



## LIMITAÇÕES DO PROCESSO

Todas as amostras indeterminadas ou positivas devem ser repetidas em dupla. Amostras repetidamente positivas devem ser confirmadas por meio de técnicas tais como IFI, Western Blot, Xenodiagnóstico e PCR.  
As amostras com contaminação microbiana ou pessoas com outros parasitas ou doença auto-imune podem produzir resultados falsos.  
Um resultado negativo não exclui a possibilidade de infecção pelo *T. cruzi*. Uma resposta imune humoral não é detectada durante as primeiras semanas após a infecção por qualquer método existente no mercado.

O diagnóstico da doença de Chagas deve ser baseada na combinação de resultados, incluindo história clínica, diagnóstico de infecção e testes sorológicos posteriores.

A interpretação de um teste diagnóstico, não deve ser estabelecida com base em um único ensaio. Devem-se incluir outros testes de confirmação, antes que uma amostra seja considerada positiva.

## CONTROLE INTERNO DE QUALIDADE

O Laboratório Clínico deve possuir um programa interno de controle da qualidade, onde procedimentos, normas, limites e tolerância para variações sejam claramente estabelecidos. É importante ressaltar que todos os sistemas de medição apresentam uma variabilidade analítica característica, que deve ser monitorada pelos próprios laboratórios. Para tanto, é recomendável a utilização de controles, que permitem avaliar a precisão e a exatidão das dosagens.

## DESEMPENHO DO PRODUTO

### CONTROLE DE QUALIDADE

#### Precisão

#### REPETIBILIDADE

REPETIBILIDADE	AMOSTRA		
	1	2	3
Média	5,28	0,14	2,60
Desvio padrão	4,36	0,27	6,10
Coeficiente de variação (%)	2,63	0,20	7,70

#### REPRODUTIBILIDADE

A reprodutibilidade foi calculada a partir de 10 determinações sucessivas durante 3 dias consecutivos, utilizando 3 amostras diferentes, obtendo-se os seguintes resultados:

REPRODUTIBILIDADE	AMOSTRA		
	1	2	3
Média	5,30	4,38	2,67
Desvio padrão	0,02	0,02	0,04
Coeficiente de variação (%)	0,38	0,46	1,50

#### Sensibilidade e Especificidade Clínica

O kit Biolisa Chagas Recombinante analisou amostras clínicas em comparação com kit referência.

Os resultados mostram que a sensibilidade clínica do Kit Biolisa Chagas Recombinante é > 99,9%, e a especificidade clínica é de 99,3%.

#### Biolisa Chagas Recombinante X Kit Referência

MÉTODO	Biolisa Chagas Recombinante		TOTAL
	Positivo	Negativo	
Kit Referência	209	0	209
	7	940	947
Resultado Total	216	940	1156

Sensibilidade Clínica: > 99,9% (209 / 209)

Especificidade Clínica: 99,3% (940 / 947)

## SIGNIFICADO DIAGNÓSTICO

A doença de Chagas é uma doença crônica causada por infecção com o protozoário *T. cruzi*. O parasita é transmitido aos seres humanos por um grupo de insetos da família Reduviidae, sendo o barbeiro (*Triatoma infestans*), o principal vetor. A infecção também pode ser transmitida congenitalmente, pela transfusão de sangue ou transplantes de órgãos. Esta infecção afeta vários órgãos em diferentes graus e sistemas, especialmente do coração e do trato gastrintestinal.

## NÚMERO DE TESTES

Apresentação 1 - 96 Testes  
Apresentação 2 - 192 Testes  
Apresentação 3 - 480 Testes

## REFERÊNCIAS BIBLIOGRÁFICAS

- 1- Burns Jr. JM, ET al. Identification and synthesis of a major conserved antigenic epitope of Trypanosoma cruzi. Proc Natl Acad Sci USA 89: 1239-1243, 1992.
- 2- Gruber, A. and Zingales, B. Trypanosoma cruzi: Characterization of two recombinant antigens with potential application in the diagnosis of Chagas Disease. Exp. Parasitol. 76:1-12, 1993.
- 3- Ibañez, C.F., Affranchino, J.I., Medina, R.A., Reyes, M.B., Leguizamón, S., Camargo, M.E., Aslund, L., Petteron, U. and Frasch, A.C.C. Multiple Trypanosoma cruzi antigens containing tandemly repeated amino acid sequence motifs. Mol. Biochem. Parasitol 30:27-34, 1998.
- 4- Peralta JM, et al. Serodiagnosis of Chagas' disease by enzyme-linked immunosorbent assay using two synthetic peptides as antigens. J Clin Microbiology 32(4): 971-974, 1994.
- 5- Spencer, H.C., Allain, D.S., Sulzer, A.J., Collins, W.E. Evaluation of the Micro Enzyme Lynked Immunosorbent Assay for Antibodies to Trypanosoma cruzi. Am. J. Trop. Med. Hyg., 29 (2): 179-182, 1980.
- 6- Umezawa ES, ET al. Evaluation of recombinant antigen for serodiagnosis of Chagas' disease in South and Central America, J Clin Microbiol 37(5): 1554-1560, 1999.
- 7- QUIBASA: Dados do Departamento de Pesquisa e Desenvolvimento.

## GARANTIA DE QUALIDADE

Antes de serem liberados para consumo, todos os reagentes **Bioclin** são testados pelo Departamento de Controle de Qualidade. A qualidade dos reagentes é assegurada até a data de validade mencionada na embalagem de apresentação, desde que armazenados e transportados nas condições adequadas.

### QUIBASA QUÍMICA BÁSICA Ltda

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### ATENDIMENTO AO CONSUMIDOR

Serviço de Assessoria ao Cliente  
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Número de Registro do kit Biolisa Chagas Recombinante na ANVISA:  
10269360306

Revisão: Março/2017

## SÍMBOLOGIA UNIVERSAL

	NÚMERO DE CATÁLOGO		FABRICADO POR
	NÚMERO DO LOTE		CONTROLE
	DATA DE FABRICAÇÃO		CONTROLE POSITIVO
	DATA DE VALIDADE (último dia do mês)		CONTROLE NEGATIVO
	LIMITE DE TEMPERATURA (conserver a)		RISCO BIOLÓGICO
	O CONTEÚDO É SUFICIENTE PARA <N> TESTES		INFLAMÁVEL
	CONSULTAR INSTRUÇÕES DE USO		CORROSIVO
	PRODUTO PARA DIAGNÓSTICO IN VITRO		TÓXICO
	REPRESENTANTE EUROPEU AUTORIZADO		MARCA CE
	PROTEGER DA LUZ E CALOR		NÃO UTILIZAR SE A EMBALAGEM ESTIVER DANIFICADA



nueva muestra en dos semanas. Debe prevalecer el resultado de la última muestra recogida.

Los resultados proporcionados por este kit deben ser interpretados por el, al no ser el único criterio profesional responsable médico para determinar el diagnóstico y / o tratamiento del paciente.

**Nota:** Os datos apresentados son ejemplos para la ilustración y no pueden ser utilizados para cálculos de resultados.

#### LIMITACIONES DEL PROCESO

Todas las muestras indeterminadas o positivos deben repetirse por duplicado. Repetidamente muestras positivas deben ser confirmadas por técnicas tales como IFI, Western blot, PCR y Xenodiagnóstico.

Las muestras con contaminación microbiana o personas con otros parásitos o enfermedades autoinmunes pueden causar resultados falsos.

Un resultado negativo no excluye la posibilidad de infección con *T. cruzi*. Una respuesta inmune humoral no se detecta durante las primeras semanas después de la infección por cualquier método disponible en el mercado.

El diagnóstico de la enfermedad de Chagas debe basarse en una combinación de los resultados, incluyendo la historia clínica, el diagnóstico de la infección y pruebas serológicas posteriores.

La interpretación de una prueba de diagnóstico no debe establecerse a partir de una sola prueba. Deben incluirse otras pruebas de confirmación antes de que una muestra se considere positiva.

#### CONTROL INTERNO DE CALIDAD

El laboratorio clínico debe tener un programa interno de control de calidad, donde se establecen claramente los procedimientos, las normas, los límites y la tolerancia para las variaciones. Tenga en cuenta que todos los sistemas de medición presentan una variabilidad característica de análisis, que debe ser supervisado por los propios laboratorios. Por lo tanto, se recomienda el uso de controles que permiten evaluar la precisión y la exactitud de la dosificación.

#### DESEMPEÑO DEL PRODUCTO

##### CONTROL DE CALIDAD

##### Precisión

##### REPETIBILIDAD

Repetibilidad se calculó a partir de 10 mediciones consecutivas, usando 3 muestras diferentes, obteniendo los siguientes resultados:

REPETIBILIDAD	MUESTRA		
	1	2	3
Promedio	5,28	0,14	2,60
Desvío Patrón	4,36	0,27	6,10
Coeficiente de Variación (%)	2,63	0,20	7,70

##### REPRODUCTIBILIDAD

La reproducibilidad se calcula a partir de 10 determinaciones repetidas durante 3 días consecutivos usando 3 muestras diferentes, obteniendo los siguientes resultados:

REPRODUCTIBILIDAD	MUESTRA		
	1	2	3
Promedio	5,30	4,38	2,67
Desvío Patrón	0,02	0,02	0,04
Coeficiente de Variación (%)	0,38	0,46	1,50

##### Sensibilidad y Especificidad clínica

Las muestras clínicas Biolisa Chagas recombinantes kit examinan en comparación con el kit de referencia. Los resultados muestran que la sensibilidad clínica de Chagas Biolisa recombinante Kit es > 99,9%, y la especificidad clínica es 99,3%.

#### Biolisa Chagas Recombinante X Kit Referencia

MÉTODO	Biolisa Chagas Recombinante		TOTAL	
	Positivo	Negativo		
Kit Referencia	Positivo	209	0	209
	Negativo	7	940	947
Resultado Total		216	940	1156

Sensibilidad Clínica: > 99,9% (209 / 209)

Especificidad Clínica: 99,3% (940 / 947)

#### SIGNIFICADO DIAGNÓSTICO

La enfermedad de Chagas es una enfermedad crónica causada por la infección con el protozojo *Trypanosoma cruzi*.

El parásito se transmite a los humanos por un grupo de insectos de la familia Reduviidae, y el barbero (*Triatomá infestans*), el principal vector. La infección también puede transmitirse congénitalmente, por transfusión de sangre o trasplante de órganos. Esta infección afecta a varios órganos y sistemas en diferentes grados, especialmente el corazón y el tracto gastrointestinal.

#### NÚMERO DE PRUEBAS

Presentación 1 - 96 Pruebas

Presentación 2 - 192 Pruebas

Presentación 3 - 480 Pruebas

#### REFERENCIAS BIBLIOGRÁFICAS

1- Burns Jr. JM, ET al. Identification and synthesis of a major conserved antigenic epitope of *Trypanosoma cruzi*. Proc Natl Acad Sci USA 89: 1239-1243, 1992.

2- Gruber, A. and Zingales, B. *Trypanosoma cruzi*: Characterization of two recombinant antigens with potential application in the diagnosis of Chagas Disease. Exp Parasitol. 76:1-12, 1993.

3- Ibañez, C.F., Affranchino, J.I., Medina, R.A., Reyes, M.B., Leguizamón, S., Camargo, M.E., Aslund, L., Petteron, U. and Frasch, A.C.C. Multiple *Trypanosoma cruzi* antigens containing tandemly repeated amino acid sequence motifs. Mol. Biochem. Parasitol. 30:27-34, 1998.

4- Peralta JM, et al. Serodiagnosis of Chagas' disease by enzyme-linked immunosorbent assay using two synthetic peptides as antigens. J Clin Microbiology 32(4): 971-974, 1994.

5- Spencer, H.C., Allain, D.S., Sulzer, A.J., Collins, W.E. Evaluation of the Micro Enzyme Linked Immunosorbent Assay for Antibodies to *Trypanosoma cruzi*. Am. J. Trop. Med. Hyg., 29 (2): 179-182, 1980.

6- Umezawa ES, ET al. Evaluation of recombinant antigen for serodiagnosis of Chagas' disease in South and Central America, J Clin Microbiol 37(5): 1554-1560, 1999.

7- QUIBASA: Dados do Departamento de Pesquisa e Desenvolvimento.

#### GARANTÍA DE CALIDAD

Antes de ser liberado para el consumo, todos los reactivos **Bioclin** son testados por el Departamento de Control de Calidad. La calidad de los reactivos es asegurada hasta la fecha de validad mencionada en el embalaje de presentación, desde que sean almacenados y transportados en las condiciones adecuadas.

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Número de Registro do kit Biolisa Chagas Recombinante na ANVISA: 10269360306

Revisión: Marzo/2017

#### SIMBOLOGÍA UNIVERSAL



ELABORADO POR



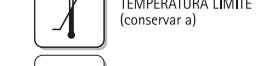
CONTROL



CONTROL POSITIVO



CONTROL NEGATIVO



RIESGO BIOLÓGICO



INFLAMABLE



CORROSIVO



TÓXICO



MARCADO CE



NO UTILICE SI EL  
EMBALAJE ESTA  
DAÑADA

**BIOLISA CHAGAS RECOMBINANTE**

REF K180

**USAGE INSTRUCTIONS****FUNCTION**

Test for qualitative determination of anti-*Trypanosoma cruzi* IgG antibodies in serum or human plasma by microplate enzyme immunoassay. For *in vitro* diagnostic use only.

**PRINCIPLE OF ACTION**

**Methodology:** Enzyme immunoassay or immunoenzymatic

The Recombinant Biolisa Chagas kit is a solid phase immunoenzymatic assay based on the principle of qualitative detection of antibodies against *T. cruzi* in human serum or plasma. Specific *T. cruzi* antibodies, present in the sample, bind to recombinant *T. cruzi* antigens coated on the microplate forming antigen-antibody complexes. After the initial incubation, the microplate is washed to remove unbound materials. Peroxidase-conjugated anti-IgG antibodies are added to the microplate, which is then incubated. Anti-Peroxidase conjugated anti-IgG antibodies bind to antigen-antibody complexes. A new wash is performed to remove surplus. After this step, the substrate is added and incubated producing a blue color, which indicates the amount of anti-T IgG antibodies. *T. cruzi* present in the samples. The Stop Solution is added to stop the reaction with a color change from blue to yellow, measured on a microplate reader.

**REAGENTS**

- 1 - **Sensitized plate** - Store between 2 and 8°C. Microplate impregnated with recombinant *T. cruzi* antigen.
- 2 - **Conjugate** - Store between 2 and 8°C. Peroxidase bound anti-IgG conjugate and stabilizer.
- 3 - **Concentrated Washing** - Store between 2 and 8°C. Solution Buffer, surfactant and preservative.
- 4 - **Sample Diluents** - Store between 2 and 8°C. Solution Buffer, stabilizer and surfactant.
- 5 - **Substrate** - Store between 2 and 8°C. Solution containing Hydrogen Peroxide and Tetramethylbenzidine (TMB).
- 6 - **Stop Solution** - Store between 2 and 8°C. Sulfuric Acid Solution 1M.
- 7 - **Negative Control** - Store between 2 and 8°C. Serum inactivated, not reactive for *T. cruzi* and preservative.
- 8 - **Positive Control** - Store between 2 and 8°C. Inactivated serum containing anti-*T. cruzi* antibodies and preservative.
- 9 - **Plate Sealers**

**PRESENTATION**

REAGENTS	1	2	3
	96 cavities	192 cavities	480 cavities
1- Sensitized Plate	1 units (96 cavities)	2 units (96 cavities)	5 units (96 cavities)
2- Conjugate	15 mL	2 x 15 mL	5 x 15 mL
3- Concentrated Washing	50 mL	2 x 50 mL	5 x 50 mL
4- Sample Diluents	30 mL	2 x 30 mL	5 x 30 mL
5- Substrate	15 mL	2 x 15 mL	5 x 15 mL
6- Stop Solution	10 mL	2 x 10 mL	5 x 10 mL
7- Negative Control	0,5 mL	2 x 0,5 mL	5 x 0,5 mL
8- Positive Control	0,5 mL	2 x 0,5 mL	5 x 0,5 mL
9- Plate Sealers	3 units	5 units	10 units

**EQUIPMENTS AND OPERATIONAL INPUTS****Materials in the kit:**

- Reagents described in the above table
- Usage instructions (manual)

**Required materials not contained in the kit:**

- 1- Pipettes capable of dispensing volumes of 10, 50, 100 and 200  $\mu$ L with coefficient of variation smaller than 1.5%.
- 2- Pipettes for repetitive pipetting of volumes of 350  $\mu$ L, with coefficient of variation less than 1.5% or multichannel pipette (optional).
- 3- Microplate washer (optional).
- 4- ELISA reader with absorbance capacity at 450 and 630 nm wavelength.
- 5- Absorbent paper to dry the wells.
- 6- Stopwatch or clock.
- 7- Bottle to stock the wash solution after dilution.
- 8- Distilled or deionized water.
- 9- Quality Control Tools.
- 10- Incubator of 37°C  $\pm$  2°C.

**TRANSPORTATION AND STORAGE CONDITIONS**

The storage temperature should be 2 to 8°C. The transport can be done under ambient temperature (up to 30 °C) for up to 72 (seventy two) hours. Keep away from light and avoid moisture. **Do not freeze.**

**SPECIAL CARE**

- 1- Only for professional *in vitro* diagnostic use.
- 2- Strictly follow the methodology proposed to obtain accurate results.
- 3- The envelope containing the strips should only be opened after it reaches room temperature. Place the strips with unused cavities in the aluminum bag, seal and store between 2 and 8°C.
- 4- The water used in material cleaning must be recent and free of contaminants.
- 5- Deionized and saturated columns release alkaline water, several ions and oxidizing and reducing agents that can significantly alter the results.
- 6- The Stop Solution contains Sulfuric Acid, which is a strong acid. Therefore, handle it with care.
- 7- All the raw material of product is tested and should be nonreactive for HBsAg, Anti-HIV 1 & 2 and Anti-HCV. However, these tests do not provide total assurance of the absence of infectious agents. The manual manipulation of any product containing human serum is potentially capable of transmitting diseases. Therefore, we must take due care in handling the bio safety of these products.
- 8- Always add reagents in the same order to minimize the difference in reaction time between the cavities.

9- As a safety measure, you should cover the plate during the reaction.  
 10- You must ensure that the bottom of the cavity is clean and dry and there are no bubbles on the surface fluid before reading the plate. Do not let the cavities run dry during the test.

11- Do not expose reagents, especially the Substrate, to strong light or Hypochlorite fumes during storage or incubation steps.

12- We recommend applying the local, state and federal rules for environmental protection, so that disposal of reagents and biological material can be made in accordance with current legislation.

13- In order to obtain information related to biosafety or in case of accidents with the product, consult the MSDS (Material Safety Data Sheet) available on the website www.bioclin.com.br or at the request of the SAC Customer Assistance) of Quibasa.

14- Do not use the product in case of damage to the packaging.

15- It is essential that the instruments and equipment used are properly calibrated and subjected to periodic maintenance.

**SAMPLES**

Use serum or plasma (EDTA or Heparin).

Hemolyzed or highly lipemic samples should not be used. Samples may be stored under refrigeration at 2-8°C for a maximum period of 7 days. If samples can not be analyzed within 7 days, they can be stored for up to 30 days at -20 °C (freezer).

**PROCESS DESCRIPTION****PREPARATION OF WORKING REAGENT****Washing Solution**

Dilute the contents of vial N°3 (Concentrated Wash) into 1000 mL of distilled or deionized water. After preparation, the solution may be stored at 2-8°C until the expiration date printed on the original vial. Can be stored at room temperature. If crystallization occurs, heat to 37°C until dissolution.

**TECHNIQUE**

Before starting the assay, place all Reagents, Samples and Controls to stabilize at room temperature (15-30°C) for at least 40 minutes.

1- Select the cavities to be used considering: Controls and Samples (They can be tested in duplicates). Return the strips of the plate will not be used for the original sealed packaging.

2- Select the first cavity for Blank (OPTIONAL).

3- Pipette 200  $\mu$ L of Sample Diluent into all the cavities.

4- Pipette 10  $\mu$ L of Negative Control, Positive Control and Sample into the cavities previously determined.

5- Homogenize gently for  $\pm$  30 seconds. Cover the cavities with sealer.

6- Incubate for 30 minutes  $\pm$  2 minutes in an incubator at 37°C  $\pm$  2°C.

7- Remove the sealing from the cavities.

8- Discard the contents of the cavities by aspiration (Washer) or by decanting (manual). Use approximately 350  $\mu$ L of Wash Solution, previously diluted\*, to perform a total of five (5) washing cycles. To ensure the drying of the plate at the end of washing, beat it for a few seconds on absorbent paper.

Note: Poor washing and drying can cause inadequate results.

9- Pipette 100  $\mu$ L of Conjugate into each cavities except in the Blank (If you made this choice).

10- Homogenize gently for  $\pm$  30 seconds. Cover the cavities with sealer.

11- Incubate for 30 minutes  $\pm$  2 minutes in an incubator at 37°C  $\pm$  2°C.

12- Remove the sealing from the cavities.

13- Repeat item 8.

14- Pipette 100  $\mu$ L of Substrate in all cavities.

15- Homogenize gently for  $\pm$  30 seconds. Cover the cavities with sealer.

16- Incubate for exactly 30 minutes at room temperature.

17- Remove the sealing from the cavities.

18- Pipette 50  $\mu$ L Stop Solution into all cavities.

19- Homogenize gently for  $\pm$  30 seconds.

20- Read: 450 nm (primary filter)/630 nm (secondary filter) up to 30 minutes maximum.

**TECHNIQUE VERIFICATION**

Verify if the results obtained for reading the Controls are compatible with the values shown below:

ITEM	ABSORBANCE
Blank	< 0,15
Negative Control	< 0,20
Positive Control	$\geq$ 1,00

The absorbances for the above controls were obtained after the decrease in absorbance of White. If the values are outside the expected values, the technique must be repeated.

**CALCULATIONS****QUALITATIVE**

To calculate the Cut-Off, calculate the mean absorbance of the Positive Control and Negative Control:

Example:

ITEM	ABSORBANCE
Positive Control	A1 = 1,542
Negative Control	A2 = 0,130

If the control results are valid, calculate the Cut-Off with the following formula:

Example:

ITEM	ABSORBANCE
Cut-Off = (Mean Positive Control Absorbance + Mean Absorbance of Negative Control) $\times$ 0,22	Cut-Off = (1,542 + 0,130) $\times$ 0,22 Cut-Off = 0,367

Calculate the Index by dividing the absorbance of the Sample by the Cut-Off value.

Example:

ITEM	ABSORBANCE
Sample	1,234
Cut-Off Value	0,367
Index: Sample / Cut-Off Value	1,234 / 0,367 = 3,362

**INTERPRETATION OF RESULTS**

RESULTS	QUALITATIVE
	INDEX
Negative	< 0,9
Positive	$\geq$ 1,1
Undetermined	$\geq$ 0,9 e $<$ 1,1

**Note:** In case of undetermined result, the sample should be retested. Samples that obtain repeatedly indeterminate results should be retested using an alternative method. If the results remain undetermined, a new sample should be collected within two weeks. The result of the last sample collected should prevail.

The results provided by this kit should be interpreted by the responsible medical professional and not the only criterion for determining the diagnosis and / or treatment of the patient.

**Note:** The data presented in the examples are for illustration only and can not be used for calculation of the results.

**PROCEDURE LIMITATIONS**

All indeterminate or positive samples should be duplicated. Repeatedly positive samples should be confirmed by techniques such as IFI, Western Blot, Xenodiagnosis and PCR. Samples with microbial contamination or people with other parasites or autoimmune disease may produce false results.

A negative result does not exclude the possibility of *T. cruzi* infection. A humoral immune response is not detected during the first few weeks after infection by any method on the market. The diagnosis of Chagas' disease should be based on the combination of results, including clinical history, diagnosis of infection and subsequent serological tests. The interpretation of a diagnostic test should not be established on the basis of a single test. Other confirmatory tests should be included before a sample is considered positive.

**INTERNAL QUALITY CONTROL**

The Clinical Laboratory must have an internal quality control program, where procedures, norms, limits and tolerance for variations are clearly established. It is important to note that all measurement systems have a characteristic analytical variability, which must be monitored by the laboratories themselves. For this purpose, it is recommended to use controls, which allow to evaluate the precision and accuracy of the dosages.

**PRODUCT PERFORMANCE****QUALITY CONTROL****Accuracy****REPEATABILITY**

Repeatability was calculated from 10 successive determinations using 3 different samples, yielding the following results:

REPEATABILITY	SAMPLE		
	1	2	3
Average	5,28	0,14	2,60
Standard Deviation	4,36	0,27	6,10
Coefficient of Variation (%)	2,63	0,20	7,70

**REPRODUCIBILITY**

The reproducibility was calculated from 10 successive determinations for 3 consecutive days, using 3 different samples, obtaining the following results:

REPRODUCIBILITY	SAMPLE		
	1	2	3
Average	5,30	4,38	2,67
Standard Deviation	0,02	0,02	0,04
Coefficient of Variation (%)	0,38	0,46	1,50

**Clinical Sensitivity and Specificity**

The Recombinant Biolisa Chagas kit analyzed clinical specimens compared to the reference kit. The results show that the clinical sensitivity of the Recombinant Biolisa Chagas Kit is > 99,9%, and the clinical specificity is 99,3%.

## Biolisa Chagas Recombinante X KIT Reference

METHOD	Biolisa Chagas Recombinante		TOTAL	
	Positive	Negative		
Kit Reference	Positive	209	0	209
	Negative	7	940	947
Total Result		216	940	1156

Clinical Sensitivity: > 99,9% (209 / 209)

Clinical Specificity: 99,3% (940 / 947)

**DIAGNOSTIC SIGNIFICANCE**

Chagas disease is a chronic disease caused by infection with the protozoan *T. cruzi*. The parasite is transmitted to humans by a group of insects of the family Reduviidae, being the barbeiro (*Triatoma infestans*), the main vector. The infection can also be congenitally transmitted by blood transfusion or organ transplants. This infection affects several organs in varying degrees and systems, especially the heart and gastrointestinal tract.

**NUMBER OF TESTS**

Presentation 1 - 96 Tests  
Presentation 2 - 192 Tests  
Presentation 3 - 480 Tests

**BIBLIOGRAPHIC REFERENCES**

- 1- Burns Jr. JM, ET al. Identification and synthesis of a major conserved antigenic epitope of *Trypanosoma cruzi*. Proc Natl Acad Sci USA 89: 1239-1243, 1992.
- 2- Gruber, A. and Zingales, B. *Trypanosoma cruzi*: Characterization of two recombinant antigens with potential application in the diagnosis of Chagas Disease. Exp. Parasitol. 76:1-12, 1993.
- 3- Ibañez, C.F., Affranchino, J.I., Medina, R.A., Reyes, M.B., Leguizamón, S., Camargo, M.E., Aslund, L., Petteron, U. and Frasch, A.C.C. Multiple *Trypanosoma cruzi* antigens containing tandemly repeated amino acid sequence motifs. Mol. Biochem. Parasitol. 30:27-34, 1998.
- 4- Peralta JM, et al. Serodiagnosis of Chagas' disease by enzyme-linked immunosorbent assay using two synthetic peptides as antigens. J Clin Microbiology 32(4): 971-974, 1994.
- 5- Spencer, H.C., Allain, D.S., Sulzer, A.J., Collins, W.E. Evaluation of the Micro Enzyme Linked Immunosorbent Assay for Antibodies to *Trypanosoma cruzi*. Am. J. Trop. Med. Hyg., 29 (2): 179-182, 1980.
- 6- Umezawa ES, ET al. Evaluation of recombinant antigen for serodiagnosis of Chagas' disease in South and Central America, J Clin Microbiol 37(5): 1554-1560, 1999.
- 7- QUIBASA: Dados do Departamento de Pesquisa e Desenvolvimento.

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	REF CATALOG NUMBER		MANUFACTURED BY
	LOT BATCH CODE		CONTROL
	DATE OF MANUFACTURE		POSITIVE CONTROL
	USED BY (last day of month)		NEGATIVE CONTROL
	TEMPERATURE LIMITATION (store at)		BIOLOGICAL RISK
	CONTAINS SUFFICIENT FOR <N> TESTS		INFLAMMABLE
	CONSULT INSTRUCTIONS FOR USE		CORROSIVE
	IVD IN VITRO DIAGNOSTIC DEVICE		POISON
	EUROPEAN AUTHORIZED REPRESENTATIVE		CE MARK
	KEEP AWAY FROM SUNLIGHT		DO NOT USE IF PACKAGE IS DAMAGED