# **IMTEC-COMPLEMENT ACTIVITY**

# Complement

# ELISA for the Quantitative Determination of Complement Activity

## **Package Size**

ITC59035 REF 96 Tests Testkit IVD

Please read the instructions carefully before testing.

**Procedural precautions:** 

Do not use the reagents beyond the date of expiry.

DIL DB15, WASH 20x WB03, SUB TMB ELISA and STOP STOP ELISA may be interchanged between lots and test kits that share the same reagent designation.

All other reagents are specific for the individual test kit lot and must not be interchanged with other lots and test kits

Store reagents at 2...8°C.

### Intended Use

IMTEC-Complement Activity is an enzyme immunoassay (ELISA) for the quantitative determination of the total classical complement activity in human serum. The assay is intended for in vitro diagnostic use only as an aid in the determination of a complement deficiency.

The complement system consists of at least 20 plasma proteins. It is responsible both for the elimination of circulating immune complexes over the classic pathway of the complement activation and for the defence against infectious pathogens over the alternative pathway of the complement activation. Both pathways of complement activation lead into the formation of the terminal lysis complexes (membrane attack

Decreased complement activity is of particular clinical significance. A hereditary defect of complement proteins and/or control proteins, can lead to recurrent infections, autoimmune diseases, and angioneurotic oedemas. Circulating immune complexes and bacterial infections can cause abnormally low levels of complement in the blood (hypocomplementemia). The complement activity in the serum reflects the functional condition of the complement system.

The IMTEC-Complement Activity test makes it possible to determine the total extent of activation of the complement system.

The assay procedure is based on the activation of complement in serum samples applied to a microtiter plate coated with a complement-activating substance. After completion of the entire complement cascade (from C1 to C9), the terminal activated C9 is labelled using a monoclonal antibody against a neoepitope of C9.

The label itself is detected with an anti-mouse IgG antibody conjugated with peroxidase. After addition of substrate solution, a colour appears. Following the addition of stop solution, the colour switches from blue to yellow which intensity is proportional to the concentration of the C9 neoepitope which itself, reflects the state of complement system activation. The test therefore correlates with a determination of hemolytic activity of the complement system (CH50 test).

# Doogonts and Contonts

Reagents and Contents					
MTP	12	<b>Microtiter Strips</b> (in 1 strip holder) 8-well snap-off strips, ready for use coated with complement activator			
CAL 4	3 x for 1.5 ml	Calibrator 4 lyophilised human serum pool			
PC	3 x for 2.5 ml	<b>Control Sample,</b> lyophilised, reduced complement activity Concentrations are stated on the la	ibels.		
WASH 20x WB03	50 ml	<b>Washing Buffer</b> (black cap) Concentrate (20x) for 0.5 I TRIS buffer	pH 6.9 ± 0.2		
DIL DB15	100 ml	<b>Dilution Buffer</b> (blue cap) ready for use TRIS buffer	pH 7.3 ± 0.2		
Anti-C9	12 ml	<pre>anti-C9 Solution (red cap), ready for use</pre>			
CON	15 ml	Conjugate Solution (white cap)			

anti-mouse-IgG HRP conjugate, ready for use

## ++++ Change of 🕮 ++++ Please read marked text carefully! ++++

SUB TMB ELISA	15 ml	<b>TMB Solution</b> (black cap) ready for use, colourless to bluish	pH 3.7 ± 0.2
		3,3', 5,5'-tetramethylbenzidin	1.2 mmol/l
		Hydrogen peroxide	3 mmol/l
STOP ELISA	15 ml	<b>Stop Solution</b> (red cap) Sulphuric acid, ready for use	0.5 mol/l
	1	Adhesive Strip	

Do not swallow the reagents. Avoid contact with eyes, skin and mucous membranes. All patient specimens and controls should be handled as potentially infectious. The human Controls and calibrators were prepared from blood donations and have been checked on donor level for HCV and HIV-1/2 antibodies and HBsAg and found negative. Wear protective clothing and disposable gloves according to Good Laboratory Practices.

All materials contaminated with patient specimens or controls should be inactivated by validated procedures (autoclaving or chemical treatment) in accordance with applicable regulations.

The reagents are stable up to the stated expiry dates on the individual labels when stored at 2...8°C.

## **Reagent Preparation**

Equilibrate DIL on ice prior to the preparation of calibrators and control dilutions.

Equilibrate lyophilisates, as well as the dilution buffer (stored at 2...8°C) on ice prior to use.

Allow all other components to reach room temperature before use! Used bottles should be closed tightly and stored at 2...8°C. Store SUB protected from light.

Do not use polystyrene vessels for handling of CON.

To avoid potential microbial and/or chemical contamination, unused reagents should never be transferred into the original vials.

### Calibrators S1 - S4 (CAL 4) and PC

Perform reconstitution, pipetting, handling and storage of S4 (CAL 4) and PC on ice prior to use.

PC: Dissolve the lyophilisate of one bottle PC with exactly 2.5 ml ice chilled DIL. Swivel carefully from time to time for 20 min., avoid foaming. DO NOT VORTEX.

Calibrator S4 (200 U/ml): Dissolve the lyophilisate of one bottle CAL 4 with exactly 1.5 ml ice chilled DIL. Swivel gently from time to time for 20 min, avoid foaming. **DO NOT VORTEX.** 

Prepare calibrators S1 to S3 on ice by diluting S4 (200 U/ml) with ice chilled DIL:

0.5 ml **S4** 0.5 ml DIL **S3** (100 U/ml), 0.5 ml **S3** 0.5 ml DIL **S2** (50 U/ml), 0.5 ml DIL **S1** (25 U/ml). 0.5 ml **S2** 

Do not re-use Calibrators S1 to S4 and PC.

## Washing Buffer Solution WASH

Any crystallised salt inside the bottle must be resolved before use. Dilute 1 part WASH 20x with 19 parts distilled water. WASH is stable for 6 weeks stored at 2...8°C.

Use sera freshly collected or freeze samples for extended storage at -70°C. In case sera were stored at -20°C, freeze and thaw only once. Do not use serum samples inactivated by heat treatment at 56°C.

Store, dilute and handle sera on ice to prevent in vitro complement activation.

Dilute sera 1:51 on ice with ice cold sample buffer DIL just before starting the test (mix 10 μl serum with 0.5 ml DIL).

- Pipette 100 μl of diluted serum, [CAL] and [PC] into [MTP], for blank use DIL instead of serum dilution, seal MTP with adhesive strip.
- Incubate for 1 hour at 37°C.
- Discard the solution from MTP. Wash MTP 3 times using 300 µl WASH per well.
- Discard WASH and knock out residues on an absorbent paper or cloth.

- Pipette 100 μl of Anti-C9, seal MTP with adhesive strip.
- Incubate for 1 hour at 37°C.
- Discard the solution from MTP. Wash MTP 3 times using 300  $\mu$ l WASH per well.
- Discard WASH and knock out residues on an absorbent paper or cloth.
- Pipette 100 µl CON and seal MTP with adhesive strip.
- Incubate for 1 hour at RT.
- Discard the solution from MTP. Wash MTP 3 times using 300  $\mu$ l WASH per well.
- Discard WASH and knock out residues on an absorbent paper or cloth.
- Pipette 100 μl SUB and incubate for 10 min. At room temperatures above 25°C the substrate incubation could be shortened, but should never fall short of 5 min..
- Add 100 μl STOP per well.
- Read absorbance values at 450 nm within the next 10 min. after stopping. Bi-chromatic measurement with a reference wavelength at 620 690 nm is recommended..

### Validation of the Test

The test results are valid provided the following criteria are met for the obtained results:

- PC is within the indicated range (see label).
- S4 does not fall below an absorbance value of 0.6.
- The absorbances of **\$1-\$4** keep raising.

In order to improve accuracy of the test results we recommend to run **S1–S4**, [PC] and patient samples in duplicate.

### Interpretation of Results

Plot the measured absorbances against concentrations **\$1-\$4** (25 (\$1), 50 (\$2), 100 (\$3), 200 (\$4) U/ml) in semi-log.

By interpolating the plotted measuring points, a calibration curve is obtained, from which the concentrations of activated C9 in the patient samples can be determined.

The normal range of complement activity (40-200 U/ml) was established using serum samples obtained from apparently healthy blood donors.

### **Performance Characteristics**

Typical performance data can be found in the Verification Report, accessible via:

www.human.de/data/gb/vr/el-59035.pdf or

www.human-de.com/data/gb/vr/el-59035.pdf

If the performance data are not accessible via internet, they can be obtained free of charge from your local distributor.

### **Safety Notes**

STOP Warning

H315 Causes skin irritation.

H319 Causes serious eye irritation.

SUB Danger

H360D May damage the unborn child.

[CAL] NC PC WASH 20x DIL CON SUB STOP

P234 Keep only in original container.

P260 Do not breathe dust/fume/gas/mist/vapours/spray.

P262 Do not get in eyes, on skin, or on clothing.

P281 Use personal protective equipment as required.

P303+P361+P353 IF ON SKIN (or hair): Take off immediately all contaminated clothing. Rinse skin with water/shower.

P305+P351+P338 IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.

P337+P313 If eye irritation persists: Get medical advice/attention.

P401 Store in accordance with local/regional/national/international regulations.

P501 Dispose of contents/container in accordance with local/regional/national/international regulations.

All donor units of human origin have been tested for HBsAg, HIV and HCV-antibodies and found to be negative using approved methods. However, the material should still be regarded as potentially infectious.

#### References

- 1. Zwirner J. et al., J. Immunol. Methods 211, 183-190 (1998)
- 2. Pickering M.C., Walport M.J., Rheumatology 39, 133-141 (2000)

EL-59035 INF ITC59035 GB 03-2019-015

 $\epsilon$ 



