

### **BioCLIA Autoimmune Reagent Kit, GAD**

(Chemiluminescent Microparticle Immunoassay)

Kit size	Cat. No.	GTIN Code
50 Tests/kit	MY00142	06924030402570
100 Tests/kit	MY00193	06924030403089

### **INTENDED USE**

The BioCLIA Autoimmune Reagent Kit, GAD assay is intended for the in vitro quantitative measurement of antibodies directed to GAD in human serum as an aid in the diagnosis of Insulin-dependent diabetes mellitus (IDDM), Type 1 in conjunction with other laboratory and clinical findings. It is an *in vitro* diagnostic medical device intended for laboratory professional use.

### **SUMMARY AND EXPLANATION OF THE TEST**

Insulin-dependent diabetes mellitus (IDDM), Type 1, is caused by the autoimmune destruction of the beta cells of the pancreas. 1, 2 This selective autoimmune pathogenesis causes complete elimination of insulin secretion. The immunological evidence was demonstrated by the presence of specific islet cell autoantibodies in IDDM sera. <sup>3</sup> At least three autoantibodies have been identified against antigenic components of the islet cells in Type 1 diabetics. These autoantibodies are directed specifically to islet cell antigenic component(s), glutamic acid decarboxylase and insulin. 4 Glutamic acid decarboxylase (GAD) is the biosynthetic enzyme for the neurotransmitter inhibitor gamma-amino butyric acid, GABA. 5 Two forms of GAD, 6 5 KDa and 67 KDa, are produced by a single gene and are highly homogenous. 6, 7 65-KDa GAD and 67-KDa GAD are identified in brain and islet cells and are differentially expressed in human, rat and mouse pancreas. 8 Since diabetes is a chronic autoimmune disease involving beta-cell destruction, early and accurate prediction of the onset of the disease at the preclinical (asymptomatic) stage will help to intervene in the islet cells destruction and to preserve the maximum possible beta-cell mass. The screening of high-risk populations, for all of the three autoantibodies (ICA, IAA and GAD) will help to either prevent or to slow down the onset of the disease. A high-risk (asymptomatic) population, positive for two or more autoantibodies, is vulnerable for developing IDDM, usually in the next 5-7 years. 9

### PRINCIPLES OF THE PROCEDURE

BioCLIA GAD assay is a two-step immunoassay using microparticle, enzyme-labeled chemiluminescent technology.

In the first step, the GAD antigen coated magnetic microparticle, human serum and biotinylated GAD antigen are mixed in a cuvette, which allows patient anti-GAD antibody to bind. Secondly, after incubation, unbound biotinylated GAD and sample matrix are removed by washing, and the beads-GAD antigen-anti-GAD antibodies-GAD antigen-biotin immune complexes are kept with the help of a magnetic separator. Third, Streptavidin conjugated alkaline phosphatase is added. Fourth, after incubation, excess enzyme conjugates are removed by washing and finally the bound enzyme is

detected by addition of chemiluminescent substrate. The relative light unit (RLU) intensity is proportional to the amount of anti-GAD antibodies. According to the anti-GAD specific IgG RLU-concentration standard curve, the RLU tested can be interpreted to anti-GAD antibodies concentration in the sample expressed as IU/mL.

For quantitation of anti-GAD antibodies, the BioCLIA GAD assay utilizes a predefined lot specific master calibration curve that is uploaded into the instrument through the reagent Master Calibration Curve barcode. The master calibration curve is created during manufacturing by using in-house standards that are traceable to the WHO standard material (NIBSC code: 97/550). Based on the master calibration curve, and results obtained by running two calibrators, an instrument specific working curve is created, which is used to calculate International Units (IU)/mL from the RLU obtained for each sample.

#### WARNINGS AND PRECAUTIONS

- For professional in vitro diagnostic use only.
- Used on BioCLIA 6500 and BioCLIA 500 instruments only.
- Do not use reagents beyond the expiration dates.
- The kit contains human sourced materials. All recommended precautions for the handling of blood derivatives should be taken. Please refer to the existing laboratory safety regulations and good laboratory practice.
- Liquid waste and solid waste taken from BioCLIA 6500 and BioCLIA 500 should also be handled in accordance with the National or Local legislation.
- Once opened, the reagent cartridge must be stored in the instrument's reagent carousel. For the first placement of reagent into the instrument, please take care to avoid spilling the reagents.
- Spilled reagents should be cleaned up immediately. Comply with all National and local environmental regulations when disposing of wastes.
  - Improper cleaning or rinsing of the instrument may lead to chemical contamination of the reagents. Residues from common laboratory chemicals such as formalin, bleach, ethanol, or detergent can cause interference in the assay. Be sure to follow the recommended cleaning procedure as outlined in the BioCLIA 6500 and BioCLIA 500 User's Manual.

# Precautions **?**

- The assay contains ProClin 300 0.0015%~3% as preservative and may cause an allergic skin reaction by skin contact. Avoid contact with skin. Wear protective gloves, protective clothing and protective glasses.
- The assay contains TritonX-405 0.0015%~0.5% as surfactant



and may cause an allergic skin reaction by skin contact. Avoid contact with skin. Wear protective gloves, protective clothing and protective glasses.

 Any serious incident that has occurred in relation to the device shall be reported to the manufacturer and the competent authority of the Member State in which the user and/or the patient is established.

### **MATERIALS SUPPLIED**

• Antigen Biotinylated antigen in 0.02M Tris (pH 8) Buffer with stabilizer.

ANTIGEN BIOT

Preservatives: 0.0015% ProClin 300 < 3%. Surfactant: 0.0015% Triton X-405 < 0.5%.

• Conjugate Alkaline phosphatase (AP) labeled streptavidin in 0.1M Tris (pH 8) Buffer with stabilizer.

CONJ AP G

Preservatives: 0.0015% < ProClin 300 < 3%.

• **Microparticle** Lyophilized antigen coated on microparticles in 0.02M Tris (pH 8).

M ANTIGEN

RCNS H<sub>2</sub>O DIST

Preservatives: 0.0015% < ProClin 300 < 3%.

Components	50 Tests/Kit	100 Tests/Kit
Antigen	1 x 2.5 mL	1 x 5 mL
Conjugate	1 x 6.75 mL	1 x 13.5 mL
Microparticle	1 x sq 4 mL*	2 x sq 4 mL*

<sup>\*</sup>sq 4mL: Each bottle reconstituted with 4mL distilled water before using.

### ADDITIONAL MATERIALS SUPPLIED SEPARATELY

Product	CATALOGUE No.	
BioCLIA Autoimmune Calibrator	MY00244 (2 x 1 mL)	
Set, GAD	MY00295 (4 x 1 mL)	
BioCLIA Autoimmune Control Set,	MY00346 (2 x 1 mL)	
GAD	MY00397 (4 x 1 mL)	
BioCLIA Sample Diluent I	MY00965	
BioCLIA System Wash Buffer	MY00404	
BioCLIA System Substrate	MY00405	
BioCLIA 6500	MA00243	
BioCLIA 500	MA00502	
BioCLIA Cuvettes	MA00244 (2000 pcs/bag)	
	MA00549 (65 pcs/box)	
BioCLIA Silicone gasket (Small)	MV00195	

BioCLIA Silicone gasket (Large) MV00196

### **MATERIALS REQUIRED**

Distilled or deionized Water

### STORAGE AND STABILITY

- Store the kit at 2-8 °C.
- The shelf life of the unopened kit is 12 months.
- Opened reagents or onboard reagents may be used for 28 successive days. The software of the BioCLIA instruments monitors the onboard (in-use) expiration of the reagent cartridge. The system will not allow use of a reagent which has expired.

### SPECIMEN COLLECTION, STORAGE AND HANDLING

- Serum from venous can be used.
- Collect blood specimens using standard procedures.
- Test serum should be clear and free from hemolysis.
- Cloudy samples should be clarified by centrifugation at 5000 rpm for 5 minutes before use. For samples with the presence of fibrin, ensure that complete clot formation has taken place prior to centrifugation of samples. Some samples, particularly those from patients receiving anticoagulant therapy, may require increased clotting time.
- Specimens may be refrigerated at 2-8 °C for up to seven days or stored at -20°C up to six months.
- Specimens may be kept onboard on BioCLIA instruments under room temperature (18-25°C) for up to 2 hours.
- Avoid repeated freezing and thawing.

### ASSAY PROCEDURE

Detailed information about operating the BioCLIA instruments can be taken from the Instrument User's Manual.

Note that, it is important to perform all routine maintenance procedures for optimal performance.

### Lyophilized Microparticle Reconstitution

Reconstitute the lyophilized antigen coated microparticles with distilled water (4mL distilled water per bottle). Blend for more than 30 minutes in low speed, and transfer the solution to the supplied empty microparticle bottle. For the kit size of 100 Tests/Kit, user should transfer both bottles of reconstitute microparticle solution to supplied empty microparticle bottle before using.

# Sample Dilution

The specimens are diluted with BioCLIA Sample Diluent I before testing (dilution ratio 1:19) by the BioCLIA instruments automatically.



#### **Assay Calibration**

The BioCLIA Autoimmune Reagent Kit utilizes a predefined lot specific Master Curve which is uploaded into the instrument via the barcode provided in the kit. Based on the results of running two calibrators, the instrument specific Working Calibration Curve is generated and is used to calculate the concentration from the RLU obtained for each patient.

For each new lot of reagent, please calibrate prior to the first time use, and every 28 days thereafter. The software will not allow the lot to be used if the above requirements are not meet.

#### **Control**

The control procedure should be done before running the specimens each day. Users also can adjust the control procedure period according to their own lab frequency.

Each Laboratory should establish its own reference ranges.

### **Programming and Running samples**

- Put the kit into any empty position of the reagent chamber of the BioCLIA instruments. Details of the kit can be uploaded into the instrument system through the scanning of reagent barcode, and can also be set manually.
- The information of calibrator / quality control is identified by scanning the calibrator / control barcodes, and the position of calibrator / quality control is assigned in the instrument system.
- The sample to be tested is placed on the instrument sample rack chamber, and the corresponding test information is edited through the instrument supporting software.
- Start the operation procedure, and all calibrator / quality control / sample processing steps will be automatically executed.

### **CALCULATION OF RESULTS**

Calculation and interpretation of results will be performed automatically by software on BioCLIA instruments.

### RESULT INTERPRETATION

Specimens with concentration <10 IU/mL, should be interpreted as

Specimens with concentration ≥10 IU/mL, should be interpreted as positive.

The test results only reflect the amount of antigen specific IgG present in the sample and should be diagnosed in conjunction with other laboratory and clinical findings.

# **CUT-OFF VALUE DETERMINATION**

120 clinical samples, including 30 positive sera, 30 negative sera, 30 positive plasmas and 30 negative plasmas were collected and evaluated. Results of 120 clinical samples tested by the BioCLIA Autoimmune Results were analyzed using the receiver-operating characteristic curve (ROC) and the cut-off value was determined at 10 IU/mL.

### PERFORMANCE CHARACTERISTICS

### ACCURACY / SPIKED RECOVERY

This assay consists of two reference samples (low, high) which are traceable to WHO Standard Anti-GAD, CNS Code: 97/550. The reference materials are tested in triplicate to obtain a value of M, and calculated as: Measured deviation = (M - theoretical value)/ theoretical value x 100%.\*

Samples (IU/mL)	Ave. Conc.	Exp.	Measured Deviation
Sample 1 (low)	9.76	10	-2.4%
Sample 2 (high)	500.64	500	0.1%

<sup>\*</sup>Representative data; results in individual laboratories may vary from these data.

### **TRACEABILITY**

Anti-GAD antibody concentration can be traced to WHO Standard Anti-GAD, CNS Code: 97/550.

### **PRECISION**

A study based on guidance from (NCCLS) document EP-A<sup>18</sup> was performed.

Intra-assay precision: Four samples (negative, low, moderate, and high) were taken and tested with 10 replicates for each in a single run. Coefficient of variation (CV) was calculated for each of four samples. The results for intra-assay precision are shown in the table below.

Inter-assay precision: Four samples (negative, low, moderate, and high) were taken and tested with 4 replicates in a single run, two runs per day for 10 days. Coefficient of variation (CV) was calculated for each of four samples. The results for inter-assay precision are shown in the table below. \*

tra-Assay	Sample1	Sample2	Sample3	Samp
an(IU/mL)	5.03	47.77	492.85	1481.

Intra-assay precision: CV < 10%

Int ole4 Mea .13 CV 2.9% 3.0% 2.97% 3.17%

Inter-assay precision: CV< 15% Sample2 Inter-Assay Sample1 Sample3 Sample4 Mean(IU/mL) 5.01 47.36 491.27 1497.55 CV 2.4% 5.1% 8.7% 3.6%

# LIMIT OF BLANK / DETECTION (LOB/LOD)

LOB/LOD was determined according to CLSI EP17-A guideline.

The assay is designed to have LoB/LoD of ≤ 0.5 IU/mL.

# **LINEARITY**

The linear range of the assay is 2.5-2000 IU/mL.

The linear range was determined by serially diluting a sample containing high levels of antigen specific IgG with a negative sample

<sup>\*</sup>Representative data; results in individual laboratories may vary from these data.



and covering the entire assay linear range according to the scheme in CLSI EP6-A. The expected value was plotted against the observed value, and linear regression analysis was performed to get slope, intercept and coefficient of correlation (r) values. The results are summarized in the table below\*:

Slope	Intercept	r
0.99	-0.71	0.99

<sup>\*</sup>Representative data: results in individual laboratories may vary from these data.

#### INTERFERENCE

No interference has been observed with bilirubin, hemoglobin, triglycerides, rheumatoid factor (RF), human anti-mouse antibody (HAMA) at the levels indicated below.

- Bilirubin ≤ 40 mg/dL;
- Hemoglobin ≤ 150 mg/dL;
- Triglycerides ≤ 1,000 mg/dL;
- Rheumatoid factor (RF) ≤ 1,000 IU/mL;
- Human anti-mouse antibody (HAMA) ≤ 2,000 ng/mL.

#### **METHOD COMPARISON**

Method comparison was implemented by comparing clinical sample results of the assay to the results of predicated assay. The results are shown in the table below.

Clinical Sample		BioCLIA Autoimmune Reagent Kit		
		-	+	Total
-		57	3	60
Predicated Method	+	2	38	40
	Total	59	41	100

Sensitivity	95%	
Specificity	95%	
Total agreement	95%	

### **LIMITATIONS**

- The effectiveness of this kit is only confirmed for human serum/plasma, the applicability of the other kinds of samples is not verified.
- Reliable and reproducible results will be obtained when the assay procedure is carried out in accordance with the instructions and with adherence to good laboratory practice.
- Clinical diagnosis should not be made on the findings of a single test result, but should be interpreted with all clinical and laboratory findings.

### **SYMBOLS**

ANTIGEN BIOT	Biotinylated antigen	
CONJ AP G	AP labeled anti-human IgG antibody	
M ANTIGEN	Antigen coated microparticles	
RCNS H <sub>2</sub> O DIST	Reconstitute with distilled water before using	

#### **REFERENCES**

1. Cooke A. An overview on possible mechanisms of destruction of the insulin-producing beta cell. Curr Top Microbiol Immunol 1990;164:125-42.

REF	Catalog Number	$\square$	Use-by date
IVD	In Vitro diagnostic medical device	LOT	Lot Number
+2°C	Store between +2°C and +8°C	(i	Consult Instruction for Use
•••	Manufacturer	EC REP	Authorized Representative in the European Community
C€	CE Marking	\sum_	Contains Sufficient for <n>Tests</n>
₩	Biological Risk	1>	GHS07 Warning

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- 6. Christgau S, Schierbeck H, Aanstoot H, Aagaard L, Begley K, Kofod H, et al. Pancreatic beta cells express two autoantigenic forms of glutamic acid decarboxylase, a 65-kDa hydrophilic form and a 64-kDa amphiphilic form which can be both membrane-bound and soluble. J Biol Chem 1991:266:21257-64.
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# The eIFU is available on Website:

http://en.hob-biotech.com/usercenter/login.aspx

# TECHNICAL ASSISTANCE

For technical assistance, contact your National Distributor.

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