

ENG

Instructions for Use: HUMAN GDF-15 ELISA

Catalogue number: RBL005R

For research use only!



BioVendor – Laboratorní medicína a.s. Karásek 1767/1, 621 00 Brno, Czech Republic +420 549 124 185 info@biovendor.com sales@biovendor.com www.biovendor.com

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# **HISTORY OF CHANGES**

Previous version	Current version
ENG.001.A	ENG.002.A
Chapter 4: The specimen is washed out and the specifically bound protein is incubated with biotin-labelled detection antibody.	Chapter 4: The specimen is washed out and the specifically bound protein is incubated with Antibody-HRP Conjugate.
Chapter 10: Assay procedure changed	

apter 10: Assay procedure changed

#### **INTENDED USE** 1

Enzyme Immunoassay for the quantitative determination of Growth differentiation factor 15 (GDF15) in human serum and plasma.

#### 2. STORAGE, EXPIRATION

- The kit must be stored at  $2 8^{\circ}$ C.
- The opened components can be stored for one week at  $2 8^{\circ}C$

#### 3. INTRODUCTION

Growth differentiation factor 15 (GDF15) is a member of the TGF<sup>β</sup> superfamily whose expression is increased in response to cellular stress and disease as well as by metformin.[1] Identified as a new heart-derived endocrine hormone that regulates body growth, GDF15 has a local cardioprotective role, presumably due to its autocrine/paracrine properties: antioxidative, antiinflammatory, antiapoptotic. GDF15 expression is highly induced in cardiomyocytes after ischemia/reperfusion and in the heart within hours after myocardial infarction (MI). GDF15 may be a predictive biomarker of adverse cardiac events.[2] Available evidence also suggests that a substantial amount of GDF15 is secreted in various human cancers, such as ovarian cancer. prostate cancer, and breast cancer, among others.[3]

#### **TEST PRINCIPLE** 4.

The microtiter plate is coated with the antibody specifically binding the Growth differentiation factor 15. The human serum or plasma is incubated in the plate with the capture antibody.

The specimen is washed out and the specifically bound protein is incubated with Antibody-HRP Coniugate.

Unbound reagent is then washed out. Horseradish peroxidase (HRP) bound in the complex reacts with the chromogenic substrate (TMB) creating the blue colour. The reaction is stopped by addition of STOP solution (H<sub>2</sub>SO<sub>4</sub>).

The absorbance values are measured at 450 nm (optionally 450/630 nm) and are proportional to the concentration of GDF15 in the specimen. The concentration of GDF15 in unknown samples is determined from the calibration curve which is created by plotting the absorbance values against the standard concentration values.

# 5. PRECAUTIONS

- For research use only
- For professional laboratory use
- The reagents with different lot numbers should not be mixed
- To prevent cross sample contamination, use disposable labware and pipette tips
- To protect laboratory stuff, wear protective gloves and protective clothing
- The substrate solution should remain colourless, keep it protected from light
- The test should be performed at standard laboratory conditions (temperature 25°C ± 2°C).

# 6. REAGENT SUPPLIED

Item	Qty.
Antibody Coated Microtiter Plate	96 wells
Antibody-HRP Conjugate	13 ml
Master Standard (lyophilized)	1 vial
Quality Control A (human serum, lyophilized)	1 vial
Quality Control B (human serum, lyophilized)	1 vial
Dilution Buffer	2x13 ml
Wash Buffer 15x conc.	50 ml
Substrate Solution	13 ml
STOP Solution	13 ml

# 7. MATERIAL REQUIRED BUT NOT SUPPLIED

- Glassware and test tubes
- Microtiter plate washer
- Precision pipettes (various volumes) with tips
- Orbital shaker
- Microtiter plate reader capable of measuring absorbance at 450 nm or 450/630 nm with software for data generation

# 8. PREPARATION OF REAGENTS

Use new pipette tip for pipetting different reagents and samples to prevent cross-contamination. All reagents and samples should be allowed to reach the temperature  $25^{\circ}C \pm 2^{\circ}C$ .

### 8.1 Preparation of Standards

Reconstitute lyophilized Human GDF15 Standard in Dilution Buffer, for the volume information see the Certificate of Analysis. Let it rehydrate for 15 min. The concentration of human GDF15 in Master Standard is 800 pg/ml.

Prepare set of Standard solution as follows:

Use the Master Standard for serial dilution (as below). Mix each tube thoroughly before the next transfer. The Dilution Buffer serves as Blank.

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	Volume of Standard	Dilution Buffer	Concentration
Std1	Standard 800 pg/ml (Iyophilized)	See CoA	800 pg/ml
Std2	300 µl of Std1	300 µl	400 pg/ml
Std3	300 µl of Std2	300 µl	200 pg/ml
Std4	300 µl of Std3	300 µl	100 pg/ml
Std5	300 µl of Std4	300 µl	50 pg/ml
Std6	300 µl of Std5	300 µl	25 pg/ml
Blank	- 0	300 µl	0 pg/ml

#### 8.2 Preparation of Quality Control A and B

Reconstitute the lyophilized human serum Quality Controls with deionized/distilled water, for the volume information see the Certificate of Analysis. Let the QCs rehydrate for 15 min and dilute them 1:10 in Dilution Buffer, prior to use, see Preparation of samples.

#### 8.3 Preparation of Wash Buffer 1x

Prepare a working solution of Wash Buffer by adding 50 ml of Wash Buffer 15x conc. to 700 ml of deionized/ distilled water (dH<sub>2</sub>O). Mix well. Store at 4°C for two weeks or at -20°C for long term storage.

# 9. PREPARATION OF SAMPLES

Human serum or plasma may be used with this assay. For long-term storage the samples should be frozen at minimum -70°C. Lipemic or haemolytic samples may cause false results.

Recommended dilution of samples is 1:10 for healthy individuals, i.e., for singlets 20  $\mu$ l of sample + 180  $\mu$ l of Dilution Buffer, for duplicates 30  $\mu$ l of samples + 270  $\mu$ l of Dilution Buffer, respectively. Recommended dilution of samples is 1:40 for individuals in condition in which is expected higher level of GDF15, i.e., for singlets 5  $\mu$ l of sample + 195  $\mu$ l of Dilution Buffer, for duplicates 10  $\mu$ l of samples + 390  $\mu$ l of Dilution Buffer, respectively.

Do not store the diluted samples.

# **10. ASSAY PROCEDURE**

- 1. Prepare the reagents as described in the previous chapter.
- Pipette 100 μl of set of Standards, Quality Controls, diluted Samples and Dilution Buffer = Blank into each well. Incubate for 1 hour at 25C ±2°C, shaking at 300 rpm.
- 3. Wash the wells 3-times with 1x Wash Buffer (350 µl/well). When finished, tap the plate against the paper towel to remove the liquid completely.
- 4. Pipette 100 μl of Antibody-HRP Conjugate into each well. Incubate for 1 hour at 25°C ±2°C, shaking at 300 rpm.
- 5. Wash the wells as described in point 3.
- 6. Pipette 100 μl Substrate solution, incubate for 20 min, at 25°C ±2°C. Avoid exposure to the light during this step.
- 7. Pipette 100 µl of STOP solution.
- 8. Read the signal at 450 or 450/630 nm within 15 min.

# **11. PERFORMANCE CHARACTERISTICS**

Samples used in the tests were diluted 1:10 as recommended and assayed. The results are multiplied by the dilution factor.

#### 11.1 Sensitivity

The limit of detection, defined as a concentration of human GDF15 giving absorbance higher than absorbance of blank + 3 standard deviations, is better than 6 pg/ml of sample.

#### **11.2 Precision**

#### 11.2.1 Intra-assay

Sample	Mean (pg/ml)	SD	CV (%)
1	1649	158	10
2	1696	54	3

#### 11.2.2 Inter-assay (Run - to - run)

Sample	Mean (pg/ml)	SD	CV (%)
1	841	30	4
2	1604	61	4

### 11.3 Accuracy

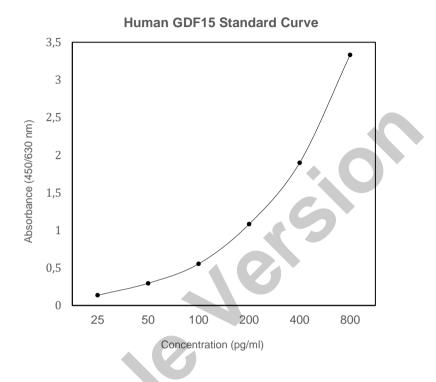
### **11.3.1 Dilution linearity**

Sample	Dilution	Measured concentration (pg/ml)	Expected concentration (pg/ml)	Yield (%)
		1818	-	-
4	2x	825	909	91
1	4x	415	454	91
	8x	186	227	82
		2871	-	-
2	2x	1460	1436	102
2	4x	711	718	99
	8x	348	359	97
3.2 Spiking Red	covery		5	

## 11.3.2 Spiking Recovery

# 12. CALCULATION

The standard curve needs to be measured in every test. Most of the microplate reader can automatically calculate the analyte concentration using 4-parameter algorithm or alternative functions to fit the standard points properly. The concentrations need to be multiplied by the dilution factor, either automatically by reader or manually.



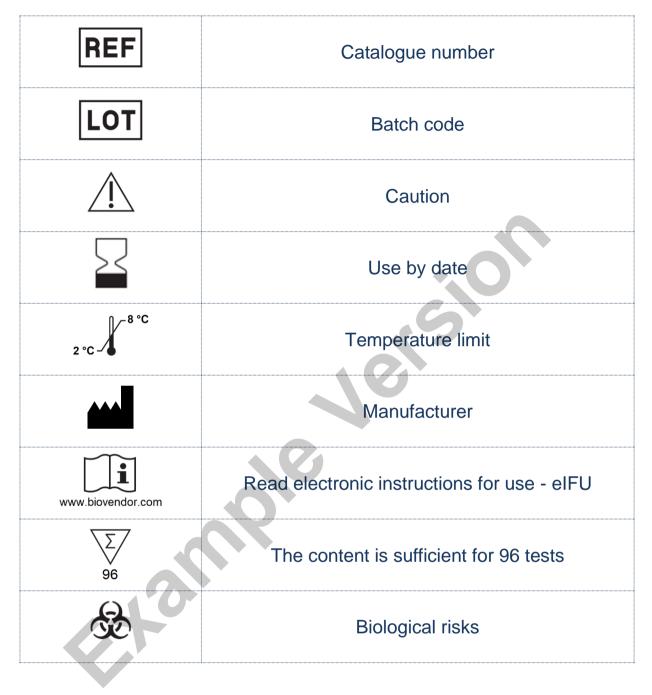
# 13. REFERENCES

<sup>1</sup> Wang D, Day EA, Townsend LK, Djordjevic D, Jørgensen SB, Steinberg GR. GDF15: emerging biology and therapeutic applications for obesity and cardiometabolic disease. Nat Rev Endocrinol. 2021 Oct;17(10):592-607. doi: 10.1038/s41574-021-00529-7. Epub 2021 Aug 11. PMID: 34381196.

<sup>2</sup> Rochette L, Dogon G, Zeller M, Cottin Y, Vergely C. GDF15 and Cardiac Cells: Current Concepts and New Insights. Int J Mol Sci. 2021 Aug 18;22(16):8889. doi: 10.3390/ijms22168889. PMID: 34445593; PMCID: PMC8396208.

<sup>3</sup> Li S, Ma YM, Zheng PS, Zhang P. GDF15 promotes the proliferation of cervical cancer cells by phosphorylating AKT1 and Erk1/2 through the receptor ErbB2. J Exp Clin Cancer Res. 2018 Apr 10;37(1):80. doi: 10.1186/s13046-018-0744-0. PMID: 29636108; PMCID: PMC5894198.

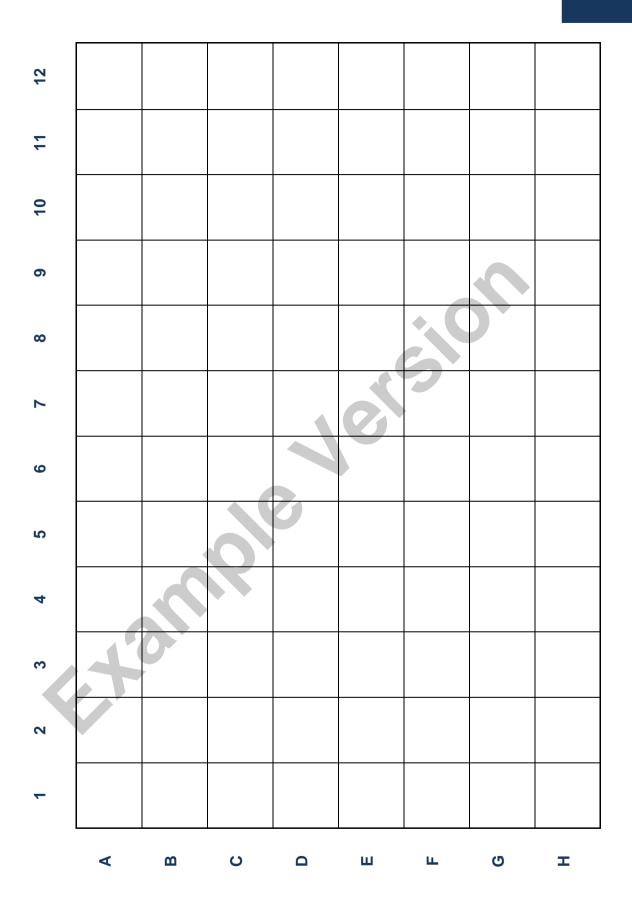
# **14. EXPLANATION OF SYMBOLS**



# **15. ASSAY PROCEDURE - SUMMARY**

Add 100 μL of Standards, diluted QCs and Samples to the wells Incubate for 1 hour at 25°C, shaking at 300 rpm 3-times wash the wells (350 μL/well) Add 100 μL of HRP-conjugated Antibody to the wells Incubate for 1 hour at 25°C, shaking at 300 rpm 3-times wash the wells (350 μL/well) Add 100 μL of Substrate Solution to the wells Incubate for 20 min in the dark at 25°C, NO shaking Add 100 μL of Stop Solution to the wells

Read the signal at 450 nm (450/630 nm) within 15 min



# BioVendor R&D®



BioVendor – Laboratorní medicína a.s. Karásek 1767/1, 621 00 Brno, Czech Republic +420 549 124 185 info@biovendor.com sales@biovendor.com www.biovendor.com