

Datasheet for ABIN366555

PLA2G7 ELISA Kit[Go to Product page](#)**1** Image**5** Publications

Overview

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| Quantity: | 96 tests |
| Target: | PLA2G7 (Lp-PLA2) |
| Reactivity: | Human |
| Method Type: | Sandwich ELISA |
| Detection Range: | 1.56-100 ng/mL |
| Minimum Detection Limit: | 1.56 ng/mL |
| Application: | ELISA |

Product Details

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| Purpose: | For the quantitative determination of human lipoprotein-associated phospholipase A2 (Lp-PLA2) concentrations in serum, plasma, tissue homogenates. |
| Sample Type: | Serum, Plasma, Tissue Homogenate |
| Analytical Method: | Quantitative |
| Detection Method: | Colorimetric |
| Specificity: | This assay has high sensitivity and excellent specificity for detection of human Lp-PLA2. |
| Cross-Reactivity (Details): | Limited by current skills and knowledge, it is impossible for us to complete the cross-reactivity detection between the target antigen and all analogues for other species. Therefore, cross reaction may still exist. |
| Sensitivity: | 0.39 ng/mL |
| Components: | <ul style="list-style-type: none">• Assay plate (12 × 8 coated Microwells) |

Product Details

- Standard (freeze dried)
- Biotin-antibody (100 × concentrate)
- HRP-avidin (100 × concentrate)
- Biotin-antibody Diluent
- HRP-avidin Diluent
- Sample Diluent
- Wash Buffer (25 × concentrate)
- TMB Substrate
- Stop Solution
- Adhesive Strip (for 96 wells)
- Instruction manual

Target Details

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| Target: | PLA2G7 (Lp-PLA2) |
| Abstract: | Lp-PLA2 Products |
| Background: | Synonyms: LDL-PLA2, LP-PLA2, PAFAH, 1-alkyl-2-acetyl glycerophosphocholine esterase 2-acetyl-1-alkyl glycerophosphocholine esterase PAF 2-acylhydrolase lipoprotein-associated phospholipase A2 phospholipase A2, |
| HGNC: | 9040 |
| UniProt: | Q13093 |
| Pathways: | Peptide Hormone Metabolism |

Application Details

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| Application Notes: | <ul style="list-style-type: none">• The supplier is only responsible for the kit itself, but not for the samples consumed during the assay. The user should calculate the possible amount of the samples used in the whole test. Please reserve sufficient samples in advance.• Samples to be used within 5 days may be stored at 2-8°C, otherwise samples must be stored at -20°C (≤ 1 month) or -80°C (≤ 2 months) to avoid loss of bioactivity and contamination.• Grossly hemolyzed samples are not suitable for use in this assay.• If the samples are not indicated in the manual, a preliminary experiment to determine the validity of the kit is necessary.• Please predict the concentration before assaying. If values for these are not within the range of the standard curve, users must determine the optimal sample dilutions for their particular experiments.• Tissue or cell extraction samples prepared by chemical lysis buffer may cause unexpected ELISA results due to the impacts of certain chemicals.• Owing to the possibility of mismatching between antigens from another resource and |
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antibodies used in this supplier's kits (e.g., antibody targets conformational epitope rather than linear epitope), some native or recombinant proteins from other manufacturers may not be recognized by this supplier's products.

- Influenced by factors including cell viability, cell number and cell sampling time, samples from cell culture supernatant may not be recognized by the kit.
- Fresh samples without long time storage are recommended for the test. Otherwise, protein degradation and denaturalization may occur in those samples and finally lead to wrong results.

Comment:

Detection wavelength: 450 nm

Information on standard material:

Depending on the antigen to be detected, standards can be either native or recombinant protein. The recombinant proteins are being expressed in CHO cells in most cases. Please inquire for more information. The formulation of auxiliary material in the standard is considered proprietary information, however it does not contain any poisonous substance. Proclin 300 (1:3000) is used as preservative.

Information on reagents:

In most cases the stop solution provided is 1 N H2SO4. The formulation of wash solution is proprietary information. None of the components contain (sodium) azide, thimerosal, 2-mercaptoethanol (2-ME) or any other poisonous materials. For the sandwich method kits, the sample diluent, antibody diluent, enzyme diluent and standard all contain BSA.

Information on antibodies:

The antibodies provided in different kits vary in regards to clonality and host. Some antibodies are affinity purified, some are Protein A

Sample Volume:

100 µL

Assay Time:

1 - 4.5 h

Plate:

Pre-coated

Protocol:

This assay employs the quantitative sandwich enzyme immunoassay technique. Antibody specific for Lp-PLA2 has been pre-coated onto a microplate. Standards and samples are pipetted into the wells and any Lp-PLA2 present is bound by the immobilized antibody. After removing any unbound substances, a biotin-conjugated antibody specific for Lp-PLA2 is added to the wells. After washing, avidin conjugated Horseradish Peroxidase (HRP) is added to the wells. Following a wash to remove any unbound avidin-enzyme reagent, a substrate solution is

added to the wells and color develops in proportion to the amount of Lp-PLA2 bound in the initial step. The color development is stopped and the intensity of the color is measured.

Reagent Preparation:

- **Biotin-antibody (1×)** - Centrifuge the vial before opening.
Biotin-antibody requires a 100-fold dilution. The suggested dilution is 10µL of Biotin-antibody + 990µL of Biotin-antibody Diluent.
- **HRP-avidin (1×)** - Centrifuge the vial before opening.
HRP-avidin requires a 100-fold dilution. The suggested dilution is 10µL of HRP-avidin + 990µL of HRP-avidin Diluent.
- **Wash Buffer (1×)** - If crystals have formed in the concentrate, warm up to room temperature and mix gently until the crystals have completely dissolved. Dilute 20mL of Wash Buffer Concentrate (25×) into deionized or distilled water to prepare 500mL of Wash Buffer (1×).
- **Standard** - Centrifuge the standard vial at 6000-10000rpm for 30s.
Reconstitute the Standard with 1ml of Sample Diluent. Do not substitute other diluents. This reconstitution produces a stock solution. Mix the standard to ensure complete reconstitution and allow the standard to sit for a minimum of 15 minutes with gentle agitation prior to making dilutions.
Pipette 250µL of Sample Diluent into each tube. Use the stock solution to produce a 2-fold dilution series. Mix each tube thoroughly before the next transfer. The undiluted Standard serves as the high standard. Sample Diluent serves as the zero standard (0ng/mL).

Note:

- Kindly use graduated containers to prepare the reagent. Please don't prepare the reagent directly in the Diluent vials provided in the kit.
 - Bring all reagents to room temperature (18-25°C) before use for 30 min.
 - Prepare fresh standard for each assay. Use within 4 hours and discard after use.
 - Making serial dilution in the wells directly is not permitted.
 - Please carefully reconstitute Standards according to the instruction. Avoid foaming and mix gently until the crystals have completely dissolved. To minimize imprecision caused by pipetting, use small volumes and ensure that pipettors are calibrated. It is recommended to suck more than 10µL when pipetting.
 - It is recommended to use distilled water to prepare reagents and samples. Using contaminated water or container for reagent preparation will influence detection result.
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Assay Precision:

Intra-assay precision (precision within an assay): Three samples of known concentration were tested twenty times on one plate to assess precision.

Inter-assay precision (precision between assays): Three samples of known concentration were tested in twenty assays to assess precision.

- Intra-assay: CV% less than 8%
 - Inter-assay: CV% less than 10%
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Restrictions:

For Research Use only

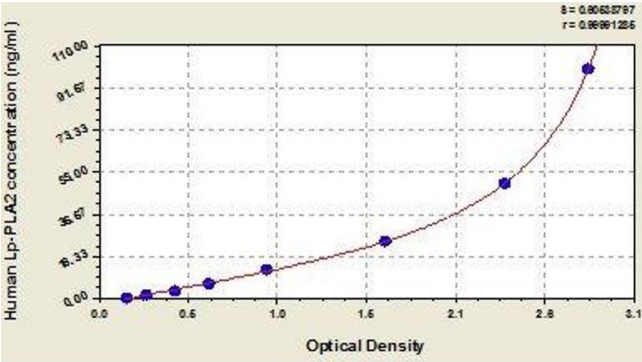
Handling

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| Precaution of Use: | The Stop Solution provided with this kit is an acid solution. Wear eye, hand, face and clothing protection when using this material. |
| Handling Advice: | <ul style="list-style-type: none">• The kit should not be used beyond the expiration date on the kit label.• Do not mix or substitute reagents with those from other lots or sources.• If samples generate values higher than the highest standard, dilute the samples with Sample Diluent and repeat the assay.• Any variation in Sample Diluent, operator, pipetting technique, washing technique, incubation time/temperature and kit age can cause variation in binding.• This assay is designed to eliminate interference by soluble receptors, binding proteins and other factors present in biological samples. Until all factors have been tested in the Immunoassay, the possibility of interference cannot be excluded. |
| Storage: | 4 °C/-20 °C |
| Storage Comment: | For unopened kit: All the reagents should be kept according to the labels on vials. |
| Expiry Date: | 6 months |

Publications

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| Product cited in: | <p>Wang, Zhou, Zhou, Yao, Cui, Liu, Yang, Wu, Zhao, Zhou: "Association of lipoprotein-associated phospholipase A2 mass with asymptomatic cerebral artery stenosis." in: Journal of cellular and molecular medicine, Vol. 22, Issue 4, pp. 2329-2336, (2019) (PubMed).</p> <p>Jeewandara, Gomes, Wickramasinghe, Gutowska-Owsiak, Waithe, Paranavitane, Shyamali, Ogg, Malavige: "Platelet activating factor contributes to vascular leak in acute dengue infection." in: PLoS neglected tropical diseases, Vol. 9, Issue 2, pp. e0003459, (2015) (PubMed).</p> <p>Aversa, Fittipaldi, Bimonte, Wannenes, Papa, Francomano, Greco, Lenzi, Migliaccio: "Tadalafil modulates aromatase activity and androgen receptor expression in a human osteoblastic cell in vitro model." in: Journal of endocrinological investigation, (2015) (PubMed).</p> <p>Shim, Lee, Youn: "Increased soluble vascular adhesion molecule-1 concentration is associated with impaired coronary flow reserve in cardiac syndrome X." in: Heart and vessels, Vol. 29, Issue 6, pp. 723-31, (2014) (PubMed).</p> <p>Chung, Kwon, Kim, Yoon, Rhee, Choi, Min, Hong, Rim, Yoon, Lee, Park, Kim, Jo, Yang, Lee: "Lipoprotein-associated phospholipase A₂ is related to plaque stability and is a potential biomarker for acute coronary syndrome." in: Yonsei medical journal, Vol. 55, Issue 6, pp. 1507-</p> |
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15, (2014) ([PubMed](#)).



ELISA

Image 1. Typical standard curve