



INTENDED USE

ichroma™ HbA1c is a fluorescence Immunoassay (FIA) for the quantitative determination of HbA1c(Hemoglobin A1c) in human whole blood. It is useful as an aid in management and monitoring of the long-term glycemic status in patients with diabetes mellitus.
For *in vitro* diagnostic use only.

INTRODUCTION

Glycated protein is formed post-translationally through the slow, nonenzymatic reaction between glucose and amino groups on proteins. HbA1c is a clinically useful index of mean glycemia during the preceding 120 days, the average life span of erythrocytes. Carefully controlled studies have documented a close relationship between the concentrations of HbA1c and mean glycemia. HbA1c is considered as a more reliable parameter in monitoring glycemia over the glycemic reading with the conventional glucometer.

PRINCIPLE

The test uses a sandwich immunodetection method; the detector antibody in buffer binds to antigen in sample, forming antigen-antibody complexes, and migrates onto nitrocellulose matrix to be captured by the other immobilized-antibody on test strip. The more antigen in sample forms the more antigen-antibody complex and leads to stronger intensity of fluorescence signal on detector antibody. Instrument for ichroma™ tests displays the content of glycated hemoglobin in terms of percent of the total hemoglobin in blood.

COMPONENTS

ichroma™ HbA1c consists of ‘Cartridges’, ‘Detection Buffer Tubes’, ‘Hemolysis Buffer Vial’ and an ‘ID chip’.

- The cartridge contains a test strip, the membrane which has anti human HbA1c at the test line, while rabbit IgG at the control line.
- Each cartridge is individually sealed in an aluminum foil pouch containing a desiccant. 25 sealed cartridges are packed in a box which also contains an ID chip.
- The detection buffer contains anti human HbA1c-fluorescence conjugate, anti rabbit IgG-fluorescence conjugate, bovine serum albumin (BSA) as a stabilizer and sodium azide in phosphate buffered saline (PBS) as a preservative.
- The detection buffer is pre-dispensed in a separate tube.
- The hemolysis Buffer contains nonionic detergent and sodium azide as preservative in PBS.
- 25 detection buffer tubes and hemolysis buffer vial are packaged in a box and further packed in a Styrofoam box with ice-pack for the shipment.

WARNINGS AND PRECAUTIONS

- For *in vitro* diagnostic use only.
- Carefully follow the instructions and procedures described in this ‘Instruction for use’.
- It is recommended to use fresh samples.
- It is possible to use frozen samples. Please refer to “SAMPLE COLLECTION AND PROCESSING”.
- Do not expose ichroma™ HbA1c test kit to direct sunlight.
- Lot numbers of all the test components (cartridge, ID chip, detection buffer and hemolysis buffer) must match each other.
- Do not interchange the test components between different lots or use the test components after the expiration date, either of which might yield misleading of test result(s).
- Do not reuse. A detection buffer tube should be used for processing one sample only. So should a cartridge.
- The cartridge should remain sealed in its original pouch before use. Do not use the cartridge, if it is damaged or already opened.
- Frozen sample should be thawed only once. For shipping, samples must be packed in accordance with the regulations. HbA1c sample with severe hemolytic and hyperlipidemia cannot

- be used and should be recollected.
- Just before use, allow the cartridge, detection buffer and sample to be at room temperature about 30 minutes.
- ichroma™ HbA1c** as well as the instrument for ichroma™ tests should be used away from vibration and/or magnetic field. During normal usage, it can be noted that instrument for ichroma™ tests may produce minor vibration.
- Used detection buffer tubes, pipette tips and cartridges should be handled carefully and discarded by an appropriate method in accordance with relevant local regulations.
- The mixture of Detection Buffer and Hemolysis buffer must be used within 1 hour after mixing.
- An exposure to larger quantities of sodium azide may cause certain health issues like convulsions, low blood pressure and heart rate, loss of consciousness, lung injury and respiratory failure.
- ichroma™ HbA1c** will provide accurate and reliable results subject to the following conditions.
 - ichroma™ HbA1c** should be used only in conjunction with instrument for ichroma™ tests.
 - Any anticoagulants other than EDTA, sodium heparin, sodium citrate should be avoided.

STORAGE AND STABILITY

- The cartridge is stable for 20 months (while sealed in an aluminum foil pouch) if stored at 4-30 °C.
- The detection buffer pre-dispensed in a tube is stable for 20 months if stored at 2-8 °C.
- The hemolysis buffer dispensed in a vial is stable for 20 months if stored at 4-30 °C.
- After the cartridge pouch is opened, the test should be performed immediately.

LIMITATIONS OF THE TEST SYSTEM

- The test may yield false positive result(s) due to the cross-reactions and/or non-specific adhesion of certain sample components to the capture/detector antibodies.
- The test may yield false negative result. The non-responsiveness of the antigen to the antibodies is most common where the epitope is masked by some unknown components, so as not to be detected or captured by the antibodies. The instability or degradation of the antigen with time and/or temperature may cause the false negative as it makes antigen unrecognizable by the antibodies.
- Other factors may interfere with the test and cause erroneous results, such as technical/procedural errors, degradation of the test components/reagents or presence of interfering substances in the test samples.
- Any clinical diagnosis based on the test result must be supported by a comprehensive judgment of the concerned physician including clinical symptoms and other relevant test results.
- The test environment conditions for **ichroma™ HbA1c** are as follow.
 - Temperature: 20-30 °C
 - Humidity: 10-70 %
 - i-chamber target temperature: 30 °C

MATERIALS SUPPLIED

REF CFPC-38	Components of ichroma™ HbA1c	
	Cartridge Box:	
	- Cartridges	25
	- ID Chip	1
	- Instruction For Use	1
	Detection Buffer Box	
	- Detection Buffer Tubes	25
	- Hemolysis Buffer Vial (3 mL)	1

MATERIALS REQUIRED BUT SUPPLIED ON DEMAND

- Following items can be purchased separately from **ichroma™ HbA1c**. Please contact our sales division for more information.
- Instrument for ichroma™ tests
 - ichroma™ Reader** REF FR203
 - ichroma™ II** REF FPRR021
 - ichroma™ D** REF 13303
 - i-Chamber** REF FPRR009

- ichroma™ Printer** REF FPRR007
- Boditech HbA1c Control** REF CFPO-96
- Boditech HbA1c Calibrator** REF CFPO-108
- 5 µL Capillary tube** REF CFPO-19

SAMPLE COLLECTION AND PROCESSING

- The sample type for **ichroma™ HbA1c** is human whole blood.
- It is recommended to test the sample within 12 hours after collection.
 - Samples may be stored for up to a week at 2-8 °C prior to being tested.
 - If testing will be delayed more than a week, samples should be frozen at -70 °C or below. Samples stored frozen at -70 °C or below for 3 months showed no performance difference.
 - Once the sample was frozen, it should be used one time only for test, because repeated freezing and thawing can result in erroneous results.

TEST SETUP

- Check the components of the **ichroma™ HbA1c** as described below. : Cartridge, ID chip, instruction for use, detection buffer tube and hemolysis buffer vial.
- Ensure that the lot number of the test cartridge matches that of ID chip, detection buffer as well as hemolysis buffer.
- Keep the sealed cartridge (if stored in refrigerator), detection buffer and hemolysis buffer at room temperature for at least 30 minutes just prior to the test. Place the cartridge on a clean, dust-free and flat surface.
- Turn on the instrument for ichroma™ test.
- Insert the ID chip into the “ID chip port”.
- Press the ‘Select’ button on the instrument for ichroma™ test. (Please refer to the ‘Instrument for ichroma™ tests Operation manual’ for complete information and operating instructions.)
- Insert a cartridge into i-Chamber slot. Temperature of i-chamber should be 30 °C.

TEST PROCEDURE

- Draw 100 µL of hemolysis buffer and transfer it into detection buffer tube.
- Draw 5 µL of fingertip blood or tube blood using 5 µL capillary tube and put the capillary tube into the detection buffer tube. Close the lid of the detection buffer tube and mix the sample thoroughly by shaking it about 15 times.
- Take out the cartridge half from i-Chamber slot.
- Pipette out 75 µL of the sample mixture and load it into a sample well in the test cartridge.
- Wait till the sample mixture flow appears in the windows. (about 10 seconds)
- Insert the cartridge into i-Chamber slot (30 °C).
- Leave the cartridge in i-Chamber for 12 minutes before removing.
- Scan the sample-loaded cartridge immediately when the incubation time is over. If not, it will cause inexact test result.*
- To scan the sample-loaded cartridge, insert it into the cartridge holder of the instrument for ichroma™ tests. Ensure proper orientation of the cartridge before pushing it all the way inside the cartridge holder. An arrow has marked on the cartridge especially for this purpose.
- Press ‘Select’ button on the instrument for ichroma™ tests to start the scanning process.
- Instrument for ichroma™ tests will start scanning the sample-loaded cartridge immediately.
- Read the test result on the display screen of the instrument for ichroma™ tests.

INTERPRETATION OF TEST RESULT

- Instrument for ichroma™ tests calculates the test result automatically and displays HbA1c concentration of the test sample in terms of % (NGSP), mmol/mol (IFCC), mg/dL (eAG).
- The cut-off (reference range)
 - NGSP (%): 4.5-6.5 %
 - IFCC (mmol/mol): 26-48 mmol/mol
- Working range
 - NGSP (%): 4-15 %
 - IFCC (mmol/mol): 20.2-140.4 mmol/mol
 - eAG (mg/dL): 68.1-383.8 mg/dL

QUALITY CONTROL

- Quality control tests are a part of the good testing practice to confirm the expected results and validity of the assay and should

- be performed at regular intervals.
- The control tests should be performed immediately after opening a new test lot to ensure the test performance is not altered.
- Quality control tests should also be performed whenever there is any question concerning the validity of the test results.
- Control materials are not provided with **ichroma™ HbA1c**. For more information regarding obtaining the control materials, contact **Boditech Med Inc.’s Sales Division for assistance**. (Please refer to the instruction for use of control material.)

PERFORMANCE CHARACTERISTICS

- Analytical Specificity**
 - Cross-reactivity
 - There was no significant cross-reactivity from these materials with the **ichroma™ HbA1c** test measurements.

Cross-reactivity material	Standard material conc.		
	5.2 %	6.5 %	10.5 %
HbA0 (20 mg/mL)	99.9	96.1	99.0
HbA1a,A1b (20 mg/mL)	100.9	96.8	101.0
Acetylated hemoglobin (100 mg/mL)	101.0	98.4	99.7
Carbamylated hemoglobin (100 mg/mL)	100.5	97.8	100.0
Glycated h-Albumin (100 mg/mL)	100.3	97.4	100.6
HbA1d (100 mg/mL)	100.9	97.0	100.3
Acetylaldehyde hemoglobin (100 mg/mL)	100.8	95.6	99.1

- Interference
- There was no significant interference from these materials with the **ichroma™ HbA1c** test measurements.

Interference material	Standard material conc.		
	5.2 %	6.5 %	10.5 %
Non-interference	101.0	96.2	98.7
Acetaminophen (20 mg/dL)	100.4	97.8	100.9
L-ascorbic acid (500 mg/dL)	101.0	97.8	99.8
Bilirubin (2 g/dL)	100.8	97.8	100.4
D-glucose (1,000 mg/dL)	100.9	97.6	99.8
Intralipid (800 U/L)	100.8	96.2	100.6
Triglyceride (327 M)	100.9	96.1	99.6
Urea (10 g/dL)	100.1	98.1	99.7

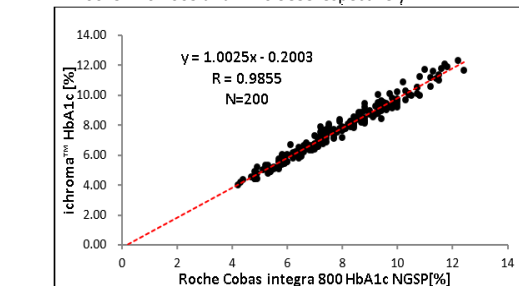
- Precision**
- The intra-assay precision was calculated by one evaluator, who tested different concentration of control standard five times each with three different lots of **ichroma™ HbA1c**.

HbA1c (%)	Lot 1	Lot 2	Lot 3	AVG	SD	CV (%)	Accuracy (%)
5.2	5.28	5.18	5.24	5.23	0.12	2.36	100.6
6.5	6.46	6.48	6.34	6.43	0.13	1.99	98.9
10.5	10.4	10.56	10.58	10.51	0.19	1.83	100.1

The inter-assay precision was confirmed by 3 different evaluators with 3 different lots, testing five times each different concentration.

HbA1c (%)	Between-person			Between-lot		
	AVG	SD	CV (%)	AVG	SD	CV (%)
5.2	5.19	0.03	0.61	5.23	0.05	0.96
6.5	6.51	0.02	0.36	6.43	0.07	1.12
10.5	10.50	0.01	0.10	10.51	0.10	0.92

- Comparability:**
- HbA1c concentrations of 200 clinical samples were quantified independently with **ichroma™ HbA1c** and Roche Cobas integra800 as per prescribed test procedures. Test results were compared and their comparability was investigated with linear regression and coefficient of correlation (R). Linear regression and coefficient of correlation between the two tests were Y=1.0025X - 0.2003 and R = 0.9855 respectively.



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Note: Please refer to the table below to identify various symbols.

	Sufficient for <n> tests
	Read instruction for use
	Use by Date
	Batch code
	Catalog number
	Caution
	Manufacturer
	Authorized representative of the European Community
	In vitro diagnostic medical device
	Temperature limit
	Do not reuse
	This product fulfills the requirements of the Directive 98/79/EC on in vitro diagnostic medical devices

For technical assistance; please contact:

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