

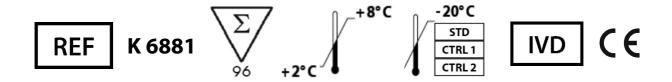
Distribuito in ITALIA da
Li StarFish S.r.I.
Via Cavour, 35
20063 Cernusco S/N (MI)
telefono 02-92150794
info@listarfish.it
www.listarfish.it

Manual

IDK® Serotonin ELISA

For the in vitro determination of serotonin (5-HT) in stool

Valid from 2020-05-25





Immundiagnostik AG, Stubenwald-Allee 8a, 64625 Bensheim, Germany

Tel: +49 6251 70190-0 Fax: +49 6251 70190-363

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1. INTENDED USE

This Immundiagnostik AG assay is intended for the quantitative determination of serotonin (5-hydroxytryptamine, 5-HT) in stool. For *in vitro* diagnostic use only.

2. MATERIAL SUPPLIED

Cat. No.	Label	Kit components	Quantity
K 6881	PLATE	Microtiter plate, pre-coated	12 x 8 wells
K 6881	STD	Standards, ready-to-use (0, 10, 30, 100, 250, 750 ng/ml)	6 x 200 μl
K 6881	CTRL 1	Control, ready-to-use (see specification for range)	1 x 200 μl
K 6881	CTRL 2	Control, ready-to-use (see specification for range)	1 x 200 μl
K 0006.C.100	WASHBUF A	Wash buffer concentrate,10 x	2 x 100 ml
K 7999.100	IDK® Amino Extract	Extraction buffer, ready-to-use	100 ml
K 6881	CONJ	Conjugate, peroxidase-labelled, ready-to-use	1 x 12 ml
K 6881	REABUF	Reaction buffer, ready-to-use	2 x 30 ml
K 6881	DER	Derivatisation reagent, lyophilised	1 x 100 mg
K 0008.07	DMSO	Dimethylsulfoxide (DMSO)	1 x 7 ml
K 6881	AB	Serotonin antibody, lyophilised	1 x 1 vial
K 0002.15	SUB	Substrate (tetramethylbenzidine), ready-to-use	1 x 15 ml
K 0003.15	STOP	STOP Stop solution, ready-to-use	

For reorders of single components, use the catalogue number followed by the label as product number.

3. MATERIAL REQUIRED BUT NOT SUPPLIED

- Ultrapure water*
- Stool sample application system such as Cat. No.: K 6998SAS

- Calibrated precision pipets and 10-1000 µl single-use tips
- Foil to cover the microtiter plate
- Horizontal microtiter plate shaker
- Multi-channel pipets or repeater pipets
- Vortex
- Standard single-use laboratory glass or plastic vials, cups, etc.
- Microtiter plate reader (required filters see chapter 6)
 - * Immundiagnostik AG recommends the use of ultrapure water (water type 1; ISO 3696), which is free of undissolved and colloidal ions and organic molecules (free of particles > 0.2 μ m) with an electrical conductivity of 0.055 μ S/cm at 25 °C (\geq 18.2 M Ω cm).

4. STORAGE AND PREPARATION OF REAGENTS

- To run the assay more than once, ensure that reagents are stored at the conditions stated on the label.
- Preparation of the wash buffer: The wash buffer concentrate (WASHBUF A) has to be diluted with ultrapure water 1:10 before use (100 ml WASHBUF A + 900 ml ultrapure water), mix well. Crystals could occur due to high salt concentration in the concentrate. Before dilution, the crystals have to be redissolved at room temperature or in a water bath at 37 °C. The WASHBUF A is stable at 2-8 °C until the expiry date stated on the label. Wash buffer (1:10 diluted WASHBUF A) can be stored in a closed flask at 2-8 °C for 1 month.
- Store **standards and controls (STD/CTRL)** frozen at **-20 °C**. They are stable at -20 °C until the expiry date stated on the label. Thaw before use in the test and mix well. Re-freeze standards and controls after use.
- **DMSO** crystallises at 2-8 °C. Before use, bring to room temperature to dissolve the crystals.
- The **lyophilised derivatisation reagent (DER)** is stable at **2-8** °C until the expiry date stated on the label. Bring to room temperature before opening and reconstitute the DER (100 mg) with **6 ml DMSO**. Allow to dissolve for 10 minutes and mix thoroughly with a vortex-mixer. **The derivatisation reagent** (reconstituted DER) **can be stored at 2-8** °C **for 2 months**. Bring to room temperature before reuse. Please note: DMSO attacks all plastics but not polypropylene products and laboratory glass.

• The **lyophilised serotonin antibody (AB)** is stable at **2-8** °C until the expiry date stated on the label. Reconstitute the AB with **6 ml of wash buffer**. **Serotonin antibody** (reconstituted AB) **can be stored at 2-8** °C **for 2 months**.

 All other test reagents are ready-to-use. Test reagents are stable until the expiry date (see label) when stored at 2-8 °C.

5. STORAGE AND PREPARATION OF SAMPLES

Storage of samples

Stool extract is stable for 3 days at room temperature. For longer storage keep frozen at -20 °C. Avoid more than 5 freeze-thaw cycles.

Extraction of the stool samples

The extraction buffer (IDK® Amino Extract) is ready-to-use. We recommend the following sample preparation:

Stool Sample Application System (SAS) (Cat. No. K 6998SAS)

Stool sample tube - Instructios for use:

Please note that the dilution factor of the final stool suspension depends on the amount of stool sample used and the volume of the buffer:

SAS with 0.75 ml buffer:

Applied amount of stool: 15 mg
Buffer volume (IDK® Amino Extract): 0.75 ml
Dilution factor: 1:50

Please follow the instructions for the preparation of stool samples using the SAS as follows:

- a) The raw stool sample has to be thawed. For particularly heterogeneous samples we recommend a mechanical homogenization using an applicator, inoculation loop or similar device.
- b) Fill the **empty stool sample tube** with **0.75 ml extraction buffer (IDK® Amino Extract)** before using it with the sample.
- c) Unscrew the tube (yellow part of cap) to open. Insert the yellow dipstick into the sample. The lower part of the dipstick has notches which need to be

covered completely with stool after inserting it into the sample. Place the dipstick back into the tube. When putting the stick back into the tube, excess material will be stripped of, leaving 15 mg of sample to be diluted. Screw tightly to close the tube.

- d) Shake the tube well until no stool sample remains in the notches. Important: Please make sure that you have a maximally homogenous suspension after shaking. Especially with more solid samples, soaking the sample in the tube with buffer for ~10 minutes improves the result.
- e) Allow sample to stand for ~10 minutes until sediment has settled. Floating material like shells of grains can be neglected.
- f) Carefully unscrew the complete cap of the tube including the blue ring plus the dipstick. Discard cap and dipstick. Make sure that the sediment will not be dispersed again.

Dilution: 1:50

To $50 \mu l$ of this supernatant a derivatisation reagent is added (see derivatisation procedure).

6. ASSAY PROCEDURE

Principle of the test

This ELISA is designed for the quantitative determination of serotonin in stool. The assay is based on the method of competitive enzyme linked immunoassays.

The sample preparation includes the addition of a derivatisation reagent for serotonin derivatisation. Afterwards, the treated samples and the polyclonal serotonin antiserum are incubated in the wells of a microtiter plate coated with serotonin derivative (tracer). During the incubation period, the target serotonin in the sample competes with the tracer, immobilised on the wall of the microtiter wells, for the binding of the polyclonal antibodies.

During the second incubation step, a peroxidase-conjugated antibody is added to detect the anti-serotonin antibodies. After washing away the unbound components, tetramethylbenzidine (TMB) is added as a peroxidase substrate. Finally, the enzymatic reaction is terminated by an acidic stop solution. The colour changes from blue to yellow, and the absorbance is measured in the photometer at 450 nm. The intensity of the yellow colour is inverse proportional to the serotonin concentration in the sample; this means, high serotonin concentration in the sample reduces the concentration of tracer-bound antibodies and lowers the photometric signal. A dose response curve of the absorbance unit (optical

density, OD at 450 nm) vs. concentration is generated, using the values obtained from the standard. Serotonin, present in the patient samples, is determined directly from this curve.

Derivatisation procedure

Bring all reagents and samples to room temperature (15-30 °C) and mix well.

Derivatisation of standards, controls and samples is carried out in single analysis in vials (e.g. 1.5 ml polypropylene vials).

We recommend preparing one derivatisation per standard, control and sample and transferring it in duplicate determinations into the wells of the microtiter plate.

1.	Add 50 µl standard (STD)/ control (CTRL)/ stool extract in the corresponding vials.
2.	Add 500 μl reaction buffer (REABUF) into each vial (STD, CTRL, sample).
3.	Add 50 µl derivatisation reagent into each vial (STD, CTRL, sample) and mix thoroughly for several seconds on a vortex mixer or by inversion.
4.	Incubate for 30 min at room temperature (15-30 °C) on a horizontal shaker .

 $2 \times 50 \mu l$ of the derivatised standards, controls and samples are used in the ELISA as duplicates.

Test procedure

Mark the positions of standards/controls/samples in duplicate on a protocol sheet. Take as many microtiter strips as needed from the kit. Store unused strips covered with foil at 2-8 °C. Strips are stable until expiry date stated on the label.

5.	For the analysis in duplicate take $2 \times 50 \mu l$ of the derivatised standards controls/samples out of the vials and add into the respective wells of the microtiter plate.			
6.	Add 50 µl serotonin antibody into each well of the microtiter plate.			
7.	Cover the plate tightly with foil and incubate for 1 hour at room temperature (15-30 °C) on a horizontal shaker .			

8.	Discard the content of each well and wash 5 times with 250 µl wash buffer . After the final washing step, remove residual wash buffer by firmly tapping the plate on absorbent paper.		
9.	Add 100 μl conjugate (CONJ) into each well.		
10.	Cover the plate and incubate for 30 minutes at room temperature (15-30 °C) on a horizontal shaker .		
11.	Discard the content of each well and wash 5 times with 250 µl wash buffer . After the final washing step, remove residual wash buffer by firmly tapping the plate on absorbent paper.		
12.	Add 100 μl substrate (SUB) into each well.		
13.	Incubate for 10-14 min * at room temperature (15-30 °C) in the dark .		
14.	Add 100 μl stop solution (STOP) into each well and mix well.		
15.	Determine absorption immediately with an ELISA reader at 450 nm against 620 nm (or 690 nm) as a reference. If no reference wavelength is available, read only at 450 nm. If the extinction of the highest standard exceeds the range of the photometer, absorption must be measured immediately at 405 nm against 620 nm (690 nm) as a reference.		

^{*} The intensity of the colour change is temperature sensitive. We recommend observing the colour change and stopping the reaction upon good differentiation.

For automated ELISA processors, the given protocol may need to be adjusted according to the specific features of the respective automated platform. For further details please contact your supplier or Immundiagnostik AG.

7. RESULTS

The following algorithms can be used alternatively to calculate the results. We recommend using the 4 parameter algorithm.

1. 4 parameter algorithm

It is recommended to use a linear ordinate for optical density and a logarithmic abscissa for concentration. When using a logarithmic abscissa, the zero standard must be specified with a value less than 1 (e.g. 0.001).

2. Point-to-point calculation

We recommend a linear ordinate for optical density and a linear abscissa for concentration.

3. Spline algorithm

We recommend a linear ordinate for optical density and a linear abscissa for concentration.

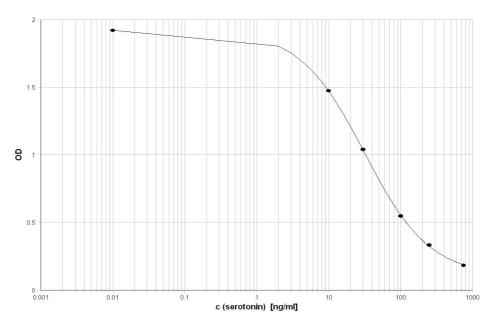
The plausibility of the duplicate values should be examined before the automatic evaluation of the results. If this option is not available with the program used, the duplicate values should be evaluated manually.

Stool

The obtained results have to be multiplied by the dilution **factor of 50** to get the actual concentrations.

In case another dilution factor has been used, mulitply the obtained result with the dilution factor used.

In the following, an example of a standard curve is given. Do not use it for the calculation of your results.



8. LIMITATIONS

Samples with concentrations above the measurement range can be diluted with extraktion buffer (IDK® Amino Extract) and re-assayed. Please consider this dilution factor when calculating the results.

Samples with concentrations lower than the measurement range cannot be clearly quantified.

The upper limit of the measurement range can be calculated as:

highest concentration of the standard curve \times sample dilution factor to be used

The lower limit of the measurement range can be calculated as: analytical sensitivity × sample dilution factor to be used

Analytical sensitivity see chapter "Performance Characteristics".

Biotin interference

Samples containing a biotin concentration of \leq 400 ng/ml show a change of the results of < 25 %. Higher concentrations of biotin can lead to falsely low results. Patients taking > 5 mg biotin per day should wait at least 24 hours after taking biotin to have their samples collected. Results of patients taking biotin supplements or receiving a high-dose biotin therapy should generally be interpreted along with the total clinical picture.

9. QUALITY CONTROL

Immundiagnostik AG recommends the use of external controls for internal quality control, if possible.

Control samples should be analysed with each run. Results, generated from the analysis of control samples, should be evaluated for acceptability using appropriate statistical methods. The results for the patient samples may not be valid if within the same assay one or more values of the quality control samples are outside of the acceptable limits.

Reference Range

Based on internal studies with samples from apparently healthy persons (n = 40), the following normal range was estimated:

Median: 1830 ng/ml 10th percentile: 734 ng/ml 90th Percentile: 2434ng/ml

We recommend each laboratory to establish its own reference range.

10. PERFORMANCE CHARACTERISTICS

Accuracy – Precision

Repeatability (Intra-Assay); n = 16

The repeatability was assessed with 4 samples under constant parameters (same operator, measurement system, day and kit lot).

sample	mean value [ng/ml]	CV [%]
1	4354	4,5
2	1229	6,1
3	1059	9,8
4	829	8,9

Reproducibility (Inter-Assay); n = 12

The reproducibility was assessed with 3 samples under varying parameters (different operators, measurement systems, days and kit lots).

sample	mean value [ng/ml]	CV [%]
1	5180	8.3
2	1238	8.9
3	676	12.7

Accuracy – Trueness

The trueness states the closeness of the agreement between the result of a measurement and the true value of the measurand. Therefore, three high level samples (spikes) were added to 3 low level samples. The expected values result from the mean of sample and spike.

sample [ng/ml]	spike [ng/ml]	expected [ng/ml]	obtained [ng/ml]	recovery [%]
	5553	3413	3564	104.4
1273	3644	2459	2442	99.3
	2627	1950	1872	96.0
	5553	3164	3313	104.7
774	3644	2209	2348	106.3
	2627	1700	1634	96.1
	5553	3180	3560	111.9
807	3644	2226	2038	91.6
	2627	1717	1744	101.6

Linearity

The linearity states the ability of a method to provide results proportional to the concentration of analyte in the test sample within a given range. This was assessed with a serial dilution of 3 extracted stool samples.

For Serotonin in stool, the method has been demonstrated to be linear from 7.0 to 89.9 ng/ml based on the standard curve without considering possibly used sample dilution factors, showing a non-linear behaviour of less than ± 15 % in this interval.

sample [ng/ml]	dilution	expected [ng/ml]	obtained [ng/ml]	recovery [%]
	1:50		89.9	
	1:75	59.9	54.5	91.0
	1:100	44.9	44.6	99.1
Α	1:150	30.0	31.8	106.0
	1:200	22.5	19.9	88.7
	1:300	15.0	14.4	96.2
	1:400	11.2	12.5	111.6
	1:50		42.2	
	1:75	28.1	29.5	105.0
В	1:100	21.1	22.2	105.0
	1:150	14.1	14.3	102.0
	1:200	10.5	11.3	107.0
	1:300	7.0	8.1	114.8
	1:50		30.1	
	1:75	20.1	20.1	99.9
C	1:100	15.1	16.9	112.1
	1:150	10.0	11.2	111.8
	1:200	7.5	8.4	111.3

Analytical sensitivity

The zero-standard was measured 80 times. The detection limit was set as B_0 - 2 SD and estimated to be 2.07 ng/ml.

Analytical specificity

The specificity of the antibody was tested by measuring the cross-reactivity against a range of compounds with structural similarity to serotonin. The specificity is calculated in percent in relation to the serotonin-binding activity:

3-Indoleacrylic acid	< 0.04%
Indole-3-pyruvic acid	< 0.03%
3-Indoleacetic acid	< 0.05 %

5-Methoxytryptophol	< 0.15 %
L-5-OH-tryptophan	< 0.21 %

11. PRECAUTIONS

• All reagents in the kit package are for in vitro diagnostic use only.

- Kit reagents contain sodium azide or ProClin as bactericides. Sodium azide and ProClin are toxic. Substrates for the enzymatic colour reactions are toxic and carcinogenic. Avoid contact with skin or mucous membranes.
- The stop solution consists of diluted sulfuric acid, a strong acid. Although diluted, it still must be handled with care. It can cause burns and should be handled with gloves, eye protection, and appropriate protective clothing. Any spill should be wiped up immediately with copious quantities of water. Do not breathe vapour and avoid inhalation.

12. TECHNICAL HINTS

- Do not interchange different lot numbers of any kit component within the same assay. Furthermore, we recommend not assembling wells of different microtiter plates for analysis, even if they are of the same batch.
- Control samples should be analysed with each run.
- Reagents should not be used beyond the expiration date stated on the kit label.
- Substrate solution should remain colourless until use.
- To ensure accurate results, proper adhesion of plate sealers during incubation steps is necessary.
- Avoid foaming when mixing reagents.
- Do not mix plugs and caps from different reagents.
- The assay should always be performed according to the enclosed manual.

13. GENERAL NOTES ON THE TEST AND TEST PROCEDURE

- This assay was produced and distributed according to the IVD guidelines of 98/79/EC.
- The guidelines for medical laboratories should be followed.
- *IDK*[®] is a trade mark of Immundiagnostik AG.

 Incubation time, incubation temperature and pipetting volumes of the components are defined by the producer. Any variation of the test procedure, which is not coordinated with the producer, may influence the results of the test. Immundiagnostik AG can therefore not be held responsible for any damage resulting from incorrect use.

 Warranty claims and complaints regarding deficiencies must be logged within 14 days after receipt of the product. The product should be sent to Immundiagnostik AG along with a written complaint.

14. REFERENCES

- 1. Dunlop SP, Coleman NS, Blackshaw E, et al. Abnormalities of 5-hydroxytryptamine metabolism in irritable bowel syndrome. *Clin Gastroenterol Hepatol.* **3**, 349-357 (2005). doi:10.1016/s1542-3565(04)00726-8
- 2. Gershon, M. D. 5-Hydroxytryptamine (serotonin) in the gastrointestinal tract. *Curr Opin Endocrinol Diabetes Obes* **20**, 14–21 (2013). doi:10.1097/MED
- 3. Yu F-Y, Huang S-G, Zhang H-Y, et al. Comparison of 5-hydroxytryptophan signaling pathway characteristics in diarrhea-predominant irritable bowel syndrome and ulcerative colitis. *World J Gastroenterol.* **22**, 3451-3459 (2016). doi:10.3748/wjg.v22.i12.3451

Used symbols:



Temperature limitation



Catalogue Number



In Vitro Diagnostic Medical Device



To be used with



Manufacturer



Contains sufficient for <n> tests



Lot number



Use by



Attention



Consult instructions for use



Consult specification data sheet