PRODUCT CATALOGUE
Contents

About Biohit ............................................................................................................................................. 3

GastroPanel® ......................................................................................................................................... 4-6
GastroPanel® ......................................................................................................................................... 5
GastroPanel® Report ................................................................................................................................ 6

Biohit Laboratory Tests ...................................................................................................................... 7-10
Biohit Calprotectin ELISA .................................................................................................................... 8
Biohit Active B12 (holotranscobalamin) .............................................................................................. 9
Biohit Total 25OH Vitamin D ELISA ................................................................................................... 10
GA-map™ Dysbiosis test ....................................................................................................................... 11

Quick Tests ............................................................................................................................................. 12-17
Lactose Intolerance quick test ............................................................................................................... 13
Biohit Celiac quick test ......................................................................................................................... 14
Biohit Colonview® ............................................................................................................................... 15
Biohit Helicobacter Pylori UFT300 quick test .................................................................................... 16
Helicobacter Pylori quick test ............................................................................................................... 17

Acetaldehyde Binding Products ........................................................................................................ 18-21
Acetium Lozenge ................................................................................................................................. 20
Acetium Capsule ................................................................................................................................... 21

Monoclonal Antibodies ........................................................................................................................ 22-23

Instruments ........................................................................................................................................... 24-27
Microplate Photometers and washers ................................................................................................. 25
BIOHIT Automated Immunoassay Analyzer ....................................................................................... 26
Dynex Automated Systems ................................................................................................................ 27

References ............................................................................................................................................. 28-29
Biohit Oyj is a globally operating Finnish biotechnology company established in 1988. Biohit’s mission is "Innovating for Health".

Biohit shoulders its social responsibility by creating innovative new technologies and services that help physicians and research institutions to promote diagnostics and research. They can also prevent diseases of the gastrointestinal tract, human suffering and financial loss, thereby generating wellbeing. Being a socially responsible company, we feel it is our duty to raise public awareness of acetaldehyde, a group 1 carcinogen, and to innovate and develop the marketing of our products and services, ensuring their maximum availability to the public. Biohit is headquartered in Helsinki and has subsidiaries in Italy and the UK. Biohit’s Series B share (BIOBV) is quoted on NASDAQ OMX Helsinki since 1999, Small cap/Healthcare.

Innovations

Gastrointestinal disorders are a growing worldwide phenomenon that also involves significant medical, ethical and financial issues. Gastrointestinal disorders are also the most common cause of complaints regarding treatment, or insufficient treatment. Such problems are essentially related to issues affecting the general healthcare sector and growing financial constraints caused by the ageing population.

Biohit’s products and services are safe, ethical and cost efficient innovations for diagnosing and preventing gastrointestinal diseases and the associated risks.

www.biohithealthcare.com
GASTROPANEL®

Innovation in the diagnosis of atrophic gastritis from blood sample.

GastroPanel innovation has been developed as a result of decades of research in order to reliably diagnose *H. pylori* infection and atrophic gastritis. Until the development of GastroPanel, gastroscopy and biopsy examination were the only reliable methods for the diagnosis of these conditions.
Stomach health test for dyspeptic patients and screening of asymptomatic subjects

GastroPanel® is a patient friendly, non-invasive, simple blood test for diagnosis of the function and structure of stomach mucosa. GastroPanel is intended as the first-line diagnostic test of the patients suffering from dyspepsia. It is a particularly useful tool for general practitioners and occupational health doctors, because the results can be used to evaluate the need for further investigations (usually gastroscopy).

GastroPanel detects four biomarkers. Three of these biomarkers are secreted by the cells in gastric mucosa: pepsinogen I (PGI), pepsinogen II (PGII) and gastrin-17 (G-17). These are complemented by Helicobacter pylori antibody measurement. This complete panel of all four biomarkers provides a more comprehensive profile of the gastric mucosa than could be achieved by using any of these as stand-alone biomarkers.

GastroPanel identifies Helicobacter pylori infection and indicates whether chronic infection has progressed to atrophic gastritis. GastroPanel also accurately confirms abnormalities in acid output. Since Helicobacter pylori infection and atrophic gastritis are the most important risk factors for stomach cancer, GastroPanel can also be used for screening of asymptomatic subjects for the risks of gastric cancer.

GastroPanel can be used to:
- Identify patients with healthy gastric mucosa
- Diagnose H. pylori
- Diagnose atrophic gastritis
- Identify patients with abnormal (high or low) acid output
- Identify patients who need gastroscopy
- Screening asymptomatic subjects for the risks of stomach cancer

GastroPanel will highlight the following risks:
- Deficiency of Vitamin B12 and other micronutrients
- Peptic and duodenal ulcers
- Gastric and esophageal cancer

GastroPanel will disclose the need for further investigations:
- Gastroscopy and biopsy
- Helicobacter eradication treatment
- Additional investigations for malabsorption or anemia

GastroPanel kits are based on the ELISA [enzyme-linked immunosorbent assay] principle and hence can be used with a variety of analysis equipment (manual or automated). The latest kits feature unified reagents and reaction conditions, making them even more accessible.

GastroPanel® Standard and Unified

<table>
<thead>
<tr>
<th>Standard GastroPanel</th>
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<tbody>
<tr>
<td>Cat. No.</td>
<td>Product</td>
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<tr>
<td>601300</td>
<td>GastroPanel standard</td>
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<tr>
<td>601010.01</td>
<td>Pepsinogen I ELISA</td>
</tr>
<tr>
<td>601020.02</td>
<td>Pepsinogen II ELISA</td>
</tr>
<tr>
<td>601035</td>
<td>Gastrin-17 ELISA*</td>
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<tr>
<td>601040.02</td>
<td>Helicobacter pylori IgG ELISA</td>
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<table>
<thead>
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<th>Unified GastroPanel</th>
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<tbody>
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<td>Cat. No.</td>
<td>Product</td>
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<td>606400</td>
<td>GastroPanel unified</td>
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<tr>
<td>606010</td>
<td>GastroPanel Pepsinogen I</td>
</tr>
<tr>
<td>606020</td>
<td>GastroPanel Pepsinogen II</td>
</tr>
<tr>
<td>606035</td>
<td>GastroPanel Gastrin-17</td>
</tr>
<tr>
<td>606040</td>
<td>GastroPanel Helicobacter pylori</td>
</tr>
</tbody>
</table>

*FDA approved in the United States
GastroPanel® Report

GastroSoft® is a software application designed to assist clinicians/general practitioners in interpreting GastroPanel test results in the context of the recorded anamnestic information. The GastroPanel report is intended for healthcare professionals only. The final responsibility of the diagnosis and treatment always rests with the patient’s own doctor.

GastroPanel flowchart (below) depicts the eight distinct biomarker profiles and their interpretation. A more detailed written report covering all these profiles is produced by GastroSoft application.

Test and create your own GastroPanel report at www.gastropanel.com

> Healthcare professionals and laboratories

GastroPanel report

GastroPanel – interpretation guide snapshot

Structural and functional causes of dyspeptic symptoms diagnosed by GastroPanel test (PGI, PGII, PGI/PGII, G-17, Hp-Ab)

<table>
<thead>
<tr>
<th>Condition</th>
<th>GastroPanel Interpretation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthy stomach mucosa</td>
<td>Normal structure</td>
</tr>
<tr>
<td>Healthy stomach mucosa, patient possibly on PPI treatment; stomach is hypochlorhydric</td>
<td>No need for gastroscopy</td>
</tr>
<tr>
<td>Healthy stomach mucosa; high acid output is likely</td>
<td>No need for gastroscopy</td>
</tr>
<tr>
<td>Short (4-10-day) pause in PPI treatment</td>
<td>No need for gastroscopy</td>
</tr>
<tr>
<td>Superficial, non-atrophic H.pylori [Hp] gastritis</td>
<td>No need for gastroscopy; GERD or NERD conceivable</td>
</tr>
<tr>
<td>Atrophic gastritis in the corpus</td>
<td>PGI or PGII/PGII Low; G-17b High; Hp+ or Hp-</td>
</tr>
<tr>
<td>Atrophic gastritis in the antrum</td>
<td>PGI, PGII/PGII Normal; G-17b Low, Hp+</td>
</tr>
<tr>
<td>Atrophic pangastritis</td>
<td>PGI Low, PGII Normal or Low; PGI/PGII Low, G-17b Low, Hp+</td>
</tr>
<tr>
<td>No need for gastroscopy</td>
<td>Gastroscopy mandatory</td>
</tr>
<tr>
<td>PGI and PGII need more time than G-17b to turn normal</td>
<td>PGI and PGII need more time than G-17b to turn normal</td>
</tr>
<tr>
<td>Eradicate Hp and consider gastroscopy if symptoms</td>
<td>PGI and PGII need more time than G-17b to turn normal</td>
</tr>
</tbody>
</table>

GastroPanel report by the GastroSoft® helps interpret the results
BIOHIT LABORATORY TESTS

- Biohit Calprotectin ELISA
- Biohit Active B12 (holotranscobalamin)
- Biohit Total 25OH Vitamin D ELISA
- GA-map™ Dysbiosis test
Biohit Calprotectin ELISA is a quantitative test which provides a reliable differentiation between inflammatory bowel diseases (IBD) and irritable bowel syndrome (IBS). IBD is commonly associated with conditions such as ulcerative colitis and Crohn’s disease. Patients suffering from either IBS or IBD may experience similar symptoms and a clinical examination alone may not be sufficient to give a specific diagnosis. Furthermore, these conditions may appear from early childhood to late adulthood and the diagnosis is often delayed due to vague symptoms or reluctance to perform endoscopy.

With Biohit Calprotectin ELISA, the determination between IBS and IBD can be made non-invasively and inexpensively from a stool sample. In organic disorders like IBD, the concentration of fecal calprotectin increases significantly, whereas with functional disorders like IBS this does not occur.

Biohit Calprotectin ELISA can also be used for monitoring the mucosal healing of a patient with IBD. This for example helps to support the practitioner in making informed decisions concerning medication and the need for medical procedures such as endoscopy or surgery.

### Applications
- Differentiates inflammatory bowel diseases (IBD) from irritable bowel syndrome (IBS)
- Monitoring of mucosal healing with IBD patients
- Relapse prediction (clinical remission)

### Sampling made easy
- Consistence of the feces does not affect the result
- Only a small amount of sample required
- Easy handling with hygienic extraction tubes = reduced process time

### Straightforward analysis
- Wide assay range with only one dilution 25 – 2500 mg/kg in feces
- Fits directly into automated systems (e.g. Dynex DS2)
- Validated results from a proven assay

Biohit Calprotectin ELISA
For monitoring treatment and differentiating between IBD and IBS

<table>
<thead>
<tr>
<th>Cat. No.</th>
<th>Product Description</th>
<th>Qty</th>
</tr>
</thead>
<tbody>
<tr>
<td>602260</td>
<td>Biohit Calprotectin ELISA</td>
<td>96 tests</td>
</tr>
<tr>
<td>602270</td>
<td>Biohit Extraction tubes</td>
<td>50 pcs</td>
</tr>
</tbody>
</table>

Not available in the United States. In Japan for research use only. Check availability for other markets.
The traditional method of diagnosing vitamin B12 deficiency has been to measure the concentration of total vitamin B12 in the serum. The total vitamin B12 concentration essentially reflects vitamin B12 which is bound to its two carrier proteins forming holohaptocorrin (holoHC) and holotranscobalamin (holoTC). Whilst holoHC accounts for 70% - 80% of the vitamin B12 in serum, only holoTC (active vitamin B12) can be used by human cells. Measurement of total vitamin B12 can hence give erroneous results because it measures the vitamin B12 which is in circulation but does not indicate the active vitamin B12 that is available to the cells of the body.

Biohit Active B12 (holotranscobalamin) ELISA test provides a solution to this diagnostic paradox: this test directly measures (holoTC) – the biochemically active form of vitamin B12 – from the human serum. This test is well suited for the screening of patients with a suspected vitamin B12 deficiency. Biohit Active B12 test can also be used for confirming the vitamin B12 status in the large number of patients who get an inconclusive result from total vitamin B12 tests.

<table>
<thead>
<tr>
<th>Biohit Active B12 (holotranscobalamin) ELISA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cat. No.</td>
</tr>
<tr>
<td>---------</td>
</tr>
<tr>
<td>602290</td>
</tr>
</tbody>
</table>

*In the United States and Japan for research use only. Check availability for other markets.*

- Measures the concentration of active vitamin B12 (holotranscobalamin) available to the cells
- Proven ELISA technology, support for both automated and manual analysis methods
- Unlike total B12 kits, no issues with Intrinsic Factor Blocking Antibody (IFBA) interferences
- Numerous clinical studies proving the performance of active B12 over total B12
Vitamin D has multiple roles in the human body. In addition to its well established role in the regulation of calcium absorption and promoting bone growth, it is recognized for other health benefits including reducing risk of diseases such as type 1 diabetes and common cancers.

The best indicator of vitamin D status is the serum concentration of 25OH vitamin D. For a correct diagnosis of vitamin D deficiency, the assay must recognize two vitamins important in the human body, vitamin D2 and D3.

The BIOHIT Total 25OH vitamin D ELISA kit is a quantitative immunoenzymatic assay. While detecting both 25OH vitamin D2 and D3, the kit provides clinically relevant information on the vitamin D status. Reliability of the results is ensured by validation against the ID-LC/MS-MS Reference Measurement Procedure (Ghent method) as approved by the Vitamin D Standardization Program (VDSP) with R>0.97.

Biohit Total 25OH Vitamin D ELISA
For a conclusive determination of the vitamin D status

<table>
<thead>
<tr>
<th>Cat. No.</th>
<th>Product</th>
<th>Qty</th>
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<tr>
<td>602310.02</td>
<td>BIOHIT Total 25OH Vitamin D ELISA</td>
<td>96 tests</td>
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</table>

In the United States and Japan for research use only.
Check availability for other markets.

Biohit Total 25OH Vitamin D ELISA kit
- Detects both 25OH vitamin D2 and D3 for a clinically meaningful assessment of vitamin D status
- Calibrated against the ID-LC/MS-MS Reference Measurement Procedure
- User-friendly and fully automatable assay protocol
The GA-map™ Dysbiosis test is the first CE-marked gut microbiota DNA analysis tool to identify and characterize dysbiosis.

**Profiling gut microbiota dysbiosis enables personalized treatment**
Profiling dysbiosis in gut microbiota using new molecular diagnostic technologies opens the way to an exciting new era of personalized treatment of gastrointestinal diseases.

**Monitor the microbiota**
The GA-map™ Dysbiosis test can be used for monitoring the effect on the microbiota of a range of different treatments in order to find clinically important subgroups:
- Diets
- Probiotics
- Prebiotics
- Antibiotics
- Drugs, such as TNF inhibitors
- Fecal microbiota transplantation
- Lifestyle changes

Biohit has partnered with Genetic Analysis, a leading molecular diagnostics company focused on developing novel DNA based tests for gastrointestinal diseases. The GA-map™ Dysbiosis test is a CE-marked test providing the first direct measurement of dysbiosis in IBS and IBD patients, paving the way for personalized treatment.

### GA-map™ Dysbiosis test

<table>
<thead>
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<th>Product</th>
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<tbody>
<tr>
<td>602350</td>
<td>GA-map™ sample analysis</td>
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</tr>
<tr>
<td>602360</td>
<td>GP-map™ test</td>
<td>75</td>
</tr>
</tbody>
</table>

In the United States and Japan for research use only. Check availability for other markets.

Numerous studies have suggested a role for gut microbiota in gastrointestinal diseases, and only recently have links between dysbiosis and IBS/IBD been explored. Working with leading experts in Scandinavia and Europe, several studies have been performed in order to document dysbiosis test in various patient populations:

- 73% of the IBS patients had a dysbiotic intestinal microbiota
- 27% of the IBS patients had a microbiota not different from the microbiota profile found in a healthy population
- The GA-map™ Dysbiosis test is the first CE-marked gut microbiota test available for clinical use. Samples can be sent to the certified laboratory for analysis. It is also possible to establish the procedure at the hospital molecular laboratory.

BIOHIT QUICK TESTS

- Lactose Intolerance quick test
- Biohit Celiac quick test
- Biohit ColonView
- Biohit *Helicobacter pylori* UFT300 quick test
- *Helicobacter pylori* quick test
Lactose Intolerance quick test

Confirmed results during gastroscopy
The Lactose Intolerance quick test detects all types of lactase deficiency from biopsy specimens. This gives added value to gastroscopies with minimum effort. The test is based on the normal lactase enzyme reaction and is therefore able to detect lactase deficiency as well as indicate the functionality of the enzyme. The lactose intolerance quick test is not only a sensitive diagnostic tool, but it has also been found to be more accurate than lactose breath test in predicting clinical response to lactose-free diet.

Easy testing from a duodenal biopsy specimen
The test procedure of the Lactose Intolerance quick test is fast and simple. The biopsy specimen is placed in the test plate and test reagents are added on the sample. Clear color change indicates the test result within 20 minutes enabling testing and reporting during one visit.

Lactose Intolerance quick test

<table>
<thead>
<tr>
<th>Cat. No.</th>
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<tr>
<td>602010</td>
<td>Lactose Intolerance quick test</td>
<td>25 tests</td>
</tr>
<tr>
<td>602012</td>
<td>Lactose Intolerance quick test</td>
<td>10 tests</td>
</tr>
<tr>
<td>602018</td>
<td>Lactase control reagent</td>
<td></td>
</tr>
</tbody>
</table>

In the United States and Japan for research only.
Accurate results from fingertip blood
The Biohit Celiac quick test enables non-invasive and accurate testing of celiac disease from only a drop of blood. The test is based on the detection of three forms of anti-tissue transglutaminase antibodies (tTG); IgA, IgG and IgM. The test therefore delivers a superior sensitivity, especially in patients with IgA deficiency.

Easy testing at the point-of-care
The blood sample for the celiac quick test is taken as a finger-prick sample. The sample is placed on a lateral flow test cassette along with a buffer solution. The test result is clearly visible within 10 minutes.

Biohit Celiac quick test

<table>
<thead>
<tr>
<th>Cat. No.</th>
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<td>602070</td>
<td>Biohit Celiac quick test</td>
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Not available in the United States. In Japan for research use only.

Quick test reader

<table>
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<tr>
<th>Cat. No.</th>
<th>Product</th>
<th>Qty</th>
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</thead>
<tbody>
<tr>
<td>740400</td>
<td>Quick Test Reader</td>
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</tbody>
</table>

In the United States and Japan for research only.

Use an electronic Quick test reader for objective interpretation of the Celiac quick test.
Contact Biohit for more information > info@biohit.fi

Biohit Celiac quick test
- Results in 10 minutes
- Finger-prick sample collection
- Easy-to-use lateral flow quick test
- Sensitivity > 99 %, Specificity 98.9 %
Detects bleeding derived from both lower and upper GI tract

The Biohit ColonView quick test is an immunological lateral flow test which detects hemoglobin and hemoglobin-haptoglobin complex (i.e. degraded hemoglobin) from a stool sample. The test can be used to detect bleeding derived from the colon or upper parts of the GI tract. This gives the ColonView test a superior sensitivity and specificity to detect bleeding cancer tumors as well as their precursors (small polyps and adenomas).

One sample is enough for dual testing

Clever design of the ColonView sampling tube eliminates patient errors and ensures that there will always be a correct sample amount. The sampling tube is also a closed system which makes it hygienic to handle by the patient as well as during transportation and in the laboratory. The sampling tube contains all the necessary reagents and no additional accessories are needed for the analysis. One sample is enough for the testing of both Hb and Hb/Hp complex.

<table>
<thead>
<tr>
<th>Biohit ColonView quick test</th>
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<tbody>
<tr>
<td>• Advanced tool to detect bleeding from lower and upper GI tract</td>
</tr>
<tr>
<td>• Superior sensitivity and PPV</td>
</tr>
<tr>
<td>• Clever design of the sampling tube eliminates patient errors</td>
</tr>
<tr>
<td>• Closed system → hygienic sampling, transportation and analysis</td>
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<tr>
<td>• Specificity 100%</td>
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<table>
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*In the United States and Japan for research only.*

<table>
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<th>Quick test reader</th>
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<tr>
<td>Cat. No.</td>
</tr>
<tr>
<td>740400</td>
</tr>
</tbody>
</table>

*In the United States and Japan for research only.*

Use an electronic Quick test reader for objective interpretation of the ColonView quick test. Contact Biohit for more information > info@biohit.fi
Biohit *Helicobacter pylori* UFT300 quick test

**Ultra-fast *H. pylori* detection from a biopsy**
The Biohit *H. pylori* UFT300 is a true quick test for the detection of *H. pylori* from a biopsy specimen. The biopsy taken during gastroscopy can be tested immediately to diagnose *H. pylori* infection or to determine the success of eradication therapy. The test results are ready in only 5 minutes enabling diagnosis and reporting at the same time. This saves the patient from an unnecessary visit to the doctor for hearing the test results. The Biohit *H. pylori* UFT300 quick test has excellent sensitivity and specificity which makes it a highly reliable and accurate tool for diagnostics.

**Biopsy testing could not be easier**
The Biohit *H. pylori* UFT300 quick test is easy and effortless to use. The biopsy specimen is placed into the test tube/well of the plate and mixed with the test reagent. Clear color change indicates the presence of *H. pylori* in the specimen. The procedure is safe and hygienic for the user, and the interpretation of the result doesn’t require specialist training.

**Plate and tube versions available!**

---

**Biohit *Helicobacter pylori* UFT300 quick test with plate**

<table>
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<th>Cat. No.</th>
<th>Product</th>
<th>Qty</th>
</tr>
</thead>
<tbody>
<tr>
<td>602005PLA</td>
<td>Biohit UFT300 quick test</td>
<td>5 tests</td>
</tr>
<tr>
<td>602019PLA</td>
<td>Biohit UFT300 quick test</td>
<td>50 tests</td>
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<tr>
<td>602017</td>
<td>Positive control reagent</td>
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</table>

*Not available in the United States. In Japan for research use only.*

**Biohit *Helicobacter pylori* UFT300 quick test with tube**

<table>
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<th>Product</th>
<th>Qty</th>
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</thead>
<tbody>
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<td>Biohit UFT300 quick test</td>
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<td>Biohit UFT300 quick test</td>
<td>20 tests</td>
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<td>602021</td>
<td>Biohit UFT300 quick test</td>
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</tr>
<tr>
<td>602017</td>
<td>Positive control reagent</td>
<td>1</td>
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</table>

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Biohit *Helicobacter pylori* UFT300 quick test

- Ready-to-use test kit
- Results ready in 5 min (both positive and negative)
- Storage in room temperature
- Sensitivity 94.5 %, Specificity 100 %
- Testing and reporting during one appointment
**Helicobacter pylori quick test**

**Easy testing from a biopsy specimen**

The *H. pylori* quick test is a one-step test method to detect *H. pylori* infection from a biopsy sample during gastroscopy. The *H. pylori* quick test can be used to diagnose *H. pylori* infection or to determine the success of eradication therapy. The positive results for *H. pylori* are ready in a few minutes, and the final confirmation of a negative test result is ready in just 30 minutes.

Using the *H. pylori* quick test is an easy one-step procedure. The biopsy specimen is immersed into the gel medium, and if *H. pylori* urease is present in the specimen, a red color develops in the gel. Interpretation of the indicator color is simple and does not require any specialist training.

---

**Helicobacter pylori quick test**

**Cat. No.** | **Product** | **Qty**
--- | --- | ---
602015 | *Helicobacter pylori* quick test | 50 tests
602017 | Positive control reagent | 1

*In the United States and Japan for research use only.*
ACETALDEHYDE BINDING PRODUCTS

- Acetium Lozenge
- Acetium Capsule
Acetaldehyde is a Group I human carcinogen that we are exposed to every day

Where does acetaldehyde come from and where is it found?

Acetaldehyde is the most common carcinogen in the world. It can be found in many types of food as well as in alcohol and tobacco.

Acetaldehyde is naturally present in many types of food. It is particularly abundant in food produced by fermentation, such as alcoholic beverages, vinegar, dairy products, home-brewed beer and mead.

Due to its pleasant apple-like smell, acetaldehyde is also used as a flavoring in some pastries, fruit juices, soft drinks, sweet desserts and dairy products.

The most significant sources of acetaldehyde exposure are high consumption of alcoholic beverages and smoking.

How does acetaldehyde act in the body?

In a normal, healthy stomach, hydrochloric acid (HCl) can kill the acetaldehyde-producing microbes (yeasts and bacteria) of the digestive tract, which are carried from the mouth to the stomach with saliva. In certain conditions these microbes form acetaldehyde from alcohol by oxidation or by fermentation of ingested sugar.

In some people, acid-producing cells of the mucous membrane of the stomach disappear due to atrophy of the mucous membrane (a condition called atrophic gastritis), and therefore microbes are able to multiply in the stomach. People who have taken antacid medicines for a long time to treat acidic stomach conditions are also at risk of microbial growth in the stomach. Unlike the liver, the mucous membrane of the intestines and the microbes of the stomach are not able to process acetaldehyde and turn it into acetic acid and water. Therefore, an abundance of acetaldehyde accumulates in the saliva, anacidic stomach, and the lower digestive tract.

Maximum amount of acetaldehyde

It has been estimated that the daily acetaldehyde intake by a person of average weight (70 kg) should not exceed 0.4 milligrams. This means that the acetaldehyde content of a 100 ml serving of any alcoholic beverage or food should not exceed 50 µmol/l. The acetaldehyde content of some food can be many thousands of times higher than the safety limit.

The highest acetaldehyde contents can be found in certain alcoholic beverages (such as calvados, sherry and ciders), fermented products and some fruits and fruit-based products.
Acetium Lozenge can help to quit smoking and can be used to alleviate tobacco dependence. It is easy to use: one lozenge is taken every time during smoking a cigarette. Smoking cessation with Acetium takes in average 3-6 months of regular use. Gradually the smoking pleasure decreases and smoking experience changes, making it easier to quit smoking.

Acetium lozenge contains L-cysteine, which is a natural amino acid. L-cysteine effectively binds the cigarette smoke derived acetaldehyde from saliva.

L-cysteine removes up to 90 per cent of the acetaldehyde dissolved into saliva during smoking.

The recommended dosage is 1 or 2 lozenges during smoking.

**Acetium Lozenge is a breakthrough in smoking cessation therapy:**

- Acetium does not contain nicotine nor maintain addiction to nicotine
- Acetium does not cause side effects

![](image)

**Acetium Lozenge**
- Removes acetaldehyde from saliva during smoking.
- Sensations of smoking changed during intervention.
- Reduces the adverse effects of smoking if you are not able to quit.
- Tooth-friendly, contains xylitol. Poor oral hygiene increases local acetaldehyde formation.
Acetium capsules contain L-cysteine, which is a natural amino acid. L-cysteine effectively binds acetaldehyde locally in stomach.

If you are taking antacid medicines on a regular basis or suffering from an anacidic stomach, the bacteria and yeasts from the mouth can live in the stomach. These bacteria and yeasts produce carcinogenic acetaldehyde every time you consume alcoholic beverages and food that contains alcohol or sugar. Also *Helicobacter pylori*, capable of surviving even in acidic stomach, produces acetaldehyde.

**Acetaldehyde is a carcinogen that is particularly dangerous if:**

- you are suffering from an anacidic (low- or no-acid) stomach
- you are taking antacid medication (PPI or H2 blockers)
- you are suffering from a chronic *Helicobacter pylori* infection

The innovation of Acetium slow release formula binds carcinogenic acetaldehyde locally in stomach and prevents its absorption into body.

---

### Acetium Capsule

**Protect your stomach**

Acetaldehyde binding products

<table>
<thead>
<tr>
<th>Cat. No.</th>
<th>Product</th>
<th>Qty</th>
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</thead>
<tbody>
<tr>
<td>620070</td>
<td>Acetium Capsule FI-SWE-EN</td>
<td>4 x 15 blisters</td>
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<tr>
<td>620095</td>
<td>Acetium Capsule ITA-GER-FRA</td>
<td>4 x 15 blisters</td>
</tr>
</tbody>
</table>

*Not available in the United States.*

---

**Acetium capsule**

- Protects the stomach, especially if you are suffering from an anacidic (low- or no-acid) stomach or taking antacid medicines
- Effectively removes acetaldehyde when taken during meals and alcohol consumption
Monoclonal Antibodies

<table>
<thead>
<tr>
<th>Specificity</th>
<th>Clone #</th>
<th>Host</th>
<th>Subclass</th>
<th>Format</th>
<th>Qty*</th>
<th>Applications**</th>
<th>Paraffin***</th>
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<td>Monoclonal Antibodies to Human Gastric Biomarkers</td>
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<tr>
<td>Pepsinogen I</td>
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<tr>
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<td>Genistein</td>
<td>L22FA2</td>
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<td>IgG1</td>
<td>purified</td>
<td>100 µg</td>
<td>EIA, FIA</td>
<td>-</td>
<td>610058</td>
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<td>Monoclonal Antibodies to Human Extracellular Matrix Components</td>
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<tr>
<td>Cellular Fibronectin (cFn)</td>
<td>DH1</td>
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<td>IgG1</td>
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<td>100 µg</td>
<td>IHC, WB</td>
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<td>Tenascin-C</td>
<td>EB2</td>
<td>mouse</td>
<td>IgG1</td>
<td>purified</td>
<td>100 µg</td>
<td>IHC, WB</td>
<td>no</td>
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<td>Tenascin-C</td>
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<td>IHC, WB</td>
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<tr>
<td>Laminin (β1-chain)</td>
<td>DG10</td>
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<tr>
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<td>100 µg</td>
<td>IHC, IP</td>
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<td>Plasma Fibronectin (pFn)</td>
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<td>IgG1</td>
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<td>Vimentin</td>
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<td>IgG1</td>
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<td>IHC, WB</td>
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<td>Monoclonal Antibodies to Human Endothelial Cell Surface Marker</td>
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<td>PECAM-1</td>
<td>CE6</td>
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<td>GABA</td>
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<td>CGRP</td>
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<td>Monoclonal Antibodies to Human Cytoskeletal Polypeptides</td>
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<tr>
<td>α -Actinin</td>
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<td>Cytokeratin 18</td>
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<td>Neurofilaments 150, 200</td>
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<td>Neurofilaments 70, 200</td>
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<tr>
<td>Monoclonal Antibodies to Human Spectrins</td>
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<tr>
<td>Erythroid α-Spectrin</td>
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<td>100 µg</td>
<td>IP, WB, IHC</td>
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<tr>
<td>Erythroid β-Spectrin</td>
<td>DB2</td>
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<td>IgG1</td>
<td>purified</td>
<td>100 µg</td>
<td>IP, WB, IHC</td>
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</tr>
</tbody>
</table>

MAbs in other concentrations and in different buffer systems are available at request.
*Other sizes available at request.
**The Biohit monoclonal antibodies are applicable in: IHC = Immunohistochemistry, WB = Western Blotting, FIA = Time-resolved Fluorescence Immunoassay, IP = Immunoprecipitation, EIA = Enzyme Immunoassay
*** Reactivity with paraffin sections
Human Gastric Biomarkers

**Pepsinogen I:**
Pepsinogen I is a group of precursor molecules for pepsin. These proteins are solely synthetized and secreted into gastric lumen by chief [pepsin] cells and mucous neck cells in the gastric corpus [oxyntic mucosa]. In atrophic corpus gastritis these cells disappear resulting in a decrease of the serum level of pepsinogen I and in a reduction of the number of pepsinogen I positive cells in gastric biopsies. The presence of positive immunostaining for pepsinogen I is a highly reliable sign for the acid-secreting oxyntic glands. In gastric heterotopia of the duodenal bulb, but not in gastric metaplasia, the oxyntic-type glands give a positive immunohistochemical reaction for pepsinogen I.

**Pepsinogen II:**
Pepsinogen II is a group of precursor molecules for pepsin. These proteins are secreted into the gastric lumen by the pyloric glands of the gastric antrum and also by the chief and neck cells of the gastric corpus [oxyntic mucosa]. Negative immunohistochemical reaction for pepsinogen I [right] but positive reaction for pepsinogen II [left] is a typical sign of the antral mucosa and, in the presence of atrophic gastritis, this staining pattern indicates that the positive glands and cells are metaplastic and “pyloric” in differentiation (so called pseudopyloric metaplasia).

**Human Extracellular Matrix Components**
The extracellular matrix (ECM) consists of interstitial connective tissue and basement membrane [BM]. The ECM acts as a backbone for cells and provides a physical barrier. It also influences such as cell proliferation, differentiation, adhesion, migration, gene expression, and tissue integrity.

ECM also plays a profound role in tissue injury and healing. The detection of ECM components in various parts of the body provides an efficient tool for following malignant change, invasion and metastasis. Biohit provides monoclonal antibodies to: Fibronectins, Tenascin, Laminins and Vitronectin.

**Human Endothelial Cell Surface Marker**
The endothelium is the thin layer of cells that lines the interior surface of blood vessels forming an interface between circulating blood in the lumen and the rest of the vessel wall. These cells are called endothelial cells. Platelet endothelial cell adhesion molecule (PECAM-1) is an antigen, which is typically shared by both endothelial and distinct hematopoietic cells. It is widely expressed among leukocytes and functions as a cell adhesion molecule.

**Human Cytoskeletal Polypeptides**
The cytoplasmic cytoskeleton determines cell organization, shape and adhesion among other functions. Furthermore, the cell type-specific expression of intermediate filaments allows determination of the origin of many, otherwise unspecific tumours. Biohit offers monoclonal antibodies to the following cytoskeletal peptides: α-Actinin, α- Fodrin, Cytokeratin 18, Cytokeratin 8, 18, 19, Cytokeratin 7, 17, 19, Neurofilament 70, 200, Neurofilament 150, 200, Vinculin and Vimentin.

**Phytoestrogen**
Genistein is an isoflavone belonging to the group of phytoestrogens [plant estrogens], which have been implicated in the prevention of cancer, cardiovascular and other chronic diseases. The main source of genistein is the soybean and various soy foods. Its determination in biological fluids and tissues by immunoassay is of increasing importance and for that purpose a specific antiserum is now available.

**Human Integrins**
Integrins are the largest known family of receptors for ECM proteins. They are glycoproteins that mediate cell-extracellular matrix as well as cell-cell interactions. Integrins consist of several protein subfamilies that share a common β-subunit and have a distinct α-subunit. Monoclonal antibodies to β1-integrin and β3-integrin as well as to αv-integrin are offered by Biohit.

**Human Neurotransmitter Substances**
Neural and neuroendocrine cells are able to synthesize a variety of peptides as well as amino acids that can function either as inhibitory or stimulatory substances in neurotransmission. Such neurotransmitter substances are gamma aminobutyric acid (GABA) and calcitonin gene-related peptide (CGRP).

**Human Spectrins**
Erythroid spectrins, some other proteins of erythroid cytoskeleton, and the transmembrane protein band 3 are highly specific for erythrocytes and their progenitors. They are more reliable markers for erythroid differentiation than Glycophorin A, the commonly used marker for erythroid differentiation, because Glycophorin A is expressed also in many cell lines otherwise exhibiting mainly megacaryotic characteristics. Both erythroid α-spectrin and erythroid β-spectrin monoclonal antibodies can be used for example in identification of erythroid leukemias.
• Microplate photometers and washers
• BIOHIT Automated Immunoassay Analyzer
• Dynex Automated Systems
BP Microplate Readers
The BP800 Microplate Reader has all the features of a modern microplate photometer to automatically perform endpoint analysis for a variety of ELISA-based applications. With the help of the in-build intuitive user interface, new test protocols can be made fast and easily. Extensive on-board data reduction surpasses many personal computer software packages with its extensive curve-fitting, cut-off calculation, data transformation and validation capabilities. The BP800 is designed to serve as a stand-alone system, or as part of a larger laboratory data network, sending receiving, and manipulating assay data as needed. Therefore, in addition to the printer interface, the instrument has a serial interface to be controlled with a personal computer for further processing and distribution of data.

The BP808 Microplate Reader is an 8-channel microplate photometer (IU-model) with four-zone incubation to 50 °C and a linear shaking. Due to the fast reading capability the unit is also suitable for kinetic applications. In-build user interface, data reduction, serial and parallel I/O are provided as with the BP800, offering an advanced reader for different kind of application.

The e-Lisa XL is the most easy-to-use, yet useful software utility for supporting the Biohit microplate readers with end point type assays such as the Biohit GastroPanel assays - Pepsinogen I and II, Gastrin-17 and *Helicobacter pylori* or other Biohit ELISA based tests. It has been designed to be used together with Microsoft Excel™, providing numerous possibilities for data processing and validation. The e-Lisa XL is delivered with Excel templates for Biohit assays.

The Biohit BP-series microplate readers are delivered with the Biohit e-Lisa XL for Windows, providing immediate easy-to-use measurements when PC is used to control the reader.

BW50 Washer
The BW50 is a self-contained and programmable microplate washer suitable for EIA, FIA, RIA, DNA probe and cellular assays. It allows full control of precise fluidic delivery from the gentle dripping of a simple squeeze bottle to the full force of pressure delivery systems. The BW50 is a perfect companion for the Biohit’s BP-series readers. The built in user interface and the on-board software enable similar intuitive easy programming as with the BP-readers. This commonality allows the laboratory technician to easily develop both washing and data reduction protocols for those assays of interest. The BW50 can be delivered preprogrammed for Biohit diagnostic kits.

<table>
<thead>
<tr>
<th>Instruments</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cat. No.</strong></td>
</tr>
<tr>
<td>740030</td>
</tr>
<tr>
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<tr>
<td>740052</td>
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<tr>
<td>740053</td>
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</tbody>
</table>
The instrument is full of unique features such as intelligent racks, high precision liquid handler, orbital MTP shaker, build-in barcode reader, convection incubator, on-board camera. The analyzer provides complete, walk-away automation of up to 192 patient samples. It has a smallest footprint on any comparable instrument and therefore can be placed on a standard 60 cm lab table. Completely open architecture allows any ELISA protocol to be programmed and run on up to eight different assays simultaneously. The CLIA option enables the platform to process chemiluminescence assays as well.

Biohit Automated Immunoassay Analyzer provides compact, cost-efficient and completely open system to automate GastroPanel or any other EIA assays.

Biohit Automated Immunoassay Analyzer is manufactured by Gold Standard Diagnostics Inc.
Dynex Automated Systems

**Dynex DS2®**
Designed with full walkaway capability, DS2® quickly and easily processes two 96-well microplates and up to 12 different assays simultaneously. The system also features a user-friendly control system, chain of custody management and on-board instrument diagnostics.

DS2® delivers sample-in/results-out automation of microplate assays:
- Sample dilution and distribution
- Incubation, washing and reagent dispensing
- Reading with automatic data reduction and quality control
- Automatic barcode scanning

The flexible, open system design of DS2 is ideal for virtually any ELISA application, such as GastroPanel from Biohit.

---

### Instruments

<table>
<thead>
<tr>
<th>Cat. No.</th>
<th>Product</th>
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<tr>
<td>742301</td>
<td>DS2® Automated 2-plate System with incubators and Bar code Reader</td>
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</table>

DS2 is manufactured by Dynex Technologies
• Orlandi M, Netzer P, Inauen W. IDENTIFYING LACTOSE INTOLERANCE WITH A NOVEL BIOPSY-BASED RAPID LACTASE TEST. 


Biohit Calprotectin ELISA


• Ten H. Improved assay for faecal calprotectin. Clinica Chimica Acta 2000; 292:41-54

Biohit Active B12 (holotranscobalamin) ELISA


Biohit Lactose Intolerance quick test


• Orlandi M, Netzer P, Inauen W. IDENTIFYING LACTOSE INTOLERANCE WITH A NOVEL BIOPSY-BASED RAPID LACTASE TEST. Gut 2006; Vol 55 [suppl VI]: A98.
Biohit ColonView quick test


Biohit Helicobacter pylori quick test


Biohit Helicobacter pylori UFT300 quick test

• Vaira D. et. al. “Accuracy of a new ultrafast rapid urease test to diagnose Helicobacter pylori infection in 1000 consecutive dyspeptic patients” Alumni Pharmacology & Therapeutics [2010] 31, 331–338

Biohit Celiac quick test


Acetaldehyde binding products

• Linderborg K, Salaspuru M, Väkeväinen S. A single sip of a strong alcoholic beverage causes exposure to carcinogenic concentrations of acetaldehyde in the oral cavity. Food Chem Toxicol. 2011 Sep;49(9):2103-6.
• Salaspuru M. Acetaldehyde as a common denominator and cumulative carcinogen in digestive tract cancers. Scand J Gastroenterol 2009.
Contact details

Biohit HealthCare Ltd.
Pioneer House, North Rd
Ellesmere Port, CH65 1AD,
United Kingdom
Tel. +44 151 550 4 550
info@biohithealthcare.co.uk

Biohit Healthcare Srl
Via Boncompagni, 3
20139 Milano
Italy
Tel. +39 02 38238113
info.italy@biohit.fi

Biohit Oyj
Laippatie 1
00880 Helsinki
Finland
Tel. +358 9 773 861
info@biohit.fi