

Anti-CCP ELISA (IgG)



Indication: Test system for the in vitro determination of antibodies against CCP in human serum or plasma for the diagnosis of the following disease: rheumatoid arthritis.

Clinical significance: Rheumatoid arthritis (RA) is one of the most common autoimmune diseases, affecting around 1% of the world population. It is characterized by inflammation of the synovial membrane, which spreads symmetrically from the small to the large joints. Initial symptoms include painful swelling of finger joints with morning stiffness in the joints. Early diagnosis and immediate commencement of suitable therapy is necessary to keep the disease under control.

The most commonly performed serological test in suspected RA cases was until now the determination of rheumatoid factors (RF). These are antibodies (predominantly of class IgM) which react with gamma globulins and occur in 60-80% of RA patients. RF are a sensitive but not very specific marker for RA, since they also occur in healthy individuals and in patients with various infections or other autoimmune diseases (systemic lupus erythematosus, Sjögren's syndrome, scleroderma and others).

40-60% of RA patients also exhibit autoantibodies against epidermal filaggrin (RA keratin, antiperinuclear factor) in the serum. Filaggrin is a protein of the epidermis, which links keratin filaments to one another. Autoantibodies against filaggrin are detected by indirect immunofluorescence: the antigen substrate rat oesophagus shows staining of the stratum corneum (RA keratin) on the luminal side; anti-perinuclear factors (APF) are apparent in the cytoplasmic inclusion bodies of human epithelial cells of the oral mucosa.

In recent years it has been shown that the rare amino acid citrulline, which is present in filaggrin, is a substantial component of the antigenic epitope. Enzyme immunoassays which use synthetic citrullinated peptide as the target antigen offer a useful alternative to indirect immunofluorescence. A direct comparison study demonstrated that the sensitivity can be increased from 49% to 68% by using cyclic citrullinated peptide instead of linear citrullinated peptide as an ELISA substrate. Antibodies against cyclic citrullinated peptide (CCP) are a new and highly specific marker for RA.

Antibodies against CCP are predominantly of class IgG and have a specificity of 98% for RA. They are observed very early in the disease course and have a high predictive value: patients with anti-CCP antibodies develop significantly more radiologically detectable joint damage than anti-CCP negative patients. Antibodies against CCP possess a much higher specificity than RF (anti-CCP: 97%, RF: 62%) with the same sensitivity (anti-CCP: 79%, RF: 78%). They can be detected in early stages of the disease in 79% of patients.

Panel	n Anti-CCP positive		
Sensitivity for RA	419	329 (78.5%)	
Asymptomatic blood donors	400	2 (0.5%)	
Psoriatic arthritis	28	0	
Other arthritides	35	3 (8.6%)	
Systemic lupus erythematosus	108	3 (2.8%)	
Sjögren's syn- drome	106	2 (1.9%)	
Scleroderma	98	3 (3.1%)	
Autoimmune thyroiditis	159	4 (2.5%)	
Wegener's granulomatosis	25	1 (4%)	
Anti-parvovirus B19 positive	126	3 (2.4%)	
Viral hepatitides	54	0	
Anti-HIV positive	5	0	
Tuberculosis	10	0	
Specificity for RA	1154	21 (98.2%)	

Application of the Anti-CCP ELISA: Autoantibodies agains cyclic citrullinated peptide (CCP) are a new, highly specific and sensitive marker for rheumatoid arthritis. Because of their high specificity they are superior to rheumatoid factors for RA diagnostics. The peptide used as the antigen in the Anti-CCP ELISA contains the antigenic target structure citrulline, as does epidermal filaggrin. The ELISA provides a useful alternative to indirect immunofluorescence (RA keratin, anti-perinuclear factor).

The Anti-CCP ELISA is suitable for the early diagnosis of RA, which is crucial for the immediate commencement of appropriate therapy and prevention of damage. Moreover, it allows reliable differentiation of RA from other rheumatic diseases such as systemic lupus erythematosus, Sjögren's syndrome or polymyositis/dermatomyositis.

EUROIMMUN

Autoantibody determinat AMA M2-3E (IgG) ANCA Profile (IgG) ANA Screen (IgG) ANA Screen 9 or 11 (IgG) BP180-NC16A-4X (IgG) IA-2 intrinsic factor (IgG)
Jo-1 (IgG)
liver-vicsolic antigen type 1 (LC-1; IgG)
liver-kidney microsomes (LKM-1; IgG)
myeloperoxidase (MPO; IgG)
nRNP/Sm (IgG) nucleosomes (IgG) ovary (IgAGM) parietal cells (PCA; IgG) PM-Scl (PM-1; IgG) phosphatidylserine (IgA, IgG, IgM, IgAGM)
PRS In-In-I (IgG)
rheumatoid factor (IgA, IgG, IgM)
ribosomal P-proteins (IgG)
Sa (IgG)
Scl-70 (IgG)
single-stranded DNA (scDNA+C) single-stranded DNA (ssDNA; lgG)
SLALP (lgG)
SUALP (lgG)
Spermatozoa (lgAGM)
SS-A (Ro; lgG)
SS-B (La; lgG)
Shyroglobulin (TG; lgG)
thyroid peroxidase (TPO; lgG)
thst. stransqlutaminase (endomy.; lgA, lgG, lgAG)
TSH receptor (TBII; lgG)
TSAK Fast (lgG)
zona pellucida (lgAGM)

Cytomegalovirus (IgO, IgW)
Dengue virus (IgA, IgG, IgM)
Diphtheria toxoid (IgG)
Echinococcus granulosus (IgG)
Epstein-Barr virus capsid ag (IgA, IgG, IgM)
Epstein-Barr virus capsid ag (IgA, IgG, IgM)
Epstein-Barr virus nuclear ag, EBNA-1 (IgG)
Hanta virus "Eurasia" + "America" (IgG, IgM)
Helicobacter pylori (IgA, IgG)
Holicobacter pylori (IgA, IgG, IgM)
Holicobacter pylori (IgA, IgG, IgM)
Influenza virus type A (IgA, IgG, IgM)
Influenza virus type B (IgA, IgG, IgM)
Mumps virus (IgG, IgM)
Mucpalsama pneumoniae (IgA, IgG, IgM)
Parainfluenza virus Pool (IgA, IgG, IgM)
Parainfluenza virus (IgG, IgM)
RSV (IgA, IgG, IgM)
Rubella virus (IgG, IgM)
Tetenus toxoid (IgG)
Toxoplasma gondii (IgG, IgM)
Treponema pallidum (IgG, IgM)
Treponema pallidum (IgG, IgM)
Versinia enterocolitica (IgA, IgG)
Allergology:

Allergology: total IgE Allercoat™ 6-ELISA (650 different allergens and allergen mixtures) Software EUROIMMUN Allercoat™

Saliva diagnostics: alpha-amylase cortisol slgA

Software/Automation: EUROLabOffice EUROIMMUN Analyzer I + I-2P

* Currently not available as IVD in the EU.

Made in Germany

EUROIMMUN



EUROIMMUN Immunoblots

EUROASSAY: flexible profiles of up to 7 antigens from: ENA and related antigens: nRNP/Sm, Sm, SS-A, Ro-52, SS-B, Scl-70, Jo-1, dsDNA, histones, nucleosomes, CENP B, PM-Scl, ribosomal P-proteins, AMA M2 liver antigens: LKM-1, LC-1, SLA/LP, AMA M2, M4, M9

ANCA antigens: MPO, PR3

thyroid antigens:TG,TPO

FUROUNE:

EUNCLINE: ENA and related antigens: nRNP/Sm, Sm, RNP7/S, RNPA, RNPC, SS-A, Ro-52, SS-B, Scl-70, PM-Sci, Jo-1, CENP B, PCNA, 68DNA, nucleosomes, histones, ribosomal P-proteins, AMA MZ, Mi-2, Ku Systemic Sclerosis Profile: Scl-70, CENP A, CENP B, RP11, RP155, fibrillarin, NOR90, Th/To, PM-Scl100, PM-Scl75, Ku, PDGFR, Ro-52

Myositis Profiles: Mi-2, Ku, PM-Scl100, PM-Scl75, SRP, Jo-1, PL-7, PL-12, OJ, EJ, Ro-52

Liver Profiles: AMA M2, 3E (BPO), Sp100, PML, gp210, LKM-1, LC-1, SLA/LP, Ro-52

Neuronal Antigen Profiles: amphiphysin, CV2, PNMA2 (Ma-2/Ta), Ri, Yo, Hu, recoverin, SOX1,

Ganglioside Profiles: GM1, GM2, GM3, GD1a, GD1b, GT1b, GQ1b

ANCA Profiles: MPO, PR3, GBM FUROLINE-WR-

neuronal antigens (+ recomb. Hu, Yo, Ri) HEp-2 cell antigens (+ SS-A and Ro-52, CENP B)

Infectious serology:

EUROLINE:

Bordetella pertussis (IgA, IgG) Borrelia-RN-AT (IgG, IgM) Borrelia-RN-AT-adv (IgM) EBV Profile (IgG, IgM) Hantavirus profiles (IgG, IgM) Parvovirus B19 (IgG, IgM) TORCH Profile* (IgG, IgM)

Borrelia burgdorferi (IgG, IgM)
Borrelia atzelii (IgG, IgM)
Borrelia atzelii (IgG, IgM)
Cytomegalovirus (IgG, IgM)*
Echinococcus granulosus (IgG)
Epstein-Barr virus (IgG, IgM)
Rubella virus (IgG)
Treponema pallidum (IgG, IgM)
Yersinia enterocolitica (IgA, IgG)

Borrelia (IgG, IgM) HSV-1/2 (IgG, IgM) Helicobacter pylori (IgA, IgG) Treponema pallidum + cardiolipin (IgG, IgM)

Allergology

EUROASSAY

Food Profile (IgE) Inhalation Profile (IgE) Pediatric/Atopy Profile (IgE) Insect Venom Profile (IgE)

Atopy Profile (IgE; also region-specific profiles)
Food Profile (IgE; also region-specific profiles)
Inhalation Profile (IgE; also region-specific profiles)
Paediatric Profile (IgE) Pollen–Food Cross Reaction Profile (IgE) Insect Venom Profile (IgE)

Software/Automation:

EUROLineScan camera system EUROBlotCamera scanner system EUROBlotScanner incubation processor EUROBlotMaster

EUROIMMUN Radioimmunoassavs

Autoantibody determination

thyroid peroxidase (TPC); IgG) thyroglobulin (TC; IgG) TSH receptor (IgG) acetylcholine receptor (ACHR; IgG) glutamic acid decarboxylase (GAD; IgG) insulin (IAA; IgG) P/C aclium channel* (VGCC; IgG) tyrosine phosphatase (IA2; IgG) dSDNA (IGA/IGG) IdM) dsDNA (lgA/lgG/lgM)

Antigen determination thyroglobulin (TG)

Hormone determination:

free triiodothyronine (FT3) free thyroxine (FT4) thyrotropin (TSH) calcitonin

* Currently not available as IVD in the EU.

Made in Germany

Version: 08/2010 EA_1505_D_UK_A06

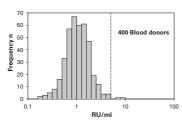
Test Characteristics Anti-CCP ELISA (IgG)

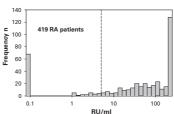
Linearity: The linearity of the ELISA was determined by assaying serial dilutions of 6 serum samples. The average concordance of dilution-factor-corrected results for the serum samples amounted to 103% (86%-125%). The Anti-CCP ELISA is linear in the tested concentration range (3 RU/ml to 196 RU/ml).

Reproducibility The reproducibility of the test was investigated by determining the intra- and inter-assay coefficients of variation using 4 sera. The intra-assay CVs are based on 20 determinations and the inter-assay CVs on 4 determinations performed in 6 different test runs.

	Intra-assay variation, n=20		Inter-assay variation, n=24	
Serum	Mean value (RU/ml)	CV (%)	Mean value (RU/ml)	CV (%)
1	18	5.9	19	6.3
2	20	4.0	23	6.5
3	26	3.6	35	7.2
4	52	3.4	63	6.8

Reference range: Levels of anti-CCP antibodies were analysed in 400 sera from healthy blood donors of between 18 and 68 years of age (149 women, 251 men) using the EUROIMMUN ELISA. No differences with respect to age or gender were observed. The mean concentration of antibodies against CCP was 1.2 RU/ml (±0.8 RU/ml of standard deviation) and the values ranged from 0.2 to 8.0 RU/ml. With a cut-off of 5 RU/ml, 0.5% of the blood donors were anti-CCP positive.





n=400 Blood donors					
95 th	98 th	99 th			
2.6 RU/ml	3.3 RU/ml	4.2 RU/ml			
	95 th	95 th 98 th			

ROC analysis: In the analysis of 419 RA patients samples, 744 control samples and 400 blood donors the following characteristics were determined:

Cut-off	Specificity	Sensitivity
2.6 RU/mI	95.0 %	81.4%
4.2 RU/mI	98.0 %	79.0%
8.0 RU/mI	99.0 %	75.4 %

Correlation of the EUROIMMUN and Euro-Diagnostica Anti-CCP ELISA: The antibody concentration was determined in 259 sera from patients with RA using the EUROIMMUN and Euro-Diagnostica Anti-CCP ELISA. The qualitative results of both ELISA correlated in 97%.

RA		Euro-Diagnostica	
(n=259)		positive	negative
EUROIMMUN	positive	213	4
	negative	3	39

Technical data:

Synthetic cyclic citrullinated peptides (CCP) containing modified argi-Antigen

Calibration Quantitative, in relative units per ml (RU/ml):

> Calibrator 1: 1RU/ml

Calibrator 2: 5RU/ml; cut-off value

Calibrator 3: 20 RU/ml Calibrator 4: 100 RU/mI Calibrator 5: 200 RU/mI

Sample dilution Serum or plasma; 1:101 in dilution buffer.

Reagents Ready-to-use, with the exception of the wash buffer (10x).

Colour-coded solutions, in most cases exchangeable with those in

other EUROIMMUN ELISA kits.

Test procedure 60 min / 30 min / 30 min. Room temperature. Fully automatable.

Measurement 450 nm (Reference wavelength ≥620 nm).

12x8 break off reagent wells, kit includes all necessary reagents. Kit format

Order no. EA 1505-9601 G