

hepatomiR[®]

microRNA Biomarkers of Liver Function and Disease

hepatomiR[®] kit

Instructions for Use v1.0

May 2022



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Further information and technical notes can be found at www.tamirna.com/hepatomiR

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Revision history

Date	Revision	Details about change
May 2022	1.0	Creation of the IFU

Intended-Use

Intended use

The hepatomiR[®] kit is intended to be used to quantify the levels of three human miRNAs, hsa-miR-122-5p, hsa-miR-192-5p, and hsa-miR-151a-5p in human platelet-poor plasma samples (Table 1). The hepatomiR[®] software calculates and returns a score (“p-score”), that can be used as a surrogate of liver function. The hepatomiR[®] p-score ranges between 0 and 1. A high p-score indicates reduced liver function and higher risk of adverse outcomes (see below “other intended use”).

Table 1

List of microRNAs included in the hepatomiR[®] kit

microRNAs measured by the hepatomiR[®] kit.

microRNA ID (miRbase v22)	miRbase Accession Number	microRNA Sequence
hsa-miR-122-5p	MIMAT0000421	UGGAGUGUGACAAUGGUGUUUG
hsa-miR-192-5p	MIMAT0000222	CUGCCA AUUCCA UAGGUCACAG
hsa-miR-151a-5p	MIMAT0004697	UCGAGGAGCU CACAGUCUAGU

Key publications:

- Starlinger P, Hackl H, Pereyra D, Skalicky S, Geiger E, Finsterbusch M, Tamandl D, Brostjan C, Grünberger T, Hackl M, Assinger A. (2019). Predicting Postoperative Liver Dysfunction Based on Blood Derived MicroRNA Signatures. *Hepatology*. 2019 Jun;69(6):2636-2651. doi: 10.1002/hep.30572. Epub 2019 Apr 10

Definition of the patient population

The population used to develop hepatomiR[®] was men (69%) and women (31%). The age range was 22-90 years with a median of 65 years. Three major tumor types were represented as hepatectomy, specifically hepatocellular (HCC) (20%), cholangiocellular (CCC) (19%), and metastatic colorectal carcinomas (mCRC) (41%). Other tumor types (9%) and benign tumors (5.5%) were represented as well.

Other intended use

The hepatomiR[®] p-score has been found to be potentially useful for preoperative (pre-OP) assessment of liver function in patients undergoing hepatic surgery. Together with other clinical parameters, the hepatomiR[®] p-score can inform about a patient’s risk of

posthepatectomy liver failure (PHLF).

Therefore, the test can be applied in patients in need of partial liver resection (for example for the treatment of mCRC, CCC, or HCC cancers) who are eligible for liver resection based on tumor size and distribution, general health status and liver function status according to traditional liver function parameters for the following reasons:

- To identify patients with high risk of PHLF, who will not benefit from operation.
- To identify patients with low risk of PHLF, who can be operated without delay
- To identify patients with intermediate risk of PHLF, who are eligible of preoperative intervention with the aim of improving liver function.
- To monitor of liver function during and after intervention with the aim of improving liver function.

Others planned intended use of the product are: the assessment of liver function in the context of acute or chronic liver diseases.

Diagnostic performance

Starlinger et al. (Hepatology, Vol. 69, No. 6, 2019) retrospectively analyzed the utility of hepato*miR*[®] p-score for the prognosis of PHLF in 146 oncological patients suffering from HCC, CCC, or mCRC, respectively. Table 2 summarizes the observed prognostic performance for PHLF for two cut-offs.

Table 2 

Prognostic performance characteristics of the hepato*miR*[®] p-score for PHLF.


Cut-off	Odds Ratio	PPV	NPV	Sensitivity	Specificity
p > 0.59	18.7	0.70	0.89	0.55	0.94
p > 0.68	19.7	0.83	0.85	0.34	0.98

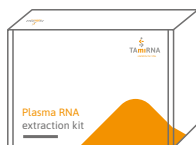
The hepato*miR*[®] test could therefore satisfy the urgent clinical need for an easily assessable preoperative test to assess the liver function in patients with liver cancer, specifically HCC, CCC, and mCRC, and predict liver function recovery after partial liver resection. This is critical to identify patients with high risk of PHLF, and to plan according risk reduction measures.

Workflow Components

The following components are required for the measurement of 3 heptomiRs and 5 quality controls in human platelet poor plasma samples:

- Plasma RNA extraction kit
- heptomiR[®] chemistry, including spike-ins, RT chemistry and miGreen Mix
- primer coated heptomiR[®] 96- or 384-well qPCR plates

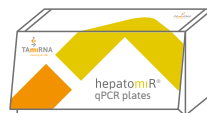
 **Figure 1**
Overview of required components



Plasma RNA
extraction kit



heptomiR[®] chemistry,
including spike-ins, RT
chemistry and miGreen
Mix

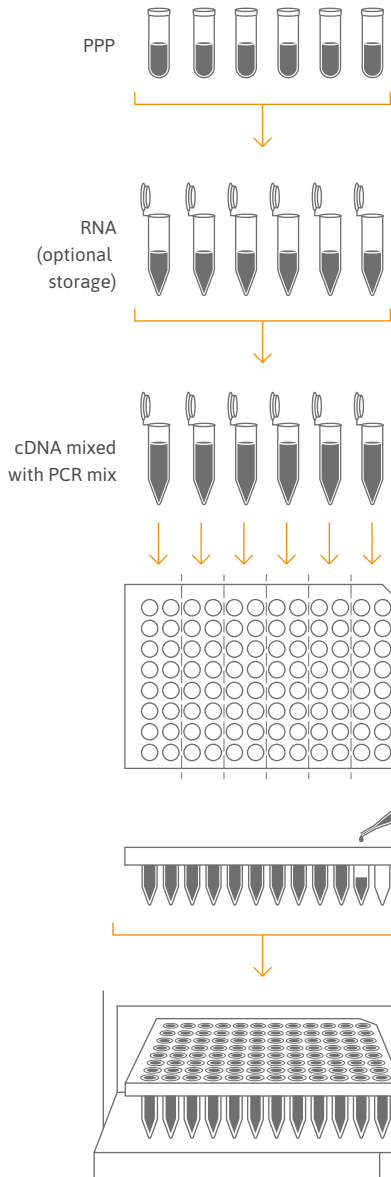


primer coated
heptomiR[®]
96- or 384-well qPCR
plates

This combination of kits enables the measurement of microRNAs in platelet poor plasma in a single day.

The entire workflow consists of five main steps shown in Figure 2:

1. RNA extraction
2. cDNA synthesis
3. Preparation of PCR Mastermix
4. Real-time PCR amplification
5. Data analysis



1 RNA extraction (1.5h)

Extract RNA using the Plasma
RNA extraction kit

2 cDNA synthesis (1.5h)

Prepare cDNA using the
hepatomiR[®] chemistry kit reagents

3 Preparation of PCR Mastermix

Mix cDNA with miGreen
Mix and nuclease free water

4 Real-time PCR amplification (2.5h)

Distribute PCR mix into wells on the
ready-to-use hepatomiR[®] plate and
start qPCR run

5 Data analysis

Export data for further analysis,
data pre-processing, normalization
and statistical analysis

Kit Technology

RNA Extraction

The Plasma RNA extraction kit enables the isolation of microRNA, from a maximum of 200 µl of sample. The phenol-free protocol uses spin column technology without the need for a vacuum pump. It allows analysis of extracellular vesicle RNA through lysis of the vesicles. The kit is designed to isolate high quality microRNA in amounts sufficient for qPCR analysis using the hepato*miR*[®] chemistry kit.

The workflow consists of 5 simple steps:

1. Lysis of biofluid components
2. Precipitation and removal of proteins
3. Precipitation of RNA using isopropanol and column loading
4. Washing
5. Elution

In the first part of the RNA isolation process, membranized particles/cells are lysed using the provided lysis solution. Proteins are precipitated using the precipitation solution and the supernatant (including RNA) is mixed with isopropanol for precipitation. This solution is loaded onto a spin-column, where a resin binds RNA in a manner that depends on ionic concentrations. Thus, microRNA will bind to the column, while the residual proteins will be removed in the flow-through or retained on the top of the resin. The bound microRNA is then washed with the provided wash solutions in order to remove any remaining impurities, and the purified microRNA is eluted with RNase free water.

Reverse Transcription Quantitative PCR Detection

A universal reverse transcription (RT) reaction is performed, as shown in Figure 3 (Step 1–2), which means that all microRNA species are converted into complementary DNA (cDNA) at the same time. This enables parallel quantitative PCR (qPCR) detection of different microRNA sequences in one cDNA sample using the hepato*miR*[®] test plate.

Universal RT is achieved by first adding a poly-A tail to the mature microRNA template (Step 1). Complementary cDNA is synthesized using a poly-T-primer with a 3' degenerate anchor and a 5' universal tag.

During qPCR, the cDNA is then amplified using microRNA-specific and LNA[™]-enhanced forward and reverse primers using miGreen for detection of double-stranded DNA (Step 2).

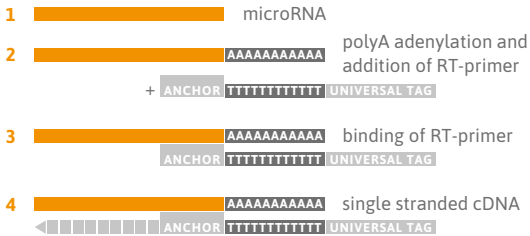


Figure 3

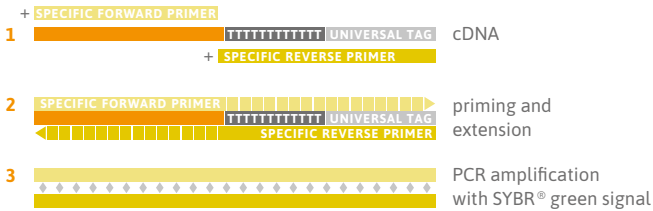
Reverse transcription and
PCR amplification



Step 1: Reverse transcription (RT)



Step 2: Real-time PCR amplification



LNA™ Technology

Locked Nucleic Acids (LNA™) are chemically modified nucleotides, which offer substantially increased affinity for its complementary strand, compared to traditional DNA or RNA oligonucleotides. This results in unprecedented sensitivity and specificity and makes LNA™ oligonucleotides ideal for the detection of microRNAs, due to their short length and varying content of G-C and A-T bases. Without LNA™, the heterogeneous hybridization properties could result in unspecific and low efficient primer binding and compromise data quality.

Storage and Stability of Kit Components

The hepatomiR® chemistry kit will be shipped on dry ice and **must be stored at -20°C**. The hepatomiR® qPCR plates will be shipped at room temperature and **must be stored at -20°C**. The Plasma RNA extraction kit is shipped at room temperature. Store the spin columns immediately at 2-8°C. Under these conditions, all components are stable until the expiration date, which is provided on the package or vial. Please note that each product component (Plasma RNA extraction kit, hepatomiR® chemistry kit, hepatomiR® qPCR plates) has an individual shelf-life with potentially differing expiration dates.

Warnings and precautions

The hepato*miR*[®] Kit workflow should be performed by qualified and trained staff to avoid the risk of erroneous results. Use separate areas for the preparation of patient samples, RNA, cDNA and qPCR to avoid contamination.

- This product is intended for in-vitro diagnostic use only.
- Blood specimens should always be treated as if infectious and/or biohazardous in accordance with safe laboratory procedures.
- Follow necessary precautions when handling blood specimens. Use personal protective equipment (PPE) consistent with current guidelines for the handling of potentially infectious samples.
- Always use pipette tips with aerosol barriers. Tips that are used must be sterile and free from DNases and RNases.
- Do not eat, drink, smoke, or apply cosmetic products in the work areas.
- Do not use the kit after the expiry date.
- Do not use the kit when components are damaged after delivery.
- Dispose of waste in compliance with the local regulations.
- The reagents must be stored in the correct storage conditions before and after use.
- Try to only use LOTs for components 1, 2, and 3 that have been delivered together. Do not mix LOTs of components that have not been delivered together.
- The hepato*miR*[®] components might have different expiration dates. We recommend to check and record the dates of each component (Plasma extraction kit, hepato*miR*[®] chemistry kit, hepato*miR*[®] qPCR plates upon arrival.
- Wash Buffer 1 and Lysis Buffer contain guanidine thiocyanate, which can form highly reactive compounds when combined with bleach. If liquid containing these solutions is spilt, clean with suitable laboratory detergent and water. If the spilt liquid contains potentially infectious agents, clean the affected area first with laboratory detergent and water, and then with 1% (v/v) sodium hypochlorite.

Material Safety Data Sheets (MSDS) are available online in convenient and compact PDF format at

www.tamirna.com/innovative-blood-based-liver-biomarkers/ where you can find, view and print the MSDS.

- Any serious incident that has occurred in relation to the device must be reported to the manufacturer and the competent authority of the Member State in which the user and/or patient is established.

2

Important Pre-Analytical Considerations

Choice of Biofluid

Sample type: The hepato^{miR} test requires the use of double-centrifuged plasma in order to obtain reliable results. Please refer to page 21 of this manual for the specific collection protocol. **Important:** Heparin as an anticoagulant is not compatible with RT-qPCR analysis and must be avoided. CTAD (Citrate, Theophyllin, Adenosin and Dipyridamol) has been exclusively used during the development of the hepato^{miR} kit. Citrate has been shown to yield comparative results.

Table 3 summarizes the type of anti-coagulants and tube manufacturers, which have been tested and shown comparable results:

Table 3
Compatible collection tubes

Compatible collection tubes

Manufacturer	Catalog number	Anti-coagulant	Volume mL
Greiner, VACUETTE®	454387	Citrate	3.5 mL
Greiner, VACUETTE®	454064	CTAD	3.5 mL

Pre-analytical Standardization

Conditions during plasma processing can affect the detection of microRNAs mainly because of hemolysis, platelet activation or platelet and other blood cell contamination. In order to minimize pre-analytical variability and improve data quality, all protocols for collection and processing of platelet-poor-plasma (PPP) need to be standardized. We recommend to incorporate the following points in the pre-analytical study protocols:

- Patient variation: if possible standardize the time for blood collection. Circadian rhythm, activity and diet are known to influence the levels of circulating microRNA content in patients.
- Use standardized needles and only plasma collection tubes that have been specified in table 3. We recommend to use 21 gauge needles for blood collection. Ensure that only the specified blood collection materials are used during the entire study.

- Blood collection must be performed by a person that is trained and familiar with the study protocol. Gloves must be worn at all times when handling specimens. This includes amongst others removal of the rubber stopper from the blood tubes, centrifugation, pipetting, disposal of contaminated tubes, and clean-up of any spills. Tubes, needles, and pipets must be properly disposed of in biohazard containers, in accordance with institutional requirements.
- Universal precautions and OSHA (Occupational Safety and Health Administration) and institutional requirements (<http://www.osha.gov/SLTC/biologicalagents/index.html>) should be followed, including gloves, eye protection or working in a biosafety cabinet for blood processing.
- Incubation and centrifugation protocols for obtaining plasma from whole blood must be standardized and followed strictly (see “Plasma Collection” on page 20 for exact protocols).
- Hemolysis (visible as red-colored biofluid) must be recorded for all samples used (see “Quality Control” on page 15 for more details on how to detect hemolysis in your samples).
- Plasma samples can contain substances that inhibit the RT-qPCR reaction. A prominent inhibitor is heparin. Hence, the use of lithium-heparin as an anticoagulant must be avoided.
- After thawing of collected plasma samples at room temperature, ensure that samples are kept cool (on ice or 4°C) at all times and avoid frequent freeze-thaw cycles. Low temperature is essential for RNA stability and sample matrix.
- For handling of plasma as well as RNA/DNA RNase-free filter tips and nuclease-free microcentrifuge tubes with optimized surface properties to prevent adsorption of nucleic acids (“low binding”), must be used.

Storage and Stability of PPP, RNA and DNA

Following the blood collection, PPP should be used for analysis (RNA isolation) within 120 minutes. If immediate analysis is not feasible, PPP can be stored at -80°C for up to 1 year.

All samples should be stored in nuclease-free plastic tubes with minimized absorption rates for nucleic-acids “low binding”. To avoid freeze-thaw cycles the generation of aliquots of PPP is recommended. We recommend aliquot volumes of 225 µL PPP.

PPP, and RNA samples must be stored at -80°C for long term storage and kept on ice at all times during working procedures.

Total RNA samples should be stored in nuclease-free low-binding tubes at -80°C for not more than 6 months prior to analysis.

Undiluted cDNA must be stored at -20°C and can be used for up to 5 weeks after initial storage. Avoid more than 5 freeze/thaw cycles of frozen RNA and undiluted cDNA samples.

Working with RNA

RNases are very stable and robust enzymes that degrade RNA. Before working with RNA, it is recommended to create an RNase-free environment following the precautions below:

- The RNase-free working environment should be located away from microbiological work stations.
- Clean, disposable gloves should be worn at all times when handling reagents, samples, pipettes, disposable tubes, etc.
- It is recommended that gloves are changed frequently to avoid contamination.
- Designated solutions, tips, tubes, lab coats, pipettes, etc. should be prepared for RNA work only.
- All solutions that will be used should be prepared using molecular biology grade nuclease-free water.
- Clean all surfaces with commercially available RNase decontamination solutions.
- When working with purified RNA samples, ensure that they remain on ice.
- Spin down all reaction and sample tubes before opening.
- Use filter barrier pipette tips to avoid aerosol-mediated contamination.

It is recommended to establish and maintain designated areas for PCR setup, PCR amplification, and DNA detection of PCR products, due to the risk of contaminating reagents and mastermixes with amplified DNA.

The isolation of RNA and the reaction steps preceding real-time PCR should be performed in rooms or areas, which are separated from areas where PCR experiments are performed in order to avoid contamination with amplified DNA. Use separate clean lab coats for RNA sample preparation, cDNA synthesis and when setting up PCR reactions or handling PCR products. Avoid bringing and opening tubes with amplified PCR products into the PCR setup area.

Quality Control

Synthetic spike-in Controls

In general, spike-in controls are used to monitor the efficiency and correct result of every workstep in the experiment. They can be used to identify outliers due to the presence of inhibiting factors or incorrect handling.

Uniform Cq-values obtained for the spike-ins demonstrate successful and homogenous RNA isolation, reverse transcription and qPCR for the samples. Synthetic spike-ins do not reveal the RNA content and quality in the biological sample.

RNA spike-in – The synthetic RNA spike-in is added to the sample during RNA extraction. It is used to monitor RNA extraction efficiency. The sequence has been designed to not match eukaryotic genomes and can therefore be applied across all species.

cDNA spike-in – The synthetic cDNA spike-in is added to the extracted RNA during reverse transcription into cDNA. It is used as a control for reverse transcription efficiency. It shares the natural microRNA sequence from *C. elegans*, which is not found in mammalian species. Reverse transcription efficiency is known to introduce the highest technical variance to RT-qPCR data.

PCR spike-in – This synthetic DNA template together with primers is spotted at a fixed position on every hepatomiR[®] test plate. The PCR spike-in is used to monitor PCR efficiency and to detect the presence of PCR inhibitors in samples.

The results obtained from all three spike-ins are analyzed by the hepatomiR analysis toolkit and used for quality control purposes. Only samples where spike-in values are found within range will be used for computation of the hepatomiR[®] p-score.

Hemolysis

Hemolysis can be a major cause of variation in serum/plasma microRNA levels due to contamination with cellular RNA.


The presence of hemolysis should be assessed visually for each sample. In addition, hemolysis can be assessed using the Hemolysis Index, which is based on the relative expression of miR-451a-5p compared to miR-23a-3p. An increase in miR-451a-5p relative to miR-23a-3p indicates the presence of hemolysis in human serum or plasma samples. The hepato^{miR} analysis toolkit will automatically calculate and check the Hemolysis Index. Only samples with a Hemolysis Index < 7 will pass quality control and be used for computation of the hepato^{miR} p-score.

Another option to determine hemolysis is the measurement of the absorbance peak of free haemoglobin by assessing free haemoglobin using a spectrophotometer such as NanoDrop™. Human serum or plasma samples are classified as being hemolyzed if the absorption at 414 nm is exceeding 0.2. However, the presence of small amounts of cellular contamination in serum or plasma samples is not readily detectable by visual or spectrophotometric means.

RNA Yield

Determination of RNA yield from 200 µL PPP is not possible by optical spectrophotometry or NanoDrop™ due to the lack in sensitivity of the method. We therefore use a RNA spike-in control to monitor RNA extraction efficiency. In addition, the entire analytical protocol precisely specifies to fluid volumes throughout the entire workflow (see "Lab Protocol" on page 18). The hepato^{miR} kit uses 200 µL PPP for RNA extraction and 4 µL RNA for reverse transcription into cDNA. This is the optimum sample input in order to avoid inhibition of the reverse transcription reaction due to inhibitors that are co-extracted with total RNA.

Essential components

Table 4 
Essential components

1 Plasma RNA extraction kit (Component 1/3)

This box contains enough reagents to extract RNA from 50 PPP samples.

1x	Lysis Buffer	20 mL
1x	Protein Precipitation Buffer	8 mL
1x	Wash Buffer 1	15 mL*
1x	Wash Buffer 2	11 mL**
1x	RNase-free water	10 mL
1x	Spin columns	50
1x	Collection tube 1.5 mL	50
1x	Collection tube 2 mL	50



* Add 2 volumes of 96%-100% Ethanol

** Add 4 volumes of 96%-100% Ethanol

2 hepatomiR[®] chemistry (Component 2/3)

This box contains spike-in controls, all reagents for cDNA synthesis, as well as the miGreen Mix. Each reagent is labelled with expiration date.

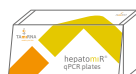
1x	RNA spike-in Mix (yellow cap)	dried
1x	cDNA spike-in Mix (blue cap)	dried
1x	5x RT Buffer (brown cap)	0.1 mL
1x	10x RT Enzyme Mix (red cap)	0.05 mL
4x	RNase-free water (transparent cap)	1.5 mL
5x	2x miGreen Mix (green cap)	1 mL
1x	Glycogen (5 mg/mL) (transparent cap)	0.125 mL



3 Primer coated hepatomiR[®] qPCR plates (Component 3/3)

Plate format depends on the qPCR instrument. Format type, LOT, and expiration date are provided on the plate label.

8x	Primer coated 96 well qPCR plates	
2x	Primer coated 384 well qPCR plates	



Consumables and Instruments Not Supplied by TAmiRNA

- 99 % Ethanol, pro analysis
- Nuclease-free PCR tubes
- Nuclease-free, low nucleic acid binding tubes (1.5 mL)
- Nuclease-free, filter pipette tips
- Sealing foils for PCR plates, transparent, suitable for qPCR
- PCR cycler
- Vortexer
- Calibrated pipettes that cover 0.2 – 2 µL, 0.5 – 10 µL, 2 – 20 µL, 20 – 200 µL, 10 – 100 µL, 100 – 1000 µL
- Centrifuge for <2 mL tubes and multiwell plates
- Isopropanol

Table 5
Plate format and PCR cycler

Plate format and PCR cycler


Plate Format 96-well	Cycler
F	Roche® LightCycler® 480 (96-well block)
Plate Format 384-well	Cycler
G	Roche® LightCycler® 480 (384-well block)

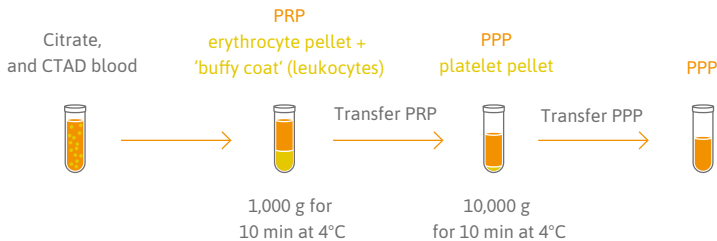
Plasma Collection

The hepatomiR[®] Workflow requires 200 μ L platelet-poor plasma (PPP).

For blood collection we recommend to use 21 gauge needles and collection tubes specified in table 3 on page 12, which have so far been successfully tested.

Filled plasma collection tubes should be immediately inverted 8–10 times after blood collection. Plasma tubes can be incubated in an upright position at room temperature for **up to 2 hours before centrifugation**.

Figure 4 
Workflow for the preparation of PPP



Centrifuge the blood sample at 1,000 g for 10 minutes at 4°C in a horizontal rotor (swing-out head). After centrifugation the supernatant (plasma) must be transferred to a new RNase-free tube of sufficient volume.

Centrifuge the plasma sample at 10,000 g for 10 minutes at 4°C in a horizontal rotor to obtain platelet-poor-plasma (PPP). Use a clean pipette and nuclease-free filter tips to carefully transfer PPP into a pre-labeled/barcoded nuclease-free (1.5 mL) tube. Aliquot volume is recommended to be 225 μ L, so that 200 μ L can be safely used for RNA extraction. Close the caps on the vials tightly.

Note: Never pour off plasma; pouring off plasma directly from the draw tube will introduce excess cells to the specimen. To remove plasma, start from the top, gently draw specimen into pipette as you go further down tube. Leaving approximately 0.5 mL of plasma will insure that you do not disturb the buffy coat and cell layer.

Check that all aliquot vial caps are secure and that all vials are labeled. Place all aliquots upright in a specimen box or rack in an -80°C or colder freezer. All specimens should remain at -80°C or colder prior to analysis or shipping. The sample aliquots should not be thawed prior to analysis or shipping.

Lab Protocol

The RNA extraction has been **standardized to a volume of 200 µL PPP** as starting material to ensure high RNA yield and prevent inhibition of downstream PCR applications.

RNA Extraction

Important points before starting

- **Lysis Buffer and Wash Buffer 1 may form a precipitate upon storage. If necessary, redissolve by warming and then place at room temperature.**
- **Equilibrate buffers at room temperature before starting the protocol.**
- **Prepare 80% ethanol for Step 9c.**
- **All steps should be performed at room temperature. Work quickly!**

Important Note:

In case you are performing the hepatomiR[®] analysis for the first time, we highly recommend to start with a pilot analysis. Use only a small subset of your samples for this pilot analysis and analyze your data using the hepatomiR[®] data analysis application, see page 28. Once you have confirmed that sample quality and data quality are OK, proceed to the full analysis.



CAUTION: DO NOT add bleach or acidic solutions directly to waste containing Lysis Buffer and Wash Buffer 1

- Step 6**
Transfer supernatant
- Transfer exactly 200 μL of the clear supernatant (aqueous phase) into a new collection tube (1.5 mL, with lid) and add 2 μL glycogen (5 mg / mL). Vortex and spin down.
- Step 7**
Adjust binding conditions
- Add 200 μL Isopropanol.
Vortex for 5 sec and spin down.
- Step 8**
Load column
- Place a Spin Column in a collection tube and load the entire sample onto the column. Centrifuge for 30 sec at 8,000 g at room temperature. Discard flow-through and place column back into the collection tube.
- Step 9a**
Wash and dry
- Add 700 μL Wash Buffer 1 to the spin column. Centrifuge for 30 sec at 8,000 g at room temperature. Discard flow-through and place column back into the collection tube.
- Step 9b**
Wash and dry
- Add 500 μL Wash Buffer 2 to the spin column. Centrifuge for 30 sec at 8,000 g at room temperature. Discard flow-through and place column back into the collection tube.
- Step 9c**
Wash and dry
- Add 500 μL 80% ethanol to the spin column. Centrifuge for 2 min at 8,000 g at room temperature. Place the spin column in a new collection tube (without lid). Centrifuge column for 5 min at 12,000 g at room temperature. After centrifugation leave column open for 1 min to dry the membrane completely.
- Step 10**
Elute
- Place the spin column in a new low bind collection tube (1.5 mL). Add 30 μL RNase free water directly onto the membrane of the spin column. Incubate for 1 min at room temperature. Close the lid and centrifuge for 1 min at 12,000 g at room temperature.
- Step 11**
Storage
- Store the RNA sample immediately at -80°C or proceed to cDNA synthesis (Step 13).

cDNA Synthesis

Keep samples, reagents and reactions on ice (or at 4°C) at all time.

		Notes												
Step 12 Thaw total RNA	Thaw total RNA (from step 11) and cDNA spike-in on ice.													
Step 13 Prepare reagents	Thaw 5x RT reaction buffer and nuclease free water and put on ice. Immediately before use, remove the enzyme mix from the freezer, mix by flicking the tube and place on ice. Spin down all reagents.													
Step 14 Prepare cDNA synthesis mix	<p>If performing cDNA synthesis on multiple RNA samples, prepare a mastermix including 1 extra reaction.</p> <table border="1"><thead><tr><th>Reagent (Volumes in μL)</th><th>10 μL Rxn</th></tr></thead><tbody><tr><td>5x Buffer</td><td>2</td></tr><tr><td>cDNA spike-in</td><td>0.5</td></tr><tr><td>Nuclease-free water</td><td>2.5</td></tr><tr><td>Enzyme mix</td><td>1</td></tr><tr><td>Total Volume Mix</td><td>6</td></tr></tbody></table> <p>Pipet 4 μL RNA template in each tube and add 6 μL cDNA mastermix. Mix by pipetting and spin down.</p>	Reagent (Volumes in μL)	10 μL Rxn	5x Buffer	2	cDNA spike-in	0.5	Nuclease-free water	2.5	Enzyme mix	1	Total Volume Mix	6	
Reagent (Volumes in μL)	10 μL Rxn													
5x Buffer	2													
cDNA spike-in	0.5													
Nuclease-free water	2.5													
Enzyme mix	1													
Total Volume Mix	6													
Step 15 Incubate and heat inactivate	Incubate the reaction at 42°C for 60 min. Heat-inactivate the reverse transcriptase at 95°C for 5 min. Immediately cool to 12°C.													
Step 16 Storage	Transfer the undiluted cDNA into nuclease-free low bind tubes and freeze at -20°C for up to 5 weeks.													
Step 17 Thaw reagents	Thaw cDNA (from step 16) and miGreen master mix on ice for 15–20 minutes. Keep reagents on ice all the time. Before use mix the Master mix by pipetting up and down. 6 samples can be measured in duplicates on a 96-well plate. 24 samples can be measured in duplicates on a 384-well plate													

Step 18
Mix cDNA with water and qPCR Master mix

Mix 3.6 µL cDNA with 86.4 µL nuclease free water, then add 90 µL miGreen Master mix (in total 180 µL). Mix by pipetting up and down, spin down to collect the liquid at the bottom. Repeat this step for all samples.

Caution: miGreen Master mix is light sensitive and should not be exposed to light for extended time periods.

Step 19
Prepare hepatomiR® plate

Add 10 µL reaction mixture (from step 18) (cDNA, NFW, Master mix) according to figure 5 and 6 to each of the 16 wells. Seal the plate with the appropriate optical sealing. Spin plate at 1,000 g for 90 sec. and incubate at 4°C for a minimum of 1 hour.

Note: The plate can be stored up to 24 hours at 4°C protected from light.

Step 20
Perform qPCR

Before running the qPCR, spin plate at 1,000 g for 90 sec. Perform qPCR and melting curve analysis as shown below.

Step	Setting
Polymerase activation/ denaturation	95°C , 2 min, ramp-rate 4.4°C/sec
Amplification – 45 cycles	Analysis mode: Quantification 95°C, 10 sec, ramp 4.4°C/sec 56°C, 60 sec, ramp 2.2°C/sec Acquisition mode: single
Melting curve	Analysis mode: Melting curve 95°C, 10 sec, ramp 4.4°C/sec 55°C, 60 sec, ramp 2.2°C/sec 99°C, acquisition mode: Continuous, ramp 0.11°C/sec, acquisition per °C: 5

Step 21
Export Data

When the qPCR run is finished discard the plates without opening the sealing foil (to avoid cross-contaminations) and export data as .txt file. For more information about data analysis please go to page 28 („Data Analysis“)

qPCR Amplification

The hepatomiR® test plate contains 8 different microRNA or QC primer sets.

qPCR Amplification

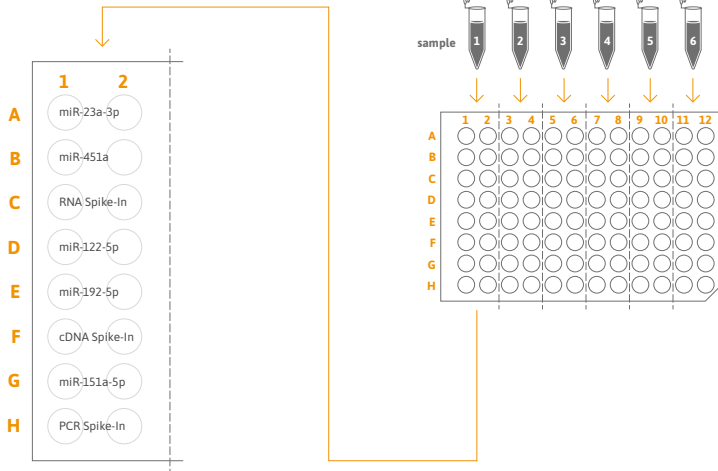


Figure 5

96-well plate layout and pipetting scheme

qPCR Amplification

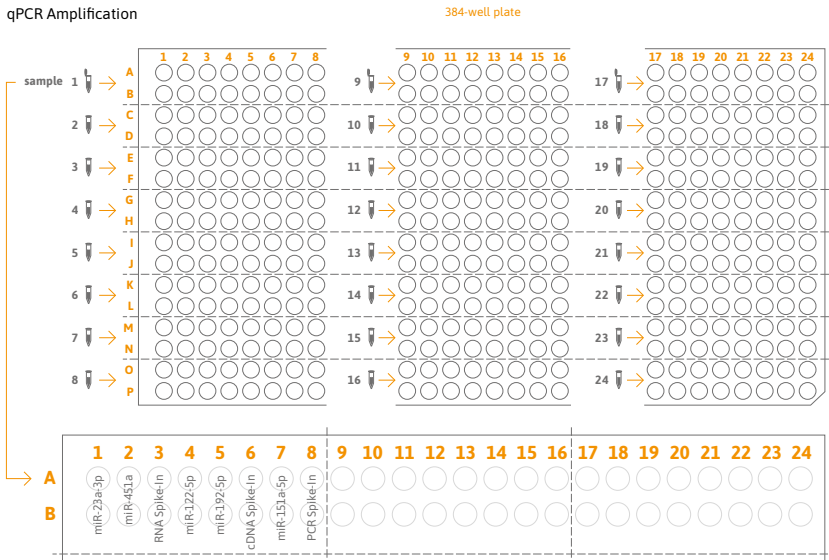


Figure 6

384-well plate layout and pipetting scheme

Data Analysis

Accessing the software and analysing data

The most recent version of the software can be accessed under the URL: <https://hepatomir.tamirna.com> using a functional browser (e.g. Google Chrome) with an internet connected computer. After the login, using the provided username and password, a tab structured application will lead the user through the process of data analysis.

The **Main** tab provides general information and download links for the most recent version of the instructions for use of the kit and software.

In order to analyse data, the user has to navigate to the tab **Analyse**. The applied plate layout (96-well vs 384-well) is selected by the user via a checkbox. Raw fluorescence data can be uploaded in text-file format, which can be exported from all supported qPCR instruments (see list on page 20 of this manual). After the confirmation of all input parameters (qPCR device, plate layout and uploaded filename) the application will automatically call Cq-values using the second-derivative maximum method. Based on Cq-values from spike-in controls (please read information on page 16), hemolysis controls, and the endogenous microRNAs hsa-miR-122-5p, hsa-miR-192-5p, hsa-miR-151a-5p a quality check (QC) will be performed. All samples that have passed the QC will be used to compute the hepatomiR[®] p-score from the PCR duplicates. After a final check of the PCR duplicates, a report is generated that contains information on the QC status (valid or invalid) for all samples as well as the estimated p-score for all samples that have passed the QC. For samples that have not passed the QC the respective reason is displayed in the report. The report also gives interpretation support in case specific quality controls have failed. The Troubleshooting section (pages 30-31) in this manual can be used in case of experimental issues.

Important: the software application does not process any information about sample IDs that might have been assigned in the PCR software. Therefore, the user must record the information about sample IDs and sample position.

The tab **Instruction for use** provides detailed information about the usage of the current software version and how to interpret error messages and a step-by-step guide for data analysis.

Information about the software version, the software developer, a support address, the company imprint and a disclaimer can be found under the tab **About**.

Troubleshooting

RNA Isolation

Notes

Poor RNA Recovery

Column has become clogged

In most cases this can happen when recommended amounts of starting materials were exceeded. For plasma samples this is unlikely to occur. See also “Clogged Column” below

An alternative elution solution was used

For maximum RNA recovery it is recommended to elute the RNA with the RNase-free water supplied with this kit.

RNA content

The RNA content in plasma is low therefore the concentration measurement of the purified RNA (e.g. spectrophotometric or with fluorescent dyes) is not accurately possible. The protocol is optimized using fixed volumes.

Clogged Column

Temperature too low

Ensure that the centrifuge and solutions remain at room temperature (18 - 25°C) throughout the procedure. Temperatures below 15°C may result in salt precipitates that may clog the columns. If salt precipitation is present, heat the solution to 30°C until completely redissolved and let the solutions cool to room temperature before use.

Degraded RNA

RNase contamination

RNases may be introduced when working with the samples. Ensure that proper procedures are followed when working with RNA. Please refer to “Working with RNA” at the beginning of this manual

Procedure not performed quickly enough

In order to maintain the integrity of the RNA, it is important that the procedure be performed quickly.

		Notes
Improper storage of the purified RNA	For short term storage RNA samples may be stored at -20°C for a few days. It is recommended that samples be stored at -70°C for longer term storage Avoid repeated freeze/thaw-cycles by freezing aliquots of your RNA.	
RNA does not perform well in downstream applications		
Salt or Ethanol carryover	Traces of salt and ethanol from the binding step can interfere with downstream applications. Therefore, Step 6 Of the Protocol (Wash) is important for the quality of your RNA sample To avoid remaining salts please make sure that the RNA bound to the column is washed 3 times with the provided Wash Solution and ensure that the dry spin is performed, in order to remove traces of ethanol prior to elution.	
Inhibitors	Some individual plasma samples can contain inhibitors. Using spike-ins that control every step of the protocol inhibitors can be easily detected. Samples that contain inhibitors must be excluded from the analysis.	

cDNA and qPCR Amplification

Problem	Suggestion	Notes
No fluorescent signal is detected during the PCR	Confirm that the PCR setup was correct by checking the signal obtained for the PCR spike-in control.	
No fluorescent signal detected during the PCR, but the PCR spike-in gives a valid signal.	Check that the filter in the qPCR cycler was set to SYBR Green. Check that the optical read is at the correct step of the qPCR cycles.	

Related Services

TAmiRNA offers a broad range of high quality RNA services performed by experts according to GLP standards, including RNA isolation, next generation sequencing and qPCR analysis. Read more about these services at www.tamirna.com/small-rna-sequencing-services/

Related Products

TAmiRNA also offers research-use kits for novel microRNA biomarkers in cardiovascular disease and in bone quality. Read more about these products at www.tamirna.com.

Further reading on quality controls for circulating microRNA experiments

1. TAmiRNA TechNote TN-05. Quality controls and best practices for analyzing microRNAs in cell-free biofluids by RT-qPCR. April 2019
2. Mussbacher M, Krammer TL, Heber S, Schrottmaier WC, Zeibig S, Holthoff HP, et al. Impact of Anticoagulation and Sample Processing on the Quantification of Human Blood-Derived microRNA Signatures. *Cells*. 2020 Aug 18;9(8):1915.
3. Blondal T, Jensby Nielsen S, Baker A, Andreassen D, Mouritzen P, Wrang Teilum M, et al. Assessing sample and miRNA profile quality in serum and plasma or other biofluids. *Methods* 2013;59:S1–6.
4. Shah JS, Soon PS, Marsh DJ. Comparison of methodologies to detect low levels of hemolysis in serum for accurate assessment of serum microRNAs. *PLoS One* 2016;11:1–12.
5. Mestdagh P, Hartmann N, Baeriswyl L, Andreassen D, Bernard N, Chen C, et al. Evaluation of quantitative miRNA expression platforms in the microRNA quality control (miRQC) study. *Nat Methods* 2014;11.











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Patents for the in-vitro diagnostic application of microRNAs for the prediction of liver dysfunction are granted in the EU (EP3814533B1) and US (US 17278624), Japan (JP7045527), South Korea (KR102339206), Canada (CA3110668C), and pending in China.

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Explanation of the used symbols

	In-vitro-diagnostic
	Catalogue number
	Batch number
	Manufacturer
	Do not re-use
	Use by
	Do not use if package is damaged
	Consult instruction for use
	Store at 2°C-30°C
	Store at -31°C- -15°C

Imprint

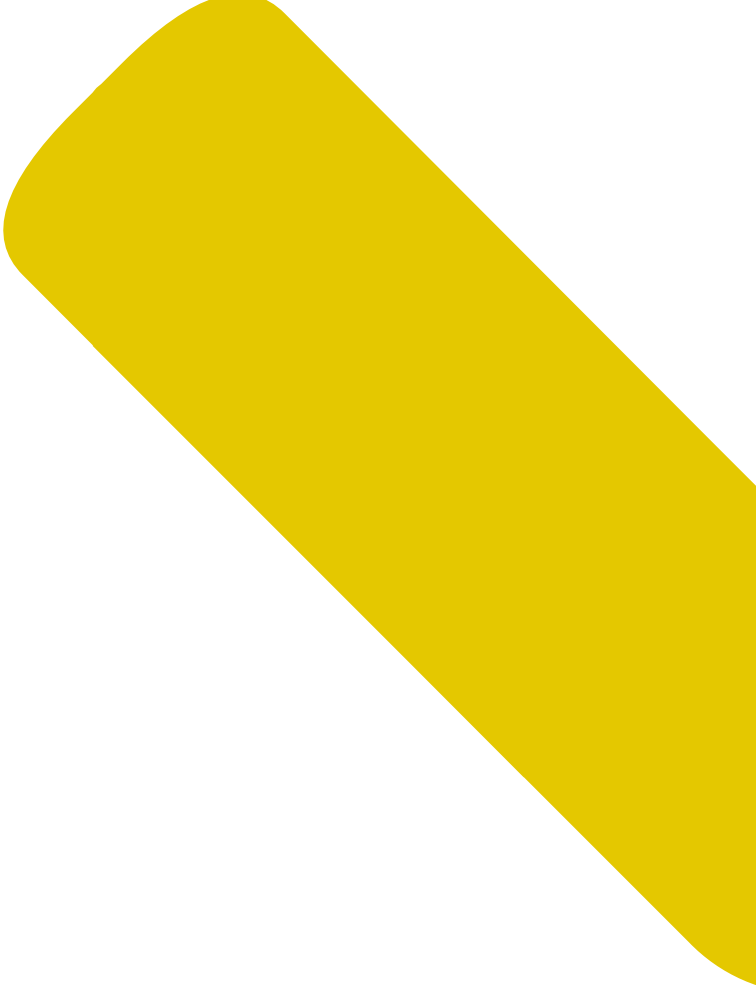
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Illustrations: www.birgitbenda.at

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