Immunoglobulin A Assay Kit (IgA)

Method: immunoturbidimetric

Cat . No.	Size	Instrument
GB640M	R1: 2×50 ml R2: 2×10 ml	For Hitachi 7060/7150 &ShimadzuCL7200/8000
GS641M	R1: 2×50 ml R2: 2×10 ml	For Hitachi 7170/7080 &OlympusAU640/400/600

INTENDED USE
The immunoglobulin A assay kit is used for the quantitative determination of IgA in serum .

CLINICAL SIGNIFICANCE
IgA accounts for 10 to 15% of the total Immunoglobulin in serum. In its' monomeric form the structure of IgA is similar to that of IgG but 10% of IgA in serum is polymeric particularly IgA 2 which is more resistant to destruction by some pathogenic bacteria in IgA 1. Possibly the most important form of IgA is called secretory IgA found in tears, sweat, saliva, milk, colistrum and G.I. and bronchial secretions. Increased polyclonal IgA levels may occur in chronic liver diseases, chronic infections auto immune disorders and sarcoidosis. Monoclonal IgA increases in IgA mylomia. Decreased levels of IgA are observed and acquired congenital immuno deficiency disease. Reduced levels can be caused also by protein losing gastro enteropathies and loss through the skin from burns.

ASSAY PRINCIPLE
This assay is based on the reaction between IgA antigen and anti-IgA antibody. This reaction forms an insoluble complex producing a turbidity, which is measured spectrophotometrically. The amount of complex formed is directly proportional to the amount of IgA in the sample.

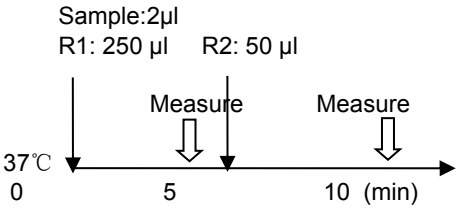
REAGENT COMPOSITION

Contents	Concentration of solutions
Reagent 1 (R1)	
TRIS Buffer pH 7.6 with PEG	18.16 mmol/l
Sodium Chloride	123.20 mmol/l
Preservative & Detergent	---
Reagent 2 (R2)	
TRIS Buffer pH 7.6	18.16 mmol/l
Anti IgA antibody	---
Preservative	---

SAMPLE COLLECTION AND PREPARATION
Use fresh patient serum, serum should be separated from cells within 2 hours after collection.
Stability: up to 3 months at 2-8℃.

STABILITY AND PREPARATION OF REAGENTS
All reagents are ready to use.
Stable up to the expiry date when stored at 2-8℃.
Once opened avoiding contamination.

ASSAY PROCEDURE
Test Procedure for Analyzers (Hitachi 7180)
Assay Mode: 2 Point End 16-34
Wave Length (sub/ main): None/ 340nm



CALIBRATION
Recommend that this assay should be calibrated using special protein calibrator GC-IgA.

CALCULATION OF RESULTS
The analyser automatically calculates the IgA concentration in the sample according to the calibration curve.

QUALITY CONTROL
Randox liquid assayed special protein controls, Level 1 Level 2 and Level 3 are recommended for daily quality control. Values obtained should fall within a specified range. If these values fall outside the range and repetition excludes error, the following steps should be taken:
1. Check instrument settings and light source.
2. Check reaction temperature.
3. Check expiration date of kit and contents.

NORMAL VALUE
70 to 400 mg/dl (0.7 to 4.0 g/l)
It is recommended that each laboratory establish its own reference range to reflect the age, sex, diet and geographical location of the population.

SPECIFIC PERFORMANCE CHARACTERISTICS

LINEARITY
The method is linear between IgA concentrations of 4-595 mg/dl (0.04-5.95 g/l). If the concentration in sample is above this concentration,please dilute it with 0.9% NaCl and repeat assay.

PRECISION
The CV of the test should be CV ≤5%.

Intar assay precision			
N=20	level 1	level 2	level 3
Mean(mg/dl)	126.83	251.96	387.52
SD	1.91	2.49	2.93
CV(%)	1.50	0.99	0.75

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Inter assay precision			
N=5	Batch 1	Batch 2	Batch 3
Mean(mg/dl)	127.6	125.7	125.7
$\bar{x}$	126.3		
(Xmax-Xmin)/$\bar{x}$	(127.6-2125.7)/126.3*100=1.47%		

INTERFERENCE

The following analytes were tested up to the levels indicated and found not to interfere:

Hemoglobin up to 500 mg/dl
Intralipid up to 500 mg/dl
Direct bilirubin up to 40 mg/dl

SAFETY PRECAUTIONS AND WARNINGS

1. For in vitro diagnostic use only. Do not pipette by mouth. Exercise the normal precautions required for handling laboratory reagents.
2. Reagent contains Sodium Azide. Avoid ingestion or contact with skin or mucous membranes. In case of skin contact, flush affected area with copious amounts of water. In case of contact with eyes or if ingested, seek immediate medical attention.
3. Sodium Azide reacts with lead and copper plumbing, to form potentially explosive azides. When disposing of such reagents flush with large volumes of water to prevent azide from building up. Exposed metal surfaces should be cleaned with 10% sodium hydroxide.
4. Specimens should be treated as potentially infectious (HIV, Hepatitis B virus, Hepatitis C virus, etc.) and handled with appropriate caution.
5. Reagents with different lot numbers should not be interchanged or mixed.

REFERENCES

1 Gitlin D, Edelhoch HJ. Immunol. 1951, 66, 76-78.
2 Burtis CA, Ashwood ER. Tietz Fund. Of Clin. Chem. 5th ed.30-54 and 462-494.
3 Guder WG, Narayanan S, Wisser H, Zawta B. List of Analytes; Pre-analytical Variables. Brochure in: Samples: From the Patient to the Laboratory. Darmstadt: GIT Verlag, 1996.

INDEX OF SYMBOLS

	Manufacture
	Catalogue Number
	Lot number
	Date of manufacture
	Use by(Expiration date)
	For In-Vitro Diagnostic use only
	Stored at 2-8℃
	Attention:See instruction for use

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EC REP Authorized Representative in the European Company

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