

IDK® Calprotectin



Fecal Calprotectin as inflammation marker for diagnosis and therapy monitoring of inflammatory bowel diseases

ELISA for the determination of Calprotectin in stool

- ▶ No test is faster! (incubation only 2 x 30 min.)
- ▶ Broadest linear range: 50 - 2100 µg/g
- NEW!** ▶ Universal extraction buffer *IDK Extract*® for complete stool analysis from one single tube
- ▶ Convenient ready-to-use conjugate, standards and controls
- ▶ All steps at room temperature without shaking
- ▶ Also available as 1-point calibration test
- ▶ Automatable
- ▶ Hygienic stool sample preparation system



Fecal Calprotectin

Inflammation marker for diagnosis and therapy monitoring of inflammatory bowel diseases

Indications

Calprotectin, a calcium binding protein, is produced by neutrophil granulocytes and monocytes and is extremely stable in stool (7 days at room temperature, up to 30 days in our stabilization buffer). Calprotectin should be determined in the following indications:

Differentiation between organic and functional intestinal diseases

It is often difficult to discriminate patients with irritable bowel syndrome (IBS) from those with chronic inflammatory bowel diseases (IBD) and the clarification requires a multitude of elaborate examinations. Calprotectin on the other hand represents a reliable, non-invasive marker for the differential diagnosis of IBD.

Fecal Calprotectin is a surrogate marker of the neutrophil influx into the bowel lumen. Fecal Calprotectin is elevated in gastrointestinal diseases of inflammatory or neoplastic origin. The parameter is therefore ideal to discriminate between organic diseases of the intestinal tract (e.g. IBD, diverticulitis, polyps) and functional diseases, such as IBS.

Assessment of inflammatory activity in Morbus Crohn and ulcerative colitis patients

As an inflammation marker, Calprotectin reliably indicates relapse in patients with M. Crohn or ulcerative colitis. The determination in stool correlates very well with histological and endoscopic findings of the disease activity in Morbus Crohn und Colitis ulcerosa as well as with the Indium-granulocyte test. Recurring elevated Calprotectin levels are an early and reliable indicator of a relapse. Calprotectin exhibits a higher sensitivity and specificity in the determination of inflammation as Lactoferrin or PMN-Elastase.

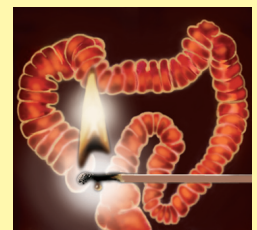
Differential diagnosis of chronic diarrhea

In contrast to the fecal markers Lactoferrin and PMN-Elastase, Calprotectin can also discriminate between an organic and a functional diarrhea and is a screening marker for infectious diarrhea. Calprotectin exhibits a higher sensitivity and negative predictive value than Lactoferrin or PMN-Elastase in patients with chronic diarrhea.

Fast, easy & reliable: IDK® Calprotectin ELISA

The IDK® Calprotectin ELISA (K 6927) enables the convenient, fast and accurate determination of fecal Calprotectin in a routine laboratory: With incubation times of merely 2 x 30 minutes, this monoclonal assay belongs to the fastest in the market. The ready-to-use conjugate saves time and the combination with our convenient stool sample preparation system (K 6998SAS) allows a hygienic handling of the samples. The universal extraction buffer **IDK Extract®** (K 6999) makes a consistent sample preparation for the Immundiagnostik stool analytic tests possible, thereby simplifying dramatically the determination of several parameters from a single stool sample. Intestinal inflammations are identified with a clinically relevant cut-off at 50 µg/g. The broad, dynamic linear measuring range of this assay is unique and produces reliable data even at high concentrations (s. graph below).

The IDK® Calprotectin ELISA is also available as 1-point-calibration kit (K 6967).



These features qualify the IDK® Calprotectin ELISA as leading assay in the routine diagnostics of Calprotectin!

Excellent linearity in a broad measuring range!

