

MDMA Rapid Test Cassette
(Whole Blood/Serum/Plasma)

Package Insert

REF DMD-402 English

A rapid test for the qualitative detection of MDMA in human whole blood or serum or plasma. For medical and other professional *in vitro* diagnostic use only.

[INTENDED USE]

The MDMA Rapid Test Cassette (Whole Blood/Serum/Plasma) is a lateral flow chromatographic immunoassay for the detection of Methyleneedioxymethamphetamine in whole blood or serum or plasma at a cut-off concentration of 50ng/mL. This test will detect other related compounds, please refer to the analytical Specificity table in this package insert. This assay provides only a qualitative, preliminary test result. A more specific alternate chemical method must be used in order to obtain a confirmed analytical result. Gas chromatography/mass spectrometry (GC/MS) is the preferred confirmatory method. Clinical consideration and professional judgment should be applied to any drug of abuse test result, particularly when preliminary positive results are used.

[SUMMARY]

Methyleneedioxymethamphetamine (ecstasy) is a designer drug first synthesized in 1914 by a German drug company for the treatment of obesity.¹ Those who take the drug frequently report adverse effects, such as increased muscle tension and sweating. MDMA is not clearly a stimulant, although it has, in common with amphetamine drugs, a capacity to increase blood pressure and heart rate. MDMA does produce some perceptual changes in the form of increased sensitivity to light, difficulty in focusing, and blurred vision in some users. Its mechanism of action is thought to be via release of the neurotransmitter serotonin. MDMA may also release dopamine, although the general opinion is that this is a secondary effect of the drug (Nichols and Oberfelder, 1990). The most pervasive effect of MDMA, occurring in virtually all people who took a reasonable dose of the drug, was to produce a clenching of the jaws.

[PRINCIPLE]

The MDMA Rapid Test Cassette (Whole Blood/Serum/Plasma) is an immunoassay based on the principle of competitive binding. Drugs that may be present in the whole blood/serum/plasma specimen compete against the drug conjugate for binding sites on the antibody.

During testing, a whole blood/serum/plasma specimen migrates upward by capillary action. MDMA, if present in the whole blood/whole blood/serum/plasma specimen below the cut-off level, will not saturate the binding sites of the antibody in the test. The antibody coated particles will then be captured by immobilized MDMA-protein conjugate and a visible colored line will show up in the test line region. The colored line will not form in the test line region if the MDMA level exceeds the cut-off level because it will saturate all the binding sites of anti-MDMA antibodies.

A drug-positive whole blood/serum/plasma specimen will not generate a colored line in the test line region because of drug competition, while a drug-negative whole blood/serum/plasma specimen or a specimen containing a drug concentration less than the cut-off will generate a line in the test region. To serve as a procedural control, a colored line will always appear at the control line region indicating that proper volume of specimen has been added and membrane wicking has occurred.

[REAGENTS]

The test contains mouse monoclonal anti-MDMA antibody coupled particles and MDMA-protein conjugate. A goat antibody is employed in the control line system.

[PRECAUTIONS]

- For professional *in vitro* diagnostic use only. Do not use after the expiration date.
- Do not eat, drink or smoke in the area where the specimens or kits are handled.
- Do not use test if pouch is damaged.
- Handle all specimens as they contain infectious agents. Observe established precautions against microbiological hazards throughout testing and follow the standard procedures for proper disposal of specimens.
- Wear protective clothing such as laboratory coats, disposable gloves and eye protection when specimens are being tested.
- The used test should be discarded according to local regulations.
- Humidity and temperature can adversely affect results.

[STORAGE AND STABILITY]

Store as packaged in the sealed pouch 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.** Do not use beyond the expiration date.

[SPECIMEN COLLECTION AND PREPARATION]

- The MDMA Rapid Test Cassette can be performed using whole blood (from venipuncture or fingerstick)/serum/plasma.
- To collect **Fingerstick Whole Blood specimens:**

Wash the patient's hand with soap and warm water or clean with an alcohol swab. Allow to dry.

Compound	Concentration (ng/mL)
(±)-3,4-Methylenedioxymethamphetamine HCl	50
(±)-3,4-Methylenedioxymethamphetamine HCl	300
3-Methylenedioxymethyl-amphetamine	40

Precision

A study was conducted at three hospitals using three different lots of product to demonstrate the within run, between run and between operator precision. An identical panel of coded specimens, containing no MDMA and 50% MDMA above and below the 50ng/mL cut-off was provided to each site. The following results were tabulated:

MDMA Concentration (ng/mL)	n per Site	Site A			Site B			Site C		
		-	+	-	+	-	+	-	+	-
0	10	10	0	10	0	10	0	10	0	10
25	10	8	2	9	1	9	1	9	1	9
75	10	1	9	1	9	2	8	1	9	1

Cross-Reactivity

A study was conducted to determine the cross-reactivity of the test with compounds in either drug-free whole blood/serum/plasma or determine positive whole blood/serum/plasma. The following compounds show no cross-reactivity when tested with the MDMA Rapid Test Cassette (Whole Blood/Serum/Plasma) at a concentration of 100 ng/mL.

Non Cross-Reacting Compounds

4-Acetaminophenol	Dextromethorphan	Meprobamate	Procaine
Acetophenetidin	Didanosic	Methamphetamine	Promazine
N-Acetylprocainamide	Diazepam	Methadone	Promethazine
Acetylsalicylic acid	Diffenalur	Methoxyphenamine	D-J-Propenadol
Aminopyrine	Digoxin	Methylphenidate	D-Propoxyphene
Amithiptyline	Dicyclomine	Morphine	D-Pseudoephedrine
Amobarbital	Diphenhydramine	3-J-D-glucuronide	Quinidine
Amoxicillin	5,5'-Diphenylhydantoin	Morphine sulfate	Quinidine
Ampicillin	Doxylamine	Nalidixic acid	Quinine
I-Ascorbic acid	Ergotamine hydrochloride	Naloxone	Ranitidine
D-Amphetamine	Ergotamine hydrochloride	Naltrexone	Salicylic acid
D,1-Amphetamine sulfate	(-)- α -Ephedrine	Naproxen	Sebacobartal
I-Amphetamine	[1R,2S](-)-Ephedrine	Nicardipine	Serotonin
Apomorphine	I- β -Ephedrine	Nisoldipine	(S)-Hydroxytryptamine
Aspartame	Erythromycin	Nimesulide	Sulfamethazine
Atropine	β -Estradiol	Norecolestin	Sulindac
Benzilic acid	Estrone-3-sulfate	Norethindrone	Sustiva
Benzolic acid	Ethyl-p-aminobenzoate	O-D-Nitropropophenone	Temazepam
Benzoylagonine	Fenoprofen	Noscapine	Terazocine
Benzphetamine	Furosemide	D,L-Oxotropamine	Tetrahydrocortisone
Bilirubin	Genit's acid	Oxalic acid	3-Acetate
(-)-Brompheniramine	Hemoglobin	Oxazepam	Tetrahydrocortisone
Bisoprolol	Hydralazine	Octoxic acid	Tetrahydrocortisone (2-D-glucuronide)
Caffeine	Hydrochlorothiazide	Oxycodeone	Tetrahydrozoline
Cannabidiol	Hydrocodone	Oxymetazoline	Thebaine
Cannabinol	Hydrocortisone	Papaverine	Theophylline
Chikoolhydrate	O-Hydroxythiophenic acid	Penicillin-G	Thiamine
Chikoolphenicol	p-Hydroxyamphetamine	Penicillizine	Trans-2-
Chloralazeptide	p-Hydroxy-	phenylchloride	phenylcyclopropylamine
Chlorothiazide	methamphetamine	Penobarbital	Thioridazine
(-)-Chlorpheniramine	3-Hydroxytryptamine	Perphenazine	Tolbutamide
Chlorpromazine	Imipramine	Phenacylidine	Trazodone
Chloquine	Iproniazid	Phenelzine	D,L-Tyrosine
Cholesterol	(-)-Isoproterenol	Phenotriptazin	Triamterene
Clomipramine	Isoxuprine	Phentermine	Trifluoperazine
Clonidine	Ketamine	Trans-2-phenyl	Trimethoprim
Cocaine	Ketoprofen	cyclobutyamine	Trimipramine
Interfering Substances			

The MDMA Rapid Test Cassette (Whole Blood/Serum/Plasma) has been tested for possible interference from visibly hemolyzed and lipemic specimens. In addition, no interference was observed in specimens containing up to 100 mg/dL hemoglobin; up to 100 mg/dL bilirubin and up to 200 mg/dL human serum albumin.

[BIBLIOGRAPHY]

- Tietz NW. *Textbook of Clinical Chemistry*. W.B. Saunders Company. 1986; 1735
- Baselt RC. *Disposition of Toxic Drugs and Chemicals in Man*. 2nd Ed. Biomedical Publ., Davis, CA. 1982; 488

- Massage the hand without touching the puncture site by rubbing down the hand towards the fingertip of the middle or ring finger.
- Puncture the skin with a sterile lancet. Wipe away the first sign of blood.
- Gently rub the hand from wrist to palm to form a rounded drop of blood over the puncture site.
- Add the Fingerstick Whole Blood specimen to the test by using a **capillary tube**.
 - Touch the end of the capillary tube to the blood until filled to approximately 40 μ L. Avoid air bubbles.
 - Place the bulb onto the top end of the capillary tube, then squeeze the bulb to dispense the whole blood to the specimen well of the test cassette.
- Testing should be performed immediately after specimen collection. Do not leave the specimens at room temperature for prolonged periods. Serum and plasma specimens may be stored at 2-8°C for up to 3 days, for long-term storage, specimens should be kept below -20°C. Whole blood collected by venipuncture should be stored at 2-8°C if this test is to be run within 2 days of collection. Do not freeze whole blood specimens. Whole blood collected by fingerstick should be tested immediately.
- Bring specimens to room temperature prior to testing. Frozen specimens must be completely thawed and mixed well prior to testing. Specimens should not be frozen and thawed repeatedly.
- If specimens are to be shipped, they should be packed in compliance with local regulations covering the transportation of etiologic agents.

[MATERIALS]

- Materials Provided
 - Test cassettes
 - Droppers
 - Buffer
 - Package insert

- Materials Required But Not Provided
 - Specimen collection containers
 - Lancets (for fingerstick whole blood only)
 - Heparinized capillary tubes and dispensing bulb (for fingerstick whole blood only)

[DIRECTIONS FOR USE]

Allow the test, specimen, buffer and/or controls to reach room temperature (15-30°C) prior to testing.

1. Bring the pouch to room temperature before opening it. Remove the cassette from the sealed pouch and use it within one hour.

2. Place the cassette on a clean and level surface.

For serum or plasma specimen:

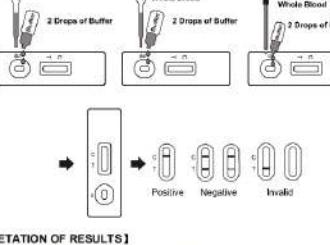
- Hold the dropper vertically and transfer 1 full drop of serum or plasma (approximately 40 μ L), then add 2 drops of buffer (approximately 80 μ L) to the specimen well(S) of the cassette, and then start the timer. Avoid trapping air bubbles in the specimen well. See illustration below.

For Venipuncture Whole blood specimen:

- Hold the dropper vertically and transfer 1 drop of whole blood (approximately 40 μ L) to the specimen well(S), then add 2 drops of buffer (approximately 80 μ L), and start the timer. See illustration below.

- To use a capillary tube: Fill the capillary tube and transfer approximately 40 μ L of fingerstick whole blood specimen to the specimen well(S) of test cassette, then add 2 drops of buffer (approximately 80 μ L) and start the timer. See illustration below.

3. Wait for the colored line(s) to appear. Read the result at 5 minutes. Do not interpret the result after 10 minutes.



[INTERPRETATION OF RESULTS]

(Please refer to the illustration above)

NEGATIVE: Two colored lines appear. One colored line should be in the control line region (C) and another colored line should be in the test line region (T). This negative result indicates that the MDMA concentration is below the detectable cut-off level.

***NOTE:** The shade of color in the test line region (T) may vary, but it should be considered negative whenever there is even a faint colored line.

POSITIVE: One colored line appears in the control line region (C). No line appears in the test line region (T). This positive result indicates that the MDMA concentration exceeds the detectable cut-off level.

INVALID: Control line 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. If the problem persists, discontinue using the test kit immediately and contact your local distributor.

[QUALITY CONTROL]

A procedural control is included in the test. A colored line appearing in the control region (C) is the internal procedural control. It confirms sufficient specimen volume 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 performance.

[LIMITATIONS]

The MDMA Rapid Test Cassette (Whole Blood/Serum/Plasma) provides only a qualitative, preliminary result. A secondary analytical method must be used to obtain a confirmed result. Gas chromatography/mass spectrometry (GC/MS) is the preferred confirmatory method.²

2. It is possible that technical or procedural errors, as well as other interfering substances in the whole blood or serum or plasma specimen may cause erroneous results.

3. A positive result indicates presence of the drug or its metabolites but does not indicate level of intoxication, administration route or concentration in whole blood or serum or plasma.

4. A negative result may not necessarily indicate drug-free whole blood/serum/plasma.

Negative results can be obtained when drug is present but below the cut-off level of the test.

5. Test does not distinguish between drugs of abuse and certain medications.

[PERFORMANCE CHARACTERISTICS]

Accuracy

A side-by-side comparison was conducted using the MDMA Rapid Test Cassette and GC/MS at the cut-off of 50ng/mL. Testing was performed on 90 clinical specimens previously collected from subjects present for Drug Screen Testing. The following results were tabulated:

Clinic Result of Whole Blood

Method	GC/MS	Total Results
MDMA Rapid Test Cassette	Positive 20 Negative 2	22
Total Results	22 68	90
% Agreement	90.9% 97.1%	95.6%

Clinic Result of Serum or Plasma

Method	GC/MS	Total Results
MDMA Rapid Test Cassette	Positive 20 Negative 2	22
Total Results	22 68	90
% Agreement	90.9% 97.1%	95.6%

Analytical Sensitivity

A drug-free whole blood/serum/plasma pool was spiked with MDMA at the following concentrations of ±50% cutoff and 3x cutoff. The data are summarized below:

For whole blood:

MDMA Concentration (ng/mL)	Percent of Cut-off	n	Visual Result
0	0	30	30 0
25	-50%	30	30 0
50	Cut-off	30	15 15
75	+50%	30	0 30
150	3X	30	0 30

For serum or plasma:

MDMA Concentration (ng/mL)	Percent of Cut-off	n	Visual Result
0	0	30	30 0
25	-50%	30	30 0
50	Cut-off	30	15 15
75	+50%	30	0 30
150	3X	30	0 30

Analytical Specificity

The following table lists compounds that are positively detected in whole blood/serum/plasma by the MDMA Rapid Test Cassette (Whole Blood/Serum/Plasma) at 5 minutes.



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Number: 145318302
Revision date: 2023-12-20