\mathbf{DVO} CLINIQUE

CORRELATION BETWEEN TWO SPERM DNA FRAGMENTATION TESTS (TUNEL AND SCSA) AND EVALUATION OF TUNEL ASSAY INTER-LABS VARIABILITY

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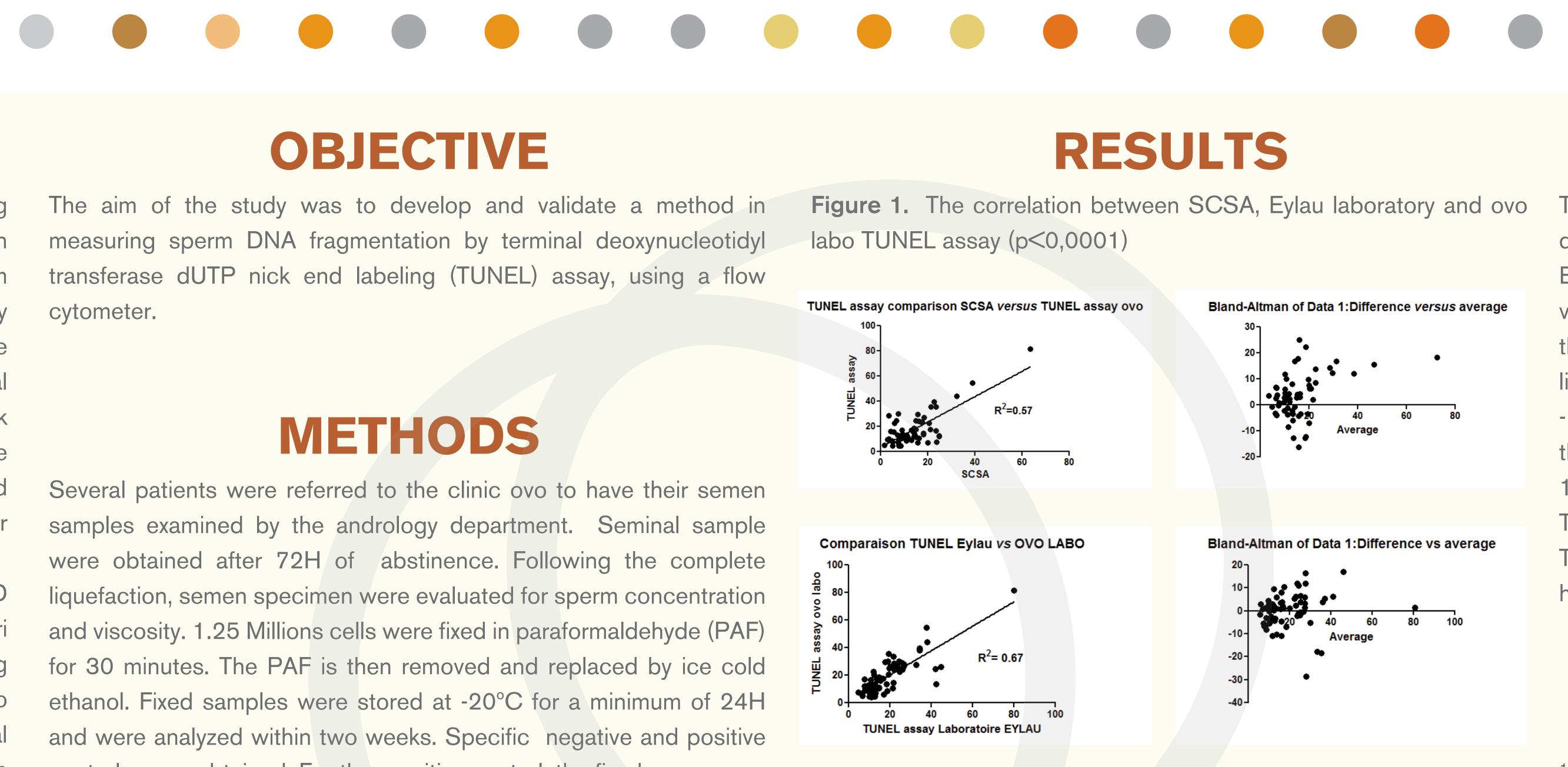
ABSTRACT

Introduction: Evaluation of sperm DNA damage (SDF) is becoming The aim of the study was to develop and validate a method in an important test to assess male infertility. Elevated SDF has been measuring sperm DNA fragmentation by terminal deoxynucleotidyl transferase dUTP nick end labeling (TUNEL) assay, using a flow associated with poor reproductive outcomes. Several tests of sperm DNA damage have been developed, however, the most commonly cytometer. used tests are the sperm chromatin structure assay (SCSA), the chromatin dispersion test (SCD) and the terminal sperm deoxynucleotidyl transferase deoxyuridine triphospahte (dUTP) nick METHODS and labeling (TUNEL) [1]. We have decided to adapt and validate the TUNEL assay as it can accurately measure both single and Several patients were referred to the clinic ovo to have their semen double-stranded DNA fragmentation [2-6]. We use a flow cytometer samples examined by the andrology department. Seminal sample for the cell acquisition rather than an epifluorescent microscope.

Methods: We have validated a research use only kit APO-Direct (BD Pharmingen, CA, USA) by using a bench top flow cytometer, Accuri C6 (BD, Biosciences, MI, USA). Two stages of validation responding to the ICSH, ICCS were established. A pre-analytical stage to determine the parameters for sample processing and an analytical stage to validate the set-up of the flow cytometer's parameters. An controls were obtained. For the positive control, the fixed semen was inter-laboratory comparison was done using the same sample. degraded by DNAse. For the negative control, the enzyme Terminal deoxynucleotidyl transferase (TdT) is omitted during the incubation **Results:** The regression analysis depicting the relationship between step. The staining method was prepared using APO-DIRECT kit (BD the % DFI were obtained for each assay. In figure 1, the regression Pharmigen, CA, USA) by following its instruction. A bench top low demonstrate the comparison between SCSA assay and TUNEL assay cytometer was used for the cell acquisition and a minimum of 10,000 at ovo labo and the comparison between TUNEL assay at Eylau events were recorded. An inter-laboratory comparison was done laboratory and TUNEL assay at ovo labo. The p value for both between two different laboratories, Eylau laboratory (Paris, France) regression was lower than 0.0001. The correlation coefficient is and Royal Victoria laboratory (Montreal, Quebec). The Eylau laboratory $r^2 = 0.7$ and 0.8, respectively. We did the same comparison as given used TUNEL assay by In Situ Cell Death Detection Kit and Fluorescein above but on freshly fixed sample. The results obtained were: SCSA vs (Roche diagnostics Coporation, Mannheim, Germany) with a flow TUNEL ovo labo, p<0.0001, r²=0.71, TUNEL Eylau laboratory vs cytometer (Beckman Coulter), whereas Royal Victoria laboratory used TUNEL ovo labo, p<0.0001, r²=0.75 (Figure 2). Bland-Altman plot the SCSA method by flow cytometry.

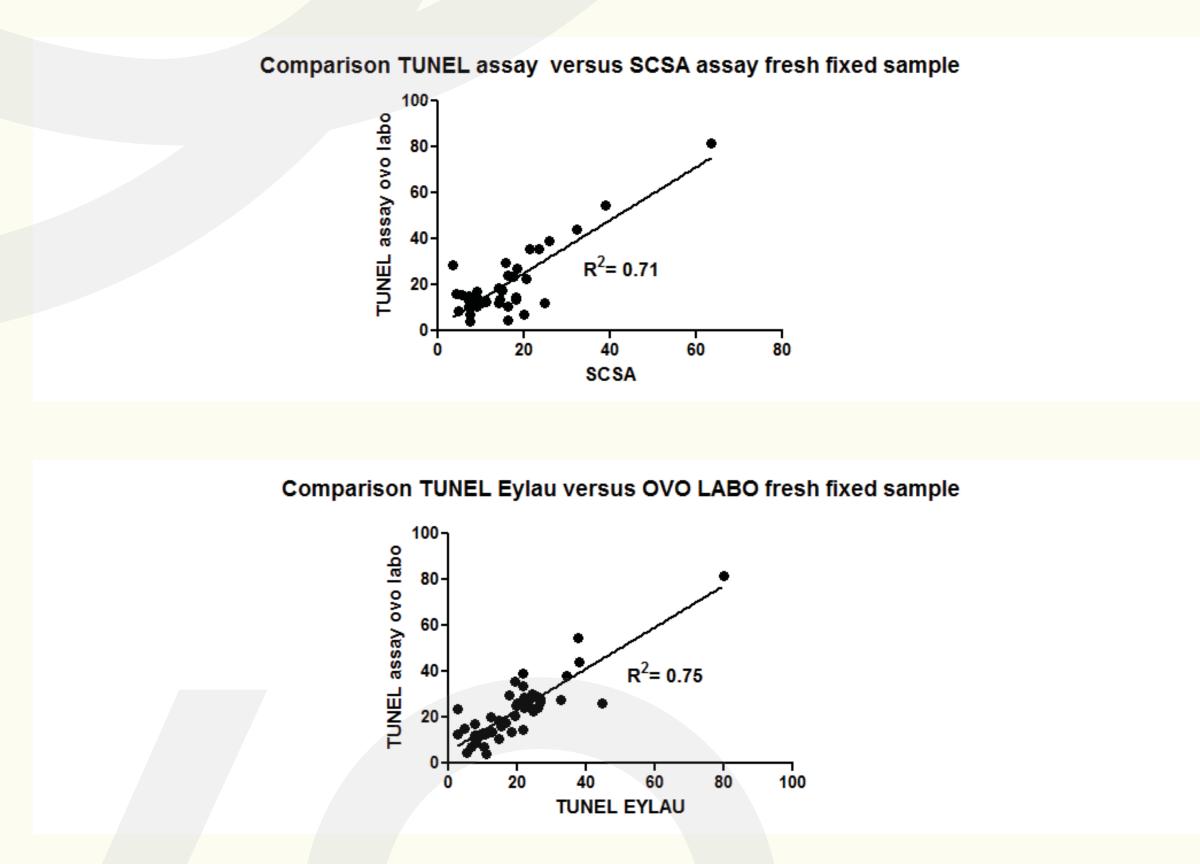
permit to calculate the bias between the three different assays. There is a standard deviation bias of 3.5 between ovo laboratory assay and SCSA assay, whereas there is a bias of 1.3 between Eylau TUNEL assay and ovo labo TUNEL assay.

Each sample was treated in duplicate. The comparison of the data Note that SCSA and TUNEL assay are two different method for **Conclusions:** We report a pre-analytical and analytical validation detecting DNA fragmentation what explained the R square. Despite obtained was performed using GraphPad Prism version 5. process to measuring sperm DNA fragmentation by TUNEL assay the difference, the results obtained give the same clinical decision. using a bench top flow cytometer.



STATISTICS

Figure 2. The correlation between SCSA, Eylau laboratory and ovo laboratory TUNEL assay (n=32) with freshly fixed sample



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CONCLUSION

There is a significant bias between SCSA and TUNEL assay possibly due to the differences in these tests. The bias between ovo labo and Eylau lab is negligible. This correlation and comparison allows us to validate the results obtained with our assay and to be able to determine the appropriate process in handling sperm samples. After a complete liquefaction, samples were freshly fixed with 2% PAF and conserved at -20°C for a limit of 2 weeks. The purpose of this study was to propose the test to our patient having fertility problem. The cut off point is 16.8% set out by Sharma R et al., 2016 [7]. The high specificity of the TUNEL assay will be useful in correctly identifying infertile patients. This protocol is currently use in our laboratory to help patients who are having fertility problems.

REFERENCES





