

# **Product information**



Users Manual

# **Human IL-1** BELISA

Sandwich Enzyme-Linked Immunosorbent Assay for the detection of Human IL-1 $\beta$ 

REF IB99537

∑ 96

Storage: 2-8°C

RUO

For research use only, not for use in diagnostic procedures.

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## 1. Introduction

Interleukin-1 $\beta$  (IL-1 $\beta$ ) is a potent stimulator of bone resorption whose gene is mapped to 2q14, and has been implicated in the pathogenesis of high bone turnover and osteoporosis. IL-1 $\beta$ , aprominent microglia-derived cytokine, caused oligodendrocyte death in coculture with astrocytes and microglia, but not in pure culture of oligodendrocytes alone. It also can cause nuclear export of a specific NCOR corepressor complex, resulting in derepression of a specific subset of nuclear factor-kappa-B (NFKB)-regulated genes. Furthermore, Microenvironmental IL-1 $\beta$  and, to a lesser extent, IL-1 $\alpha$  are required for in vivo angiogenesis and invasiveness of different tumor cells. Additional, the cooperation of IL-1 $\beta$  and PDGFB induces contractile tosynthetic phenotype modulation of human aortic smooth muscle cells in culture. Moreover, the association with disease may be explained by the biologic properties of IL-1 $\beta$ , which is an important proinflammatory cytokine and a powerful inhibitor of gastric acid secretion.

## 2. Principles of Method

The design of this assay is based on a sandwich Enzyme-Linked Immunosorbent Assay (ELISA). The microtiter plate provided in this kit has been pre-coated with a monoclonal antibody specific to human IL-1 $\beta$ . Samples are pipetted into these wells. Nonbound human IL-1 $\beta$  and other components of the sample should be removed by washing, then monoclonal antibody specific to human IL-1 $\beta$  added. In order to quantitatively determine the amount of human IL-1 $\beta$  present in the sample, Streptavidin Horseradish Peroxidase (HRP) should be added to each microplate well. The final step, a TMB-substrate solution added to each well. Finally, a sulfuric acid solution is added and the resulting yellow colored product is measured at 450nm. Since the increases in absorbency is directly proportional to the amount of captured human IL-1 $\beta$ .

#### 3. Intended Use

The IBL-AMERICA human IL-1 $\beta$  ELISA kit is to be used for the determination of human IL-1 $\beta$  in human serum, human plasma, cell lysate, culture supernatants and buffered solution. The assay will recognize native and recombinant human IL-1 $\beta$ .

This kit has been configured for research use only and is not to be used in diagnostic procedures.

## 4. Storage and Stability

All kit components of this kit are stable at 2 to 8°C. Any unused reconstituted standard should be discarded or frozen at -70°C. Standard can be frozen and thawed one time only without loss of immunoreactivity.

#### 5. Chemical Hazard

- Stop solution: This reagent is an irritant to eyes, skin and mucous membranes. Avoid
  contact with eyes, skin and clothing. Wear suitable protective clothing, gloves and eye
  protection. In the event of contact with eyes or skin, wash immediately with plenty of
  water.
- Standard protein and 2<sup>nd</sup> Antibody containing Sodium Azide as a preservative.

### 6. Kit Contents

Contents	Number	Volume	
96 Well Plate	1 (in aluminum foil bag with desiccant)		
Washing Buffer	2	(20X) 25 ml	
Standard Protein	1 Glass vial	l (lyophilized)	
Standard/Sample Dilution Buffer	1	25 ml	
Secondary Antibody	Secondary Antibody 1 Glass vial (lyophili		
Streptavidin HRP(X100)	1	150 μl	
Secondary antibody/ Streptavidin HRP Dilution Buffer	1	25 ml	
Substrate (TMB)	1	15 ml	
Stop Solution	1	15 ml	
Protocol booklet	1 2		
Plate sealers			

#### 1 96 Well Plate

: Human IL-1 $\beta$  microtiter plate, one plate of 96 wells (8 well strips x 12).

A plate using break-apart strips coated with a mouse monoclonal antibody specific to human IL-1 $\beta$ .

- 2 Standard Protein
  - : Recombinant human IL-1β.
- 3 Secondary Antibody
  - : Biotinylated anti human IL-1β antibody.
- 4 Streptavidin HRP
  - : Streptavidin Horseradish Peroxidase (HRP, enzyme)
- 5 Substrate (Stabilized chromogen)
  - : Tetramethylbenzidine (TMB) solution
- **6** Stop Solution
  - : 1N solution of sulfuric acid (H<sub>2</sub>SO<sub>4</sub>).
- (7) Plate sealer
  - : Adhesive sheet.
- Do not mix or interchange different reagents from various kit lots.

## 7. Materials Required But Not Provided

- ① Microtiter plate reader capable of measurement at or near 450nm.
- ② Calibrated, adjustable precision pipettes, preferably with disposable plastic tips (A manifold multi-channel pipette is desirable for large assays.)
- 3 Distilled or deionized water
- 4 Data analysis and graphing software
- (5) Vortex mixer
- 6 Polypropylene tubes for diluting and aliquoting standard
- 7 Absorbent paper towels
- 8 Calibrated beakers and graduated cylinders of various sizes

## 8. Reagent Preparation

#### 1) Human IL-1ß standard

- 1. Reconstitute the lyophilized human IL-1β standard by adding 1 ml of *Standard/Sample Dilution Buffer* to make the 5 ng/ml standard stock solution. Allow solution to sit at RT for 5 minutes, then gently vortex to mix completely. Use within one hour of reconstituting.
- 2. Prepare 1 ml of 250 pg/ml top standard by adding 50 μl of the above stock solution in 950 μl of *Standard/Sample Dilution Buffer*. Perform 2-fold serial dilutions of the top standards to make the standard curve within the range of this assay (3.91 pg/ml ~ 250 pg/ml) as below. *Standard/Sample Dilution Buffer* serves as the zero standard (0 pg/ml).

Standard	Add	Into		
250 pg/ml	50.0 μl of the std.(5 ng/ml)	950.0 µl of the Standard/Sample Dilution Buffer		
125 pg/ml	500 μl of the std.(250 pg/ml)	500 µl of the Standard/Sample Dilution Buffer		
62.5 pg/ml	500 μl of the std.(125 pg/ml)	500 µl of the Standard/Sample Dilution Buffer		
31.25 pg/ml	500 μl of the std.(62.5 pg/ml)	500 μl of the Standard/Sample Dilution Buffer		
15.63 pg/ml	500 μl of the std.(31.25 pg/ml)	500 μl of the Standard/Sample Dilution Buffer		
7.81 pg/ml	500 μl of the std.(15.63 pg/ml)	500 μl of the Standard/Sample Dilution Buffer		
3.91 pg/ml	500 μl of the std.(7.81 pg/ml)	500 µl of the Standard/Sample Dilution Buffer		
0 pg/ml	1.0 ml of the Standard/Sample Dilution Buffer			

#### 2) Secondary Antibody

100X secondary antibody solution can be made by adding 150 µl Secondary antibody/Streptavidin HRP dilution buffer in the vial.

1. Equilibrate to room temperature, mix gently.

- 2. Mix 20 µl Secondary Antibody concentrated solution (100X) + 1.98 ml Secondary antibody/Streptavidin HRP dilution buffer. (Sufficient for one 16-well strip, prepare more if necessary)
  - Label as "Working Secondary antibody Solution".
- 3. Return the unused Secondary Antibody concentrated solution to the refrigerator.

#### 3) Streptavidin HRP(X100)

- 1. Equilibrate to room temperature, mix gently.
- 2. Mix 20 µl Streptavidin HRP concentrated solution (100X) + 1.98 ml Secondary antibody/Streptavidin HRP dilution buffer. (Sufficient for one 16-well strip, prepare more if needed)
  - Label as "Working Streptavidin HRP Solution".
- 3. Return the unused *Streptavidin HRP concentrated solution* to the refrigerator.

#### 4) Washing buffer

- 1. Equilibrate to room temperature, mix to re-dissolve any precipitated salt.
- 2. Mix 0.5 volume *Wash buffer concentrate solution* (20X) + 9.5 volumes of deionized water. Label as "Working Washing Solution".
- 3. Store both the concentrated and the Working Washing Solution in the refrigerator.

#### \* Directions for washing

- 1. Fill the wells with 300 μl of "Working Washing Buffer".
  - Let soak for 1 to 3 minutes and then all residual wash-liquid must be drained from the wells by aspiration (taking care not to scratch the inside of the well) or decantation, followed by forceful tapping of the plate on absorbent paper. Never insert absorbent paper directly into the wells.
  - If using an automated washer, the operating instructions for washing equipment should be carefully followed.
- 2. Incomplete washing will adversary affects the assay and renders false results.
- 3. It is recommended to use laboratory tape to hold plate strips to the plate frame while performing the plate washing to avoid strips coming free of the frame.

#### 5) Sample preparation

Blood should be collected by veinpuncture. For plasma samples, blood may be drawn into tubes containing sodium citrate or heparin, EDTA. The serum or plasma should be separated from the coagulated or packed cells by centrifugation. Samples may be shipped at room temperature and then stored refrigerated at 2-8°C if testing is to take place within one week after collection. If testing is to take place later than one week, samples should be stored at -20°C. Avoid repeated freeze/thawing.

## 9. Assay Procedure

- Allow all reagents to reach room temperature before use. Gently mix all liquid reagents prior to use.
- All standards, controls and samples should be run in duplicate for confirmation of reproducibility.
- A standard curve must be run with each assay.
- If particulate matter is present in the analyte, centrifuge or filter prior to analysis.
- Maintain a consistent order of components and reagents addition from well to well.
   This ensures equal incubation times for all wells.
- 1) Determine the number of 16-well strips needed for assay. Insert these in the flame(s) for current use (Re-bag extra strips and frame. Refrigerate for further use).
- 2) For the standard curve, add 100 μl of the standard to the appropriate microtiter wells. Add 100 μl of the *Standard/Sample/secondary antibody Dilution Buffer* to zero wells.
- 3) Serum and plasma require at least 20 fold dilution in the *Standard/Sample Dilution* Buffer. And add 100 µl of samples to each well.
- 4) Cover the plate with the plate cover and incubate for 2 hours at 37°C.
- 5) Thoroughly aspirate or decant the solution from the wells. Wash the wells 3 times (See "Directions for washing").
- 6) Pipette 100 µl of "Working Secondary Antibody Solution" into each well.
- 7) Cover the plate with the plate cover and incubate for 1 hour at 37°C.
- 8) Thoroughly aspirate or decant the solution from the wells. Wash the wells 3 times (See "Directions for washing").
- 9) Add 100 μl "Working Streptavidin HRP Solution" to each well.
- 10) Cover the plate with the plate cover and incubate for 30 minutes at 37°C.
- 11) Thoroughly aspirate or decant the solution from the wells. Wash the wells 3 times (See "Directions for washing").
- 12) Add 100 µl of *Substrate* to each well. The liquid in the wells should begin to turn blue.
- 13) Incubate the plate at room temperature.
  - Do not cover the plate with aluminum foil, or color may develop.
     The incubation time for chromogen substrate is often determined by the microtiter plate reader used. O.D. values should be monitored and the substrate reaction stopped before O.D. of the positive wells exceeds the limits of the instrument. O.D. values at 450nm can only be read after the Stop Solution has been added to each well.
  - Because the *Substrate* is light sensitive, avoid the remained *Substrate* solution prolonged exposure to light.

- Typically, reaction is stopped 5~10 minutes after treatment of Substrate, but this time can be adjusted as the user desires.
- 14) Add 100 µl of *Stop Solution* to each well. The solution in the wells should change from blue to yellow.
- 15) Read the absorbance of each well at 450nm. Read the plate within 20 minutes of adding the *Stop Solution*.
- 16) Plot on graph paper the absorbance of the standard against the standard concentration (Optimally, the background absorbance can be subtracted from all data points, including standards, unknowns and controls, prior to plotting.). Draw a smooth curve through these points to construct the standard curve.
- 17) Read the human IL-1β concentrations for the unknown samples and controls from the standard curve plotted in step 18. Multiply value(s) obtained for the unknown sample by the dilution factor (Samples producing signals greater than that of the highest standard should be further diluted in the Standard/Sample Dilution Buffer).

#### 10. Characteristics

#### 1) Typical result

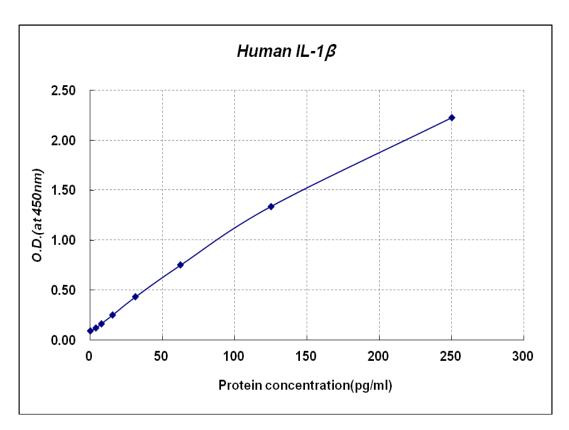
The standard curve below is for illustration only and **should not be used** to calculate results in your assay.

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Standard	Optical Density
human IL-1β (pg/ml)	(at 450nm)
0	0.0878
3.9063	0.1197
7.8125	0.1633
15.625	0.2514
31.25	0.4304
62.5	0.7493
125	1.3369
250	2.2259

#### < Limitations >

- Do not extrapolate the standard curve beyond the 250 pg/ml standard point.
- Other buffers and matrices have not been investigated.
- The rate of degradation of native human IL-1 $\beta$  in various matrices has not been investigated.



(TMB reaction incubate at room temperature for 5 min)

#### 2) Sensitivity

The minimal detectable dose of human IL-1 $\beta$  was calculated to be 1.90 pg/ml, by subtracting three standard deviations from the mean of 12 zero standard replicates (ELISA buffer, S0) and intersecting this value with the standard curve obtained in the same calculation.

N	1	2	3	4	5	6	7	8	9	10	11	12
ZERO	0.0849	0.0885	0.0871	0.0849	0.0879	0.0899	0.0890	0.0830	0.0905	0.0952	0.0915	0.0817

Average	SD	LLD	LLD
11,010,80	22	LLD	mean(pg/ml)
0.0878	0.0038	0.0993	1.90

## 3) Specificity

The following substances were tested and found to have no cross-reactivity: human IL- $1\alpha$ , IL-2, IL-3, IL-4, IL-5, IL-12(p40 & p70) and G-CSF.

## 4) Precision

## ① Within-Run (Intra-Assay)

(n=12)

Mean (pg/ml)	SD (pg/ml)	CV (%)
31.4090	1.5153	4.8244
62.1986	3.0643	4.9267
126.0451	4.1097	3.2605
249.7740	10.4734	4.1932

## ② Between-Run (Inter-Assay)

(n=12)

Mean (pg/ml)	SD (pg/ml)	CV (%)
31.6829	1.5429	4.8698
61.6001	3.5836	5.8176
125.7718	7.2483	5.7631
253.8789	8.2916	3.2660

### 5) Recovery

Recovery on addition is 102.72~108.14% (mean 105.5%)

Added Analyte (pg/ml)	Serum(1/20)+added analyte (450nm)	Serum(1/20)(450nm) +added analyte(450nm)	Recovery (%)
25.4285	31.6085	33.8414	107.0642
50.8783	57.0583	58.6083	102.7165
105.124	111.3040	120.36	108.1363
220.367	226.5470	234.808	103.6465

## 11. Troubleshooting

Problem	Possible Cause	Solution
	Insufficient washing	Increase number of washes
		Increase time of soaking
		between in wash
High signal and background	Too much Streptavidin-HRP	Check dilution, titration
in all wells	Incubation time too long	Reduce incubation time
	Development time too long	• Decrease the incubation time
		before the stop solution is
		added
	Reagent added in incorrect	• Review protocol
	order, or incorrectly prepared	
	Standard has gone bad	• Check the condition of stored
No signal	(If there is a signal in the	standard
100 Signar	sample wells)	
	Assay was conducted from	• Reagents allows to come to
	an incorrect starting point	20~30°C before performing
		assay
	Insufficient washing	• Increase number of washes
	– unbound SAV-HRP remaining	carefully
Too much signal – whole	Too much Streptavidin -HRP	Check dilution
plate turned uniformly blue	• Plate sealer or reservoir	Use fresh plate sealer and
	reused, resulting in presence	reagent reservoir for each
	of residual Streptavidin -HRP	step
Standard curve achieved but	Plate not developed long	Increase substrate solution
poor discrimination between	enough	incubation time
point	• Improper calculation of	Check dilution, make new
r	standard curve dilution	standard curve
No signal when a signal is	Sample matrix is masking	More diluted sample
expected, but standard curve	detection	recommended
looks fine		
Samples are reading too high,	Samples contain protein	Dilute samples and run
but standard curve is fine	levels above assay range	again
	Uneven temperature around	Avoid incubating plate in
F.1	work surface	areas where environmental
Edge effect		conditions vary
		• Use plate sealer

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## Ordering Information

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