

Bio-Rad Laboratories
Results that improve lives.

Congenital Adrenal Hyperplasia

Quantase™ Neonatal 17-OHP Assay

Newborn Screeners Are Talking

"All of my samples are delivered between 9:30 AM and 10:30 AM, and that's crunch time."

Bio-Rad Is Listening

When it's crunch time in the lab, you want maximum efficiency. Bio-Rad's convenient and ready-to-use reagents provide the time saving you demand. Don't waste your staff's valuable time on reagent preparation – choose Bio-Rad.

Quantase™ Neonatal 17-OHP Assay

The Quantase™ Neonatal 17-OHP Assay is a quantitative assay for the determination of 17- α -hydroxyprogesterone in neonatal dried-blood spot specimens. The rapid and precise assay delivers efficiency to your laboratory.

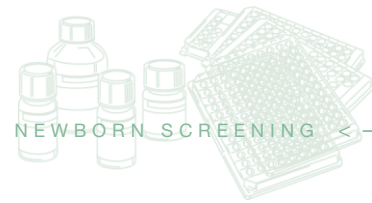
The Bio-Rad Assay

- Eliminates interferences seen with fluorometric methods
- Works with most microplate readers
- Is easily automated
- Provides rapid results in 4 hours
- Uses convenient ready-to-use liquid reagents



Quantase Neonatal
17-OHP Assay

BIO-RAD



Congenital Adrenal Hyperplasia (CAH)

Clinical Background

CAH results from a recessively inherited defect in any of the five enzymatic steps required to synthesize cortisol from cholesterol. Persistently high levels of 17-OHP are considered presumptively diagnostic of CAH resulting from 21-hydroxylase deficiency. Complete or partial deficiency of 21-hydroxylase accounts for 90% to 95% of all CAH cases.¹

CAH exists in three forms: salt wasting (SW); simple virilizing (SV); and nonclassical (NC). The SW and SV forms of the disorder result in excessive adrenal androgen secretion early in fetal life. If left untreated, the SW form can result in life-threatening adrenal crises within the first weeks of life and precocious growth in both sexes. Non-classical CAH may result in persistent slight elevations of 17-OHP from birth with clinical manifestations occurring later in life. The SW and SV form have been found to occur at a frequency of 1:15,000 births.²

REFERENCES

1. Saedi, S. A. et al (1996). Screening for Congenital Adrenal Hyperplasia: The Delfia Screening Test Overestimates Serum 17-hydroxyprogesterone in Preterm Infants. *Pediatrics*, 97:100-102.
2. Pang, S. et al (1982). A Pilot Newborn Screening for Congenital Adrenal Hyperplasia in Alaska. *J. Clin. Endocr.*

Product Highlights

- Easily automated
- Ready-to-use reagents
- Same-day results
- Superior reagent stability

Flexibility for Your Laboratory Needs

- 1 Punch sample
- 2 Add 50 µL conjugate reagent
- 3 Add 50 µL antibody solution
- 4 Incubate at RT for 3.5 hours
- 5 Wash wells 5x with 300 µL wash/well
- 6 Add 100 µL substrate reagent
- 7 Incubate at RT for 30 minutes
- 8 Add 100 µL stop reagent
- 9 Read 450 nm

Ordering Information

Catalog No.	Description
532-5402	Quantase™ Neonatal 17-OHP Assay (S&S 903 paper)480 test kit



Bio-Rad Laboratories

For further information, please contact the Bio-Rad office nearest you or visit our website at www.bio-rad.com.

Clinical Diagnostics Group

Website www.bio-rad.com U.S. 1-800-2-BIO-RAD Australia 61-2-9914-2800 Austria 43-1-877-8901 Belgium 32-9-385-5511 Brazil 5521-3461-5202 Canada 1-514-334-4372 Czech Republic 420-2-41430532 China 86-21-63052255 Denmark 45-4452-1000 Finland 358-9-804-22-00 France 33-1-4795-6000 Germany 49-89-31884-0 Hong Kong 852-2789-3300 India 91-124-6398112 Israel 972-3-9514127 Italy 39-02-216091 Japan 81-3-5811-6290 Korea 82-2-3473-4460 Latin America 305-894-5950 Mexico 5255-5534-2552 The Netherlands 31-318-540666 New Zealand 64-9-415-2280 Norway 47-23-38-41-30 Poland 48-22-331-99-99 Portugal 351-21-472-7700 Russia 7-095-721-14-00 Singapore 65-6415-3188 South Africa 27-11-442-85-08 Spain 34-91-590-5200 Sweden 46-8-555-127-00 Switzerland 41-61-717-95-55 Thailand 662-651-8311 United Kingdom 44-208-328-2000