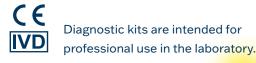


# Enzyme immunoassays for the diagnostics of Helicobacter pylori infection

**ELISA**, **IMMUNOBLOT**, and **MICROBLOT-ARRAY** kits are optimized and validated for detection of IgA, IgG, and IgM antibodies in human serum and plasma

Diagnostic medium for rapid urease activity detection in bioptic sample





#### Introduction

Helicobacter pylori belongs in the genus Helicobacter. Morphologically, it is a Gram-negative, microaerophilic bacterium. It is found as a pathogen in patients with infection of the gastric mucosa, particularly in the area of pyloric antrum and duodenum. It is a causative agent of B-type chronic gastritis, which is linked to the development of gastric ulcers. In this case, *H. pylori* is detected in 100% of individuals. *H. pylori* infection is often associated with dyspepsia. Active chronic gastritis can further develop in the atrophy of stomach lining and increase the risk of gastric carcinoma.

The factors of *H. pylori* pathogenicity are based on both the morphologic structure of the bacteria cells (helix-shaped curved rod, flagella) and its ability to produce extracellular enzymes and cytotoxins (e.g. urease, catalase, protease, VacA and CagA).

Bacterial strains can be pathogenic or facultatively pathogenic. Their virulence depends on the qualitative and quantitative representation of the above mentioned factors. Their pathogenesis is also influenced by a host response. Resistant strains are isolated mainly from unsuccessfully treated patients.

# **Diagnosis of Infection**

Methods for *H. pylori* detection can be invasive and non-invasive. The most commonly used invasive methods are the rapid urease test and histological and cytological examination of bioptic sample of the gastric mucosa. Non-invasive techniques involve a breath test and serological methods (detection of IgM, IgA and IgG antibodies in the serum). Non-invasive tests are suitable for observation of treatment efficiency as well as for determination of infection or reinfection status. Eradication of the microbial agent is followed by a decrease of the antibody level. Tests involving highly specific and sensitive techniques of molecular biology (PCR) are only performed at specialized laboratories.

#### Diagnostic importance of antibody classes

IgM: The level of IgM antibodies increases in the acute stage of the disease. Nevertheless, they might not be produced by all patients.

IgA: IgA antibodies are produced not only in the acute stage of the disease, but also in the case of chronic infection of gastric mucosa, along with IgG antibodies. Their increase is also described in patients with a risk of gastric carcinoma.

IgG: IgG antibodies indicate contact with *H. pylori*; however, they do not provide any evidence of infection activity. Seroconversion occurs approximately 2 months after primary infection.

# Determination of Urease Activity in Bioptic Sample of the Gastric Mucosa

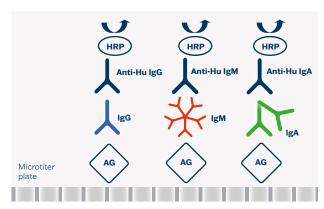
Due to the urease activity of most of *H. pylori* strains, urea undergoes hydrolysis in diagnostic medium. This process leads to the production of ammonia and therefore the pH of the sample is being increased. Hence the colour of pH indicator is changed from yellow to red.



# **ELISA**

# **Test Principle**

The assays are based on a sandwich type of ELISA method.



# **Protocol Summary**

<u>Step</u>		<u>Test steps</u>
U	1.	Dilution of samples - serum/plasma 1:101 (10 μl + 1 ml)
•	2.	Pipette Controls and diluted samples 100 µl - Including blank
•	3.	Incubate 30 min. at 37 °C
	4.	Aspirate and wash the wells 5 times
•	5.	Add Conjugate 100 μl - Including blank
•	6.	Incubate 30 min. at 37 °C
	7.	Aspirate and wash the wells 5 times
•	8.	Add 100 µl Substrate (TMB-Complete) - Including blank
•	9.	Incubate 15 min. at 37 °C
•	10.	Add 100 µl Stopping solution - Including blank
•	11.	Read colour intensity at 450 nm

# **Antigens**

Clinically significant *Helicobacter pylori* strain with high content of CagA (120 kDa) and VacA (87 kDa) proteins.

# **Clinical Application**

- Screening test for the detection of specific IgA, IgG and IgM antibodies in human serum or plasma
- Checking of therapy results using the semiquantitative determination
- Disease stage diagnosis

#### **User Comfort**

- Ready-to-use components
- Colour-coded components
- Interchangeable components
- Breakable colour-coded microplate strips
- CUT-OFF and calibrators included
- Semiquantitative evaluation of results (Index of Positivity) or quantitative evaluation of results (U/ml)

# **Advantages**

- High diagnostic specificity and sensitivity
- High reproducibility
- High dynamics of antibody response
- Identical assay procedure
- Short total assay time 1.5 hour
- Quantitative evaluation available
- Ready for automation
- Customer support

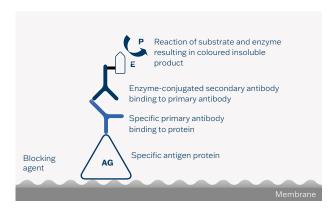
#### **Test Characteristics**

ELISA	Diagnostic Sensitivity	Diagnostic Specificity
EIA Helicobacter MONO IgA	98.7%	98.8%
EIA Helicobacter MONO IgG	98.9%	98.8%
EIA Helicobacter MONO IgM	97.5%	97.4%

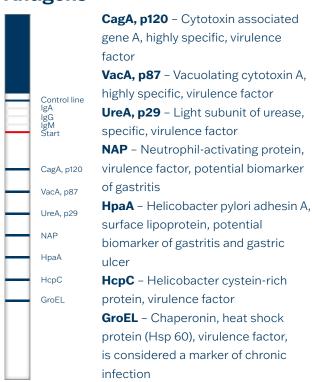
# **IMMUNOBLOT**

# **Test Principle**

Recombinant antigens *H. pylori* are transferred to a nitrocellulose membrane



# **Antigens**



# **Protocol Summary**

Step		<u>Test steps</u>
•	1.	Pipette Universal solution 2 ml
•	2.	Strips soaking 10 min. at room temperature - Shaker
	3.	Aspirate
Ī	4.	Dilute samples - serum/plasma 1:51 (30 μl + 1,5 ml)
•	5.	Pipette Controls and diluted samples 1.5 ml
•	6.	Incubate 30 min. at room temperature - Shaker
8	7.	Aspirate samples and wash strips with 1.5 ml of Universal solution 3-times for 5 min Shaker
•	8.	Pipette Conjugate 1.5 ml
•	9.	Incubate 30 min. at room temperature - Shaker
8	10.	Aspirate Conjugate and wash strips with 1.5 ml of Universal solution 3-times for 5 min Shaker
•	11.	Pipette Substrate solution (BCIP/NBT) 1.5 ml
•	12.	Incubate 15 min. at room temperature - Shaker
8	13.	Aspirate Substrate solution and wash strips with 2 ml of distilled water 2-times for 5 min Shaker



# **Clinical Application**

- Confirmatory method for the ELISA test
- Detailed determination of the presence of antibodies against specific antigens of *H. pylori*

#### **User Comfort**

- Ready-to-use components
- Colour-coded components
- Interchangeability components
- Positive and Negative controls
- Control line on the strip
- Possibility of software evaluation

## **Advantages**

- Simple interpretation and reproducibility of results
- High diagnostic specificity and sensitivity
- Customer support
- Ready for automation

#### **Test Characteristics**

<u>Pathogen</u>	<u>Diagnostic</u> <u>Sensitivity</u>	Diagnostic Specificity
BLOT-LINE Helicobacter IgA	95.2%	93.9%
BLOT-LINE Helicobacter IgG	96.9%	96.3%

#### **Clinical Data**

Correlation of the BLOT-LINE Helicobacter results with EIA and Immunoblot kits

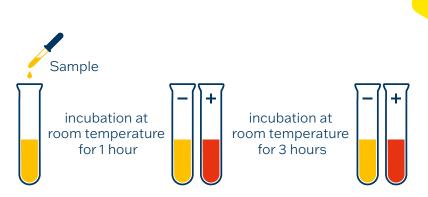
#### **BLOT-LINE Helicobacter**

#### **Conformity in %**

	<u>lgG</u>	No. of Tests	IgA	No. of Tests
EIA (TestLine)	92.2	90	84.4	90
EIA (Chorus)	94.1	34	84.9	33
BLOT (competition 1)	97.8	15	87.5	15
BLOT (competition 2)	100.0	15	80.0	15

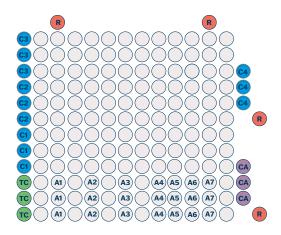
# **UREASE ACTIVITY DETECTION**

# Working schedule and evaluation



# **MICROBLOT-ARRAY**





#### **Description of antigens**

- A1 CagA
- A2 VacA
- A3 UreA
- **A4** NAP
- **A5** HpaA
- A6 HcpC
- A7 GroEL

#### **Description of control spots**

- R Reference
- TC Test control
- CA Conjugate control IgA
- CG Conjugate control IgG
- Oct Calibration 1
- **C2** Calibration 2
- **C3** Calibration 3
- OC4 Calibration 4

# **Protocol Summary**

Step		<u>Test steps</u>
•	1.	Pipette Universal solution 150 μl
<b>C</b>	2.	Strips soaking 10 min. at room temperature
8	3.	Aspirate
Ī	4.	Dilute samples - serum/plasma 1:51 (10 µl + 500 µl)
•	5.	Pipette Controls and diluted samples 100 µl
•	6.	Incubate 30 min. at room temperature
8	7.	Quick wash with Universal Solution*
8	8.	Aspirate samples and wash strips with 150 µl of Universal solution 3-times for 5 min.
•	9.	Pipette Conjugate 100 μI
•	10.	Incubate 30 min. at room temperature
8	11.	Quick wash with Universal Solution*
8	12.	Aspirate samples and wash strips with 150 $\mu$ I of Universal solution 3-times for 5 min.
•	13.	Pipette Substrate solution (BCIP/NBT) 100 μl
•	14.	Incubate 15 min. at room temperature
<b>8</b>	15.	Quick wash using the distilled water *
8	16.	Aspirate Substrate solution and wash strips with 200 µl of distilled water 2-times for 5 min.
•	17.	Dry and evaluate strips

<sup>\*</sup> if using a washer, fill the wells to the brim and aspirate immediately after filling the last well



# **User Comfort**

- Low sample consumption
- Antigens spotted in triplicate minimizing statistical variation
- Possibility of automatic assay processing and results evaluation
- Parallel testing of multiple markers simultaneously
- High sensitivity and specificity



# **Test Characteristics**

<u>Pathogen</u>	<b>Diagnostic Sensitivity</b>	<b>Diagnostic Specificity</b>
Microblot-Array Helicobacter IgA	96.5%	99.1%
Microblot-Array Helicobacter IgG	97.4%	99.0%



# **Ordering Information**

#### ELISA

Cat. No	<u>Product</u>	No. of Tests
HMA096	EIA Helicobacter MONO IgA	96
HMG096	EIA Helicobacter MONO IgG	96
HMM096	EIA Helicobacter MONO IgM	96
SK-HMA096	SmartEIA Helicobacter MONO IgA	96
SK-HMG096	SmartEIA Helicobacter MONO IgG	96

SmartEIA kits are designed for automated processing using the Agility  $^{\rm @}$  analyser

#### **IMMUNOBLOT**

Cat. No	<u>Product</u>	No. of Tests
HpAL20	BLOT-LINE Helicobacter IgA	20
HpGL20	BLOT-LINE Helicobacter IgG	20
Swlm03	Immunoblot Software	1 pc

#### MICROBLOT-ARRAY

Cat. No	<u>Product</u>	No. of Tests
HpAMA48	Microblot-Array Helicobacter IgA	48
HpGMA48	Microblot-Array Helicobacter IgG	48

#### UREASE ACTIVITY DETECTION

Cat. No	Product	No. of Tests
Ut0050	UREASAtest 50	50
Utb100	UREASAtest bulk	100



#### **TestLine Clinical Diagnostics Ltd.**

Krizikova 188/68, 612 00 Brno, Czech Republic sales@testlinecd.com www.testlinecd.com