Highly sensitive ELISA-based assay for quantification of allergen-specific IgE antibody levels

3	Antonina Karsonova ¹ , Ksenja Riabova ¹ , Sergio Villazala-Merino ² , Raffaela Campana ³ , Verena
4	Niederberger ² , Julia Eckl-Dorna ² , Renate Fröschl ⁴ , Thomas Perkmann ⁴ , Yury V. Zhernov ⁵ , Olga
5	G. Elisyutina ⁵ , Elena S. Fedenko ⁵ , Musa R. Khaitov ⁵ , Daria Fomina ^{1,6} , Evgeniy Beltiukov ⁷ ,
6	Marianne van Hage ⁸ , Hans Grönlund ⁹ , Rudolf Valenta ^{3,10} , Alexander Karaulov ¹ , Mirela Curin ³
7	¹ Laboratory of Immunopathology, Department of Clinical Immunology and Allergy, Sechenov
8	First Moscow State Medical University, Moscow, Russian Federation. ² Department of
9	Otorhinolaryngology, Medical University of Vienna, Vienna, Austria. ³ Division of
10	Immunopathology, Department of Pathophysiology and Allergy Research, Center for
11	Pathophysiology, Infectiology and Immunology, Medical University of Vienna, Vienna, Austria
12	⁴ Department of Laboratory Medicine, Medical University of Vienna, Vienna, Austria. ⁵ National
13	Research Center - Institute of Immunology FMBA of Russia, Moscow, Russian Federation. ⁶ City
14	Hospital #52, Moscow, Russian Federation. ⁷ Ural State Medical University, Ekaterinburg,
15	Russian Federation. ⁸ Division of Immunology and Allergy, Department of Medicine Solna,
16	Karolinska Institutet and Karolinska University Hospital, SE-171 77, Stockholm, Sweden.
17	⁹ Department of Clinical Neuroscience, Therapeutic Immune Design Unit, Karolinska Institutet,
18	Stockholm, Sweden. ¹⁰ Karl Landsteiner University for Healthcare Sciences, Krems, Austria.
19	Correspondence:

20 Mirela Curin, Department of Pathophysiology and Allergy Research, Center for Pathophysiology,

21 Infectiology and Immunology, Medical University of Vienna, Währinger Gürtel 18-20, A-1090

22 Vienna, Austria. Email: <u>mirela.curin@meduniwien.ac.at</u>

Methods 23

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Expression, purification and characterisation of human allergen-specific monoclonal IgE

25 (IgEmoAb), recombinant allergens

26 In the humanised monoclonal Bet v 1-specific IgE antibody, the variable region of a mouse IgG_1 antibody specific for the major birch pollen allergy (Bet v 1)^{S1}, was fused to the human epsilon 27 heavy chain and the DNA construct was introduced into hybridoma cells by electroporation^{S1, S2}. 28 Hybridoma cells were cultured in CD Hybridomamedium (ThermoScientifc, Uppsala, Sweeden) 29 supplemented with Glutamax TM (Thermo Scientific) into which IgEmoAb was secreted. A 30 monoclonal anti-human IgE antibody, mAb12 ^{S2, S3}, was used to purify IgEmoAb from cell 31 culture supernatants by single step affinity chromatography. Purified IgEmoAb was dissolved in 32 PBS and kept frozen at -20°C until use. The concentration of purified IgEmoAb was determined 33 34 by BCA assay (Pierce, Rockford, IL, USA). In order to check the purity of IgEmoAb, 1 and 2 µg purified antibody along with a protein weight ladder (PageRuler prestained Protein Ladder Plus, 35 Fermentas, St. Leon-Rot, Germany) were loaded onto a 15% polyacrylamide gel and separated 36 37 by SDS-PAGE under non-reducing and reducing conditions, followed by Coomassie Blue staining. Likewise, 10 and 20 ng IgEmoAb were loaded onto a 15% polyacrylamide gel and 38 separated by SDS-PAGE, followed by semi-dried transfer to a nitrocellulose membrane (GE 39 Healthcare, Chicago, IL, USA). Human IgE was detected upon incubation with 1:5000 Anti-40 human IgE-HRP (Seracare, Milford, MA, USA). 41

42 The far UV circular dichroism (CD) spectrum of purified IgEmoAb was determined using a Jasco

J-810 spectropolarimeter (Japan Spectroscopic Co., Tokyo, Japan). An aliquot of 400 µL of a 43

- solution with a concentration of 200 µg/mL IgEmoAb in 10 mM NaH₂PO₄ (pH=7) was placed in 44
- a 1mm path length quartz cuvette and its spectrum was measured from 260 to 190 nm with a 45
 - 2

resolution of 0.5 nm at 50 nm/min. The measurement was repeated three times and averaged.
Purified recombinant Bet v 1 was obtained from BIOMAY (Vienna, Austria) and rFel d 1 was
expressed and purified as described ^{S4}.

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Demographic and clinical characterization of allergic patients and non-allergic control subjects 50 Experiments were conducted with serum samples of clinically well characterized cat (n = 19) and 51 52 birch (n = 19) allergic patients from the Russian Federation after having obtained informed 53 consent of the patients or patient's parents in the case of children. Blood was collected at certified 54 medical centers by licensed medical personnel (Institute of Immunology FMBA of Russia, 55 Moscow; City Hospital #52, Moscow, and Ural State Medical University, Ekaterinburg, Russian Federation). The study was approved by the Ethic Committee of NRC Institute of Immunology 56 57 FMBA of Russia- protocol No. 3, dated 09.03.2017, performed according to declaration of 58 Helsinki and all participants gave their written informed consent. Each patient completed a questionnaire that contained demographic data, such as age and gender and questions about the 59 60 symptoms that patients experienced in contact with birch and/or cat. Inclusion criteria were 61 reported clinical symptoms of either asthma, rhinitis, conjunctivitis and/or dermatitis upon 62 exposure to cat or birch. Full description of clinical and demographic characteristics of patients with birch and cat allergy, including phenotypes (asthma, rhinitis, conjunctivitis or dermatitis) are 63 shown in Table S1. Representative sera were selected to comprise the range from low to high of 64 allergen-specific IgE levels. Serum from a non-allergic individual was included as control. 65

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67 Establishment of IgEmoAb-based standard curves for quantification of sIgE by ELISA

Standard curves for the quantification of allergen-specific IgE were established using ELISA 68 69 plate coated with rBet v 1 and defined dilutions containing different concentrations of IgEmoAb (i.e., 2.42 µg/ml, 242 ng/ml, 121 ng/ml, 60.5 ng/ml, 24.2 ng/ml, 12.1 ng/ml, 6.05 ng/ml, 3.02 70 ng/ml, 2.42 ng/ml). The dilutions of IgEmoAb were prepared in 2% BSA in 0.5% PBS-Tween 71 72 buffer to prevent loss of IgEmoAb due to binding to the plastic vials used for preparing the 73 dilutions (Safe-Lock Tubes 1.5 ml Cat. № 0030120086, Eppendorf, Hamburg, Germany). In pilot experiments, different concentrations of rBet v 1 ($1\mu g/ml$, $2\mu g/ml$, $5\mu g/ml$) were used for 74 coating of ELISA plates (96 well F-bottom microplate, Greiner Bio-One GmbH, Germany) and a 75 76 concentration of $1 \mu g/ml$ of Bet v 1 was found to be suitable for obtaining a standard curve. After coating with rBet v 1 in Bicarbonate buffer plates were blocked with 1% BSA in 0.5% PBS-77 Tween (200 µl/well) for 2.5 h at 37 °C. Different dilutions of IgEmoAb in TBS containing 0.5% 78 v/v Tween 20 (TBS-T) and 2% BSA were added to the ELISA plates and bound IgE was detected 79 80 with HRP-coupled goat anti-human IgE antibodies diluted 1 : 2500 (KPL, Gaithersburg, MD). 81 The OD values corresponding to bound antibodies were measured at 405 and 490 nm on ELISA 82 reader CLARIOstar (BMG Labtech, Germany). All determinations were conducted in triplicates, 83 and results were expressed as mean values with a variation coefficient of less than 5%. Based on 84 the ELISA results the standard curve was established allowing to measure and quantify allergen-85 specific IgE. The equation describing the Standard Curve was determined as y=-60.302-50.933x- $30.103x^3 + 60,7969e^x$ using TableCurve 2D Software. 86

87

88 Quantification of sIgE in sera from allergic patients by ELISA

89 For coating the ELISA plates, $1\mu g/ml$ of rBet v 1 or $1\mu g/ml$ of rFel d 1 were incubated in

90 Bicarbonate buffer, (100 μ l/well) overnight at 4°C. After the plates were washed 3 times with 4

200µl/well of PBS-Tween unspecific bindings were blocked with 1%BSA in PBS-Tween 91 92 (200µl/well) for 2.5h, on 37°C. Patient's serum diluted in 2% BSA-PBS-Tween (dilutions as described below) and set of dilutions of IgEmoAb were added (100µl/well) and incubated at 4°C 93 overnight. Plates were then washed 5 times with 200µl/well of PBS-Tween. For detection of 94 95 human IgE antibodies anti-human IgE-KPL (coupled with horse radish peroxidase) in dilution 1:2.500 in 0.5%BSA-PBS-Tween was incubated for 1h at 37°C and then for 1h at 4°C. Plates 96 were washed 5 times with 200µl/well of PBS-Tween followed by adding 100µl/well ABTS 97 buffer and then were read after 5min, 10min, 15 min, 20min at OD 405 and 495 on ELISA reader 98 CLARIOstar (BMG Labtech, Germany). Each patient's serum was diluted 1:2 and 1:4 (if 99 ImmunoCAP result for this sample were less than 50 kU_A/L) or 1:8 and 1:16 (if ImmunoCAP 100 result for this sample were more than 50 kU_A/L). Using the formula $y=-60.302-50.933x-30.103x^3$ 101 +60,7969e^x for each OD sample obtained by ELISA we calculated the IgE concentration in 102 103 ng/ml. Values with OD>2.8 after 10 min were excluded from the further calculations since curve was already reaching the plateau. Considering the two dilutions for each serum sample and 104 exclusion of samples with OD>2.8, we obtained 34 samples for IgE reactivity testing to Bet v 1. 105 106 For comparison, IgE levels to Bet v 1 for the same patients' sera were determined using quantitative IgE ImmunoCAP (Phadia 100) and by ImmunoCAP ISAC chip (Thermofisher, 107 108 Uppsala, Sweden) according to manufacturer's instructions.

109 A dilution series of IgEmoAb (2.42 µg/ml, 242 ng/ml, 24.2 ng/ml, 2.42 ng/ml) were also tested

using ImmunoCAP technology. We noted that the ImmunoCAP determination of the

111 concentrations of IgEmoAb were different (i.e., yielding approx. 30%) from the results obtained

by microBCA protein determination which may be due to differences between the ImmunoCAP

- 113 IgE standard and IgEmoAB. According to the factor $1kU_A/l=7$ ng /ml (i.e., real conversion
 - 5

114	factor) obtained by measuring the IgEmoAb dilution by ImmunoCAP, the calculation for
115	conversion of ImmunoCAP results from kU _A /L to ng/ml were made.
116	Using a set of sera (n=19) from clinically well-characterized cat allergic patients (supplementary
117	Table 3) Fel d 1-specific IgE levels were quantified with the IgE ELISA as described above and
118	compared with results obtained by quantitative IgE ImmunoCAP measurements. Considering the
119	two dilutions for each serum sample and exclusion of samples with OD>2.8, we obtained 37
120	samples for IgE reactivity testing to Fel d 1. An OD of 0.05 was determined as a cut-off value for
121	specific IgE reactivity by ELISA using serum dilutions from a non-allergic blood donor.
122	
123	Measurement of allergen-specific IgE levels by ImmunoCAP and ImmunoCAP ISAC technology
124	In order to compare IgE levels determined by ImmunoCAP and the quantitative IgE ELISA,
124 125	In order to compare IgE levels determined by ImmunoCAP and the quantitative IgE ELISA, exactly the same recombinant allergen preparations (i.e., rBet v 1, rFel d 1) were used for the
125	exactly the same recombinant allergen preparations (i.e., rBet v 1, rFel d 1) were used for the
125 126	exactly the same recombinant allergen preparations (i.e., rBet v 1, rFel d 1) were used for the ELISA and for preparing ImmunoCAPs using Streptavidin CAPs as described ^{$S5$} . Two µg of
125 126 127	exactly the same recombinant allergen preparations (i.e., rBet v 1, rFel d 1) were used for the ELISA and for preparing ImmunoCAPs using Streptavidin CAPs as described ^{S5} . Two μ g of biotin-labelled recombinant allergen rBet v 1 or rFel d 1 were added to the Streptavidin CAPs
125 126 127 128	exactly the same recombinant allergen preparations (i.e., rBet v 1, rFel d 1) were used for the ELISA and for preparing ImmunoCAPs using Streptavidin CAPs as described ^{S5} . Two μ g of biotin-labelled recombinant allergen rBet v 1 or rFel d 1 were added to the Streptavidin CAPs and incubated 30 minutes at RT. 150 μ l of sera from 19 patients with cat allergy and 19 patients
125 126 127 128 129	exactly the same recombinant allergen preparations (i.e., rBet v 1, rFel d 1) were used for the ELISA and for preparing ImmunoCAPs using Streptavidin CAPs as described ^{S5} . Two μ g of biotin-labelled recombinant allergen rBet v 1 or rFel d 1 were added to the Streptavidin CAPs and incubated 30 minutes at RT. 150 μ l of sera from 19 patients with cat allergy and 19 patients with birch pollen allergy and also set of dilutions of IgEmoAb were tested by ImmunoCAP
125 126 127 128 129 130	exactly the same recombinant allergen preparations (i.e., rBet v 1, rFel d 1) were used for the ELISA and for preparing ImmunoCAPs using Streptavidin CAPs as described ^{S5} . Two μ g of biotin-labelled recombinant allergen rBet v 1 or rFel d 1 were added to the Streptavidin CAPs and incubated 30 minutes at RT. 150 μ l of sera from 19 patients with cat allergy and 19 patients with birch pollen allergy and also set of dilutions of IgEmoAb were tested by ImmunoCAP Phadia-100 machine as described by the manufacturer (Thermo Fisher Scientific, Waltham,

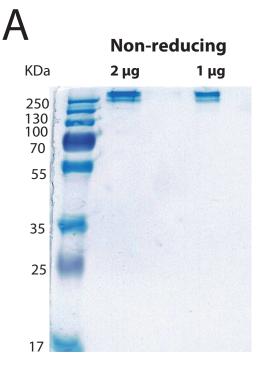
134 Statistical analysis

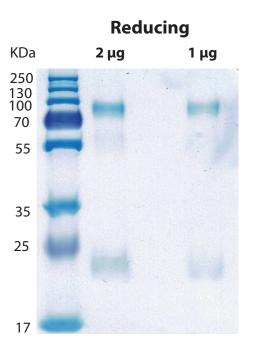
135	Corre	lation between ELISA results, ImmunoCAP and ImmunoCAP ISAC chip were assessed				
136	using Spearman's correlation coefficient. Correlation coefficients (r), regression equations, and					
137	statistical significances (p values) were determined (SPSS 11.5 for Windows, Spearman					
138	Corre	lation). A p value <0.05 was considered significant.				
139						
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154		streptavidin linked to a high-capacity solid phase. J. Allergy Clin. Immunol. 115, 1029–35				
155		(2005).				
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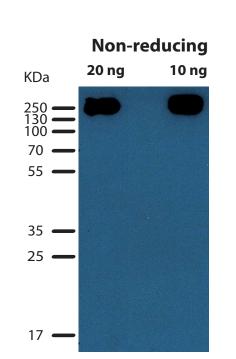
157 Supplementary Figures and Tables

158	Supplementary Figure 1. Coomassie-stained SDS-PAGE of purified IgEmoAb under non-
159	reducing and reducing conditions. M, molecular weight marker (kDa) (A). Nitrocellulose-blotted
160	IgEmoAb under non-reducing and reducing conditions was detected by anti-human IgE-HRP.
161	Molecular weights are indicated on the left margins (B) Analysis of IgEmoAb by circular
162	dichroism. The mean residue molar ellipticities (y-axis: degree $cm^2 dmol^{-1}$) were recorded for a
163	range of wavelengths (x-axis) (C).
164	
165	Supplementary Figure S2. Recording of standard curves at different time points. A series of
166	dilutions of IgEmoAb (x-axis: ng/ml) was reacted with ELISA plate-bound rBet v 1 and IgE
167	binding (y-axis: optical density (OD) values corresponding to bound IgE) was measured at
168	different time points (5, 10, 15 and 20 min).
169	
170	Supplementary Table S1. Demographic and clinical characterization of birch pollen (B1-B19)
171	and cat allergic (C1-C19) patients.
172	
173	Supplementary Table S2. Bet v 1-specific IgE levels determined by ELISA, ImmunoCAP and
174	ImmunoCAP ISAC for birch pollen allergic patients
175	
176	Supplementary Table S3. Fel d 1-specific IgE levels determined by ELISA, ImmunoCAP and
177	ImmunoCAP ISAC for cat allergic patients

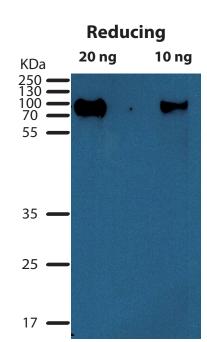
Supplementary Table S4. Fel d 1-specific IgE levels determined by ELISA shown as optical
density (OD) values for cat allergic patient's sera in dilutions 1:2 and 1:4 or 1:8 and 1:16 for C3.

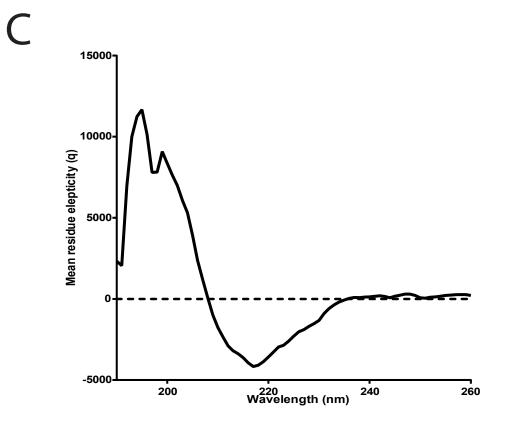




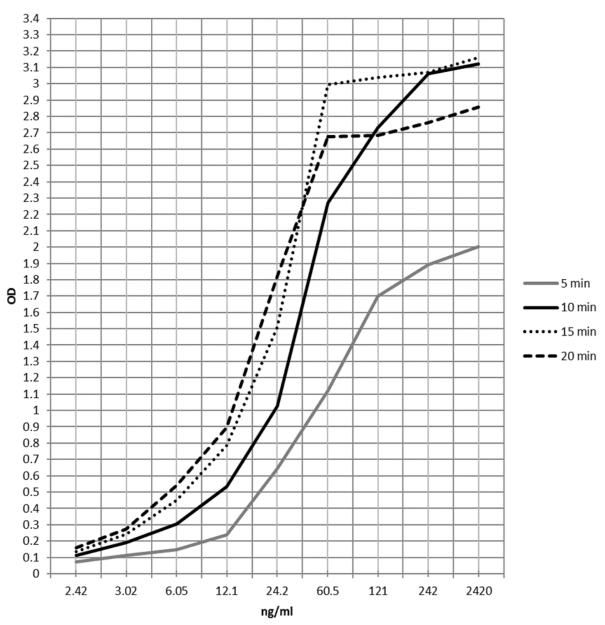


B









Standard curve

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Supplementary Figure S2. Recording of standard curves at different time points. A series of
dilutions of IgEmoAb (x-axis: ng/ml) was reacted with ELISA plate-bound rBet v 1 and IgE
binding (y-axis: optical density (OD) values corresponding to bound IgE) was measured at
different time points (5, 10, 15 and 20 min).

6

8 **Supplementary Table S1.** Demographic and clinical characterization of birch pollen (B1-B19)

9 and cat allergic (C1-C19) patients.

		Age		ergy clinic	ai symp	toms	Allergy clinical symptoms				Other allergies		
			Asthma	Rhinitis	Conj.	Dermat.	Dust	Pet	Pollen	Food	Mold		
					Patient	s with Birc	h Pollen A	llergy					
B1	m	10	neg	pos	pos	neg	neg	pos	pos	pos	pos		
B2	m	10	pos	pos	pos	pos	neg	pos	pos	neg	neg		
B3	m	14	neg	pos	pos	neg	pos	pos	pos	pos	pos		
B4	m	15	pos	pos	pos	pos	pos	pos	pos	neg	pos		
B5	f	16	neg	pos	pos	neg	neg	pos	pos	pos	neg		
B6	m	12	neg	pos	pos	neg	neg	pos	pos	pos	neg		
B7	f	15	neg	pos	pos	neg	pos	pos	pos	pos	neg		
B8	f	12	neg	pos	pos	pos	neg	pos	pos	pos	neg		
B9	m	10	neg	pos	pos	neg	neg	pos	pos	neg	neg		
B10	m	11	pos	pos	pos	neg	neg	pos	pos	pos	pos		
B11	m	15	neg	pos	pos	neg	pos	pos	pos	neg	neg		
B12	f	11	pos	pos	pos	pos	neg	pos	pos	pos	neg		
B13	m	15	pos	pos	pos	neg	pos	pos	pos	neg	neg		
B14	f	10	pos	pos	pos	pos	pos	pos	pos	pos	neg		
B15	f	11	neg	pos	pos	neg	neg	pos	pos	neg	neg		
B16	f	11	neg	pos	pos	neg	neg	pos	pos	neg	neg		
B17	f	11	pos	pos	pos	neg	neg	pos	pos	neg	neg		
B18	m	10	neg	pos	pos	pos	neg	pos	pos	neg	neg		
B19	f	15	neg	pos	pos	pos	pos	pos	pos	pos	neg		
					Pa	tients with	Cat Allerg	ју					
C1	m	29	pos	neg	pos	neg	pos	pos	pos	pos	pos		
C2	m	26	pos	pos	pos	pos	pos	pos	pos	n/d	n/d		
C3	f	25	pos	pos	pos	pos	pos	pos	pos	n/d	pos		
C4	f	62	pos	pos	pos	pos	n/d	n/d	n/d	n/d	n/d		
C5	f	35	pos	pos	pos	pos	pos	pos	pos	n/d	n/d		
C6	f	27	pos	pos	pos	pos	pos	pos	pos	n/d	n/d		
C7	m	21	pos	pos	pos	neg	pos	pos	pos	n/d	n/d		
C8	m	29	neg	pos	pos	pos	pos	pos	neg	n/d	n/d		
C9	m	24	pos	pos	pos	pos	pos	pos	pos	pos	n/d		
C10	f	57	neg	pos	pos	neg	pos	pos	pos	n/d	n/d		
C11	m	47	neg	pos	pos	neg	neg	neg	pos	n/d	n/d		
C12	m	20	pos	pos	pos	neg	pos	pos	pos	n/d	n/d		
C13	m	31	pos	pos	neg	neg	neg	pos	n/d	n/d	neg		
C14	m	20	pos	pos	pos	neg	pos	pos	pos	pos	n/d		
C15	m	22	pos	pos	neg	neg	pos	pos	neg	n/d	n/d		
C16	m	20	pos	pos	neg	neg	pos	pos	pos	pos	n/d		
C17	f	38	neg	pos	pos	neg	pos	pos	pos	n/d	n/d		
C18	f	40	pos	pos	pos	neg	n/d	n/d	n/d	n/d	n/d		
C19	m	18	pos	pos	pos	neg	pos	pos	pos	n/d	n/d		

10 **Supplementary Table S2.** Bet v 1-specific IgE levels determined by ELISA, ImmunoCAP and

Patient ID	OD Mean	ng/ml	ImmunoCAP kU _A /L	ISAC ISU
B1	2.209	902.4	346	139.9
B2	0.867	329.6	64	11.1
B3	0.828	313.6	62.3	52.5
B4	0.594	212.8	60.5	57.2
B5	0.859	326.4	59.7	59.9
B6	1.014	97.2	48	45.8
B7	0.88	334.4	75.7	78.2
B8	2.595	1536	331	153.5
B9	1.035	396.8	16.1	20.3
B10	1.576	142.4	46	22.7
B11	0.59	52.4	9.69	16.3
B12	1.058	101.2	42.1	32.8
B13	0.268	20	3.07	3.7
B14	0.943	90	33	11.4
B15	2.742	1966.4	430	148.1
B16	0.306	23.2	2.64	4.1
B17	0.199	14	1.68	3.3
B18	1.238	467.2	146	52.7
B19	2.703	1838.4	342	144.3

11 ImmunoCAP ISAC for birch pollen allergic patients (B1-B19)

- 13 Supplementary Table S3. Fel d 1-specific IgE levels determined by ELISA and ImmunoCAP
- 14 for cat allergic patients (C1-C19) and non-allergic donor (D1)

Patient ID	OD Mean	ng/ml	ImmunoCAP kU _A /L
C1	0.703	64.8	5.20
C2	1.816	162.8	34.50
C3	1.041	398.4	57.20
C4	0.059	4.8	0.03
C5	0.059	4.8	0.08
C6	0.687	63.2	8.79
C7	0.621	56	5.43
C8	0.153	10.8	1.76
C9	1.143	108.8	16.30
C10	0.418	34.4	2.55
C11	0.064	4.8	0.10
C12	0.061	4.8	0.08
C13	0.534	46.4	3.19
C14	0.115	8	1.60
C15	0.069	5.2	0.16
C16	0.145	10	1.34
C17	0.573	50.8	4.50
C18	2.331	260.8	22.80
C19	0.703	368	29.00

Donor ID		
Benerie		
D1	0.043	0.001

- **Supplementary Table S4**. Fel d 1-specific IgE levels determined by ELISA shown as optical
- density (OD) values for cat allergic patient's sera in dilutions 1:2 and 1:4 or 1:8 and 1:16 for C3.

Patient ID	Serum Dilution	OD Mean	ng/ml
C1	1:2	1.262	59.4
C1	1:4	0.703	64.8
C2	1:2	2.734	242.6
C2	1:4	1.816	162.8
C3	1:8	2.100	403.2
C3	1:16	1.041	398.4
C4	1:2	0.067	2.6
C4	1:4	0.059	4.8
C5	1:2	0.075	2.8
C5	1:4	0.059	4.8
C6	1:2	1.090	52
C6	1:4	0.687	63.2
C7	1:2	1.131	54
C7	1:4	0.621	56
C8	1:2	0.264	9.8
C8	1:4	0.153	10.8
C9	1:2	2.057	97
C9	1:4	1.143	108.8
C10	1:2	0.491	21
C10	1:4	0.418	34.4
C11	1:2	0.091	3.2
C11	1:4	0.064	4.8
C12	1:2	0.062	2.4
C12	1:4	0.061	4.8
C13	1:2	0.779	36.6
C13	1:4	0.534	46.4
C14	1:2	0.156	5.4
C14	1:4	0.115	8.00
C15	1:2	0.082	3.00
C15	1:4	0.069	5.20
C16	1:2	0.189	6.6
C16	1:4	0.145	10.00
C17	1:2	0.879	41.8
C17	1:4	0.573	50.8
C18	1:2	2.695	226.6
C18	1:4	2.3331	260.8
C19	1:2	2.979	375.8
C19	1:4	2.569	368
Donors ID			
D1	1:2	0.045	
D1	1:4	0.043	