



The New respons 920®System - Adaptation of a Panel of Kidney Disease Markers

H. Baethies, B. Wehle, A. Nadem, S. Caspari, S. Hoffmann, R. Schenk, E. Metzmann, T. Hektor

DiaSys Diagnostic Systems GmbH, Alte Strasse 9, 65558 Holzheim, Germany, www.diasys-diagnostics.com

Introduction

The DiaSys respons®920 system is a fully automated, random access analyser designed for small to medium size workloads. The system has a throughput of about 240 tests/h with ISE and 200 tests/h without. Key features are the one-grip loading of a complete reagent set (twin-container). Up to 30 slots for refrigerated and barcoded reagent containers are on board. The system features an optional 4 channel ISE. A panel of more than 60 clinical chemistry and immunoturbidimetric methods is available.



Figure 1: DiaSys respons®920

Because of the growing relevance and the steadily increasing number of cases of metabolic syndrome and diabetes in many countries, the adaptation of a panel of kidney disease markers has been chosen to demonstrate the performance of the system.

This kidney disease package includes the following assays:

- Creatinine**
- Cystatin C**
- Total Protein**
- Urea**
- Urinary Albumin**

Results

Assay	Unit	Range		
Creatinine	mg/dL	0.10	-	15
Urea	mg/dL	3.00	-	300
Albumin U/CSF	mg/L	2.00	-	350
Total Protein	g/dL	0.05	-	15
Cystatin C	mg/L	0.06	-	8.0

Table 1: Summary Measuring Ranges

Assay	Unit	Slope	Intercept	r	n
Creatinine	mg/dL	1.038	-0.052	0.999	110
Urea	mg/dL	1.010	1.120	0.999	110
Albumin U/CSF	mg/L	0.935	1.400	0.999	92
Total Protein	g/dL	1.020	0.017	0.955	110
Cystatin C	mg/L	0.959	-0.043	0.998	100

Table 2: Summary Method Comparison

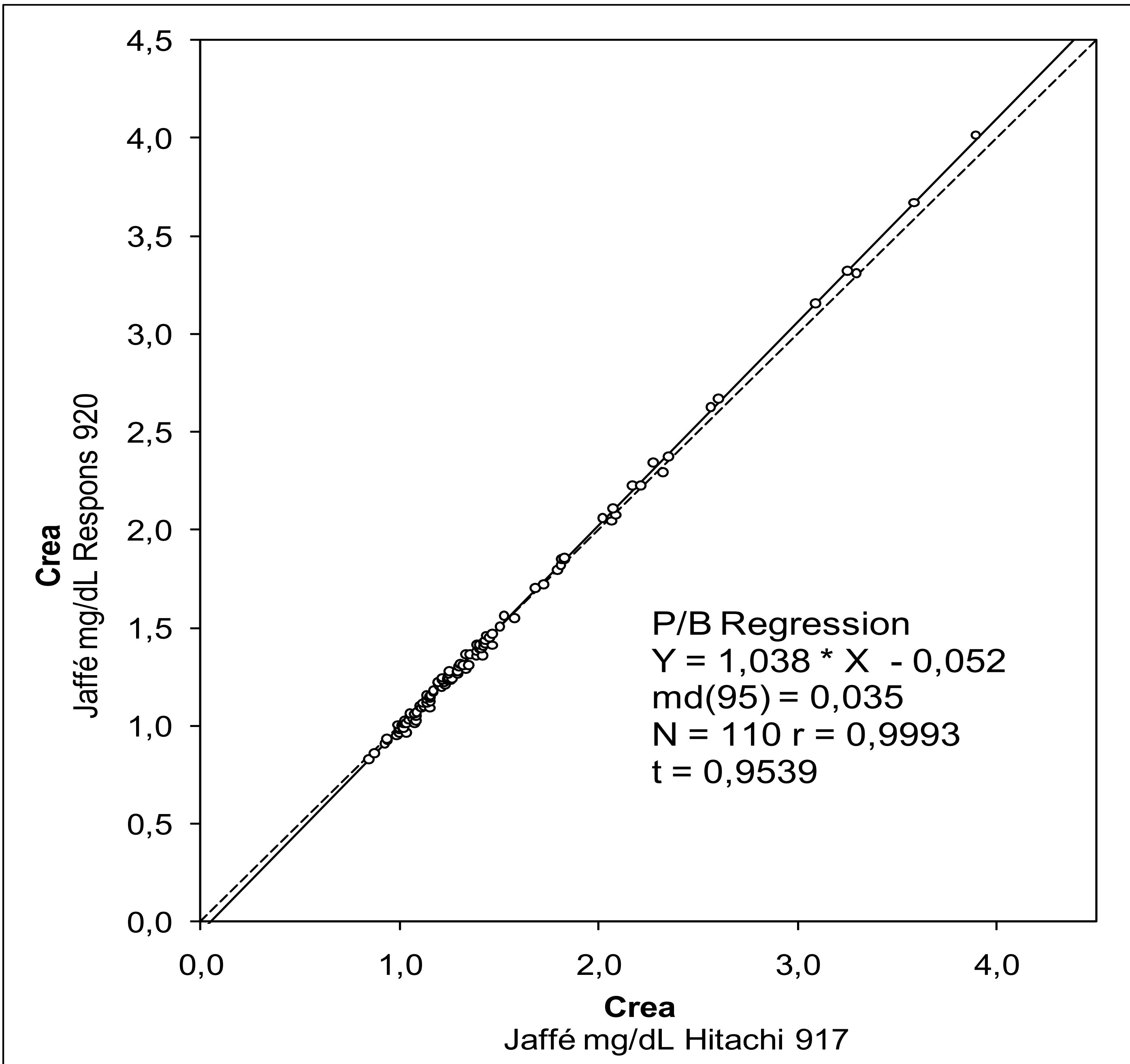


Figure 2: Creatinine Method Comparison
Sample specimen: human serum

Assay	Unit	Sample 1		Sample 2		Sample 3	
		Mean	CV %	Mean	CV %	Mean	CV %
Creatinine	mg/dL	1.02	2.68	1.21	3.01	7.57	0.88
Urea	mg/dL	39.2	2.54	77.8	2.90	152	2.34
Albumin U/CSF	mg/L	20.3	3.01	34.1	1.55	106	0.56
Total Protein	g/dL	5.09	1.02	6.20	0.93	10.9	0.90
Cystatin C	mg/L	0.70	2.33	0.95	2.26	3.08	1.88

Table 3: Summary Precision in Series (n=20)

Assay	Unit	Sample 1		Sample 2		Sample 3	
		Mean	CV %	Mean	CV %	Mean	CV %
Creatinine	mg/dL	1.00	3.21	1.11	2.59	7.53	2.63
Urea	mg/dL	39.8	2.22	66.9	3.68	150	2.24
Albumin U/CSF	mg/L	20.8	3.46	35.0	2.91	110	1.94
Total Protein	g/dL	4.91	2.11	5.96	1.62	11.0	2.25
Cystatin C	mg/L	0.91	3.71	1.12	3.08	3.44	3.53

Table 4: Summary Precision from Day-to-Day (n=20)

Interferent		Creatinine	Urea	Albumin U/CSF		Total Protein	Cystatin C
				Serum	Urine		
Lipid	mg/dL	1800	2000	2000	-	2000	1000
Bilirubin	mg/dL	3	60	60	25	60	60
Hemoglobin	mg/dL	500	1000	1000	240	500	1000
Ascorbate	mg/dL	30	30	-	-	30	-
Urea	g/L	-	-	-	40	-	-
Dextran	mg/dL	-	-	-	-	2000	-
Rheumatoid factor	IU/mL	-	-	-	-	-	600

Table 5: Summary Interferences (Table indicates the maximum tolerable interferences within ± 10% limits)

Materials & Methods

The assay adaptation and performance verification was carried out on 3 DiaSys respons®920 systems in parallel. All reagents, calibrators and controls were provided by DiaSys Diagnostic Systems GmbH. Method comparisons were performed on DiaSys respons®920 and Hitachi 917 as a reference system. The data was evaluated by using regression analysis according to Passing and Bablok [1-3]. Inter- and intra-assay imprecision data were recorded according to a DiaSys internal protocol in serial 20-fold repetition and a 4-fold day-to-day repetition over 5 days, respectively [4-5]. The analytical sensitivity was determined by adding 3 SD to the mean signal of a 20-fold repeated blank measurement. The assay interferences were assessed according to a DiaSys internal protocol based on CLSI guidelines [6].

Conclusion

The DiaSys respons®920 benchtop analyser demonstrated a good precision and accuracy and the ease of workflow fulfills the needs of mid-sized laboratories. The analytical performance compares very well to the established Hitachi 917 floor model analyser and is fully compliant with the quality assurance demands of a state of the art clinical laboratory.

References

- [1] H. Passing and W. Bablok. A New Biometrical Procedure for Testing the Equality of Measurements from Two Different Analytical Methods Part 1. *J Clin Chem Clin Biochem* (1983);21(11):709-720.
- [2] H. Passing and W. Bablok. Comparison of Several Regression Procedures for Method Comparison Studies and Determination of Sample Sizes Part 2. *J Clin Chem Clin Biochem* (1984);22(6):431-445.
- [3] CLSI. Method Comparison and Bias Estimation Using Patient Samples; approved guideline-second edition. CLSI Document EP9-A2. Wayne (PA): CLSI; 2002.
- [4] La Penberthy. A Users Guide to Statistics in Clinical Chemistry. *J Clin Biochem Revs* (1986);7:3947.
- [5] CLSI. Evaluation of Precision Performance of Quantitative Measurement Methods; approved guideline-second edition. CLSI Document EP5-A2. Wayne (PA): CLSI; 2004.
- [6] CLSI. Interference testing in clinical chemistry; approved guideline-second edition. CLSI Document EP7-A2. Wayne (PA): CLSI; 2005.