

SGPT (DST)

(IFCC, Kinetic)

ENZOPAK

Last update 09-2020

Ref. CC2-ALT.17N, 5x25 ml
CC2-ALT.17NU, 5x60 ml

INTENDED USE

Reagent kit for quantitative estimation of glutamate pyruvate transaminase activity in serum or plasma.

INTRODUCTION

Wroblewsky and LaDue first devised a method for estimating glutamate pyruvate transaminase activity (also called alanine transaminase, ALT). The primary transaminase reaction was coupled with lactate dehydrogenase and reduced nicotinamide adenine dinucleotide (NADH). This method was further improved by many workers and reviewed by professional societies like IFCC, GSCC, SCE etc.

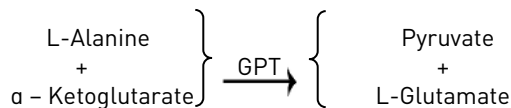
SGPT is based on the procedure recommended by the IFCC.

DIAGNOSTIC SIGNIFICANCE

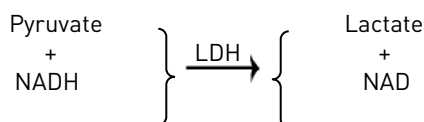
Alanine transaminase is present in high concentrations in liver, kidneys, heart and skeletal muscle tissue. It is also present in lungs, spleen, pancreas, brain and erythrocytes at a lower concentration. Primary liver diseases (cirrhosis, obstructive jaundice, carcinoma, viral or toxic hepatitis) as well as liver damage secondary to other causes result in elevated GPT levels. Patients undergoing extended hemodialysis without supplemental vitamin B₆ therapy may show low GPT in serum.

PRINCIPLE

In this reaction, L-Alanine and alpha-ketoglutarate react in the presence of GPT in the sample to yield pyruvate and L-glutamate.



Pyruvate is reduced by lactate dehydrogenase to yield lactate with the oxidation of NADH to NAD. The reaction is monitored by measurement of the decrease in absorbance of NADH at 340 nm.



The rate of reduction in absorbance is proportional to GPT activity in sample.

PRESENTATION

	No. of Bottles	
	5x25 ml	5x60 ml
• 1 SGPT (Enzyme/Coenzyme)	5	5
• 2 SGPT (Buffer Substrate)	5	5

FINAL REAGENT COMPOSITION

Active Ingredients	Concentration
• NADH Na ₂	0.1 mmol/L
• LDH	2000 U/L
• Buffer	50 mmol/L
• L-Alanine	200 mmol/L
• α-KG	10 mmol/L

pH 7.5±0.1 at 25°C

Also contains non-reactive fillers and Stabilizers.

PRECAUTION

SGPT is for *IN-VITRO* diagnostic use only.
Reagent contains Sodium Azide, DO NOT INGEST.

PREPARATION OF WORKING REAGENT

FOR 5 x 25 ml.

Carefully transfer the content of 1 SGPT (powder) into the bottle containing 25 ml of 2 SGPT (buffer). Mix gently to dissolve completely. Wait for 5 minutes before use.

FOR 5 x 60 ml.

Carefully transfer the content of 1 SGPT (powder) into the bottle containing 60 ml of 2 SGPT (buffer). Mix gently to dissolve completely. Wait for 5 minutes before use.

REAGENT STORAGE AND STABILITY

SGPT reagents are stable at 2-8°C until the expiry date stated on the label.

The working reagent is stable for 120 days at 2-8°C.

SPECIMEN COLLECTION

Fresh, clear serum under fasting condition with no hemolysis is the specimen of choice. Plasma collected with anticoagulants such as heparin or EDTA may be used.

REACTION PARAMETERS

- Type of Reaction : Kinetic / Decreasing
- Wavelength : 340 nm
- Flowcell Temperature : 37°C
- Delay Time : 60 seconds
- Interval : 30 seconds
- No. of Readings : 4
- Sample volume : 100 µl (0.1 ml)
- Working reagent : 1.0 ml
- Factor : 1746
- Light Path : 1 cm.
- Zero setting with : Distilled water

TEST PROCEDURE

Pipette Into Test Tubes	TEST
Working Reagent (ml)	1.0
Sample (ml)	0.1

Mix and after incubation at 37°C for 60 seconds, measure the absorbance at an interval of 30 seconds for 2 minutes at 340 nm.

TEST RESULTS

Serum GPT activity (IU/L) = $\Delta A / \text{min.} \times F$
Where $F = 1746$ (based on the millimolar Extinction coefficient of NADH at 340 nm).

NORMAL VALUES

5-55 IU/L

LINEARITY

The method is linear upto 500 IU/L. For sample values higher than 500 IU/L, dilute the sample suitably with 0.9% saline and repeat the assay.

Apply the dilution factor to calculate the final results.

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NOTE

For laboratories using instrument with cuvette capacity less than 1 ml, decrease the sample and working reagent volumes proportionately.

REFERENCES

- The Committee on Enzymes of the Scandinavian Society for Clinical Chemistry and Clinical Physiology, Recommended methods for determination of four enzymes in blood, Scan J. Clin. Lab. Invest 33, 291 (1974).
- HENRY, R.J., CHIAMORI, M., GOLUB O.J. and BERKMAN, S., Revised spectrophotometric methods for the determination of glutamic oxaloacetic transaminase, glutamic pyruvate transaminase and lactic acid dehydrogenase, Am. J. Clin. Pathol. 34, 381-398 (1960).



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