

# DECALCIFICATION& CARBOHYDRATES Lab 9 & 10

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## **Preparation of Bone sections**

- Tissues must be fixed adequately before decalcification. The Selected bone is
- placed in 10% neutral buffered formalin for 24-48hrs .
- The ideal fixative for bone marrow is Zenker's (Modified, Zinc Chloride).
- For tooth specimens, 15% formic acid is mostly preferred.



### Decalcification

Decalcification is the process of removing inorganic calcium (mineral) content of

the bone /tissue before processing the specimen after fixation.

#### There are four methods of decalcification

- 1. Simple dilute mineral acids:
- a) Weak organic acid.
- b) Strong inorganic acid.
- 2. Chelating agents.
- 3. Ion exchange resins with acid decalcifying fluids.
- 4. Electrolytic decalcification.

# 1\_Simple dilute mineral acids

This method of decalcification dissolves the calcium salts in an acid solution called decalcifying fluids used either singly or mixture such as nitric acid, formic acid and trichloro acetic acid.

- 1. Simple dilute mineral acids- Strong inorganic acid
- Nitric acid solution (5-10%). Is strong acid recommended for the decalcification of small pieces of bone which must be processed rapidly.
- Over-exposure to nitric acid destroys nuclear staining.
- Used in urgent biopsy specimens.
- Strong acids are more damaging to:
- 1. Tissue antigens for immunohistochemical staining
- 2. Enzymes may be completely lost.
- 2. Simple dilute mineral acids- Weak organic acid
- Weak organic acid such as Formic acid, Trichloro acetic acid & Picric acid
- Formic acid (5%) it is much slower than nitric acid but considerably less damaging to tissue structures and staining.

• 10% Formic acid in D.W is recommended for (2days) to small pieces of bone and for (20days) for to larger pieces of dense compact bone.

T.C.A. used as 5% aqueous solution rather quicker in action than the same concentration of formic acid with good staining results.

### **End-Point of Decalcification**

There are several methods for testing the completion of decalcification:

1) Radiological method: It is the best method; very quick it is not practically used because it is not available and very expensive.

2) Physical method: It is a very bad method; Erythroid brecursor damage the cells Structure.

✓ The physical tests include bending the specimen or inserting a pin, razor, or scalpel directly into the tissue, or twisting the sample by fingers.

3) Chemical method: It is the suitable method used in the routine histopathology lab.

✓ The following solutions are needed to chemically test for residual calcium.

Principle (Ammonium Oxalate reacts in alkaline pH with calcium salts to give calcium oxalate)





normal bone structure

### Factors affecting rate of decalcification:

1. Concentration of decalcifying solution-Increase conc fastens the reaction.

2. Temperature- Increase temp. Fastens the reaction

3. Density of the bone-harder bone takes longer time.

4. Thickness of tissue - small tissue piece decalcify earlier.

5. Agitation-which increases the rate of decalcification



Special stains for: protein, carbohydrates, lipid, mucosubstances, pigments minerals & microorganisms

Special stains are used to identify certain normal and abnormal substance present in the cells and tissue. Which cannot be identified on routine Hematoxylin & Eosin staining or are better appreciated on special stain.





### Periodic Acid Schiff (PAS) stain:

Uses of PAS:

• PAS is used to demonstrate glycogen and neutral mucoprotein.

 In diagnosis of poorly differentiated adenocarcinoma of various tissues like

stomach, pancreas, and lung.

• In diagnosis of hepatocellular carcinoma.



