RSR

**TECHNICAL INFORMATION** 

## ACETYLCHOLINE RECEPTOR (AChR) AUTOANTIBODY RIA KIT RiaRSR™ AChR Ab

Description:	Radioimmunoassay (RIA) kit for the determination of autoantibodies to acetylcholine receptor (AChR) in serum
Disease application:	Myasthenia Gravis (MG)
Assay method:	Controls, samples into tubes + <sup>125</sup> I AChR 2 hrs incubation 2 hrs incubation Add anti-human IgG 2 hrs incubation Add enhancer 2 x wash + 20 min centrifuge Aspirate + count
	Sample volume 5 µl per tube
Sensitivity:	100% n = 53 for Myasthenia Gravis patients
Specificity:	98% n = 112 for healthy blood donors
Calibrator range:	0.25 - 8 nmoles/L (In the case of using calibrators optionally)
Cut-off:	Negative: <0.5 nmoles/L; Positive: ≥0.5 nmoles/L
Lower detection limit:	0.02 nmoles/L (mean + 2 standard deviations in assay of negative control; $n = 20$ )
Advantages:	Easy assay format suitable for use in routine clinical laboratories, providing a specific and sensitive assay
Features:	Reliable and convenient method which detects autoantibodies to both foetal and adult AChR
Note:	For maintaining accuracy of assay results, RSR participates in the UK NEQAS (national external quality assessment service) scheme
Kit size:	25 tubes, 50 tubes, 100 tubes
Order code:	RBA/25, RBA/50, RBA/100
Literature:	Antibody to acetylcholine receptor in myasthenia gravis J. M. Lindstrom et al Neurology 1976 <b>26</b> : 1054-1059
	Acetylcholine receptor antibody as a diagnostic test for myasthenia gravis: results in 153 validated cases and 2967 diagnostic assays A. Vincent and J. Newsom-Davis J. Neurol. Neurosur. Psych. 1985 <b>48</b> : 1246-1252
	Frequency of anti-AChR $\epsilon$ subunit-specific antibodies in MG K. Ohta et al Autoimmunity 2003 <b>36</b> : 151-154
	Muscle-specific receptor tyrosine kinase autoantibodies – a new immunoprecipitation assay I. Matthews et al Clinica Chimica Acta 2004 <b>348</b> : 95-99

This kit is intended for in-vitro use by professional persons only. The data quoted is for guidance only. Each laboratory should establish its own normal and pathological reference ranges for the assay and should include its own panel of control samples in the assay along with the controls provided as part of the kit.

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