



## **ELISA PRODUCT INFORMATION & MANUAL**

### **Human Myeloperoxidase/MPO Autoantibody (IgG) ELISA Kit (Colorimetric)**

***NBP2-60581***

***Sample Insert for reference use only***

Enzyme-linked Immunosorbent Assay for quantitative  
detection. For research use only.

Not for diagnostic or therapeutic procedures.

## Assay Summary

**Step 1.** Add 50  $\mu$ l of Standard or Sample per well.  
Incubate 2 hours.

**Step 2.** Wash, then add 50  $\mu$ l of Biotinylated Antibody per well.  
Incubate 1 hour.

**Step 3.** Wash, then add 50  $\mu$ l of SP Conjugate per well.  
Incubate 30 minutes.

**Step 4.** Wash, then add 50  $\mu$ l of Chromogen Substrate per well.  
Incubate 20 minutes.

**Step 5.** Add 50  $\mu$ l of Stop Solution per well.  
Read at 450 nm immediately.

## Symbol Key



Consult instructions for use.

## Assay Template

[illegible]



# Human Myeloperoxidase/MPO Autoantibody (IgG) ELISA Kit (Colorimetric)

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## Introduction

Myeloperoxidase (MPO), a member of the heme peroxidase superfamily, is secreted by activated neutrophils, monocytes, and some macrophages. The 150 kDa MPO is a tetrameric protein with 2 light subunits and 2 glycosylated heavy subunits bound to a prosthetic heme group (1). This enzyme possesses both peroxidase and chlorination activities that catalyze the production of a potent oxidant hypochlorous acid, which are central to immune defenses (2). However, under pathological conditions, MPO-derived oxidants can also lead to cell and tissue damage. It contributes to the initiation and propagation of acute and chronic vascular inflammatory disease, including atherosclerosis (3). MPO is linked to Alzheimer disease, coronary artery disease, and lung cancer (4-6). Perinuclear anti-neutrophil cytoplasmic antibodies (p-ANCA), or MPO-ANCA, are a special class of anti-neutrophil cytoplasmic antibodies. The most common p-ANCA target is MPO. Antibodies against MPO are connected to autoimmune disease systemic vasculitis, such as glomerulonephritis, mononeuritis multiplex, and alveolar hemorrhage (7).

## Principle of the Assay

The Human Myeloperoxidase/MPO Autoantibody (IgG) ELISA Kit (Colorimetric) is designed for the quantitative determination of autoimmune response (IgG) to a target antigen (MPO). The kit detects autoantibodies in human **plasma and serum samples**. This assay employs a quantitative **sandwich enzyme immunoassay technique that measures autoantibodies (anti-MPO IgG) in approximately 4 hours**. An MPO antigen has been pre-coated onto a 96-well microplate with removable strips. An autoantibody specific for MPO in standards and samples is sandwiched by the immobilized antigen and a biotinylated polyclonal antibody specific for human IgG, 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 Myeloperoxidase Autoantibody Microplate:** A 96-well polystyrene microplate (12 strips of 8 wells) coated with an MPO antigen.
- **Sealing Tapes:** Each kit contains 3 precut, pressure sensitive sealing tapes that can be cut to fit the format of the individual assay.
- **Human Myeloperoxidase Autoantibody Standard:** Plasma standard (37.5 AU, lyophilized, 2 vials).
- **Autoimmune Biotinylated Human IgG Antibody (50x):** A 50-fold concentrated biotinylated polyclonal antibody against human IgG (120 µl).
- **EIA Diluent Concentrate (10x):** A 10-fold concentrated buffered protein base (20 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 (7 ml).
- **Stop Solution (1x):** A 0.5 N hydrochloric acid solution to stop the chromogen substrate reaction (11 ml).

## Storage Condition

- Upon arrival, immediately store components of the kit at recommended temperatures up to the expiration date.
- Store Microplate, SP Conjugate, and Biotinylated Antibody at -20°C.
- Store 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 for up to 30 days at -20°C.

- 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 40-fold sample dilution is suggested into EIA Diluent; 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 40-fold sample dilution is suggested into EIA Diluent; 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.

***Refer to Dilution Guidelines for further instruction.***

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

## Reagent Preparation

- Freshly dilute all reagents and bring all reagents to room temperature before use.
- EIA Diluent Concentrate (10x):** Dilute the EIA Diluent Concentrate 10-fold with reagent grade water to produce a 1x solution. When diluting the concentrate, make sure to rinse the bottle thoroughly to extract any precipitates left in the bottle. Mix the 1x solution gently until the crystals have completely dissolved. Store for up to 30 days at 2-8°C.
- Human Myeloperoxidase Autoantibody Standard:** Reconstitute the Human Myeloperoxidase Autoantibody Standard (37.5 AU) with 1.5 ml of EIA Diluent to generate a 25 AU/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 AU/ml) 2-fold with equal volume of EIA Diluent to produce 12.5, 6.25, 3.125, and 1.563 AU/ml solutions. EIA Diluent serves as the zero standard (0 AU/ml). Aliquot remaining stock solution to limit repeated freeze-thaw cycles. This solution should be stored at -20°C and **used within 2 days**.

Standard Point	Dilution	[MPO] (AU/ml)
P1	1 part Standard (25 AU/ml)	25
P2	1 part P1 + 1 part EIA Diluent	12.5
P3	1 part P2 + 1 part EIA Diluent	6.25
P4	1 part P3 + 1 part EIA Diluent	3.125
P5	1 part P4 + 1 part EIA Diluent	1.563
P6	EIA Diluent	0.0

- Autoimmune Biotinylated Human IgG Antibody (50x):** Spin down the antibody briefly and dilute the desired amount of the antibody 50-fold with EIA Diluent to produce a 1x solution. The undiluted antibody should be stored at -20°C.
- Wash Buffer Concentrate (20x):** Dilute the Wash Buffer Concentrate 20-fold with reagent grade water to produce a 1x solution. When diluting the concentrate, make sure to rinse the bottle thoroughly to extract any precipitates left in the bottle. Mix the 1x solution gently until the crystals have completely dissolved.
- SP Conjugate (100x):** Spin down the SP Conjugate briefly and dilute the desired amount of the conjugate 100-fold with EIA 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 at -20°C.
- Add 50 µl of Human Myeloperoxidase Autoantibody 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 the microplate manually or automatically using a microplate washer. Invert the plate and decant the contents; hit 4-5 times on absorbent material to completely remove the liquid. If washing manually, wash five times with 200 µl of Wash Buffer per well. Invert the plate each time and decant the contents; hit 4-5 times on absorbent material to completely remove the liquid. If using a microplate washer, wash six times with 300 µl of Wash Buffer per well; invert the plate and hit 4-5 times on absorbent material to completely remove the liquid.
- Add 50 µl of Autoimmune Biotinylated Human IgG 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 in ambient light for 20 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.
- Although normal samples have been diluted 40-fold, do not multiply the value by the dilution factor. Samples with elevated levels of autoantibodies can be further diluted; for example: 80x. Account for this further dilution factor when calculating the value of the sample.

Example	Dilution Factor	Multiplication Factor For Calculating Values
Serum with normal level of anti-MPO IgG	40x	1
Serum with elevated level of anti-MPO IgG	80x	2
Serum with elevated level of anti-MPO IgG	160x	4

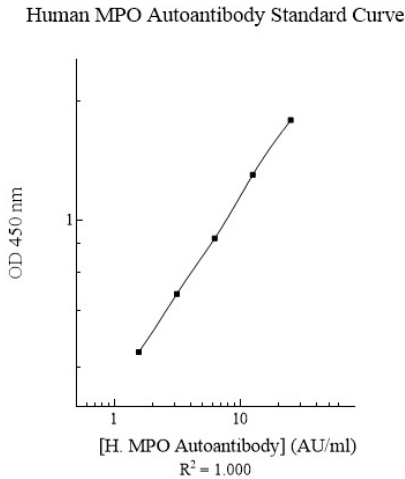
## Typical Data

- 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	AU/ml	Average OD
P1	25	2.369
P2	12.5	1.478
P3	6.25	0.854
P4	3.125	0.528
P5	1.563	0.320
P6	0.0	0.117
<b>Normal Level Sample (40x):</b> Serum with normal level of anti-MPO IgG		0.383
<b>Elevated Level Sample (80x):</b> Serum with elevated level of anti-MPO IgG		1.281

### Standard Curve

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



### Reference Value

- Plasma and serum samples from healthy adults were tested (n=20). Moreover, patient serum samples containing high levels of anti-MPO IgG were tested (n=9). The following ranges have been established:

Sample	anti-MPO IgG (AU/ml)
Normal Level	< 10.0
Elevated Level	≥ 10.0

- It is recommended that each laboratory establish its own normal and pathological ranges of antibodies.

### Performance Characteristics

- The minimum detectable dose of anti-MPO IgG as calculated by 2SD from the mean of a zero standard was established to be 0.57 AU/ml.

- Intra-assay precision was determined by testing three serum samples twenty times in one assay.
- Inter-assay precision was determined by testing three serum samples in twenty assays.

	Intra-Assay Precision			Inter-Assay Precision		
Sample	1	2	3	1	2	3
n	20	20	20	20	20	20
CV (%)	3.4%	5.1%	4.5%	9.2%	10.9%	10.5%
Average CV (%)	4.3%			10.2%		

## Troubleshooting

Issue	Causes	Course of Action
Low Precision	Use of improper components	<ul style="list-style-type: none"> <li>• Check the expiration date listed before use.</li> <li>• Do not interchange components from different lots.</li> </ul>
	Improper wash step	<ul style="list-style-type: none"> <li>• Check that the correct wash buffer is being used.</li> <li>• Check that all wells are empty after aspiration.</li> <li>• Check that the microplate washer is dispensing properly.</li> <li>• If washing by pipette, check for proper pipetting technique.</li> </ul>
	Splashing of reagents while loading wells	<ul style="list-style-type: none"> <li>• Pipette properly in a controlled and careful manner.</li> </ul>
	Inconsistent volumes loaded into wells	<ul style="list-style-type: none"> <li>• Pipette properly in a controlled and careful manner.</li> <li>• Check pipette calibration.</li> <li>• Check pipette for proper performance.</li> </ul>
	Insufficient mixing of reagent dilutions	<ul style="list-style-type: none"> <li>• Thoroughly agitate the lyophilized components after reconstitution.</li> <li>• Thoroughly mix dilutions.</li> </ul>
	Improperly sealed microplate	<ul style="list-style-type: none"> <li>• Check the microplate pouch for proper sealing.</li> <li>• Check that the microplate pouch has no punctures.</li> <li>• Check that three desiccants are inside the microplate pouch prior to sealing.</li> </ul>
Unexpectedly Low or High Signal Intensity	Microplate was left unattended between steps	<ul style="list-style-type: none"> <li>• Each step of the procedure should be performed uninterrupted.</li> </ul>
	Omission of step	<ul style="list-style-type: none"> <li>• Consult the provided procedure for complete list of steps.</li> </ul>
	Steps performed in incorrect order	<ul style="list-style-type: none"> <li>• Consult the provided procedure for the correct order.</li> </ul>
	Insufficient amount of reagents added to wells	<ul style="list-style-type: none"> <li>• Check pipette calibration.</li> <li>• Check pipette for proper performance.</li> </ul>
	Wash step was skipped	<ul style="list-style-type: none"> <li>• Consult the provided procedure for all wash steps.</li> </ul>
	Improper wash buffer	<ul style="list-style-type: none"> <li>• Check that the correct wash buffer is being used.</li> </ul>
	Improper reagent preparation	<ul style="list-style-type: none"> <li>• Consult reagent preparation section for the correct dilutions of all reagents.</li> </ul>
	Insufficient or prolonged incubation periods	<ul style="list-style-type: none"> <li>• Consult the provided procedure for correct incubation time.</li> </ul>

<b>Deficient Standard Curve Fit</b>	Non-optimal sample dilution	<ul style="list-style-type: none"> <li>• Sandwich ELISA: If samples generate OD values higher than the highest standard point (P1), dilute samples further and repeat the assay.</li> <li>• Competitive ELISA: If samples generate OD values lower than the highest standard point (P1), dilute samples further and repeat the assay.</li> <li>• User should determine the optimal dilution factor for samples.</li> </ul>
	Contamination of reagents	<ul style="list-style-type: none"> <li>• A new tip must be used for each addition of different samples or reagents during the assay procedure.</li> </ul>
	Contents of wells evaporate	<ul style="list-style-type: none"> <li>• Verify that the sealing film is firmly in place before placing the assay in the incubator or at room temperature.</li> </ul>
	Improper pipetting	<ul style="list-style-type: none"> <li>• Pipette properly in a controlled and careful manner.</li> <li>• Check pipette calibration.</li> <li>• Check pipette for proper performance.</li> </ul>
	Insufficient mixing of reagent dilutions	<ul style="list-style-type: none"> <li>• Thoroughly agitate the lyophilized components after reconstitution.</li> <li>• Thoroughly mix dilutions.</li> </ul>

## References

- (1) Andrews PC, Krinsky NI. (1981) *J Biol Chem.* 256(9):4211-4218.
- (2) Klebanoff SJ. (2005) *J Leukoc Biol.* 77(5):598-625.
- (3) Nicholls SJ, Hazen SL. (2005) *Arterioscler Thromb Vasc Biol.* 25(6):1102-1111.
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