Alkaline phosphatase (IFCC)



Diagnostic reagent for quantitative in vitro determination of alkaline phosphatase (ALP) in serum or plasma on photometric systems

Order Information

Cat. No.	Kit size	e					
01 00003 70 04 0125	R1	5 x	20 mL	+	R2	1 x	25 mL
01 00003 70 04 0500	R1	5 x	80 mL	+	R2	1 x	100 mL
01 00003 70 10 0100	R1	4 x	20 mL	+	R2	4 x	5 mL
CDT-ALP	R1	3 x	30 mL	+	R2	2 x	11.3 mL
01 00003 70 02 0100	R1	4 x	20 mL	+	R2	4 x	5 mL

Summary [1,2]

Alkaline phosphatase (ALP), a hydrolytic enzyme acting optimally at alkaline pH, exists in blood in numerous distinct forms which originate mainly from bone and liver, but also from other tissues as kidney, placenta, testes, thymus, lung and tumors. Physiological increases are found during bone growth in childhood and in pregnancy, while pathological increases are largely associated with hepatobiliary and bone diseases. In hepatobiliary disease they indicate obstruction of the bile ducts as in cholestasis caused by gall stones, tumors or inflammation. Elevated activities are also observed in infectious hepatitis. In bone diseases elevated AP activities originate from increased osteoblastic activity as in Paget's disease, osteomalacia (rickets), bone metastases and hyperparathyroidism.

Method

Kinetic photometric test, according to the International Federation of Clinical Chemistry and Laboratory Medicine (IFCC).

Principle

p-Nitrophenylphosphate + H_2O <u>AP</u> > Phosphate + p-Nitrophenol

Reagents

Components and Concentrations

R1:	2-Amino-2-methyl-1-propanol pH 10.4	1.1 mol/L
	Magnesium acetate	2 mmol/L
	Zinc sulphate	0.5 mmol/L
	HEDTA	2.5 mmol/L
R2:	p-Nitrophenylphosphate	80 mmol/L

Storage Instructions and Reagent Stability

The reagents are stable up to the end of the indicated month of expiry, if stored at 2-8 °C and contamination is avoided. Do not freeze the reagents! Reagent 2 must be protected from light.

Waste Management

Please refer to local legal requirements.

Materials required but not provided

NaCl solution 9 g/L General laboratory equipment

Warnings and Precautions

- 1. The reagents contain sodium azide (0.95 g/L) as preservative. Do not swallow! Avoid contact with skin and mucous membranes.
- During reaction p-nitrophenol is produced which is poisonous when inhaled, swallowed or absorbed through skin. If the reaction mixture comes in contact with skin or mucous membranes wash copiously with water!
- 3. In very rare cases, samples of patients with gammopathy might give falsified results [9].
- 4. Please refer to the safety data sheets 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!

Reagent Preparation

Substrate Start

The reagents are ready to use.

Sample Start

Mix 4 parts of R1 + 1 part of R2(e.g. 20 mL R1 + 5 mL R2) = mono reagentStability:4 weeksat2-8 °C5 daysat15 - 25 °CThe mono reagent must be protected from light.

Specimen

Serum or heparir	plasma			
Do not use hemo	lytic samples!			
Stability [6]:	7 days	at	20 – 25 °C	
	7 days	at	4−8 °C	
	2 months	at	- 20 °C	
Only freeze once! Discard contaminated specimens!				

Assay Procedure

Application sheets for automated systems are available on request.

Hg 405 nm, (400 – 420 nm)
1 cm
37 °C
Against reagent blank

Substrate start

	Blank	Sample or calibrator
Sample or calibrator	-	20 µL
Dist. Water	20 µL	-
Reagent 1	1000 μL	1000 μL
Mix, incubate for approx. 1 min	n, then add:	
Reagent 2	250 μL	250 μL
Mix, read absorbance after 1 m	in and start stopwatch	I.
Read absorbance again after 1,	2 and 3 min.	

Sample start

	Blank	Sample or calibrator		
Sample or calibrator	-	20 µL		
Dist. Water	20 µL	-		
Mono reagent	1000 μL	1000 μL		
Mix, read absorbance after 1 min and start stopwatch.				
Read absorbance again after 1,	2 and 3 min.			

Alkaline phosphatase (IFCC)

Calculation

With factor

From	absorbance	readings	calculate	$\Delta A/min$	and	multiply	by	the
corres	ponding facto	r from tab	le below:					

∆A/min x factor = ALP activity [U/L]

Substrate start	405 nm	3433
Sample start	405 nm	2757

With calibrator

 $ALP \quad [U/L] = \frac{\Delta A / minSample}{\Delta A / minCalibrator} \ x \ Conc. \ Calibrator \ [U/L]$

Calculation factor

ALP [U/L] x 0.0167 = ALP [μ kat/L]

Calibrators and Controls

For the calibration of automated photometric systems the DiaSystem UniCal CC is recommended. For internal quality control DiaSystem UniLab N and DiaSystem UniLab P should be assayed. Each laboratory should establish corrective action in case of deviations in control recovery.

	Cat. No.	Kit size
UniCal CC	06 00122 70 04 0018	6 x 3 mL
UniLab N	07 00123 70 05 0030	6 x 5 mL
UniLab P	07 00124 70 05 0030	6 x 5 mL

Performance characteristics

Measuring range

On automated systems the test is suitable for the determination of ALP activities up to 1400 U/L.

In case of a manual procedure, the test is suitable for ALP activities which correspond to a maximum of $\Delta A/min$ of 0.25.

If such values are exceeded the samples should be diluted 1 + 9 with NaCl solution (9 g/L) and results multiplied by 10.

Specificity/Interferences

No interference was observed by ascorbic acid up to 30 mg/dL, conjugated bilirubin up to 60 mg/dL, unconjugated bilirubin to 25 mg/dL, hemoglobin up to 100 mg/dL and lipemia up to 2000 mg/dL triglycerides. For further information on interfering substances refer to Young DS [5].

Sensitivity/Limit of Detection

The lower limit of detection is 2 U/L.

Precision

Intra-assay precision n = 20	Mean [U/L]	SD [U/L]	CV [%]
Sample 1	68.6	0.58	0.85
Sample 2	107	0.71	0.67
Sample 3	243	0.97	0.40

Inter-assay precision n = 20	Mean [U/L]	SD [U/L]	CV [%]
Sample 1	69.2	1.37	1.99
Sample 2	104	1.22	1.08
Sample 3	238	2.40	1.01



DiaSystem Scandinavia AB

Method Comparison

A comparison of DiaSystem Alkaline phosphatase (IFCC) (y) with a commercially available test (x) using 104 samples gave following results: y = 1.01 x - 1.51 U/L; r= 0.999.

Reference Range

Adults [6]		
Women	35 – 104 [U/L]	0.58 – 1.74 [µkat/L]
Men	40 – 129 [U/L]	0.67 – 2.15 [µkat/L]
Adults [7]		
Women	35 – 105 [U/L]	0.58–1.75 [µkat/L]
Men	40- 130 [U/L]	0.67 – 2.17 [µkat/L]
Men Adults [7] Women	40 – 129 [U/L] 35 – 105 [U/L]	0.67 – 2.15 [μkat/L] 0.58 – 1.75 [μkat/L]

Children [8]

	Female [U/L]	Male [U/L]	Female [µkat/L]	Male [µkat/L]
1 – 30 day(s)	48 - 406	75 – 316	0.80 - 6.77	1.25 - 5.27
1 month – 1 year	124 - 341	82 – 383	2.07 – 5.68	1.37 – 6.38
1 – 3 year(s)	108 - 317	104 – 345	1.80 - 5.28	1.73 – 5.75
4 – 6 years	96 – 297	93 – 309	1.60 - 4.95	1.55 – 5.15
7–9 years	69 – 325	86 - 315	1.15 – 5.42	1.43 – 5.25
10 – 12 years	51 – 332	42 – 362	0.85 – 5.53	0.70 - 6.03
13 – 15 years	50 - 162	74 – 390	0.83 – 2.70	1.23 – 6.50
16 – 18 years	47 - 119	52 - 171	0.78 – 1.98	0.87 – 2.85

Each laboratory should check if the reference ranges are transferable to its own patient population and determine own reference ranges if necessary.

Literature

- 1. Thomas L. Clinical Laboratory Diagnostics. 1st ed. Frankfurt: TH-Books Verlagsgesellschaft; 1998. p. 36-46.
- Moss DW, Henderson AR. Clinical enzymology. In: Burtis CA, Ashwood ER, editors. Tietz Textbook of Clinical Chemistry. 3rd ed. Philadelphia: W.B Saunders Company; 1999. p. 617-721.
- IFCC primary reference procedures for the measurement of catalytic activity concentrations of enzymes at 37 °C. Part 9: Reference procedure for the measurement of catalytic concentration of alkaline phosphatase; Clin Chem Lab Med 2011;49(9)
- 4. Guder WG, Zawta B et al. The Quality of Diagnostic Samples. 1st ed. Darmstadt: GIT Verlag; 2001; p. 14-5.
- Young DS. Effects of Drugs on Clinical Laboratory Tests. 5th ed. Volume 1 and 2. Washington, DC: The American Association for Clinical Chemistry Press 2000.
- Abicht K et al. Multicenter evaluation of new GGT and ALP reagents with new reference standardization and determination of 37 °C reference intervals. Clin Chem Lab Med 2001; 39 (Suppl.): S 346 [abstract].
- Thomas L, Müller M, Schumann G, Weidemann G et al. Consensus of DGKL and VDGH for interim reference intervals on enzymes in serum. J Lab Med 2005;29:301-308.
- Soldin JS, Brugnara C., Wong CE. In: MJ Hicks, editor. Pediatric reference intervals. 6th ed. Washington: AACC Press, 2007. p. 11.
- Bakker AJ, Mücke M. Gammopathy interference in clinical chemistry assays: mechanisms, detection and prevention. ClinChemLabMed 2007;45(9):1240-1243.

Manufacturer

DiaSystem Scandinavia AB Datorgatan 3, Sweden – 561 33 Jönköping Phone +46 36 126220 • Fax +46 36 187730 info@diasystem.se • www.diasystem.se

