Toxoplasma IgA ELISA

Catalog Number SE120125
Storage Temperature 2–8 °C

Product Information

Toxoplasma IgA ELISA

Product Description
Toxoplasma gondii causes toxoplasmosis, a common disease that affects 30–50 of every 100 people in North America by the time they are adults. The mean source of infection is direct contact with cat feces or from eating undercooked meats. Toxoplasmosis generally presents with mild symptoms in immunocompetent individuals. In the immunocompromised patient, however, the infection can have serious consequences. Acute toxoplasmosis in pregnant women can result in miscarriage, poor growth, early delivery, or stillbirth. Treatment of an infected pregnant woman may prevent or lessen the disease in her unborn child. Treatment of an infected infant will also lessen the severity of the disease as the child grows. IgG and IgM antibodies to Toxoplasma can be detected with 2–3 weeks after exposure. IgG remains positive, but the antibody level drops overtime. ELISA can detect Toxoplasma IgM antibody one year after infection in over 50% of patients. Therefore, IgM positive results should be evaluated further with one or two follow up samples if primary infection is suspected.

The Toxoplasma IgA ELISA Kit is intended for the detection of IgA antibody to Toxoplasma in human serum or plasma. Diluted serum is added to wells coated with purified Toxoplasma antigen. Toxoplasma IgA 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 IgA specific antibody in the sample.

Components

<table>
<thead>
<tr>
<th>Materials Provided</th>
<th>96 Tests</th>
</tr>
</thead>
<tbody>
<tr>
<td>Microwell coated with Toxoplasma antigen</td>
<td>12 x 8 x 1</td>
</tr>
<tr>
<td>Sample Diluent: 1 bottle (ready to use)</td>
<td>22 mL</td>
</tr>
<tr>
<td>Calibrator: 1 vial (ready to use)</td>
<td>1 mL</td>
</tr>
<tr>
<td>Positive Control: 1 vial (ready to use)</td>
<td>1 mL</td>
</tr>
<tr>
<td>Negative Control: 1 vial (ready to use)</td>
<td>1 mL</td>
</tr>
<tr>
<td>Enzyme conjugate: 1 bottle (ready to use)</td>
<td>12 mL</td>
</tr>
<tr>
<td>TMB Substrate: 1 bottle (ready to use)</td>
<td>12 mL</td>
</tr>
<tr>
<td>Stop Solution: 1 bottle (ready to use)</td>
<td>12 mL</td>
</tr>
<tr>
<td>Wash concentrate 20x: 1 bottle</td>
<td>25 mL</td>
</tr>
</tbody>
</table>

Reagents and Equipment Required but Not Provided.
1. Distilled or deionized water
2. Precision pipettes
3. Disposable pipette tips
4. ELISA reader capable of reading absorbance at 450 nm
5. Absorbent paper or paper towel
6. Graph paper

Precautions and Disclaimer
This product is for R&D use only, not for drug, household, or other uses. Please consult the Safety Data Sheet for information regarding hazards and safe handling practices.

Preparation Instructions
Sample Preparation
1. Collect blood specimens and separate the serum.
2. Specimens may be refrigerated at 2–8 °C for up to seven days or frozen for up to six months. Avoid repetitive freezing and thawing.

20x Wash Buffer Concentrate
Prepare 1x Wash buffer by adding the contents of the bottle (25 mL, 20x) to 475 mL of distilled or deionized water. Store at room temperature (18–26 °C).
**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 cut-off value: Calibrator OD x Calibrator Factor (CF).
3. Calculate the Ab (Antibody) Index of each determination by dividing the mean values 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 Toxoplasma IgA 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 IgA antibody to Toxoplasma
0.9–1.1 – Borderline positive. Follow-up testing is recommended if clinically indicated
>1.1 – Detectable IgA antibody to Toxoplasma

Note: Lipemic or hemolyzed samples may cause erroneous results.

References

RGC,CH,MAM 10/14-1