

ENG

Instructions for Use: HUMAN AGGRECAN (PG) ELISA

Catalogue number: RIS001R

For research use only!



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HISTORY OF CHANGES

Previous version Current version				
ENG.002.A ENG.003.A				
PDS (Product Data Sheet) IFU (Instructions for Use)				
The look of the whole document changed (rebranding)				
History of changes added.				
A symbol indicating the manufacturer added.				

1. INTENDED USE

The RIS001R Human Aggrecan (PG) ELISA Immunoenzymetric assay for the measurement of human aggrecan (PG) in synovial fluid, serum and cell culture supernatant. It is intended for research use only.

2. STORAGE, EXPIRATION

2.1 UNOPENED vials

Store the unopened vials at 2°C to 8°C. All kit components are stable until the expiry date printed on the labels.

2.2 **OPENED** vials

- 1. The Conjugate vial must be stored at 2° to 8°C.
- 2. The reconstituted Standards and Controls are stable for 1 day at 2°C to 8°C. Aliquots held for longer periods of time should be frozen, a maximum of two times, at -20°C (maximum 2 months) or at -70°C for longer storage (until expiration date).
- 3. Store the unused strips at 2°C to 8°C in the sealed bag containing the dessiccant until expiration date.
- 4. The Wash Solution Concentrate is stable at room temperature until expiration date. In order to avoid washerhead obstructions, it is recommended to prepare a fresh diluted Wash Solution each day.

3. INTRODUCTION

Aggrecan (PG) is the predominant proteoglycan species in articular cartilage. It is composed of a core protein of 210 kDa to which over 100 chondroitin sulfate chains, about 20-50 keratan sulfate chains and O-linked as well as N-linked oligosaccharides are covently attached. The core protein contains three distinct globular domains (G1-G3). G1 is at the amino terminus, separated by a short extended segment from G2, while G3 is at the carboxy terminal end. The G1 amino terminal region can interact noncovalently with hyaluronic acid (HA) and has then be termed the hyaluronic acid binding region (HABR). A link protein interact with both the G1 region and the HA to stabilize this interaction. PG is produced by chondrocytes, and its production is regulated by cytokines and growth factors such as IL1 β , TNF α , IGF1 or TGF β . In extracellular matrix, as many as 200 aggrecan molecules can bind to one single HA molecule to form an aggregate (MW: 5.10⁷ to 5.10⁸).

An imbalance in the synthesis and degradation of the matrix components is a common feature of both osteoarthritis and rheumatoid arthritis. The loss of PG and other matrix components from the

cartilage leads to destruction of the tissue, causing complete deterioration of the articular surface. Several recent publications suggest that the PG and PG fragments released in synovial fluid and serum during the degradation process might serve as markers of the metabolic changes in diseased cartilage. Cell culture is a commonly used procedure for the study of cartilage metabolism. The measurement of PG and other matrix components in culture supernatants and cellular contents can assist analysis of the effects of cytokines, growth factors, drugs and potential chondroprotective substances on the cartilage homeostasy. Biovendor has developped a ELISA for the measurement of human aggrecan to aid the study of this important cartilage constituent. The PG-ELISA is convenient, highly specific, and allow accurate measurement of PG in synovial fluid, serum and culture supernatant This assay is a new interesting tool for the exploration of the cartilage metabolism.

4. TEST PRINCIPLE

The PG-ELISA is a solid phase Enzyme Amplified Sensitivity Immunoassay (ELISA) performed on microtiter plate. The assay is based on an oligoclonal system in which a blend of monoclonal antibodies (MAbs) directed against distinct epitopes of PG are used. Antibody-producing cells are immortilized using the myeloma cell fusion method of Kohler and Milstein. A hybridoma cell is produced which secretes specific homogeneous antibodies. The use of a number of distinct MAbs avoids hyperspecificity and allows highly sensitive assays with extended standard range and short incubation time. Standards or samples containing PG react with capture monoclonal antibodies (MAbs 1) coated on the microtiter well and with a monoclonal antibody (MAb 2) labelled with horseradish peroxidase (HRP). After an incubation period allowing the formation of a sandwich : coated MAbs 1 - PG - MAb 2 - HRP, the microtiter plate is washed to remove unbound enzyme labelled antibodies. Bound enzyme-labelled antibodies are measured through a chromogenic reaction. Chromogenic Solution (TMB+H₂O₂) is added and incubated. The reaction is stopped with the addition of Stop Solution (HCI) and the microtiter plate is then read at the appropriate wavelength. The amount of substrate turnover is determined colourimetrically by measuring the absorbance which is proportional to the PG concentration. A standard curve is plotted and PG concentrations in a sample is determined by interpolation from the standard curve. The use of the ELISA Reader (linearity up to 3 OD units) and a sophisticated data reduction method (polychromatic data reduction) result in high sensitivity in the low range and in an extended standard range.

5. PRECAUTIONS

- For research use only

- The synovial fluid and serum components included in this kit (controls 1 and 3) have been tested by European approved and USA FDA approved methods and found negative for HBsAg, anti-HCV and anti-HIV-1 and 2. No known method can offer complete assurance that synovial fluid and serum derivatives will not transmit hepatitis, AIDS or other infections. Therefore, handling of reagents or synovial fluid or serum specimens should be in accordance with local safety procedures.
- Avoid any skin contact with Chromogenic Solution (TMB) and Stop Solution. In case of contact wash thoroughly with water.
- Do not eat, drink, smoke or apply cosmetics where kit reagents are used.
- Do not pipet liquids by mouth.

6. TECHNICAL HINTS

- Allow the samples and reagents to equilibrate to room temperature (18°C to 25°C) before commencing the assay. Thoroughly mix the reagents and samples before use by gentle agitation or swirling.
- Do not use kit components beyond the expiration date.
- Do not mix materials from different kit lots.
- Do not mix strips from different plates.
- Perform Standards, Controls and Unknowns in duplicate. Vertical alignment is recommended.
- A standard curve should be run with each assay run or each plate run.
- To avoid drift, the time between pipetting of the first standard and the last sample must be no longer than 30 minutes. Otherwise, results will be affected.
- Use a clean disposable plastic pipette for each reagent, standard, control or specimen addition in order to avoid cross contamination.
- For the dispensing of the Chromogenic Solution and Stop Solution avoid pipettes with metal parts.
- Use a clean plastic container to prepare the Wash Solution.
- During incubation with Chromogenic Solution, avoid direct sunlight on the microtiter plate.
- Respect the incubation times described in the assay procedure.

7. REAGENT SUPPLIED

Reagents	96 tests Kit	192 tests Kit	Reconstitution
Microtiter plate with 96 anti-PG coated wells	1 x 96 wells	2 x 96 wells	Ready for use
Standards 0 to 5 in phosphate buffer with preservatives: see vial label for exact concentrations	6 vials Iyophil.	6 vials Iyophil.	Add 0.5 ml distilled water
Diluent for synovial fluid and cell culture medium.	2 vials 2 x 30 ml	3 vials 3 x 30 ml	Ready for use
Incubation buffer	1 vial 11 ml	2 vials 11 ml	Ready for use
Anti-PG-HRP Conjugate in a buffered solution with proteins and preservatives	1 vial 5.5 ml	2 vials 5.5 ml	Dilute with the conjugate buffer (see section 7)
Conjugate Buffer	2 vials 2 x 11 ml	4 vials 4 x 11 ml	Ready for use
Controls 1, 2 and 3 in phosphate buffer with preservatives	3 vials Iyophil.	3 vials Iyophil.	Add 0.5 ml distilled water
Washing Solution Concentrate (buffer with preservatives)	1 vial 10 ml	1 vial 10 ml	Dilute 2 ml in 400 ml distilled water or the vial contents in 2000 ml distilled water
Chromogenic Solution: TMB (Tetramethylbenzidine)	1 vial 25 ml	1 vial 25 ml	Ready for use
Stop Solution	1 vial 25 ml	2 vials 25 ml	Ready for use

Standard: Aggrecan purified from human articular cartilage (A1D1D1 fraction chromatographed on Sepharose CL 2B, material eluted at 0.1 < Kd < 0.7).

8. MATERIAL REQUIRED BUT NOT SUPPLIED

- High quality distilled water.
- Precision pipette: 50 μ l, 100 μ l, 200 μ l, 1 ml and 10 ml.
- Vortex mixer and magnetic stirrer.
- Horizontal microtiter plate shaker capable of 700 rpm ± 100 rpm, microtiter plate reader capable of reading at 450 nm and 490 nm, microtiter plate washer.

9. PREPARATION OF REAGENTS

9.1 Standards and Controls

Reconstitute the lyophilized Standards and Controls to the volume specified on the vial label with distilled water (0.5 ml for Standards and Controls). Allow them to remain undisturbed until completely dissolved, then mix well by gentle inversion.

9.2 Wash Solution

Dilute 2 ml of Washing Solution Concentrate in 400 ml distilled water or all the contents of the Washing Solution Concentrate vial in 2000 ml distilled water (use a magnetic stirrer).

9.3 Conjugate solution

Following the number of wells to be used, dilute the concentrated conjugate with the conjugate buffer in a clean glass. See below table the volume to pipet. Extemporaneous preparation is necessary.

Table of conjugate dilution (ml)

Number of wells	Concentrated conjugate	Conjugate diluent	Working volume
16	0.75	3	3.75
24	1.25	5	6.25
32	1.5	6	7.5
48	2.5	10	12.5
96	5	20	25

10. PREPARATION OF SAMPLES

10.1 Specimen Collection and preparation

The PG-ELISA kit may be used to measure PG in human synovial fluids, sera and culture supernatants.

Synovial fluids can be collected into sterile tubes with EDTA or without additives, and must be centrifuged (at 1800g for 20 minutes) to remove cells.

Culture supernatants can be collected into plastic tubes and must be centrifuged (at 1800 g for 20 minutes) to remove cells.

At the present stage of our studies, the following culture media have been used in human chondrocytes cultures.

- DMEM supplemented with 1% ULTROSER G (GIBCO)
- DMEM supplemented with transferin (6.25 µg/ml), selenium (6.25 ng/ml), BSA (1.25 mg/ml) and linoleic acid (5.35 µg/ml).

– DMEM supplemented with 0% to 10% fetal calf serum.

No interferences were detected in the PG-ELISA with these culture media. Nevertheless we recommend that each laboratory check the absence of interferences in its culture media.

10.2 Storage

Synovial fluid samples, sera and culture media must be kept at -20°C for maximum 2 months, and for longer storage (maximum one year) at - 70°C.

10.3 Sample Dilution

At the present stage of our studies, only preliminary results can be provided and we thus recommend that each laboratory establishes its own dilution range. For guidance, see the following informations.

10.3.1 Synovial fluid

The PG levels measured in 300 synovial fluids ranged between 2 and 800 μ g/ml and the mean concentration was 80 μ g/ml. Therefore we recommend to dilute the synovial fluids 1/500 with the dilution buffer, according to the following procedure.

1/5 dilution: Pipet 100 µl dilution buffer and 25 µl SF in a 3ml plastic tube. Vortex the tube.

1/50 dilution: Pipet 225 μ l dilution buffer and 25 μ l 1/5 dilution in a 3 ml plastic tube. Vortex the tube.

1/500 dilution: Pipet 225 μ l dilution buffer and 25 μ l 1/50 dilution in a 3ml plastic tube. Vortex the tube.

If the sample generates values out of the standard curve, adapt the sample dilution and repeat the assay.

10.3.2 Serum

The PG levels measured in adult sera (age: 18-66 years) ranged between 1 and 4.4 μ g/ml and the mean concentration was 2.8 μ g/ml. PG levels in children sera (age: 2-16 years) ranged between 4 and 15 μ g/ml and the mean concentration was 10.4 μ g/ml. Therefore, we recommand to dilute adult sera 1/20 and children sera 1/100 according to the following procedure. 1/20 dilution: Pipet 380 μ l dilution buffer and 20 μ l serum in a 3 ml plastic tube. Vortex the tube. 1/100 dilution: Pipet 100 μ l dilution buffer and 25 μ l 1/20 dilution in a 3 ml plastic tube. Vortex the tube.

10.3.3 Cell culture supernatant

PG levels measured in 5 different human chondrocyte culture supernatants ranged between 1 and 10 μ g/ml. We thus suggest to dilute the culture supernatant 1/50 with the dilution buffer. Pipet 490 μ l dilution buffer and 10 μ l culture supernatant in a 3 ml plastic tube. Vortex the tube.

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11. ASSAY PROCEDURE

The instructions of the assay procedure must be followed to obtain reliable results.

- 1. **Select the required number of strips for the run.** The unused strips should be resealed in the bag with desiccant and stored at 2-8°C.
- 2. Secure the strips into the holding frame.
- 3. Pipette 50 µl of each Standard, Control, or Diluted Sample into the appropriate wells.
- 4. **Pipette 100 μl of incubation buffer** into the appropriate wells foreseen for the Standards, Controls and Samples.
- 5. Incubate for **2 hours** at room temperature on a horizontal shaker set at 700 rpm ± 100 rpm.
- 6. **Aspirate** the liquid from each well;
- 7. **Wash** the plate three times by:
 - a) dispensing of 0.4 ml of Biovendor Wash Solution into each well;
 - b) aspirating the content of each well.
- 8. **Pipette 200 µl of anti-PG conjugate** into all the wells.
- 9. **Incubate** for **1 hour** at room temperature on a horizontal shaker set at 700 rpm ± 100 rpm.
- 10. Aspirate the liquid from each well;
- 11. **Wash** the plate three times by:
 - a) dispensing of 0.4 ml of Biovendor Wash Solution into each well;
 - b) aspirating the content of each well.
- 12. **Pipette 100 µl of Chromogenic Solution** into each well within 15 min. following the washing step.
- 13. **Exactly incubate** the plate for <u>15 min.</u> at room temperature on an horizontal shaker set at 700 ± 100 rpm, avoiding direct sunlight.
- 14. Pipette 200 µl of Stop Solution into each well.
- 15. **Read** absorbances at 450 nm and 490 nm (reference filter: 630 or 650 nm) within 3 hours and calculate the results as described in section 12.

12. CALCULATIONS

12.1 Reading the plate with the ELISA Reader

Read the plate according to the instructions of the ELISA Reader and ELISA^{AID™} Software.

12.2 Reading the plate with other equipment

Read the microtiter plate at 450 nm (reference filter: 630 or 650 nm).

Construct a standard curve using all standard points for which absorbances are below the limit of linearity of reader used.

Plot the OD on the ordinate against the standard concentrations on the abscissa using either linear or semi-log graph paper and draw the curve by connecting the plotted points with straight lines.

Determine PG concentrations of Samples or Controls for which absorbance is no greater than those of the last standard plotted at 450 nm.

If any Control or Sample has an absorbance greater than the absorbance of the last standard read at 450 nm, a second reading at 490 nm (reference filter: 630 or 650 nm) is needed. Proceed as described above to construct a second standard curve at 490 nm using all the standard points. The segment of the curve drawn between the last standard read at 450 nm and the most concentrate standard will be considered at 490 nm. The concentration of Samples and Controls for which absorbance is included in this segment, is read at 490 nm. So, the first reading gives the high sensitivity of the assay and the second reading allows an extended standard range.

Note: The readings at 490 nm are only for off-scale values at 450 nm (above the limit of reader linearity) and should not replace the reading at 450 nm for values below the limit of reader linearity.

12.3 Example of a typical reference curve

The following data are for demonstration purpose only and can not be used in place of data generated at the time of assay. These data are provided by using the ELISA reader and the ELISA^{AID} software.

PG-ELISA		Polychromatic model (OD units)
	0 ng/ml	0.044
	10 ng/ml	0.202
Otorsdovel	25 ng/ml	0.441
Standard	50 ng/ml	0.660
	100 ng/ml	1.466
	250 ng/ml	3.339

13. PERFORMANCE CHARACTERISTICS

13.1 Minimum Detectable Concentration (MDC).

The MDC is estimated to be 0.9 ng/ml and is defined as the PG concentration corresponding to the average OD of 20 replicates of the zero standard + 2 standard deviations.

13.2 Precision

Intra-assay (n= 20)

	Sample (Dilution)	<x> ± SD (ng/ml)</x>	CV %
Syn. Fluide	1 (dil:1/100)	127.6 ± 2.3	1.8
	2 (dil:1/70)	75 ± 1.15	1.53
Serum	1 (dil:1/20)	78 ± 1.48	1.9
	2 (dil:1/40)	56.3 ± 1.5	2.6
Cult. sup.	(dil:1/30)	119 ± 3.2	2.7

Inter-assay (n= 20)

	Sample	<x> ± SD (ng/ml)</x>	CV %
Syn. Fluid	1 (dil:1/250)	157.9 ± 6.9	4.3
	2 (dil:1/250)	47.3 ± 2.6	5.5
Serum	1 (dil:1/20)	76 ± 4.6	6.05
	2 (dil:1/40)	55 ± 3.6	6.5
Cult. sup.	1 (dil:1/30)	145 ± 5.8	4
	2 (dil:1/100)	48.8 ± 3.5	7

13.3 Specificity

Cross reactivity was determined by addition of differents analytes to 0, 23 or 159 ng/ml of PG and the apparent PG concentration was measured.

Added analyte to PG PG samples		Observ. values for 0 ng/ml of PG	Observ. values for 23 ng/ml of PG	Observ. values for 159 ng/ml of PG
Hyaluronic acid	1000 ng/ml	0	22.7	152.5
Link-protein (1)	10 ng/ml	0	23	153.3
Hyaluronic acid	1000ng/ml +			
Link-protein	10 ng/ml	0	21.1	141.8
Chondroitine sulfa	ate (2)			
	1500 ng/ml	0	26.8	154.8
Keratan sulfate (3	8) 1500 ng/ml	0	23	147

1. Purified in our laboratory

- 2. From porcine rib cartilage (SIGMA n°C0914)
- 3. From bovine cornea (SIGMA n°K3001)

5+2

No ELISA reactive material was detected in extracts of human- bone - liver - kidney -heart-artery - vein or in culture supernatants of human - Osteoblasts - Synovial fibroblasts - Skin fibroblasts - Hepatocytes - Endothelial cells.

13.4 Accuracy

RECOVERY				DILUTION TEST				
Sample	Added PG (ng/ml)	Recovered PG (ng/ml)	Recovery (%)	Sample	Dilu- tion	Theor. conc (ng/ml)	Meas. conc. (ng/ml)	
Syn. fluid 1 (dil:1/580) Syn. fluid 2 (dil:1/70)	125 42 16 125 42 16	128 43 18 124 48 19	102 102 112 99 114 118	Syn. fluid	1/70 1/140 1/280 1/560 1/1120	275 137.5 68.7 34.3 17.2	275 139 71 37.6 19.3	
Serum 1 (dil:1/30)	21.4 40 81	24 36 83	112 90 102	Serum	1/16 1/32	163 81.5	163 88.7	
Serum 2 (dil:1/90)	21.4 40 81	23 42 88	107 105 109	Seruin	1/64 1/128	40.7 20.3	47 20.6	
Cult. sup. 1 (dil:1/150)	22 57 172	22.5 57.5 181	102 100 105	Cult.	1/60 1/120 1/240 1/480 1/960	1/120	195 97.5 48.7	195 97.5
Cult. sup. 2 (dil:1/60)	22 57 172	20.2 52 177	92 91 102	sup.		48.7 24.4 12.2	45.3 22.2 12	
	10							

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14. QUALITY CONTROL

- The **three Controls** provided in the kit can be used as internal laboratory controls.

Note: Other controls which contain azide will interfere with the enzymatic reaction and cannot be used.

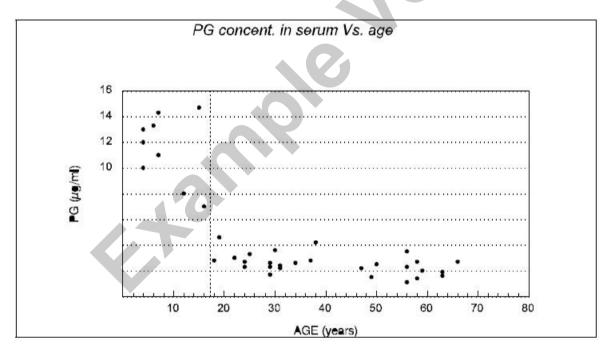
- Diluted synovial fluids, diluted sera as well as diluted cell culture supernatants can be collected and frozen immediately in aliquot to serve as controls. Repeated freezing and thawing are not recommended.
- Record keeping: it is good laboratory practice to record the kit lot numbers and date of reconstitution for the reagents in use.
- Controls: it is recommended that Controls be routinely assayed as unknown samples to measure assay variability. It is recommended that quality controls charts be maintained to monitor the performance of the kits. Control ranges are indicated on vial labels. Out of range control results indicate the assay must be repeated. Repeat patient samples may also be used to measure interassay precision.
- Sample handling: strictly adhere to the instruction for handling and storage of samples.
 Standards, Controls, and Unknowns should be run in duplicate. A clean disposable tip should always be used to avoid carryover contamination.
- Data reduction: it is good practice to construct a standard curve for each run to check visually the curve fit selected by the computer program.

15. EXPECTED RANGE

In a preliminary study, PG concentrations were measured in culture supernatants of human chondrocytes cultivated in the presence or not of IL1 β (10⁻¹⁰ M) and IGF-I (10⁻⁸ M), as well as in 97 synovial fluids of patients with meniscus (Men), osteoarthritis (OA), reactive arthritis (ReA), gout (Gout), and rheumatoid arthritis (RA). The results are tabled below.

Culture Supernatants	PG concentrations in (ng/μg DNA) (m ± SD)	Synovial Fluids	PG concentrations (μg/ml) (m± SEM)
Control (4)	306 ±47	Men (16)	226 ± 36
IL1β (4)	162 ± 12	Gout (6)	291 ± 35
IGFI (4)	527 ± 35	ReA (15)	185 ± 61
		OA (14)	71 ± 14
		RA (46)	61 ± 11

The PG production measured in culture supernatants was inhibited by IL1 β and increased by IGF1 as already reported by other using different immunoassay systems for the PG detection. Similar PG concentrations were measured in the meniscus and gout synovial fluids. As compared to these groups, the PG levels were significantly lower in the ReA (p<0.05), OA (p<0.001) and RA (p<0.001) synovial fluids.



The figure shows the PG concentrations in serum of normal subjects aged from 3 to 66 years. The PG levels measured in adult sera (age: 16-66 years) ranged between 1 and 4.4 μ g/ml and the mean concentration was 2.8 μ g/ml. PG levels measured in children sera (age: 3-16 years) ranged between 7 and 15 μ g/ml. The mean PG concentration was 10.4 μ g/ml.

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16. REFERENCES

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For more references on this product see our web pages at <u>www.biovendor.com</u>

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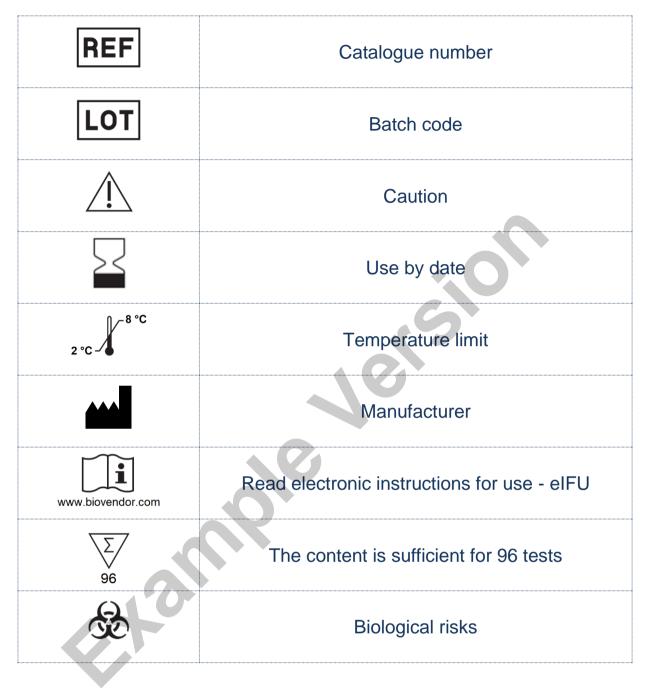
17. ASSAY PROCEDURE SUMMARY

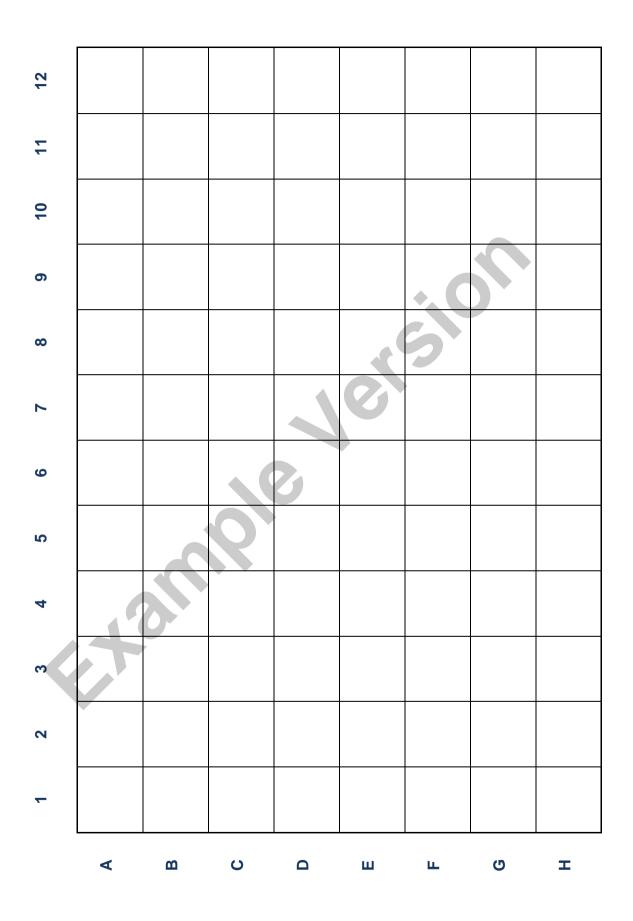
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	Standards (µl)	Diluted synovial fluid samples (µl)	Diluted Sera (µl)	Diluted culture supernat. (µl)
Standards (0-5), controls	50	-	-	-
Diluted Synovial fluid samples	-	50	-	-
Diluted sera	-	-	50	-
Diluted Culture supernatants	-	-	-	50
Incubation buffer	100	100	100	100
Aspirate the contents of each well Wash 3 times with 0.4 ml of Wash Solu	•			
Anti-PG-HRP Conjugate	200	200	200	200
Incubate for 1 hour at R.T. with continu Aspirate the contents of each well Wash 3 times with 0.4 ml of Wash Solu			¥	
Chromogenic Solution	100	100	100	100
Exactly incubate 15 min. at R.T. with c	continuous sha	king		
Stop Solution	200	200	200	200
Read on a microtiter plate reader and reader or 630 or 650 nm) and 490 nm (versus 63		rbance of each w	ell at 450	nm (versus

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18. EXPLANATION OF SYMBOLS





BioVendor R&D®



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