

# Human Gc-Globulin ELISA Kit

#### Vertrieb:

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#### Hinweis/Note:

Der Packungsbeileger dient nur als erste Information. Der relevante Packungsbeileger liegt der Ware bei.

The datasheet is only a first information. The relevant datasheet is included with the product.

For any questions regarding troubleshooting or performing the assay, please contact our support team at <a href="mailto:support@assaypro.com">support@assaypro.com</a>.

Thank you for choosing Assaypro.

### **Symbol Key**



Consult instructions for use.

# **Assay Summary**

Add 25 μl of Standard/ Sample and 25 μl of Biotinylated Protein per well. Incubate 2 hours.



Wash, then add 50 μl of SP Conjugate per well. Incubate 30 minutes.



Wash, then add 50 μl of Chromogen Substrate per well. Incubate 20 minutes.



Add 50  $\mu$ l of Stop Solution per well. Read at 450 nm immediately.

# **Assay Template**

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# AssayMax Human Gc-Globulin ELISA Kit

Catalog No. EG3801-1
Sample Insert/Reference Only

#### Introduction

Gc-Globulin or vitamin D-binding protein is a multifunctional plasma protein with functions in the transport of vitamin D metabolites, control of bone development, binding of fatty acids, sequestration of actin and a range of less-defined roles in modulating immune and inflammatory responses (1). The Gc-globulin levels on healthy individuals range from 176 – 623 mg/L with no age dependency (2). A low serum level (<100 mg/L) of the actin-scavenger Gc-globulin is a prognostic marker of non-survival in fulminant hepatic failure (FHF) (3), trauma, and sepsis (4). Low Gc-globulin plasma or serum levels are also linked to osteoporosis, Graves' disease, Hashimoto's thyroiditis, diabetes, COPD, AIDS, multiple sclerosis, sarcoidosis, and rheumatic fever (5).

#### **Principle of the Assay**

The AssayMax Human Gc-Globulin ELISA (Enzyme-Linked Immunosorbent Assay) kit is designed for detection of human Gc-globulin in plasma, serum, saliva, milk, CSF, and cell culture samples. This assay employs a quantitative competitive enzyme immunoassay technique that measures human Gc-globulin in less than 3 hours. A polyclonal antibody specific for human Gc-globulin has been pre-coated onto a 96-well microplate with removable strips. Gc-globulin in standards and samples is competed with a biotinylated Gc-globulin sandwiched by the immobilized antibody and streptavidin-peroxidase conjugate. All unbound material is then washed away and a peroxidase enzyme substrate is added. The color development is stopped and the intensity of the color is measured.

#### **Caution and Warning**

- Prepare all reagents (working diluent buffer, wash buffer, standard, biotinylated protein, and SP conjugate) as instructed, prior to running the assay.
- Prepare all samples prior to running the assay. The dilution factors for the samples are suggested in this protocol. However, the user should determine the optimal dilution factor.
- Spin down the SP conjugate vial before opening and using contents.
- This kit is for research use only.

- The kit should not be used beyond the expiration date.
- The Stop Solution is an acidic solution.

#### Reagents

- **Human Gc-Globulin Microplate:** A 96-well polystyrene microplate (12 strips of 8 wells) coated with a polyclonal antibody against human Gc-globulin.
- **Sealing Tapes:** Each kit contains 3 precut, pressure sensitive sealing tapes that can be cut to fit the format of the individual assay.
- **Human Gc-Globulin Standard:** Human Gc-globulin in a buffered protein base (150 μg, lyophilized).
- **Biotinylated Human Gc-Globulin:** 1 vial, lyophilized.
- **EIA Diluent Concentrate (10x)**: A 10-fold concentrated buffered protein base (30 ml).
- Wash Buffer Concentrate (20x): A 20-fold concentrated buffered surfactant (30 ml).
- Streptavidin-Peroxidase Conjugate (SP Conjugate): A 100-fold concentrate (80 μl).
- **Chromogen Substrate**: A ready-to-use stabilized peroxidase chromogen substrate tetramethylbenzidine (8 ml).
- **Stop Solution**: A 0.5 N hydrochloric acid to stop the chromogen substrate reaction (12 ml).

#### **Storage Condition**

- Upon arrival, immediately store components of the kit at recommended temperatures up to the expiration date.
- Store SP Conjugate at -20°C.
- Store Microplate, Diluent Concentrate (10x), Wash Buffer, Stop Solution, and Chromogen Substrate at 2-8°C.
- Unused microplate wells may be returned to the foil pouch with the desiccant packs and resealed. May be stored for up to 30 days in a vacuum desiccator.
- Diluent (1x) may be stored for up to 30 days at 2-8°C.
- Store Standard and Biotinylated Protein at 2-8°C before reconstituting with Diluent and at -20°C after reconstituting with Diluent.

#### Other Supplies Required

- Microplate reader capable of measuring absorbance at 450 nm.
- Pipettes (1-20 μl, 20-200 μl, 200-1000 μl, and multiple channel).
- Deionized or distilled reagent grade water.

#### **Sample Collection, Preparation and Storage**

- Plasma: Collect plasma using one-tenth volume of 0.1 M sodium citrate as an anticoagulant. Centrifuge samples at 3000 x g for 10 minutes. Dilute samples 1:400 in EIA Diluent and assay. The undiluted samples can be stored at -20°C or below for up to 3 months. Avoid repeated freezethaw cycles (EDTA and Heparin can also be used as an anticoagulant).
- **Serum:** Samples should be collected into a serum separator tube. After clot formation, centrifuge samples at 3000 x g for 10 minutes, and remove serum. Dilute samples 1:400 into EIA Diluent and assay. The undiluted samples can be stored at -20°C or below for up to 3 months. Avoid repeated freeze-thaw cycles.
- **Saliva:** Collect saliva using sample tube. Centrifuge samples at 800 x g for 10 minutes. Dilute samples 1:2 into EIA Diluent and assay. The undiluted samples can be stored at -20°C or below for up to 3 months. Avoid repeated freeze-thaw cycles.
- **Milk:** Collect milk using sample tube. Centrifuge samples at 800 x g for 10 minutes. Dilute samples 1:20 into EIA Diluent and assay. The undiluted samples can be stored at -20°C or below for up to 3 months. Avoid repeated freeze-thaw cycles.
- **Cell Culture Supernatants:** Centrifuge cell culture media at 3000 x g for 10 minutes to remove debris. Collect supernatants and assay. The undiluted samples can be stored at -20°C or below for up to 3 months. Avoid repeated freeze-thaw cycles.
- **CSF:** Collect cerebrospinal fluid (CSF) using sample pot. Centrifuge samples at 3000 x g for 10 minutes. Dilute samples 1:2 into EIA Diluent and assay. The undiluted samples can be stored at -80°C for up to 3 months. Avoid repeated freeze-thaw cycles.

#### **Reagent Preparation**

- Freshly dilute all reagents and bring all reagents to room temperature before use.
- **EIA Diluent Concentrate (10x):** If crystals have formed in the concentrate, mix gently until the crystals have completely dissolved. Dilute the EIA Diluent Concentrate 1:10 with reagent grade water. Store for up to 30 days at 2-8°C.
- **Standard Curve:** Reconstitute the 150 μg of Human Gc-Globulin Standard with 1.5 ml of EIA Diluent to generate a 100 μg/ml standard solution. Allow the standard to sit for 10 minutes with gentle agitation prior to making dilutions. Prepare duplicate or triplicate standard points by serially diluting the standard solution (100 μg/ml) 1:4 with EIA Diluent to generate 25, 6.25, 1.563, 0.391, and 0.098 μg/ml solutions. EIA

Diluent serves as the zero standard (0  $\mu$ g/ml). Any remaining solution should be frozen at -20°C and used within 30 days.

Standard Point	Dilution	[Gc-Globulin] (μg/ml)
P1	Standard (100 μg/ml)	100.0
P2	1 part P1 + 3 parts EIA Diluent	25.00
P3	1 part P2 + 3 parts EIA Diluent	6.250
P4	1 part P3 + 3 parts EIA Diluent	1.563
P5	1 part P4 + 3 parts EIA Diluent	0.391
P6	1 part P5 + 3 parts EIA Diluent	0.098
P7	EIA Diluent	0.000

- Biotinylated Human Gc-Globulin (2x): Reconstitute Biotinylated Human Gc-Globulin with 4 ml EIA Diluent to produce a 2-fold stock solution.

  Allow to sit for 10 minutes with gentle agitation prior to making dilutions. The stock solution should be further diluted 1:2 with EIA Diluent. Any remaining solution should be frozen at -20°C and used within 30 days.
- Wash Buffer Concentrate (20x): If crystals have formed in the concentrate, mix gently until the crystals have completely dissolved. Dilute the Wash Buffer Concentrate 1:20 with reagent grade water.
- **SP Conjugate (100x):** Spin down the SP Conjugate briefly and dilute the desired amount of the conjugate 1:100 with EIA Diluent. Any remaining solution should be frozen at -20°C.

#### **Assay Procedure**

- Prepare all reagents, standard solutions, and samples as instructed. Bring all reagents to room temperature before use. The assay is performed at room temperature (20-25°C).
- Remove excess microplate strips from the plate frame and return them immediately to the foil pouch with desiccants inside. Reseal the pouch securely to minimize exposure to water vapor and store in a vacuum desiccator.
- Add 25  $\mu$ l of Human Gc-Globulin Standard or sample per well, and immediately add 25  $\mu$ l of Biotinylated Human Gc-Globulin to each well (on top of the standard or sample) and tap to mix gently. Cover wells with a sealing tape and incubate for 2 hours. Start the timer after the last addition.
- Wash five times with 200 μl of Wash Buffer manually. Invert the plate each time and decant the contents; hit 4-5 times on absorbent material to completely remove the liquid. If using a machine, wash six times with 300 μl of Wash Buffer and then invert the plate, decanting the contents; hit 4-5 times on absorbent material to completely remove the liquid.

- Add 50  $\mu$ l of Streptavidin-Peroxidase Conjugate to each well and incubate for 30 minutes. Turn on the microplate reader and set up the program in advance.
- Wash the microplate as described above.
- Add 50 µl of Chromogen Substrate per well and incubate for 20 minutes or till the optimal blue color density develops. Gently tap plate to ensure thorough mixing and break the bubbles in the well with pipette tip.
- Add 50  $\mu$ l of Stop Solution to each well. The color will change from blue to yellow.
- Read the absorbance on a microplate reader at a wavelength of 450 nm immediately. If wavelength correction is available, subtract readings at 570 nm from those at 450 nm to correct optical imperfections. Otherwise, read the plate at 450 nm only. Please note that some unstable black particles may be generated at low concentration points after stopping the reaction for about 10 minutes, which will reduce the readings.

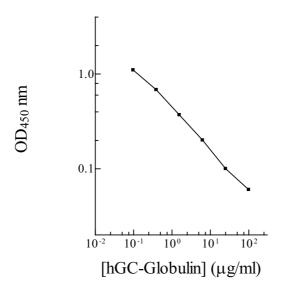
#### **Data Analysis**

- Calculate the mean value of the duplicate or triplicate readings for each standard and sample.
- To generate a standard curve, plot the graph using the standard concentrations on the x-axis and the corresponding mean 450 nm absorbance on the y-axis. The best-fit line can be determined by regression analysis using log-log or four-parameter logistic curve-fit.
- Determine the unknown sample concentration from the Standard Curve and multiply the value by the dilution factor.

#### **Standard Curve**

 The curve is provided for illustration only. A standard curve should be generated each time the assay is performed.

H. GC-Globulin Standard Curve



#### **Performance Characteristics**

- The minimum detectable dose of Gc-Globulin is typically  $\sim 0.09 \,\mu\text{g/ml}$ .
- Intra-assay and inter-assay coefficients of variation were 4.9% and 7.3% respectively.

## Linearity

	Average Percentage of Expected Value		
Sample Dilution	Plasma	Serum	
1:200	105%	104%	
1:400	99%	97%	
1:800	96%	93%	

	Average Percentage of Expected Value	
Sample Dilution	Milk	
1:10	89%	
1:20	98%	
1:40	91%	

	Average Percentage of Expected Value	
Sample Dilution	Saliva	
No dilution	86%	
1:2	95%	
1:4	96%	

#### Recovery

Standard Added Value	0.3 – 25 μg/ml
Recovery %	92 – 108%
Average Recovery %	98.5%

#### **Cross-Reactivity**

Species	% Cross Reactivity
Canine	None
Bovine	None
Monkey	<5%
Mouse	None
Rat	None
Swine	None
Rabbit	None
Human	100%

#### **Reference Value**

• Normal human Gc-globulin plasma levels range from 200 to 600 μg/ml.

#### References

- (1) Gomme PT et al. (2004) Trends Biotechnol. 22(7): 340-5
- (2) Jorgensen CS et al. (2204) Scand J Clin Lab Invest. 64(2): 157-66
- (3) Schiodt FV et al. (2001) Scand J Gastroenterol. 36(9): 998-1003
- (4) Dahl B et al. (2003) Crit Care Med. Jan; 31(1): 152-6
- (5) Speeckaert M et al. (2006) Clin Chim Acta. 372(1-2): 33-42. Epub 2006 May 12

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