

### **BioCLIA Autoimmune Calibrator Set, ICA**

Cat.No.	Kit Size
MY00246	2 X 1 mL
MY00297	4 X 1 mL

#### **INTENDED USE**

The BioCLIA Autoimmune Calibrator Set, ICA is intended for the calibration of the BioCLIA ICA performed on the BioCLIA 6500 and BioCLIA 500.

For professional in vitro diagnostic use only.

#### **SUMMARY AND EXPLANATION**

Insulin - dependent diabetes mellitus (IDDM), Type 1, is caused by the autoimmune destruction of the beta cells of the pancreas. <sup>1, 2</sup> 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 specificlly to islet cell antigenic components, glutamic acid decarboxylase and insulin. <sup>4</sup>

Islet Cell Autoantibodies are present in 70% of patients with a recent onset of IDDM compared with 0.1 - 0.5% of the control non-diabetic population. <sup>5</sup> ICA are also detected in first degree relatives of IDDM patients. These individuals comprise the segment of human population who are at a high risk of developing IDDM. Several studies reported that the ICA-positive first degree relatives of IDDM patients subsequently developed diabetes. <sup>6</sup> Other studies also suggested that the presence of serum ICA and IAA is an indicator of the enhanced likelihood to develop IDDM. <sup>7</sup> Therefore, serological detection of ICA may be a powerful tool for early diagnosis of IDDM. The significance of these autoantibodies as markers of IDDM is also illustrated by their presence in nondiabetic individuals who ultimately develop IDDM. The screening of high-risk populations, for all of the three autoantibodies (ICA, IAA and ICA) 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. 8

#### **MATERIALS SUPPLIED**

• ICA Calibrator 1 Barcode labeled tubes with buffer containing human antibodies to ICA in stabilizers and preservatives. Ready to use, 1 mL.

CAL 1

Preservatives: 0.0015% < Proclin 300 < 0.6%.

• ICA Calibrator 2 Barcode labeled tubes with buffer containing human antibodies to ICA in stabilizers and preservatives. Ready to use, 1 mL.

CAL 2

Preservatives: 0.0015% < Proclin 300 < 0.6%.

The Calibrator Code contains calibrators' information is provided in each kit.

#### WARNINGS AND PRECAUTIONS

- For professional in vitro diagnostic use only.
- Do not use any calibrators beyond their expiration dates.
- Do not mix calibrators from different lots unless specified.
- Instructions must be carefully followed for using and storing of calibrators. Any modification in procedure may interfere with the results.
- Calibrators and contaminated vials must be handled strictly following safety guidelines or rules of biological hazards to ensure the users' and environmental safety.
- 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!

#### **Precautions:**



Human serum is added in the calibrators.

The human derived material in this product was tested by FDA approved methods and found nonreactive for Hepatitis B Surface Antigen (HBsAg), Anti-HCV and HIV 1/2 antibodies. Handle as if potentially infectious. <sup>7</sup> Avoid contacting with skin and eyes. Do not empty into drains. Wear suitable protective gloves and clothing.



- Proclin 300 is added in the calibrators at concentration between 0.0015% 0.6%.
- Calibrators contain chemical and biological components. Avoid ingesting or splashing onto skin and mucous membrane. If direct contact with calibrators happens, rinse immediately the contact surface with plenty of water and see a doctor if necessary.

#### STORAGE CONDITIONS

- Store the kit at 2-8 °C.
- The shelf life of the unopened kit is 12 months from day of production.
- Vial opened calibrators could be used for 28 successive days, exposure no more than 2 hours each time when kept uncapped and is good for up to 20 calibrations, after which the reagent must be discarded.
- Avoid repeated freezing and thawing.

1



#### **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.

#### **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 main reagent kit. The Calibrator Code contains calibrator information is then scanned. 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.

#### **Programming and Running samples**

- Put the kit into the corresponding position of the reagent chamber of the fully automatic chemiluminescence analyzer. The information of the kit can be uploaded into the instrument system through the scanning of reagent barcode, and can also be set through the supporting software of the instrument.
- 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.
- 4. Start the operation procedure, and all calibrator / quality control / sample processing steps will be automatically executed.

#### **TRACEABILITY**

The reported values were determined over multiple runs on the BioCLIA 6500 and BioCLIA 500 using specific lots of reagents against an in-house standard. DGP IgA results are reported in RU/mL which is interpreted from relative light unit (RLU). Method comparison test showed good sensitivity and specificity of tested assay.

#### LIMITATIONS

- The calibrators are designed for calibration of the same lot of BioCLIA Autoimmune Reagent Kit.
- The calibrators can be kept uncapped onboard the instrument up to 2 hours for each time of usage. And a total up to 20 calibrations are suggested, for any longer period of time, the reagent should be discarded, otherwise may result in improper calibration of the assay and which can give improper results.

#### **SYMBOLS**

CAL 1	Calibrator 1	
CAL 2	Calibrator 2	

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	\subseteq	Contains Sufficient for <n>Tests</n>
\$€	Biological Risk	1>	GHS07 Warning

### REFERENCE

- 1. Cooke A. An overview on possible mechanisms of destruction of the insulinproducing beta cell. Curr Top Microbiol Immunol 1989;164:125-42.
- 2. Harrison L, Campbell I, Colman P, Chosich N, Kay T, Tait B, et al. Type 1 diabetes: immunology and immunotherapy. Adv Endocrinol Metab 1990;1:35-94.
- 3. Bottazzo G, Florin-Christensen A, Doniach D. Islet-cell antibodies in diabetes mellitus with autoimmune polyendocrine deficiencies. The Lancet 1974;304:1279-83.
- 4. Colman PG, Nayak RC, Campbell IL, Eisenbarth GS. Binding of cytoplasmic islet cell antibodies is blocked by human pancreatic glycolipid extracts. Diabetes 1988;37:645-52.
- 5. Riley W, Maclaren N. Islet-cell antibodies are seldom transient. The Lancet 1984;323:1351-52.
- 6. Soeldner JS, Tuttleman M, Srikanta S, Ganda OP, Eisenbarth GS. Insulindependent diabetes mellitus and autoimmunity: islet-cell autoantibodies, insulin autoantibodies, and beta-cell failure. N Engl J Med 1985;313:893-4.
- 7. Eisenbarth GS, Connelly J, Soeldner JS. The "natural" history of type I diabetes. Diabetes Metab Rev 1987;3:873–91.
- 8. Dean BM, Becker F, Mcnally JM, Tarn AC, Schwartz G, Gale EA, Bottazzo GF. Insulin autoantibodies in the pre-diabetic period: correlation with islet cell antibodies and development of diabetes. Diabetologia 1986;29:339-42.
- 9. US Department of Health and Human Services. Biosafety in Microbiological and Biomedical Laboratories, Fourth Edition. Washington, DC: US Government Printing Office, May 1999.





HOB Biotech Group Corp., Ltd.

C6 Building, No. 218 Xinghu Road, Suzhou Industrial Park, Suzhou, Jiangsu, 215123, China

#### **CONTACT INFORMATION:**

TEL (+86)512-69561996 Fax (+86)512-62956652

WEBSITE: www.hob-biotech.com

**CUSTOMER SERVICE:** HOB Biotech Group Co., Ltd **CUSTOMER SERVICE:** TEL (+86)4008601202

EC REP

**EUROPE REPRESENTATIVE:** Emergo Europe

ADDRESS/LOCATION:

Prinsessegracht 20, 2514 AP The Hague, The Netherlands





# The eIFU is available on Website:

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

## TECHNICAL ASSISTANCE

For technical assistance, contact your National Distributor.

Date of issue: 17th March 2019

Date of revision: 20<sup>th</sup> December 2021 Change Control Number: CN21129E

Version: A/1 (EN)