



## Collagen

REF AG005K

R1 3 vials x 0.5 mg

R2 3 vials x 12 mL



English, revision: 11-2023

### INTENDED USE:

Platelet agonist for light transmission aggregometry (LTA) method for the *in vitro* quantitative determination of platelet aggregation, in human citrated plasma, using an automated or semi-automated method. This method is used in aid to diagnosis of platelet function disorders or to assess responsiveness to antiplatelet drugs in patients suspected of having platelets functional disorders or on antiplatelet therapy. This device of *in vitro* diagnostic use is intended for professional use in the laboratory.

### SUMMARY AND EXPLANATION:

#### Technical<sup>1-3</sup>:

Platelet function is assessed by light transmission aggregometry (LTA). LTA measures the transmission of light through a sample of platelet-rich plasma (PRP) in response to a panel of platelet agonists. Light transmittance through PRP is measured relative to a reference cuvette containing platelet poor plasma (PPP). Light transmission is set at 100% in the PPP and 0% in the PRP. When a platelet agonist is added to the stirred PRP, platelets then start to aggregate, and the light transmission of PRP increases.

#### Clinical<sup>3-8</sup>:

The platelets ability or inability to respond to particular agonist is the basis for differentiating platelet dysfunctions, congenital (e.g.: Glanzmann thrombasthenia, Bernard-Soulier syndrome, gray platelet syndrome, etc.) or acquired (e.g.: medications, procedures, medical conditions, hematologic disease).

When required, to assess response to antiplatelet therapy such as Acetylsalicylic acid (ASA, aspirin), P<sub>2</sub>Y<sub>12</sub> receptor inhibitors, Glycoprotein IIb/IIIa inhibitors.

### PRINCIPLE:

When collagen is added to the platelet rich plasma (PRP) from a healthy subject, the platelet adhesion is initiated via the collagen receptor GPIa/IIa and the GPVI receptor. Following adhesion, release of the platelet granules, and production of thromboxane A<sub>2</sub>, platelet activation occurs. Because the collagen-induced platelet aggregation mainly depends on these secondary mediators, there is a lag phase between the time when collagen is added and platelet aggregation is observed. Collagen present in vascular subendothelium plays an important role in hemostasis in vascular injury. Collagen initiates platelet adhesion and functions as a strong platelet agonist<sup>5-7</sup>.

### REAGENTS:

**R1 Collagen reagent:** Collagen at approximately 0.5 mg (horse tendon collagen (mainly type I)), lyophilized. Contains stabilizers.

**R2 Diluent for Collagen,** liquid form.

The product is classified as non-hazardous and is not subject to labeling according to EC Regulation No. 1272/2008 [CLP].

### WARNINGS AND PRECAUTIONS:

- This device contains material of animal origin and should be handled as a potential carrier and transmitter of disease.
- Waste should be disposed of in accordance with applicable local regulations.
- Use only the reagents from the same batch of kits.
- Any serious incident that has occurred in relation to the device shall be reported to the manufacturer and the competent authority of the Member State in which the user and/or the patient is established.
- Summary of Safety and Performance (SSP) is available in the European database on medical devices (see Eudamed public website: <https://ec.europa.eu/tools/eudamed> or on request to HYPHEN BioMed).
- To ensure optimal test results, testing the specimens and controls in succession and without interruption is recommended.

### REAGENT PREPARATION:

Gently remove the freeze-drying stopper, to avoid any product loss when opening the vial.

#### For aggregometer:

**R1** Reconstitute the contents of each vial with **exactly 0.5 mL of distilled water** (1 mg/mL).

Shake vigorously until complete dissolution. Allow the reagent to stabilize for 30 min. at room temperature (18-25°C), shaking occasionally.

**R2** Reagent is ready to use. Allow the reagent to stabilize for 30 min. at room temperature (18-25°C).

Dilute the reconstituted Collagen as follows (example for 1 mL):

For a final conc. in the test (µg/mL)	5	2
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Prepare following 10X solutions:

"10X" Collagen concentration (µg/mL)	50	20
Collagen 1 mg/mL (µL)	50	20
Diluent for Collagen (µL)	950	980

#### For analyzer:

**R1** Reconstitute the contents of each vial with **exactly 0.625 mL of distilled water** (800 µg/mL).

Shake vigorously until complete dissolution. Allow the reagent to stabilize for 30 min. at room temperature (18-25°C), shaking occasionally.

**R2** Reagent is ready to use; homogenize while avoiding formation of foam and load it directly on the analyzer following Application Guide instruction.

Dilute the reconstituted Collagen as follows (example for 1 mL):

For a final conc. in the test (µg/mL)	5	2
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Prepare following 8X solutions:

"8X" Collagen concentration (µg/mL)	40	16
Collagen 800 µg/mL (µL)	50	20
Diluent for Collagen (µL)	950	980

Homogenize the reagents prior to each use.

### STORAGE AND STABILITY:

Unopened reagents should be stored at 2-8°C in their original packaging. Under these conditions, they can be used until the expiry date printed on the kit.

**R1** Reagent stability after reconstitution, free from any contamination or evaporation, and stored closed, is of:

- 7 days at 2-8°C.
- 24 hours at room temperature (18-25°C).
- Do not freeze.
- Stability on board of the analyzer: see the specific Application Guide.

**R2** Reagent stability after opening, free from any contamination or evaporation, and stored closed, is of:

- 7 days at 2-8°C.
- 24 hours at room temperature (18-25°C).
- Do not freeze.
- Stability on board of the analyzer: see the specific Application Guide.

### REAGENTS AND MATERIALS REQUIRED BUT NOT PROVIDED:

- Laboratory material.
- SB Cuvette (064-1041-9) and SB Set tool (063-4151-5) for CS- and CN-series.
- Automatic analyzer such as: CS-series, CN-series.
- Light transmission Aggregometer.

Please note that the applications on other analyzers can be validated by the instrument manufacturer in accordance with the requirements of the REGULATION (EU) 2017/746 under their responsibility as long as the intended purpose is not modified.

### SPECIMEN COLLECTION AND PREPARATION:

Collection, preparation and storage of fresh samples (Platelet-rich Plasma (PRP) and Platelet-poor Plasma (PPP)) should be made according to laboratory or other validated methods.<sup>3,10</sup>

The blood (9 volumes) should be carefully collected onto the trisodium citrate anticoagulant (1 volume) (0.109 M, 3.2%) by clean venipuncture. CLSI H58-A and studies<sup>3,10</sup>: studies should be completed on fresh sample within a maximum of 4 h after blood collection.

### PROCEDURE:

Platelet agonist should be used at 2 µg/mL. If the platelet aggregation is abnormal, higher concentration of Collagen should be tested (e.g. 5 µg/mL)<sup>1,3</sup>.

HYPHEN BioMed provides Application Guides for defined coagulation analyzer families. The Application Guides contain analyzer/assay specific handling and performance information and complement the information in these Instructions for Use.

#### Protocol on Aggregometer:

- Place a stirrer in each cuvette.
- Establish the 100% aggregation point with a cuvette containing 300 µL of PPP.

- Pipette 285 µL of PRP into a second cuvette. Incubate at 37°C for 2 minutes. Establish the 0% aggregation point with the PRP.
- Add 15 µL of 10X collagen solution directly to the PRP using a long and fine pipette tip. Do not inject against the walls of the cuvette.
- Allow the aggregation profile to develop for 10 minutes.

If a reaction volume other than that specified above is required for the method used, the ratio of volumes must be strictly observed to guarantee assay performance.

#### QUALITY CONTROL:

Commercial controls are not available. The control may consist of fresh sample collected from a normal donor who has not taken any antiplatelet medication and with a history of normal platelet function. Include control samples, preferably for each test series, and at least for each new reagent batch, or after instrument maintenance.

#### RESULTS:

- Results are evaluated by examining the aggregation curve and the maximal aggregation (%). These parameters vary depending on instrument type, and specific normal values should be determined by each laboratory.
- Results should be interpreted on the basis of a patient's clinical condition, platelet count, potential medication influences, lifestyle, nutrition, and pre-analytical conditions<sup>11,12</sup>
- Abnormal curves should be confirmed via a retest.
- Lot to lot variability measured on 3 lots is %CV ≤ 10% (normal sample).

#### LIMITATIONS:

- To ensure optimum test performance and to meet the specifications, the technical instructions validated by HYPHEN BioMed should be followed carefully.
- Any reagent presenting no limpid appearance or showing signs of contamination must be rejected.
- Any suspicious samples or those showing signs of activation must be rejected.
- User defined modifications are not supported by HYPHEN BioMed as they may affect performance of the system and assay results. It is the responsibility of the user to validate modifications to these instructions or use of the reagents on analyzers other than those included in HYPHEN BioMed Application Guides or these Instructions for Use.
- If the number of platelets is lower than 150 × 10<sup>9</sup>/L or higher than 600 × 10<sup>9</sup>/L, test results may be affected. The platelet count of PRP samples should not be adjusted to a standardized value with autologous PPP<sup>3</sup>.

#### EXPECTED VALUES:

The reference interval established, in internal study, on healthy adult subjects with 2 µg/mL Collagen on aggregometer (n=53), on CS-series (n=51) and on CN-series (n=83), was measured between 55 and 99%, between 69 and 99% and between 50 and 95% respectively (Central 90%, 95th percentile)<sup>13</sup>. However, each laboratory has to determine its own normal aggregation parameters<sup>3,10,14</sup>

#### PERFORMANCES:

Performances studies were conducted as described in CLSI guidelines. The following performance data represent typical results and are not to be regarded as specifications for Collagen. Mathematical analyses are performed using a validated statistical software built in accordance with CLSI guidelines. For automated assays, performances are documented in the respective Application Guides of the analyzers.

#### On aggregometer: Analytical performances Precision

Precision studies were assessed using abnormal and normal samples, on 1 series and 10 repetitions.

Sample	Repeatability	
	% Max Aggregation	CV%
Normal	85%	3.8%
Abnormal	31%	11.8%

#### Interfering substances

No interference was observed with the molecules and up to following concentrations:

Bilirubin C	Bilirubin F	Intralipids	Hemoglobin
30 mg/dL	30 mg/dL	360 mg/dL	250 mg/dL

#### Clinical performances

Agreement		
Agonist	Reference method	Agreement (n = 110)
Collagen (2µg/mL)	Helena reagent	96%

Sensitivity/Specificity					
Agonist	n	Sensitivity	Specificity	Area under the curve (ROC)	
Collagen	110	93%	100%	0.995	
Agonist	n	PPV	NPV	LR+	LR-
Collagen	110	100%	93%	+ ∞	0,088

PPV: Predictive value of a positive result  
NPV: Predictive value of a negative result  
LR+ : Likelihood Ratio +  
LR- : Likelihood Ratio -

#### On CS-series / CN-series:

#### Analytical performances

#### Precision

Precision studies were assessed using abnormal and normal samples, on 1 series and 30 repetitions.

CS-series		Repeatability	
Sample	% Max Aggregation	CV%	
Normal	90%	2.8%	
Abnormal	8%	16.0%	
CN-series		Repeatability	
Sample	% Max Aggregation	CV%	
Normal	85%	3.1%	
Abnormal	27%	7.5%	

#### Interfering substances

Interferences are defined by the analyzer system used and are documented in the respective Application Guides of the analyzers.

#### Clinical performances

Agreement		
Agonist	Reference method (aggregometer)	Agreement (n = 107) (CS-series)
Collagen	Helena reagent	95%

Sensitivity/Specificity					
Agonist	n	Sensitivity	Specificity	Area under the curve ROC	
Collagen	107	91%	100%	0.963	
Agonist	n	PPV	NPV	LR+	LR-
Collagen	107	100%	91%	+ ∞	0,070

PPV: Predictive value of a positive result  
NPV: Predictive value of a negative result  
LR+ : Likelihood Ratio +  
LR- : Likelihood Ratio -

Clinical performance was defined at 2µg/mL Collagen for antiplatelet drugs and normal samples, and confirmed at a higher concentration on bleeding syndrome, dual antiplatelet therapy, and normal samples.

#### REFERENCES:

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e-IFU (other languages) are available on [www.hyphen-biomed.com](http://www.hyphen-biomed.com).

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Changes compared to the previous version.

The following symbols may appear on the product labeling:

<b>REF</b>	Catalogue number	<b>LOT</b>	Batch code	<b>IVD</b>	In-vitro diagnostic medical device
<b>Rx</b>	Numerical < x > identification of reagent	<b>i</b>	See instructions for use	<b>WHO STD</b>	WHO standard code
	Temperature limitation		Manufacturer	<b>YYYY-MM-DD</b>	Use by
<b>CE</b>	CE marking of conformity with notified body ID number.	<b>→</b>	Reconstitution volume	<b>CONTENTS</b>	Contents
<b>Cx</b>	Numerical < x > identification of control	<b>i-MA</b>	See instructions in Method Application guide	<b>CONTAINS</b>	Contains
<b>EXP</b>	Expiration date	<b>Σ</b>	Contains sufficient for <n> tests	<b>UNIT</b>	Measurement unit
<b>TARGET VALUE</b>	Target Value		Keep away from sunlight and heat	<b>CALx</b>	Numerical < x > identification of calibrator
<b>UDI</b>	Unique Device Identifier	<b>BIO</b>	Contains biological material of animal origin		Contains human blood or plasma derivatives
<b>UK CA</b>	UKCA marking of conformity	<b>Bio</b>	Biological risks	<b>ACCEPTANCE RANGE</b>	Acceptance range