

CYFRA 21-1

CYFRA 21-1

cobas®

| REF | Σ | SYSTEM |
|--------------|----------|--|
| 11820966 122 | 100 | Elecsys 2010 MODULAR ANALYTICS E170 cobas e 411 cobas e 601 cobas e 602 |

English

Please note

The measured CYFRA 21-1 value of a patient's sample can vary depending on the testing procedure used. The laboratory finding must therefore always contain a statement on the CYFRA 21-1 assay method used. CYFRA 21-1 values determined on patient samples by different testing procedures cannot be directly compared with one another and could be the cause of erroneous medical interpretations. If there is a change in the CYFRA 21-1 assay procedure used while monitoring therapy, then the CYFRA 21-1 values obtained upon changing over to the new procedure must be confirmed by parallel measurements with both methods.

Intended use

Immunoassay for the in vitro quantitative determination of fragments of cytokeratin 19 in human serum and plasma.

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

Summary

Cytokeratins are structural proteins forming the subunits of epithelial intermediary filaments. Twenty different cytokeratin polypeptides have so far been identified. Due to their specific distribution patterns they are eminently suitable for use as differentiation markers in tumor pathology. Intact cytokeratin polypeptides are poorly soluble, but soluble fragments can be detected in serum.^{1,2,3,4}

With the aid of two specific monoclonal antibodies (KS 19.1 and BM 19.21), CYFRA 21-1 measures a fragment of cytokeratin 19 having a molecular weight of approximately 30000 daltons.⁵

The main indication for CYFRA 21-1 is monitoring the course of non-small cell lung cancer (NSCLC).^{2,5,6}

CYFRA 21-1 is also suitable for course-monitoring in myoinvasive cancer of the bladder.⁷

Good specificity is shown by CYFRA 21-1 relative to benign lung diseases (pneumonia, sarcoidosis, tuberculosis, chronic bronchitis, bronchial asthma, emphysema).^{8,9}

Slightly elevated values (up to 10 ng/mL) are rarely found in marked benign liver diseases and renal failure. There is no correlation with sex, age or smoking.¹⁰ The values are also unaffected by pregnancy.

The primary diagnosis of pulmonary carcinoma should be made on the basis of clinical symptomatology, imaging or endoscopic procedures and intraoperative findings.

An unclear circular focus in the lung together with CYFRA 21-1 values > 30 ng/mL indicate with high probability the existence of primary bronchial carcinoma.

High CYFRA 21-1 serum levels indicate an advanced tumor stage and a poor prognosis.¹¹ A normal or only slightly elevated value does not rule out the presence of a tumor.

Successful therapy is documented by a rapid fall in the CYFRA 21-1 serum level into the normal range. A constant CYFRA 21-1 value or a slight or only slow decrease in the CYFRA 21-1 value indicates incomplete removal of a tumor or the presence of multiple tumors with corresponding therapeutic and prognostic consequences. Progression of the disease is often shown earlier by increasing CYFRA 21-1 values than by clinical symptomatology and imaging procedures.

Test principle

Sandwich principle. Total duration of assay: 18 minutes.

- 1st incubation: 20 µL of sample, a biotinylated monoclonal cytokeratin 19-specific antibody, and a monoclonal cytokeratin 19-specific antibody labeled with a ruthenium complex^{a)} form a sandwich complex.
- 2nd incubation: After addition of streptavidin-coated microparticles, the 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.

a) Tris(2,2'-bipyridyl)ruthenium(II)-complex (Ru(bpy)₃²⁺)

Reagents - working solutions

The reagent rackpack is labeled as CYFRA.

- M Streptavidin-coated microparticles (transparent cap), 1 bottle, 6.5 mL:
Streptavidin-coated microparticles 0.72 mg/mL; preservative.
- R1 Anti-cytokeratin 19-Ab-biotin (gray cap), 1 bottle, 10 mL:
Biotinylated monoclonal anti-cytokeratin 19 antibody (KS 19.1; mouse) 1.5 mg/L, phosphate buffer 100 mmol/L, pH 7.2; preservative.
- R2 Anti-cytokeratin 19-Ab~Ru(bpy)₃²⁺ (black cap), 1 bottle, 10 mL:
Monoclonal anti-cytokeratin 19 antibody (BM 19.21; mouse) labeled with ruthenium complex 2 mg/L; phosphate buffer 100 mmol/L, pH 7.2; 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.

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

Li-, Na-heparin, K₃-EDTA and sodium citrate plasma. When sodium citrate is used, the results must be corrected by + 10 %.

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

Stable for 4 weeks at 2-8 °C, 6 months at -20 °C. Freeze only once.¹²

It is recommended that the samples be mixed by careful swirling or by placing on a roller mixer (max. 5 min). Homogenization of samples using electric vibration mixers must be limited to a maximum of 5 seconds. Longer mixing times lead to lower values being found.

Contamination of the sample with saliva leads to falsely elevated results.¹²

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] 11820974322, CYFRA 21-1 CalSet, for 4 x 1 mL
 - [REF] 11776452122, PreciControl Tumor Marker, for 2 x 3 mL each of PreciControl Tumor Marker 1 and 2
 - [REF] 11732277122, Diluent Universal, 2 x 16 mL sample diluent or [REF] 03183971122, Diluent Universal, 2 x 36 mL sample diluent
 - 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

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 the Enzyun-Test CYFRA 21-1 method.

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 Tumor Marker.

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 ng/mL or µg/L).

Limitations - interference

The assay is unaffected by icterus (bilirubin < 1112 µmol/L or < 65 mg/dL), hemolysis (Hb < 0.93 mmol/L or < 1.5 g/dL), lipemia (Intralipid < 1500 mg/dL) and biotin (< 205 nmol/L or < 50 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.

There is no high-dose hook effect at CYFRA 21-1 concentrations up to 2000 ng/mL.

In vitro tests were performed on 28 commonly used pharmaceuticals. No interference with the assay was found.

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.

Limits and ranges

Measuring range

0.100-500 ng/mL (defined by the lower detection limit and the maximum of the master curve). Values below the lower detection limit are reported as

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< 0.100 ng/mL. Values above the measuring range are reported as > 500 ng/mL (or up to 1000 ng/mL for 2-fold diluted samples).

Lower limits of measurement

Lower detection limit of the test

Lower detection limit: ≤ 0.10 ng/mL

The lower detection limit represents the lowest measurable analyte level that can be distinguished from zero. It is calculated as the value lying two standard deviations above that of the lowest standard (master calibrator, standard 1 + 2 SD, repeatability study, n = 21).

Dilution

Samples with CYFRA 21-1 concentrations above the measuring range can be diluted with Diluent Universal. The recommended dilution is 1:2 (either automatically by the MODULAR ANALYTICS E170, Elecsys 2010 or **cobas e** analyzers or manually). The concentration of the diluted sample must be > 250 ng/mL.

After manual dilution, multiply the result by the dilution factor.

After dilution by the analyzers, the MODULAR ANALYTICS E170, Elecsys 2010 and **cobas e** software automatically takes the dilution into account when calculating the sample concentration.

Expected values

The cutoff limit is 3.3 ng/mL. Specificity, as determined on a group of patients with benign lung diseases (n = 526) is 95 %.

Clearly elevated CYFRA 21-1 concentrations can also be found in samples from patients with acute pneumonia, tuberculosis and interstitial pulmonary diseases. Concentrations above the reference range are also observed in cases of liver cirrhosis and renal failure.⁷

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 ng/mL | SD ng/mL | CV % | SD ng/mL | CV % |
| Human serum 1 | 2.68 | 0.06 | 2.1 | 0.13 | 4.7 |
| Human serum 2 | 6.86 | 0.14 | 2.0 | 0.23 | 3.3 |
| Human serum 3 | 21.5 | 0.36 | 1.7 | 0.66 | 3.1 |
| PreciControl TM ^{b)} 1 | 5.04 | 0.10 | 2.0 | 0.12 | 2.4 |
| PreciControl TM2 | 29.9 | 0.49 | 1.6 | 0.63 | 2.1 |

b) TM = Tumor Marker

| MODULAR ANALYTICS E170, cobas e 601 and cobas e 602 analyzers | | | | | | |
|---|---------------|-------------|---------|------------------------|-------------|---------|
| | Repeatability | | | Intermediate precision | | |
| Sample | Mean ng/mL | SD ng/mL | CV % | Mean ng/mL | SD ng/mL | CV % |
| Human serum 1 | 2.60 | 0.04 | 1.5 | 2.65 | 0.07 | 2.7 |
| Human serum 2 | 5.51 | 0.06 | 1.2 | 5.51 | 0.13 | 2.3 |
| Human serum 3 | 57.0 | 0.62 | 1.1 | 56.0 | 1.10 | 2.0 |
| PreciControl TM1 | 5.06 | 0.11 | 2.1 | 5.12 | 0.13 | 2.6 |
| PreciControl TM2 | 33.4 | 0.53 | 1.6 | 33.9 | 0.65 | 1.9 |

Method comparison

A comparison of the Elecsys CYFRA 21-1 assay (y) with the Enzygum-Test CYFRA 21-1 method (x) using clinical samples gave the following correlations:

Number of samples measured: 76

| Passing/Bablok ¹³ | Linear regression |
|------------------------------|--------------------|
| $y = 0.98x - 0.30$ | $y = 0.95x - 0.10$ |
| $\tau = 0.941$ | $r = 0.993$ |

The sample concentrations were between approximately 1.0 and approximately 44 ng/mL.

Analytical specificity

The monoclonal anti-cytokeratin 19 antibodies recognize a fragment of the cytokeratin 19 peptide. There is no cross-reactivity with cytokeratins 8 and 18.

References

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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.

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CYFRA 21-1**cobas®****Symbols**

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

| | |
|---|---|
|  | Contents of kit |
|  | Analyzers/Instruments on which reagents can be used |
|  | Reagent |
|  | Calibrator |
|  | Volume after reconstitution or mixing |

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Roche Diagnostics GmbH, Sandhofer Strasse 116, D-68305 Mannheim
www.roche.com

