en

Immunoassay

REF CMD0401 / CMD0402 / CMD0403 / CMD0404 / CMD0405

50 tests*1 / 100 tests*1 / 100 tests*2 / 100 tests*5 / 50 tests*2

Renin CLIA Microparticles

This assay is based on a chemiluminescent microparticle immunoassay(CLIA Microparticles) for the quantitative determination of Renin in human plasma (EDTA).

All trademarks are properties of their respective owners.

Key to Graphical Symbols Used

LOT	batch code		use by
	manufacturer	Σ	contains sufficient for <n> tests
IVD	*in vitro* diagnostic medical device		temperature limitation
REF	catalogue number		consult instructions for use
EC REP	authorized representative in the European Community		

EC REP
OBELIS S.A.
Bd. Général Wahis, 53
1030Brussels
Belgium

AUTOBIO DIAGNOSTICS CO., LTD.
No.87 Jingbei Yi Road
National Eco & Tech Development Area
Zhengzhou
China
450016

CE IVD

For any technical assistance please contact us in English at:
Email: customer service@autobio.com.cn
Contact your local dealer for all product-related questions in your local language.

Introduction

Renin is a proteolytic enzyme which is secreted by the renal juxtaglomerular apparatus or cells of the kidney[1]. Renin catalyzes the cleavage of a decapeptide, angiotensin I, from the circulating substrate, angiotensinogen. Angiotensin I is further converted to an octapeptide, angiotensin II, by the action of angiotensin-converting enzyme (ACE). Angiotensin II is a powerful vasoconstrictor which acting on the arterioles, it's because angiotensin II has stronger biologicalactivity[2]. Angiotensinogen and angiotensin-converting enzyme (ACE) usually exist in plasma. The release of renin is a key point to determine the concentration of angiotensin in plasma.[1,2]

The primary structure of renin precursor consists of 406 amino acids with a pre- and a pro-segment carrying 20 and 46 amino acids, respectively. Mature renin contains 340 amino acids and has a molecular weight of 37 kDa.

The detection of active renin applies to: 1. Auxiliary diagnosis of hypertension (caused by renal-artery stenosis); 2. auxilliary diagnosis of hyperaldosteronism[3].

Measurement Principle

This assay is based upon the two-step sandwich method. In the first step, the patient sample and Microparticles Solution are added. After incubation, unbound components are washed off. Enzyme labeled Renin antibody conjugate is added. Renin present in the sample is allowed to react simultaneously with the two antibodies, thus a complex is generated among the solid phase, the renin within the sample and enzyme-linked antibodies by immunological reactions. Chemiluminescent Substrate are then added and catalyzed by this complex, resulting in a chemiluminescent reaction. The resulting chemiluminescent reaction is measured as RLUs. The RLU is proportional to the concentration of Renin in the patient sample.

Materials provided

1. Calibrators

6 vials lyophilized calibrator A through F. The matrix is Tris-NaCl buffer containing a protein of bovine origin. Contains a selection of preservatives.

Reconstitute each lyophilized calibrator with 1.0 mL of distilled water. Allow the reconstituted material to stand for at least 5 minutes. Then invert the calibrator gently to mix it completely.

2. Reagent pack

Reagent pack provided ready to use.

Σ	50*1	100*1	100*2	100*5	50*2
Microparticles Solution	1.2mL*1	2.3mL*1	2.3mL*2	2.3mL*5	1.2mL*2
Enzyme Conjugate	5.5mL*1	11.0mL*1	11.0mL*2	11.0mL*5	5.0mL*2

- Microparticles Solution

Contains mouse monoclonal Anti-Renin coated microparticles in PBS (phosphate buffered saline) containing bovine serum. Contains a selection of preservatives.

- Enzyme Conjugate

Contains horseradish-peroxidase labeled monoclonal Anti-Renin in Tris-NaCl buffer containing a protein of bovine origin. Contains a selection of preservatives.

Assay Analyzers on which the kit can be used

- AutoLumo A2000 Plus
- AutoLumo A2000 Plus B
- Auto Lumo A1000

The chemiluminescent microparticle immunoassay (CLIA Microparticles) is intended for use on Assay Analyzers which are AutoLumo A2000 Plus, AutoLumo A2000 Plus B and AutoLumo A1000.

Materials Required but not Provided

1. Assay Analyzer
2. Reaction vessel(s) for sample and reagent reaction
3. Sample tube(s) or cup(s) for sample containing
4. Chemiluminescent Substrate
5. System Wash for washing the pipetting needle
6. Wash Buffer used in the washing procudure
7. Distilled or deionized water

Metrological Traceability of Calibrators

The product calibrators are manufactured using pure grade Renin and signal matched to our working calibrators, which are also signal matched to a higher order calibrator purchased from WHO (World Health Organization) 68/356, at each concentration level.

Warnings and Precautions

1. For professional use only.
2. Follow the instruction for use carefully. Reliability of assay results cannot be guaranteed if there are any deviations from the instructions in this instruction for use.
3. Refer to the material safety data sheet and product labeling for any chemical hazards that may be present in this assay.
4. Handle the potentially contaminated materials and wastes safely according to local requirement.
5. CAUTION: This assay contains materials of animal origin. Bovine components originate from countries where bovine spongiform encephalopathy (BSE) has not been reported.
6. Some reagents contain ProClin 300®may cause sensitization by skin contact, which must be avoided to contact with skin. This material and its container must be disposed in a safe way. If swallowed, seek medical advice immediately.
7. Do not smoke, drink, eat or use cosmetics in the working area.
8. Wear protective clothing and disposable gloves when dealing with samples and reagents. Wash hands after operations.
9. Conduct the assay away from bad ambient conditions. e.g. ambient air containing high concentration corrosive gas such as sodium hypochlorite acid, alkaline, acetaldehyde and so on, or containing dust.
10. Do not use reagents beyond the labeled expiry date.
11. Do not mix or use components from kits with different batch codes.
12. When storing the calibrators, be certain the vials are securely sealed.
13. Ensure the microparticles are resuspended before loading it on the analyzer.
14. Avoid foam formation in all reagents and sample types (samples, calibrators and controls).
15. Do not substitute any reagent in this kit from other manufacturers or other lots.
16. When any damage to the protective packaging or any change of analytical performance is observed, do not use the kit.

Storage

1. Store the kit at 2-8℃. Do not freeze. Avoid strong light. When stored as directed, all reagents are stable until the expiration date.

2. Refrigerate the reagent pack at 2-10℃ for a minimum of 2 hours prior to use.
3. Store the unsealed reagents pack upright on the analyzer or 2-10℃ for a maximum of 28 days. After 28 days, the reagent pack must be discarded. Once they are removed from the analyzer, store them at 2-10 ℃ in an upright position.
4. Seal and return the remaining calibrators at 2-8℃ immediately after the experiment, under which conditions the stability will be retained for 7 days.

Sample

1. Collect samples in accordance with correct medical practices.
2. Do not use heat-inactivated samples. Do not use sodium azide preservative in samples.
3. Do not use samples with obvious microbial contamination.
4. Sediments and suspended solids in samples may interfere with the test result which should be removed by centrifugation. Ensure that complete clot formation in serum samples has taken place prior to centrifugation. Some samples, especially those from patients receiving anticoagulant or thrombolytic therapy, may exhibit increased clotting time. If the sample is centrifuged before a complete clot forms, the presence of fibrin may cause erroneous results. Be sure that the samples are not decayed prior to use.
5. Prior to shipment, it is recommended that samples be removed from the clot, or red blood cells.
6. Insufficient processing of sample, or disruption of the sample during transportation may cause depressed results.
7. Avoid grossly hemolytic, lipemic or turbid samples.
8. Cap and store the samples at 18-25 ℃ for no more than 8 hours, or freeze the plasma samples that need to be stored for more than 8 hours at -20℃. Sample can not be stored at 2-8 ℃. Avoid multiple freeze-thaw cycles. Mix thawed samples thoroughly by low speed vortexing or by inverting 10 times. Visually inspect the samples, if layering or stratification is observed, continue mixing until samples are visibly homogeneous. After thawing, bring to room temperature and mix well by gently shaking.
9. Centrifuge the thawed samples containing red blood cells or particulate matter, or which are hazy or cloudy in appearance prior to use to ensure consistency in the results.
10. Note that interfering levels of fibrin may be present in samples that do not have obvious or visible particulate matter.
11. If proper sample collection and preparation cannot be verified, or if samples have been disrupted due to transportation or sample handling, an additional centrifugation step is recommended. Centrifugation conditions should be sufficient to remove particulate matter.
12. For optimal results, inspect all samples for bubbles. Remove bubbles with a tip prior to analysis. Use a new tip for each sample to prevent cross contamination.

Measurement Procedure

1. Check the consumable materials

- Verify adequate volume of consumable materials is present prior to running the test.
- Refer to the Assay Analyzer's operation manual.

2. Load the kit

- Mix contents of new (unpunctured) reagent packs by gently inverting pack several times before loading on the analyzer. Avoid foam formation in all reagents. Don't invert the open (punctured) packs. If necessary, shake gently to mix horizontally after the first loading.
- Read the bar code on the reagent pack automatically to obtain the required parameters for the test.
- If the bar code cannot be read in exceptional cases, they can be recognized manually.
- Refer to the Assay Analyzer's operation manual.

3. Order tests

- Place the sample tubes or cups on the sample holder, 100 μL of samples for each test. But consider the sample container and 150 μL of system dead volumes, which can be refer to the appropriate Assay Analyzer manuals for the minimum sample volume required.
- Load the sample holder and input the sample information on the system software interface.
- Select "run" to start the test, the analyzer automatically operates tests. It performs the following functions:
  - Moves the sample to the set point
  - Loads a reaction vessel into the process path
  - Aspirates and transfers sample into the reaction vessel
  - Adds Microparticles Solution to the reaction vessel
  - Mixes, incubates and washes the reaction mixture
  - Adds Enzyme Conjugate to the reaction vessel
  - Mixes, incubates and washes the reaction mixture
  - Adds Chemiluminescent Substrate
  - Measures chemiluminescent emission to determine the quantity of Renin in the sample
  - Discards the used reaction vessel
  - Calculates the result
- Refer to the Assay Analyzer's operation manual.

4. Calibrate the curve

- Analyzer can read the bar code on the reagent pack automatically to obtain the required parameters for the test.
- If the bar code cannot be read in exceptional cases, they can be recognized manually.
- Transfer the calibrators into the sample tubes or cups and place them on the sample holder. Conduct duplicate detection on the system.
- Load the sample holder and input calibrator's information on the system software interface.
- Select "run" to start the test and generate the calibration curve, calibration is required every28 days.
- Once a calibration curve is accepted and stored, all subsequent samples may be tested without further calibration unless:
  - Controls are out of range after repeated measurements
  - A reagent kit and Chemiluminescent Substrate with new batch code is used
  - Beyond the expiration date of a calibration curve
  - Important parts of the analyzer are replaced or repaired.
- Refer to the Assay Analyzer's operation manual.

5. Dilute the sample

Samples with a Renin value exceeding 500 pg/mL may be diluted manually. Low-value Renin sample is used to dilute the samples. After dilution, multiply the result by the dilution factor.

- The concentration of the sample after dilution should not be less than 0.5 pg/mL.

Measurement Results

The sample test results are determined automatically by the system software. The amount of Renin in the samples is determined from the measured light production by means of the stored calibration data. Refer to the Assay Analyzer's operation manual on reviewing sample results.

Control Procedure

Controls for the various concentration ranges should be run individually when the test is in use, once per reagent kit, and following each calibration.
The control intervals and limits should be adapted to each laboratory's individual requirements. Values obtained should fall within the defined limits. Each laboratory should establish corrective measures to be taken if values fall outside the defined limits.
Follow the applicable government regulations and local guidelines for quality control.

Limitations of the Procedure

1. This assay is intended as an aid for the clinical diagnosis. Conduct this assay in conjunction with clinical examination, patient's medical history and other test results.
2. If the results are inconsistent with clinical evidence, additional testing is suggested to confirm the result.
3. A skillful technique and strict adherence to the instructions are necessary to obtain reliable results.
4. A result within the biological reference interference does not rule out the presence of disease and should be interpreted together with the patient's clinical picture and other diagnostic procedures.
5. Test results are reported quantitatively. However, diagnosis of a disease should not be based on the result of a single test, but should be determined in conjunction with clinical findings in association with medical judgement.
6. Any therapeutical decision must also be taken on a case-by-case basis.
7. This Renin assay has been developed for the determination of the analyte in its intact and unalteredstate. Degradation of the molecule or prorenin cryoactivation may affect final results.
8. Heterophilic antibodies and rheumatoid factors in samples may interfere with test results. Heterophilic antibodies in human serum can react with reagent immunoglobulins, interfering with *in vitro* immunoassays. Patients routinely exposed to animals or animal serum products can be prone to this interference and anomalous values may be observed. Additional information may be required for diagnosis. This kind of samples is not suitable to be tested by this assay.
9. Renin levels in paediatric age have not been investigated.
10. No interference due to drug administration has been investigated.
11. If a patient, for some reason, reads higher than the highest calibrator report as such (e.g. > 500 pg/mL). To obtain more accurate results, dilute the samples with Diluent Universal to retest. For the specific method of dilution, please refer to Measurement Procedure part.
12. This test measures concentrations within the range of4-500 pg/mL. If Renin concentrations above the measuring range to be expected, it is recommended to dilute samples with low concentration Renin sample. The recommended dilution is 1:9 of this test, allowing samples to be up approximately to 5000 pg/mL.

Biological Reference Interval

A normal range of 4pg/mL to 38pg/mL for upright position and 4 pg/mL to 24 pg/mL for supine position (95% confidence interval) were obtained by testing plasma samples from 334 individuals defined as normal by a clinician. It is recommended that each laboratory establish its own normal range which may be unique to the population it serves depending upon geographical, patient, dietary, or environmental factors.

Performance Characteristics

1. Measurement Precision

3 samples were assayed in duplicate of 2, twice per day across 20 testing days. Data from this study are summarized in the following table.

Sample	n	Mean (pg/mL)	Within-run	Total
			%CV	%CV
1	80	4.81	6.76	7.42
2	80	33.92	3.25	4.55
3	80	192.86	4.77	5.10

*Representative data; results in individual laboratories may vary from these data.

2. Analytical Sensitivity

Limit of Blank: 0.19pg/mL.
Limit of Detection: 0.75pg/mL.
Limit of Quantitation: 1.7 pg/mL with a coefficient of variation of 20%.

3. Analytical Specificity

Cross reaction: The following substances and concentrations were tested and found no cross reaction with the test.

Substance	Concentration (pg/mL)	Measured Value (pg/mL)
Prorenin	1000	⩽2

Interference: No interference with 100 mg/dL of haemoglobin, 20 mg/dL of Bilirubin, 1000 mg/dL of Triglyceride.

4. Trueness by Recovery Test

1 set formed of a high concentration and a low concentration to renin sample (samples X and Y) were mixed in 4:1, 3:2, 2:3 and 1:4 ratios and assayed, measured versus expected renin concentrations were analyzed by linear regression. The correlation coefficients (r)ranged from 0.996 to 1.000.

Dilution	Measured Concentration (pg/mL)	Expected Concentration (pg/mL)	Recovery %
X	8.838	8.838	-
4:1	83.054	81.439	101.9
3:2	155.072	154.041	100.7
2:3	233.646	226.642	103.1
1:4	310.851	299.244	103.9
Y	371.846	371.846	-

5. Measurement Accuracy by Correlation

A study was performed where samples were tested using this assay and a Renin Test which was already available on the market. Data were analyzed and are summarized in the following table.

Correlation Method	Number of Samples	Intercept	Slope	Correlation Coefficient
Linear Regression	57	2.8313	0.9922	0.9842

6. High dose HOOK Effect

The high-dose hook effect was determined by addition of recombinant Renin to a human plasma pool up to amaximum of 1500pg/mL.

Whenever samples containing extremely high measurand concentrations are tested, the high-dose hook effect can mimic concentrations lower than real. Analysis of high-dose hook effect was evaluated by testing one high-concentration renin-spiked sample. The sample resulted in a calculated concentration value above the assay range, indicating no sample misclassification.

Literature References

1. Direct Renin Assay and Plasma Renin Activity Assay Compared .Clinical Chemistry,2004 ; 50 (11): 2159-2161.

2. Aldosterone and renin measurements [Review]. Ann ClinBiochem 2000;37:262-278.

3. Measurement of plasma renin:a critical review of methodology. JRAAS, 2010;11(2): 89-90.