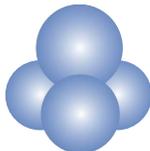


# Product Specification Sheet

<b>Product Name</b>	<b>AFF2 Knockout Human Induced Pluripotent Stem Cells (Episomal, HFF)</b>
<b>Description</b>	Footprint-free human iPS (induced pluripotent stem) cell line with AF4/FMR2 Family Member 2 (AFF2) deficiency was derived using genome editing method to introduce a deletion and a frame shift in the AFF2 gene. Sequencing results confirmed that this isogenic iPSC line has a stable homozygous 94 bp deletion in the exon 8 of AFF2 gene. When cultured under standard human ES cell culture conditions, the morphology of human iPS cells is identical to that of human ES cells. The cells also express the pluripotency markers TRA-1-60, SSEA-3 and Oct4, and demonstrate strong endogenous alkaline phosphatase activity.
<b>Catalog Number</b>	iPS61
<b>Size</b>	> 5x10 <sup>5</sup> cells/vial
<b>Shipping</b>	Dry ice
<b>Storage and Stability</b>	Store in vapor phase of liquid nitrogen immediately upon receipt. This product is stable for 6 months when stored as directed.
<b>Quality Control</b>	Human iPS cells were grown in feeder free conditions with mTeSR1 medium. Each lot of human iPS cells is tested for growth and viability following recovery from cryopreservation. In addition, each lot is tested for expression of TRA-1-60 and Oct4, as well as the activity of alkaline phosphatase.
<b>Safety Precaution</b>	<b>Alstem highly recommends the use of protective gloves, a lab coat, and a full-face mask to be always worn when handling frozen vials.</b> It is important to note that some liquid nitrogen can leak into the vials when submersed in liquid nitrogen. Upon thawing, the liquid nitrogen returns to the gas phase, resulting in excessive pressure within the vial that can cause the vial to explode or expel the cap with dangerous force.
<b>Restricted Use</b>	For Research Use Only. Not for use in diagnostic or therapeutic procedures.



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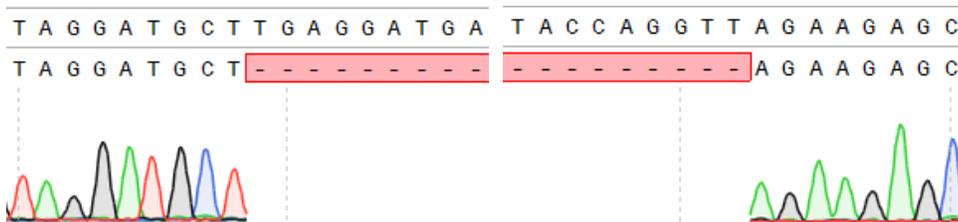
## Overview

Amyotrophic lateral sclerosis (ALS) and frontotemporal dementia (FTD) are two devastating neurodegenerative disorders lacking effective treatments. ALS, known as Lou Gehrig's disease, causes progressive muscle weakness and atrophy. FTD is characterized by the progressive decline of cognition, behavior changes, and/or language impairment. Previous studies demonstrated that one of the most common genetic causes of ALS and FTD is the expansion of GGG GCC ( $G_4C_2$ ) repeat in the first intron of C9ORF72 which leads to partial loss of C9ORF72 function. A recent genetic study discovered Lilli, the only *Drosophila* homolog of human AFF2 gene, as a strong transcriptional suppressor of GC-rich sequences. Further studies argued that knockout of AFF2 in iPS cells reduced the disease-causing proteins generated by GC-rich repeats and rescued disease phenotypes in human neurons.

Alstem's footprint-free human iPS (induced pluripotent stem) cell line (cat# iPS61) carries AFF2 KO mutation in both alleles. Sequencing results confirmed that this isogenic iPSC line has a stable homozygous 94 bp deletion in the exon 8 of AFF2 gene. The morphology of this human iPSC cell line is identical to that of human ES cells. The cells also express the pluripotency markers TRA-1-60, SSEA-3 and Oct4, and demonstrate strong endogenous alkaline phosphatase activity.

Alstem's human iPS is good model for studying ALS-related pathologies in neurons associated with AFF2, as well as for drug discovery.

### Data Analysis



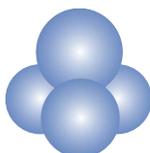
**Figure 1.** The sequencing results showed this iPSC line (cat# iPS61) has a 94-bp deletion in the exon 8 of AFF2 gene in both alleles.

## Protocol

### Human iPS Cell Culture

#### OVERVIEW

This protocol can be used for culturing human iPS cells. Footprint-free human iPS cells were generated by transient introduction of episomal plasmids encoding the human transcription factors into human peripheral blood mononuclear cells. The cells were derived using morphological selection criteria without the use of



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fluorescent markers or drug selection. When cultured under standard human ES cell culture conditions, the morphology of footprint-free human iPS cells is identical to that of human ES cells. The cells express the pluripotency markers TRA-1-60 and Oct4, and they demonstrate a strong endogenous AP activity.

## PROCEDURE

### I. Feeder free culture conditions

#### Preparation of feeder-free medium

1. Thaw mTeSR1 5X Supplement (Cat.no. 05850, STEMCELL Technologies) at room temperature or overnight at 4°C.
2. Add the 100 mL of thawed 5X Supplement to 400 mL Basal Medium for a total volume of 500 mL aseptically. Mix well and filter through a 0.2 µm, low-protein binding filter, if desired.
3. Aliquot into appropriate amount according to usage and store the aliquots at 4°C.

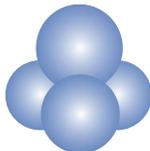
#### Coating plates with Matrigel

Matrigel (Cat.no. 354277, BD) should be aliquoted and stored at -80°C for long-term use.

1. Thaw matrigel on ice until liquid. Dilute matrigel 1:30 to 1:50 with pre-chilled KO DMEM/F12.
2. Immediately use the diluted matrigel solution to coat tissue culture-treated plates. For a 6-well plate, use 1 mL of diluted matrigel solution per well, and swirl the plate to spread the matrigel solution evenly across the surface.
3. Let the coated plate stand for 2 h at 37°C or overnight at 4°C. If plate has been stored at 4°C, allow the plate to incubate at 37°C for at least 30 minutes before removing the matrigel solution.

#### Thaw cryopreserved human iPS cells

1. Quickly thaw the human iPS cells in a 37°C water bath by gently shaking the cryovial continuously until half thawed. Remove the cryovial from the water bath and spray with 70% ethanol to sterilize.
2. Transfer the contents of the cryovial to a 15 mL conical tube. Add 5 mL warm mTeSR1 dropwise to the tube, gently mixing as the medium is added.
3. Centrifuge cells at 200 x g for 5 minutes at room temperature.
4. After centrifugation, aspirate the supernatant from 15 mL tube. Gently resuspend the cell pellet in 2 mL mTeSR1 with 5 µM ROCK inhibitor, taking care to maintain the cells as small cell clumps.
5. Remove the matrigel solution from a coated tissue culture 6-well plate. Transfer the medium containing the cell clumps to the matrigel coated 6-well plate.
6. Place the plate into the 37°C incubator and move the plate in quick side to side, forward to back motions to evenly distribute the cell clumps within the wells. Culture the cells at 37°C, with 5% CO<sub>2</sub> and 95% humidity.
7. Change medium daily. Check for undifferentiated colonies that are ready to passage when colonies are big enough (approximately 7-10 days after thawing).



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### **Passaging human iPS cells grown under feeder-free conditions**

1. Use a microscope to identify regions of differentiation. Mark the differentiated colonies using lens marker on the bottom of the plate.
2. Remove regions of differentiation by scraping with a pipette tip or by aspiration.
3. Aspirate medium from the human iPS cell culture and rinse with DPBS (2 mL/well).
4. Add 1 mL per well of EZStem Enzyme-Free Stem Cell Dissociation Solution (cat. no. M100, ALSTEM) and incubate at 37°C for 2-3 minutes.  
Note: Addition of 0.5 mL per well of accutase (Cat.no. SCR005, Millipore, diluted 1:1 with DPBS before use) and incubate at 37°C for 1 minute can also be used to detach the cells from the plate.
5. Remove EZStem Enzyme-Free Stem Cell Dissociation Solution or accutase, gently rinse each well 2 - 3 times with 2 mL of DMEM/F-12 per well and transfer the detached cell aggregates to a 15 mL conical tube.
6. Add 2 mL/well mTeSR1 and scrape colonies off with a cell lifter. Transfer the detached cell aggregates to a 15 mL conical tube.
7. Rinse the well with an additional 2 mL mTeSR1 to collect any remaining aggregates. Add the remaining cell suspension to the 15 mL tube.
8. Centrifuge the 15 mL tube containing the aggregates at 200 x *g* for 5 minutes at room temperature.
9. Aspirate the supernatant. Resuspend pellet in mTeSR1 containing 5 µM ROCK inhibitor by gently pipetting and ensure that cells are maintained as aggregates.
10. Plate the human iPS cell aggregates with mTeSR1 in a new plate coated with matrigel. (Remove matrigel solution before plating). *If the colonies are at an optimal density, the cells can be split every 5 - 7 days using 1:3 to 1:6 ratios.*
11. Place the plate into the 37°C incubator and move the plate in quick side to side, forward to back motions to evenly distribute the cell clumps within the wells. Culture the cells at 37°C, with 5% CO<sub>2</sub> and 95% humidity.
12. Change cell culture medium daily.

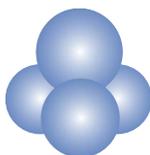
### **Cryopreserving human iPS cells**

1. Prepare EZStem freezing medium (Cat.no. M050, ALSTEM) on ice.
2. Perform steps 1-8 from **Passaging human iPS cells grown under feeder-free conditions**
3. Gently aspirate the supernatant and loosen the cell pellet by tapping the bottom of the tube.
4. Gently resuspend the pellet in freezing medium, taking care to leave the clumps larger than that would normally be done for passaging.
5. Transfer 1 mL of clumps in freezing medium into each labeled cryogenic vial.
6. Place vials into a freezing container and place the container at -80°C overnight.
7. Transfer to a liquid nitrogen tank next day.

## **II. Feeder-dependent culture conditions**

### **Preparation of human ES medium**

Knockout DMEM/F12 containing 20% knockout serum replacement, 2mM glutamine, 0.1 mM nonessential amino acids, 0.1 mM 2-mercaptoethanol, 10 ng/ml bFGF, and 50 U and 50 µg/ ml penicillin and streptomycin.



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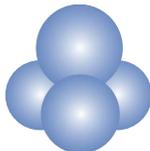
### Thawing cryopreserved human iPS cells

To ensure the highest level of viability, be sure to warm the medium to 37°C before using it on the cells. Due to the low survival rate of cryopreserved human iPS cells, the recovery is expected to take at least one week.

1. Quickly thaw the human iPS cells in a 37°C water bath by gently shaking the cryovial continuously until half thawed. Remove the cryovial from the water bath and spray with 70% ethanol to sterilize.
2. Transfer the contents of the cryovial to a 15 mL conical tube. Add 5 mL warm human ES medium dropwise to the tube, gently mixing as the medium is added.
3. Centrifuge cells at 200 x g for 5 minutes at room temperature.
4. During centrifugation, remove MEF medium from the feeder cell plates, and wash the wells twice with Knockout DMEM/F12. Then, add 1 ml of human ES Medium with 5 µM ROCK inhibitor (Y-27632, Stemgent) to one well of the 6-well plate.
5. After centrifugation, aspirate the medium from 15 mL tube. Gently resuspend the cell pellet in 1 mL fresh human ES medium containing 5 µM ROCK inhibitor (Y-27632), taking care to maintain the cells as small cell clumps.
6. Transfer the medium containing the cell clumps to one well of 6-well plate with MEF feeder cells.
7. Place the plate into the 37°C incubator and move the plate in quick side to side, forward to back motions to evenly distribute the clumps within the wells. Culture the cells at 37°C, with 5% CO<sub>2</sub> and 95% humidity.
8. Change medium daily. Check for undifferentiated colonies that are ready to passage when colonies are big enough (approximately 7-10 days after thawing).

### Passaging human iPS cells grown under feeder-dependent conditions

1. Aspirate the medium and wash the cells twice with 1 ml of DPBS.
  2. Remove DPBS completely. Add 0.5 ml of Accutase (Cat.no. SCR005, Millipore, diluted 1:1 with DPBS before use) and incubate for 1-2 min at 37°C. Then aspirate the Accutase.
  3. Tap the bottom of the plate to dislodge the cells from the plate.
  4. Add 1 ml of DMEM/F12 to the plate and carefully wash the feeder cells, and aspirate the medium. Repeat this step to wash the cells twice
  5. Add 1 ml of human ES medium containing 5 µM ROCK inhibitor to the plate and suspend the cell colonies by gently pipetting up and down. It is important not to break up the colonies into single cells.
  6. Remove a plate of MEF feeder cells from the incubator. Aspirate the MEF medium. Wash once with KO DMEM/F12 medium.
  7. Distribute 0.2 – 0.3 ml of the human iPS cell suspension to each well of a 6-well plate.
  8. Add 1 mL human ES medium to the original well and scrape colonies off with a cell lifter.
  9. Distribute 0.2 – 0.3 ml of the human iPS cell suspension to each well of a 6-well plate.
  10. Add human ES medium with ROCK inhibitor to a final volume of 2 ml per well. Once the iPS cells are plated, gently swirl the plate back-and-forth and side-to-side and incubate at 37°C.
- Note:** *If the colonies are at an optimal density, the cells can be split every 5 - 7 days using 1:3 to 1:6 ratios.*
11. After 24 hours, remove the media and replace with human ES media (without ROCK inhibitor).



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12. The human ES media must be changed every day and human iPS cells subcultured every 5-7 days. Track the passage number of the cells.

### **Cryopreserving human iPS cells**

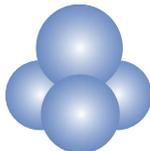
1. Prepare EZStem freezing medium (Cat.no. M050, ALSTEM) on ice.
2. Perform steps 1-6 from **Passaging human iPS cells grown under feeder-dependent conditions**.
3. Transfer the detached cell aggregates to a 15 mL conical tube.
4. Add 1 mL human ES medium and scrape colonies off with a cell lifter.
5. Transfer the cell suspension to the 15 mL conical tube.
6. Centrifuge the 15 mL tube containing the aggregates at 200 x *g* for 5 minutes at room temperature.
7. Gently aspirate the supernatant and loosen the cell pellet by tapping the bottom of the tube.
8. Gently resuspend the pellet in freezing medium, taking care to leave the clumps larger than that would normally be done for passaging.
9. Transfer 1 mL of clumps in freezing medium into each labeled cryogenic vial.
10. Place vials into an isopropanol freezing container and place the container at -80°C overnight.
11. Transfer to a liquid nitrogen tank next day.

### **IMPORTANT NOTICE**

Store the vials at vapor phase of liquid nitrogen immediately upon receipt.

### **WARNING**

**Do not use cryogenic vials for storage in the liquid phase of liquid nitrogen. Such use may cause entrapment of liquid nitrogen inside the vial and lead to pressure buildup resulting in possible explosion or biohazard release. Use appropriate safety procedures which are outlined by the ATCC when handling and disposing of vials. ALSTEM highly recommends that the use of appropriate PPE: protective gloves, lab coat clothing, and a full face mask to be always be worn when handling frozen vials.**



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