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**Manual**

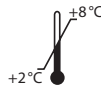
## **IDK<sup>®</sup> Bile Acids**

***Photometric test system for the in vitro determination  
of bile acids in stool***

Valid from 2020-05-12



**K 7878CV**



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## 1. INTENDED USE

This photometric assay is intended for the quantitative determination of bile acids in stool. For *in vitro* diagnostic use only.

## 2. INTRODUCTION

Bile acids are produced in the liver as end-products of cholesterol metabolism. Together with other components of the liver bile, such as cholesterol, bilirubin, phospholipids and proteins, bile acids are secreted into the duodenum.

Important functions of bile acids are the excretion of cholesterol, absorption of fatty acids and fat-soluble vitamins in the small intestine as well as stimulation of intestinal motility.

The majority of the secreted bile acids are reabsorbed in the terminal ileum and returned to the liver via the portal venous system for eventual recirculation in a process known as enterohepatic circulation; only a small proportion (3–5%) are excreted into the feces.

If the enterohepatic recycling of bile acids fails, excess amounts of bile acids enter the colon and are lost with the feces; this condition is called bile acid malabsorption.

### Indications

Suspected bile acid malabsorption

- After resection of the terminal ileum
- Crohn's Disease affecting the terminal ileum
- Radiation enteritis
- Post-cholecystectomy
- Post-vagotomy
- Celiac disease
- Chronic pancreatitis
- idiopathic bile acid malabsorption

## 3. MATERIAL SUPPLIED

Cat. No.	Label	Kit components	Quantity
K 7878CV	STD5	Standard 48 µmol/l, ready-to-use	1 x 250 µl
K 7878CV	CTRL1	Control, ready-to-use (see specification for range)	1 x 250 µl
K 7878CV	CTRL2	Control, ready-to-use (see specification for range)	1 x 250 µl

Cat. No.	Label	Kit components	Quantity
K 6999.C.100	IDK Extract®	Extraction buffer concentrate <i>IDK Extract®</i> , 2,5 x	1 x 100 ml
K 7878CV	RGZ1	Reagent 1, ready-to-use	1 x 20 ml
K 7878CV	RGZ2	Reagent 2, ready-to-use	1 x 6 ml

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

#### 4. MATERIAL REQUIRED BUT NOT SUPPLIED

- Ultrapure water\*
- Stool sample application system such as Cat. No.: K 6998SAS
- Calibrated precision pipettors and 10–1000 µl single-use tips
- Disposable cuvettes (we recommend PS 1,5 ml semi-micro disposable cuvettes, 12,5 x 12,5 x 45 mm, Brand GmbH + Co KG, D-97861 Wertheim, Germany, Cat. No. 7590 15)
- Vortex
- Standard single-use laboratory glass or plastic vials, cups, etc.
- Cuvette photometer (required filters see chapter 7)

\* 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 µm) with an electrical conductivity of 0.055 µS/cm at 25 °C (≥ 18.2 MΩ cm).

#### 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.**
- Reagents with a volume less than **100 µl** should be centrifuged before use to avoid loss of volume.
- **Preparation of the extraction buffer:** The **extraction buffer concentrate *IDK Extract®*** has to be diluted with ultra pure water **1:2.5** before use (100 ml *IDK Extract®* + 150 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 37 °C in a water bath. The *IDK Extract®* is stable at **2–8 °C** until the expiry date stated on the label. Extraction buffer (1:2.5 diluted *IDK Extract®*) can be stored in a closed flask at **2–8 °C for 4 months.**

- **Extraction buffer** is used as **blank**.
- All other test reagents are ready-to-use. Test reagents are stable until the expiry date (see label) when stored at **2–8 °C**.

## 6. STORAGE AND PREPARATION OF SAMPLES

### *Sample storage*

**Raw stool** can be stored for 3 days at room temperature, 7 days at 2–8 °C or 2 years at -20 °C. Avoid more than two freeze-thaw cycles.

**Stool extracts (1:100)** can be stored for 3 days at room temperature, 7 days at 2–8 °C or 14 days at -20 °C. Avoid more than three freeze-thaw cycles.

### *Extraction of the stool samples*

**Extraction buffer** (1:2.5 diluted *IDK Extract*®) is used as a **sample extraction buffer**. We recommend the following sample preparation:

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

##### ***Stool sample tube – Instructions for use***

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

##### ***SAS with 1.5 ml extraction buffer:***

Applied amount of stool: 15 mg

Buffer Volume: 1.5 ml

Dilution Factor: 1:100

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 homogenisation using an applicator, inoculation loop or similar device.
- b) Fill the **empty stool sample tube** with **1.5 ml extraction buffer** (1:2.5 diluted *IDK Extract*®) before using it with the sample. **Important:** Allow the extraction buffer to reach room temperature.

- 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 dipstick back into the tube. When putting the stick back into the tube, excess material will be stripped off, leaving 15 mg of sample to be diluted. Screw tightly to close the tube.
- d) Vortex 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 :** **1:100**

**30 µl of this dilution** are used in this test.

## 7. ASSAY PROCEDURE

### *Principle of the test*

This assay is designed for the quantitative determination of bile acids in stool.

In the presence of excess thio-NAD, bile acids are converted to 3-keto steroids by the enzyme 3- $\alpha$ -hydroxysteroid dehydrogenase while thio-NADH is formed.

The rate of formation of thio-NADH can be determined by the change of absorbance (DOD) at 405 nm.

The bile acids concentration of the samples is determined directly from the accompanied standard.

### *Test procedure*

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

We recommend to carry out the tests in duplicate.

1.	Pipet <b>450 µl reagent 1</b> (RGZ1) into the cuvette.
2.	Add each <b>30 µl standard/controls/blank/diluted samples</b> into the respective cuvette and mix well.

3.	Incubate <b>5 min</b> at room temperature (15–30 °C).
4.	Add <b>150 µl reagent 2</b> (RGZ2) and mix well.
5.	Incubate <b>1 min</b> at room temperature (15–30 °C).
6.	Take the <b>first measurement</b> of absorption <b>directly after the 1 minute incubation</b> , cover the cuvette for <b>2 min</b> (please note the exact time interval) and then take a <b>second measurement</b> . The slope ( $\Delta OD$ ) corresponds to the difference of final OD and start OD divided by the time interval between the two measurements. $\Delta OD = (\text{final OD} - \text{start OD})/\text{time interval}$

## 8. RESULTS

### Calculation of sample concentration

$$\text{Concentration}_{\text{sample}} = \frac{\Delta OD_{\text{sample}} - \Delta OD_{\text{blank}}}{\Delta OD_{\text{standard}} - \Delta OD_{\text{blank}}} \times 48 \mu\text{mol/l}$$

The obtained results have to be multiplied by the **dilution factor of 100** to get the actual concentrations.

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

## 9. LIMITATIONS

Samples with a concentration of bile acids higher than the standard 48 µmol/l can be further diluted with sample extraction buffer and re-assayed. For the following analysis, the changed dilution factor has to be taken into consideration.

## 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 studies of stool samples of apparently healthy persons (n = 1 179), the following values were estimated (1 g stool  $\pm$  1 ml):

90% reference range	0.78–6,54 $\mu\text{mol/g}$	( $\pm$ 780–6 540 $\mu\text{mol/l}$ )
Median	2.79 $\mu\text{mol/g}$	( $\pm$ 2 790 $\mu\text{mol/l}$ )

We recommend each laboratory to establish its own reference range.

## 11. PERFORMANCE CHARACTERISTICS

### Accuracy – Precision

#### Reproducibility (Inter-Assay); n = 7

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

Sample	Mean value [ $\mu\text{mol/l}$ ]	CV [%]
1	32.79	7.4
2	8.17	6.5
3	32.50	6.9

### Accuracy – Trueness

The trueness states the closeness of the agreement between the result of a measurement and the true value of the measurand. Therefore, bile acid spikes with known concentrations were added to 2 different stool samples. The results below were obtained without consideration of the sample dilution factor.

Sample [ $\mu\text{mol/l}$ ]	Spike [ $\mu\text{mol/l}$ ]	Expected [ $\mu\text{mol/l}$ ]	Obtained [ $\mu\text{mol/l}$ ]	Recovery [%]
37.81	2.29	40.10	39.23	97.84
	4.36	42.17	42.07	99.74
	6.26	44.07	43.63	99.01
52.24	2.29	54.53	57.99	106.35
	4.36	56.61	62.17	109.83
	6.26	58.50	60.08	102.70



### 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 EP6-A with a serial dilution of 3 different stool samples.

For bile acids in stool, the method has been demonstrated to be linear from 10.98 to 36.83  $\mu\text{mol/l}$  based on the standard without considering possibly used sample dilution factors, showing a non-linear behaviour of less than  $\pm 20\%$  in this interval.

Sample	Dilution	Expected [ $\mu\text{mol/l}$ ]	Obtained [ $\mu\text{mol/l}$ ]	Recovery [%]
A	1:100	21.96	21.96	100.00
	1:125	17.57	17.50	99.64
	1:150	14.64	14.98	102.30
	1:175	12.55	11.75	93.65
	1:200	10.98	11.10	101.10
B	1:100	36.83	36.83	100.00
	1:125	29.46	28.20	95.71
	1:150	24.55	22.14	90.19
	1:175	21.05	20.03	95.19
	1:200	18.41	16.16	87.75
C	1:100	33.65	33.65	100.00
	1:125	26.92	25.14	93.37
	1:150	22.43	20.33	90.64
	1:175	19.23	17.34	90.18
	1:200	16.83	16.07	95.48

### Analytical sensitivity

The following values have been estimated based on the concentrations of the standard without considering possibly used sample dilution factors.

Limit of blank, LoB

0.186  $\mu\text{mol/l}$

### Analytical specificity – Interferences

There was no interference observed with the following substances: Hemoglobin, bilirubin, triglycerides and ascorbic acid.

## 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. Avoid contact with skin or mucous membranes.

## 13. TECHNICAL HINTS

- Do not interchange different lot numbers of any kit component within the same assay.
- Control samples should be analysed with each run.
- Reagents should not be used beyond the expiration date stated on the kit label.
- 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® and IDK Extract® are trademarks 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.

## 15 .REFERENCES

1. Camilleri, M., 2014. Advances in understanding of bile acid diarrhea. *Expert review of gastroenterology & hepatology*, **8**(1), pp.49–61.
2. Halilbasic, E., Claudel, T. & Trauner, M., 2013. Bile acid transporters and regulatory nuclear receptors in the liver and beyond. *Journal of Hepatology*, **58**(1), pp.155–168.
3. Vijayvargiya, P. et al., 2013. Methods for diagnosis of bile acid malabsorption in clinical practice. *Clinical Gastroenterology and Hepatology*, **11**(10), pp.1232–1239.
4. Müller-Lissner, S. a & Pirk, O., 2002. Irritable bowel syndrome in Germany. A cost of illness study. *European journal of gastroenterology & hepatology*, **14**(12), pp.1325–1329.

### 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		