

Cole-Parmer® qPCR test

Human Immunodeficiency Virus type 2

integrase (pol) gene region

150 tests

Cole-Parmer®

For general laboratory and research use only

Introduction to Human Immunodeficiency Virus type 2

Human immunodeficiency virus (commonly known as HIV, and formerly known as HTLV-III and lymphadenopathy-associated virus) is a retrovirus that is the cause of the disease known as AIDS (Acquired Immunodeficiency Syndrome), a syndrome where the immune system begins to fail, leading to many life-threatening opportunistic infections.

HIV is transmitted through direct contact of a mucous membrane with a bodily fluid containing HIV, such as blood, semen, vaginal fluid, preseminal fluid or breast milk. This transmission can come in the form of: penetrative (anal or vaginal) sex; oral sex; blood transfusion; contaminated needles; exchange between mother and infant during pregnancy, childbirth, or breastfeeding; or other exposure to one of the above bodily fluids.

Infection in humans is now pandemic. As of January 2006, the Joint United Nations Programme on HIV/AIDS (UNAIDS) and the World Health Organization (WHO) estimate that AIDS has killed more than 25 million people since it was first recognized on December 1, 1981, making it one of the most destructive pandemics in recorded history. In 2005 alone, AIDS claimed an estimated 2.4–3.3 million lives, of which more than 570,000 were children.[1] A third of these deaths are occurring in sub-Saharan Africa, retarding economic growth by destroying human capital. Current estimates state that HIV is set to infect 90 million people in Africa, resulting in a minimum estimate of 18 million orphans.[2] Antiretroviral treatment reduces both the mortality and the morbidity of HIV infection, but routine access to antiretroviral medication is not available in all countries.[3]

Two species of HIV infect humans: HIV-1 and HIV-2. HIV-1 is hypothesized to have originated in southern Cameroon after jumping from wild chimpanzees (*Pan troglodytes troglodytes*) to humans during the twentieth century. HIV-2 is hypothesized to have originated from the Sooty Mangabey (*Cercocebus atys*), an Old World monkey of Guinea-Bissau, Gabon, and Cameroon. HIV-1 is more virulent, more easily transmitted and is the cause of the majority of HIV infections globally, while HIV-2 is less easily transmitted and is largely confined to West Africa.

References

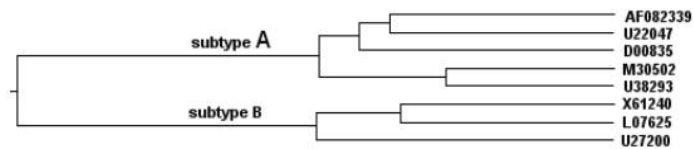
- 1: Joint United Nations Programme on HIV/AIDS (2006). "Overview of the global AIDS epidemic", 2006 Report on the global AIDS epidemic (PDF format). Retrieved on 2006-06-08.
- 2: Joint United Nations Programme on HIV/AIDS. AIDS epidemic update, 2005. (PDF format) Retrieved on 2006-02-28.
- 3: Palella, F. J. Jr, Delaney, K. M., Moorman, A. C., Loveless, M. O., Fuhrer, J., Satten, G. A., Aschman and D. J., Holmberg, S. D. (1998). "Declining morbidity and mortality among patients with advanced human immunodeficiency virus infection. HIV Outpatient Study Investigators". *N. Engl. J. Med* 338 (13): 853-860. PubMed.

Specificity

The Cole-Parmer qPCR Kit for Human Immunodeficiency Virus type 2 (HIV2) genomes is designed for the in vitro quantification of HIV2 genomes. The kit is designed to have the broadest detection profile possible whilst remaining specific to the HIV2 genome. The primers and probe sequences in this kit have 100% homology with a broad range of HIV2 sequences based on a comprehensive bioinformatics analysis.

The HIV-2 primers have been designed for the specific and exclusive in vitro quantification of both subtypes A and B but not subtypes C-G. The target sequence (pol) is highly conserved and has previously been shown to be a good genetic marker for HIV-2 detection in other real time PCR based studies (damond F et.al 2002). The primers and probe sequences in this kit have 100% homology with a broad range of clinically relevant reference sequences based on a comprehensive bioinformatics analysis. Representative sequences from subtypes A and B are included in the phylogenetic tree below. If you require further information, or have a specific question about the detection profile of this kit then please send an e.mail to cptechsupport@coleparmer.com and our bioinformatics team will answer your question.

Fig.1 Accession numbers for detected HIV-2 isolates



Kit Contents

- **HIV2 specific primer/probe mix (150 reactions BROWN)**
FAM labelled
- **HIV2 positive control template (for Standard curve RED)**
- **Internal extraction control primer/probe mix (150 reactions BROWN)**
VIC labelled as standard
- **Internal extraction control RNA (150 reactions BLUE)**
- **Endogenous control primer/probe mix (150 reactions BROWN)**
FAM labelled
- **HIV2/Internal extraction control/endogenous control RT primer mix (150 reactions GREEN)**
Required for two step protocol only
- **RNAse/DNase free water (WHITE)**
for resuspension of primer/probe mixes and internal extraction control RNA
- **Template preparation buffer (YELLOW)**
for resuspension of positive control template and standard curve preparation

Reagents and equipment to be supplied by the user

Real-Time PCR Instrument

RNA extraction kit

This kit is designed to work well with all processes that yield high quality RNA with minimal PCR inhibitors.

Lyophilised OneStep 2x RT-qPCR Mastermix

This kit is designed to be compatible with all commercially available OneStep Mastermixes that run with standard cycling conditions.

Pipettors and Tips

Vortex and centrifuge

Thin walled 1.5 ml PCR reaction tubes

Kit storage and stability

This kit is stable at room temperature but should be stored at -20°C on arrival. Once the lyophilised components have been resuspended they should not be exposed to temperatures above **-20°C for longer than 30 minutes** and unnecessary repeated freeze/thawing should be avoided. The kit is stable for six months from the date of resuspension under these circumstances.

If a standard curve dilution series is prepared this can be stored frozen for an extended period. If you see any degradation in this serial dilution a fresh standard curve can be prepared from the positive control.

Cole-Parmer does not recommend using the kit after the expiry date stated on the pack.

Suitable sample material

All kinds of sample material suited for PCR amplification can be used. Please ensure the samples are suitable in terms of purity, concentration, and RNA/DNA integrity (An internal PCR control is supplied to test for non specific PCR inhibitors). Always run at least one negative control with the samples. To prepare a negative-control, replace the template RNA sample with RNase/DNase free water.

Dynamic range of test

Under optimal PCR conditions Cole-Parmer HIV2 detection kits have very high priming efficiencies of >95% and can detect less than 100 copies of target template.

Notices and Disclaimers

This product is developed, designed and sold for research purposes only. It is not intended for human diagnostic or drug purposes or to be administered to humans unless clearly expressed for that purpose by the Food and Drug Administration in the USA or the appropriate regulatory authorities in the country of use. During the warranty period Cole-Parmer detection kits allow precise and reproducible data recovery combined with excellent sensitivity. For data obtained by violation to the general GLP guidelines and the manufacturer's recommendations the right to claim under guarantee is expired. PCR is a proprietary technology covered by several US and foreign patents. These patents are owned by Roche Molecular Systems Inc. and have been sub-licensed by PE Corporation in certain fields. Depending on your specific application you may need a license from Roche or PE to practice PCR. Additional information on purchasing licenses to practice the PCR process may be obtained by contacting the Director of Licensing at Roche Molecular Systems, 1145 Atlantic Avenue, Alameda, CA 94501 or Applied Biosystems business group of the Applied Biosystems Corporation, 850 Lincoln Centre Drive, Foster City, CA 94404. In addition, the 5' nuclease assay and other homogeneous amplification methods used in connection with the PCR process may be covered by U.S.

Patents 5,210,015 and 5,487,972, owned by Roche Molecular Systems, Inc, and by U.S. Patent 5,538,848, owned by The Perkin-Elmer Corporation.

Trademarks

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The PCR process is covered by US Patents 4,683,195, and 4,683,202 and foreign equivalents owned by Hoffmann-La Roche AG. BI, ABI PRISM® GeneAmp® and MicroAmp® are registered trademarks of the Applied Biosystems (Applied Biosystems Corporation). BIOMEK® is a registered trademark of Beckman Instruments, Inc.; iCycler™ is a registered trademark of Bio-Rad Laboratories, Rotor-Gene is a trademark of Corbett Research. LightCycler™ is a registered trademark of the Idaho Technology Inc. GeneAmp®, TaqMan® and AmpliTaqGold® are registered trademarks of Roche Molecular Systems, Inc., The purchase of the Cole-Parmer reagents cannot be construed as an authorization or implicit license to practice PCR under any patents held by Hoffmann-LaRoche Inc.

Principles of the test

Real-time PCR

A HIV2 specific primer and probe mix is provided and this can be detected through the FAM channel.

The primer and probe mix provided exploits the so-called TaqMan® principle. During PCR amplification, forward and reverse primers hybridize to the HIV2 cDNA. A fluorogenic probe is included in the same reaction mixture which consists of a DNA probe labeled with a 5`-dye and a 3`-quencher. During PCR amplification, the probe is cleaved and the reporter dye and quencher are separated. The resulting increase in fluorescence can be detected on a range of real-time PCR platforms.

Positive control

For copy number determination and as a positive control for the PCR set up, the kit contains a positive control template.

This can be used to generate a standard curve of HIV2 copy number / Cq value. Alternatively the positive control can be used at a single dilution where full quantitative analysis of the samples is not required. Each time the kit is used, at least one positive control reaction must be included in the run. A positive result indicates that the primers and probes for detecting the target HIV2 gene worked properly in that particular experimental scenario. If a negative result is obtained the test results are invalid and must be repeated. Care should be taken to ensure that the positive control does not contaminate any other kit component which would lead to false-positive results. This can be achieved by handling this component in a Post PCR environment. Care should also be taken to avoid cross-contamination of other samples when adding the positive control to the run. This can be avoided by sealing all other samples and negative controls before pipetting the positive control into the positive control well.

Negative control

To validate any positive findings a negative control reaction should be included every time the kit is used. For this reaction the RNase/DNase free water should be used instead of template. A negative result indicates that the reagents have not become contaminated while setting up the run.

Internal RNA extraction control

When performing RNA extraction, it is often advantageous to have an exogenous source of RNA template that is spiked into the lysis buffer. This control RNA is then co-purified with the sample RNA and can be detected as a positive control for the extraction process. Successful co-purification and real-time PCR for the control RNA also indicates that PCR inhibitors are not present at a high concentration.

A separate RT primer mix and a real-time PCR primer/probe mix are supplied with this kit to detect the exogenous RNA using real-time PCR. The PCR primers are present at PCR limiting concentrations which allows multiplexing with the target sequence primers. Amplification of the control cDNA does not interfere with detection of the HIV2 target cDNA even when present at low copy number. The Internal control is detected through the VIC channel and gives a Cq value of 28+/-3 depending on the level of sample dilution.

Endogenous control

To confirm extraction of a valid biological template, a primer and probe mix is included to detect an endogenous gene. Detection of the endogenous control is through the FAM channel and it is NOT therefore possible to perform a multiplex with the HIV2 primers. A poor endogenous control signal may indicate that the sample did not contain sufficient biological material.

Carry-over prevention using UNG (unsuitable for onestep procedure and optional for two step procedure)

Carry over contamination between PCR reactions can be prevented by including uracil-N-glycosylase (UNG) in the reaction mix. Some commercial mastermix preparations contain UNG or alternatively it can be added as a separate component. UNG can only prevent carry over from PCR reactions that include deoxyuridine triphosphate (dUTP) in the original PCR reaction. Cole-Parmer recommend the application of 0.2U UNG per assay with a 15 minute incubation step at 37°C prior to amplification. The heat-labile UNG is then inactivated during the Taq polymerase activation step.

Reconstitution Protocol

To minimize the risk of contamination with foreign DNA, we recommend that all pipetting be performed in a PCR clean environment. Ideally this would be a designated PCR lab or PCR cabinet. Filter tips are recommended for all pipetting steps.

- 1. Pulse-spin each tube in a centrifuge before opening.**
This will ensure lyophilised primer and probe mix is in the base of the tube and is not spilt upon opening the tube.
- 2. Reconstitute the kit components in the RNase/DNase free water supplied, according to the table below:**
To ensure complete resuspension, vortex each tube thoroughly.

Component - resuspend in water	Volume
Pre-PCR pack	
HIV2 primer/probe mix (BROWN)	165 µl
Internal extraction control primer/probe mix (BROWN)	165 µl
HIV2 RT primer mix (GREEN)	165 µl
Endogenous control primer/probe mix (BROWN)	165 µl
Pre-PCR heat-sealed foil	
Internal extraction control RNA (BLUE)	600 µl

- 3. Reconstitute the positive control template in the template preparation buffer supplied, according to the table below:**
To ensure complete resuspension, vortex this tube thoroughly.

Component - resuspend in template preparation buffer	Volume
Post-PCR heat-sealed foil	
HIV2 Positive Control Template (RED) *	500 µl

* This component contains high copy number template and is a VERY significant contamination risk. It must be opened and handled in a separate laboratory environment, away from the other components.

RNA extraction

The internal extraction control RNA can be added either to the RNA lysis/extraction buffer or to the RNA sample once it has been resuspended in lysis buffer.

DO NOT add the internal extraction control RNA directly to the unprocessed biological sample as this will lead to degradation and a loss in signal.

- 1. Add 4µl of the Internal extraction control RNA (BLUE) to each sample in RNA lysis/extraction buffer per sample.**
- 2. Complete RNA extraction according to the manufacturers protocols.**

One Step RT-PCR detection protocol

A one step approach combining the reverse transcription and amplification in a single closed tube is the preferred method.

For optimum performance and sensitivity.

All pipetting steps and experimental plate set up should be performed on ice. After the plate is poured proceed immediately to the One Step amplification protocol. Prolonged incubation of reaction mixes at room temperature can lead to PCR artifacts that reduce the sensitivity of detection.

1. **For each RNA sample prepare a reaction mix according to the table below:**
Include sufficient reactions for positive and negative controls.

Component	Volume
Lyophilised OneStep 2x RT-qPCR Mastermix	10 μ l
HIV2 primer/probe mix (BROWN)	1 μ l
Internal extraction control primer/probe mix (BROWN)	1 μ l
RNase/DNase free water (WHITE)	3 μ l
Final Volume	15 μl

2. **For each RNA sample prepare an endogenous control reaction according to the table below (optional):**
This control reaction will provide crucial information regarding the quality of the biological sample.

Component	Volume
Lyophilised OneStep 2x RT-qPCR Mastermix	10 μ l
Endogenous control primer/probe mix (BROWN)	1 μ l
RNase/DNase free water (WHITE)	4 μ l
Final Volume	15 μl

3. **Pipette 15 μ l of these mixes into each well according to your real-time PCR experimental plate set up.**
4. **Pipette 5 μ l of RNA template into each well, according to your experimental plate set up.**
For negative control wells use 5 μ l of RNase/DNase free water. The final volume in each well is 20 μ l.

5. If a standard curve is included for quantitative analysis prepare a reaction mix according to the table below:

Component	Volume
Lyophilised OneStep 2x RT-qPCR Mastermix	10 μ l
HIV2 primer/probe mix (BROWN)	1 μ l
RNAse/DNAse free water (WHITE)	4 μ l
Final Volume	15 μl

6. Preparation of standard curve dilution series.

- 1) Pipette 90 μ l of template preparation buffer into 5 tubes and label 2-6
- 2) Pipette 10 μ l of Positive Control Template (RED) into tube 2
- 3) Vortex thoroughly
- 4) Change pipette tip and pipette 10 μ l from tube 2 into tube 3
- 5) Vortex thoroughly

Repeat steps 4 and 5 to complete the dilution series

Standard Curve	Copy Number
Tube 1 Positive control (RED)	2 x 10 ⁵ per μ l
Tube 2	2 x 10 ⁴ per μ l
Tube 3	2 x 10 ³ per μ l
Tube 4	2 x 10 ² per μ l
Tube 5	20 per μ l
Tube 6	2 per μ l

7. Pipette 5 μ l of standard template into each well for the standard curve according to your plate set-up
The final volume in each well is 20 μ l.

One Step Amplification Protocol

Amplification conditions using Lyophilised OneStep 2x RT-qPCR Mastermix.

	Step	Time	Temp
	Reverse Transcription	10 mins	55 °C
	Enzyme activation	2 mins	95 °C
Cycling x50	Denaturation	10 secs	95 °C
	DATA COLLECTION *	60 secs	60 °C

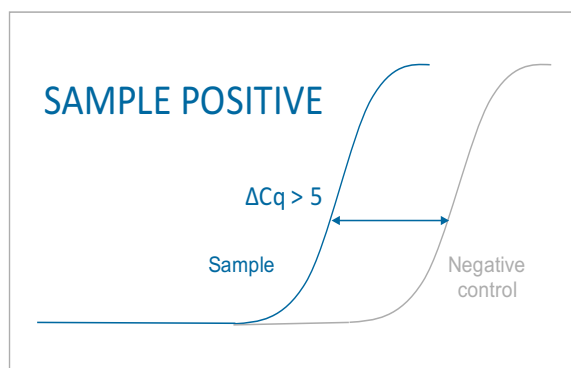
* Fluorogenic data should be collected during this step through the FAM and VIC channels

Interpretation of Results

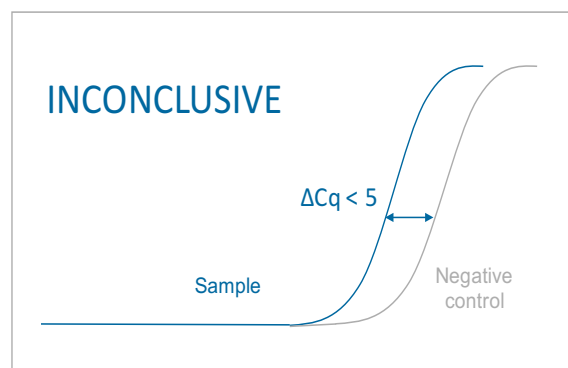
Target (FAM)	Internal control (VIC)	Positive control	Negative control	Interpretation
≤ 30	+ / -	+	-	POSITIVE QUANTITATIVE RESULT calculate copy number
> 30	+	+	-	POSITIVE QUANTITATIVE RESULT calculate copy number
> 30	-	+	-	POSITIVE QUALITATIVE RESULT do not report copy number as this may be due to poor sample extraction
-	+	+	-	NEGATIVE RESULT
+ / -	+ / -	+	≤ 35	EXPERIMENT FAILED due to test contamination
+ / -	+ / -	+	> 35	*
-	-	+	-	SAMPLE PREPARATION FAILED
+ / -	+ / -	-	+ / -	EXPERIMENT FAILED

Positive control template (RED) is expected to amplify between Cq 16 and 23. Failure to satisfy this quality control criterion is a strong indication that the experiment has been compromised.

*Where the test sample is positive and the negative control is positive with a Cq > 35 , the sample must be reinterpreted based on the relative signal strength of the two results:



If the sample amplifies > 5 Cq earlier than the negative control then the sample should be reinterpreted (via the table above) with the negative control verified as negative.



If the sample amplifies < 5 Cq earlier than the negative control then the positive sample result is invalidated and the result should be determined inconclusive due to test contamination. The test for this sample should be repeated.

Internal PCR control

The C_q value obtained with the internal control will vary significantly depending on the extraction efficiency, the quantity of RNA added to the RT and PCR reaction and the individual machine settings. C_q values of 28±3 are within the normal range. When amplifying a HIV2 sample with a high genome copy number, the internal extraction control may not produce an amplification plot. This does not invalidate the test and should be interpreted as a positive experimental result.

Endogenous control

The signal obtained from the endogenous control primer and probe set will vary according to the amount of biological material present in a given sample. An early signal indicates the presence of a good yield of biological material. A late signal suggests that little biological material is present in the sample.