# DeQuanto® Infliximab (Remicade®) PK ELISAKit # PK1001

## **USER MANUAL**

Immunoassay for quantitative determination of infliximab drug in human serum or plasma(Remicade® is a registered trademark of Janssen Biotech inc)

96- Well Microtiter plate

Research Use Only (RUO)

Please read this user's manual carefully before using the kit



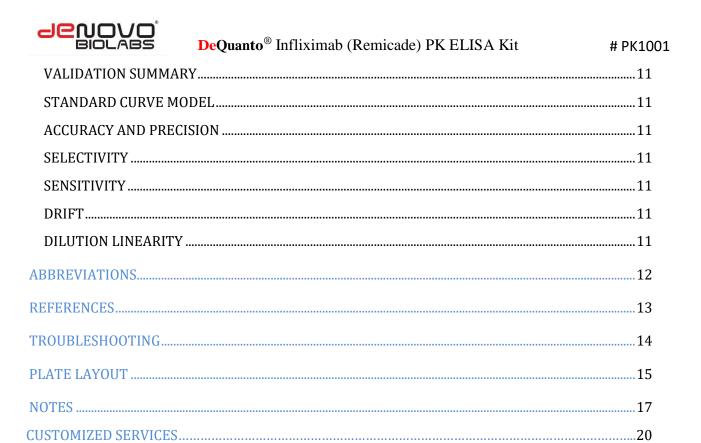
DENOVO BIOLABS PVT LTD

Version 1.1



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## **INTRODUCTION**

Infliximab (Remicade) is a therapeutic chimeric monoclonal antibody against tumor necrosis factor (TNF) and is used to treat rheumatic arthritis, intestinal disorders, dermatological diseases and cancer. Infliximab drug inhibits the action of TNF and reduces the inflammation and subsequently improves the patient's health.

Drug level quantification can be important to adapt patient prescription or to switch to an alternative TNF inhibitor drug.

EMA Bio-analytical Method Validation Guidelines [2] and industry-recommended practices for ligand-binding assays [3, 4, and 5] were used for validation of this kit. This Infliximab ELISA kit has been developed for specific quantification of Infliximab concentration in human serum or plasma with high sensitivity and reproducibility.

## **ASSAY PRINCIPLE**

The DeQuanto<sup>®</sup> Infliximab (Remicade) PK ELISA kit is an ELISA based immunoassay. The Infliximab present in the sample binds to pre coated TNF on polystyrene microtiter plate. Non bound or the excess substances are removed by washing. Horseradish peroxidase (HRP) labeled anti-human IgG Fcγ specific antibody is added to the wells which binds to the TNF/Infliximab complex in the wells. Following a wash to remove any unbound antibody-enzyme reagent, substrate solution is added to the wells. A color product is formed in proportion to the amount of Infliximab present in the sample or standards. The color development is stopped by addition of a stop solution. The absorbance is measured at 450 nm in a microtiter plate reader. The concentration of Infliximab in a sample can be interpolated from the standard curve.

## MATERIALS PROVIDED AND STORAGE

The DeQuanto® Infliximab (Remicade) PK ELISA kit is recommended to be stored as mentioned in table below.

Sl. No.	Description	Quantity	Volume	Strength/Conc.	Storage
1	Pre Coated 96-well microtiter plate	1 plate	NA	NA	-20°C
2	Infliximab (Remicade) Standard	1 Vial	10 μl	10 mg/ml	-20°C
3	Detection Antibody	1 Vial	20 μl	2000X	-20°C
4	Assay Diluent (Pre-mix powder)	1 Bottle	1 g	NA	2-8°C
5	TMB Substrate	1 Vial	1 ml	20X	2-8°C
6	Wash Buffer-A	1 Bottle	50 ml	20X	2-8°C
7	Plate sealer	2 Nos	NA	NA	RT



## MATERIALS REQUIRED BY END-USER

All the following materials are required but not available with the kit.

- > Human Serum or Plasma
- ➤ Tween-20
- > 2N H<sub>2</sub>SO<sub>4</sub>
- Deionized or ultra pure water
- ➤ Microtiter plate reader capable of measuring absorbance at 450 nm (Reference wave length 600 nm is optional)
- ➤ Software capable of 4PL or 5PL parameter logistic curve fitting for data analysis

## **ASSAY DURATION**

The approximate time taken for each step of the assay are shown in the table below

Sl. No.	Step	Duration
1	Reagent thawing and preparation	30 minutes
2	Analyte addition and incubation	90 minutes
3	Detection Antibody Addition and Incubation	30 minutes
4	Substrate Addition and Measurement	30 minutes
5	Calculation of Results	15 minutes

## **PRECAUTIONS**

- 1. User should be trained with ELISA based assays and test procedure
- 2. All reagents have to be at room temperature before use, except the detection antibody (should be stored at -20°C to ensure the stability)
- 3. Avoid repeated freeze/thaw cycles for all reagents
- 4. Handle all reagents wearing gloves and other protective gears
- 5. Do not pipette any reagents by mouth
- 6. Use calibrated pipettes and devices only
- 7. Sodium azide inactivates HRP, do not use sodium azide-containing solutions
- 8. Any modification in the standard assay procedure may influence the kit performance
- 9. The described pipetting volume, incubation time, temperature steps should be performed according to the user manual
- 10. TMB/H<sub>2</sub>O<sub>2</sub> Substrate and Detection Antibody are light sensitive, hence should not be exposed to light
- 11. Avoid physical contact with Stop solution
- 12. Centrifuge all vials briefly before use
- 13. Use disposable pipette tips for each transfer to avoid cross contamination
- 14. Any samples which are out of assay range should be repeated using different dilutions
- 15. Reagents from different batch/lot are not interchangeable
- 16. Do not mix reagents from different kit batches/lots
- 17. The waste disposal should be performed according to your laboratory regulations



## **SPECIMEN COLLECTION AND STORAGE**

## **SERUM**

Use serum clot tube and allow the blood sample to coagulate at room temperature (RT) for 30 minutes. Centrifuge at 5000 RPM for 10 minutes at RT. Aliquot the clear serum and store at -20°C. Avoid repeated freeze/ thaw cycles.

## **PLASMA**

Use  $K_2$  EDTA as anticoagulant for blood collection and allow at RT for 30 minutes. Centrifuge the sample at 5000 RPM for 10 minutes at RT. Aliquot the clear plasma and store at -20°C. Avoid repeated freeze/ thaw cycles.

Grossly haemolyzed, lipemic or contaminated sample (serum or Plasma) may lead to inaccurate results and is not recommended to use with this procedure.

It is recommended that the end user must validate assay procedure using either serum or plasma.

## REAGENT PREPARATION

## **WASH BUFFER-A**

- 1. Thaw the wash buffer at RT until it is a clear solution
- 2. Prepare 1000 ml of 1X wash buffer-A, using 50 ml of 20X Wash buffer-A and make up the volume to 1000 ml with ultra pure water

#### **WASH BUFFER-B**

- 1. Aliquot 500 ml of wash buffer-A
- 2. Add 0.05% (500  $\mu$ l) of Tween-20 solution and mix it for 10 minutes on magnetic stirrer at RT

## **ASSAY DILUENT**

- 1. Add 100 ml of 1X wash buffer-A (W/V) into the assay diluent bottle
- 2. Allow it to mix on rocker for 10 minutes or by gentle manual mixing at room temperature
- 3. Assay diluent should appear as a clear solution after mixing
- 4. Use this assay diluent buffer for assay matrix and test sample dilution

## **ASSAY MATRIX**

- 1. Dilute human serum or plasma at MRD (1:200) in assay diluent
- 2. Use this assay matrix for standards and quality control preparation

## **CAUTION**

Human serum or plasma used for assay matrix must be from healthy volunteers



## TMB SUBSTRATE

- 1. Dilute the 20X TMB substrate to 1X solution in ultra pure water (600  $\mu$ l of TMB substrate to 11.4 ml of ultra pure water)
- 2. Mix the 1X solution thoroughly on vortex mixer or manually

### **STANDARDS**

- 1. Prepare a main stock of  $1000 \,\mu\text{g/ml}$  by diluting the Infliximab Standard ( $10 \,\text{mg/ml}$ ) in neat human serum or plasma ( $5 \,\mu\text{l}$  of Infliximab standard in  $45 \,\mu\text{l}$  of human serum or plasma)
- 2. Prepare a sub stock of  $5 \mu g/ml$  (5000 ng/ml) as given in table below:

Required sub-stock Conc (µg/ml)	Volume of Main-stock to be taken (µl)	Volume of Assay Diluent (µl) to be taken	Final volume (µl)	Dilution factor
5	5	995	1000	1:200

3. Prepare standards 1 to 10 and zero standard (blank) in assay matrix as given in the table below

Sub stock of Infliximab ( ng/ml)	Volume from sub stock (µl)	Assay Matrix Volume (μl)	Final concentration (ng/ml)	Standard No
5000.00	27.00	1173.00	112.50	1
112.50	600.00	300.00	75.00	2
75.00	600.00	300.00	50.00	3
50.00	600.00	300.00	33.33	4
33.33	600.00	300.00	22.22	5
22.22	600.00	300.00	14.81	6
14.81	600.00	300.00	9.88	7
9.88	600.00	300.00	6.58	8
6.58	600.00	300.00	4.39	9
4.39	600.00	300.00	2.93	10
-	-	300.00	0.00	Blank

## **CAUTION**

- Vortex gently to mix during each step
- Use appropriate pipette range and do not change pipette in between the assay procedure

## **QUALITY CONTROL**

- 1. Prepare minimum of three QC samples in assay matrix.
- 2. Keep the diluent buffer control in two replicates.



#### **DETECTION ANTIBODY**

- 1. Dilute the 2000X Detection Antibody in assay diluent at 1:2000 (take 10  $\mu$ l of 2000X detection antibody and add to 20 ml of assay diluent)
- 2. Gently mix the detection antibody before use

## **ASSAY PROCEDURE**

### PRE-PROCESSING OF 96-WELL MICROTITER PLATE

- 1. Thaw the precoated 96-well microtiter plate at room temperature for half an hour
- 2. Wash the plate with 1X wash buffer-A, allowing 2 minutes for soaking
- 3. Decant off the contents of the plate

## CAUTION /

- Use multichannel pipette
- Keep the programs for plate washer ready (if automated washer is used)

#### ANALYTE ADDITION

- 1. Prepare standards, QC samples and test samples
- 2. Add 100  $\mu$ l of standards, QC and test or specimen samples to the wells of the microtiter plate as per the plate template
- 3. Seal plates with adhesive plate sealer
- 4. Incubate the microtiter plate at RT (~25°C) for 1 hour

## CAUTION A

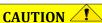
- Refer the sample plate layout given at the end of this user manual, for standards and control
- Before addition of samples to the microtiter plate, keep the Plate template ready.

#### DETECTION ANTIBODY

- 1. Discard the contents of each well and wash 3 times with 1X wash buffer-B and followed by 3 washes with 1X wash buffer-A, allowing 2 minutes for soaking between each wash step
- 2. Blot the microtiter plate on absorbent paper to remove any residual reagent from the wells
- 3. Add 100 µl of Detection Antibody solution to each well of the microtiter plate
- 4. Seal the microtiter plate with adhesive plate sealer
- 5. Incubate the microtiter plate at RT ( $\sim$ 25 °C) for 30 minutes

## SUBSTRATE ADDITION AND MEASUREMENT

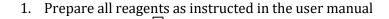
- 1. Discard the contents of each well and wash 3 times with 1X wash buffer-B and followed by 3 washes with 1X wash buffer-A, allowing 2 minutes for soaking between each wash step
- 2. Blot the microtiter plate on absorbent paper to remove any residual reagent from the wells
- 3. Add 100  $\mu$ l/well of 1X TMB substrate solution and incubate the plate in dark at RT (~25°C) for 20 minutes
- 4. Add 50µl/well of Stop solution to stop the reaction
- 5. Read the absorbance in micro plate reader set to 450~nm, set the reference wavelength to 600~nm





Add stop solution in the same order of addition of TMB substrate to the plate

## **ASSAY SUMMARY**



2. Add 100  $\mu$ l of standard, quality control and test/specimen samples to each well of microtiter plate



3. Seal the microtiter plate with adhesive plate sealer and incubate at RT (~25°C) for 1 hour



4. Decant the contents of the microtiter plate and wash the microtiter plate 3 times with wash buffer-B, followed by 3 times with wash Buffer-A, allowing 2 minutes of soaking between each wash step



5. Blot the plate on absorbent paper to remove any residual reagent from the wells



6. Add 100  $\mu$ l of detection antibody to each well of the microtiter plate and incubate for 30 minutes at RT (~25°C)



7. Repeat the steps 4 and 5



8. Add 100 µl of 1X TMB solution to each well of the microtiter plate and incubate for 20 minutes in dark at RT (~25°C)



9. Add 50  $\mu$ l of stop solution (2N  $H_2SO_4$ ) to each well



10. Read the absorbance at 450 nm and 600 nm as reference wave length



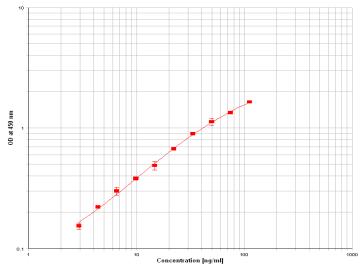
## **CALCULATION OF RESULTS**

After the absorbance is read at 450 nm and 600 nm as reference wave length, construct a standard curve of difference data using software capable of generating four or five parameter logistic (4PL or 5PL) curve fit. Absorbance of the test/specimen and the QC samples are interpolated from the standard curve. Report the values of test/specimen samples within the assay range (6.58-50 ng/ml).

## **EXAMPLE DATA**

This standard curve results are provided for demonstration purpose only.

The standard curve should be run for each assay.



Standard	Conc (ng/ml)	Mean Abs
S1	112.50	1.642
S2	75.00	1.344
S3	50.00	1.127
S4	33.33	0.894
S5	22.22	0.671
S6	14.81	0.487
S7	9.88	0.381
S8	6.58	0.298
S9	4.39	0.221
S10	2.93	0.153
Blank	0.00	0.060



## ASSAY CHARACTERISTICS

#### **VALIDATION SUMMARY**

Denovo Biolabs have validated this assay in human serum matrix according to EMA Bio-analytical Method Validation Guidelines [2] and industry-recommended practices for ligand-binding assays [3, 4, and 5]. However, such validation is generic in nature and it is intended to only supplement but not substitute specific validation as required by regulations or otherwise in each case.

### STANDARD CURVE MODEL

The calibration standards were generated by spiking Infliximab in human serum at MRD 1:200. The standard curve consisted of ten non-zero standards (from 2.39 ng/ml to 112.5 ng/ml). A 5PL model was used to fit the standard curve. The regression model was accepted as the %RE of the back-calculated value for at least 75% calibrators was within 20% of nominal concentration, except at the ULOQ and LLOQ where it was within 25%.

### ACCURACY AND PRECISION

Accuracy (%RE) of all QC samples was within 20% across all batches. Inter-assay and pooled (cumulative) intra-assay precision (%CV) of each QC sample was  $\leq$  20%. The total error was within 20%.

### **SELECTIVITY**

Ten different human plasma matrices were tested for selectivity in a single batch experiment by recovery studies at two QC points. 80% of 10 different individual plasma samples passed the acceptance criteria of %RE within 20% except at LLOQ where it was within 25%.

### **SENSITIVITY**

In all batch runs LLOQ-QC at 6 ng/ml showed %RE within the 20% range confirming the sensitivity of the assay to be 6 ng/ml.

#### DRIFT

The drift parameter was evaluated by placing QC samples at different positions of the 96-well microtiter plate in an intra-assay batch. All the three QCs samples passed the drift criteria and the %CV of all the QC samples were within  $\leq$  20%, except LLOQ-QC where it was within  $\leq$  25%.

## SPECIFICITY/CROSS REACTIVITY

Specificity of the assay was assessed by spiking Rituximab with analyte. For each related molecule, recovery studies were done below LLOQ, near and above quality control with analyte concentration at all QC points including ULOQ & LLOQ. The %RE for all three QC samples showed recovery within 20% indicating no cross-reactivity or the interference of Rituximab with analyte.



#### **DILUTION LINEARITY**

From the sub-stock a 1000X, ULOQ sample was made which was further diluted into other QC samples. Each of these QC samples was tested for their %RE values. All near QC samples passed the acceptance criteria. 1000X-ULOQ did not pass the criteria due to Hooks Effect.

## **ABBREVIATIONS**

RT Room Temperature

Abs Absorbance Conc. Concentration

HRP Horse Radish Peroxidase

PK Pharmaco Kinetics

TMB 3, 3', 5, 5'-Tetramethylbiphenyl-4, 4'-Diamine

TNF Tumor Necrosis Factor

ELISA Enzyme Linked Immunosorbent Assay

%CV Coefficient of variations

%RE Relative Error

MRD Minimum Required Dilution

PL Parameter Logistic QC Quality Control

CTRL Control

ULOQ Upper Limit of Quantification

HQC High Quality Control LQC Lower Quality Control

LLOQ Lower Limit of Quantification

°C Degree Celsius

µg Microgram

mg Milligram

µl Microliter

Eg. Example

ml Milliliter

W/V Weight by Volume IgG Immunoglobulin

ng Nanogram nm Nanometer

2N H<sub>2</sub>SO<sub>4</sub> 2 Normal Sulphuric Acid

K<sub>2</sub> EDTA Ethylene Di-amine Tetra Acetic acid (Di-Potassium salt)

RPM Revolutions Per Minute



## **REFERENCES**

- Guideline on bioanalytical method validation; 21 July 2011 EMEA/CHMP/EWP/192217/2009 Committee for Medicinal Products for Human Use (CHMP)
- 2. DeSilva et al (2003), Recommendations for the Bioanalytical Method Validation of Ligand-binding Assays to Support Pharmacokinetic Assessments of Macromolecules, Pharmaceutical Research, **20 (11)**: 1885-1900.
- 3. Findlay et al. (2000) Validation of Immunoassays for bioanalysis: A pharmaceutical industry perspective. J. Pharm. Biomed. Anal. **21**, 1249-73.
- 4. Kelley and DeSilva (2007); Key Elements of Bioanalytical Method Validation for Macromolecules, AAPS Journal, 9 (2), E156-E163.
- 5. European Medicines Agency, *EPAR Product Information on MabThera*, Last updated 12 June 2012, available at www.ema.europa.eu.



# TROUBLESHOOTING

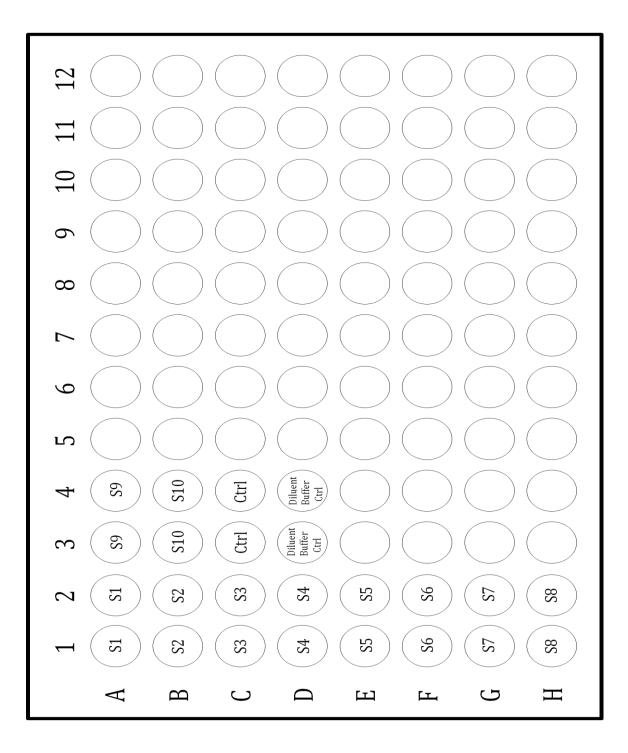
Problem	Probable Causes	Solution		
High or Low OD value of test	Test samples contain analyte concentrations greater than assay range	Repeat the assay with multiple dilutions of the test samples.		
samples	Test Samples contain no or below detectable levels of analyte	Test sample contains the drug level below the LLOQ		
High OD value of blank/ controls (-ve)	Matrix interference	Perform higher dilution than MRD (minimum required dilution). Ensure the diluent buffer blank/controls (-ve) OD are acceptable.		
		Ensure the calibrated pipettes		
	Unequal volumes	Ensure pipette tips are tightly secured while adding the solution to each well		
High % CV (High	Inadequate washing	Ensure the wash system is working properly if the automated wash station is used. Also ensure the manual washes		
variability in duplicate OD	Non-homogenous solution	Ensure that all solution prepared are adequately mixed.		
values)	Edge effect	Use plate sealer and maintain the temperature as recommended		
	Cross-well contamination	Ensure the good pipetting practice		
	Inadequate mixing of TMB substrate solution	Ensure the TMB substrate solution is mixed thoroughly before use		
	Standard was incompletely reconstituted or the storage was inappropriate	Reconstitute standard according to the user's manual Ensure the kit reagents are not expired		
Low signal	Reagents added to wells with incorrect concentrations	Cross check for calculation and pipetting errors		
	Incorrect incubation time or temperature	Adhere to the recommended assay procedure		
Standard curve with R <sup>2</sup> value <0.95	Pipetting error	Ensure the pipetting and the analyst training		



# PLATE LAYOUT

12							
11							
10							
6							
8							
7							
9							
5							
4	S6	810					
3	(S)	810					
2	S	SS	(83)	S4 (	SS (	S (	S8 88
$\leftarrow$	S1	SS	(8)	S4 (	SS (	9S (	S8 S8
	A	В	C	Q	Ш	ഥ	G H







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## **CUSTOMIZED SERVICES**

### PRECLINICAL/CLINICAL SAMPLE ANALYSIS

ELISA based validation and clinical or pre-clinical sample analysis.

#### POLYCLONAL ANTIBODY DEVELOPMENT

PAb development against peptide or protein, peptide designing, high titer antibody purification, characterization.

#### MONOCLONAL ANTIBODY DEVELOPMENT

MAb development against peptide or protein, peptide designing, best reacting/stable hybridoma development, sub cloning, small scale/large scale hybridoma culture and antibody purification, characterization.

#### **CLONING. PROTEIN EXPRESSION PURIFICATION**

Gene synthesis, site directed mutagenesis, cloning and expression in bacterial systems and other customized molecular biology services.

## **ANTIBODY CONJUGATION**

With HRP, FITC, Biotin, ALP and many more molecules.

#### **CELL BASED ASSAYS**

Cell based assays, neutralization assays and potency ratio estimation of drugs with reference drugs, drug efficacy assessment and customized in-vitro, in-vivo assay development.

# CUSTOMIZED ELISA BASED ASSAY/METHOD DEVELOPMENT

Different formats of ELISA based assay development.

#### **PHARMACOVIGILENCE**

Clinical/post marketing drug safety reporting medical writing

For any queries/enquiries related to our products or services, please contact us by mailing us at <a href="mailto:info@denovobiolabs.com">info@denovobiolabs.com</a> or call us at +91-80-29575711

