MULTIPLEX GASTROINTESTINAL PATHOGEN DETECTION WITH A USER FRIENDLY, HIGH-THROUGHPUT SYSTEM



Bansari Shah, Melissa Henrie, Jakob Kirchner, Deepali Shinde, Tad Kawashima, Michael Aye* Applied BioCode, Inc., Santa Fe Springs, CA

Revised Abstract

Gastroenteritis is the second most common illness after the common cold. Globally, diarrhea accounts for approximately 2 million deaths in children under 5 years old each year, or 19% of total child deaths, 1, 2 High-throughput multiplex assays are desirable for rapid identification of the pathogens that can cause outbreaks of diarrhea and for infection control in healthcare settings.

Using the proprietary barcoded magnetic bead (BMB) technology. Applied BioCode has developed a prototype molecular diagnostic assay for detection of gastrointestinal (GI) pathogens including bacteria, viruses, and parasites. The GI pathogen assay is highly specific and did not show cross-reactivity with organisms tested in the study. Analytically, the assay can detect 10 copies of DNA targets per PCR reaction, and preliminary limit of detection was as low as 103 CFU/mL for C. difficile and 102 PFU/mL for adenovirus 41. Evaluation of 43 clinical specimens previously tested by validated real-time PCR assays showed 100% concordance for C. difficile toxin and norovirus. In parallel with the multiplex assay development, we are also developing a prototype automated system in a 96-well format. This system will integrate PCR with post-PCR processing and detection, thereby simplifying the workflow and reducing hands-on time for the users.

In this study, we tested 234 stool specimens with the BioCode GI assay and demonstrated comparable results to a FDA-cleared multiplex test performed in a clinical laboratory.

Methods

Clinical specimens were subjected to vortexing with beads in the easyMAG lysis buffer prior to automated extraction with NucliSENS easyMAG® (bioMerieux).

Following extraction of nucleic acids from stool specimens. DNA and RNA targets were amplified in a one-step RT-PCR in either 9700 or 7500 Fast thermal cycler (Applied Biosystems). PCR products were captured by target-specific probes that were coupled to BMBs with unique barcodes. The presence of captured target sequence on an individual BMB was detected by streptavidinphycoerythrin (SA-PE) conjugate. Qualitative results for each target were determined by a median fluorescence index (MFI) signal relative to assay cutoffs.

Target specific oligonucleotide probes were synthesized with a 5'-amino modification and a linker. Each probe was conjugated to BMBs with a unique barcode via amide linkage. Probes coupled to BMBs were combined into assay specific probe mix used for capturing biotin-labeled target DNA. Target capture (hybridization) and SA-PE labeling reactions were performed in a Thermo Shaker (PlexBio Co.). Unbound molecules were removed from BMB by washing with a ELx50 magnetic plate washer (BioTek). BMB imaging and fluorescence signal detection was performed on BioCode 1000A reader (Applied BioCode, Inc.).





Figure 1. Schematic presentation of a biotinylated target DNA captured by a target-specific probe (red line) coupled to BMB (gray rectangle), and labeled by SA-PE (*S)

BioCode GI Panel Targets

Table 1. Organisms and toxins targeted by BioCode GI Panel

- Clostridium difficile (toxin A and B)
- Campylobacter spp.
- Salmonella spp.
- Shigella spp./ Enteroinvasive E. coli
- E. coli O157
- Enterotoxigenic E. coli (LT/ST)
- Shiga toxin producing E. coli (stx1/stx2)
- Enteroaggregative E. coli
- Aeromonas spp.
- Vibrio spp. (V. parahaemolyticus)
- Norovirus GI/GII
- Adenovirus 40/41
- Rotavirus A
- Cryptosporidium spp
- Giardia intestinalis
- Entamoeba histolytica

Barcoded Magnetic Beads (BMB)

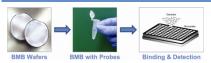


Figure 2. BMBs extracted from wafers are activated in suspension, coupled to probes, and utilized for target capture in microtiter plates.

BioCode-3000 HTS

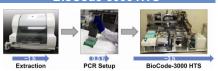
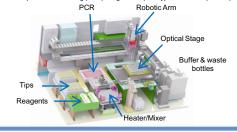


Figure 3. Workflow for BioCode assays includes automated extraction and PCR set up prior to the steps automated by BioCode-3000 HTS (Top). Computer-aided drafting (CAD) image of the prototype instrument (Bottom).



Results

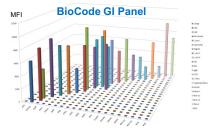


Figure 4. Sample data from the BioCode assay with analytical targets. MFI values (bars) for each target (X-axis) are plotted for each probe.

Table 2. Microorganisms tested for cross reactivity with BioCode assay

Organisms tested for Cross Reactivity				
Acinetobacter baumannii	Acinetobacter Iwoffii	Alcaligenes faecalis		
Bacillus cereus	Citrobacter freundii	Enterobacter aerogenes		
Enterobacter cloacae	Enterococcusfaecalis (vanB)	Enterococcusfaecium (vanA)		
Escherichia coli	Klebsiella oxytoca	Klebsiella pneumoniae		
Lactobacillus acidophilus	Listeria monocytogenes	Proteus mirabilis		
Providencia stuartii	Pseudomonas aeruginosa	Serratia marcescens		
Staphylococcus aureus	Staphylococcus epidermidis	Stenotrophomonas maltophilia		
Streptococcus agalactiae	Vibrio cholerae	Yersinia enterocolitica		

No cross-reactivity was observed for the BioCode GI assay with the microorganisms listed above

Table 3. Preliminary Limit of Detection (LoD) for the BioCode GI assay

Preliminary Limit of Detection			
Target	Preliminary LoD	Average MFI	
Adenovirus 41	1x10 ² PFU/mL	4898	
Norovirus GI (recombinant)	7x103 TCID ₅₀ /mL	6937	
Norovirus GII (recombinant)	7x103 TCID ₅₀ /mL	5672	
C. difficile	1x103 CFU/mL	2624	
Salmonella enterica (typhimurium)	7x103 CFU/mL	4256	
Shigella flexneri	7x103 CFU/mL	5721	
E. coli O157	7x103 CFU/mL	6130	
Aeromonas hydrophila	7x103 CFU/mL	7103	
Vibrio parahaemolyticus	7x103 CFU/mL	7443	
Cryptosporidium	7x10 ³ cells/mL	6736	
Giardia intestinalis	1x10 ² cells/mL	1241	

Table 4. Comparison of the BioCode assay with validated real-time PCR for C. difficile and noroviruses (GI & GII).

C. difficile		F	Real-Time PCR		
		Pos	Neg	Total	
BioCode Gl Panel	Pos	10	0	10	
	Neg	0	33	33	
	Total	10	33	43	

Norovirus (GI/GII)		F	Real-Time PCR		
		Pos	Neg	Total	
BioCode Gl Panel	Pos	8	0	8	
	Neg	0	35	35	
	Total	8	35	43	

Results of the BioCode assay showed excellent correlation with validated real-time PCR assays for C. difficile and noroviruses.

Results

Table 5. Comparison of the BioCode GI assay with Luminex GPP assay (n =234 stool specimens)

Target Pathogen	Positive results reported by		
ranget Fathlogen	BioCode GI	Luminex GPP	
Clostridium difficile	67	65	
Salmonella spp.	5	7	
Shigella spp./ EIEC	3	4	
ETEC	0	0	
STEC	0	0	
E. coli O157	1	1	
EAEC	5	N/A	
Campylobacter spp.	1	1	
Aeromonas spp.	1	N/A	
Vibrio parahaemolyticus	0	N/A	
Norovirus (GI & GII)	11	10	
Rotavirus A	10	9	
Adenovirus F	5	N/A	
Cryptosporidium spp.	1	1	
Giardia intestinalis	0	0	
Entamoeba histolytica	0	N/A	
Total positive results	110	98	
Invalid results (initial run)	1 (8)	1 (27)*	
Repeat testing for Luminex assay was per	formed with 1:10 dilution	of the sample.	

Co-infections: The BioCode assay reported 10 out of 234 samples (4.3%) as positive for more than one pathogen.

Table 6. Comparison of BioCode assay with Luminex GPP for C. difficile.

C.difficile		Luminex GPP Results		
		Positive	Negative	Total
BioCode GI Panel	Positive	59	8	67
	Negative	6	161	167
	Total	65	169	234

Positive Agreement	59/65	90.8%
Negative Agreement	161/169	95.3%

Summary & Conclusions

- BioCode GI assay is shown to detect intended targets including bacteria, viruses and parasites.
- BioCode GI assay does not detect other organisms tested for cross-reactivity.
- Preliminary Limit of Detection (LoD) of the assay was determined at 103 CFU/mL for C. difficile 102 PFU/mL for adenovirus 41 and 102 cells/mL for Giardia.
- Clinical performance with 234 stool specimens showed comparable results to the Luminex xTAG® GPP assay.
- BioCode-3000 HTS is designed for batch testing of multiplex assays in 96-well format with limited hands-on time and reduced contamination risk.

Acknowledgements

The authors thank Diatherix Laboratories, Inc. for providing some of the titered organism stocks used for preliminary LoD of the BioCode GI assay.

References

- 1 Roschi-Pinto C. Velehit I. Shihuya K. Estimating child mortality due to diarrhoea in
- developing countries. Bull World Health Organ. 2008; 86(9):710-2. Clark B, McKendrick M. A review of viral gastroenteritis. Curr Opin Infect Dis. 2004;