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Datasheet for ABIN454393 **HIF1AN ELISA Kit**

Overview

Quantity:	96 tests
Target:	HIF1AN
Reactivity:	Human
Method Type:	Competition ELISA
Detection Range:	0.312-20 ng/mL
Minimum Detection Limit:	0.312 ng/mL
Application:	ELISA

Product Details

Purpose:	This immunoassay kit allows for the in vitro quantitative determination of human Anti-Saccharomyces cerevisiae antibody, ASCA concentrations in cell culture supernates, serum, plasma and other biological fluids.
Sample Type:	Cell Culture Supernatant, Plasma, Serum
Analytical Method:	Quantitative
Detection Method:	Colorimetric
Specificity:	This assay recognizes recombinant and natural human ASCA.
Cross-Reactivity (Details):	No significant cross-reactivity or interference was observed.
Sensitivity:	< 0.78 U/mL The sensitivity of this assay, or Lower Limit of Detection (LLD) was defined as the lowest detectable concentration that could be differentiated from zero.

Product Details

Characteristics:	Homo sapiens,Human,Hypoxia-inducible factor 1-alpha inhibitor,Factor inhibiting HIF-1,FIH-1,Hypoxia-inducible factor asparagine hydroxylase,HIF1AN,FIH1,1.14.11.30
Components:	Reagent (Quantity): Assay plate (1×20ml), Standard (2), Sample Diluent (1×20ml), Assay Diluent A (1×10ml), Assay Diluent B (1×10ml), Detection Reagent A (1×120 µl), Detection Reagent B (1×120 µl), Wash Buffer(25 x concentrate) (1×30ml), Substrate (1×10ml), Stop Solution (1×10ml), Plate sealer for 96 wells (5), Instruction (1)
Material not included:	Luminometer. Pipettes and pipette tips. EP tube Deionized or distilled water.

Target Details

Target:	HIF1AN
Alternative Name:	HIF1AN (HIF1AN Products)
Target Type:	Antibody
Background:	<p>Anti-Saccharomyces cerevisiae antibodies (ASCA), along with perinuclear antineutrophil cytoplasmic antibodies (pANCA), are among the two most useful and often discriminating markers for colitis. ASCA tends to recognize Crohn's disease more frequently, whereas pANCA tend to recognize ulcerative colitis. ASCA are consistently higher in frequency in Crohn's disease. Yeast cause a three-fold increase in lymphocyte proliferation relative to normal controls. The ASCA antibodies are also more frequently found in familial Crohn's disease. An altered humoral and cellular response to mannan is observed and may be due to a loss of yeast tolerance. This alteration is marked by increased activation markers, CD25/CD69, upon proliferative stimulation of T-helper lymphocytes. ASCA+ is a predictor for Crohn's disease with high specificity and positive predictive value (87% and 78% respectively). ASCA are associated with proximal (gastroduodenal and small bowel involvement) rather than purely colonic disease (P lower than 0.001) and with a more severe disease phenotype and requirement for surgery over a median follow-up time of 9 years (P lower than 0.0001). There is no association between genetic markers for Crohn's disease and NOD2/CARD15 or MP (IgA or IgG) indicating heterogeneous causes for Crohn's disease. [Note: CD is a common abbreviation for Crohn's disease. It is more commonly used for coeliac disease which may be primary to some forms of colitis. When reviewing abstracts for colitis, it is important to note the abbreviation is used for both.</p>
Pathways:	Regulation of Muscle Cell Differentiation, Skeletal Muscle Fiber Development

Application Details

Sample Volume:	100 µL
Plate:	Pre-coated
Protocol:	<p>The microtiter plate provided in this kit has been pre-coated with antigen. Standards or samples are then added to the appropriate microtiter plate wells with a biotin-conjugated antigen and Avidin conjugated to Horseradish Peroxidase (HRP) is added to each microplate well and incubated. Then a TMB substrate solution is added to each well. Only 2 those wells that contain ASCA, biotin-conjugated antigen and enzyme-conjugated Avidin will exhibit a change in color. The enzyme-substrate reaction is terminated by the addition of a sulphuric acid solution and the color change is measured spectrophotometrically at a wavelength of 450 nm ± 2 nm. The concentration of ASCA in the samples is then determined by comparing the O.D. of the samples to the standard curve.</p>
Reagent Preparation:	<p>Bring all reagents to room temperature before use. Wash Buffer - If crystals have formed in the concentrate, warm to room temperature and mix gently until the crystals have completely dissolved. Dilute 30 mL of Wash Buffer Concentrate into deionized or distilled water to prepare 750 mL of Wash Buffer. Standard - Reconstitute the Standard with 1.0 mL of Sample Diluent. This reconstitution produces a stock solution of 100 U/ml. Allow the standard to sit for a minimum of 15 minutes with gentle agitation prior to making serial dilutions (Making serial dilution in the wells directly is not permitted). The undiluted standard serves as the high standard (100 U/ml). The Sample Diluent serves as the zero standard (0 U/ml). Detection Reagent A and B - Dilute to the working concentration using Assay Diluent A and B (1:100), respectively.</p>
Sample Collection:	<p>Serum - Use a serum separator tube (SST) and allow samples to clot for 30 minutes before centrifugation for 15 minutes at approximately 1000 × g. Remove serum and assay immediately or aliquot and store samples at -20 C or -80 C . Plasma - Collect plasma using EDTA or heparin as an anticoagulant. Centrifuge samples for 15 minutes at 1000 × g at 2 - 8 C within 30 minutes of collection. Store samples at -20 C or -80 C . Avoid repeated freeze-thaw cycles. Cell culture supernates and other biological fluids - Remove particulates by centrifugation and assay immediately or aliquot and store samples at -20 C or -80 C . Avoid repeated freeze-thaw cycles. Note: Serum, plasma, and cell culture supernatant samples to be used within 7 days may be stored at 2-8 C , otherwise samples must stored at -20 C (≤ 1 months) or -80 C (≤ 2 months) to avoid loss of bioactivity and contamination. Avoid freeze-thaw cycles. When performing the assay slowly bring samples to room temperature.</p>
Assay Procedure:	<p>Allow all reagents to reach room temperature (Please do not dissolve the reagents at 37 C directly.). All the reagents should be mixed thoroughly by gently swirling before pipetting. Avoid</p>

foaming. Keep appropriate numbers of strips for 1 experiment and remove extra strips from microtiter plate. Removed strips should be resealed and stored at 4 C until the kits expiry date. Prepare all reagents, working standards and samples as directed in the previous sections. 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.

1. Add 100 μ l of Standard, Blank, or Sample per well. Cover with the Plate sealer. Incubate for 2 hours at 37 C .
2. Remove the liquid of each well, don ' t wash.
3. Add 100 μ l of Detection Reagent A working solution to each well. Cover with the Plate sealer. Incubate for 1 hour at 37C. Detection Reagent A working solution may appear cloudy. Warm to room temperature and mix gently until solution appears uniform.
4. Aspirate each well and wash, repeating the process three times for a total of three washes. Wash by filling each well with Wash Buffer (approximately 400 μ l) using a squirt bottle, multi-channel pipette, manifold dispenser or autowasher. Complete 4 removal of liquid at each step is essential to good performance. After the last wash, remove any remaining Wash Buffer by aspirating or decanting. Invert the plate and blot it against clean paper towels.
5. Add 100 μ l of Detection Reagent B working solution to each well. Cover with a new Plate sealer. Incubate for 1 hours at 37 C .
6. Repeat the aspiration/wash five times as in step
4. 7. Add 90 μ l of Substrate Solution to each well. Cover with a new Plate sealer. Incubate within 30 minutes at 37C. Protect from light.
8. Add 50 μ l of Stop Solution to each well. If color change does not appear uniform, gently tap the plate to ensure thorough mixing.
9. Determine the optical density of each well at once, using a microplate reader set to 450 nm.

Important Note:

1. Absorbance is a function of the incubation time. Therefore, prior to starting the assay it is recommended that all reagents should be freshly prepared prior to use and all required strip-wells are secured in the microtiter frame. This will ensure equal elapsed time for each pipetting step, without interruption.
2. Please carefully reconstitute Standards or working Detection Reagent A and B according to the instruction, and avoid foaming and mix gently until the crystals have completely dissolved. The reconstituted Standards can be used only once. This assay requires pipetting of small volumes. To minimize imprecision caused by pipetting, ensure that pipettors are calibrated. It is recommended to suck more than 10 μ l for once pipetting.
3. To ensure accurate results, proper adhesion of plate sealers during incubation steps is

necessary. Do not allow wells to sit uncovered for extended periods between incubation steps. Once reagents have been added to the well strips, DO NOT let the strips DRY at any time during the assay.

4. For each step in the procedure, total dispensing time for addition of reagents to the assay plate should not exceed 10 minutes.

5. To avoid cross-contamination, change pipette tips between additions of each standard level, between sample additions, and between reagent additions. Also, use separate reservoirs for each reagent.

6. The wash procedure is critical. Insufficient washing will result in poor precision and falsely elevated absorbance readings.

7. Duplication of all standards and specimens, although not required, is recommended.

8. Substrate Solution is easily contaminated. Please protect it from light.

Calculation of Results:

Average the duplicate readings for each standard, control, and sample and subtract the average zero standard optical density. Create a standard curve by reducing the data using computer software capable of generating a four parameter logistic (4-PL) curve-fit. As an alternative, construct a standard curve by plotting the mean absorbance for each standard on the x-axis against the concentration on the y-axis and draw a best fit curve through the points on the graph. The data may be linearized by plotting the log of the ASCA concentrations versus the log of the O.D. and the best fit line can be determined by regression analysis. It is recommended to use some related software to do this calculation, such as curve expert 13.0. This procedure will produce an adequate but less precise fit of the data. If samples have been diluted, the concentration read from the standard curve must be multiplied by the dilution factor.

Restrictions:

For Research Use only

Handling

Handling Advice:

1. The kit should not be used beyond the expiration date on the kit label.
2. Do not mix or substitute reagents with those from other lots or sources.
3. If samples generate values higher than the highest standard, further dilute the samples with the Assay Diluent and repeat the assay. Any variation in standard diluent, operator, pipetting technique, washing technique, incubation time or temperature, and kit age can cause variation in binding.
4. This assay is designed to eliminate interference by soluble receptors, ligands, 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.

Handling

Storage: 4 °C/-20 °C

Storage Comment: The Standard, Detection Reagent A, Detection Reagent B and the 96-well strip plate should be stored at -20 °C upon being received. The other reagents can be stored at 4 °C.