

PRODUCT INFORMATION & MANUAL

Human Caspase-9 Platinum ELISA

BMS2025 / BMS2025TEN

Enzyme-linked Immunosorbent Assay for
quantitative detection of human Caspase-9.

For research use only.

Not for diagnostic or therapeutic procedures.



Human Caspase-9 Platinum ELISA

North America

Technical Support:

Research Products:
888.810.6168
858.642.2058
tech@eBioscience.com

Clinical Products:
877.726.8559
858.642.2058
tech@eBioscience.com

Customer Service:

888.999.1371
858.642.2058
info@eBioscience.com

Fax:

858.642.2046

Europe/International*

Technical Support:

+43 1 796 40 40-120
tech@eBioscience.com

Customer Service:

+43 1 796 40 40-304
info@eBioscience.com

Fax:

+43 1 796 40 40-400



Bender MedSystems GmbH
Campus Vienna Biocenter 2
1030 Vienna, Austria
www.eBioscience.com

* Customers outside North America and Europe
may contact their eBioscience distributor listed on
our website at www.eBioscience.com/distributors.

TABLE OF CONTENTS

1	Intended Use	3
2	Summary	3
3	Principles of the Test	4
4	Reagents Provided	6
5	Storage Instructions – ELISA Kit	8
6	Specimen Collection and Storage Instructions	8
7	Materials Required But Not Provided	10
8	Precautions for Use	11
9	Preparation of Reagents	13
10	Test Protocol	18
11	Calculation of Results	23
12	Limitations	26
13	Performance Characteristics	27
14	Ordering Information	32
15	Reagent Preparation Summary	33
16	Test Protocol Summary	34

1 Intended Use

The human Caspase-9 ELISA is an enzyme-linked immunosorbent assay for the quantitative detection of human Caspase-9. **The human Caspase-9 ELISA is for research use only. Not for diagnostic or therapeutic procedures.**

2 Summary

Caspases are the executioners of apoptosis. This cysteine protease family consists of more than 10 related members characterized by almost absolute specificity for aspartic acid in the P1 position. Caspases are synthesized as inactive proenzymes comprising an N-terminal peptide together with one large and one small subunit. Activation of caspases during apoptosis results in the cleavage of critical cellular substrates so precipitating the dramatic morphological changes of apoptosis.

Caspase-9, formerly called Apaf-3, binds to Apaf-1 in the presence of cytochrome c and dATP, which leads to caspase-9 activation. Activated caspase-9 in turn cleaves and activates caspase-3; caspase-9 thus is the most upstream member of the apoptotic protease cascade that is triggered by cytochrome c and dATP.

Caspase-9 is essentially localized in mitochondria, the disruption of the outer mitochondrial membrane occurring early during apoptosis is critical for its subcellular redistribution and activation.

Apart from cleavage of caspase-3, the downstream enzymes caspase-6 and -7 are targets of caspase-9 activity. Caspase-9 forms dimers in the course of activation. Cytochrome c/Apaf-1/caspase-9 form a so-called apoptosome, amplifying the caspase cascade. Feedback cleavage of caspase-9 by caspase-3 again significantly increases the activity of the apoptosome.

Caspase-9 plays a crucial role in all pathologies involving apoptotic processes. Specifically the involvement of caspase-9 has been described in human gastric cancer, ovarian carcinoma, neuroblastoma, gliomas as well as in Alzheimer's disease, Huntington's disease and osteoarthritis.

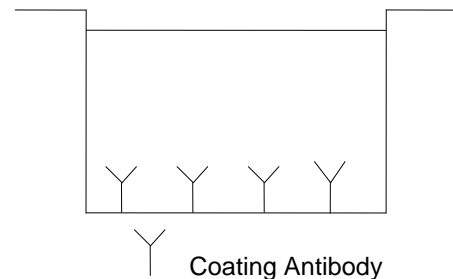
For literature update refer to **www.eBioscience.com**

3 Principles of the Test

An anti-human Caspase-9 coating antibody is adsorbed onto microwells.

Figure 1

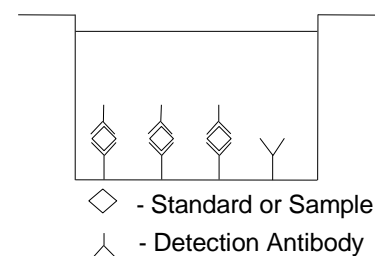
Coated Microwell



Human Caspase-9 present in the sample or standard binds to antibodies adsorbed to the microwells. The polyclonal detection antibody (rabbit) binds to human Caspase-9 captured by the first antibody.

Figure 2

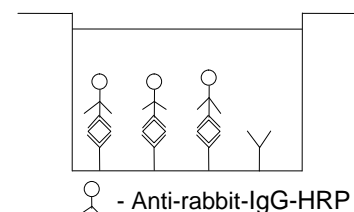
First Incubation



Following incubation unbound detection antibody is removed during a wash step. Anti-rabbit-IgG-HRP is added and binds to the Detection Antibody.

Figure 3

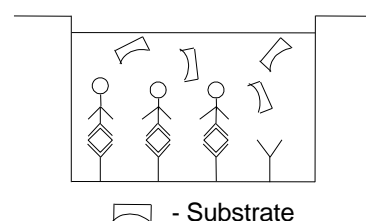
Second Incubation



Following incubation unbound anti-rabbit-IgG-HRP is removed during a wash step, and substrate solution reactive with HRP is added to the wells.

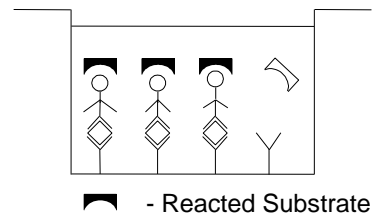
Figure 4

Third Incubation



A coloured product is formed in proportion to the amount of human Caspase-9 present in the sample or standard. The reaction is terminated by addition of acid and absorbance is measured at 450 nm. A standard curve is prepared from 7 human Caspase-9 standard dilutions and human Caspase-9 concentration determined.

Figure 5



4 Reagents Provided

4.1 Reagents for human Caspase-9 ELISA BMS2025 (96 tests)

- 1 aluminium pouch with a **Microwell Plate coated** with monoclonal antibody to human Caspase-9
- 1 vial (100 µl) anti-human Caspase-9 polyclonal **Detection Antibody** (rabbit)
- 1 vial (10 µl) **Anti-rabbit-IgG-HRP**
- 2 vials human Caspase-9 **Standard** lyophilized, 200 ng/ml upon reconstitution
- 1 vial (12 ml) **Sample Diluent**
- 1 vial (5 ml) **Assay Buffer Concentrate** 20x (PBS with 1% Tween 20 and 10% BSA)
- 1 bottle (50 ml) **Wash Buffer Concentrate** 20x (PBS with 1% Tween 20)
- 1 bottle (15 ml) **Lysis Buffer** 10x
- 1 vial (15 ml) **Substrate Solution** (tetramethyl-benzidine)
- 1 vial (15 ml) **Stop Solution** (1M Phosphoric acid)
- 1 vial (0.4 ml) **Blue-Dye**
- 1 vial (0.4 ml) **Green-Dye**
- 1 vial (0.4 ml) **Red-Dye**
- 4 **Adhesive Films**

4.2 Reagents for human Caspase-9 ELISA BMS2025TEN (10x96 tests)

- 10 aluminium pouches with a **Microwell Plate coated** with monoclonal antibody to human Caspase-9
- 10 vials (100 µl) anti-human Caspase-9 polyclonal **Detection Antibody** (rabbit)
- 10 vials (10 µl) **Anti-rabbit-IgG-HRP**
- 10 vials human Caspase-9 **Standard** lyophilized, 200 ng/ml upon reconstitution
- 10 vials (12 ml) **Sample Diluent**
- 2 vials (5 ml) **Assay Buffer Concentrate** 20x
(PBS with 1% Tween 20 and 10% BSA)
- 4 bottles (50 ml) **Wash Buffer Concentrate** 20x
(PBS with 1% Tween 20)
- 10 bottles (15 ml) **Lysis Buffer** 10x
- 10 vials (15 ml) **Substrate Solution** (tetramethyl-benzidine)
- 10 vials (15 ml) **Stop Solution** (1M Phosphoric acid)
- 6 vials (0.4 ml) **Blue-Dye**
- 6 vials (0.4 ml) **Green-Dye**
- 6 vials (0.4 ml) **Red-Dye**
- 20 **Adhesive Films**

5 Storage Instructions – ELISA Kit

Store kit reagents between 2° and 8°C. Immediately after use remaining reagents should be returned to cold storage (2° to 8°C). Expiry of the kit and reagents is stated on labels.

Expiry of the kit components can only be guaranteed if the components are stored properly, and if, in case of repeated use of one component, this reagent is not contaminated by the first handling.

6 Specimen Collection and Storage Instructions

Cell lysate (see cell lysate protocol below), cell culture supernatant and serum were tested with this assay. Other biological samples might be suitable for use in the assay. Remove serum from the clot as soon as possible after clotting.

Samples containing a visible precipitate must be clarified prior to use in the assay. Do not use grossly hemolyzed or lipemic specimens.

Samples should be aliquoted and must be stored frozen at -20°C to avoid loss of bioactive human Caspase-9. If samples are to be run within 24 hours, they may be stored at 2° to 8°C (for sample stability refer to 13.5).

Avoid repeated freeze-thaw cycles. Prior to assay, the frozen sample should be brought to room temperature slowly and mixed gently.

6.1 Sample Preparation – Cell Lysate Protocol

Numerous extraction protocols can be used. The following protocol is provided as an example of a suitable extraction procedure, but should not be construed as necessarily being the method of choice. Users may wish to experiment with extraction procedures that work best in their hands.

For suspension cells: Pellet by centrifugation, remove supernatant and proceed to Addition of Lysis Buffer.

For attached cells: Remove supernatant from cells, wash cells once with PBS, harvest cells by scraping and gentle centrifugation, aspirate PBS,

leaving an intact cell pellet (at this point the cell pellet can be frozen at -80°C and lysed at a later date) and proceed to Addition of Lysis Buffer.

Addition of Lysis Buffer: Resuspend the pellet in Lysis Buffer (1x) (we recommend a concentration of 5×10^6 cells/ml.), incubate 60 minutes at room temperature with gentle shaking and transfer extracts to microcentrifuge tubes and centrifuge at 1000 x g for 15 minutes. Aliquot the cleared lysate to clean microfuge tubes and continue the test procedure (Alternatively lysates can be stored at -80°C and assayed at a later time. Divide lysates into small aliquots to avoid multiple freeze/thaw cycles.).

Note: Samples found to contain more than 200 ng/ml human Caspase-9 (i.e., outside the range of the standard curve) must be diluted with Sample Diluent (provided), so that the human Caspase-9 concentration falls within the range spanned by the standard curve, and assayed again.

7 Materials Required But Not Provided

- 5 ml and 10 ml graduated pipettes
- 5 μ l to 1000 μ l adjustable single channel micropipettes with disposable tips
- 50 μ l to 300 μ l adjustable multichannel micropipette with disposable tips
- Multichannel micropipette reservoir
- Beakers, flasks, cylinders necessary for preparation of reagents
- Device for delivery of wash solution (multichannel wash bottle or automatic wash system)
- Microwell strip reader capable of reading at 450 nm (620 nm as optional reference wave length)
- Glass-distilled or deionized water
- Statistical calculator with program to perform regression analysis

8 Precautions for Use

- All chemicals should be considered as potentially hazardous. We therefore recommend that this product is handled only by those persons who have been trained in laboratory techniques and that it is used in accordance with the principles of good laboratory practice. Wear suitable protective clothing such as laboratory overalls, safety glasses and gloves. Care should be taken to avoid contact with skin or eyes. In the case of contact with skin or eyes wash immediately with water. See material safety data sheet(s) and/or safety statement(s) for specific advice.
- Reagents are intended for research use only and are not for use in diagnostic or therapeutic procedures.
- Do not mix or substitute reagents with those from other lots or other sources.
- Do not use kit reagents beyond expiration date on label.
- Do not expose kit reagents to strong light during storage or incubation.
- Do not pipette by mouth.
- Do not eat or smoke in areas where kit reagents or samples are handled.
- Avoid contact of skin or mucous membranes with kit reagents or specimens.
- Rubber or disposable latex gloves should be worn while handling kit reagents or specimens.
- Avoid contact of substrate solution with oxidizing agents and metal.
- Avoid splashing or generation of aerosols.
- In order to avoid microbial contamination or cross-contamination of reagents or specimens which may invalidate the test use disposable pipette tips and/or pipettes.
- Use clean, dedicated reagent trays for dispensing the conjugate and substrate reagent.

- Exposure to acid inactivates the conjugate.
- Glass-distilled water or deionized water must be used for reagent preparation.
- Substrate solution must be at room temperature prior to use.
- Decontaminate and dispose specimens and all potentially contaminated materials as they could contain infectious agents. The preferred method of decontamination is autoclaving for a minimum of 1 hour at 121.5°C.
- Liquid wastes not containing acid and neutralized waste may be mixed with sodium hypochlorite in volumes such that the final mixture contains 1.0% sodium hypochlorite. Allow 30 minutes for effective decontamination. Liquid waste containing acid must be neutralized prior to the addition of sodium hypochlorite.

9 Preparation of Reagents

Buffer Concentrates should be brought to room temperature and should be diluted before starting the test procedure.

If crystals have formed in the **Buffer Concentrates**, warm them gently until they have completely dissolved.

9.1 Wash Buffer (1x)

Pour entire contents (50 ml) of the **Wash Buffer Concentrate** (20x) into a clean 1000 ml graduated cylinder. Bring to final volume of 1000 ml with glass-distilled or deionized water.

Mix gently to avoid foaming.

Transfer to a clean wash bottle and store at 2° to 25°C. Please note that Wash Buffer (1x) is stable for 30 days.

Wash Buffer (1x) may also be prepared as needed according to the following table:

Number of Strips	Wash Buffer Concentrate (20x) (ml)	Distilled Water (ml)
1 - 6	25	475
1 - 12	50	950

9.2 Assay Buffer (1x)

Pour the entire contents (5 ml) of the **Assay Buffer Concentrate** (20x) into a clean 100 ml graduated cylinder. Bring to final volume of 100 ml with distilled water. Mix gently to avoid foaming.

Store at 2° to 8°C. Please note that the Assay Buffer (1x) is stable for 30 days.

Assay Buffer (1x) may also be prepared as needed according to the following table:

Number of Strips	Assay Buffer Concentrate (20x) (ml)	Distilled Water (ml)
1 - 6	2.5	47.5
1 - 12	5.0	95.0

9.3 Lysis Buffer

Pour the entire contents (15 ml) of the **Lysis Buffer Concentrate** (10x) into a clean 150 ml graduated cylinder. Bring to final volume of 150 ml with distilled or deionized water and mix gently. Store at room temperature. Please note that the Lysis Buffer (1x) is stable for 30 days.

9.4 Detection Antibody

Please note that the Detection Antibody should be used within 30 minutes after dilution.

Make a 1:100 dilution of the concentrated **Detection Antibody** solution with Assay Buffer (1x) in a clean plastic tube as needed according to the following table:

Number of Strips	Detection Antibody (ml)	Assay Buffer (1x) (ml)
1 - 6	0.03	2.97
1 - 12	0.06	5.94

9.5 Anti-Rabbit-IgG-HRP

Please note that the anti-rabbit-IgG-HRP should be used within 30 minutes after dilution.

Make a 1:2000 dilution of the concentrated **anti-rabbit-IgG-HRP** solution with Assay Buffer (1x) in a clean plastic tube as needed according to the following table:

Number of Strips	Anti-rabbit-IgG-HRP (ml)	Assay Buffer (1x) (ml)
1 - 6	0.003	5.997
1 - 12	0.006	11.994

9.6 Human Caspase-9 Standard

Reconstitute **human Caspase-9 standard** by addition of distilled water. Reconstitution volume is stated on the label of the standard vial. Swirl or mix gently to insure complete and homogeneous solubilization (concentration of reconstituted standard = 200 ng/ml).

Allow the standard to reconstitute for 10-30 minutes. Mix well prior to making dilutions.

After usage remaining standard cannot be stored and has to be discarded.

Standard dilutions can be prepared directly on the microwell plate (see 10.d) or alternatively in tubes (see 9.6.1).

9.6.1 External Standard Dilution

Label 7 tubes, one for each standard point.

S1, S2, S3, S4, S5, S6, S7

Then prepare 1:2 serial dilutions for the standard curve as follows:

Pipette 225 µl of Sample Diluent into each tube.

Pipette 225 µl of reconstituted standard (concentration = 200 ng/ml) into the first tube, labelled S1, and mix (concentration of standard 1 = 100

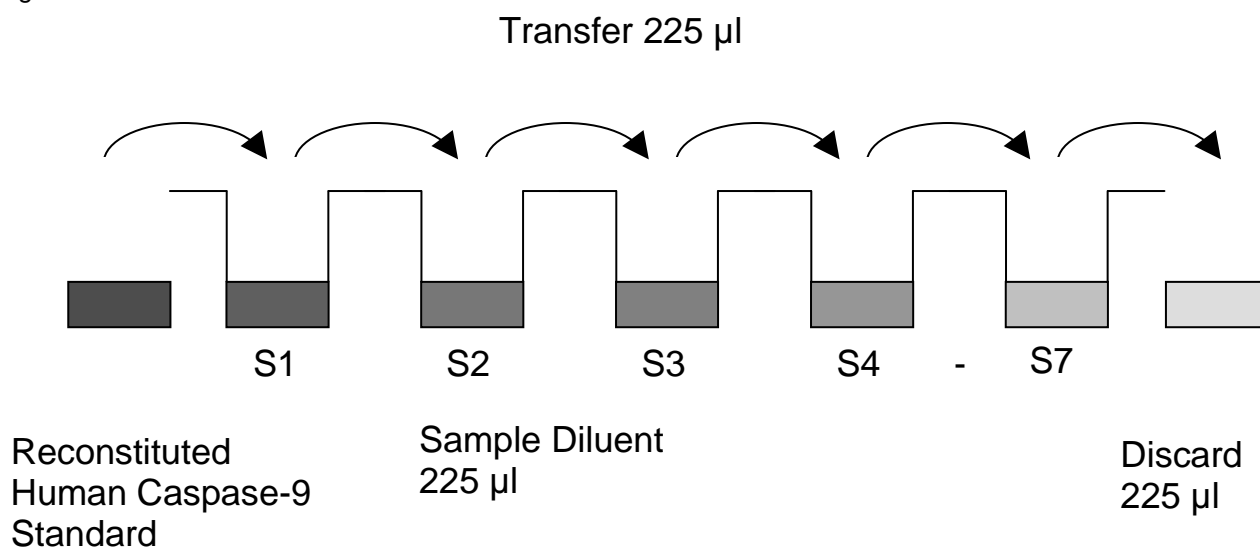
ng/ml).

Pipette 225 µl of this dilution into the second tube, labelled S2, and mix thoroughly before the next transfer.

Repeat serial dilutions 5 more times thus creating the points of the standard curve (see Figure 6).

Sample Diluent serves as blank.

Figure 6



9.7 Addition of Colour-giving Reagents: Blue-Dye, Green-Dye, Red-Dye

In order to help our customers to avoid any mistakes in pipetting Platinum ELISAs, eBioscience offers a tool that helps to monitor the addition of even very small volumes of a solution to the reaction well by giving distinctive colours to each step of the ELISA procedure.

This procedure is optional, does not in any way interfere with the test results, and is designed to help the customer with the performance of the test, but can also be omitted, just following the instruction booklet.

Alternatively, the dye solutions from the stocks provided (**Blue-Dye, Green-Dye, Red-Dye**) can be added to the reagents according to the following guidelines:

1. Diluent:

Before standard and sample dilution add the **Blue-Dye** at a dilution of 1:250 (see table below) to the appropriate diluent (1x) according to the test protocol. After addition of **Blue-Dye**, proceed according to the instruction booklet.

5 ml Sample Diluent	20 µl Blue-Dye
12 ml Sample Diluent	48 µl Blue-Dye
50 ml Sample Diluent	200 µl Blue-Dye

2. Detection Antibody: Before dilution of the concentrated Detection antibody, add the **Green-Dye** at a dilution of 1:100 (see table below) to the Assay Buffer (1x) used for the final antibody dilution. Proceed after addition of **Green-Dye** according to the instruction booklet: Preparation of Detection Antibody.

3 ml Assay Buffer (1x)	30 µl Green-Dye
6 ml Assay Buffer (1x)	60 µl Green-Dye

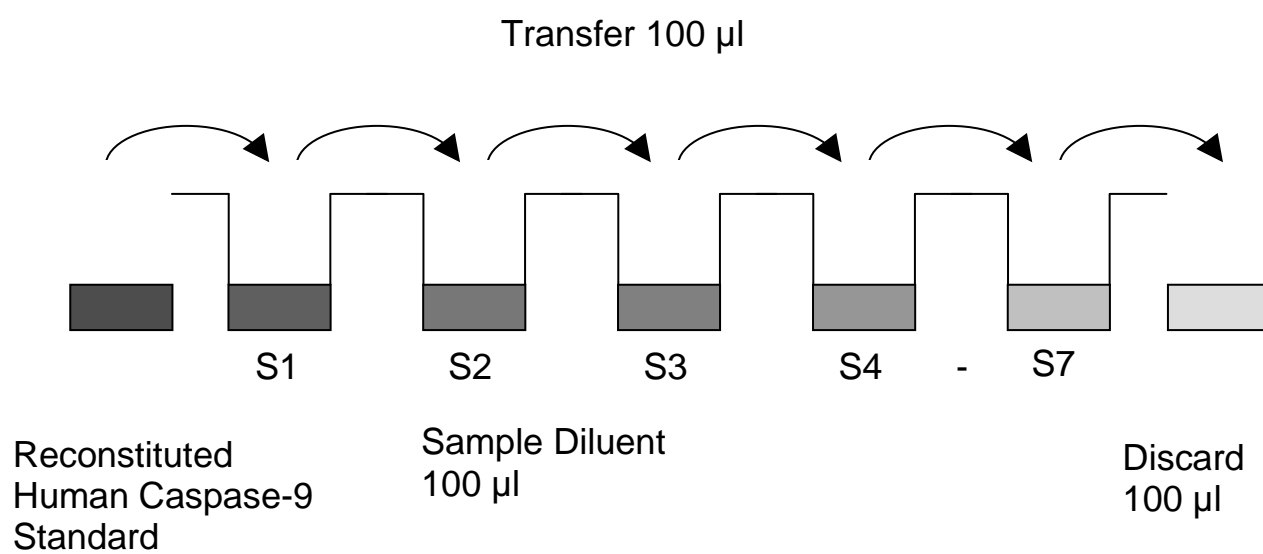
3. Anti-rabbit-IgG-HRP: Before dilution of the concentrated anti-rabbit-IgG-HRP, add the **Red-Dye** at a dilution of 1:250 (see table below) to the Assay Buffer (1x) used for the final anti-rabbit-IgG-HRP dilution. Proceed after addition of **Red-Dye** according to the instruction booklet: Preparation of anti-rabbit-IgG-HRP.

6 ml Assay Buffer (1x)	24 µl Red-Dye
12 ml Assay Buffer (1x)	48 µl Red-Dye

10 Test Protocol

- a. For cell lysis follow the cell lysate protocol (see 6.1):
- b. Determine the number of microwell strips required to test the desired number of samples plus appropriate number of wells needed for running blanks and standards. Each sample, standard, blank and optional control sample should be assayed in duplicate. Remove extra microwell strips from holder and store in foil bag with the desiccant provided at 2°-8°C sealed tightly.
- c. Wash the microwell strips twice with approximately 400 µl **Wash Buffer** per well with thorough aspiration of microwell contents between washes. Allow the Wash Buffer to sit in the wells for about **10 – 15 seconds** before aspiration. Take care not to scratch the surface of the microwells.
After the last wash step, empty wells and tap microwell strips on absorbent pad or paper towel to remove excess Wash Buffer. Use the microwell strips immediately after washing. Alternatively microwell strips can be placed upside down on a wet absorbent paper for not longer than 15 minutes. **Do not allow wells to dry.**
- d. **Standard dilution on the microwell plate** (Alternatively the standard dilution can be prepared in tubes - see 9.6.1):
Add 100 µl of Sample Diluent in duplicate to all **standard wells**.
Pipette 100 µl of prepared **standard** (see Preparation of Standard 9.6, concentration = 200 ng/ml) in duplicate into well A1 and A2 (see Table 1). Mix the contents of wells A1 and A2 by repeated aspiration and ejection (concentration of standard 1, S1 = 100 ng/ml), and transfer 100 µl to wells B1 and B2, respectively (see Figure 7). Take care not to scratch the inner surface of the microwells. Continue this procedure 5 times, creating two rows of human Caspase-9 standard dilutions ranging from 100.0 to 1.6 ng/ml. Discard 100 µl of the contents from the last microwells (G1, G2) used.

Figure 7



In case of an **external standard dilution** (see 9.6.1), pipette 100 µl of these standard dilutions (S1 - S7) in the standard wells according to Table 1.

Table 1

Table depicting an example of the arrangement of blanks, standards and samples in the microwell strips:

	1	2	3	4
A	Standard 1 (100.0 ng/ml)	Standard 1 (100.0 ng/ml)	Sample 1	Sample 1
B	Standard 2 (50.0 ng/ml)	Standard 2 (50.0 ng/ml)	Sample 2	Sample 2
C	Standard 3 (25.0 ng/ml)	Standard 3 (25.0 ng/ml)	Sample 3	Sample 3
D	Standard 4 (12.5 ng/ml)	Standard 4 (12.5 ng/ml)	Sample 4	Sample 4
E	Standard 5 (6.3 ng/ml)	Standard 5 (6.3 ng/ml)	Sample 5	Sample 5
F	Standard 6 (3.1 ng/ml)	Standard 6 (3.1 ng/ml)	Sample 6	Sample 6
G	Standard 7 (1.6 ng/ml)	Standard 7 (1.6 ng/ml)	Sample 7	Sample 7
H	Blank	Blank	Sample 8	Sample 8

- e. Add 100 µl of **Sample Diluent** in duplicate to the **blank wells**.
- f. Add 50 µl of **Sample Diluent** to the **sample wells**.
- g. Add 50 µl of each **sample** in duplicate to the **sample wells**.
- h. Prepare **Detection Antibody** (see Preparation of Detection Antibody 9.4).
- i. Add 50 µl of **Detection Antibody** to all wells.
- j. Cover with an adhesive film and incubate at room temperature (18 to 25°C) for 2 hours, if available on a microplate shaker set at 400 rpm.
- k. Prepare **anti-rabbit-IgG-HRP** (refer to Preparation of Anti-rabbit-IgG-HRP 9.5).
- l. Remove adhesive film and empty wells. **Wash** microwell strips 3 times according to point c. of the test protocol. Proceed immediately to the next step.
- m. Add 100 µl of diluted **anti-rabbit-IgG-HRP** to all wells, including the blank wells.
- n. Cover with an adhesive film and incubate at room temperature (18° to 25°C) for 1 hour, if available on a microplate shaker set at 400 rpm.
- o. Remove adhesive film and empty wells. **Wash** microwell strips 3 times according to point c. of the test protocol. Proceed immediately to the next step.
- p. Pipette 100 µl of **TMB Substrate Solution** to all wells.
- q. Incubate the microwell strips at room temperature (18° to 25°C) for about 10 min. Avoid direct exposure to intense light.

The colour development on the plate should be monitored and the substrate reaction stopped (see next point of this protocol) before positive wells are no longer properly recordable. Determination of the ideal time period for colour development has to be done individually for each assay.

It is recommended to add the stop solution when the highest standard has developed a dark blue colour. Alternatively the colour

development can be monitored by the ELISA reader at 620 nm. The substrate reaction should be stopped as soon as Standard 1 has reached an OD of 0.9 – 0.95.

- r. Stop the enzyme reaction by quickly pipetting 100 µl of **Stop Solution** into each well. It is important that the Stop Solution is spread quickly and uniformly throughout the microwells to completely inactivate the enzyme. Results must be read immediately after the Stop Solution is added or within one hour if the microwell strips are stored at 2 - 8°C in the dark.
- s. Read absorbance of each microwell on a spectro-photometer using 450 nm as the primary wave length (optionally 620 nm as the reference wave length; 610 nm to 650 nm is acceptable). Blank the plate reader according to the manufacturer's instructions by using the blank wells. Determine the absorbance of both the samples and the standards.

Note: In case of incubation without shaking the obtained O.D. values may be lower than indicated below. Nevertheless the results are still valid.

11 Calculation of Results

- Calculate the average absorbance values for each set of duplicate standards and samples. Duplicates should be within 20 per cent of the mean value.
- Create a standard curve by plotting the mean absorbance for each standard concentration on the ordinate against the human Caspase-9 concentration on the abscissa. Draw a best fit curve through the points of the graph (a 5-parameter curve fit is recommended).
- To determine the concentration of circulating human Caspase-9 for each sample, first find the mean absorbance value on the ordinate and extend a horizontal line to the standard curve. At the point of intersection, extend a vertical line to the abscissa and read the corresponding human Caspase-9 concentration.
- **If instructions in this protocol have been followed samples have been diluted 1:2 (50 µl sample + 50 µl Sample Diluent), the concentration read from the standard curve must be multiplied by the dilution factor (x 2).**
- **Calculation of samples with a concentration exceeding standard 1 may result in incorrect, low human Caspase-9 levels. Such samples require further external predilution according to expected human Caspase-9 values with Sample in order to precisely quantitate the actual human Caspase-9 level.**
- It is suggested that each testing facility establishes a control sample of known human Caspase-9 concentration and runs this additional control with each assay. If the values obtained are not within the expected range of the control, the assay results may be invalid.
- A representative standard curve is shown in Figure 8. This curve cannot be used to derive test results. Each laboratory must prepare a standard curve for each group of microwell strips assayed.

Figure 8

Representative standard curve for human Caspase-9 ELISA. Human Caspase-9 was diluted in serial 2-fold steps in Sample Diluent. Do not use this standard curve to derive test results. A standard curve must be run for each group of microwell strips assayed.

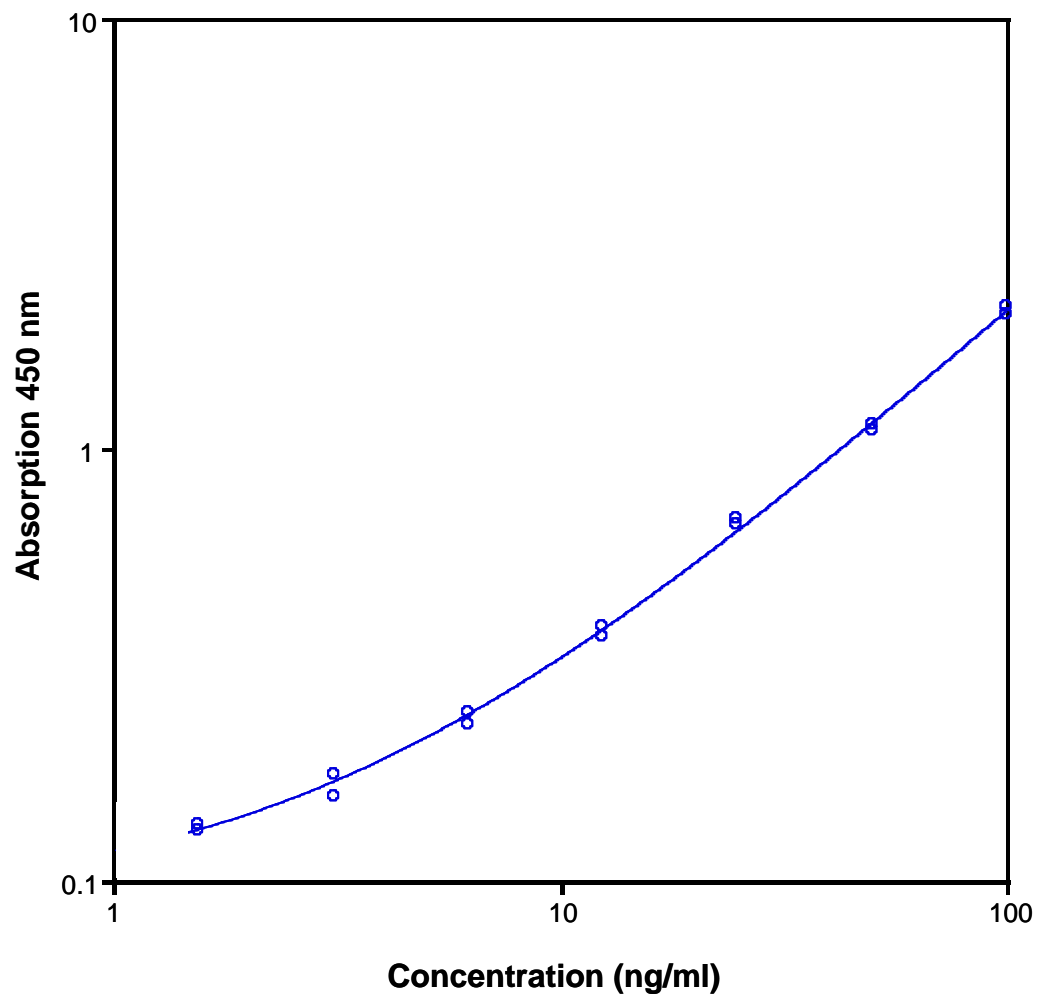


Table 2

Typical data using the human Caspase-9 ELISA

Measuring wavelength: 450 nm

Reference wavelength: 620 nm

Standard	Human Caspase-9 Concentration (ng/ml)	O.D. at 450 nm	Mean O.D. at 450 nm	C.V. (%)
1	100.0	2.056 2.153	2.105	2.7
2	50.0	1.142 1.106	1.124	1.8
3	25.0	0.668 0.695	0.682	2.3
4	12.5	0.388 0.367	0.378	3.2
5	6.3	0.245 0.229	0.237	3.9
6	3.1	0.176 0.156	0.168	7.0
7	1.6	0.135 0.130	0.133	2.2
Blank	0.0	0.087 0.089	0.088	1.6

The OD values of the standard curve may vary according to the conditions of assay performance (e.g. operator, pipetting technique, washing technique or temperature effects). Furthermore shelf life of the kit may affect enzymatic activity and thus colour intensity. Values measured are still valid.

12 Limitations

- Since exact conditions may vary from assay to assay, a standard curve must be established for every run.
- Bacterial or fungal contamination of either screen samples or reagents or cross-contamination between reagents may cause erroneous results.
- Disposable pipette tips, flasks or glassware are preferred, reusable glassware must be washed and thoroughly rinsed of all detergents before use.
- Improper or insufficient washing at any stage of the procedure will result in either false positive or false negative results. Empty wells completely before dispensing fresh wash solution, fill with Wash Buffer as indicated for each wash cycle and do not allow wells to sit uncovered or dry for extended periods.
- The use of radioimmunotherapy has significantly increased the number of patients with human anti-mouse IgG antibodies (HAMA). HAMA may interfere with assays utilizing murine monoclonal antibodies leading to both false positive and false negative results. Serum samples containing antibodies to murine immunoglobulins can still be analysed in such assays when murine immunoglobulins (serum, ascitic fluid, or monoclonal antibodies of irrelevant specificity) are added to the sample.

13 Performance Characteristics

13.1 Sensitivity

The limit of detection of human Caspase-9 defined as the analyte concentration resulting in an absorbance significantly higher than that of the dilution medium (mean plus 2 standard deviations) was determined to be 0.4 ng/ml (mean of 6 independent assays).

13.2 Reproducibility

13.2.1 Intra-assay

Reproducibility within the assay was evaluated in 3 independent experiments. Each assay was carried out with 6 replicates of 8 samples containing different concentrations of human Caspase-9. 2 standard curves were run on each plate. Data below show the mean human Caspase-9 concentration and the coefficient of variation for each sample (see Table 3). The calculated overall intra-assay coefficient of variation was 6.6%.

Table 3

The mean human Caspase-9 concentration and the coefficient of variation for each sample

Sample	Experiment	Mean Human Caspase-9 Concentration (ng/ml)	Coefficient of Variation (%)
1	1	33.6	8
	2	36.4	9
	3	30.8	6
2	1	32.0	10
	2	27.3	12
	3	25.8	9
3	1	20.1	7
	2	20.2	13
	3	15.4	8
4	1	9.4	10
	2	9.7	2
	3	8.1	11
5	1	90.8	4
	2	80.7	6
	3	78.3	1
6	1	44.0	2
	2	40.7	6
	3	41.1	5
7	1	22.2	3
	2	21.3	6
	3	19.2	4
8	1	11.8	3
	2	10.6	7
	3	10.0	8

13.2.2 Inter-assay

Assay to assay reproducibility within one laboratory was evaluated in 3 independent experiments. Each assay was carried out with 6 replicates of 8 samples containing different concentrations of human Caspase-9. 2 standard curves were run on each plate. Data below show the mean human Caspase-9 concentration and the coefficient of variation calculated on 18 determinations of each sample (see Table 4). The calculated overall inter-assay coefficient of variation was 9.0%.

Table 4

The mean human Caspase-9 concentration and the coefficient of variation of each sample

Sample	Mean Human Caspase-9 Concentration (ng/ml)	Coefficient of Variation (%)
1	33.6	8.3
2	28.4	11.5
3	18.6	14.8
4	9.1	9.2
5	83.3	7.9
6	41.9	4.3
7	20.9	7.5
8	10.8	8.7

13.3 Spike Recovery

The spike recovery was evaluated by spiking 4 levels of human Caspase-9 into different cell lysates. Recoveries were determined in 3 independent experiments with 4 replicates each.

The amount of endogenous human Caspase-9 in unspiked lysates was subtracted from the spike values.

The overall mean recovery was 103%.

13.4 Dilution Parallelism

4 samples with different levels of human Caspase-9 were analysed at serial 2 fold dilutions with 4 replicates each.

The recovery ranged from 89% to 114% with an overall recovery of 103% (see Table 5).

Table 5

Sample	Dilution	Expected Human Caspase-9 Concentration (ng/ml)	Observed Human Caspase-9 Concentration (ng/ml)	Recovery of Expected Human Caspase-9 Concentration (%)
1	1:2	--	47.2	--
	1:4	23.6	25.7	108.9
	1:8	12.9	14.1	109.9
	1:16	7.1	7.2	101.5
2	1:2	--	54.6	--
	1:4	27.3	24.3	89.0
	1:8	12.2	11.8	96.7
	1:16	5.9	6.2	104.9
3	1:2	--	47.0	--
	1:4	23.5	26.7	113.7
	1:8	13.4	15.3	114.2
	1:16	7.6	8.0	105.2
4	1:2	--	54.2	--
	1:4	27.1	24.1	88.8
	1:8	12.0	11.5	95.3
	1:16	5.7	6.1	105.9

13.5 Sample Stability

13.5.1 Freeze-Thaw Stability

Aliquots of samples were stored at -20°C and thawed 3 times, and the human Caspase-9 levels determined. A significant decrease of human Caspase-9 immunoreactivity was detected (40% at 3 freeze/thaw cycles). Therefore samples should be stored in aliquots at -20°C and thawed only once.

13.5.2 Storage Stability

Aliquots of samples were stored at -20°C, 2-8°C, room temperature (RT) and at 37°C, and the human Caspase-9 level determined after 48 h. There was no significant loss of human Caspase-9 immunoreactivity detected during storage at -20°C and 2-8°C. A significant loss of human Caspase-9 immunoreactivity was detected during storage at RT (50%) and 37°C (80%) after 48 h.

13.6 Specificity

The interference of circulating factors of the immune system was evaluated by spiking these proteins at physiologically relevant concentrations into a human Caspase-9 positive sample. There was no crossreactivity detected.

13.7 Expected Values

A panel of 40 serum samples from randomly selected donors (males and females) was tested for human Caspase-9. The detected human Caspase-9 levels ranged between n.d. (not detectable) and 11.8 ng/ml.

14 Ordering Information

North America

Technical Support:

Research Products:
888.810.6168
858.642.2058
tech@eBioscience.com

Clinical Products:
877.726.8559
858.642.2058
tech@eBioscience.com

Customer Service:

888.999.1371
858.642.2058
info@eBioscience.com

Fax:

858.642.2046

Europe/International*

Technical Support:

+43 1 796 40 40-120
tech@eBioscience.com

Customer Service:

+43 1 796 40 40-304
info@eBioscience.com

Fax:

+43 1 796 40 40-400



Bender MedSystems GmbH
Campus Vienna Biocenter 2
1030 Vienna, Austria
www.eBioscience.com

* Customers outside North America and Europe may contact their eBioscience distributor listed on our website at www.eBioscience.com/distributors.

15 Reagent Preparation Summary

15.1 Wash Buffer (1x)

Add **Wash Buffer Concentrate** 20x (50 ml) to 950 ml distilled water.

Number of Strips	Wash Buffer Concentrate (ml)	Distilled Water (ml)
1 - 6	25	475
1 - 12	50	950

15.2 Assay Buffer (1x)

Add **Assay Buffer Concentrate** 20x (5 ml) to 95 ml distilled water.

Number of Strips	Assay Buffer Concentrate (ml)	Distilled Water (ml)
1 - 6	2.5	47.5
1 - 12	5.0	95.0

15.3 Lysis Buffer

Add **Lysis Buffer Concentrate** 10x (15 ml) to 135 ml distilled water.

15.4 Detection Antibody

Make a 1:100 dilution of **Detection Antibody** in Assay Buffer (1x):

Number of Strips	Detection Antibody (ml)	Assay Buffer (1x) (ml)
1 - 6	0.03	2.97
1 - 12	0.06	5.94

15.5 Anti-rabbit-IgG-HRP

Make a 1:2000 dilution of **anti-rabbit-IgG-HRP** in Assay Buffer (1x):

Number of Strips	Anti-rabbit-IgG-HRP (ml)	Assay Buffer (1x) (ml)
1 - 6	0.003	5.997
1 - 12	0.006	11.994

15.6 Human Caspase-9 Standard

Reconstitute lyophilized **human Caspase-9 standard** with distilled water. (Reconstitution volume is stated on the label of the standard vial.)

16 Test Protocol Summary

1. Prepare cell lysates according to protocol (see 6.1).
2. Determine the number of microwell strips required.
3. Wash microwell strips twice with Wash Buffer.
4. Standard dilution on the microwell plate: Add 100 µl Sample Diluent, in duplicate, to all standard wells. Pipette 100 µl prepared standard into the first wells and create standard dilutions by transferring 100 µl from well to well. Discard 100 µl from the last wells.
Alternatively external standard dilution in tubes (see 9.6.1): Pipette 100 µl of these standard dilutions in the microwell strips.
5. Add 100 µl Sample Diluent, in duplicate, to the blank wells.
6. Add 50 µl Sample Diluent to sample wells.
7. Add 50 µl sample in duplicate, to designated sample wells.
8. Prepare Detection Antibody.
9. Add 50 µl Detection Antibody to all wells.
10. Cover microwell strips and incubate 2 hours at room temperature (18° to 25°C).
11. Prepare anti-rabbit-IgG-HRP.
12. Empty and wash microwell strips 3 times with Wash Buffer.
13. Add 100 µl diluted anti-rabbit-IgG-HRP to all wells.
14. Cover microwell strips and incubate 1 hour at room temperature (18° to 25°C).
15. Empty and wash microwell strips 3 times with Wash Buffer.
16. Add 100 µl of TMB Substrate Solution to all wells.
17. Incubate the microwell strips for about 10 minutes at room temperature (18° to 25°C).
18. Add 100 µl Stop Solution to all wells.
19. Blank microwell reader and measure colour intensity at 450 nm.

Note: If instructions in this protocol have been followed samples have been diluted 1:2 (50 µl sample + 50 µl Sample Diluent), the concentration read from the standard curve must be multiplied by the dilution factor (x 2).