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Instruction for use
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ORG 604M Anti-dsDNA IgM

Immunometric Enzyme Immunoassay for the quantitative determination of IgM autoantibodies to double-stranded DNA

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NAME AND INTENDED USE

Anti-dsDNA is an indirect solid phase enzyme immunoassay (ELISA) for the quantitative measurement of IgM class autoantibodies against double-stranded DNA in human serum or plasma. The assay is intended for in vitro diagnostic use only as an aid in the diagnosis of Systemic Lupus Erythematosus (SLE).

SUMMARY AND EXPLANATION OF THE TEST

Autoimmune diseases are characterized by the occurrence of antibodies against own antigenic structures - so-called autoantibodies. Presence of autoantibodies to native Desoxyribonucleic acids (n-DNA, dsDNA, double-stranded DNA) is typical for the clinical picture of Systemic Lupus erythematosus (SLE).

Antibodies against dsDNA belong to the group of Anti Nuclear Antibodies (ANA), which are directed against various structures of the nucleus of the cell. They appear in a variety of rheumatoid diseases. Besides the ANA antibodies another group of autoantibodies is of interest, which are directed against the so-called Extractable Nuclear Antigens (ENA). The ARA criteria of the American Rheumatism Association provide an extensive diagnostic scheme for the diagnosis of Systemic Lupus erythematosus (SLE). In case that at least 4 of the eleven ARA criteria are fulfilled, SLE is highly predictive [8].

Antibodies to dsDNA are found during the active phases of SLE, where the serum concentration exhibits positive correlation to the severity of the disease. An ongoing therapy may be monitored by the aid of autoantibody determination. Diagnostic sensitivity of the anti-dsDNA determination in cases of SLE is approximately 91 % combined with a diagnostic specificity of nearly 96 percent.

Antibodies against DNA can be differentiated into two groups:

1. antibodies, that bind only to native double-stranded DNA (dsDNA) and
2. antibodies recognizing single-stranded DNA (ssDNA) too.

Measurement of anti nuclear antibodies (ANA, or anti nuclear factor (ANF)) by indirect immunofluorescence test (IFT) is widely accepted as screening method in suspected SLE. Since in some stages of the diseases or during therapy IFT sometimes gives false results, a more specific test system is needed. Negative IFT for anti nuclear antibodies does not exclude the presence of anti-dsDNA antibodies, since the antigenic structures may be masked by other structures. Furthermore the ANA titers determined by IF test show only weak correlation to the severity of the disease.

Most antibodies against dsDNA are directed against the phosphate units of DNA. Thus, these autoantibodies also bind to DNA single strands. For quantitation of anti-dsDNA it has to be proven, that the antigen preparation exhibits no contamination with single stranded DNA. Autoantibodies against single-stranded DNA are mainly directed against its basic compound, which in the native DNA is masked inside the helical structure. In serum of SLE patients anti-ssDNA antibodies are found with a frequency of up to 87 percent during acute phases and 43 percent during inactive phases.

SLE like diseases are caused by some drugs. For differential diagnosis of drug-induced LE the determination of anti-ssDNA is a valuable diagnostic tool. In drug-induced LE anti-ssDNA is elevated in more than 50 percent of all cases. Furthermore elevated anti-ssDNA serum concentrations have been reported in Mononucleosis, Hepatitis and various forms of Leukemia.

PRINCIPLE OF THE TEST

Human recombinant double-stranded DNA (dsDNA) is bound to microwells. Antibodies to this antigen, if present in diluted serum or plasma, bind to the respective antigen. Washing of the microwells removes unspecific serum and plasma components. Horseradish peroxidase (HRP) conjugated anti-human IgM immunologically detects the bound patient antibodies forming a conjugate/antibody/antigen complex. Washing of the microwells removes unbound conjugate. An enzyme substrate in the presence of bound conjugate hydrolyzes to form a blue color. The addition of an acid stops the reaction forming a yellow end-product. The intensity of this yellow color is measured photometrically at 450 nm. The amount of colour is directly proportional to the concentration of IgM antibodies present in the original sample.

WARNINGS AND PRECAUTIONS

1. All reagents of this kit are strictly intended for in vitro diagnostic use only.
2. Do not interchange kit components from different lots.
3. Components containing human serum were tested and found negative for HBsAg, HCV, HIV1 and HIV2 by FDA approved methods. No test can guarantee the absence of HBsAg, HCV, HIV1 or HIV2, and so all human serum based reagents in this kit must be handled as though capable of transmitting infection.
4. Avoid contact with the TMB (3,3',5,5'-Tetramethyl-benzidine). If TMB comes into contact with skin, wash thoroughly with water and soap.
5. Avoid contact with the Stop Solution which is hydrochloric acid (1 M). If it comes into contact with skin, wash thoroughly with water and seek medical attention.
6. Some kit components (i.e. Controls, Sample buffer and Buffered Wash Solution) contain Sodium Azide as preservative. Sodium Azide (NaN_3) is highly toxic and reactive in pure form. At the product concentrations (0.09%), though not hazardous. Despite the classification as non-hazardous, we strongly recommend using prudent laboratory practices (see 8., 9., 10.).
7. Some kit components contain Proclin 300 as preservative. When disposing reagents containing Proclin 300, flush drains with copious amounts of water to dilute the components below active levels.
8. Wear disposable gloves while handling specimens or kit reagents and wash hands thoroughly afterwards.
9. Do not pipette by mouth.
10. Do not eat, drink, smoke or apply makeup in areas where specimens or kit reagents are handled.
11. Avoid contact between the buffered Peroxide Solution and easily oxidized materials; extreme temperature may initiate spontaneous combustion.

Observe the guidelines for performing quality control in medical laboratories by assaying controls and/or pooled sera. During handling of all kit reagents, controls and serum samples observe the existing legal regulations.

CONTENTS OF THE KIT

Package size	96 determ.
Qty.1	Divisible microplate consisting of 12 modules of 8 wells each, coated with human recombinant double-stranded DNA (dsDNA). Ready to use.
6 vials, 1,5 ml each	combined Calibrators with IgM class Anti-dsDNA antibodies (A-F) in a serum/buffer matrix (PBS, BSA, NaN_3 <0,1% (w/w)) containing: IgM: 0; 12.5; 25; 50; 100; and 200 U/ml. Ready to use.
2 vials, 1,5 ml each	Anti-dsDNA IgM Controls in a serum/buffer matrix (PBS, BSA, NaN_3 <0,1% (w/w)) positive (1) and negative (2), for the respective concentrations see the enclosed package insert. Ready to use.
1 vial, 20 ml	Sample buffer (Tris, NaN_3 <0,1% (w/w)), yellow, concentrate (5x).
1 vial, 15 ml	Enzyme conjugate solution (PBS, PROCLIN 300 <0,5% (v/v)), (light red) containing polyclonal rabbit anti-human IgM; labelled with horseradish peroxidase. Ready to use.
1 vial, 15 ml	TMB substrate solution. Ready to use.
1 vial, 15 ml	Stop solution (1 M hydrochloric acid). Ready to use.
1 vial, 20 ml	Wash solution (PBS, NaN_3 <0,1% (w/w)), concentrate (50x).

STORAGE AND STABILITY

1. Store the kit at 2-8 °C.
2. Keep microplate wells sealed in a dry bag with desiccants.
3. The reagents are stable until expiration of the kit.
4. Do not expose test reagents to heat, sun or strong light during storage and usage.
5. Diluted sample buffer and wash buffer are stable for at least 30 days when stored at 2-8 °C.

MATERIALS REQUIRED

Equipment

- Microplate reader capable of endpoint measurements at 450 nm
- Multi-Channel Dispenser or repeatable pipet for 100 μl
- Vortex mixer
- Pipets for 10 μl , 100 μl and 1000 μl
- Laboratory timing device
- Data reduction software

Preparation of reagents

- Distilled or deionized water

