

Human Arginine Vasopressin Receptor 2 Reporter Assay System (AVPR2)

96-well Format Assays
Product # IB37201

■

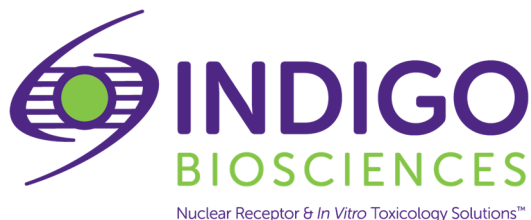
Technical Manual
(version 7.2i)

www.indigobiosciences.com

3006 Research Drive, Suite A1, State College, PA 16801, USA

Customer Service:
814-234-1919; FAX 814-272-0152
customerserv@indigobiosciences.com

Technical Service:
814-234-1919
techserv@indigobiosciences.com



Human AVPR2 Reporter Assay System 96-well Format Assays

I. Description	
▪ Background.....	3
▪ The Assay System.....	3
▪ The Assay Chemistry.....	4
▪ Preparation of Test Compounds.....	4
▪ Considerations for Automated Dispensing.....	5
▪ Assay Scheme.....	5
▪ Assay Performance.....	6
II. Product Components & Storage Conditions	7
III. Materials to be Supplied by the User	7
IV. Assay Protocol	
▪ A word about <i>Antagonist</i> -mode assay setup.....	8
▪ <i>DAY 1 Assay Protocol</i>	8
▪ <i>DAY 2 Assay Protocol</i>	10
V. Related Products	11
VI. Literature Citations	12
VII. Limited Use Disclosures	12
APPENDIX 1: Example Scheme for Serial Dilutions	13

I. Description

▪ Background ▪

The Arginine Vasopressin Receptor 2 (**AVPR2**), also known as the V2 receptor, is a member of the family of G-Protein-coupled receptors (GPCR)¹. There are three subtypes of vasopressin receptors identified in humans, which are AVPR1A, AVPR1B and AVPR2².

The natural ligand of AVPR2 is vasopressin, which is synthesized in the hypothalamus and secreted into the posterior pituitary³. Like the closely similar neuropeptide, oxytocin, vasopressin is a nine amino acid neuropeptide that is classified as an antidiuretic hormone (ADH)³. Release of vasopressin is mediated by stimuli such as hemorrhage or dehydration. When vasopressin binds to AVPR2, signal transduction is mediated through Gαs GTP binding proteins, which activates adenylate cyclase to increase intracellular cAMP. This cascade further activates protein kinase A (PKA)⁴.

The most abundant expression of AVPR2 is found in the kidney⁵. The main function of AVPR2 is to regulate water homeostasis in the body. Binding of vasopressin to the V2 receptor in the kidney stimulates cellular relocation of aquaporin 2 (AQP2) to the apical plasma membrane⁶. This facilitates water reabsorption from primary urine. The impaired regulation of vasopressin causes a serious condition known as Diabetes insipidus (DI)⁷.

Besides as an antidiuretic factor, vasopressin is also known to regulate blood coagulation. Desmopressin has been used as a haemostatic drug for patients with hemophilia A by stimulating production of coagulant factor VIII⁸. Interestingly, drug repurposing of desmopressin revealed the promising treatment for patients with osteosarcoma⁹. In fact, AVPR2 has been detected in several cancers such as kidney, breast, colon and lungs¹⁰.

▪ The Assay System ▪

This assay utilizes proprietary human cells that have been engineered to provide constitutive expression of the Human Arginine Vasopressin Receptor 2 (**AVPR2**). INDIGO's Reporter Cells contain an engineered luciferase reporter gene functionally linked to tandem cyclic AMP Response Elements (CRE) and a minimal promoter. Activated adenylate cyclase results in the production of cAMP, which binds the transcription factor CREB (cAMP Response Element-Binding Protein). Activated CREB binds to CRE sequences, seeding the formation of a complete transcription complex that drives luciferase gene expression. Quantifying relative changes in luciferase enzyme activity in the treated reporter cells relative to the untreated reporter cells provides a sensitive surrogate measure of drug-induced changes in AVPR2 activity. The principal application of this reporter assay is in the screening of test compounds to quantify any functional activities, either activating or inhibitory, that they may exert against AVPR2.

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

INDIGO's assay kits provide the convenience of an all-inclusive cell-based assay system. In addition to AVPR2 Reporter Cells, provided are two optimized media for use in recovering the cryopreserved cells and for diluting test samples, the reference activator vasopressin, Luciferase Detection Reagents, a cell culture-ready assay plate, and a detailed assay protocol.

▪ The Assay Chemistry ▪

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

Reporter Cells incorporate the cDNA encoding beetle luciferase, a 62 kD protein originating from the North American firefly (*Photinus pyralis*). Luciferase catalyzes the mono-oxidation of D-luciferin in a Mg^{+2} -dependent reaction that consumes O_2 and ATP as co-substrates and yields as products, oxyluciferin, AMP, PP_i , CO_2 , and photon emission. Luminescence intensity of the reaction is quantified using a luminometer and is reported in terms of Relative Light Units (RLU's).

INDIGO's Receptor Assays feature a luciferase detection reagent specially formulated to provide stable light emission between 5 and 90+ minutes after initiating the luciferase reaction. Incorporating a 5-minute reaction-rest period ensures that light emission profiles attain maximal stability, thereby allowing assay plates to be processed in batch. By doing so, the signal output from all sample wells, from one plate to the next, may be directly compared within an experimental set.

▪ Preparation of Test Compounds ▪

Small molecule test compounds are typically solvated in DMSO at high concentrations; ideally 1,000x-concentrated stocks relative to the highest desired treatment concentration in the assay. Using high-concentration stocks minimizes DMSO carry-over into the assay plates.

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

Immediately prior to setting up an assay, the master stocks are serially diluted using one of two alternative strategies:

1.) For both **small-molecule** and **proteinaceous** test samples, **Compound Screening Medium (CSM)** may be used as the diluent to achieve the desired assay concentration series, as described in *Step 7* (pg. 9).

Alternatively, if **small-molecule** test compound solubility is expected to be problematic, 2.) DMSO may be used to make serial dilutions to produce 1,000x-concentrated stocks for each independent test concentration. Treatment media are then prepared using CSM to make 1,000-fold dilutions of the prepared DMSO dilution series. Note: Do not use DMSO as the diluent for proteinaceous test compounds.

Regardless of the dilution method used, the concentration of total DMSO (or any organic solvent) carried over into assay wells should not exceed 0.4%. Emerging cytotoxicity can be expected above 0.4% DMSO exposure over the 24-hour treatment period.

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

▪ **Considerations for Automated Dispensing** ▪

When using an automated dispensing instrument to process a small number of assay plates, first carefully consider the dead volume requirement of your instrument before committing assay reagents to its setup. In essence, "dead volume" is the volume of reagent that is dedicated to the instrument; it will *not* be available for final dispensing into assay wells. The following Table provides information on reagent volume requirements, and available excesses.

Stock Reagent & Volume provided	Volume to be Dispensed (96-well plate)	Excess rgt. volume available for instrument dead volume
Reporter Cell Suspension 21 ml (prepared from kit components)	200 µl / well 19.2 ml / plate	~ 1.8 ml
LDR 12 ml (prepared from kit components)	100 µl / well 9.6 ml / plate	~ 2.4 ml

▪ **Assay Scheme** ▪

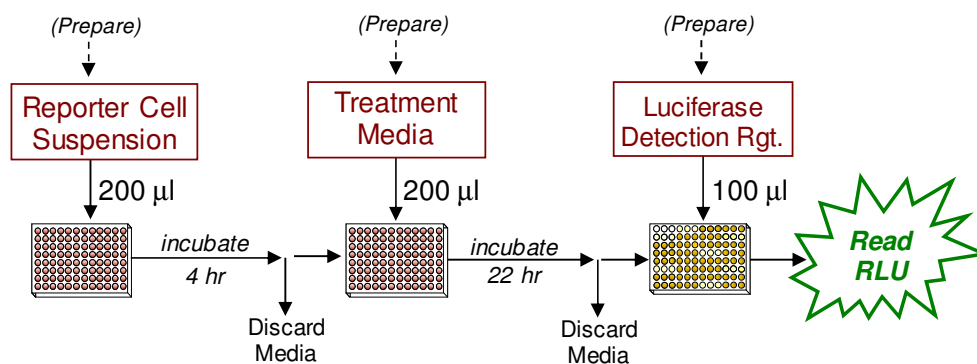


Figure 1. Assay workflow. Reporter Cells are dispensed into the assay plate and incubated for 4-6 hours. Following the pre-incubation period, the culture media are discarded, and the prepared treatment media are added. Following a 22-24 hour treatment period the media are discarded, and Luciferase Detection Reagent is added. The intensity of light emission (in units of 'Relative Light Units'; RLU) from each assay well is quantified using a plate-reading luminometer.

▪ Assay Performance ▪

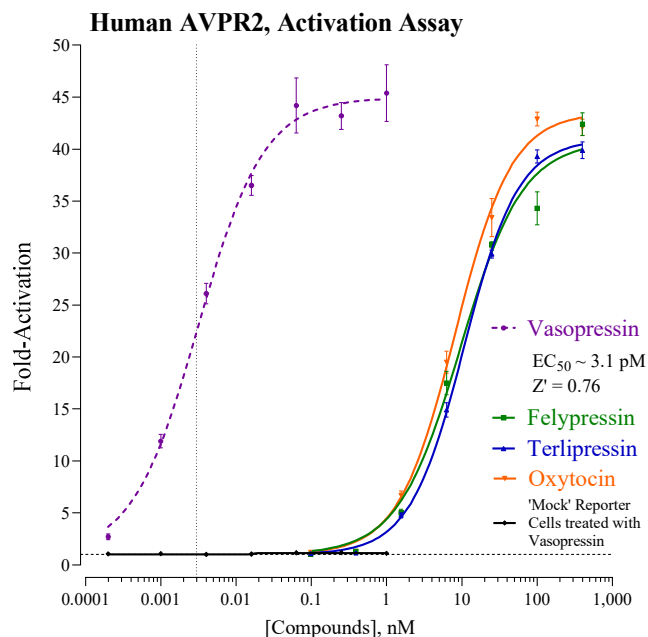


Figure 2. Activation of AVPR2. Reporter cells were treated with the reference activators polypeptides Vasopressin (provided), Felypressin, Terlipressin and Oxytocin. The absence of signal in Vasopressin treated 'Mock' cells (which contain the CRE-Luc reporter vector, but do *not* express AVPR2) confirms that the observed ligand-dependent response is specific to AVPR2 activation.

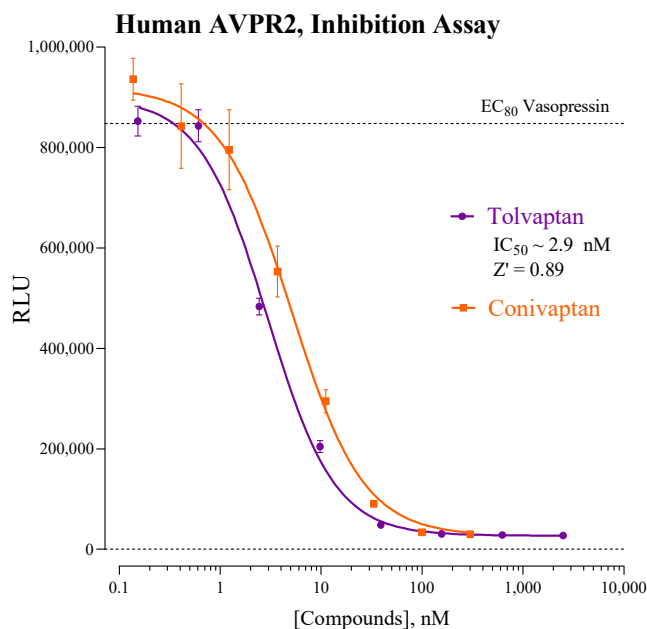


Figure 3. Inhibition of AVPR2. Reporter cells were co-treated with an EC₈₀ concentration of the reference activator Vasopressin and varying concentrations of the AVPR2 selective inhibitor Tolvaptan, and the non-selective inhibitor Conivaptan. INDIGO's Live Cell Multiplex (LCM) Assay confirmed that no treatment concentrations were cytotoxic (data not shown).

For both the activation assay (Figure 2) and inhibition assay (Figure 3), luminescence was quantified and values of average ($n = 4$) RLU, standard deviation (SD), Fold-Activation, and Z' ¹¹ values were calculated. The least-squares method of non-linear regression was used to plot activity changes vs. Log_{10} [Compound, nM], and EC₅₀ /IC₅₀ values were determined, using GraphPad Prism software. All chemicals were procured from MedChem Express (Monmouth Junction, NJ), except for Tolvaptan, which was procured from ChemScene (Monmouth Junction, NJ).

II. Product Components & Storage Conditions

This Human AVPR2 Assay kit contains materials to perform assays in a single 96-well assay plate.

Reporter cells are temperature sensitive! To ensure maximal viability the tube of Cells must be maintained at -80°C until immediately prior to the rapid-thaw procedure described in Step 2 of this protocol.

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

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

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

<u>Kit Components</u>	<u>Amount</u>	<u>minimum Storage Temp.</u>
▪ AVPR2 Reporter Cells	1 x 2.0 mL	-80°C
▪ Cell Recovery Medium (CRM)	2 x 10.5 mL	-20°C
▪ Compound Screening Medium (CSM)	1 x 45 mL	-20°C
▪ Vasopressin (1.0 µM in PBS+0.1%BSA)	1 x 30 µL	-20°C
▪ Detection Substrate (Note: contains DTT)	1 x 6.0 mL	-80°C
▪ Detection Buffer	1 x 6.0 mL	-20°C
▪ 96-well, assay plate (white, sterile, cell-culture ready)	1	ambient

III. Materials to be Supplied by the User

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

DAY 1

- container of dry ice (see Step 2)
- cell culture-rated laminar flow hood.
- 37°C, humidified 5% CO₂ incubator for mammalian cell culture.
- 37°C water bath.
- 70% alcohol wipes
- 8-channel electronic, repeat-dispensing pipettes & sterile tips
- disposable media basins, sterile.
- sterile multi-channel media basins (such as the Heathrow Scientific "Dual-Function Solution Basin"), or deep-well plates, or appropriate similar vessel for generating dilution series of reference compound(s) and test compound(s).
- *Optional*: antagonist reference compound (e.g., Figure 3)
- *Optional*: clear 96-well assay plate, cell culture treated, for viewing cells on Day 2.

DAY 2 plate-reading luminometer.

IV. Assay Protocol

Please review the entire Assay Protocol before starting. Completing the assay requires an overnight incubation. *Steps 1-11* are performed on **Day 1**, requiring less than 2 hours of bench work and a 4-hour incubation step to complete. *Steps 12-17* are performed on **Day 2** and require less than 1 hour to complete.

▪ A word about antagonist-mode assay setups ▪

When setting up receptor inhibition assays the Reporter Cells are co-treated with a fixed sub-maximal concentration (typically between EC₅₀ – EC₈₅) of the reference agonist AND varying concentrations of the test compound(s). This AVPR2 Assay kit includes a 1.0 µM stock solution of **Vasopressin** that may be used to setup inhibition-mode assays. 0.01 nM of Vasopressin approximates EC₇₀₋₈₀ in this assay. Hence, it is a suitable concentration of challenge agonist to use when screening test materials for inhibitory activities.

Add Vasopressin to a bulk volume of **CSM**, as described above. This agonist-supplemented medium is then used to prepare serial dilutions of test material stocks to achieve the desired respective assay concentrations. This is an efficient and precise method of setting up inhibition assays, and it is the method presented in *Step 7b* of this protocol.

DAY 1 Assay Protocol: All steps should be performed using aseptic technique.

1.) Remove the **2 tubes** of **Cell Recovery Medium (CRM)** from freezer storage, thaw and equilibrate to 37°C using a water bath.

2.) Rapid Thaw of the Reporter Cells: *First*, retrieve the two tubes of **CRM** from the 37°C water bath and sanitize their outside surfaces with a 70% ethanol swab.

Second, retrieve the tube of **AVPR2 Reporter Cells** from -80°C storage, place it directly into dry ice for transport to the laminar flow hood. When ready to begin, transfer the tube of reporter cells into a rack and, *without delay*, perform a rapid thaw of the cells by transferring 9.5 ml from *each of the 2 tubes* of 37°C CRM into the tube of frozen cells. Place the tube of Reporter Cells in a 37°C water bath for 5 minutes. The resulting volume of cell suspension will be **21 ml**.

3.) Retrieve the tube of Reporter Cell Suspension from the water bath and sanitize the outside surface with a 70% alcohol swab.

4.) *Gently* invert the tube of Reporter Cells several times to gain a homogenous cell suspension, then transfer the cell suspension into a reservoir. Using an electronic, repeat-dispensing 8-channel pipette, dispense **200 µl / well** of cell suspension into wells of the assay plate.

NOTE 4.1: If INDIGO's Live Cell Multiplex Assay is to be incorporated, a minimum of 3 'cell blank' wells (meaning cell-free but containing CSM) must be included in the assay plate to allow quantification of plate-specific fluorescence background (refer to the LCMA Technical Manual).

NOTE 4.2: Increased well-to-well variation (= increased standard deviation!) will occur if care is not taken to prevent cells from settling in the reservoir during the dispensing period. Likewise, take care to ensure precision in dispensing exact volumes across the assay plate.

NOTE 4.3: Users sometimes wish to examine the reporter cells using a microscope. If so, the extra volume of cell suspension provided with each kit may be dispensed into a clear 96-well assay plate. Continue to process this plate in an identical manner to the white assay plate.

5.) Pre-incubate reporter cells. Place the assay plate into a cell culture incubator (37°C, ≥70% humidity, 5% CO₂) for 4 - 6 hours.

6.) Near the end of the pre-culture period, remove Compound Screening Medium (CSM) from freezer storage and thaw in a 37°C water bath.

7.) Prepare the Test Compound and Reference Compound treatment media. As discussed in “*Preparation of Test Compounds*” (pg. 4), use CSM to prepare an appropriate dilution series of the reference and test compound stocks. In *Step 9*, the prepared treatment media will be dispensed at **200 µl / well** into the assay plate. Manage dilution volumes carefully; this assay kit provides **45 ml** of CSM.

NOTE: Total DMSO, or any other organic solvent, carried over into assay reactions should not exceed 0.4%.

a. Agonist-mode assays. This assay kit includes a concentrated stock (1.0 µM) of the poly-peptide vasopressin prepared in PBS+0.1% BSA. The following 7-point treatment series, with concentrations generated using serial 4-fold dilutions, provides a complete dose-response: 1.00, 0.250, 0.0625, 0.0156, 0.00391, 0.000977, and 0.000244 nM.

APPENDIX 1 provides guidance for generating such a dilution series. Always include 'no treatment' (or 'vehicle only') controls.

~ or ~

b. Inhibition-mode assays. When setting up inhibition assays, first supplement a bulk volume of CSM with the challenge activator **Vasopressin** to achieve an EC₅₀ – EC₈₀ concentration (refer to “*A word about antagonist-mode assay setup*”, pg. 8). The supplemented CSM is then used to generate dilutions of test compound stocks to achieve the desired series of treatment concentrations.

8.) At the end of the 4 - 6 hours pre-culture period, discard the media. The preferred method is to use a ‘wrist flick’ to eject media into an appropriate waste container. *Gently* tap the inverted plate onto a clean absorbent paper towel to remove residual droplets. Cells will remain tightly adhered to well bottoms.

9.) Dispense **200 µl / well** of each prepared treatment media into the assay plate.

NOTE: If well-to-well variation due to ‘edge-effects’ is a concern this problem may be mitigated by dispensing sterile liquid into the *inter-well* spaces of the assay plate. Simply remove 1 tip from the 8-chanel dispenser and dispense 100 µl of sterile water into each of the seven inter-well spaces per column of wells.

10.) Transfer the assay plate into a cell culture incubator for 22 - 24 hours.

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

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

DAY 2 Assay Protocol: Subsequent manipulations do *not* require special regard for aseptic technique and may be performed on a bench top or in a **fume hood**.

12.) Approximately 30 minutes before intending to quantify receptor activity, remove **Detection Substrate** and **Detection Buffer** from the refrigerator and place them in a low-light area so that they may equilibrate to room temperature.

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

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

14.) Immediately before proceeding to *Step 15*, prepare **Luciferase Detection Reagent (LDR)**. Combine 'Detection Buffer' and 'Detection Substrate' by pouring-over their entire volumes into a media basin; rock the basin gently to mix the reagent. The resulting volume of LDR is 12 ml.

NOTE: 'Detection Substrate' contains a high concentration of DTT, which produces a strong odor that some users may find objectionable. It is advised to work in a **fume hood** when preparing LDR, and subsequently when dispensing it into the assay plate and throughout the following 'plate rest' period (*Step 16*).

15.) Following 22 - 24 hours incubation in treatment media, discard the media contents by manually ejecting it into an appropriate waste container. *Gently* tap the inverted plate onto a clean absorbent paper towel to remove residual droplets. Cells will remain tightly adhered to well bottoms.

16.) Add 100 µl of the prepared **LDR** into all wells of the assay plate. Allow the assay plate to rest at room temperature for 5 – 10 minutes following the addition of LDR. Do not shake the assay plate during this period.

17.) Quantify luminescence.

18.) Data analyses.

V. Related Products

<i>Product No.</i>	<i>Product Descriptions</i>
Human AVPR2 Assay Products	
IB37201	Human AVPR2 Reporter Assay System 1x 96-well format assay
IB37202	Human AVPR2 Reporter Assay System 1x 384-well format assays
Bulk volumes of assay reagents may be custom manufactured to accommodate any scale of HTS. Please Inquire.	
Human AVPR1B Assay Products	
IB37101	Human AVPR1B Reporter Assay System 1x 96-well format assay
IB37102	Human AVPR1B Reporter Assay System 1x 384-well format assays
Human AVPR1A Assay Products	
IB37001	Human AVPR1A Reporter Assay System 1x 96-well format assay
IB37002	Human AVPR1A Reporter Assay System 1x 384-well format assays
Human OXTR Assay Products	
IB35001	Human OXTR Reporter Assay System 1x 96-well format assay
IB35002	Human OXTR Reporter Assay System 1x 384-well format assays
LIVE Cell Multiplex (LCM) Assay	
LCM-01	Reagent volumes sufficient to perform 96 Live Cell Assays
LCM-05	Reagent in 5x bulk volume to perform 480 Live Cell Assays contained in 5 x 96-well assay plates
LCM-10	Reagent in 10x bulk volume to perform 960 Live Cell Assays contained in 10 x 96-well assay plates

INDIGlo Luciferase Detection Reagent	
LDR-10, -25, -50, -500	INDIGlo Luciferase Detection Reagents 10 mL, 25 mL, 50 mL, and 500 mL; custom volumes available

Please refer to INDIGO Biosciences website for updated product offerings.

www.indigobiosciences.com

VI. Literature Citations

- ¹ Kimura T., *et. al* (1992) Structure and expression of a human oxytocin receptor. *Nature*. 14:356 (6369): 526-9.
 - ² Thibonnier M, *et. al* (2002) Chapter 14 Molecular pharmacology and modeling of vasopressin receptors. *Prog Brain Res* 139. 179-196.
 - ³ Brownstein MJ *et. al* (1980) Synthesis, transport, and release of posterior pituitary hormones. *Science*: 207: 373-378.
 - ⁴ Jard SBoone M, *et. al* (2008) Physiology and pathophysiology of the vasopressin-regulated renal water reabsorption. *Pflugers Arch* 456 (6) :1005-1024.
 - ⁵ Brown D, *et. al* (1988) Vasopressin stimulates endocytosis in kidney collecting duct principal cells. *Eur J Cell Bio* 46 (2): 336-341.
 - ⁶ Vukicevic T, *et. al* (2016) The trafficking of the Water Channel Aquaporin-2 in Renal Principal Cells-a Potential Target for Pharmacological Intervention in Cardiovascular Diseases. *Front Pharmacol* Feb 11:7:23.
 - ⁷ Ishikawa S (2000) Urinary excretion of aquaporin-2 in pathological states of water metabolism. *Ann Med*: Mar: 32(2): 90-93.
 - ⁸ Svensson PJ, *et. al* (2014) Desmopressin in treatment of haematological disorders and in prevention of surgical bleeding. *Blood Rev*: May 28 (3): 95-102.
 - ⁹ Sobol NT, *et. al* (2021) Anticancer activity of repurposed hemostatic agent desmopressin on AVPR2-expressing human osteosarcoma. *Exp Ther Med*: Jun 21 (6): 566.
 - ¹⁰ Mao L, *et. al* (2023) AVPR2 is a potential prognostic biomarker and correlated with immune infiltration in head and neck squamous cell carcinoma. *BMC Med Genetics*: Mar 30:16 (1): 67-83.
 - ¹¹ Zhang JH, *et al.* (1999) A Simple Statistical Parameter for Use in Evaluation and Validation of High Throughput Screening Assays. *J Biomol Screen*: 4(2), 67-73.
- $$Z' = 1 - [3 * (SD^{Ref\ EC100} + SD^{Untreated}) / (RLU^{Ref\ EC100} - RLU^{Untreated})]$$

VII. Limited Use Disclosures

Products commercialized by INDIGO Biosciences, Inc. are for RESEARCH PURPOSES ONLY – not for therapeutic, diagnostic, or contact use in humans or animals.

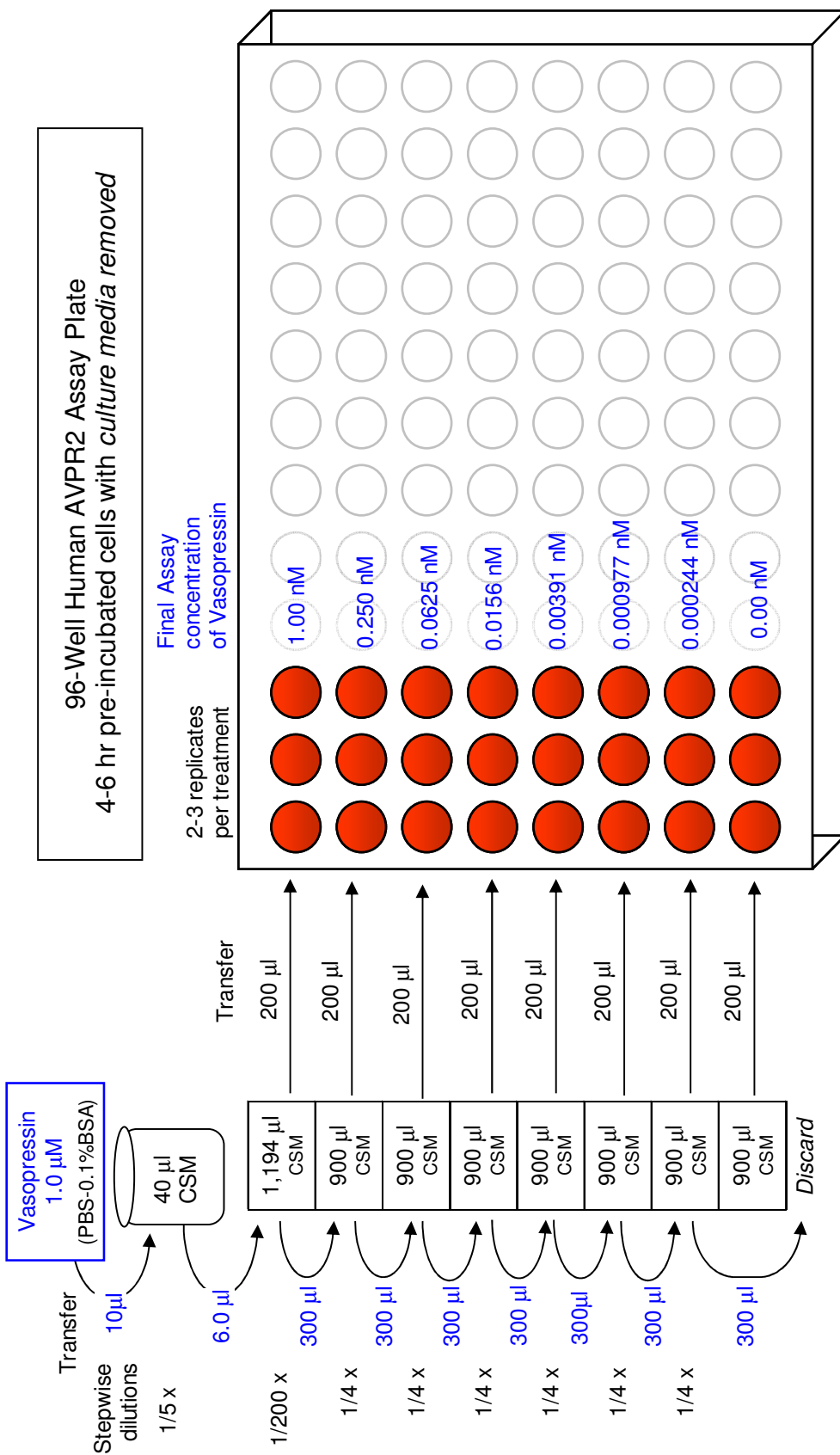
“CryoMite” is a Trademark TM of INDIGO Biosciences, Inc. (State College, PA, USA)

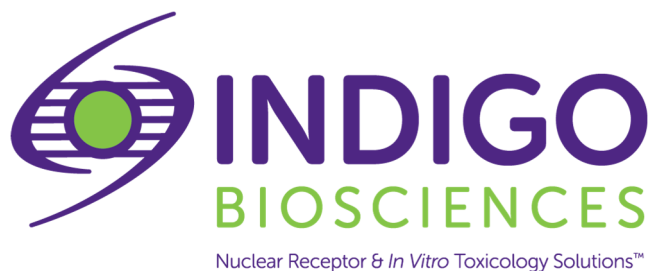
Product prices, availability, specifications, and claims are subject to change without prior notice.

Copyright © INDIGO Biosciences, Inc. (State College, PA, USA). All Rights Reserved.

APPENDIX 1

Example scheme for the serial dilution of the reference agonist Vasopressin and the setup of an AVPR2 dose-response assay.





**Human Arginine Vasopressin Receptor 2
Reporter Assay System
(AVPR2)**

384-well Format Assays
Product # IB37202

■

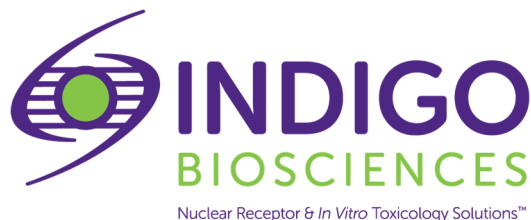
Technical Manual
(version 8.0i)

www.indigobiosciences.com

3006 Research Drive, Suite A1, State College, PA 16801, USA

Customer Service:
814-234-1919; FAX 814-272-0152
customerserv@indigobiosciences.com

Technical Service:
814-234-1919
techserv@indigobiosciences.com



Human AVPR2 Reporter Assay System 384-well Format Assays

I. Description

▪ Background.....	3
▪ The Assay System.....	3
▪ The Assay Chemistry.....	4
▪ Considerations for the Preparation and Automated Dispensing of Test Compounds.....	5
▪ Considerations for Automated Dispensing of Other Assay Reagents.....	5
▪ Assay Scheme.....	5
▪ Assay Performance.....	6

II. Product Components & Storage Conditions7

III. Materials to be Supplied by the User.....7

IV. Assay Protocol

▪ A word about <i>Antagonist</i> -mode assay setup.....	8
▪ <i>DAY 1 Assay Protocol</i>	8
▪ <i>DAY 2 Assay Protocol</i>	10

V. Related Products.....11

VI. Citations.....12

VII. Limited Use Disclosure.....12

APPENDIX 1a: Example Scheme for Serial Dilution when using tip-based dispensing of test compounds.....	13
--	----

APPENDIX 1b: Example Scheme for Serial Dilutions when using acoustic dispensing of test compounds.....	14
--	----

I. Description

▪ Background ▪

The Arginine Vasopressin Receptor 2 (**AVPR2**), also known as the V2 receptor, is a member of the family of G-Protein-coupled receptors (GPCR)¹. There are three subtypes of vasopressin receptors identified in humans, which are AVPR1A, AVPR1B and AVPR2².

The natural ligand of AVPR2 is vasopressin, which is synthesized in the hypothalamus and secreted into the posterior pituitary³. Like the closely similar neuropeptide, oxytocin, vasopressin is a nine amino acid neuropeptide that is classified as an antidiuretic hormone (ADH)³. Release of vasopressin is mediated by stimuli such as hemorrhage or dehydration. When vasopressin binds to AVPR2, signal transduction is mediated through G α s GTP binding proteins, which activates adenylate cyclase to increase intracellular cAMP. This cascade further activates protein kinase A (PKA)⁴.

The most abundant expression of AVPR2 is found in the kidney⁵. The main function of AVPR2 is to regulate water homeostasis in the body. Binding of vasopressin to the V2 receptor in the kidney stimulates cellular relocation of aquaporin 2 (AQP2) to the apical plasma membrane⁶. This facilitates water reabsorption from primary urine. The impaired regulation of vasopressin causes a serious condition known as Diabetes insipidus (DI)⁷.

Besides as an antidiuretic factor, vasopressin is also known to regulate blood coagulation. Desmopressin has been used as a haemostatic drug for patients with hemophilia A by stimulating production of coagulant factor VIII⁸. Interestingly, drug repurposing of desmopressin revealed the promising treatment for patients with osteosarcoma⁹. In fact, AVPR2 has been detected in several cancers such as kidney, breast, colon and lungs¹⁰.

▪ The Assay System ▪

This assay utilizes proprietary human cells that have been engineered to provide constitutive expression of the Human Arginine Vasopressin Receptor 2 (**AVPR2**). INDIGO's Reporter Cells contain an engineered luciferase reporter gene functionally linked to tandem cyclic AMP Response Elements (CRE) and a minimal promoter. Activated adenylate cyclase results in the production of cAMP, which binds the transcription factor CREB (cAMP Response Element-Binding Protein). Activated CREB binds to CRE sequences, seeding the formation of a complete transcription complex that drives luciferase gene expression. Quantifying relative changes in luciferase enzyme activity in the treated reporter cells relative to the untreated reporter cells provides a sensitive surrogate measure of drug-induced changes in AVPR2 activity. The principal application of this reporter assay is in the screening of test compounds to quantify any functional activities, either activating or inhibitory, that they may exert against AVPR2.

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

INDIGO's assay kits provide the convenience of an all-inclusive cell-based assay system. In addition to AVPR2 Reporter Cells, provided are two optimized media for use in recovering the cryopreserved cells and for diluting test samples, the reference activator vasopressin, Luciferase Detection Reagents, a cell culture-ready assay plate, and a detailed assay protocol.

▪ The Assay Chemistry ▪

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

Reporter Cells incorporate the cDNA encoding beetle luciferase, a 62 kD protein originating from the North American firefly (*Photinus pyralis*). Luciferase catalyzes the mono-oxidation of D-luciferin in a Mg^{+2} -dependent reaction that consumes O_2 and ATP as co-substrates, and yields as products oxyluciferin, AMP, PP_i , CO_2 , and photon emission. Luminescence intensity of the reaction is quantified using a luminometer and is reported in terms of Relative Light Units (RLU's).

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

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

Small-molecule test compounds are typically solvated in DMSO at high concentrations; ideally 1,000x-concentrated stocks relative to the highest desired treatment concentration in the assay. Using high-concentration stocks minimizes DMSO carry-over into the assay plates.

Stocks of test materials that are **Protein** or **Poly-peptide** ligands, or **Antibodies**, should be solvated in aqueous buffered solutions with carrier protein (*e.g.*, PBS + 0.1% BSA).

For **384-well format assays** the user will choose to dilute master stocks using one of two alternative methods. The selection of dispensing method to be used will be dictated by the type of instrument that will be used. This Technical Manual provides detailed protocols for each of these two alternative methods:

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

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

and,

b.) **Acoustic transfer** or **Pin-based dispensing of nL volumes** of test compounds into assay wells (protocol is presented in blue text). Use CSM (for proteinaceous test samples) or DMSO for small molecule test samples) to make a series of **1,000x-concentrated** test compound stocks that correspond to each desired final assay concentration, as described in *Step 2b* of the **Assay Protocol**.

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

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

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

▪ **Assay Scheme** ▪

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

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

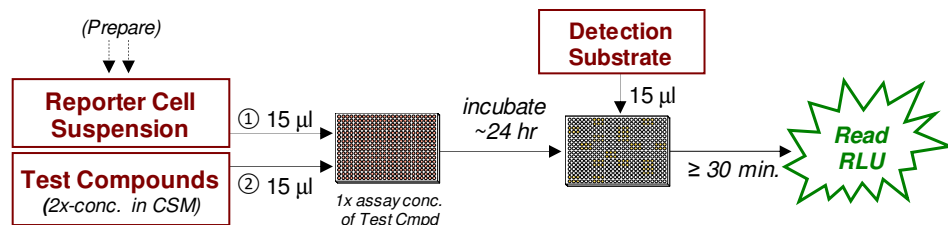
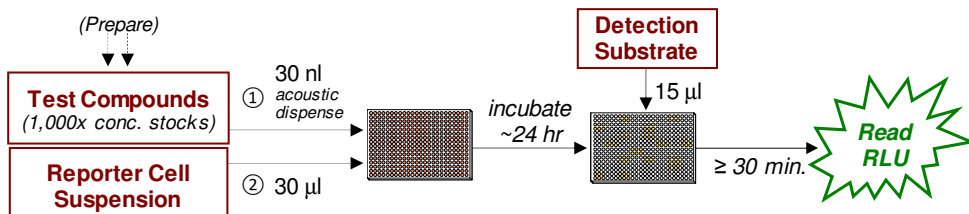


Figure 1b. Assay workflow if using **acoustic** dispensing of test compounds.



▪ Assay Performance ▪

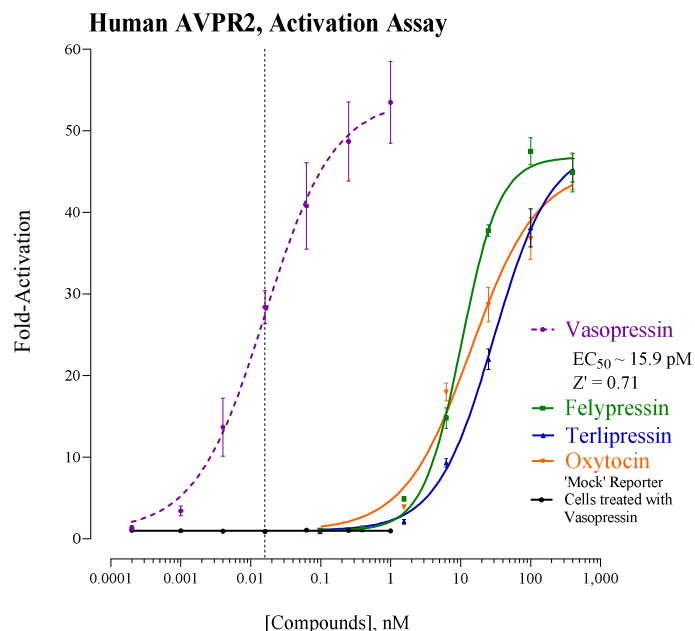


Figure 2. Activation of AVPR2. Reporter cells were treated with the reference activators polypeptides Vasopressin (provided), Felypressin, Terlipressin and Oxytocin. The absence of signal in Vasopressin treated 'Mock' cells (which contain the CRE-Luc reporter vector, but do *not* express AVPR2) confirms that the observed ligand-dependent response is specific to AVPR2 activation.

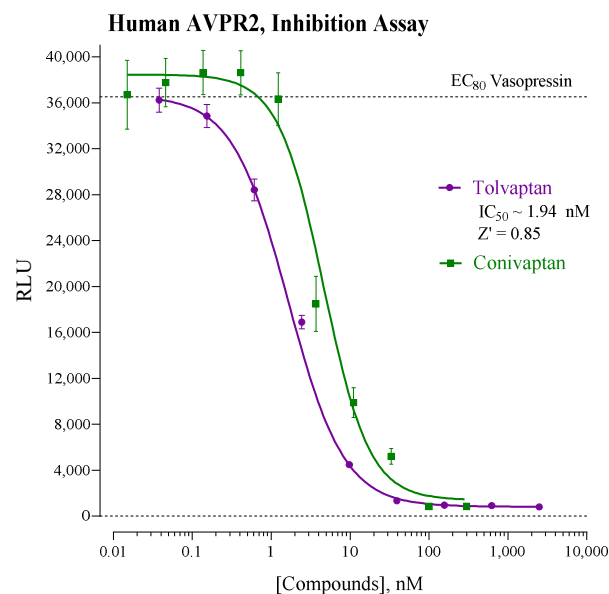


Figure 3. Inhibition of AVPR2. Reporter cells were co-treated with an EC_{80} concentration of the reference activator Vasopressin and varying concentrations of the AVPR2 selective inhibitor Tolvaptan, and the non-selective inhibitor Conivaptan. INDIGO's Live Cell Multiplex (LCM) Assay confirmed that no treatment concentrations were cytotoxic (data not shown).

For both the activation assay (Figure 2) and inhibition assay (Figure 3), luminescence was quantified and values of average ($n = 4$) RLU, standard deviation (SD), Fold-Activation, and Z' ¹¹ values were calculated. The least-squares method of non-linear regression was used to plot activity changes vs. Log_{10} [Compound, nM], and EC_{50} / IC_{50} values were determined, using GraphPad Prism software. All chemicals were procured from MedChem Express (Monmouth Junction, NJ), except for Tolvaptan, which was procured from ChemScene (Monmouth Junction, NJ).

II. Product Components & Storage Conditions

This Human AVPR2 Reporter Assay kit contains materials to perform assays in a single 384-well assay plate.

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

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

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

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

<u>Kit Components</u>	<u>Amount</u>	<u>Storage Temp.</u>
▪ AVPR2 Reporter Cells	1 x 1.0 mL	-80°C
▪ Cell Recovery Medium (CRM)	1 x 7.0 mL	-20°C
▪ Compound Screening Medium (CSM)	1 x 45 mL	-20°C
▪ Vasopressin, 1.0 µM (in PBS-0.1%BSA) reference agonist for AVPR2	1 x 60 µL	-20°C
▪ Detection Substrate (Note: contains DTT)	1 x 7.8 mL	-80°C
▪ 384-well assay plate (white, sterile, cell-culture ready)	1	ambient

III. Materials to be Supplied by the User

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

DAY 1

- dry ice container
- cell culture-rated laminar flow hood.
- mammalian cell culture incubator (37°C, ≥ 70% humidity, 5% CO₂)
- 37°C water bath.
- 70% alcohol wipes
- 8-channel electronic, repeat-dispensing pipettes & tips suitable for dispensing 15 µL.
- disposable media basins, sterile.
- sterile multi-channel media basins *or* deep-well plates, *or* appropriate similar vessel for generating dilution series of reference compound(s) and test compound(s).
- *Optional*: antagonist reference compound (*e.g.*, Figure 3)

DAY 2 plate-reading luminometer.

IV. Assay Protocol

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

▪ A word about Antagonist-mode assay setup ▪

Receptor inhibition assays expose the Reporter Cells to a constant, sub-maximal concentration (typically between EC_{50} – EC_{85}) of a known agonist AND varying concentrations of the test compound(s) to be evaluated for antagonist activity. This assay kit includes a 1.0 μ M stock of Vasopressin, a potent agonist of AVPR2 that may be used to set up antagonist-mode assays. 0.08 nM Vasopressin typically approximates EC_{70-80} in this 384 well -format assay. Hence, it is a suitable *final assay concentration* of agonist to be used when screening test compounds for inhibitory activity.

Adding the challenge agonist vasopressin to the bulk suspension of Reporter Cells (*i.e.*, prior to dispensing into assay wells) is the most efficient and precise method of setting up antagonist assays, and it is the method presented in *Step 5b* of the protocol when performing tip-based dispensing, and *Step 6b of the protocol when using an acoustic transfer device to dispense test compounds*.

Note that when using a *tip-based instrument* for the dispensing of 2x-concentrated test compounds the cell suspension must also be supplemented with a **2x**-concentration (0.16 nM) of the challenge agonist vasopressin.

When using an *acoustic transfer* device for the dispensing of 1,000x-concentrated test compounds the cell suspension should be supplemented with a **1x**-concentration (~ 0.08 nM) of the challenge agonist vasopressin.

DAY 1 Assay Protocol:

All steps must be performed using proper aseptic technique.

1.) Remove Cell Recovery Medium (CRM) and Compound Screening Medium (CSM) from freezer storage and thaw in a 37°C water bath.

2.) Prepare dilutions of treatment compounds: Prepare Test Compound treatment media for *Agonist*- or *Antagonist-mode* screens. NOTE that both the test and reference samples will be prepared differently depending on the researcher's choice to use tip-based dispensing or *acoustic dispensing*. Regardless of the method, the total DMSO carried over into assay wells should not exceed 0.4%.

a. *Tip dispensing method:* In *Step 6*, 15 μ l / well of the prepared treatment media is added into assay wells that have been pre-dispensed with 15 μ l /well of Reporter Cells. Hence, to achieve the desired *final* assay concentrations one must prepare treatment media with a **2x**-concentration of the test and reference material(s). Use **CSM** to prepare the appropriate dilution series. Plan dilution volumes carefully; this assay kit provides 45 ml of CSM.

b. *Acoustic dispensing method:* In *Step 6*, 30 nl / well of **1,000x**-concentrated test compound solutions are added to the assay plate using an acoustic transfer device.

**NOTE:* Stocks of test samples that are small-molecules chemicals / drugs are typically prepared in DMSO and, for acoustic transfer dispensing, we recommend that DMSO (not CSM) is used as the diluent to generate the desired series of 1,000x-treatment concentrations. However, stocks of test samples that are solvated in aqueous solution, such as protein ligands and antibodies, should be further diluted using CSM (not DMSO).

Preparing the positive control: This assay kit includes a 1,000x-concentrated stock of the poly-peptide vasopressin, 1.0 μ M prepared in PBS+0.1% BSA. The following 7-point treatment series, with concentrations presented in 4-fold decrements, provides a complete dose-response: 1.00, 0.250, 0.0625, 0.0156, 0.00391, 0.000977, and 0.000244 nM. Always include 'no treatment' (or 'vehicle') control wells.

APPENDIX 1a provides an example for generating this dilution series to be used when *tip-based dispensing* of test samples prepared in CSM (15 μ l / well).

(continued...)

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

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

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

Second, retrieve **Reporter Cells** from -80°C storage and immerse in dry ice to transport the tube to a laminar flow hood. Perform a *rapid thaw* of the frozen cells by transferring a **6.5 ml** volume of 37°C CRM into the tube of frozen cells. Recap the tube of Reporter Cells and place it in a 37°C water bath for 5 - 10 minutes. The resulting volume of cell suspension will be 7.5 ml.

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

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

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

~ or ~

b. for Antagonist-mode assays: First supplement the bulk volume of Reporter Cell suspension with a 2x-concentration of the challenge agonist Vasopressin (refer to "A word about antagonist-mode assay setup", pg. 8). Dispense **15 µl / well** of cell suspension into the assay plate.

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

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

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

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

Second, retrieve **Reporter Cells** from -80°C storage and immerse in dry ice to transport the tube to a laminar flow hood. Perform a *rapid thaw* of the frozen cells by transferring a **6.5 ml** volume of 37°C CRM into the tube of frozen cells. Recap the tube of cells and place it in a 37°C water bath for 5 - 10 minutes. The resulting volume of cell suspension will be 7.5 ml.

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

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

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

~ or ~

b. for Antagonist-mode assays: First supplement the bulk volume of Reporter Cell suspension with the challenge agonist Vasopressin to achieve an EC₅₀ – EC₈₀ concentration (refer to "A word about antagonist-mode assay setup", pg. 8). Then dispense **30 µl / well** of the supplemented cell suspension into the assay plate that has been pre-dispensed with test compounds.

(continued ...)

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

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

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

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

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

DAY 2 Assay Protocol:

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

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

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

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

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

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

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

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

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

NOTE: the 30-minute rest period allows the luminescence signal to achieve stable emission output.

- 13.) Quantify luminescence.

- 14.) Data analyses.

V. Related Products

<i>Product No.</i>	<i>Product Descriptions</i>
Human AVPR2 Assay Products	
IB37201	Human AVPR2 Reporter Assay System 1x 96-well format assay
IB37202	Human AVPR2 Reporter Assay System 1x 384-well format assays
Bulk volumes of assay reagents may be custom manufactured to accommodate any scale of HTS. Please Inquire.	
Human AVPR1B Assay Products	
IB37101	Human AVPR1B Reporter Assay System 1x 96-well format assay
IB37102	Human AVPR1B Reporter Assay System 1x 384-well format assays
Human AVPR1A Assay Products	
IB37001	Human AVPR1A Reporter Assay System 1x 96-well format assay
IB37002	Human AVPR1A Reporter Assay System 1x 384-well format assays
Human OXTR Assay Products	
IB35001	Human OXTR Reporter Assay System 1x 96-well format assay
IB35002	Human OXTR Reporter Assay System 1x 384-well format assays
LIVE Cell Multiplex (LCM) Assay	
LCM-01	Reagent volumes sufficient to perform 96 Live Cell Assays
LCM-05	Reagent in 5x bulk volume to perform 480 Live Cell Assays contained in 5 x 96-well assay plates
LCM-10	Reagent in 10x bulk volume to perform 960 Live Cell Assays contained in 10 x 96-well assay plates

INDIGlo Luciferase Detection Reagent	
LDR-10, -25, -50, -500	INDIGlo Luciferase Detection Reagents 10 mL, 25 mL, 50 mL, and 500 mL; custom volumes available

Please refer to INDIGO Biosciences website for updated product offerings.

www.indigobiosciences.com

VI. Citations

- ¹ Kimura T., *et. al* (1992) Structure and expression of a human oxytocin receptor. *Nature*. 14:356 (6369): 526-9.
 - ² Thibonnier M, *et. al* (2002) Chapter 14 Molecular pharmacology and modeling of vasopressin receptors. *Prog Brain Res* 139. 179-196.
 - ³ Brownstein MJ *et. al* (1980) Synthesis, transport, and release of posterior pituitary hormones. *Science*: 207: 373-378.
 - ⁴ Jard SBoone M, *et. al* (2008) Physiology and pathophysiology of the vasopressin-regulated renal water reabsorption. *Pflugers Arch* 456 (6) :1005-1024.
 - ⁵ Brown D, *et. al* (1988) Vasopressin stimulates endocytosis in kidney collecting duct principal cells. *Eur J Cell Bio* 46 (2): 336-341.
 - ⁶ Vukicevic T, *et. al* (2016) The trafficking of the Water Channel Aquaporin-2 in Renal Principal Cells-a Potential Target for Pharmacological Intervention in Cardiovascular Diseases. *Front Pharmacol* Feb 11:7:23.
 - ⁷ Ishikawa S (2000) Urinary excretion of aquaporin-2 in pathological states of water metabolism. *Ann Med*: Mar: 32(2): 90-93.
 - ⁸ Svensson PJ, *et. al* (2014) Desmopressin in treatment of haematological disorders and in prevention of surgical bleeding. *Blood Rev*: May 28 (3): 95-102.
 - ⁹ Sobol NT, *et. al* (2021) Anticancer activity of repurposed hemostatic agent desmopressin on AVPR2-expressing human osteosarcoma. *Exp Ther Med*: Jun 21 (6): 566.
 - ¹⁰ Mao L, *et. al* (2023) AVPR2 is a potential prognostic biomarker and correlated with immune infiltration in head and neck squamous cell carcinoma. *BMC Med Genetics*: Mar 30:16 (1): 67-83.
 - ¹¹ Zhang JH, *et al.* (1999) A Simple Statistical Parameter for Use in Evaluation and Validation of High Throughput Screening Assays. *J Biomol Screen*: 4(2), 67-73.
- $$Z' = 1 - [3 * (SD^{Ref\ EC100} + SD^{Untreated}) / (RLU^{Ref\ EC100} - RLU^{Untreated})]$$

VII. Limited Use Disclosures

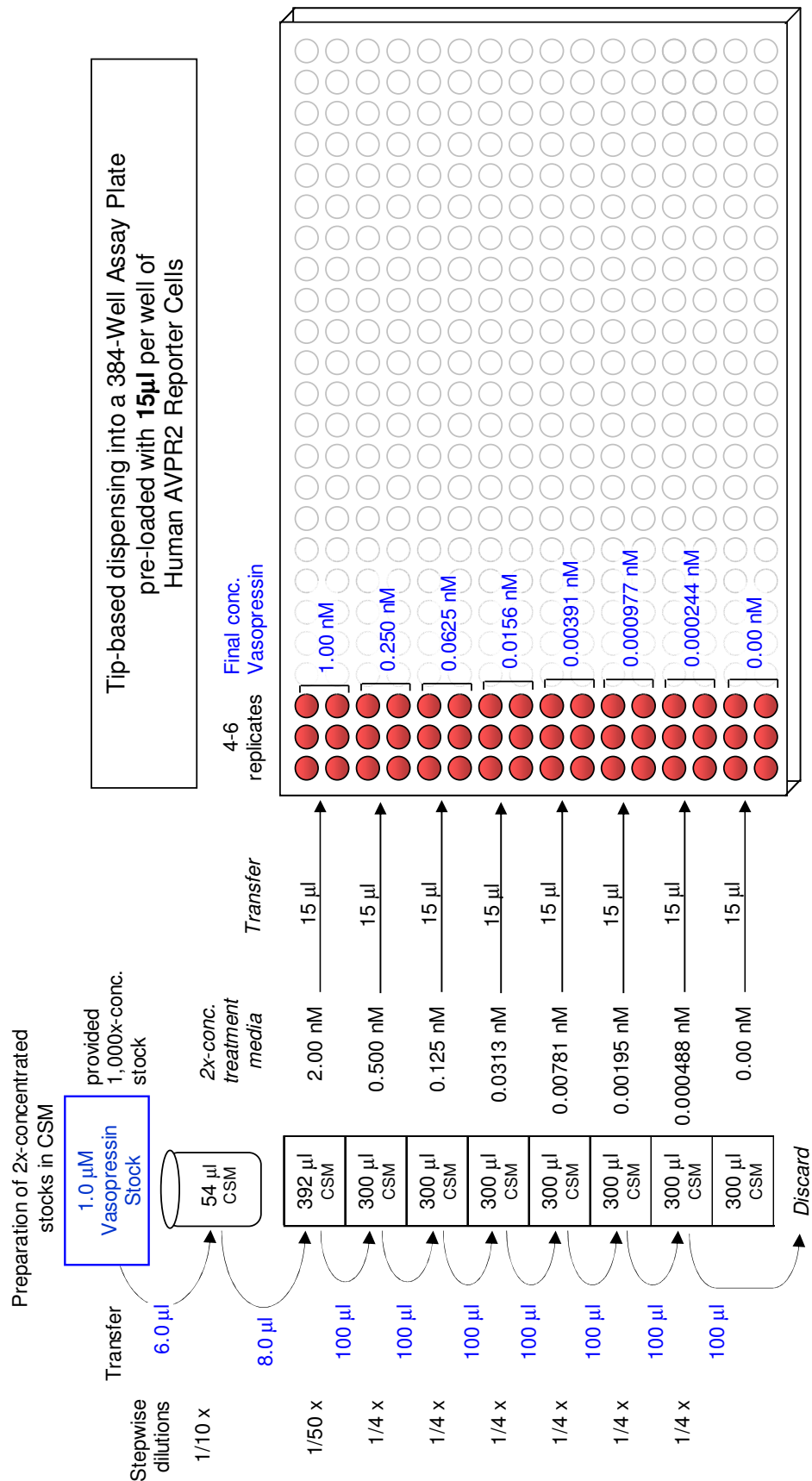
Products offered by INDIGO Biosciences, Inc. are for RESEARCH PURPOSES ONLY – not for therapeutic, diagnostic, or contact use in humans or animals.

“CryoMite” is a Trademark TM of INDIGO Biosciences, Inc. (State College, PA, USA).

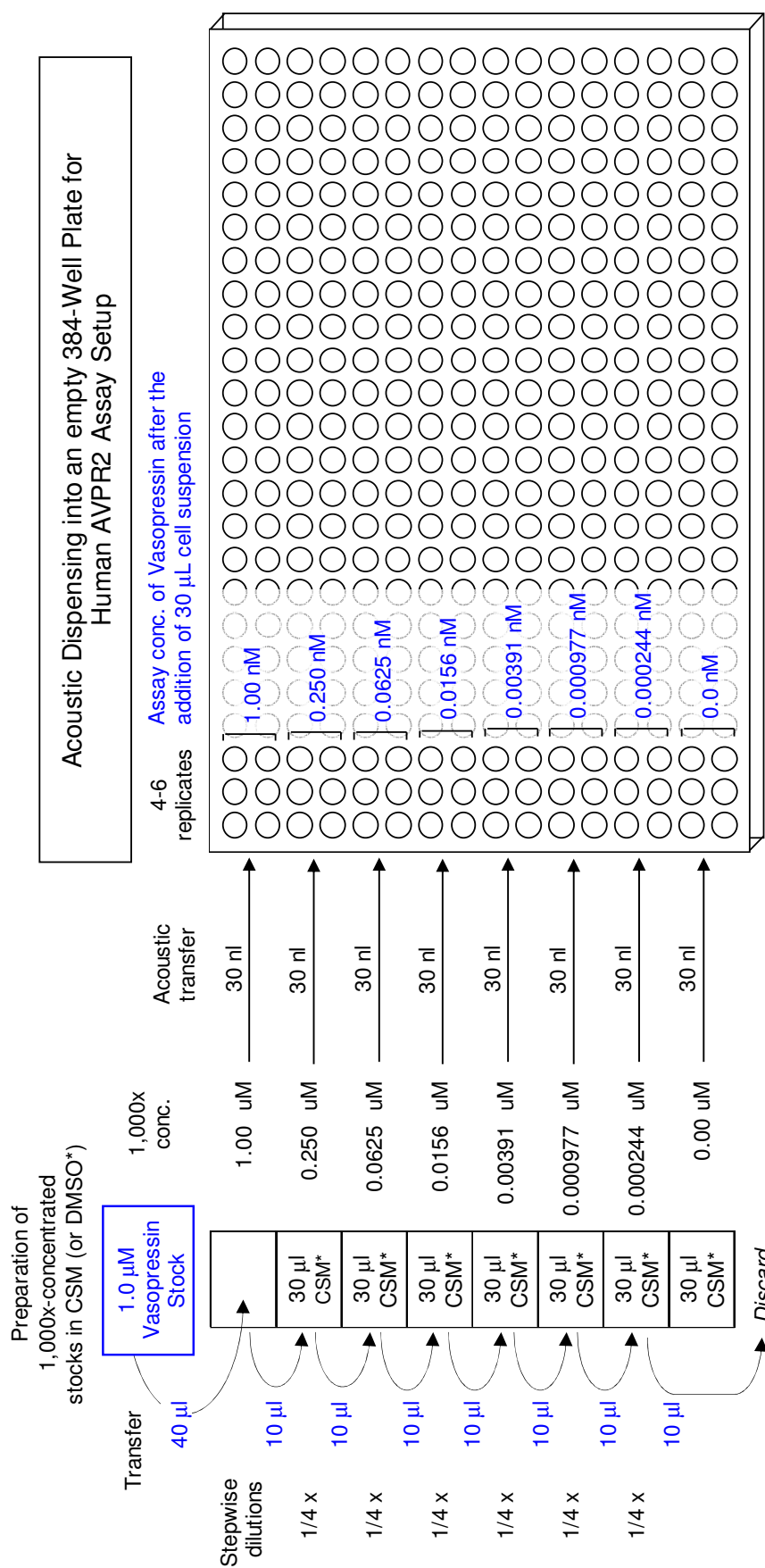
Product prices, availability, specifications, claims and technical protocols are subject to change without prior notice. The printed Technical Manual provided in the kit box will always be the most recently updated version available.

Copyright © INDIGO Biosciences, Inc. (State College, PA, USA). All rights reserved.

APPENDIX 1a for tip-based dispensing. Example scheme for the serial dilution of the reference agonist vasopressin into CSM to generate **2x-concentrated** treatment media. A *tip-based* instrument is used to dispense 15 µl / well into an assay plate that has been *pre-dispensed* with 15 µl / well of AVPR2 Reporter Cells suspension.



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



* Stocks of protein ligands, such as Vasopressin in the above example, that are solvated in aqueous solution should be further diluted using CSM. However, stocks of test materials that are originally solvated in DMSO, as is typical for small molecule chemicals, should be further diluted using DMSO.