

Lyme IgG/IgM Rapid Test Cassette (Whole Blood/Serum/Plasma)

Package Insert

REF ILY-402 English

A rapid test for the qualitative detection of IqG and IqM antibodies to Borrelia in human whole blood, serum or plasma specimens.

For professional in vitro diagnostic use only.

[INTENDED USE]

The Lyme IgG/IgM Rapid Test Cassette is a lateral flow chromatographic immunoassay for the qualitative detection of IqG and IqM antibodies to Borrelia in human whole blood, serum or plasma specimen

(SUMMARY)

Lyme disease, also known as Lyme borreliosis, is an infectious disease caused by bacteria of the Borrelia sp. which is spread by ticks.2 The most common sign of infection is an expanding area of redness on the skin, known as erythema migrans, that begins at the site of a tick bite about a week after it has occurred.1 The rash is typically neither itchy nor painful. Approximately 25-50% of infected people do not develop a rash. Other early symptoms may include fever, headache and feeling tired. If untreated, symptoms may include loss of the ability to move one or both sides of the face, joint pains, severe headaches with neck stiffness, or heart palpitations, among others. 1 Months to years later, repeated episodes of joint pain and swelling may occur. 1 Occasionally, people develop shooting pains or tingling in their arms and legs. Despite appropriate treatment, about 10 to 20% of people develop joint pains, memory problems, and feel tired for at least six months.19

Lyme disease is transmitted to humans by the bite of infected ticks of the genus Ixodes.5 Usually, the tick must be attached for 36 to 48 hours before the bacteria can spread. In North America, Borrelia burgdorferi and Borrelia mayonii are the causes. 27 In Europe and Asia, the bacteria Borrelia afzelii and Borrelia garinii are also causes of the disease. 2 The disease does not appear to be transmissible between people, by other animals, or through food. Diagnosis is based upon a combination of symptoms, history of tick exposure, and possibly testing for specific antibodies in the blood. 3,8 Blood tests are often negative in the early stages of the disease.2 Testing of individual ticks is not typically useful.9

[PRINCIPLE]

The Lyme IgG/IgM Rapid Test Cassette (Whole Blood/Serum/Plasma) is a qualitative membranebased immunoassay for the detection of IgG and IgM antibodies to Borrelia in whole blood, serum or plasma specimens. This test consists of two components, an IgG component and an IgM component. In the IgG component, anti-human IgG is coated in IgG test line region. During testing, the specimen reacts with Borrelia antigen-coated particles in the test cassette. The mixture then migrates upward on the membrane chromatographically by capillary action and reacts with the anti-human IgG in IgG test line region, if the specimen contains IgG antibodies to Borrelia. A colored line will appear in IgG test line region as a result of this. Similarly, anti-human IgM is coated in IgM test line region and if specimen contains IgM antibodies to Borrelia, the conjugate-specimen complex reacts with antihuman IgM. A colored line will appear in IgM test line region as a result.

Therefore, if the specimen contains anti-Borrelia IqG antibodies, a colored line will appear in IqG test line region. If the specimen contains anti-Borrelia IqM antibodies, a colored line will appear in IqM test line region. If the specimen does not contain anti-Borrelia antibodies, no colored line will appear in either of the test line regions, indicating a negative result. To serve as a procedural control, a colored line will always appear in the control line region, indicating that the proper volume of specimen has been added and membrane wicking has occurred

[REAGENTS]

The test contains anti-human IgM and anti-human IgG as the capture reagent, Borellia antigen as the detection reagent. A goat anti-human IgG is employed in the control line system.

[PRECAUTIONS]

- 1. For professional in vitro diagnostic use only. Do not use after expiration date.
- 2. Do not eat, drink or smoke in the area where the specimens or kits are handled
- 3. Do not use test if pouch is damaged.
- 4. 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.
- 5. Wear protective clothing such as laboratory coats, disposable gloves and eye protection when specimens are assaved.
- The used test should be discarded according to local regulations.

7. 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 Lyme IgG/IgM Rapid Test Cassette (Whole Blood/Serum/Plasma) can be performed using whole blood (from venipuncture or fingerstick), serum or plasma.

To collect <u>Fingerstick Whole Blood Specimens</u>:

- . Wash the patient's hand with soap and warm water or clean with an alcohol swab. Allow to dry. . 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 finger to form a rounded drop of blood over the
- . 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 10μL. Avoid air
- · Place the bulb onto the top end of the capillary tube, then squeeze the bulb to dispense the whole blood to the specimen area of the test cassette Separate serum or plasma from blood as soon as possible to avoid hemolysis. Use only clear non-
- hemolyzed specimens. Testing should be performed immediately after the specimens have been collected. 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 the 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 etiological agents
- EDTA K2, Heparin sodium, Citrate sodium and Potassium Oxalate can be used as the anticoagulant for collecting the specimen.

[MATERIALS]

Materials provided

- Test Cassettes Droppers Package Insert Buffer Materials required but not provided
- Specimen Collection Containers Centrifuge (for plasma only)
- · Lancets (for fingerstick whole blood only) Pipette and Disposable Tips (optional)

[DIRECTIONS FOR USE]

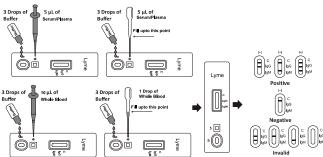
Allow the test, specimen, buffer and/or controls to reach room temperature (15-30°C) prior to

- 1. Bring the pouch to room temperature before opening it. Remove the test cassette from the sealed pouch and use it as soon as possible.
- 2. Place the cassette on a clean and level surface

For Serum/Plasma specimen:

- Use a pipette: To transfer 5µL of Serum/ Plasma to the specimen well(S), then add 3drops of buffer (approximately 120µL) to the buffer well (B).
- Use a dropper: Hold the dropper vertically, draw the specimen up to the upper end of the nozzle as shown in illustration below (approximately 5µL). Transfer the specimen to the specimen well(S), then add 3 drops of buffer (approximately 120µL) to the buffer well (B), and start the
- For Whole Blood specimen:
- Use a pipette: To transfer 10µL of whole blood to the specimen well(S), then add 3drops of buffer (approximately 120µL) to the buffer well (B).
- Use a dropper: Hold the dropper vertically, draw the specimen about 1 cm above the upper end of the nozzle and transfer 1 full drop (approx. 10µL) of specimen to the sample well(S). Then add 3 drops of buffer (approximately 120µL) to the buffer well (B), and start the timer.
- 3. Wait for the colored line(s) to appear. Read results at 10 minutes. Do not interpret the result after 20 minutes.

Note: It is suggested not to use the buffer, beyond 3 months after opening the vial.



[INTERPRETATION OF RESULTS]

IgG POSITIVE:* Two colored lines appear. One colored line should always appear in the control line region (C) and another line should be in the IgG line region.

IgM POSITIVE:* Two colored lines appear. One colored line should always appear in the control line region (C) and another line should be in the laM line region.

IgG and IgM POSITIVE:* Three colored lines appear. One colored line should always appear in the control line region (C) and two test lines should be in the IgG line region and IgM line region.

*NOTE: The intensity of the color in the test line regions may vary depending on the concentration of anti-Lyme antibodies present in the specimen. Therefore, any shade of color in the test line region should be considered positive.

NEGATIVE: One colored line appears in the control line region (C). No line appears in the IgG

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

Internal procedural controls are included in the test. A colored line appearing in the control region (C) is an internal procedural control. It confirms sufficient specimen volume and correct procedural

Control standards are not supplied with this kit; however, it is recommended that positive and negative controls be tested as good laboratory testing practice to confirm the test procedure and to verify proper test performance.

[LIMITATIONS]

- 1. The Lyme IgG/IgM Rapid Test Cassette (Whole Blood/Serum/Plasma) is for in vitro diagnostic use only. This test should be used for detection of IgG and IgM antibodies to Borrelia in whole blood. serum or plasma specimens. Neither the quantitative value nor the rate of increase in the concentration of IqG or IqM antibodies to Borrelia can be determined by this qualitative test.
- 2. The Lyme IgG/IgM Rapid Test Cassette (Whole blood/Serum/Plasma) will only indicate the presence of IgG and IgM antibodies to Borrelia in the specimen and should not be used as the sole criteria for the diagnosis of Lyme infections
- 3. As with all diagnostic tests, all results must be considered with other clinical information available to the physician
- 4. If the test result is negative and clinical symptoms persist, additional follow-up testing using other clinical methods is suggested. A negative result at any time does not preclude the possibility of Borrelia infection
- The hematocrit level of the whole blood can affect the test results.
- 6. Hematocrit level needs to be between 25% and 65% for accurate results

[EXPECTED VALUES]

The Lyme IgG/IgM Rapid Test Cassette (Whole Blood/Serum/Plasma) has been compared with a leading commercial ELISA Lyme IgG tests and Lyme IgM tests. The correlation between these two systems is over 98%.

[PERFORMANCE CHARACTERISTICS]

Sensitivity and Specificity

The Lyme IgG/IgM Rapid Test Cassette (Whole Blood/Serum/Plasma) was compared with a leading commercial ELISA Lyme IgG tests and ELISA Lyme IgM tests; the results show that Lyme IgG/IgM Rapid Test Cassette (Whole Blood/Serum/Plasma) has a high sensitivity and specificity.

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	Method		ELISA		Total Results
	Lyme IgG/IgM Rapid Test for IgG	Results	Positive	Negative	Total Results
		Positive	21	1	22
		Negative	1	89	90
Total Results		Results	22	90	112
	Relative Sensitivity: 95.5% (95%CI*: 87.39		/ ₋ 100%\	•	*Confidence Inten

Relative Specificity: 98.9% (95%CI*: 97.1%-99.8%)

Accuracy: 98.2% (95%CI*: 93.7%-99.8%)

IN RESUITS									
Met	hod	ELISA		Total Results					
Lyme IgG/IgM	Results	Positive	Negative	Total Results					
Rapid Test for	Positive	17	1	18					
IgM	Negative	1	89	90					
Total F	Results	18	90	108					

Relative Sensitivity: 94.4% (95%CI*: 72.7%-99.9%)

Relative Specificity: 98.9% (95%CI*: 96.7%-100%)

Accuracy: 98.1% (95%CI*: 93.5%-99.8%)

Confidence Interval

Precision Intra-Assav

Within-run precision has been determined by using 3 replicates of five specimens: negative, IqG low positive, IgG high positive, IgM low positive, IgM high positive. The negative, low positive, and high positive values were correctly identified >99% of the time. Inter-Assav

Between-run precision has been determined by 3 independent assays on the same specimens: negative, IgG low positive, IgG high positive, IgM low positive, IgM high. Three different lots of the Lyme IgG/IgM Rapid Test cassette (Whole Blood/Serum/Plasma) have been tested over a 3-days period using negative, low positive, and high positive specimens. The specimens were correctly identified >99% of the time.

Cross-reactivity

The Lyme IgG/IgM Rapid Test Cassette (Whole Blood/Serum/Plasma) has been tested for anti-HAV IgM, HBsAg, anti-HCV IgG, anti-HIV IgG, anti-RF IgG, anti-Syphilis IgG, anti-H. Pylori IgG, anti-Rubella IgG, anti-Toxo IgG, anti-HSV 1 IgG, anti-HSV 2 IgG, anti-CMV IgG, anti-Rubella IgM, ant Toxo IgM, anti-HSV 1 IgM, anti-HSV 2 IgM and anti-CMV IgM positive specimens. The results showed no cross-reactivity.

Interfering Substances The following compounds have been tested using the LymelgG/lgM Rapid Test Cassette (Whole Blood/Serum/Plasma) and no interference was observed.

Acetaminophen: 20 mg/dL Acetylsalicylic Acid: 20 mg/dL Ascorbic Acid: 2g/dL Creatin: 200 mg/dL Bilirubin: 1q/dL

Caffeine: 20 mg/dL Gentisic Acid: 20 mg/dL Albumin: 2 g/dL Hemoglobin 1000mg/dL Oxalic Acid: 60mg/dL

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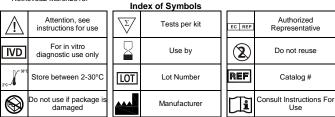
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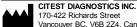
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EC REP

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145858700 Effective date: 2018-07-06