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## AlphaLISA High Performance (HP) Biotin-Free Human Interleukin 8 (IL8) Detection Kit

**Product No.:** AL3165HV/C/F

**Lot No.:** 3154990

**Manufacture Date:** May 3, 2023

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## Product Information

<b>Application:</b>	This kit is designed for the quantitative determination of human interleukin 8 (IL8) using a homogeneous no wash AlphaLISA assay.
<b>Kit contents:</b>	The kit contains 5 components: AlphaLISA Acceptor beads coated with of human interleukin 8 Antibody, Anti-Digoxigenin Fab Fragment Donor beads, Digoxigenin human interleukin 8 antibody, Lyophilized of human interleukin 8 and 10X AlphaLISA Immunoassay Buffer.
<b>Sensitivity:</b>	Lower Detection Limit (LDL): 0.66 pg/mL Lower Limit of Quantification (LLOQ): 2.60 pg/mL EC <sub>50</sub> : 4.58 ng/mL
<b>Dynamic Range:</b>	0.66 – 10 000 pg/mL

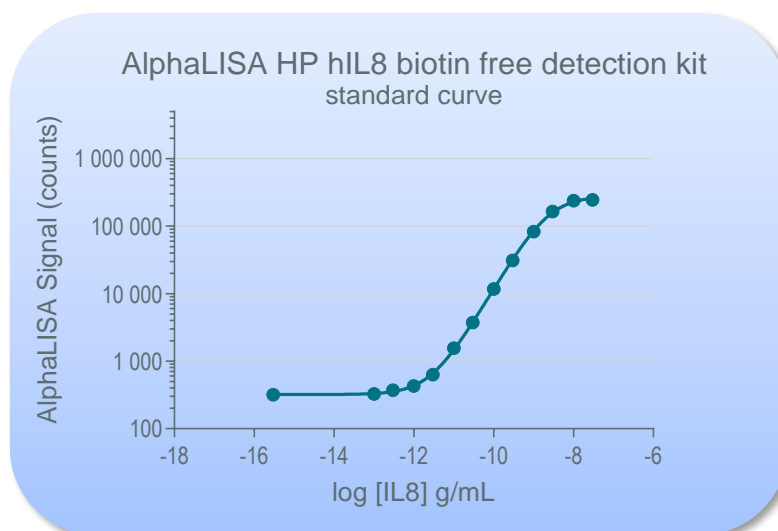


Figure 1. Typical sensitivity curve in AlphaLISA Immunoassay Buffer. The data was generated using a gray AlphaPlate™-384 microplate and the EnVision® Multilabel Plate Reader 2102 with Alpha option.

<b>Storage:</b>	Store kit in the dark at 4 °C. For reconstituted analyte, aliquot and store at -20 °C. Avoid freeze-thaw cycles.
<b>Stability:</b>	This kit is stable for at least 6 months from the date of manufacture when stored in its original packaging and the recommended storage conditions.

## Quality Control

Lot to lot consistency is confirmed in an AlphaLISA assay. Maximum and minimum signals, EC<sub>50</sub> and LDL were measured on the EnVision Multilabel Plate Reader with Alpha option using the protocol described in this technical data sheet. We certify that these results meet our quality release criteria. Maximum counts may vary between bead lots and the instrument used, with no impact on LDL measurement.

EC <sub>50</sub> :	0.384 ng/mL
LDL:	0.578 pg/mL
LLOQ:	1.645 pg/mL
Min counts:	272 counts
Max counts:	56473 counts

## Analyte of Interest

Interleukin 8 (IL8 or CXCL8), a member of the ELR+ CXC chemokine family, is a 8.4 kDa polypeptide that forms homodimers in vivo. IL8 is secreted by several types of cells: fibroblasts, monocytes, macrophages and endothelial cells, among many others, in response to inflammatory stimuli. It is a chemoattractant and activator for neutrophils, directing them from peripheral blood to the site of inflammation. It is also a potent angiogenic factor promoting endothelial and epithelial migration and proliferation in several cancers and is associated with metastasis. It signals through two specific G protein-coupled receptors, CXCR1 and CXCR2, sharing ~77% identity.

## Description of the AlphaLISA Assay

AlphaLISA technology allows the detection of molecules of interest in Immunoassay buffer, RPMI, DMEM, or serum media in a highly sensitive, quantitative, reproducible and user-friendly mode. In this AlphaLISA assay, a digoxigenin anti-human interleukin 8 (IL8) antibody binds to an anti-DIG (Fab) coated AlphaLISA Donor beads, while the anti-human interleukin 8 (IL8) antibody is conjugated to AlphaLISA Acceptor beads. In the presence of human interleukin 8 (IL8), the beads come into proximity. The excitation of the Donor beads provokes the release of singlet oxygen molecules that triggers a cascade of energy transfer within the Acceptor beads, resulting in emission with  $\lambda_{\text{max}}$  at 615 nm (Figure 2).

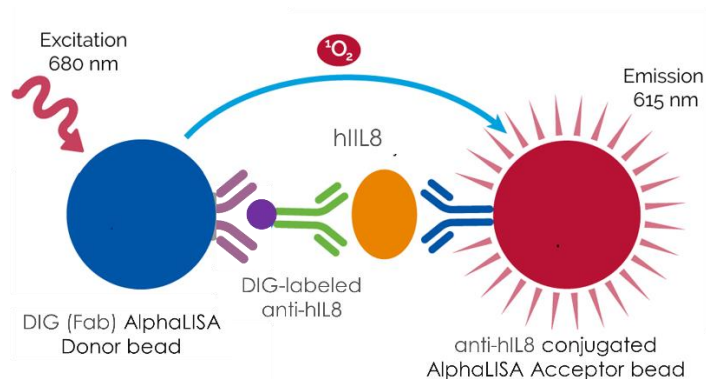


Figure 2. AlphaLISA HP Biotin-Free human Interleukin 8 (IL8) Detection Assay Principle.

## Precautions

- The Alpha Donor beads are light-sensitive. All the other assay reagents can be used under normal light conditions. All Alpha assays using the Donor beads should be performed under subdued laboratory lighting (< 100 lux). Green filters (LEE 090 filters (preferred) or Roscolux filters #389 from Rosco) can be applied to light fixtures.
- Take precautionary measures to avoid contamination of the reagent solutions.
- The digoxigenin anti-human Interleukin 8 (IL8) antibody contains sodium azide. Contact with skin or inhalation should be avoided.

## Kit Content: Reagents and Materials

Kit components	AL3165HV 100 assay points	AL3165C 500 assay points***	AL3165F 5000 assay points***
AlphaLISA Anti-human Interleukin 8 Acceptor beads stored in PBS, 0.05% Kathon CG/ICP, pH 7.2	25 µL @ 5 mg/mL (1 brown tube, <u>white</u> cap)	50 µL @ 5 mg/mL (1 brown tube, <u>white</u> cap)	500 µL @ 5 mg/mL (1 brown tube, <u>white</u> cap)
Anti-Digoxigenin Fab Fragment Donor Beads stored in PBS pH 7.2, 0.05% Kathon CG/ICP	100 µL @ 5 mg/mL (1 brown tube, <u>black</u> cap)	200 µL @ 5 mg/mL (1 brown tube, <u>black</u> cap)	2 x 1 mL @ 5 mg/mL (2 brown tubes, <u>black</u> cap)
Digoxigenin Anti-human Interleukin 8 Antibody stored in PBS, 0.1% Tween- 20, 0.05% NaN <sub>3</sub> , pH 7.4	25 µL @ 500 nM (1 tube, <u>black</u> cap)	50 µL @ 500 nM (1 tube, <u>black</u> cap)	500 µL @ 500 nM (1 tube, <u>black</u> cap)
Lyophilized human Interleukin 8 Analyte*	30 ng (1 tube, <u>clear</u> cap)	30 ng (1 tube, <u>clear</u> cap)	30 ng (1 tube, <u>clear</u> cap)
AlphaLISA Immunoassay Buffer (10X) **	2 mL, 1 small bottle	10 mL, 1 small bottle	100 mL, 1 large bottle

\* Reconstitute lyophilized analyte in 100 µL Milli-Q® grade H<sub>2</sub>O. The reconstituted analyte should be used within 60 minutes or aliquoted into screw-capped 0.5 mL polypropylene vials and stored at -20 °C for future experiments. The aliquoted analyte at -20 °C is stable up to 28 days. Avoid freeze-thaw cycles. One vial contains an amount of analyte sufficient for performing 10 standard curves. Additional vials can be ordered separately (cat # AL3165S).

\*\* Extra buffer can be ordered separately (cat # AL000C: 10 mL, cat # AL000F: 100 mL).

\*\*\* The number of assay points is based on an assay volume of 100 µL in 96-well plates or 50 µL in 384-well assay plates using the kit components at the recommended concentrations.

Sodium azide should **not** be added to the stock reagents. High concentrations of sodium azide (> 0.001% final in the assay) might decrease the AlphaLISA signal. Note that sodium azide from the digoxigenin anti-human interleukin 8 antibody stock solution will not interfere with the AlphaLISA signal (0.0001% final in the assay).

## Specific additional required reagents and materials:

The following materials are recommended:

Item	Suggested source	Catalog #
TopSeal™-A Plus Adhesive Sealing Film	PerkinElmer Inc.	6050185
EnVision®-Alpha Reader	PerkinElmer Inc.	-

## Recommendations

IMPORTANT: PLEASE READ THE RECOMMENDATIONS BELOW BEFORE USE

- The volume indicated on each tube is guaranteed for single pipetting. Multiple pipetting of the reagents may reduce the theoretical amount left in the tube. To minimize loss when pipetting beads, it is preferable not to pre-wet the tip.
- Centrifuge all tubes (including lyophilized analyte) before use to improve recovery of content (2000g, 10-15 sec). Re-suspend all reagents by vortexing before use.
- Use Milli-Q® grade H<sub>2</sub>O to dilute 10X AlphaLISA Immunoassay Buffer and to reconstitute the lyophilized analyte.
- When diluting the standard or samples, change tips between each standard or sample dilution. When loading reagents in the assay microplate, change tips between each standard or sample addition and after each set of reagents.
- When reagents are added to the microplate, make sure the liquids are at the bottom of the well.
- Small volumes may be prone to evaporation. It is recommended to cover microplates with TopSeal-A Adhesive Sealing Films to reduce evaporation during incubation. Microplates can be read with the TopSeal-A Film in place.
- The AlphaLISA signal is detected with an EnVision Multilabel Plate Reader equipped with the Alpha option using the AlphaScreen standard settings (e.g. Total Measurement Time: 550 ms, Laser 680 nm Excitation Time: 180 ms, Mirror: D640as, Emission Filter: M570w, Center Wavelength 570 nm, Bandwidth 100 nm, Transmittance 75%).
- AlphaLISA signal will vary with temperature and incubation time. For consistent results, identical incubation times and temperature should be used for each plate.
- The standard curves shown in this technical data sheet are provided for information only. A standard curve must be generated for each experiment.
- **The saliva and sweat contain high concentration of IL-8 detectable in saliva and sweat. Take precautionary measures to prevent contamination of the kit reagents while running the assay (new mask and gloves).**

## Assay Procedure

- The protocol described below is an example for generating one standard curve in a 50 µL final assay volume (48 wells, triplicate determinations). The protocols also include testing samples in 452 wells. If different amount of samples are tested, the volumes of all reagents have to be adjusted accordingly, as shown in the table below. These calculations do not include excess reagent to account for losses during transfer of solutions or dead volumes.
- The standard dilution protocol is provided for information only. As needed, the number of replicates or the range of concentrations covered can be modified.
- Use of four background points in triplicate (12 wells) is recommended when LDL/LLOQ is calculated. One background point in triplicate (3 wells) can be used when LDL/LLOQ is not calculated.

		Volume				
Format	# of data points	Final	Sample	MIX AlphaLISA AccBeads + DIG Ab	Anti DIG fab-Donor beads	Plate recommendation
AL3165HV	100	100 µL	10 µL	40 µL	50 µL	White OptiPlate-96 (cat # 6005290) White ½ AreaPlate-96 (cat # 6005560)
AL3165C	250	100 µL	10 µL	40 µL	50 µL	White OptiPlate-96 (cat # 6005290)
	500	50 µL	5 µL	20 µL	25 µL	½ Area AlphaPlate-96 (cat # 6002350) White OptiPlate-384 (cat # 6007290) Light gray AlphaPlate™-384 (cat # 6005350)
	1 250	20 µL	2 µL	8 µL	10 µL	Light gray AlphaPlate-384 (cat # 6005350) ProxiPlate™-384 Plus (cat # 6008280) White OptiPlate-384 (cat # 6007290)
	2 500	10 µL	1 µL	4 µL	5 µL	Light gray AlphaPlate-1536 (cat # 6004350)
AL3165F	5 000	50 µL	5 µL	20 µL	25 µL	½ Area AlphaPlate-96 (cat # 6002350) White OptiPlate-384 (cat # 6007290) Light gray AlphaPlate-384 (cat # 6005350)
	12 500	20 µL	2 µL	8 µL	10 µL	Light gray AlphaPlate-384 (cat # 6005350) ProxiPlate-384 Plus (cat # 6008280) White OptiPlate-384 (cat # 6007290)
	25 000	10 µL	1 µL	4 µL	5 µL	Light gray AlphaPlate-1536 (cat # 6004350)

**The 2-Step standard protocol described below is for 500 assay points including one standard curve (48 wells) and samples (452 wells). If different amount of samples are tested, the volumes of all reagents have to be adjusted accordingly.**

**The saliva and sweat contain high concentration of IL-8 detectable in saliva and sweat. Take precautionary measures to prevent contamination of the kit reagents while running the assay (new mask and gloves).**

1) Preparation of 1X AlphaLISA Immunoassay Buffer:

Add 5 mL of 10X AlphaLISA Immunoassay Buffer to 45 mL Milli-Q® grade H<sub>2</sub>O.

2) Preparation of human IL8 analyte standard dilutions:

- Reconstitute lyophilized human IL8 (0.03 µg) in 100 µL Milli-Q® grade H<sub>2</sub>O. The remaining reconstituted analyte should be aliquoted immediately and stored at -20 °C for future assays (see page 4 for more details).
- Prepare standard dilutions as follows in 1X AlphaLISA Immunoassay Buffer (change tip between each standard dilution):

Tube	Vol. of Human IL8 (µL)	Vol. of diluent (µL) *	[Human IL8] in standard curve	
			(g/mL in 5 µL)	(pg/mL in 5 µL)
A	10 µL of reconstituted hIL8	90	3.00E-08	30 000
B	60 µL of tube A	120	1.00E-08	10 000
C	60 µL of tube B	140	3.00E-09	3 000
D	60 µL of tube C	120	1.00E-09	1 000
E	60 µL of tube D	140	3.00E-10	300
F	60 µL of tube E	120	1.00E-10	100
G	60 µL of tube F	140	3.00E-11	30
H	60 µL of tube G	120	1.00E-11	10
I	60 µL of tube H	140	3.00E-12	3
J	60 µL of tube I	120	1.00E-12	1
K	60 µL of tube J	140	3.00E-13	0.3
L	60 µL of tube K	120	1.00E-13	0.1
M ** (background)	0	100	0	0
N ** (background)	0	100	0	0
O ** (background)	0	100	0	0
P ** (background)	0	100	0	0

\* Dilute standards in diluent (e.g. 1X AlphaLISA Immunoassay Buffer).

At low concentrations of analyte, a significant amount of analyte can bind to the vial. Therefore, load the analyte standard dilutions in the assay microplate within 60 minutes of preparation.

\*\* Four background points in triplicate (12 wells) are used when LDL is calculated. If LDL does not need to be calculated, one background point in triplicate can be used (3 wells).

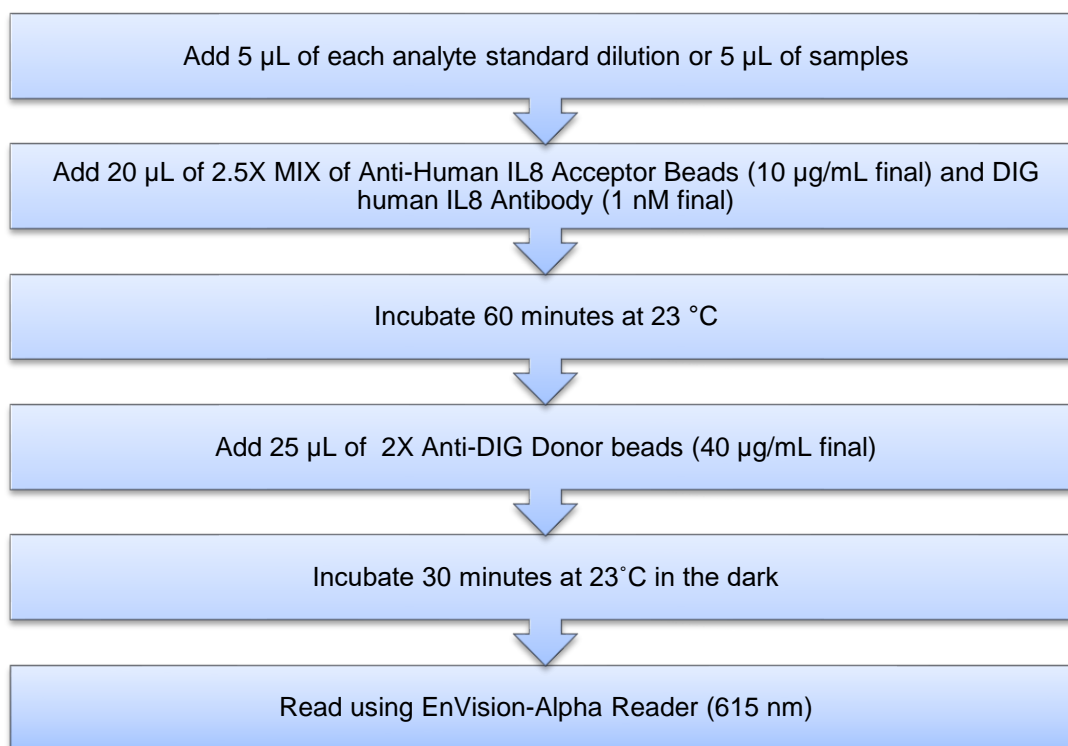
3) Preparation of 2.5X MIX AlphaLISA Anti-human IL8 Acceptor beads (25 µg/mL) + Digoxigenin Anti-human IL8 Antibody (25 nM):

- Prepare just before use.
- Add 50 µL of 5 mg/mL AlphaLISA Anti-human IL8 Acceptor Bead and 50 µL of 500 nM DIG Anti-human IL8 Antibody to 9 900 µL of 1X AlphaLISA Immunoassay Buffer.

4) Preparation of 2X anti-DIG (Fab) Donor beads (80 µg/mL):

- Prepare just before use.
- Keep the beads under subdued laboratory lighting.
- Add 200 µL of 5 mg/mL SA-Donor beads to 12 300 µL of 1X AlphaLISA Immunoassay Buffer.

5) In a Gray AlphaPlate (384 wells):



## Data Analysis

- Calculate the average count value for the background wells.
- Generate a standard curve by plotting the AlphaLISA counts versus the concentration of analyte. A log scale can be used for either or both axes. No additional data transformation is required.
- Analyze data according to a nonlinear regression using the 4-parameter logistic equation (sigmoidal dose-response curve with variable slope) and a  $1/Y^2$  data weighting (the values at maximal concentrations of analyte after the hook point should be removed for correct analysis).
- The LDL is calculated by interpolating the average background counts (12 wells without analyte) + 3 x standard deviation value (average background counts + (3xSD)) on the standard curve.
- The LLOQ as measured here is calculated by interpolating the average background counts (12 wells without analyte) + 10 x standard deviation value (average background counts + (10xSD)) on the standard curve. Alternatively, the true LLOQ can be determined by spiking known concentrations of analyte in the matrix and measuring the percent recovery, and then determining the minimal amount of spiked analyte that can be quantified within a given limit (usually +/- 20% or 30% of the real concentration).
- Read from the standard curve the concentration of analyte contained in the samples.
- If samples have been diluted, the concentration read from the standard curve must be multiplied by the dilution factor.



## Assay Performance Characteristics

AlphaLISA assay performance described below was determined using the 2-step standard protocol using AlphaLISA Immunoassay buffer as assay buffer (IAB). The analytes (standards) were prepared in IAB, RPMI + 10%FBS, DMEM + 10% FBS, and 100% FBS. All other components were prepared in IAB

- Assay Sensitivity:

The LDL was calculated as described above. The values correspond to the lowest concentration of analyte that can be detected in a volume of 5  $\mu$ L sample using the recommended assay conditions.

LDL (pg/mL)	(Analyte diluent)	# of experiments
0.66	IAB	48
0.91	RPMI +FBS	5
0.86	DMEM + FBS	3
0.70	100% FBS	2

- Assay Precision:

The following assay precision data were calculated from the three independent assays using two different kit lots. In each lot, the analytes were prepared in Immunoassay Buffer (IAB), RPMI + 10% FBS, DMEM + 10% FBS or 100% human Serum. All other components were prepared in IAB. Each assay consisted of one standard curve comprising 12 data points (each in triplicate) and 12 background wells (no analytes). The assays were performed in 384-well plate format.

- Intra-assay precision:

The intra-assay precision was determined using a total of 3 independent determinations in triplicate. Shown as CV%.

Human IL8	IAB	RPMI + 10% FBS	DMEM + 10% FBS	Human Serum
CV (%)	1%	3%	3%	3%

- Inter-assay precision:

The inter-assay precision was determined using a total of 3 independent determinations with 9 measurements for 1.5 ng/mL sample. Shown as CV%.

Human IL8	IAB	RPMI + 10% FBS	DMEM + 10% FBS	Human Serum
CV (%)	4%	4%	3%	3%

- Spike Recovery:

Two known concentrations of analyte were spiked into IAB, RPMI + 10% FBS, DMEM + 10% FBS or 100% human serum. All samples, including non-spiked diluents were measured in the assay. Note that the analytes for the respective standard curves were prepared in IAB, RPMI + FBS, DMEM + FBS and 100% human serum. All other assay components were diluted in IAB.

Spiked Human IL8 (pg/mL)	% Recovery			
	IAB	RPMI + FBS	DMEM + FBS	Human Serum
700	94%	97%	96%	107%
1400	100%	89%	104%	86%

- Specificity:

Cross-reactivity of the AlphaLISA HP human IL8 Detection Kit was tested using the following proteins from 30 000 to 0.1 pg/mL in IAB. The cross reactivities were calculated using the signals at 30 ng/mL human IL8 as 100%. No unwanted cross-reaction with related IL8 protein was observed.

Proteins	Cross Reactivity (%)
Porcine IL8	0
Canine IL8	0

## Troubleshooting Guide

You will find detailed recommendations for common situations you might encounter with your AlphaLISA Assay kit at:

<http://www.perkinelmer.com/lab-products-and-services/application-support-knowledgebase/alphalisa-alphascreen-no-wash-assays/alpha-troubleshooting.html>

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