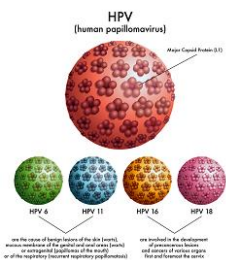


## INTENDED USE

The **Human anti- HPV16L1 IgG** ELISA Kit is an immunoassay suitable for detecting and quantifying IgG antibody activity specific for Human Papilloma Virus, subtype 16 L1 protein, in serum or plasma. Other biological fluids, including tissue culture medium, may be validated for use. For research use only (RUO).

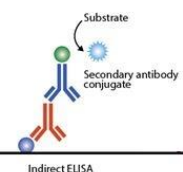
## GENERAL INFORMATION



**Human papillomavirus (HPV)** causes cervical cancer, the third most common cancer in women worldwide. Lifetime incidence of HPV infection is estimated to be 80%. Like all papillomaviruses, HPVs establish productive infections only in keratinocytes of the skin or mucous membranes. Most infections become undetectable within 1–2 years and only a small fraction of infections with high-risk HPV fail to clear, resulting in overt HPV persistence. Over 120 HPV types have been identified and are referred to by number; types 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, and 59 are "high-risk" sexually transmitted HPVs. Neutralizing antibodies are expected to be the primary immune mechanism for protection against infection.

Two **vaccines** are available to prevent infection by some HPV types: **Gardasil**, marketed by Merck, and **Cervarix**, marketed by GlaxoSmithKline. Both vaccines utilize recombinant L1 proteins and protect against initial infection with HPV types 16 and 18, which cause most of the HPV associated cancer cases. ADI has cloned, expressed, and purified full length HPV L1 proteins (HPV6, 11, 16, and 18) and used them to develop ELISA to measure antibodies against HPV L1 proteins. These kits will be useful for studying efficacy of existing vaccines and preparations of more effective HPV vaccines formulations.

## PRINCIPLE OF THE TEST



The Human Anti-HPV16 IgG ELISA kit is based on the binding of anti-HPV16 IgG in samples to HPV16 antigen immobilized on the microwells, and anti-HPV16 IgG antibody is detected by anti-IgG-specific antibody conjugated to HRP (horseradish peroxidase) enzyme. After a washing step, chromogenic substrate (TMB) is added and color is developed by the enzymatic reaction of HRP on the substrate, which is directly proportional to the amount of anti-HPV16 IgG present in the sample. Stopping Solution is added to terminate the reaction, and absorbance at 450nm is then measured using an ELISA microwell reader. The presence of human IgG antibody in samples is determined relative to anti-HPV16 Calibrators.

## PRODUCT SPECIFICATIONS

### Specificity

Purified recombinant (his tag; E.coli) HPV16L1 protein (protein accession #P03101, 538-aa) is used to coat the microwells; thus, no other antibody specificity is detectable in the assay. HPV L1s from HPV6, 11, 16, and 18 subtypes share ~50% sequence homology. The Anti-human IgG HRP conjugate reacts specifically with human IgG class antibodies; IgA, IgM and IgE antibody would not be measured above background signals.

## KIT CONTENTS

The microtiter well plate and all other reagents, if unopened, are stable at 2-8°C until the expiration date printed on the box label. Stabilities of the working solutions are indicated under Reagent Preparation.

**To Be Reconstituted:** Store as indicated.

Component	Preparation Instructions
<b>Wash Solution Concentrate (100x)</b> Cat. No. WB-100, 10ml	Dilute the entire volume 10ml + 990ml with distilled or deionized water into a clean stock bottle. Label as <b>Working Wash Solution</b> and store at 4°C for long term and ambient temp. for short term.
<b>Sample Diluent Concentrate (20x)</b> Cat. No. SD-20T, 10ml	Dilute the entire volume, 10ml + 190ml with distilled or deionized water into a clean stock bottle. Label as <b>Working Sample Diluent</b> and store at 2-8°C until the kit lot expires or is used up.
<b>Anti-Human IgG-HRP Conjugate Concentrate (100x)</b> Part: H-HuG.211, 0.15ml	Peroxidase conjugated anti-human IgG in buffer with detergents and antimicrobial as stabilizers. Dilute fresh as needed; 10ul of concentrate to 1ml of <b>Working Sample Diluent</b> is sufficient for 1 8-well strip. Use within the working day and discard. Return 100X to 2-8°C storage.

**Ready For Use:** Store as indicated on labels.

Component	Part	Amt	Contents
<b>HPV16 Antigen Coated Strip Plate</b>	550-HPV16	8-well strips (12)	Coated with recombinant HPV16L1 protein, and post-coated with stabilizers.
<b>Anti-HPV16 Calibrators</b>			
1 U/ml	550219B	0.65 ml	Four (4) vials, each containing anti-HPV16L1; in buffer with antimicrobial as stabilizers.
2.5 U/ml	550219C	0.65 ml	
5 U/ml	550219D	0.65 ml	
10 U/ml	550219E	0.65 ml	
<b>Human x-HPV16 IgG Positive Control</b>	550-116pc	0.65 ml	Human serum with anti-HPV16L1 reactivity; <b>Net OD &gt; 0.5</b>
<b>Low NSB Sample Diluent</b>	TBTm  Not for HRP dilution	30 ml	Buffer with protein, detergents and antimicrobial. Use as is for sample dilution
<b>TMB Substrate</b>	80091	12 ml	Chromogenic substrate for HRP containing TMB and peroxide.
<b>Stop Solution</b>	80101	12 ml	Dilute sulfuric acid.

### Materials Required But Not Provided:

- Pipettors and pipettes that deliver 100ul and 1-10ml.
- Disposable glass or plastic 5-15ml tubes for diluting samples and Anti-Human IgG HRP Concentrate.
- Stock bottle to store diluted Wash Solution; 0.2 to 1L.
- Distilled or deionized water to dilute reagent concentrates.
- Microwell plate reader at 450 nm wavelength and ELISA plate washer

## ASSAY DESIGN AND SET-UP

### Sample Collection and Handling

Serum and other biological fluids may be used as samples with proper dilution to avoid solution matrix interference. For **serum**, collect blood by venipuncture, allow clotting, and separate the serum by centrifugation at room temperature. For other samples, clarify the sample by centrifugation and/or filtration prior to dilution in Sample Diluent. If samples will not be assayed immediately, store refrigerated for up to a few weeks, or frozen for long-term storage.

**Caution:** Human serum and other bodily fluids may contain infectious material. Always wear gloves when handling human samples, including the standards and controls (which have been tested non-reactive for HbsAg and Anti-HIV), and dispose of these samples and containers as biohazard waste.

### Antibody Stability

Initial dilution of serum into **Working Sample Diluent (WSD)** is recommended to stabilize antibody activity. This enhances reproducible sampling, and stabilizes the antibody activity for years, stored refrigerated or frozen. Further dilution into **Low NSB Sample Diluent (LSNB)**, which provides the lowest assay background, should be at least 5 times the initial dilution and performed the same day as the assay.

### Assay Design

Review Interpretation of Results and Limits of the Assay (p5-7) before proceeding:

- Select the proper sample dilutions accounting for expected potency of positives and minimizing non-specific binding (NSB) and other matrix effects; for example, net signal for non-immune samples should be lower than the **1 U/ml Calibrator**. This is usually 1/100 or greater dilution for human serum/plasma with normal levels of IgG and IgM.
- Run a Sample Diluent **Blank**. This signal is an indicator of proper assay performance, especially of washing efficacy, and is used for net OD calculations, if required. Blank OD should be <0.3.
- Run the Human Anti-HPV16 **Positive Control**.
- Run a set of **Calibrators**, which validate that the assay was performed to specifications: **10 U/ml** should give a high signal (>1.5 OD); **1 U/ml** should give a low signal which can be used to discriminate at the Positive/Negative threshold (see Interpretation of Results, p. 5).

### Plate Set-up

Bring all reagents to room temperature (18-30° C) equilibration (at least 30 minutes).

- Determine the number of wells for the assay run. Duplicates are recommended, including 8 Calibrator wells and 2 wells for each sample control to be assayed.
- Remove the appropriate number of microwell strips from the pouch and return unused strips to the pouch. Reseal the pouch and store refrigerated.
- Add 200-300ul Working Wash Solution to each well and let stand for about 5 minutes. Aspirate or dump the liquid and pat dry on a paper towel before sample addition.

## Assay Procedure

ALL STEPS ARE PERFORMED AT ROOM TEMPERATURE. After each reagent addition, gently tap the plate to mix the well contents prior to beginning incubation.

### 1. 1<sup>st</sup> Incubation [100ul – 60 min; 4 washes]

- Add 100ul of calibrators, samples and controls each to pre-determined wells.
- Tap the plate gently to mix reagents and incubate for 60 minutes.
- Wash wells 4 times and pat dry on fresh paper towels. As an alternative, an automatic plate washer may be used. Improper washes may lead to falsely elevated signals and poor reproducibility.

### 2. 2<sup>nd</sup> Incubation [100ul – 30 min; 5 washes]

- Add 100ul of diluted Anti-Human IgG HRP to each well.
- Incubate for 30 minutes.
- Wash wells 5 times as in step 2.

### 3. Substrate Incubation [100ul – 15 min]

- Add 100ul TMB Substrate to each well. The liquid in the wells will begin to turn blue.
- Incubate for 15 minutes in the dark, e.g., place in a drawer or closet.

Note: If your microplate reader does not register optical density (OD) above 2.0, incubate for less time, or read OD at 405-410 nm (results are valid).

### 4. Stop Step [Stop: 100ul]

- Add 100ul of Stop Solution to each well.
- Tap gently to mix. The enzyme reaction will stop; liquid in the wells will turn yellow.

### 5. Absorbance Reading

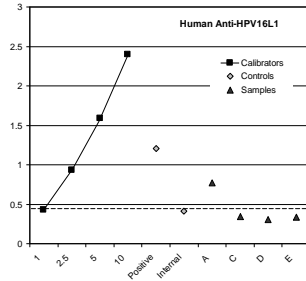
- Use any commercially available microplate reader capable of reading at 450nm wavelength. Use a program suitable for obtaining OD readings, and data calculations if available.
- Read absorbance of the entire plate at 450nm using a single wavelength within 30 minutes after Stop Solution addition. If available, program to subtract OD at 630nm to normalize well background.

## INTERPRETATION OF RESULTS

### A. Antibody Activity Threshold Index

Compare Samples to **1 U/ml Calibrator** or **Internal Control** = **Positive/Negative Cut-off**.

#### Example:



#### Results

The **sensitivity** of the assay to detect anti-HPV16 IgG, from either natural infection or vaccination, is controlled so that the **1 U/ml Calibrator** represents a threshold OD for most true positives in human serum diluted to 1:100 or greater. Visual inspection of the data in the above graph shows the following:

**Calibrators** – dilution curve of an anti-HPV antibody, derived from Gardasil vaccination, shows the OD range of the assay; high value indicates optimal sensitivity of the assay.

**1 U/ml:** a 'Cut-off' line has been drawn to indicate a threshold distinguishing between **Positive/Negative**. The is not a clear-cut threshold, rather a low OD area that could represent either low positives or high background negatives.

**Positive Control** – clearly positive (>0.5 net OD)

**Internal Control** – a true positive from an infected patient that represents the lab's experience in distinguishing low positive from negative samples. This should be run in each assay to supplement the 1 U/ml Calibrator for Positive/Negative discrimination purposes.

**Samples A,B,C,D** – 3 samples (B, C, D) are **negative**; below the threshold; 1 sample (A) is **positive**; clearly above the threshold.

The 1 U/ml Calibrator can be used to calculate a **Threshold Index** that numerically discriminates Positive/Negative:

- ❖ Divide each Sample net OD by the 1 U/ml Calibrator net OD. Values above 1.0 are a measure of **Positive** Antibody Activity; below 1.0 are **Negative** for antibody.

This calculation was used to represent Assay Precision, page 7.

#### Assay Sensitivity

The HPV16 antigen coating level and HRP conjugate concentration are optimized to differentiate anti-HPV16 IgG from background (non-antibody) signal with human serum or plasma samples diluted 1:100.

## INTERPRETATION OF RESULTS (cont)

### B. Positive Index

Experimental sample values may be expressed relative to the values of Control or Non-immune samples, by calculation of a **Positive Index**. One typical method is as follows:

1. Calculate the net OD mean + 2 SD of the Control/Non-immune samples = **Positive Index**.
2. Divide each sample net OD by the Positive Index. Values above 1.0 are a measure of **Positive** Antibody Activity; below 1.0 are **Negative** for antibody.

A sample value would be **Positive** if significantly above the value of the pre-immune serum sample or a suitably determined non-immune panel or pool of samples, tested at the same sample dilution.

This calculation also **quantifies** the positive Antibody Activity level, assigning a higher value to samples with higher Antibody Activity, and vice versa.

#### Example:

Sample	Assay Net OD		Calculated Antibody Activity	
	Control	Exptl	Control	Exptl
1	0.244	C 2.293	0.57	5.34
2	0.204	C 1.490	0.48	3.47
3	0.237	C 0.833	0.55	1.94
4	0.26	C 0.326	0.61	0.76
5	0.388	P 1.106	0.90	2.58
6	0.407	I 0.310	0.95	0.72
7	0.288	E 0.672	0.67	1.56
8	0.263	E 0.363	0.61	0.85
9	0.322	E 0.560	0.75	1.31
10	0.343	E 0.490	0.80	1.14
Mean	0.295			
SD	0.067			
Mean +2 SD	0.429	= Positive Index		

#### Results

**Experimental Samples** are represented as follows:

**C** – Calibrator  
**P** – Positive Control  
**I** – Internal Control; lab's threshold positive serum  
**E** – Experimental sample

## ASSAY PERFORMANCE

### Precision

Samples, Controls and Calibrators were assayed in duplicate in 5 separate runs, to provide a measure of between-assay reproducibility.

The data are represented using the value of the 1 U/ml Calibrator in each assay to calculate a **Threshold Index** for each control and sample (as described on page 5).

Sample	Ave OD	Threshold Index (mean)	Inter-assay %CV
10 U/ml Calibrator	2.33	6.64	6.3
5 U/ml Calibrator	1.50	4.27	6.1
2.5 U/ml Calibrator	0.84	2.40	5.2
1 U/ml Calibrator	0.35	1.00	0
Positive Control	1.07	3.05	8.6
Internal Control	0.30	0.85	14.0

### Results

The coefficient of variation (%CV) shows the reproducibility of the assay for measuring one antibody activity (sample or control) relative to another antibody activity (**1 U/ml Calibrator**). Variation increases in the threshold region; for this reason, consider running additional tests for borderline samples.

#### Notes:

- The sensitivity of the assay may be increased to perhaps convert a borderline sample to a positive by using a lower dilution of the sample, e.g., 1/50. The values of negatives may increase, so an alternative threshold should be established using known negatives to develop a **Positive Index** (page 6), or by using known **Internal Controls** as discriminator for a **Threshold Control** (instead of the kit 1 U/ml Calibrator Control)

#### Limits of the Assay

- The assay detects and quantifies IgG antibodies directed to the L1 protein. Animals may have HPV16 infection without producing antibodies specific to L1.
- Anti-HPV16 antibody levels of an infected animal may be below detection threshold related to the time course of the infection, e.g., too early for positive titer development.
- Samples from non-patients may be elevated due to prior exposure to the human papilloma virus.

## PRECAUTIONS AND SAFETY INSTRUCTIONS

Calibrators, Sample Diluent, and Antibody HRP contain bromonitrodioxane (BND: 0.05%, w/v). Stop Solution contains dilute sulfuric acid. Follow good laboratory practices, and avoid ingestion or contact of any reagent with skin, eyes or mucous membranes. All reagents may be disposed of down a drain with copious amounts of water. MSDS for TMB, sulfuric acid and BND can be requested or obtained from the ADI website:

# Human Anti-HPV16L1 IgG ELISA Kit

Cat. No. 550-116-PHG, 96 tests

For the Detection and Quantitation of Anti-HPV16L1 IgG in Human Serum or Plasma or other biological fluids

For research use only (RUO), not for therapeutic use.



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