

Instruction for use

A SOLID-PHASE ENZYME IMMUNOASSAY FOR THE QUANTITATIVE DETERMINATION OF FREE THYROXIN IN HUMAN BLOOD SERUM OR PLASMA

1. INTENDED USE

A solid-phase enzyme immunoassay for the quantitative determination of free thyroxin in blood serum or plasma.

This kit is designed for measurement of free thyroxin in blood serum or plasma. For possibility of use with other sample types, please, refer to Application Notes (on request). The kit contains reagents sufficient for 96 determinations and allows to analyze 41 unknown samples in duplicates.

2. SUMMARY AND EXPLANATION

Thyroid hormones thyroxin (T4) and 3,5,3'-triiodothyronine (T3) exert regulatory influences on growth, differentiation, cellular metabolism and development of skeletal and organ systems. T4 and T3 in blood are found both in free and bound form – mostly, they are bound to thyroxin binding globulin (TBG). Only free forms of T3 and T4 exert hormonal activity also their percentage is very low – 0.3% for T3 and 0.03% for T4.

The concentration of T4 is generally accepted as an index of thyroid function which provide enough information to differentiate between hyper-, hypo- and euthyroidism.

Elevation of total T4 is found in hyperthyroidism, in patients with tumours of pituitary gland, in subjects with elevated TBG level (pregnancy, acute or chronic active hepatitis, estrogen-secreting tumours or estrogen intake, hereditary elevation of TBG), in patients taking oral contraceptives, heroin, methadone, thyroid preparations, TSH, thyroliberin.

Low total T4 is found in hypothyroidism, in patients with panhypopituitarism, in subjects with low TBG level (acromegaly, nephritic syndrome, hypoproteinemia, chronic liver diseases, androgen-secreting tumours, hereditary reduction), in patients taking aminosalicilic and acetylsalicilic acids, cholestyramine, reserpine, potassium iodide, triiodothyronine.

3. PRINCIPLE OF THE TEST

This test is based on competition enzyme immunoassay principle. Tested specimen is placed into the microwells coated by specific murine monoclonal to T4-antibodies simultaneously with conjugated fT4-peroxidase. fT4 from the specimen competes with the conjugated fT4 for coating antibodies. After washing procedure, the remaining enzymatic activity bound to the microwell surface is detected and quantified by addition of chromogen-substrate mixture, stop solution and photometry at 450 nm. Optical density in the microwell is inversely related to the quantity of the measured analyte in the specimen.

4. WARNINGS AND PRECAUTIONS

4.1. For professional use only.

4.2. This kit is intended for in vitro diagnostic use only.

4.3. INFECTION HAZARD: There is no available test methods that can absolutely assure that Hepatitis B and C viruses, HIV-1/2, or other infectious agents are not present in the reagents of this kit. All human products, including patient samples, should be considered potentially infectious. Handling and disposal should be in accordance with the procedures defined by an appropriate national biohazard safety guidelines or regulations.

4.4. Avoid contact with stop solution containing 5,0% H₂SO₄. It may cause skin irritation and burns.

4.5. Wear disposable latex gloves when handling specimens and reagents. Microbial contamination of reagents may give false results.

4.6. Do not use the kit beyond the expiration date.

4.7. All indicated volumes have to be performed according to the protocol. Optimal test results are only obtained when using calibrated pipettes and microplate readers.

4.8. Do not smoke, eat, drink or apply cosmetics in areas where specimens or kit reagents are handled.

4.9. Chemicals and prepared or used reagents have to be treated as hazardous waste according to the national biohazard safety guidelines or regulations.

4.10. Do not mix reagents from different lots.

4.11. Replace caps on reagents immediately. Do not swap caps.

4.12. Do not pipette reagents by mouth.

4.13. Specimens must not contain any AZIDE compounds – they inhibit activity of peroxidase.

4.14. Safety Data Sheet for this product is available upon request directly from XEMA Co., Ltd.

4.15. The Safety Data Sheet fit the requirements of EU Guideline 91/155 EC.

5. KIT COMPONENTS

5.1. Contents of the Kit

Symbol	Description	Qty	Units	Colour code	Stability of opened/diluted components
1	T4 EIA strips, 8x12 wells	1	pcs		until exp.date
2	Calibrator set, 0.8 ml each. The set contains 6 calibrators: 0; 5; 10; 25; 50; 100 pmol/l	6	pcs	red (C1 - colourless)	2 months
3	Control serum (0.8 ml)	1	pcs	colourless	2 months
4	Conjugate, 11 ml	1	pcs	purple	until exp.date
5	Substrate solution, 11 ml	1	pcs	colourless	until exp.date
6	Washing solution concentrate 21x, 22 ml	1	pcs	colourless	Concentrate - until exp.date Diluted washing solution - 1 month at 2...+8°C or 5 days at RT
7	Stop solution, 11 ml	1	pcs	colourless	until exp.date
8	Plate sealing tape	2	pcs		N/A
9	Instruction fT4 EIA	1	pcs		N/A
10	QC data sheet fT4 EIA	1	pcs		N/A

5.2. Equipment and material required but not provided

- Distilled or deionized water;
- Automatic or semiautomatic multichannel micropipettes, 100–250 µl, is useful but not essential;
- Calibrated micropipettes with variable volume, range volume 25–250 µl;
- Calibrated microplate photometer with 450 nm wavelength and OD measuring range 0–3.0

5.3. Storage and stability of the Kit

Store the whole kit at +2...+8 °C upon receipt until the expiration date.

After opening the pouch keep unused microtiter wells TIGHTLY SEALED BY ADHESIVE TAPE (INCLUDED) to minimize exposure to moisture.

6. SPECIMEN COLLECTION AND STORAGE

This kit is intended for use with serum or plasma (ACD- or heparinized). Grossly hemolytic, lipemic, or turbid samples should be avoided.

Specimens may be stored for up to 48 hours at +2...+8 °C before testing. For a longer storage, the specimens should be frozen at -20 °C or lower. Repeated freezing/thawing should be avoided.

7. TEST PROCEDURE**7.1. Reagent Preparation**

- All reagents (including unsealed microstrips) should be allowed to reach room temperature (+18...+25 °C) before use.
- All reagents should be mixed by gentle inversion or vortexing prior to use. Avoid foam formation.
- It is recommended to spin down shortly the tubes with calibrators on low speed centrifuge.
- Prepare washing solution from the concentrate BUF WASH 21X by 21 dilutions in distilled water.

7.2. Procedural Note:

It is recommended that pipetting of all calibrators and samples should be completed within 3 minutes.

7.3. Assay flowchart

See the example of calibration graphic in Quality Control data sheet.

7.4. Assay procedure

1	Put the desired number of microstrips into the frame; allocate 14 wells for the calibrators CAL 1–6 and control samples CONTROL and two wells for each unknown sample. DO NOT REMOVE ADHESIVE SEALING TAPE FROM UNUSED STRIPS.
2	Pipet 25 µl of calibrators CAL 1–6, control samples CONTROL and unknown samples into the wells.
3	Dispense 100 µl of CONJ HRP into the wells. Cover the wells by plate adhesive tape (included into the kit).
4	Incubate 60 minutes at 37 °C.
5	Prepare washing solution by 21x dilution of washing solution concentrate (BUF WASH 21X) by distilled water. Wash the strips 5 times.
6	Dispense 100 µl of SUBS TMB into the wells
7	Incubate 10–20 minutes at +18...+25 °C
8	Dispense 100 µl of STOP into the wells.
9	Measure OD (optical density) at 450 nm.
10	Set photometer blank on air
11	Apply lin-log method for data reduction.

7.5. Handling notes

Calibrators and control sample(s) – only one freezing/thawing cycle is allowed

8. QUALITY CONTROL

It is recommended to use control samples according to state and federal regulations. The use of control samples is advised to assure the day to day validity of results.

The test must be performed exactly as per the manufacturer's instructions for use. Moreover the user must strictly adhere to the rules of GLP (Good Laboratory Practice) or other applicable federal, state, and local standards and/or laws. This is especially relevant for the use of control reagents. It is important to always include, within the test procedure, a sufficient number of controls for validating the accuracy and precision of the test.

The test results are valid only if all controls are within the specified ranges and if all other test parameters are also within the given assay specifications.

9. CALCULATION OF RESULTS

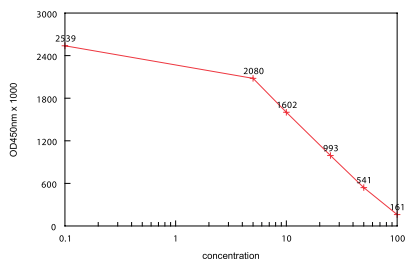
1. Calculate the mean absorbance values (OD450) for each pair of calibrators and samples.

2. Plot a calibration curve on graph paper: OD versus free thyroxin concentration.

3. Determine the corresponding concentration of free thyroxin in unknown samples from the calibration curve. Manual or computerized data reduction is applicable on this stage. Point-by-point or linear data reduction is recommended due to non-linear shape of curve.

4. Below is presented a typical example of a standard curve with the XEMA Co. Not for calculations!

Calibrators	Value	Absorbance Units (450 nm) x 1000
CAL 1	0 pmol/l	2539
CAL 2	5 pmol/l	2080
CAL 3	10 pmol/l	1602
CAL 4	25 pmol/l	993
CAL 5	50 pmol/l	541
CAL 6	100 pmol/l	161



10. EXPECTED VALUES

Therapeutical consequences should not be based on results of IVD methods alone – all available clinical and laboratory findings should be used by a physician to elaborate therapeutically measures. Each laboratory should establish its own normal range for FT4. Based on data obtained by XEMA, the following normal range is recommended (see below). NOTE: the patients that have received murine monoclonal antibodies for radioimaging or immunotherapy develop high titered anti-mouse antibodies (HAMA). The presence of these antibodies may cause false results in the present assay. Sera from HAMA positive patients should be treated with depleting adsorbents before assaying.

Sex, age	Units, pmol/l	
	Lower limit	Upper limit
Healthy donors		
<60 yrs	10.0	25
>60 yrs	10.0	21
Pregnancy week:		
1st trimester	9.0	26
2nd trimester	6.0	21
3rd trimester	6.0	21

11. PERFORMANCE CHARACTERISTICS

11.1. Analytical specificity / Cross reactivity

Analyte	Cross-reactivity, % wt/wt
L-Thyroxin	100
D-Thyroxin	30
T3	0.5

11.2. Analytical sensitivity

Sensitivity of the assay was assessed as being 1.5 pmol/l.

11.3. Linearity

Linearity was checked by assaying dilution series of 5 samples with different free thyroxin concentrations. Linearity percentages obtained ranged within 90 to 110%.

11.4. Recovery

Recovery was estimated by assaying 5 mixed samples with known free thyroxin concentrations. The recovery percentages ranged from 90 to 110%.

12. LITERATURE

1. Tietz, N. W., Fundamentals of Clinical Chemistry, 2nd Ed., pg. 602, Saunders Press, Phila., 1976.
2. Horworth, P. J. N., Ward, RL., J. Clin Pathol. 1972; 25:259-62.
3. Sati, C., Chatter, A. J., Watts, N. Fundamentals of Clinical Chemistry. Ed. Tietz, N. W. 3rd Ed., pg. 586. Saunders press Phila. 1987.
4. Lundberg, P. A., Jagenburg, R., Lindstedt, G., Nystrom, E., Clin. Chem. 1982, 28:1241.
5. Melmed, S., Geola, F. L., Reed, A. W., Pekary, A. E., Park, J., Hershmen, J. M., Clin Endocrin. Metabol. 1982, 54; 300.
6. Ingbar, S. H., et al. J. Clin. Invest., 1965, 44:1679.
7. Selenkow, H. A., and Robin, N. I., J. Maine Med. Assoc. 1970, 61:199.