

## 1 INTRODUCTION

### 1.1 Intended Use

The **DRG DHEA-S ELISA** is an enzyme immunoassay for the quantitative *in vitro diagnostic* measurement of DHEA-S in serum and plasma.

### 1.2 Summary and Explanation

Dehydroepiandrosterone (5-Androstene-3 $\beta$ -0L-17-one, Androstenolone, Dehydroisoandrosterone, Transdehydroandrosterone, DHEA) is a steroid hormone present in blood mostly in its sulfate form (DHEA-S). DHEA-S is a more specific product of the adrenals and measurements of this steroid are widely used in clinical practice. The clinical importance of plasma assays of DHEA-S is associated with the diagnosis of adrenal hyperplasia and differential diagnosis of hirsutism (1).

## 2 PRINCIPLE OF THE TEST

The DRG DHEA-S ELISA Kit is a solid phase enzyme-linked immunosorbent assay (ELISA), based on the principle of competitive binding.

The microtiter wells are coated with a polyclonal antibody directed towards an antigenic site on the DHEA-S molecule. Endogenous DHEA-S of a patient sample competes with a DHEA-S-horseradish peroxidase conjugate for binding to the coated antibody. After incubation the unbound conjugate is washed off.

The amount of bound peroxidase conjugate is inversely proportional to the concentration of DHEA-S in the sample. After addition of the substrate solution, the intensity of colour developed is inversely proportional to the concentration of DHEA-S in the patient sample.

## 3 PRECAUTIONS

- This kit is for *in vitro* diagnostic use only.
- For information on hazardous substances included in the kit please refer to Material Safety Data Sheets.
- All reagents of this test kit which contain human serum or plasma have been tested and confirmed negative for HIV I/II, HBsAg and HCV by FDA approved procedures. All reagents, however, should be treated as potential biohazards in use and for disposal.
- Avoid contact with *Stop Solution* containing 0.5 M H<sub>2</sub>SO<sub>4</sub>. It may cause skin irritation and burns.
- Never pipet by mouth and avoid contact of reagents and specimens with skin and mucous membranes.
- Do not smoke, eat, drink or apply cosmetics in areas where specimens or kit reagents are handled.
- Wear disposable latex gloves when handling specimens and reagents. Microbial contamination of reagents or specimens may give false results.
- Handling should be in accordance with the procedures defined by an appropriate national biohazard safety guideline or regulation.
- Do not use reagents beyond expiry date as shown on the kit labels.
- All indicated volumes have to be performed according to the protocol. Optimal test results are only obtained when using calibrated pipettes and microtiterplate readers.
- Do not mix or use components from kits with different lot numbers. It is advised not to exchange wells of different plates even of the same lot. The kits may have been shipped or stored under different conditions and the binding characteristics of the plates may result slightly different.

- Chemicals and prepared or used reagents have to be treated as hazardous waste according the national biohazard safety guideline or regulation.
- Safety Data Sheets for this product are available upon request directly from DRG Instruments GmbH.  
The Safety Data Sheets fit the demands of: EU-Guideline 91/155 EC.

## 4 KIT COMPONENTS

### 4.1 Contents of the Kit

1. **Microtiterwells**, 12x8 (break apart) strips, 96 wells;  
Wells coated with a anti-DHEA-S antibody (polyclonal).
2. **Standard (Standard 0-6)**, 7 vials, 1 mL, ready to use;  
Concentrations: 0, 0.1, 0.5, 1, 2.5, 5, 10 µg/mL  
Conversion: 1 µg/mL = 2.6 µmol/L  
contain 0.03% Proclin 300 + 0.005% gentamicin sulfate as preservative.
3. **Enzyme Conjugate**, 1 vial, 25 mL, ready to use;  
DHEA-S conjugated to horseradish Peroxidase;  
\* contain 0.03% Proclin 300, 0.015% BND and 0.010% MIT as preservative.
4. **Substrate Solution**, 1 vial, 14 mL, ready to use;  
Tetramethylbenzidine (TMB).
5. **Stop Solution**, 1 vial, 14 mL, ready to use;  
contains 0.5M H<sub>2</sub>SO<sub>4</sub>.  
Avoid contact with the stop solution. It may cause skin irritations and burns.
6. **Wash Solution**, 1 vial, 30 mL (40X concentrated);  
see „Preparation of Reagents“.

- \* BND = 5-bromo-5-nitro-1,3-dioxane  
MIT = 2-methyl-2H-isothiazol-3-one

**Note:** Additional *Standard 0* for sample dilution is available upon request.

#### 4.1.1 Equipment and material required but not provided

- A microtiter plate calibrated reader (450±10 nm), (e.g. the DRG Instruments Microtiter Plate Reader).
- Calibrated variable precision micropipettes.
- Absorbent paper.
- Aqua dest.

### 4.2 Storage and stability of the Kit

When stored at 2-8°C unopened reagents will retain reactivity until expiration date. Do not use reagents beyond this date. Opened reagents must be stored at 2-8°C. Microtiter wells must be stored at 2-8°C. Once the foil bag has been opened, care should be taken to close it tightly again.

### 4.3 Preparation of Reagents

Allow all reagents and required number of strips to reach room temperature prior to use.

#### *Wash Solution*

Add deionized water to the 40X concentrated Wash Solution.

Dilute 30 mL of concentrated Wash Solution with 1170 mL deionized water to a final volume of 1200 mL.

*The diluted Wash Solution is stable for 2 weeks at room temperature.*

### 4.4 Disposal of the Kit

The disposal of the kit must be made according to the national regulations. Special information for this product is given in the Material Safety Data Sheets (see chapter 13).

### 4.5 Damaged Test Kits

In case of any severe damage of the test kit or components, DRG have to be informed written, latest one week after receiving the kit. Severely damaged single components should not be used for a test run. They have to be stored until a final solution has been found. After this, they should be disposed according to the official regulations.

## 5 SPECIMEN

Serum or plasma (EDTA-, Heparin- or citrate plasma) can be used in this assay.

Do not use haemolytic, icteric or lipaemic specimens.

*Please note:* Samples containing sodium azide should not be used in the assay.

### 5.1 Specimen Collection

#### **Serum:**

Collect blood by venipuncture (e.g. Sarstedt Monovette # 02.1388.001), allow to clot, and separate serum by centrifugation at room temperature. Do not centrifuge before complete clotting has occurred. Patients receiving anticoagulant therapy may require increased clotting time.

#### **Plasma:**

Whole blood should be collected into centrifuge tubes containing anti coagulant and centrifuged immediately after collection.

(E.g. for EDTA plasma Sarstedt Monovette – red cap - # 02.166.001; for Heparin plasma Sarstedt Monovette – orange cap - # 02.165.001; for Citrate plasma Sarstedt Monovette – green cap - # 02.167.001.)

### 5.2 Specimen Storage

Specimens should be capped and may be stored for up to 5 days at 2-8°C prior to assaying.

Specimens held for a longer time should be frozen only once at -20°C prior to assay. Thawed samples should be inverted several times prior to testing.

### **5.3 Specimen Dilution**

If in an initial assay, a specimen is found to contain more than the highest standard, the specimens can be diluted with *Standard 0* and reassayed as described in Assay Procedure.

For the calculation of the concentrations this dilution factor has to be taken into account.

Example:

- a) Dilution 1:10:        10 µL Serum + 90 µL *Standard 0* (mix thoroughly)
- b) Dilution 1:100:     10 µL dilution a) 1:10 + 90 µL *Standard 0* (mix thoroughly).

## **6 TEST PROCEDURE**

### **6.1 General Remarks**

- All reagents and specimens must be allowed to come to room temperature before use. All reagents must be mixed without foaming.
- Once the test has been started, all steps should be completed without interruption.
- Use new disposal plastic pipette tips for each standard, control or sample in order to avoid cross contamination.
- Absorbance is a function of the incubation time and temperature. Before starting the assay, it is recommended that all reagents are ready, caps removed, all needed wells secured in holder, etc. This will ensure equal elapsed time for each pipetting step without interruption.
- As a general rule the enzymatic reaction is linearly proportional to time and temperature.

## 6.2 Assay Procedure

Each run must include a standard curve.

1. Secure the desired number of Microtiter wells in the holder.
2. Dispense **25 µL** of each *Standard*, *Control* and samples with new disposable tips into appropriate wells.
3. Dispense **200 µL** *Enzyme Conjugate* into each well.  
Thoroughly mix for 10 seconds. It is important to have a complete mixing in this step.
4. Incubate for **60 minutes** at room temperature (without covering the plate).
5. Briskly shake out the contents of the wells.  
Rinse the wells **3 times** with diluted *Wash Solution* (400 µL per well). Strike the wells sharply on absorbent paper to remove residual droplets.

### Important note:

The sensitivity and precision of this assay is markedly influenced by the correct performance of the washing procedure!

6. Add **100 µL** of *Substrate Solution* to each well.
7. Incubate for **15 minutes** at room temperature.
8. Stop the enzymatic reaction by adding **50 µL** of *Stop Solution* to each well.
9. Determine the absorbance (OD) of each well at **450±10 nm** with a microtiter plate reader.  
It is recommended that the wells be read **within 10 minutes** after adding the *Stop Solution*.

## 6.3 Calculation of Results

1. Calculate the average absorbance values for each set of standards, controls and patient samples.
2. Construct a standard curve by plotting the mean absorbance obtained from each standard against its concentration with absorbance value on the vertical(Y) axis and concentration on the horizontal (X) axis.
3. Using the mean absorbance value for each sample determine the corresponding concentration from the standard curve.
4. Automated method: The results in the IFU have been calculated automatically using a 4 PL (4 Parameter Logistics) curve fit. 4 Parameter Logistics is the preferred method. Other data reduction functions may give slightly different results.
5. The concentration of the samples can be read directly from this standard curve. Samples with concentrations higher than that of the highest standard have to be further diluted. For the calculation of the concentrations this dilution factor has to be taken into account.

### 6.3.1 Example of Typical Standard Curve

The following data is for demonstration only and **cannot** be used in place of data generations at the time of assay.

Standard	Optical Units (450 nm)
Standard 0 (0 µg/mL)	1.69
Standard 1 (0.1 µg/mL)	1.35
Standard 2 (0.5 µg/mL)	0.93
Standard 3 (1.0 µg/mL)	0.67
Standard 4 (2.5 µg/mL)	0.46
Standard 5 (5.0 µg/mL)	0.33
Standard 6 (10.0 µg/mL)	0.23

## 7 EXPECTED VALUES

It is strongly recommended that each laboratory should determine its own normal and abnormal values.

In a study conducted with apparently normal healthy adults, using the DRG DHEA-S ELISA the following values are observed:

**Men**                      < 50 years              0.59 – 2.96 µg/mL  
                                 > 50 years              mean: 1.01 µg/mL

**Women**                      < 50 years              0.40 – 2.17 µg/mL  
                                 > 50 years              mean: 0.63 µg/mL

## 8 QUALITY CONTROL

Good laboratory practice requires that controls be run with each calibration curve. A statistically significant number of controls should be assayed to establish mean values and acceptable ranges to assure proper performance.

It is recommended to use control samples according to state and federal regulations. The use of control samples is advised to assure the day to day validity of results. Use controls at both normal and pathological levels.

The controls and the corresponding results of the QC-Laboratory are stated in the QC certificate added to the kit. The values and ranges stated on the QC sheet always refer to the current kit lot and should be used for direct comparison of the results.

It is also recommended to make use of national or international Quality Assessment programs in order to ensure the accuracy of the results.

Employ appropriate statistical methods for analysing control values and trends. If the results of the assay do not fit to the established acceptable ranges of control materials patient results should be considered invalid.

In this case, please check the following technical areas: Pipetting and timing devices; photometer, expiration dates of reagents, storage and incubation conditions, aspiration and washing methods.

After checking the above mentioned items without finding any error contact your distributor or DRG directly.

## 9 ASSAY CHARACTERISTICS

### 9.1 Assay Dynamic Range

The range of the assay is between 0 – 10 µg/mL.

### 9.2 Specificity of Antibodies (Cross Reactivity)

The following substances were tested for cross reactivity of the assay:

Steroid	% Crossreactivity
DHEA-S	100.0
Androstenedione	20.9
Androsterone	8.5
Androsterone-Sulfate	< 0.1
Progesterone	4.7
Testosterone	0.3
Estrone	0.9
Estriol	< 0.1
17-β-Estradiol	< 0.1
Estradiol Sulfate	< 0.1
Cortisol	< 0.1

### 9.3 Analytical Sensitivity

The analytical sensitivity was calculated from the mean minus two standard deviations of twenty (20) replicate analyses of *Standard 0* and was found to be 0.044 µg/mL.

### 9.4 Precision

#### 9.4.1 Intra Assay Variation

The within assay variability is shown below:

Sample	n	Mean (µg/mL)	CV (%)
1	20	0.2	4.6
2	20	1.3	5.1
3	20	4.2	4.7

#### 9.4.2 Inter Assay Variation

The between assay variability is shown below:

Sample	Mean (µg/mL)	CV (%)
1	0.2	6.5
2	1.3	10.6
3	4.4	5.4

#### 9.5 Recovery

Samples have been spiked by adding DHEA-S solutions with known concentrations in a 1:1 ratio.

The expected values were calculated by addition of half of the values determined for the undiluted samples and half of the values of the known solutions. The % Recovery has been calculated by multiplication of the ratio of the measurements and the expected values with 100.

Sample	Added Concentration 1:1 (v/v) (µg/mL)	Measured Conc. (µg/mL)	Expected Conc. (µg/mL)	Recovery (%)
1	--	0.2	0.20	100
	1.0	0.7	0.60	109
	2.5	1.4	1.35	106
	5.0	2.8	2.60	108
2	--	1.1	1.10	100
	1.0	1.1	1.05	101
	2.5	2.1	1.80	114
	5.0	3.4	3.05	110
3	--	3.8	3.80	100
	2.5	2.8	3.15	91
	5.0	4.3	4.40	97
	10.0	7.0	6.90	102

## 9.6 Linearity

Sample	Dilution	Mean Conc. (µg/ml)	Recovery (%)
1	None	4.825	-
	1:2	2.505	104
	1:4	1.191	99
	1:8	0.644	107
	1:16	0.320	106
2	None	1.147	-
	1:2	0.620	108
	1:4	0.310	108
	1:8	0.153	107
	1:16	0.078	109
3	None	4.200	-
	1:2	2.116	101
	1:4	1.024	98
	1:8	0.486	93
	1:16	0.264	101

## 10 LIMITATIONS OF USE

Any improper handling of samples or modification of this test might influence the results.

### 10.1 Interfering Substances

Haemoglobin (up to 4 mg/mL), Bilirubin (up to 0.5 mg/mL) and Triglyceride (up to 7.5 mg/mL) have no influence on the assay results.

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## **10.2 Drug Interferences**

Until today no substances (drugs) are known to us, which have an influence to the measurement of DHEA-S in a sample.

## **10.3 High-Dose-Hook Effect**

No hook effect was observed in this test.

## **11 LEGAL ASPECTS**

### **11.1 Reliability of Results**

The test must be performed exactly as per the manufacturer's instructions for use. Moreover the user must strictly adhere to the rules of GLP (Good Laboratory Practice) or other applicable national standards and/or laws. This is especially relevant for the use of control reagents. It is important to always include, within the test procedure, a sufficient number of controls for validating the accuracy and precision of the test.

The test results are valid only if all controls are within the specified ranges and if all other test parameters are also within the given assay specifications. In case of any doubt or concern please contact DRG.

### **11.2 Therapeutic Consequences**

Therapeutic consequences should never be based on laboratory results alone even if all test results are in agreement with the items as stated under point 11.1. Any laboratory result is only a part of the total clinical picture of a patient.

Only in cases where the laboratory results are in acceptable agreement with the overall clinical picture of the patient should therapeutic consequences be derived.

The test result itself should never be the sole determinant for deriving any therapeutic consequences.

### **11.3 Liability**

Any modification of the test kit and/or exchange or mixture of any components of different lots from one test kit to another could negatively affect the intended results and validity of the overall test. Such modification and/or exchanges invalidate any claim for replacement.











Claims submitted due to customer misinterpretation of laboratory results subject to point 11.2. are also invalid.











Regardless, in the event of any claim, the manufacturer's liability is not to exceed the value of the test kit. Any damage caused to the test kit during transportation is not subject to the liability of the manufacturer.

## **12 REFERENCES**

1. Tietz, N. W., Textbook of Clinical Chemistry, Saunders, 1968

**SYMBOLS USED WITH DRG ELISA'S**

Symbol	English	Deutsch	Francais	Espanol	Italiano
	European Conformity	CE-Konformitäts-kennzeichnung	Conforme aux normes européennes	Conformidad europea	Conformità europea
	Consult instructions for use	Gebrauchsanweisung beachten	Consulter les instructions d'utilisation	Consulte las Instrucciones	Consultare le istruzioni per l'uso
	In vitro diagnostic device	In-vitro-Diagnostikum	Usage Diagnostic in vitro	Diagnóstico in vitro	Per uso Diagnostica in vitro
	For research use only	Nur für Forschungszwecke	Seulement dans le cadre de recherches	Sólo para uso en investigación	Solo a scopo di ricerca
	Catalogue number	Katalog-Nr.	Référence	Número de catálogo	No. di Cat.
	Lot. No. / Batch code	Chargen-Nr.	No. de lot	Número de lote	Lotto no
	Contains sufficient for <n> tests/	Ausreichend für "n" Ansätze	Contenu suffisant pour "n" tests	Contenido suficiente para <n> ensayos	Contenuto sufficiente per "n" saggi
	Storage Temperature	Lagerungstemperatur	Temperature de conservation	Temperatura de conservacion	Temperatura di conservazione
	Expiration Date	Mindesthaltbarkeits-datum	Date limite d'utilisation	Fecha de caducidad	Data di scadenza
	Legal Manufacturer	Hersteller	Fabricant	Fabricante	Fabbricante
<i>Distributed by</i>	Distributor	Vertreiber	Distributeur	Distribuidor	Distributore
<i>Content</i>	Content	Inhalt	Contenu	Contenido	Contenuto
<i>Volume/No.</i>	Volume / No.	Volumen/Anzahl	Volume/Numéro	Volumen/Número	Volume/Quantità
<i>Microtiterwells</i>	Microtiterwells	Mikrotiterwells	Plaques de micro-titration	Placas multipocillo	Micropozzetti
<i>Antiserum</i>	Antiserum	Antiserum	Antisérum	Antisuero	Antisiero
<i>Enzyme Conjugate</i>	Enzyme Conjugate	Enzymkonjugat	Conjugué enzymatique	Conjugado enzimático	Tracciante enzimatico
<i>Enzyme Complex</i>	Enzyme Complex	Enzymkomplex	Complexe enzymatique	Complex enzimático	Complesso enzimatico
<i>Substrate Solution</i>	Substrate Solution	Substratlösung	Solution substrat	Solución de sustrato	Soluzione di substrato
<i>Stop Solution</i>	Stop Solution	Stopplösung	Solution d'arrêt	Solución de parada	Soluzione d'arresto
<i>Zero Standard</i>	Zero Standard	Nullstandard	Zero Standard	Estándar cero	Standard zero
<i>Standard</i>	Standard	Standard	Standard	Estándar	Standard
<i>Control</i>	Control	Kontrolle	Contrôle	Control	Controllo
<i>Assay Buffer</i>	Assay Buffer	Assaypuffer	Tampon d'essai	Tampón de ensayo	Tampone del test
<i>Wash Solution</i>	Wash Solution	Waschlösung	Solution de lavage	Solución de lavado	Soluzione di lavaggio
<i>1N NaOH</i>	1N NaOH	1N NaOH	1N NaOH	1N NaOH	1N NaOH (idrossido di sodio 1N)
<i>1 N HCl</i>	1 N HCl	1 N HCl	1N HCl	1 N HCl	
<i>Sample Diluent</i>	Sample Diluent	Probenverdünnungs-medium	Solution pour dilution de l'échantillon	Solución para dilución de la muestra	Diluyente dei campioni
<i>Conjugate Diluent</i>	Conjugate Diluent	Konjugatverdünnungs-medium	Solution pour dilution du conjugué	Solución para dilución del conjugado	Diluyente del tracciante

Symbol	Portugues	Dansk	Svenska	Ελληνικά
	Conformidade com as normas europeias	Europaeisk overensstemmelse	Europeisk överensstämmelse	Ευρωπαϊκή Συμμόρφωση
	Consulte as instruções de utilização	Se brugsanvisning	Se bruksanvisningen	Εγχειρίδιο χρήστη
	Diagnóstico in vitro	In vitro diagnostik	Diagnostik in vitro	in vitro διαγνωστικό
	Catálogo n.º	Katalognummer	Katalog nummer	Αριθμός καταλόγου
				
	No do lote	Lot nummer	Batch-nummer	Αριθμός Παρτίδος
		Indeholder tilstrækkeligt til "n" test	Innehåller tillräckligt till "n" tester	Περιεχόμενο επαρκές για «n» εξετάσεις
	Temperatura de conservação	Opbevaringstemperatur	Förvaringstemperatur	Θερμοκρασία αποθήκευσης
	Prazo de validade	Udløbsdato	Bäst före datum	Ημερομηνία λήξης
	Fabricante	Producent	Tillverkare	Κατασκευαστής
Distributed by				
Content	Conteúdo	Indhold	Innehåll	Περιεχόμενο
Volume/No.	Volume/Número	Volumen/antal	Volym/antal	Όγκος/αριθ.
Microtiterwells	Alvéolos de microtitulação	Mikrotiterbrønde	Brunnar i Mikrotiterplatta	Πηγαδάκια Μικροτιτλοδοτήσεως
Antiserum	Anti-soro	Antiserum	Antiserum	Αντιορός
Enzyme Conjugate	Conjugado enzimático	Enzymkonjugat	Enzymkonjugat	Συζευγμένο ενζυμο
Enzyme Complex	Complexo enzimático	Enzymkompleks	Enzymkomplex	Σύμπλοκο ενζύμου
Substrate Solution	Solução de substrato	Substratopløsning	Substratlösning	Διάλυμα υποστρώματος
Stop Solution	Solução de paragem	Stopopløsning	Stopp lösning	Διάλυμα τερματισμού
Zero Standard	Padrão zero	Standard 0	Standard 0	Πρότυπο Μηδέν
Standard	Calibrador	Standard	Standard	Πρότυπα
Control	Controlo	Kontrol	Kontroll	Έλεγχος
Assay Buffer	Tampão de teste	Assay buffer	Assay Buffer	Ρυθμιστικό Διάλυμα Εξέτασης
Wash Solution	Solução de lavagem	Vaskebuffer	Tvätt lösning	Διάλυμα πλύσεως
1N NaOH	1N NaOH	1N NaOH	1N NaOH	1N NaOH
1 N HCl	1 N HCl	1 N HCl	1 N HCl	1 N HCl
Sample Diluent				
Conjugate Diluent				