

Human Prolactin Immunoassay

Catalog Number: SEKH-0298

For the quantitative determination of human Prolactin concentrations in cell culture supernates, serum, and plasma.

For research use only. Not for use in diagnostic procedures.

MANUFACTURED AND DISTRIBUTED BY:

Country | Company: China | Beijing Solarbio Science & Technology Co., Ltd

Address: NO.85A, Liandong U Valley, Tongzhou District, Beijing, P.R.China.

Tel: 86-10-56371241 Fax: 86-10-56371282 E-mail: service@solarbio.com

TABLE OF CONTENTS

SECTION	PAGE
BACKGROUND.....	1
PRINCIPLE OF THE ASSAY.....	1
TECHNICAL HINTS AND LIMITATIONS.....	2
PRECAUTIONS.....	2
KIT COMPONENTS& STORAGE CONDITIONS.....	3
OTHER SUPPLIES REQUIRED BUT NOT SUPPLIED.....	4
SPECIMEN COLLECTION & STORAGE.....	4
REAGENTS PREPARATION.....	4
ASSAY PROCEDURE	6
CALCULATION OF RESULTS.....	6
PERFORMANCE CHARACTERISTICS.....	8
REFERENCES.....	10

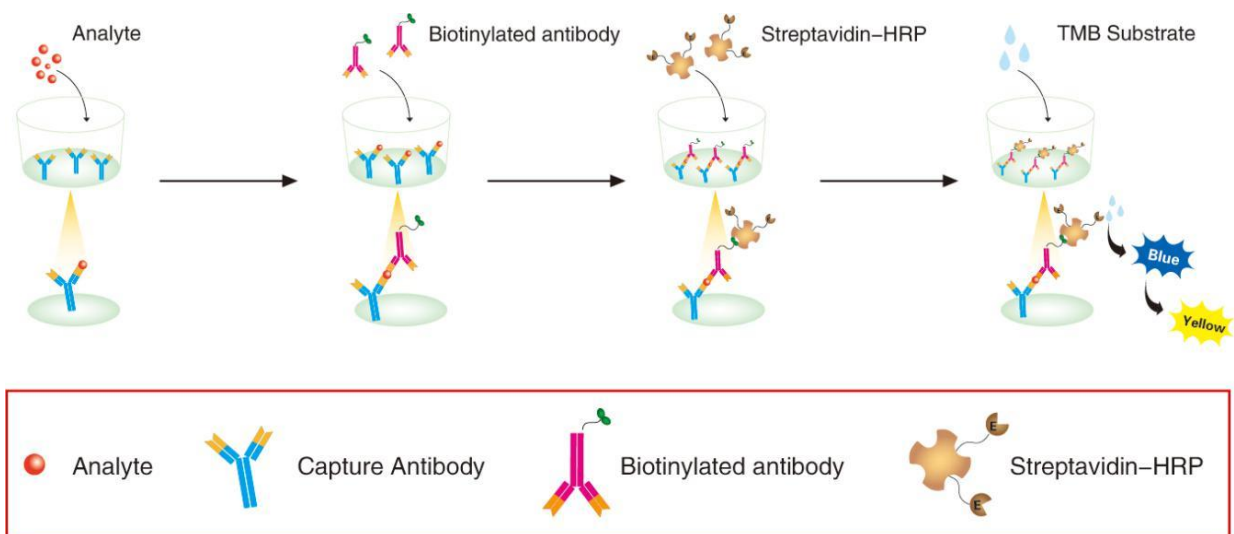
BACKGROUND

Prolactin (gene name PRL) is a secreted neuroendocrine pituitary hormone that acts primarily on the mammary gland to promote lactation, but has pleiotropic effects in both males and females. Prolactin is predominantly found as 199 amino acid, 25 kDa glycosylated and 23 kDa non-glycosylated monomers. Human prolactin shares only 60% and 63% amino acid sequence identity with mouse and rat prolactin, respectively, although rat prolactin can activate the human prolactin receptor. Although better characterized in rodents than humans, post-translational modifications such as polymerization, glycosylation, and proteolytic cleavage can alter the activities of prolactin. Non-glycosylated prolactin is produced by the pituitary gland and packaged in storage granules before secretion. Glycosylated prolactin is reported to be constitutively secreted, have lower biological potency, and be removed from the circulation more quickly. Cleavage by Cathepsin D, or matrix metalloproteinases from chondrocytes, can produce N-terminal 16 kDa antiangiogenic fragments also called vasoinhibins. Alternatively, thrombin can produce C-terminal 16 kDa fragments that are not antiangiogenic. In humans, a large (>150 kDa) complex of prolactin with IgG that typically includes prolactin autoantibodies is termed macroprolactin. Macroprolactin is cleared more slowly, thus contributing to high serum or plasma prolactin levels, and shows decreased prolactin bioactivity that is thought to be due to proximity of the IgG and receptor binding sites.

PRINCIPLE OF THE ASSAY

This assay employs the quantitative sandwich enzyme immunoassay technique. A monoclonal antibody specific for Prolactin has been pre-coated onto a microplate. Standards and samples are pipetted into the wells and any Prolactin present is captured by the coated antibody after incubation. Following extensive washing, a biotin-conjugate antibody specific for Prolactin is added to detect the captured Prolactin protein in sample. For signal development, horseradish peroxidase (HRP)-conjugated Streptavidin is added, followed by tetramethyl-benzidine (TMB) reagent. Following a wash to remove any unbound combination, and enzyme conjugate is added to the wells. Solution containing sulfuric acid is used to stop color development and the color intensity which is proportional to the quantity of bound protein is measurable at 450nm.

Schematic diagram:



TECHNICAL HINTS AND LIMITATIONS

1. This Solarbio ELISA should not be used beyond the expiration data on the kit label.
2. To avoid cross-contamination, use a fresh reagent reservoir and pipette tips for each step.
3. To ensure accurate results, some details, such as technique, plasticware and water sources should be emphasized.
4. A thorough and consistent wash technique is essential for proper assay performance.
5. A standard curve should be generated for each set of samples assayed.
6. It is recommended that all standards and samples be assayed in duplicate.
7. Avoid microbial contamination of reagents and buffers. Buffers containing protein should be made under aseptic conditions and be prepared fresh daily.
8. In order to ensure the accuracy of the results, the standard curve should be made every time.

PRECAUTIONS

The Stop Solution suggested for use with this kit is an acid solution. Wear protective gloves, clothing, eye, and face protection. Wash hands thoroughly after handling.

KIT COMPONENTS & STORAGE CONDITIONS

PART	SIZE	STORAGE OF OPENED/ RECONSTITUTED MATERIAL
Microwell Plate - antibody coated 96-well Microplate (8 wells ×12 strips)	1 plate	Return unused wells to the foil pouch containing the desiccant pack. Reseal along entire edge of the zip-seal. May be stored for up to 1 month at 2 – 8°C**
Standard - lyophilized, 2000 pg/ml upon reconstitution	2 vials	Store at 2-8°C **for six months
Concentrated Biotin-Conjugated antibody (100X) - 120 ul/vial	1 vial	Store at 2-8°C **for six months
Concentrated Streptavidin-HRP solution (100X) - 120 ul/vial	1 vial	Store at 2-8°C** for six months
Standard /sample Diluent - 16 ml/vial	1 bottle	Store at 2-8°C** for six months
Biotin-Conjugate antibody Diluent - 16 ml/vial	1 bottle	Store at 2-8°C** for six months
Streptavidin-HRP Diluent - 16 ml/vial	1 bottle	Store at 2-8°C** for six months
Wash Buffer Concentrate (20x) - 30 ml/vial	1 bottle	Store at 2-8°C** for six months
Substrate Solution - 12 ml/vial	1 bottle	Store at 2-8°C** for six months
Stop Solution - 12 ml/vial	1 bottle	Store at 2-8°C** for six months
Plate Cover Seals	4 pieces	

**Provided this is within the expiration date of the kit.

OTHER SUPPLIES REQUIRED BUT NOT SUPPLIED

1. Microplate reader capable of measuring absorbance at 450 nm.
2. Pipettes and pipette tips.
3. Deionized or distilled water.
4. Squirt bottle, manifold dispenser, or automated microplate washer.
5. 500 mL graduated cylinder.

SPECIMEN COLLECTION & STORAGE

Cell Culture Supernates - Centrifuge cell culture media at $1000\times g$ to remove debris. Assay immediately or aliquot and store samples at $\leq -20\text{ }^{\circ}\text{C}$. Avoid repeated freeze-thaw cycles.

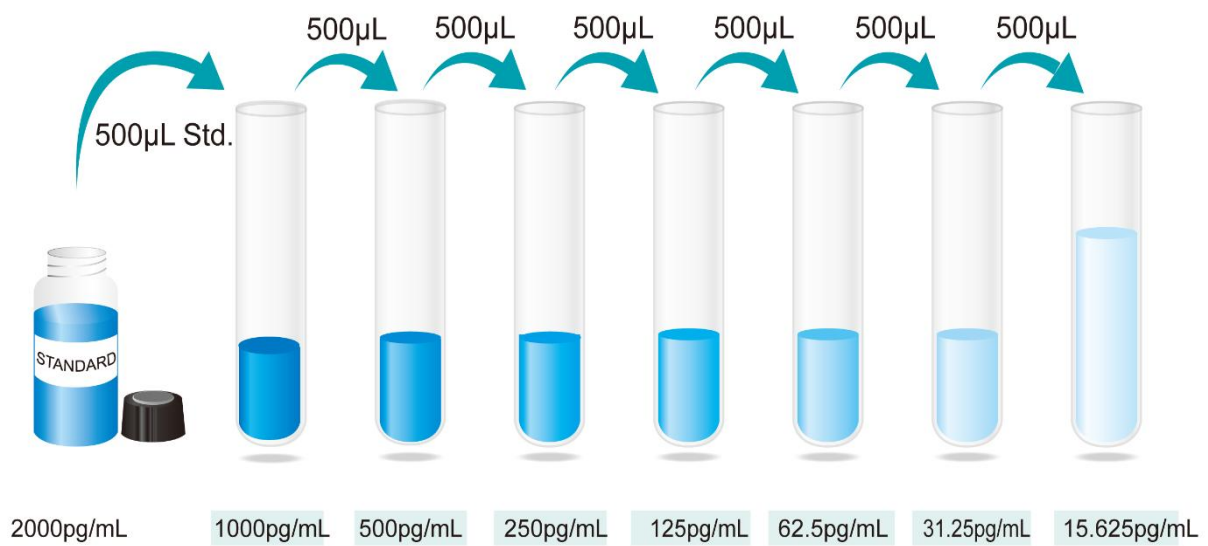
Serum - Use a serum separator tube (SST) and allow samples to clot for 2 hours at room temperature or overnight at $2-8\text{ }^{\circ}\text{C}$. Centrifuge approximately for 15 minutes at $1000\times g$. Assay immediately or aliquot and store samples at $\leq -20\text{ }^{\circ}\text{C}$. Avoid repeated freeze-thaw cycles.

Plasma - Collect plasma using EDTA, heparin, or citrate as an anticoagulant. Centrifuge for 15 minutes at $1000\times g$ within 30 minutes of collection. Assay immediately or aliquot and store samples at $\leq -20\text{ }^{\circ}\text{C}$. Avoid repeated freeze-thaw cycles.

Note: The normal human serum or plasma samples are suggested to make a 1:2 dilution.

REAGENTS PREPARATION

1. **Temperature returning** - Bring all kit components and specimen to room temperature ($20-25\text{ }^{\circ}\text{C}$) before use.
2. **Wash Buffer** - Dilute 30mL of Wash Buffer Concentrate with 570mL of deionized or distilled water to prepare 600mL of Wash Buffer. If crystals have formed in the concentrate Wash Buffer, warm to room temperature and mix gently until the crystals have completely dissolved.
3. **Standard\Sample** - Reconstitute the Standard with 1 mL of Standard/Sample Diluent. This reconstitution produces a stock solution of 2000pg/mL . Allow the standard to sit for a minimum of 15 minutes with gentle agitation prior to making dilutions. Pipette $500\mu\text{L}$ of Standard/Sample Diluent into 1000pg/ml tube and the remaining tubes. Use the stock solution of 2000pg/mL to produce a 2-fold dilution series (below). Mix each tube thoroughly and change pipette tips between each transfer. The 1000pg/mL standard serves as the high standard. The Standard/Sample Diluent serves as the zero standard (0pg/mL).



Preparation of Prolactin standard dilutions

***If you do not run out of re-melting standard, store it at -20°C. Diluted standard shall not be reused.**

- 4. Working solution of Biotin-Conjugate anti-human Prolactin antibody:** Make a 1:100 dilution of the concentrated Biotin-Conjugate solution with the Biotin-Conjugate antibody Diluent in a clean plastic tube.

***The working solution should be used within one day after dilution.**

- 5. Working solution of Streptavidin-HRP:** Make a 1:100 dilution of the concentrated Streptavidin-HRP solution with the Streptavidin-HRP Diluent in a clean plastic tube.

***The working solution should be used within one day after dilution.**

ASSAY PROCEDURE

Prepare all reagents and standards as directed. Wash the plate 3 times before assay.



Add 100µl standard or samples to each well, incubate 90 minutes, 37°C.



Aspirate and wash 4 times

Add 100µl working solution of Biotin-Conjugate anti-human Prolactin antibody to each well, incubate 60 minutes, 37°C.



Aspirate and wash 4 times

Add 100µl working solution of Streptavidin-HRP to each well, incubate 30 minutes, 37°C.



Aspirate and wash 5 times

Add 100µl Substrate solution to each well, incubate 15 minutes, 37°C. Protect from light.



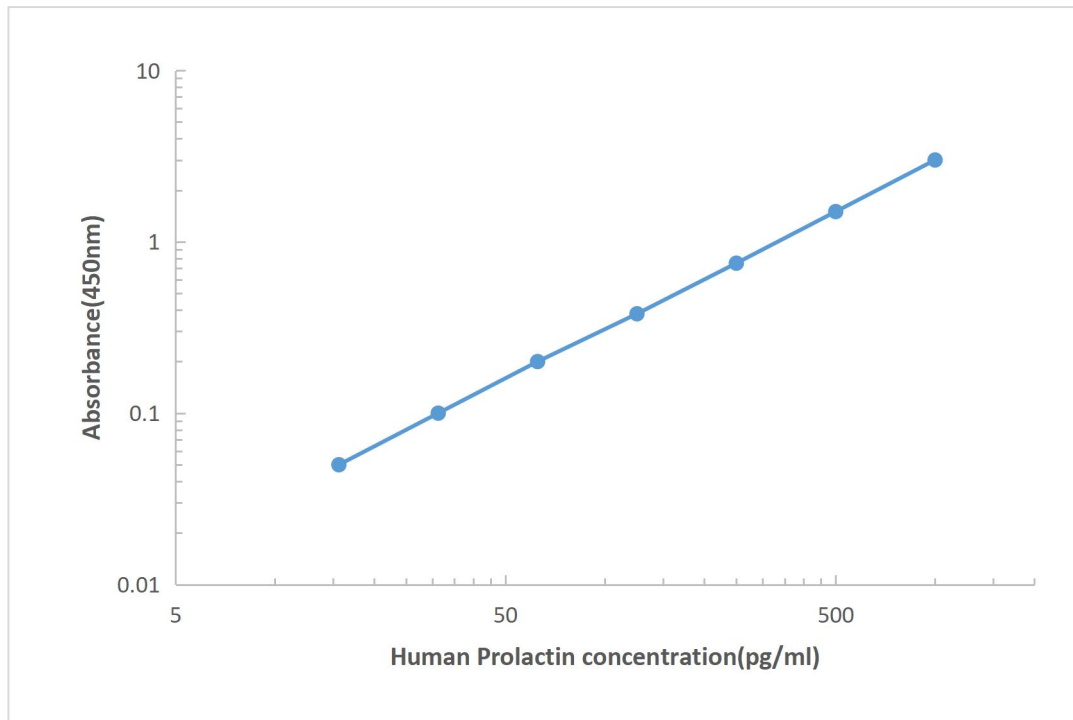
Add 50µl Stop solution to each well. Read at 450nm within 30 minutes.

CALCULATION OF RESULTS

1. The standard curve is used to determine the amount of specimens.
2. First, average the duplicate readings for each standard, control, and sample. All O.D. values are subtracted by the mean value of blank control before result interpretation.
3. Construct a standard curve by reducing the data using computer software capable of generating a four parameter logistic (4-PL) curve-fit. As an alternative, construct a standard curve by plotting the mean absorbance for each standard on the y-axis against the concentration on the x-axis and draw a best fit curve through the points on the graph.
4. The data may be linearized by plotting the log of the Prolactin concentrations versus the log of the O.D. and the best fit line can be determined by regression analysis. This procedure will produce an adequate but less precise fit of the data. If samples have been diluted, the concentration read from the standard curve must be multiplied by the dilution factor.
5. This standard curve is provided for demonstration only. A standard curve should be generated for each set of samples assayed.

Typical data using the Prolactin ELISA

Standard(pg/ml)	OD.	OD.	Average	Corrected
0	0.089	0.085	0.087	---
15.625	0.146	0.142	0.144	0.057
31.25	0.185	0.181	0.183	0.096
62.5	0.293	0.291	0.292	0.205
125	0.457	0.252	0.355	0.268
250	0.807	0.801	0.804	0.717
500	1.465	1.461	1.463	1.376
1000	2.504	2.501	2.503	2.416


Representative standard curve for Prolactin ELISA.

Performance Characteristics

SENSITIVITY: The minimum detectable dose was 8 pg/mL.

SPECIFICITY: This assay recognizes both natural and recombinant human Prolactin. The factors listed below were prepared at 100ng/ml in Standard /sample Diluent and assayed for cross-reactivity and no significant cross-reactivity or interference was observed.

Factors assayed for cross-reactivity

Recombinant human	Recombinant mouse	Recombinant porcine
Chorionic Gonadotropin	Prolactin	
Chorionic Gonadotropin α		
Follicle-stimulating Hormone β		
Growth Hormone		
Luteinizing Hormone β		
Thyroid-Stimulating Hormone β		

REPEATABILITY: The coefficient of variation of both intra-assay and inter-assay were less than 10%.

RECOVERY: The recovery of Prolactin spiked to three different levels in four samples throughout the range of the assay in various matrices was evaluated.

Recovery of Prolactin in two matrices

Sample Type	Average % of Expected Range (%)	Range (%)
Citrate plasma	97	90–104
Cell culture supernatants	102	92–112

LINEARITY: To assess the linearity of the assay, three samples were spiked with high concentrations of Prolactin in various matrices and diluted with the appropriate Sample Diluent to produce samples with values within the dynamic range of the assay. (The plasma samples were initially diluted 1:1)

Dilution ratio	Recovery (%)	Citrate plasma	Cell culture supernatants
1:2	Average% of Expected	98	103
	Range (%)	88–108	95–112
1:4	Average% of Expected	96	104
	Range (%)	90–102	88–102
1:8	Average% of Expected	97	102
	Range (%)	92–102	90–114
1:16	Average% of Expected	95	103
	Range (%)	88–102	90–116

REFERENCES

1. Cooke, N.E. et al. (1981) *J. Biol. Chem.* 256:4007.
2. Grattan, D.R. and I.C. Kokay (2008) *J. Neuroendocrinol.* 20:752.
3. Ben-Jonathan, N. et al. (2008) *Endocr. Rev.* 29:1.
4. Bernichtein, S. et al. (2010) *J. Endocrinol.* 206:1.
5. Langan, E.A. et al. (2012) *Arch. Dermatol. Res.* 304: 115.
6. Goffin, V. et al. (2011) *Nat. Rev. Urology* 8:597.
7. Lewis, U.J. et al. (1985) *Endoc.* 116:359.
8. Price, A.E. et al. (1995) *Endoc.* 136:4827.
9. Hoffmann, T. et al. (1993) *J. Endoc. Invest.* 16:807.
10. Cole, E. et al. (1991) *Endoc.* 129:2639.
11. Piwnicka, D. et al. (2006) *Mol. Endocrinol.* 20:3263.
12. Macotela, Y. et al. (2006) *J. Cell Sci.* 119:1790.
13. Triebel, J. et al. (2011) *IUBMB Life* 63:806.
14. Olukoga, A.O. and J.W. Kane (1999) *Clin. Endocrinol. (Oxf.)* 5:119.
15. Shimatsu, A. and N. Hattori (2012) *Clin. Dev. Immunol. Dec.* 4 [Epub ahead of print].