

RF TEST

Latex agglutination slide test for qualitative and semiquantitative determination of Rheumatoid factors.

PRINCIPLE:

The Rheuma TEST latex test is based upon the immunological reaction between the Rheumatoid Factors (RF) and the corresponding antibody (lgG) coated onto polystyrene latex particles.

REAGENTS AND MATERIALS PROVIDED:

- 01. RF latex reagent
- 02. Positive control
- 03. Negative control
- 04. Glass slide & Mixing sticks

STABILITY:

The reagent and control sera are stable upto the expiry date as mentioned on the vial label, when stored at 2^0 - 8^0 C, do not freeze.

SPECIMEN: Serum: Storage at 2⁰ - 8⁰ C upto 1 week.

PROCEDURE:

A. QUALITATIVE TEST:

Bring all reagents and serum samples to Room Temperature and mix gently prior to use. Latex Reagents and controls are READY TO USE.

Place on separate reaction cell on glass slide:	
1. Serum specimen 1 drop	
2. Positive control 1 drop	
3. Negative control 1 drop	
Then add RF latex reagent 1 drop each	
Mix with separate mixing sticks and spread the fluid	
over the entire area of the cell.	
Tilt the slide back and forth slowly for 2 minutes	

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INTERPRETATION OF RESULTS:

Distinct agglutination indicates RF content more than 6 IU/ml in the undiluted sample. Sera with positive results in the qualitative test may be retested in the semiquantitative test for titre.

B. SEMIQUANTITATIVE TEST:

Prepare dilution of the specimen with physiological saline 0.9%, as indicated in the following table

Dilution	RF (l.U/ml in undiluted sample)
1:2	12
1:4	24
1:8	48
1:16	96
1:32	192
1:64	384
Then proceed as	s in qualitative test for each dilution.

INTERPRETATION OF RESULTS:

The last dilution of serum with visible agglutination is the RF titre of the serum.

CALCULATION OF TITRE:

RF $(IU/mI) = 6 \times D$, where 6 is the sensitively in IU/ml and D is the highest dilution of serum showing agglutination.

SENSITIVITY: 6 IU/ml

QUALITY CONTROL:

Positive and negative controls should be run with each series of test sera and incorporated in reading the results. The negative control will show no agglutination. The positive control will show a distinct agglutination within 2 minutes.

CLINICAL SIGNIFICANCE:

The clinical significance of RF determinations consists in differentiating between rheumatoid arthritis, in which the rheumatoid factor has been demonstrated in the serum of approximately 80% of the cases examined, and rheumatic fever in which the rheumatoid factor is almost always absent. The RF test is more frequently positive in long term active processes than in diseases which are less active or are still in early stages. It is occassionally found in the seurm of patients with polyarthritis nodosa, systemic lupus erythematosus, hepatitis and certain other diseases.

REFERENCES:

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- 4. Assimeh, S.N.; Johnson, P.M.J. Immunol Methods 34, 1980.