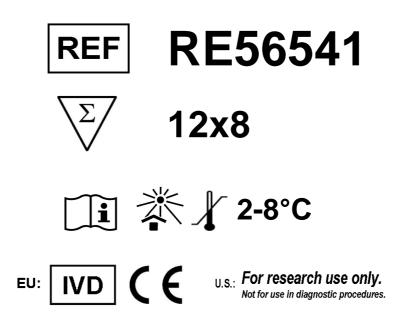


Influenza B IgG ELISA

Enzyme immunoassays (microtiter strips) for the qualitative and guantitative determination of IgG antibodies against Influenza B virus in human serum and plasma.





ΙΝΤΕ Γ ΝΑΤΙΟ ΝΑΙ ΒL Flughafenstrasse 52a D-22335 Hamburg, Germany Fax: +49 (0)40-53 28 91-11

Phone: +49 (0)40-53 28 91-0

GMB н IBL@IBL-International.com www.IBL-International.com

1. INTENDED USE

Enzyme immunassays (microtiter strips) for the qualitative and quantitative determination of IgG antibodies against Influenza B virus in human serum and plasma.

2. SUMMARY AND EXPLANATION

The influenza infection is an acute feverish virus infection of the respiratory tract. The infection mostly results from a droplet infection and appears as an epidemic or pandemy. The virus and its toxin can lead to a serious inflammation of the bronchial mucosa and a damage of the vessels. After an incubation time of 1 to 3 days the symptoms appear suddenly: Followed by a fast raise of temperature, often accompanied by shivering, the leading symptom of catarrhal inflammation appears, contributing to the clinical course of painful dry cough, tracheitis, laryngitis and frequently a rhinitis and conjunctivitis.

The Influenza viruses form a virus group with principally similar morphological, chemical and biological features. The types A, B and C were defined, including many other variants. The differentiation of the types will be possible by the different antigenicity of their nucleoproteins and their matrix proteins with type-specific antigenicity. However, the essential immunodominant antigens are the hemagglutinin and the neuraminidase. Both are surface antigens and show a permanent change of their antigenicity, called drift or shift. The appearance new Influenza epidemics and pandemies are facilitated by antigen variability.

The determination of the Influenza type (A, B, and C) gives both the clinician and epidemiologist important indications for further actions. Thus Influenza B often leads to a serious clinical course and an epidemic spread of the virus. Similarly, during an Influenza A epidemic, the epidemiological importance and derived measurements of the protection of the individual are important.

3. TEST PRINCIPLE

Solid phase enzyme-linked immunosorbent assay (ELISA) based on the sandwich principle. The wells are coated with antigen. Specific antibodies of the sample binding to the antigen coated wells are detected by a secondary enzyme conjugated antibody (E-Ab) specific for human IgG. After the substrate reaction the intensity of the color developed is proportional to the amount of IgG-specific antibodies detected. Results of samples can be determined directly using the standard curve.

4. WARNINGS AND PRECAUTIONS

- 1. For *in-vitro diagnostic* use only. For professional use only.
- 2. Before starting the assay, read the instructions completely and carefully. Use the valid version of the package insert provided with the kit. Be sure that everything is understood.
- 3. In case of severe damage of the kit package please contact IBL or your supplier in written form, latest one week after receiving the kit. Do not use damaged components in test runs, but keep safe for complaint related issues.
- 4. Obey lot number and expiry date. Do not mix reagents of different lots. Do not use expired reagents.
- 5. Follow good laboratory practice and safety guidelines. Wear lab coats, disposable latex gloves and protective glasses where necessary.
- Reagents of this kit containing hazardous material may cause eye and skin irritations. See MATERIALS SUPPLIED and labels for details. Material Safety Data Sheets for this product are available on the IBL-Homepage or upon request directly from IBL.
- 7. Chemicals and prepared or used reagents have to be treated as hazardous waste according to national biohazard and safety guidelines or regulations.
- 8. Avoid contact with Stop solution. It may cause skin irritations and burns.
- 9. Some reagents contain sodium azide (NaN₃) as preservatives. In case of contact with eyes or skin, flush immediately with water. NaN₃ may react with lead and copper plumbing to form explosive metal azides. When disposing reagents, flush with a large volume of water to avoid azide build-up.
- 10. All reagents of this kit containing human serum or plasma have been tested and were found negative for anti-HIV I/II, HBsAg and anti-HCV. However, a presence of these or other infectious agents cannot be excluded absolutely and therefore reagents should be treated as potential biohazards in use and for disposal.

5. STORAGE AND STABILITY

The kit is shipped at ambient temperature and should be stored at 2-8 °C. Keep away from heat or direct sun light. The storage and stability of specimen and prepared reagents is stated in the corresponding chapters.

The microtiter strips are stable up to the expiry date of the kit in the broken, but tightly closed bag when stored at 2–8 °C.

6. SPECIMEN COLLECTION AND STORAGE

Serum, Plasma (EDTA, Heparin)

The usual precautions for venipuncture should be observed. It is important to preserve the chemical integrity of a blood specimen from the moment it is collected until it is assayed. Do not use grossly hemolytic, icteric or grossly lipemic specimens. Samples appearing turbid should be centrifuged before testing to remove any particulate material.

Storage:	2-8 °C	-20 °C	Keep away from heat or direct sun light.
Stability:	2 d	> 2 d	Avoid repeated freeze-thaw cycles.

7. MATERIALS SUPPLIED

Quantity	Symbol	Component					
1 x 12 x 8	МТР	Microtiter Plate					
		Break apart strips. Coated with specific antigen.					
		Enzyme Conjugate IgG					
1 x 15 mL	ENZCONJ IgG	Red colored. Ready to use. Contains: anti-human IgG, conjugated to peroxidas	e,				
		protein-containing buffer, stabilizers.					
1 x 4 x 2 mL	CAL A-D	Standard A-D					
		1; 10; 50; 175 U/mL. Ready to use.					
		Standard A = Negative Control Standard B = Cut-Off Control					
		Standard C = Weakly Positive Control Standard D = Positive Control					
		Contains: IgG antibodies against Influenza B, PBS, stabilizers.					
1 x 60 mL	DILBUF	Diluent Buffer					
1 X 00 IIIE		Ready to use. Contains: PBS Buffer, BSA, < 0.1 % NaN ₃ .					
1 x 60 mL	WASHBUF CONC	Wash Buffer, Concentrate (10x)					
T X 00 IIIL		Contains: PBS Buffer, Tween 20.					
1 x 15 mL	TMB SUBS	TMB Substrate Solution					
I X ISINL	TWB 30B3	Ready to use. Contains: TMB.					
1 x 15 mL	TMB STOP	TMB Stop Solution					
I X IS IIL	TWB STOP	Ready to use. 0.5 M H ₂ SO ₄ .					
2 ×	FOIL	Adhesive Foil					
2 X	2 x FOIL For covering of Microtiter Plate during incubation.						
1	RAC	Plastic Bag					
1 x	BAG	Resealable. For dry storage of non-used strips.	•				

8. MATERIALS REQUIRED BUT NOT SUPPLIED

- 1. Micropipettes (Multipette Eppendorf or similar devices, < 3 % CV). Volumes: 5; 50; 100; 500 μL
- 2. Calibrated measures
- 3. Tubes (1 mL) for sample dilution
- 4. 8-Channel Micropipettor with reagent reservoirs
- 5. Wash bottle, automated or semi-automated microtiter plate washing system
- 6. Microtiter plate reader capable of reading absorbance at 450 nm (reference wavelength 600-650 nm)
- 7. Bidistilled or deionised water
- 8. Paper towels, pipette tips and timer

9. PROCEDURE NOTES

1. Any improper handling of samples or modification of the test procedure may influence the results. The indicated pipetting volumes, incubation times, temperatures and pretreatment steps have to be performed strictly according to the instructions. Use calibrated pipettes and devices only.

- 2. Once the test has been started, all steps should be completed without interruption. Make sure that required reagents, materials and devices are prepared ready at the appropriate time. Allow all reagents and specimens to reach room temperature (18-25 °C) and gently swirl each vial of liquid reagent and sample before use. Mix reagents without foaming.
- 3. Avoid contamination of reagents, pipettes and wells/tubes. Use new disposable plastic pipette tips for each component and specimen. Do not interchange caps. Always cap not used vials. Do not reuse wells/tubes or reagents.
- 4. Use a pipetting scheme to verify an appropriate plate layout.
- 5. Incubation time affects results. All wells should be handled in the same order and time sequences. It is recommended to use an 8-channel Micropipettor for pipetting of solutions in all wells.
- 6. Microplate washing is important. Improperly washed wells will give erroneous results. It is recommended to use a multichannel pipette or an automatic microplate washing system. Do not allow the wells to dry between incubations. Do not scratch coated wells during rinsing and aspiration. Rinse and fill all reagents with care. While rinsing, check that all wells are filled precisely with Wash Buffer, and that there are no residues in the wells.
- 7. Humidity affects the coated wells/tubes. Do not open the pouch until it reaches room temperature. Unused wells/tubes should be returned immediately to the resealed pouch including the desiccant.

10. PRE-TEST SETUP INSTRUCTIONS

10.1. Preparation of Components

Â	The contents of the kit for 96 determinations can be divided into 3 separate runs.
	The volumes stated below are for one run with 4 strips (32 determinations).

Dilute / dissolve	Component		Diluent	Relation	Remarks	Storage	Stability
20 mL	WASHBUF CONC	200 mL	bidist. water	1:11	Warm up at 37°C to dissolve crystals, if necessary. Mix vigorously.	2-8 °C	8 w

10.2. Dilution of Samples

Sample	to be diluted	with	Relation	Remarks			
Serum / Plasma	generally	DILBUF	1:101	e.g. 5 μL + 500 μL DILBUF			
Complex containing concentrations high on the high act standard have to be diluted further							

Samples containing concentrations higher than the highest standard have to be diluted further.

11. TEST PROCEDURE

1.	Pipette 100 µL of each Standard and diluted sample into the respective wells of the Microtiter
	Plate. In the qualitative test only Standard B is used.
2	
2.	Cover plate with adhesive foil. Incubate 60 min at 18-25 °C.
3.	Remove adhesive foil. Discard incubation solution. Wash plate 3 x with 300 µL of diluted Wash
	Buffer. Remove excess solution by tapping the inverted plate on a paper towel.
4.	Pipette 100 μL of Enzyme Conjugate into each well.
5.	Cover plate with new adhesive foil. Incubate 30 min at 18-25 °C.
6.	Remove adhesive foil. Discard incubation solution. Wash plate 3 x with 300 µL of diluted Wash
	Buffer. Remove excess solution by tapping the inverted plate on a paper towel.
7.	For adding of Substrate and Stop Solution use, if available, an 8-channel Micropipettor. Pipetting
	should be carried out in the same time intervals for Substrate and Stop Solution. Use positive
	displacement and avoid formation of air bubbles.
8.	Pipette 100 µL of TMB Substrate Solution into each well.
9.	Incubate 20 min at 18-25 °C in the dark (without adhesive foil).
10.	Stop the substrate reaction by adding 100 µL of TMB Stop Solution into each well. Briefly mix
	contents by gently shaking the plate. Color changes from blue to yellow.
11.	Measure optical density with a photometer at 450 nm (Reference-wavelength: 600-650 nm) within
	60 min after pipetting of the Stop Solution.

12. QUALITY CONTROL

The test results are only valid if the test has been performed following the instructions. Moreover the user must strictly adhere to the rules of GLP (Good Laboratory Practice) or other applicable standards/laws. All standards/controls must be found within the acceptable ranges as stated on the QC Certificate. If the criteria are not met, the run is not valid and should be repeated. Each laboratory should use known samples as further controls. It is recommended to participate at appropriate quality assessment trials.

In case of any deviation the following technical issues should be proven: Expiration dates of (prepared) reagents, storage conditions, pipettes, devices, incubation conditions and washing methods.

13. CALCULATION OF RESULTS

The evaluation of the test can be performed either quantitatively or qualitatively.

13.1. Qualitative Evaluation

The Cut-off value is given by the optical density (OD) of the Standard B (Cut-off standard). The Cut-off index (COI) is calculated from the mean optical densities of the sample and Cut-off value. If the optical density of the sample is within a range of 20 % around the Cut-off value (grey zone), the sample has to be considered as borderline. Samples with higher ODs are positive, samples with lower ODs are negative.

For a quantification, the Cut-off index (COI) of the samples can be formed as follows:

COI =	OD Sample	
	OD Standard B	

13.2. Quantitative Evaluation

The obtained OD of the standards (y-axis, linear) are plotted against their concentration (x-axis, logarithmic) either on semi-logarithmic graph paper or using an automated method. A good fit is provided with cubic spline or point-to-point curve, because these methods give the highest accuracy in the data calculation.

For the calculation of the standard curve, apply each signal of the standards (one obvious outlier of duplicates might be omitted and the more plausible single value might be used).

The concentration of the samples can be read directly from the standard curve.

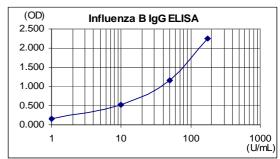
The initial dilution has been taken into consideration when reading the results from the graph. Results of samples of higher predilution have to be multiplied with the dilution factor.

Samples showing concentrations above the highest standard have to be diluted as described in PRE-TEST SETUP INSTRUCTIONS and reassayed.

Typical Calibration Curve

(Example. Do not use for calculation!)

Standard	U/mL	OD _{Mean}
A	1	0.015
В	10	0.525
С	50	1.158
D	175	2.248



14. INTERPRETATION OF RESULTS

Method	Range	Interpretation	
Quantitative	< 8 U/mL	negative	
(Standard curve)	8 – 12 U/mL	equivocal	
(Standard Curve)	> 12 U/mL	positive	1
Qualitativa	< 0.8	negative	
Qualitative (Cut-off Index, COI)	0.8 – 1.2	equivocal	
	> 1.2	positive	

The results themselves should not be the only reason for any therapeutical consequences. They have to be correlated to other clinical observations and diagnostic tests.

15. EXPECTED VALUES

In an in-house study, apparently healthy subjects showed the following results:

lg Isotype	n	Interpretation				
ig isotype		positive	equivocal	negative		
lgG	56	78.4 %	11.4 %	10.2 %		

16. LIMITATIONS OF THE PROCEDURE

Specimen collection has a significant effect on the test results. See SPECIMEN COLLECTION AND STORAGE for details.

For cross-reactivities, see PERFORMANCE.

Azide and thimerosal at concentrations > 0.1 % interfere in this assay and may lead to false results.

The following blood components do not have a significant	Hemoglobin	8.0 mg/mL
effect (+/- 20 % of expected) on the test results up to the	Bilirubin	0.3 mg/mL
below stated concentrations:	Triglyceride	5.0 mg/mL

17. PERFORMANCE

Analytical Specificity (Cross Reactivity)		No cross-reactivities were found to:			RSV, Adenovirus, Parainfluenza 1/2/3		
Precision		Mean (U/mL)	CV (%	%)			
Intra-Assay		51	9.2				
	Inter-Assay	49	8.9				
Linearity		Range (U/mL)	Serial dilution u		to	Range (%)	
Linearity		8.0 – 112	1/8			71 - 123	
Recovery		89 – 107 %	% Recovery after		spik	ting (n = 3)	
Method Comparison		Rel. Sensitivity		> 95 %			
versus ELIS	A	Rel. Specificity		> 95 %			

18. PRODUCT LITERATURE REFERENCES

- 1. Drescher, J., Verhagen, W. Method for determining the equilibrium constant and the concentration of influenza virus IgG antihaemagglutinin antibody molecules by use of EIA titres determined with and without guanidine hydrochloride. J. Virol. Methods, 47(3): 307-19 (1994).
- 2. Drescher, J., Verhagen, W. Determination of the concentration of influenza virus antihaemagglutinin antibody molecules of the IgG class and of the equilibrium constant by use of enzyme immunoassay titres determined for graded epitope concentrations. J. Virol. Methods, 55(2): 257-70 (1995).
- 3. Lupulescu, E. et al. ELISA in the rapid diagnosis of influenza using as the detecting antibodies polyclonal antinucleoprotein sera. Bacteriol. Virusol. Parazitol. Epidemiol., 41(1-2): 63-7 (1996).
- 4. Marcante, R. et al. Rapid diagnosis of influenza type A infection: comparison of shell-vial culture, directigen flu-A and enzyme-linked immunosorbent assay. New Microbiol., 19(2): 141-7 (1996).
- 5. Marinich, IG. et al. The immunoprophylaxis of influenza among elderly persons. Zh. Mikrobiol. Epidemiol. Immunobiol. (1997/3): 60-4.
- 6. Moldoveanu, Z. et al. Human immune responses to influenza virus vaccines administered by systemic or mucosal routes. Vaccine 13(11): 1006-12 (1995).
- Naikhin, AN. et al. Immuno-enzyme analysis of post-vaccination secretory immunity to influenza A and B viruses using a manufactured monoclonal immunoenzyme test system. Vopr. Virusol. 42(6): 271-5 (1997).
- 8. Naikhin, AN. et al. Monoclonal immuno-enzyme test-system for evaluating secretory immunity to influenza A and B viruses. Vopr. Virusol. 42(5): 212-6 (1997).
- 9. Powers, DC. et al. Neuraminidase-specific antibody responses to inactivated influenza virus vaccine in young and elderly adults. Clin. Diagn. Lab. Immunol. 3(5): 511-6 (1996).

Symbols / Symbole / Symbôles / Símbolos / Símbolos / Σύμβολα

REF	CatNo.: / KatNr.: / No Cat.: / CatNo.: / N.º Cat.: / Ν.–Cat.: / Αριθμός-Κατ.:			
LOT	Lot-No.: / Chargen-Bez.: / No. Lot: / Lot-No.: / Lote Ν.º: / Lotto n.: / Αριθμός -Παραγωγή:			
Σ	Use by: / Verwendbar bis: / Utiliser à: / Usado por: / Usar até: / Da utilizzare entro: / Χρησιμοποιείται από:			
Σ	No. of Tests: / Kitgröße: / Nb. de Tests: / No. de Determ.: / N.º de Testes: / Quantità dei tests: / Αριθμός εξετάσεων:			
CONC	Concentrate / Konzentrat / Concentré / Concentrar / Concentrado / Concentrato / Συμπύκνωμα			
LYO	Lyophilized / Lyophilisat / Lyophilisé / Liofilizado / Liofilizado / Liofilizzato / Λυοφιλιασμένο			
IVD	In Vitro Diagnostic Medical Device. / In-vitro-Diagnostikum. / Appareil Médical pour Diagnostics I Vitro. / Dispositivo Médico para Diagnóstico In Vitro. / Equipamento Médico de Diagnóstico I Vitro. / Dispositivo Medico Diagnostico In vitro. / Ιατρική συσκευή για In-Vitro Διάγνωση.			
Û	Evaluation kit. / Nur für Leistungsbewertungszwecke. / Kit pour évaluation. / Juego de Reactivos para Evaluació. / Kit de avaliação. / Kit di evaluazione. / Κιτ Αξιολόγησης.			
•H	Read instructions before use. / Arbeitsanleitung lesen. / Lire la fiche technique avant emploi. / Lea las instrucciones antes de usar. / Ler as instruções antes de usar. / Leggere le istruzioni prima dell'uso. / Διαβάστε τις οδηγίες πριν την χρήση.			
**	Keep away from heat or direct sun light. / Vor Hitze und direkter Sonneneinstrahlung schützen. / Garder à l'abri de la chaleur et de toute exposition lumineuse. / Manténgase alejado del calor o la luz solar directa. / Manter longe do calor ou luz solar directa. / Non esporre ai raggi solari. / Να φυλάσσεται μακριά από θερμότητα και άμεση επαφή με το φως του ηλίου.			
×.	- Store at: / Lagern bei: / Stocker à: / Almacene a: / Armazenar a: / Conservare a: / Αποθήκευση στους:			
	Manufacturer: / Hersteller: / Fabricant: / Productor: / Fabricante: / Fabbricante: / Παραγωγός:			
	Caution! / Vorsicht! / Attention! / ¡Precaución! / Cuidado! / Attenzione! / Προσοχή!			
Symbols of the kit components see MATERIALS SUPPLIED.				
Die Symbole der Komponenten sind im Kapitel KOMPONENTEN DES KITS beschrieben.				
Voir MATERIEL FOURNI pour les symbôles des composants du kit.				
Símbolos de los componentes del juego de reactivos, vea MATERIALES SUMINISTRADOS.				
Para símbolos dos componentes do kit ver MATERIAIS FORNECIDOS.				
	Per i simboli dei componenti del kit si veda COMPONENTI DEL KIT.			
	Για τα σύμβολα των συστατικών του κιτ συμβουλευτείτε το ΠΑΡΕΧΟΜΕΝΑ ΥΛΙΚΑ.			

IBL AFFILIATES WORLDWIDE

IBL International GmbH Flughafenstr. 52A, 22335 Hamburg, Germany	Tel.: E-MAIL: WEB:	+ 49 (0) 40 532891 -0 Fax: -11 IBL@IBL-International.com http://www.IBL-International.com
IBL International Corp. 194 Wildcat Road, Toronto, Ontario M3J 2N5, Canada	Tel.: E-MAIL: WEB:	+1 (416) 645 -1703 Fax: -1704 Sales@IBL-International.com http://www.IBL-International.com

LIABILITY: Complaints will be accepted in each mode –written or vocal. Preferred is that the complaint is accompanied with the test performance and results. Any modification of the test procedure or exchange or mixing of components of different lots could negatively affect the results. These cases invalidate any claim for replacement. Regardless, in the event of any claim, the manufacturer's liability is not to exceed the value of the test kit. Any damage caused to the kit during transportation is not subject to the liability of the manufacturer