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Data Sheet

PAGE 1/3

BCRJ Code: 0284

Cell Line: MV3

Species: Homo sapiens

Vulgar Name: Human

Tissue: Lymphnodes

Morphology: Polymorphic

Disease: Melanoma

Growth Properties: Adherent

Male Sex:

Age/Ethinicity: 76 Year /

Obtained from lymphatic nodule metastasis of a 76 years old patient whom **Derivation:** suffered of amelanotic primary coetaneous melanoma in the chin region

(nodular type, Clark IV).

Tumor Formation:: YES, in nude mice

Products: Expression of transferrin receptor, EGF receptor, ICAM-1, integrin alfa 2 beta 1.

Biosafety: 1

To select the highly tumorigenic melanoma human cells and metastatic in nude mice, the cells extracted of metastasis found at the patient's regional lymphatic **Addtional Info:** nodules were subcutaneously xenotransplanted in nude mice. After three splits

in nude mice, the cell line MV3 was isolated.

Dulbecco's Modified Eagle's Medium (DMEM) with 2 mM L-glutamine and 10% **Culture Medium:**

of fetal bovine serum.







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Data Sheet

PAGE 2/3

Subculturing:

Remove and discard culture medium. Briefly rinse the cell layer with PBS without calcium and magnesium to remove all traces of serum that contains trypsin inhibitor. Add 2.0 to 3.0 mL of Trypsin-EDTA solution to flask and observe cells under an inverted microscope until cell layer is dispersed (usually within 5 to 15 minutes). Note: To avoid clumping do not agitate the cells by hitting or shaking the flask while waiting for the cells to detach. Cells that are difficult to detach may be placed at 37°C to facilitate dispersal. Add 6.0 to 8.0 mL of complete growth medium and aspirate cells by gently pipetting. Add appropriate aliquots of the cell suspension to new culture vessels. Incubate cultures at 37°C. NOTE: For more information on enzymatic dissociation and subculturing of cell lines consult Chapter 12 in Culture of Animal Cells, a manual of Basic Technique by R. Ian Freshney, 6th edition, published by Alan R. Liss, N.Y., 2010.

Subculturing Medium Renewal:

Every 2 to 3 days

Subculturing
Subcultivation Ratio:

1:6 to 1:8

Culture Conditions:

Atmosphere: air, 95%; carbon dioxide (CO2), 5% Temperature: 37°C

Cryopreservation:

95% FBS + 5% DMSO (Dimethyl sulfoxide)







Banco de Células do Rio de Janeiro

Data Sheet

PAGE 3/3

Thawing Frozen Cells:

always be used and a full face mask always be worn when handling frozen vials. It is important to note that some vials leak when submersed in liquid nitrogen and will slowly fill with liquid nitrogen. Upon thawing, the conversion of the liquid nitrogen back to its gas phase may result in the vessel exploding or blowing off its cap with dangerous force creating flying debris. 1. Thaw the vial by gentle agitation in a 37°C water bath. To reduce the possibility of contamination, keep the Oring and cap out of the water. Thawing should be rapid (approximately 2 minutes). 2. Remove the vial from the water bath as soon as the contents are thawed, and decontaminate by dipping in or spraying with 70% ethanol. All of the operations from this point on should be carried out under strict aseptic conditions. 3. For cells that are sensitive to DMSO is recommended that the cryoprotective agent be removed immediately. Transfer the vial contents to a centrifuge tube containing 9.0 mL complete culture medium and spin at approximately 125 x g for 5 to 7 minutes. 4.Discard the supernatant and Resuspend cell pellet with the recommended complete medium (see the specific batch information for the culture recommended dilution ratio). 5. Incubate the culture in a appropriate atmosphere and temperature (see "Culture Conditions" for this cell line). NOTE: It is important to avoid excessive alkalinity of the medium during recovery of the cells. It is suggested that, prior to the addition of the vial contents, the culture vessel containing the growth medium be placed into the incubator for at least 15 minutes to allow the medium to reach its normal pH (7.0 to 7.6).

SAFETY PRECAUTION: Is highly recommend that protective gloves and clothing

References:

Establishment and characterization of a human melanoma cell line (MV-3) which is highly metastatic in nude mice. Van Muijen GN, Jansen KF, Cornelissen IM, Smeets DF, Beck JL, Ruiter DJ. Int J Cancer. 1991 Apr 22; 48(1):85-91.

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