

STRONGYLOIDES RATTI

Enzyme immunoassay for the diagnosis of human Strongyloidosis

96 assays on individual wells for in vitro use



Instructions for use for article N° 9450

EC reg. N°: H-CH/CA01/IVD/10285

Intended use:

The Bordier *Strongyloides ratti* ELISA kit is intended for the quantitative determination of IgG class antibodies against Strongyloides in human serum.

Principle and presentation:

The kit provides the material needed to perform 96 enzyme-linked immunosorbent assays (ELISA) on microtitration wells sensitized with ***Strongyloides ratti*** somatic larval antigens. The presence of parasite specific serum antibodies is detected with a Protein A - alkaline phosphatase conjugate. Sensitized wells are provided as breakable strips for the economical assay of small series of samples.

Material contained in the kit (96 assays):

WELL	9450-01	Breakable ELISA strips sensitized with <i>Strongyloides ratti</i> somatic larval antigens	96	wells
DILB	9450-02	Dilution buffer (10 x) concentrate	50	ml
WASH	9450-03	Washing solution (10 x) concentrate	50	ml
ENZB	9450-04	Enzyme buffer	50	ml
STOP	9450-05	Stopping solution (K ₃ PO ₄)	25	ml
CONTROL -	9450-06	Negative control serum	200	µl
CONTROL -/+	9450-07	Weak positive serum (cut off)	200	µl
CONTROL +	9450-08	Positive control serum	200	µl
CONJ	9450-09	Protein A - alkaline phosphatase conjugate	300	µl
SUBS	9450-10	Phosphatase substrate	20	tablets
		Multipipette reservoir, 25 ml	1	piece
		Frame for ELISA 8-well holder	1	piece

Shelf life and storage:

Store kit at 2° to 8° C (transport at ambient temperature). The expiry date and the lot number of the kit are printed on the side of the box.

Equipment needed but not provided with the kit:

Pipettes (ml and μ l). Flasks. Tubes for the dilution of sera. Adhesive tape to cover wells during incubations. Distilled water. Incubator set at 37° C. ELISA reader set at 405 nm.

Preparation of reagents before use:

ELISA wells: open side of aluminium bag 9450-01 and remove number of wells needed. Place sensitized wells in 8-well holder(s). If needed, complete the empty positions in the holder with used wells. Insert holder(s) in the frame in the correct orientation. Reseal open package with desiccant pad.

Dilution buffer: dilute dilution buffer (10 x) concentrate 9450-02, 1/10 in distilled water.

Washing solution: dilute washing solution (10 x) concentrate 9450-03, 1/10 in distilled water. You may also use your own washing solution. Avoid buffers containing phosphate which could inhibit the enzymatic activity of the alkaline phosphatase.

Negative, weak positive (cut off) and positive **control sera:** dilute 10 μ l control sera 9450-06 to -08 in 190 μ l dilution buffer solution (final dilution 1/20).

Sera to be tested: dilute 10 μ l serum in 2.0 ml dilution buffer solution (final dilution 1/201).

Protein A - alkaline phosphatase **conjugate:** dilute conjugate 9450-09 in dilution buffer solution (final dilution 1/51).

Substrate solution: prewarm enzyme buffer 9450-04 at ambient temperature. Before the addition of substrate to the ELISA wells, dissolve tablet(s) of phosphatase substrate 9450-10 in undiluted buffer 9450-04 (1 tablet in 2.5 ml buffer). Vortex until complete dissolution of the tablet(s).

Stopping solution: use reagent 9450-05 undiluted.



Warnings and precautions: Solutions 9450-02, 9450-03, 9450-04 and 9450-09 contain respectively 0.1%, 0.05%, 0.01% and 0.1% of sodium azide (N_3Na). Solution 9450-02 contain 0.02% of merthiolate. These substances are toxic. The stopping solution 9450-05 (0.5 M K_3PO_4) is irritant.

The negative, weak positive, and positive control sera (9450-06 to -08) are from rabbits.

Volumes to be prepared:

			Total number of wells to be used			
			3-4	5-6	7-8	9-10
Dilution buffer (10 x)	9450-02 + H ₂ O	ml + ml	1 + 9	2 + 18	3 + 27	4 + 36
Washing solution (10 x)	9450-03 + H ₂ O	ml + ml	1 + 9	2 + 18	3 + 27	4 + 36
Conjugate	9450-09 + dilution buffer	μ l + μ l	10 + 500	15 + 750	20 + 1000	25 + 1250
Control sera	9450-06 to -08 + dilution buffer	μ l + μ l	10 + 190	10 + 190	10 + 190	10 + 190
Sera to be tested	Serum + dilution buffer	μ l + μ l	10 + 2000	10 + 2000	10 + 2000	10 + 2000
Substrate solution	9450-10 + 9450-04	tabl. + ml	1 + 2.5	1 + 2.5	1 + 2.5	1 + 2.5

Procedure:

Step 1: Blocking:

Fill completely wells with dilution buffer solution.

Incubate for 5 to 15 minutes at ambient temperature (blocking).

Remove dilution buffer by aspiration or by shaking the strips over the sink.

Step 2: Incubation with serum samples:

Fill the first well of the first strip with 100 µl dilution buffer only (no-serum blank).

Fill the subsequent three wells with 100 µl diluted negative, weak positive (cut off) and positive control sera respectively (100 µl each).

Fill remaining wells with the diluted sera to be tested (100 µl each).

Cover wells with adhesive tape and incubate for 30 minutes at 37° C.

Remove sera and wash 4 x with washing solution.

Step 3: Incubation with conjugate:

Distribute 100 µl diluted protein A - alkaline phosphatase conjugate in each well.

Cover wells with adhesive tape and incubate for 30 minutes at 37° C.

Remove conjugate and wash 4 x with washing solution.

Step 4: Incubation with substrate:

Distribute 100 µl substrate solution per well.

Cover wells with adhesive tape and incubate for 30 minutes at 37° C.

Stop the reaction by the addition of 100 µl stopping solution to each well.

Step 5: Measurement of absorbances:

Wipe bottom of wells, eliminate bubbles and measure absorbances at 405 nm.

Interpretation:

Subtract value of the no-serum blank from all measured values. The test is valid if the following criteria are met: absorbance (A) of positive control > 1.200, A of negative control < 12% of A of positive control, A of blank against air < 0.350.

The antibody concentration of the weak positive (cut off) serum 9450-07 has been set to discriminate optimally between sera of clinically documented cases of strongyloidosis and healthy human sera.

The result is **negative** when the absorbance of the analyzed sample is lower than the absorbance of the weak positive serum 9450-07. In this case, the IgG antibody concentration against ***Strongyloides ratti*** somatic larval antigens is clinically non-significant. If strongyloidosis is strongly suspected, other techniques should be carried out (Baermann, fecal culture, multiple stool examinations).

The result is **positive** when the absorbance of the analyzed sample is higher than the absorbance of the weak positive control 9450-07. In this case, the IgG antibody concentration against ***Strongyloides ratti*** somatic larval antigens is considered as clinically significant. This result should take into consideration the cross-reactivities of other parasitic infections (undermentioned), the endemic situation and the clinical symptoms.

Sensitivity and specificity of the assay:

A sensitivity of 88 % was found with 48 sera from patients with larvae of *Strongyloides stercoralis*.

A specificity of 94 % was found with 100 sera of blood donors (Swiss).

The test of 89 sera from 2 groups of patients with other parasitoses (Amebiasis, Ascariidiosis, Cysticercosis, Fasciolosis, Filariosis, Cystic echinococcosis, Schistosomosis and Toxocarosis) showed a specificity of 77%. Internal evaluation showed that hemorrhagic, lipemic or icteric sera do not interfere with the results of the test.

Repeatability were assessed by testing 2 human serum samples in 24 wells on 1 assay.

Reproducibility were assessed by testing the 2 human serum samples on 10 different assays.

	Repeatability		Reproducibility	
	Sample 1	Sample 2	Sample 1	Sample 2
Average (absorbance)	0.738	1.320	0.768	1.339
Standard deviation (absorbance)	0.040	0.040	0.052	0.063
Variation coefficient (%)	5.5	3.0	6.8	4.7

References:

- Magnaval, J.F., Mansuy, J.M., Villeneuve, L. and Cassaing S.** (2000) A retrospective study of autochthonous strongyloidiasis in Région Midi-Pyrénées (Southwestern France). *European journal of Epidemiology* **16** : 179-182.
- Schaffel, R., Nucci, M., Carvalho, E., Braga, M., Almeida, L., Portugal, R. and Pulcheri, W.** (2001) The value of an immunoenzymatic test (Enzyme-Linked Immunosorbent Assay) for the diagnosis of strongyloidiasis in patients immunosuppressed by hematologic malignancies. *Am. J. Trop. Med. Hyg.* **65** : 346-350.
- Loutfy, M. R, Wilson, M., Keystone, J. S. and Kain, K. C.** (2002) Serology and eosinophil count in the diagnosis and management of strongyloidiasis in non endemic area. *Am. J. Trop. Med. Hyg.* : 749-752.
- van Doorn, H.R., Koelewijn, R., Hofwegen, H., Gilis, H., Wetsteyn, J.C.F.M., Wismans, P. J., Sarfati, C., Vervoort, T., van Gool, T.** (2007) Use of enzyme-linked immunosorbent assay and dipstick assay for detection of *Strongyloides stercoralis* infection in humans. *J. Clin. Microbiol.* **45**: 438-442.
- Bisoffi, Z., Buonfrate, D., Sequi, M., Mejia, R., Cimino, R.O., et al.** (2014) Diagnostic Accuracy of Five Serologic Tests for *Strongyloides stercoralis* infection. *PLoS Negl. Trop. Dis.* **8**.
- Buonfrate, D., Sequi, M., Mejia, R., Cimino, R.O., Kroleiecki, A., Albonico, M., et al.** (2015) Accuracy of Five Serologic Tests for the follow-up of *Strongyloides stercoralis* infection. *PLoS Negl. Trop. Dis.* **9**.



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