

HUMAN SERUM AMYLOID A (SAA) ELISA

Life Diagnostics, Inc., Catalog Number: SAA-20

FOR RESEARCH USE ONLY

INTRODUCTION

SAA is an acute phase protein of approximately 12.5 kDa that is expressed in the liver and circulates in blood. Serum levels can increase several hundred-fold during inflammation and disease.

PRINCIPLE OF THE ASSAY

The assay uses two different peptide-specific human SAA antibodies; one for solid phase immobilization and the other, conjugated to horseradish peroxidase (HRP), for detection. Standards and diluted samples are incubated in the microtiter wells, together with HRP conjugate for one hour. SAA molecules, if present, are sandwiched between the immobilization and detection antibodies. The wells are then washed to remove unbound HRP-conjugate. TMB is added and incubated for 20 minutes. If SAA is present, a blue color develops. Color development is stopped by addition of Stop solution, changing the color to yellow. Absorbance is measured at 450 nm. The concentration of SAA is proportional to absorbance and is derived from a standard curve.

MATERIALS AND COMPONENTS

Materials provided with the kit:

- SAA antibody coated 96-well plate (12 x 8-well strips)
- HRP Conjugate, 11 ml
- SAA stock (lyophilized)
- 20x Wash solution: TBS50-20, 50 ml
- Diluent: YD50-1, 50 ml
- TMB: TMB11-1, 11 ml
- Stop solution: SS11-1, 11 ml

Materials required but not provided:

- Pipettors and tips
- Distilled or deionized water
- Polypropylene or glass tubes
- Vortex mixer
- Absorbent paper or paper towels
- Plate incubator/shaker
- Plate washer
- Plate reader capable of measuring absorbance at 450 nm.
- Curve fitting software

STORAGE

The SAA stock should be stored at or below -20°C for optimum stability. The remainder of the kit should be stored at 4°C and the microtiter plate should be kept in a sealed bag with desiccant. Kits will remain stable for six months from the date of purchase.

GENERAL INSTRUCTIONS

1. All reagents should be allowed to reach room temperature before use.
2. Reliable and reproducible results will be obtained when the assay is carried out with a complete understanding of the instructions and with adherence to good laboratory practice.
3. The wash procedure is critical. Insufficient washing will result in poor precision and falsely elevated absorbance readings.
4. Laboratory temperature will influence absorbance readings. Our ELISA kits are calibrated using shaking incubators set at 150 rpm and 25°C. Performance of the assay at lower temperatures will result in lower absorbance values.

WASH SOLUTION PREPARATION

The wash solution is provided as a 20x stock. Prior to use, dilute the contents of the bottle (50 ml) with 950 ml of distilled or deionized water.

STANDARD PREPARATION

1. Reconstitute the stock with deionized or distilled water as described on the vial label. Mix gently several times over a period of 5 minutes.
2. Label 6 polypropylene tubes as 25, 12.5, 6.25, 3.125, 1.56 and 0.78 ng/ml.
3. Into the tube labeled 25 ng/ml, pipette the volume of diluent detailed on the stock vial label. Then add the indicated volume of stock and mix. This provides the 25 ng/ml standard.
4. Dispense 250 μ l of diluent into the tubes labeled 12.5, 6.25, 3.125, 1.56 and 0.78 ng/ml.
5. Prepare the 12.5 ng/ml standard by mixing 250 μ l of the 25 ng/ml SAA standard with 250 μ l of diluent in the tube labeled 12.5 ng/ml.
6. Similarly prepare the remaining standards by serial dilution. Unused reconstituted stock should be stored frozen at or below -20°C if future use is intended (it is stable for at least one week at 4°C).

SAMPLE PREPARATION

SAA levels range from \approx 1 to >250 μ g/ml. Optimal dilutions must therefore be determined empirically. However, at Life Diagnostics, we found that an initial dilution of 10,000-fold worked well for most samples.

A 10,000-fold dilution can be obtained as follows.

1. For each sample, dispense 495 μ l of diluent into two microcentrifuge tubes.
2. Mix 5 μ l of serum or plasma with 495 μ l of diluent in the first tube. This gives a 100-fold dilution.
3. Mix 5 μ l of the 100-fold diluted sample with 495 μ l of diluent in the second tube. This gives a 10,000-fold dilution.

For technical assistance please email us at techsupport@lifediagnosics.com

ASSAY PROCEDURE

1. Secure the desired number of 8-well strips in the holder. Unused strips should be stored in the re-sealed bag with desiccant at 2-8°C for future use.
2. Dispense 100 µl of standards and samples into the wells (we recommend that standards and samples be run in duplicate).
3. Add 100 µl of HRP-conjugate into each well.
4. Incubate on a plate shaker at 150 rpm and 25°C for one hour.
5. Empty and wash the microtiter wells 5x with 1x wash solution using a plate washer (400 µl/well).
6. Strike the wells sharply onto absorbent paper or paper towels to remove all residual droplets.
7. Dispense 100 µl of TMB into each well.
8. Incubate on an orbital micro-plate shaker at 150 rpm at 25°C for 20 minutes.
9. After 20-minutes, stop the reaction by adding 100 µl of Stop solution to each well.
10. Gently mix. It is important to make sure that all the blue color changes to yellow.
11. Read absorbance at 450 nm with a plate reader within 5 minutes.

CALCULATION OF RESULTS

1. Using curve fitting software, construct a standard curve by plotting absorbance values of the standards versus concentration.
2. Fit the standard curve to an appropriate model and derive the concentration of the samples (we recommend using a single site, total and nonspecific binding model).
3. Multiply the derived concentration by the dilution factor to determine the actual concentration in the serum sample.
4. If the A₄₅₀ values of samples fall outside the standard curve, samples should be diluted appropriately and re-tested.

TYPICAL STANDARD CURVE

A typical standard curve with absorbance at 450 nm on the Y-axis against SAA concentrations on the X-axis is shown below. This curve is for illustration only.

SAA (ng/ml)	A ₄₅₀
25	3.182
12.5	1.870
6.25	1.139
3.125	0.609
1.56	0.384
0.78	0.252

