Pancreatic amylase CC* FS **

Diagnostic reagent for quantitative in vitro determination of pancreatic amylase in serum, plasma or urine on photometric systems

Order Information

Cat. No.	Kit s	ize					
1 0551 99 10 021	R1	5 x	20 mL	+	R2	1 x	25 mL
1 0551 99 10 023	R1	1 x	800 mL	+	R2	1 x	200 mL
1 0551 99 10 930	R1	4 x	20 mL	+	R2	2 x	10 mL

Summary [1,2]

α-Amylases are hydrolytic enzymes which break down starch into maltose. In the human body α-amylases originate from various organs: the pancreatic amylase is produced by the pancreas and released into the intestinal tract, the salivary amylase is synthesized in the salivary glands and secreted into saliva. As the pancreatic and the salivary amylase show a structural homology of 97%, the only method to distinguish both sufficiently is to use an assay based on monoclonal antibodies to inhibit the salivary enzyme. The amylase present in the blood is eliminated through the kidney and excreted into the urine. Therefore, an elevation of serum activity is reflected in the rise of urinary amylase activity. Measurement of $\alpha\text{-amylase}$ in serum and urine is mainly applied for the diagnosis of pancreatic disorders as well as for detecting the development of complications. In acute pancreatitis the blood amylase activity increases within few hours after onset of abdominal pain, peaks after approx. 12 hours and returns to values within the reference range at the latest after 5 days. Although the pancreatic amylase is much more specific for detection of pancreatic disorders than the total amylase, for confirmation of an acute pancreatitis an additional measurement of lipase is recommended.

Method

Enzymatic photometric test, in which the substrate 4,6-ethylidene-(G7)-p-nitrophenyl-(G1)-A-D-maltoheptaoside (EPS-G7) is cleaved by α -amylases into various fragments. These are further hydrolyzed in a second step by A-glucosidase producing glucose and p-nitrophenol [1,2]. As the salivary isoenzyme is inhibited selectively by a combination of two monoclonal antibodies during the preincubation phase, the increase in absorbance represents the pancreatic amylase activity in the sample [3-5].

Principle

```
5 \text{ EPS-G7} + 5 \text{ H}_2\text{O} < \frac{\alpha - \text{Amylase}}{}
                                               2 Ethylidene-G5 + 2 G2PNP
                                             + 2 Ethylidene-G4 + 2 G3PNP
                                             + Ethylidene-G3 +
                                                                     G4PNP
2 G2PNP + 2 G3PNP + G4PNP + 14 H<sub>2</sub>O < α-Glucosidase > 5 PNP
(PNP = p-Nitrophenol, G =Glucose)
```

Reagents

Components and Concentrations

R1:	Good's buffer	pH 7.15	0.1 mol/L
	NaCl		62.5 mmol/L
	MgCl ₂		12.5 mmol/L
	α-Glucosidase		≥ 2,5 kU/L
	Monoclonal antibod salivary amylase (m	≥ 31 mg/L	
R2:	Good's buffer	pH 7.15	0.1 mol/L
	EPS-G7		8.5 mmol/L

Storage Instructions and Reagent Stability

The reagents are stable up to the end of the indicated month of expiry, if stored at 2 – 8°C, protected from light and contamination is avoided. Do not freeze the reagents!

Warnings and Precautions

- The remaining activity of salivary α-amylase is up to 3%. Very rarely extremely high activities of salivary α-amylase may lead to increased readings of pancreatic α-amylase. However saliva and skin do contain α-amylase, therefore never pipette by mouth and avoid skin contact with the reagents.
- The reagents contain sodium azide (0.95 g/L) as preservative. Do not swallow! Avoid contact with skin and mucous membranes.
- Reagent 1 contains animal material. Handle the product as potentially infectious according to universal precautions and good laboratory practice.
- In very rare cases, samples of patients with gammopathy might give falsified results [10].
- Please refer to the safety data sheets and take the necessary precautions for the use of laboratory reagents. For diagnostic purposes, the results should always be assessed with the patient's medical history, clinical examinations and other findings.
- For professional use only!

Waste Management

Please refer to local legal requirements.

Reagent Preparation

The reagents are ready to use.

Materials required but not provided

NaCl solution 9 g/L General laboratory equipment

Specimen

Serum, heparin plasma or EDTA plasma, urine

Stability [8]:

in serum/plasma:	7 days	at	20 – 25°C
	7 days	at	4 – 8°C
	1 year	at	-20°C
in urine:	2 days	at	20 – 25°C
	10 days	at	4 – 8°C
	3 weeks	at	-20°C

Freeze only once! Discard contaminated specimens.

Assay Procedure

Application sheets for automated systems are available on request.

Wavelength Ha 405 nm Optical path 1 cm Temperature 37°C

Measurement Against reagent blank

	Blank	Serum / Plasma	Urine		
Sample/Calibrator	-	20 μL	10 μL		
Reagent 1	1000 μL	1000 μL	1000 μL		
Mix, incubate for approx. 3 min., then add:					
Reagent 2	250 µL	250 µL	250 µL		
Mix, read absorbance after 2 min. and start stopwatch.					
Read absorbance again 1, 2 and 3 min thereafter.					

Calculation

With factor

 $\Delta A/\min x 5670 = Pancreatic amylase activity [U/L]$

With calibrator

P – Amyl.
$$[U/L] = \frac{\Delta A / min Sample}{\Delta A / min Calibrator} \times Conc. Calibrator [U/L]$$

Conversion factor

Pancreatic amylase [U/L] x 0.0167 = Pancreatic amylase [µkat/L]

Calibrators and Controls

For the calibration of automated photometric systems, DiaSys TruCal U calibrator is recommended. This method is traceable to the molar extinction coefficient. For internal quality control DiaSys TruLab N and P controls should be assayed. Each laboratory should establish corrective action in case of deviations in control recovery.

	Cat. No.	Ki	Kit size		
TruCal U	5 9100 99 10 063	20 >	3 mL		
	5 9100 99 10 064	6 >	3 mL		
TruLab N	5 9000 99 10 062	20 >	c 5 mL		
	5 9000 99 10 061	6 >	c 5 mL		
TruLab P	5 9050 99 10 062	20 >	c 5 mL		
	5 9050 99 10 061	6 >	c 5 mL		

Performance Characteristics

Measuring range

On automated systems the test is suitable for the determination of pancreatic amylase activities up to 2000 U/L.

In case of a manual procedure, the test is suitable for pancreatic amylase activities which correspond to a maximum of $\Delta A/min$ of 0.350.

If such value is exceeded the sample should be diluted 1 + 10 with NaCl solution (9 g/L) and results multiplied by 11.

Specificity/Interferences

No interference was observed by ascorbic acid up to 30 mg/dL, bilirubin up to 40 mg/dL, lipemia up to 2,000 mg/dL triglycerides and Hemoglobin up to 150 mg/dL. For further information on interfering substances refer to Young DS [9].

Sensitivity/Limit of Detection

The lower limit of detection is 5 U/L.

Precision

Intra-assay precision	Mean [U/L]	SD	CV
n = 20		[U/L]	[%]
Sample 1	69.7	2.18	3.13
Sample 2	207	2.61	1.26
Sample 3	370	3.36	0.91

Inter-assay precision n = 20	Mean [U/L]	SD [U/L]	CV [%]
Sample 1	68.3	1.48	2.17
Sample 2	204	1.61	0.79
Sample 3	371	3.14	0.85

Method Comparison

A comparison of DiaSys Pancreatic amylase CC FS (y) with a commercially available test (x) using 58 samples gave following results:

y = 0.97 x - 1.66 U/L; r = 0.994.

Reference Range [7]

	Women		Men	
	U/L	µkat/L	U/L	µkat/L
Serum/plasma	< 53	< 0.88	< 53	< 0.88
Urine	< 319	< 5.32	< 356	< 5.93

Each laboratory should check if the reference ranges are transferable to its own patient population and determine own reference ranges if necessary.

Literature

- Lorentz K. α-Amylase. In: Thomas L, editor. Clinical laboratory diagnostics. 1st ed. Frankfurt: TH-Books Verlagsgesellschaft; 1998. p.192–202.
- Moss DW, Henderson AR. Digestive enzymes of pancreatic origin. In: Burtis CA, Ashwood ER, editors. Tietz Textbook of Clinical Chemistry. 3rd ed. Philadelphia: W.B Saunders Company; 1999. p.689-98.
- Gerber M, Naujoks K, Lenz H, Wulff K. A monoclonal antibody that specifically inhibits human salivary alphaamylase. Clin Chem 1987; 33: 1158-62.
- Kruse-Jarres JD, Kaiser C, Hafkenscheid JC, Hohenwallner W, Stein W., Bohner J et al. Evaluation of a new alphaamylase assay using 4,6-ethylidene-(G7)-1-4-nitrophenyl-(G1)-alpha,D-maltoheptaoside as substrate. J Clin Chem Biochem 1989; 27: 103-13.
- Tietz NW, Burlina A, Gerhardt W, Junge W, Maffertheimer P, Mural T et al. Multicenter evaluation of a specific pancreatic isoamylase assay based on a double monoclonal-antibody technique. Clin Chem 1988; 34: 2096-102.
- Junge W, Troge B, Klein G, Poppe W, Gerber M. Evaluation of a new assay for pancreatic amylase: Performance characteristics and estimation of reference interval. Clin Biochem 1989; 22: 109-14.
- Junge W, Wortmann W, Wilke B, Waldenstroem J et al. Development and evaluation of assays for determination of total and pancreatic amylase at 37 °C according to the principle recommended by the IFCC. Clin Biochem 2001; 34: 607-15.
- Guder WG, Zawta B et al. The Quality of Diagnostic Samples. 1st ed. Darmstadt: GIT Verlag; 2001. p. 16-17, 50-51.
- Young DS. Effects of Drugs on Clinical Laboratory Tests. 5th ed. Volume 1 and 2. Washington, DC: The American Assocation for Clinical Chemistry Press 2000.
- Bakker AJ, Mücke M. Gammopathy interference in clinical chemistry assays: Mechanisms, detection and prevention. Clin Chem Lab Med 2007; 45()): 1240–1243.

Manufacturer



DiaSys Diagnostic Systems GmbH Alte Strasse 9 65558 Holzheim Germany