(IFCC, Kinetic)

Last update 09-2020

Ref.

CC3-AST.16M, 2x25 ml CC3-AST.16MU, 4x25 ml

INTENDED USE

Reagent kit for quantitative estimation of glutamate oxaloacetate transaminase activity in serum or plasma.

PRODUCT HIGHLIGHTS

- Long shelf life.
- Liquid stable reagents available.
- International Standard 'IFCC' reagent.

INTRODUCTION

In 1955, Karmen published a method for the determination of glutamate oxaloacetate transaminase activity (also called aspartate transaminase AST). The primary transaminase reaction was coupled with malate dehydrogenase (MDH) and reduced nicotinamide adenine dinucleotide (NADH). This method was further improved upon by many workers and reviewed by professional societies like SCE, IFCC, GSCC etc. SGOT-L is based on the procedure recommended by the IFCC.

DIAGNOSTIC SIGNIFICANCE

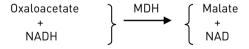
Aspartate transaminase is present in all human tissues of the body. It is also present in large amounts in liver, kidneys, heart and skeletal muscles. When any of these organs is damaged or diseased, serum GOT level rises. The rise is proportional to the extent of damage or disease. Elevated levels are associated with liver disease or damage, myocardial infarction, muscular dystrophy and cholecystitis. In myocardial infarction GOT/AST levels increase after 3 to 8 hours of onset of attack and returns to normal in 4 to 6 weeks. The duration and extent of increase in level is proportional to the severity of attack. The change in levels over a period of time is useful to the physician in evaluating myocardial infarction, following chronic heart disease or resolving hepatitis.

PRINCIPLE

In this reaction, L-Aspartate and alpha-ketoglutarate react in the presence of GOT with the sample to yield oxaloacetate and L-glutamate.



The oxaloacetate is reduced by malate dehydrogenase (MDH) to yield L-malate with the oxidation of NADH to NAD. The reaction is monitored by measurement of the decrease in absorbance of NADH at 340 nm.



The rate of reduction in absorbance is proportional to SGOT activity in sample.

PRESENTATION

All reagents to be stored at 2-8°C	No. of Bottles	
	2x25ml	4x25ml
• SGOT – L (R1) (Enzyme reagent)	2x20ml	4x20ml
• SGOT – L (R2) (Substrate reagent)	2x5ml	4x5ml

FINAL REAGENT COMPOSITION

Active Ingredients

• Buffer pH 7.6 ± 0.1 • MDH (Microbial)

• LDH (Microbial)

• L-Aspartate

• NADH

• 2-oxoglutarate

Concentration 100 mmol/L $\geq 500 \text{ U/L}$ $\geq 900 \text{ U/L}$ $\geq 900 \text{ U/L}$ $\geq 10 \text{ mmol/L}$

Also Contains non-reactive fillers and stabilizers.

PRECAUTIONS

SGOT-L is for *IN-VITRO* diagnostic use only. Reagent contains Sodium Azide. DO NOT INGEST.

PREPARATION OF WORKING REAGENT

For 2x25ml & 4x25ml

Carefully transfer the contents of 1 bottle of R2 into the bottle of R1. Mix well. Wait for 2 minutes before use.

Alternatively for flexibility as much of working reagent may be made as and when desired by mixing 4 parts of R1 & 1 part of R2.

Alternatively 0.8 ml of R1 and 0.2 ml of R2 may also be used instead of 1 ml of working reagent directly during the assay.

REAGENT STORAGE AND STABILITY

SGOT-L reagents are stable at $2\text{-}8^{\circ}\text{C}$ until the expiry date stated on the label.

The working reagent is stable for 30 days at 2-8°C

SPECIMEN COLLECTION

Fresh, clear serum under fasting condition with no hemolysis is the specimen of choice. Plasma collected with anticoagulants such as heparin or EDTA can also be used.

REACTION PARAMETERS

• Type of reaction : Kinetic/Decreasing OD

Wavelength : 340 nm
Flow cell Temperature : 37°C
Delay Time : 60 Seconds
Interval : 30 seconds

• No. of Intervals : 4

Sample Volume : 50µl (0.05 ml)
Working Reagent Volume : 1.0 ml
Factor : 3376
Light Path : 1 cm

• Zero setting with : Distilled Water

TEST PROCEDURE

Test Procedure One Reagent

Pipette Into Test Tubes	TEST
Working Reagent (ml)	1.0
Sample (ml)	0.05

Test Procedure Two Reagent

	Pipette Into Test Tubes	TEST
	SGOT-L R1 (ml)	0.8
	SGOT-L R2 (ml)	0.2
	Sample (ml)	0.05

Mix well and after incubation at 37°C for 60 seconds, measure the absorbance at an interval of 30 seconds for 2 minutes at 340 nm.

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TEST RESULTS

Serum GOT activity (IU/L) = $\Delta A/min. x F$ Where F = 3376 (based on the milimolar extinction coefficient of NADH at 340 nm).

NORMAL VALUES

0-55 IU/L

LINEARITY

The method is linear upto 500 IU/L. For sample values higher than 500 IU/L, dilute the sample suitably with 0.9% saline and repeat the assay. Apply the dilution factor to calculate the final results.

NOTE

For laboratories using instruments with cuvette capacity less than 1.0 ml, sample and working reagent volumes should be proportionately decreased.

REFERENCES

- The Committee on Enzymes of the Scandinavian Society for Clinical Chemistry & Clinical Physiology. Recommended methods for determination of four enzymes in blood. Scand. J. Clin. Lab. Invest.33.291 (1974).
- 2. LADUE.J.S. WROBLEWSKI. F. AND KARMEN. A. Serum glutamate oxaloacetate transaminase in human acute transmural myocardial infarction. Science 120.497-499 (1954).





