HORSE HAPTOGLOBIN

Immunoperoxidase Assay for Determination of Haptoglobin in Horse Samples

DIRECTIONS FOR USE

Version2 1.1 - 1C1

For Research Use Only, NOT for Diagnostic Purposes

Please Read this Package Insert Completely Before Using This Product

INTENDED USE

The Haptoglobin test kits are a highly sensitive twosite enzyme linked immunoassay (ELISA) for measuring Haptoglobin in horse biological samples.

INTRODUCTION

Acute phase proteins are plasma proteins which increase in concentration following infection, inflammation or trauma. The first acute phase protein to be recognized was discovered in humans by Tillet and Frances in 1930¹. Haptoglobin (Hp) is a heterogeneous plasma protein mostly synthesized by the liver. The haptoglobin monomer consist of two heavy chains, beta chains (40 kD) and two light chains, alpha chains, alpha 1 (9 kD) and alpha 2 (16 kD) that are linked disulfide bonds. The three major haptoglobin types are; Hp1-1 which is monomeric (98kD), Hp1-2 is polymeric at about 200 kD, and Hp2-2 at about 400 kD. The levels in serum rise quickly following acute tissue damage within 24 to 48 hours and also fall very rapidly once the stimulus is In fact, Hp level are decreased in removed. Hp has a high affinity for hemolytic anemia. hemoglobin (Hb) and its function appears to be to prevent loss of Hb in urine which would lead to loss of iron. Investigations over the past few years have shown that quantification of Hp in plasma or serum can provide valuable diagnostic information in the detection, prognosis, and monitoring of disease not only in humans, but in companion animals and farm herds as well².

PRINCIPLE OF THE ASSAY

The principle of the double antibody sandwich ELISA is represented in Figure 1. In this assay the Haptoglobin present in samples reacts with the anti-Haptoglobin antibodies which have been adsorbed to the surface of polystyrene microtitre wells. After the removal of unbound proteins by washing, anti-Hp antibodies conjugated with horseradish peroxidase (HRP), are added. These enzyme-labeled antibodies form complexes with the previously bound Hp. Following another washing step, the enzyme bound to the immunosorbent is assayed by the addition of a chromogenic substrate, 3,3',5,5'-tetramethylbenzidine (TMB). The quantity of bound enzyme varies directly with the concentration of Hp in the sample tested; thus, the absorbance, at 450 nm, is a measure of the concentration of Hp in the test sample. The quantity of Hp in the test sample can be interpolated from the standard curve constructed from the standards, and corrected for sample dilution.

Anti-Hp Antibodies Bound To Solid Phase Standards and Samples Added Hp*Anti-Hp Complexes Formed Unbound Sample Proteins Removed Anti-Hp-HRP Conjugate Added Anti-Hp-HRP * Hp * Anti-Hp Complexes Formed Unbound Anti-Hp-HRP Removed Chromogenic Substrate Added

Determine Bound Enzyme Activity

Figure 1.

REAGENTS

(Quantities sufficient for 96 determinations)

1. DILUENT CONCENTRATE (Running Buffer) One bottle containing 50 ml of a 5X concentrated diluent running buffer.

2. WASH SOLUTION CONCENTRATE

One bottle containing 50 ml of a 20X concentrated wash solution.

3. ENZYME-ANTIBODY CONJUGATE 100X

One vial containing 150 μ L of affinity purified anti-Horse Haptoglobin antibody conjugated with horseradish peroxidase in a stabilizing buffer.

4. CHROMOGEN-SUBSTRATE SOLUTION

One vial containing 12 mL of 3,3',5,5'tetramethybenzidine (TMB) and hydrogen peroxide in citric acid buffer at pH 3.3.

5. STOP SOLUTION

One vial containing 12 ml 0.3 M sulfuric acid.

WARNING: Avoid contact with skin.

6. ANTI-HORSE HAPTOGLOBIN ELISA MICRO PLATE

Twelve removable eight (8) well micro well strips in well holder frame. Each well is coated with affinity purified anti-Horse Hp.

7. HORSE HAPTOGLOBIN STANDARDS One vial containing Horse Haptoglobin calibrator.

FOR IN VITRO USE ONLY

REAGENT PREPARATION

1. DILUENT CONCENTRATE

The Diluent Solution supplied is a 5X Concentrate and must be diluted 1/5 with distilled or deionized water (1 part buffer concentrate, 4 parts dH2O).

2. WASH SOLUTION CONCENTRATE

The Wash Solution supplied is a 20X Concentrate and must be diluted 1/20 with distilled or deionized water (1 part buffer concentrate, 19 parts dH2O). Crystal formation in the concentrate is not uncommon when storage temperatures are low. Warming of the concentrate to 30-35°C before dilution can dissolve crystals.

3. ENZYME-ANTIBODY CONJUGATE

Calculate the required amount of working conjugate solution for each microtitre plate test strip by adding 10 μ L Enzyme-Antibody Conjugate to 990 μ L of 1X Diluent for each test strip to be used for testing. Mix uniformly, but gently. Avoid foaming.

4. CHROMOGEN-SUBSTRATE SOLUTION Ready to use as supplied.

5. STOP SOLUTION

Ready to use as supplied.

6. ANTI-HORSE HAPTOGLOBIN ELISA MICRO PLATE

Ready to use as supplied. Unseal Microtiter Pouch and remove plate from pouch. Remove all strips and wells that <u>will not</u> be used in the assay and place back in pouch and re-seal.

7. HORSE HAPTOGLOBIN STANDARDS

The Horse Haptoglobin Calibrator should be aliquoted and stored frozen. It is at a concentration of 0.921 mg/ml and needs to be diluted in 1X diluent according to the chart below for each run. Horse Haptoglobin standards need to be prepared immediately prior to use (see chart below). Mix well between each step. Avoid foaming

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STORAGE AND STABILITY

The expiration date for the package is stated on the box label.

1. DILUENT

The 5X Diluent Concentrate is stable until the expiration date. The 1X working solution is stable for at least one week from the date of preparation. Both solutions should be stored at $4-8^{\circ}$ C.

2. WASH SOLUTION

The 20X Wash Solution Concentrate is stable until the expiration date. The 1X working solution is stable for at least one week from the date of preparation. Both solutions can be stored at room temperature $(16-25^{\circ}C)$ or at 4-8°C.

3. ENZYME-ANTIBODY CONJUGATE

Undiluted horseradish peroxidase anti-Hp conjugate should be stored at 4-8°C and **diluted immediately prior to use**. The working conjugate solution is stable for up to 8 hours.

4. CHROMOGEN-SUBSTRATE SOLUTION

The Substrate Solution should be stored at 4-8°C and is stable until the expiration date.

5. STOP SOLUTION

The Stop Solution should be stored at 4-8°C and is stable until the expiration date.

6. ANTI-HORSE HAPTOGLOBIN ELISA MICRO PLATE

Anti-Horse Hp coated wells are stable until the expiration date, and should be stored at 4-8°C in sealed foil pouch with desiccant pack.

7. HORSE HAPTOGLOBIN STANDARDS

Long Term Storage: Upon receipt, aliquot the calibrator and store them frozen. They will be stable until expiration date. Short Term Storage: the calibrator is stable for up to 14 days at 4°C. The working standard solutions should be prepared immediately prior to use and are stable for up to 8 hours.

INDICATIONS OF INSTABILITY

If the test is performing correctly, the results observed with the standard solutions should be within 20 % of the expected values.

SPECIMEN COLLECTION AND HANDLING

Blood should be collected by venipuncture. The serum should be separated from the cells after clot formation by centrifugation. For plasma samples, blood should be collected into a container with an anticoagulant and then centrifuged. Care should be taken to minimize hemolysis, excessive hemolysis can impact your results. Assay immediately or aliquot and store samples at -20°C. Avoid repeated freeze-thaw cycles.

1. Precautions

For any sample that might contain pathogens, care must be taken to prevent contact with open wounds.

2. Additives and Preservatives

No additives or preservatives are necessary to maintain the integrity of the specimen. Avoid azide contamination.

3. Known interfering substances

Azide and thimerosal at concentrations higher than 0.1% inhibits the enzyme reaction.

MATERIAL PROVIDED See "REAGENTS" MATERIALS REQUIRED BUT NOT PROVIDED

- Precision pipette (2 μL to 200 μL) for making and dispensing dilutions
- Test tubes
- Microtitre washer/aspirator
- Distilled or Deionized H₂O
- Microtitre Plate reader
- Assorted glassware for the preparation of reagents and buffer solutions
- Timer
- Vortex mixer

ASSAY PROTOCOL

DILUTION OF SAMPLES

The assay for quantification of Haptoglobin in samples requires that each test sample be diluted before use. For a single step determination a dilution of 1/10,000 is appropriate for most serum/plasma samples. For absolute quantification, samples that yield results outside the range of the standard curve, a lesser or greater dilution might be required. If unsure of sample level, a serial dilution with one or two representative samples before running the entire plate is highly recommended.

1. To prepare a 1/10,000 dilution of sample, transfer 5 μ L of sample to 495 μ L of 1X diluent. This gives you a 1/100 dilution. Next, dilute the 1/100 samples by transferring 5 μ L, to 495 μ L of 1X diluent. You now have a 1/10,000 dilution of your sample. Mix thoroughly at each stage.

PROCEDURE

1. Bring all reagents to room temperature before use.

2. Pipette 100 µL of

Standard 0 (0.0 ng/ml) in duplicate Standard 1 (18.75 ng/ml) in duplicate Standard 2 (37.5 ng/ml) in duplicate Standard 3 (75 ng/ml) in duplicate Standard 4 (150 ng/ml) in duplicate Standard 5 (300 ng/ml) in duplicate Standard 6 (600ng/ml) in duplicate

3. Pipette 100 μL of sample (in duplicate) into pre designated wells.

4. Incubate the micro titer plate at room temperature for thirty (30 ± 2) minutes. Keep plate covered and level during incubation.

5. Following incubation, aspirate the contents of the wells.

6. Completely fill each well with appropriately diluted Wash Solution and aspirate. Repeat three times, for a total of four washes. If washing manually: completely fill wells with wash buffer, invert the plate then pour/shake out the contents in a waste container. Follow this by sharply striking the wells on absorbent paper to remove residual buffer. Repeat 3 times for a total of four washes.

7. Pipette 100 μ L of appropriately diluted Enzyme-Antibody Conjugate to each well. Incubate at room temperature for thirty (30 ± 2) minutes. Keep plate covered in the dark and level during incubation.

8. Wash and blot the wells as described in Steps 5/6.

9. Pipette 100 μL of TMB Substrate Solution into each well.

10. Incubate in the dark at room temperature for precisely ten (10) minutes.

11. After ten minutes, add 100 μL of Stop Solution to each well.

12. Determine the absorbance (450 nm) of the contents of each well. Calibrate the plate reader to air.

STABILITY OF THE FINAL REACTION MIXTURE

The absorbance of the final reaction mixture can be measured up to 2 hours after the addition of the Stop Solution. However, good laboratory practice dictates that the measurement be made as soon as possible.

RESULTS

1. Subtract the average background value from the test values for each sample.

2. Using the results observed for the standards construct a Standard Curve. The appropriate curve

fit is that of a four-parameter logistics curve. A second order polynomial (quadratic) or other curve fits may also be used.

3. Interpolate test sample values from standard curve. Correct for sera dilution factor to arrive at the haptoglobin concentration in original samples.

LIMITATION OF THE PROCEDURE

1. Reliable and reproducible results will be obtained when the assay procedure is carried out with a complete understanding of the information contained in the package insert instructions and with adherence to good laboratory practice.

2. Factors that might affect the performance of the assay include proper instrument function, cleanliness of glassware, quality of distilled or deionized water, and accuracy of reagent and sample pipettings, washing technique, incubation time or temperature.

3. Do not mix or substitute reagents with those from other lots or sources.

REFERENCES

1. Tillett, W.S. and T. Francis. 1930. Serological reactions in pneumonia with non-protein somatic fraction of pneumococcus. J. Exp Med. 52:561-571.

2. Eckersal, P.D. 2000. Recent advances and future prospects for the use of acute phase proteins and markers of disease in animals. Revue Med. Vet. 151(7): 577-584.



Manufactured by:

Immunology Consultants Laboratory, Inc. 141 N. Elliott Rd | Newberg, OR 97132 | USA Phone (503) 538-5869 | Fax (503) 554-8510

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