

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

Manual

IDK® anti-hnTG IgA ELISA

For the in vitro determination of autoantibodies (IgA) against human transglutaminase 6 in plasma and serum

Valid from 2021-07-12













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

Tel.: +49 6251 70190-0

Fax: +49 6251 70190-363

e.mail: info@immundiagnostik.com www.immundiagnostik.com

Table of Contents

1.	INTENDED USE	15
2.	INTRODUCTION	15
3.	MATERIAL SUPPLIED	15
4.	MATERIAL REQUIRED BUT NOT SUPPLIED	16
5.	STORAGE AND PREPARATION OF REAGENTS	16
6.	STORAGE AND PREPARATION OF SAMPLES	17
	Sample storageSample dilution	
7.	ASSAY PROCEDURE	17
	Principle of the test Test procedure	
8.	RESULTS	
9.	LIMITATIONS	20
10.	QUALITY CONTROL	20
	Reference range	20
11.	PERFORMANCE CHARACTERISTICS	21
	Accuracy - Precision	21
	Accuracy - Trueness	
	Linearity	
	Analytical specificity	
	Analytical sensitivity	
12.	PRECAUTIONS	23
13.	TECHNICAL HINTS	23
14.	GENERAL NOTES ON THE TEST AND TEST PROCEDURE	24

1. INTENDED USE

This Immundiagnostik AG assay is an enzyme immunoassay intended for the quantitative determination of anti-hnTG IgA ELISA in serum and plasma. For *in vitro* diagnostic use only.

2. INTRODUCTION

Gluten-associated diseases include celiac disease, wheat allergy and non-celicac gluten sensitivity. The worldwide prevalence is around 5%.

Celiac disease is the most common chronic disease of the small intestine. Gluten induces inflammation of the small intestinal mucosa, which can lead to the complete degradation of the small intestine villi.

In addition, celiac disease is a gluten-induced autoimmune disease which is characterised by auto-antibodies to TG2 (tissue transglutaminase). The serological celiac disease diagnosis is based on the detection of TG2 auto-antibodies and antibodies against DPG (deaminated gliadin peptide).

Including TG2, eight different transglutaminases are present in the human body. The gluten-induced skin disease dermatitis herpetiformis (Duhring-Brocq's disease), which can develop in parallel with celiac disease, is characterised by autoantibodies to TG3 (epidermal transglutaminase).

Autoantibodies directed against neuronal transglutaminase (TG6) have been detected in sera from patients with neurological disorders (e.g. ataxia, neuropathies, cerebral palsy, or stiff-person syndrome).

TG6 autoantibodies may be present in celiac disease patients in addition to TG2 autoantibodies, but have also been found in TG2 autoantibody-negative sera and in sera from patients without enteropathy (i. e. without celiac disease). Accordingly, TG6 autoantibodies can develop independently of celiac disease.

This ELISA is for the quantitative detection of antibodies to TG6 in human serum.

3. MATERIAL SUPPLIED

Cat. No.	Label	Kit components	Quantity
K 9400	PLATE	Microtiter plate, pre-coated	12 x 8 wells
K 0001.C.100	WASHBUF	Wash buffer concentrate, 10 x	2 x 100 ml
K 9400	CONJ	Conjugate, ready-to-use	1 x 15 ml
K 9400	STD	Standards, lyophilised (see specification for concentrations)	4x 5 vials

Cat. No.	Label	Kit components	Quantity
K 9400	CTRL1	Control, lyophilised (see specification for range)	4 x 1 vial
K 9400	CTRL2	Control, lyophilised (see specification for range)	4 x 1 vial
K 9400	SAMPLEBUF	Sample dilution buffer, ready-to-use	1 x 100 ml
K 0002.15	SUB	Substrate (tetramethylbenzidine), ready-to-use	1 x 15 ml
K 0003.15	STOP	Stop solution, ready-to-use	1 x 15 ml

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

4. MATERIAL REQUIRED BUT NOT SUPPLIED

- · Ultra pure water*
- Calibrated precision pipettors and 10–1000 µl single-use tips
- · Foil to cover the microtiter plate
- · Horizontal microtiter plate shaker
- · Multi-channel pipets or repeater pipets
- Centrifuge
- Vortex
- Standard single-use laboratory glass or plastic vials, cups, etc.
- Microtiter plate reader (required filters see chapter 7)

5. STORAGE AND PREPARATION OF REAGENTS

- To run the assay more than once, ensure that reagents are stored at the conditions stated on the label. Prepare only the appropriate amount necessary for each run. The kit can be used up to 4 times within the expiry date stated on the label.
- Preparation of the wash buffer: The wash buffer concentrate (WASHBUF)
 has to be diluted with ultra pure water 1:10 before use (100 ml WASHBUF +
 900 ml ultra pure 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 can

^{*} Immundiagnostik AG recommends the use of Ultra Pure 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).

be used until the expiry date stated on the label when stored at **2–8 °C**. **Wash buffer** (1:10 diluted WASHBUF) can be stored in a closed flask at **2–8 °C for 1 month**.

- The lyophilised standards (STD) and controls (CTRL) can be used until the
 expiry date stated on the label when stored at 2–8 °C. Reconstitution details
 are given in the specification data sheet. Standards and controls (reconstituted STD and CTRL) are not stable and cannot be stored.
- All other test reagents are ready-to-use. Test reagents can be used until the expiry date (see label) when stored at 2–8 °C.

6. STORAGE AND PREPARATION OF SAMPLES

Sample storage

Avoid repeated thawing and freezing of samples.

Sample dilution

EDTA plasma or serum samples must be diluted **1:250** in sample dilution bufffer (SAMPLEBUF) before performing the assay, e.g.

- 20 µl sample + 180 µl SAMPLEBUF, mix well = 1:10 (dilution I)
- 20 μ l dilution I + 480 μ l SAMPLEBUF, mix well = 1:25 (dilution II)

 $100 \,\mu l$ of the **dilution II** are used in the test per well.

7. ASSAY PROCEDURE

Principle of the test

This ELISA is designed for the quantitative determination of neuronal transglutaminase (TG6).

The wells of the microtiter plate are coated with TG6. At the surface of the wells, the following immunological reactions take place:

First reaction: TG6 antibodies from the sample bind to the immobilised antigen forming the antigen-antibody complex. Afterwards, unbound sample components are washed from the microtiter plate.

Second reaction: A second antibody directed against human IgA and labelled with peroxidase (HRP) is added. This conjugate binds to the antigen-antibody complex. Excess conjugate is then washed from the microtiter plate.

Third reaction: The enzyme-labelled complex converts the colourless substrate in a coloured (blue) product. The extent of the colour development reflects the amount of TG6 antibody (IgA) present in the sample. Samples without TG6 antibodies remain colourless. 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. Anti-hnTG IgA, present in the patient samples, is determined directly from this curve.

Test procedure

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

Mark the positions of standards/controls/samples on a protocol sheet.

Take as many microtiter strips as needed from the kit. Store unused strips together with the desiccant bag in the closed aluminium packaging at $2-8^{\circ}$ C. Strips are stable until expiry date stated on the label.

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.

We recommend to carry out the tests in duplicate.

1.	Before use , wash the wells 5 times with 250 μl wash buffer . After the final washing step, remove residual wash buffer by firmly tapping the plate on absorbent paper.
2.	Add each $100\mu l$ standards/controls/diluted samples into the respective wells.
3.	Cover the strips and incubate for 1 hour at room temperature (15–30 $^{\circ}$ C) on a horizontal shaker *.
4.	Discard the content of each well and wash 5 times with 250 μ l wash buffer. After the final washing step, remove residual wash buffer by firmly tapping the plate on absorbent paper.
5.	Add 100 μl conjugate (CONJ) into each well.
6.	Cover the strips and incubate for 1 hour at room temperature (15–30 $^{\circ}$ C) on a horizontal shaker *.
7.	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.
8.	Add 100 μl substrate (SUB) into each well.

9.	Incubate for 10–20 min** at room temperature (15–30 °C) in the dark .		
10.	Add 100 μl stop solution (STOP) into each well and mix well.		
Determine absorption immediately with an ELISA reader at against 620 nm (or 690 nm) as a reference. If no reference wavel available, read only at 450 nm. If the extinction of the highest sexceeds the range of the photometer, absorption must be mimmediately at 405 nm against 620 nm as a reference.			

^{*} We recommend shaking the strips at 550 rpm with an orbit of 2 mm.

8. 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 the optical density and a logarithmic abscissa for the concentration. When using a logarithmic abscissa, the zero standard must be specified with a value less than 1 (e. q. 0.001).

2. Point-to-point calculation

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

3. Spline algorithm

We recommend a linear ordinate for the optical density and a linear abscissa for the 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 programme used, the duplicate values should be evaluated manually.

Plasma and serum samples

Since the sample dilution is already considered in the calibration curve, the dilution factor is 1.

In case **another dilution factor** has been used, multiply the obtained result by the dilution factor used.

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

9. LIMITATIONS

Samples with concentrations above the measurement range (see definition below) can be further diluted and re-assayed. Please consider this greater dilution when calculating the results.

Samples with concentrations lower than the measurement range (see definition below) 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:

 $LoB \times sample dilution factor to be used$

Analytical sensitivity \times sample dilution factor to be used

Analytical sensitivity see chapter "Performance Characteristics".

10. 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 sample are outside the acceptable limits.

Reference range

Based on Immundiagnostik AG in-house studies of plasma and serum samples of apparently healthy persons (n = 75), the following cut off was estimated.

plasma/serum: > 8,3 U/ml positive plasma/serum: < 8,3 U/ml negative

We recommend each laboratory to establish its own reference range.

11. PERFORMANCE CHARACTERISTICS

Accuracy - Precision

Repeatability (Intra-Assay); n = 20

The repeatability was assessed with 2 serum-samples under **constant** parameters (same operator, instrument, day and kit lot).

Sample	Mean value [U/ml]	CV [%]
1	19.16	4.2
2	6.25	6.9

Reproducibility (Inter-Assay); n = 48

The reproducibility was assessed with 2 serum-samples under **varying** parameters (different operators, instruments, days and kit lots).

Sample	Mean value [U/ml]	CV [%]
1	18.84	7.1
2	5.79	7.7

Accuracy - Trueness

The trueness states the closeness of the agreement between the result of a measurement and the true value of the measurand. Therefore, anti-hnTG IgA-spikes with known concentrations were added to one serum-sample. The table below shows the results:

Sample [U/ml]	Spike [U/ml]	Expected [µg/ml]	Obtained [μg/ml]	Recovery [%]
	53.33	54.36	42.83	78.78
	35.56	36.62	28.29	77.24
	23.70	24.80	21.08	85.01
1.154	15.80	16.92	14.88	87.96
1.154	10.53	11.66	11.42	97.93
	7.02	8.16	8.07	98.89
	4.68	5.82	5.62	96.47
	3.12	4.27	4.15	97.27

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 according to CLSI guideline EP06-A by a serial dilution of 2 different serum-samples.

For anti-hnTG IgA in serum and EDTA-plasma, the method has been demonstrated to be linear from 8.53 to 97.12 U/ml, showing a non-linear behaviour of less than $\pm 20\%$ in this interval.

Sample	Dilution	Expected [U/ml]	Obtained [U/ml]	Recovery [%]
	Undiluted	91.02	91.02	100.00
	1:1.50	60.68	57.98	95.56
_	1:2.25	40.45	42.83	105.86
Α	1:3.38	26.97	28.29	104.90
	1:5.06	17.98	21.08	117.26
	1:7.59	11.99	14.88	124.16
	Undiluted	97.12	97.12	100.00
	1:1.50	64.75	66.05	102.02
	1:2.25	43.16	45.10	104.48
В	1:3.38	28.78	33.33	115.84
	1:5.06	19.18	23.55	122.76
	1:7.59	12.79	15.42	120.53
	1:11.39	8.53	10.05	117.87

Analytical specificity

The specificity of the antibody was tested by measuring the cross-reactivity against compounds with structural similarity to anti-hnTG IgA. There was no cross-reactivity observed with anti-heTG IgA. The cross-reactivity with anti-htTG slgA was found below 1%.

Substance tested	Concentration added [µg/ml]	Conclusion
anti-heTG IgA	10	< LoB
anti-htTG slgA	10	< 1%

Analytical sensitivity

Limit of blank, LoB 0.155 U/ml
Limit of detection, LoD 0.431 U/ml
Limit of quantitation, LoQ 0.851 U/ml

The evaluation was performed according to the CLSI guideline EP-17-A2. The specified accuracy goal for the LoQ was 20 % CV.

12. 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 10x Wash buffer concentrate (WASHBUF) contains surfactants which may cause severe eye irritation in case of eye contact



Warning: Causes serious eye irritation

• **IF IN EYES:** Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. If eye irritation persists: get medical Advice/attention.

• The stop solution consists of diluted sulphuric acid, a strong acid. Although diluted, it still should 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 breath vapour and avoid inhalation.

13. 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.

14. 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 trademark 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 send to Immundiagnostik AG along with a written complaint.

Used symbols:

