Measles is an acute, highly contagious viral disease. Although measles is usually considered a childhood disease, it can be contracted at any age. Measles is spread by direct contact with nasal or throat secretions of infected people or, less frequently, by airborne transmission. Measles symptoms generally appear in two stages. In the first stage, the individual may have a runny nose, cough, and a slight fever. The second stage begins on the third to seventh day and consists of high fever and red blotchy rash lasting four to seven days. The rash usually begins on the face and then spreads over the entire body. Symptoms usually appear in 10–12 days, although they may occur between 8–13 days after exposure. The presence of IgG antibody to measles virus is indicative of previous exposure or vaccination. In individuals with acute measles, a significant increase in measles IgG antibody level is indicative of recent infection. IgM antibodies to measles virus are often detectable with onset of the rash and typically persist for 4 weeks. At least 80% of patients will be positive for measles IgM at 6 days and 100% at 16 days after onset of symptoms.

The Measles IgM ELISA test is an enzyme linked immunosorbent assay (ELISA) for the detection of IgM class antibodies to measles (Rubeola) in human serum or plasma. Diluted serum (serum diluent contains sorbent to remove Rheumatoid Factor and human IgG interference) is added to wells coated with purified measles antigen. Measles IgM specific antibody, if present, binds to the antigen. All unbound materials are washed away and the enzyme conjugate is added to bind to the antibody-antigen complex, if present. Excess enzyme conjugate is washed off and substrate is added. The plate is incubated to allow the oxidation of the substrate by the enzyme. The intensity of the color generated is proportional to the amount of IgM specific antibody in the sample.
**Storage/Stability**
Store the kit at 2–8 °C.

**Procedure**

***Notes:*** The components in this kit are intended for use as an integral unit. The components of different lots should not be mixed.

Optimal results will be obtained by strict adherence to the test protocol. Precise pipetting as well as following the exact time and temperature requirements is essential.

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

1. If the O.D. of the Calibrator is >0.250.
2. The Ab index for Negative control should be <0.9.
3. The Ab index for Positive control should be >1.2.

Bring all specimens and kit reagents to room temperature (18–26 °C) and gently mix.

1. Place the desired number of coated strips into the holder.
2. Negative control, positive control, and calibrator are ready to use. Prepare 21-fold dilution of test samples, by adding 10 μL of the sample to 200 μL of Sample Diluent. Mix well.
3. Dispense 100 μL of diluted sera, calibrator, and controls into the appropriate wells. For the reagent blank, dispense 100 μL of Sample Diluent in 1A well position. Tap the holder to remove air bubbles from the liquid and mix well. Incubate for 20 minutes at room temperature.
4. Remove liquid from all wells. Wash wells three times with 300 μL of 1x wash buffer. Blot on absorbent paper or paper towel.
5. Dispense 100 μL of enzyme conjugate to each well and incubate for 20 minutes at room temperature.
6. Remove enzyme conjugate from all wells. Wash wells three times with 300 μL of 1x wash buffer. Blot on absorbent paper or paper towel.
7. Dispense 100 μL of TMB substrate and incubate for 10 minutes at room temperature.
8. Add 100 μL of stop solution.
9. Read O.D. at 450 nm using ELISA reader within 15 minutes. A dual wavelength is recommended with reference filter of 600–650 nm.
Results

Calculations
1. Check Calibrator Factor (CF) value on the calibrator bottle. This value might vary from lot to lot. Make sure the value is checked on every kit.
2. Calculate the cut-off value: Calibrator OD x Calibrator Factor (CF).
3. Calculate the Ab (Antibody) Index of each determination by dividing the O.D. value of each sample by cut-off value.

Example of typical results:
Calibrator mean OD = 0.8
Calibrator Factor (CF) = 0.5
Cut-off Value = 0.8 x 0.5 = 0.400
Positive control O.D. = 1.2
Ab Index = 1.2/0.4 = 3
Patient sample O.D. = 1.6
Ab Index = 1.6/0.4 = 4.0

Interpretation
The following is intended as a guide to interpretation of Measles IgM antibody index (Ab Index) test results; each laboratory is encouraged to establish its own criteria for test interpretation based on sample populations encountered.

<0.9 – No detectable antibody to measles IgM by ELISA
0.9–1.1 – Borderline positive. Follow-up testing is recommend if clinically indicated.
>1.1 – Detectable antibody to measles IgM by ELISA

Notes: To enhance sensitivity and specificity of this IgM test, the provided sample diluent has been formulated to block IgG and Rheumatoid Factor (RF) interferences. Turbidity could be seen after diluting serum with sample diluent. This turbidity is due to the blocking of serum IgG and has shown interference with test results. It can be removed by centrifugation.

In specimens with high RF and high autoimmune antibodies, the possibility of eliminating the interferences cannot be ruled out entirely.

Lipemic or hemolyzed samples may cause erroneous results.

References