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Instructions for use

5-HIAA ELISA

Enzyme Immunoassay for the quantitative determination
of 5-Hydroxy-3-Indole Acetic Acid (5-HIAA) in urine.

For *in-vitro* diagnostic use only.

REF

IB89129



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IVD

1. Introduction**1.1 Intended use and principle of the test**

Enzyme Immunoassay for the quantitative determination of 5-Hydroxy-3-Indole Acetic Acid (5-HIAA) in urine. For *in-vitro* diagnostic use only.

First, 5-HIAA is derivatized by methylation. The subsequent competitive ELISA uses the microtiter plate format. The antigen is bound to the solid phase of the microtiter plate. The methylated analyte in the standards, controls and samples and the solid phase bound analyte compete for a fixed number of antibody binding sites. After the system has reached equilibrium, free antigen and free antigen-antibody complexes are removed by washing. The antibody bound to the solid phase is detected by an anti-rabbit IgG-peroxidase conjugate using TMB as a substrate. The reaction is monitored at 450 nm. Quantification of unknown samples is achieved by comparing their absorbance with a standard curve prepared with known standard concentrations.

1.2 Clinical application

5-HIAA (5-hydroxyindoleacetic acid) is the major urinary metabolite of serotonin, an ubiquitous bioactive amine. Serotonin, and consequently 5-HIAA, is produced in excess by most carcinoid tumors, especially those associated with the carcinoid syndrome. The syndrome includes flushing and diarrhea, and, less frequently, heart failure and bronchoconstriction. Quantitation of urinary 5-HIAA is therefore intended to test for carcinoid.

Therapeutic consequences should never be based on laboratory results alone even if all test results are in agreement with the items as under point "Procedural cautions, guidelines and warnings". Any laboratory result is only a part of the total clinical picture of the patient.

Only in cases where the laboratory results are in an acceptable agreement with the overall clinical picture of the patient it can be used for therapeutic consequences.

The test result itself should never be the sole determinant for deriving any therapeutic consequences.

2. Procedural cautions, guidelines, warnings and limitations**2.1 Procedural cautions, guidelines and warnings**

- (1) This kit is intended for professional use only. Users should have a thorough understanding of this protocol for the successful use of this kit. Only the test instruction provided with the kit is valid and has to be used to run the assay. Reliable performance will only be attained by strict and careful adherence to the instructions provided.
- (2) This assay was validated for a certain type of sample as indicated in *Intended Use* (please refer to Chapter 1). Any off-label use of this kit is in the responsibility of the user and the manufacturer cannot be held liable.
- (3) The principles of Good Laboratory Practice (GLP) have to be followed.
- (4) In order to reduce exposure to potentially harmful substances, wear lab coats, disposable protective gloves and protective glasses where necessary.
- (5) All kit reagents and specimens should be brought to room temperature and mixed gently but thoroughly before use. Avoid repeated freezing and thawing of reagents and specimens.
- (6) For dilution or reconstitution purposes, use deionized, distilled, or ultra-pure water.
- (7) The microplate contains snap-off strips. Unused wells must be stored at 2 °C to 8 °C in the sealed foil pouch with desiccant and used in the frame provided.
- (8) Duplicate determination of sample is highly recommended to be able to identify potential pipetting errors.
- (9) Once the test has been started, all steps should be completed without interruption. Make sure that the required reagents, materials and devices are prepared ready at the appropriate time.
- (10) Incubation times do influence the results. All wells should be handled in the same order and time intervals.
- (11) To avoid cross-contamination of reagents, use new disposable pipette tips for dispensing each reagent, sample, standard and control.
- (12) A standard curve must be established for each run.
- (13) The controls should be included in each run and fall within established confidence limits. The confidence limits are listed in the QC-Report.
- (14) Do not mix kit components with different lot numbers within a test and do not use reagents beyond expiry date as shown on the kit labels.
- (15) Avoid contact with Stop Solution containing 0.25 M H₂SO₄. It may cause skin irritation and burns. In case of contact with eyes or skin, rinse off immediately with water.
- (16) TMB substrate has an irritant effect on skin and mucosa. In case of possible contact, wash eyes with an abundant volume of water and skin with soap and abundant water. Wash contaminated objects before reusing them.
- (17) For information on hazardous substances included in the kit please refer to Material Safety Data Sheet (MSDS). The Material Safety Data Sheet for this product is made available directly on the website of the manufacturer or upon request.

- (18) The expected reference values reported in this test instruction are only indicative. It is recommended that each laboratory establishes its own reference intervals.
- (19) The results obtained with this test kit should not be taken as the sole reason for any therapeutic consequence but have to be correlated to other diagnostic tests and clinical observations.
- (20) Kit reagents must be regarded as hazardous waste and disposed according to national regulations.

2.2 Limitations

Any inappropriate handling of samples or modification of this test might influence the results.

2.2.1 Interfering substances

24-hour urine

Please note the sample preparation! If the percentage of the final concentration of acid is too high, 5-HIAA is not methylated adequately.

2.2.2 Drug interferences

There are no known substances (drugs) which ingestion interferes with the measurement of 5-HIAA level in the sample.

2.2.3 High-Dose-Hook effect

No hook effect was observed in this test.

3. Storage and stability

Store the unopened reagents at 2 - 8 °C until expiration date. Do not use components beyond the expiry date indicated on the kit labels. Once opened the reagents are stable for 1 month when stored at 2 - 8 °C. Once the resealable pouch has been opened, care should be taken to close it tightly with desiccant again.

4. Materials

4.1. Content of the kit

BA D-0090	FOILS	Adhesive Foil - Ready to use
Contents:	Adhesive Foils in a resealable pouch	
Volume:	1 x 4 foils	
BA D-0023	REAC-TUBES	Reaction Tubes - Ready to use
Contents:	2 x 50 tubes in a resealable pouch	
BA D-0024	REAC-PLATE	Reaction Plate - Ready to use
Contents:	1 x 96 well plate, empty in a resealable pouch	
BA E-0030	WASH-CONC 50x	Wash Buffer Concentrate - Concentrated 50x
Contents:	Buffer with a non-ionic detergent and physiological pH	
Volume:	1 x 20 ml/vial, light purple cap	
BA E-0040	CONJUGATE	Enzyme Conjugate - Ready to use
Contents:	Goat anti-rabbit immunoglobulins conjugated with peroxidase	
Volume:	1 x 12 ml/vial, red cap	
BA E-0055	SUBSTRATE	Substrate - Ready to use
Contents:	Chromogenic substrate containing tetramethylbenzidine, substrate buffer and hydrogen peroxide	
Volume:	1 x 12 ml/black vial, black cap	
BA E-0080	STOP-SOLN	Stop Solution - Ready to use
Contents:	0.25 M sulfuric acid	
Volume:	1 x 12 ml/vial, light grey cap	
BA E-0931	SER 5-HIAA	5-HIAA Microtiter Strips - Ready to use
Contents:	1 x 96 well (12x8) antigen precoated microwell plate in a resealable pouch with desiccant	

BA E-1910 **5-HIAA-AS** **5-HIAA Antiserum** - Ready to use

Contents: Rabbit anti – 5-HIAA antibody, blue coloured

Volume: 1 x 6 ml/vial, blue cap

Standards and Controls - Ready to use

Cat. no.	Component	Colour/Cap	Concentration mg/l	Concentration µmol/l	Volume/Vial
BA E-1901	STANDARD A	white	0	0	4 ml
BA E-1902	STANDARD B	light yellow	0.5	2.63	4 ml
BA E-1903	STANDARD C	orange	1.5	7.88	4 ml
BA E-1904	STANDARD D	dark blue	5	26.3	4 ml
BA E-1905	STANDARD E	light grey	15	78.8	4 ml
BA E-1906	STANDARD F	black	50	262.5	4 ml
BA E-1951	CONTROL 1	light green	Refer to QC-Report for expected value and acceptable range!		4 ml
BA E-1952	CONTROL 2	dark red			4 ml

Conversion: 5-HIAA (mg/l) x 5.25 = 5-HIAA (µmol/l)

Contents: Acidic buffer spiked with defined quantity of 5-HIAA

BA E-0041 **DILUENT** **Diluent** – Ready to use

Contents: Acidic buffer with non-mercury preservatives

Volume: 1 x 22 ml/vial, white cap

BA E-1913 **ASSAY-BUFF** **Assay Buffer** – Ready to use

Contents: TRIS containing buffer with non-mercury preservative

Volume: 2 x 55 ml/vial, dark green cap

BA E-1937 **METHYL-BUFF** **Methylation Buffer** - Ready to use

Contents: Methanol and dimethylformamide

Volume: 1 x 11 ml/vial, brown cap

Hazards identification:



H225 Highly flammable liquid and vapour.

H360 May damage fertility or the unborn child.

H370 Causes damage to organs.

H319 Causes serious eye irritation.

H301 + H311 + H331 Toxic if swallowed, in contact with skin or if inhaled.

BA E-1939 **METHYL-REAG** **Methylation Reagent** – Ready to use

Contents: Methylation reagent in diethyl ether

Volume: 1 x 2.25 ml, white cap

Hazards identification:



H225 Highly flammable liquid and vapour.

H302 Harmful if swallowed.

H370 Causes damage to organs.

H330 Fatal if inhaled.

H336 May cause drowsiness or dizziness.

H350 May cause cancer.

4.2 Additional materials and equipment required but not provided in the kit

- Calibrated precision pipettes to dispense volumes between 20 - 300 µl; 1 ml
- Microtiter plate washing device (manual, semi-automated or automated)
- ELISA reader capable of reading absorbance at 450 nm and if possible 620 - 650 nm
- Microtiter plate shaker (shaking amplitude 3 mm; approx. 600 rpm)
- Absorbent material (paper towel)
- Ventilated hood
- Water (deionized, distilled, or ultra-pure)
- Vortex mixer

5. Sample collection and storage

Spontaneous urine or 24-hour urine, collected in a bottle containing 10 - 15 ml of 6 M HCl, can be used. If 24-hour urine is used please record the total volume of the collected urine. If the final concentration of acid is too high, 5-HIAA is not methylated adequately.
Storage: for longer periods (up to 6 month) at -20 °C.
Repeated freezing and thawing should be avoided. Avoid exposure to direct sunlight.

6. Test procedure

Allow all reagents to reach room temperature and mix thoroughly by gentle inversion before use. Duplicate determinations are recommended.

The binding of the antisera and the enzyme conjugates and the activity of the enzyme used are temperature dependent, and the absorption values may vary if a thermostat is not used. The higher the temperature, the higher the absorption values will be. Varying incubation times will have similar influences on the absorbance. The optimal temperature during the Enzyme Immunoassay is between 20 - 25 °C.



In case of overflow, read the absorbance of the solution in the wells within 10 minutes, using a microplate reader set to 405 nm

6.1 Preparation of reagents

Wash Buffer

Dilute the 20 ml Wash Buffer Concentrate with water (deionized, distilled, or ultra-pure) to a final volume of 1000 ml.
Storage: 1 month at 2 - 8 °C

6.2 Predilution of the standards, controls and samples

1.	Pipette 50 µl of standards, controls and urine samples into the respective wells of the Reaction Plate .
2.	Pipette 200 µl of the Diluent into all wells.
3.	Shake for 1 min at RT (20 - 25 °C) on a shaker (approx. 600 rpm). 20 µl are needed for the methylation .

6.3 Methylation

1.	Pipette 20 µl of the prediluted standards, controls and urine samples into the respective Reaction Tubes .
	<i>The following steps 2-5 have to be performed in a ventilated hood!</i>
2.	Pipette 100 µl of Methylation Buffer into all tubes.
3.	Add 20 µl of Methylation Reagent to each tube and mix each tube immediately after addition of the Methylation Reagent .
4.	Cover all tubes and methylate for 20 min at RT (approx. 20 °C).
5.	Pipette 1000 µl of Assay Buffer into all tubes. <i>After this step the use of a ventilated hood is not necessary any more!</i>
	Proceed with the ELISA (Chapter 6.4) immediately as the methylated standards, controls and samples are only stable for 1 h!

6.4 5-HIAA ELISA

1.	Pipette 25 µl of the methylated standards, controls and samples into the appropriate wells of the 5-HIAA Microtiter Strips .
2.	Pipette 50 µl of the 5-HIAA Antiserum into all wells.
3.	Cover plate with Adhesive Foil and incubate for 1 h at RT (20 – 25 °C) on a shaker (approx. 600 rpm).
4.	Remove the foil. Discard or aspirate the content of the wells. Wash the plate 4 x by adding 300 µl of Wash Buffer, discarding the content and blotting dry each time by tapping the inverted plate on absorbent material.
5.	Pipette 100 µl of the Enzyme Conjugate into all wells.
6.	Cover plate with Adhesive Foil and incubate for 1 h at RT (20 – 25 °C) on a shaker (approx. 600 rpm).
7.	Remove the foil. Discard or aspirate the content of the wells. Wash the plate 4 x by adding 300 µl of Wash Buffer, discarding the content and blotting dry each time by tapping the inverted plate on absorbent material.
8.	Pipette 100 µl of the Substrate into all wells and incubate for 20 - 30 min at RT (20 – 25 °C) on a shaker (approx. 600 rpm). Avoid exposure to direct sunlight!
9.	Add 100 µl of the Stop Solution to each well and shake the microtiter plate to ensure a homogeneous distribution of the solution.
10.	Read the absorbance of the solution in the wells within 10 minutes, using a microplate reader set to 450 nm (if available a reference wavelength between 620 nm and 650 nm is recommended).

7. Calculation of results

Measuring range	5-HIAA
	0.17 – 50 mg/l

The standard curve is obtained by plotting the absorbance readings (calculate the mean absorbance) of the standards (linear, y-axis) against the corresponding standard concentrations (logarithmic, x-axis). Use a non-linear regression for curve fitting (e.g. spline, 4- parameter, akima).



This assay is a competitive assay. This means: the OD-values are decreasing with increasing concentrations of the analyte. OD-values found below the standard curve correspond to high concentrations of the analyte in the sample and have to be reported as being positive.

Urine samples and controls

The concentrations of the **urine samples** and the **controls** can be read directly from the standard curve.

The total amount of 5-HIAA excreted in urine during 24 h is calculated as following:

$$\text{mg/24h} = \text{mg/l} \times \text{l/24h}$$

Conversion

$$5\text{-HIAA (mg/l)} \times 5.25 = 5\text{-HIAA (µmol/l)}$$

Expected reference value

It is strongly recommended that each laboratory should determine its own reference values.

	5-HIAA
24-hour urine	< 15 mg/day

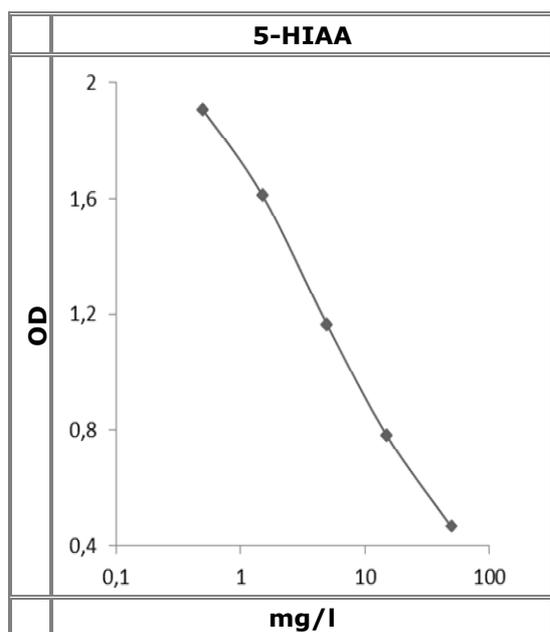
7.1 Quality control

It is recommended to use control samples according national regulations. Use controls at both normal and pathological levels. The kit controls, or other commercially available controls, should fall within established confidence limits. The confidence limits of the kit controls are indicated on the QC-Report.

7.2 Typical standard curve



Example, do not use for calculation!



8. Assay characteristics

Analytical Sensitivity (Limit of Detection)	5-HIAA
	0.17 mg/l

Analytical Specificity (Cross Reactivity)	Substance	Cross Reactivity (%)
		5-HIAA
	5-HIAA	100
	Serotonin	5.5
	5-Hydroxy-DL-Tryptophan	1.8
	Tryptamine	< 0.1
	Melatonin	< 0.1
	5-Hydroxytryptamin	< 0.1
	Vanillic mandelic acid	< 0.1
	Homovanillic Acid	< 0.1

Precision					
Intra-Assay			Inter-Assay		
Sample	Range (mg/l)	CV (%)	Sample	Range (mg/l)	CV (%)
1 n = 40	1.7 ± 0.2	14.1	1 n = 9	3.1 ± 0.3	8.6
2 n = 38	6.6 ± 0.6	8.6	2 n = 9	7.3 ± 0.8	10.8
3 n = 40	18.4 ± 1.9	10.3	3 n = 9	19 ± 2.2	11.4

Linearity		Range	Serial dilution up to	Range (%)
	5-HIAA	2.4 - 24.3 mg/l	1:10	98 - 112

Recovery		Mean (%)	Range (%)	% Recovery after spiking
	5-HIAA	101	93 - 111	

Method Comparison versus HPLC	5-HIAA	HPLC = 0.9 ELISA + 0.2	r = 0.99; n = 47

9. References/Literature

- (1) Beer et al. Acupuncture for Hot Flashes in Patients With Prostate Cancer Patients. *Urology*, 76(5):1182–1188 (2010)
- (2) Korse et al. Chromogranin A as an Alternative to 5-Hydroxyindoleacetic Acid in the Evaluation of Symptoms during Treatment of Patients with Neuroendocrine Tumors. *Neuroendocrinology*, 89:296–301 (2008)
- (3) van Tuyl et al. Detection of small-bowel neuroendocrine tumors by video capsule endoscopy. *Gastrointestinal Endoscopy*, 64 (1):66-72 (2006)

For orders, please contact:

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 **For updated literature or any other information please contact your local supplier.**

Symbols:

	Storage temperature		Manufacturer		Contains sufficient for <n> tests
	Expiry date	LOT	Batch code	IVD	For in-vitro diagnostic use only!
	Consult instructions for use	CONT	Content	CE	CE labelled
	Caution	REF	Catalogue number	RUO	For research use only!