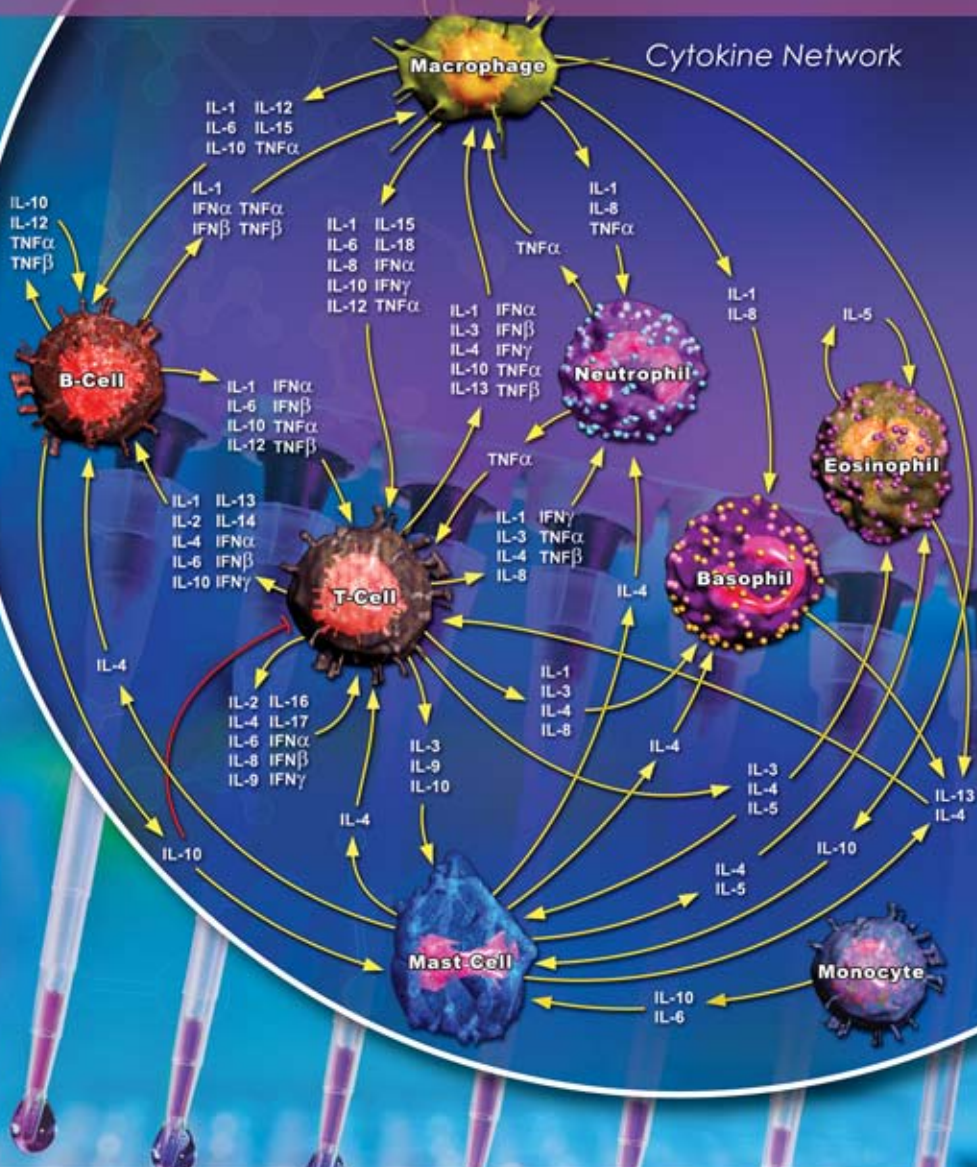


Human MIF (Macrophage migration inhibitory factor) Pre-Coated ELISA Kit



USER MANUAL

abeomics
www.abeomics.com

Human MIF

(Macrophage migration inhibitory factor)

Pre-Coated ELISA Kit

Catalog No: 90-2010

1 × 96 well Format (96 tests)

Detection Range: 0.781 – 50 ng/ml

Sensitivity: < 0.469 ng/ml

This immunoassay kit allows for the in vitro quantitative determination of Human MIF concentrations in serum, plasma and other biological fluids.

This kit is for Research Use Only. Not for use in diagnostic/therapeutics procedures.

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I. BACKGROUND

Human Macrophage migration inhibitory factor (MIF) is a pro inflammatory cytokine having pleiotropic biologic properties in immunology and oncology. It is constitutively expressed in both immune and non-immune cells, and its tissue distribution is almost ubiquitous. Preformed MIF is stored in cytoplasmic pools of macrophages, T-cells, and many other cells within the body, including the hypothalamic-pituitary-adrenal axis, allowing for rapid release upon stimulation without de novo synthesis. MIF promotes the production of other pro inflammatory mediators, such as TNF-alpha, nitric oxide, and prostaglandin E2. One of its most striking properties is the ability to override the immunosuppressive effects of glucocorticoids (GCs). It has been shown to promote leukocyte-endothelial cell interactions, although whether this occurs via an effect on endothelial cell function remains unclear. MIF also contributes to the maintenance of the inflammatory processes by inhibiting p53-dependent cell death and stimulating the survival of monocytes and macrophages. In addition to this anti-apoptotic activity, MIF exhibits pro-proliferative properties by activating ERK1/ERK2 signaling.

MIF has been shown to play seminal roles in several chronic inflammatory diseases, including diabetes mellitus, multiple sclerosis, systemic lupus erythematosus, rheumatoid arthritis, and atherosclerosis. MIF expression levels are elevated within the tumor tissue and/or in the serum in a number of malignancies not limited to those arising from the lung, stomach, colon, ovary and liver, and SCC (Squamous Cell Carcinoma) of esophageal and head and neck origin. This increased expression of MIF has been correlated with a negative prognosis in most of these malignancies.

II. OVERVIEW

This assay employs an antibody specific for Anti-human MIF coated on a 96-well plate. Standards and samples are pipetted into the wells and MIF present in a sample is bound to the wells by the immobilized antibody. The wells are washed and biotinylated anti-Human MIF antibody is added. After washing away unbound biotinylated antibody, HRP-conjugated streptavidin is pipetted to the wells. The wells are again washed, a TMB substrate solution is added to the wells and color develops in proportion to the amount of MIF bound. The Stop Solution changes the color from blue to yellow, and the intensity of the color is measured at 450 nm.

III. ADVANTAGES

Multiple samples can be analyzed in a low volume, high-throughput format. Full analysis can be complete in 2 hours.

IV. STORAGE

Kit can be stored in 4°C, if you are using within a week.

If you are using within 6 months, lyophilized standard can be stored in -20°C and other components at 4°C.

Kit Components

Item	Specifications	Storage
96 well Strip ELISA Plate	8 X 12 well	4°C
Lyophilized Standard	2 vials	-20°C
Sample and Standard Dilution Buffer	20 ml	4°C
Biotinylated Detection Antibody for hMIF	120 µl	4°C
Antibody Dilution Buffer	10 ml	4°C
HRP Conjugated Streptavidin	120 µl	4°C
Streptavidin Dilution Buffer	10 ml	4°C
TMB Substrate	10 ml	4°C
Stop Solution	10 ml	4°C
25X Wash Buffer	30 ml	4°C
Plate Sealer	5 pieces	
Product Manual	1	

Material Required, (Not Supplied)

Microplate Reader

37°C Incubator

Plate Reader

Multi Chanel Pipette and disposable tips

Eppendorf Tubes

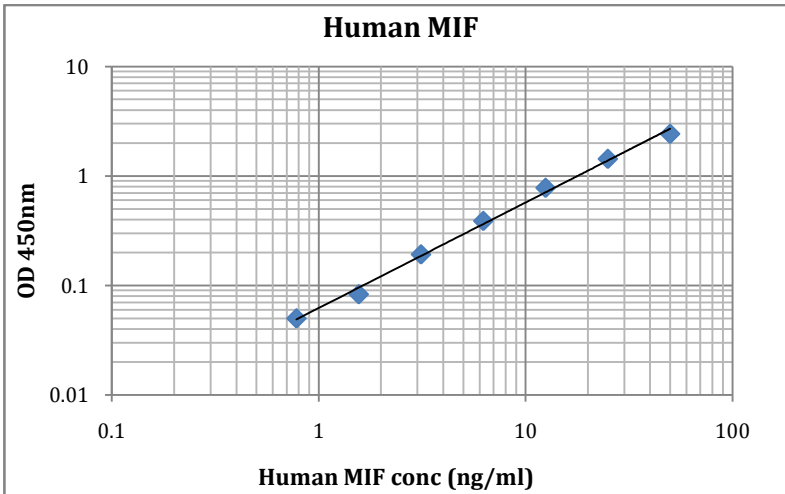
Deionized Water

V. PRECAUTIONS FOR USE

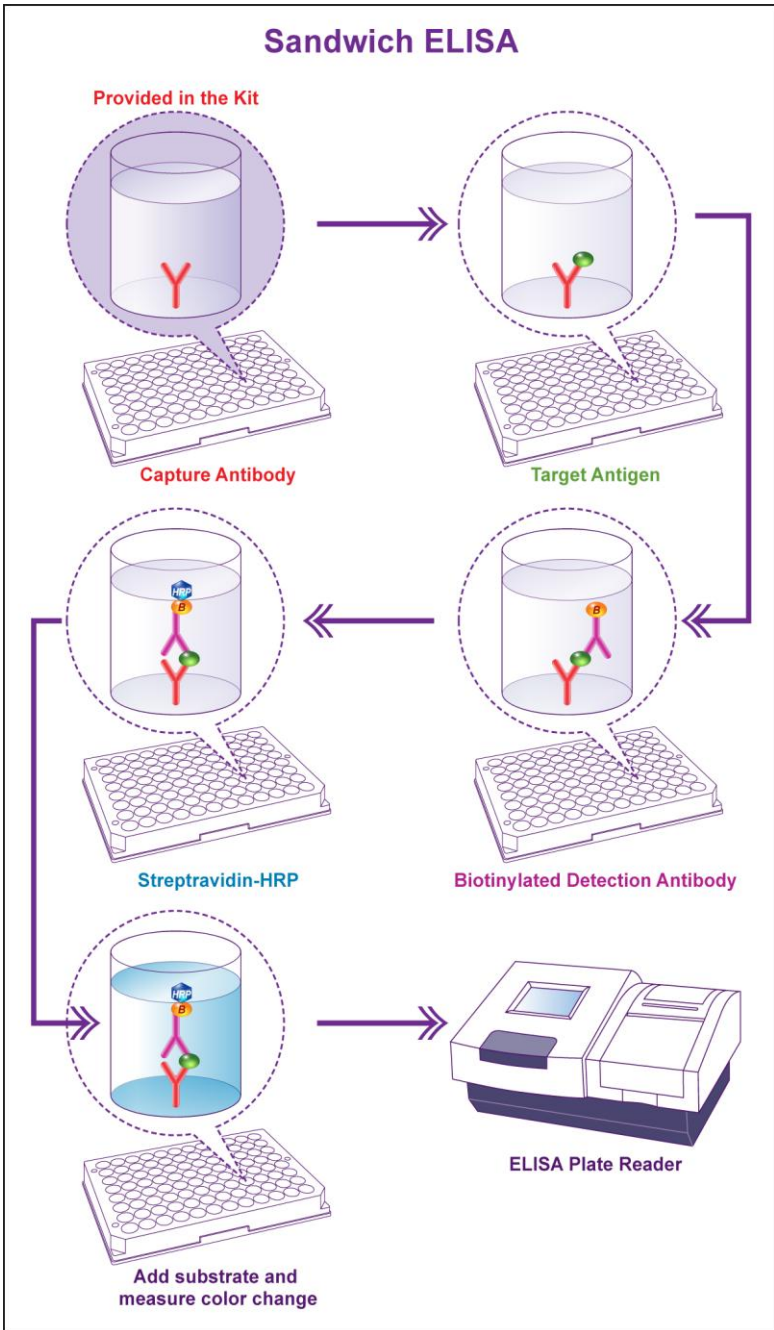
1. To inspect the validity of experiment operation and the appropriateness of sample dilution proportion, pilot experiment using standards and a small number of samples is recommended.
2. After opening and before using, keep plate dry.
3. Before using the Kit, spin tubes and bring down all components to the bottom of tubes.
4. Storage TMB reagents avoid light.
5. Washing process is very important, not fully wash easily cause a false positive.
6. Duplicate well assay is recommended for both standard and sample testing.
7. Don't let Micro plate dry at the assay, for dry plate will inactivate active components on plate.
8. Don't reuse tips and tubes to avoid cross contamination.
9. Avoid using the reagents from different batches together.

VI. STANDARD CURVE

Human MIF Standard Curve is shown below.



X	ng/ml	50	25	12.5	6.25	3.13	1.56	0.781	0
Y	O.D.450	2.472	1.482	0.829	0.439	0.243	0.134	0.101	0.051



VII. REAGENT PREPARATION AND STORAGE

Included buffers and reagents are optimized for use with this kit. Substitution with other reagents is not recommended and may not give optimal results.

1. Prepare Standard Curve: One hour before the experiment.

- a. Quick spin down one vial of lyophilized standard. (**DO NOT dilute standard directly on the plate**). Add 1ml of sample/standard dilution buffer into one of the standard tube. Incubate at room temp. for 10 min. Mix thoroughly by vortex. Stock Standard concentration is 50 ng/ml.
- b. Label 6 eppendorf tubes with 25 ng/ml, 12.5 ng/ml, 6.25 ng/ml, 3.125 ng/ml, 1.563 ng/ml, 0.781 ng/ml respectively. Add 0.3 ml of sample/standard dilution buffer into each tube. Add 0.3 ml of stock standard (50 ng/ml) into 1st tube and mix thoroughly. Transfer 0.3 ml from 1st tube to 2nd tube and mix thoroughly. Transfer 0.3 ml from 2nd tube to 3rd tube mix thoroughly, and so on.

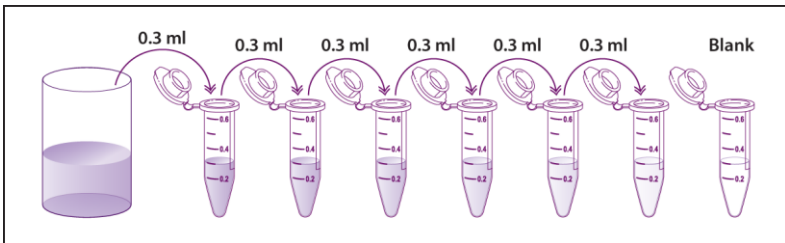


Fig-1: Dilution tubes

Note: Standard Solutions are best used within 2 hrs. Standard solution should be stored at 4°C for up to 12 hrs. or store at -20°C for up to 48 hrs. Avoid repeated freeze-thaw.

2. **Sample Preparation and storage:** Test samples should be collected, analyze immediately (within 2 hrs.) or aliquot and store at -20°C for long term. Avoid multiple freeze-thaw cycles.
 - a. **Cell culture supernatants:** Centrifuge to remove precipitate, analyze immediately or aliquot and store at -20°C.
 - b. **Serum:** Coagulate the serum at room temp about 1 hr. Centrifuge approximately 1000 × g for 15 min. Analyze serum immediately or aliquot and store at -20°C.

- c. **Plasma:** Collect plasma with heparin or EDTA as the anti-coagulant. Centrifuge for 15 min at 2-8°C at 1500 × g within 30 min of collection. For eliminating the platelet effect, suggesting that further centrifugation for 10 min at 2-8°C at 10,000 × g. Analyze immediately or aliquot and store frozen at -20°C.
- d. **Tissue Homogenates:** For general information, hemolytic blood may affect the results, you should rinse the tissues with ice cold PBS (0.01M, pH 7.4) to remove excess blood thoroughly. Tissue pieces should be weighed and then minced to small pieces. This will be homogenized in PBS in a cold glass homogenizer. (*Volume depends on the weight of the tissue, 1gram of tissue requires 9 ml of ice cold PBS with protease inhibitor*). To further break the cells, you can sonicate the suspension with an ultrasonic cell disrupter or subject it to freeze- thaw cycle. Homogenates are then centrifuged for 5 min. at 5000 × g to get the supernatant.

Note: *Samples to be used within 5 days may be store at 4°C, otherwise sample should be stored at -20°C (< 1 month) or -80°C (< 2 months) to avoid loss of bioactivity and contamination. Hemolyzed samples are not suitable for use in this Assay.*

- e. End user should estimate the concentration of the target protein in the test samples first, then select proper dilution factor to make the diluted target protein concentration falls the optimal detection range of the kit. Dilute the samples with the provided dilution buffer. Several trials may be necessary in practice. The test sample should be well mixed with the dilution buffer. Standard curve and sample should be made before the experiment.

High target protein concentration 10-100 ng/ml: Dilute 1:100 (add 1 µl of sample into 99 µl of sample/standard dilution buffer).

Medium target protein concentration 1-10 ng/ml: Dilute 1:10 (add 10 µl of sample into 90 µl of sample/standard dilution buffer).

Low target protein concentration 15.6-1000 pg/ml: Dilute 1:2 (add 50 µl of sample into 50 µl of sample/standard dilution buffer).

Very low target protein concentration < 15.6 pg/ml: Do not dilute, use 100 µl of sample.

- 3. Preparation of Biotin detection antibody working solution:** Prepare within one hour before the experiment. Calculate total volume working solution required. (0.1 ml/ well × number of wells. Add 100-200 µl extra).

Dilute Biotin detection antibody with antibody dilution buffer at 1:100 and mix thoroughly. (*i.e.* add 1 µl of Biotin conjugated detection antibody into 99 µl of antibody dilution buffer).

- 4. Preparation of HRP-Streptavidin Conjugate (SABC) working solution:** Prepare within 30 min before the experiment. Calculate total volume working solution required. (0.1 ml/well × number of wells. Add 100- 200 µl extra).

Dilute SABC with SABC dilution buffer at 1:100 and mix thoroughly. (*i.e.* add 1 µl of SABC into 99 µl of SABC dilution buffer).

- 5. Preparation of 1 X Wash buffer:** Prepare 1 X Wash buffer by diluting 25X Wash buffer in sterile water. Diluted Wash buffer may be stored at 4°C, however we recommend preparing fresh 1X wash buffer for each experiment.

For example: 10 ml of 25X Wash buffer in 240 ml of sterile water.

VIII. ASSAY PROCEDURE

Before starting the experiment, equilibrate the SABC working solution and TMB substrate for at least 30 min at room temp. When diluting samples and reagents, they should be mixed completely and evenly. It is recommended to plot a standard curve for each test.

** If not all microplate strips will be used, remove the excess strips by pressing up from underneath each strip. Place excess strips back in the foil pouch with the included desiccant pack and reseal.*

1. Set standard, test sample and blank (control zero) wells on the pre-coated plate and then record their position. It is recommended to measure each standard and sample in duplicate. **Note:** Wash plate twice before adding standard, sample and blank into the well.

2. Add 0.1 ml of standard (1000 pg/ml, 500 pg/ml, 250 pg/ml, 125 pg/ml, 62.5 pg/ml, 31.2 pg/ml, 15.6 pg/ml, control zero dilution buffer) into standard well.
3. Add 0.1 ml of diluted samples into test sample wells.
4. Seal plate with a cover and incubate at 37°C for 90 min.
5. Remove the cover and discard samples and standard solution by tapping plate on an absorbent paper. **Note:** *DO NOT let the wells completely dry any time. DO NOT wash plate.*
6. Add 0.1 ml of Biotin-detection antibody working solution into the above wells (Standards, control zero and samples).
7. Seal plate with cover and incubate at 37°C for 60 min.
8. Remove the cover, and wash plate 3 times with 1X wash buffer.
9. Add 0.1 ml of SABC working solution into each well. Cover the plate and incubate at 37°C for 30 min.
10. Remove the cover and wash plate 5 times with 1X wash buffer. Each time let the wash buffer stay in the well for 1-2 min.
11. Add 90 µl of TMB substrate into each well, cover the plate and incubate at 37°C in dark within 15-30 min. (**Note:** *This incubation time is for reference use only. The optimal time should be determined by end user*). The shades of blue can be seen in the first 3-4 wells, only on most concentrated standards. Other wells show no obvious color.
12. Add 50 µl of stop solution into each well and mix thoroughly. Color will change into yellow immediately.
13. Read O.D. absorbance at 450 nm in a micro-plate reader immediately after adding the stop solution.
14. Calculation: Relative O.D. 450 = O.D. for each well – O.D. 450 control zero well. The Standard curve can be plotted as the relative O.D. 450 of each standard solution in Y axis vs. the respective concentration of the standard in X axis. Concentration of the samples can be incorporated from the standard curve. If the samples were diluted, multiply the dilution factor to the concentration.

Table-1

	Standard 1	Standard 2	3	4	5	6	7	8	9	10	11	12
A	50 ng/ml	50 ng/ml										
B	25 ng/ml	25 ng/ml										
C	12.5 ng/ml	12.5 ng/ml										
D	6.25 ng/ml	6.25 ng/ml										
E	3.125 ng/ml	3.125 ng/ml										
F	1.562 ng/ml	1.562 ng/ml										
G	0.781 ng/ml	0.781 ng/ml										
H	0	0										

IX. REFERENCES

1. Human anti-macrophage migration inhibitory factor antibodies inhibit growth of human prostate cancer cells in vitro and in vivo.
PMID: 2361930
2. Neutralization of macrophage migration inhibitory factor (MIF) by fully human antibodies correlates with their specificity for the β -sheet structure of MIF.
PMID: 22238348
3. MIF antagonist (CPSI-1306) protects against UVB-induced squamous cell carcinoma.
PMID: 24850900
4. The role of MIF in type 1 and type 2 diabetes mellitus.
PMID: 24527464

X. TROUBLE SHOOTING

Problem	Probable Cause	Suggestion
No signal	Forgot to add all components.	Prepare check list and add the components in the correct order.
Low signal	Not enough lysates per well.	Check the protein concentration. Add more lysates.
High background	Washing is not sufficient.	Wash plates thoroughly after incubation with Streptavidin-HRP secondary



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