



User's Manual

Human Respiratory Syncytial Virus IgA ELISA Kit



DEIA374



96T



This product is for research use only and is not intended for diagnostic use.

For illustrative purposes only. To perform the assay the instructions for use provided with the kit have to be used.

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PRODUCT INFORMATION

Intended Use

Respiratory Syncytial Virus (RSV) IgA tests are immunoassays for detection of human antibodies in serum or plasma against Respiratory Syncytial Virus.

General Description

Respiratory Syncytial Virus (RSV) causes upper and lower respiratory tract infections predominantly in infants and children. Such infections are responsible for bronchitis as well as pneumonia and may be life threatening. In addition, an RSV infection may often result in middle ear inflammation. In older children and adults, an infection is usually associated with mild symptoms although the elderly may develop more severe symptoms.

RSV is a pleomorphic RNA virus with a diameter of around 150-300nm. Originally isolated from chimpanzees, the virus acquired its name from the ability to form syncytia when cell cultures are infected with the virus.

Infections are transmitted from host to host through contact with mucous membranes of the eyes, mouth, or nose. Epidemiological studies have shown that all children by the age of 2 years have already experienced an RSV infection. Immunity developed as a result of infection is poor due to the virus spreading by syncytia formation. A protective immunity is primarily due to antibody responses to the viral surface glycoproteins G and F, whereby the F protein stimulates a humoral as well as a cellular immune response.

Principles of Testing

THE ELISA (Enzyme Linked Immunosorbent Assay) is an immunoassay that is particularly suited to the detection of antibodies. The reaction is based on the specific interaction of antibodies with their corresponding antigen. The test strips of the microtiter plate are coated with specific antigens of the pathogen of interest. If antibodies are present in a sample, they bind to the fixed antigen. A secondary antibody that has been conjugated with the enzyme alkaline phosphatase detects and binds to the antigen-antibody complex. The colorless substrate p-nitrophenylphosphate is then converted into the colored product p-nitrophenol. The signal intensity of this reaction product is proportional to the concentration of antibody in the sample and is measured photometrically.

Reagents And Materials Provided

1. Break apart microtiter test strips each with 8 antigen coated single wells (altogether 96) **MTP**, 1 frame, the coating material is inactivated, 12
2. Standard serum (ready-to-use) **STD** Human serum in phosphate buffer with protein; negative for anti-HIV-Ab, HBs-Ag (Hepatitis B-Virus-surface antigen) and anti-HCV-Ab; preservative: < 0.1 % sodium azide, colouring: Amaranth O, 2 x 2 ml
3. Negative control serum (ready-to-use) **NEG** Human serum in phosphate buffer with protein; negative for anti-HIV-Ab, HBs-Ag (Hepatitis B-Virus-surface antigen) and anti-HCV; preservative: < 0.1 % sodium azide, colouring: Lissamin green V, 2 ml
4. Anti-human-IgA-conjugate (ready-to-use) **APC** Anti-human-IgA from goat (polyclonal), conjugated to

alkaline phosphatase, stabilized with protein stabilization solution, preservative: 0.01 % methylisothiazolone, 0.01 % bromnitrodioxane, 13 ml

5. Washing solution concentrate (sufficient for 1 litre) **WASH** Sodium chloride solution with Tween 20, 30 mM Tris, preservative: < 0.1 % sodium azide, 33.3 ml
6. Dilution buffer **DILB** Phosphate buffer with protein and Tween 20; preservative: < 0.1 % sodium azide 0.01 g/l Bromphenol blue sodium salt, 2 x 50 ml
7. Stopping solution **STOP** 1.2 N sodium hydroxide, 15 ml
8. Substrate (ready-to-use) **pNPP** Para-nitrophenylphosphate, solvent free buffer, preservative: < 0.1 % sodium azide, (Substrate in unopened bottle may have a slightly yellow coloring. This does not reduce the quality of the product!), 13 ml
9. Quality control certificate with standard curve and evaluation table INFO (quantification of antibodies in IU/ml or U/ml), 1

Materials Required But Not Supplied

1. Common laboratory equipment
2. Photometer for microtiter plates with filter, wavelength 405 nm, recommended reference wavelength 620 nm - 690 nm (e.g. 650 nm)
3. Incubator 37°C
4. Moist chamber
5. Distilled water
6. Microtiter plate washer

Storage

Reagent	Storage	Stability
Microtiter strips (Coated with antigen)	Unopened after opening at 2 – 8 °C in closed aluminum bag with desiccant	see expiry date 6 months
Control sera / Standard sera	Unopened after opening at 2 – 8 °C	see expiry date 6 months
Conjugate	Unopened after opening at 2 – 8 °C	see expiry date 6 months
Dilution buffer	Unopened after opening at 2 – 8 °C	see expiry date 6 months
Washing solution	Unopened/after opening at 2 – 8 °C Working dilution at 2 – 8 °C working dilution at room temperature	see expiry date 2 weeks 1 week
Substrate	Unopened after opening at 2 – 8 °C	see expiry date 6 months
Stopping solution	Unopened after opening at 2 – 8 °C	see expiry date 6 months

Specimen Collection And Preparation

Lipaemic, hemolytic or icteric samples (serum or plasma) should only be tested with caution. Obviously contaminated samples should not be tested. Serum or plasma (EDTA, citrate, heparin) collected according to standard laboratory methods are suitable samples.

Samples must not be thermally inactivated.



Sample preparation

Before running the test, patient samples (V1) must be diluted in dilution buffer (V2) as follows:

$V_1 + V_2 = 1 + 500$	add	10 μ l	patient's sample
	each to	1000 μ l	dilution buffer (= 1+100)
		50 μ l	from the first dilution step
	each to	200 μ l	dilution buffer (= 1+4)

After dilution and before pipetting into the microtiter plate the samples must be mixed thoroughly to prepare a homogenous solution.

Sample storage

The stoppered samples can be stored in a refrigerator up to 7 days at 2-8°C. Extended storage is possible at $\leq -20^\circ\text{C}$.

Avoid repeated freezing and thawing of samples.

Diluted samples can be stored at 2-8°C for one week.

Reagent Preparation

Microtest strips

The microtiter test strips labeled with abbreviations for pathogen and immunoglobulin class are packed with a desiccant in an aluminum bag. To open the aluminum bag of the microtiter plate please cut off the top of the marked side only, in order to guarantee proper resealing. Take unrequired cavities out of the frame and put them back into the aluminum bag. Close bag carefully to ensure airtight conditions. Do not use the strips if the aluminum bag is damaged or if the bag with remaining strips and desiccant was not properly resealed.

Control sera/standard sera

Control and standard sera are ready-to-use and must not be diluted any further. They can be used directly for the test run.

For each test run and for each test system - independent of the number of microtest strips to be used - control and standard sera must be included. The cut-off-control should be set up in duplicate. With the quantitative tests the standard serum should also be set up in duplicate.

Anti-human-IgA-AP-conjugate (ready-to-use)

The required conjugate concentration (+, ++, +++) is indicated on the quality control certificate. Please refer also to the specification on the label. Avoid contamination.

Washing solution

Dilute washing buffer concentrate (V1) 1:30 with aqua dest. to a final volume of V2. Bottles used for the working dilution should be cleaned regularly. Discard cloudy solutions.

Example: Dilute 33.3 ml buffer concentrate with distilled water to a final volume of 1000 ml; Dilute 1 ml buffer concentrate with distilled water to a final volume of 30 ml.

Dilution buffer for samples (ready-to-use)

Discard cloudy solutions.

Substrate (ready-to-use)

Substrate in unopened bottle may have a slightly yellow coloring, which does not reduce the quality of the product! Avoid contamination.

Stopping solution (ready-to-use)

Assay Procedure

Note

1. Only use CD ELISA reagents for test procedure, since all reagents are matched. In particular standard and control sera are defined exclusively for the test kit to be used. Do not use them in other lots.
2. There are three different conjugate concentrations for each immunoglobulin class: LOW, MEDIUM, HIGH. The classification is written on each label as follows:

e.g. IgA + lowly concentrated IgA conjugate

IgA ++ medium concentrated IgA conjugate

IgA +++ highly concentrated IgA conjugate

In rare cases the use of special conjugate is necessary to guarantee consistent quality for our products. Special conjugates are produced in a separate lot and do not carry the "+" sign. Therefore, special conjugates are not exchangeable with other conjugates.

Please pay close attention to notifications on labels!

3. Unopened, all components of the kit may be used up to the dates given on the labels, if stored at +2°C to +8°C. Complete stability and storage data are described under "Storage".
4. Each reagent has been calibrated and optimized for the test. Dilution or alteration of these reagents may result in a loss of sensitivity.
5. Avoid exposure of reagents to strong light during storage and incubation. Reagents must be tightly closed to avoid evaporation and contamination with microorganisms since incorrect test results could occur due to interference from proteolytic enzymes.
6. To open the press-seal bag please cut off the top of the marked side, only. Do not use the strips if the aluminum bag is damaged or if the press-seal bag with remaining strips and desiccant was not properly closed.
7. Bring all reagents to room temperature before testing.
8. Use aseptic techniques for removing aliquots from the reagent tubes to avoid contamination. To avoid false positive results ensure not to contact or sprinkle the topwalls of wells while pipetting conjugate. Take care not to mix the caps of the bottles and/or vials.
9. Reproducibility is dependent on thorough mixing of the reagents. Shake the flasks containing control sera before use and also all samples after dilution (e.g. by using a vortex mixer).
10. Be sure to pipette carefully and comply with the given incubation times and temperatures. Significant time differences between pipetting the first and last well of the microtiter plate when filling samples/control sera, conjugate or substrate may result in different "preincubation" times, which may influence the precision and reproducibility of the results.
11. Optimum results can only be achieved if CD instructions are followed strictly.
12. The test is not valid, if the lot-specific validation criteria on the quality control certificate are not fulfilled.
13. Inadequate washing will affect the test results: The washing procedure should be carried out carefully. If the

washing procedure is carried out automatically follow the instruction manual of the respective washer. Flat bottom wells are used for CD ELISA Kit. All wells should be filled with equal volumes of washing buffer. At the end of the procedure ensure that the wells are free of all washing buffer by tapping the inverted microtest plate on a paper towel. Avoid foam! Do not scratch coated wells during washing and aspiration. If using an automated washer, ensure it is operating correctly.

Assay Procedure

1. Place the required number of cavities in the frame and prepare a protocol sheet.
2. Add each 100 µl of diluted sample or ready-to-use controls into the appropriate wells of microtest strips. Spare one well for substrate blank, **e.g.:**

Well	Quantitative ELISA	Qualitative ELISA
A1	substrate blank	substrate blank
B1	negative control	negative control
C1	standard serum	cut-off serum
D1	standard serum	cut-off serum
E1	patient 1 ...	positive control
F1	patient 2 ...	patient 1 ...

3. Sample incubation for 60 minutes (+/- 5 min) at 37°C (+/- 1°C) in moist chamber.
4. After incubation wash all wells with washing solution (by automated washer or manually):
 - a.aspirate or shake out the incubation solution
 - b.fill each well with 300 µl washing solution
 - c.aspirate or shake out the washing buffer
 - d.repeat the washing procedure 3 times (altogether 4 times!)
 - e.dry by tapping the microtest plate on a paper towel
5. Addition of conjugate: Add 100 µl of IgA-conjugate (ready-to-use) to the appropriate well (except substrate blank).
6. Conjugate incubation for 30 minutes (+/- 1 min) * at 37°C (+/- 1°C) in moist chamber.
7. After incubation wash all wells with washing solution (see above).
8. Addition of substrate: Add 100 µl substrate solution (ready-to-use) to each well (including well for substrate blank!)
9. Substrate incubation for 30 minutes (+/- 1 min) * at 37°C (+/- 1°C) in moist chamber.
10. Stopping of the reaction: Add 100 µl stopping solution to each well, shake microtest plate gently to mix.
11. Read optical density: Read OD within 60 minutes at 405 nm against substrate blank, reference wave length between 620 nm and 690 nm (e.g. 650 nm).

* Please note, that under special working-conditions internal laboratory adaptations of the incubation times could be necessary.

Calculation

Single-point quantification with the 4PL method

Optimized assignment of extinction signals to quantitative values is guaranteed by using non-linear functions, which adjust a sigmoide curve without any further transformation to OD-values.

Determination of antibody concentrations with the ELISA Kit is carried out by the logistic-log-model (4 PL; 4 parameter) which is ideal for exact curve-fitting. It is based on the formula:

$$OD=A + \frac{D-A}{1 + e^{B(C - \ln conc.)}}$$

The parameters A, B, C, and D are representative for the exact shape of the curve:

lower asymptote: parameter A

slope of the curve: parameter B

turning point: parameter C

upper asymptote: parameter D

For each lot the standard curve is evaluated by CD in several repeated test runs under optimal conditions. Time consuming and cost intensive construction of the standard curve by the user is not necessary.

For evaluation of antibody concentrations a lot specific standard curve as well as a lot specific evaluation table is included with each test kit. Appropriate evaluation software is available on request.

To compensate for normal test variations and also for test run control a standard serum is used in each individual test run. For this control serum a "reference value" with a validity range is determined by the quality control of the producer. Within this range a correct quantification of antibody concentration is ensured. Since the standard serum is not necessarily a positive control, the value of the standard serum may be borderline or negative in some ELISA tests.

Criteria of validity

1. the substrate blank must be $OD < 0.25$
2. the negative control must be negative
3. quantitative ELISA: the mean OD-value of the standard serum must be within the validity range, which is given on the lot specific quality control certificate of the kit (after subtraction of the substrate blank!)
4. qualitative ELISA: the mean OD-value of the positive control must be within the validity range, which is given on the lot specific quality control certificate of the kit (after subtraction of the substrate blank!)
5. the variation of OD-values may not be higher than 20%.

If these criteria are not met, the test is not valid and must be repeated.

Non-automated evaluation

For the test evaluation a standard curve and an evaluation table are included in the test kit so that the obtained OD-values may be assigned to the corresponding antibody activity. The reference value and the validity range of the standard serum is given on the evaluation table (quality control certificate).

The blank (A1) must be subtracted from all OD-values prior to the evaluation.

Method 1: Qualitative Evaluation

To fix the cut-off ranges please multiply the mean value of the measured standard-OD with the numerical data of the certificate of quality control (see special case formulas), e.g.:

$OD = 0.502 \times MW \text{ (STD) with upper cut-off}$

OD = 0.352 x MW (STD) with lower cut-off

If the measured mean absorbance value of the standard serum is 0.64, the range of the cut-off is in between 0.225-0.321.

Method 2:

Continuous determination of antibody activities using the standard curve.

So called interassay variations (day to day deviations and laboratory to laboratory deviations) are compensated by multiplication of the current measured value obtained with a sample with the correction factor F. This factor is calculated as follows:

$F = \text{OD-reference value (of standard serum)} / \text{OD-current value (of standard serums)}$

The procedure is necessary to adjust the current level of the test of the user with the lotspecific standard curve.

First, daily deviations have to be corrected by calculating a factor (correction factor F):

1. The mean of the two OD-values of the standard serum has to be calculated and checked that it is within the given validity range.
2. Calculation of the factor "F": the given reference value is divided by the mean of the extinction of the standard serum:

$F = \text{reference value extinction standard serum} / \text{mean value extinction standard serum.}$

3. All measured values of samples are multiplied by "F".
4. Antibody activities in IU/ml or U/ml can be determined from the standard curve with the corrected values.

Automatic test evaluation

After input of the 4 parameters and the reference value of the standard serum, antibody activities are calculated online. If the optical density of the standard is out of the valid range, the following message will appear:

CD easy base 4PL-Software:

"Standards are not in tolerance range" and/or "Distance between standards is greater than 20 %".

CD evaluate-Software:

"Standard values out of ranges in following groups: Group 1-24. Standard value differ more than 20 % in following groups: Group 1-24."

In these cases the test run is invalid and should be repeated.

Parameters and reference value need to be changed only if there is a change of lot (evaluation table shows parameters and reference values). Correct input of the lot specific data can be checked on the basis of the IU/ml or U/ml assigned to the standard serum. The calculated mean value of the units has to correspond to the unit value indicated on the lot specific certificate. There is an automatic correction of the measured values. In the standard version the printout displays the following:

sample code

OD-value

IU/ml or U/ml

evaluation

Interferences

No interferences have been detected for sera with concentrations up to 2.00 g/L hemoglobin, 11.50 g/L lipemia/triglyceride or 0.201 g/L bilirubin (conjugated and unconjugated).

Precautions

1. The Kit is only designed for qualified personnel who are familiar with good laboratory practice. All kit reagents and human specimens should be handled carefully, using established good laboratory practice.
2. This kit contains human blood components. Although all control- and cut-off-sera have been tested and found negative for HBs-Ag-, HCV- and HIV-antibodies, they should be considered potentially infectious.
3. Do not pipette by mouth.
4. Do not smoke, eat or drink in areas in which specimens or kit reagents are handled.
5. Wear disposable gloves, laboratory coat and safety glasses while handling kit reagents or specimens. Wash hands thoroughly afterwards.
6. Samples and other potentially infectious material should be decontaminated after the test run. Reagents should be stored safely and be inaccessible to unauthorized access e.g. children.
7. Stopping solution: corrosive (C); causes acid burn (R34) use safety glasses, gloves and laboratory coat while handling!

Disposal

1. Please observe the relevant statutory requirements!

Limitations

Please note that diagnosis should never be solely based on serological data. Rather, serological results have to be interpreted in the context of the clinical picture and other diagnostic findings.