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### MULTICENTRE EVALUATION OF THE FILMARRAY MENINGITIS / ENCEPHALITIS PANEL

### **Conflict of interest**

# All kits for the evaluation were provided by bioMérieux The authors have no commercial interest to declare

# Aetiology

- Infection of central nervous system
- Different causative organisms can be involved viruses, bacteria, fungi, parasites
- Clinical symptoms are similar

fever, headache, neck stiffness, vomiting,...

- Rapid identification is important for patient management and prognosis
- Tests with high accuracy and short turn-around-time are needed

# Laboratory diagnosis

- Gram stain
- Culture
  - Gold standard for bacteria
  - Results available in >24-48 hours
  - Some pathogens are difficult or impossible to culture
- Nucleic acid amplification testing (NAAT)
  - Singleplex
  - Multiplex
- Antigen testing
  - Cryptococcus neoformans
  - Streptococcus pneumoniae

# FilmArray<sup>®</sup> (BioFire)

#### Fully automated

Cell lysis, Nucleic Acid extraction, nested PCR and detection

- Easy to use (hands-on-time 5')
- Short turn-around-time (approximately 1 hour)
- Multiplex PCR system: targets 14 pathogens simultaneously



Bacteria

Escherichia coli K1 Haemophilus influenzae Listeria monocytogenes Neisseria meningitidis Streptococcus agalactiae Streptococcus pneumoniae



Cytomegalovirus (CMV) Enterovirus Herpes simplex virus 1 (HSV-1) Herpes simplex virus 2 (HSV-2) Human herpesvirus 6 (HHV-6) Human parechovirus Varicella zoster virus (VZV)



Cryptococcus neoformans/gattii

### Study aim

- Verify the limit of detection (LOD) as claimed by the company
- Verify the accuracy
- Perform inter-laboratory evaluation to guarantee equal results

#### □ LOD experiments

- Bacterial strains (ATCC/NCTC) were quantified by colony counting
- For viruses, QCMD samples with given consensus concentration were diluted
- Analysis of each pathogen once at a concentration of 2-3 times LOD
- Reanalysis of dilution twice if negative result
- Analysis with higher concentration if 3 times negative result

Remark: Escherichia coli K1 and Cryptococcus neoformans / gattii were not included

#### Accuracy

- Retrospective analysis of 65 samples, suspicious for meningitis / encephalitis (ME)
  - > 16 clinical CSF samples tested negative with routine analysis
  - > 37 clinical CSF samples tested positive with routine analysis
  - > 5 EQA samples (QCMD)
  - > 7 spiked strains (ATCC/IPH-Belgium)

#### Accuracy

- WBC and total protein elevated
- Clinical symptoms were combined with other laboratory test results
- Discordant results were confirmed with in-house real-time PCR

- Inter-laboratory evaluation
  - Analysis of 2 samples by all sites:
    - Physiological salt solution
    - > NATtrol ME Controls (Zeptometrix) pool 1:5 dilution
  - 3 different time points:
    - Day 0
    - Day 1: samples were stored at room temperature (mimic transport conditions)
    - Day 7: samples were stored at 2-8°C (mimic storage conditions)

# Study results: limit of detection

#### LOD confirmed for:

- Listeria monocytogenes
- Streptococcus pneumoniae
- Neisseria meningitidis
- ✤ CMV
- Enterovirus
- Herpes simplex virus 1 and 2
- Human herpes virus 6
- Parechovirus
- Varicella zoster
- *Haemophilus influenzae* (ATCC 10211, type b biotype 1)
- Haemophilus influenzae (ATCC 49247, unencapsulated)

- □ LOD **not confirmed** for:
  - Streptococcus agalactiae
  - Haemophilus influenzae
    - (NCTC 8468, type b biotype 4)

16 suspected negative samples were analysed

- □ 14/16 were negative with FilmArray ME
- □ 1/16 was positive for human herpes virus 6 with FilmArray ME
- □ 1/16 was positive for enterovirus with FilmArray ME

□ Sample 1: positive for **human herpes virus 6** with FilmArray ME

- Male, 2 months old
- Clinical presentation: symptoms of viral meningitis / meningoencephalitis, no roseola
- WBC: 3/μl, total protein: 92,8 mg/dl
- Bacterial culture negative
- Viral culture not performed
- Singleplex PCR HSV, VZV and enterovirus negative
- Positive results confirmed by in-house PCR (4066 copies/ml)
- Clinical signs not suggestive for human herpes virus 6 infection

□ Sample 2: positive for **enterovirus** with FilmArray ME

- Male, 33 years old
- Clinical presentation: headache probably caused by spinal problems
- WBC: 15/μl, total protein: 57,6 mg/dl
- Bacterial culture negative
- Viral culture not performed
- Singleplex PCR HSV, VZV and enterovirus negative
- Positive results could not be confirmed by 2 in-house PCRs, nor by GeneXpert (Cepheid)

- □ 37 clinical samples
  - 34/37 samples were positive with FilmArray ME: concordant results
  - 3/37 samples were negative with FilmArray ME

- □ Sample 1:
  - Clinical presentation: Benign meningitis 8 months post HSCT
  - WBC and total protein elevated
  - In-house PCR: human herpes virus 6

viral load 7626 copies/ml

#### □ Sample 2 and 3:

- Clinical presentation: African HIV positive woman
- Cryptococcus Ag 1/16 (agglutination)
- Culture yeast negative
- WBC and total protein elevated
- Follow-up sample after 10 days of therapy
- Initial CSF: Cryptococcus Ag 1/1024, FilmArray positive,
  culture 48h: Cryptococcus neoformans, PCR: Toxoplasma gondii (Ct 28)
- FilmArray is possibly not sensitive enough for follow-up of Cryptococcus Ag positive samples<sup>1</sup>

<sup>1</sup> Hanson et al. JCM 2016 54: 3 785-787

#### □ 5 EQA QCMD samples

- Concordant results for pathogen included in EQA panel
- 3/5 samples showed also a positive result for human herpes 6 virus
  - > QCMD 2015-01 HSV
  - > QCMD 2015-03 VZV
  - > QCMD 2014-07 CMV
- Result of human herpes 6 virus not confirmed by in-house real-time PCR
- Sample related?

- □ 7 spiked strains (ATCC/IPH-Belgium)
  - Concordant results for 6 strains:
    - > Haemophilus influenzae ATCC10211
    - > Listeria monocytogenes (2)
    - Streptococcus agalactiae
    - > Streptococcus pneumoniae
    - Cryptococcus neoformans/gattii
  - False negative result for *Haemophilus influenzae* ATCC 49247. After repeated analysis: positive result

### Study results inter-laboratory evaluation

- All sites produced identical results
- No false positive nor false negative results found
- Transport and storage did not influence results

# Conclusion

- The limit of detection as claimed by the company is confirmed except for *Streptococcus agalactiae* and for some strains of *Haemophilus influenzae*.
- Analysis of discordant results in the accuracy experiment shows an overall agreement for 60/65 samples (92 %).
- CSF samples can be transported at room temperature and stored for 7 days at 2-8°C.
- FilmArray ME panel seems a promising and useful tool in the diagnosis of central nervous infections.

# Multicentre study

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