**HUMAN HAPTOGLOBIN**

Immunoperoxidase Assay for Determination of Haptoglobin in Human Samples

**DIRECTIONS FOR USE**

Version 3 L20.0 -- 19

For Research Use Only, NOT for Diagnostic Purposes

*Please Read this Package Insert Completely Before Using This Product*

**INTENDED USE**

The Haptoglobin test kit is a highly sensitive two-site enzyme linked immunosorbent assay (ELISA) for measuring Haptoglobin in serum or plasma of Human. Cross Reactivity with Cynomolgus Monkeys has been observed.

**INTRODUCTION**

Acute phase proteins are plasma proteins which increase in concentration following infection, inflammation or trauma. The first acute phase protein to be recognized was discovered in humans by Tillet and Frances in 1930. Haptoglobin (Hp) is a heterogeneous plasma protein mostly synthesized by the liver. The haptoglobin monomer consist of two heavy chains, beta chains (40 kD) and two light chains, alpha chains, alpha 1 (9 kD) and alpha 2 (16 kD) that are linked disulfide bonds. The three major haptoglobin types are: Hp1-1 which is monomeric (98 kD), Hp1-2 is polymeric at about 200 kD, and Hp2-2 at about 400 kD. The levels in serum rise quickly following acute tissue damage within 24 to 48 hours and also fall very rapidly once the stimulus is removed. In fact, Hp level are decreased in hemolytic anemia. Hp has a high affinity for hemoglobin (Hb) and its function appears to be to prevent loss of Hb in urine which would lead to loss of iron. Investigations over the past few years have shown that quantification of Hp in plasma or serum can provide valuable diagnostic information in the detection, prognosis, and monitoring of disease not only in humans, but in companion animals and farm herds as well.

**PRINCIPLE OF THE ASSAY**

The principle of the double antibody sandwich ELISA is represented in Figure 1. In this assay the Haptoglobin present in samples reacts with the anti-Haptoglobin antibodies which have been adsorbed to the surface of polystyrene microtitre wells. After the removal of unbound proteins by washing, anti-Hp antibodies conjugated with horseradish peroxidase (HRP), are added. These enzyme-labeled antibodies form complexes with the previously bound Hp. Following another washing step, the enzyme bound to the immunosorbent is assayed by the addition of a chromogenic substrate, 3,3',5,5'-tetramethylbenzidine (TMB). The quantity of bound enzyme varies directly with the concentration of Hp in the sample tested; thus, the absorbance, at 450 nm, is a measure of the concentration of Hp in the test sample. The quantity of Hp in the test sample can be interpolated from the standard curve constructed from the standards, and corrected for sample dilution.

---

**REAGENTS** (Quantities sufficient for 96 determinations)

1. **DILUENT CONCENTRATE** (Running Buffer)
   One bottle containing 50 ml of a 5X concentrated diluent running buffer.
2. WASH SOLUTION CONCENTRATE
One bottle containing 50 ml of a 20X concentrated wash solution.

3. ENZYME-ANTIBODY CONJUGATE 100X
One vial containing 150 µL of affinity purified anti-Human Haptoglobin antibody conjugated with horseradish peroxidase in a stabilizing buffer.

4. CHROMOGEN-SUBSTRATE SOLUTION
One vial containing 12 mL of 3,3',5,5'-tetramethybenzidine (TMB) and hydrogen peroxide in citric acid buffer at pH 3.3.

5. STOP SOLUTION
One vial containing 12 ml 0.3 M sulfuric acid.

WARNING: Avoid contact with skin.

6. ANTI-HUMAN HAPTOGLOBIN ELISA MICROPLATE
Twelve removable eight (8) well micro well strips in well holder frame. Each well is coated with affinity purified anti-Human Hp.

7. HUMAN HAPTOGLOBIN CALIBRATOR
One vial containing a lyophilized Human Haptoglobin calibrator.

FOR IN VITRO USE ONLY

REAGENT PREPARATION

1. DILUENT CONCENTRATE
The Diluent Solution supplied is a 5X Concentrate and must be diluted 1/5 with distilled or deionized water (1 part buffer concentrate, 4 parts dH2O).

2. WASH SOLUTION CONCENTRATE
The Wash Solution supplied is a 20X Concentrate and must be diluted 1/20 with distilled or deionized water (1 part buffer concentrate, 19 parts dH2O). Crystal formation in the concentrate is not uncommon when storage temperatures are low. Warming of the concentrate to 30-35°C before dilution can dissolve crystals.

3. ENZYME-ANTIBODY CONJUGATE
Calculate the required amount of working conjugate solution for each microtitre plate test strip by adding 10 µL Enzyme-Antibody Conjugate to 990 µL of 1X Diluent for each test strip to be used for testing. Mix uniformly, but gently. Avoid foaming.

4. CHROMOGEN-SUBSTRATE SOLUTION
Ready to use as supplied.

5. STOP SOLUTION
Ready to use as supplied.

6. ANTI-HUMAN HAPTOGLOBIN ELISA MICROPLATE
Ready to use as supplied. Unseal Microtiter Pouch and remove plate from pouch. Remove all strips and wells that will not be used in the assay and place back in pouch and re-seal along with desiccant.

7. HUMAN HAPTOGLOBIN CALIBRATOR
Add 1.0 ml of distilled or de-ionized water to the Human Haptoglobin Calibrator and mix gently until dissolved. The calibrator is now at a concentration of 11.31 µg/ml (the reconstituted calibrator should be aliquoted and frozen if future use is intended). Human Haptoglobin standards need to be prepared immediately prior to use (see the following chart). Mix well between each step. Avoid foaming.

<table>
<thead>
<tr>
<th>Standard</th>
<th>ng/ml</th>
<th>Volume added to 1X Diluent</th>
<th>Volume of 1X Diluent</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>125</td>
<td>4 µL Human HP Calibrator</td>
<td>895 µL</td>
</tr>
<tr>
<td>6</td>
<td>62.5</td>
<td>250 µL standard 7</td>
<td>250 µL</td>
</tr>
<tr>
<td>5</td>
<td>31.25</td>
<td>250 µL standard 6</td>
<td>250 µL</td>
</tr>
<tr>
<td>4</td>
<td>15.6</td>
<td>250 µL standard 5</td>
<td>250 µL</td>
</tr>
<tr>
<td>3</td>
<td>7.8</td>
<td>250 µL standard 4</td>
<td>250 µL</td>
</tr>
<tr>
<td>2</td>
<td>3.9</td>
<td>250 µL standard 3</td>
<td>250 µL</td>
</tr>
<tr>
<td>1</td>
<td>1.95</td>
<td>250 µL standard 2</td>
<td>250 µL</td>
</tr>
<tr>
<td>0</td>
<td>0</td>
<td></td>
<td>500 µL</td>
</tr>
</tbody>
</table>

STORAGE AND STABILITY

The expiration date for the package is stated on the box label.

1. DILUENT
The 5X Diluent Concentrate is stable until the expiration date. The 1X working solution is stable for at least one week from the date of preparation. Both solutions should be stored at 4-8°C.

2. WASH SOLUTION
The 20X Wash Solution Concentrate is stable until the expiration date. The 1X working solution is stable for at least one week from the date of preparation. Both solutions can be stored at room temperature (16-25°C) or at 4-8°C.
3. ENZYME-ANTIBODY CONJUGATE
Undiluted horseradish peroxidase anti-Hp conjugate should be stored at 4-8°C and diluted immediately prior to use. The working conjugate solution is stable for up to 1 hour when stored in the dark.

4. CHROMOGEN-SUBSTRATE SOLUTION
The Substrate Solution should be stored at 4-8°C and is stable until the expiration date.

5. STOP SOLUTION
The Stop Solution should be stored at 4-8°C and is stable until the expiration date.

6. ANTI-HUMAN HAPTOGLOBIN ELISA MICRO PLATE
Anti-Human Hp coated wells are stable until the expiration date, and should be stored at 4-8°C in sealed foil pouch with desiccant pack.

7. HUMAN HAPTOGLOBIN STANDARDS
The lyophilized Human Haptoglobin calibrator should be stored at 4°C or frozen until reconstituted. The reconstituted calibrator should be aliquoted out and stored frozen (Avoid multiple freeze-thaw cycles). The working standard solutions should be prepared immediately prior to use and are stable for up to 8 hours.

INDICATIONS OF INSTABILITY
If the test is performing correctly, the results observed with the standard solutions should be within 20% of the expected values.

SPECIMEN COLLECTION AND HANDLING
Blood should be collected by venipuncture. The serum should be separated from the cells after clot formation by centrifugation. For plasma samples, blood should be collected into a container with an anticoagulant and then centrifuged. Care should be taken to minimize hemolysis, excessive hemolysis can impact your results. Assay immediately or aliquot and store samples at -20°C. Avoid repeated freeze-thaw cycles.

1. Precautions
For any sample that might contain pathogens, care must be taken to prevent contact with open wounds.

2. Additives and Preservatives
No additives or preservatives are necessary to maintain the integrity of the specimen. Avoid azide contamination.

3. Known interfering substances
Azide and thimerosal at concentrations higher than 0.1% inhibits the enzyme reaction.

MATERIAL PROVIDED
See "REAGENTS"

MATERIALS REQUIRED BUT NOT PROVIDED
- Precision pipette (2 μL to 200 μL) for making and dispensing dilutions
- Test tubes
- Microtitre washer/aspirator
- Distilled or Deionized H₂O
- Microtitre Plate reader
- Assorted glassware for the preparation of reagents and buffer solutions
- Timer

ASSAY PROTOCOL
DILUTION OF SAMPLES
The assay for quantification of Hp requires that each test sample be diluted before use. For a single step determination a dilution of serum/plasma at 1/50,000 is appropriate for most samples. For absolute quantification, samples that yield results outside the range of the standard curve, a lesser or greater dilution might be required. If unsure of sample level, a serial dilution with one or two representative samples before running the entire plate is highly recommended.

1. To prepare a 1/10,000 dilution of sample, transfer 5 μL of sample to 495μL of 1X diluent. This gives you a 1/100 dilution. Next, dilute the 1/100 samples by transferring 5 μL, to 495 μL of 1X diluent. You now have a 1/10,000 dilution of your sample. Mix thoroughly at each stage.

PROCEDURE
1. Bring all reagents to room temperature before use.

2. Pipette 100 μL of
   Standard 0 (0.0 ng/ml) in duplicate
   Standard 1 (1.95 ng/ml) in duplicate
   Standard 2 (3.9 ng/ml) in duplicate
   Standard 3 (7.8 ng/ml) in duplicate
   Standard 4 (15.6 ng/ml) in duplicate
   Standard 5 (31.25 ng/ml) in duplicate
   Standard 6 (62.5 ng/ml) in duplicate
   Standard 7 (125 ng/ml) in duplicate

3. Pipette 100 μL of sample (in duplicate) into pre designated wells.
4. Incubate the micro titer plate at room temperature for fifteen (15 ± 2) minutes. Keep plate covered and level during incubation.

5. Following incubation, aspirate the contents of the wells.

6. Completely fill each well with appropriately diluted Wash Solution and aspirate. Repeat three times, for a total of four washes. If washing manually: completely fill wells with wash buffer, invert the plate then pour/shake out the contents in a waste container. Follow this by sharply striking the wells on absorbent paper to remove residual buffer. Repeat 3 times for a total of four washes.

7. Pipette 100 μL of appropriately diluted Enzyme-Antibody Conjugate to each well. Incubate at room temperature for fifteen (15 ± 2) minutes. Keep plate covered in the dark and level during incubation.

8. Wash and blot the wells as described in Steps 5/6.

9. Pipette 100 μL of TMB Substrate Solution into each well.

10. Incubate in the dark at room temperature for precisely five (5) minutes.

11. After five minutes, add 100 μL of Stop Solution to each well.

12. Determine the absorbance (450 nm) of the contents of each well. Calibrate the plate reader to manufacturer’s specifications.

STABILITY OF THE FINAL REACTION MIXTURE

The absorbance of the final reaction mixture can be measured up to 2 hours after the addition of the Stop Solution. However, good laboratory practice dictates that the measurement be made as soon as possible.

RESULTS

1. Subtract the average background value from the test values for each sample.

2. Using the results observed for the standards construct a Standard Curve. The appropriate curve fit is that of a four-parameter logistics curve. A second order polynomial (quadratic) or other curve fits may also be used.

3. Interpolate test sample values from standard curve. Correct for sera dilution factor to arrive at the haptoglobin concentration in original samples.

LIMITATION OF THE PROCEDURE

1. Reliable and reproducible results will be obtained when the assay procedure is carried out with a complete understanding of the information contained in the package insert instructions and with adherence to good laboratory practice.

2. Factors that might affect the performance of the assay include proper instrument function, cleanliness of glassware, quality of distilled or deionized water, and accuracy of reagent and sample pipettings, washing technique, incubation time or temperature.

3. Do not mix or substitute reagents with those from other lots or sources.

REFERENCES
