WHO International Standard
INTERFERON ALPHA, (Human leukocyte-derived)
NIBSC code: 94/784
Instructions for use
(Version 6.0, Dated 16/04/2013)

1. INTENDED USE
This preparation is the 1st WHO International Standard for human interferon alpha of leukocyte origin. This preparation is recommended for calibration of leukocyte-derived human interferon alpha preparations, with the exception of interferon alpha n3 for which there is a separate International standard, coded 95/574.
This preparation replaces the International Reference Preparation for interferon, human leukocyte, coded 69/19.

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
11,000 International Units (IU) per ampoule

4. CONTENTS
Country of origin of biological material: United Kingdom.
Each ampoule contains a freeze-dried residue comprising, under an atmosphere of nitrogen:
Interferon alpha, approximately 220 ng
6-salt phosphate buffered saline pH 7.0
60 mg human serum albumin

The interferon alpha was expressed in human leukocytes

5. STORAGE
Unopened ampoules should be stored at -20°C.
For economy of use, it is recommended that the solution be sub divided into several small aliquots and stored at -40°C or below.
Please note: because of the inherent stability of lyophilized material, NIBSC may ship these materials at ambient temperature.

6. DIRECTIONS FOR OPENING
DN 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.
Dissolve the total contents of the ampoule in 0.5ml of sterile distilled water and transfer to a sterile container. Rinse the ampoule with 0.4ml of sterile distilled water and add to the first solution. Make up the total volume to 1.0ml with sterile distilled water. The final solution will contain IFN alpha at a concentration of 11000 International Units per ml. Use carrier protein where dilution is required. It is recommended that initial dilutions, i.e. 1:10, 1:100, are either made in cell culture medium containing - 5%v/v –10%v/v calf serum or in phosphate-buffered saline, pH 7.0-7.4, containing 0.3%v/v bovine casein to prevent adsorption of IFN to container surfaces.

8. STABILITY
Reference materials are held at NIBSC within assured, temperature-controlled storage facilities and they should be stored on receipt as indicated on the label. It is the policy of WHO not to assign an expiry date to their international reference materials. Accelerated degradation studies have indicated that this material is suitably stable, when stored at -20°C or below, for the assigned values to remain valid until the material is withdrawn or replaced. These studies have also shown that the material is suitably stable for shipment at ambient temperature without any effect on the assigned values. Once reconstituted, diluted or aliquotted, users should determine the stability of the material according to their own method of preparation, storage and use. Users who have data supporting any deterioration in the characteristics of any reference preparation are encouraged to contact NIBSC.

9. REFERENCES
This standard was produced under WHO guidelines as cited in the WHO Technical Reports Series 800, 1990, Annex 4.

10. ACKNOWLEDGEMENTS
N/A

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

<table>
<thead>
<tr>
<th>Physical and Chemical properties</th>
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</thead>
<tbody>
<tr>
<td>Physical appearance: Freeze-dried white powder</td>
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<tr>
<td>Corrosive: No</td>
</tr>
<tr>
<td>Stable: Yes</td>
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<tr>
<td>Oxidising: No</td>
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<tr>
<td>Hygroscopic: Yes</td>
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<tr>
<td>Irritant: No</td>
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<tr>
<td>Flammable: No</td>
</tr>
<tr>
<td>Handling: See caution, Section 2</td>
</tr>
<tr>
<td>Other (specify): Contains material of human origin</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Toxicological properties</th>
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</thead>
<tbody>
<tr>
<td>Effects of inhalation: Not established, avoid inhalation</td>
</tr>
<tr>
<td>Effects of ingestion: Not established, avoid ingestion</td>
</tr>
<tr>
<td>Effects of skin absorption: Not established, avoid contact with skin</td>
</tr>
</tbody>
</table>

**Suggested First Aid**

- Inhalation: Seek medical advice
- Ingestion: Seek medical advice
- Contact with eyes: Wash with copious amounts of water. Seek medical advice
- Contact with skin: Wash 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 biological waste.

15. **LIABILITY AND LOSS**

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: 1g

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_biolrefstandardsrev2004.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.