ab229396
Human IgA
CatchPoint®
SimpleStep ELISA® Kit

For the quantitative measurement of IgA in human serum, plasma, milk, saliva, urine, and cell culture supernatants.

This product is for research use only and is not intended for diagnostic use.

Table of Contents

1. Overview

IgA *in vitro* CatchPoint SimpleStep ELISA (Enzyme-Linked Immunosorbent Assay) kit is designed for the quantitative measurement of IgA protein in humanserum, plasma, milk, saliva, urine, and cell culture supernatants.

The CatchPoint SimpleStep ELISA employs an affinity tag labeled capture antibody and a reporter conjugated detector antibody which immunocapture the sample analyte in solution. This entire complex (capture antibody/analyte/detector antibody) is in turn immobilized via immunoaffinity of an anti-tag antibody coating the well. To perform the assay, samples or standards are added to the wells, followed by the antibody mix. After incubation, the wells are washed to remove unbound material. CatchPoint HRP Development Solution containing the Stoplight Red Substrate is added. During incubation, the substrate is catalyzed by HRP generating a fluorescent product. Signal is generated proportionally to the amount of bound analyte and the intensity is measured in a fluorescence plater reader at 530/570/590 nm Excitation/Cutoff/Emission.

Human Immunoglobulin A (IgA) belongs to the immunoglobulin family of proteins which include Human IgG, IgE, and IgM, and are known as antibodies. IgA has an essential role in mucosal immunity. IgA is the second most common serum Ig at about one-fifth of the concentration of IgG, however it is the most abundant immunoglobulin in secretions, such as saliva, mucus, sweat, and tears. In normal human serum IgA is found mainly as a monomer, whereas in secretions IgA is found as a dimer. IgA dimeric form contains two additional proteins, secretory piece and a J chain. The secretory piece is synthesized in the epithelial cells and is added to IgA as it passes into the secretions, protecting it from degradation. Secretory IgA fights off bacteria by neutralizing the bacteria to clear the infection.

The most common disease associated with high levels of IgA in the kidney is IgA nephropathy, also known as Berger's disease. There is no clear clarification as to why IgA deposits occur in the kidney, however abnormality in the immune system is a possibility. Other diseases that IgA is associated with are Rheumatoid Arthritis, Crohn's Disease, Celiac disease and Henoch-Schonlein purpura (HSP).

2. Protocol Summary

Prepare all reagents, samples, and standards as instructed

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Add 50 µL standard or sample to appropriate wells

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Add 50 µL Antibody Cocktail to all wells

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Incubate at room temperature for 1 hour

⇩

Aspirate and wash each well three times with 350 µL 1X Wash Buffer PT

⇩

Add 100 µL of prepared CatchPoint HRP Development Solution to each well and incubate for 10 minutes

⇩

Read fluorescence at Ex/Cutoff/Em 530/570/590 nm

3. Precautions

Please read these instructions carefully prior to beginning the assay.

- All kit components have been formulated and quality control tested to function successfully as a kit.
- We understand that, occasionally, experimental protocols might need to be modified to meet unique experimental circumstances. However, we cannot guarantee the performance of the product outside the conditions detailed in this protocol booklet.
- Reagents should be treated as possible mutagens and should be handle with care and disposed of properly. Please review the Safety Datasheet (SDS) provided with the product for information on the specific components.
- Observe good laboratory practices. Gloves, lab coat, and protective eyewear should always be worn. Never pipet by mouth. Do not eat, drink or smoke in the laboratory areas.
- All biological materials should be treated as potentially hazardous and handled as such. They should be disposed of in accordance with established safety procedures.

4. Storage and Stability

Store kit at +4°C immediately upon receipt. Kit has a storage time of 1 year from receipt, providing components have not been reconstituted.

Refer to list of materials supplied for storage conditions of individual components. Observe the storage conditions for individual prepared components in the Materials Supplied section.

5. Limitations

- Assay kit intended for research use only. Not for use in diagnostic procedures.
- Do not mix or substitute reagents or materials from other kit lots or vendors. Kits are QC tested as a set of components and performance cannot be guaranteed if utilized separately or substituted.
- All data, except Typical Standard Curve and Sensitivity were collected using the colorimetric version of this kit (ab196263).

6. Materials Supplied

Item	Quantity	Storage Condition
Human IgA Capture Antibody 10X	600 µL	+4°C
Human IgA Detector Antibody 10X	600 µL	+4°C
Human IgA Lyophilized Purified Protein	2 Vials	+4°C
Antibody Diluent CPI	6 mL	+4°C
Wash Buffer PT 10X	20 mL	+4°C
Stoplight Red Substrate Buffer	12 mL	+4°C
100X Stoplight Red Substrate	120 µL	+4°C
500X Hydrogen Peroxide (H_2O_2, 3%)	50 µL	+4°C
Sample Diluent NS*	50 mL	+4°C
SimpleStep Pre-Coated Black 96-Well Microplate	96 Wells	+4°C
Plate Seal	1	+4°C

*Sample Diluent NS is provided but not necessary for this product.

7. Materials Required, Not Supplied

These materials are not included in the kit, but will be required to successfully perform this assay:

- Fluorescence microplate reader Ex/Cutoff/Em 530/570/590 nm.
- Method for determining protein concentration (BCA assay recommended).
- Deionized water.
- Multi- and single-channel pipettes.
- Tubes for standard dilution.
- Plate shaker for all incubation steps.
- Optional: Phenylmethylsulfonyl Fluoride (PMSF) (or other protease inhibitors).

8. Technical Hints

- Samples generating values higher than the highest standard should be further diluted in the appropriate sample dilution buffers.
- Avoid foaming or bubbles when mixing or reconstituting components.
- Avoid cross contamination of samples or reagents by changing tips between sample, standard and reagent additions.
- Ensure plates are properly sealed or covered during incubation steps.
- Complete removal of all solutions and buffers during wash steps is necessary to minimize background.
- As a guide, typical ranges of sample concentration for commonly used sample types are shown below in Sample Preparation (section 11).
- All samples should be mixed thoroughly and gently.
- Avoid multiple freeze/thaw of samples.
- Incubate ELISA plates on a plate shaker during all incubation steps.
- When generating positive control samples, it is advisable to change pipette tips after each step.

- The incubation times provided in this protocol were optimized for fastest results with good signal. It is possible to increase the signal with longer incubation times, further optimization might be necessary.
- Keep in mind any RFU values shown are relative, NOT absolute. RFU from one plate reader are not comparable to another, especially if different make or model.
- **To avoid high background always add samples or standards to the well before the addition of the antibody cocktail.**
- **This kit is sold based on number of tests. A 'test' simply refers to a single assay well. The number of wells that contain sample, control or standard will vary by product. Review the protocol completely to confirm this kit meets your requirements. Please contact our Technical Support staff with any questions.**

Special Handling Instructions for the Human IgA kit

IgA can bind to the surface of the skin microbiota. To prevent unintended background, it is recommended to clean bench surfaces and all pipettes to be used during the experiment with 10% bleach. Use a surgical mask and maintain gloves clean by either using 70% ethanol or by changing them frequently. Do not leave reagents or the plate opened while working or during assay incubation.

9. Reagent Preparation

−   Equilibrate all reagents to room temperature (18-25°C) prior to use. The kit contains enough reagents for 96 wells. The sample volumes below are sufficient for 48 wells (6 x 8-well strips); adjust volumes as needed for the number of strips in your experiment.

−   Prepare only as much reagent as is needed on the day of the experiment. Capture and Detector Antibodies have only been tested for stability in the provided 10X formulations.

    See Special Handling Instructions in section 8 before preparing reagents.

9.1   1X Wash Buffer PT:

Prepare 1X Wash Buffer PT by diluting Wash Buffer PT 10X with deionized water. To make 50 mL 1X Wash Buffer PT combine 5 mL Wash Buffer PT 10X with 45 mL deionized water. Mix thoroughly and gently.

9.2   Antibody Cocktail:

Prepare Antibody Cocktail by diluting the capture and detector antibodies in Antibody Diluent CPI. To make 3 mL of the Antibody Cocktail combine 300 µL 10X Capture Antibody and 300 µL 10X Detector Antibody with 2.4 mL Antibody Diluent CPI. Mix thoroughly and gently.

9.3   CatchPoint HRP Development Solution

Just prior to use prepare CatchPoint HRP Development Solution by diluting the 100X Stoplight Red Substrate and the 500X Hydrogen Peroxide in Stoplight Red Substrate Buffer.

For example, to make 6 mL of the CatchPoint HRP Development Solution combine 60 µL 100X Stoplight Red Substrate and 12 µL of 500X Hydrogen Peroxide with 5.928 mL Stoplight Red Substrate Buffer. Mix thoroughly and gently.

10. Standard Preparation

- Always prepare a fresh set of standards for every use.
- Discard working standard dilutions after use as they do not store well.
- The following section describes the preparation of a standard curve for duplicate measurements (recommended).

  <ins>See Special Handling Instructions in section 8 before preparing reagents.</ins>

10.1 **IMPORTANT:** If the protein standard vial has a volume identified on the label, reconstitute the IgA by adding that volume of Sample Diluent NS indicated on the label. Alternatively, if the vial has a mass identified, reconstitute the IgA standard by adding 1 mL Sample Diluent NS. Hold at room temperature for 10 minutes and mix gently. This is the 100 ng/mL **Stock Standard** Solution.

10.2 Label 11 tubes, Standards 2– 11. The **Stock Standard** solution will be standard #1.

10.3 Add 150 µL of Sample Diluent NS into numbers 2-11.

10.4 Use the Stock Standard to prepare the following dilution series. Standard #11 contains no protein and is the Blank control.

Standards will be added to the plate in step 13.3. If desired all 11 standards can be used for a full standard curve. Alternatively, to commit fewer wells to the standard curve, select a subset of at least 7 standards plus the blank control. If 7 standards are desired, we recommend standards #2-8.

Standard #	Dilution Sample	Volume to Dilute (µL)	Volume of Diluent (µL)	Starting Conc. (ng/mL)	Final Conc. (ng/mL)
1	Stock				100
2	Standard#1	150	150	100	50
3	Standard#2	150	150	50	25
4	Standard#3	150	150	25	12.5
5	Standard#4	150	150	12.5	6.25
6	Standard#5	150	150	6.25	3.13
7	Standard#6	150	150	3.13	1.56
8	Standard#7	150	150	1.56	0.78
9	Standard#8	150	150	0.78	0.39
10	Standard#9	150	150	0.39	0.20
11	None	0	150	0	0

11. Sample Preparation

Typical Sample Dynamic Range	
Sample Type	Range
Human Serum	$1:5x10^4 - 1:1.6x10^5$
Human Plasma - EDTA	$1:5x10^4 - 1:1.6x10^6$
Human Plasma - Citrate	$1:5x10^4 - 1:1.6x10^6$
Human Plasma - Heparin	$1:5x10^4 - 1:1.6x10^6$
Human Milk	$1:2x10^4 - 1:6.4x10^6$
Human Urine	$1:16 - 1:1x10^3$
Human Saliva	$1:1.3x10^4 - 1:4x10^5$
Culture Media	$1:10 - 1:160$

11.1 Plasma:

Collect plasma using citrate, EDTA or heparin. Centrifuge samples at 2,000 x g for 10 minutes. Dilute samples into Sample Diluent NS and assay. Store un-diluted plasma samples at -20ºC or below for up to 3 months. Avoid repeated freeze-thaw cycles.

11.2 Serum:

Samples should be collected into a serum separator tube. After clot formation, centrifuge samples at 2,000 x g for 10 minutes and collect serum. Dilute samples into Sample Diluent NS and assay. Store un-diluted serum at -20ºC or below. Avoid repeated freeze-thaw cycles.

11.3 Cell Culture Supernatants:

Centrifuge cell culture media at 2,000 x g for 10 minutes to remove debris. Collect supernatants and assay. Or dilute samples into Sample Diluent NS and assay. Store un-diluted samples at -20ºC or below. Avoid repeated freeze-thaw cycles.

11.4 Urine:

Centrifuge urine at 2,000 x g for 10 minutes to remove debris. Collect supernatants, dilute in Sample Diluent NS and assay. Store un-diluted samples at -20°C or below. Avoid repeated freeze-thaw cycles.

11.5 Saliva:

Centrifuge saliva at 800 x g for 10 minutes to remove debris. Collect supernatants and assay. Or dilute samples into Sample Diluent NS and assay. Store un-diluted samples at -20°C or below. Avoid repeated freeze-thaw cycles.

11.6 Milk:

De-fat milk samples as follows. Centrifuge milk samples at 500 x g for 15 minutes at 4°C and collect the aqueous fraction using syringe attached to needle. Centrifuge the aqueous fraction at 3,000 x g for 15 minutes at 4°C and collect the final aqueous fraction (de-fatted milk) using syringe attached to needle. Dilute the de-fatted milk samples at least 1.5 X in Sample Diluent NS and assay. Store un-diluted de-fatted milk at -20°C or below. Avoid repeated freeze-thaw cycles.

12. Plate Preparation

- The 96 well plate strips included with this kit are supplied ready to use. It is not necessary to rinse the plate prior to adding reagents.
- Unused plate strips should be immediately returned to the foil pouch containing the desiccant pack, resealed and stored at 4°C.
- For each assay performed, a minimum of two wells must be used as the zero control.
- For statistical reasons, we recommend each sample should be assayed with a minimum of two replicates (duplicates).
- Differences in well fluorescence or "edge effects" have not been observed with this assay.
- Ensure plate and all materials are equilibrated to room temperature during use.
- Cover the plate with a plate seal during incubation steps.

13. Assay Procedure

– Equilibrate all materials and prepared reagents to room temperature prior to use.

– We recommend that you assay all standards, controls and samples in duplicate.

– Prepare all reagents, working standards, and samples as directed in the previous sections.

   See Special Handling Instructions in section 8 before preparing reagents.

13.1 Prepare all reagents, working standards, and samples as directed in the previous sections.

13.2 Remove excess microplate strips from the plate frame, return them to the foil pouch containing the desiccant pack, reseal and return to 4°C storage.

13.3 Add 50 µL of all sample or standard to appropriate wells.

13.4 Add 50 µL of the Antibody Cocktail to each well.

13.5 Seal the plate and incubate for 1 hour at room temperature on a plate shaker set to 400 rpm.

13.6 Wash each well with 3 x 350 µL 1X Wash Buffer PT. Wash by aspirating or decanting from wells then dispensing 350 µL 1X Wash Buffer PT into each well. Wash Buffer PT should remain in wells for at least 10 seconds. Complete removal of liquid at each step is essential for good performance. After the last wash invert the plate and tap gently against clean paper towels to remove excess liquid.

13.7 Add 100 µL of prepared CatchPoint HRP Development Solution to each well and incubate for 10 minutes in the dark on a plate shaker set to 400 rpm. Further optimization of incubation time vs signal strength can be performed if needed.

13.8 Record the fluorescence at Ex/Cutoff/Em 530/570/590 nm. If using a Molecular Devices' plate reader supported by SoftMax® Pro software, a preconfigured protocol for these CatchPoint SimpleStep ELISA Kits is available with all the protocol and analysis settings at www.softmaxpro.org

Mode:	Fluorescence
Instrument settings:	Endpoint
Excitation:	530 nm
Cutoff:	570 nm
Emission:	590 nm
Sensitivity:	6 flashes/read or 200ms
PMT:	Auto
Auto calibrate:	On
Read:	Top
Read Height:	1*

*For microplate readers with Pre-Read Optimization option, the Read Height as well as Microplate Optimization is recommended before the first read.

13.9   Analyze the data as described below.

14. Calculations

14.1 Preconfigured protocols are available when using SoftMax Pro software from Molecular Devices

14.2 Calculate the average fluorescence value for the blank control (zero) standards. Subtract the average blank control standard fluorescence value from all other fluorescence values.

14.3 **Create a standard curve** by plotting the average blank control subtracted fluorescence value for each standard concentration (y-axis) against the target protein concentration (x-axis) of the standard. Use graphing software to draw the best smooth curve through these points to construct the standard curve.

Δ **Note:** Most **fluorescence** reader software or graphing software will plot these values and fit a curve to the data. A four-parameter curve fit (4PL) is often the best choice; however, other algorithms (e.g. linear, semi-log, log/log, 4-parameter logistic) can also be tested to determine if it provides a better curve fit to the standard values.

14.4 Determine the concentration of the target protein in the sample by interpolating the blank control subtracted fluorescence **values against the standard curve.** Multiply the resulting value by the appropriate sample dilution factor, if used, to obtain the concentration of target protein in the sample.

14.5 Samples generating fluorescence values greater than that of the highest standard should be further diluted and reanalyzed. Similarly, samples which measure at fluorescence values less than that of the lowest standard should be retested in a less dilute form.

15. Typical Data

Typical standard curve – data provided **for demonstration purposes only.** A new standard curve must be generated for each assay performed.
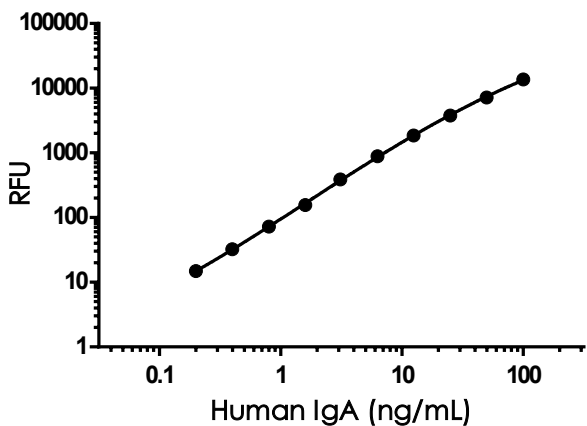
Standard Curve Measurements			
Concentration (ng/mL)	RFU		Mean RFU
	1	2	
0	46	45	45
0.20	58	63	60
0.39	74	82	78
0.78	117	119	118
1.56	200	203	202
3.13	448	418	433
6.25	967	904	935
12.5	1,920	1,895	1,908
25	3,847	3,795	3,821
50	7,303	7,187	7,245
100	13,756	13,636	13,696

Figure 1. Example of human IgA standard curve in Sample Diluent NS. The IgA standard curve was prepared as described in Section 10. Raw data generated on SpectraMax M4 Multi-Mode Microplate Reader is shown in the table. Background-subtracted data values (mean +/- SD) are graphed.

16. Typical Sample Values

SENSITIVITY –

The calculated minimal detectable dose (MDD) is 0.12 ng/mL. The MDD was determined by calculating the mean of zero standard replicates (n=16) and adding 2 standard deviations then extrapolating the corresponding concentration.

RECOVERY –

Three concentrations of IgA purified protein were spiked in duplicate to the indicated biological matrix to evaluate signal recovery in the working range of the assay.

Sample Type	Average % Recovery	Range (%)
Human Serum ($1:2x10^5$)	98.37	81.35 – 109.17
Human Plasma - EDTA	81.23	75.01 87.76
Human Plasma - Heparin	97.17	91.05 – 109.18
Human Plasma - Citrate	93.47	88.78 – 98.99
Human Milk ($1:8x10^4$)	92.21	81.0 – 101.51
Human Urine (1:50)	99.48	86.21 – 109.34
Human Saliva ($1:3x10^5$)	90.31	87.91 – 92.45
Culture Media (RPMI) (1:10)	100.65	85.17 – 117.29

Linearity of Dilution

Linearity of dilution is determined based on interpolated values from the standard curve. Linearity of dilution defines a sample concentration interval in which interpolated target concentrations are directly proportional to sample dilution.

Native IgA was measured in serum, plasma citrate, plasma EDTA, plasma heparin, milk, saliva and urine in a 2-fold dilution series. Sample dilutions were made in Sample Diluent NS. Purified IgA was spiked in culture media and diluted in a 2-fold dilution series in Sample Diluent NS.

Dilution Factor	Interpolated value	1:50,000 Human Serum	1:25,000 Human Plasma (Citrate)	1:25,000 Human Plasma (EDTA)	1:50,000 Human Plasma (Heparin)	1:10 Culture Media (RPMI)
Undiluted	ng/mL	39.45	65.20	62.91	44.01	7.15
	% Expected value	100	100	100	100	100
2	ng/mL	18.79	34.25	33.26	22.57	3.89
	% Expected value	95	107	106	103	109
4	ng/mL	9.12	16	15.70	11	1.91
	% Expected value	92	100	100	100	107
8	ng/mL	4.42	7.86	7.86	5.27	0.98
	% Expected value	90	98	100	96	110
16	ng/mL	2.16	3.96	3.93	2.67	0.4
	% Expected value	88	99	100	97	100

Dilution Factor	Interpolated value	1:10,000 Human Milk	1:13,000 Human Saliva	1:32 Human Urine
Undiluted	ng/mL	56.744	64.623	54.42
	% Expected value	100	100	100
2	ng/mL	28.90	29.77	25.65
	% Expected value	102	92	94
4	ng/mL	14.30	15.88	13.24
	% Expected value	101	98	97
8	ng/mL	7.22	8.36	6.98
	% Expected value	102	104	103
16	ng/mL	3.68	4.71	3.69
	% Expected value	104	107	109

PRECISION –

Mean coefficient of variations of interpolated values of IgA from three concentrations of human serum within the working range of the assay.

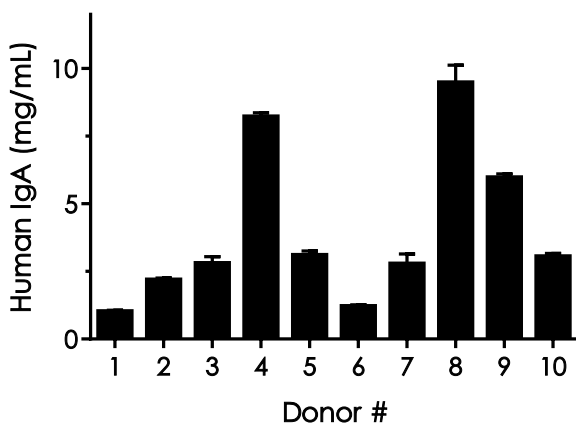|	Intra-Assay	Inter-Assay
n =	8	3
CV(%)	4.12	5.92

Figure 2. IgA levels in individual healthy donors. Ten individual healthy donors were evaluated for the presence of IgA in serum using this assay. Results were interpolated from the standard curve in Sample Diluent NS and corrected for sample dilution (1:2X10^5). The mean level of Human IgA was found at 3.978 mg/mL with a range of 1.016 – 9.476 mg/mL.
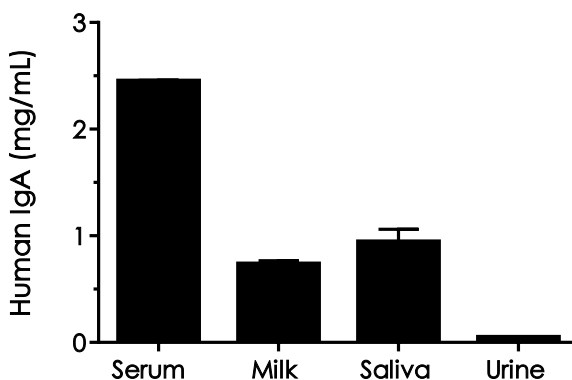
Figure 3. Comparison of IgA levels in human serum, milk, saliva, and urine. Fluids from a pooled selection of healthy donors were evaluated for the presence of human IgA in serum, milk, saliva, and urine using this assay. Results were interpolated from the standard curve in Sample Diluent NS and corrected for sample dilution (1:2X10^5). The mean levels of human IgA in serum were found at 2.45 mg/mL, in milk at 0.74 mg/mL, in saliva at 0.94 mg/mL and in urine at 0.05 mg/mL.

17. Assay Specificity

This kit recognizes both native and recombinant human IgA protein in serum, plasma, milk, urine, saliva, and cell culture supernatant samples only.

Cell and tissue extract samples have not been tested with this kit.

CROSS REACTIVITY

Human IgG, human IgM, and human IgE were prepared at 20 ng/mL and 10 ng/mL in Sample Diluent NS and assayed for cross reactivity. No significant cross reactivity was observed for human IgG, human IgM, or human IgE at either concentration with a mean OD deviation from background of 0.006.

INTERFERENCE

Purified human IgA was assayed at 20 ng/mL in the presence and absence of 20 ng/mL of human IgM or human IgE to determine interference. After background subtraction, human IgM and IgE were found to interfere with the assay by 9.24%. Human IgA was assayed at 20 ng/mL in the presence and absence of 80 ng/mL of human IgG to determine interference. After background subtraction, no significant interference was observed.

18. Species Reactivity

This kit recognizes human IgA protein.

Other species reactivity was determined by measuring 1:200,000 (dilution) serum samples of various species, interpolating the protein concentrations from the human standard curve, and expressing the interpolated concentrations as a percentage of the protein concentration in human serum assayed at the same dilution.

Reactivity < 3% was determined for the following species:
- Mouse
- Rat
- Hamster
- Guinea Pig
- Rabbit
- Dog
- Goat
- Pig
- Cow

Please contact our Technical Support team for more information.

19. Troubleshooting

Problem	Reason	Solution
Poor standard curve	Inaccurate Pipetting	Check pipettes
	Improper standard dilution	Prior to opening, briefly spin the stock standard tube and dissolve the powder thoroughly by gentle mixing
Low Signal	Incubation times too brief	Ensure sufficient incubation times; increase to 2 or 3 hour standard/sample incubation
	Inadequate reagent volumes or improper dilution	Check pipettes and ensure correct preparation
	Incubation times with CatchPoint HRP Development Solution too brief	Read plate again after longer incubation time
Large CV	Plate is insufficiently washed	Review manual for proper wash technique. If using a plate washer, check all ports for obstructions.
	Contaminated wash buffer	Prepare fresh wash buffer
Low sensitivity	Improper storage of the ELISA kit	Store your reconstituted standards at -80°C, all other assay components 4°C. Keep Stoplight Red Substrate protected from light.
Precipitate in Diluent	Precipitation and/or coagulation of components within the Diluent.	Precipitate can be removed by gently warming the Diluent to 37°C.

20. Notes

Technical Support

For all technical or commercial enquiries please go to:

www.abcam.com/contactus
www.abcam.cn/contactus (China)
www.abcam.co.jp/contactus (Japan)