

BE Factor XII Deficient plasma

Depleted plasma for quantitative determination of Factor XII activity in human plasma

PRINCIPLE ⁽¹⁾

Measurement of clotting time in the presence of cephaline and activator and the deficient plasma FXII in which all the factors are present in excess except of Factor XII which is derived from the sample being tested.

This test is determined with BE reagents as follows:

- REF 771200, REF 771201: BE APTT K Kaolin + CaCl
- REF 771250, REF 771251: BE APTT SL Silica + CaCl
- REF 771700: BE Owren Buffer (Plasma dilution buffer)

CLINICAL SIGNIFICANCE ^{(2) (3) (4) (5)}

Factor XII is involved at different stages:


- In the endogenous coagulation pathway
- In relation with Kallikrein in case of inflammation
- In fibrinolysis

There are pathological changes in the FXII in the following cases:

- In congenital deficits (autosomal recessive), the rate of Factor XII varies from 15 % to 80 % in heterozygotes and less than 1 % in Homozygotes.

Factor XII deficiency is not accompanied by hemorrhagic syndromes, which suggests that there is another mechanism substituting to the activation of Factor XII. It has not been demonstrated that this deficit increases risks of thrombosis.

REAGENTS

DP	FXII	Deficient Plasma FXII	
			Human Origin

Freeze dried plasma free of Factor XII by selective immune-adsorption
According to 1272/2008 regulation, these reagents are not classified as dangerous

SAFETY CAUTIONS

- Behnk reagents are designated for professional in vitro diagnostic use.
- Refer to current Material Safety datasheet (MSDS) is available upon request.
- Use adequate protections (overall, gloves, glasses).
- Each donor unit used to manufacture this product was tested and found non-reactive for HBsAg, antibody to hepatitis C and antibody to HIV-1/HIV-2.
- However, as absence of infectious agents can never be proven, this plasma and all specimens should be handled as potentially infectious, in accordance with good laboratory practices using appropriate precautions.
- In the event of exposure, the directive of the responsible health authorities should be followed.
- Dispose of waste in accordance with the local regulations.

PREPARATION OF REAGENTS

DP: Open the vial carefully and add 1 mL of demineralised water without delay. Recap the vial and let stand for 15 min at room temperature. Mix gently by swirling before use.

STABILITY AND STORAGE

Unopened vials stored at 2-8 °C are stable until the expiry date stated on the label.
Once opened and reconstituted, plasma is stable:

- 10 hours at 2-25 °C

SAMPLES COLLECTION AND HANDLING ⁽⁶⁾

Plasma from careful venipuncture with anticoagulant ratio of 1/10 (trisodium citrate solution 0.109 M). Mix immediately the blood with anticoagulant.
Avoid drawing with a syringe that could result in the formation of micro-clots.
Centrifuge 10 minutes at 2500 g.
Stability: 4 h at 15-25 °C

LIMITS ^{(7) (8)}

Anticoagulants present in the specimen may interfere with Factor XII measured activity. The presence of Lupus anticoagulants may lead to an under-estimation of Factor XII activity in the specimen.
For a more comprehensive review of factors affecting this assay refer to the publication of Young D.S

MATERIAL REQUIRED BUT NOT PROVIDED

Basic medical analysis laboratory equipment
Coagulation analyzer
Demineralised water

EXPECTED VALUES ⁽⁹⁾⁽¹⁰⁾⁽¹¹⁾

- Plasma (adult): Usually between 60 % and 150 %
Factor XII is lower in newborn (50% less of the adult values).
Factor XII values may be twice to three times higher than normal (200 to 300 %) after strenuous physical exercises.
Each laboratory should establish its own normal ranges for the population that it serves.

REF 771612: DP (6 x1 mL)

PROCEDURE

Automated method on Behnk Thrombolyzer series

Refer to the full detailed application specific to the automated system.

Note:

- Performances and stability data have been validated on Thrombolyzer Compact X (available on request).
- With manual procedure and on other automated coagulation analyzer, performances and stability data must be validated by user.

CALIBRATION

REF 775100 BE Cal Ref Reference Plasma for calibration of coagulation tests

This Standard is traceable to SSC/ISTH Secondary Coagulation Standard NIBSC code: SSCLOT4.

Follow the Factor VIII calibration procedure of the analyzer.

CALCULATION

Results are expressed in % according to the calibration curve by the analyzer.

QUALITY CONTROL

REF 773100 BE Trol 1 and REF 773101 BE Trol 2

Controls are required for checking the accuracy and reproducibility of the results.

The control intervals should be adapted to each laboratory's individual requirements.

Values obtained should fall within the defined limits.

Follow the applicable government regulations and local guidelines for quality control.

PERFORMANCES

The within run and between run studies were performed on normal and abnormal plasma on Thrombolyzer Compact X:

Within Run N = 20	level 1	level 2	Between Run N = 20	level 1	level 2
Mean %	143	84	Mean %	104	54
S.D. %:	5.7	5.0	S.D. %:	7.2	6.4
C.V. %:	4.0	5.9	C.V. %:	7.0	11.7

Linearity Range: from 25% (QL) to 100%

Interferences (APTT K):

Lipids	No interference up to 731 mg/dL of triglycerides
Haemoglobin	No interference up to 261 µmol/L
Total Bilirubin	No interference up to 133 µmol/L













Other substances may interfere with the results (see § Limits)

Calibration Stability:

Make a new calibration when changing reagent batch, if quality control results are found out of the established range and after maintenance operations.

REFERENCES

- (1) GRIFFIN J.H., COCHRANE C.G. : « Human Factor XII (Hageman factor) dans « Methods in enzymology », L. Lorand, New York : academeic Press, 45, 56-65, 1976
- (2) SCHMAIER A.H., MACCRAE K.R. : «The plasma kallikrein, kinine system : its evolution from contact activation ». *Journal of Thrombosis and haemostasis*, 5, 2323-2329, 2007
- (3) SAMPOL J., ARNOUX D., BOUTIERE B. : "Manuel d'hémostase" Paris: Editions scientifiques et médicales ELSEVIER, 48, 361-362, 1995.
- (4) BLAT Y., SEIFFERT D. : « A renaissance for the contact system in blood coagulation ? » *Thromb. Haemos.*, 99, 457-460, 2008
- (5) GIROLAMI A., RUZZON E., LOMBARDI A.M., CABRIO L., RANDI M.L. : « Thrombosis-free surgical procedures in severe (homozygote) factor XII deficiency: report of four additional cases and literature review ». *Clin. Appl. Thrombosis/Haemostasis*, 10, 4, 351-355, 2004
- (6) CLSI Document H21-A5: "Collection, transport, and processing of blood specimens for testing plasma-based coagulation assays and molecular haemostasis assays; approved guideline". Fifth edition, 28, 5, 2008
- (7) BRANDT J.T., TRIPLETT D.A., ROCK W.A., BOVILL E.G., ARKIR C.F. : « Effect of lupus anticoagulants on the activated partial thromboplastin time ». *Arch. Pathol. Lab. Med.*, 115, 109-114, 1991
- (8) YOUNG D.S., *Effect of Drugs on Clinical laboratory Tests*, 4th Ed. (1995) p.3-254 à 3-257
- (9) CAEN J., LARRIEU M-J., SAMMAMA M. : « L'hémostase, méthode d'exploration et diagnostic prue ». Paris : L'expansion scientifique, 1975
- (10) ANDREW M., PAES B., MILNER R., JOHNSTON M., MITCHELL L., TOLLEFSEN D.M., POWERS P. : « Development of the human coagulation system in the full-term infant ». *Blood*, 70, 1, 165-172, 1987
- (11) IATRIDIS S.G., FERGUSON J.H. : « Effect of physical exercise in blood clotting and fibrinolysis ». *J. Appl. Physiol.*, 18, 337-344, 1963

											
Manufacturer	Use by	In Vitro Diagnostic	Temperature limitation	Catalogue number	See insert	Batch number	Store away from light	Sufficient for	Dilute with	Demineralized water	Biological hazard