Product information



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Aldosterone ELISA



For Research Use Only - Not for Use in Diagnostic Procedures



IB79134



Please use only the valid version of the Instructions for Use provided with the kit.

Introduced modifications		
The following changes have been made in comparison to the previous version:		
Detailed editorial revision. Changed wording in several chapters.		
10.2 Detection Capability Addition of LLLI		
10.4 Recovery; 10.5 Linearity Addition of latest data; inclusion of sample type		
11.1. Interfering Substances	Addition of further matrix interference data, heterophilic antibodies, autoantibodies and listing of drugs. Addition of Trueness (Bias) data	
13 Literature	Addition of references 17-19	

Table of Contents

1	INTENDED USE	4
2	PRINCIPLE OF THE TEST	4
3	WARNINGS AND PRECAUTIONS	4
4	MATERIALS	6
5	SAMPLE COLLECTION, STORAGE AND PREPARATION	8
6	ASSAY PROCEDURE	9
7	QUALITY CONTROL	.11
8	PERFORMANCE CHARACTERISTICS	
9	LIMITATIONS OF THE PROCEDURE	14
10	LEGAL ASPECTS	15
11	SYMBOLS USED WITH IBL-AMERICA ASSAYS	16

1 INTENDED USE

The **IBL-America Aldosterone ELISA** is a manual enzyme immunoassay for the measurement of aldosterone in human serum or plasma (EDTA, Li-heparin or citrate plasma) or urine. **For research use only – Not for use in diagnostic procedures.**

2 PRINCIPLE OF THE TEST

The IBL-America Aldosterone ELISA is a solid phase enzyme-linked immunosorbent assay (ELISA) based on the **principle of competitive binding**. The microtiter wells are coated with a monoclonal antibody (mouse) directed towards a unique antigenic site of the aldosterone molecule. During the first incubation, the aldosterone in the added sample competes with the added enzyme conjugate, which is aldosterone conjugated to horseradish peroxidase, for binding to the coated antibody. After a washing step to remove all unbound substances, the solid phase is incubated with the substrate solution. The colorimetric reaction is stopped by addition of stop solution, and optical density (OD) of the resulting yellow product is measured. The intensity of color is inversely proportional to the concentration of the analyte in the sample.

3 WARNINGS AND PRECAUTIONS

- For research use only Not for use in diagnostic procedures.
- Before starting the assay, read the instructions for use completely and carefully. <u>Use the valid version of instructions for use provided with the kit.</u> Be sure that everything is understood.
- Do not mix or use components from kits with different lot numbers. It is advised not to interchange wells of different plates even of the same lot. The kits may have been shipped or stored under different conditions and the binding characteristics of the plates may result slightly different.
- Do not use reagents beyond expiry date as shown on the kit labels.
- Do not reuse microtiter wells.
- Reagents of other manufacturers must not be used together with the reagents of this test kit.
- -All reagents in this kit are clear liquids, substrate solution is clear and colorless. Changes in its appearance may affect the performance of the test. In that case, contact IBL-America.
- Microbial contamination of reagents or samples may give false results.
- Allow the reagents to reach room temperature (20 °C to 26 °C) before starting the test. Temperature will affect the optical density readings of the assay.
- All indicated volumes must be performed according to the protocol. Optimal test results are only obtained when using calibrated pipettes and microtiter plate readers.
- Use reservoirs only for single reagents. This especially applies to the substrate reservoirs. Using a reservoir for dispensing a substrate solution that had previously been used for the conjugate solution may turn solution coloured. Do not pour reagents back into original vials as reagent contamination may occur.

General precautions

- Follow good laboratory practice and safety guidelines.
- Never pipet by mouth and avoid contact of reagents and samples with skin and mucous membranes.
- Do not smoke, eat, drink, or apply cosmetics in areas where samples or kit reagents are handled.
- Wear lab coats and disposable latex gloves when handling samples and reagents and where necessary safety glasses.

Biohazard information

- All reagents of this test kit which contain human serum or plasma have been tested and confirmed negative for HIV I/II, HBsAg and HCV by FDA approved procedures. However, no known test method can offer total assurance that no infectious agent is present.
- The device contains material of animal origin, which is certified apparently free of infectious or contagious diseases and injurious parasites.
- Bovine components originate from countries where BSE (Bovine spongiform encephalopathy) has not been reported.
- All materials and samples of human or animal origin must be handled as if capable of transmitting infectious diseases.
- Handling must be done in accordance with the procedures defined by appropriate national biohazard and safety guideline or regulation. Waste must be discarded according to local rules and regulations.

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Information to chemical hazards and hazard classification

- Some reagents contain preservatives in non-declarable concentrations. Nevertheless, in case of contact with eyes or skin, flush immediately with water.
- Substrate Solution contains an ingredient in non-declarable concentrations which causes serious eye irritation. In case of possible contact with eyes, rinse immediately carefully and thoroughly with eye wash or water. After contact with skin, wash with plenty of water. Take-off contaminated clothing and wash it before reuse.
- Avoid contact with Stop Solution containing 0.5 M H₂SO₄. It may cause skin irritation and burns.
- Chemicals and prepared or used reagents must be treated as hazardous waste according to the national safety guideline or regulation.
- This product does not contain substances which have carcinogenic, mutagenic or toxic for reproduction (CMR) properties.

The following kit components are classified as hazardous: Enzyme Conjugate, Standard 0-5, Control low & Control high, Wash Solution.

Warning Hazard statement(s): H317 - May cause an allergic skin reaction. EUH071 - Corrosive to the respiratory tract Precautionary statement(s): P261 - Avoid breathing dust/fume/gas/mist/vapours/ spray. P280 - Wear protective gloves. P333 + P313 - If skin irritation or rash occurs: Get medical advice/attention. P362 + P364 - Take off contaminated clothing and wash it before reuse. P501 - Dispose of contents/ container to an approved waste disposal plant

For detailed information, please refer to the Safety Data Sheet, which is available upon request directly from IBL-America.

4 MATERIALS

4.1 Materials provided with the kit

- 1. **SORB** MT Microtiterwells, 12 x 8 wells (break apart), ready to use; Microtiter plate coated with anti-aldosterone antibody (monoclonal).
- 2. **CAL 0 5 LYO Calibrator 0-5,** 6 x 1.0 mL, lyophilized; See "Reagent Preparation"; Standards*, concentrations: 0 20 80 200 500 1000 pg/mL; Conversion: 1 pg/mL corresponds to 2.77 pmol/L; The standards are calibrated against the following reference material: Certified reference material Cerilliant A-096.
- 3. CONTROL low & high LYO Control Low & Control High, 2 x 1.0 mL, lyophilized; See "Reagent Preparation". Controls*; For control values and ranges please refer to vial label or Certificate of Analysis.
- 4. **ENZ CONJ Enzyme Conjugate**, 1 x 14 mL, ready to use; Enzyme Conjugate*, aldosterone conjugated to horseradish.
- 5. **SUB TMB** Substrate Solution, 1 x 14 mL, ready to use; Substrate Solution, Contains 3,3',5,5'-tetramethylbenzidine (TMB). *Keep away from direct sun light*.
- 6. **STOP SOLN Stop Solution**, 1 x 14 mL, ready to use; Stop Solution, contains < 5 % H₂SO₄, avoid contact with the stop solution. It may cause skin irritations and burns.
- 7. **WASH SOLN 40x Wash Solution, conc.**, 1 x 30 mL, see "Reagent Preparation"; Wash Solution*, 40X concentrate.
- 8. 1x Instructions for Use; 1x Certificate of Analysis (CoA)
 - * Contain(s) 0.0108 % CMIT/ MIT (3:1).

Abbreviations:

CMIT: 5-chloro-2-methyl-4-isothiazolin-3-one

MIT: 2-methylisothiazol-3(2H)-one

4.2 Materials required but not provided

- A calibrated microtiter plate reader (450 nm, with reference wavelength at 620 nm to 630 nm)
- Calibrated variable precision micropipettes
- Manual or automatic equipment for rinsing microtiter plate wells
- Absorbent paper
- Distilled water
- Timer
- Graph paper or software for data reduction
- Optional: Reagents for determination of Aldosterone in urine (REF DE5298URIN)
 Contents:
 - 1) *Release Reagent*, 1 vial, 3 mL, ready to use. Containing 1 M HCl. Avoid contact with *Release Reagent*. It may cause skin irritation.
 - 2) Neutralization Buffer, 1 vial, 3 mL, ready to use. Containing Tris buffer, pH 8.5.
 - 3) Dilution Buffer, 2 vials, 25 mL each, ready to use. Containing PBS.
- Optional: Plastic tubes (e.g. 0.5-1.5mL) for pre-treatment of urine samples

4.3 Storage and Stability of the Kit

Unopened kits and reagents as well as **opened reagents** must be stored at 2 °C to 8 °C. The micro-plate must always be stored in the resealable aluminum pouch containing a desiccant. Do not open the pouch until it has reached room temperature. The microtiter plate consists of 12 individual strips. Each strip can be divided into 8 individual wells. Unused wells must be immediately returned to the aluminum pouch with the desiccant and stored again tightly resealed at 2 °C to 8 °C. Once opened, reagent vials must be closed tightly again.

	Storage Temperature	Stability
Unopened kits and unopened reagents	2 °C to 8 °C	Until the expiration date printed on the label. Do not use reagents beyond this date!
Opened kit	2 °C to 8 °C	8 weeks (For reconstituted reagents refer to "4.4 Reagent Preparation".)

4.4 Reagent Preparation

Bring all reagents and required number of strips to room temperature (20 °C to 26 °C) prior to use.

Standards

Reconstitute the lyophilized contents of each standard vial with 1.0 mL distilled water and let stand for at least 10 minutes at room temperature. Mix several times before use.

Stability after reconstitution:	at 2 °C to 8 °C	8 weeks
	at -20 °C (in aliquots)	12 months

Controls

Reconstitute the lyophilized content of each control vial with 1.0 mL distilled water and let stand for at least 10 minutes at room temperature. Mix several times before use.

Stability after reconstitution:	at 2 °C to 8 °C	8 weeks
	at -20 °C (in aliquots)	12 months

Wash Solution

Add distilled water to the 40X concentrated Wash Solution. Dilute 30 mL of concentrated *Wash Solution* with 1170 mL distilled water to a final volume of 1200 mL.

Stability after dilution:	at 20 °C to 26 °C	1 week
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4.5 Disposal of the Kit

The disposal of the kit and all used materials/reagents must be performed according to the national regulations. Special information for this product is given in the Safety Data Sheet, section 13.

4.6 Damaged Test Kits

In case of any damage to the test kit or components, IBL-America must be informed in writing, at the latest one week after receiving the kit. Damaged single components must not be used for a test run. They have to be stored until a final solution has been found. After this, they must be disposed of according to the official regulations.

5 SAMPLE COLLECTION, STORAGE AND PREPARATION

The following sample material can be used in this test:

human serum or plasma (2 EDTA, K3 EDTA, lithium heparin or citrate plasma 3.2 %) and urine

Samples containing sodium azide should not be used in the assay.

In general, it should be avoided to use hemolytic, icteric, or lipemic samples. For further information refer to chapter "Interfering Substances".

5.1 Human Serum or Plasma Samples

5.1.1 Sample Collection

Serum: Collect blood by venipuncture (e.g. Sarstedt Monovette for serum), allow to clot, and separate serum by centrifugation at room temperature. Do not centrifuge before complete clotting has occurred. Individuals receiving anticoagulant therapy may require increased clotting time.

Plasma: Whole blood should be collected into centrifuge tubes containing anticoagulant (e.g. Sarstedt Monovette with the appropriate plasma preparation) and centrifuged immediately after collection. Whole blood should not be frozen before centrifugation.

Stability of whole blood ¹⁸ at 20 °C to 26 °C up to 4 days

5.1.2 Samples Storage

Samples must be stored tightly capped prior to performing the assay. If stored frozen, freeze only once. Thawed samples must be inverted several times prior to testing.

Stability	at 2 °C to 8 °C	5 days
	at -20 °C (in aliquots)	up to 12 months

5.1.3 Sample Preparation

Serum and plasma samples can be assayed without additional preparation.

5.1.4 Sample Dilution

If in an initial assay, a serum or plasma sample is found to contain more than the highest standard, it can be diluted with *Standard 0* and reassayed as described in Assay Procedure.

For the calculation of the concentrations this dilution factor has to be taken into account.

Example: dilution 1:10: 10 μL sample + 90 μL Standard 0 (mix thoroughly)

5.2 Urine Samples

Aldosterone concentration can also be determined from urine samples. However, urine samples must be pre-treated before analysis. This will need additional reagents that are not included in this kit but can be ordered separately (REF DE5298URIN).

5.2.1 Sample Collection

First clean genital area with mild disinfectant to prevent contamination. Then collect clean-catch midstream urine in an appropriate sterile container.

Since aldosterone secretion follows a circadian rhythm, an urine collection is recommended in a special cooled container over a full 24-hour period (24-hour urine).

Directly after collection, the urine should be centrifuged for 5 - 10 minutes (e.g. at 2000 g) to remove cellular debris.

Use supernatant for analyte quantification.

5.2.2 Samples Storage

Urine supernatant must be stored tightly capped prior to performing the assay. If stored frozen, freeze only once. Thawed supernatant must be inverted several times prior to testing.

Stability of	at 2 °C to 8 °C	7 days
urine supernatant	at -20 °C (in aliquots)	7 days

5.2.3 Protocol for Urine Sample Pre-treatment

To pre-treat urine samples, it is recommended to use the Aldosterone Reagent Set Urine (DE5298URIN)

- Secure the desired number of vials (e.g. 0.5 1.5 mL plastic tubes; not included in this kit).
- 2. Dispense **25 μL** of **urine** with new disposable tips into appropriate tubes.
- 3. Dispense **25 μL** *Release Reagent* into each tube.
 - Thoroughly mix for 10 seconds. It is important to have a complete mixing in this step.
- 4. Incubate overnight at 2 °C to 8 °C.
- 5. Add **25 μL Neutralization Reagent** to each tube and mix thoroughly.
- 6. Add **400** µL *Dilution Buffer* to each tube and mix thoroughly (This pre-treatment leads to a 1:19 dilution. Therefore, the <u>dilution factor 19</u> has to be taken into account for calculation of the final concentration of the urine sample.)
- 7. Transfer **100 µL of pre-treated and diluted urine samples** directly to the microtiter well and continue with step 3 of Test Procedure (Chapter 6.2).

5.2.4 Storage of Pre-treated Urine Samples

Pre-treated and diluted urine samples should be capped and may be stored for up to 7 days at 2 °C to 8 °C or frozen at -20 °C prior to assaying. Samples should be frozen only once at -20 °C prior to assay.

Thawed samples should be inverted several times prior to testing.

5.2.5 Urine Sample Dilution

If in an initial assay, an urine sample is found to contain more than the highest standard, the <u>pretreated and diluted</u> urine sample can be further diluted with *Dilution Buffer* and reassayed as described in Assay Procedure.

For the calculation of the concentrations this dilution factor has to be taken into account too.

Example: dilution 1:10: 10 μL pre-treated and diluted urine sample + 90 μL Dilution Buffer

(mix thoroughly)

(final dilution factor = $19 \times 10 = 190$)

6 ASSAY PROCEDURE

6.1 Procedural Notes

- All reagents and samples must be allowed to come to room temperature (20 °C to 26 °C) before
 use
- All reagents must be mixed without foaming.
- Do not interchange caps of reagent vials to avoid cross-contamination.
- Use new disposal plastic pipette tips for each standard, control, or sample in order to avoid carryover.
- To avoid cross-contamination and falsely elevated results pipette samples and dispense conjugate without splashing accurately to the bottom of wells.
- Mix the contents of the microtiter plate wells thoroughly to ensure good test results.
- Do not let wells dry during assay; add reagents immediately after completing the rinsing steps.
- Once the test has been started, all steps must be completed without interruption and in the same sequence for each step.
- The enzymatic reaction is linearly proportional to time and temperature.
- Optical density is a function of the incubation time and temperature. Respect the incubations times and temperatures as given in chapter "Test Procedure".
- Before starting the assay, it is recommended that all reagents are ready, caps removed, all needed wells secured in holder, etc. This will ensure equal elapsed time for each pipetting step without interruption.

– Important note to wash procedure:

Washing is critical. Improperly washed wells will give erroneous results. The sensitivity and precision of this assay is markedly influenced by the correct performance of the washing procedure!

- Test performance using fully automated analysis devices:

Automated test performance using fully automated, open-system analysis devices is possible. However, the combination must be validated by the user.

6.2 Test Procedure

Each run must include a standard curve.

The controls serve as internal controls for the reliability of the test procedure. They must be assayed with each test run.

The given test procedure describes manual processing.

Important note: The accuracy of this assay is markedly influenced by the correct incubation temperature.

- 1. Secure the desired number of microtiter wells in the frame holder.
- 2. Pipette **100 μL** of each *Standard, Control*, and sample with new disposable tips into appropriate= wells. For urine samples dispense **100 μL** of the <u>pre-treated and diluted urine samples</u> (see chap-ter 5.2.2 *Protocol for Urine Sample Pre-treatment*, step 7).
- 3. Incubate for **30 minutes** at room temperature.
- 4. Add 100 μL Enzyme Conjugate into each well.

Thoroughly mix for 10 seconds. It is important to have a complete mixing in this step.

- 5. Incubate for **60 minutes** at room temperature.
- 6. Wash the wells as follows: If the wash step is performed manually:

Briskly shake out the contents of the wells. Rinse the wells **3 times** with **300 µL** diluted *Wash Solution* per well.

If an <u>automated plate washer</u> is used: Rinse the wells **3 times** with **300 μL** diluted *Wash* Solution per well.

At the end of the washing step, always strike the wells sharply on absorbent paper to remove residual droplets!

- 7. Pipette 100 µL of Substrate Solution to each well.
- 8. Incubate for **30 minutes** at room temperature.
- 9. Stop the enzymatic reaction by adding **50 μL** of **Stop Solution** to each well.
- 10. Measure the optical density (OD) of the solution in each well at **450 nm (reading) and at 620 nm to 630 nm (background subtraction, recommended)** with a microtiter plate reader. It is recommended that the wells be read **within 10 minutes** after adding the *Stop Solution*.

6.3 Results

- 1. The concentration of the **serum** / **plasma samples** can be read **directly** from the standard curve. For **urine samples** the concentration read from the standard curve, has to be **multiplied** with the **dilution factor 19** (see chapter 5.2.2).
- 2. For duplicate determinations, the mean of the two optical density (OD) values for each standard, control, and sample must be taken. If the two values deviate substantially from one another, IBL-America recommends retesting the samples.
- 3. Samples with concentrations exceeding the highest standard can be further diluted and re-assayed as described in "Test Procedure", or must be reported as > 1000 pg/mL. For the calculation of the concentrations, this dilution factor must be considered.
- 4. Automated method:

The results in the instructions for use have been calculated automatically using a four-parameter logistic (4PL) curve fit. (4PL Rodbard or 4PL Marquardt are the preferred methods.) Other data reduction functions may give slightly different results.

5. Manual method:

Using linear or semi-logarithmic graph paper, construct a standard curve by plotting the (mean) OD obtained from each standard against its concentration with OD value on the vertical (Y) axis and concentration on the horizontal (X) axis. Determine the corresponding sample concentration from the standard curve by using the (mean) OD value for each sample.

6.4 Final Calculation for Urine Samples

Calculate the 24 hours excretion for each urine sample: $\mu g/24 h = \mu g/L \times L/24 h$

Example:

Concentration for urine sample read from the standard curve = 500 pg/mLResult after correction with the dilution factor 19 = 9500 pg/mL $9500 \text{ pg/mL} / 1000 = <math>9.5 \text{ \mug/L}$

Total volume of 24 h-urine = 1.3 L (example)

 $9.5 \mu g/L \times 1.3 L/24 h = 12.35 \mu g/24 h$

7 QUALITY CONTROL

Good laboratory practice requires that controls be run with each calibration curve. A statistically significant number of controls should be assayed to establish mean values and acceptable ranges to assure proper performance. It is recommended to use control samples according to state and federal regulations. The use of control samples is advised to assure the day-to-day validity of results. Use controls at both normal and pathological levels. The controls and the corresponding results of the Quality Control Laboratory are stated in the Certificate of Analyses (CoA) added to the kit. The values and ranges stated on the CoA always refer to the current kit lot and must be used for direct comparison of the results. If available, it is also recommended to make use of national or international Quality Assessment programs in order to ensure the accuracy of the results. Apply appropriate statistical methods for analyzing control values and trends. If the results of the assay do not agree with the established acceptable ranges of control materials, results should be considered invalid. In this case, please check the following technical areas: Pipetting and timing devices; photometer, expiration dates of reagents, storage and incubation conditions, aspiration and washing methods. After checking the above-mentioned items without finding any error contact your distributor or IBL-America directly.

8 PERFORMANCE CHARACTERISTICS

8.1 Specificity of Antibodies (Cross-Reactivity)

The following substances were tested for cross-reactivity of the assay:

Substance	Conc. Range of Spiked Sub- stance	Mean Cross-Re- activity (%)
11-Deoxy Cortisol	10 – 1000 ng/mL	0.01
17-OH Progesterone	1.2 – 120 ng/mL	0.00
21-OH Progesterone	3.5 – 350 ng/mL	0.04
Androstenedione	0.2 – 22 ng/mL	0.0
Androsterone	10 – 1000 ng/mL	0.00
BSA	1 – 100 mg/mL	0.00
Cholesterol	0.5 – 50 mg/mL	0.00
Corticosterone	0.5 – 50 ng/mL	0.15
Cortisol	8 – 800 ng/mL	0.0
Cortisone	16 – 1600 ng/mL	0.01
Creatinine	50 – 5000 μg/mL	0.00

Substance	Conc. Range of Spiked Substance	Mean Cross-Re- activity (%)
DHEA	0.5 – 50 ng/mL	0.03
DHEA-S	300 – 30000 ng/mL	0.00
Estradiol	0.02 – 2 ng/mL	0.01
Estriol	1.5 – 150 ng/mL	0.00
Estrone	0.01 – 1 ng/mL	0.05
Glucose	1 – 100 mg/mL	0.00
Prednisolone	35 – 3500 ng/mL	0.00
Prednisone	35 – 3500 ng/mL	0.00
Pregnenolone	35 – 3500 ng/mL	0.00
Progesterone	42.2 – 4220 ng/mL	0.00
Testosterone	0.01 – 1 ng/mL	0.00

8.2 Detection Capability

Calculated according to CLSI guideline EP17-A2:2012.

	Serum	Urine
Limit of Blank (LoB)	5.359 pg/mL	
Limit of Detection (LoD)	7.374 pg/mL	8.902 pg/mL
Limit of Quantification (LoQ)	10.647 pg/mL	15.665 pg/mL
Lower Limit of Linear Interval (LLLI)	14.144 pg/mL	21.200 pg/mL
Measuring range	7.374 pg/mL – 1000pg/mL	8.902 – 1000 pg/mL
Linear range	14.144 pg/mL – 1000 pg/ mL	21.200 – 1000 pg/mL

8.3 Repeatability and Reproducibility

Designed on the basis of CLSI guideline EP5-A3:2014.

8.3.1 Repeatability

The repeatability was determined with 4 patient samples covering the complete measuring range within 20 days in 2 independent runs per day. CV was calculated as mean CV of 40 runs. CV must be < 10 %.

Serum	n	Mean (pg/mL)	CV (%)
1	5	55.66	6.5
2	5	88.88	6.7
3	5	325.82	3.8
4	5	709.07	4.5

Urine	n	Mean (pg/mL)	CV (%)
1	5	88.47	4.3
2	5	167.59	6.4
3	5	343.98	5.5
4	5	634.55	5.9

8.3.2 Reproducibility (Between-run Precision)

The between-run precision was determined with 4 samples covering the complete measuring range. The 4 samples were measured in 5 days with 5 replicates per run. The same procedure was performed with 4 urine samples.

Serum	n	Mean (pg/mL)	CV (%)
1	25	55.66	7.4
2	25	88.88	9.8
3	25	325.82	6.5
4	25	709.07	9.6

Urine	n	Mean (pg/mL)	CV (%)
1	25	88.47	8.2
2	25	167.59	7.3
3	25	343.98	7.5
4	25	634.55	8.3

8.3.3 Reproducibility (Between-lot Precision)

The between-lot variation was determined by 6 measurements of different samples with 3 different kit lots. CV must be < 15 %.

Serum	n	Mean (pg/mL)	CV (%)
1	18	56.78	8.8
2	18	95.41	7.7
3	18	309.52	8.1
4	18	637.70	9.4

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8.4 Recovery

Recovery was determined by adding increasing amounts of the analyte to different patient samples containing different amounts of endogenous analyte. The percentage recoveries were determined by comparing expected and measured values of the samples.

Sample Type		K₃ EDTA	Li- Hepa- rin	Cit- rate 3.2 %	Se- rum	Urine	Urine	Urine	Urine
Highest concentration added [pg/mL]		80.58	80.58	80.58	94.42	168.9 5	168.9 5	121.9 8	69.69
Concentration [pg/mL]		19.25	49.52	298.4 5	589.3 3	79.50	153.0 8	178.9 8	233.4 2
Average Recovery [%]		92.0	100.0	104.5	94.5	99.9	98.8	103.0	100.6
Pango of Pacayony [9/1		87.4	91.2	95.7	90.9	94.8	95.1	98.9	98.4
Range of Recovery [%]	to	103.4	112.8	112.4	98.2	103.0	104.3	104.6	105.3

8.5 Linearity

Samples containing different amounts of analyte were serially diluted with Standard 0. The percentage recovery was calculated by comparing the expected and measured values for the analyte.

Sample Type		Li-Hep- arin	K₃ EDTA	Serum	Serum
Highest dilution		1:16	1:16	1:64	1:2
Concentration [pg/mL]		517.12	241.39	1085.81	85.90
Average Recovery [%]		98.4	102.5	100.8	111.0
Range of Recovery [%]	fro m	92.7	93.8	88.3	108.5
	to	102.9	110.2	96.5	112.3

Urine	Urine	Urine	Urine	
1:16	1:16	1:8	1:2	
379.70	592.90	1012.49	96.87	
90.5	108.9	76.24	100.28	
85.8	106.5	86.2	90.7	
93.5	110.2	105.8	110.8	

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9 LIMITATIONS OF THE PROCEDURE

Reliable and reproducible results will be obtained when the assay procedure is performed with a complete understanding of the instructions for use and in compliance with the laboratory quality assurance guidelines. Any improper handling of samples or modification of this test might influence the results.

9.1 Interfering Substances

19.1.1 Matrix Interference

No interference (bias $< \pm 20$ %) was found for addition of interferent up to concentration stated in the table below.

Bilirubin unconjugated	up to 0.3 mg/mL
Bilirubin conjugated	up to 0.1 mg/mL
Hemoglobin	up to 2.0 mg/mL
Triglyceride	up to 7.5 mg/mL
Cholesterol	up to 4.0 mg/mL
Ethanol	up to 0.5 mg/mL
Glucose	up to 12.5 mg/mL

9.1.2 Heterophilic Antibody Interference

Patient samples may contain heterophilic antibodies, including endogenous, polyclonal, weakly polyspecific human anti-mouse antibodies (HAMA) and endogenous, monospecific, high-affinity human anti-animal antibodies (HAAA). Heterophilic antibodies in a sample may cause false positive (mostly) or false negative results in immunoassays¹⁷. However, it is generally accepted that heterophile antibodies do not interfere in competitive binding, immunenephelo-metric or immunoturbidimetric assays¹⁹. Since the Aldosterone ELISA has a competitive assay format, no interference testing for heterophilic antibodies was done.

9.1.3 Autoantibody Interference

Patient samples may contain autoantibodies including Rheumatoid Factors (RFs) which are directed against endogenous substances of the patient. Autoantibodies may cause false positive (mostly) or false negative results in immunoassays¹⁷. In immunoassays, they react similar to heterophilic antibodies. Heterophilic antibodies in a sample may cause false positive (mostly) or false negative results in immunoassays⁹. However, it is generally accepted that heterophile antibodies do not interfere in competitive binding, immunonephelometric or immunoturbidimetric assays¹⁹. Since the Aldosterone ELISA has a competitive assay format, no interference testing for autoimmune antibodies and RFs was done.

9.1.4 Drug Interferences

The following drugs were tested. Bias must be < 10 %.

Substance	Concentration Range of spiked Substance (ng/mL)	Mean Bias (%)
Verapamil	21.6 - 2160	-1.91
Enalapril	4.24 - 424	-2.53
Acetylsalicylic Acid	652 - 65200	-0.38
Paracetamol	2000 - 200000	-3.47
Spironolacton	6 - 600	-1.93
Prazosine HCI	120 - 12000	-0.99
Fludrocortisone	20 - 2000	6.59
L-Ascorbic Acid	600 - 60000	1.39
Furosemide	60 - 6000	4.70
Dexamethasone	20 - 2000	4.93

9.2 High-Dose Hook Effect

"High-Dose Hook Effect" is not detected up to 20,000 pg/mL of Aldosterone.

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93 Trueness (Bias)

The assay is calibrated in the range of the reference material (Certified reference material Cerilliant A-096). The difference from the expected value was below \pm 20 %.

Concentra- tion	Bias	Uncertainty of the reference material
50.00 pg/mL	-6.7 %	5.0 %
150 pg/mL	-7.3 %	2.7 %
700 pg/mL	-8.4 %	1.6 %

10 LEGAL ASPECTS

10.1 Reliability of Results

The test must be performed exactly as per the manufacturer's instructions for use. Moreover, the user must strictly adhere to the laboratory quality assurance guidelines and applicable national standards and/or laws. This is especially relevant for the use of control reagents. It is important to always include, within the test procedure, a sufficient number of controls for validating the accuracy and precision of the test. The test results are valid only if all controls are within the specified ranges and if all other test parameters are also within the given assay specifications. If there is any doubt or concern regarding a result, please contact DEMEDITEC.

10.2 Liability

Any modification of the test kit and/or exchange or mixture of any components of different lots from one test kit to another could negatively affect the intended results and validity of the overall test. Such modifi-cation and/or exchanges invalidate any claim for replacement. Claims submitted due to customer misin-terpretation of laboratory results subject to point 11.2 are also invalid. Regardless, in the event of any claim, the manufacturer's liability is not to exceed the value of the test kit. Any damage caused to the test kit during transportation is not subject to the liability of the manufacturer.

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11 SYMBOLS USED WITH IBL-AMERICA ASSAYS

Symbol	English	Deutsch	Française	Espanol	Italiano
C€	European Conformity	CE-Konformitäts- kennzeichnung	Conforme aux normes européennes	Conformidad europea	Conformità europea
(i)	Consult instructions for use	Gebrauchsanweisung beachten	Consulter les instruc- tions d'utilisation	Consulte las Instrucciones	Consultare le istruzioni per l'uso
IVD	In vitro diagnostic de- vice	In-vitro-Diagnostikum	utilisation Diagnostic in vitro	Diagnóstico in vitro	Per uso Diagnostica in vitro
RUO	For research use only	Nur für Forschungs- zwecke	Seulement dans le cadre de recherches	Sólo para uso en investigación	Solo a scopo di ricerca
REF	Catalogue number	Katalog-Nr.	Référence	Número de catálogo	No. di catalogo
LOT	Lot. No. / Batch code	Chargen-Nr.	No. de lot	Número de lote	Lotto no
Σ	Contains sufficient for <n> tests/</n>	Ausreichend für "n" Ansätze	Contenu suffisant pour "n" tests	Contenido suficiente para <n> ensayos</n>	Contenuto sufficiente per "n" saggi
\triangle	Note warnings and pre- cautions	Warnhinweise und Vorsichtsmaßnahmen beachten	Avertissements et me- sures de précaution font attention	Tiene en cuenta advertencias y precauciones	Annoti avvisi e le pre- cauzioni
1	Storage Temperature	Lagerungstemperatur	Température de con- servation	Temperatura de conservacion	Temperatura di conservazione
	Expiration Date	Mindesthaltbarkeits- datum	Date limite d'utilisation	Fecha de caducidad	Data di scadenza
***	Legal Manufacturer	Hersteller	Fabricant	Fabricante	Fabbricante
Distributed by	Distributed by	Vertrieb durch	Distribution par	Distribución por	Distribuzione da parte di
V <x></x>	Version	Version	Version	Versión	Versione
(2)	Single-use	Einmalverwendung	À usage unique	Uso único	Uso una volta

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