

Human Progranulin/PCDGF Sandwich ELISA Kit Datasheet

Please read it entirely before use

Catalogue Number: KE00260 Size: 5*96T Sensitivity: 0.05 ng/mL Range: 6.25-400 ng/mL Usage: For the quantitative detection of human Progranulin/PCDGF concentrations in serum, plasma, cell culture supernatant, urine, saliva and human milk.

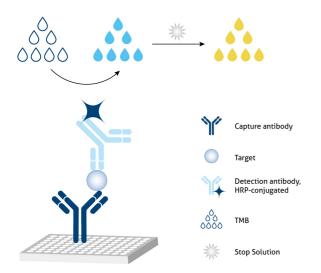
This product is for research use only and not for use in human or animal therapeutic or diagnostic.

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1. Background

Progranulin, also known as Acrogranin, PCDGF, and Epithelin/Granulin Precursor, was first identified as a 593-aa secreted glycoprotein involved in the regulation of cancer progression and wound healing. It is a widely expressed glycoprotein that can undergo proteolysis to generate numerous Granulin peptides. Progranulin (PGRN) has been considered a growth factor-like molecule implicated in additional biological and pathological processes including early embryogenesis, inflammation, host defense, cartilage development and degradation.

2. Principle



Sandwich ELISA structure (Detection antibody labeled with HRP)

A capture antibody is pre-coated onto the bottom of wells which binds to analyte of interest. A detection antibody labeled with HRP also binds to the analyte. TMB acts as the HRP substrate and the solution color will change from colorless to blue. A stop solution containing sulfuric acid turns solution yellow. The color intensity is proportional to the quantity of bound protein which is measurable at 450 nm with the correction wavelength set at 630 nm.

3. Required Materials

3.1 A microplate reader capable of measuring absorbance at 450 nm with the correction wavelength set at 630 nm.

3.2 Calibrated, adjustable precision pipettes and disposable plastic tips. A manifold multi-channel pipette is recommended for large assays.

3.3 Plate washer: automated or manual.

3.4 Absorbent paper towels.

3.5 Glass or plastic tubes to prepare standard and sample dilutions.

3.6 Beakers and graduated cylinders.

3.7 Log-log or semi-log graph paper or computer and software for ELISA data analysis. A four-parameter logistic (4-PL) curve-fit is recommended.

4. Kit Components and Storage

Microplate - antibody coated 96-well microplate (8 well × 12 strips)	5 plates	Unopened Kit:	
Protein standard - 400 ng/bottle; lyophilized	10 bottles		
Detection antibody, HRP-conjugated (100×) - 600 µ L/vial*	1 vial	Store at 2-8°C for 6 months or -	
Additional Diluent AT-00260 - 30 mL/bottle. Only for human serum and plasma samples	1 bottle	20°C for 12 months. Opened Kit: All reagents stored at 2-8°C for	
Sample Diluent PT 5-ef - 150 mL/bottle. For human serum, plasma, urine, saliva, human milk.	1 bottle		
Sample Diluent PT 5 - 150 mL/bottle. For cell culture supernatant.	1 bottle	7 days.	
Detection Diluent - 150 mL/bottle	1 bottle	5	
Wash Buffer Concentrate (20×) - 150 mL/bottle	1 bottle	Please use a new standard	
Tetramethylbenzidine Substrate (TMB) - 60 mL/bottle	1 bottle	for each assay.	
Stop Solution - 60 mL/bottle	1 bottle		
Plate Cover Seals	15 pieces		

* Centrifugation immediately before use

5. Safety Notes

5.1 Avoid any skin and eye contact with Stop Solution and TMB. In case of contact, wash thoroughly with water.

5.2 Do not use the kit after the expiration date.

5.3 Do not mix or substitute reagents or materials from other kit lots or other sources.

5.4 Be sure to wear protective equipment such as gloves, masks and goggles during the experiment.

5.5 When using an automated plate washer, adding a 30 second soak period following the addition of Wash Buffer to improve assay precision

6. Sample Collection and Storage

6.1 Serum: Allow blood samples to clot for 30 minutes, followed by centrifugation for 15 minutes at 1000xg. Clear serum can be assayed immediately or aliquoted and stored at -20°C. Avoid repeated freeze-thaw cycles.

6.2 Plasma: Use EDTA, heparin, or citrate as an anticoagulant for plasma collection. Centrifuge for 15 minutes at 1000xg within 30 minutes of collection. The plasma can be assayed immediately or aliquoted and stored at -20°C. Avoid repeated freeze-thaw cycles.

6.3 Cell Culture Supernatant: Remove particulates by centrifugation for 5 minutes at 500xg and assay immediately or aliquot and store samples at \leq -20°C. Avoid repeated freeze-thaw cycles.

6.4 Urine: Collect urine samples and centrifuge for 20 minutes at 1000xg. Collect the aqueous layer, assay immediately or aliquot and store samples at \leq -20°C. Avoid repeated freeze-thaw cycles.

6.5 Saliva: Collect saliva samples and centrifuge for 5 minutes at 10,000xg. Collect the aqueous layer, assay immediately or aliquot and store samples at \leq -20°C. Avoid repeated freeze-thaw cycles.

6.6 Human Milk: Collect milk samples and Centrifuge for 15 minutes at 1000xg at 2-8°C. Collect the aqueous fraction and repeat this process a total of 3 times. Assay immediately.

7. Regent Preparation

7.1 Wash Buffer (1X): If crystals have formed in the concentrate, warm to room temperature and mix gently until the crystals have completely dissolved. Add 30 mL of Wash Buffer Concentrate(20X) to 570 mL deionized or distilled water to prepare 1X Wash Buffer.

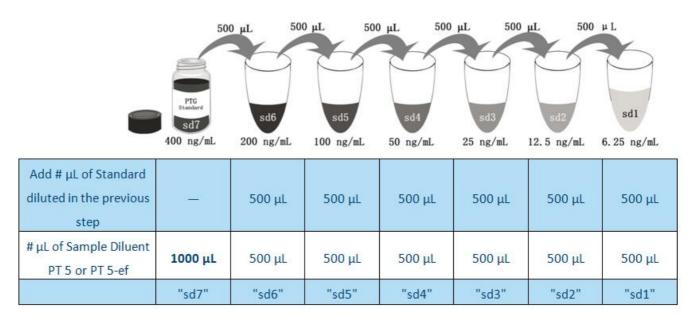
7.2 Detection Antibody, HRP-conjugated (1X): Dilute 100X Detection Antibody, HRP-conjugated 1:100 using Detection Diluent prior to assay. Suggested 1:100 dilution: 10 µ L 100X Detection Antibody, HRP-conjugated + 990 µ L Detection Diluent (Centrifuge the 100 X Detection Antibody solution, HRP-conjugated for a few seconds prior to use)

7.3 Sample Dilution: Different samples should be diluted with corresponding Sample Diluent, samples may require further dilution if the readout values are higher than the highest standard OD reading. Variations in sample collection, processing and storage may affect the results of the measurement.

Recommended Dilution for different sample types: 1:4 or 1:8 is recommended for human serum and plasma; 1:2 to 1:8 is recommended for cell culture supernatants; 1:2 or 1:4 is recommended for urine; 1:32 or 1:64 is recommended for saliva; 1:32 or 1:64 is recommended for human milk.

7.4 Standard Serial Dilution:

For human serum, plasma, urine, saliva, and human milk samples, add 1 mL Sample Diluent PT 5-ef in protein standard; For cell culture supernatant samples, add 1 mL Sample Diluent PT 5 in protein standard.



8. Assay Procedure Summary

Bring all reagents to room temperature before use (Detection antibody, HRP-conjugated can be used immediately). To avoid cross-contamination, change pipette tips between additions of each standard level, between sample additions, and between reagent additions. Also, use separate reservoirs for each reagent. 8.1 Take out the required number of microplate strips and return excess strips to the foil pouch containing the drying reagent pack and reseal; store at 4°C immediately. Microplate strips should be used in one week.

8.2 Preset the layout of the microplate, including control group, standard group and sample group;

For serum or plasma, add 50 µL Additional Diluent to the appropriate wells (No need incubation and wash);

For other samples , no need to add Additional Diluent, directly follow the next step.

8.3. Add 100 µL of each standard and sample to the appropriate wells.(Make sure sample addition is uninterrupted and completed within 5 to 10 minutes).

8.4 Seal plate with cover seal, pressing it firmly onto top of microwells. Incubate the plate for 1 hours at 37°C.8.5 Wash

1) Gently remove the cover seal. Discard the liquid from wells by aspirating or decanting. Remove any residual solution by tapping the plate a few times on fresh paper towels.

2) Wash 4 times with 1X Wash Buffer, using at least 350-400 µ L per well. Following the last wash, firmly tap plates on fresh towels 10 times to remove residual Wash Buffer. Avoid getting any towel fibers in the wells or wells drying out completely.
8.6 Add 100 µ L of 1X Detection antibody, HRP-conjugated solution (refer to Reagent Preparation7.2) to each well. Seal plate with cover seal and incubate for 40 minutes at 37°C.

8.7 Repeat wash step in 8.5.

8.8 Signal development: Add 100 µ L of TMB substrate solution to each well, protected from light. Incubate for 15 to 20 minutes. Substrate Solution should remain colorless until added to the plate.

8.9 Quenching color development: Add 100 μ L of Stop Solution to each well in the same order as addition of the TMB substrate. Mix by tapping the side of the plate gently. NB: Avoid skin and eye contact with the Stop solution.

8.10 Read results: Immediately after adding Stop solution read the absorbance on a microplate reader at a wavelength of 450 nm. If possible, perform a double wavelength readout (450 nm and 630 nm).

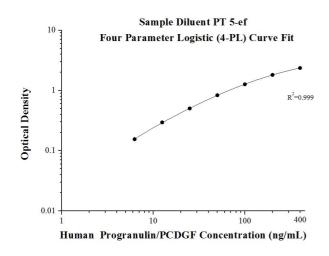
8.11 Data analysis: Calculate the average of the duplicate readings (OD value) for each standard and sample, and subtract the average of the zero standard absorbance. Construct a standard curve by plotting the mean absorbance for each standard on the y-axis against the concentration on the x-axis, use four-parameter logistic curve- fit (4-PL) analysis to do this. If the samples have been diluted, the OD readout from the standard curve must be multiplied by the dilution factor used.

Step	Reagent	Volume	Incubation	Wash	Notes		
1	Additional diluent (Only for human serum and plasma sample test)	50 µL	0 min	Do not wash	Add additional diluent 50 µL per well then add standard and samples immediately		
2	Standard and Samples	100 µL	60 min	4 times	Cover Wells incubate at 37°C		
3	Diluent Detection antibody, HRP- conjugated Solution	100 µL	40 min	4 times	Cover Wells incubate at 37°C		
4	TMB Substrate	100 µL	15-20 min	Do not wash	Incubate in the dark at 37°C		
5	Stop Solution	100 µL	0 min	Do not wash	-		
6	6 Read plate at 450 nm and 630 nm immediately after adding Stop solution. DO NOT exceed 5 minutes.						

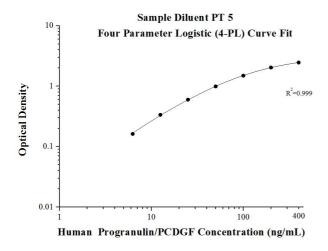
9. Validation Data

9.1 Standard curve

These standard curves are provided for demonstration only. A standard curve should be generated for each set of samples assayed.



(ng/mL)	0.D	Average	Corrected
0	0.066 0.066	0.066	-
6.25	0.218 0.224	0.221	0.155
12.5	0.36 0.362	0.361	0.295
25	0.588 0.55	0.569	0.503
50	0.883 0.916	0.900	0.834
100	1.31 1.352	1.331	1.265
200	1.791 1.966	1.879	1.813
400	2.408 2.441	2.425	2.359



(ng/mL)	0.D	Average	Corrected
0	0.116 0.116	0.116	-
6.25	0.267 0.288	0.278	0.162
12.5	0.44 0.464	0.452	0.336
25	0.698 0.729	0.714	0.598
50	1.085 1.132	1.109	0.993
100	1.579 1.643	1.611	1.495
200	2.133 2.175	2.154	2.038
400	2.55 2.605	2.578	2.462

9.2 Precision

Intra-assay Precision (Precision within an assay) Three samples of known concentration were tested 20 times on one plate to assess intra-assay precision.

Inter-assay Precision (Precision between assays) Three samples of known concentration were tested in 24 separate assays to assess inter-assay precision.

	Intra-assay Precision			Inter-assay Precision						
Sample	n	Mean (ng/mL)	SD	CV%		Sample	n	Mean (ng/mL)	SD	CV%
1	20	57.29	1.61	2.8		1	24	56.16	2.84	5.1
2	20	102.27	4.25	4.2		2	24	96.77	5.2	5.4
3	20	189.93	7.59	4.0		3	24	182.62	13.12	7.2

9.3 Recovery

The recovery of human Progranulin/PCDGF spiked to three different levels throughout the range of the assay in various matrices was evaluated.

Sample Type		Average% of Expected	Range (%)	
Human placma	1:2	99	96-104	
Human plasma	1:4	100	92-110	
Cell culture supernatant	1:2	113	100-124	
Cett cutture supernatant	1:4	118	111-125	
Human milk	1:4	111	84-127	
	1:8	108	95-126	
Urine	1:2	89	75-104	
onne	1:4	101	74-124	
Saliva	1:32	101	92-123	
Sativa	1:64	103	99-113	

9.4 Sample values

Samples from healthy volunteers were evaluated for Progranulin/PCDGF in this assay. No medical histories were available for

the donors used in this study.

Sample Type	Mean (ng/mL)	Range (ng/mL)
Human serum (n=16)	46.8	39.8-67.9
Human milk (n=7)	570.2	293-882
Urine (n=7)	9.5	1.2-15.2
Saliva (n=7)	248.6	160-455

Cell culture supernatant-A549 cells were cultured in Ham's F-12 K supplemented with 10% fetal bovine. serum, 100 U/mL penicillin, 100 μ g/mL streptomycin sulfate and grown until almost confluent. An aliquot of the cell culture supernatant was removed, assayed for human Progranulin/PCDGF, and measured146.2 ng/mL.

9.5 Sensitivity

The minimum detectable dose of human Progranulin/PCDGF is 0.05 ng/mL. This was determined by adding two standard deviations to the concentration corresponding to the mean O.D. of 20 zero standard replicates.

9.6 Linearity

To assess the linearity of the assay, samples were diluted with the appropriate **Sample Diluent** to produce samples with values within the dynamic range of the assay. (The human serum samples were initially diluted 1:2, the cell culture supernatant was initially diluted 1:4, the saliva were initially diluted 1:16, the human milk were initially diluted 1:16)

		Human serum (Sample Diluent PT 5- ef)	Cell culture supernatant (Sample Diluent PT 5)	Urine (Sample Diluent PT 5-ef)	Human milk (Sample Diluent PT 5-ef)	Saliva (Sample Diluent PT 5-ef)
1:2	Average% of Expected	100	100	100	100	100
	Range (%)	-	-	-	-	-
1:4	Average% of Expected	115	107	116	114	101
	Range (%)	110-121	103-111	109-122	102-124	78-128
1:8	Average% of Expected	113	120	96	112	109
	Range (%)	103-123	117-125	81-110	96-125	94-117
1:16	Average% of Expected		102		101	82
	Range (%)		99-105		88-124	70-94

10. References

- 1. Yazhou Cui. et al.(2019) Cytokine Growth Factor Rev. 45:53-64.
- 2. A Bateman. et al.(1990) iochem Biophys Res Commun.173(3):1161-8.
- 3. Zhiheng He. et al. (2002) Cancer Res. 62(19):5590-6
- 4. Zhiheng He. et al. (2003) Nat Med. 9(2):225-9.
- 5. Wei Tang. et al.(2011) Science. 22;332(6028):478-84.
- 6. Jing Zhu. et al. (2002) Cell. 111(6):867-78
- 7. L Díaz-Cueto. et al. (2000) Dev Biol. 217(2):406-18.