## **IMTEC-PR3-ANCA**

## PR3-ANCA

# ELISA for the Quantitative Determination of Anti-Proteinase 3 Antibodies (IgG)

## Package Size

REF ITC82020 96 Tests Complete Testkit

Please read the instructions carefully before testing.

## **Procedural precautions:**

Do not use the reagents beyond the date of expiry.

DIL DB14, 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-PR3-ANCA is an indirect solid-phase enzyme immunoassay (ELISA) for the quantitative measurement of IgG class autoantibodies against proteinase 3 in human serum. The assay is intended for in vitro diagnostic use only as an aid in the diagnosis of autoimmune vasculitides such as Wegeners granulomatosis.

Proteinase 3 (PR3) is the main target of cytoplasmic anti-neutrophil cytoplasm antibodies (cANCA). In contrast to that, perinuclear ANCA (pANCA) mainly react with myeloperoxidase (MPO).

Anti-Neutrophil Cytoplasm Antibodies (cANCA) are closely related to Wegener's granulomatosis classically causing severe glomerulonephritis. Repeated examination for ANCA is therefore of value for monitoring of disease activity and effect of treatment.

pANCA, detected by indirect immunofluorescence, can also be found in a lot of diseases apart from vasculitis. Consequently the detection of cANCA and pANCA by indirect immune fluorescence is not sufficient to proof systemic necrotising vasculitis. Therefore it is necessary to analyse the "fine specification" of PR3-ANCA and MPO-ANCA by ELISA as a second step or in parallel.

## Principle

The test is based on the immobilisation of highly purified PR3 to the solid phase of microtiter strips and subsequent binding of anti-PR3 antibodies from patient serum.

The bound antibodies are detected with a peroxidase-labelled secondary antibody that is directed against human IgG. After addition of substrate solution, a colour appears which intensity is proportional to the concentration and/or the avidity of the detected antibodies. Following the addition of stop solution, the colour switches from blue to yellow.

## **Reagents and Contents**

1.5 ml ready for use	engernes and			
5 x human serum, inked according to concentration 1.5 ml ready for use	ИТР	8-well snap-off strips, ready for use		
22.2 U/ml <b>(3)</b> , 66.7 U/ml <b>(4)</b> , 200 U/ml <b>(5)</b>		human serum, inked according to concentration, ready for use anti-PR3 level: 2.5 U/ml <b>(1)</b> , 7.4 U/ml <b>(2)</b> ,		
NC 1.5 ml Negative Control Serum (green cap), human, ready for use	<u>vc</u>			
PC 1.5 ml Positive Control Serum (red cap), human, ready for use Concentrations are stated on the labels.	·C	human, ready for use		
WASH 20x 50 ml Washing Buffer (black cap) WB03 Concentrate (20x) for 1 l TRIS buffer pH 6.9 ± 0		0x) for 1 l	50 ml	pH 6.9 ± 0.2
DIL 100 ml Dilution Buffer (blue cap) ready for use Phosphate buffer pH 7.3 ± 0			100 ml	pH 7.3 ± 0.2
CON 15 ml Conjugate Solution (white cap) anti-human-lgG HRP conjugate, ready for use	CON		15 ml	for use

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

SUB	15 ml	TMB solution (black cap)	
TMB ELISA		ready for use,	pH $3.7 \pm 0.2$
		colourless to bluish	
		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	,

#### **Safety Notes**

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 controls 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.

## Stability

The reagents are stable up to the stated expiry dates on the individual labels when stored at 2...8  $^{\circ}\text{C}.$ 

## **Reagent Preparation**

Allow the testkit and all its components to reach room temperature before use! Used bottles should be closed carefully 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.

## Washing Buffer Solution WASH

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

#### Specimen

Patient sera

Use samples freshly collected or freeze samples at  $-20^{\circ}$ C. Freeze and thaw once only. Do not use serum samples inactivated by heat treatment at 56°C.

Allow the samples to reach room temperature (30 min.).

Dilute sera 1:101 with DIL (add 10 μl serum to 1 ml DIL).

## Procedure

- Pipette 100 μl diluted sera, [CAL], [PC] and [NC] into [MTP], for blank use [DIL] instead of sample dilution, 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 CON and seal MTP with adhesive strip.
- Incubate for 30 min. 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  $\mu$ l 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.

## Automation

The IMTEC-PR3-ANCA ELISA is suitable for use on open automated ELISA processors. Applications have to be validated prior to diagnostic use.

## Validation of the Test

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

- PC is within the indicated range (see label).
- NC is lower than the cut-off-value of the test.
- CAL 5 does not fall below an absorbance value of 0.6.
- The absorbances of CAL 11-5 keep raising.

In order to improve accuracy of the test results we recommend to run CAL[1]-[5], [PC], [NC] and patient samples in duplicate.

## Interpretation of Results

Plot measured absorbances against U/ml of [CAL]1-5 in semi-log. By interpolating the plotted measuring points, a calibration curve is obtained, from which the concentrations of anti-PR3 antibodies in the patient samples can be determined.

Results below 10 U/ml (cut-off value) are negative. Results between 10-20 U/ml are borderline. Results above 20 U/ml are positive.

#### Limitations

A positive result must be used in association with clinical evaluation and diagnostic procedures. The values obtained from this assay are intended to be an aid for diagnosis only.

Elevated anti-PR3 antibodies may occur in individuals with no evidence of clinical disease.

If the patient sample contains elevated levels of immune complexes or other immunoglobulin aggregates, false positive results by non-specific binding cannot be ruled out.

The performance characteristics for this assay have not been established for plasma samples.

#### **Performance Characteristics**

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

www.human.de/data/gb/vr/el-82020.pdf or

www.human-de.com/data/gb/vr/el-82020.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

### · Hazard statements

H315 Causes skin irritation.

H319 Causes serious eye irritation.

SUB Danger

#### · Hazard statements

H360D May damage the unborn child.

#### · Precautionary statements

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.

 ${\tt P401}$  Store in accordance with local/regional/national/international regulations.

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

## References

- 1. Pechula Thut M. et al., Nephrologe 2, 27 (2007)
- 2. van der Woude F.J. et al., Lancet 1, 425 (1985)
- 3. Jennette J.C. et al., Arthritis Rheum. 37, 187 (1994)

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