

Human IgG3 ELISA Kit NBP2-60476

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For any questions regarding troubleshooting or performing the assay, please contact our supportteamattechnical@novusbio.com.

Assay Summary

Step 1. Add 50 μ l of Standard or Sample per well. Incubate 2 hours.

Step 2. Wash, then add 50 μ l of Biotinylated Antibody per well. Incubate 1 hour.

Step 3. Wash, then add 50 μ l of SP Conjugate per well. Incubate 30 minutes.

Step 4. Wash, then add 50 μ l of Chromogen Substrate per well. Incubate 10 minutes.

Step 5. Add 50 μ l of Stop Solution per well. Read at 450 nm immediately.

Symbol Key



Consult instructions for use.

	1	2	3	4	5	6	7	8	9	10	11	12
А												
В												
С												
D												
E												
F												
G												
н												

Human Immunoglobulin G3 (IgG3) ELISA Kit

Catalog No. NBP2-60476

Sample insert for reference use only

Introduction

Human immunoglobulin G (IgG), the most abundant antibody in serum, constitutes 75% of serum immunoglobulins. IgG is synthesized and secreted by plasma B cells and contains two heavy chains and two light chains. IgG has four subclasses (IgG1, IgG2, IgG3, and IgG4) and is involved in the secondary immune response. As it is the only isotype that can pass through the human placenta, maternal IgG provides the defense against infection for the first few weeks of a neonate (1). IgG has been shown to treat autoimmune disease, induce apoptosis, and stimulate complement attenuation (2-4). Elevated IgG is observed in viral hepatitis, autoimmune hepatitis, and cirrhosis (5).

Principle of the Assay

The AssayMax™ Human IgG3 ELISA (Enzyme-Linked Immunosorbent Assay) Kit is designed for detection of IgG3 in human plasma, serum, milk, urine, saliva, CSF, and cell culture samples. This assay employs a quantitative sandwich enzyme immunoassay technique that measures human IgG3 in less than 4 hours. A polyclonal antibody specific for human IgG3 has been pre-coated onto a 96-well microplate with removable strips. IgG3 in standards and samples is sandwiched by the immobilized antibody and a biotinylated polyclonal antibody specific for human IgG3, which is recognized by a streptavidin-peroxidase (SP) conjugate. All unbound material is washed away and a peroxidase enzyme substrate is added. The color development is stopped and the intensity of the color is measured.

Caution and Warning

- This product is for Research Use Only and is not intended for use in diagnostic procedures.
- Prepare all reagents (diluent buffer, wash buffer, standard, biotinylated antibody, and SP conjugate) as instructed, prior to running the assay.
- Prepare all samples prior to running the assay. The dilution factors for the samples are suggested in this insert. However, the user should determine the optimal dilution factor.
- Spin down the SP conjugate vial and the biotinylated antibody vial before opening and using contents.
- The Stop Solution is an acidic solution.

The kit should not be used beyond the expiration date.

Reagents

- Human IgG3 Microplate: A 96-well polystyrene microplate (12 strips of 8 wells) coated with a polyclonal antibody against human IgG3.
- Sealing Tapes: Each kit contains 3 precut, pressure sensitive sealing tapes that can be cut to fit the format of the individual assay.
- Human IgG3 Standard: Human IgG3 in a buffered protein base (40 ng, lyophilized).
- Biotinylated Human IgG3 Antibody (50x): A 50-fold concentrated biotinylated polyclonal antibody against human IgG3 (120 μl).
- MIX Diluent Concentrate (10x): A 10-fold concentrated buffered protein base (30 ml).
- Wash Buffer Concentrate (20x): A 20-fold concentrated buffered surfactant (30 ml, 2 bottles).
- SP Conjugate (100x): A 100-fold concentrate (80 μl).
- Chromogen Substrate (1x): A stabilized peroxidase chromogen substrate tetramethylbenzidine (8 ml).
- Stop Solution (1x): A 0.5 N hydrochloric acid solution to stop the chromogen substrate reaction (12 ml).

Storage Condition

- Upon arrival, immediately store components of the kit at recommended temperatures up to the expiration date.
- Store SP Conjugate and Biotinylated Antibody at -20°C.
- Store Microplate, Diluent Concentrate (10x), Wash Buffer, Stop Solution, and Chromogen Substrate at 2-8°C.
- Unused microplate wells may be returned to the foil pouch with the desiccant packs and resealed. May be stored for up to 30 days in a vacuum desiccator.
- Store Standard at 2-8°C before reconstituting with Diluent and at -20°C after reconstituting with Diluent.

Other Supplies Required

- Microplate reader capable of measuring absorbance at 450 nm
- Pipettes (1-20 μl, 20-200 μl, 200-1000 μl, and multiple channel)
- Deionized or distilled reagent grade water

Sample Collection, Preparation, and Storage

- Plasma: Collect plasma using one-tenth volume of 0.1 M sodium citrate as an anticoagulant. Centrifuge samples at 3000 x g for 10 minutes and collect plasma. A 100000-fold sample dilution is suggested into MIX Diluent or within the range of 50000x 200000x; however, user should determine optimal dilution factor depending on application needs. The undiluted samples can be stored at -20°C or below for up to 3 months. Avoid repeated freeze-thaw cycles (EDTA or Heparin can also be used as an anticoagulant).
- Serum: Samples should be collected into a serum separator tube. After clot formation, centrifuge samples at 3000 x g for 10 minutes and remove serum. A 100000-fold sample dilution is suggested into MIX Diluent or within the range of 50000x 200000x; however, user should determine optimal dilution factor depending on application needs. The undiluted samples can be stored at -20°C or below for up to 3 months. Avoid repeated freeze-thaw cycles.
- **Milk:** Collect milk using sample tube. Centrifuge samples at 800 x g for 10 minutes. A 500-fold sample dilution is suggested into MIX Diluent or within the range of 250x 1000x; however, user should determine optimal dilution factor depending on application needs. The undiluted samples can be stored at -20°C or below for up to 3 months. Avoid repeated freeze-thaw cycles.
- Urine: Collect urine using sample pot. Centrifuge samples at 800 x g for 10 minutes. A 4-fold sample dilution is suggested into MIX Diluent or within the range of 2x – 8x; however, user should determine optimal dilution factor depending on application needs. The undiluted samples can be stored at -20°C or below for up to 3 months. Avoid repeated freeze-thaw cycles.
- Saliva: Collect saliva using sample tube. Centrifuge samples at 800 x g for 10 minutes. A 40-fold sample dilution is suggested into MIX Diluent or within the range of 20x 80x; however, user should determine optimal dilution factor depending on application needs. The undiluted samples can be stored at -20°C or below for up to 3 months. Avoid repeated freeze-thaw cycles.
- CSF: Collect cerebrospinal fluid (CSF) using sample pot. Centrifuge samples at 3000 x g for 10 minutes. A 200-fold sample dilution is suggested into MIX Diluent; however, user should determine optimal dilution factor depending on application needs. The undiluted samples can be stored at -80°C for up to 3 months. Avoid repeated freeze-thaw cycles.
- Cell Culture Supernatant: Centrifuge cell culture media at 1500 rpm for 10 minutes at 4°C to remove debris and collect supernatant. Samples can be stored at -80°C. Avoid repeated freeze-thaw cycles.

Applicable samples may also include biofluids, cell culture, and tissue homogenates. If necessary, user should determine optimal dilution factor depending on application needs.

Refer to Dilution Guidelines for further instruction.

	Guidelines for Dilutions of 100-fold or Greater (for reference only; please follow the insert for specific dilution suggested)					
	100x		10000x			
A)	4 μl sample: 396 μl buffer (100x) = 100-fold dilution Assuming the needed volume is less than or equal to 400 μl.	A) B)	4 μl sample : 396 μl buffer (100x) 4 μl of A : 396 μl buffer (100x) = 10000-fold dilution Assuming the needed volume is less than or equal to 400 μl.			
	1000x		100000x			
A) B)	4 μl sample : 396 μl buffer (100x) 24 μl of A : 216 μl buffer (10x) = 1000-fold dilution Assuming the needed volume is less than or equal to 240 μl.	A) B) C)	4 μl sample : 396 μl buffer (100x) 4 μl of A : 396 μl buffer (100x) 24 μl of B : 216 μl buffer (10x) = 100000-fold dilution Assuming the needed volume is less than or equal to 240 μl.			

Reagent Preparation

- Freshly dilute all reagents and bring all reagents to room temperature before use.
- MIX Diluent Concentrate (10x): If crystals have formed in the
 concentrate, mix gently until the crystals have completely dissolved.
 Dilute the MIX Diluent Concentrate 10-fold with reagent grade water to
 produce a 1x solution. Store for up to 30 days at 2-8°C.
- Human IgG3 Standard: Reconstitute the Human IgG3 Standard (40 ng) with 1.6 ml of MIX Diluent to generate a 25 ng/ml standard stock solution. Allow the vial to sit for 10 minutes with gentle agitation prior to making dilutions. Prepare duplicate or triplicate standard points by serially diluting from the standard stock solution (25 ng/ml) 2-fold with equal volume of MIX Diluent to produce 12.5, 6.25, 3.125, 1.563, 0.781, and 0.391 ng/ml solutions. MIX Diluent serves as the zero standard (0 ng/ml). Any remaining stock solution should be stored at -20°C and used within 30 days. Avoid repeated freeze-thaw cycles.

Standard Point	Dilution	[IgG3] (ng/ml)
P1	1 part Standard (25 ng/ml)	25
P2	1 part P1 + 1 part MIX Diluent	12.5
Р3	1 part P2 + 1 part MIX Diluent	6.25
P4	1 part P3 + 1 part MIX Diluent	3.125
P5	1 part P4 + 1 part MIX Diluent	1.563
Р6	1 part P5 + 1 part MIX Diluent	0.781
P7	1 part P6 + 1 part MIX Diluent	0.391
P8	MIX Diluent	0.0

- Biotinylated Human IgG3 Antibody (50x): Spin down the antibody briefly and dilute the desired amount of the antibody 50-fold with MIX Diluent to produce a 1x solution. The undiluted antibody should be stored at -20°C.
- Wash Buffer Concentrate (20x): If crystals have formed in the concentrate, mix gently until the crystals have completely dissolved. Dilute the Wash Buffer Concentrate 20-fold with reagent grade water to produce a 1x solution.
- SP Conjugate (100x): Spin down the SP Conjugate briefly and dilute the desired amount of the conjugate 100-fold with MIX Diluent to produce a 1x solution. The undiluted conjugate should be stored at -20°C.

Assay Procedure

- Prepare all reagents, standard solutions, and samples as instructed. Bring all reagents to room temperature before use. The assay is performed at room temperature (20-25°C).
- Remove excess microplate strips from the plate frame and return them immediately to the foil pouch with desiccants inside. Reseal the pouch securely to minimize exposure to water vapor and store in a vacuum desiccator.
- Add 50 µl of Human IgG3 Standard or sample to each well. Gently tap
 plate to thoroughly coat the wells. Break any bubbles that may have
 formed. Cover wells with a sealing tape and incubate for 2 hours. Start
 the timer after the last addition.
- Wash five times with 200 µl of Wash Buffer manually. Invert the plate each time and decant the contents; hit 4-5 times on absorbent material to completely remove the liquid. If using a machine, wash six times with 300 µl of Wash Buffer and then invert the plate, decanting the contents; hit 4-5 times on absorbent material to completely remove the liquid.
- Add 50 µl of Biotinylated Human IgG3 Antibody to each well. Gently tap
 plate to thoroughly coat the wells. Break any bubbles that may have
 formed. Cover wells with a sealing tape and incubate for 1 hour.

- Wash the microplate as described above.
- Add 50 µl of SP Conjugate to each well. Gently tap plate to thoroughly coat the wells. Break any bubbles that may have formed. Cover wells with a sealing tape and incubate for 30 minutes. Turn on the microplate reader and set up the program in advance.
- Wash the microplate as described above.
- Add 50 µl of Chromogen Substrate to each well. Gently tap plate to thoroughly coat the wells. Break any bubbles that may have formed. Incubate for 10 minutes or until the optimal blue color density develops.
- Add 50 µl of Stop Solution to each well. The color will change from blue to yellow. Gently tap plate to ensure thorough mixing. Break any bubbles that may have formed.
- Read the absorbance on a microplate reader at a wavelength of 450 nm immediately. If wavelength correction is available, subtract readings at 570 nm from those at 450 nm to correct optical imperfections. Otherwise, read the plate at 450 nm only. Please note that some unstable black particles may be generated at high concentration points after stopping the reaction for about 10 minutes, which will reduce the readings.

Data Analysis

- Calculate the mean value of the duplicate or triplicate readings for each standard and sample.
- To generate a standard curve, plot the graph using the standard concentrations on the x-axis and the corresponding mean 450 nm absorbance (OD) on the y-axis. The best fit line can be determined by regression analysis using log-log or four-parameter logistic curve fit.
- Determine the unknown sample concentration from the Standard Curve and multiply the value by the dilution factor.

Typical Data

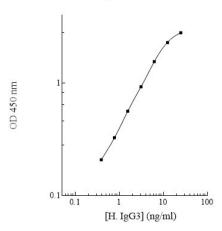
The typical data is provided for reference only. Individual laboratory means may vary from the values listed. Variations between laboratories may be caused by technique differences.

Standard Point	ng/ml	OD	Average OD
P1	25	2.746 2.645	2.696
P2	12.5	2.212 2.141	2.177
P3	6.25	1.444 1.424	1.434
P4	3.125	0.849 0.846	0.848
P5	1.563	0.508 0.490	0.499
P6	0.781	0.323 0.311	0.317
P7	0.391	0.225 0.223	0.224
P8	0.0	0.102 0.102	0.102
· ·	oled Normal Plasma (100000x)	1.413 1.374	1.394

Standard Curve

The curve is provided for illustration only. A standard curve should be generated each time the assay is performed.

Human IgG3 Standard Curve



Reference Value

- Normal human IgG3 plasma levels range from 0.2 1.1 mg/ml.
- Plasma and serum samples from healthy adults were tested (n=30). On average, human IgG3 level was 0.6 mg/ml.

Sample	n	Average Value (mg/ml)
Pooled Normal Plasma	15	0.63
Pooled Normal Serum	15	0.66

Performance Characteristics

- The minimum detectable dose of human IgG3 as calculated by 2SD from the mean of a zero standard was established to be 0.2 ng/ml.
- Intra-assay precision was determined by testing three plasma samples twenty times in one assay.
- Inter-assay precision was determined by testing three plasma samples in twenty assays.

	Intra	-Assay Pred	ision	Inte	r-Assay Pred	cision
Sample	1	2	3	1	2	3
n	20	20	20	20	20	20
CV (%)	4.0%	4.1%	3.2%	9.4%	9.8%	9.0%
Average CV (%)	3.8%				9.4%	

Recovery

Standard Added Value	1 – 12.5 ng/ml
Recovery %	92 – 114%
Average Recovery %	102%

Linearity

Plasma and serum samples were serially diluted to test for linearity.

Average Percentage of Expected Value (%)				
Sample Dilution	Plasma	Serum		
50000x	92%	94%		
100000x	98%	97%		
200000x	103%	105%		

Cross-Reactivity

Species	Cross-Reactivity (%)
Canine	None
Bovine	None
Monkey	None
Mouse	None
Rat	None
Swine	None
Rabbit	None
Protein	Cross-Reactivity (%)
lgG1	<1%
lgG2	<1%
lgG4	<1%

² No significant cross-reactivity observed with IgA, IgA1, IgA2, IgD, IgE, IgJ, and IgM.

Troubleshooting

Issue	Causes	Course of Action		
	Use of expired components	Check the expiration date listed before use. Do not interchange components from different lots.		
	Improper wash step	Check that the correct wash buffer is being used. Check that all wells are empty after aspiration. Check that the microplate washer is dispensing properly. If washing by pipette, check for proper pipetting technique.		
cisio	Splashing of reagents while loading wells	Pipette properly in a controlled and careful manner.		
Low Precision	Inconsistent volumes loaded into wells	Pipette properly in a controlled and careful manner. Check pipette calibration. Check pipette for proper performance.		
7	Insufficient mixing of reagent dilutions	 Thoroughly agitate the lyophilized components after reconstitution. Thoroughly mix dilutions. 		
	Improperly sealed microplate	 Check the microplate pouch for proper sealing. Check that the microplate pouch has no punctures. Check that three desiccants are inside the microplate pouch prior to sealing. 		
lly h ity	Microplate was left unattended between steps	Each step of the procedure should beperformed uninterrupted.		
ed lig ins	Omission of step	 Consult the provided procedure for complete list of steps. 		
Unexpectedly Low or High ignal Intensit	Steps performed in incorrect order	Consult the provided procedure for the correct order.		
Unexpectedly Low or High Signal Intensity	Insufficient amount of reagents added to wells	Check pipette calibration. Check pipette for proper performance.		
	Wash step was skipped	 Consult the provided procedure for all wash steps. 		

	Improper wash buffer	 Check that the correct wash buffer is being used.
	Improper reagent preparation	 Consult reagent preparation section for the correct dilutions of all reagents.
	Insufficient or prolonged incubation periods	Consult the provided procedure for correct incubation time.
Deficient Standard Curve Fit	Non-optimal sample dilution	Sandwich ELISA: If samples generate OD values higher than the highest standard point (P1), dilute samples further and repeat the assay. Competitive ELISA: If samples generate OD values lower than the highest standard point (P1), dilute samples further and repeat the assay. User should determine the optimal dilution factor for samples.
anda	Contamination of reagents	 A new tip must be used for each addition of different samples or reagents during the assay procedure.
nt Sta	Contents of wells evaporate	 Verify that the sealing film is firmly in place before placing the assay in the incubator or at room temperature.
Deficie	Improper pipetting	 Pipette properly in a controlled and careful manner. Check pipette calibration. Check pipette for proper performance.
	Insufficient mixing of reagent dilutions	 Thoroughly agitate the lyophilized components after reconstitution. Thoroughly mix dilutions.

References

- (1) Pitcher-Wilmott RW et al. (1980) Clin Exp Immunol. 41, 303-308.
- (2) Clancy RM et al. (2004) Arthritis Rheum. 50(1):173-182.
- (3) Eray M et al. (1994) Int Immunol. 6(12):1817-1827.
- (4) Lutz HU et al. (2004) Blood. 15:103(2):465-472.
- (5) Teufel A et al. (2009) World J Gastroenterol. 15(9):1035-1041.

Version 2.9