

WHO Reference Reagent Reference Reagent for Batroxobin NIBSC code: 15/140 Instructions for use (Version 2.0, Dated 20/05/2021)

1. INTENDED USE

The WHO Reference Reagent for Batroxobin (15/140) was established by the Expert Committee on Biological Standardisation of the World Health Organisation in October 2016. The intended use of this preparation is to standardise potency measurements for batroxobin. A potency of 50 U/ampoule was assigned in a collaborative study, based on clotting assays with purified fibrinogen and human plasma as substrate, relative to the 2nd British Standard for Batroxobin (93/526).

2. CAUTION

This preparation is not for administration to humans or animals in the human food chain.

The preparation contains material of human origin, and either the final product or the source materials, from which it is derived, have been tested and found negative for HBsAg, anti-HIV and HCV RNA. As with all materials of biological origin, this preparation should be regarded as potentially hazardous to health. It should be used and discarded according to your own laboratory's safety procedures. Such safety procedures should include the wearing of protective gloves and avoiding the generation of aerosols. Care should be exercised in opening ampoules or vials, to avoid cuts.

3. UNITAGE

The assigned potency of this preparation is 50 U/ampoule.

4. CONTENTS

Country of origin of biological material: United Kingdom.

The bulk material used to prepare the WHO Reference Reagent for Batroxobin (15/140) was donated by one manufacturer as a frozen solution containing batroxobin isolated from the the venom of the pit viper Bothrops moojeni. This frozen material was thawed and diluted to a final concentration of approx. 50 U/ml (based on local potency estimates) in 20 mM phosphate buffer (pH 7.4) containing 5 mg/ml human albumin. A total of 1041 5 ml DIN ampoules were filled with 1 ml aliquots of the diluted material with a mean filling weight of 1.01 g (cv = 0.34%). Freeze drying was done following WHO procedures to produce ampoules with a mean dry weight of 0.0072 g (cv = 1.99%) and a residual moisture of 1.05% (cv = 18.0%).

5. STORAGE

Upon receipt unopened ampoules should be stored in the dark at or below -20 $^{\circ}\text{C}.$

Please note: because of the inherent stability of lyophilized material, NIBSC may ship these materials at ambient temperature.

6. DIRECTIONS FOR OPENING

DIN ampoules have an 'easy-open' coloured stress point, where the narrow ampoule stem joins the wider ampoule body. Various types of ampoule breaker are available commercially. To open the ampoule, tap the ampoule gently to collect material at the bottom (labelled) end and follow manufactures instructions provided with the ampoule breaker.

7. USE OF MATERIAL

No attempt should be made to weigh out any portion of the freeze-dried material prior to reconstitution

Allow the ampoule to reach ambient temperature before opening and reconstitute with 1.0 ml distilled or deionised water.

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8. STABILITY

Reference materials are held at NIBSC within assured, temperature-controlled storage facilities. Reference Materials should be stored on receipt as indicated on the label.

NIBSC follows the policy of WHO with respect to its reference materials. It is the policy of WHO not to assign an expiry date to their international reference materials and they remain valid with the assigned potency until withdrawn or amended.

Predictions on long term stability are made by monitoring ampoules stored under accelerated degradation conditions over time.

Based on the results of a stability test it is advised that ampoules are stored on wet ice following reconstitution, and assays should be completed within 4 hours of reconstitution.

9. REFERENCES

A report of the collaborative study to calibrate the standard is available from WHO, reference number WHO/BS/2016.2282

10. ACKNOWLEDGEMENTS

We are grateful to all the participants that took part in the study, and to the FXIII and Fibrinogen Subcommittee of the Scientific and Standardisation Committee (SSC) of the International Society on Thrombosis and Haemostasis (ISTH).

11. FURTHER INFORMATION

Further information can be obtained as follows;

This material: enquiries@nibsc.org

WHO Biological Standards:

http://www.who.int/biologicals/en/

JCTLM Higher order reference materials:

http://www.bipm.org/en/committees/jc/jctlm/ Derivation of International Units:

http://www.nibsc.org/standardisation/international_standards.aspx

Ordering standards from NIBSC:

http://www.nibsc.org/products/ordering.aspx

NIBSC Terms & Conditions:

http://www.nibsc.org/terms_and_conditions.aspx

12. CUSTOMER FEEDBACK

Customers are encouraged to provide feedback on the suitability or use of the material provided or other aspects of our service. Please send any comments to enquiries@nibsc.org

13. CITATION

In all publications, including data sheets, in which this material is referenced, it is important that the preparation's title, its status, the NIBSC code number, and the name and address of NIBSC are cited and cited correctly.

14. MATERIAL SAFETY SHEET

Classification in accordance with Directive 2000/54/EC, Regulation (EC) No 1272/2008: Not applicable or not classified

Physical and Chemical properties				
Physical appearance:		Corrosive:	No	
Solid				
Stable:	Yes	Oxidising:	No	
Hygroscopic:	Yes	Irritant:	No	
Flammable:	No	Handling:See	Handling:See caution, Section 2	
Other (specify):				







Toxicological properties			
Effects of inhalation:	Not established, avoid inhalation		
Effects of ingestion:	Not established, avoid ingestion		
Effects of skin absorption:	Not established, avoid contact with skin		
Suggested First Aid			
Inhalation: Seek medical advice			
Ingestion: Seek medical advice			
Contact with eyes: Was	Wash with copious amounts of water. Seek		
medical advice			
Contact with skin: Was	h thoroughly with water.		
Action on Spillage and Method of Disposal			
Spillage of ampoule contents should be taken up with absorbent			
material wetted with an appropriate disinfectant. Rinse area with an			
appropriate disinfectant followed by water.			
Absorbent materials used to treat spillage should be treated as			

15. LIABILITY AND LOSS

biological waste.

In the event that this document is translated into another language, the English language version shall prevail in the event of any inconsistencies between the documents.

Unless expressly stated otherwise by NIBSC, NIBSC's Standard Terms and Conditions for the Supply of Materials (available at http://www.nibsc.org/About_Us/Terms_and_Conditions.aspx or upon request by the Recipient) ("Conditions") apply to the exclusion of all other terms and are hereby incorporated into this document by reference. The Recipient's attention is drawn in particular to the provisions of clause 11 of the Conditions.

16. INFORMATION FOR CUSTOMS USE ONLY

Country of origin for customs purposes*: United Kingdom

* Defined as the country where the goods have been produced and/or sufficiently processed to be classed as originating from the country of supply, for example a change of state such as freeze-drying.

Net weight: 7.43 mg

Toxicity Statement: Toxicity not assessed

Veterinary certificate or other statement if applicable.

Attached: No

17. CERTIFICATE OF ANALYSIS

NIBSC does not provide a Certificate of Analysis for WHO Biological Reference Materials because they are internationally recognised primary reference materials fully described in the instructions for use. The reference materials are established according to the WHO Recommendations for the preparation, characterization and establishment of international and other biological reference standards http://www.who.int/bloodproducts/publications/TRS932Annex2_Inter_biolefstandardsrev2004.pdf (revised 2004). They are officially endorsed by the WHO Expert Committee on Biological Standardization (ECBS) based on the report of the international collaborative study which established their suitability for the intended use.

