# GB QUIK - H.pylori AG Rapid Test (Serum/Plasma)

KIT NAME	KIT SIZE	CAT. NO
GB QUIK – H.pylori Rapid Test Kit	25T	GBQHAG025T
GB QUIK – H.pylori Rapid Test Kit	50T	GBQHAG050T

#### **INTENDED TO USE**

The H.pylori Antigen Rapid Test is a sandwich lateral flow chromatographic immunoassay for the qualitative detection of H.Pylori antigen in feces.It is for professional in vitro diagnostic use only.

#### **SUMMARY**

H.Pylori is associated with a variety of gastrointestinal diseases included non-ulcer dyspepsia, duodenal and gastric ulcer and active, chronic gastritis. The prevalence of H.pylori infection could exceed 90% in patients with signs and symptoms of gastrointestinal diseases. Recent studies indicate an association of H. Pylori infection with stomach cancer. H. Pylori colonizing in the gastrointestinal system elicits specific antibody responses 4.5.6 which aids in the diagnosis of H. Pylori infection and in monitoring the prognosis of the treatment of H. Pylori related diseases. Antibiotics in combination with bismuth compounds have been shown to be effective in treating active H. Pylori infection. Successful eradication of H. pylori is associated with clinical improvement in patients with gastrointestinal diseases providing a further evidence.

#### **PRICIPLE**

The H.pylori Antigen Rapid Test is a lateral flow chromatographic immunoassay based on the principle of the double antibody–sandwich technique. The test cassette consists of: 1) a burgundy colored conjugate pad containing H. Pylori antibodies conjugated with color particles (H. Pylori conjugates. 2) a nitrocellulose membrane strip containing a test band (T band) and a control band (C band). The T band is pre-coated with non-conjugated H. Pylori antibodies. When an adequate volume of test specimen is dispensed into the sample well of the cassette, the specimen migrates by capillary action across the cassette. The antigen of H. Pylori if present in the specimen will bind to the H. Pylori antibodies conjugates. The immunocomplex is then captured on the membrane by the pre-coated H. Pylori antibodies, forming a burgundy colored T band, indicating a H. Pylori antigen positive test result. To serve as a procedural control, a colored line will always appear in the control line region indicating that proper volume of specimen has been added and membrane wicking has occurred. Otherwise, the test result is invalid and the specimen must be retested with another device.

#### KIT CONTENTS:

S. No	Component	QTY
1	Test Casette	25 nos
2	Prefilled Buffer Solution tube	25 nos
3	Sample Dropper	25 nos

## STORAGE AND STABILITY

All reagents are ready to use as supplied. Store unused test device unopened at 2°C-30°C. If stored at 2°C-8°C, ensure that the test device is brought to room temperature before opening. The test is not stable out off the expiration date printed on the sealed pouch. Do not freeze the kit or expose the kit over 30°C.

## **PRECAUTION**

- 1. For professional In Vitro diagnostic use only.
- 2. Do not use it if the tube/pouch is damaged or broken.
- 3. Test is for single use only. Do not re-use under any circumstances.
- 4. Handle all specimens as if they contain infectious agents. Observe established standard procedure for proper disposal of specimens
- 5. Wear protective clothing such as laboratory coats, disposable gloves and eye protection when specimens are assay.
- 6. Humidity and temperature can adversely affect results

#### **SPECIMEN**

- Collect sufficient quantity of feces (1-2 ml or 1-2 g) in a clean, dry specimen collection container to obtain maximum antigens (if present). Best results will be obtained if the assay is performed within 6 hours after collection. Specimen collected may be stored for 3 days at 2-80 if not tested within 6 hours. For long term storage, specimens should be kept below. 2009
- To process fecal specimens:

For Solid Specimens:

Unscrew the cap of the specimen collection tube@then randomly stab the specimen collection applicator into the fecal specimen in at least 3 different sites to collect approximately 50 mg of feces (equivalent to 1/4 of a pea). Do not scoop the fecal specimen.

For Liquid Specimens:

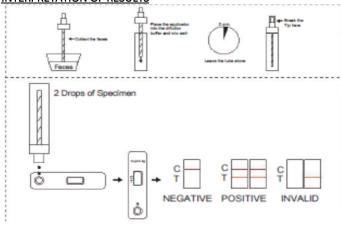
Hold the dropper vertically, aspirate fecal specimens, and then transfer 2 drops (approximately 80  $\mu$ L) into the specimen collection tube containing the dilution buffer. Screw on and tighten the cap onto the specimen collection tube vigorously to mix the specimen and the dilution buffer. Leave the tube for 2 mins.



#### TEST METHODS

- 1. Remove the test device from its foil pouch by tearing along the notch and use it as soon as possible.
- 2. Specimen collection. See also specimen collection.
- 3. Holding the sample collection device upright, carefully break off the tip of collection device.
- 4. Squeeze 2 drops (~80uL) of the sample solution in the sample well of the cassette, as in the illustration.
- 5. Read the test results in 10 minutes. It is important that the background is clear before the result is read. Do not read results after 10 minutes. Don't read result after 10 minutes. To avoid confusion, discard the test device after interpreting the result

# **INTERPRETATION OF RESULTS**



Positive: Two lines appear. One colored line should be in the control line region (C) and another apparent colored line should be in the test line region (T). Negative: One colored line appears in the control line region(C). No line appears

Invalid: Control line fails to appear.

## **QUALITY CONTROL**

in the test line region (T).

A procedural control is included in the test. A colored line appearing in the control line region (C) is an internal procedural control. It confirms sufficient specimen volume, adequate membrane wicking and correct procedural technique. Control standards are not supplied with this kit; however, it is recommended that positive and negative controls be tested as a good laboratory practice to confirm the test procedure and to verify proper test performance.

## **LIMITATIONS OF TEST METHODS**

- 1. The Assay Procedure and the Assay Result Interpretation must be followed closely when testing the presence of H. Pylori antigen in feces from individual subjects. Failure to follow the procedure may give inaccurate results.
- 2. The H.pylori Antigen Rapid Test is limited to the qualitative detection of H. Pylori antigen in feces. The intensity of the test band does not have linear correlation with the antigen titer in the specimen.
- 3. A negative result for an individual subject indicates absence of detectable H. Pylori antigen. However, a negative test result does not preclude the possibility of exposure to or infection with H. Pylori.
- 4. A negative result can occur if the quantity of the H. Pylori angtigen present in the specimen is below the detection limits of the assay, or the antigen that are detected are not present during the stage of disease in which a sample is collected.
- 5. The results obtained with this test should only be interpreted in conjunction with other diagnostic procedures and clinical findings.

#### PERFORMANCE CHARACTERSTICS

A study was performed with 165 patient feces samples including both symptomatic gastrointestinal disorders and samples from non-symptomatic patients and 100 normal feces samples.Comparison for all subjects with The H.pylori Antigen Rapid Test and reference ELISA kit is showed in the following table:

Met	thod	EIA		Total Results	
H.P	Results	Positive	Negative	Total Results	
Test	Positive	163	0	163	
Device	Negative	2	100	102	
Total	Results	165	100	265	

Relative sensitivity: 98.8% Relative specificity: 100% Accuracy:98.9%

# **REFERENCE**

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- 4. Soll, A.H. Pathogenesis of peptic ulcer and implications for therapy. New England J. Med.322:909-916,1990.
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