

# ANTI-CCP ANTIBODIES TEST KIT

Latex-Enhanced Immunoturbidimetric Method (LETIA)



<b>Product Codes:</b> 10007 / 11007 / 12007	<b>Reaction Type:</b> Fixed Time / Multi-Point Linear Spline
<b>Pack Sizes:</b> 10 ml / 20 ml / 40 ml	<b>Matrix Target:</b> Human Serum
<b>Storage Temp:</b> 2–8°C (Do Not Freeze)	<b>Wavelength:</b> 546 nm   Reaction Slope: Increasing Optical Density

## INTENDED USE & CLINICAL SIGNIFICANCE

**Intended Use:** This diagnostic reagent is engineered for the direct, quantitative determination of Anti-Cyclic Citrullinated Peptide (CCP) Antibodies in human serum samples.

**Clinical Significance:** Rheumatoid arthritis (RA) is a chronic autoimmune condition affecting roughly 1% of the population. Classical rheumatoid factor (RF) tracking features high sensitivity but restricted diagnostic specificity, occasionally appearing in non-RA syndromes and normal aging cohorts. Anti-CCP antibodies display excellent diagnostic specificity for RA. They manifest remarkably early in the clinical timeline, appearing in 70% of confirmed RA cohorts while remaining completely absent in 98% of healthy control panels. Synchronized screening of RF and Anti-CCP delivers profound diagnostic accuracy, providing predictive screening before joint-erosion symptoms appear.

## METHOD PRINCIPLE

This kit adopts an advanced latex-enhanced immunoassay system. Homogeneous polystyrene particles are chemically coated with highly purified synthetic cyclic citrullinated peptides. When patient serum containing specific anti-CCP antibodies is introduced, an antigen-antibody immunoturbidimetric cross-linking reaction takes place:

Anti-CCP Antibodies + Latex-Bound Citrullinated Peptides → Immuno-Agglutination Matrix

The creation of this macro-immunological grid yields a distinct increase in optical absorbance at 546 nm, which scales directly with the absolute concentration of Anti-CCP antibodies in the sample.

## STEP 1: REAGENT CONFIGURATION & PIPETTING BASELINE

**Critical Interference Restriction:** Utilize strictly non-hemolyzed, fresh serum matrices. Samples displaying severe lipidemia, gross hemolysis, visible chylomicron turbidity, or deep jaundice must be rejected to prevent optical tracking distortions.

Reagent / Component Line	Calibrator Track	Patient Test Track
<b>R1 - Buffer Reagent Matrix</b>	400 µl	400 µl

Reagent / Component Line	Calibrator Track	Patient Test Track
Patient Serum Vector / Calibrator	07 µl	07 µl
Mix smoothly and incubate on-board. Then add:		
R2 - Purified Latex Suspension	100 µl	100 µl

**Operational Directive:** Mix properly. Record initial absorbance exactly 10 seconds post-addition of R2 ( $A_1$ ). Measure secondary absorbance exactly 300 seconds later ( $A_2$ ) at 37°C. Compute the change in optical density ( $\Delta A = A_2 - A_1$ ).

## STEP 2: CALCULATIONS & DATA TRACKING

$$\text{Anti-CCP Activity (U/ml)} = [\Delta A \text{ of Sample} / \Delta A \text{ of Calibrator}] \times \text{Calibrator Unit Value}$$

## TECHNICAL PARAMETERS & DIAGNOSTIC SUPPORT LIMITS

<b>Expected Threshold</b>	<b>Normal healthy limits:</b> < 35 U/ml. Certain highly sensitive instruments may register slightly negative or suppressed absorbances for specific negative samples; report these as negative configurations.
<b>Linearity Range Barrier</b>	Completely valid and linear up to <b>200 U/mL</b> .
<b>Curve Stability</b>	The multi-point linear spline curve remains fully stable for 14 days. Re-calibrate settings if control outputs shift or major instrument part replacement occurs.
<b>Quality Control</b>	Process certified normal and pathologically elevated control matrices in every analytical run. Prevent baseline contamination and preserve surfactant matrix selectivity by deploying separate micro-pipette tips for all parameters.

**Manufactured by: M/s. SAWIN BIOMEDICALS PVT. LTD.**

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