# LDH SYSTEM PACK

(L-> P KINETIC METHOD)

B Auto 200, Unicorn 230, Unicorn 120 & Bonavera Chem 200, Beaconic chem 200, Beaconic B200, Beaconic analyzer 120, Bonavera chem 100 (Fully Auto Biochemistry Analyzer)

Code	Product Name	Pack Size
BA224	LDH System Pack	1x40 + 1x8 ml

#### INTENDED USE

Diagnostic reagent for quantitative *in vitro* determination of LDH in human serum.

#### **CLINICAL SIGNIFICANCE**

Increased levels of LDH are associated with myocardial infarction. Levels reach a maximum approximately 48 hours after the onset of pain and persist about ten days. The degree of elevation is of value in assessing the extent of damage and in developing a prognosis. LDH elevations are also observed in liver disease, pernicious anemia, in some cases of renal disease, and in some cases of skeletal muscle trauma.

#### **PRINCIPLE**

L-Lactate + NAD<sup>+</sup> → Pyruvate + NADH + H<sup>+</sup>

Lactate dehydrogenase catalyzes the oxidation of lactate to pyruvate with simultaneous reduction of NAD to NADH. The rate of NAD reduction can be measured as an increase in absorbance at 340 nm. This rate is directly proportional to LDH activity in serum.

## REAGENT COMPOSITION

Reagent 1: LDH Buffer Reagent

Buffer >25 mmol/l L-Lactate <100 mmol/l

Reagent 2 : LDH Starter Reagent NAD <15 mmol/l

#### REAGENT PREPARATION

Ready to use

### STABILITY AND STORAGE

The unopened reagents are stable till the expiry date stated on the bottle and kit label when stored at  $+2-+8^{\circ}C$ .

On board stability: Min. 21 days f refrigerated (+8-+14°) and not contaminated.

# SPECIMEN COLLECTION AND HANDLING

 $Use \, unhemolytic \, serum. \,$ 

It is recommended to follow NCCLS procedures (or similar standardized conditions).



Loss of activity:

within 24 hours at +15-+25°C <2% within 3 days at +2-+8°C <8% Stability at least 6 weeks at -20°C. Discard contaminated specimens.

#### **CALIBRATION**

Calibration with the Beacon Multicalibrator is recommended.

#### **QUALITY CONTROL**

It's recommended to run normal and abnormal control sera to validate reagent performance.

#### **EXPECTED VALUES**

At 37°C: Male - 80 - 285 U/L

Female - 103 - 227 U/L

It is recommended that each laboratory verify this range or derives reference interval for the population it serves.

#### **PERFORMANCE DATA**

Data contained within this section is representative of performance on Beacon system.

Data obtained in your laboratory may differ from these values.

Limit of quantification:7 U/LLinearity:1200 U/LMeasuring range:7 - 1200 U/L

## PRECISION

Intra-assay precision Within run (n=20)	Mean (U/L)	SD (U/L)	CV (%)
Sample 1	228	4.48	1.97
Sample 2	470	4.96	1.06
Inter-assay precision Run to run (n=20)	Mean (U/L)	SD (U/L)	CV (%)
Sample 1	251	1.10	0.44

#### COMPARISON

A comparison between LDH System Pack (y) and commercially available test (x) using 20 samples gave following results:

y=1.0027 x - 1.7002 U/L

r = 0.999

## INTERFERENCES

Following substances do not interfere:

Bilirubin up to 20 mg/dl, triglycerides up to 500 mg/dl, haemoglobin up to 5.0 g/l. Significant hemolysis may increase LDH concentration because of high levels of LDH in the erythrocytes.

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#### WARNING AND PRECAUTIONS

For in vitro diagnostic use. To be handles by entitled and professionally educated person. MSDS will be provided on request.

## WASTE MANAGEMENT

Please refer to local legal requirements.

B Auto 200, Unicorn 230, Unicorn 120 & Bonavera Chem 200, Beaconic chem 200, Beaconic B200, Beaconic analyzer 120, Bonavera chem 100 (Fully Auto Biochemistry Analyzer)

Test Name	LDH
Full Name	LDH
Pri Wave	340 nm
Sec Wave	630 nm
Assay/point	Kinetic
Start	20
End	30
Decimal	1
Unit	U/L
Linearity Range Low	7
Linearity Range High	1200
Sample Volume	3 μΙ
Reagent 1 (R1) Volume	150 μΙ
Reagent 2 (R2) Volume	30 μΙ
Subsatrate Depleted	-
Linearity	1200 U/L
Out Of Linearity Range	-
Calibration Type	2 Point linear
Points	2
Blank Type	Reagent
Concentration Blank	0.00
Concentration Std	Refer calibrator value sheet

The program is made as per the in house testing, it can be modified as per requirements.

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

## REFERENCES

- 1. Searcy, R L., Diagnostic Biochemistry, McGraw-Hil, New york, NY, 1969.
- 2. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. Burtis, C.A, Ashwood, E-R., Bruns, D.E.; 5th edition, WB Saunders Comp., 2012.
- 3. Henry, RIJ., Chiamori N., Golub O.J., And Berkman S., Am. J. Ciin. Path. 34(341)
- 4. Lum, G., Gambino, S.R., Am.J.Clin.Pathal. 61(108), 1974.
- 5. Bergmeyer, HW., Methods of Enzymatic Analymatic Analysis, Ed.2, Verlog Chemie, 1965.
- 6. Young DS, Effects of Drugs on Clirical Laboratory Tests. Third Edition. 1990;3:221-4.

## Symbols Used On Labels

Catalogue REF Number



Manufacturer





Lot Number



Content



Storage Temperature



**Expiry Date** 



In Vitro Diagnostics

BEA/24/LDH/SB/IFU Ver-03 05/10/2024



