# REPRODUCTIVE

## MAKING A DIFFERENCE IN REPRODUCTIVE HEALTH

#### Access Sensitive Estradiol Assay for Access Immunoassay Systems

Reproductive health concerns can affect people at all ages, and measuring hormone levels is key to addressing these concerns. Estradiol is a natural estrogen that is present in women and men. In nonpregnant women, estradiol is secreted by the ovary and the corpus luteum. In men, estradiol is primarily formed by aromatization of testosterone.

Levels of estradiol are used to monitor ovulatory status,<sup>1</sup> and, because estradiol levels reflect follicular maturation, the measurement of estradiol has been used as a valuable tool in the assessment of sexual development in children, anovulation and/or amenorrhea, polycystic ovary syndrome, and causes of infertility and menopause.<sup>2,3,4</sup>

For men, there is emerging evidence that estradiol levels play an important role in maintaining reproductive health and optimal bone density.

During *in vitro* fertilization, estradiol levels are routinely measured after gonadotropin stimulation to determine follicular status.<sup>5</sup>

The Beckman Coulter Access Sensitive Estradiol assay has the broadest measuring range, state-ofthe-art sensitivity and is the only assay in the market to offer a pediatric reference range. This unique combination provides better operational efficiency, reduces costs and delivers the quality results to make a difference in patients' reproductive health.

#### The Access Sensitive Estradiol assay will:

- > Strengthen your confidence in low-end results with state-of-the-art sensitivity
- Create efficiencies and reduce costly dilutions with the broadest, dynamic range, which surpasses IVF hyper-response guidelines
- > Ensure accurate patient results and proven correlation to GC-MS, the gold standard for estradiol testing



### Access Sensitive Estradiol Assay: state-of-the-art sensitivity and broadest

### measuring range

#### **Performance characteristics**

A comparison of 135 values using the Access Sensitive Estradiol assay on an Access Immunoassay System and mass spectrometry—including comparison to the ID/GC/MS reference measurement procedure (RMP) developed at Ghent University and an LC-MS method—gave the following statistical data. Analysis was performed using Passing-Bablok regression and Pearson's correlation, based on the CLSI EP09-A3 guideline.

Ν	Range of Observations (pg/mL)	Intercept (pg/mL) [95% CI]	Slope [95% Cl]	Correlation Coefficient (r)
135	15.7 to 4,838	-2.957 [-8.46 to 0.63]	0.98 [0.95 to 1.00]	0.99

#### **Characteristics**

Sample type/size	Serum, plasma (lithium heparin, sodium heparin. EDTA)/30 µL pick up			
Time to first result	≤55 minutes			
Limit of quantification (20% CV)	19.0 pg/mL (69.7 pmol/L)			
Limit of detection	15.0 pg/mL (≤ 55.1 pmol/L)			
Approximate calibrator levels	0, 11.0, 32.0, 292, 885 and 5,200 pg/mL (0, 40.4, 117, 1,072, 3,249 and 19,089 pmol/L)			
Reportable measuring range	15.0-5,200 pg/mL (55.1-19,089 pmol/L)			
Open-pack stability	28 days			
Calibration stability	28 days			
Precision	Total imprecision is ≤10% at concentrations >30.0 pg/mL (110.1 pmol/L), and total standard deviation (SD) is ≤5.00 pg/mL (18.36 pmol/L) at concentrations ≤30.0 pg/mL (110.1 pmol/L)			

#### Ordering information

Access Sensitive Estradiol Assay, 2 packs of 50 tests/pack	B84493
Sensitive Estradiol Calibrators S0, 4.0 mL/vial; S1–S5 2.0 mL/vial	B84494
Access Sensitive Estradiol Calibrator S0, 4.0 mL/vial	B97145

#### BECKMAN COULTER OFFERS A FULL LINE OF ASSAYS TO MEET LABORATORY TESTING NEEDS, INCLUDING A BROAD REPRODUCTIVE ASSAY PORTFOLIO

> AFP (ONTD)

> AMH

> DHEA-S

> Estradiol

- > hI H
- > PAPP-A

> Prolactin

- > Progesterone

> Sensitive Estradiol

- > SHBG
  - > Testosterone
  - > Total BhCG (5th IS)
  - > Unconjugated Estriol

#### Access Sensitive Estradiol assay is part of a comprehensive assay menu featured on Access and UniCel immunoassay systems. To learn more, visit www.beckmancoulter.com/immunoassay.

#### References

- 1. Endogenous Hormones and Breast Cancer Collaborative Group. Free Estradiol and Breast Cancer Risk in Postmenopausal Women: Comparison of Measured and Calculated Values. Cancer Epidemiol Biomarkers Prev. 2003 Dec; 12:1457-61.
- 2. Whitley RJ, et al. Endocrinology. In: Burtis CA, Ashwood ER, eds. Tietz Textbook of Clinical Chemistry. 2nd ed. Philadelphia, PA: WB Saunders Co.; 1994:1857-63.
- 3. Bulun SE, Adashi EY. The Physiology and Pathology of the Female Reproductive Axis. In: Kronenberg HM, et al., eds. Williams Textbook of Endocrinology. 11th ed. Philadelphia, PA: Saunders Elsevier; 2008:541-614.
- 4. Styne DM, Grumbach MM. Puberty: Ontogeny, Neuroendocrinology, Physiology and Disorders. In: Kronenberg HM, et al., eds. Williams Textbook of Endocrinology. 11th ed. Philadelphia, PA: Saunders Elsevier; 2008:969-1166.
- 5. Hendriks DJ, et al. Use of Stimulated Serum Estradiol Measurements for the Prediction of Hyperresponse to Ovarian Stimulation in Nitro Fertilization (IVF). J Assist Reprod Genet. 2004; 21(3):65-72
- 6. Access Sensitive Estradiol instructions for use (IFU). Beckman Coulter, Inc. 2017.

\*Available in ELISA format.

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> Inhibin A > Inhibin B\*

> hFSH