



Primerdesign™ Ltd

Chlamydia trachomatis

Cryptic Plasmid Helicase (DnaB)
gene

genesig® Standard Kit

150 tests



DNA testing

Everything...

Everyone...

Everywhere...

For general laboratory and research use only

Introduction to Chlamydia trachomatis

Chlamydia trachomatis is an obligate, coccoid or rod shaped bacterium that is an intracellular pathogen of humans. It is classed as a Gram-negative bacterium although it lacks a peptidoglycan cell wall. Its genome is circular double-stranded DNA, around 1,042K nucleotides in length with an extrachromosomal plasmid of about 7.5Kbp of which there are 7-10 copies per bacterial particle. C. trachomatis causes Chlamydia, the most common sexually transmitted disease in the world and Trachoma, a common cause of preventable blindness among children in developing nations.

C. trachomatis cannot survive outside of the eukaryotic cell and is transmitted through infected bodily secretions containing the elementary body form of the bacterium. This form is around 0.3 μ m in diameter and enters the host cell of mucosal membranes by self-induced endocytosis. The elementary body survives inside the endosome by avoiding phagolysosomal fusion and produces glycogen which triggers germination into a reticulate body. The reticulate body undergoes binary fission within the cell, the product of which is reticulate bodies that then transform back into elementary bodies before being released from the host cell by exocytosis.

Chlamydia infections are often asymptomatic but in other cases after one to three weeks incubation time symptoms in males can be seen. These include pain during urination, discharge from the penis and pain, infection or inflammation of the testicles or testicular ducts. Treatment with a course of antibiotics usually including doxycycline and erythromycin can eradicate the infection but as the majority of cases are asymptomatic, treatment is not common. Delay or lack of treatment can result in pelvic inflammatory disease (PID) in women and infertility in both sexes.

There are over 15 serovariants of C.trachomatis, four of which are implicated in ocular infection (serovariants A, B, Ba, and C).

Specificity

The Primerdesign™ genesig® Kit for Chlamydia trachomatis (C.trachomatis) genomes is designed for the in vitro quantification of C.trachomatis genomes. The kit is designed to have the broadest detection profile possible whilst remaining specific to the C. trachomatis genome.

The primers and probe sequences in this kit have 100% homology with a broad range of C.trachomatis sequences based on a comprehensive bioinformatics analysis.

The PrimerDesign™ Quantification Kit for human Chlamydia trachomatis has been designed for the specific and exclusive in vitro quantification of this species include all serovars A, B, Ba, C, D, E, F, G, I, K, K1, L2, L3, H, J and does not detect other closely related Chlamydia species. 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.

If you require further information, or have a specific question about the detection profile of this kit then please send an e.mail to enquiry@primerdesign.co.uk and our bioinformatics team will answer your question.

Kit Contents

- **C.trachomatis specific primer/probe mix (150 reactions BROWN)**
FAM labelled
- **C.trachomatis positive control template (for Standard curve RED)**
- **RNAse/DNAse free water (WHITE)**
for resuspension of primer/probe mixes
- **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

DNA extraction kit

This kit is recommended for use with genesig EASY DNA/RNA Extraction kit. However, it is designed to work well with all processes that yield high quality DNA with minimal PCR inhibitors.

oasig™ Lyophilised or PrecisionPLUS™ 2 x qPCR Mastermix

This kit is designed to work well with all commercially available Mastermixes. However, we recommend the use of oasig™ or PrecisionPLUS™ 2x qPCR MasterMix.

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. PrimerDesign does not recommend using the kit after the expiry date stated on the pack. Once the lyophilized components have been re-suspended, 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.

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 DNA integrity. Always run at least one negative control with the samples. To prepare a negative-control, replace the template DNA sample with RNase/DNase free water.

Dynamic range of test

Under optimal PCR conditions genesig® C.trachomatis 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 Primerdesign genesig® 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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Principles of the test

Real-time PCR

A *C.trachomatis* 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 *C.trachomatis* DNA. 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 *C. trachomatis* copy number / CT 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 *C. trachomatis* 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.

Carry-over prevention using UNG (optional)

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. Primerdesign 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	
C.trachomatis primer/probe mix (BROWN)	165 µl

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

Component - resuspend in template preparation buffer	Volume
Post-PCR heat-sealed foil	
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.

Real-time PCR detection protocol

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

Component	Volume
oasig™ or PrecisionPLUS™ 2x qPCR MasterMix	10 µl
C.trachomatis primer/probe mix (BROWN)	1 µl
RNAse/DNAse free water (WHITE)	4 µl
Final Volume	15 µl

2. **Pipette 15µl of this mix into each well according to your real-time PCR experimental plate set up.**
3. **Prepare DNA templates for each of your samples.**
4. **Pipette 5µl of DNA template into each well, according to your experimental plate set up.**
For negative control wells use 5µl of RNAse/DNAse free water. The final volume in each well is 20µl.
5. **If a standard curve is included for quantitative analysis prepare a reaction mix according to the table below:**

Component	Volume
oasig™ or PrecisionPLUS™ 2x qPCR MasterMix	10 µl
C.trachomatis primer/probe mix (BROWN)	1 µl
RNAse/DNAse free water (WHITE)	4 µl
Final Volume	15 µl

6. Preparation of a standard curve dilution series.

- 1) Pipette 90µl of template preparation buffer into 5 tubes and label 2-6
- 2) Pipette 10µl of Positive Control Template (RED) into tube 2
- 3) Vortex thoroughly
- 4) Change pipette tip and pipette 10µl 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)	2×10^5 per µl
Tube 2	2×10^4 per µl
Tube 3	2×10^3 per µl
Tube 4	2×10^2 per µl
Tube 5	20 per µl
Tube 6	2 per µl

7. Pipette 5µl of standard template into each well for the standard curve according to your experimental plate set up.

The final volume in each well is 20µl.

Amplification Protocol

Amplification conditions using oasig™ or PrecisionPLUS™ 2x qPCR MasterMix.

	Step	Time	Temp
50 Cycles	UNG treatment (if required) **	15 mins	37 °C
	Enzyme activation	2 mins	95 °C
	Denaturation	10s	95 °C
	DATA COLLECTION *	60s	60 °C

* Fluorogenic data for the control DNA should be collected during this step through the FAM channel

** Required if your Mastermix includes UNG to prevent PCR carryover contamination

Interpretation of Results

Target	Negative control	Positive control	Interpretation
+ive	-ive	+ive	+ive
+ive	-ive	+ive	+ive
+ive	+ive	+ive	*
+ive	+ive	+ive	*
-ive	-ive or +ive	+ive	-ive
-ive	-ive or +ive	-ive	Experiment fail
-ive	-ive or +ive	-ive	Experiment fail

* Where the test sample is positive and the negative control is also positive the interpretation of the result depends on the relative signal strength of the two results. This is calculated using the delta CT method by subtracting the target CT value from the negative control CT value (NC CT value – sample CT value). Where the test sample is positive and the NC is detected much later ($\Delta CT \geq 5$) then the positive test result is reliable. Where the NC detection is at a similar level to the test sample ($\Delta CT < 5$) then the positive test result is invalidated and a negative call is the correct result.