

# T3

## Triiodothyronine

cobas®

REF		SYSTEM
11731360 122	200	Elecsys 2010 MODULAR ANALYTICS E170 <b>cobas e 411</b> <b>cobas e 601</b> <b>cobas e 602</b>

### English

#### Intended use

Immunoassay for the in vitro quantitative determination of total triiodothyronine in human serum and plasma.

The electrochemiluminescence immunoassay "ECLIA" is intended for use on Elecsys and **cobas e** immunoassay analyzers.

#### Summary

Triiodothyronine (T3) is the hormone principally responsible for the development of the effects of the thyroid hormones on the various target organs.

T3 (3,5,3'-triiodothyronine) is mainly formed extrathyroidally, particularly in the liver, by enzymatic 5'-deiodination of T4. Accordingly, the T3 concentration in serum is more a reflection of the functional state of the peripheral tissue than the secretory performance of the thyroid gland.

A reduction in the conversion of T4 to T3 results in a decrease in the T3 concentration. It occurs under the influence of medicaments such as propranolol, glucocorticoids or amiodarone and in severe non-thyroidal illness (NTI), and is referred to as "low T3 syndrome". As with T4, over 99 % of T3 is bound to transport proteins. However, the affinity of T3 to them is around 10-fold lower.<sup>1,2,3,4</sup>

The determination of T3 is utilized in the diagnosis of T3-hyperthyroidism, the detection of early stages of hyperthyroidism and for indicating a diagnosis of thyrotoxicosis factitia.<sup>5,6,7</sup>

The Elecsys T3 assay employs a competitive test principle with polyclonal antibodies specifically directed against T3. Endogenous T3, released by the action of 8-anilino-1-naphthalene sulfonic acid (ANS), competes with the added biotinylated T3-derivative for the binding sites on the antibodies labeled with the ruthenium complex<sup>a</sup>.

a) Tris(2,2'-bipyridyl)ruthenium(II)-complex (Ru(bpy)<sub>3</sub><sup>2+</sup>)

#### Test principle

Competition principle. Total duration of assay: 18 minutes.

- 1st incubation: 30 µL of sample and a T3-specific antibody labeled with a ruthenium complex; bound T3 is released from the binding proteins in the sample by ANS.
- 2nd incubation: After addition of streptavidin-coated microparticles and biotinylated T3, the still-free binding sites of the labeled antibody become occupied, with formation of an antibody-hapten complex. The entire complex becomes bound to the solid phase via interaction of biotin and streptavidin.
- The reaction mixture is aspirated into the measuring cell where the microparticles are magnetically captured onto the surface of the electrode. Unbound substances are then removed with ProCell/ProCell M. Application of a voltage to the electrode then induces chemiluminescent emission which is measured by a photomultiplier.
- Results are determined via a calibration curve which is instrument-specifically generated by 2-point calibration and a master curve provided via the reagent barcode.

#### Reagents - working solutions

The reagent rackpack is labeled as T3.

- M Streptavidin-coated microparticles (transparent cap), 1 bottle, 12 mL:  
Streptavidin-coated microparticles 0.72 mg/mL; preservative.
- R1 Anti-T3-Ab-Ru(bpy)<sub>3</sub><sup>2+</sup> (gray cap), 1 bottle, 16 mL:  
Polyclonal anti-T3-antibody (sheep) labeled with ruthenium complex 75 ng/mL; ANS 0.8 mg/mL; phosphate buffer 100 mmol/L, pH 7.4; preservative.

- R2 T3-biotin (black cap), 1 bottle, 16 mL:

Biotinylated T3 3 ng/mL; ANS 0.8 mg/mL; phosphate buffer 100 mmol/L, pH 7.4; preservative.

#### Precautions and warnings

For in vitro diagnostic use.

Exercise the normal precautions required for handling all laboratory reagents.

Disposal of all waste material should be in accordance with local guidelines. Safety data sheet available for professional user on request.

Avoid foam formation in all reagents and sample types (specimens, calibrators and controls).

#### Reagent handling

The reagents in the kit have been assembled into a ready-for-use unit that cannot be separated.

All information required for correct operation is read in from the respective reagent barcodes.

#### Storage and stability

Store at 2-8 °C.

Do not freeze.

Store the Elecsys reagent kit **upright** in order to ensure complete availability of the microparticles during automatic mixing prior to use.

Stability:	
unopened at 2-8 °C	up to the stated expiration date
after opening at 2-8 °C	12 weeks
on the analyzers	8 weeks

#### Specimen collection and preparation

Only the specimens listed below were tested and found acceptable.

Serum collected using standard sampling tubes or tubes containing separating gel.

Li-, Na-, NH<sub>4</sub><sup>+</sup>-heparin, K<sub>3</sub>-EDTA, sodium citrate and sodium fluoride/potassium oxalate plasma.

Criterion: Recovery within 90-110 % of serum value or slope 0.9-1.1 + intercept within < ± 2x analytical sensitivity (LDL) + coefficient of correlation > 0.95.

Stable for 7 days at 2-8 °C, 1 month at -20 °C.<sup>4</sup> Freeze only once.

The sample types listed were tested with a selection of sample collection tubes that were commercially available at the time of testing, i.e. not all available tubes of all manufacturers were tested. Sample collection systems from various manufacturers may contain differing materials which could affect the test results in some cases. When processing samples in primary tubes (sample collection systems), follow the instructions of the tube manufacturer.

Centrifuge samples containing precipitates before performing the assay.

Do not use heat-inactivated samples.

Do not use samples and controls stabilized with azide.

Ensure the samples, calibrators and controls are at 20-25 °C prior to measurement.

Due to possible evaporation effects, samples, calibrators and controls on the analyzers should be analyzed/measured within 2 hours.

#### Materials provided

See "Reagents – working solutions" section for reagents.

#### Materials required (but not provided)

- REF** 11731548122, T3 CalSet, for 4 x 1 mL

**Triiodothyronine**

- [REF] 11731416190, PreciControl Universal, for 2 x 3 mL each of PreciControl Universal 1 and 2
  - [REF] 11731416160, PreciControl Universal, for 2 x 3 mL each of PreciControl Universal 1 and 2 (for USA)
  - General laboratory equipment
  - Elecsys 2010, MODULAR ANALYTICS E170 or **cobas e** analyzer
- Accessories for Elecsys 2010 and **cobas e** 411 analyzers:
- [REF] 11662988122, ProCell, 6 x 380 mL system buffer
  - [REF] 11662970122, CleanCell, 6 x 380 mL measuring cell cleaning solution
  - [REF] 11930346122, Elecsys SysWash, 1 x 500 mL washwater additive
  - [REF] 11933159001, Adapter for SysClean
  - [REF] 11706802001, Elecsys 2010 AssayCup, 60 x 60 reaction vessels
  - [REF] 11706799001, Elecsys 2010 AssayTip, 30 x 120 pipette tips
- Accessories for MODULAR ANALYTICS E170, **cobas e** 601 and **cobas e** 602 analyzers:

- [REF] 04880340190, ProCell M, 2 x 2 L system buffer
- [REF] 04880293190, CleanCell M, 2 x 2 L measuring cell cleaning solution
- [REF] 03023141001, PC/CC-Cups, 12 cups to prewarm ProCell M and CleanCell M before use
- [REF] 03005712190, ProbeWash M, 12 x 70 mL cleaning solution for run finalization and rinsing during reagent change
- [REF] 12102137001, AssayTip/AssayCup Combimagazine M, 48 magazines x 84 reaction vessels or pipette tips, waste bags
- [REF] 03023150001, WasteLiner, waste bags
- [REF] 03027651001, SysClean Adapter M

Accessories for all analyzers:

- [REF] 11298500316, Elecsys SysClean, 5 x 100 mL system cleaning solution
- [REF] 11298500160, Elecsys SysClean, 5 x 100 mL system cleaning solution (for USA)

**Assay**

For optimum performance of the assay follow the directions given in this document for the analyzer concerned. Refer to the appropriate operator's manual for analyzer-specific assay instructions.

Resuspension of the microparticles takes place automatically prior to use. Read in the test-specific parameters via the reagent barcode. If in exceptional cases the barcode cannot be read, enter the 15-digit sequence of numbers.

Bring the cooled reagents to approximately 20 °C and place on the reagent disk (20 °C) of the analyzer. Avoid foam formation. The system automatically regulates the temperature of the reagents and the opening/closing of the bottles.

**Calibration**

**Traceability:** This method has been standardized against reference standards by weighing T3 into analyte-free human serum matrix.

Every Elecsys reagent set has a barcoded label containing specific information for calibration of the particular reagent lot. The predefined master curve is adapted to the analyzer using the relevant CalSet.

**Calibration frequency:** Calibration must be performed once per reagent lot using fresh reagent (i.e. not more than 24 hours since the reagent kit was registered on the analyzer). Renewed calibration is recommended as follows:

- after 8 weeks when using the same reagent lot
- after 7 days (when using the same reagent kit on the analyzer)
- as required: e.g. quality control findings outside the defined limits

**Quality control**

For quality control, use PreciControl Universal.

In addition, other suitable control material can be used.

Controls for the various concentration ranges should be run individually at least once every 24 hours when the test is in use, once per reagent kit, and following each calibration.

The control intervals and limits should be adapted to each laboratory's individual requirements. Values obtained should fall within the defined limits. Each laboratory should establish corrective measures to be taken if values fall outside the defined limits.

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

**Calculation**

The analyzer automatically calculates the analyte concentration of each sample (either in nmol/L, ng/mL or ng/dL).

Conversion factors:

nmol/L x 0.651 = ng/mL
nmol/L x 65.09998 = ng/dL
ng/mL x 1.536 = nmol/L

**Limitations - interference**

The assay is unaffected by icterus (bilirubin < 599 µmol/L or < 35 mg/dL), hemolysis (Hb < 1.2 mmol/L or < 2.0 g/dL), lipemia (Intralipid < 1800 mg/dL) and biotin (< 40.9 nmol/L or < 10 ng/mL).

Criterion: Recovery within ± 10 % of initial value.

Samples should not be taken from patients receiving therapy with high biotin doses (i.e. > 5 mg/day) until at least 8 hours following the last biotin administration.

No interference was observed from rheumatoid factors up to a concentration of 1500 IU/mL and samples from dialysis patients.

In vitro tests were performed on 26 commonly used pharmaceuticals. No interference with the assay was found.

Therapy with amiodarone can lead to depressed T3 values.

Phenytoin, phenylbutazone, and salicylates cause release of T3 from the binding proteins, thus leading to a reduction in the total T3 hormone level at normal fT3 levels.<sup>8</sup>

Autoantibodies to thyroid hormones can interfere with the assay.

Binding protein anomalies seen with FDH (familial dysalbuminemic hyperthyroxinemia), for example, may cause values which, while characteristic of the condition, deviate from the expected results.<sup>9</sup>

Pathological concentrations of binding proteins (TBG, albumin) can lead to total T3 values outside the normal range being found despite a euthyroid metabolic state (e.g. in NTI<sup>b</sup>-patients, pregnancy, use of oral contraceptives). In such cases a fT3 or fT4 determination is indicated.

In rare cases, interference due to extremely high titers of antibodies to analyte-specific antibodies, streptavidin or ruthenium can occur. These effects are minimized by suitable test design.

For diagnostic purposes, the results should always be assessed in conjunction with the patient's medical history, clinical examination and other findings.

b) NTI = non thyroidal illness

**Limits and ranges****Measuring range**

0.300-10.0 nmol/L or 0.195-6.51 ng/mL (defined by the lower detection limit and the maximum of the master curve). Values below the lower detection limit are reported as < 0.300 nmol/L or < 0.195 ng/mL. Values above the measuring range are reported as > 10.0 nmol/L or > 6.51 ng/mL.

**Lower limits of measurement****Lower detection limit of the test**

Lower detection limit: 0.300 nmol/L or 0.195 ng/mL

The lower detection limit represents the lowest analyte level that can be distinguished from 0.

**Dilution**

Not necessary due to the broad measuring range.

**Expected values**

1.3-3.1 nmol/L or 0.8-2.0 ng/mL: euthyroid

The values correspond to the 2.5<sup>th</sup> and 97.5<sup>th</sup> percentiles of findings from a total of 514 healthy test subjects.

Status: MCE Elecsys 2010, status 1996, verified 1st quarter 1998

**Triiodothyronine**

For detailed information about reference intervals in children, adolescents and pregnant women, refer to the brochure "Reference Intervals for Children and Adults", English: [REF] 04640292, German: [REF] 04625889.

This booklet also contains results of a detailed study about influencing factors on thyroid parameters in a well characterized reference group of adults. Different inclusion and exclusion criteria were applied (e.g. sonographic results (thyroid volume and density) as well as criteria according to the guidelines of the National Academy of Clinical Biochemistry - NACB).

Each laboratory should investigate the transferability of the expected values to its own patient population and if necessary determine its own reference ranges.

**Specific performance data**

Representative performance data on the analyzers are given below. Results obtained in individual laboratories may differ.

**Precision**

Precision was determined using Elecsys reagents, pooled human sera, and controls in a modified protocol (EP5-A) of the CLSI (Clinical and Laboratory Standards Institute): 6 times daily for 10 days (n = 60); repeatability on MODULAR ANALYTICS E170 analyzer, n = 21. The following results were obtained:

Elecsys 2010 and cobas e 411 analyzers								
		Repeatability			Intermediate precision			
Sample	Mean		SD			CV		
	nmol/L	ng/mL	nmol/L	ng/mL	%	nmol/L	ng/mL	%
HS <sup>c)</sup> 1	1.22	0.79	0.04	0.03	3.6	0.07	0.05	5.4
HS 2	2.87	1.87	0.12	0.08	4.2	0.14	0.09	4.7
HS 3	5.09	3.31	0.27	0.18	5.3	0.27	0.18	5.4
PC U <sup>d)</sup> 1	2.12	1.38	0.09	0.06	4.1	0.10	0.07	4.8
PC U2	6.31	4.11	0.22	0.14	3.5	0.26	0.17	4.1

c) HS = human serum

d) PC U = PreciControl Universal

MODULAR ANALYTICS E170, cobas e 601 and cobas e 602 analyzers					
Repeatability					
Sample	Mean		SD		CV
	nmol/L	ng/mL	nmol/L	ng/mL	%
HS 1	1.19	0.77	0.04	0.02	3.1
HS 2	2.16	1.41	0.05	0.03	2.2
HS 3	6.83	4.45	0.11	0.07	1.5
PC U1	2.36	1.54	0.03	0.02	1.3
PC U2	5.83	3.79	0.07	0.05	1.3

MODULAR ANALYTICS E170, cobas e 601 and cobas e 602 analyzers					
Intermediate precision					
Sample	Mean		SD		CV
	nmol/L	ng/mL	nmol/L	ng/mL	%
HS 1	1.24	0.80	0.06	0.04	4.5
HS 2	2.28	1.49	0.08	0.05	3.4
HS 3	7.08	4.61	0.26	0.17	3.7
PC U1	2.42	1.58	0.08	0.05	3.4
PC U2	5.81	3.78	0.20	0.13	3.4

**Method comparison**

A comparison of the Elecsys T3 assay (y) with the Enzygum-Test T3 method (x) using clinical samples gave the following correlations (nmol/L):

Number of samples measured: 300

Passing/Bablok<sup>10</sup>

$$y = 1.26x - 0.56$$

$$r = 0.754$$

Linear regression

$$y = 1.18x - 0.35$$

$$r = 0.957$$

The sample concentrations were between approximately 0.5 and 9 nmol/L (0.3 and 5.9 ng/mL).

**Analytical specificity**

For the antibody derivative used, the following cross-reactivities were found:

D-T3 100 %; L-T4 < 0.16 %; D-T4 < 0.16 %; L-rT3 < 0.04 %; L-T2 < 1.0 %; 3,3',5-triiodothyroacetic acid 106 %; 3,3',5,5'-tetraiodothyroacetic acid < 0.01 %.

**References**


- 1 Wheeler MH, Lazarus JH. Diseases of the Thyroid. London, Glasgow, Weinheim, New York, Tokyo, Melbourne, Madras: Chapman and Hall Medical, 1994:107-115.
- 2 Pfannenstiel P, Saller B. Schilddrüsenerkrankungen Diagnose und Therapie. Berliner Medizinische Verlagsanstalt GmbH, 1995;2:30-32,60-62.
- 3 Fisher DA. Physiological variations in thyroid hormones; physiological and pathophysiological considerations. Clinical Chemistry 1996;42:135-139.
- 4 Tietz NW. Clinical Guide To Laboratory Tests. 3rd ed. Philadelphia, Pa: WB Saunders Co, 1995:612.
- 5 Surks MI, Chopra IJ, Mariash CN, et al. American Thyroid Association guidelines for use of laboratory tests in thyroid disorders. JAMA 1990;63:1529-1532.
- 6 Becker DV, Bigos ST, Gaitan E, et al. Optimal use of blood tests for assessment of thyroid function (letter). JAMA 1993;269:273.
- 7 Klee GG. Clinical usage recommendations and analytic performance goals for total and free triiodothyronine measurements. Clinical Chemistry 1996;42:155-159.
- 8 Wild D. The Immunoassay Handbook. Stockton Press, 1994:338.
- 9 Wada N, Chiba H, Shimizu C, et al. A Novel Missense Mutation in Codon 218 of the Albumin Gene in a Distinct Phenotype of Familial Dysalbuminemic Hyperthyroxinemia in a Japanese Kindred. Journal of Clinical Endocrinology and Metabolism 1997;82(10):3246-3250.
- 10 Bablok W, Passing H, Bender R, et al. A general regression procedure for method transformation. Application of linear regression procedures for method comparison studies in clinical chemistry, Part III. J Clin Chem Clin Biochem 1988 Nov;26(11):783-790.

For further information, please refer to the appropriate operator's manual for the analyzer concerned, the respective application sheets, the product information and the Method Sheets of all necessary components (if available in your country).

A point (period/stop) is always used in this Method Sheet as the decimal separator to mark the border between the integral and the fractional parts of a decimal numeral. Separators for thousands are not used.

**Symbols**

Roche Diagnostics uses the following symbols and signs in addition to those listed in the ISO 15223-1 standard.

<b>CONTENT</b>	Contents of kit
<b>SYSTEM</b>	Analyzers/Instruments on which reagents can be used
<b>REAGENT</b>	Reagent
<b>CALIBRATOR</b>	Calibrator
	Volume after reconstitution or mixing

# T3

Triiodothyronine

cobas®

## FOR US CUSTOMERS ONLY: LIMITED WARRANTY

Roche Diagnostics warrants that this product will meet the specifications stated in the labeling when used in accordance with such labeling and will be free from defects in material and workmanship until the expiration date printed on the label. THIS LIMITED WARRANTY IS IN LIEU OF ANY OTHER WARRANTY, EXPRESS OR IMPLIED, INCLUDING ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR PARTICULAR PURPOSE. IN NO EVENT SHALL ROCHE DIAGNOSTICS BE LIABLE FOR INCIDENTAL, INDIRECT, SPECIAL OR CONSEQUENTIAL DAMAGES.

COBAS, COBAS E, ELECSYS, MODULAR and PRECICONTROL are trademarks of Roche. INTRALIPID is a trademark of Fresenius Kabi AB.

All other product names and trademarks are the property of their respective owners.

Significant additions or changes are indicated by a change bar in the margin.

© 2014, Roche Diagnostics



Roche Diagnostics GmbH, Sandhofer Strasse 116, D-68305 Mannheim  
[www.roche.com](http://www.roche.com)



Distribution in USA by:

Roche Diagnostics, Indianapolis, IN

US Customer Technical Support 1-800-428-2336