

For in vitro diagnostic use

IVD

CYP2C9 CYTOCHROME P450 VARIANTS *2 and *3

ORDERING INFORMATIONS

REF: FGC-005-25 RDM Code: 1973964/R CND Code: W0106030101 Tests: 25 Reactions: 31 x 2 Manufacturer: BioMol Laboratories s.r.l.

CONTENTS OF THE KIT

The kit consists of reagents for Real-Time PCR amplification *the reagents for the extraction of genomic DNA are not supplied in

PRODUCT CHARACTERISTICS

Device belonging to the family of in vitro medical devices REAL-TIME QUALITATIVE PCR-PHARMACOGENETICS TEST. Determination of the genetic variants rs1799853 (*2) and rs1057910 (*3) of the CYP2C9 gene by amplification with oligonucleotides and specific probes (allele-specific genotyping) and subsequent detection with qPCR-Real-time. Kit optimized for Real-Time PCR instrumentation Biorad CFX96 Dx, Biorad Opus Dx and Agilent AriaDx.

SCIENTIFIC BACKGROUND

Cytochromes P450s are a family of enzymes responsible for approximately 75% of all drug metabolism reactions. There are multiple isoforms of cytochrome P450 but most reactions are metabolised by CYP2C9, CYP2C19, CYP2D6 and CYP3A4. The CYP2C9 gene has been mapped to chromosome 10q24.2 and is highly variable; nucleotide sequencing has already identified nearly 60 alleles. Three alleles, namely CYP2C9 *1 (the wild-type allele with normal activity), CYP2C9 *2 and CYP2C9 *3 (both with reduced enzyme activity) are often identified in studies in the Caucasian population. Among the 60 variant CYP2C9 star (*) alleles listed on The Pharmacogene Variation Consortium website (https://www.pharmvar.org) at least 20 are reported to have in vivo and/or in vitro functional evidence of altered activity.

The CYP2C9 * 2 variant (rs1799853) has a C>T transition at position 430 of exon 3 coding for arginine, resulting in a substitution at position 144 (Arg144Cys) of the CYP2C9 protein, while the analysis of the CYP2C9 *3 variant (rs1057910) demonstrated an A>C transversion at position 1075 in exon 7 causing an isoleucine to leucine substitution at position 359 (Ile359Leu).

- § Mol Biol Rep. 2024 Jan 16;51(1):105.Genetic variation of CYP2C9 gene and its correlation with
- 9 Moi Biol Rep. 2024 and in Sorth industrial of CYP2C9 general discorrelation with cardiovascular disease risk factors

 9 Nucleosides Nucleotides Nucleic Acids. 2024;43(4):356-376. Identification of the effects of pathogenic genetic variations of human CYP2C9 and CYP2D6: an in silico approach.

 9 Recommendations for Clinical CYP2C9 Genotyping Allele Selection: A Joint Recommendation of the Association for Molecular Pathologism.
- The Journal of molecular diagnostics, JMD, 2019.
- § Polymorphisms of CYP2C9'2, CYP2C9'3 and VKORCI genes related to time in therapeutic range in patients with atrial fibrillation using warfarin. Appl Clin Genet. 2019 Aug 21:21:51-159. § The Cytochrome P450 Slow Metabolizers CYP2C9'2 and CYP2C9'3 Directly. Regulate Tumorigenesis via Reduced Epoxyeicosatrienoic Acid Production. Cancer Res. 2018 Sep 1;78
- (17)403-4677.

 § CVP2C9 polymorphisms in epilepsy: influence on phenytoin treatment. Pharmgenomics Pers Med. 2018 Mar 29;11: 51-58.

 § Applications of CYP450 testing in the clinical setting. Mol Diagn Ther. 2013 Jun; 17(3):165-84.

CLINICAL SIGNIFICANCE

The cytochrome P450 superfamily is mainly expressed in the liver, small intestine and kidney. CYP P450 enzymes catalyze several types of oxidation and some reduction reactions.

Genetic polymorphisms in CYP genes are the major cause of inter-individual variation in drug metabolism. They cause variations in drug response ranging from adverse effects to lack of efficacy. In addition, CYP polymorphisms have been reported to confer susceptibility or reduced risk/protection from disease. CYP2C9 plays an important role in the phase I metabolism of xenobiotics and some endogenous compounds, for example, nonsteroidal inflammatories, oral anticoagulants and hypoglycaemics. Individuals with low CYP2C9 catalytic activity (poor and/or intermediate metabolisers) develop adverse drug reactions particularly with substrates with a narrow therapeutic index, e.g. S-warfarin, phenytoin, glipizide and tolbutamide. The combination of genotypes (www.pharmgkb.org) allows to define the "Normal Metabolizer" patient as (Homozygous CYP2C9*1), "Intermediate Metabolizer" (Heterozygous CYP2C9*2 and *3) and "Poor Metabolizer" (Homozygous or Double CYP2C9 heterozygous *2 and *3).

Recently, the importance of CYP2C9 in the metabolism of Siponimod, an orally available immunomodulatory drug used to treat relapsing forms of multiple sclerosis, has been demonstrated. Indeed, the US Food and Drug Administration (FDA) and the European Medicines Agency (EMA) indicate that molecular characterization is necessary before starting treatment (CYP2C9 *3/*3 patients should not be subjected to pharmacological treatment).



EN ISO 9001 CERTIFICATE EN ISO 13485 CERTIFICATE





CE IVD

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DESCRIPTION	LABEL	VOLUME	STORAGE
		FGC-005-25	
Mix oligonucleotides and probes	Mix 10X CYP2C9 *2 (C>T)	1 x 85 µl	-20°C
Mix oligonucleotides and probes	Mix 10X CYP2C9 *3 (A>C)	1 x 85 µl	-20°C
Mix buffer and Taq-polymerase enzyme	Mix Real-Time PCR 2X	1 x 850 µl	-20°C
Deionized H₂0	Deionized H₂O	2 x 1 ml	-20°C
Genomic DNA or recombinant DNA	Control +1 Homozygous CC CYP2C9 C430T Homozygous AA CYP2C9 A1075C	1 x 45 μl	-20°C
Genomic DNA or recombinant DNA	Control +2 Heterozygous CT CYP2C9 C430T *2 Heterozygous AC CYP2C9 A1075C *3	1 x 45 μl	-20°C

TECHNICAL CHARACTERISTICS

COD. FGC-005-25

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STABILITY	18 months	
REAGENTS STATUS	Ready to use	
BIOLOGICAL MATRIX	Genomic DNA extracted from whole blood, tissue, cells	
POSITIVE CONTROL	Recombinant DNA for at least 3 analytical sessions	
TECHNOLOGY	Real-time PCR; oligonucleotides and specific probes; 2 FAM/HEX fluorescence channels	
VALIDATED INSTRUMENTS	Biorad CFX96 Dx, Biorad Opus Dx e Agilent AriaDx	
RUNNING TIME	85 min	
THERMAL CYCLING PROFILE	1 cycle at 95 °C (10 min); 45 cycles at 95 °C (15 sec) + 60 °C (60 sec)	
ANALYTICAL SPECIFICITY	Absence of non-specific pairings of oligonucleotides and probes; absence of cross-reactivity	
ANALYTICAL SENSITIVITY: LIMIT OF DETECTION (LOD)	≥ 0,016 ng of genomic DNA	
ANALYTICAL SENSITIVITY: LIMIT OF BLANK (LOB)	0% NCN	
REPRODUCIBILITY	99,9%	
DIAGNOSTIC SPECIFICITY / DIAGNOSTIC SENSITIVITY	100%/98%	

