

Rat IL-17A ELISA Kit

Instructions for use

Catalogue numbers: 1x96 tests: 670.080.096
 2x96 tests: 670.080.192

For research use only

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Rat IL-17 ELISA KIT

1. Intended use

The rat IL-17A ELISA is an enzyme-linked immunosorbent assay for the quantitative detection of rat IL-17A. **The rat IL-17A ELISA is for research use only. Not for diagnostic or therapeutic procedures.**

2. Introduction

2.1. Summary

A new family of cytokines, Interleukin-17, has recently been defined that reveals a distinct ligand-receptor signaling system. There is high evidence for its importance in the regulation of immune responses. IL-17A was first characterised and six IL-17 family members (IL-17A-F) have subsequently been described. IL-17A, a homodimeric cytokine of about 32 kDa, is largely produced by activated memory T lymphocytes, but stimulates innate immunity and host defense. IL-17A and IL-17F both mobilize neutrophils partly through granulopoiesis and CXC chemokine induction, as well as increased survival locally. IL-17A and IL-17F production by T lymphocytes is regulated by IL-23 independent of T cell receptor activation.

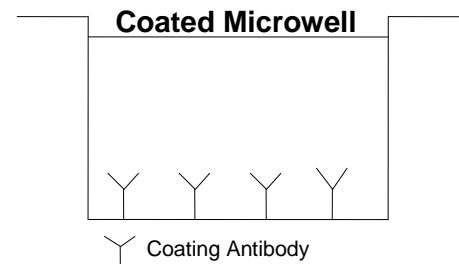
The T help 1 (Th1) and Th2 cell classification has until recently provided the framework for understanding CD4(+) T cell biology and the interplay between innate and adaptive immunity. Recent studies have defined a previously unknown arm of the CD4(+) T cell effector response, the Th17 lineage. This subset of T cells produces interleukin 17, which is highly proinflammatory and induces severe autoimmunity. Whereas IL-23 serves to expand previously differentiated T(H)-17 cell populations, IL-6 and transforming growth factor-beta (TGF-beta) induce the differentiation of T(H)-17 cells from naive precursors.

Increasing evidence shows that IL-17 family members play an active role in inflammatory diseases, autoimmune diseases, and cancer. The IL-17 signaling system is operative in disparate tissues such as articular cartilage, bone, meniscus, brain, hematopoietic tissue, kidney, lung, skin and intestine. Thus, the evolving IL-17 family of ligands and receptors may play an important role in the homeostasis of tissues in health and disease beyond the immune system. Increased levels of IL-17 have been associated with several conditions, including airway inflammation, rheumatoid arthritis, intraperitoneal abscesses and adhesions, inflammatory bowel disease, allograft rejection, psoriasis, cancer and multiple sclerosis.

2.2. Principle of the method

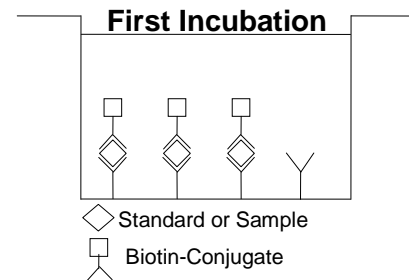
An anti-rat IL-17A coating antibody is adsorbed onto microwells (Figure 1).

Figure 1



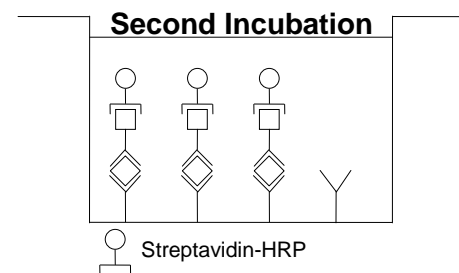
Rat IL-17A present in the sample or standard binds to antibodies adsorbed to the microwells. A biotin-conjugated anti-rat IL-17A antibody is added and binds to rat IL-17A captured by the first antibody (Figure 2).

Figure 2



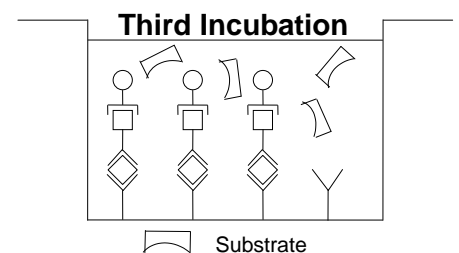
Following incubation unbound biotin-conjugated anti-rat IL-17A antibody is removed during a wash step. Streptavidin-HRP is added and binds to the biotin-conjugated anti-rat IL-17A antibody (Figure 3).

Figure 3



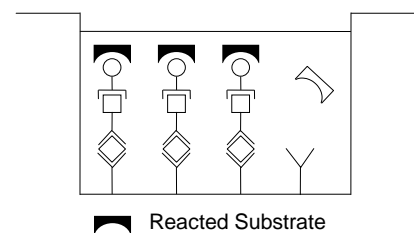
Following incubation unbound Streptavidin-HRP is removed during a wash step, and substrate solution reactive with HRP is added to the wells (Figure 4).

Figure 4



A coloured product is formed in proportion to the amount of rat IL-17A present in the sample or standard. The reaction is terminated by addition of acid and absorbance is measured at 450 nm. A standard curve is prepared 7 rat IL-17A standard dilutions and rat IL-17A sample concentration determined. (Figure 5).

Figure 5



3. Reagents provided and reconstitution

(Note: Quantity shown is for the 1x96 format, for the 2x96 format all reagents will be supplied in duplicate where applicable)

- 1 aluminium pouch with a **Microwell Plate coated** with monoclonal antibody to rat IL-17A
- 1 vial (70 µl) **Biotin-Conjugate** anti-rat IL-17A monoclonal antibody
- 1 vial (150 µl) **Streptavidin-HRP**
- 2 vials rat IL-17A **Standard** lyophilized, 200 pg/ml upon reconstitution
- 1 bottle (12 ml) **Sample Diluent**
- 1 vial (5 ml) **Assay Buffer Concentrate** 20x (PBS with 1% Tween 20 and 10% BSA)
- 1 bottle (50 ml) **Wash Buffer Concentrate** 20x (PBS with 1% Tween 20)
- 1 vial (15 ml) **Substrate Solution** (tetramethyl-benzidine)
- 1 vial (12 ml) **Stop Solution** (1M Phosphoric acid)
- 4 **adhesive Films**

4. Materials required but not provided

- Microtitre plate reader fitted with appropriate filters (450nm required with optional 620nm reference filter)
- Microplate washer or wash bottle
- 10, 50, 100, 200 and 1,000µl adjustable single channel micropipettes with disposable tips
- 50-300µl multi-channel micropipette with disposable tips
- Multichannel micropipette reagent reservoirs
- Distilled water
- Vortex mixer
- Miscellaneous laboratory plastic and/or glass, if possible sterile

5. Storage Instructions

Store kit reagents between 2° and 8°C. Immediately after use remaining reagents should be returned to cold storage (2° to 8°C). Expiry of the kit and reagents is stated on labels.

Expiry of the kit components can only be guaranteed if the components are stored properly, and if, in case of repeated use of one component, this reagent is not contaminated by the first handling.

6. Specimen collection, processing & storage

Cell culture supernatant and serum were tested with this assay. Other body fluids might be suitable for use in the assay. Remove serum from the clot as soon as possible after clotting.

Samples containing a visible precipitate must be clarified prior to use in the assay. Do not use grossly hemolyzed or lipemic specimens.

Pay attention to a possible “**Hook Effect**” due to high sample concentrations.

Samples should be aliquoted and must be stored frozen at -20°C to avoid loss of bioactive rat IL-17A. If samples are to be run within 24 hours, they may be stored at 2° to 8°C.

Avoid repeated freeze-thaw cycles. Prior to assay, the frozen sample should be brought to room temperature slowly and mixed gently.

Do not thaw samples in a 37°C water bath. Do not vortex or sharply agitate samples.

7. Safety & precautions for use

- Handling of reagents, serum or plasma specimens should be in accordance with local safety procedures, e.g. CDC/NIH Health manual : " Biosafety in Microbiological and Biomedical Laboratories" 1984
- Laboratory gloves should be worn at all times
- Avoid any skin contact with H₂SO₄ and TMB. In case of contact, wash thoroughly with water
- Do not eat, drink, smoke or apply cosmetics where kit reagents are used
- Do not pipette by mouth
- When not in use, kit components should be stored refrigerated or frozen as indicated on vials or bottles labels
- All reagents should be warmed to room temperature before use. Lyophilized standards should be discarded after use
- Once the desired number of strips has been removed, immediately reseal the bag to protect the remaining strips from deterioration
- Cover or cap all reagents when not in use
- Do not mix or interchange reagents between different lots
- Do not use reagents beyond the expiration date of the kit
- Use a clean disposable plastic pipette tip for each reagent, standard, or specimen addition in order to avoid cross contamination, for the dispensing of H₂SO₄ and substrate solution, avoid pipettes with metal parts
- Use a clean plastic container to prepare the washing solution
- Thoroughly mix the reagents and samples before use by agitation or swirling
- All residual washing liquid must be drained from the wells by efficient aspiration or by decantation followed by tapping the plate forcefully on absorbent paper. Never insert absorbent paper directly into the wells
- The TMB solution is light sensitive. Avoid prolonged exposure to light. Also, avoid contact of the TMB solution with metal to prevent colour development. Warning TMB is toxic avoid direct contact with hands. Dispose off properly
- If a dark blue colour develops within a few minutes after preparation, this indicates that the TMB solution has been contaminated and must be discarded. Read absorbance's within 1 hour after completion of the assay
- When pipetting reagents, maintain a consistent order of addition from well-to-well. This will ensure equal incubation times for all wells
- Follow incubation times described in the assay procedure
- Dispense the TMB solution within 15 min of the washing of the microtitre plate

8. Assay Preparation

Bring all reagents to room temperature before use

8.1. Assay Design

Determine the number of microwell strips required to test the desired number of samples plus appropriate number of wells needed for running zeros and standards. Each sample, standard and zero should be tested **in duplicate**. Remove sufficient Microwell Strips for testing from the aluminium pouch immediately prior to use. Return any wells not required for this assay with desiccant to the pouch. Seal tightly and return to 2-8°C storage.

Example plate layout (example shown for a 7 point standard curve)

	Standards		Sample Wells									
	1	2	3	4	5	6	7	8	9	10	11	12
A	100	100										
B	50	50										
C	25	25										
D	12.5	12.5										
E	6.3	6.3										
F	3.1	3.1										
G	1.6	1.6										
H	Zero	Zero										

All remaining empty wells can be used to test samples in duplicate

8.2. Preparation of Wash Buffer

Pour entire contents (50 ml) of the Wash Buffer Concentrate (20x) into a clean 1000 ml graduated cylinder. Bring to final volume of 1000 ml with glass-distilled or deionized water. Mix gently to avoid foaming.

Transfer to a clean wash bottle and store at 2° to 25°C. Please note that Wash Buffer (1x) is stable for 30 days.

Wash Buffer (1x) may also be prepared as needed according to the following table:

Number of Strips	Wash Buffer Concentrate (20x) (ml)	Distilled Water (ml)
1 - 6	25	475
1 - 12	50	950

8.3. Preparation of Assay Buffer

Pour the entire contents (5 ml) of the **Assay Buffer Concentrate** (20x) into a clean 100 ml graduated cylinder. Bring to final volume of 100 ml with distilled water. Mix gently to avoid foaming.

Store at 2° to 8°C. Please note that the Assay Buffer (1x) is stable for 30 days.

Conjugate Diluent (1x) may also be prepared as needed according to the following table:

Number of Strips	Assay Buffer Concentrate (20x) (ml)	Distilled Water (ml)
1 - 6	2.5	47.5
1 - 12	5.0	95.0

8.4. Preparation of Standard

Reconstitute **rat IL-17A standard** by addition of distilled water.

Reconstitution volume is stated on the label of the standard vial. Allow the reconstituted standard to sit for 10-30 minutes. Swirl or mix gently to insure complete and homogeneous solubilization (concentration of reconstituted standard = 200 pg/ml).

Label 7 tubes, one for each standard point. S1, S2, S3, S4, S5, S6 and S7. Then prepare 1:2 serial dilutions for the standard curve as follows: Pipette 225 µl of Sample Diluent into each tube. Pipette 225 µl of reconstituted standard (concentration = 200 pg/ml) into the first tube, labelled S1, and mix (concentration of standard 1 = 100 pg/ml). Pipette 225 µl of this dilution into the second tube, labelled S2, and mix thoroughly before the next transfer. Repeat serial dilutions 5 more times thus creating the points of the standard curve ranging from 100 to 1.6pg/ml.

Sample diluent serves as blank.

Alternativley this can be conducted directly on the microtitre plate.

8.5. Preparation of Biotin-Conjugate

Please note that the Biotin-Conjugate should be used within 30 minutes after dilution.

Make a 1:100 dilution of the concentrated **Biotin-Conjugate** solution with Assay buffer (1x) in a clean plastic tube as needed according to the following table:

Number of Strips	Biotin-Conjugate (ml)	Assay Buffer (1x) (ml)
1 - 6	0.03	2.97
1 - 12	0.06	5.94

8.6. Preparation of Streptavidin-HRP

Please note that the Streptavidin-HRP should be used within 30 minutes after dilution.

Make a 1:200 dilution of the concentrated **Streptavidin-HRP** solution with Assay Buffer (1x) in a clean plastic tube as needed according to the following table:

Number of Strips	Streptavidin-HRP (ml)	Assay Buffer (1x) (ml)
1 - 6	0.03	5.97
1 - 12	0.06	11.94

9. Method

We strongly recommend that every vial is mixed thoroughly without foaming prior to use.

Prepare all reagents as shown in section 8.

Note: Final preparation of Biotin conjugate (section 8.5) and Streptavidin-HRP (section 8.6) should occur immediately before use.

Assay Step		Details
1.	Wash	a) Dispense 0.4 ml of 1x washing solution into each well b) Aspirate the contents of each well c) Repeat steps a and b Do not allow wells to dry before use
2.	Preparation	Prepare Standard curve as shown in section 8.4
3.	Addition	Add 50µl of Sample diluent to all sample wells
4.	Addition	Add 50µl of Sample in duplicate to appropriate number of wells
5.	Addition	Add 100µl of each Standard and appropriate blank (sample diluent) in duplicate to appropriate number of wells
6.	Addition	Add 50µl of diluted biotin-conjugate to all wells
7.	Incubation	Cover with a plastic plate cover and incubate at room temperature (18 to 25°C) for 2 hour(s) if available on a microplate shaker set at 200 rpm
8.	Wash	Remove the cover and wash the plate as follows: a) Aspirate the liquid from each well b) Dispense 0.4 ml of 1x washing solution into each well c) Aspirate the contents of each well d) Repeat step b and c another three times
9.	Addition	Add 100µl of Streptavidin-HRP solution into all wells
10.	Incubation	Cover with a plastic plate cover and incubate at room temperature (18 to 25°C) for 1 hour if available on a microplate shaker set at 200 rpm
11.	Wash	Repeat wash step 8.
12.	Addition	Add 100µl of ready-to-use TMB Substrate Solution into all wells
13.	Incubation	Incubate in the dark for 30 minutes* at room temperature. Avoid direct exposure to light by wrapping the plate in aluminium foil.
14.	Addition	Add 100µl of Stop Reagent into all wells
Read the absorbance value of each well (immediately after step 14.) on a spectrophotometer using 450 nm as the primary wavelength and optionally 620 nm as the reference wave length (610 nm to 650 nm is acceptable).		

**Incubation time of the substrate solution is usually determined by the ELISA reader performance. Many ELISA readers only record absorbance up to 2.0 O.D. Therefore the colour development within individual microwells must be observed by the analyst, and the substrate reaction stopped before positive wells are no longer within recordable range*

Note: In case of incubation without shaking the obtained O.D. values may be lower than indicated below. Nevertheless the results are still valid.

10. Data Analysis

Calculate the average absorbance values for each set of duplicate standards and samples. Duplicates should be within 20 per cent of the mean value.

Create a standard curve by plotting the mean absorbance for each standard concentration on the ordinate against the rat IL-17A concentration on the abscissa. Draw a best fit curve through the points of the graph (a 5-parameter curve fit is recommended).

To determine the concentration of circulating rat IL-17A for each sample, first find the mean absorbance value on the ordinate and extend a horizontal line to the standard curve. At the point of intersection, extend a vertical line to the abscissa and read the corresponding rat IL-17A concentration.

If instructions in this protocol have been followed samples have been diluted 1:2 (50 µl sample + 50 µl Sample Diluent), the concentration read from the standard curve must be multiplied by the dilution factor (x 2).

Calculation of samples with a concentration exceeding standard 1 may result in incorrect, low rat IL-17A levels. Such samples require further external predilution according to expected rat IL-17A values with Sample Diluent in order to precisely quantitate the actual rat IL-17A level.

It is suggested that each testing facility establishes a control sample of known rat IL-17A concentration and runs this additional control with each assay. If the values obtained are not within the expected range of the control, the assay results may be invalid.

Figure 6

Representative standard curve for rat IL-17A ELISA. Rat IL-17A was diluted in serial 2-fold steps in Sample Diluent. Do not use this standard curve to derive test results. A standard curve must be run for each group of microwell strips assayed.

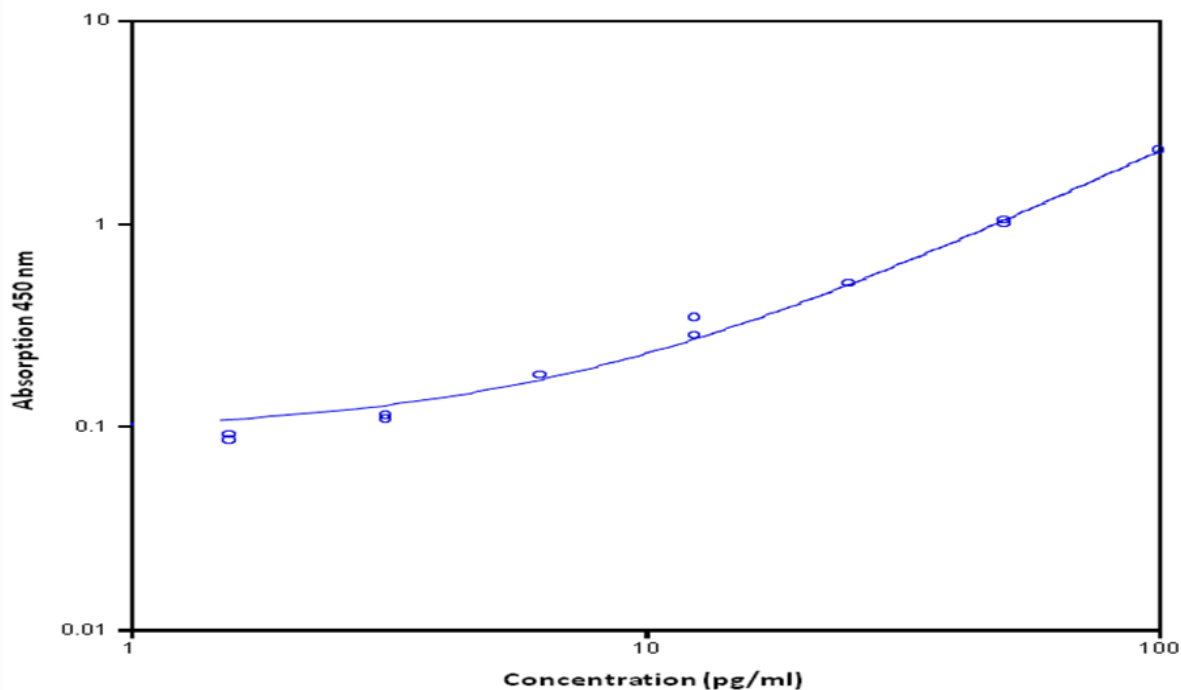


Table 1

Typical data using the rat IL-17A ELISA

Measuring wavelength: 450 nm

Reference wavelength: 620 nm

Standard	rat IL-17A Concentration (pg/ml)	O.D. at 450 nm	Mean O.D. at 450 nm	C.V. (%)
1	100.0	2.297 2.300	2.299	0.1
2	50.0	1.037 0.999	1.018	1.8
3	25.0	0.509 0.506	0.508	0.3
4	12.5	0.344 0.282	0.313	9.9
5	6.3	0.178 0.180	0.179	0.4
6	3.1	0.114 0.108	0.111	2.9
7	1.6	0.091 0.086	0.089	2.6
Blank	0	0.082 0.067	0.075	9.8

The OD values of the standard curve may vary according to the conditions of assay performance (e.g. operator, pipetting technique, washing technique or temperature effects). Furthermore shelf life of the kit may affect enzymatic activity and thus colour intensity. Values measured are still valid.

11. Assay limitations

Do not extrapolate the standard curve beyond the maximum standard curve point. The dose-response is non-linear in this region and good accuracy is difficult to obtain. Concentrated samples above the maximum standard concentration must be diluted with Standard diluent or with your own sample buffer to produce an OD value within the range of the standard curve. Following analysis of such samples always multiply results by the appropriate dilution factor to produce actual final concentration.

The influence of various drugs on end results has not been investigated. Bacterial or fungal contamination and laboratory cross-contamination may also cause irregular results.

Improper or insufficient washing at any stage of the procedure will result in either false positive or false negative results. Completely empty wells before dispensing fresh Washing Buffer, fill with Washing Buffer as indicated for each wash cycle and do not allow wells to sit uncovered or dry for extended periods.

Disposable pipette tips, flasks or glassware are preferred, reusable glassware must be washed and thoroughly rinsed of all detergents before use.

As with most biological assays conditions may vary from assay to assay therefore **a fresh standard curve must be prepared and run for every assay.**

12. Performance Characteristics

12.1. Sensitivity

The limit of detection of rat IL-17A defined as the analyte concentration resulting in an absorbance significantly higher than that of the dilution medium (mean plus 2 standard deviations) was determined to be 1.0 pg/ml (mean of 6 independent assays).

12.2. Specificity

Cross reactivity and interference of circulating factors of the immune system were evaluated by spiking these proteins at physiologically relevant concentrations into a rat IL-17A positive sample. There was no cross reactivity detected, notably not with rat IFN- γ , rat TNF- α , rat IL-1a, rat IL-4, rat MCP-1, rat GM-CSF.

12.3. Precision

Intra Assay

Reproducibility within the assay was evaluated in 3 independent experiments. Each assay was carried out with 6 replicates of 7 serum samples containing different concentrations of rat IL-17A. 2 standard curves were run on each plate. Data below show the mean rat IL-17A concentration and the coefficient of variation for each sample (see Table 2). **The calculated overall intra-assay coefficient of variation was 8.5%.**

Table 2 : Mean rat IL-17A concentration and the coefficient of variation for each sample

Sample	Experiment	Mean rat IL-17A Concentration (pg/ml)	Coefficient of Variation (%)
1	1	77.62	4.8
	2	78.87	4.9
	3	70.01	7.8
2	1	48.59	7.2
	2	40.97	7.4
	3	40.80	19.2
3	1	21.35	5.3
	2	21.05	5.1
	3	18.83	13.1
4	1	13.56	3.8
	2	10.88	7.7
	3	12.26	8.3
5	1	70.74	4.2
	2	72.92	5.7
	3	81.50	4.6
6	1	24.60	4.8
	2	25.17	6.8
	3	25.81	8.9
7	1	5.42	8.4
	2	4.53	24.3
	3	4.98	16.1

Inter-assay

Assay to assay reproducibility within one laboratory was evaluated in 3 independent experiments. Each assay was carried out with 6 replicates of 7 serum samples) containing different concentrations of rat IL-17A. 2 standard curves were run on each plate. Data below show the mean rat IL-17A concentration and the coefficient of variation calculated on 18 determinations of each sample (see Table 3Table). **The calculated overall inter-assay coefficient of variation was 7.6%.**

Table 3 : Mean rat IL-17A concentration and the coefficient of variation of each sample

Sample	Mean rat IL-17A Concentration (pg/ml)	Coefficient of Variation (%)
1	75.50	6.4
2	43.45	10.2
3	20.41	6.7
4	12.23	11.0
5	75.05	7.6
6	25.19	2.4
7	4.98	9.0

12.4. Dilution Parallelism

Serum, plasma cell culture supernatant samples with different levels of rat IL-17A were analysed at serial 2 fold dilutions with 4 replicates each. For recovery data see Table 4Table .

Table 4

Sample matrix	Recovery of Expected Values.	
	Range (%)	Mean (%)
Serum	85 - 122	102
Plasma (EDTA)	93 - 125	107
Plasma (citrate)	95 - 114	106
Plasma (heparin)	64 - 126	97
Cell culture supernatant	79 - 89	86

12.5. Spike Recovery

The spike recovery was evaluated by spiking 3 levels of rat IL-17A into serum, plasma (EDTA, citrate, heparin) and cell culture supernatant samples. Recoveries were determined with 4 replicates each. For recovery data see Table 5. The unspiked serum, plasma, cell culture supernatant was used as blank in these experiments. Recoveries were shown to depend on the serum used.

Table 5

Sample matrix	Spike high (%)	Spike medium (%)	Spike low (%)
Serum	44	34	39
Plasma (EDTA)	31	20	26
Plasma (citrate)	59	37	29
Plasma (heparin)	64	45	37
Cell culture supernatant	112	92	103

12.6. Sample Stability

Freeze-Thaw Stability

Aliquots of spiked serum samples were stored at -20°C and thawed 5 times and the rat IL-17A levels determined. There was no significant loss of rat IL-17A immunoreactivity detected by freezing and thawing.

Storage Stability

Aliquots of spiked serum samples were stored at -20°C, 2-8°C room temperature (RT) and at 37°C, and the rat IL-17A level determined after 24 h. There was no significant loss of rat IL-17A immunoreactivity detected during storage at -20°C, 2-8°.

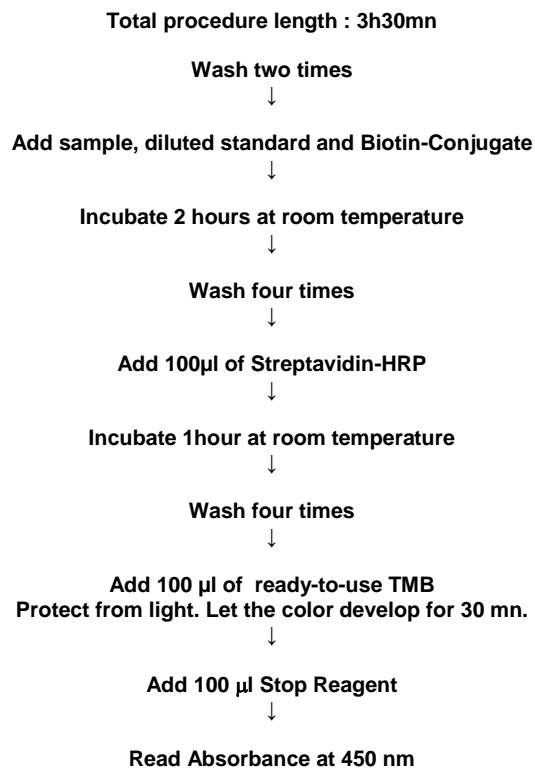
A significant loss of rat IL-17A immunoreactivity was detected during storage at RT and at 37°C after 24 h.

12.7. Expected Values

There were no detectable rat IL-17A levels found.

Elevated rat IL-17A levels depend on the type of immunological disorder.

13. Assay Summary



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