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Liquid Reagents - ready to use

# CREATININE

Enzymatic, PAP 2 Reagents

Diagnostic reagent for quantitative in vitro determination of creatinine in human serum or urine on photometric systems

REF	Kit Size	Content
D06410B	1 x 10 L	1 x 7,5 L R1 + 1 x 2,5 L R2
D11112B	1x 1L	1 x 750 ml R1 + 1 x 250 ml R2
D06420	4 x 100 mL	4 x 75 ml R1 + 1 x 100 ml R2
D06430	4 x 50 mL	4 x 37,5 ml R1 + 1 x 50 ml R2
D06440	4 x 25 mL	4 x 18,75 ml R1 + 1 x 25 ml R2
D06450	4 x 10 mL	4 x 7,5 ml R1 + 1 x 10 ml R2
D69911	4 x 50 mL	3 x 50 ml R1 + 2 x 25 ml R2
D0411917	4 x 50 mL	3 x 50 ml R1 + 1 x 50 ml R2
DA0822	5 x 50 mL	5 x 37,5 ml R1 + 5 x 12,5 ml R2
DT1022	4 x 50 mL	4 x 37,5 ml R1 + 4 x 12,5 ml R2
DK0721	5 x 40 mL	4 x 37,5 ml R1 + 1 x 50 ml R2
DB0921	2 x 120 mL	2 x 90 ml R1 + 2 x 30 ml R2

#### Additionally offered:

1 x 3 mL	Creatinine Standard	
5 x 3 mL	Calibrator	Diacal Auto
1 x 3 mL	Calibrator	Diacal Auto
12 x 5 mL	Control normal	Diacon N
5 x 5 mL	Control normal	Diacon N
1 x 5 mL	Control normal	Diacon N
12 x 5 mL	Control abnormal	Diacon P
5 x 5 mL	Control abnormal	Diacon P
1 x 5 mL	Control abnormal	Diacon P
12 x 5 mL	Urine Ctrl. normal	Diacon Urine Level 1
1 x 5 mL	Urine Ctrl. normal	Diacon Urine Level 1
12 x 5 mL	Urine Ctrl. abnormal	Diacon Urine Level 2
1 x 5 mL	Urine Ctrl. abnormal	Diacon Urine Level 2
	1 x 3 mL 5 x 3 mL 1 x 3 mL 1 2 x 5 mL 5 x 5 mL 1 2 x 5 mL 1 x 5 mL 1 x 5 mL	1 x 3 mL Creatinine Standard   5 x 3 mL Calibrator   1 x 3 mL Calibrator   12 x 5 mL Control normal   5 x 5 mL Control normal   1 x 5 mL Control normal   1 x 5 mL Control normal   1 x 5 mL Control abnormal   5 x 5 mL Control abnormal   1 x 5 mL Control abnormal   1 x 5 mL Control abnormal   1 x 5 mL Urine Ctrl. normal   1 x 5 mL Urine Ctrl. normal   1 x 5 mL Urine Ctrl. normal   1 x 5 mL Urine Ctrl. normal

#### **TEST PARAMETERS**

Method:	Colorimetric, enzymatic, endpoint, increasing reaction
Wavelength:	550 nm
Temperature:	37 °C
Sample:	Serum, urine
Linearity:	up to 30 mg/dL (2650 mmol/L)
Sensitivity:	The limit of detection is 0.14 mg/dL (12 mmol/L).

## SUMMARY [1,2]

Creatinine is a chemical waste molecule that is generated from muscle metabolism. Creatinine is produced from creatine, a molecule of major importance for energy production in muscles. Approximately 2 % of the body's creatine is converted to creatinine every day. Creatinine is transported through the bloodstream to the kidneys. The kidneys filter out most of the creatinine and dispose of it in the urine. The kidneys maintain the blood creatinine in a normal range. Creatinine has been found to be a fairly reliable indicator of kidney function. As the kidneys become impaired the creatinine level in the blood will rise. Abnormally high levels of creatinine thus warn of possible malfunction or failure of the kidneys, sometimes even before a patient reports any symptoms. It is for this reason that standard blood and urine tests routinely check the amount of creatinine in the blood.

## TEST PRINCIPLE

The enzymatic assay for creatinine involves a series of coupled enzymatic reactions including creatininase enzymatic conversion of creatinine into the product creatine which itself is converted to sarcosine by creatinase, followed by oxidation of sarcosine by sarcosine oxidase (SOD) producing hydrogen peroxide.

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In the presence of peroxidase (POD) the hydrogen peroxide is quantified at 550 nm by the formation of a colored dye [4]. Creatininae +  $H_2O < \frac{Creatininase}{Creatine} > Creatine$ 

Creatine +  $H_2O < \frac{Creatinase}{} > Sarcosine + Urea$ 

Sarcosine +  $O_2$  +  $H_2O < \frac{Sarcosine oxidase}{Sarcosine + H_2O_2}$  glycine + HCHO +  $H_2O_2$ 

 $2 H_2O_2 + 4-AA + TOOS < \frac{Peroxidase}{Peroxidase} > quinone dve$ 

The absorbance of the produced red dye is proportional to the creatinine concentration in the sample.

Any endogenous creatine present in the sample is removed by creatinase and sarcosine oxidase during preincubation.

## **REAGENT COMPOSITION**

COMPONENTS Reagent1: (R1)	CONCENT	RATION
Good's Buffer, pH 7-8 Creatinase	12 – 60	kU/L
Sarcosine oxidase (SOD) TOOS	4 – 17 0.07 – 0.21	kU/L g/L
Ascorbate oxidase Reagent 2: (R2)		-
Good's Buffer, pH 7-8 Creatininase	135 – 670	kU/L
Peroxidase 4-Aminoantipyrine (4-AA)	0.3 – 0.9	g/L

### **REAGENT PREPARATION**

Substrate Start

The reagents are ready to use.

Sample Start: Not possible (elimination of endogenous creatine).

## REAGENT STABILITY AND STORAGE

Conditions: Storage: Stability (unopened): On board stability:	Reagents are light-sensitive. $\rightarrow$ Protect from light! Close immediately after use. Do not freeze the reagents! Avoid contamination! at 2 - 8°C up to the indicated expiration date 30 days
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## SAMPLE PREPARATION

**Urine**: Dilute urine 1 + 9 with distilled water. [Diacon Urine controls must be diluted in the same way as patient urine samples.]

## SAMPLE STABILITY AND STORAGE [7]

serum:	at 4 – 25 °C	7 days
	at -20°C	at least 3 months
urine:	at 20 – 25 °C	2 days
	at 4 – 8 °C	6 days
	at -20 °C	6 months

Freeze only once. Discard contaminated specimens.

#### MATERIALS REQUIRED BUT NOT PROVIDED

NaCl solution (9 g/L)

General laboratory equipment

## STANDARD

(has to be ordered separate	ly)
Concentration	2 mg/dL (177 µmol/L)
Storage:	2 – 25 °C
Stability:	up to the expiration date
Close immediately after use!	Avoid contamination!

## MANUAL TEST PROCEDURE

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Pipette into test tubes	Blank	Std/Cal.	Sample		
Reagent 1	900 µL	900 µL	900 µL		
Sample	-	-	20 µL		
Stdandard/Calibrator	-	20 µL	-		
Dist. water	20 µL	-	-		
Mix. Incubate 5 min. at 37 °C and read absorbance A1 at 550					
nm against the blank. Then add:					





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Reagent 2	300 µL	300 µL	300 µL	
Mix. Incubate 5 min. at 37 °	°C and read	absorbance	A2 at 550	
nm against the blank.				
Calc.: $\Delta A = (A2 - 0.754 A1)$ sample or standard				

## CALCULATION

## Serum:

Creatinine [mg/dL] =  $\frac{\Delta A \text{ Sample}}{\Delta A \text{ Std/Cal}} \times \text{Conc. Std/Cal [mg/dL]}$ Urine:

Creatinine [mg/dL] =  $\frac{\Delta A \text{ Sample}}{\Delta A \text{ Std/Cal}} \times \text{Conc. Std/Cal [mg/dL] x 10}$ 

## UNIT CONVERSION

 $mg/dL \times 88.4 = \mu mol/L$ 

**REFERENCE RANGE** [6] \*

#### Serum:

	mg/dL	µmol/L		
Females	0.51 – 0.95	45 – 84		
Males	0.67 – 1.17 59 – 104			
First morning urine:				
mg/dL µmol/L				
Females	29 – 226 2550 – 20000			
Males	40 – 278	3540 – 24600		

\* These values are for orientation purpose. Each laboratory should check if reference ranges are transferable to its own patient population and determine own reference ranges as necessary.

## PERFORMANCE CHARACTERISTICS

## LINEARITY, MEASURING RANGE

The test has been developed to determine creatinine concentrations within a measuring range from 0.14 - 30 mg/dL. If values exceed this range samples should be diluted with NaCl solution (9 g/L) and the result multiplied by the dilution factor.

#### SENSITIVITY/LIMIT OF DETECTION

The lower limit of detection is 0.14 mg/dL (12  $\mu mol/L)$ 

## PRECISION (at 37°C)

#### Serum Testing

Within run precision n = 80	Mean [mg/dL]	SD [mg/dL]	CV [%]		
Sample 1	0.74	0.015	2.1		
Sample 2	1.38	0.015	1.1		
Sample 3	4.04	0.029	0.7		
Total precision	Mean	SD	CV		
n = 80	[mg/dL]	[mg/dL]	[%]		
Sample 1	0.74	0.022	3.0		
Sample 2	1.38	0.026	1.9		
Sample 3	4.04	0.058	1.4		
Urine Testing					
Within run precision	Mean	SD	CV		
n = 21	[mg/dL]	[mg/dL]	[%]		
Sample 1	29.09	0.10	0.36		
Sample 2	87.1	0.27	0.31		
Sample 3	196.7	0.90	0.46		
Total precision	Mean	SD	CV		
n = 20	[mg/dL]	[mg/dL]	[%]		
Sample 1	29.9	0.79	2.64		
Sample 2	87.7	0.67	0.76		
Sample 3	195	1.19	0.60		

## SPECIFICITY/INTERFERENCES

no interference up to:	
Ascorbic Acid	10 mM
Bilirubin	40 mg/dL
Bilirubin, conjugated	30 mg/dL
Hemoglobin	500 mg/dL
Triglycerides	1000 mg/dL

For further information on interfering substances refer to Young DS [8].

## METHOD COMPARISON

This assay (y) was compared with a legally marketed creatinine assay (x) using serum samples ranging from 0.2 to 13.51 mg/dL S:\pm\allg\Inserts\_PM\Inserts\_word\clinical chemistry\creatinine\_enz-PAP\_en\_rev05.docx

 $(17.7 - 1194 \ \mu mol/L)$  and urine samples ranging from 0.14 to 141 mg/dL (12.4 - 12434 \ \mu mol/L): Serum samples: y = 0.9467 x + 0.0643; r= 0.9981 Urine samples: y = 1.0002 x - 0.0518; r = 0.9968

## CALIBRATION

The assay requires the use of a Creatinine Standard or Calibrator. We recommend the Dialab **Creatinine Standard** and the Dialab multi calibration serum **Diacal Auto**.

Calibrator values have been made traceable to NIST (National Institute for Standardization) Standard Reference Material SRM 967 using level 1 and 2 and therefore to GC-IDMS (gas chromatography – isotope dilution mass spectrometry).

**NOTE:** calibration of serum samples with an aqueous standard may cause matrix related bias. It is recommended to calibrate serum samples with a serum based calibrator.

#### QUALITY CONTROL

All control sera and urine controls with Creatinine values determined by this method can be used.

We recommend the Dialab serum controls **Diacon N** (control serum with values in the normal range) and **Diacon P** (control serum with values in the abnormal range) as well as the Dialab urine controls **Diacon Urine Level 1** (control urine normal) and **Level 2** (control urine abnormal).

Each laboratory should establish corrective action in case of deviations in control recovery.

## AUTOMATION

Special applications for automated analyzers can be made on request.

## WARNINGS AND PRECAUTIONS

- The reagent contains sodium azide (0.95 g/L) as preservative. Do not swallow! Avoid contact with skin and mucous membranes.
- N-acetylcysteine (NAC), acetaminophen and metamizole medication leads to falsely low results in patient samples.
- 3. Please refer to the safety data sheet and take the necessary precautions for the use of laboratory reagents.
- For diagnostic purposes, the results should always be assessed with the patient's medical history, clinical examinations and other findings.
- 5. For professional use only!

### WASTE MANAGEMENT

Please refer to local legal requirements

## REFERENCES

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- Young DS. Effects of Drugs on Clinical Laboratory Tests. 5<sup>th</sup> ed. Vol. 1 and 2. Washington, CD: The American Association for Clinical Chemistry Press 2000.

