



Enabling Legendary Discovery™

## LEGEND MAX™

ELISA Kit with Pre-coated Plates



## Human IL-29 (IFN- $\lambda$ 1)

Cat. No. 446307 1 Plate

446308 5 Plates

ELISA Kit for Accurate Quantitation of Human IL-29  
(IFN- $\lambda$ 1) from Cell Culture Supernatant, Serum, Plasma  
and Other Biological Fluids

BioLegend, Inc.  
[biolegend.com](http://biolegend.com)

***It is highly recommended that this manual be read in its entirety before using this product. Do not use this kit beyond the expiration date.***

*For Research Purposes Only. Not for use in diagnostic or therapeutic procedures. Purchase does not include or carry the right to resell or transfer this product either as a stand-alone product or as a component of another product. Any use of this product other than the permitted use without the express written authorization of BioLegend is strictly prohibited.*



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# LEGEND MAX™ Human IL-29 ELISA Kit

## Introduction:

Interleukin-29 (IL-29, IFN- $\lambda$ 1) is a member of the type III interferon family. IL-29 shows high amino acid sequence identity to IL-28A (IFN- $\lambda$ 2, 75%) and IL-28B (IFN- $\lambda$ 3, 76%). IL-29 is produced by human peripheral blood mononuclear cells and dendritic cells upon viral infection, TLR stimulation, or other type I IFN agonists. IL-29 has been demonstrated to upregulate MHC I expression on target cells; in addition, IL-29 also mediates the antiviral immune response to several viruses including Hepatitis B (HBV), Hepatitis C (HCV), and Human Immunodeficiency Virus (HIV). Increased serum levels of IL-29 have also been reported in Hashimoto's thyroiditis patients.

The BioLegend LEGEND MAX™ Human IL-29 (IFN- $\lambda$ 1) ELISA Kit is a Sandwich Enzyme-Linked Immunosorbent Assay (ELISA) with a 96-well strip plate that is pre-coated with a polyclonal goat anti-human IL-29 capture antibody. The detection antibody is a biotinylated polyclonal goat anti-human IL-29 antibody. This kit is specifically designed for the accurate quantitation of human IL-29 (IFN- $\lambda$ 1) from cell culture supernatant, serum, plasma, and other biological fluids. This kit is analytically validated with ready-to-use reagents.

## Materials Provided:

Description	Quantity (1 plate)	Quantity (5 plates)	Volume (per bottle)	Part #
Anti-human IL-29 Pre-coated 96-well Strip Microplate	1 plate	5 plates		75441
Human IL-29 Detection Antibody	1 bottle	5 bottles	12 mL	75442
Human IL-29 Standard	2 vials	10 vials	lyophilized	75445
Avidin-HRP	1 bottle	5 bottles	12 mL	77897
Assay Buffer A	1 bottle	5 bottles	25 mL	78232
Wash Buffer (20X)	1 bottle	5 bottles	50 mL	78233
Substrate Solution F	1 bottle	5 bottles	12 mL	76335
Stop Solution	1 bottle	5 bottles	12 mL	79133
Plate Sealers	4 sheets	20 sheets		78101

**Materials to be Provided by the End-User:**

- Microplate reader able to measure absorbance at 450 nm
- Adjustable pipettes to measure volumes ranging from 1 µL to 1,000 µL
- Deionized water
- Wash bottle or automated microplate washer
- Log-Log graph paper or software for data analysis
- Polypropylene tubes to prepare standard dilutions
- Timer
- Plate Shaker
- Polypropylene vials

**Storage Information:**

Store unopened kit components between 2°C and 8°C. Do not use this kit beyond its expiration date.

<b>Opened or Reconstituted Components</b>	
Microplate wells	If not all microplate strips are used, remove the excess strips by pressing up from underneath each strip. Place excess strips back in the foil pouch with the included desiccant pack and reseal. Store between 2°C and 8°C for up to one month.
Standard	Use freshly reconstituted standard.
Detection Antibody	Store opened reagents between 2°C and 8°C and use within one month.
Avidin-HRP	
Assay Buffer A	
Wash Buffer (20X)	
Substrate Solution F	
Stop Solution	

**Health Hazard Warnings:**

1. Reagents that contain preservatives may be harmful if ingested, inhaled or absorbed through the skin. Refer to the MSDS online at BioLegend's website for details ([www.biolegend.com/msds](http://www.biolegend.com/msds)).
2. Substrate Solution F is harmful if inhaled or ingested. Avoid skin, eye and clothing contact.

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3. To reduce the likelihood of blood-borne transmission of infectious agents, handle all serum, plasma and other biological fluids in accordance with NCCLS regulations.
4. Stop Solution contains strong acid. *Wear eye, hand, and face protection.*
5. Before disposing of the plate, rinse it with an excess amount of tap water.

### **Specimen Collection and Handling:**

Specimens should be clear and non-hemolyzed. If possible, unknown samples should be run at a number of dilutions to determine the optimal dilution factor that will ensure accurate quantitation.

Cell Culture Supernatant: If necessary, centrifuge all samples to remove debris prior to analysis. It is recommended that samples be stored at < -70°C. Avoid repeated freeze-thaw cycles.

Serum: Use a serum separator tube and allow clotting for at least 30 minutes, then centrifuge for 10 minutes at 1,000 x *g*. Remove serum layer and assay immediately or store serum samples at < -70°C. Avoid repeated freeze-thaw cycles.

Plasma: Collect blood samples in citrate, heparin or EDTA containing tubes. Centrifuge for 10 minutes at 1,000 x *g* within 30 minutes of collection. Assay immediately or store plasma samples at < -70°C. Avoid repeated freeze-thaw cycles.

### **Reagent and Sample Preparation:**

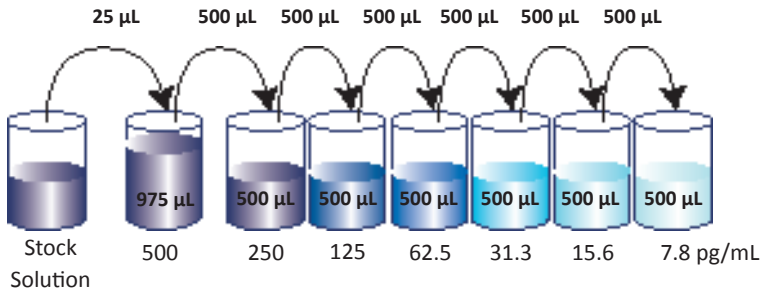
Note: All reagents should be diluted immediately prior to use.

1. Dilute the 20X Wash Buffer to 1X with deionized water. For example, make 1 liter of 1X Wash Buffer by adding 50 mL of 20X Wash Buffer to 950 mL of deionized water. If crystals have formed in the 20X Wash Buffer, bring to room temperature and vortex until dissolved.
2. Reconstitute the lyophilized Human IL-29 Standard by following the instructions described in enclosed LEGEND MAX Kit Lot-Specific Certificate of Analysis/LEGEND MAX Kit Protocol. Allow the reconstituted standard to sit at room temperature for 15-20 minutes, then briefly vortex to mix completely.
3. In general, samples are analyzed without dilutions. However, if dilutions are required, use Assay Buffer A for diluting serum, plasma and cell culture supernatant samples.

## Assay Procedure:

Note: Do not mix reagents from different kits or lots. Reagents and/or antibodies from different manufacturers should not be used with this kit.

1. Bring all reagents to room temperature prior to use. It is strongly recommended that all standards and samples be run in duplicate or triplicate. A standard curve is required for each assay.
2. If not all microplate strips will be used, remove the excess strips by pressing up from underneath each strip. Place excess strips back in the foil pouch with the included desiccant pack and reseal.
3. Prepare 1000  $\mu\text{L}$  of the 500  $\text{pg/mL}$  top standard by diluting 25  $\mu\text{L}$  of the standard stock solution in 975  $\mu\text{L}$  of Assay Buffer A. Perform six two-fold serial dilutions of the 500  $\text{pg/mL}$  top standard in separate tubes using Assay Buffer A as the diluent. Thus, the human IL-29 standard concentrations in the tubes are 500  $\text{pg/mL}$ , 250  $\text{pg/mL}$ , 125  $\text{pg/mL}$ , 62.5  $\text{pg/mL}$ , 31.3  $\text{pg/mL}$ , 15.6  $\text{pg/mL}$  and 7.8  $\text{pg/mL}$ , respectively. Assay Buffer A serves as the zero standard (0  $\text{pg/mL}$ ).



4. Wash the plate 4 times with at least 300  $\mu\text{L}$  of 1X Wash Buffer per well and blot any residual buffer by firmly tapping the plate upside down on absorbent paper. All subsequent washes should be performed similarly.
5. Add 50  $\mu\text{L}$  of Assay Buffer A to each well that will contain either standard dilutions or samples. Then add 50  $\mu\text{L}$  of standard dilutions or samples to the appropriate wells.
6. Seal the plate with a Plate Sealer included in the kit. Shake the plate for 1 minute and incubate the plate overnight (16 to 18 hours) between 2°C and 8°C without shaking.
7. Discard the contents of the plate into a sink, then wash the plate 4 times with 1X Wash Buffer as in step 4.

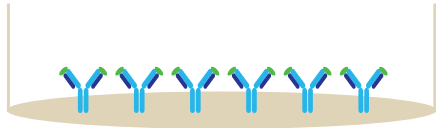
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8. Add 100 µL of Human IL-29 Detection Antibody solution to each well, seal the plate and incubate at room temperature for 1 hour while shaking.
9. Discard the contents of the plate into a sink, then wash the plate 4 times with 1X Wash Buffer as in step 4.
10. Add 100 µL of Avidin-HRP solution to each well, seal the plate and incubate at room temperature for 30 minutes while shaking.
11. Discard the contents of the plate into a sink, then wash the plate 5 times with 1X Wash Buffer as in step 4. For this final wash, soak wells in 1X Wash Buffer for 30 seconds to 1 minute for each wash. This will help minimize background.
12. Add 100 µL of Substrate Solution F to each well and incubate for 15 minutes in the dark. Wells containing human IL-29 should turn blue in color with an intensity proportional to its concentration. It is not necessary to seal the plate during this step.
13. Stop the reaction by adding 100 µL of Stop Solution to each well. The solution color should change from blue to yellow.
14. Read absorbance at 450 nm within 30 minutes. If the reader is capable of reading at 570 nm, the absorbance at 570 nm can be subtracted from the absorbance at 450 nm.

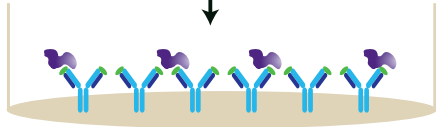


**Assay Procedure Summary**

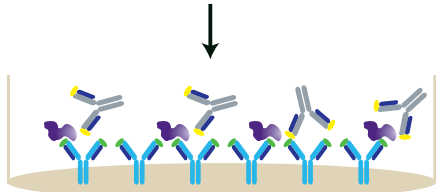
1. Wash 4 times.  
Add 50  $\mu$ L Assay Buffer A to standard wells and sample wells



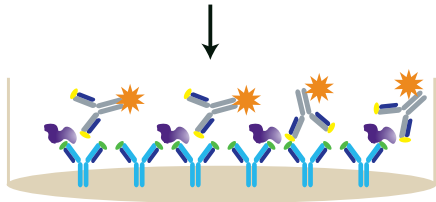
2. Add 50  $\mu$ L of standard or sample, shake for 1 min and incubate overnight (16 to 18 hours) between 2°C and 8°C without shaking



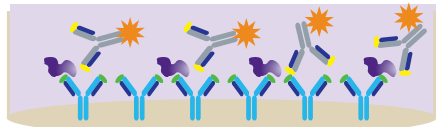
3. Wash 4 times  
Add 100  $\mu$ L Detection Antibody solution  
Incubate 1 hr, RT, shaking



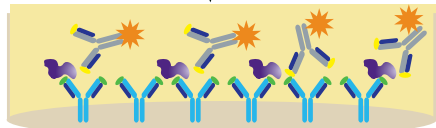
4. Wash 4 times  
Add 100  $\mu$ L Avidin-HRP solution  
Incubate 30 min, RT, shaking



5. Wash 5 times  
Add 100  $\mu$ L Substrate Solution F  
Incubate 15 min, RT, in the dark



6. Add 100  $\mu$ L Stop Solution



7. Read absorbance at 450 nm and 570 nm

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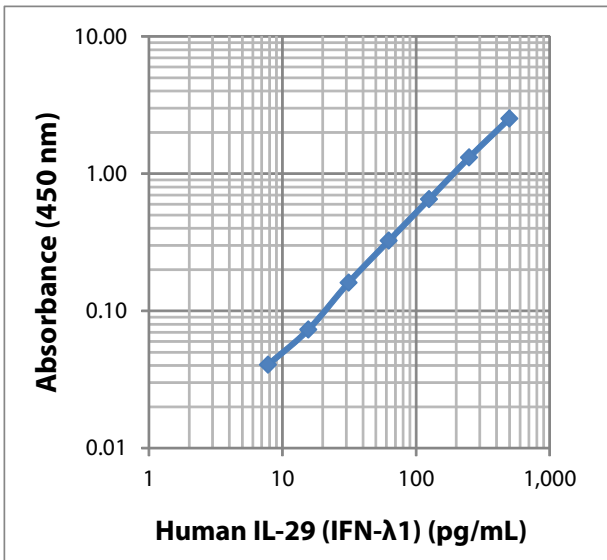
## Calculation of Results:

The data can be best calculated with computer-based curve-fitting software using a 5- or 4-parameter logistics curve-fitting algorithm. If an appropriate software is not available, use log-log graph paper to determine sample concentrations. Determine the mean absorbance for each set of duplicate or triplicate standards, controls, and samples. Plot the standard curve on log-log graph paper with cytokine concentration on the X-axis and absorbance on the Y-axis. Draw a best fit line through the standard points. To determine the unknown cytokine concentrations, find the mean absorbance value of the unknown concentration on the Y-axis and draw a horizontal line to the standard curve. At the point of intersection, draw a vertical line to the X-axis and read the cytokine concentration.

If samples were diluted, multiply the concentration by the appropriate dilution factor. If a test sample's absorbance value falls outside the linear portion of the standard curve, the test sample needs to be re-analyzed at a higher (or lower) dilution as appropriate.

## Typical Data:

This standard curve was generated at BioLegend for demonstration purposes only. A standard curve must be run with each assay.



**Performance Characteristics:**

**Specificity:** This kit recognizes natural and recombinant IL-29. No cross reactivity was observed when this kit was used to analyze the following recombinant proteins at 50 ng/mL.

Human	IFN- $\alpha$ , IFN- $\beta$ 1a, IFN- $\gamma$ , IFN- $\omega$ , IGF-I, IGF-II, IL-3, IL-4, IL-5, IL-6, IL-7, IL-10, IL-11, IL-21, IL-22, IL-23, IL-33, IL-36 $\alpha$ , MIF, MMP-1, MMP-3, MMP-9, sTNF RI, sTNF RII, TGF- $\alpha$ , TGF- $\beta$ 1, TGF- $\beta$ 2, TGF- $\beta$ 3, TIMP-1, TIMP-2, TNF- $\alpha$ , TRANCE
Mouse	IFN- $\alpha$ 1, IFN- $\beta$ 1, IFN- $\zeta$ (Limitin), IGF-I, IL-3, IL-10, IL-21, IL-22, IL-23, IL-25, IL-27, IL-36 $\gamma$

Recombinant human IL-28A and IL-28B show 8.3% and 0.5% cross-reactivity respectively at 50 ng/mL. Recombinant human IL-27 and IL-34 show 0.1% and 0.4% cross-reactivity respectively at 50 ng/mL.

**Sensitivity:** The average minimum detectable concentration of IL-29 is 2.4 pg/mL (n=9).

**Recovery:** Recombinant human IL-29 (400, 200 and 100 pg/mL) was spiked into human serum and plasma samples and then analyzed with the LEGEND MAX™ Human IL-29 (IFN- $\lambda$ 1) ELISA kit.

Sample Type	N	% Recovery
Serum	5	81.0
Citrate Plasma	5	80.5
EDTA Plasma	5	78.4
Heparin Plasma	5	79.9

**Linearity:** Recombinant human IL-29 was spiked into human serum and plasma samples to produce samples within the dynamic range, and then assayed with the kit to determine the dilutional linearity up to 8-fold dilutions.

Sample Type	N	% Linearity
Serum	5	105.6
Citrate Plasma	5	95.5
EDTA Plasma	5	93.1
Heparin Plasma	5	103.4

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***Intra-Assay Precision:*** Two serum samples were spiked with different recombinant human IL-29 concentrations and tested with 16 replicates in one assay.

Concentration	Sample 1	Sample 2
Number of Replicates	16	16
Mean Concentration (pg/mL)	31.7	174.9
Standard Deviation	1.9	10.6
%CV	5.9	6.1

***Inter-Assay Precision:*** Two human samples were spiked with different concentrations of recombinant human IL-29 and assayed in five independent assays by different operators.

Concentration	Sample 1	Sample 2
Number of Assays	5	5
Mean Concentration (pg/mL)	35.7	167.4
Standard Deviation	3.6	21.0
%CV	10.2	12.6

***Normal Biological Samples:***

***Normal Ranges:*** 80 serum and plasma (Citrate, EDTA and Heparin) samples from human donors were tested for endogenous human IL-29.

Sample Type	N	% Detectable	Min (pg/mL)	Max (pg/mL)	Median (pg/mL)
Serum	20	25	ND	7.3	2.8
EDTA	20	35	ND	11.7	1.9
Heparin	20	30	ND	24.0	3.7
Citrate	20	15	ND	12.1	4.6

***Cell Supernatant:*** Peripheral blood mononuclear cells (PBMC) ( $1 \times 10^6$  cells/mL) was cultured and stimulated under different conditions. The cell supernatants were collected after 24 hours and assayed for human IL-29.

Stimulation Condition	Concentration (pg/mL)
Unstimulated	ND
50 µg/mL of poly(I:C)	190.2
2 µg/mL of R848	96.9

**Troubleshooting Guide:**

<b>Problem</b>	<b>Probable Cause</b>	<b>Solution</b>
High Background	Background wells were contaminated	Avoid cross-well contamination by using the provided plate sealers. Use multichannel pipettes and change tips between pipetting samples and reagents.
	Insufficient washes	Increase number of washes. Increase soaking time between washes prior to addition of substrate solution.
	TMB Substrate Solution was contaminated	TMB Substrate Solution should be clear and colorless prior to addition to wells. Use a clean container prior to pipetting substrate solution into wells.
No or poor signal	Detection Antibody, Avidin-HRP or Substrate solution were NOT added	Rerun the assay and follow the protocol.
	Wrong reagent or reagents were added in wrong sequential order	
	Insufficient plate agitation	The plate should be agitated during all incubation steps using a plate shaker at a speed where solutions in wells are within constant motion without splashing.
	The wash buffer contains Sodium Azide (NaN <sub>3</sub> )	Avoid Sodium Azide contamination in the wash buffer as it inhibits HRP activity.
	Incubations were done at an inappropriate temperature, timing or without agitation	Rerun the assay and follow the protocol.
Low or poor standard curve signal	The standard was incorrectly reconstituted or diluted	Adjust the calculations and follow the protocol.
	Standard was inappropriately stored	Store the reconstituted standard stock solution in polypropylene vials at -70°C. Avoid repeated freeze-thaw cycles.
	Reagents added to wells with incorrect concentrations	Check for pipetting errors and the correct reagent volume.

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Problem	Probable Cause	Solution
Signal is high, standard curves have saturated signal	Standard reconstituted with less volume than required	Reconstitute new lyophilized standard with the correct volume of solution recommended in the protocol.
	Standards/samples, detection antibody, Avidin-HRP or substrate solution were incubated for too long	Rerun the assay and follow the protocol.
Sample readings are out of range	Samples contain no or below detectable levels of the analyte	If samples are below detectable levels, it may be possible to use a larger sample volume. Contact technical support for appropriate protocol modifications.
	Samples contain analyte concentrations greater than highest standard point	Samples may require dilution and analysis.
High variation in samples and/or standards	Multichannel pipette errors	Confirm that pipette calibrations are accurate.
	Plate washing was not adequate or uniform	Ensure pipette tips are tightly secured. Ensure uniformity in all wash steps.
	Non-homogenous samples	Thoroughly mix samples before assaying.
	Samples may have high particulate matter	Remove particulate matter by centrifugation.
	Cross-well contamination	Do not reuse plate sealers.  Always change tips for reagent additions. Ensure that pipette tips do not touch the reagents on the plate.

**ELISA Plate Template**

	1	2	3	4	5	6	7	8	9	10	11	12
A												
B												
C												
D												
E												
F												
G												
H												



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