ORDER INFORMATION

CODE: DL3601: R1-1x40 ML + R2-1x10ML

ASO-Turbilatex

Latex turbidimetry

Quantitative determination of anti-streptolysin O (ASO). IVD.

PRINCIPLE OF THE METHOD

The ASO-Turbilatex is a quantitative turbidimetric test for the measurement of ASO in human serum or plasma.

Latex particles coated with streptolysin O (SLO) are agglutinated when mixed with samples containing ASO. The agglutination causes an absorbance change, dependent upon the ASO contents of the patient sample that can be quantified by comparison from a calibrator of known ASO concentration.

CLINICAL SIGNIFICANCE

SLO is a toxic immunogenic exoenzyme produced by $\beta\text{-}heamolitic Streptococci of groups A, C and G. Measuring the ASO antibodies are useful$ for the diagnostic of rheumatoid fever, acute glomerulonephritis and streptococcal infections. Rheumatic fever is an inflammatory disease affecting onnective tissue from several parts of human body as skin, heart, joints etc... and acute glomerulonephritis is a renal infection that affects mainly to renal glommerulus.

REAGENTS

Diluent (R1) Latex (R2) ASO-CAL

Tris buffer 20 mmol/L, pH 8.2. Sodium azide 0.90 g/L. Merthiolate 0.05 g/L. Latex particles coated with streptolysin O, pH 10.0.

Sodium azide 0.90 g/L. Merthiolate 0.05 g/L. ASO Calibrator. ASO concentration is stated on the

vial label.

PREPARATION

Working reagent: Swirl the latex vial gently before use. Prepare the necessary amount as follow:

- 1 mL Latex Reagent + 4 mL Diluent

ASO Calibrator: Ready to use. Value mentioned on the vial in IU/ml.

STORAGE AND STABILITY

All the components of the kit are stable until the expiration date on the label when stored tightly closed at 2-8°C and contaminations prevented during their use. Do not use reagents over the expiration date.

Working reagent: Stable for 30 days at 2-8°C.

Reagent deterioration: Presence of particles and turbidity.

ASO Calibrator: Ready to use. Stable till expiry at 2-8°C. Do not freeze.

Do not freeze. Frozen Latex or Diluent could change the functionality of the test.

ADDITIONAL EQUIPMENT

- Thermostatic bath at 37°C.
- Spectrophotometer or photometer thermostatable at 37°C with a 540 nm filter.

Fresh serum. Stable 7 days at 2-8°C or 3 months at -20°C Samples with presence of fibrin should be centrifuged before testing. Do not use highly hemolized or lipemic samples.

GENERAL SYSTEM PARAMETERS:

Reaction Type Fixed Time Wave length 540nm (530-550 nm)

Light Path 1 Cm Reaction Temperature 37°C Distilled Water

Blank / Zero Setting Reagent Volume 1 ml Sample Volume 10 µl Delay / Lag Time 10 sec Read Time 120 sec Read Interval 120 Sec

Stated on Vial Label Calibrator Concentration Upto 200 IU/ml Normal Value Upto 800 IU/ml Linearity

PROCEDURE

- 1. Bring the working reagent and the photometer (cuvette holder) to 37°C.
- 2. Assay conditions:

Wavelength: 540 nm (530-550) Temperature: 37°C Cuvette ligth path: 1 cm

3. Adjust the instrument to zero with distilled water.

4. Pipette into a cuvette:

Working Reagent (mL)	1.0
Calibrator or sample (µL)	10

5. Mix and read the absorbance after 10 sec. (A1) and after 2 minutes (A2) of the sample addition.

CALCULATIONS

ASO (IU/mL) =
$$\frac{(A_2-A_1)_{\text{sample}}}{(A_2-A_1)_{\text{calibrator}}} \times \text{Calibrator concentration}$$

QUALITY CONTROL

Control sera are recommended to monitor the performance of manual and automated assay procedures.

Each laboratory should establish its own Quality Control scheme and corrective actions if controls do not meet the acceptable tolerances.

REFERENCE VALUES

Normal values up to 200 IU/mL (adults) and 100 IU/mL (children < 5 years

Each laboratory should establish its own reference range.

LINEARITY LIMIT

Up to 800 IU/mL, under the described assay conditions.

Samples with higher concentrations, should be diluted 1:3 in NaCl 9 g/L and

The linearity limit depends on the sample-reagent ratio, as well the analyzer used. It will be higher by decreasing the sample volume, although the sensitivity of the test will be proportionally decreased.

INTERFERENCES

Bilirrubin (20 mg/dL), hemoglobin (10 g/L), lipemia (10 g/L) and rheumatoid factors (600 IU/mL), do not interfere. Other substances may interfere.

Clinical diagnosis should not be made on findings of a single test result, but should integrate both clinical and laboratory data.

BIBLIOGRAPHY

- 1. Alouf Jodeph E. Pharma Ther 1980; 11: 661-717.
- 2. M Fasani et al. Eur J Lab Med 1994; vol2.nº1: 67. 3. Todd E W. J Exp Med 1932; 55: 267 - 280.