

## Multispectral Imaging of Pancreatic Mixed Acinar-neuroendocrine-ductal Carcinoma with Triple-immunoenzyme Staining

Hisashi Yoshimura<sup>1,2</sup>, Yoko Matsuda<sup>3</sup>, Akira Matsushita<sup>4</sup>,  
Yoshiharu Nakamura<sup>4</sup>, Eiji Uchida<sup>4</sup> and Toshiyuki Ishiwata<sup>2</sup>

<sup>1</sup>Division of Physiological Pathology, Department of Applied Science, School of Veterinary Nursing and Technology,  
Nippon Veterinary and Life Science University

<sup>2</sup>Department of Integrated Diagnostic Pathology, Graduate School of Medicine, Nippon Medical School

<sup>3</sup>Department of Pathology, Tokyo Metropolitan Geriatric Hospital and Institute of Gerontology

<sup>4</sup>Department of Gastrointestinal and Hepato-Biliary-Pancreatic Surgery, Graduate School of Medicine, Nippon Medical School

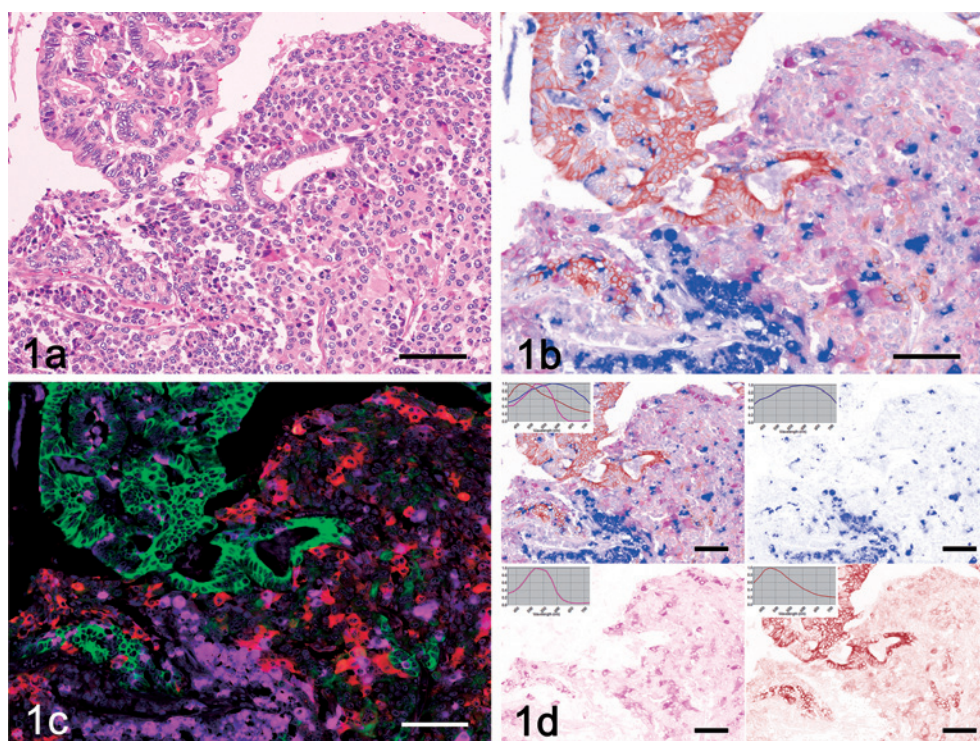


Fig. 1

Multiple immunoenzyme staining is a useful technique for visualizing the localization of multiple antigens using different chromogens on a tissue section. However, when the multiple antigens localize in the same cells, the mixed colors are indistinguishable to the human eye and color red-green-blue cameras. Multispectral imaging is a new technique that can solve this problem<sup>1,2</sup>. Pancreatic mixed acinar-neuroendocrine-ductal carcinoma is an extremely rare neoplasm consisting of 3 cell components with acinar, neuroendocrine, and ductal differentiation (Fig. 1a)<sup>3</sup>. Figure 1b shows a pseudocolored composite image acquired from a specimen stained with trypsin (acinar marker, blue), synaptophysin (neuroendocrine marker, magenta), and cytokeratin 7 (ductal marker, brown) using a multispectral imaging system (Nuance, PerkinElmer Inc., Waltham, MA, USA). The system acquired the

Correspondence to Toshiyuki Ishiwata, MD, PhD, Department of Integrated Diagnostic Pathology, Graduate School of Medicine, Nippon Medical School, 1-1-5 Sendagi, Bunkyo-ku, Tokyo 113-8602, Japan

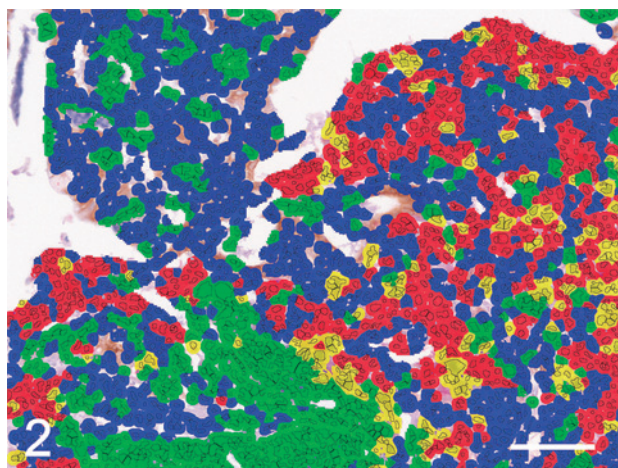


Fig. 2

individual spectra of 3 chromogens (5-bromo-4-chloro-3-indolyl phosphate [BCIP], new fuchsin, and 3,3'-diaminobenzidine [DAB]) through a set of tunable liquid crystal filters. On the basis of the spectral data sets, the colors can be converted into fluorescent images for optimal visual contrast (Fig. 1c). The acquired image can also be spectrally unmixed into 3 individual images displaying only 1 chromogen data (Fig. 1d). Morphological and cellular phenotyping analysis by inForm software (PerkinElmer) revealed that 30.93% of tumor cells were trypsin-positive (green and yellow), 31.89% were synaptophysin-positive (red and yellow), 7.54% were double-positive (yellow), and 44.73% were double-negative (blue). A total of 2,493 cells were present (Fig. 2).

**Fig. 1** (a) Hematoxylin and eosin staining of pancreatic mixed acinar-neuroendocrine-ductal carcinoma. (b) Pseudocolored composite image (Nuance) acquired from triple-immunoenzyme staining with trypsin (mouse monoclonal antibody, MAB1482; Millipore, Temecula, CA, USA) in blue (BCIP), synaptophysin (rabbit polyclonal antibody; DAKO, Glostrup, Denmark) in magenta (new fuchsin), and cytokeratin 7 (mouse monoclonal antibody, clone OV-TL 12/30; DAKO) in brown (DAB). (c) The image in (b) was converted to a pseudofluorescent composite image with trypsin (magenta), synaptophysin (red), and cytokeratin 7 (green). (d) Composite image (upper left) and spectral unmixed images (upper right, trypsin; lower left, synaptophysin; lower right, cytokeratin 7). The spectral curves of the chromogens are shown in the top left corners of individual images. Scale bar=100  $\mu$ m.

**Fig. 2** Automated cellular segmentation using inForm software. Green indicates trypsin-positive cells, red synaptophysin-positive cells, yellow double-positive cells, and blue double-negative cells (total cell number: 2,493). Scale bar=100  $\mu$ m.

#### References

1. Van der Loos CM, Das PK, Van den Oord JJ, Houthoff HJ: Multiple immunoenzyme staining: methods and visualizations for the observation with spectral imaging. *J Histochem Cytochem* 2008; 56: 313-328.
2. Huang W, Henrick K, Drew S: A colorful future of quantitative pathology: validation of Vectra technology using chromogenic multiplexed immunohistochemistry and prostate tissue microarrays. *Hum Pathol* 2013; 44: 29-38.
3. Fukushima N, Hruban RH, Kato Y, Klimstra DS, Klöppel G, Shimizu M, Terris B: Ductal adenocarcinoma variants and mixed neoplasms of the pancreas. In *WHO Classification of Tumours of the Digestive System* (Bosman FT, ed), 4th Edit., 2010; pp292-293, International Agency for Research on Cancer, Lyon.