Reactivos GPL

Barcelona, España

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CREATINE KINASE - CK-NAC LQ - NAC. Kinetic UV. Liquid

<u>Presentation:</u>
Cod. EZ007 CONT: R1 1 x 40 mL. + R2 x 10 mL.

Store at: +2+8°C.

Procedure

Quantitative determination of creatine kinase (CK).

Only for in vitro use in clinical laboratory (IVD)

Creatine kinase (CK) catalyses the reversible transfer of a phosphate group from phosphocreatine to ADP. This reaction is coupled to those catalysed by hexokinase (HK) and glucose-6-phosphate dehydrogenase (G6P-DH):

Phosphocreatine + ADP
$$\xrightarrow{CK}$$
 Creatine + ATP

ATP + Glucose \xrightarrow{HK} ADP + Glucose-6-phosphate

G6P + NADP $^{+}$ $\xrightarrow{G6P-DH}$ 6-Phosphogluconate + NADPH + H $^{+}$

The rate of NADPH formation, measured photometrically, is proportional to the catalytic concentration of CK present in the sample ^{1,2}.

REAGENTS COMPOSITION

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	Imidazol pH 7.0	125 mmol/L	
	Glucose	25 mmol/L	
R 1	N-acetyl cysteine	25 mmol/L	
Buffer	Magnesium acetate	12.5 mmol/L	
	NADP ⁺	2.5 mmol/L	
	EDTA	2 mmol/L	
	Hexoquinase (HK)	<u>></u> 6800U/L	
	ADP	15.2 mmol/L	
	AMP	25 mmol/L	
R 2	di-Adenosine-5- pentaphosphate	103 mmol/L	
Substrate	Glucose-6-phosphate dehydrogenase	>8800 U/L	
	(G6P-DH)	_	
	Creatine phosphate	250 mmol/L	

REAGENT PREPARATION AND STABILITY

Working reagent (WR):

Mix 1 volume of R2 with 4 volumes of R1.

Stability: 15 days at 2-8° C or 48 hours at room temperature (15-25° C). All the components of the kit are stable until the expiration date on the label when stored at 2-8°C, protected from light and contamination prevented during their use.

Do not use reagents over the expiration date.

Signs of Reagent deterioration:

- Presence of particles and turbidity.
- Blank absorbance (A) at 340 nm. ≥ 1.60

All the reagents of the kit are stable up to the end of the indicated month and year of expiry. Store tightly closed at $2-8^{o}$ C. Do not use reagents over the expiration date.

Serum free of haemomolysis or heparinized plasma¹:Stability 7 days at 2-8°C, protected from light. CK activity decreases 10% after 1 day at 2-8° C. or after 1° hour at 15-25° C.

MATERIAL REQUIRED BUT NOT PROVIDED

- Spectrophotometer or colorimeter measuring at 340 nm.
- Thermostatic bath at 25° C, 30° C o 37° C (± 0.1° C)
- Matched cuvettes 1.0 cm. light path.

General laboratory equipment.

TEST PROCEDURE

1.	Assay Condition	ons
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- Wavelength: 340 nm.
- Adjust the instrument to zero with distilled water or air. Pipette into a Cuvette (note 1):

	25-30°C	37°C.
WR (mL)	1.0	1.0
Sample (μL.)	40	20

- Mix and incubate for 2 minutes.
- Read the absorbance (A) of the sample, start the stopwatch and read absorbance at 1 min. interval thereafter for 3 min.
- Calculate the difference of absorbance and the average absorbance difference per minute ($\Delta A/min.$)

CALCULATIONS(Note 2)

25 - 30° C $\Delta A/min \times 4127^* = U/L \text{ of CK}$ 37° C. Δ A/min x 8095* = U/L of CK Units: One international unit (IU) is the amount of enzyme that transforms 1 μmol of substrate per minute, in standard conditions. The concentration is expressed in units per litre of sample (U/L).

Temperature conversion factors

o correct results to other temperatures multiply by.			
Assay	Conversion factor to		
temperature	25°C	30°C	37°C
25°C	1.00	1.56	2.44
30°C	0.64	1.00	1.56
37°C	0.41	0.63	1.00

QUALITY CONTROL

Control sera are recommended to monitor the performance of the procedure, Control Normal Ref. QC001 and Control Pathological Ref. QC002. If control values are found outside the defined range, check the instrument, reagents and calibrator for problems.

Serum controls are recommended for internal quality control. Each laboratory should establish its own Quality Control scheme and corrective actions.

REFERENCE VALUES¹

	30° C	37° C	25° C
Men up to	80 U/L.	130 U/L.	195 U/L.
Women up to	70 U/L.	110 U/L.	170 U/L.

(These values are for orientation purpose).

It is suggested that each laboratory establish its own reference range.

CLINICAL SIGNIFICANCE

Creatine kinase is a cellular enzyme with wide tissue distribution in the body. Its physiological role is associated with adenosine triphosphate (ATP) generation for contractile or transport systems.

Elevated CK values are observed in diseases of skeletal muscle and after myocardial infarction^{1,5,6}.

Clinical diagnosis should not be made on a single test result; it should integrate clinical and other laboratory data.

REAGENT PERFORMANCE

Measuring Range:

From detection limit of 1 U/L. to linearity limit of 1000 U/L., under the described assay conditions. If results obtained were greater than linearity limit, dilute the sample

1/10 with NaCl 9 g/L. and multiply result by 10.

	Intra-assay n= 20		Inter-ass	ay n= 20
Mean (U/L)	77	624	83	616
CV (%)	2.50	1.00	2.80	0.80

- Sensitivity: 10 U/L = 0.0001 ΔΑ/min Accuracy: Results obtained GPL reagents did not show systematic differences when compared with other commercial reagents.

Correlation coefficient (r): 0.99.

Regression Equation: y=1.0059x - 1.1072

The results of the performance characteristics depend on the analyzer used.

INTERFERING SUBSTANCES

- No interferences were observed with glucose up to < 7 g/L, triglycerides up to 7 mmol/L and haemoglobin up to 5 g/L $^{1.2}$
- A list of drugs and other interfering substances with CK determination has been reported by Young et. Al^{3,4}.

NOTES

- Use clean disposable pipette tips for its dispensation.
- Formulation to reach constant:

∆A/min x 4127* or 8095* = U/L CK

	Tv= Total volume in mL		
* Tv x 1000	ε NADPH = 6.22 at 340 nm		
εxLPxSv	LP= Light path		
	Sv= Sample volume in mL		

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