Clostridium difficile GDH+ Toxin A +Toxin B Combo Rapid Test Cassette (Feces) Package Insert (ICD-635)

In vitro rapid diagnostic test for the detection of Clostridium difficile GDH, Toxin A and Toxin B antigen in human feces samples For professional use only.

INTENDED USE

INTENDEDUCE The Clostridium difficile GDH +Toxin A +Toxin B Combo Rapid Test Cassette (Feces) is a rapid chromatographic immunoassay for the qualitative detection of Clostridium difficile GDH, Toxin A and Toxin man feces specimen

Summary Clostridium difficile is an anaerobic bacteria acting as an opportunistic pathogen: it grows in the intestine when the normal flora has been altered by treatment with antibiotics.^{12,9} Toxinogenic strains of Clostridium when the normal strain and the strain acting as an opportunistic pathogen: it grows in the intestine when the normal flora has been altered by treatment with antibiotics.^{12,9} Toxinogenic strains of Clostridium and the strain acting as an opportunistic pathogen. It grows in the intestine when the normal flora has been altered by treatment with antibiotics.^{12,9} Toxinogenic strains of Clostridium and the strain acting as an opportunistic pathogen. It grows in the intestine strain acting a strain acting as an opportunistic pathogen. It grows in the intestine when the normal flora has been altered by treatment with antibiotics.^{12,9} Toxinogenic strains of Clostridium and the strain acting as a strain acting as an opportunistic pathogen. It grows in the intestine strain acting a strain acting as a strain acting as a strain acting as a strain acting a strain acting as a strai when the normal flora has been altered by treatment with antibiotics. ^{12,3} Toxinogenic strains of Clostidium difficile cause infections from mild-diarrhea to pseudomembranous colitis, potentially leading to death. Disease is caused by two toxins produced by toxinogenic strains of C. difficile: Toxin A (tissue-damaging enterotoxin) and Toxin B (cytotoxin). Some strains produce both toxins A and B, some others produce Toxin B only. The potential role of a third (binary) toxin in pathogenicity is still debated.⁴ The use of Glutamate Dehydrogenase (GDH) as an antigen marker of *C. difficile* proliferation has been shown to be very effective because all strains produce high amount of this enzyme.⁶ *Clostridium difficile* + Toxin A +Toxin B Combo Rapid Test Cassette allows the detection of GDH, Toxin A **TOXIN B** Specific to C. difficile in fecal specimen.

Clostridium difficile + Toxin A +Toxin B Combo Rapid Test Cassette allows the detection of GDH, Toxin A and Toxin B specific to C. difficile in fecal specimen.
PRINCIPLE
Clostridium difficile Rapid Test Cassette detects three distinct antigens in fecal specimens for *C. difficile*, *viz*, GDH, Toxin A and Toxin B on three different test strips in a single test cassette, thus simultaneously detecting three antigens specific of *Clostridium difficile*.
For *C. difficile*.specific GDH Testing
The membrane is precoated with anti-*C.diff* GDH antibody on the test line region. During testing, the specimen reacts with the particle coated with anti-*C.diff* GDH antibody. The mixture migrates upward on the membrane and generate a colored line.
For *C. difficile*-specific Toxin A Testing
The membrane is precoated with anti-*C.diff* Toxin A antibody on the test line region. During testing, the specimen reacts with the particle coated with anti-*C.diff* Toxin A antibody. The mixture migrates upward on the membrane is precoated with anti-*C.diff* Toxin A antibody. The mixture migrates upward on the membrane and generate a colored line.
For *C. difficile*-specificToxin A Testing
The membrane is precoated with anti-*C.diff* Toxin A antibody on the test line region. During testing, the specimen reacts with the particle coated with anti-*C.diff* Toxin A antibody on the membrane and generate a colored line. The presence of this colored line in the test line region indicates a positive result, while its absence indicates a negative result.
For *C. difficile*-specificToxin B Testing
The membrane is precoated with anti-*C.diff* Toxin B antibody. The mixture migrates upward on the membrane and generate a colored line. The presence of this colored line in the test line region indicates a positive result, while its absence indicates a negative result.
For *C. difficile*-specificToxin B Testing
The membrane is precoated with anti-*C.diff* Toxin B antibody. The mixture migrates upward on the membrane and generate a colored line. The pre

REAGENTS

The test cassette contains anti-Clostridium difficile GDH, anti-Clostridium difficile Toxin A and anti-Clostridium difficile Toxin B particles gold conjugate pair with anti-Clostridium difficile GDH, anti-Clostridium difficile Toxin A and anti-Clostridium difficile Toxin B coated on the membrane.

FRECAUTIONS
 For professional in vitro diagnostic use only. Do not use after expiration date

For professional in vitro diagnostic use only. Do not use after expiration date.
The test should remain in the sealed pouch until use.
Do not eat, drink or smoke in the area where the specimens or kits are handled.
Handle all specimens as if they contain infectious agents. Observe established precautions against microbiological hazards throughout all procedures and follow the standard procedures for proper disposal of specimens.
Wear protective clothing such as laboratory coats, disposable gloves and eye protection when energimens are assayed.

Wear protective detailing to specimens are assayed. The used test should be discarded according to local regulations.

STORAGE AND STABILITY

Store as packaged at room temperature or refrigerated (2-30°C). The test is stable through the expiration date printed on the sealed pouch. The test must remain in the sealed pouch until use. **DO NOT FREEZE**. ond the expiration date

SPECIMEN COLLECTION AND PREPARATION

The stool specimens must be tested as soon as possible after collection. If necessary, original feces specimen could be stored at 2-8°C for 3 days or -20°C for longer periods of time; extracted specimen in buffer could be stored at 2-8°C for 1 week or -20°C for longer periods of time. Make sure that the specimens are not treated with solutions containing formaldehyde or its derivatives.

MATERIAL

Materials provided t • Specimen collection tube with buffer Test cassettes
 Droppers · Package Insert

Materials required but not provided

Stool container PROCEDURE

Allow the test, specimen, stool collection buffer and/or control to equilibrate to room temperature (15-30°C) prior to testing. 1. To collect fecal speciments:

- To collect fecal specimens: Collect sufficient quantity of feces (1-2mL or 1-2g) in a clean, dry specimen collection container to obtain enough antigens (if present). Best results will be obtained if the assay is performed within 6 hours after collection. Specimen collected may be stored for 3 days at 2-8°C if not tested within 6 hours. For long term strage, specimens should be kept below -20°C. To process fecal specimens: For <u>Solid Specimens</u>: Unscrew the cap of the specimen collection tube, then randomly stab the specimen collection applicator into the fecal specimen at least 3 different sites to collect approximately 50 mg of feces (equivalent to 1/4 of a pea). Do not scoop the fecal specimen.

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- For <u>Liquid Specimens</u>: Hold the dropper vertically, aspirate fecal specimens, and then transfer **2 drops of the liquid specimen** (approximately 80 μL) into the specimen collection tube containing the extraction buffer. Tighten the cap onto the specimen collection tube, then **shake the specimen collection tube vigorously** to mix the specimen and the extraction buffer. Leave the collection tube for reaction for 2
- minutes.
 Bring the pouch to room temperature before opening it. Remove the test cassette from the foil pouch and use it as soon as possible. Best results will be obtained if the test is performed immediately after opening the foil pouch.
 Hold the specimen collection tube upright and unscrew the tip of the specimen collection tube. Invert the specimen collection tube and transfer 3 full drops of the extracted specimen (approximately 120 µL) to each specimen well of the test cassette, then start the timer. Avoid trapping air bubbles in the specimen well (S). See illustration below.
 Read the results at 10 minutes after dispensing the specimen. Do not read results after 20 minutes.
 Note: If the specimen does not migrate (presence of particles), centrifuge the diluted sample contained in the extraction buffer vial. Collect 120µL of supernatant, dispense into the specimen well (S). Start the timer and continue from step 5 onwards in the above instructions for use.

INTERPRETINC RESULTS The test results appear in three different test windows respectively for GDH, Toxin A or Toxin B. The interpretation criteria remain the same for positivity or negativity for specific antigens under tests as per indication of the respective Test window. The results are to be interpreted as follows: POSITIVE: Two distinct colored lines appear. One colored line should be in the control line region (C) and another apparent colored line should be in the test line region (T). *NOTE: The intensity of the color in the test line region (T) will vary depending on the concentration of Clostridium difficile antigens present in the specimen. Therefore, any shade of color in the test line region (T) should be considered positive. NEGATIVE: One colored line appears in the control line region (C). No line appears in the test line region (T).

region (T). INVALID: Control line (C) fails to appear. Insufficient specimen volume or incorrect procedural techniques are the most likely reasons for control line failure. Review the procedure and repeat the test with a new test cassetle. If the problem persists, discontinue using the test kit immediately and contact

QUALITY CONTROL

An internal procedural control is included in the test. A colored line appearing in the control line region (C) is an internal positive procedural control. It confirms sufficient specimen volume, adequate membrane wicking and correct procedural technique. Control standards are not supplied with this kit; however, it is recommended that positive and negative controls be tested as a good laboratory practice to confirm the test procedure and to verify proper test

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Imitration Instruction The Clostridium difficile GDH +Toxin A +Toxin B Combo Rapid Test Cassette (Feces) is for diagnostic use only.

2. The test is qualitative and cannot predict the quantity of antigens present in the sample. Clinical presentation and other test results must be taken into consideration to establish diagnosis.

In a healthy individual's fecal specimens, *Clostridium difficile* test should give negative test result for any of the antigens tested. *The Clostridium difficile* GDH+Toxin A+Toxin B Combo Rapid Test Cassette (Feces) has been compared with another leading commercial rapid test. The correlation between two system is 98.5% for C.*diff* GDH and 98.5% for C.*diff* Toxin A+Toxin B.

Detection Limit
Detection limit values of *Clostridium difficile* GDH+Toxin A+Toxin B Combo Rapid Test Cassette was
Ing/ml for GDH, 2ng/ml for Toxin A and 1ng/ml for Toxin B.
Sensitivity - Specificity

Clostridium difficile GDH Results

Method	Other Ra	Total Results				
Clostridium difficile GDH	Results	Positive	Negative	Iolai Results		
+Toxin A +Toxin B Combo	Positive	78	2	80		
Rapid Test Cassette (Feces)	Negative	1	119	120		
Total Results	79	121	200			
Relative Sensitivity: 98.7% (95%CI:*93.1%-100%)						

Relative Specificity: 98.3% (95%CI: *94.2%-99.8%)

Relative Accuracy: 98.5% (95%CI:*95.7%-99.7%)

Method	Other Ra	Total Results			
Clostridium difficile GDH	Results	Positive Negative		Total Results	
+Toxin A +Toxin B Combo	Positive	56	2	58	
Rapid Test Cassette (Feces)	Negative	1	141	142	
Total Results	57	143	200		

*Confidence Intervals

 Initial Results
 57
 14.3
 200

 Relative Sensitivity: 98.2% (95%CI:*90.6%-99.9%)
 Relative Specificity: 98.6% (95%CI:*95.7%-99.7%)
 *Confidence Intervals

 Relative Accuracy: 98.5% (95%CI:*95.7%-99.7%)
 Repeatability and reproducibility
 *Confidence Intervals

 To check intra-batch accuracy (repeatability), the same positive samples and a buffer solution were processed 15 times on kits of the same production batch in the same experimental conditions. All observed results were confirmed as expected to check inter-batch accuracy (reproducibility), some samples (positive and buffer) were processed on kits from three different production batches. All results were confirmed as expected.

 Cross Reactivity

Cross Reactivity												
was	performed	to (determine	the	cross	reactivity	of	Clostridium	difficile	GDH	+Toxin A	١.
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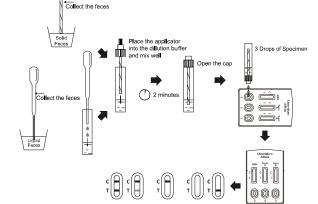
	CIUSS Reactiv	ily
An evaluation was performe	d to determine the cross read	ctivity of Clostridium difficile GDH +Toxin A
+Toxin B Combo Rapid Tes	t Cassette (Feces). No cross	reactivity against gastrointestinal pathogens
occasionally present as follow	ving:	
Campylobacter coli	Salmonella enteritidis	Shigella dysenteriae
Campylobacter jejuni	Salmonella paratyphi	Shigella flexneri
E.coli 0157:H7	Salmonella typhi	Shigella sonnei
H.pylori	Salmonella typhimurium	Staphylococcus aureus
	or: " r ² h.	· · · · · · · · · · · · · · · · · · ·

- Balmonella typhimurium Staphylococcus aureus Stigella boydii
 Salmonella typhimurium Staphylococcus aureus Yersinia enterocolitica
 BIBLOGRAPHICREFERENCES
 Ramadass Balamurugan, V. Balaji and Balakrishnan S. Ramakrishna: Estimation of faecal carriage of Clostridium difficile in patients with ulcerative colitis using real timepolymerase chain reaction, Indian Journal of Medical Research, p.472-477, May 2008
 E. J. Kuijper, B. Coignard and P. Tüll: Emergence of Clostridium difficile-associateddisease in North America and Europe, Review Clinical Mocrobiology and Infections, 12 suppl6, p. 2-18, Oct. 2006
 Leyerly D.M., H.C. Krivan and D.T.Wilkins: Clostridium difficile: its disease and toxins.Clinical Microbiology Reviews, p. 1-18, Jan. 1988
 Ramsey L. et al: Fulminant Clostridium difficile: an underappreciated and increasing causeof death and complications, Annals of Surgery 235 (3) p. 363-372: Mar. 2002
 Wren MW., Kinson R., Sivapalan M., Shemko M., Shetty NR:: Detection of Clostridium difficile infection: a suggested laboratory diagnostic algorithm, British Journal of BiomedicalSciences, 66(4) p. 175-179, 2009.
 Wylis DH. And JA Kraft: Confirmation that the latex-reactive proving of Clostridium difficite infection: a suggested laboratory diagnostic algorithm, British Journal of BiomedicalSciences, 66(4) p. 175-179, 2009.

- Willis DH. And JA Kraft: Confirmation that the latex-reactive protein of Clostridium difficile isa Glutamate Dehydrogenase. Journal of clinical microbiology, 30, p. 1363-1364, May 1992 Index of Symbols 6. Willis DH.

		Index of	Symbols					
Λ	Attention, see instructions for use	Σ	Tests per kit		EC REP	Authorized Representative		
IVD	For in vitro diagnostic use only	\square	Use by		2	Do not reuse		
2°C - 30°C	Store between 2-30°C	LOT	Lot Number		REF	Catalog #		
\otimes	Do not use if package is damaged							
Hangzhou AllTest Biotech Co., Ltd. MedNet Groups & Technological Development Area Hongzhou - 31018, P. R. China www.alltests.com.co								





Negative

Positive