

исх. № 16.02.2021/2
от 16.02.2021

Письмо об Авторизации

Настоящим письмом ООО «Витротест Биореагент», производитель иммуноферментных тест-систем под торговой маркой «Vitrotest®», подтверждает, что компания Sanmedico SRL является авторизованным дистрибьютором нашей компании на территории - Республики Молдова, обладающим правами по продаже продвижению и участию в тендерных торгах с нашей продукцией.

Директор ООО "Витротест Биореагент"



к.м.н Николаенко И.В.



DECLARATION OF CONFORMITY №UA-TK030

Manufacturer: Vitrotest Bioreagent LLC
State registration № 42149820

Legal address: M.Boychuka 18b, of.56, Kyiv 01103 Ukraine
Manufacturer's address: Kurortnaya 11, Kyiv, 04075, Ukraine

Description of the product:

Name	Catalog Number
ELISA test-kit for the determination of antibodies to <i>Giardia lamblia</i> (<i>intestinalis</i>) «Vitrotest Anti-Lamblia»	TK030

Classification:
According to medical devices technical regulation for *in vitro* diagnostics, approved by Cabinet of Ministers decree from 02.10.2013 №754

Is not a part of A and B lists, is not a device for self-testing, not for performance assessment.

Conformity assessment procedure: Annex 3 of medical devices technical regulation for *in vitro* diagnostics, approved by Cabinet of Ministers decree from 02.10.2013 №754

Vitrotest Bioreagent declares the execution of all demands regarding the device, that was mentioned above, according to medical devices technical regulation for *in vitro* diagnostics, approved by Cabinet of Ministers decree from 02.10.2013 №754, and the requirements of further regulations:

ДСТУ EN ISO 13485:2018
ДСТУ EN ISO 14971:2015
ДСТУ EN 13641:2015
ДСТУ EN ISO 15223-1:2018 (EN ISO 15223-1:2016, IDT; ISO 15223-1:2016, Corrected version 2017-03, IDT)
ДСТУ EN ISO 23640:2015 (EN ISO 23640:2015, IDT; ISO 23640:2011, IDT)

The declaration is made under sole responsibility of the manufacturer.

Date of issue: 31.10.2019
Validity of declaration till: 31.10.2024

Director



Ihor Nikolaienko, Ph.D.

DECLARATION OF CONFORMITY №UA-TK058

Manufacturer: Vitrotest Bioreagent LLC
State registration № 42149820

Legal address: M.Boychuka 18b, of.56, Kyiv 01103 Ukraine
Manufacturer's address: Kurortnaya 11, Kyiv, 04075, Ukraine

Description of the product:

Name	Catalog Number
ELISA test-kit for the determination of antibodies to <i>Toxocara canis</i> «Vitrotest Anti-Toxocara»	TK058

Classification:
According to medical devices technical regulation for *in vitro* diagnostics, approved by Cabinet of Ministers decree from 02.10.2013 №754

Is not a part of A and B lists, is not a device for self-testing, not for performance assessment.

Conformity assessment procedure: Annex 3 of medical devices technical regulation for *in vitro* diagnostics, approved by Cabinet of Ministers decree from 02.10.2013 №754

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Director



Ihor Nikolaienko, Ph.D.



СЕРТИФІКАТ

CERTIFICATE * CERTIFICAT * ZERTIFIKAT * СЕРТИФИКАТ * CERTIFICADO

ОРГАН СЕРТИФІКАЦІЇ СИСТЕМ УПРАВЛІННЯ
ДП «УКРМЕТРТЕСТСТАНДАРТ»
ЗАСВІДЧУЄ, ЩО

СИСТЕМА УПРАВЛІННЯ ЯКІСТЮ

ТОВАРИСТВА З ОБМЕЖЕНОЮ ВІДПОВІДАЛЬНІСТЮ «ВІТРОТЕСТ БІОРЕАГЕНТ»

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код ЄДРПОУ 42149820

СТОСОВНО
розроблення та виробництва тест-систем імуноферментних

**ВІДПОВІДАЄ ВИМОГАМ
ДСТУ EN ISO 13485:2018
(EN ISO 13485:2016, IDT; ISO 13485:2016, IDT)**

Сертифікат № UA.C.378–19 в Реєстрі Органу сертифікації
zareєстрований " 25 " листопада 2019 року
чинний до " 24 " листопада 2022 року

Заступник керівника
Органу сертифікації



В.Д. Ример



ДЕРЖАВНЕ ПІДПРИЄМСТВО «ВСЬУКРАЇНСЬКИЙ ДЕРЖАВНИЙ НАУКОВО-ВИРОБНИЧИЙ ЦЕНТР
СТАНДАРТИЗАЦІЇ, МЕТРОЛОГІЇ, СЕРТИФІКАЦІЇ ТА ЗАХИСТУ ПРАВ СПОЖИВАЧІВ»
(ДП «УКРМЕТРТЕСТСТАНДАРТ»)

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Атестат акредитації НААУ № 80020

№ 80020
ДСТУ EN ISO/IEC 17021-1

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Vitrotest® Anti-Lambli

ELISA test-kit for the detection of antibodies to *Giardia lamblia* (*intestinalis*)

TK030

96 tests

1. INTENDED USE

ELISA test-kit «Vitrotest Anti-Lambli» is an enzyme linked immunosorbent assay (ELISA) for the detection of antibodies to *Giardia lamblia* (*intestinalis*) in human serum or plasma. The test-kit might be applied for the ELISA using both automatic pipettes and standard equipment as well as open system automated ELISA analyzers.

2. CLINICAL VALUE

Giardiasis is a parasitic infestation caused by *Giardia lamblia* (*Giardia intestinalis*) that occurs in latent and manifest forms and causes dysfunction of the intestine. Human giardiasis has been reported from all five continents and most countries in the world. The prevalence rate of infection vary between <1 and 50 % and occurs mainly in developing regions where basic sanitation is lacking, Giardia infections are almost universal by the age of two years. On the contrary, in developed countries the prevalence of giardiasis is only 3–7% and the disease is distributed among all age groups but mainly among pre-school children.

The main route of transmission is faecal/oral with giardia having a simple, two-stage life-cycle. After the host ingests cysts the trophozoites emerge from the cysts in the duodenum and attach themselves to the small intestinal mucosa. Since trophozoites can only localize onto the duodenal mucosa they mechanically block the mucous membrane and disturb the digestion and motor activity of the small intestine. Giardias cause absorption deterioration of fat, carbohydrates, vitamins C and B12 and secondary bacterial infection. Symptoms of giardiasis include: diarrhea, fatigue, edema, lethargy, weight loss, decreased appetite, paleness, and muscle twitching. Gastro-intestinal giardiasis manifests mainly in the form of enterocolitis with catarrhal symptoms.

Multiple facts suggest the involvement of humoral immune responses in elimination of *G.lambli*. The human experimental infection model showed that the level of IgM was increased significantly from 14-21 days after infection and that the levels tended to fall after therapy. However, the levels of IgG remained elevated after successful treatment and that IgA response was more similar to that of IgM.

The diagnosis of giardiasis is traditionally based upon clinical history, symptoms, presence of cysts in faeces or trophozoites in material retrieved from the small intestine by duodenal aspiration or duodenal biopsy. Alternative methods to the routine microscopic examination are detection of *G.lambli* antigen in faeces and the measurement of levels of specific anti-Giardia antibodies in patients' serum. Serologic testing is now regarded as a useful complement in the diagnosis of giardiasis. Besides contributing to the aid of clinical diagnosis, it could help in the understanding of the status of immune responses for each individual and for epidemiological purposes.

3. PRINCIPLE OF THE TEST

«Vitrotest Anti-Lambli» ELISA is a solid phase, indirect ELISA method for detection of antibodies to *Giardia lamblia* (*intestinalis*) in a two step incubation procedure. Microwells are coated with purified antigens of *G.lambli*. During the first incubation step, the specific antibodies to *G.lambli*, if present, will be bound to the solid phase precoated antigens. The wells are washed to remove unbound antibodies, leaving only the specific antigen-antibody complexes. Secondary antibodies (anti-IgG, anti-IgA and anti-IgM) which are conjugated to horseradish peroxidase (HRP) added next and bind to the immune complexes on the solid phase. Chromogen solutions containing 3,3',5,5'-tetramethylbenzidine (TMB) and hydrogen peroxide are added. TMB is catalysed by the HRP to produce a blue colour product that changes to yellow after adding stop solution. Absorbance at 450/620-695 nm is read using a plate reader. The density of yellow colouration is directly proportional to the amount of the antibodies present in the sample.

4. MATERIALS AND EQUIPMENT

4.1. Composition of the test-kit

ELISA STRIPS	1x96 wells	Microplate (12 strips x 8 wells) Each well is coated with purified <i>G. lamblia</i> antigens. The wells can be separated.
CONTROL +	1x0.3 ml	Positive control Solution of human specific antibodies to <i>G. lamblia</i> and preservative (pink).
CONTROL -	1x0.5 ml	Negative control Negative human serum and preservative (yellow).
SAMPLE DILUENT	1x12 ml	Sample diluent Buffer solution with detergent and preservative (violet).

CONJUGATE SOLUTION	1x12 ml	Conjugate solution (ready to use) Monoclonal antibodies to human IgG, IgA and IgM conjugated to HRP, buffer, stabilizers and preservative (green).
TMB SOLUTION	1x12 ml	TMB solution (ready to use) TMB, H ₂ O ₂ , stabilizers and preservative (colourless).
WASH TWEEN 20X	1x50 ml	Washing solution Tw20 (20x concentrated) 20X concentrate of PBS buffer with Tween-20 and NaCl (colourless)
STOP SOLUTION	1x12 ml	Stop Solution (ready to use) 0.5 M H ₂ SO ₄ (colourless).

Adhesive films (2), sera identification plan (1) and instruction for use.

4.2. Material required but not provided

- Variable volume automatic pipettes (10µl–1000µl) and disposable pipette tips;
- plate reader (single wavelength 450 nm or dual wavelength 450/620–695 nm);
- volumetric laboratory glassware (10–1000ml);
- distilled/DI water;
- incubator thermostatically controlled at 37°C;
- automatic/semiautomatic plate washer;
- appropriate waste containers for potentially contaminated materials;
- timer;
- absorbent paper;
- disposable gloves;
- disinfectants;
- protective clothes.

5. PRECAUTIONS AND SAFETY

5.1. Precautions

The ELISA assays are time and temperature sensitive. Strictly follow the test procedure and do not modify it.

- do not use expired reagents;
- do not use for analyses and do not mix reagents from different lots or from test-kits of different nosology as well as other manufacturer's reagents with Vitrotest® kits;

*Note: it is possible to use **WASH TWEEN 20X**, **TMB SOLUTION** and **STOP SOLUTION** from other Vitrotest® ELISA kits.*

- close reagents after use only with appropriate caps;
- control the filling and full aspiration of the solution in the wells;
- use a new tip for each sample and reagent;
- **avoid exposure** of kit reagents to direct sunlight;
- **TMB SOLUTION** must be colourless before use. If **TMB SOLUTION** is blue or yellow it cannot be used. Avoid any contact of **TMB SOLUTION** with metals or metal ions. Use glassware thoroughly washed and rinsed with distilled/DI water;
- never use the same glassware for **CONJUGATE SOLUTION** and **TMB SOLUTION**.

The manufacturer is not responsible or liable for any incorrect results and/or incidents taking place as a result of any violation of the instruction. The manufacturer is not responsible for visual readings of samples (without using a plate reader).

5.2. Safety

- all reagents included in the kit are intended for in vitro diagnostic use only;
- the test-kit is designed for use by qualified personnel only;
- disposable gloves and safety glasses must be worn at all times while performing analysis;
- never eat, drink, smoke or apply cosmetics in the assay laboratory;
- never pipette solutions by mouth;
- positive control does not contain of human origin components;
- negative control of test-kit «Vitrotest Anti-Lamblia» was tested and found negative for anti-HIV1/2, anti-HCV, anti-T.pallidum antibodies and HBsAg. Nevertheless, all controls and patient samples should be regarded and handled as potentially infectious;
- the liquid waste must be inactivated, for example, with hydrogen peroxide solution at the final concentration of 6% for 3 hours at room temperature, or with sodium hypochlorite at the final concentration of 5% for 30 minutes, or with other approved disinfectants;
- the solid waste must be inactivated by autoclaving at 121°C for 1 hour;
- dispose of inactivated waste in accordance of national laws and regulations;
- do not autoclave the solutions that contain sodium azide or sodium hypochlorite;
- some components of the test-kit contain low concentrations of harmful compounds and

could cause irritation of the skin and the mucosa. In the case of contact of [TMB SOLUTION] [STOP SOLUTION] or [CONJUGATE SOLUTION] with skin or mucosa, the place of contact should be immediately rinsed with large amounts of water;

- in case of spilling of solutions that do not contain acid, e.g. sera, rinse the surface with disinfectant, then dry it with absorbent paper. In other case acid first must be neutralized by sodium bicarbonate and then wiped out as described above.

6. STORAGE AND STABILITY

Reagents are stable until stated expiration date on the label when stored refrigerated (2-8°C). Do not freeze. The kit should be shipped at 2-8°C. Single transportation at the temperature up to 23°C for two days is acceptable.

7. SPECIMEN COLLECTION

The fresh serum or plasma samples can be stored for 3 days at 2-8 °C or frozen for longer periods at -20 – -70°C. Frozen samples must be thawed and kept at room temperature for at least 30 minutes before use. Do not use preheated samples. Mix thawed samples thoroughly to homogeneity. Avoid repeated freezing/thawing. Samples containing aggregates must be clarified by centrifugation (3000rpm for 10-15min). Do not use hyperlipemic, hyperhaemolysed or contaminated by microorganisms serum specimens. The presence of bilirubin up to concentration of 0.21 mg/ml (361.8 µM/l), haemoglobin up to concentration of 10 mg/ml and triglycerides up to concentration of 10 mg/ml (11.3 mM/l) are allowed.

8. REAGENT PREPARATION

It is very important to keep all test components for at least 30 min at room temperature (18-25 °C) before the assay!

8.1. [ELISA STRIPS] preparation

Before opening the bag with ELISA STRIPS, keep it at room temperature for 30 minutes to avoid water condensation inside the wells. Open the vacuum bag and take out the necessary number of the wells. Once opened the bag with the remaining strips must be resealed with zip-lock immediately and kept refrigerated at 2-8°C for no more than 3 months.

8.2. Washing solution preparation

Check the [WASH TWEEN 20X] for the presence of salt crystals. If crystals have formed, re-solubilise by warming at 37°C, until crystals dissolve (15-20min). Dilute the [WASH TWEEN 20X] 1:20 (1+19) with distilled/DI water before use. For example, 4 ml concentrate + 76 ml water is sufficient for 8 wells. Once diluted it is stable at 2-8°C for 1 week.

9. ASSAY PROCEDURE

- 9.1. Take out from the protective bag the support frame and the necessary number of the wells (the number of specimens + 4 for controls). Place the wells into the frame. Wells with the controls must be included in every test.
- 9.2. Complete the sera identification plan.
- 9.3. Prepare washing solution (see 8.2.).
- 9.4. Dispense 90 µl of [SAMPLE DILUENT] into each well.
- 9.5. Dispense 10 µl of controls and patient samples into the wells in the following order: A1 – [CONTROL +], B1, C1 and D1 – [CONTROL -], other wells – patient samples. Mix gently to avoid foaming. The colour of the sample diluent changes from violet to blue.
- 9.6. Cover strips with an adhesive film and incubate for 30 min at 37°C.
- 9.7. At the end of the incubation period, remove and discard the adhesive film and wash the well 5 times with automatic washer or 8-channel pipette as follows:
 - aspirate the contents of all wells into a liquid waste container and add immediately a minimum of 300 µl of diluted washing solution to each well;
 - soak each well for 30 seconds between each wash cycle;
 - aspirate again. The residual volume must be lower than 5 µl.
 - repeat the washing step 4 times;
 - after the final washing cycle, turn down the plate onto an absorbent paper and tap it to remove any residual buffer.
- 9.8. Dispense 100 µl of [CONJUGATE SOLUTION], per well. Cover strips with a new adhesive film, incubate for 30 min at 37°C.
- 9.9. At the end of the incubation period, remove and discard the adhesive film and wash the wells five times as described above (see 9.7).
- 9.10. Dispense 100 µl [TMB SOLUTION] into all wells. Do not touch the walls and bottoms of the wells to avoid contamination.
- 9.11. Incubate the strips for 30 minutes at room temperature (18-25°C) in the dark. Do not use adhesive film in this step.

9.12. Dispense 100 µl [STOP SOLUTION] into all wells in the same order and at the same rate as for [TMB SOLUTION].

9.13. Read the optical density (OD) of the wells at 450/620-695 nm using a microplate reader within 5 minutes after adding the [STOP SOLUTION]. Pay attention to the cleanness of the plate bottom and absence of bubbles in the wells before reading.

Measurement in the single-wave procedure at 450 nm is possible. Reserve blank well to adjust spectrophotometer in such analysis. Only [TMB SOLUTION] and [STOP SOLUTION] must be added in blank well).

10. CALCULATION AND INTERPRETATION OF RESULTS

10.1. Calculation of results

Calculate the mean absorbance value for 3 negative controls (Nc), Cut off value (CO) and Sample Index of Positivity (IP_{sample}),

$$Nc = (Nc1 + Nc2 + Nc3)/3; \quad CO = Nc + 0.25; \quad IP_{sample} = OD_{sample}/CO$$

10.2. Validation of the test

The test run may be considered valid provided the following criteria are met:

[CONTROL +]	OD ≥ 1.200
[CONTROL -]	OD ≤ 0.150
[CONTROL -]	$Nc \times 0.5 \leq Ncn \leq Nc \times 2.0$

If one of the negative control absorbances does not match the above criteria, this value should be discarded and a mean value should be calculated using the other two values. If more than one negative control absorbance does not meet the criteria, the test is invalid and must be re-tested.

10.3. Interpretation of results

IP _{sample} > 1.1	POSITIVE
$0.9 \leq IP_{sample} \leq 1.1$	DOUBTFUL*
IP _{sample} < 0.9	NEGATIVE

* If the result is doubtful, repeat the test. If it remains doubtful, collect a new serum sample.

11. PERFORMANCE CHARACTERISTICS

11.1. Specificity and sensitivity

Relative sensitivity of the «Vitrotest Anti-Lamblia» ELISA kit was 94 % while evaluating it by using of positive 44 sera in other commercial test-kit. In the comparative studies with other commercial test-kit using 231 negative sera specificity of the «Vitrotest Anti-Lamblia» was 97.5 %.

11.2. Accuracy

Intra assay repeatability

Coefficient of variation (CV) was calculated by measuring 3 samples with various specific antibody levels in 24-replicate determinations using 1 lot of the test-kit.

Serum No.	OD _{mean}	IP _{mean}	CV, %
38S	0.690	2.29	3.0
37S	1.646	5.47	5.8
17S	2.590	8.49	3.3

Inter assay reproducibility

Coefficient of variation (CV) was calculated by measuring 3 samples with various specific antibody levels in 4 ELISA performances during 4 days, in 8-replicate determinations.

Serum No.	OD _{mean}	IP _{mean}	CV, %
38S	0.672	2.28	4.2
37S	1.615	5.47	5.6
17S	2.523	8.56	7.3

12. LIMITATIONS OF THE PROCEDURE

The final diagnosis must not be established only on the basis of the serologic test but should take into account the set of laboratory and instrumental studies as well as clinical manifestations of the disease. For example, it is recommended to consider the determination of cysts in faeces, trophozoites in duodenal secretions or *G.lamblia* antigen in faeces.

It is impossible to completely eliminate cross-reactions antibodies and antigens of other parasites. Anti-*G.lamblia* antibodies are often not detectable in children with persistent and prolonged giardiasis.

Anti-*G.lamblia* IgG antibodies can be detectable in ELISA for a long time even after successful treatment.














13. TROUBLESHOOTING

<i>Possible causes</i>	<i>Solutions</i>
<i>High background in all wells</i>	
Contaminated washer	Clean the washer head, then rinse it with 30% ethanol and distilled water
Low quality water or contaminated water	Use distilled/DI with resistivity $\geq 10 \text{ M}\Omega\text{-cm}$.
Using contaminated glassware	Use clean glassware
Using chlorine based disinfectants	Use disinfectants without chlorine
Using contaminated tips	Use new tips
Increased time of incubation or temperature regimen was changed	Follow incubation regimen according to instruction for use
<i>High background in a few wells</i>	
TMB solution was added more than once	Add TMB solution once
Pipette shaft was contaminated with conjugate solution	Clean the pipette; pipette the liquids carefully
One the channels of the washer was contaminated	Clean the washer channel, clean the washer
<i>OD of the positive control below normal</i>	
Conjugate solution/tmb solution was prepared improperly or not added	Run ELISA repeatedly, prepare conjugate solution / TMB solution properly
Reduced incubation time in one of the stages	Follow incubation regimen according to the instruction for use
<i>Visual colour intensity of the wells does not correspond to optical density</i>	
The optical beam or another component of the reader is misaligned or malfunctioning	Test the absorbance reader's performance

13. REFERENCE

1. Adam R.D. Biology of *Giardia lamblia*. // *Clin. Microbiol. Rev.* - 2001. - 14. –P. 447–475.
2. Ahmed M.M., Bolbol A.H. The intestinal parasitic infections among children in Riyadh, Saudi Arabia // *J. Egypt. Soc. Parasitol.* – 1989. – 19. P. 583-588.
3. Nash T.E., Herrington D.A., Losonsky G.A., Levine M.M. Experimental human Infections with *Giardia lamblia* // *J.Infect. Dis.* – 1987. – 156. P. 974-983.
4. Flanagan P.A. *Giardia* - diagnosis, clinical course and epidemiology // *Epidemiol. Infect.* – 1992. – 109. P. 1-22.
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SYMBOLS

	Catalogue number
	Consult instructions for use
	In vitro diagnostic medical device
	Manufacturer
	Caution, consult accompanying documents
	Contains sufficient for <n> tests
	Temperature limitation
	Batch code
	Use by
	Date of manufacture
	Keep away from direct sun light / Не допускать воздействия солнечного света
	Authorized representative in the European Community / Уполномоченный представитель в ЕС
	Mark of conformity to the technical regulations / Знак соответствия техническим регламентам

TY Y 24.4-36555928-001:2011
Inst_Anti-Lambliia_TK030_V01

Edition 1st, 12.09.2019.

For questions and suggestions regarding the kit, contact the manufacturer:



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e-mail: info@vitrotest.ua, www.vitrotest.ua



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ASSAY PROCEDURE



Keep all reagents and specimens for at least 30 min at 18-25°C before use



Dispense 90µl of [SAMPLE DILUENT] into the wells
(violet)



Dispense 10µl of controls and samples into the wells:

A1 – [CONTROL +],

B1, C1, D1 – [CONTROL -],

E1 and other wells – patient samples

(colour changes from violet to blue)



Cover wells with an adhesive film, incubate for 30 min at 37°C



Rinse the wells 5 times with diluted 1:20 (1+19) washing solution Tween-20
(300µl per well)



Add 100µl of [CONJUGATE SOLUTION] into the wells
(green colour)



Cover wells with an adhesive film, incubate for 30 min at 37°C



Rinse the wells 5 times with diluted 1:20 (1+19) washing solution Tween-20
(300µl per well)



Add 100µl of [TMB SOLUTION] into the wells



Cover wells with an adhesive film, incubate for 30 min at 37°C



Add 100µl of [STOP SOLUTION]
(colour changes from blue to yellow)



Determine the optical density (OD) at 450/620-695nm

CALCULATION

$$Nc = (Nc1 + Nc2 + Nc3)/3;$$

$$CO = Nc + 0.25;$$

$$IP_{\text{sample}} = OD_{\text{sample}} / CO;$$

$$Nc - OD_{\text{mean}} \text{ for 3 [CONTROL -]}$$

CO - Cut off, IP- Index of Positivity

INTERPRETATION

$IP_{\text{sample}} > 1.1$	POSITIVE
$0.9 \leq IP_{\text{sample}} \leq 1.1$	DOUBTFUL
$IP_{\text{sample}} < 0.9$	NEGATIVE

Vitrotest® Anti-Toxocara

ELISA test-kit for the detection of antibodies to *Toxocara canis*

TK058

96 tests

1. INTENDED USE

ELISA test-kit «Vitrotest Anti-Toxocara» is an enzyme linked immunosorbent assay (ELISA) for the detection of antibodies to *Toxocara canis* in human serum or plasma. The test-kit might be applied for the ELISA using both automatic pipettes and standard equipment as well as open system automated ELISA analyzers.

2. CLINICAL VALUE

Toxocariasis is a zoonotic disease caused by the parasitizing of larvae of roundworms belonging to the genus *Toxocara* in humans which can cause damage to eyes and internal organs. The disease is widespread in all countries and often affects children. Several species of this genus are known, and many studies have shown the role of *Toxocara canis* (worms affecting mainly dogs) and to a lesser extent *Toxocara cati* (affecting mainly cats) in a human disease.

The sources of human infestation are mainly dogs which contaminate the soil with eggs of *Toxocara* from excreted faeces. The rate of dog infection with this helminth is about 15-50%, but in some areas it reaches 90%. Since mature forms are not formed in the human body infected people cannot be the source of *Toxocara*.

Humans are infected with toxocarar by ingesting the eggs with food or water contaminated with animal faeces, as well as by direct contact with infected animals. Larvae emerging from eggs migrate through the intestinal wall into the bloodstream and enter various organs and tissues where they encapsulate and maintain long-term biological activity which causes the larval form of the disease. While migrating within the human body the larvae injure tissues causing necrosis and inflammatory processes.

Clinical symptoms of toxocariasis depend on the location and intensity of the parasite invasion. Clinical discourse of the disease cites two forms of invasion which are distinguishable, firstly, visceral syndrome of "migrating larvae" (visceral larva migrans) and secondly ocular toxocariasis (ocular larva migrans). Visceral toxocariasis manifests as a recurrent fever lasting for several weeks or even months. Enlargement of individual lymph nodes and diseases effecting the respiratory system such as bronchitis and pneumonia may also occur. In almost all cases toxocariasis is characterized by eosinophilia.

The intravital parasitological diagnosis of toxocariasis is almost impossible to discover due to the difficulty of detection of the migrating larvae and histological studies (biopsies) are only useful in some cases. Numerous studies have shown that serological testing, including ELISA, using purified antigens of larvae is a sensitive and specific diagnostic method. To date it is possible to detect specific antibodies for excretory-secretory and somatic antigens of the *T. canis* larvae.

3. PRINCIPLE OF THE TEST

«Vitrotest Anti-Toxocara» ELISA is a solid phase, indirect ELISA method for detection of antibodies to *Toxocara canis* in a two step incubation procedure. Microwells are coated with *T. canis* larva antigens. During the first incubation step, the specific antibodies to *T. canis*, if present, will be bound to the solid phase precoated antigens. The wells are washed to remove unbound antibodies, leaving only the specific antigen-antibody complexes. A secondary antibody (anti-IgG) which is conjugated to horseradish peroxidase (HRP) added next and binds to the immune complexes on the solid phase. Unbound components are removed by washing. Chromogen solution containing 3,3',5,5'-tetramethylbenzidine (TMB) and hydrogen peroxide is added. TMB is catalysed by the HRP to produce a blue colour product that changes to yellow after adding stop solution. Absorbance at 450/620-695 nm is read using a plate reader. The density of yellow colouration is directly proportional to the amount of the antibodies present in the sample.

4. MATERIALS AND EQUIPMENT

4.1. Composition of the test-kit

ELISA STRIPS	1x96 wells	Microplate (12 strips x 8 wells) Each well is coated with <i>T. canis</i> larva antigens. The wells can be separated.
CONTROL +	1x0.3 ml	Positive control Solution of human specific antibodies to <i>T. canis</i> and preservative (pink).
CONTROL -	1x0.5 ml	Negative control Negative human serum and preservative (yellow).

SAMPLE DILUENT	1x12 ml	Sample diluent Buffer solution with detergent and preservative (brown-green).
CONJUGATE SOLUTION	1x12 ml	Conjugate solution (ready to use) Monoclonal antibodies to human IgG conjugated to HRP, buffer, stabilizers and preservative (green).
TMB SOLUTION	1x12 ml	TMB solution (ready to use) TMB, H ₂ O ₂ , stabilizers and preservative (colourless).
WASH TWEEN 20X	1x50 ml	Washing solution Tw20 (20x concentrated) 20X concentrate of PBS buffer with Tween-20 and NaCl (colourless)
STOP SOLUTION	1x12 ml	Stop Solution (ready to use) 0.5 M H ₂ SO ₄ (colourless).

Adhesive films (2), sera identification plan (1) and instruction for use.

4.2. Material required but not provided

- Variable volume automatic pipettes (10µl–1000µl) and disposable pipette tips;
- plate reader (single wavelength 450 nm or dual wavelength 450/620–695 nm);
- volumetric laboratory glassware (10–1000ml);
- distilled/DI water;
- incubator thermostatically controlled at 37°C;
- automatic/semiautomatic plate washer;
- appropriate waste containers for potentially contaminated materials;
- timer;
- absorbent paper;
- disposable gloves;
- disinfectants;
- protective clothes.

5. PRECAUTIONS AND SAFETY

5.1. Precautions

The ELISA assays are time and temperature sensitive. Strictly follow the test procedure and do not modify it.

- do not use expired reagents;
- do not use for analyses and do not mix reagents from different lots or from test-kits of different nosology as well as other manufacturer's reagents with Vitrotest® kits;

Note: it is possible to use [WASH TWEEN 20X], [TMB SOLUTION] and [STOP SOLUTION] from other Vitrotest® ELISA kits.

- close reagents after use only with appropriate caps;
- control the filling and full aspiration of the solution in the wells;
- use a new tip for each sample and reagent;
- avoid exposure of kit reagents to direct sunlight;
- [TMB SOLUTION] must be colourless before use. If [TMB SOLUTION] is blue or yellow it cannot be used. Avoid any contact of [TMB SOLUTION] with metals or metal ions. Use glassware thoroughly washed and rinsed with distilled/DI water;
- never use the same glassware for [CONJUGATE SOLUTION] and [TMB SOLUTION].

The manufacturer is not responsible or liable for any incorrect results and/or incidents taking place as a result of any violation of the instruction. The manufacturer is not responsible for visual readings of samples (without using a plate reader).

5.2. Safety

- all reagents included in the kit are intended for in vitro diagnostic use only;
- the test-kit is designed for use by qualified personnel only;
- disposable gloves and safety glasses must be worn at all times while performing analysis;
- never eat, drink, smoke or apply cosmetics in the assay laboratory;
- never pipette solutions by mouth;
- positive control does not contain of human origin components;
- negative control of test-kit «Virotest Anti-Toxocara» was tested and found negative for anti-HIV1/2, anti-HCV, anti-T.pallidum antibodies and HBsAg. Nevertheless, all controls and patient samples should be regarded and handled as potentially infectious;
- the liquid waste must be inactivated, for example, with hydrogen peroxide solution at the final concentration of 6% for 3 hours at room temperature, or with sodium hypochlorite at the final concentration of 5% for 30 minutes, or with other approved disinfectants;
- the solid waste must be inactivated by autoclaving at 121°C for 1 hour;

- dispose of inactivated waste in accordance of national laws and regulations;
- do not autoclave the solutions that contain sodium azide or sodium hypochlorite;
- some components of the test-kit contain low concentrations of harmful compounds and could cause irritation of the skin and the mucosa. In the case of contact of TMB SOLUTION STOP SOLUTION or CONJUGATE SOLUTION with skin or mucosa, the place of contact should be immediately rinsed with large amounts of water;
- in case of spilling of solutions that do not contain acid, e.g. sera, rinse the surface with disinfectant, then dry it with absorbent paper. In other case acid first must be neutralized by sodium bicarbonate and then wiped out as described above.

6. STORAGE AND STABILITY

Reagents are stable until stated expiration date on the label when stored refrigerated (2-8°C). Do not freeze. The kit should be shipped at 2-8°C. Single transportation at the temperature up to 23°C for two days is acceptable.

7. SPECIMEN COLLECTION

The fresh serum or plasma samples can be stored for 3 days at 2-8 °C, or frozen for longer periods at -20 – -70°C. Frozen samples must be thawed and kept at room temperature for at least 30 minutes before use. Do not use preheated samples. Mix thawed samples thoroughly to homogeneity. Avoid repeated freezing/thawing. Samples containing aggregates must be clarified by centrifugation (3000 rpm for 10-15 min). Do not use hyperlipemic, hyperhaemolysed or contaminated by microorganisms serum specimens. The presence of bilirubin up to concentration of 0.21 mg/ml (361.8 µM/l), haemoglobin up to concentration of 10 mg/ml and triglycerides up to concentration of 10 mg/ml (11.3 mM/l) are allowed.

8. REAGENT PREPARATION

It is very important to keep all test components for at least 30 min at room temperature (18-25 °C) before the assay!

8.1. ELISA STRIPS preparation

Before opening the bag with ELISA STRIPS, keep it at room temperature for 30 minutes to avoid water condensation inside the wells. Open the vacuum bag and take out the necessary number of the wells. Once opened the bag with the remaining strips must be resealed with zip-lock immediately and kept refrigerated at 2-8°C for no more than 3 months.

8.2. Washing solution preparation

Check the WASH TWEEN 20X for the presence of salt crystals. If crystals have formed, re-solubilise by warming at 37°C, until crystals dissolve (15-20min). Dilute the WASH TWEEN 20X 1:20 (1+19) with distilled/DI water before use. For example, 4 ml concentrate + 76 ml water is sufficient for 8 wells. Once diluted it is stable at 2-8°C for 1 week.

9. ASSAY PROCEDURE

- Take out from the protective bag the support frame and the necessary number of the wells (the number of specimens + 4 for controls). Place the wells into the frame. Wells with the controls must be included in every test.
- Complete the sera identification plan.
- Prepare washing solution (see 8.2.).
- Dispense 90 µl of SAMPLE DILUENT into each well.
- Dispense 10 µl of controls and patient samples into the wells in the following order: A1 – CONTROL +, B1, C1 and D1 – CONTROL -, other wells – patient samples. Mix gently to avoid foaming. The colour of the sample diluent changes from brown-green to blue.
- Cover strips with an adhesive film and incubate for 30 min at 37°C.
- At the end of the incubation period, remove and discard the adhesive film and wash the well 5 times with automatic washer or 8-channel pipette as follows:
 - aspirate the contents of all wells into a liquid waste container and add immediately a minimum of 300 µl of diluted washing solution to each well;
 - soak each well for 30 seconds between each wash cycle;
 - aspirate again. The residual volume must be lower than 5 µl.
 - repeat the washing step 4 times;
 - after the final washing cycle, turn down the plate onto an absorbent paper and tap it to remove any residual buffer.
- Dispense 100 µl of CONJUGATE SOLUTION, per well. Cover strips with a new adhesive film, incubate for 30 min at 37°C.
- At the end of the incubation period, remove and discard the adhesive film and wash the wells five times as described above (see 9.7).
- Dispense 100 µl TMB SOLUTION into all wells. Do not touch the walls and bottoms of the wells to avoid contamination.

- 9.11. Incubate the strips for 30 minutes at room temperature (18-25°C) in the dark. Do not use adhesive film in this step.
- 9.12. Dispense 100 µl [STOP SOLUTION] into all wells in the same order and at the same rate as for [TMB SOLUTION].
- 9.13. Read the optical density (OD) of the wells at 450/620-695 nm using a microplate reader within 5 minutes after adding the [STOP SOLUTION]. Pay attention to the cleanness of the plate bottom and absence of bubbles in the wells before reading.

Measurement in the single-wave procedure at 450 nm is possible. Reserve blank well to adjust spectrophotometer in such analysis. Only [TMB SOLUTION] AND [STOP SOLUTION] must be added in blank well).

10. CALCULATION AND INTERPRETATION OF RESULTS

10.1. Calculation of results

Calculate the mean absorbance value for 3 negative controls (Nc), Cut off value (CO) and Sample Index of Positivity (IP_{sample}),

$$Nc = (Nc1 + Nc2 + Nc3)/3; \quad CO = Nc + 0.3; \quad IP_{\text{sample}} = OD_{\text{sample}}/CO$$

10.2. Validation of the test

The test run may be considered valid provided the following criteria are met:

[CONTROL +]	OD ≥ 1.200
[CONTROL -]	OD ≤ 0.150
[CONTROL -]	Nc × 0.5 ≤ Ncn ≤ Nc × 2.0

If one of the negative control absorbances does not match the above criteria, this value should be discarded and a mean value should be calculated using the other two values. If more than one negative control absorbance does not meet the criteria, the test is invalid and must be re-tested.

10.3. Interpretation of results

IP _{sample} > 1.1	POSITIVE
0.9 ≤ IP _{sample} ≤ 1.1	DOUBTFUL*
IP _{sample} < 0.9	NEGATIVE

* If the result is doubtful, repeat the test. If it remains doubtful, collect a new serum sample.

11. PERFORMANCE CHARACTERISTICS

11.1. Specificity and sensitivity

Relative sensitivity of the «Vitrotest Anti-Toxocara» ELISA kit was 98 % while evaluating it by using of 97 positive to Toxocara canis antibodies sera in 2 other commercial test-kits.

In the comparative studies with other commercial test-kit using 285 negative sera for antibodies to Toxocara canis specificity of the «Vitrotest Anti-Toxocara» was 97.9 %.

11.2. Accuracy

Intra assay repeatability

Coefficient of variation (CV) was calculated by measuring 3 samples with various specific antibody levels in 24-replicate determinations using 1 lot of the test-kit.

Serum No.	OD _{mean}	IP _{mean}	CV, %
21L	0.449	1.36	2.2
31L	1.223	3.71	5.9
58L	0.605	1.83	4.7

Inter assay reproducibility

Coefficient of variation (CV) was calculated by measuring 3 samples with various specific antibody levels in 4 ELISA performances during 4 days, in 8-replicate determinations.

Serum No.	OD _{mean}	IP _{mean}	CV, %
76L	1.118	3.26	4.42
78L	1.540	4.49	3.70
79L	0.484	1.41	5.43

12. LIMITATIONS OF THE PROCEDURE

A positive result in the «Vitrotest Anti-Toxocara» indicates the presence of specific antibodies IgG to *Toxocara canis*. The presence of the antibodies in newborn infants cannot be held as proof of *Toxocara canis* invasion.

Indeterminate results might indicate the invasion of *Toxocara canis* in anamnesis.

A negative result in the «Vitrotest Anti-Toxocara» test-kit indicates either the absence of antibodies to *Toxocara canis* in the sample tested, or that the concentration of specific antibodies is below the detection threshold of the test.

Diagnosis of an infectious disease should not be established on the basis of a single test result. A precise diagnosis, in fact, should take into consideration as well as clinical history, symptomatology and serological data. It is impossible to completely eliminate cross-reactions of antibodies and antigens of other helminths.














13. TROUBLESHOOTING

<i>Possible causes</i>	<i>Solutions</i>
<i>High background in all wells</i>	
Contaminated washer	Clean the washer head, then rinse it with 30% ethanol and distilled water
Low quality water or contaminated water	Use distilled/DI with resistivity ≥ 10 M Ω -cm.
Using contaminated glassware	Use clean glassware
Using chlorine based disinfectants	Use disinfectants without chlorine
Using contaminated tips	Use new tips
Increased time of incubation or temperature regimen was changed	Follow incubation regimen according to instruction for use
<i>High background in a few wells</i>	
TMB solution was added more than once	Add TMB solution once
Pipette shaft was contaminated with conjugate solution	Clean the pipette; pipette the liquids carefully
One the channels of the washer was contaminated	Clean the washer channel, clean the washer
<i>OD of the positive control below normal</i>	
Conjugate solution/tmb solution was prepared improperly or not added	Run ELISA repeatedly, prepare conjugate solution / TMB solution properly
Reduced incubation time in one of the stages	Follow incubation regimen according to the instruction for use
<i>Visual colour intensity of the wells does not correspond to optical density</i>	
The optical beam or another component of the reader is misaligned or malfunctioning	Test the absorbance reader's performance

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SYMBOLS

	Catalogue number
	Consult instructions for use
	In vitro diagnostic medical device
	Manufacturer
	Caution, consult accompanying documents
	Contains sufficient for <n> tests
	Temperature limitation
	Batch code
	Use by
	Date of manufacture
	Keep away from direct sun light / Не допускать воздействия солнечного света
	Authorized representative in the European Community / Уполномоченный представитель в ЕС
	Mark of conformity to the technical regulations / Знак соответствия техническим регламентам

ТУ У 24.4-36555928-001:2011
Inst_Anti-Toxocara_TK058_V01

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For questions and suggestions regarding the kit, contact the manufacturer:



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ASSAY PROCEDURE



Keep all reagents and specimens for at least 30 min at 18-25°C before use



Dispense 90µl of [SAMPLE DILUENT] into the wells
(brown-green colour)



Dispense 10µl of controls and samples into the wells:

A1 – [CONTROL +],

B1, C1, D1 – [CONTROL -],

E1 and other wells – patient samples
(colour changes from brown-green to blue)



Cover wells with an adhesive film, incubate for 30 min at 37°C



Rinse the wells 5 times with diluted 1:20 (1+19) washing solution Tween-20
(300µl per well)



Add 100µl of [CONJUGATE SOLUTION] into the wells
(green colour)



Cover wells with an adhesive film, incubate for 30 min at 37°C



Rinse the wells 5 times with diluted 1:20 (1+19) washing solution Tween-20
(300µl per well)



Add 100µl of [TMB SOLUTION] into the wells



Cover wells with an adhesive film, incubate for 30 min at 37°C



Add 100µl of [STOP SOLUTION]
(colour changes from blue to yellow)



Determine the optical density (OD) at 450/620-695nm

CALCULATION

$$Nc = (Nc1 + Nc2 + Nc3)/3;$$

$$CO = Nc + 0.3;$$

$$IP_{\text{sample}} = OD_{\text{sample}} / CO;$$

$$Nc - OD_{\text{mean}} \text{ for 3 [CONTROL -]}$$

CO - Cut off, IP- Index of Positivity

INTERPRETATION

$IP_{\text{sample}} > 1.1$	POSITIVE
$0.9 \leq IP_{\text{sample}} \leq 1.1$	DOUBTFUL
$IP_{\text{sample}} < 0.9$	NEGATIVE