

<p><b>CALDON BIOTECH INC.</b>  <b>Human Growth Hormone</b>  <b>(hGH)</b>  <b>ELISA</b></p>
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Catalog No. HG048H  
 (96 tests)

#### INTENDED USE

The CALDON BIOTECH INC (CBI) hGH ELISA kit is used for the quantitative measurement of hGH in human serum or plasma.

#### SUMMARY AND EXPLANATION OF THE TEST

Human Growth Hormone (hGH) is a polypeptide chain, composed of 191 aminoacids and with a molecular weight of 21,500. It is released by the anterior pituitary of both men and women. The secretion is stimulated 3-4 hours after a meal, about 1 hour after the beginning of sleep and after physical exercise. Hyposecretion of hGH becomes apparent in infants a few months after birth and may result in dwarfism. In the opposite case, hypersecretion of hGH results in gigantism and may be due to hypophysic tumors. In adults, when epiphyses are closed, hypersecretion of hGH provokes an increase in volume of soft tissues (hands, feet, lips) and a proliferation of bones (acromegalysyndrome) and a limited tolerance of glucose. hGH has profound effects on tissue growth and metabolism, which is thought to be mediated through GH-dependent production of Insulin-like Growth Factor (IGF) I and IGF-II, and their associated binding proteins. hGH apparently stimulates IGF production after binding to specific cell surface receptors in the liver. The major target tissues affected by the IGF-1 in combination with the hGH signal are muscle, cartilage, bone, liver, kidney, nerves, skin and lungs. Evaluation of hGH deficiency is complicated by the episodic nature of hGH secretion and low circulating levels. A variety of physiologic and pharmacologic stimuli have been used to stimulate pituitary hGH release during testing and failure to achieve a normal serum hGH level in response to at least 2 hGH stimulation or provocative tests is considered to be a diagnostic of hGH deficiency. The definition of a normal serum hGH response is controversial, although published values generally range from 5 to 10 ng/mL.

#### PRINCIPLE OF THE TEST

The DA hGH is a solid phase sandwich ELISA method. The samples, and a nti-hGH-HRP

conjugate are added to the wells coated with hGH MAb. hGH in the patient's serum binds to anti-hGH MAb on the well and the anti-hGH second antibody then binds to hGH. Unbound protein and HRP conjugate are washed off by wash buffer. Upon the addition of the substrate, the intensity of color is proportional to the concentration of hGH in the samples. A standard curve is prepared relating color intensity to the concentration of the hGH.

#### MATERIALS PROVIDED

1. Microwell strips coated with anti-hGH MAb (12x8x1 wells). 96 wells.
2. hGH Standard: 6 vials (0.7 mL each). Ready To Use
3. hGH-Enzyme Conjugate: 1 bottle (12 mL) Ready To Use
4. TMB Substrate reagent: : 1 bottle (12 mL) Ready To Use
5. Stop Solution: 1 bottle (8 mL). Ready To Use
6. Wash Concentrate: 1 bottle (50 mL, 10X).

#### STORAGE AND STABILITY

1. Store the kit at 2 - 8° C.
2. Keep microwells sealed in a dry bag with desiccants.
3. The reagents are stable until expiration of the kit.

#### WARNINGS AND PRECAUTIONS

1. Potential biohazardous materials: The calibrator and controls contain human source components which have been tested and found non-reactive for hepatitis B surface antigen as well as HIV antibody with FDA licensed reagents. However, there is no test method that can offer complete assurance that HIV, Hepatitis B virus or other infectious agents are absent. These reagents should be handled at the Biosafety Level 2, as recommended in the Centers for Disease Control/National Institutes of Health manual, "Biosafety in Microbiological and Biomedical Laboratories" 1984.
2. This test kit is designed for "Research Use Only".
3. Do not pipette by mouth. Do not smoke, eat, or drink in the areas in which specimens or kit reagents are handled.
4. The components in this kit are intended for use as an integral unit. The components of different lots should not be mixed.

- It is recommended that standards, control and serum samples be run in duplicate.
- Optimal results will be obtained by strict adherence to this protocol. Accurate and precise pipetting, as well as following the exact time and temperature requirements prescribed are essential. Any deviation from this may yield invalid data.

**SPECIMEN COLLECTION HANDLING**

- Collect blood specimens and separate the serum immediately.
- Specimens may be stored refrigerated at (2-8° C) for 5 days. If storage time exceeds 5 days, store frozen at (-20° C) for up to one month.
- Avoid multiple freeze-thaw cycles.
- Prior to assay, frozen sera should be completely thawed and mixed well.
- Do not use grossly lipemic specimens.

**REAGENTS PREPARATION**

10X Wash Buffer Concentrate: To prepare working wash buffer, add the contents of the bottle to 450 ml of distilled water. Store at room temperature.

**ASSAY PROCEDURE**

Prior to assay, allow reagents to stand at room temperature. Gently mix all reagents before use.

- Place the desired number of coated strips into the holder
- Pipet 50 µL of hGH standards, control and patient's sera.
- Add 100 µL of hGH enzyme conjugate to all wells.
- Cover the plate and incubate for 30 minutes at room temperature (18 - 26° C).
- Remove liquid from all wells. Fill wells with working wash buffer. Wash three times. Blot on absorbent paper towels.
- Add 100 µL of TMB substrate to all wells.
- Incubate for 10 minutes at room temperature.
- Add 50 µL of stop solution to all wells. Shake the plate gently to mix the solution.
- Read absorbance on ELISA Reader at 450 nm within 20 minutes after adding the stopping solution.

**CALCULATION OF RESULTS**

The standard curve is constructed as follows:

- Check hGH standard value on each standard vial. This value might vary

from lot to lot. Make sure you check the value on every kit. See example of the standard attached.

- To construct the standard curve, plot the absorbance for the hGH standards (vertical axis) versus the hGH standard concentrations (horizontal axis) on a linear graph paper. Draw the best curve through the points.
- Read the absorbance for controls and each unknown sample from the curve. Record the value for each control or unknown sample.
- Value above the highest point of the standard are retested after diluting with "0" standard.

**EXPECTED VALUES**

It is recommended that each laboratory establish its own normal ranges based on a representative sampling of the local population. The following values for hGH may be used as initial guideline ranges only:

Classification	Normal Range (mIU/mL)
Adults	Less than 10 ng/mL
Children	Less than 20 ng/mL
	7-10 ng/mL on two or more tests = impaired hGH secretion

**LIMITATIONS OF THE TEST**

- The test results obtained using this kit are for research use only and should be interpreted in relation to the patients history, physical findings and other diagnostic procedures.
- Do not use sodium azide as preservative. Sodium azide inhibits HRP enzyme activities.

**PERFORMANCE CHARACTERISTICS**

**1. Correlation with a Reference ELISA kit:**

A total of 128 sera were tested by this ELISA and a reference ELISA kit. Results were as follows:

Correlation	Slope	Intercept
0.94	0.93	0.38

**2. Precision Intra-Assay**

Serum	No. of Replicates	Mean IU/mL	Standard Deviation	Coefficient of Variation%
High	16	17	0.92	5.41
Normal	16	9.7	0.51	5.25
Low	16	4.5	0.27	6.00

Serum	Original Value (ng/mL)	Percentage of Recovery		
		1:2	1:4	1:8
		94.6	95.2	88.7
		102.0	92.4	85.0

### Inter-assay

Serum	No. of Replicates	Mean IU/mL	Standard Deviation	Coefficient of Variation%
High	10	18.6	1.2	6.45
Normal	10	10.1	0.86	8.51
Low	10	3.7	0.33	8.91

### 3. Sensitivity

The sensitivity was determined by calculating the mean plus 2SD of the standard zero point tested 20 times in the same run.

Serum	No. of Replicates	Mean IU/mL	Standard Deviation	Mean + 2SD (Sensitivity)
Zero Standard	20	0.08	0.06	0.2 ng/mL

### 4. Recovery

Known quantities of hGH were added to a serum that contained a low concentration of hGH.

Expected Value(mIU/mL)	Recovered (mIU/mL)	Percentage of Recovery
17.7	17.4	98.3
8.9	9.3	104.4
4.2	4.4	95.4

### 5. Linearity

Two different patient samples were diluted with the "0" calibrator to 1:2, 1:4 and 1:8. hGH values were assayed and results were corrected with the dilution factor. The results of these dilution tests are as follows:

### REFERENCES:

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Strasburger CJ; Wu Z; Pflaum CD; Dressendorfer RA. Immunofunctional assay of human growth hormone (hGH) in serum: a possible consensus for quantitative hGH measurement. J Clin Endocrinol Metab 1996; 81(7): 2613-20.

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