Elecsys CA 125 II

REF		<u> </u>	SYSTEM
07026986190*	07000000000		cobas e 402
07026986214*	07026986500	300	cobas e 801

* Some kits shown may not be available in all countries.

English

System information

Short name	ACN (application code number)
CA125 2	10018

Please note

The measured CA 125 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 CA 125 assay method used. CA 125 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 CA 125 assay procedure used while monitoring therapy, then the CA 125 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 OC 125 reactive determinants in human serum and plasma.

These determinants are associated with a high molecular weight glycoprotein in serum and plasma of women with primary epithelial invasive ovarian cancer (excluding those with cancer of low malignant potential).

This assay is indicated for use as an aid in the detection of residual or recurrent ovarian carcinoma in patients who have undergone first-line therapy and would be considered for second-look procedures. This assay is further indicated for serial measurement of CA 125 to aid in the management of cancer patients.

This assay is also intended to be used in conjunction with the Elecsys HE4 assay as part of ROMA (Risk Of Ovarian Malignancy Algorithm) for the risk assessment of ovarian cancer in pre- and postmenopausal women presenting with pelvic mass.

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

Summary

CA 125 is a repeating peptide epitope of the mucin MUC16,^{1,2} which promotes cancer cell proliferation and inhibits anti-cancer immune responses.3,4,5,6

MAb OC 125 was an antibody obtained from mice that had been immunized with OVCA (ovarian carcinoma cell line) 433, an adenocarcinoma cell line from the ovary.⁷ Subsequently, the MAb M11 antibody was developed against CA 125.⁸ In the Elecsys test, OC 125 is used as a detection antibody. MAb M 11 is used as the capture antibody (solid-phase antibody); this has been employed in second-generation CA 125 assays since 1992

CA 125 has been found in the amniotic fluid and in the coelomic epithelium; both of these tissues are of fetal origin. In tissues of adult origin, the presence of CA 125 has been demonstrated in the epithelium of the oviduct, in the endometrium and in the endocervix.9

CA 125 is found in a high percentage of ovarian tumors of epithelial origin and can be detected in serum.^{10,11} Elevated values are sometimes found in various benign gynecological diseases such as ovarian cysts and endometriosis.¹² Slight elevations of this marker may also occur in early pregnancy and in various benign diseases (e.g. pancreatitis, cirrhosis, hepatitis, benign gastrointestinal diseases, renal insufficiency, and others).¹³ Although the highest CA 125 values occur in patients suffering from ovarian carcinoma, elevated values are also observed in malignancies of the endometrium, breast, gastrointestinal tract, and various other malignancies.

Recent findings show that combination of CA 125 and HE4 can help to determine whether a pelvic mass is benign or malignant in pre- and postmenopausal women. The dual marker combination CA 125 and HE4 is a more accurate predictor of malignancy than either alone.¹⁴ Huhtinen et al. reported a 78.6 % sensitivity at 95 % specificity in ovarian carcinoma vs. endometriotic cysts. 15 Moore et al. reported 94 % accuracy in identifying malignant vs benign pelvic masses when combining CA 125 and HE4 in the ROMA algorithm.¹⁶

Test principle

Sandwich principle. Total duration of assay: 18 minutes.

- 1st incubation: 12 μL of sample, a biotinylated monoclonal CA 125-specific antibody, and a monoclonal CA 125-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 II 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 instrumentspecifically generated by 2-point calibration and a master curve provided via the **cobas** link.

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

Reagents - working solutions

The cobas e pack is labeled as CA125 2.

- Streptavidin-coated microparticles, 1 bottle, 14.1 mL: Μ Streptavidin-coated microparticles 0.72 mg/mL; preservative.
- R1 Anti-CA 125-Ab~biotin, 1 bottle, 18.8 mL: Biotinylated monoclonal anti-CA 125 antibody (M 11; mouse) 1 mg/L; phosphate buffer 100 mmol/L, pH 7.4; preservative.
- Anti-CA 125-Ab~Ru(bpy)₃²⁺, 1 bottle, 18.8 mL: Monoclonal anti-CA 125 antibody (OC 125; mouse) labeled with ruthenium complex 1 mg/L; phosphate buffer 100 mmol/L, pH 7.4; preservative.

Precautions and warnings

For in vitro diagnostic use for health care professionals. Exercise the normal precautions required for handling all laboratory reagents. Infectious or microbial waste:

Warning: handle waste as potentially biohazardous material. Dispose of waste according to accepted laboratory instructions and procedures. Environmental hazards:

Apply all relevant local disposal regulations to determine the safe disposal. Safety data sheet available for professional user on request.

This kit contains components classified as follows in accordance with the

Regulation (EC) No. 1272/2008:



Warning

317	May cause an allergic skin reaction.
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Prevention:

H3

- P261 Avoid breathing dust/fume/gas/mist/vapours/spray. Contaminated work clothing should not be allowed out of P272
 - the workplace.

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P280	Wear protective gloves.
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Response:

P333 + P313 If skin irritation or rash occurs: Get medical advice/attention

P362 + P364 Take off contaminated clothing and wash it before reuse.

Disposal:

P501 Dispose of contents/container to an approved waste disposal plant.

Product safety labeling follows EU GHS guidance.

Contact phone: all countries: +49-621-7590

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 available via the cobas link.

Storage and stability

Store at 2-8 °C.

Do not freeze

Store the cobas e pack 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
on the analyzers	16 weeks

Specimen collection and preparation

Only the specimens listed below were tested and found acceptable. Serum collected using standard sampling tubes or tubes containing separating gel.

Li-heparin, K₂-EDTA and K₃-EDTA plasma.

Plasma tubes containing separating gel can be used.

Criterion: Slope 0.9-1.1 + coefficient of correlation \geq 0.95.

Stable for 8 hours at 20-25 °C, 5 days at 2-8 °C, 24 weeks at -20 °C (± 5 °C). Freeze only once.

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 and calibrators are at 20-25 °C prior to measurement.

Due to possible evaporation effects, samples and calibrators 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 07030207190, CA 125 II CalSet II, for 4 x 1.0 mL

- REF 11776452122. PreciControl Tumor Marker, for 4 x 3.0 mL
- REF 07299001190, Diluent Universal, 36 mL sample diluent
- General laboratory equipment
- cobas e analyzer

For epithelial ovarian cancer risk assessment with ROMA (Risk of Ovarian Malignancy Algorithm):

- [REF] 05950945190, HE4 CalSet, for 4 x 1 mL
- REF 05950953190, PreciControl HE4, for 4 x 1 mL
- REF 07299010190, Diluent MultiAssay, 36 mL sample diluent Additional materials for cobas e 402 and cobas e 801 analyzers:
- REF 06908799190, ProCell II M, 2 x 2 L system solution
- [REF] 04880293190, CleanCell M, 2 x 2 L measuring cell cleaning solution
- REF 07485409001, Reservoir Cup, 8 cups to supply ProCell II M and CleanCell M
- REF 06908853190, PreClean II M, 2 x 2 L wash solution
- REF 05694302001, Assay Tip/Assay Cup tray, 6 magazines x 6 magazine stacks x 105 assay tips and 105 assay cups, 3 wasteliners
- REF 07485425001, Liquid Flow Cleaning Cup, 2 adaptor cups to supply ISE Cleaning Solution/Elecsys SysClean for Liquid Flow Cleaning **Detection Unit**
- [REF] 07485433001, PreWash Liquid Flow Cleaning Cup, 1 adaptor cup to supply ISE Cleaning Solution/Elecsys SysClean for Liquid Flow Cleaning PreWash Unit
- REF 11298500316, ISE Cleaning Solution/Elecsys SysClean, 5 x 100 mL system cleaning solution

Assav

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.

Place the cooled (stored at 2-8 °C) cobas e pack on the reagent manager. Avoid foam formation. The system automatically regulates the temperature of the reagents and the opening/closing of the cobas e pack.

Calibration

Traceability: This method has been standardized against the Enzymun-Test CA 125 II method. This in turn has been standardized against the CA 125 II RIA from Fujirebio Diagnostics.

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 cobas e pack was registered on the analyzer).

Calibration interval may be extended based on acceptable verification of calibration by the laboratory.

Renewed calibration is recommended as follows:

- after 12 weeks when using the same reagent lot
 - after 28 days when using the same cobas e pack 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 cobas e pack, 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.

If necessary, repeat the measurement of the samples concerned.

Follow the applicable government regulations and local guidelines for quality control.

Calculation

The analyzer automatically calculates the analyte concentration of each sample (either in U/mL, U/L or kU/L).

REF 07027478190, Elecsys HE4, 100 tests

cobas[®]

Limitations - interference

The effect of the following endogenous substances and pharmaceutical compounds on assay performance was tested. Interferences were tested up to the listed concentrations and no impact on results was observed.

Endogenous substances

0		
Compound	Concentration tested	
Bilirubin	≤ 1130 µmol/L or ≤ 66 mg/dL	
Hemoglobin	≤ 2.0 mmol/L or ≤ 3200 mg/dL	
Intralipid	≤ 2000 mg/dL	
Biotin	≤ 287 nmol/L or ≤ 70 ng/mL	
Rheumatoid factors	≤ 1200 IU/mL	

Criterion: For concentrations of 0.6-12 U/mL the deviation is \pm 1.2 U/mL. For concentrations > 12 U/mL the deviation is \pm 10 %.

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.

There is no high-dose hook effect at CA 125 concentrations up to 50000 $\ensuremath{\text{U/mL}}$.

Pharmaceutical substances

In vitro tests were performed on 16 commonly used pharmaceuticals. No interference with the assay was found.

In addition, the following special cancer drugs were tested. No interference with the assay was found.

Special cancer drugs

Drug	Concentration tested		
	mg/L		
Carboplatin	1000		
Cisplatin L	225		
Cyclophosphamide	1000		
Dexamethasone	20		
Doxorubicin	75		
Leucovorin	750		
Melphalan	15		
Methotrexate	1000		
Paclitaxel	265		
5-FU	500		
Avastin	750		
Tarceva	150		
MabThera	750		
Herceptin	600		
Tamoxifen	50		
Mitomycin	25		
Etoposide	400		
Flutamide	1000		
Taxol	5.5		
Gemcitabine	1500		
Docetaxel	112		
PEG lip.Doxorubicin	75		
Lynparza	80		

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

0.6-5000 U/mL (defined by the Limit of Blank and the maximum of the master curve). Values below the Limit of Blank are reported as < 0.6 U/mL. Values above the measuring range are reported as > 5000 U/mL (or up to 25000 U/mL for 5-fold diluted samples).

Lower limits of measurement

Limit of Blank, Limit of Detection and Limit of Quantitation

Limit of Blank = 0.6 U/mL

Limit of Detection = 1.2 U/mL

Limit of Quantitation = 2.0 U/mL

The Limit of Blank, Limit of Detection and Limit of Quantitation were determined in accordance with the CLSI (Clinical and Laboratory Standards Institute) EP17-A2 requirements.

The Limit of Blank is the 95th percentile value from n \ge 60 measurements of analyte-free samples over several independent series. The Limit of Blank corresponds to the concentration below which analyte-free samples are found with a probability of 95 %.

The Limit of Detection is determined based on the Limit of Blank and the standard deviation of low concentration samples. The Limit of Detection corresponds to the lowest analyte concentration which can be detected (value above the Limit of Blank with a probability of 95 %).

The Limit of Quantitation is the lowest analyte concentration that can be reproducibly measured with an intermediate precision CV of \leq 20 %.

An internal study was performed based on guidance from the CLSI protocol EP17-A2. Limit of Blank, Limit of Detection and Limit of Quantitation were determined to be the following:

Limit of Blank = 0.505 U/mL

Limit of Detection = 0.567 U/mL

For Limit of Quantitation \ge 4 human serum samples were measured over 5 days in 5 replicates on one analyzer. With an intermediate precision of \le 20 % the Limit of Quantitation was 0.694 U/mL.

Dilution

Samples with CA 125 concentrations above the measuring range can be diluted with Diluent Universal. The recommended dilution is 1:5 (automatically by the analyzer or manually). The concentration of the diluted sample must be \geq 1000 U/mL.

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

After dilution by the analyzer, the software automatically takes the dilution into account when calculating the sample concentration.

Expected values

Studies using the Elecsys CA 125 II assay in 593 samples from healthy females (pre- and postmenopausal) yielded a value of 35 U/mL (95th percentile). Values > 35 U/mL indicate an increased probability for residual or recurrent ovarian carcinoma in patients treated for primary epithelial invasive ovarian cancer.

Each laboratory should investigate the transferability of the expected values to its own patient population and if necessary determine its own reference ranges.

Risk estimation in patients with pelvic mass

For risk estimation with ROMA see package insert of the Elecsys $\mbox{HE4}$ assay.

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, samples and controls in a protocol (EP05-A3) of the CLSI (Clinical and Laboratory Standards Institute): 2 runs per day in duplicate each for 21 days (n = 84). The following results were obtained:

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cobas e 402 and cobas e 801 analyzers					
		Repeatability		Intermediate precision	
Sample	Mean U/mL	SD U/mL	CV %	SD U/mL	CV %
Human serum 1	1.58	0.0427	2.7	0.0541	3.4
Human serum 2	2.38	0.0457	1.9	0.0654	2.8
Human serum 3	34.3	0.384	1.1	0.650	1.9
Human serum 4	2338	33.9	1.5	56.2	2.4
Human serum 5	3975	42.8	1.1	112	2.8
PreciControl TM ^{b)} 1	29.1	0.452	1.6	0.619	2.1
PreciControl TM2	90.4	1.29	1.4	1.70	1.9

b) TM = Tumor Marker

Method comparison

A comparison of the Elecsys CA125 II assay, REF 07026986190 (**cobas e** 801 analyzer; y) with the Elecsys CA125 II assay, REF 11776223190 (**cobas e** 601 analyzer; x) gave the following correlations U/mL):

Number of samples measured: 163

Passing/Bablok ¹⁷	Linear regression
y = 0.962x - 0.647	y = 1.012x -11.1
т = 0.993	r = 0.999

The sample concentrations were between 1.50 and 4695 U/mL.

A comparison of the Elecsys CA125 II assay, $\boxed{\text{REF}}$ 07026986190 (**cobas e** 402 analyzer; y) with the Elecsys CA125 II assay, $\boxed{\text{REF}}$ 07026986190 (**cobas e**801 analyzer; x) gave the following correlations U/mL):

Number of samples measured: 179

Passing/Bablok ¹⁷	Linear regression
y = 0.971x - 0.099	y = 0.978x -1.94
т = 0.994	r =1.00

The sample concentrations were between 0.809 and 4938 U/mL.

Analytical specificity

The Elecsys CA 125 II tumor marker assay is based on the monoclonal M 11 and OC 125 antibodies which are only available from Fujirebio Diagnostics, its licensees and its representatives. The performance characteristics of test procedures using these antibodies cannot be assumed for test methods using other antibodies.

References

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- 14 Moore RG, Brown AK, Miller MC, et al. The use of multiple novel tumor biomarkers for the detection of ovarian carcinoma in patients with a pelvic mass. Gynecol Oncol 2008;108(2):402-408.
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For further information, please refer to the appropriate operator's manual for the analyzer concerned, the respective application sheets 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.



CA 125 is a registered trademark of Fujirebio Diagnostics, Inc.

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.

The Summary of Safety & Performance Report can be found here: https://ec.europa.eu/tools/eudamed

Symbols

Roche Diagnostics uses the following symbols and signs in addition to those listed in the ISO 15223-1 standard (for USA: see dialog.roche.com for definition of symbols used):

CONTENT	Contents of kit
SYSTEM	Analyzers/Instruments on which reagents can be used
REAGENT	Reagent
CALIBRATOR	Calibrator
\longrightarrow	Volume for reconstitution
GTIN	Global Trade Item Number

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