

Liquid Reagents – ready to use

# CREATININE

## mod. Jaffe

2 Reagents

*Diagnostic reagent for quantitative in vitro determination of creatinine in human serum, plasma or urine on photometric systems.*

Ref.No.	Kit Size	Content
DIA010082	5 x 25 ml	4x25 ml R1+1x25 ml R2
DIA010083	5 x 50 ml	4x50 ml R1+1x50 ml R2
DIA010084	5 x 100 ml	4x100 ml R1+1x100 ml R2

Additionally offered:

DIA060060	1 x 3 mL	<b>Creatinine STANDARD</b>
DIA040012	1 x 3 mL	<b>Diacal Auto</b> (Calibrator)
DIA030012	1 x 5 mL	<b>Diacon N</b> (Control Normal)
DIA030022	1 x 5 mL	<b>Diacon P</b> (Control Abnormal)
DIA030030	1 x 5 mL	<b>Diacon Urine Level 1</b> (Control Normal)
DIA030035	1 x 5 mL	<b>Diacon Urine Level 2</b> (Control Abnormal)

### TEST PARAMETERS

**Method:** Colorimetric, 2 Point Kinetic, "mod. Jaffe", Increasing reaction  
**Wavelength:** Hg 492 nm (490 nm - 510 nm)  
**Temperature:** 20°C-25°C / 37°C  
**Sample:** Serum, heparin plasma, urine  
**Linearity:** up to 15 mg/dL (1330 µmol/L)  
**Sensitivity:** Lower limit of detection: 0.2 mg/dL (17.7 µmol/L)

### SUMMARY [1,2]

Creatinine is a waste product excreted by the kidneys mainly by glomerular filtration. The concentration of creatinine in plasma of a healthy individual is fairly constant, independent from water intake, exercise and rate of urine production. Therefore, increased plasma creatinine values always indicate decreased excretion, i.e. impaired kidney function. The creatinine clearance enables a quite good estimation of the glomerular filtration rate (GFR) which allows better detection of kidney diseases and monitoring of renal function. For this purpose creatinine is measured simultaneously in serum and urine collected over a defined time period.

### TEST PRINCIPLE

Creatinine forms a coloured orange-red complex in an alkaline picrate solution. The difference in absorbance at fixed times during conversion is proportional to the concentration of creatinine in the sample.

### REAGENT COMPOSITION

COMPONENTS		CONCENTRATIONS	
R1:	Sodium Hydroxide	0.2	mol/L
R2:	Picric Acid	20	mmol/L

### REAGENT PREPARATION

#### Substrate Start

The reagents are ready to use.

#### Sample Start:

Mix 4 parts of R1 with 1 part of R2(= Working Reagent)

### REAGENT STABILITY AND STORAGE

**Conditions:** Protect from direct light. Close immediately after use. Do not freeze the reagents!  
**Stability:** at 2 – 25°C up to the expiration date  
**Sample Start (Working Reagent):**  
**Stability:** at 15 – 25 °C 5 hours

### SAMPLE PREPARATION

**Urine:** Dilute urine 1 + 49 with dist. water. Multiply result by 50. (The urine controls Diacon Urine must be prediluted in the same way as patient samples.)

### SAMPLE STABILITY AND STORAGE[5]

**serum/heparin plasma:** at 4 – 25°C 7 days  
at -20°C at least 3 months  
**urine:** at 20 – 25°C 2 days  
at 4 – 8°C 6 days  
at -20°C 6 months

Freeze only once. Discard contaminated specimens.

### STANDARD

(has to be ordered separately)  
**Concentration:** 2 mg/dL (177 µmol/L)  
**Storage:** 2 – 8°C  
**Stability:** up to the expiration date  
Close immediately after use!

### MATERIALS REQUIRED BUT NOT PROVIDED

NaCl solution (9 g/L)  
General laboratory equipment

### MANUAL TEST PROCEDURE

Bring reagents and samples to room temperature.

#### Substrate Start

Pipette into test tubes	Blank	Std./Cal.	Sample
<b>Reagent 1</b>	1000 µl	1000 µL	1000 µL
<b>Sample</b>	-	-	50 µL
<b>Std./Cal.</b>	-	50 µL	-
Mix. Incubate 0 - 5 min., then add:			
<b>Reagent 2</b>	250 µL	250 µL	250 µL
Mix. Incubate 1 min. and read A1 against reagent blank. Incubate for exactly 2 min. and read A2 against reagent blank. Calculate: $\Delta A = (A2 - A1)$ sample or standard			

#### Sample Start

Pipette into test tubes	Blank	Std./Cal.	Sample
<b>Working Reagent</b>	1000 µL	1000 µL	1000 µL
<b>Sample</b>	-	-	50 µL
<b>Std./Cal.</b>	-	50 µL	-
Mix. Incubate 1 min. and read A1 against reagent blank. Incubate for exactly 2 min. and read A2 against reagent blank. Calculate: $\Delta A = (A2 - A1)$ sample or standard			

### CALCULATION

#### Serum/Plasma:

$$\text{Creatinine [mg/dL]} = \frac{\Delta A \text{ Sample}}{\Delta A \text{ Std/Cal}} \times \text{Conc. Std/Cal [mg/dL]}$$

#### Urine:

$$\text{Creatinine [mg/dL]} = \frac{\Delta A \text{ Sample}}{\Delta A \text{ Std/Cal}} \times \text{Conc. Std/Cal [mg/dl]} \times 50$$

#### Creatinine Clearance [7]

$$[\text{mL/min}/1.73 \text{ m}^2] = \frac{\text{mg Creatinine}/100 \text{ ml Urine} \times \text{ml Urine (24 h)}}{\text{mg Creatinine}/100 \text{ ml Serum} \times 1440}$$

The calculated creatinine clearance refers to the average body surface of an adult (1.73 m<sup>2</sup>).

Estimated **Glomerular Filtration Rate** [mL/min/1.73 m<sup>2</sup>] according to MDRD (modification of diet in renal disease) using creatinine values obtained by a standardized method [6].

For serum creatinine (sCr) [mg/dL]:

$$\text{GFR} = 175 \times \text{sCr}^{-1.154} \times \text{age}^{-0.203} \times 1.212 \text{ (if Afro-American)} \times 0.742 \text{ (if female)}$$

For serum creatinine (sCr) [µmol/L]:

$$\text{GFR} = 30849 \times \text{sCr}^{-1.154} \times \text{age}^{-0.203} \times 1.212 \text{ (if Afro-American)} \times 0.742 \text{ (if female)}$$

### UNIT CONVERSION

$$\text{mg/dL} \times 88.4 = \mu\text{mol/L}$$

### COMPENSATED METHOD [3,4]

Picric acid which forms the coloured complex reacts unspecifically with interfering serum components, so-called pseudo-creatinines. This leads to falsely elevated creatinine values in serum and plasma samples especially in the low measuring range. To compensate these interferences the calibrator value for the compensated method indicated in the value sheet of Diacal Auto has to be used for calculation. Additionally 0.3 mg/dL (27 µmol/L) has to be subtracted from the calculated creatinine value. For use of the compensated method calibration with the calibrator Diacal Auto is strictly recommended. The method is applicable only for serum and plasma samples.



The compensated method is traceable to GC-IDMS and can therefore be used for estimation of the glomerular filtration rate using the MDRD formula as mentioned above [6].

#### REFERENCE RANGE\*

##### Serum / Plasma, not compensated:

Adults [1]	mg/dL	µmol/L
Women	0.6 – 1.1	53 – 97
Men	0.7 – 1.3	62 – 115
Children [2,8]		
Neonate	0.5 – 1.2	44 – 106
Infant	0.4 – 0.7	35 – 62
Child	0.5 – 1.2	44 – 106

##### Serum / Plasma, compensated:

Adults [3]	mg/dL	µmol/L
Women	0.5 – 0.9	44 – 80
Men	0.7 – 1.2	62 – 106
Children [9]		
Neonate	0.24 – 1.04	21 – 92
Infant	0.17 – 0.42	15 – 37
Child	0.24 – 0.87	21 – 77

##### 24h Urine [1]:

Women	11 – 20 mg/kg/24h	97 – 177 µmol/kg/24h
Men	14 – 26 mg/kg/24h	124 – 230 µmol/kg/24h

##### Creatinine clearance [2]:

Women	95 - 160 mL/min/1.73 m <sup>2</sup>
Men	98 - 156 mL/min/1.73 m <sup>2</sup>

\* Each laboratory should check if the reference ranges are transferable to its own patient population and determine own reference ranges if necessary.

#### PERFORMANCE CHARACTERISTICS

##### LINEARITY/MEASURING RANGE

The test has been developed to determine creatinine concentrations within a measuring range from 0.2 – 15 mg/dL (18 – 1330 µmol/L). Above this concentration, samples should be diluted 1 + 1 with NaCl solution (9 g/L in dist. water) and reassayed multiplying the result by 2.

##### SENSITIVITY/LIMIT OF DETECTION

The lower limit of detection is 0.2 mg/dL (17.7 µmol/L)

##### PRECISION (at 37°C)

Intra-assay, n = 20	Mean [mg/dl]	SD [mg/dl]	CV [%]
Sample 1	0.56	0.01	1.30
Sample 2	1.24	0.01	0.83
Sample 3	6.73	0.06	0.93
Inter-assay, n = 20	Mean [mg/dl]	SD [mg/dl]	CV [%]
Sample 1	0.81	0.03	3.63
Sample 2	1.60	0.01	0.87
Sample 3	5.73	0.05	0.85

##### SPECIFICITY/INTERFERENCES

no interference up to:

<b>Ascorbic acid</b>	30 mg/dL
<b>Bilirubin</b>	4 mg/dL
<b>Hemoglobin</b>	500 mg/dL
<b>Triglycerides</b>	2000 mg/dL

For further information on interfering substances refer to Young DS [10].

##### METHOD COMPARISON

A comparison of Diagnostica Creatinine (y) with a commercially available Jaffé method (x) using 68 human sera samples within a range of 0.6 – 10 mg/dL (53.0 – 884 µmol/L) gave following results:  $y = 1.014x - 0.031$  mg/dL;  $r = 1.000$ .

A comparison of Diagnostica Creatinine compensated (y) with the enzymatic method (x) using 65 human sera samples within a range of 0.5 – 4.3 mg/dL (44.2 – 380 µmol/L) gave following results:  $y = 0.986x + 0.043$  mg/dL;  $r = 0.998$ .

##### QUALITY CONTROL

All controls with Creatinine values determined by this method can be used.

We recommend the Diagnostica serum controls **Diacon N** (control serum with values in the normal range) and **Diacon P** (control serum with values in the abnormal range) as well as the Diagnostica urine controls **Diacon Urine Level 1** (control urine normal) and **Level 2** (control urine abnormal).

Each laboratory should establish corrective action in case of deviations in control recovery.

##### CALIBRATION

The assay requires the use of a creatinine standard or calibrator.

We recommend the Diagnostica **Creatinine Standard** and the Diagnostica multi calibration serum **Diacal Auto**.

Calibrator values have been made traceable to NIST (National Institute for Standardization) Standard Reference Material SRM 967 using level 1 and 2 and therefore to GC-IDMS (gas chromatography – isotope dilution mass spectrometry).

#### AUTOMATION

Applications for automated systems are available upon request.

#### WARNINGS AND PRECAUTIONS

1. Reagent 1: Warning. H290: May be corrosive to metals. H315: Causes skin irritation. H319: Causes serious eye irritation. P234: Keep only in original container. P264: Wash hands and face thoroughly after handling. P280: Wear protective gloves/protective clothing/eye protection/face protection. P302+P352: If on skin: Wash with plenty of water/soap. P332+P313: If skin irritation occurs: get medical advice/attention. P305+P351+P338: If in eyes: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. P337+P313: If eye irritation persists: Get medical advice/attention. P390: Absorb spillage to prevent material damage.
2. Reagent 2: Warning. H290: May be corrosive to metals. P234: Keep only in original container. P280: Wear protective gloves/protective clothing/eye protection/face protection. P390: Absorb spillage to prevent material damage.
3. High homogentisic acid concentrations in urine samples lead to false results.
4. In very rare cases, samples of patients with gammopathy might give falsified results [11].
5. Please refer to the safety data sheets and take the necessary precautions for the use of laboratory reagents.
6. For diagnostic purposes, the results should always be assessed with the patient's medical history, clinical examinations and other findings.
7. For professional use only!

#### WASTE MANAGEMENT

Please refer to local requirements.

