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# Meningitis IgG

Enzyme ImmunoAssay (ELISA)
for the determination of
IgG antibodies to
Meningococcus serogroups ACWY and B
in human serum and plasma



# **DIA.PRO**

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> REF MENG.CE 96 Tests

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# **Meningitis IgG**

# A. INTENDED USE

Enzyme ImmunoAssay (ELISA) for the determination of IgG antibodies to serogroups ACWY and B Neisseria meningitidis in human plasma and sera. The product is intended for the follow-up of patients administered with a meningococcal vaccine, containing the polysaccharides from serogroups A, C, Y, W135 and B.

#### **B. INTRODUCTION**

Neisseria meningitidis, also simply known as *meningococcus*, is a heterotrophic gram-negative diplococcal bacterium best known for its role in meningitis and other forms of meningococcal disease. It only infects humans . It is the only form of bacterial meningitis known to cause epidemics.

The bacteria, which can spread from person to person, usually first causes a colonization in the upper airway, but without symptoms. From there, it can penetrate into the bloodstream to the central nervous system and cause <u>meningitis</u> or develop into a full-blown bloodstream infection (meningococcemia).

Twelve subtypes or serogroups of N. meningitidis have been identified, five (A, B, C, Y and W135) of which recognized to cause epidemics. The pathogenicity, immunogenicity, and epidemic capabilities differ according to the serogroup. Thus the identification of the serogroup responsible of a sporadic case is crucial for epidemic containment.

The meningococcal vaccines currently approved for use in humans are made from the variant, purified capsular polysaccharides, which are characteristic of the bacteria membrane. Vaccines are available for serogroups A, C, Y and W135 and recently to serogroup B. Antibodies against the meningococcal capsular polysaccharides (MCP) are protective in adults and children above 2 years, and antibodies have been detected four years after vaccination.

# C. PRINCIPLE OF THE TEST

Microplates are coated with a preparation of purified capsular polysaccharides formed by serogroups A, C, Y, W135 and B. In the 1<sup>st</sup> incubation, the solid phase is treated with diluted samples and anti-Meningococcus IgG are captured, if present, by the antigens.

After washing out all the other components of the sample, in the 2<sup>nd</sup> incubation bound anti-Men IgG are detected by the addition of anti hIgG antibody, labeled with peroxidase (HRP).

The enzyme captured on the solid phase, acting on the substrate/chromogen mixture, generates an optical signal that is proportional to the amount of anti-Men IgG antibodies present in the sample.

A cut-off value permits to transform the optical density values detected in positive or negative results due to the presence of absence of anti-Men IgG.

# D. COMPONENTS

Each kit contains sufficient reagents to perform 96 tests.

# 1. Microplate: MICROPLATE

12 strips x 8 breakable microwells coated with polysaccharides derived from Meningococcus ACYW+B. Plates are sealed into a bag with desiccant. Allow the microplate to reach room temperature before opening; reseal unused strips in the bag with desiccant and store at 4°C.

# 2. Negative Control: CONTROL -

1x4.0 ml/vial. Ready to use and pale yellow color coded. Contains human serum negative for IgG anti Meningococcus, 2% casein, 10 mM Na-citrate buffer pH 6.0 +/-0.1, 0.1% Tween 20, 0.09% Na-azide and 0.045% ProClin 300 as preservatives.

# 3. Positive Control: CONTROL +

1x4.0 ml/vial. Ready to use and dark green color coded. Contains human serum positive for IgG anti Meningococcus, 2% casein, 10 mM Na-citrate buffer pH 6.0 +/-0.1, 0.1% Tween 20, 0.09% Na-azide and 0.045% ProClin 300 as preservatives.

# 4. Wash buffer concentrate: WASHBUF 20X

1x60ml/bottle. 20x concentrated solution. Once diluted, the wash solution contains 10 mM phosphate buffer pH 7.0+/-0.2, 0.05% Tween 20 and 0.045% ProClin 300.

# 5. Enzyme conjugate : CONJ

1x16ml/vial. Ready to use and red colour coded. It contains Horseradish peroxidase conjugated polyclonal antibodies to human IgG, 5% BSA, 10 mM Tris buffer pH 6.8+/-0.1, 0.045% ProClin 300 and 0.02% gentamicine sulphate as preservatives.

# 6. Chromogen/Substrate: SUBS TMB

1x16ml/vial. It contains 50 mM citrate-phosphate buffer pH 3.5-3.8, 4% dimethylsulphoxide, 0.03% tetra-methyl-benzidine (or TMB) and 0.02% hydrogen peroxide (or H2O2).

Note: To be stored protected from light as sensitive to strong illumination.

# 7. Sulphuric Acid: H2SO4 0.3 M

1x15ml/viallt contains 0.3 M  $H_2SO_4$  solution. Attention: Irritant (H315, H319; P280, P302+P352, 332+P313, P305+ P351+P338, P337+P313, P362+P363).

## 8. Specimen Diluent: DILSPE

2x60ml/vial. It contains 2% casein, 10 mM Na-citrate buffer pH 6.0 +/-0.1, 0.1% Tween 20, 0.09% Na-azide and 0.045% ProClin 300 as preservatives. To be used to dilute the sample.

# 9. Plate sealing foils n°2

# 10. Package insert n°1

# E. MATERIALS REQUIRED BUT NOT PROVIDED

- Calibrated Micropipettes (1000, 100 and 10ul) and disposable plastic tips.
- 2. EIA grade water (bidistilled or deionised, charcoal treated to remove oxidizing chemicals used as disinfectants).
- 3. Timer with 60 minute range or higher.
- 4. Absorbent paper tissues.
- Calibrated ELISA microplate thermostatic incubator (dry or wet) set at +37°C (+/-0.5°C tolerance).
- Calibrated ELISA microwell reader with 450nm (reading) and with 620-630nm (blanking) filters.
- Calibrated ELISA microplate washer.
- 8. Vortex or similar mixing tools.

## F. WARNINGS AND PRECAUTIONS

- 1. The kit has to be used by skilled and properly trained technical personnel only, under the supervision of a medical doctor responsible of the laboratory.
- 2. All the personnel involved in performing the assay have to wear protective laboratory clothes, talc-free gloves and glasses. The use of any sharp (needles) or cutting (blades) devices should be avoided. All the personnel involved should be trained in biosafety procedures, as recommended by the Center for Disease Control, Atlanta, U.S. and reported in the National

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Institute of Health's publication: "Biosafety in Microbiological and Biomedical Laboratories", ed. 1984.

- 3. All the personnel involved in sample handling should be vaccinated for HBV and HAV, for which vaccines are available, safe and effective.
- 4. The laboratory environment should be controlled so as to avoid contaminants such as dust or air-born microbial agents, when opening kit vials and microplates and when performing the test. Protect the Chromogen (TMB) from strong light and avoid vibration of the bench surface where the test is undertaken.
- 5. Upon receipt, store the kit at 2..8°C into a temperature controlled refrigerator or cold room.
- 6. Do not interchange components between different lots of the kits. It is recommended that components between two kits of the same lot should not be interchanged.
- 7. Check that the reagents are clear and do not contain visible heavy particles or aggregates. If not, advise the laboratory supervisor to initiate the necessary procedures for kit replacement.
- 8. Avoid cross-contamination between serum/plasma samples by using disposable tips and changing them after each sample. Do not reuse disposable tips.
- 9. Avoid cross-contamination between kit reagents by using disposable tips and changing them between the use of each one. Do not reuse disposable tips.
- 10. Do not use the kit after the expiration date stated on the external container and internal (vials) labels. A study conducted on an opened kit did not pointed out any relevant loss of activity up to six 6 uses of the device and up to 3 months.
- 11. Treat all specimens as potentially infective. All human serum specimens should be handled at Biosafety Level 2, as recommended by the Center for Disease Control, Atlanta, U.S. in compliance with what reported in the Institutes of Health's publication: "Biosafety in Microbiological and Biomedical Laboratories", ed. 1984.
- 12. The use of disposable plastic-ware is recommended in the preparation of the liquid components or in transferring components into automated workstations, in order to avoid cross contamination.
- 13. Waste produced during the use of the kit has to be discarded in compliance with national directives and laws concerning laboratory waste of chemical and biological substances. In particular, liquid waste generated from the washing procedure, from residuals of controls and from samples has to be treated as potentially infective material and inactivated before waste. Suggested procedures of inactivation are treatment with a 10% final concentration of household bleach for 16-18 hrs or heat inactivation by autoclave at 121°C for 20 min.
- 14. Accidental spills from samples and operations have to be adsorbed with paper tissues soaked with household bleach and then with water. Tissues should then be discarded in proper containers designated for laboratory/hospital waste.
- 15. The Sulphuric Acid is an irritant. In case of spills, wash the surface with plenty of water
- 16. Other waste materials generated from the use of the kit (example: tips used for samples and controls, used microplates) should be handled as potentially infective and disposed according to national directives and laws concerning laboratory wastes.

## G. SPECIMEN: PREPARATION AND WARNINGS

- 1. Blood is drawn aseptically by venepuncture and plasma or serum is prepared using standard techniques of preparation of samples for clinical laboratory analysis. No influence has been observed in the preparation of the sample with citrate, EDTA and heparin.
- 2. Samples have to be clearly identified with codes or names in order to avoid misinterpretation of results. Bar code labeling and electronic reading is strongly recommended.
- 3. Haemolysed ("red") and visibly hyperlipemic ("milky") samples have to be discarded as they could generate false results. Samples containing residues of fibrin or heavy particles or

microbial filaments and bodies should be discarded as they could give rise to false results.

4. Sera and plasma can be stored at +2°...+8°C in primary collection tubes for up to five days after collection.

Do not freeze primary tubes of collection. For longer storage periods, sera and plasma samples, carefully removed from the primary collection tube, can be stored frozen at -20°C for several months. Any frozen samples should not be frozen/thawed more than once as this may generate particles that could affect the test result.

5. If particles are present, centrifuge at 2.000 rpm for 20 min or filter using 0.2-0.8u filters to clean up the sample for testing.

# H. PREPARATION OF COMPONENTS AND WARNINGS Microplate:

Allow the microplate to reach room temperature (about 1 hr) before opening the container. Check that the desiccant is not turned to dark green, indicating a defect of storage.

In this case call Dia.Pro's customer service.

Unused strips have to be placed back into the aluminium pouch, in presence of desiccant supplied, firmly zipped and stored at +2°..8°C. When opened the first time, residual strips are stable till the indicator of humidity inside the desiccant bag turns from yellow to green.

#### Controls:

Ready to use. Mix well on vortex before use.

## Wash buffer concentrate:

The whole content of the concentrated solution has to be diluted 20x with bidistilled water and mixed gently end-over-end before use. During preparation avoid foaming as the presence of bubbles could impact on the efficiency of the washing cycles.

**Note:** Once diluted, the wash solution is stable for 1 week at +2..8° C.

# Enzyme conjugate:

Ready to use. Mix well on vortex before use.

Be careful not to contaminate the liquid with oxidizing chemicals, air-driven dust or microbes.

If this component has to be transferred use only plastic, possibly sterile disposable containers.

## Chromogen/Substrate:

Ready to use. Mix well on vortex before use.

Be careful not to contaminate the liquid with oxidizing chemicals, air-driven dust or microbes.

Do not expose to strong illumination, oxidizing agents and metallic surfaces.

If this component has to be transferred use only plastic, possible sterile disposable container

# Sample Diluent:

Ready to use component. Mix carefully on vortex before use.

## Sulphuric Acid:

Ready to use. Mix well on vortex before use. Attention: Irritant (H315, H319; P280, P302+P352, 332+P313, P305+ P351+P338, P337+P313, P362+P363).

Legenda:

# Warning H statements:

H315 - Causes skin irritation.

H319 – Causes serious eye irritation.

## Precautionary P statements:

 $\mbox{\bf P280}-\mbox{Wear}$  protective gloves/protective clothing/eye protection/face protection.

P302 + P352 - IF ON SKIN: Wash with plenty of soap and water.

P332 + P313 – If skin irritation occurs: Get medical advice/attention.

P305 + P351 + P338 - IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing.

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P337 + P313 – If eye irritation persists: Get medical advice/attention. P362 + P363 - Take off contaminated clothing and wash it before reuse.

# I. INSTRUMENTS AND TOOLS USED IN COMBINATION WITH THE KIT

- Micropipettes have to be calibrated to deliver the correct volume required by the assay and must be submitted to regular decontamination (household alcohol, 10% solution of bleach, hospital grade disinfectants) of those parts that could accidentally come in contact with the sample. They should also be regularly maintained in order to show a precision of 1% and a trueness of +/-2%. Decontamination of spills or residues of kit components should also be carried out regularly.
- The ELISA incubator has to be set at +37°C (tolerance of +/-0.5°C) and regularly checked to ensure the correct temperature is maintained. Both dry incubators and water baths are suitable for the incubations, provided that the instrument is validated for the incubation of ELISA tests.
- 3. The ELISA washer is extremely important to the overall performances of the assay. The washer must be carefully validated in advance, checked for the delivery of the right dispensation volume and regularly submitted to maintenance according to the manufacturer's instructions for use. In particular the washer, at the end of the daily workload, has to be extensively cleaned out of salts with deionized water. Before use, the washer has to be extensively primed with the diluted Washing Solution.
  - The instrument weekly has to be submitted to decontamination according to its manual (NaOH 0.1 M decontamination suggested).
  - 5 washing cycles (aspiration + dispensation of 350ul/well of washing solution + 20 sec soaking = 1 cycle) are sufficient to ensure the assay with the declared performances. If soaking is not possible add one more cycle of washing.
  - An incorrect washing cycle or salt-blocked needles are the major cause of false positive reactions.
- Incubation times have a tolerance of ±5%.
- 5. The ELISA microplate reader has to be equipped with a reading filter of 450nm and with a second filter (620-630nm, strongly recommended) for blanking purposes. Its standard performances should be (a) bandwidth ≤ 10 nm; (b) absorbance range from 0 to ≥ 2.0; (c) linearity to ≥ 2.0; repeatability ≥ 1%. Blanking is carried out on the well identified in the section "Assay Procedure". The optical system of the reader has to be calibrated regularly to ensure that the correct optical density is measured. It should be regularly maintained according to the manufacturer 's instructions.
- 6. When using an ELISA automated work station, all critical steps (dispensation, incubation, washing, reading, data handling) have to be carefully set, calibrated, controlled and regularly serviced in order to match the values reported in the section "Internal quality Control". The assay protocol has to be installed in the operating system of the unit and validated as for the washer and the reader. In addition, the liquid handling part of the station (dispensation and washing) has to be validated and correctly set. Particular attention must be paid to avoid carry over by the needles used for dispensing and for washing. This must be studied and controlled to minimize the possibility of contamination of adjacent wells. The use of ELISA automated work stations is recommended when the number of samples to be tested exceed 20-30 units per run.
- 7. Dia.Pro's customer service offers support to the user in the setting and checking of instruments used in combination with the kit, in order to assure compliance with the requirements described. Support is also provided for the installation of new instruments to be used with the kit.

## L. PRE ASSAY CONTROLS AND OPERATIONS

- 1. Check the expiration date of the kit printed on the external label (primary container). Do not use if expired.
- Check that the liquid components are not contaminated by visible particles or aggregates.
- Check that the Chromogen (TMB) is colourless or pale blue by aspirating a small volume of it with a sterile plastic pipette.
- Check that no breakage occurred in transportation and no spillage of liquid is present inside the box (primary container). Check that the aluminium pouch, containing the microplate, is not punctured or damaged.
- Dilute all the content of the 20x concentrated Wash Solution as described above.
- Allow all the other components to reach room temperature (about 1 hr) and then mix gently on vortex all liquid reagents.
- Set the ELISA incubator at +37°C and prepare the ELISA washer by priming with the diluted washing solution, according to the manufacturers instructions. Set the right number of washing cycles as as reported in the specific section
- Check that the ELISA reader is turned on or ensure it will be turned on at least 20 minutes before reading.
- 9. If using an automated work station, turn on, check settings and be sure to use the right assay protocol.
- 10. Check that the micropipettes are set to the required volume.
- 11. Check that all the other equipment is available and ready to use.
- 12. In case of problems, do not proceed further with the test and advise the supervisor.

#### M. ASSAY PROCEDURE

The assay has to be carried out according to what reported below, taking care to maintain the same incubation time for all the samples in testing.

- Dilute samples 1:101 into a properly defined dilution tube (example: 1000 µl Sample Diluent + 10 µl sample). Do not dilute the Controls as they are ready to use. Mix carefully all the liquid components on vortex and then proceed as described below.
- Place the required number of Microwells in the microwell holder. Leave A1 well empty for the operation of blanking.
- Dispense 100 μl of Negative Control in triplicate and Positive Controls in duplicate in proper wells according to the schemes proposed at page 6. Then dispense 100 μl of diluted samples in each properly identified well.
- Incubate the microplate for 60 min at +37°C.

**Important note:** Strips have to be sealed with the adhesive sealing foil, supplied, only when the test is carried out manually. Do not cover strips when using ELISA automatic instruments.

- Wash the microplate with an automatic washer as reported previously (section I.3).
- Pipette 100 µl Enzyme Conjugate into each well, except the A1 well, and cover with the sealer. Check that this red coloured component has been dispensed in all the wells, except A1.

**Important note:** Be careful not to touch the plastic inner surface of the well with the tip filled with the Enzyme Conjugate. Contamination might occur.

- 7. Incubate the microplate for **60 min at +37°C**.
- 8. Wash microwells as in step 5.
- Pipette 100 μl Chromogen/Substrate mixture into each well, the blank well included. Then incubate the microplate at room temperature (18-24°C) for 20 minutes.

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**Important note:** Do not expose to strong direct illumination. High background might be generated.

- 10. Pipette 100 µl Sulphuric Acid into all the wells using the same pipetting sequence as in step 9. Addition of acid will turn the positive control and the positive samples from blue to yellow.
- Measure the colour intensity of the solution in each well, as described in section I.5, at 450nm filter (reading) and at 620-630nm (background subtraction)), blanking the instrument on A1 (mandatory).

# General Important notes:

- Ensure that no finger prints are present on the bottom of the microwell before reading. Finger prints could generate false positive results on reading.
- Reading has to be carried out just after the addition of the Stop Solution and anyway not any longer than 20 minutes after its addition. Some self oxidation of the chromogen can occur leading to high background.

#### N. ASSAY SCHEME

Method	Operations
Controls	100 µl
Samples diluted 1:101	100 µl
1st incubation	60 min
Temperature	+37°C
Wash step	n° 5 cycles with 20" of soaking
	OR
	n° 6 cycles without soaking
Enzyme conjugate	100 µl
2 <sup>nd</sup> incubation	60 min
Temperature	+37°C
Wash step	n° 5 cycles with 20" of soaking
	OR
	n° 6 cycles without soaking
TMB/H2O2	100 μl
3 <sup>rd</sup> incubation	20 min
Temperature	r.t.
Sulphuric Acid	100 ul
Reading OD	450nm / 620-630nm

An example of dispensation scheme is reported below:

		_	
N/I	cro	nla	+^
IAII	cro	pia	ILE

	1	2	3	4	5	6	7	8	9	10	11	12
Α	BLK	S 3										
В	NC	S 4										
B C	NC	S 5										
D	NC	S 6										
Е	PC	S 7										
F	PC	S 9										
G	S 1	S 9										
Н	S 2	S 10										

 $\begin{array}{ccc} \mbox{Legenda:} & \mbox{BLK = Blank} & \mbox{NC = Negative Control} \\ \mbox{PC = Positive Control} & \mbox{S = Sample} \\ \end{array}$ 

# O. INTERNAL QUALITY CONTROL

A validation check is carried out on the controls any time the kit is used in order to verify whether the performances of the assay are as expected and required by the IVDD directive 98/79/EC. Control that the following data are matched:

Check	Requirements
Blank well A1	< 0.100 OD450nm
Negative Control	< 0.150 OD450nm after blanking
Positive Control	> 0.500 OD450nm after blanking

If the results of the test match the requirements stated above, proceed to the next section.

If they do not, do not proceed any further and operate as follows:

D I I	<b>O</b> I I
Problem	Check
Blank well	that the Chromogen/Sustrate solution has
> 0.100 OD450nm	not got contaminated during the assay
Negative Control	1. that the washing procedure and the
> 0.150 OD450nm	washer settings are as validated in the pre
after blanking	qualification study;
	2. that the proper washing solution has been
	used and the washer has been primed with it
	before use;
	3. that no mistake has been done in the
	assay procedure (dispensation of a positive
	calibrator instead of the negative one;
	4. that no contamination of the negative
	calibrator or of their wells has occurred due
	spills of positive samples or the enzyme
	conjugate;
	5. that micropipettes haven't got
	contaminated with positive samples or with
	the enzyme conjugate
	6. that the washer needles are not blocked or
	partially obstructed.
Positive Control	1. that the procedure has been correctly
< 0.500 OD450nm	executed;
	2. that no mistake has been done in its
	distribution (dispensation of a wrong
	calibrator instead);
	3. that the washing procedure and the
	washer settings are as validated in the pre
	qualification study;
	4. that no external contamination of the
	positive control has occurred.

Should one of these problems have happened, after checking, report to the supervisor for further actions.

# P. CUT-OFF CALCULATION

If data are valid, calculate the mean OD450nm value of the Negative Control (or NC) and then apply the following formulation to calculate the cut-off value:

## NC + 0.250 = Cut-Off

**Important Note:** When the calculation of results is made by an automatic work station, assure that the system has been loaded with the right formulation.

# Q. INTERPRETATION OF RESULTS

Samples with an OD450nm lower that the Cut-Off value are considered not reactive for IgG anti MEN.

Samples with an OD450nm higher than the Cut-Off value are considered positive for IgG anti MEN.

In case the quantification of IgG present in positive samples is required to better monitor the immunological response to the vaccine in a prolonged time, calculate for each sample the value Sample/Cut-Off (or S/Co) that provide an index of the content of IgG in the sample.

# Important notes:

 Results of this IVD are not intended to provide any diagnosis of Neisseria Meningitis infection. The device provides only indications on the humoral immunological status of the individual undergoing a process of vaccination. Doc.: INS MENG.CE/eng Page 6 of 6 Rev.: 4 Date: 2019/10

- Interpretation of results should be done under the supervision of the laboratory supervisor to reduce the risk of judgment errors and misinterpretations.
- When test results are transmitted from the laboratory to another facility, attention must be paid to avoid erroneous data transfer.
- Diagnosis has to be done and released to the patient by a suitably qualified medical doctor.

#### R. PERFORMANCE CHARACTERISTICS

The evaluation of the kit **performances** has been first conducted on panels of IgG negative specimens to define a range of negativity, and then on a random population of adult individuals to define a range of positivity.

Finally the device was studied on a panel of serum samples collect from individuals before and after the process of vaccination.

**Reproducibility** was studied on three samples of different IgG reactivity, examined in 16 replicates in three separate runs; the study has shown CV% values ranging 4-20% depending on the OD450nm readings.

# S. LIMITATIONS

The kit does not provide any diagnosis of Meningococcus infection but is only intended for the follow-up of vaccination. Frozen samples containing fibrin particles or aggregates may generate false positive results.

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All the IVD Products manufactured by the company are under the control of a certified Quality Management System according to ISO 13485 rule. Each lot is submitted to a quality control and released into the market only if conforming with the EC technical specifications and acceptance criteria.

Manufacturer:

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