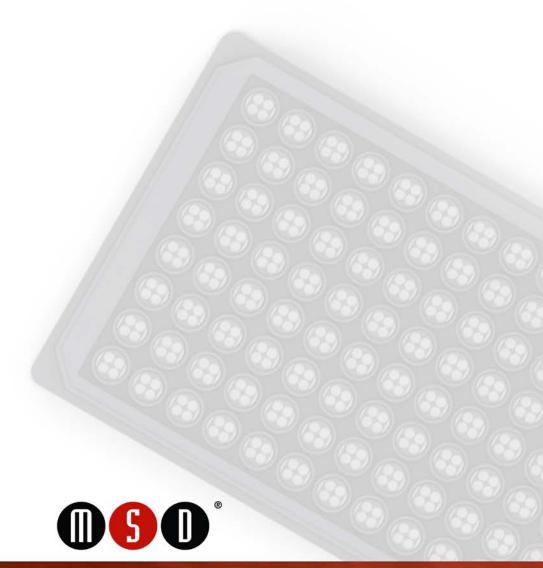
# MSD®MULTI-SPOT Assay System

# Human ProInflammatory II 4-Plex Ultra-Sensitive Kit

1-Plate Kit K15025C-1 5-Plate Kit K15025C-2 25-Plate Kit K15025C-4



### MSD Biomarker Assays

### **Human ProInflammatory II 4-Plex Ultra-Sensitive Kit**

IL-1 $\beta$ , IL-6, IL-8, TNF- $\alpha$ 

This package insert must be read in its entirety before using this product.

FOR RESEARCH USE ONLY. NOT FOR USE IN DIAGNOSTIC PROCEDURES.

### MESO SCALE DISCOVERY®

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## **Ordering Information**

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### Introduction

Inflammatory processes are involved in many physiological events, including infection, the healing response, and other disease states such as autoimmunity. Cytokines and chemokines are small, soluble proteins that can help mediate both acute and chronic inflammatory responses.

**IL-1β** is produced by dendritic cells, monocytes, macrophages and certain epithelial cells. IL-1\beta is produced in response to infection induced inflammation. It induces the production of adhesion molecules that enable the transmigration of leukocytes into inflammed tissues. IL-1β also participates in fever induction by the hypothalamus.

IL-6 is a proinflammatory cytokine secreted by monocytes, macrophages and certain nonlymphoid cell types in response to tissue damage or infection. It plays a role in the acute phase response, the regulation of fever, and the generation of plasma B cells. IL-6 has been recently shown to act in concert with TGF-β to induce the differentiation of IL-17 producing helper T cells from naïve progenitors.

IL-8, also known as CXCL8, is a chemokine responsible for the attraction of neutrophils to vascular endothelium and extravasation into inflammed tissues. It is produced primarily by activated macrophages in response to toll-like receptor agonists and certain bacterial pathogens.

**Tumor Necrosis Factor-\alpha (TNF-\alpha)** plays a key role in the acute phase reaction and systemic inflammation. TNF-α is primarily produced by activated macrophages, but it is also secreted by a variety of other cell types under pathogenic conditions. Upon receptor binding, it has been shown to trigger diverse cell signaling pathways including apoptosis, proliferation, differentiation, chemoattraction, hypothalamic regulation, and cytokine production. TNF-α can also contribute to tumorigenesis and viral replication.



### Principle of the Assay

MSD assays provide a rapid and convenient method for measuring the levels of protein targets within a single small-volume sample. The assays are available in both singleplex and multiplex formats. In a singleplex assay, an antibody for a specific protein target is coated on one electrode (or "spot") per well. In a multiplex assay, an array of capture antibodies against different targets is patterned on distinct spots in the same well. The Human ProInflammatory II 4-Plex Assay detects IL-1β, IL-6, IL-8, and TNF-α in a sandwich immunoassay format (Figure 1). MSD provides a plate that has been pre-coated with capture antibody on spatially distinct spots – antibodies for IL-1β, IL-6, IL-8, and TNF-α. The user adds the sample and a solution containing the labeled detection antibodies— anti-IL-1\beta, anti-IL-6, anti-IL-8, and anti-TNF-α labeled with an electrochemiluminescent compound, MSD SULFO-TAG™ label—over the course of one or more incubation periods. Analytes in the sample bind to capture antibodies immobilized on the working electrode surface; recruitment of the labeled detection antibodies by bound analytes completes the sandwich. The user adds an MSD read buffer that provides the appropriate chemical environment for electrochemiluminescence and loads the plate into an MSD SECTOR® instrument for analysis. Inside the SECTOR instrument, a voltage applied to the plate electrodes causes the labels bound to the electrode surface to emit light. The instrument measures intensity of emitted light to afford a quantitative measure of IL-1 $\beta$ , IL-6, IL-8, and TNF- $\alpha$  present in the sample.

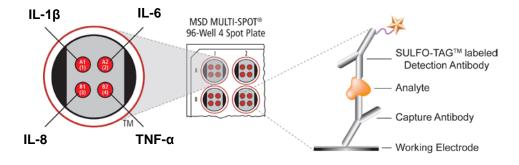


Figure 1. Spot diagram showing placement of analyte capture antibody. The numbering convention for the different spots is maintained in the software visualization tools, on the plate packaging, and in the data files. A unique bar code label on each plate allows complete traceability back to MSD manufacturing records.



### **Reagents Supplied**

	Quantity per Kit			
Product Description	Storage	K15025C-1	K15025C-2	K15025C-4
MULTI-SPOT® 96-well 4-Spot Human ProInflammatory II 4-Plex Plate N45025A-1	2–8°C	1 plate	5 plates	25 plates
SULFO-TAG Detection Antibody Blend <sup>1</sup> (50X)	2–8°C	1 vial (75 μL)	1 vial (375 µL)	5 vials (375 μL ea)
Human ProInflammatory II 4-Plex Calibrator Blend (1 µg/mL of each)	<u>&lt;</u> -70°C	1 vial (15 µL)	5 vials (15 µL ea)	25 vials (15 µL ea)
Diluent 2 R51BB-4 (8 mL) R51BB-3 (40 mL)	<u>&lt;</u> -10°C	1 bottle (8 mL)	1 bottle (40 mL)	5 bottles (40 mL ea)
Diluent 3 R51BA-4 (5 mL) R51BA-5 (25 mL)	<u>&lt;</u> -10°C	1 bottle (5 mL)	1 bottle (25 mL)	5 bottles (25 mL ea)
Read Buffer T (4X) R92TC-3 (50 mL) R92TC-2 (200 mL)	RT	1 bottle (50 mL)	1 bottle (50 mL)	2 bottles (200 mL ea)

### Required Materials and Equipment - not supplied

- Deionized water for diluting concentrated buffers
- 50 mL tubes for reagent preparation
- 15 mL tubes for reagent preparation
- Microcentrifuge tubes for preparing serial dilutions
- Phosphate buffered saline plus 0.05% Tween-20 (PBS-T) for plate washing
- Appropriate liquid handling equipment for desired throughput, capable of dispensing 10 to 150 µL into a 96-well microtiter plate
- Plate washing equipment: automated plate washer or multichannel pipette
- Adhesive plate seals
- Microtiter plate shaker

### Safety

Safe laboratory practices and personal protective equipment such as gloves, safety glasses, and lab coats should be used at all times during the handling of all kit components. All hazardous samples should be handled and disposed of properly, in accordance with local, state, and federal guidelines.

SULFO-TAG conjugated detection antibodies should be stored in the dark.



### Reagent Preparation

Bring all reagents to room temperature and thaw the Calibrator stock on ice.

Important: Upon first thaw, separate Diluent 2 and Diluent 3 into aliquots appropriate to the size of your assay needs. These diluents can go through up to three freeze-thaw cycles without significantly affecting the performance of the assay.

#### **Prepare Calibrator and Control Solutions**

Calibrator for the Human ProInflammatory II 4-Plex Assay is supplied at 400-fold higher concentration than the recommended highest Calibrator. Prepare a diluted stock Calibrator by diluting the stock Calibrator 100-fold in Diluent 2. MSD recommends the preparation of an 8point standard curve consisting of at least 2 replicates of each point. Each well requires 25 µL of Calibrator. For the assay, MSD recommends 4-fold serial dilution steps and Diluent 2 alone for the 8<sup>th</sup> point:

Standard	Human ProInflammatory II 4-Plex Calibrator Blend (pg/mL)	Dilution Factor
Stock Cal.	1000000	
Dil. Stock Cal.	10000	100
STD-01	2500	4
STD-02	625	4
STD-03	156	4
STD-04	39	4
STD-05	9.8	4
STD-06	2.4	4
STD-07	0.61	4
STD-08	0	n/a

To prepare this 8-point standard curve for up to 4 replicates:

- 1) Prepare the diluted stock Calibrator by transferring 10 µL of the Human ProInflammatory II 4-Plex Calibrator Blend to 990 µL Diluent 2.
- 2) Prepare the highest Calibrator point (STD-01) by transferring 50 µL of the Human ProInflammatory II diluted stock Calibrator to 150 µL Diluent 2. Repeat 4-fold serial dilutions 6 additional times to generate 7 Calibrators.
- 3) The recommended 8<sup>th</sup> Standard is Diluent 2 (i.e. zero Calibrator).

#### Notes:

- a. Alternatively, Calibrators can be prepared in the sample matrix or diluent of choice to verify acceptable performance in these matrices. In general, the presence of some protein (for example, 1% BSA) in the sample matrix is helpful for preventing loss of analyte by adsorption onto the sides of tubes, pipette tips, and other surfaces. If your sample matrix is serum-free tissue culture media, then the addition of 10% FBS or 1% BSA is recommended.
- b. The standard curve can be modified as necessary to meet specific assay requirements.



#### **Dilution of Samples**

#### Serum and Plasma

All solid material should be removed by centrifugation. Plasma prepared in heparin tubes commonly displays additional clotting following the thawing of the sample. Remove any additional clotted material by centrifugation. Avoid multiple freeze/thaw cycles for serum and plasma samples. Normal serum or plasma samples may not require a dilution prior to being used in the MSD Human ProInflammatory II 4-Plex Assay. Serum or plasma with high levels of these analytes may require a dilution.

#### Tissue Culture

Tissue culture supernatant samples may not require dilution prior to being used in the MSD Human ProInflammatory II 4-Plex Assay. If using serum-free medium, the presence of carrier protein (e.g., 1% BSA) in the solution is helpful to prevent loss of analyte to the labware. Samples from experimental conditions with extremely high levels of cytokines may require a dilution.

#### Other Matrices

Information on preparing samples in other matrices, including sputum, CSF, and tissue homogenates can be obtained by contacting MSD Scientific Support at 1-301-947-2025 or ScientificSupport@mesoscale.com.

#### **Prepare Detection Antibody Solution**

The Detection Antibody Blend is provided at 50X stock solution. The final concentration of the working Detection Antibody Solution should be at 1X. For each plate used, dilute a 60 µL aliquot of the stock Detection Antibody Blend into 2.94 mL of Diluent 3.

#### **Prepare Read Buffer**

The Read Buffer should be diluted 2-fold in deionized water to make a final concentration of 2X Read Buffer T. Add 10 mL of 4X Read Buffer T to 10 mL of deionized water for each plate.

#### **Prepare MSD Plate**

This plate has been pre-coated with antibody for the analyte shown in Figure 1. The plate can be used as delivered; no additional preparation (e.g., pre-wetting) is required. The plate has also been exposed to a proprietary stabilizing treatment to ensure the integrity and stability of the immobilized antibodies.



### **Assay Protocol**

- 1. Addition of Diluent 2: Dispense 25 µL of Diluent 2 into each well. Seal the plate with an adhesive plate seal and incubate for 30 min with vigorous shaking (300–1000 rpm) at room temperature.
- 2. Addition of the Sample or Calibrator: Dispense 25 µL of sample or Calibrator into separate wells of the MSD plate. Seal the plate with an adhesive plate seal and incubate for 2 hours with vigorous shaking (300–1000 rpm) at room temperature.
- 3. Wash and Addition of the Detection Antibody **Solution:** Wash the plate 3 times with PBS-T. Dispense 25 µL of the 1X Detection Antibody Solution into each well of the MSD plate. Seal the plate and incubate for 2 hours with vigorous shaking (300-1000 rpm) at room temperature.
- 4. Wash and Read: Wash the plate 3 times with PBS-T. Add 150 µL of 2X Read Buffer T to each well of the MSD plate. Analyze the plate on the SECTOR Imager. Plates may be read immediately after the addition of Read Buffer.

#### Notes

Shaking a 96-well MSD plate typically accelerates capture at the working electrode.

Bubbles in the fluid will interfere with reliable reading of plate. Use reverse pipetting techniques to insure bubbles are not created when dispensing the Read Buffer.

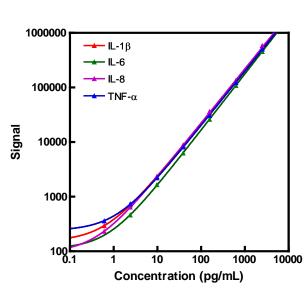
### **Analysis of Results**

The Calibrators should be run in duplicate to generate a standard curve. The standard curve is modeled using least squares fitting algorithms so that signals from samples with known levels of the analyte of interest can be used to calculate the concentration of analyte in the sample. The assays have a wide dynamic range (3–4 logs) which allows accurate quantitation in many samples without the need for dilution. The MSD DISCOVERY WORKBENCH® analysis software utilizes a 4-parameter logistic model (or sigmoidal dose-response) and includes a 1/Y<sup>2</sup> weighting function. The weighting function is important because it provides a better fit of data over a wide dynamic range, particularly at the low end of the standard curve.



### Typical Standard Curve

The following standard curves are an example of the dynamic range of the assay. The actual signals may vary and a standard curve should be run for each set of samples and on each plate for the best quantitation of unknown samples.



IL-1β				
Conc. (pg/mL)	Average Signal	%CV		
0	162	7.2		
0.61	294	5.1		
2.4	704	12.3		
9.8	2350	8.3		
39	8860	6.8		
156	34381	5.8		
625	133875	8.6		
2500	537356	10.8		

IL-6			
Conc. (pg/mL)	Average Signal	%CV	
0	110	8.6	
0.61	108	6.4	
2.4	464	4.4	
9.8	1653	4.1	
39	6297	4.4	
156	26038	6.7	
625	108966	2.9	
2500	456938	0.5	

IL-8			
Conc. (pg/mL)	Average Signal	%CV	
0	89	11.8	
0.61	232	7.0	
2.4	646	9.4	
9.8	2309	8.3	
39	8630	6.8	
156	36140	4.0	
625	123215	7.7	
2500	587178	7.7	

TNF-α				
Conc. (pg/mL)	%CV			
0	218	7.1		
0.61	361	7.0		
2.4	737	2.6		
9.8	2221	5.1		
39	8142	6.8		
156	30635	6.9		
625	122544	4.7		
2500	505053	6.2		

### Sensitivity

The lower limit of detection (LLOD) is the calculated concentration of the signal that is 2.5 standard deviations over the zero Calibrator. The values below represent the average LLOD over multiple kit lots.

_	IL-1β	IL-6	IL-8	TNF-α
LLOD (pg/mL)	0.18	0.26	0.10	0.37



## Spike Recovery

Serum and plasma samples were spiked with Calibrator at multiple values throughout the range of the assay. Each spike was done in ≥ 3 replicates. % Recovery = measured / expected x 100

IL-1β	Spike Conc. (pg/mL)	Measured Conc. (pg/mL)	Measured Conc. % CV	% Recovery
	0	0.29	14.7	
	9.8	9.1	6.1	91
Serum	39	34	8.2	88
	156	127	5.5	81
	625	526	2.9	84
	0	<llod< th=""><th>6.2</th><th></th></llod<>	6.2	
EDTA	9.8	8.8	5.3	88
Plasma	39	33	17.6	84
i iasilia	156	132	9.3	84
	625	546	1.3	87
	0	0.23	19.6	
	9.8	9.2	2.3	92
Heparin Plasma	39	34	10.6	87
	156	124	4.8	80
	625	475	3.0	76

IL-6	Spike Conc. (pg/mL)	Measured Conc. (pg/mL)	Measured Conc. % CV	% Recovery
	0	2.2	6.7	
	9.8	11	6.8	95
Serum	39	37	0.8	89
	156	137	4.3	87
	625	747	5.2	95
	0	1.6	6.8	
EDTA	9.8	11	4.7	88
Plasma	39	41	15.0	99
i iasilia	156	138	5.5	87
	625	595	4.2	95
	0	2.7	5.8	
	9.8	11	15.1	88
Heparin Plasma	39	37	3.3	88
i iasilia	156	139	3.7	87
	625	581	4.3	93

IL-8	Spike Conc. (pg/mL)	Measured Conc. (pg/mL)	Measured Conc. % CV	% Recovery
	0	41	1.0	
	9.8	48	6.0	93
Serum	39	70	2.9	88
	156	184	3.8	93
	625	668	3.4	100
	0	2.0	7.4	
EDTA	9.8	8.6	4.8	72
Plasma	39	29	1.7	71
i iasilia	156	107	2.4	68
	625	464	2.8	74
	0	3.8	1.7	
	9.8	14	4.9	104
Heparin Plasma	39	44	4.0	103
i iasilia	156	161	2.6	101
	625	647	1.1	103

TNF-α	Spike Conc. (pg/mL)	Measured Conc. (pg/mL)	Measured Conc. % CV	% Recovery
	0	1.0	4.1	
	9.8	10	2.7	93
Serum	39	38	8.8	94
	156	154	7.5	98
	625	583	1.1	93
	0	1.5	3.2	
EDTA	9.8	10	7.7	86
Plasma	39	38	2.4	93
Fiasilia	156	148	2.4	93
	625	585	0.5	93
	0	1.4	2.8	
	9.8	10	1.5	93
Heparin Plasma	39	36	6.3	89
i iasilia	156	145	1.9	93
	625	554	0.4	88



### Linearity

Three pools each of human serum and heparin plasma were evaluated; a representative pool of each is shown below. The pooled samples were spiked with Calibrator and then diluted with Diluent 2. The concentrations shown below have been corrected for dilution (concentration = measured x dilution factor). Percent recovery is calculated as the measured concentration divided by the concentration of the previous dilution (expected). % Recovery = (measured x dilution factor) / expected x 100

		IL-1β			IL-6		
Sample	Fold Dilution	Conc. (pg/mL)	Conc. % CV	% Recovery	Conc. (pg/mL)	Conc. % CV	% Recovery
Serum	1	633	2.9		471	4.7	
	2	656	3.4	104	555	9.4	118
	4	684	1.2	104	602	8.1	108
	8	645	3.7	94	589	4.7	98
	1	583	1.9		585	5.0	
Heparin Plasma	2	601	5.9	103	591	8.0	101
	4	584	1.3	97	621	8.1	105
	8	623	6.2	107	651	7.1	105

		IL-8			TNF-α		
Sample	Fold Dilution	Conc. (pg/mL)	Conc. % CV	% Recovery	Conc. (pg/mL)	Conc. % CV	% Recovery
Serum	1	675	1.8		645	6.9	
	2	672	2.8	100	678	5.2	105
	4	685	4.9	102	660	5.2	97
	8	631	12.2	92	633	7.8	96
	1	625	5.8		602	4.6	
Heparin Plasma	2	649	10.1	104	646	5.4	107
	4	712	1.8	110	613	2.3	95
	8	651	4.5	92	625	1.4	102



## Samples

Eight normal human samples were measured for each of the following sample types: serum, EDTA plasma, and heparin plasma.

		IL-1β (pg/mL)	IL-6 (pg/mL)	IL-8 (pg/mL)	TNF-α (pg/mL)
	Min	<llod< th=""><th>1.0</th><th>2.2</th><th>2.8</th></llod<>	1.0	2.2	2.8
Serum	Max	0.53	4.6	12	6.1
	Median	<llod< td=""><td>1.8</td><td>7.4</td><td>4.2</td></llod<>	1.8	7.4	4.2
EDTA	Min	<llod< th=""><th>1.0</th><th>5.3</th><th>4.4</th></llod<>	1.0	5.3	4.4
EDTA Plasma	Max	1.1	3.3	46	7.9
i iasilia	Median	0.53	1.8	6.9	5.8
Hanarin	Min	<llod< th=""><th>1.1</th><th>2.4</th><th>6.0</th></llod<>	1.1	2.4	6.0
Heparin Plasma	Max	2.1	3.1	15	9.7
	Median	0.63	1.8	5.8	7.6

## **Assay Components**

The human IL-1β, IL-6, IL-8, and TNF-α capture and detection antibodies used in this assay are listed below.

	Source species			
Analyte	MSD Capture Antibody	MSD Detection Antibody		
hIL-1β	Mouse monoclonal	Goat polyclonal		
hIL-6	Mouse monoclonal	Goat polyclonal		
hIL-8	Mouse monoclonal	Goat polyclonal		
hTNF-α	Mouse monoclonal	Goat polyclonal		



#### Summary Protocol

#### MSD 96-well MULTI-SPOT Human ProInflammatory II 4-Plex Ultra-Sensitive Kit

MSD provides this summary protocol for your convenience. Please read the entire detailed protocol prior to performing the MSD Human ProInflammatory II 4-Plex Assay.

#### **Sample and Reagent Preparation**

Bring all reagents to room temperature and thaw the Calibrator stock on ice.

If necessary, samples should be diluted in Diluent 2.

Prepare Calibrator solutions and standard curve.

Use the Calibrator stock to prepare an 8-point standard curve by diluting in Diluent 2.

**Note:** The standard curve can be modified as necessary to meet specific assay requirements.

Prepare Detection Antibody Solution by diluting Detection Antibody Blend to 1X in a final volume of 3.0 mL Diluent 3 per plate.

Prepare 20 mL of 2X Read Buffer T by diluting 4X Read Buffer T with deionized water.

#### SERUM OR PLASMA SAMPLES

#### Step 1: Add Diluent 2

Dispense 25 µL/well Diluent 2.

Incubate at room temperature with vigorous shaking (300-1000 rpm) for 30 minutes.

#### Step 2: Add Sample or Calibrator

Dispense 25 µL/well Calibrator or sample.

Incubate at room temperature with vigorous shaking (300-1000 rpm) for 2 hours.

#### Step 3: Wash and Add Detection Antibody Solution

Wash plate 3 times with PBS-T.

Dispense 25 µL/well 1X Detection Antibody Solution.

Incubate at room temperature with vigorous shaking (300-1000 rpm) for 2 hours.

#### Step 4: Wash and Read Plate

Wash plate 3 times with PBS-T.

Dispense 150 µL/well 2X Read Buffer T.

Analyze plate on SECTOR Imager instrument.

