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Ultracentrifugal separation of VLDL, LDL and HDL

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Protocol status: Working

We use this protocol and it's working

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Keywords: ultracentrifugation, VLDL, LDL, HDL, cardiovascular, retinopathy, neuropathy, nephropathy, pediatric endocrinology, uropathy, wound-healing, ultracentrifugal separation of vldl, various lipid fractions from blood plasma, various lipid fraction, using ultracentrifugation, lipid, ldl, hdl summary, blood plasma, hdl, diabetic complication, knockout mice

Abstract

Summary:

This protocol is used to isolate the various lipid fractions from blood plasma using ultracentrifugation. The actual measured concentrations are performed separately once the isolations are complete.

NOTE: This protocol is not applicable for ApoE knockout mice.

Diabetic Complications:



Cardiovascular



Retinopathy



Neuropathy



Nephropathy



Pediatric Endocrinology



Uropathy



Wound-Healing

Materials

MATERIALS

☒ Beckman Optima TL tabletop ultracentrifuge **Beckman Coulter**

☒ Beckman 7×20 mm thick walled ultracentrifuge tube **Beckman Coulter Catalog #343621**

☒ Hamilton Syringe (100 ul)

☒ KBr Solution

☒ Phosphate Buffered Saline

| Reagent/Material | Quantity Required |
|--|-------------------|
| Beckman Optima TL tabletop ultracentrifuge | |
| Beckman 7x20 mm, thick walled ultracentrifuge tube | 2 |
| Hamilton Syringe (100 ul) | 1 |
| KBr Solution | 1 ml |
| Phosphate Buffered Saline | 1 ml |

Troubleshooting

Safety warnings

! **WARNING.**
The use of an ultracentrifuge should only be performed by qualified technicians/personnel.



- 1 Add 60 μ l of plasma to Beckman ultracentrifugation tube (7 × 20 mm; thick walled; polyallomer; cat. # 343621).
- 2 Layer 60 μ l of PBS on top of the plasma and place tubes in a TLA100 rotor.
- 3 Spin for 3 hours Beckman Optima TL tabletop ultracentrifuge at 70,000 rpm, 4°C.
- 4 Using a 100 μ l Hamilton syringe, carefully remove the bottom 60 μ l and transfer to a new Beckman tube labeled with the sample number and A. Between samples rinse the Hamilton syringe with distilled water.
- 5 Using a rinsed Hamilton syringe transfer the rest of the sample (upper portion) into a second tube labeled with the sample number and B.
- 6 Add 60 μ l KBr solution (density = 1.12 g/ml) to tube A to make a final density of 1.063 g/ml) and mix 5 to 6 times up and down with the same pipette tip.
- 7 Layer 60 μ l of PBS on top of the sample in tube B.
- 8 Spin both A and B for 18 h overnight in the ultracentrifuge at 70,000 rpm at 4C as above.
- 9 Using a rinsed 100 μ l Hamilton syringe remove the bottom 60 μ l from tube A and transfer to an Eppendorf tube labeled HDL. Using a rinsed Hamilton syringe transfer the remaining 60 μ l (upper portion) to an Eppendorf tube labeled LDL.
- 10 Using a rinsed Hamilton syringe remove the bottom 60 μ l from tube B and transfer to the same Eppendorf tube labeled LDL in step 9 above (To recover any LDL contaminating the VLDL preparation after the first ultracentrifugation spin).
- 11 Using a rinsed Hamilton syringe transfer the remaining 60 μ l from tube B to an Eppendorf tube labeled VLDL.
- 12 Measure cholesterol, triglycerides or phospholipids concentrations in the lipoprotein fractions using their respective protocols.



NOTE: When determining the lipid concentrations of the lipoprotein fractions, the value for LDL must be multiplied by 2 in order to account for the two-fold higher volume (120 μ l) in this tube.

The densities of the fractions are as follows:

VLDL < 1.006 g/ml

LDL, IDL 1.006 – 1.063 g/ml

HDL > 1.063 g/ml