Reactivos GPL

Barcelona, España

 ϵ

TIBC -

TIBC Saturation - Precipitation

Presentation:

Cod. SU023 CONT: 50 Test.

Procedure

(TIBC) Total iron-binding capacity saturating precipitating reagent.

Only for in vitro use in clinical laboratory (IVD)

Store at: +2-8°C.

Serum tranferrin is saturated with an excess of Fe3+ and the unbound portion is precipitated with magnesium carbonate. The total amount of iron is then determined. The difference between the total iron-binding capacity (TIBC) and initial seric iron(SI) yields the unsatured ironbinding capacity (UIBC)^{1,2}.

REAGENTS COMPOSITION

ALLE COLLECTION				
	R 5 Saturating solution	Iron Solution	500 μg/dL	
	R 6 Precipitating solution	Magnesium carbonate		

ADDITIONAL REAGENTS

The supernatant will be processed according to the instructions of iron determination:

Ref SU022 Iron Ferrozine

REAGENT PREPARATION AND STABILITY

The reagents are ready to use.

Signs of reagent deterioration:

- Presence of particles and turbidity.

All the components of the kit are stable until the expiration date on the label when stored at 2-8 $^{\circ}$ C, protected from light and contamination prevented during their use. Do not use reagents over the expiration date.

Serum or heparinized plasma.

Fee of hemolysis and separated from cells as rapidly as possible. Stability of the sample: Iron is stable at 2-8°C for 7 days1.

MATERIAL REQUIRED BUT NOT PROVIDED

Samples centrifuge.

General laboratory equipment. (Note 1)

TEST PROCEDURE

4	Disatta	:-4-	41	4
Ι.	Pipette	Into	ıne	lupes

i ipette into the tubes.	
Sample (mL)	0.5
R 5 Saturating solution (mL)	1.0

- Mix well and incubate for 10 min. at room temperature (15-25°C).
- Add to each tube:

(*) R 6 Precipitating agent (spoonful)	3
(*) Powder: Dispense using the enclosed spoon. (Dosage: aprox.)	70 mg)

- Mix well and incubate for 10 min. at room temperature (15-25°C).
- Centrifuge 15 min. at 3000 r.p.m.
- Collect the supernatant carefully and measure the iron concentration $^{(\text{Note 2})}$. See: ADDITIONAL REAGENTS 6.

CALCULATIONS

The calculations are indicating in the Iron Insert determination.

TIBC = Iron concentration in the supernatant x 3 (Dilution factor)

OUALITY CONTROL

Control sera are recommended to monitor the performance of the procedure, Control H Normal Ref. QC003 and Control H Pathological Ref. QC004. If control values are found outside the defined range, check the instrument, reagents and calibrator for problems.

Serum controls are recommended for internal quality control. Each laboratory should establish its own Quality Control scheme and corrective

REFERENCE VALUES

Serum or plasma:

 $200 - 400 \,\mu\text{g/dL} \cong 36-72 \,\,\mu\text{mol/L}$

(These values are for orientation purpose).

It is suggested that each laboratory establish its own reference range.

CLINICAL SIGNIFICANCE

The iron is the component of a great number of enzymes. The myoglobin, muscular protein, contain iron, as well as the liver

Iron is necessary for the hemoglobin production, molecule that transports oxygen inside red globules.

Serum iron is almost always accompanied by a measurement of (TIBC) and denotes the available iron-binding sites of the serum.

We can find high levels in the ferropenic anemia.

Their deficit may be due to a hemochromatosis, cirrhosis or hepatitis. The variation day to day is quite market in healthy people 1,5,6

Clinical diagnosis should not be made on findings of a single test result but should integrate both clinical and laboratory data.

REAGENT PERFORMANCE

Measuring Range:

From detection limit of 0.850 μg/dL. to linearity limit of 1000 μg/dL., under the described assay conditions.

If results obtained were greater than linearity limit, dilute the sample 1/2 with NaCl 9 g/L. and multiply result by 2.

Precision:

	Intra-assay (n=20)		Inter-assay (n=20)		
Mean (μg/dL)	371	406		359	565
SD	1.79	1.82		7.16	9.46
CV (%)	0.49	0.45		1.99	1.67

- Sensitivity: 1 μ g/dL. = 0.00021 A
- Accuracy.

Results obtained using GPL reagents (y) did not show systematic differences when compared with other commercial reagents (x).

The results obtained using 50 samples were the following: Correlation coefficient: (r)²: 0,93

Regression equation: y= 0,9614x -14,20

The results of the performance characteristics depend on the analyzer used.

INTERFERING SUBSTANCES

Hemolyzed samples are rejected, since erythrocytes contain iron and therefore falsely elevate the serum results1

Other substances may interfere. A list of drugs and other substances that could interfere has been reported by Young et. al^{3,4}.

NOTES

- It is recommended to use disposable material. If glassware is used the material should be soaking for 6 h in diluted HCI (20% v/v) and then thoroughly rinsed with distilled water and dried before use.
- The supernatant is stable up to 1 hour at room temperature. If appear turbid, centrifuge again.

BIBLIOGRAPHY

- Baadenhuinjsen H et al. Modification in Ramsay's method for correct measurement of total iron-binding capacity. Clin. Chim1988: (175): 9-
- Perrotta G. Iron and iron-binding capacity. Kaplan A et al. Clin Chem 2. The C.V. Mosby Co. St Louis. Toronto. Princeton 1984; 1063-1065.
- 3. Young DS. Effects of drugs on Clinical Lab. Tests, 4th ed AACC Press,
- Young DS. Effects of disease on Clinical Lab. Tests, 4th ed AACC 4. 2001.
- Burtis A et al. Tietz Textbook of Clinical Chemistry, 3rd ed AACC 1999. 5.
- Tietz N W et al. Clinical Guide to Laboratory Tests. 3rd ed AACC 1995.