

Instructions for Use



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SS-B-Ab ELISA

Cat.-No. : RE70101

Size : 96
(Break apart)

Storage : 2 - 8 °C

Enzyme immunoassay for the quantitative detection of antibodies
against La-antigen/SS-B in human serum

- For in-vitro diagnostic use only -



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Instruction manual

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1. Intended Use

SS-B-Ab ELISA is a solid phase enzyme immunoassay employing human recombinant La-antigen/SS-B for the quantitative detection of antibodies against La-antigen / SS-B in human serum. The assay is a tool in the diagnosis of Sjögren`s syndrome (SS) and systemic lupus erythematosus (SLE).

2. Clinical Application and Principle of the Assay

SS-B is a 48 kDa protein associated with RNA polymerase III which seems to assemble with all precursor RNAs transcribed by polymerase III. Numerous functions have been assigned for the SS-B protein including a role in transcription/termination of RNA synthesized by polymerase III, 3`RNA processing and nuclear import and retention. Furthermore it has been proposed to be an RNA chaperone which is involved in the stabilization of RNA secondary structure.

Autoantibodies against the ribonucleoprotein SS-A (formerly named Ro after prototype patient Robert) and SS-B (formerly named La after prototype patient Lane) are typical markers for Sjögren`s syndrome (SS) and systemic lupus erythematosus (SLE), both are systemic autoimmune diseases of unknown etiology and female predominance. SS is a disorder affecting exocrine glands such as lacrimal and salivary glands. Chronic inflammation dominated by plasmacells results in a proceeding loss of function described as Sicca-syndrome. The diagnosis of SS is based on testing for loss of excretory function in eye and salivary glands and detection of anti-SS-A and anti-SS-B.

Antibodies against SS-B proteins are found in 70-85% of patients with SS and in 20-30 % of SLE patients. Patients with anti-SS-B antibodies usually have antibodies against the Ro/SS-A antigen, too. These autoantibodies are of high diagnostic value for the Sicca-syndrome.

Both, anti-SS-A and anti-SS-B antibodies are associated with congenital heartblock and it has been demonstrated that these autoantibodies effect the calcium channels of fetal cardiomyocytes.

Principle of the test

Serum samples diluted 1:101 are incubated in the microplates coated with the specific antigen. Patient`s antibodies, if present in the specimen, bind to the antigen. The unbound fraction is washed off in the following step. Afterwards anti-human immunoglobulins conjugated to horseradish peroxidase (conjugate) are incubated and react with the antigen-antibody complex of the samples in the microplates. Unbound conjugate is washed off in the following step. Addition of TMB-substrate generates an enzymatic colorimetric (blue) reaction, which is stopped by diluted acid (color changes to yellow). The rate of color formation from the chromogen is a function of the amount of conjugate bound to the antigen-antibody complex and this is proportional to the initial concentration of the respective antibodies in the patient sample.

3. Kit Contents

To be reconstituted:

5x Sample Buffer 1 vial, 20 ml - 5x concentrated (capped white: yellow solution)
Containing: Tris, NaCl, BSA, sodium azide (preservative)

50x Wash Buffer 1 vial, 20 ml - 50x concentrated (capped white: green solution)
Containing: Tris, NaCl, Tween, sodium azide (preservative)

Ready to use:

Negative Control 1 vial, 1.5 ml (capped green: yellow solution)
Containing: Human serum (diluted), sodium azide (preservative)

Positive Control 1 vial, 1.5 ml (capped red: yellow solution)
Containing: Human serum (diluted), sodium azide (preservative)

Calibrators 6 vials, 1.5 ml each 0, 3, 10, 30, 100, 300 U/ml.
(color increasing with concentration)
Containing: Human serum (diluted), sodium azide (preservative)

Conjugate 1 vial, 15 ml IgG (capped blue: blue solution) ,
Containing: Anti-human immunoglobulins conjugated to horseradish peroxidase

TMB Substrate 1 vial, 15 ml (capped black)
Containing: Stabilized TMB/H₂O₂

Stop Solution 1 vial, 15 ml (capped white: colorless solution)
Containing: 1M Hydrochloric Acid

Microtiterplate 12x8 well strips with breakaway microwells
Coating see paragraph 1

Material required but not provided:

Microtiter plate reader 450 nm reading filter and optional 620 nm reference filter (600-690 nm). Glass ware, test tubes for dilutions. Distilled water. Vortex mixer, precision pipettes (10, 100, 200, 500, 1000 µl) or multipipette. Microplate washing device (multichannel pipette or automated system), adsorbent paper.

4. Storage and Shelf Life

Store all reagents and the microplate at 2-8°C, in their original containers. Once prepared, reconstituted solutions are stable for 1 month at 4°C, at least. ***Reagents and the microplate shall be used within the expiry date indicated on each component, only. Avoid intense exposure of TMB solution to light. Store microplates in designated foil, including the desiccant, and seal tightly.***

5. Precautions of Use

5.1 Health hazard data

THIS PRODUCT IS FOR IN VITRO DIAGNOSTIC USE ONLY. Thus, only staff trained and specially advised in methods of in vitro diagnostics shall perform the kit. Although this product is not considered particularly toxic or dangerous in conditions of normal use, refer to the following for maximum safety :

Recommendations and precautions

This kit contains potentially hazardous components. Reagents may be irritating to eyes and skin thus avoid contact with eyes and skin and wear disposable gloves. Do not smoke, eat or drink when manipulating the kit. Do not pipette by mouth. All human source material used for some reagents of this kit (controls, standards e.g.) has been tested by approved methods and found negative for HbsAg, Hepatitis C and HIV 1. However, no test can guarantee the absence of viral agents in such material completely. Thus handle kit controls, standards and patient samples as if capable of transmitting infectious diseases.

5.2 General Directions for Use

Do not mix or substitute reagents or microplates from different lot numbers. This may lead to variations in the results. Allow all components to reach room temperature (20-26°C) before use, mix well and follow the recommended incubation scheme for an optimum performance of the test. Always pipet substrate solution with clean tips only. Protect this reagent from light. Never pipette conjugate with tips used with other reagents prior.

6. Sample Collection, Handling and Storage

Use preferentially freshly collected serum samples. Do not use icteric, lipemic, hemolysed or bacterially contaminated samples. Sera with particles should be cleared by low speed centrifugation. Blood samples should be collected in dry tubes. After separation, the serum samples should be used immediately, respectively stored at 2-8°C up to three days, or frozen at -20°C for longer periods.

7. Assay Procedure

7.1 Preparations prior to pipetting

Dilute concentrated reagents:

Dilute the concentrated sample buffer 1:5 with distilled water (e.g. 20 ml plus 80 ml).

Dilute the concentrated wash buffer 1:50 with distilled water (e.g. 20 ml plus 980 ml).

Samples

Dilute serum samples 1:101 with sample buffer (1x)

e.g. 1000 µl sample buffer (1x) + 10 µl serum. Mix well !

Washing

Prepare 20 ml of diluted wash buffer (1x) per 8 wells or 200 ml for 96 wells

(e.g. 4 ml concentrate plus 196 ml distilled water).

Automated washing:

Consider excess volumes required for setting up the instrument and dead volume of robot pipette.

Manual washing:

Discard liquid from wells by inverting the plate. Knock the microwell frame with wells downside vigorously on clean adsorbent paper. Pipette 300 µl of diluted wash buffer into each well, wait for 20 seconds. Repeat the whole procedure twice again.

Microplates

Calculate the number of wells required for the test. Remove unused wells from the frame, replace and store in the provided plastic bag, together with desiccant, seal tightly (2-8°C).

7.2 Work flow

Pipette 100 µl of each patient's diluted serum into the designated microwells.

Pipette 100 µl calibrators OR cut-off control and negative and positive controls into the designated wells.

Incubate for 30 minutes at room temperature (20-26°C).

Wash 3x with 300 µl washing buffer (diluted 1:50).

Pipette 100 µl conjugate into each well.

Incubate for 15 minutes at room temperature (20-26°C).

Wash 3x with 300 µl washing buffer (diluted 1:50).

Pipette 100 µl TMB substrate into each well.

Incubate for 15 minutes at room temperature (20-26°C), in the dark.

Pipette 100 µl stop solution into each well, using the same order as pipetting the substrate.

Incubate 5 minutes minimum.

Agitate plate carefully for 5 sec.

Read absorbance at 450 nm (optionally 450/620 nm) within 30 minutes.

8. Quantitative Interpretation

Establish the standard curve by plotting the **optical density (O.D.) of each calibrator (y-axis)** with respect to the corresponding concentration values in **U/ml (x-axis)**. For best results we recommend log/lin coordinates and 4-Parameter Fit. From the O.D. of each sample, read the corresponding antibody concentrations expressed in **U/ml**.

Normal Range < 15 U/ml	Positive Results > 15 U/ml
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Example of a standard curve

We recommend pipetting calibrators in parallel for each run.

Calibrators IgG		O.D. 450/620 nm	CV %
0	U/ml	0.020	2.1
3	U/ml	0.124	2.8
10	U/ml	0.265	1.9
30	U/ml	0.565	2.0
100	U/ml	1.151	1.6
300	U/ml	2.134	0.9

For lot specific data, see enclosed quality control leaflet. Medical laboratories might perform an in-house Quality Control by using own controls and/or internal pooled sera, as foreseen by EU regulations. ***Do not use this example for interpreting patients results!***

9. Technical Data

Sample material:	serum
Sample volume:	10 µl of sample diluted 1:101 with 1x sample buffer
Total incubation time:	60 minutes at room temperature (20-26°C)
Calibration range:	0-300 U/ml
Analytical sensitivity:	1.0 U/ml
Storage:	at 2-8°C use original vials, only
Number of determinations:	96 tests

10. Performance Data

10.1 Analytical sensitivity

The analytical sensitivity of this kit has been found at 1.0 U/ml

10.2 Specificity

The microplates are coated with **human recombinant 48 kDa SS-B**.

No crossreactivities to other autoantigens have been found.

10.3 Linearity

Chosen sera have been tested with this kit and found to dilute linearly. However, due to the heterogeneous nature of human autoantibodies there might be samples that do not follow this rule.

10.4 Calibration

Due the lack of international reference calibration this assay is calibrated in arbitrary units (U/ml).

11. Literature

1. Kalden JR (1988)

Sjögren-Syndrom.

In Kalden JR (Hersg), *Klinische Rheumatologie*, S. 374-379; Springer-Verlag, Berlin

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Autoantibodies in Sjögren`s syndrome.

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3. Reichlin M and Wasicek CA 1983

Clinical and biological significance of antibodies to Ro/SS-A.

Hum Pathol 14: 401-405

4. Hendrick JP, Wolin SL, Rinke J, Lerner MR, Steitz JA (1981)

Ro small cytoplasmic ribonucleoproteins are a subclass of La ribonucleoproteins: further characterization of the Ro and La small ribonucleoproteins from uninfected mammalian cells.

Mol Cell Biol 1: 1138-1149.

5. Yoo CJ and Wolin SL (1997)

The Yeast La protein is required for the 3`endonucleolytic cleavage that matures tRNA precursors.

Cell 89: 393-402.

Pipetting Scheme

	Calibrators (A-F)	Controls	Samples
Pipette	Calibrators (A-F)	100 µl each	
Pipette	Controls	100 µl each	
Pipette	Prediluted samples (1:101)		100 µl each
Incubate	<i>30 min at room temperature (20-26°C)</i>		
Decant	<i>Wash 3x with 300 µl of wash buffer (1x)</i>		
Pipette	Conjugate	100 µl	100 µl
Incubate	<i>15 min at room temperature (20-26°C)</i>		
Decant	<i>Wash 3x with 300 µl of wash buffer (1x)</i>		
Pipette	Substrate	100 µl	100 µl
Incubate	<i>15 min at room temperature (20-26°C), in the dark.</i>		
Pipette	Stop Solution	100 µl	100 µl
Incubate	<i>5 min at room temperature (20-26°C)</i>		
<i>Agitate plate for 5 seconds and read OD at λ450 nm (optionally λ450/620 nm) within 30 minutes. Resulting color is stable for 30 minutes, at least.</i>			