DIAKIN AE

BK AE diagnosis

Leading expert in kinin pathologies

Kininogenase

The kininogenase kit is used for *in vitro* diagnosis of bradykinin Angioedema. It measures the plasma ability to cleave high molecular weight kininogen to release bradykinin. The spontaneous activity reflects the systemic activity at the harvest time and it is increased constantly in the case of C1 Inhibitor deficiency or transiently during an attack of Angioedema with normal C1Inh. The proenzyme reflects the plasmatic capacity to be activated, it is consumed during an acute attack or during chronic activation.

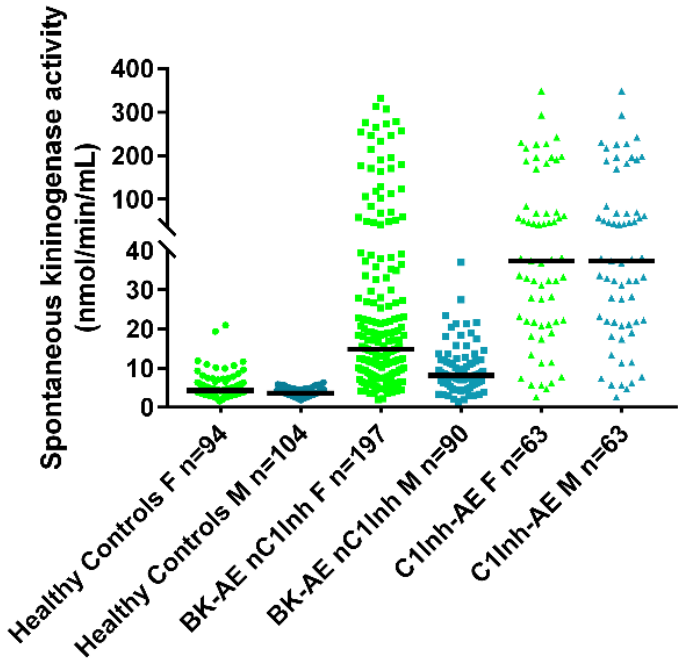
Format

- Enzymatic kinetics followed by spectrophotometry
- Chromogenic substrate
- 96 well microplate with sufficient reagents to test 12 patients (2*6) in duplicate
- Sample type: citrate plasma
- Controls: High & Low

Assay Performance

- Limit of detection: 0.25 $nmol^{-1} \bullet min^{-1} \bullet mL^{-1}$
- Limit of quantification: 1 $nmol^{-1} \bullet min^{-1} \bullet mL^{-1}$
- Read out: spectrophotometry 405 nm, 15 min, 30°C
- Cut-off value ($nmol^{-1} \bullet min^{-1} \bullet mL^{-1}$):

	Spontaneous	Proenzyme
Female	> 9.3	< 2350
Male	> 6.6	< 2250



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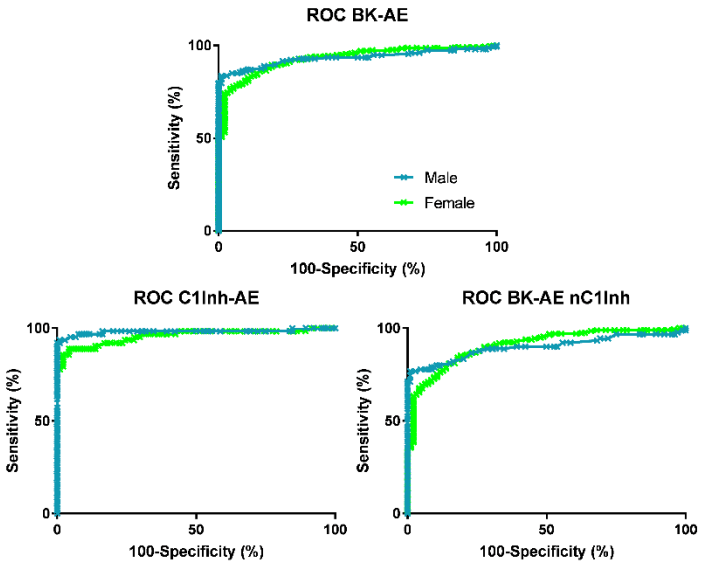

Diagnostic performance

- BK Angioedema (BK-AE): sensitivity: 81% (♀), 80% (♂) and specificity: 91% (♀), 100% (♂)
- Angioedema with C1 Inhibitor deficiency (C1Inh-AE): sensitivity: 89% (♀), 94% (♂)and specificity: 90% (♀), 99% (♂)
- Angioedema with normal C1 Inhibitor function (BK-AE nC1Inh): sensitivity: 74% (♀), 75% (♂) and specificity: 91% (♀), 99 % (♂)

Benefits

- Unique assay for Bradykinin Angioedema with normal C1Inh
- C1Inh deficiency is always associated with an high spontaneous kininogenase activity
- Helpful for BK-AE screening and follow up.

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