

RHEUMATOID FACTOR FL

RF 0050 CH	1 x 50 ml
RF 0100 CH	2 x 50 ml

INTENDED USE

Reagent for quantitative in vitro determination of rheumatoid factor in biological fluids (serum) and intended as aid to diagnosis and prognosis of Rheumatoid Arthritis and autoimmune diseases¹.

The IVD device can be used both in manual or on automatic analyzers. The product is intended for professional use in clinical laboratories.

TEST PRINCIPLE

Rheumatoid Factor (RF) reacts, via antigen-antibody reaction, with aggregated human IgG. The turbidity produced in this reaction is proportional to the concentration of RF in the sample, and it can be measured at the wavelength of 340 nm^{2,4}.

MATERIALS PROVIDED AND COMPOSITION

RF R1 0050: 1 x 45 ml (liquid) white cap
0100: 2 x 45 ml (liquid) white cap

Composition: Good's buffer, stabilizers and preservatives.

RF R2 0050: 1 x 9 ml (liquid) red cap
0100: 2 x 9 ml (liquid) red cap

Composition: Heat-aggregated human IgG ≤ 0.5 mg/ml, stabilizers and preservatives.

Standard RF* ST001: 2 x 1 ml

Composition: RF solution, stabilizers and preservatives.

* Traceability: this method has been standardized against 1st British Standard NIBSC code : 64/002.

NOT SUPPLIED REQUIRED MATERIALS

Appropriate laboratory instrumentation. Spectrophotometer UV/VIS fitted with thermostatic cuvette holder. Automatic micropipettes. Glass or high quality polystyrene cuvettes. Saline solution.

REAGENT PREPARATION

Use ready-to-use reagents.

Calibration curve: prepare dilutions of RF Standard with saline solution, as per instructions below. The RF value of each calibrator can be calculated using the RF Standard value according to the reported calculations.

Dilution	Calibrator value
Cal 0: 200 µl saline solution	(0 value)
Cal 1: 25 µl St. + 175 µl sal. sol.	(RF St. value / 8)
Cal 2: 50 µl St. + 150 µl sal. sol.	(RF St. value / 4)
Cal 3: 100 µl St. + 100 µl sal. sol.	(RF St. value / 2)
Cal 4: 200 µl Standard	(RF St. value)

STABILITY AND STORAGE

Store all kit components at 2-8°C.
Stability of reagents: up to expiration date claimed on label storing at 2-8°C;
Stability after first opening of reagent bottle: preferably within 60 days storing at 2-8°C.

PRECAUTIONS

RF R1: It is not classified as hazardous.

RF R2: It is not classified as hazardous.

Standard: It is not classified as hazardous.

Follow required safety procedures when handling all laboratory reagents.

SPECIMEN

Serum.
Samples are stable for 8 days when stored at 2-8°C and for 3 months at -20°C⁵.

TEST PROCEDURE

Wavelength:	340 nm		
Lightpath:	1 cm		
Temperature:	37°C		
dispense:	blank	calibrator	sample
reagent R1	1000 µl	1000 µl	1000 µl
water	64 µl	-	-
calibrator	-	64 µl	-
sample	-	-	64 µl
Mix, incubate at 37°C for 3 minutes. Read the absorbances of calibrator (Ac ₁) and sample (Ax ₁) against reagent blank.			
dispense:	blank	calibrator	sample
reagent R2	200 µl	200 µl	200 µl
Mix, incubate at 37°C for 5 minutes. Read the absorbances of calibrator (Ac ₂) and sample (Ax ₂) against reagent blank.			

RESULTS CALCULATION

For calibrators and samples, calculate $\Delta A = A_2 - A_1$.
A calibration curve is plotted by using calibrators with an increasing RF concentrations.
Subsequently, the sample RF concentration can be calculated by interpolation of the absorbance value on the calibration curve.

REFERENCE INTERVALS

Adults¹ < 20 IU/ml

Each laboratory should establish its own reference ranges based on its population.

QUALITY CONTROL AND CALIBRATION

Calibrate again when reagent lot has changed. It is recommended to verify calibration with at least one level of an internal quality control. If control results do not meet acceptable criteria, recalibration may be necessary. The following human based control sera are available for this purpose:

RHEUMATOID FACTOR CONTROL SET

Please contact Customer Care for further information.

TEST PERFORMANCE

Sensitivity / Limit of Detection (LOD)

The method is able to detect up to 3.0 IU/ml.

Analytical specificity:

Interferences does not occur with the following:

Heparin:	≤ 50 mg/l
Natrium Citraat	≤ 1000 mg/dl
Hemoglobin	≤ 1000 mg/dl
Bilirubin	≤ 30 mg/dl
Intralipid	≤ 2500 mg/dl
Ascorbic Acid	≤ 50 mg/dl
EDTA	≤ 5 mg/d

Veridicity⁶

BIAS% < 6.36

Accuracy:

Trueness⁵

Total observed error% < 13.50 (allowable total error)

Precision

Repeatability (intra-assay)

n = 20	mean (IU/ml)	SD (IU/ml)	CV%
sample 1	29.2	1.06	3.65
sample 2	105.7	2.85	2.69
sample 3	204.0	3.13	1.54

Reproducibility (inter-assay)

days = 12	mean (IU/ml)	SD (IU/ml)	CV%
sample 1	24.6	0.88	3.57
sample 2	102.2	1.37	1.34
sample 3	190.2	3.63	1.91

Measurement range

The lower limit is 10.0 mg/l⁷.

Measure interval depends on the concentration of the highest standard used for calibration.

If the limit value is exceeded, it is suggested to dilute the sample 1+4 with distilled water and repeat the test, multiplying the result by 5.

Linearity

The immunoturbidimetric method is not linear. However, after a 5-point non-linear calibration using a high standard at a concentration of 203 IU/ml, the test proves to be linear up to 203 IU/ml.

Hook effect

No Hook effect is observed with concentrations lower than 990 IU/ml.

Methods comparison⁸

A comparison between Chema and a commercially available product gave the following results:

$$\begin{aligned} \text{RF competitor} &= x \\ \text{RF Chema} &= y \\ n &= 25 \end{aligned}$$

Linear regression

$$y = 1.033x + 0.670 \text{ IU/ml} \quad r = 0.9900$$

Passing-Bablok⁹⁻¹⁰

$$y = 1.066x - 0.915 \text{ IU/ml}$$

WASTE DISPOSAL

P501: Dispose of product according to national/international regulations.

NOTICE TO THE USER

Any serious accident involving the device must be reported to the manufacturer and the competent authority of the Member State in which the user and/or the patient is located.

REFERENCES

1. M. Ciaccio, G. Lippi. *Biochimica Clinica e Medicina di laboratorio*, III edizione 2020, EdiSES Università S.r.l.
2. E. Waaler, On the occurrence of a factor in human serum activating the specific agglutination of sheep blood corpuscles. *Acta Path. Microb. Scan.* 1940; 17: 172-188.
3. K. Rhodes, The Serology Of Rheumatoid Arthritis. *Annals Of Physical Medicine* 1962.
4. K. Klaus, M.D. Bandilla et al. Reactivity of Rheumatoid Factor with Autologous IgG Antibodies. *Arthritis and Rheumatism*. 1969; 12 (2): 74-81
5. W. Ehret, F. da Fonseca-Wollheim et al. Use of anti-coagulants in Diagnostic Laboratory investigations 2002; WHO/DIL/LAB/99.1 Rev. 2.
6. E. Theodorsson, B. Magnusson et al. Bias in Clinical Chemistry. *Bioanalysis* 2014; 6(21): 2855-2875.
7. CLSI EP17-A:2004 Protocols for Determination of Limits of Detection and Limits of Quantitation; Approved Guideline.
8. M. Vidali, M. Tronchin et al. Protocollo per la comparazione di due metodi analitici di laboratorio. *Biochimica Clinica* 2016; 40(2): 129-142.
9. H. Passing and W. Bablok. A New Biometrical Procedure for Testing the Equality of Measurements from Two Different Analytical Methods. *J. Clin. Chem. Biochem.* 1983; 21: 709-720.
10. L. Bilić-Zulle. Comparison of methods: Passing and Bablok regression. *Biochimica Medica* 2011; 21(1) 49-52.

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SYMBOLS

Chema Diagnostica uses symbols listed in the ISO 15223-1 (see www.chema.com - Section "Products" for definition of symbols used).

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