta-cell metabolic signaling. *Eur J Endocrinol* 134:272–286, 1996
- Newgard CB, Matschinsky FM: Regulation of insulin secretion from the endocrine pancreas. In *Handbook of Physiology*. Jefferson J, Cherrington A, Eds. In press.
- Newgard CB: Regulatory role of glucose transport and phosphorylation in pancreatic islet  $\beta$ -cells. *Diabetes Rev* 4:191–206, 1996
- Halban PA, Praz GA, Wollheim CB: Abnormal glucose metabolism accompanies failure of glucose to stimulate insulin release from a pancreatic cell line (RINm5F). *Biochem J* 212:439–443, 1983
- Asfari M, Janjic D, Meda P, Li G, Halban PA, Wollheim CB: Establishment of 2-mercaptoethanol-dependent differentiated insulin-secreting cell lines. *Endocrinology* 130:167–178, 1992
- Miyazaki J-I, Araki K, Yamato E, Ikegami H, Asano T, Shibasaki Y, Oka Y, Yamamura K-I: Establishment of a pancreatic  $\beta$ -cell line that retains glucose-inducible insulin secretion: special reference to expression of glucose transporter isoforms. *Endocrinology* 127:126–132, 1990
- Knaack D, Fiore DM, Surana M, Leiser M, Laurance M, Fusco-Demane D, Hegre OD, Fleisher N, Efrat S: Clonal insulinoma cell line that stably maintains correct glucose responsiveness. *Diabetes* 43:1413–1417, 1994
- Liang Y, Bai G, Dolliba N, Buettger C, Wang LQ, Berner DK, Matschinsky FM: Glucose metabolism and insulin release in mouse beta-HC9 cells, as model for wild-type pancreatic beta-cells. *Am J Physiol* 33:E846–E857, 1996
- Noda M, Komatsu M, Sharp GWG: The beta-HC-9 pancreatic beta-cell line preserves the characteristics of progenitor mouse islets. *Diabetes* 45:1766–1773, 1996
- Noel RJ, Antinozzi PA, McGarry D, Newgard CB: Engineering of glycerol-stimulated insulin secretion in islet beta cells. *J Biol Chem* 272:18621–18627, 1997
- Antinozzi PA, Segall L, Prentki M, McGarry JD, Newgard CB: Molecular or pharmacologic perturbation of the link between glucose and lipid metabolism is without effect on glucose-stimulated insulin secretion: a re-evaluation of the long-chain acyl-CoA hypothesis. *J Biol Chem* 273:16146–16154, 1998
- Zawalich WS, Zawalich KC: Regulation of insulin secretion by phospholipase C. *Am J Physiol* 271:E409–E416, 1996
- Skelly RH, Bollheimer LC, Wicksteed BL, Corkey BE, Rhodes CJ: A distinct difference in the metabolic stimulus-response coupling pathways for regulating proinsulin biosynthesis and insulin secretion that lies at the level of a requirement for fatty acyl moieties. *Biochem J* 331:553–561, 1998
- Clark SA, Burnham BL, Chick WL: Modulation of glucose-induced insulin secretion from a rat clonal  $\beta$ -cell line. *Endocrinology* 127:2779–2788, 1990
- Ferber S, BeltrandelRio H, Johnson JH, Noel R, Becker T, Cassidy LE, Clark S, Hughes SD, Newgard CB: Transfection of rat insulinoma cells with GLUT-2 confers both low and high affinity glucose-stimulated insulin release: relationship to glucokinase activity. *J Biol Chem* 269:11523–11529, 1994
- Clark SA, Quaade C, Constandy H, Hansen P, Halban P, Ferber S, Newgard CB, Normington K: Novel insulinoma cell lines produced by iterative engineering of GLUT2, glucokinase, and human insulin expression. *Diabetes* 46:958–967, 1997
- Hohmeier HE, BeltrandelRio H, Clark S, Henkel-Rieger R, Normington K, Newgard CB: Regulation of insulin secretion from novel engineered insulinoma cell lines. *Diabetes* 46:958–967, 1997
- Zhou D, Sun AM, Li X, Mamujee SN, Vacak I, Gerogiou J, Wheeler MB: In vitro and in vivo evaluation of insulin-producing  $\beta$ TC6-F7 cells in microcapsules. *Am J Physiol* 43:C1356–C1362, 1998
- Trinh K, Minassian C, Lange AJ, O'Doherty RM, Newgard CB: Adenovirus-mediated expression of the catalytic subunit of glucose-6-phosphatase in INS-1 cells: effects on glucose cycling, glucose usage, and insulin secretion. *J Biol Chem* 272:24837–24842, 1997
- Gasa R, Trinh K, Yu K, Wilkie TM, Newgard CB: Manipulation of inositol phosphate levels by overexpression of phospholipase C isoforms and/or heterotrimeric G protein subunits is without effect on insulin secretion. *Diabetes* 48:1035–1044, 1999
- Gembal M, Gilon P, Henquin J-C: Evidence that glucose can control insulin release independently from its action on ATP-sensitive  $K^+$  channels in mouse B cells. *J Clin Invest* 89:1288–1295, 1992
- Yajima H, Komatsu M, Schermerhorn T, Aizawa T, Kaneko T, Nagai M, Sharp GW, Hashizume K: cAMP enhances insulin secretion by an action on the ATP-sensitive  $K^+$  channel-independent pathway of glucose signaling in rat pancreatic islets. *Diabetes* 48:1006–1012, 1999
- Halban PA, Rhodes CJ, Shoelson SE: High-performance liquid chromatography (HPLC): a rapid, flexible and sensitive method for separating islet proinsulin and insulin. *Diabetologia* 29:893–896, 1986
- Newgard CB: Cellular engineering and gene therapy strategies for insulin replacement in diabetes. *Diabetes* 43:341–350, 1994
- Efrat S, Fleischer N: Engineering the pancreatic  $\beta$ -cell. In *Diabetes Mellitus: A Fundamental and Clinical Text*. LeRoith D, Taylor SI, Oefsky JM, Eds. New York, Lippincott-Raven, 1996, p. 438–442
- Rocche E, Assimacopoulos-Jeannet F, Witters LA, Perruchoud B, Yaney G, Corkey B, Asfari M, Prentki M: Induction by glucose of genes encoding for glycolytic enzymes in a pancreatic beta cell line (INS-1). *J Biol Chem* 272:3091–3098, 1997
- Eizirik DL, Korbitt GS, Hellerström C: Prolonged exposure of human pancreatic islets to high glucose concentrations in vitro impairs the  $\beta$ -cell function. *J Clin Invest* 90:1263–1268, 1992
- Pontoglio M, Sreenan S, Roe M, Pugh W, Ostrega D, Doyen A, Pick AJ, Baldwin A, Velho G, Froguel P, Levisetti M, Bonner-Weir S, Bell GI, Yaniv M, Polonsky KS: Defective insulin secretion in hepatocyte nuclear factor 1 $\alpha$ -deficient mice. *J Clin Invest* 101:2215–2222, 1998
- Tang SH, Sharp GWG: Atypical protein kinase C isozyme zeta mediates carbachol-stimulated insulin secretion in RINm5F cells. *Diabetes* 47:905–912, 1998

## Cell Biology

ATCC® Number: **CRL-1469™** [Order this Item](#) Price: **\$279.00**

Designations: PANC-1  
 Depositors: M Lieber  
Biosafety Level: 1  
 Shipped: frozen  
 Medium & Serum: [See Propagation](#)  
 Growth Properties: adherent  
 Organism: *Homo sapiens* (human)  
 Morphology: epithelial

Source: **Organ:** pancreas  
**Tissue:** duct  
**Disease:** epithelioid carcinoma

Permits/Forms: In addition to the [MTA](#) mentioned above, other [ATCC and/or regulatory permits](#) may be required for the transfer of this ATCC material. Anyone purchasing ATCC material is ultimately responsible for obtaining the permits. Please [click here](#) for information regarding the specific requirements for shipment to your location.

Applications: transfection host ([Nucleofection technology from Lonza Roche FuGENE® Transfection Reagents](#))

Amelogenin: X  
 CSF1PO: 10,12  
 D13S317: 11  
 D16S539: 11

DNA Profile (STR): D5S818: 11,13  
 D7S820: 8,10  
 THO1: 7,8  
 TPOX: 8,11  
 vWA: 15

Cytogenetic Analysis: Chromosome studies indicate a modal number of 63 with 3 distinct marker chromosomes and a small ring chromosome. This is a hypertriploid human cell line. The modal chromosome number was 61, occurring in 32% of cells., However, cells with 63 chromosomes also occurred at a high frequency (22%). The rate of cells with higher ploidies was 8.5%.

Isoenzymes: G6PD, B  
 Age: 56 years  
 Gender: male  
 Ethnicity: Caucasian

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## Cell Biology

ATCC® Number: **CRL-1492™** [Order this Item](#) Price: **\$279.00**

Designations: AR42J

Depositors: NW Jessop

Biosafety Level: 1

Shipped: frozen

Medium & Serum: [See Propagation](#)

Growth Properties: adherent

Organism: *Rattus norvegicus* (rat)  
epithelial

Morphology:  PHOTO

**Organ:** pancreas

**Strain:** Wistar

Source: **Tissue:** exocrine

**Disease:** tumor

Cellular Products: amylase and other exocrine enzymes [[22185](#)]

In addition to the [MTA](#) mentioned above, other [ATCC](#) and/or [regulatory permits](#) may be required for the transfer of this ATCC

Permits/Forms: material. Anyone purchasing ATCC material is ultimately responsible for obtaining the permits. Please [click here](#) for information regarding the specific requirements for shipment to your location.

Applications: transfection host ([Roche FuGENE® Transfection Reagents](#))

Receptors: insulin, expressed  
glucocorticoid, expressed

Tumorigenic: Yes

Comments: Secretory activity is inducible by glucocorticoid stimulation, and is accompanied by extensive re-organization of the endoplasmic reticulum.

Propagation: **ATCC complete growth medium:** The base medium for this cell line is ATCC-formulated F-12K Medium, Catalog No. 30-2004. To make the complete growth medium, add the following components to the base medium: fetal bovine serum to a final concentration of 20% .

**Atmosphere:** air, 95%; carbon dioxide (CO<sub>2</sub>), 5%

**Temperature:** 37.0°C

**Growth Conditions:** The cells grow slowly, in clusters. They tend to pile up and appear refractile.

**Protocol:** Monolayer never becomes confluent. Subculture when

**Related Links ▶**

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## 1. IDENTIFICATION OF THE SUBSTANCE/PREPARATION AND THE COMPANY/UNDERTAKING

Product code R70507  
 Product name 293A Cell Line

**Contact manufacturer**  
 INVITROGEN CORPORATON  
 1600 FARADAY AVENUE  
 PO BOX 6482  
 CARLSBAD, CA 92008  
 760-603-7200

INVITROGEN CORPORATION  
 2270 INDUSTRIAL STREET  
 BURLINGTON, ONT  
 CANADA L7P 1A1  
 800-263-6236

GIBCO PRODUCTS  
 INVITROGEN CORPORATION  
 3175 STALEY ROAD P.O. BOX 68  
 GRAND ISLAND, NY 14072  
 716-774-6700

## 2. COMPOSITION/INFORMATION ON INGREDIENTS

### Hazardous/Non-hazardous Components

Chemical Name	CAS-No	Weight %
Dimethyl Sulfoxide	67-68-5	5-10

## 3. HAZARDS IDENTIFICATION

### Emergency Overview

Irritating to eyes. Irritating to skin. Components of the product may be absorbed into the body through the skin.

**Form**  
Liquid

### Principle Routes of Exposure/ Potential Health effects

<b>Eyes</b>	Irritating to eyes.
<b>Skin</b>	Irritating to skin. Components of the product may be absorbed into the body through the skin.
<b>Inhalation</b>	May cause irritation of respiratory tract.
<b>Ingestion</b>	May be harmful if swallowed.

### Specific effects

Carcinogenic effects No information available  
Mutagenic effects No information available  
Reproductive toxicity No information available  
Sensitization No information available

Target Organ Effects Eyes. Skin.

## 4. FIRST AID MEASURES

Skin contact Wash off immediately with plenty of water  
Eye contact Rinse thoroughly with plenty of water, also under the eyelids.  
Ingestion Never give anything by mouth to an unconscious person  
Inhalation Move to fresh air  
Notes to physician Treat symptomatically

## 5. FIRE-FIGHTING MEASURES

Suitable extinguishing media Dry chemical  
Special protective equipment for firefighters Wear self-contained breathing apparatus and protective suit

## 6. ACCIDENTAL RELEASE MEASURES

Personal precautions Use personal protective equipment  
Methods for cleaning up Soak up with inert absorbent material

## 7. HANDLING AND STORAGE

Handling Avoid contact with skin and eyes.  
Storage Keep in properly labelled containers

## 8. EXPOSURE CONTROLS / PERSONAL PROTECTION

### Occupational exposure controls

### Exposure limits

Chemical Name	OSHA PEL (TWA)	OSHA PEL (Ceiling)	ACGIH OEL (TWA)	ACGIH OEL (STEL)
Dimethyl Sulfoxide	-	-	-	-

Engineering measures Ensure adequate ventilation, especially in confined areas

### Personal protective equipment

Respiratory protection In case of insufficient ventilation wear suitable respiratory equipment  
Hand protection Protective gloves  
Eye protection Safety glasses with side-shields  
Skin and body protection Lightweight protective clothing  
Hygiene measures Handle in accordance with good industrial hygiene and safety practice  
Environmental exposure controls Prevent product from entering drains

## 9. PHYSICAL AND CHEMICAL PROPERTIES

### General Information

Form Liquid

### Important Health Safety and Environmental Information

Boiling point/range	°C No data available	°F No data available
Melting point/range	°C No data available	°F No data available
Flash point	°C No data available	°F No data available
Autoignition temperature	°C No data available	°F No data available
Oxidizing properties	No information available	
Water solubility	No data available	

## **10. STABILITY AND REACTIVITY**

Stability	Stable under normal conditions.
Materials to avoid	No information available
Hazardous decomposition products	No information available
Polymerization	Hazardous polymerisation does not occur

## **11. TOXICOLOGICAL INFORMATION**

### Acute toxicity

Chemical Name	LD50 (oral, rat/mouse)	LD50 (dermal, rat/rabbit)	LC50 (inhalation, rat/mouse)
Dimethyl Sulfoxide	14500 mg/kg (Rat)	No data available	No data available

### Principle Routes of Exposure/

#### Potential Health effects

Eyes	Irritating to eyes.
Skin	Irritating to skin. Components of the product may be absorbed into the body through the skin.
Inhalation	May cause irritation of respiratory tract.
Ingestion	May be harmful if swallowed.

#### Specific effects

Carcinogenic effects	No information available
Mutagenic effects	No information available
Reproductive toxicity	No information available
Sensitization	No information available

Target Organ Effects Eyes. Skin.

## **12. ECOLOGICAL INFORMATION**

Ecotoxicity effects	No information available.
Mobility	No information available.
Biodegradation	Inherently biodegradable.
Bioaccumulation	Does not bioaccumulate.

## **13. DISPOSAL CONSIDERATIONS**

Dispose of in accordance with local regulations

## **14. TRANSPORT INFORMATION**

**IATA**

**Proper shipping name** Not classified as dangerous in the meaning of transport regulations  
**Hazard Class** No information available  
**Subsidiary Class** No information available  
**Packing group** No information available  
**UN-No** No information available

<b>15. REGULATORY INFORMATION</b>
-----------------------------------

**International Inventories**

Chemical Name	TSCA	PICCS	ENCS	DSL	NDSL	AICS
Dimethyl Sulfoxide	Listed	Listed	Listed	Listed	-	Listed

**U.S. Federal Regulations**

**SARA 313**  
 Not regulated

**Clean Air Act, Section 112 Hazardous Air Pollutants (HAPs) (see 40 CFR 61)**

This product contains the following HAPs:

**U.S. State Regulations**

Chemical Name	Massachusetts - RTK	New Jersey - RTK	Pennsylvania - RTK	Illinois - RTK	Rhode Island - RTK
Dimethyl Sulfoxide	-	-	-	-	-

**California Proposition 65**

This product contains the following Proposition 65 chemicals:

**WHMIS hazard class:**

Not determined

This product has been classified according to the hazard criteria of the CPR and the MSDS contains all of the information required by the CPR

<b>16. OTHER INFORMATION</b>
------------------------------

This material is sold for research and development purposes only. It is not for any human or animal therapeutic or clinical diagnostic use. It is not intended for food, drug, household, agricultural, or cosmetic use. An individual technically qualified to handle potentially hazardous chemicals must supervise the use of this material.

The above information was acquired by diligent search and/or investigation and the recommendations are based on prudent application of professional judgment. The information shall not be taken as being all inclusive and is to be used only as a guide. All materials and mixtures may be present unknown hazards and should be used with caution. Since Invitrogen Corporation cannot control the actual methods, volumes, or conditions of use, the Company shall not be held liable for any damages or losses resulting from the handling or from contact with the product as described herein. THE INFORMATION IN THIS MSDS DOES NOT CONSTITUTE A WARRANTY, EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR ANY PARTICULAR PURPOSE.

End of Safety Data Sheet

<b>1. IDENTIFICATION OF THE SUBSTANCE/PREPARATION AND THE COMPANY/UNDERTAKING</b>
---

Product code	C0035C
Product name	HUVEC, 500,000 cells/vial

**Company/Undertaking Identification**

INVITROGEN CORPORATON  
 1600 FARADAY AVENUE  
 PO BOX 6482  
 CARLSBAD, CA 92008  
 760-603-7200

INVITROGEN CORPORATION  
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 INVITROGEN CORPORATION  
 1341 S.W. CUSTER DRIVE  
 PORTLAND, OR 97219  
 ++1 503-292-9521  
 ++1 800-778-4770

<b>2. COMPOSITION/INFORMATION ON INGREDIENTS</b>
--

**Hazardous/Non-hazardous Components**

Chemical Name	CAS-No	Weight %
dimethylsulfoxide	67-68-5	7-13

The product contains no substances which at their given concentration, are considered to be hazardous to health

<b>3. HAZARDS IDENTIFICATION</b>
----------------------------------

### 3. HAZARDS IDENTIFICATION

#### Emergency Overview

Components of the product may be absorbed into the body through the skin

The product contains no substances which at their given concentration, are considered to be hazardous to health

Form  
Suspension

#### Principle Routes of Exposure/

#### Potential Health effects

Eyes	Mild eye irritation.
Skin	Moderate skin irritation. Components of the product may be absorbed into the body through the skin.
Inhalation	No information available
Ingestion	May be harmful if swallowed.

#### Specific effects

Carcinogenic effects	No information available
Mutagenic effects	No information available
Reproductive toxicity	No information available
Sensitization	No information available

#### Target Organ Effects

No information available

#### HMIS

Health	1
Flammability	0
Reactivity	0

### 4. FIRST AID MEASURES

Skin contact	Wash off immediately with soap and plenty of water removing all contaminated clothes and shoes.
Eye contact	Rinse thoroughly with plenty of water, also under the eyelids.
Ingestion	Rinse mouth.
Inhalation	Move to fresh air
Notes to physician	Treat symptomatically

### 5. FIRE-FIGHTING MEASURES

Suitable extinguishing media	Water spray. Carbon dioxide (CO <sub>2</sub> ). Foam. Dry powder. alcohol-resistant foam. The product is not flammable.
Special protective equipment for firefighters	Wear self-contained breathing apparatus and protective suit

### 6. ACCIDENTAL RELEASE MEASURES

Personal precautions	Use personal protective equipment
Methods for cleaning up	Soak up with inert absorbent material. Clean contaminated surface thoroughly. Take up mechanically and collect in suitable container for disposal.

## 7. HANDLING AND STORAGE

Handling Avoid contact with skin and eyes.  
Storage Keep in properly labelled containers.

## 8. EXPOSURE CONTROLS / PERSONAL PROTECTION

### Occupational exposure controls

#### Exposure limits

Chemical Name	OSHA PEL (TWA)	OSHA PEL (Ceiling)	ACGIH OEL (TWA)	ACGIH OEL (STEL)
dimethylsulfoxide	-	-	-	-

Engineering measures Ensure adequate ventilation, especially in confined areas

#### Personal protective equipment

Respiratory protection In case of insufficient ventilation wear suitable respiratory equipment  
Hand protection Protective gloves  
Eye protection Safety glasses with side-shields  
Skin and body protection Lightweight protective clothing  
Hygiene measures Handle in accordance with good industrial hygiene and safety practice  
Environmental exposure controls Prevent product from entering drains

## 9. PHYSICAL AND CHEMICAL PROPERTIES

### General Information

Form Suspension

### Important Health Safety and Environmental Information

Boiling point/range °C No data available °F No data available  
Melting point/range °C No data available °F No data available  
Flash point °C No data available °F No data available  
Autoignition temperature °C No data available °F No data available  
Oxidizing properties No information available  
Water solubility soluble

## 10. STABILITY AND REACTIVITY

Stability Stable.  
Materials to avoid No information available  
Hazardous decomposition products No information available  
Polymerization Hazardous polymerisation does not occur

## 11. TOXICOLOGICAL INFORMATION

### Acute toxicity

Chemical Name	LD50 (oral,rat/mouse)	LD50 (dermal,rat/rabbit)	LC50 (Inhalation,rat/mouse)
dimethylsulfoxide	14500 mg/kg (Rat)	No data available	No data available

**Principle Routes of Exposure/  
Potential Health effects**

**Eyes** Mild eye irritation.  
**Skin** Moderate skin irritation. Components of the product may be absorbed into the body through the skin.  
**Inhalation** No information available  
**Ingestion** May be harmful if swallowed.

**Specific effects**

**Carcinogenic effects** No information available  
**Mutagenic effects** No information available  
**Reproductive toxicity** No information available  
**Sensitization** No information available

**Target Organ Effects**

No information available

**12. ECOLOGICAL INFORMATION**

**Ecotoxicity effects** No information available.  
**Mobility** No information available.  
**Biodegradation** Inherently biodegradable.  
**Bioaccumulation** Does not bioaccumulate.

**13. DISPOSAL CONSIDERATIONS**

Dispose of in accordance with local regulations

**14. TRANSPORT INFORMATION**

**IATA**

**Proper shipping name** Not classified as dangerous in the meaning of transport regulations  
**Hazard Class** No information available  
**Subsidiary Class** No information available  
**Packing group** No information available  
**UN-No** No information available

**15. REGULATORY INFORMATION**

**International Inventories**

Chemical Name	TSCA	PICCS	ENCS	DSL	NDSL	AICS
dimethylsulfoxide	Listed	Listed	Listed	Listed	-	Listed

**U.S. Federal Regulations**

**SARA 313**

This product is not regulated by SARA.

**Clean Air Act, Section 112 Hazardous Air Pollutants (HAPs) (see 40 CFR 61)**

This product does not contains HAPs.

## U.S. State Regulations

Chemical Name	Massachusetts - RTK	New Jersey - RTK	Pennsylvania - RTK	Illinois - RTK	Rhode Island - RTK
dimethylsulfoxide	-	-	-	-	-

## California Proposition 65

This product does not contain chemicals listed under Proposition 65

## WHMIS hazard class:

Non-controlled

This product has been classified according to the hazard criteria of the CPR and the MSDS contains all of the information required by the CPR

## 16. OTHER INFORMATION

This material is sold for research and development purposes only. It is not for any human or animal therapeutic or clinical diagnostic use. It is not intended for food, drug, household, agricultural, or cosmetic use. An individual technically qualified to handle potentially hazardous chemicals must supervise the use of this material.

The above information was acquired by diligent search and/or investigation and the recommendations are based on prudent application of professional judgment. The information shall not be taken as being all inclusive and is to be used only as a guide. All materials and mixtures may be present unknown hazards and should be used with caution. Since Invitrogen Corporation cannot control the actual methods, volumes, or conditions of use, the Company shall not be held liable for any damages or losses resulting from the handling or from contact with the product as described herein. THE INFORMATION IN THIS MSDS DOES NOT CONSTITUTE A WARRANTY, EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR ANY PARTICULAR PURPOSE.

End of Safety Data Sheet

See Toxin Info

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London, Ontario N6A  
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CANADA

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**FAX TRANSMISSION**

TO: Jennifer Stanley  
DATE: MARCH 21, 2011  
FAX: (519) 661-3420  
PAGES: 21 + cover sheet  
FROM: GAIL RUDER  
SUBJECT: Dr. Wang's BAREF and MSDS

Hi Jennifer,

Please find BAREF + STZ and Tamoxifen MSDS.

Her lab A5-116 will be re-certified on

MARCH 29, 2011. Would have been sooner but I have been waiting for one of the P.I.'s on that floor to be Director for all the TC rooms.

Thx  
Gail  
x 75109

## Material Safety Data Sheet

Version 4.1  
Revision Date 10/20/2010  
Print Date 03/14/2011

### 1. PRODUCT AND COMPANY IDENTIFICATION

Product name : Streptozocin

Product Number : S0130  
Brand : Sigma  
Product Use : For laboratory research purposes.

Supplier : Sigma-Aldrich Canada, Ltd  
2149 Winston Park Drive  
OAKVILLE ON L6H 6J8  
CANADA

Manufacturer : Sigma-Aldrich Corporation  
3050 Spruce St.  
St. Louis, Missouri 63103  
USA

Telephone : +19058299500  
Fax : +19058299292  
Emergency Phone # (For both supplier and manufacturer) : 1-800-424-9300

Preparation Information : Sigma-Aldrich Corporation  
Product Safety - Americas Region  
1-800-521-8956

### 2. HAZARDS IDENTIFICATION

#### Emergency Overview

##### Target Organs

Pancreas., Liver, Kidney, Blood, Reproductive system. Pancreas., Liver, Kidney, Blood, Reproductive system.

##### WHMIS Classification

D2A Very Toxic Material Causing Other Toxic Carcinogen  
D2B Effects Mutagen

##### GHS Classification

Carcinogenicity (Category 1B)

##### GHS Label elements, including precautionary statements

Pictogram



Signal word Danger

Hazard statement(s)  
H350 May cause cancer.

Precautionary statement(s)  
P201 Obtain special instructions before use.  
P308 + P313 IF exposed or concerned: Get medical advice/ attention.

##### HMIS Classification

Health hazard: 0  
Chronic Health Hazard: \*  
Flammability: 0  
Physical hazards: 0

##### Potential Health Effects

Inhalation May be harmful if inhaled. May cause respiratory tract irritation.  
Skin May be harmful if absorbed through skin. May cause skin irritation.

**Eyes**  
**Ingestion**

May cause eye irritation.  
May be harmful if swallowed.

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**3. COMPOSITION/INFORMATION ON INGREDIENTS**

Synonyms : *N*-(Methylnitrosocarbamoyl)- $\alpha$ -D-glucosamine  
Streptozotocin

Formula :  $C_8H_{15}N_3O_7$

Molecular Weight : 265.22 g/mol

CAS-No.	EC-No.	Index-No.	Concentration
<b>Streptozocin</b>			
18883-66-4	242-646-8	-	-

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**4. FIRST AID MEASURES**

**General advice**

Consult a physician. Show this safety data sheet to the doctor in attendance. Move out of dangerous area.

**If inhaled**

If breathed in, move person into fresh air. If not breathing, give artificial respiration. Consult a physician.

**In case of skin contact**

Wash off with soap and plenty of water. Consult a physician.

**In case of eye contact**

Flush eyes with water as a precaution.

**If swallowed**

Never give anything by mouth to an unconscious person. Rinse mouth with water. Consult a physician.

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**5. FIRE-FIGHTING MEASURES**

**Conditions of flammability**

Not flammable or combustible.

**Suitable extinguishing media**

Use water spray, alcohol-resistant foam, dry chemical or carbon dioxide.

**Special protective equipment for fire-fighters**

Wear self contained breathing apparatus for fire fighting if necessary.

**Hazardous combustion products**

Hazardous decomposition products formed under fire conditions. - Carbon oxides, nitrogen oxides (NOx)

**Explosion data - sensitivity to mechanical impact**

no data available

**Explosion data - sensitivity to static discharge**

no data available

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**6. ACCIDENTAL RELEASE MEASURES**

**Personal precautions**

Use personal protective equipment. Avoid dust formation. Avoid breathing vapors, mist or gas. Ensure adequate ventilation. Evacuate personnel to safe areas. Avoid breathing dust.

**Environmental precautions**

Prevent further leakage or spillage if safe to do so. Do not let product enter drains.

**Methods and materials for containment and cleaning up**

Pick up and arrange disposal without creating dust. Sweep up and shovel. Keep in suitable, closed containers for disposal.

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**7. HANDLING AND STORAGE**

**Precautions for safe handling**

Avoid formation of dust and aerosols.

Provide appropriate exhaust ventilation at places where dust is formed. Normal measures for preventive fire protection.

**Conditions for safe storage**

Keep container tightly closed in a dry and well-ventilated place.

Recommended storage temperature: -20 °C

hygroscopic Store under inert gas. Moisture sensitive. Keep in a dry place.

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**8. EXPOSURE CONTROLS/PERSONAL PROTECTION**

Contains no substances with occupational exposure limit values.

**Personal protective equipment****Respiratory protection**

Where risk assessment shows air-purifying respirators are appropriate use a full-face particle respirator type N100 (US) or type P3 (EN 143) respirator cartridges as a backup to engineering controls. If the respirator is the sole means of protection, use a full-face supplied air respirator. Use respirators and components tested and approved under appropriate government standards such as NIOSH (US) or CEN (EU).

**Hand protection**

Handle with gloves. Gloves must be inspected prior to use. Use proper glove removal technique (without touching glove's outer surface) to avoid skin contact with this product. Dispose of contaminated gloves after use in accordance with applicable laws and good laboratory practices. Wash and dry hands.

**Eye protection**

Safety glasses with side-shields conforming to EN166 Use equipment for eye protection tested and approved under appropriate government standards such as NIOSH (US) or EN 166(EU).

**Skin and body protection**

impervious clothing, The type of protective equipment must be selected according to the concentration and amount of the dangerous substance at the specific workplace.

**Hygiene measures**

Handle in accordance with good industrial hygiene and safety practice. Wash hands before breaks and at the end of workday.

**Specific engineering controls**

Use mechanical exhaust or laboratory fumehood to avoid exposure.

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**9. PHYSICAL AND CHEMICAL PROPERTIES****Appearance**

Form	powder
Colour	light yellow

**Safety data**

pH	no data available
Melting/freezing point	Melting point/range: 121 °C (250 °F) - dec.
Boiling point	no data available
Flash point	no data available
Ignition temperature	no data available
Autoignition temperature	no data available
Lower explosion limit	no data available
Upper explosion limit	no data available

Vapour pressure	no data available
Density	no data available
Water solubility	soluble
Partition coefficient: n-octanol/water	no data available
Relative vapour density	no data available
Odour	no data available
Odour Threshold	no data available
Evaporation rate	no data available

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## 10. STABILITY AND REACTIVITY

### Chemical stability

Stable under recommended storage conditions.

### Possibility of hazardous reactions

no data available

### Conditions to avoid

no data available

### Materials to avoid

Strong oxidizing agents, Strong acids, Strong bases

### Hazardous decomposition products

Hazardous decomposition products formed under fire conditions. - Carbon oxides, nitrogen oxides (NOx)

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## 11. TOXICOLOGICAL INFORMATION

### Acute toxicity

#### Oral LD50

LD50 Oral - rat - 5,150 mg/kg

#### Inhalation LC50

no data available

#### Dermal LD50

no data available

#### Other information on acute toxicity

no data available

### Skin corrosion/irritation

no data available

### Serious eye damage/eye irritation

no data available

### Respiratory or skin sensitization

no data available

### Germ cell mutagenicity

Laboratory experiments have shown mutagenic effects.

Genotoxicity in vitro - Human - Kidney

DNA damage

Genotoxicity in vitro - rat - Liver

Unscheduled DNA synthesis

Genotoxicity in vitro - Hamster - Lungs  
Sister chromatid exchange

Genotoxicity in vivo - rat - Oral  
DNA damage

Genotoxicity in vivo - rat - Intraperitoneal  
Unscheduled DNA synthesis

### **Carcinogenicity**

Possible human carcinogen

IARC: 2B - Group 2B: Possibly carcinogenic to humans (Streptozocin)

ACGIH: No component of this product present at levels greater than or equal to 0.1% is identified as a carcinogen or potential carcinogen by ACGIH.

### **Reproductive toxicity**

no data available

### **Teratogenicity**

no data available

### **Specific target organ toxicity - single exposure (Globally Harmonized System)**

no data available

### **Specific target organ toxicity - repeated exposure (Globally Harmonized System)**

no data available

### **Aspiration hazard**

no data available

### **Potential health effects**

<b>Inhalation</b>	May be harmful if inhaled. May cause respiratory tract irritation.
<b>Ingestion</b>	May be harmful if swallowed.
<b>Skin</b>	May be harmful if absorbed through skin. May cause skin irritation.
<b>Eyes</b>	May cause eye irritation.

### **Signs and Symptoms of Exposure**

Vomiting

### **Synergistic effects**

no data available

### **Additional Information**

RTECS: LZ5775000

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## **12. ECOLOGICAL INFORMATION**

### **Toxicity**

no data available

**Persistence and degradability**

no data available

**Bioaccumulative potential**

no data available

**Mobility in soil**

no data available

**PBT and vPvB assessment**

no data available

**Other adverse effects**

no data available

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**13. DISPOSAL CONSIDERATIONS****Product**

Offer surplus and non-recyclable solutions to a licensed disposal company. Contact a licensed professional waste disposal service to dispose of this material. Dissolve or mix the material with a combustible solvent and burn in a chemical incinerator equipped with an afterburner and scrubber.

**Contaminated packaging**

Dispose of as unused product.

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**14. TRANSPORT INFORMATION****DOT (US)**

UN-Number: 3077 Class: 9

Packing group: III

Proper shipping name: Environmentally hazardous substances, solid, n.o.s. (Streptozocin)

Reportable Quantity (RQ): 1 lbs

Marine pollutant: No

Poison Inhalation Hazard: No

**IMDG**

Not dangerous goods

**IATA**

Not dangerous goods

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**15. REGULATORY INFORMATION****DSL Status**

All components of this product are on the Canadian DSL list.

**WHMIS Classification**

D2A Very Toxic Material Causing Other Toxic

Carcinogen

D2B Effects

Mutagen

This product has been classified in accordance with the hazard criteria of the Controlled Products Regulations and the MSDS contains all the information required by the Controlled Products Regulations.

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**16. OTHER INFORMATION****Further information**

Copyright 2010 Sigma-Aldrich Co. License granted to make unlimited paper copies for internal use only.

The above information is believed to be correct but does not purport to be all inclusive and shall be used only as a guide. The information in this document is based on the present state of our knowledge and is applicable to the product with regard to appropriate safety precautions. It does not represent any guarantee of the properties of the product. Sigma-Aldrich Co., shall not be held liable for any damage resulting from handling or from contact with the above product. See reverse side of invoice or packing slip for additional terms and conditions of sale.

### 1. PRODUCT AND COMPANY IDENTIFICATION

Product name : Tamoxifen

Product Number : T5648

Brand : Sigma

Product Use : For laboratory research purposes.

Supplier : Sigma-Aldrich Canada, Ltd  
2149 Winston Park Drive  
OAKVILLE ON L6H 6J8  
CANADA

Manufacturer : Sigma-Aldrich Corporation  
3050 Spruce St.  
St. Louis, Missouri 63103  
USA

Telephone : +19058299500

Fax : +19058299292

Emergency Phone # (For both supplier and manufacturer) : 1-800-424-9300

Preparation Information : Sigma-Aldrich Corporation  
Product Safety - Americas Region  
1-800-521-8956

### 2. HAZARDS IDENTIFICATION

#### Emergency Overview

#### Target Organs

Eyes, Liver, Kidney, Blood

#### WHMIS Classification

D2A Very Toxic Material Causing Other Toxic Effects      Carcinogen

#### GHS Classification

Acute toxicity, Oral (Category 5)  
Carcinogenicity (Category 1B)  
Reproductive toxicity (Category 1B)

#### GHS Label elements, including precautionary statements

Pictogram



Signal word      Danger

Hazard statement(s)

H303      May be harmful if swallowed.  
H350      May cause cancer.  
H360      May damage fertility or the unborn child.

Precautionary statement(s)

P201      Obtain special instructions before use.  
P308 + P313      IF exposed or concerned: Get medical advice/ attention.

#### HMIS Classification

Health hazard:      1  
Chronic Health Hazard:      \*  
Flammability:      0  
Physical hazards:      1

**NFPA Rating**

Health hazard: 1  
Fire: 0  
Reactivity Hazard: 1

**Potential Health Effects**

**Inhalation** May be harmful if inhaled. May cause respiratory tract irritation.  
**Skin** May be harmful if absorbed through skin. May cause skin irritation.  
**Eyes** May cause eye irritation.  
**Ingestion** May be harmful if swallowed.

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**3. COMPOSITION/INFORMATION ON INGREDIENTS**

Synonyms : (Z)-1-(p-Dimethylaminoethoxyphenyl)-1,2-diphenyl-1-butene  
*trans*-2-[4-(1,2-Diphenyl-1-butenyl)phenoxy]-*N,N*-dimethylethylamine

Formula : C<sub>26</sub>H<sub>29</sub>NO C<sub>26</sub>H<sub>29</sub>NO

Molecular Weight : 371.51 g/mol

CAS-No.	EC-No.	Index-No.	Concentration
<b>Tamoxifen</b>			
10540-29-1	234-118-0	-	-

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**4. FIRST AID MEASURES****General advice**

Consult a physician. Show this safety data sheet to the doctor in attendance. Move out of dangerous area.

**If inhaled**

If breathed in, move person into fresh air. If not breathing, give artificial respiration. Consult a physician.

**In case of skin contact**

Wash off with soap and plenty of water. Consult a physician.

**In case of eye contact**

Flush eyes with water as a precaution.

**If swallowed**

Never give anything by mouth to an unconscious person. Rinse mouth with water. Consult a physician.

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**5. FIRE-FIGHTING MEASURES****Conditions of flammability**

Not flammable or combustible.

**Suitable extinguishing media**

Use water spray, alcohol-resistant foam, dry chemical or carbon dioxide.

**Special protective equipment for fire-fighters**

Wear self contained breathing apparatus for fire fighting if necessary.

**Hazardous combustion products**

Hazardous decomposition products formed under fire conditions. - Carbon oxides, nitrogen oxides (NO<sub>x</sub>)

Hazardous decomposition products formed under fire conditions. - Carbon oxides, nitrogen oxides (NO<sub>x</sub>)

**Explosion data - sensitivity to mechanical impact**

no data available

**Explosion data - sensitivity to static discharge**

no data available

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**6. ACCIDENTAL RELEASE MEASURES**

**Personal precautions**

Use personal protective equipment. Avoid dust formation. Avoid breathing vapors, mist or gas. Ensure adequate ventilation. Evacuate personnel to safe areas. Avoid breathing dust.

**Environmental precautions**

Prevent further leakage or spillage if safe to do so. Do not let product enter drains.

**Methods and materials for containment and cleaning up**

Pick up and arrange disposal without creating dust. Sweep up and shovel. Keep in suitable, closed containers for disposal.

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**7. HANDLING AND STORAGE****Precautions for safe handling**

Avoid formation of dust and aerosols.

Provide appropriate exhaust ventilation at places where dust is formed. Normal measures for preventive fire protection.

**Conditions for safe storage**

Keep container tightly closed in a dry and well-ventilated place.

Recommended storage temperature: 2 - 8 °C

Light sensitive.

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**8. EXPOSURE CONTROLS/PERSONAL PROTECTION**

Contains no substances with occupational exposure limit values.

**Personal protective equipment****Respiratory protection**

Where risk assessment shows air-purifying respirators are appropriate use a full-face particle respirator type N100 (US) or type P3 (EN 143) respirator cartridges as a backup to engineering controls. If the respirator is the sole means of protection, use a full-face supplied air respirator. Use respirators and components tested and approved under appropriate government standards such as NIOSH (US) or CEN (EU).

**Hand protection**

Handle with gloves. Gloves must be inspected prior to use. Use proper glove removal technique (without touching glove's outer surface) to avoid skin contact with this product. Dispose of contaminated gloves after use in accordance with applicable laws and good laboratory practices. Wash and dry hands.

**Eye protection**

Safety glasses with side-shields conforming to EN166 Use equipment for eye protection tested and approved under appropriate government standards such as NIOSH (US) or EN 166(EU).

**Skin and body protection**

impervious clothing, The type of protective equipment must be selected according to the concentration and amount of the dangerous substance at the specific workplace.

**Hygiene measures**

Handle in accordance with good industrial hygiene and safety practice. Wash hands before breaks and at the end of workday.

**Specific engineering controls**

Use mechanical exhaust or laboratory fumehood to avoid exposure.

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**9. PHYSICAL AND CHEMICAL PROPERTIES****Appearance**

Form	solid
Colour	no data available

**Safety data**

pH	no data available
Melting/freezing	Melting point/range: 97 - 98 °C (207 - 208 °F) - lit.

point	
Boiling point	no data available
Flash point	no data available
Ignition temperature	no data available
Autoignition temperature	no data available
Lower explosion limit	no data available
Upper explosion limit	no data available
Vapour pressure	no data available
Density	no data available
Water solubility	no data available
Partition coefficient: n-octanol/water	no data available
Relative vapour density	no data available
Odour	no data available
Odour Threshold	no data available
Evaporation rate	no data available

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## 10. STABILITY AND REACTIVITY

### Chemical stability

Stable under recommended storage conditions.

### Possibility of hazardous reactions

no data available

### Conditions to avoid

Light.

### Materials to avoid

Strong oxidizing agents

### Hazardous decomposition products

Hazardous decomposition products formed under fire conditions. - Carbon oxides, nitrogen oxides (NO<sub>x</sub>)

Hazardous decomposition products formed under fire conditions. - Carbon oxides, nitrogen oxides (NO<sub>x</sub>)

Other decomposition products - no data available

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## 11. TOXICOLOGICAL INFORMATION

### Acute toxicity

#### Oral LD50

LD50 Oral - rat - 4,100 mg/kg

#### Inhalation LC50

no data available

#### Dermal LD50

no data available

#### Other information on acute toxicity

no data available

### Skin corrosion/irritation

no data available

### Serious eye damage/eye irritation

no data available

**Respiratory or skin sensitization**

no data available

**Germ cell mutagenicity**

no data available

**Carcinogenicity**

This is or contains a component that has been reported to be carcinogenic based on its IARC, OSHA, ACGIH, NTP, or EPA classification.

Possible human carcinogen

IARC: 1 - Group 1: Carcinogenic to humans (Tamoxifen)

ACGIH: No component of this product present at levels greater than or equal to 0.1% is identified as a carcinogen or potential carcinogen by ACGIH.

**Reproductive toxicity**

May cause reproductive disorders.

**Teratogenicity**

Presumed human reproductive toxicant

**Specific target organ toxicity - single exposure (Globally Harmonized System)**

no data available

**Specific target organ toxicity - repeated exposure (Globally Harmonized System)**

no data available

**Aspiration hazard****Potential health effects**

<b>Inhalation</b>	May be harmful if inhaled. May cause respiratory tract irritation.
<b>Ingestion</b>	May be harmful if swallowed.
<b>Skin</b>	May be harmful if absorbed through skin. May cause skin irritation.
<b>Eyes</b>	May cause eye irritation.

**Synergistic effects**

no data available

**Additional Information**

RTECS: KR5919600

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**12. ECOLOGICAL INFORMATION****Toxicity**

no data available

**Persistence and degradability**

no data available

**Bioaccumulative potential**

no data available

**Mobility in soil**

no data available

**PBT and vPvB assessment**

no data available

**Other adverse effects**

no data available

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**13. DISPOSAL CONSIDERATIONS**

**Product**

Offer surplus and non-recyclable solutions to a licensed disposal company. Contact a licensed professional waste disposal service to dispose of this material. Dissolve or mix the material with a combustible solvent and burn in a chemical incinerator equipped with an afterburner and scrubber.

**Contaminated packaging**

Dispose of as unused product.

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**14. TRANSPORT INFORMATION**

**DOT (US)**

Not dangerous goods

**IMDG**

Not dangerous goods

**IATA**

Not dangerous goods

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**15. REGULATORY INFORMATION**

**DSL Status**

All components of this product are on the Canadian DSL list.

**WHMIS Classification**

D2A	Very Toxic Material Causing Other Toxic Effects	Carcinogen
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This product has been classified in accordance with the hazard criteria of the Controlled Products Regulations and the MSDS contains all the information required by the Controlled Products Regulations.

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**16. OTHER INFORMATION**

**Further information**

Copyright 2011 Sigma-Aldrich Co. License granted to make unlimited paper copies for internal use only. The above information is believed to be correct but does not purport to be all inclusive and shall be used only as a guide. The information in this document is based on the present state of our knowledge and is applicable to the product with regard to appropriate safety precautions. It does not represent any guarantee of the properties of the product. Sigma-Aldrich Co., shall not be held liable for any damage resulting from handling or from contact with the above product. See reverse side of invoice or packing slip for additional terms and conditions of sale.

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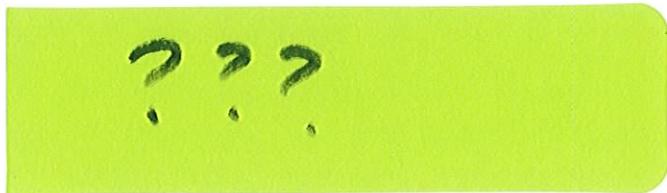
**TOXIN USE RISK ASSESSMENT**

Name of Toxin:	Streptozotocin
Proposed Use Dose:	75000 µg
Proposed Storage Dose:	1000000 µg
LD <sub>50</sub> (species):	50000 µg

<b>Calculation:</b>			
	50000 µg/kg	x	50 kg/person
Dose per person based on LD <sub>50</sub> in µg =	2500000		
<b>LD<sub>50</sub> per person with safety factor of 10 based on LD<sub>50</sub> in µg =</b>	<b>250000</b>		

**Comments/Recommendations:**

Store in two separate locations.





### TOXIN USE RISK ASSESSMENT

<b>Name of Toxin:</b>	Tamoxifen
<b>Proposed Use Dose:</b>	1000 µg
<b>Proposed Storage Dose:</b>	1000000 µg
<b>LD<sub>50</sub> (species):</b>	4100000 µg

<b>Calculation:</b>	
4100000 µg/kg	x 50 kg/person
Dose per person based on LD <sub>50</sub> in µg = 205000000	
<b>LD<sub>50</sub> per person with safety factor of 10 based on LD<sub>50</sub> in µg =</b>	<b>20500000</b>

**Comments/Recommendations:**

LD 50 Oral - rat - 4,100mg/kg