**HISTOCHEMISTRY: UNDERSTANDING ITS PRINCIPLES, TECHNIQUES, AND THEIR APPLICATIONS**

**ABSTRACT**

The field of histochemistry encompasses a diverse array of techniques designed to detect and visualize specific cellular components. This review systematically categorizes various histochemical methods, including staining techniques, and immunological approaches to identify biomolecules within biological samples. Additionally, this review seeks to buttress the applications of histochemical techniques in aspects of diagnostics, research, and therapeutic monitoring. In trying to understand the current principles and methodologies of histochemistry, researchers can further enhance their ability to interpret the biochemical underpinnings of cellular processes and disease manifestations.

**Keywords**: Histochemistry, staining, immunological, diagnostics

**INTRODUCTION**

The name "histochemistry" is derived from the words, "histo" meaning tissue, and "chemistry" meaning the study of chemical constituents. Histochemistry is a branch of biology that explains the composition, functions, and architecture of cells and tissues in body organ systems. In other words, studying chemical components found in biological tissues and cells is known as histochemistry. Histochemists can see and examine the distribution of components including proteins, enzymes, nucleic acids, and carbohydrates within biological materials by applying different staining methods and chemical reactions (Nagata, 2008). With the help of many scientists who have developed cutting-edge methods and procedures, the discipline of histochemistry has changed throughout time (Riva et al., 2014).

Histochemistry has diverse applications in research, diagnostics, and clinical practice. In research settings, histochemical techniques are used to study cellular structures, metabolic pathways, and disease mechanisms. When visualizing the distribution of molecules within tissues, researchers can gain some understanding of normal physiological processes and pathological conditions (Gurcan et al., 2009; Greaves et al., 2012). In diagnostic pathology, histochemistry plays a crucial role in identifying cellular abnormalities, characterizing tumors, and determining disease states based on molecular markers. Histochemistry continues to be a vital field in biological research, diagnostics, and clinical practice, offering a unique perspective on the intricate chemistry of life at the cellular and molecular level (Musumeci, 2015).

**Principles and Concepts of Histochemistry**

Histochemistry aims to localize and identify specific molecules within biological specimens. This is achieved using staining techniques that produce visible color reactions when specific molecules are present. Histochemical stains can target a wide range of molecules, including enzymes, proteins, lipids, carbohydrates, and nucleic acids. When selectively staining these molecules, histochemists can visualize their distribution within cells and tissues, providing valuable information about their roles and functions.

The concepts of histochemistry include;

1. **Enzyme Histochemistry**: Enzyme histochemistry is a key aspect of histochemical analysis that focuses on the localization of enzymatic activity within cells and tissues. Enzymes play critical roles in catalyzing biochemical reactions, and their spatial distribution can provide insights into metabolic pathways and cellular functions (Lojda et al., 2012). Enzyme histochemistry techniques involve the use of specific substrates that react with enzymes to produce a visible color change. When visualizing the distribution of enzyme activity, researchers can map out metabolic pathways, identify cellular compartments where specific enzymes are active, and study the regulation of enzymatic processes.
2. **Protein Localization**: Proteins are essential components of cells and tissues, performing a wide range of functions such as structural support, signaling, and enzymatic activity. Histochemical techniques can be used to localize specific proteins within biological samples, providing insights into their roles in cellular processes. Immunohistochemistry is a commonly used technique that utilizes antibodies to target and visualize specific proteins (Cregger et al., 2006). In the process of labeling proteins with fluorescent or enzymatic tags, researchers can identify their presence and distribution within cells, tissues, and organs.
3. **Nucleic Acid Staining**: Nucleic acids, including DNA and RNA, are fundamental molecules that carry genetic information and play crucial roles in gene expression and regulation. Nucleic acids within cells can be stained using histochemical techniques, which can reveal information about transcription, DNA replication, and RNA localization. Techniques such as Feulgen staining, which specifically targets DNA, and in situ hybridization, which detects specific RNA sequences, are valuable tools for studying nucleic acid distribution and dynamics within biological samples (Gall, 2016).
4. **Carbohydrate Analysis**: Carbohydrates are important biomolecules involved in energy storage, cell-cell recognition, and structural support. Histochemical techniques can be used to visualize the distribution of carbohydrates within cells and tissues. Periodic acid-Schiff (PAS) staining is a common method for detecting carbohydrates, as it produces a magenta color reaction when carbohydrates are present (Shafiei et al., 2014). When staining tissues with PAS, researchers can identify glycogen storage, mucin production, and other carbohydrate-rich structures within biological samples.

**Historical Background of Histochemistry**

It is essential to recognize and appreciate the historical contributions of histochemistry to the advancement of scientific knowledge. The work of pioneers such as Golgi, Ramon y Cajal, and Claude laid the groundwork for modern techniques and methodologies in histochemistry. Their innovative approaches to studying cellular structures and functions have shaped our understanding of biology and pathology (Coleman, 2000). When acknowledging the historical significance of these contributions, we can gain a deeper appreciation for the evolution of histochemistry as a discipline.

1. **Contributions of Camillo Golgi**

Far back in the 19th century, one of the earliest and arguably the most influential contributor to histochemistry was Camillo Golgi, an Italian physician and pathologist. Golgi developed the silver staining technique known as the Golgi stain, which allowed for the visualization of nerve cells and their intricate structures (Kang et al., 2017). This groundbreaking method revolutionized the study of the nervous system and laid the foundation for future advancements in histochemical staining techniques.

1. **Ramon y Cajal and the Neuronal Doctrine**

Santiago Ramon y Cajal, a Spanish neuroscientist and Nobel laureate, made significant contributions to the field of histochemistry through his work on the structure of the nervous system. In conjunction with Golgi's staining technique, his research led to the formulation of the Neuronal Doctrine, which proposed that the nervous system is composed of individual, discrete nerve cells (De Carlos & Borrell, 2007). This revolutionary concept challenged the prevailing views of neuroanatomy and laid the groundwork for modern neuroscience.

1. **Enzyme Histochemistry and the Golden Decades**

The 1950s and 1960s are often referred to as the "golden decades" of histochemistry, marked by a surge in the development of enzyme histochemical techniques. During this period, researchers such as Albert Claude and Christian de Duve made significant strides in elucidating the functions of cell organelles through enzyme localization studies. The number of histochemical methods for enzyme localization expanded rapidly, providing researchers with valuable tools to study cellular metabolism and function.

1. **Advancements in Ultracytochemical Localization**

In the mid-1960s, advancements in transmission electron microscopy and tissue preparation techniques paved the way for ultra cytochemical localization studies. Researchers such as Van Noorden and Frederiks introduced new techniques using cerium as a replacement for lead, improving the capture reactions for enzyme localization (Roy & Uppal, 2005). These developments enhanced our understanding of subcellular structures and organelles, further solidifying the importance of histochemistry in cell biology.

1. **Quantitative Histochemistry and Imaging Technologies**

The quantitative evaluations of staining intensities in defined areas of tissue sections became feasible in the 1970s with the introduction of integrating microdensitometers such as the Zeiss Scanning Microscope Photometer. These instruments allowed for accurate quantitation of staining reactions, providing researchers with a more precise method for analyzing histochemical data. In recent decades, the advent of image analysis systems, coupled with charged-coupled device (CCD) cameras and user-friendly software, has further enhanced the quantitative analysis of histochemical data, ushering in a new era of precision and efficiency in histochemical research.

1. **Frozen Sections and Diagnostic Pathology**

The development of frozen sections for diagnostic pathology has been a significant advancement in histochemistry. Cryostats, microtomes designed for cutting frozen tissue sections, were first developed in the late 1930s and became readily available in the 1950s. Frozen sections are now widely used in diagnostic pathology for rapid tissue analysis, particularly in muscle biopsies where enzyme histochemistry on frozen sections plays a crucial role in fiber typing. Despite advancements in cryostat technology, challenges remain in achieving optimal freezing and sectioning techniques to minimize freezing artifacts and improve tissue morphology.

1. **Long-Term Impact of Histochemical Techniques**

Many histochemical techniques developed in the early 20th century continue to be widely used in research and diagnostic settings. Methods such as the Feulgen staining of DNA, Nissl staining for neurons, and Von Kossa's method for calcium staining have stood the test of time and remain valuable tools for studying cellular structures and functions. The enduring relevance of these techniques underscores the long-term impact of histochemistry on the fields of biology and medicine.

**Techniques in Preparation of Tissues**

The processes of the preparation of biological tissues in the field of histopathology involve several key steps to ensure the quality and integrity of tissue samples for analysis. These processes entail everything from tissue collection and fixation to embedding, sectioning, staining, and microscopic analysis. Histopathology is the study of tissues at a microscopic level to identify structural abnormalities, cellular changes, and disease processes (Comanescu et al., 2012; Dibal et al., 2022). Tissue preparation is a critical aspect of histopathology that involves a series of steps to preserve tissue architecture, maintain cellular morphology, and facilitate microscopic analysis. Proper tissue preparation is essential for accurate diagnosis, research, and treatment planning in various medical disciplines.

1. **Tissue Collection and Handling**

The first step in tissue preparation is the collection of tissue samples from patients, research subjects, or experimental models. Tissue samples can be obtained through biopsies, surgical resections, autopsies, or animal experiments. Proper handling of tissue samples is crucial to prevent degradation, contamination, or loss of important cellular structures. Tissues must be collected promptly and transported to the laboratory under appropriate conditions to maintain their integrity.

1. **Tissue Fixation**

After collecting, tissue samples are fixed to preserve their structure and prevent decay. It involves treating tissues with chemical agents such as formalin to cross-link proteins, stabilizing cellular components, and preventing enzymatic degradation. Proper fixation is essential for maintaining tissue morphology, preventing autolysis, and enabling subsequent processing steps. Different fixatives may be used depending on the type of tissue and the intended analysis.

1. **Tissue Processing and Embedding**

Once tissues are fixed, they undergo processing to dehydrate and infiltrate them with a supporting medium for sectioning. Tissues are dehydrated in a series of alcohol solutions to remove water and prepare them for embedding in a solid medium such as paraffin wax. Embedding involves impregnating tissues with molten paraffin to provide support for sectioning and maintain tissue architecture. Proper embedding ensures that tissues are oriented correctly and can be sectioned accurately.

1. **Sectioning of Tissues**

Embedded tissues are cut into thin sections using a microtome, a precision instrument that allows for the slicing of tissue blocks into uniform slices. Sectioning is a delicate process that requires skill and precision to obtain thin sections of consistent thickness. The thickness of tissue sections can vary depending on the type of analysis being performed, with typical sections ranging from 4 to 5 micrometers in thickness. Proper sectioning is essential for obtaining high-quality slides for microscopic examination.

1. **Tissue Staining**

After sectioning, tissue slides are stained to enhance contrast, highlight specific structures, and facilitate the identification of cellular components. Staining techniques such as hematoxylin and eosin (H&E) are commonly used in histopathology to differentiate between different cell types, nuclei, and cytoplasmic components. Special stains may also be employed to highlight specific structures or pathological features. Proper staining is crucial for the accurate interpretation of tissue sections and the diagnosis of diseases.

1. **Microscopic Examination and Analysis**

Stained tissue slides are examined under a light microscope by pathologists, histologists, or researchers to analyze cellular morphology, tissue architecture, and pathological changes. Microscopic analysis allows for the identification of abnormalities, the characterization of disease processes, and the formulation of diagnostic conclusions. Digital imaging techniques may also be used to capture and analyze tissue images for research or documentation purposes.

**Fixation of Tissues in Histopathology**

Fixation involves the use of various fixatives and methods to stabilize cellular structures and biomolecules for further processing and analysis. The major aims of fixation in histological and cytological laboratory techniques are to preserve the tissue as close to its natural state as possible, avoid autolysis, prevent changes in the tissue's size and shape during processing, firm the tissue to a rigid state, stop bacterial growth in the tissue, enable clear staining, and improve the optical quality of the cells (Hobro & Smith, 2017; Dey, 2023).

Fixatives can be classified based on various criteria, including the nature of fixation, chemical properties, components present, and action on tissue proteins (Rai et al., 2016; Ajileye & Esan, 2022). Common types of fixatives include:

* **Aldehyde Fixatives**: Formaldehyde and glutaraldehyde are widely used aldehyde fixatives that cross-link proteins, preserving cellular structures.
* **Oxidizing Agents**: Osmium tetroxide is an oxidizing fixative commonly used in electron microscopy to stabilize lipids and other cellular components.
* **Protein Denaturing Agents**: Ethyl alcohol and methyl alcohol act as protein denaturants, leading to coagulative fixation.
* **Cross-Linking Agents**: Carbodiimides are examples of cross-linking fixatives that stabilize tissues by forming covalent bonds between proteins.
* **Miscellaneous Fixatives**: Picric acid is a fixative with unique properties, often used in specific histological applications.

Various methods are employed to apply fixatives to tissues and cells, each suited to specific purposes and experimental requirements (Slaoui et al., 2017). Common methods of fixation include:

* **Immersion Fixation**: The specimen is immersed in a liquid fixative, such as formalin or alcohol, ensuring uniform penetration and fixation of tissues.
* **Coating Fixation**: This method involves applying a spray fixative to cytology samples, providing a protective covering, and facilitating transportation.
* **Vapor Fixation**: Vapors of fixatives like formaldehyde or osmium tetroxide are used to fix tissues or smears, converting soluble components to insoluble forms.
* **Perfusion Fixation**: In research settings, fixative solutions are infused into the arterial system of animals to achieve whole-body fixation, particularly useful for preserving organs like the brain.
* **Freeze-Drying**: This technique involves the rapid freezing of tissues followed by the removal of ice through sublimation in a vacuum chamber, preserving soluble materials and small molecules.
* **Microwave Fixation**: Utilizing microwave energy to generate heat, this method accelerates fixation by inducing rapid molecular motion, ensuring uniform heating of tissues.

**Factors Affecting Fixation**

Several factors can influence the effectiveness of fixation, including:

* **pH**: Maintaining a neutral pH range (6-8) is crucial for optimal fixation, as extreme pH levels can lead to morphological distortions.
* **Temperature**: Fixation at appropriate temperatures ensures proper cross-linking of proteins and preservation of cellular structures.
* **Time**: The duration of fixation varies based on the type of tissue and fixative used, with over-fixation potentially leading to artifacts.
* **Tissue Size and Thickness**: Larger tissues may require longer fixation times or specialized methods to ensure complete penetration of the fixative.

**Advantages and Limitations of Fixation Techniques**

Each fixation method has its advantages and limitations, influencing its suitability for specific applications:

* Immersion fixation is simple and widely used but may lead to uneven fixation in larger tissues.
* Coating fixation is convenient for cytology samples but requires careful removal of wax before staining.
* Vapor fixation offers rapid fixation but may result in inconsistent results due to variable vapor exposure.
* Perfusion fixation ensures thorough tissue penetration but is primarily used in research settings due to its complexity and invasiveness.
* Freeze drying is excellent for preserving soluble materials but may not be suitable for all tissue types.
* Microwave fixation accelerates fixation but requires specialized equipment and may not be suitable for all samples.

**Basic Staining Techniques**

Histological stains play a crucial role in the field of histopathology by enhancing the contrast between different structures within tissues, allowing pathologists to visualize and analyze cellular components under a microscope. These stains have evolved, from early natural dyes to modern synthetic compounds, each serving specific purposes in tissue examination in the fields of pathological diagnosis, forensic studies, and medical research (Alturkistani et al., 2016).

When histology first began, researchers prepared tissues for microscopic examination by using easily accessible chemicals like potassium dichromate, alcohol, and mercuric chloride. This is when the history of histological staining began. The development of contemporary histological staining procedures was made possible by these inventive fixatives and staining chemicals, which were innovative for their time. Early scientists took their staining methods from the 17th-century scientist Antonie van Leeuwenhoek, who stained tissues with dyes like madder, indigo, and saffron and examined them under crude microscopes (Javaeed et al., 2017).

Later, methods for studying cellular organelles and materials inside tissues were developed. These methods were developed to investigate cellular organelles by staining procedures such as silver nitrate, cochineal, and carmine. Early histologists utilized dyes that were adopted from the textile industry. New dyes helpful in histology were created when the aniline dye business was established in 1856. The staining of tissues has greatly improved with the development of several staining methods, including Gomori, Masson's trichrome, Hematoxylin and Eosin, and Crystal violet stain. These methods are applied in both scientific and educational settings to demonstrate and exhibit various compounds found within tissues, as well as to investigate the rate at which diseases progress or heal. They are also used to identify bacteria in blood smears, bodily fluids, fecal matter, and tissue slices. They are utilized for teaching histology, cellular pathology, microbiology, and parasitology (Javaeed et al., 2017; Dibal et al., 2022).

The modern age of histology has seen significant improvements in histological stains and techniques. Advanced histological techniques include immunohistochemistry, antibody binding, and electron microscopy. These techniques have facilitated the study of organs and tissues, leading to a rising need for efficient, accurate, and less complex staining procedures. Many stain procedures that were historically used are still in use today, while others have been replaced with new immunostaining, molecular, non-culture, and other advanced staining techniques.

**Common Histological Stains Used**

The routine H&E stain, also known as hematoxylin and eosin stain, is commonly used in histology to show the general organization of tissues. It allows for the differentiation of structures to identify normal, degenerated, and/or inflamed cells. The nuclei and chromatin appear dark blue, the cytoplasm appears red-orange, and collagen, elastin, and erythrocytes appear yellow-orange or red (Gamble & Wilson, 2008). The Giemsa stain is used to differentiate cells present in hematopoietic tissues and to detect parasites and fungi. It is particularly useful in the diagnosis of malaria parasites in blood smears and in the detection of various microorganisms in tissue sections (Gupta et al., 2009). In blood smears, red blood cells infected by Plasmodium species stain red, while in tissue sections, nuclei appear blue, and the cytoplasm appears pale blue. The trichrome stain consists of three dyes that stain nuclei, cytoplasm, and collagen differently. It is used to evaluate fibrosis in tissues and provides vital information on the stage of disease by providing a clear contrast between collagens and the surrounding connective tissue and cells. It can also be used to study the effect of drugs and therapeutic agents on collagen fibers and to stain pancreatic beta cells to differentiate between types of diabetes in experimental animals (Kozlov et al., 2018).

The Oil red O stain is used to demonstrate tissue lipids and is particularly useful in the cytological diagnosis of liposarcoma. It allows for the visualization of lipid bodies within leukocytes and can be combined with immunofluorescence and automated quantification of lipids (Kar et al., 2020; Santangelo et al., 2020). The crystal violet stain is used to demonstrate different substances such as carbohydrates, mucin, fats, collagen, and reticular fibers in tissue sections (Soyab, 2020; Dibal et al., 2022). It is also used to identify microorganisms present in blood smears, body fluids, fecal matter, and tissue sections. The PAS (Periodic acid-Schiff) stain is used to demonstrate the presence of carbohydrates in tissues and is particularly useful in the diagnosis of different infectious agents as well as in teaching and research in microbiology, parasitology, virology, and public health (Shafiei et al., 2014; Alturkistani et al., 2016). The Golgi stain is used to visualize neuronal cells and is particularly useful in the study of the structure and function of the nervous system (Kang et al., 2017).

**The Application of Staining Techniques**

Histological stains have a wide range of applications in teaching and research, particularly in the fields of microscopic anatomy, pathology, microbiology, and parasitology. These stains are used to demonstrate and display different substances within tissues, such as carbohydrates, mucin, fats, collagen, and reticular fibers. In addition, they are utilized to identify the presence of microorganisms in blood smears, body fluids, fecal matter, and tissue sections (Soyab, 2020). The specificity of some histological stains allows for the diagnosis of disease conditions and monitors the progress of a disease. Furthermore, they are essential for teaching microscopies to students studying life sciences, health sciences, and veterinary medicine. Overall, histological stains play a crucial role in enhancing tissue contrast, demonstrating vital cellular organelles, and aiding in disease evaluation, diagnosis, and the identification of pathogens in various scientific disciplines.

**Immunohistochemistry**

Immunohistochemistry (IHC) is a powerful technique that involves the use of antibodies to detect specific antigens in tissue samples. This method allows for the visualization of protein expression and localization within cells and tissues (Hofman & Taylor, 2013; Schacht & Kern, 2015). By using specific antibodies that bind to target antigens, immunohistochemistry enables researchers and pathologists to identify and characterize various cellular components, including proteins, enzymes, and other biomolecules. This technique has become an essential tool in the diagnosis of cancer, infectious diseases, and autoimmune disorders, as it provides valuable information about the molecular and cellular characteristics of diseased tissues.

**Historical Background on Immunohistochemistry**

Immunologists may trace their origins to the late 1800s, when researchers such as Paul Ehrlich first postulated the idea of antigen-antibody interactions and first used the term "antibody". Ehrlich's research opened the door for the development of methods like immunohistochemistry and provided the framework for our knowledge of the immune response.

The use of antibodies to see antigens in tissues was first investigated by researchers in the early 1900s. The invention of immunofluorescence staining on frozen sections by Albert Coons in 1940 was one of the major developments in this discipline. The history of immunohistochemistry reached a major turning point with this method, which made it possible to see antigens in tissues using fluorescent dyes.

The next significant development in the area occurred in 1974 with the introduction of immunohistochemistry on regularly processed formalin-fixed, paraffin-embedded (FFPE) tissues by Taylor and Burns (Taylor et al., 2013). Since FFPE tissues are the most often utilized tissue samples in pathology and biomedical research, this finding was extremely important. The ability to see antigens in a variety of tissue types by immunohistochemistry on frozen formalin-preserved embryos (FFPE) tissues created new avenues for experimental and diagnostic uses.

The discovery of monoclonal antibodies (mAbs) by Köhler and Milstein in 1975 was a significant advancement in the history of immunohistochemistry (Posner et al., 2019). Monoclonal antibodies are the best choice for immunohistochemistry because they are highly selective and only target one epitope on an antigen. The extensive use of mAbs in IHC was made possible by the hybridoma process, which was invented by Köhler and Milstein. It revolutionized the manufacture of antibodies.

Researchers used polyclonal antibodies for immunohistochemistry before monoclonal antibodies were developed. Polyclonal antibodies are a combination of antibodies that target many epitopes on an antigen. They are produced from antisera. Despite their usefulness, polyclonal antibodies frequently produced greater amounts of nonspecific background staining than monoclonal antibodies. The development of monoclonal antibodies (mAbs) in immunohistochemistry resulted in a notable enhancement in stain quality and specificity.

Immunohistochemistry has developed over time because of improvements in image analysis technology, antigen retrieval strategies, and staining processes. IHC is now a common instrument in pathology labs and research facilities all over the world, serving a vital role in illness diagnosis, tumor characterization, and comprehension of biological processes at the cellular level.

**Methods of Immunohistochemistry**

There are two main methods in IHC; the direct method and the indirect method. Both methods involve the use of primary antibodies that bind to the target antigen, but they differ in the way the primary antibody is detected and visualized.

**Direct Method:** Here, a single antibody is used to detect the target antigen in the tissue sample. The primary antibody is directly conjugated to a detectable label, such as a fluorescent dye or an enzyme. When the primary antibody binds to the antigen of interest in the tissue section, the label attached to the antibody allows for visualization of the antigen-antibody complex. The steps involved are:

1. The tissue section is incubated with the primary antibody that is directly conjugated to a label.
2. Excess primary antibody is washed away to reduce background signal.
3. The tissue section is finally examined under a microscope equipped with the appropriate detection system for the label used (e.g., fluorescence microscopy for fluorescent labels or enzyme substrates for enzymatic labels).

**Advantages of Direct IHC**

* Simple procedure.
* Requires only one antibody incubation step.
* Reduces the risk of non-specific binding.

**Disadvantages of Direct IHC**

* Limited signal amplification, which may result in lower sensitivity.
* Direct conjugation of the primary antibody to a label can affect antibody binding affinity.

**Indirect Method:** Here, two antibodies are used to detect the target antigen. The primary antibody, which is specific to the antigen of interest, is not directly labeled. Instead, a secondary antibody that is specific to the primary antibody is used. The secondary antibody is conjugated to a detectable label, such as a fluorescent dye or an enzyme. This secondary antibody amplifies the signal, leading to enhanced detection of the antigen-antibody complex. The steps involved are:

1. The tissue section is incubated with the primary antibody that binds to the target antigen.
2. The excess primary antibody is washed away.
3. The tissue section is then incubated with a secondary antibody that recognizes and binds to the primary antibody.
4. The excess secondary antibody is washed away to reduce the background signal.
5. The tissue section is examined under a microscope equipped with the appropriate detection system for the label used.

**Advantages of Indirect IHC**

* Signal amplification leads to increased sensitivity.
* Versatile, as different primary antibodies can be used with the same secondary antibody.
* Allows for signal amplification through multiple layers of detection.

**Disadvantages of Indirect IHC**

* Requires an additional incubation step with the secondary antibody.
* Increased risk of non-specific binding due to the use of an additional antibody.

**Immunofluorescence**

Immunofluorescence is a powerful technique used in immunohistochemistry (IHC) to visualize specific antigens within tissues. It involves the use of fluorescent dyes or fluorophores to label antibodies that bind to target antigens, allowing for their detection under a fluorescence microscope (Joshi & Yu, 2017). This method provides high sensitivity and specificity in detecting antigens, making it a valuable tool in research and diagnostics.

The principle of immunofluorescence in IHC is based on the specific binding of antibodies to antigens present in tissue samples. Primary antibodies, which are specific to the target antigen, are applied to the tissue sections. These primary antibodies are then detected using secondary antibodies that are conjugated to fluorophores. When excited by a specific wavelength of light, the fluorophores emit fluorescence, which can be visualized and captured using a fluorescence microscope (Odell & Cook, 2013).

One of the key advantages of immunofluorescence in IHC is its ability to provide spatial information about the distribution of antigens within tissues. By using different fluorophores to label different antigens, researchers can simultaneously visualize multiple targets in the same tissue section. This multiplexing capability allows for the study of complex biological processes and interactions within cells and tissues. Immunofluorescence in IHC also offers high sensitivity, as the fluorescent signal is amplified by the fluorophores, enabling the detection of low-abundance antigens. Additionally, the technique allows for the co-localization of antigens with specific cellular structures or organelles, providing valuable insights into the localization and function of proteins within cells. In addition to its research applications, immunofluorescence in IHC is widely used in clinical diagnostics, particularly in the field of pathology. It plays a crucial role in the identification of specific biomarkers associated with various diseases, including cancer and autoimmune disorders. When visualizing the expression and localization of specific antigens in tissue samples, immunofluorescence in IHC helps pathologists make accurate diagnoses and prognoses.

Despite its many advantages, immunofluorescence in IHC also has some limitations. One challenge is the potential for background fluorescence, which can arise from the non-specific binding of antibodies or autofluorescence in the tissue. Careful optimization of the staining protocol and the use of appropriate controls are essential to minimize background signals and ensure the specificity of the results (Odell & Cook, 2013).

**Enzyme Histochemistry**

Enzyme histochemistry is a method that allows researchers to understand the location and activity of enzymes inside tissues, thereby bridging the gap between biochemistry and morphology. With the use of certain substrates and dyes, this technique makes enzyme activity visible in tissue slices, enabling researchers to examine the location and role of enzymes within cells. The substrate is metabolized by a tissue enzyme at its specified location within the tissue, and this process forms the framework of enzyme histochemistry. Through this technique, an insoluble dye product is formed that is visible under a microscope (Van Noorden, 2010; Lojda et al., 2012).

The famous British scientist A.G.P. Pearse is regarded as the father of enzyme histochemistry, having made major contributions to the growth and development of this discipline. Enzyme histochemistry techniques were first applied by Pearse, who established the connection between biochemistry and morphology by studying the location and activity of enzymes inside tissues. Among the most important things Pearse did for the field of enzyme histochemistry was to create new staining methods that made it possible to see certain enzymes in cells. Pearse was able to determine the presence and activity of enzymes in various cellular compartments by utilizing certain substrates and dyes, which provided crucial information on the enzymes' functional roles within the tissue.

Some commonly applied enzyme histochemical methods in modern histopathology include:

1. **Acetylcholinesterase (AChE) technique**: The assessment of intestinal tissues using this method lies primarily in the role of AChE as an important enzyme involved in the hydrolysis of acetylcholine, a neurotransmitter crucial for nerve transmission. Acetylcholinesterase (AChE) histochemistry is regarded as the gold standard for diagnosing Hirschsprung disease (HD), a condition characterized by impaired gut motility due to a lack of ganglion cells. AChE staining helps to identify the presence and distribution of nerve fibers, particularly in biopsied rectal samples. Also, this staining technique allows for the localization and activity of AChE, allowing for the effective diagnosis of HD and other related intestinal conditions (Agrawal et al., 2015; Yoshimaru et al., 2021).
2. **Dehydrogenase Reactions**: Dehydrogenases are a class of enzymes that catalyze oxidation-reduction (redox) reactions by transferring electrons from a substrate to an electron acceptor, often NAD+ or FAD. Common dehydrogenases such as lactate dehydrogenase (LDH) and succinate dehydrogenase (SDH), are crucial for assessing the metabolic health of tissues. Their activity levels could serve to explore the viability of cells, particularly in situations like ischemia, infarction, or tissue necrosis as decreased activity of these enzymes can indicate loss of cell function and viability, which can be critical for diagnosis in conditions like acute myocardial infarction or stroke (Li et al., 2015; Wang et al., 2024). Dehydrogenase reactions involve the oxidation of substrates like sodium succinate or sodium lactate, leading to the reduction of a color indicator such as tetranitrotetrazolium chloride blue (TNBT) to formazan. This method allows for the visualization of dehydrogenase enzymes in specific tissue compartments (Moosavi et al., 2019). In recent times, the advancement of metabolic mapping has proved to be more significant than ever because it provides integrated information on the activity of dehydrogenases in conditions that are nearly identical to nature (Van Noorden, 2010).
3. **Esterases and Phosphatases Staining**: Esterases (particularly, alpha-naphthyl acetate esterase (ANAE)) are enzymes that can indicate the differentiation and functional status of lymphocytes, particularly T-lymphocytes. When the activities of esterases are elevated, they can be indicative of high immune responses. Acid phosphatase (ACP-ase), located mainly in B-lymphocytes and macrophages, applies to the study of lymphoproliferative disorders and the functionality of immune cells. It helps in assessing the activity within different lymphocyte populations (Atiakshin et al., 2023). For instance, in a study done by Yener et al. (2019) on the effects of long-term administration of oral acrylamide on enzymatic activities of esterases and acid phosphatase, these enzymes were able to determine any adverse effects on the immune system due to prolonged chemical exposure. Both esterases and phosphatases can be visualized using diazonium salt as a color indicator. The enzymatic reaction results in the staining of esterase- or phosphatase-containing compartments within lymphoid tissues. However, these enzyme histochemical methods are resistant to formalin fixation, ethylenediaminetetraacetic acid (EDTA) decalcification, and paraffin embedding, making them valuable for studying tissue development and function.

**Differences between Enzyme Histochemistry and Immunohistochemistry**

Enzyme histochemistry and immunohistochemistry are both techniques used in pathology to study tissues at the cellular level; however, they differ in their principles, targets, and applications.

List 1- Differences between Enzyme Histochemistry and Immunohistochemistry

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| --- | --- | --- |
|  | **Enzyme Histochemistry** | **Immunohistochemistry** |
| **Principle** | Visualize enzyme activity within tissues by detecting the conversion of substrates into colored or insoluble products. | Utilizes antibodies to detect specific antigens (proteins) within tissues. |
| **Target** | Enzymatic activity within tissues | Specific proteins or antigens within tissues |
| **Application** | Understanding metabolic processes, enzyme localization, and functional changes in tissues | Identifying specific cell types, biomarkers, and disease-related proteins in tissues |

**CONCLUSION**

In conclusion, the current review emphasizes the pivotal role of histochemistry in enhancing our current understanding of biological tissues through fixation, staining, and immunological approaches. Fixation techniques are crucial for preserving cellular structures, minimizing autolysis, and ensuring accurate analysis. The evolution of staining methods has led to sophisticated techniques that allow for the visualization of various cellular components, aiding in the identification of pathological features and facilitating the diagnosis of diseases. Furthermore, techniques in immunohistochemistry have revolutionized diagnostic pathology by enhancing protein expression and localization in specific tissues. The ongoing development of these techniques continues to enhance their applications across various biomedical fields, reaffirming the importance of histochemistry in advancing scientific knowledge and improving patient care.

**DISCLAIMER (ARTIFICIAL INTELLIGENCE)**

Author(s) hereby declare that NO generative AI technologies such as Large Language Models (ChatGPT, COPILOT, etc.) and text-to-image generators have been used during the writing or editing of this manuscript.

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