Primerdesign™ Ltd

## Human Immunodeficiency Virus Types 1 & 2 and Hepatitis Viruses B and C

genesig®PLEX kit

100 tests

GENESIG

Kits by Primerdesign

For general laboratory and research use only



genesig<sup>®</sup>PLEX HIV1/HIV2/HBV/HCV kit handbook HB10.44.02 Published Date: 24/01/2020

### Introduction

#### HIV1 & HIV2

Human immunodeficiency virus (commonly known as HIV) is a retrovirus that is the cause of the disease known as AIDS (Acquired Immunodeficiency Syndrome), a syndrome where the immune system begins to fail, leading to many life-threatening opportunistic infections.

HIV is transmitted through direct contact of a mucous membrane with a bodily fluid containing HIV, such as blood, semen, vaginal fluid, preseminal fluid or breast milk. This transmission can come in the form of: penetrative (anal or vaginal) sex, oral sex, blood transfusion, contaminated needles, exchange between mother and infant during pregnancy, childbirth, or breastfeeding, or other exposure to one of the above bodily fluids.

Two species of HIV infect humans: HIV-1 and HIV-2. HIV-1 is hypothesised to have originated in southern Cameroon after jumping from wild chimpanzees (*Pan troglodytes troglodytes*) to humans during the twentieth century. HIV-2 is hypothesised to have originated from the Sooty Mangabey (*Cercocebus atys*), an Old-World monkey of Guinea-Bissau, Gabon, and Cameroon. HIV-1 is more virulent, more easily transmitted and is the cause of the majority of HIV infections globally, while HIV-2 is less easily transmitted and is largely confined to West Africa.

#### HBV & HCV

Originally known as serum hepatitis, hepatitis B (HBV) has only been recognized as such since World War II and has caused current epidemics in parts of Asia and Africa. Hepatitis B is recognized as endemic in China and various other parts of Asia. Over one-third of the world's population has been or is actively infected by hepatitis B virus (HBV). The hepatitis B virus is a member of the Hepadnavirus family. It consists of a proteinaceous core particle containing the viral genome in the form of double stranded DNA with single-stranded regions and an outer lipid-based envelope with embedded proteins. The envelope proteins are involved in viral binding and release into susceptible cells.

The hepatitis C virus (HCV) is a small, enveloped, single-stranded, positive sense RNA virus in the family Flaviviridae. HCV mainly replicates within hepatocytes in the liver, although there is clear evidence for replication in lymphocytes or monocytes. Circulating HCV particles bind to receptors on the surfaces of hepatocytes and subsequently enter the cells. Once inside the hepatocyte, HCV utilizes the intracellular machinery necessary to accomplish its own replication.

### Specificity

The genesigPLEX kit is designed for the in vitro detection of Human Immunodeficiency Viruses 1 & 2 and Human Hepatitis Viruses B and C.

The primers and probe sequences in this kit have 100% homology with a broad range of clinically relevant reference sequences based on a comprehensive bioinformatics analysis. They therefore have a very broad detection profile.

If you require further information or have a specific question about the detection profile of this kit, then please send an email to <u>enquiry@primerdesign.co.uk</u> and our bioinformatics team will answer your question.

### **Kit contents**

• Multiplex primer/probe mix (100 reactions BROWN) FAM, VIC, ROX and Cy5 labelled (see table below)

Target	Fluorophore
HIV1/HIV2	FAM
HBV	VIC
HCV	ROX
Endogenous control	Cy5

- Multiplex positive control template (RED)
- Lyophilised oasig<sup>™</sup> OneStep Master Mix (RED)
- oasig<sup>™</sup> resuspension buffer (BLUE)
- **Template preparation buffer (YELLOW)** for resuspension of positive control template
- **RNase/DNase free water (WHITE)** for resuspension of primer/probe mix

# Reagents and equipment to be supplied by the user

#### **Real-time PCR Instrument**

#### **RNA extraction kit**

This kit is recommended for use with genesig EASY DNA/RNA Extraction kit. However, it is designed to work well with all processes that yield high quality RNA with minimal PCR inhibitors.

**Pipettors and tips** 

Vortex and centrifuge

Thin walled 1.5ml tubes

qPCR plates

### Kit storage and stability

This kit is stable at room temperature but should be stored at -20°C on arrival. Once the lyophilised components have been resuspended they should not be exposed to temperatures above -20°C for longer than 30 minutes at a time and unnecessary repeated freeze/thawing should be avoided. The kit is stable for six months from the date of resuspension under these circumstances. Primerdesign does not recommend using the kit after the expiry date stated on the pack.

### Suitable sample material

All kinds of sample material suited for PCR amplification can be used. Please ensure the samples are suitable in terms of purity, concentration, and RNA/DNA integrity. Always run at least one negative control with the samples. To prepare a negative control, replace the template RNA sample with RNase/DNase free water.

### Dynamic range of test

Under optimal PCR conditions genesig kits have very high priming efficiencies of >90% and can detect between  $1X10^8$  and  $1X10^2$  copies of target template.

### **Notices and disclaimers**

This product is developed, designed and sold for research purposes only. It is not intended for human diagnostic or drug purposes or to be administered to humans unless clearly expressed for that purpose by the Food and Drug Administration in the USA or the appropriate regulatory authorities in the country of use. During the warranty period Primerdesign genesig detection kits allow precise and reproducible data recovery combined with excellent sensitivity. For data obtained by violation to the general GLP guidelines and the manufacturer's recommendations the right to claim under guarantee is expired. PCR is a proprietary technology covered by several US and foreign patents. These patents are owned by Roche Molecular Systems Inc. and have been sub-licensed by PE Corporation in certain fields. Depending on your specific application you may need a license from Roche or PE to practice PCR. Additional information on purchasing licenses to practice the PCR process may be obtained by contacting the Director of Licensing at Roche Molecular Systems, 1145 Atlantic Avenue, Alameda, CA 94501 or Applied Biosystems business group of the Applera Corporation, 850 Lincoln Centre Drive, Foster City, CA 94404. In addition, the 5' nuclease assay and other homogeneous amplification methods used in connection with the PCR process may be covered by U.S. Patents 5,210,015 and 5,487,972, owned by Roche Molecular Systems, Inc, and by U.S. Patent 5,538,848, owned by The Perkin-Elmer Corporation.

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### **Principles of the test**

#### **Real-time PCR**

Individual primer and probes designed for each virus have been combined into a single reaction and these can be detected through the different fluorescent channels as described in the kit contents.

The primer and probe mix provided exploits the so-called TaqMan<sup>®</sup> principle. During PCR amplification, forward and reverse primers hybridize to the target cDNA. Fluorogenic probes are included in the same reaction mixture which consists of a DNA probe labelled with a 5`-dye and a 3`-quencher. During PCR amplification, the probe is cleaved, and the reporter dye and quencher are separated. The resulting increase in fluorescence can be detected on a range of qPCR platforms.

#### **Positive control**

For a positive control, the kit contains a single positive control that contains templates for the 4 targets in the test. The kit positive control will give an HIV1 and HIV2 signal through the FAM channel, an HBV signal through the VIC channel and an HCV signal through the ROX channel. Each time the kit is used, at least one positive control reaction must be included in the run. A positive result indicates that the primers and probes for detecting each virus are working properly in that particular run. If a negative result is obtained the test results are invalid and must be repeated. Care should be taken to ensure that the positive control does not contaminate any other kit component which would lead to false positive results. This can be achieved by handling these components in a post PCR environment. Care should also be taken to avoid cross-contamination of other samples when adding the positive control to the run. This can be avoided by sealing all other samples and negative controls before pipetting the positive control into the positive control well.

#### **Negative control**

To confirm the absence of contamination, a negative control reaction should be included every time the kit is used. For this reaction, the RNase/DNase free water should be used instead of template. A negative result indicates that the reagents have not become contaminated while setting up the run.

#### **Endogenous control**

To confirm extraction of a valid biological template, the single primer/probe mix supplied contains primers and probe designed to detect an endogenous gene. Detection of the endogenous control is through the Cy5 channel. A poor endogenous control signal may indicate that the sample did not contain sufficient biological material.

### **Resuspension protocol**

To minimise the risk of contamination with foreign DNA, we recommend that all pipetting be performed in a PCR clean environment. Ideally this would be a designated PCR lab or PCR cabinet. Filter tips are recommended for all pipetting steps.

1. Pulse-spin each tube in a centrifuge before opening.

This will ensure lyophilised primer and probe mix is in the base of the tube and is not spilt upon opening the tube.

2. Resuspend the primer/probe mix in the RNase/DNase free water supplied, according to the table below:

To ensure complete resuspension, vortex the tube thoroughly.

Component – resuspend in water	Volume
Pre-PCR pack	
Multiplex primer/probe mix (BROWN)	110µl

3. Resuspend the positive control template in the template preparation buffer supplied, according to the table below:

To ensure complete resuspension, vortex the tube thoroughly.

Component – resuspend in template preparation buffer	Volume
Post-PCR heat-sealed foil	
Positive control template (RED)*	500µl
* This component contains high copy number template and is a VER	significant

contamination risk. It must be opened and handled in a separate laboratory environment, away from the other components.

4. Resuspend the lyophilised oasig OneStep Master Mix in oasig resuspension buffer, according to the table below:

Component – resuspend in oasig resuspension buffer	Volume
Lyophilised oasig OneStep Master Mix (RED)	525µl

### **RNA** extraction

1. Complete the RNA extraction according to the manufacturer's recommended protocols.

### **OneStep RT-qPCR detection protocol**

#### For optimum performance and sensitivity

All pipetting steps and experimental plate set up should be performed on ice. After the plate is poured proceed immediately to the OneStep amplification protocol. Prolonged incubation of reaction mixes at room temperature can lead to PCR artifacts that reduce the sensitivity of detection.

**1.** For each RNA sample prepare a reaction mix according to the table below: Include sufficient reactions for positive and negative controls.

Component	Volume
oasig OneStep Master Mix ( <b>RED</b> )	10µl
Multiplex primer/probe mix (BROWN)	1µl
RNase/DNase free water (WHITE)	4µl
Final volume	15µI

- 2. Pipette 15µl of these mixes into each well according to your qPCR experimental plate set up.
- 3. Pipette 5µl of RNA sample into each well according to your experimental plate set up.

For negative control wells use 5µl of RNase/DNase free water. The final volume in each well is 20µl.

4. Pipette 5µl of positive control template into each well according to your plate set up.

The positive control contains templates for HIV1, HIV2, HBV and HCV. The final volume in each well is 20µl.

### **OneStep RT-qPCR amplification protocol**

Amplification conditions using oasig OneStep Master Mix

	Step	Time	Temp
	Reverse transcription	10 mins	55°C
	Enzyme activation	2 mins	95°C
Cycling x 50	Denaturation	10 secs	95°C
	DATA COLLECTION*	60 secs	60°C

\* Fluorogenic data should be collected during this step through the FAM, VIC, ROX and Cy5 channels.

### Interpretation of results

#### **Positive control**

The positive control well should give an amplification plot through the FAM channel (HIV1/HIV2), the VIC channel (HBV) and the ROX channel (HCV). There is no endogenous control template within the positive control so the Cy5 channel should give no signal (flat amplification plot). The positive control signals indicate that the kit is working correctly to detect each virus.

#### No template control (NTC)

The NTC should give a flat line (flat amplification plots) through all channels. Signals in the NTC indicate cross contamination during plate set up.

#### **Endogenous control**

The signal obtained from the endogenous control reaction will vary according to the amount of biological material present in each sample. An early signal indicates the presence of a good yield of biological material. A late signal suggests that little biological material is present in the sample.

#### Sample data

Presence of the viruses are detected in the channels indicated in the kit contents section. Positive signals indicate positive tests for those viruses. It may be possible for samples to contain multiple viruses, therefore positive results in the FAM, VIC and ROX channels may be present.

### Summary of data interpretation

Target (FAM/VIC/ROX)	Endogenous control (Cy5)	Positive Control	Negative Control	Interpretation
FAM +	+/-	+	-	HIV1/HIV2 POSITIVE RESULT
VIC +	+/-	+	-	HBV POSITIVE RESULT
ROX +	+/-	+	-	HCV POSITIVE RESULT
-	+	+	-	NEGATIVE RESULT

+/-	+/-	+	≤35	<b>EXPERIMENT FAILED</b> Due to test contamination
+/-	+/-	+	>35	*
-	-	+	-	SAMPLE PREPARATION FAILED
+/-	+/-	-	+/-	EXPERIMENT FAILED

Positive control template (RED) is expected to amplify between Cq 16 and 23. Failure to satisfy this quality control criterion is a strong indication that the experiment has been compromised.

\* Where the test sample is positive, and the negative control is positive with a Cq >35, the sample must be reinterpreted based on the relative signal strength of the two results:



If the sample amplifies > 5 Cq earlier than the negative control then the sample should be reinterpreted (via the table above) with the negative control verified as negative.



If the sample amplifies < 5 Cq earlier than the negative control then the positive sample result is invalidated and the result should be determined inconclusive due to test contamination. The test for this sample should be repeated.