

TRIGLICERÍDEOS WS

Triglycerides WS

Anvisa 80115310207

ORDER INFORMATION

Apresentação
2 x 250mL
6 x 30mL
4 x 43,6mL
1 x 250mL
3 x 40mL

INTENDED USE

Reagent for quantitative determination of Triglycerides in serum or plasma on photometric systems.

SUMMARY [1,2]

Triglycerides are esters of glycerol with three fatty acids. They represent the most abundant naturally occurring lipids. They are transported in plasma bound to apolipoproteins forming very low-density lipoproteins (VLDL) and chylomicrons. Triglyceride measurement is used as a screening for lipid level assessment in determining atherosclerosis risks and monitoring lipid level decreases. Recent studies have shown that an increase in triglyceride concentration combined with an increase in low-density lipoprotein (LDL) constitutes a high risk for coronary heart disease (CHD). High triglyceride levels also occur in various diseases of the liver, kidneys, and pancreas.

METHOD

Colorimetric enzymatic test using glycerol-3-phosphate-oxidase (GPO)

PRINCIPLE

Determination of triglycerides after enzymatic splitting with lipoprotein lipase. Quinoneimine is the indicator, generated from 4-aminoantipyrine and 4-chlorophenol by hydrogen peroxide under the catalytic action of peroxidase.

REAGENT

Components and Concentrations

Monoreagent

Good's buffer	pH 7,2	< 100 mmol/L
4-Chlorophenol		< 5 mmol/L
ATP		2 mmol/L
Mg^{2+}		15 mmol/L
Glycerokinase	GK	< 1 KU/L
Peroxidase	POD	< 10 KU/L
Lipoprotein lipase	LPL	< 10 KU/L
4-Aminoantipyrine		< 1 mmol/L
Glycerol-3-phospate oxidase	GPO	< 5 KU/L

STORAGE AND STABILITY

The reagent is ready for use and stable until the expiration date if stored at 2 to 8 °C, protected from light and contamination is avoided. Do not freeze the reagent!

Note: The measurement is not influenced by an occasional color change if the absorbance of the reagent is < 0.3 at 546 nm.

WARNINGS AND PRECAUTIONS

- The reagent contain sodium azide (0.95 g/L) as preservative. Do not swallow! Avoid contact with skin and mucous membranes.
- The reagent contains biological material. Handle the product as potentially infectious according to universal precautions and good clinical laboratory practice.

- In very rare cases, samples of patients with gammopathy might give falsified results [6].
- N-acetylcysteine (NAC), acetaminophen and metamizole medication leads to falsely low results in patient samples.
- Please refer to the safety data sheets (SDS) 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.
- 6. For professional use only.

WASTE MANAGEMENT

Follow the requirements of the current guidelines about technical regulation for the management of healthcare service waste, as well as other equivalent biosafety practices.

REAGENT PREPARATION

The reagent is ready to use.

MATERIALS REQUIRED BUT NOT PROVIDED

- 1. NaCl solution 9 g/L.
- 2. General laboratory equipment.

SPECIMEN

Serum, heparin plasma or EDTA-plasma

Stability [4]:	2 days	at	20 − 25 °C
	7 weeks	at	4 - 8 °C
	At least 1 year	at	- 20 °C

Discard contaminated specimens. Only freeze once!

ASSAY PROCEDURE

Applications for automatic systems are available upon request or on our website: www.kovalent.com.br

Wavelength	500 nm, Hg 546nm
Optical path	1 cm
Temperature	20 - 25 °C / 37 °C
Measurement	Against reagent blank

	Blank	Sample or calibrator	
Sample or calibrator - 10 μL			
Distilled water 10 μL -			
Reagent 1000 μL 1000 μL			
Mix incubate for 5 minutes at 37 °C or 10 minutes at 20 - 25 °C. Read			

Mix, incubate for 5 minutes at 37 °C or 10 minutes at 20 - 25 °C. Read absorbance against reagent blank within 60 minutes.

CALCULATION

With calibrator

Triglycerides [mg/dL] =
$$A_{\text{Sample}} \times Conc. \text{ Cal [mg/dL]}$$

To correct for free glycerol, subtract 10 mg/dL (0.11 mmol/L) from the triglycerides value calculated above.

Conversion Factor

Triglycerides [mg/dL] x 0.01126 = Triglycerides [mmol/L]

WARRANTY

These instructions for use should be read carefully before using the product and the information contained therein should be strictly adhered to. The reliability of the test results cannot be guaranteed if the instructions are not followed.

CALIBRATORS AND CONTROLS

For calibration in automated photometric systems, Kovalent Topkal U calibrator is recommended. Use Kovalent Topkon N and P for internal quality control. The Kovalent Topkon L control can also be used. Each laboratory should establish corrective action in case of deviations in control recovery.

PERFORMANCE CHARACTERISTICS

Measuring range

The test is designed to determine triglyceride concentrations within a measurement range of 1 to 1000 mg/dL (0.01 - 11.3 mmol/L). When the

Instructions for Use

For in vitro diagnostic use



values exceed this range, the samples should be diluted 1 + 4 with NaCl solution (9g/L) and the results multiplied by 5.

Specificity / Interferences

No interference was observed by ascorbic acid up to 3 mg/dL, bilirubin up to 40 mg/dL, bilirubin (unconjugated) up to 9 mg/dL and hemoglobin up to 500 mg/dL. For more information on interfering substances, see Young DS [5].

Sensibility / Limit of Detection

The lowest detection limit is 1 mg/dL.

Precision

Intra-assay precision n = 10	Mean	SD	CV
	[mg/dL]	[mg/dL]	[%]
Normal control Pathological control	89.80	1.69	1.88
	170.8	3.46	2.02

Inter-assay precision n = 9	Mean [mg/dL]	SD [mg/dL]	CV [%]
Normal control	87.46	1.96	2.24
Pathological control	169.34	5.41	3.19

Method comparison

Method comparison between Kovalent Triglicerídeos WS (y) and a commercial test (x) using 30 samples demonstrated the following results: y = 1.0148 x - 0.7381; R^2 = 0.9997.

REFERENCE VALUES [2]

	[mg/dL]	[mmol/L]
Desirable	< 200	2.3
High Risk Threshold	200 - 400	2.3 - 4.5
High risk	> 400	4.5

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

CLINICAL INTERPRETATION [3]

Epidemiological studies have observed that a combination of plasma triglycerides > 180 mg/dL (> 2 mmol/L) and HDL-cholesterol < 40 mg/dL (1 mmol/L) predict a high risk of CHD (coronary heart disease). Borderline levels (> 200 mg/dL) should always be regarded in association with other risk factors for coronary diseases.

LITERATURE

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- Recommendation of the Second Joint Task Force of European and other Societies on Coronary Prevention. Prevention of coronary heart disease in clinical practice. Eur Heart J 1998;19: 1434-503.
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- Bakker AJ, Mucke M. Gammopathy interference in clinical chemistry assays: mechanisms, detection and prevention. Clin Chem Lab Med 2007; 45(9):1240-1243.

CONSUMER INFORMATION

Symbols used:

•••	Manufacturer
1	Temperature limit
IVD	In vitro diagnostic device
\triangle	Caution
[]i	Operating instructions
	Recycling material

V	Do not discard directly into the environment
LOT	Batch code
~Л	Date of manufacture
Σ	Use by date
8	Biological hazards
\$	Highly toxic
	Corrosive
(1)	Harmful

Manufacturer:

Kovalent do Brasil Ltda.

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Kit sizes variations on demand:

Anvisa No.	Kit size
80115310207	R 4x50mL
80115310207	R 2x20mL
80115310207	R 5 x40mL

Costumer service: sac@kovalent.com.br - (21) 3907-2534 / 0800 015 1414

Expiration date and Lot no.: See label