

AlphaLISA Human/Rat Interleukin 22 (IL22) Detection Kit

Product number: AL320 HV/C/F

Caution: For Laboratory Use. A research product for research purposes only.

Lot specific kit information can be found at www.perkinelmer.com/COA

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Product Information

Application: This kit is designed for the quantitative determination of human or rat IL22 in serum, buffered solution or cell culture medium using a homogenous AlphaLISA assay (no wash steps).

Sensitivity: Lower Detection Limit (LDL): 18 pg/mL
Lower Limit of Quantification (LLOQ): 65 pg/mL
EC₅₀: 150 ng/mL

Dynamic range: 10 – 1,000,000 pg/mL (Figure 1).

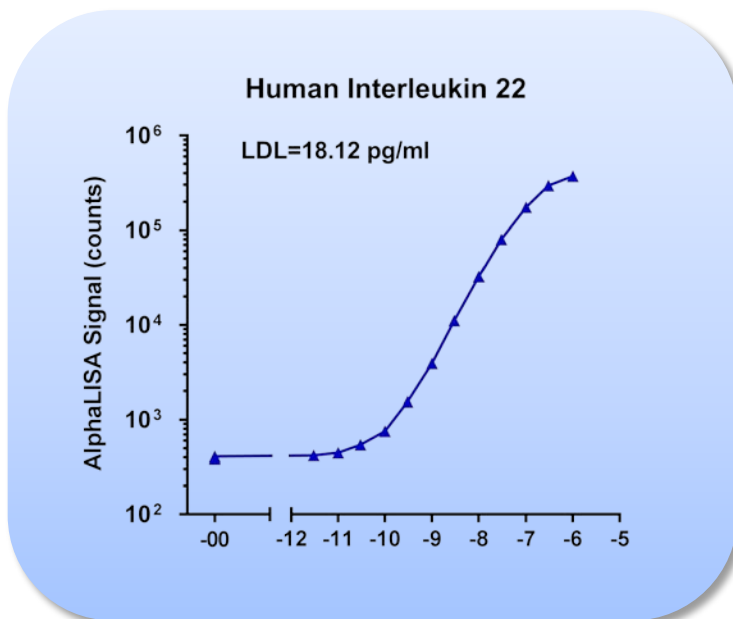


Figure 1. Typical sensitivity curve in 1X AlphaLISA Immunoassay Buffer (Log-Log scale). The data was generated using a white Optiplate™-384 microplate and the EnVision® Multilabel Plate Reader with Alpha option 2103.

Storage: Store kit in the dark at +4°C. Store reconstituted analyte at -20°C.

Stability: This kit is stable for at least 6 months from the manufacturing date when stored in its original packaging and the recommended storage conditions. Note: Once reconstituted, the Human Interleukin 22 analyte is stable for at least 3 months days when stored at -20°C.

Quality Control

Lot to lot consistency is confirmed in an AlphaLISA assay. Maximum and minimum signals, EC₅₀ and LDL were measured on the EnVision Multilabel Plate Reader with Alpha option using the protocol described in this technical data sheet. We certify that these results meet our quality release criteria. Maximum counts may vary between bead lots and the instrument used, with no impact on LDL measurement.

Analyte of Interest

IL22 is a member of a group of cytokines called the IL10 family (including IL19, IL20, IL24, and IL26), a class of potent mediators of cellular inflammatory responses. IL22, ~20 kDa in size, is produced by activated DC, TH1, TH17, and NK cells acting primarily on epithelial cells such as respiratory and gut epithelial cells. On binding to its receptor (IL22R1), which is associated to the interleukin 10 receptor 2 (IL10R2), IL22 promotes activation of multiple signals including the STAT1, STAT3, ERK, p38, and JNK pathways. IL22 can contribute to immune disease through the stimulation of inflammatory responses, S100s and defensins. In some contexts, the pro-inflammatory versus tissue-protective functions of IL22 are regulated by the often co-expressed cytokine IL17A.

Description of the AlphaLISA Assay

AlphaLISA technology allows the detection of molecules of interest in buffer, cell culture media, serum and plasma in a highly sensitive, quantitative, reproducible and user-friendly mode. In an AlphaLISA assay, a Biotinylated Anti-Analyte Antibody binds to the Streptavidin-coated Alpha Donor beads, while another Anti-Analyte Antibody is conjugated to AlphaLISA Acceptor beads.

In the presence of the analyte, the beads come into close proximity. The excitation of the Donor beads provokes the release of singlet oxygen molecules that triggers a cascade of energy transfer in the Acceptor beads, resulting in a sharp peak of light emission at 615 nm (Figure 2).

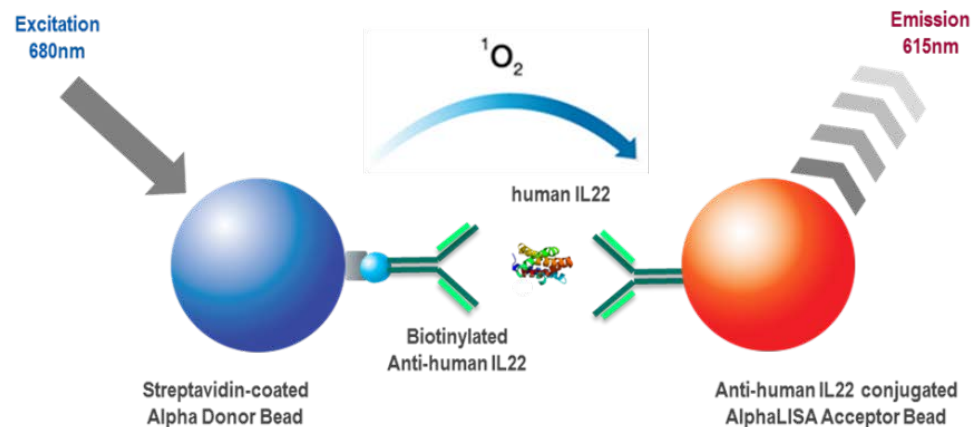


Figure 2. AlphaLISA Assay principle.

Precautions

- The Alpha Donor beads are light-sensitive. All the other assay reagents can be used under normal light conditions. All Alpha assays using the Donor beads should be performed under subdued laboratory lighting (< 100 lux). Green filters (LEE 090 filters (preferred) or Roscolux filters #389 from Rosco) can be applied to light fixtures.
- All blood components and biological materials should be handled as potentially hazardous.
- Some analytes are present in saliva. Take precautionary measures to avoid contamination of the reagent solutions.
- The Biotinylated Anti-Analyte Antibody contains sodium azide. Contact with skin or inhalation should be avoided.

Kit Content: Reagents and Materials

Kit components	AL320HV (100 assay points ^{***})	AL320C (500 assay points ^{***})	AL320F (5000 assay points ^{***})
AlphaLISA Anti-Human IL22 Acceptor beads stored in PBS, 0.05% Proclin-300, pH 7.2	25 µL @ 5 mg/mL (1 brown tube, <u>white</u> cap)	50 µL @ 5 mg/mL (1 brown tube, <u>white</u> cap)	500 µL @ 5 mg/mL (1 brown tube, <u>white</u> cap)
Streptavidin (SA)-coated Donor beads stored in 25 mM HEPES, 100 mM NaCl, 0.05% Proclin-300, pH 7.4	100 µL @ 5 mg/mL (1 brown tube, <u>black</u> cap)	200 µL @ 5 mg/mL (1 brown tube, <u>black</u> cap)	2 mL @ 5 mg/mL (2 brown tubes, <u>black</u> caps)
Biotinylated Antibody Anti-Human IL22 stored in PBS, 0.1% Tween-20, 0.05% NaN ₃ , pH 7.4	25 µL @ 500 nM (1 tube, <u>black</u> cap)	50 µL @ 500 nM (1 tube, <u>black</u> cap)	500 µL @ 500 nM (1 tube, <u>black</u> cap)
Human IL22 (1 µg), lyophilized analyte *	1 tube, <u>clear</u> cap	1 tube, <u>clear</u> cap	1 tube, <u>clear</u> cap
10X AlphaLISA Immunoassay Buffer (10X) **	2 mL, 1 small bottle	10 mL, 1 small bottle	100 mL, 1 large bottle

* Reconstitute Human IL22 in 100 µL Milli-Q[®] grade H₂O. The reconstituted analyte should be used within 60 minutes or aliquoted into screw-capped polypropylene vials and stored at -20°C for further experiments. Avoid multiple freeze-thaw cycles. It has been demonstrated that reconstituted Human IL22 is stable for at least 60 days at -20°C. One vial contains an amount of Human IL22 sufficient for performing 10 standard curves. Additional vials can be ordered separately (cat # AL320S).

** Contains 250 mM HEPES, pH 7.4, 1% Casein, 10 mg/mL Dextran-500, 5% Triton X-100 and 0.5% Proclin-300. Extra buffer can be ordered separately (cat # AL000C: 10 mL, cat # AL000F: 100 mL). Once diluted, 1X AlphaLISA Immunoassay Buffer contains 25 mM HEPES, pH 7.4, 0.1% Casein, 1 mg/mL Dextran-500, 0.5% Triton X-100 and 0.05% Proclin-300.

*** The number of assay points is based on an assay volume of 100 µL in 96-well plates (AL320HV) or 50 µL in 96- or 384-well assay plates using the kit components at the recommended concentrations.

Sodium azide should **not** be added to the stock reagents. High concentrations of sodium azide (> 0.001 % final in the assay) might decrease the AlphaLISA signal. Note that sodium azide from the Biotinylated Antibody stock solution will not interfere with the AlphaLISA signal (0.0001% final in the assay).

Specific additional required reagents and materials:

The following materials are recommended:

Item	Suggested source	Catalog #
TopSeal™-A Adhesive Sealing Film	PerkinElmer Inc.	6050195
EnVision®-Alpha Reader	PerkinElmer Inc.	-

Recommendations

- The volume indicated on each tube is guaranteed for single pipetting. Multiple pipetting of the reagents may reduce the theoretical amount left in the tube. To minimize loss when pipetting beads, it is preferable not to pre-wet the tip.
- Centrifuge all tubes (including lyophilized analyte) before use to improve recovery of content (2000g, 10-15 sec). Re-suspend all reagents by vortexing before use.
- Use Milli-Q[®] grade H₂O (18 MΩ·cm) to dilute 10X AlphaLISA Immunoassay Buffer and to reconstitute the lyophilized analyte.
- When diluting the standard or samples, change tips between each standard or sample dilution. When loading reagents in the assay microplate, change tips between each standard or sample addition and after each set of reagents.
- When reagents are added to the microplate, make sure the liquids are at the bottom of the well.
- Small volumes may be prone to evaporation. It is recommended to cover microplates with TopSeal-A Adhesive Sealing Films to reduce evaporation during incubation. Microplates can be read with the TopSeal-A Film.
- The AlphaLISA signal is detected with an EnVision Multilabel Reader equipped with the Alpha option using the AlphaLISA standard settings (e.g. Total Measurement Time: 550 ms, Laser 680 nm Excitation Time: 180 ms, Mirror: D640as, Emission Filter: M570w, Center Wavelength 570 nm, Bandwidth 100 nm, Transmittance 75%).
- AlphaLISA signal will vary with temperature and incubation time. For consistent results, identical incubation times and temperature should be used for each plate.
- The standard curves shown in this technical data sheet are provided for information only. A standard curve must be generated for each experiment. The standard curve should be performed in the bovine Immunoassay buffer for serum and/or plasma samples.
- AlphaLISA assays can be performed in cell culture medium but will have reduced performance in the presence of biotin: if possible, avoid biotin-containing medium (e.g. RPMI medium) as lower counts and lower sensitivity are expected. Add at least 1% FBS or 0.1% BSA to cell culture medium.

Assay Procedure

IMPORTANT: PLEASE READ THE RECOMMENDATIONS BELOW BEFORE USE

- The protocol described below is an example for generating one standard curve in a 50 µL final assay volume (48 wells, triplicate determinations). The protocol also includes testing samples in 384 wells. If a different amount of samples are tested, the volumes of all reagents have to be adjusted accordingly. These calculations do not include excess reagent to account for losses during transfer of solutions or dead volumes.
- The standard dilution protocol is provided for information only. As needed, the number of replicates or the range of concentrations covered can be modified.
- Use of four background points in triplicate (12 wells) is recommended when LDL/LLOQ is calculated. One background point in triplicate (3 wells) can be used when LDL/LLOQ is not calculated.

		Volume				
Format	# of data points	Final	Sample	AlphaLISA beads / Biotin Antibody MIX	SA-Donor beads	Plate recommendation
HV	100	100 µL	10 µL	40 µL	50 µL	White OptiPlate-96 (cat # 6005290) White ½ AreaPlate-96 (cat # 6005560)
C	250	100 µL	10 µL	40 µL	50 µL	White OptiPlate-96 (cat # 6005290) White ½ AreaPlate-96 (cat # 6005560)
	500	50 µL	5 µL	20 µL	25 µL	White ½ AreaPlate-96 (cat # 6005560) White OptiPlate-384 (cat # 6007290) Light gray AlphaPlate™-384 (cat # 6005350)
	1 250	20 µL	2 µL	8 µL	10 µL	Light gray AlphaPlate-384 (cat # 6005350) ProxiPlate™-384 Plus (cat # 6008280) White OptiPlate-384 (cat # 6007290)
	2 500	10 µL	1 µL	4 µL	5 µL	Light gray AlphaPlate-1536 (cat # 6004350)
F	5 000	50 µL	5 µL	20 µL	25 µL	White ½ AreaPlate-96 (cat # 6005560) White OptiPlate-384 (cat # 6007290) Light gray AlphaPlate-384 (cat # 6005350)
	12 500	20 µL	2 µL	8 µL	10 µL	Light gray AlphaPlate-384 (cat # 6005350) ProxiPlate-384 Plus (cat # 6008280) White OptiPlate-384 (cat # 6007290)
	25 000	10 µL	1 µL	4 µL	5 µL	Light gray AlphaPlate-1536 (cat # 6004350)

Steps for Preparing Reagents

The protocol (2 incubation steps) described below is for one standard curve (48 wells) and samples (452 wells). Dilution of standards can be done in 1X AlphaLISA Immunoassay Buffer, cell culture medium or serum.

If a different amount of samples are tested, the volumes of all reagents have to be adjusted accordingly.

1) Preparation of 1X AlphaLISA Immunoassay Buffer Buffer:

- Add 10 mL of 10X AlphaLISA Immunoassay Buffer to 90 mL H₂O.

2) Preparation of human IL22 analyte standard dilutions:

- Human IL22 analyte is provided at 1 µg in lyophilized form. Reconstitute with 100 µL MiliQ H₂O to create a 10 µg/mL solution. The first point of the curve is 1 µg/mL so a 10 fold dilution is required. Prepare standard dilutions as follows (change tip between each standard dilution):

Tube	Vol. of human IL22 (µL)	Vol. of diluent (µL) *	[human IL22] in standard curve	
			(g/mL in 5 µL)	(pg/mL in 5 µL)
A	10 µL of reconstituted human IL-2	90	1.00E-06	1000000
B	60 µL of tube A	140	3.00E-07	300000
C	60 µL of tube B	120	1.00E-07	100000
D	60 µL of tube C	140	3.00E-08	30000
E	60 µL of tube D	120	1.00E-08	10000
F	60 µL of tube E	140	3.00E-09	3000
G	60 µL of tube F	120	1.00E-09	1000
H	60 µL of tube G	140	3.00E-10	300
I	60 µL of tube H	120	1.00E-10	100
J	60 µL of tube I	140	3.00E-11	30
K	60 µL of tube J	120	1.00E-11	10
L	60 µL of tube K	140	3.00E-12	3
M ** (background)	0	100	0	0
N ** (background)	0	100	0	0
O ** (background)	0	100	0	0
P ** (background)	0	100	0	0

* Protocol: Dilute standards in 1X AlphaLISA Immunoassay Buffer, cell culture medium or human serum. At low concentrations of analyte, a significant amount of analyte can bind to the vial. Therefore, load the analyte standard dilutions in the assay microplate within 60 minutes of preparation.

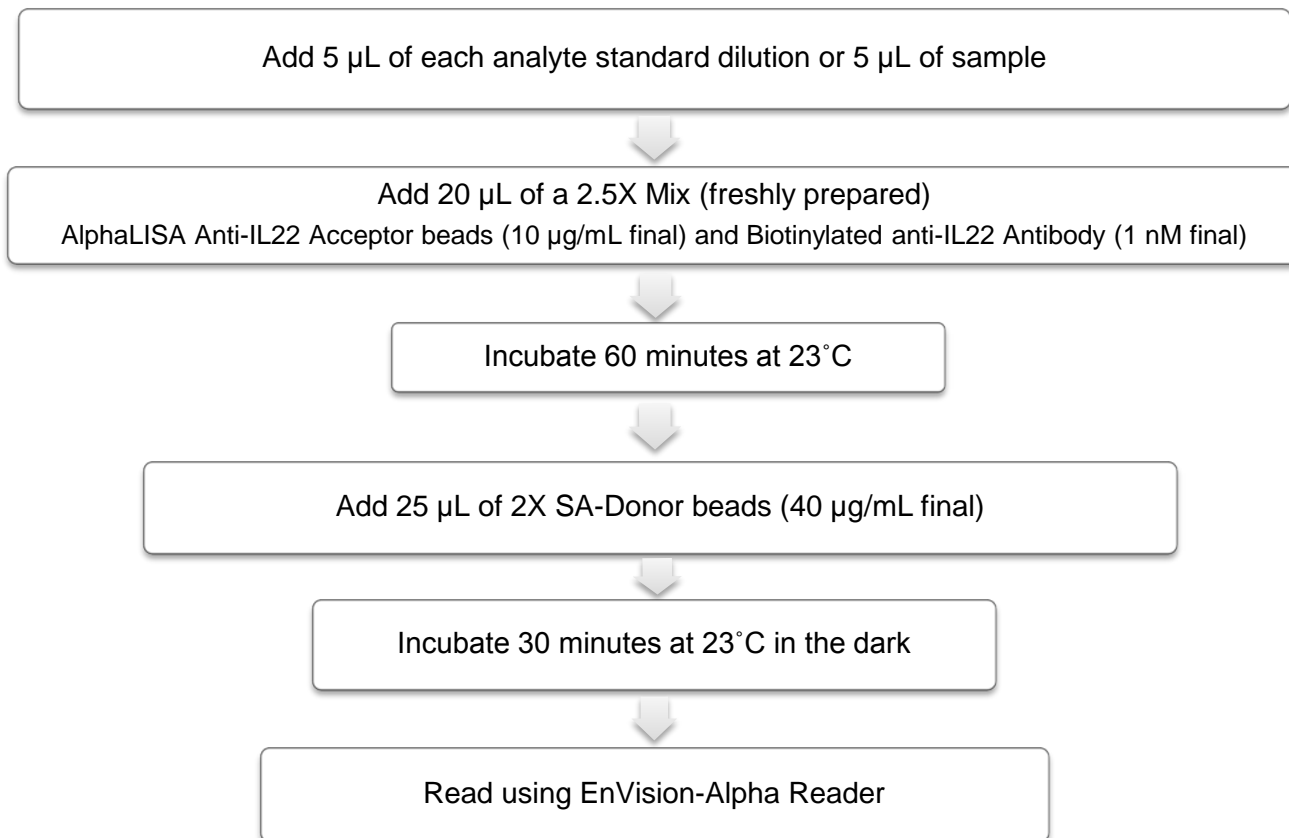
** Four background points in triplicate (12 wells) are used when LDL is calculated. If LDL does not need to be calculated, one background point in triplicate can be used (3 wells).

3) Preparation of 2.5X MIX AlphaLISA Anti-IL22 Acceptor beads + Biotinylated Antibody Anti-IL22 (25 µg/mL / 2.5 nM): Add 50 µL of 5 mg/mL AlphaLISA Anti-IL22 Acceptor beads and 50 µL of 500 nM Biotinylated Antibody Anti-IL22 to 900 µL of 1X AlphaLISA Immunoassay Buffer. Prepare just before use.

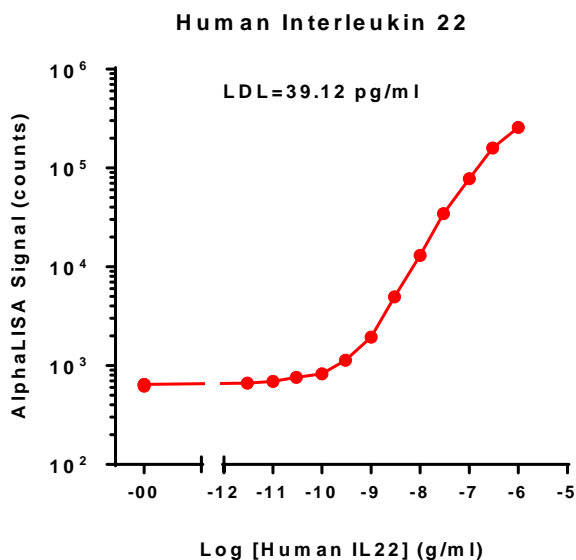
4) Preparation of 2X Streptavidin (SA) Donor beads (80 µg/mL): Keep the beads under subdued laboratory lighting. Add 200 µL of 5 mg/mL SA-Donor beads to 12 300 µL of 1X AlphaLISA Immunoassay Buffer.

5) Samples: If applicable, dilute samples to be tested in diluent (e.g. 1X AlphaLISA Immunoassay Buffer, cell culture medium or serum).

6) In a white Optiplate (384-wells):



Typical results in human serum (Log-Log scale)



Interpreting the Data

- Calculate the average count value for the background wells.
- Generate a standard curve by plotting the AlphaLISA counts versus the concentration of analyte. A log scale can be used for either or both axes. No additional data transformation is required.
- Analyze data according to a nonlinear regression using the 4-parameter logistic equation (sigmoidal dose-response curve with variable slope) and a $1/Y^2$ data weighting (the values at maximal concentrations of analyte after the hook point should be removed for correct analysis).
- The LDL is calculated by interpolating the average background counts (12 wells without analyte) + 3 x standard deviation value (average background counts + (3xSD) on the standard curve).
- The LLOQ as measured here is calculated by interpolating the average background counts (12 wells without analyte) + 10 x standard deviation value (average background counts + (10xSD) on the standard curve. Alternatively, the true LLOQ can be determined by spiking known concentrations of analyte in the matrix and measuring the percent recovery, and then determining the minimal amount of spiked analyte that can be quantified within a given limit (usually +/- 20% or 30% of the real concentration).
- Read from the standard curve the concentration of analyte contained in the samples.
- If samples have been diluted, the concentration read from the standard curve must be multiplied by the dilution factor.

Assay Performance Characteristics

AlphaLISA assay performance described below was determined using the 2 step protocol.

- Assay Sensitivity:

The LDL was calculated as described above. The values correspond to the lowest concentration of analyte that can be detected in a volume of 5 μ L using the recommended assay conditions.

LDL (pg/mL)	Buffer/Serum/Medium	# of experiments
18	AlphaLISA Immunoassay Buffer	16
39	Human serum	4
40	DMEM	4
83	RPMI	4

* Note that LDL/ LLOQ can be decreased (i.e. sensitivity increased) by increasing the volume of analyte in the assay (e.g. use 10 μ L of analyte in a final assay volume of 50 μ L).

- Assay Precision:

The following assay precision data were calculated from the three independent assays using two different kit lots. In each lot, the analytes were prepared in AlphaLISA Bovine Immunoassay Buffer (BIAB), AlphaLISA Immunoassay Buffer (IAB), DMEM, or RPMI. Each assay consisted of one standard curve comprising 12 data points (each in triplicate) and 12 background wells (no analytes). The assays were performed in 384-well format using AlphaLISA Immunoassay Buffer.

- Intra-assay precision:

The intra-assay precision was determined using a total of 16 independent determinations in triplicate. Shown are CV%.

Human IL22	AlphaLISA Immunoassay Buffer	Human Serum	DMEM	RPMI
CV%	3.8%	4.4%	4.8%	6.6%

- Inter-assay precision:

The inter-assay precision was determined using a total of 3 independent determinations with 9 measurements for 3 ng/mL sample. Shown are CV%.

Human IL22 (3 ng/ml)	AlphaLISA Immunoassay Buffer	Human Serum	DMEM	RPMI
CV%	5.6%	11.5%	8.3%	15.4%

- Spike Recovery:

Three known concentrations of analyte were spiked in AIB, or human serum or in cell culture media containing 10% FBS. All samples, including non-spiked Immunoassay Buffers and culture media were measured in the assay. The average recovery from three independent measurements is reported.

Spiked Human IL22 (ng/ml)	% Recovery (in Immunoassay Buffer)	% Recovery (in Serum)	% Recovery (in DMEM)	% Recovery (in RPMI)
30	100 %	98 %	100 %	93 %
3	96 %	96 %	89 %	86 %
0.3	83 %	81 %	65 %	66 %

- Specificity:

Cross-reactivity of the AlphaLISA Human IL22 Kit was tested using the following proteins at 100 ng/mL in AlphaLISA Immunoassay Buffer. Reactivity to Human IL22 is 100%.

Protein	% Cross-reactivity
Mouse IL22	15
Rat IL22	95
Human IL17A	0

Troubleshooting Guide

You will find detailed recommendations for common situations you might encounter with your AlphaLISA Assay kit at:

http://www.perkinelmer.com/in/resources/technicalresources/applicationsupportknowledgebase/alphalisa-alphascreen-no-washassays/alpha_troubleshoot.xhtml

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