

# CURRENT HIV TESTING AND AVAILABLE IMMUNOASSAYS

## Background

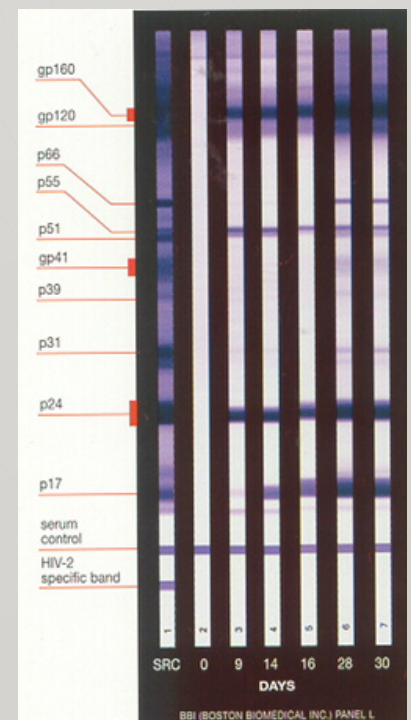
Around 38 million people were living with human immunodeficiency virus (HIV) in 2019; of these, 36.2 million were adults and 1.8 million were children below 14 years old. About 1.7 million of newly infected people were also diagnosed in the same year<sup>1</sup>.

The HIV has two major types: HIV type-1 (HIV-1) and HIV type-2 (HIV-2). HIV-1 is more virulent and responsible for most of the infection cases worldwide. HIV-1 and HIV-2 differ in some of their antigenic components and geographic distribution<sup>2</sup>. The details of the differences in the gene and products are summarized in table 1. Each of the antigenic components can typically be identified in the Western Blot (Fig. 1).

Differences in antigenic components between HIV-1 and HIV-2 (Table 1)

	HIV-1	HIV-2
<i>env</i>		
Env Precursor	gp160	gp140
External Glycoprotein	gp120	gp105/125
Transmembrane Protein	gp41	gp36/41
<i>pol</i>		
Reverse Transcriptase	p66	p68
Reverse Transcriptase	p51	p53
Endonuclease	p31	p31/34
<i>gag</i>		
Gag Precursor	p55	p57
Matrix	p17	p17
Capsid	p24	p26

Visualization of HIV antigenic components on MP Diagnostics HIV Blot 2.2 (Fig 1)



Adopted from:  
<https://www.hiv.uw.edu/go/key-populations/hiv-2/core-concept/all>

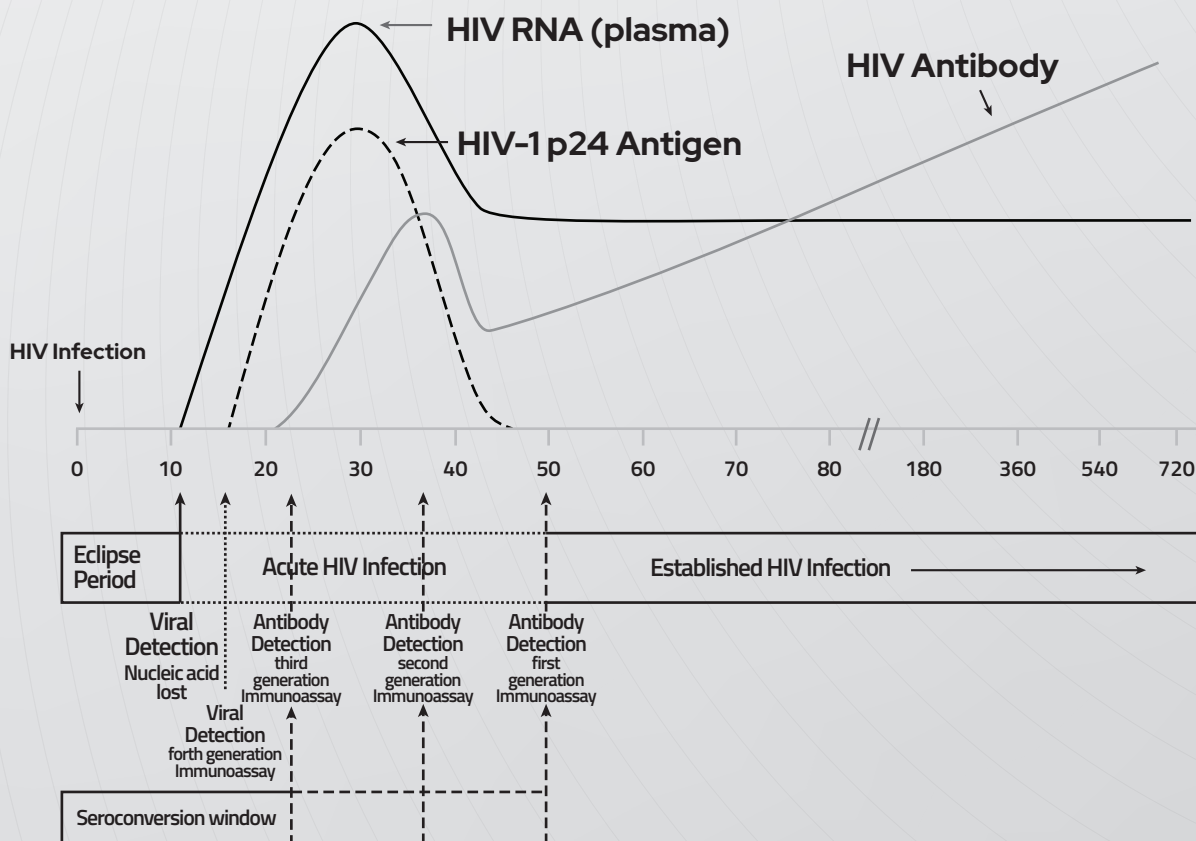
# Laboratory markers for HIV diagnosis

The use of the specimens from seroconversion panels has allowed the establishment of sequential appearance of different laboratory markers during HIV infection (Fig. 2). The first marker that appears in the plasma sample (approximately 10 days post-infection with HIV-1) is HIV-1 RNA. The subsequent detectable marker is p24 antigen (approximately week 2 to week 3 post-infection with HIV-1). Once the antibodies against p24 have developed and formed the immune complexes with p24 antigen, the test sensitivity for p24 antigen will decrease.

The first detectable antibodies are in the form of IgM (approximately week 3 to week 4 post-infection with HIV-1). The final detectable antibodies are in the form of IgG (approximately week 4 to week 5 post-infection with HIV-1). The IgG antibodies typically persist throughout the course of HIV infection.

The discovery of the above laboratory markers is facilitated by the various HIV immunoassays which have evolved over the years, from the 1st generation which uses HIV lysate and detects IgG antibodies until the 4th generation which uses synthetic peptide or recombinant protein (as the antigen) and detects IgM, IgG antibodies, as well as p24 antigen. The evolution of these various HIV immunoassays is partly driven by the update of the laboratory HIV testing algorithm by the health organizations, such as Centers for Disease Control and Prevention (CDC), World Health Organization (WHO). Some examples of the commercial test kits which can be used in various steps of the HIV testing algorithm is presented in Fig. 3 and Fig. 4.

## Sequence of appearance of laboratory markers for HIV-1 infection (Fig 2)

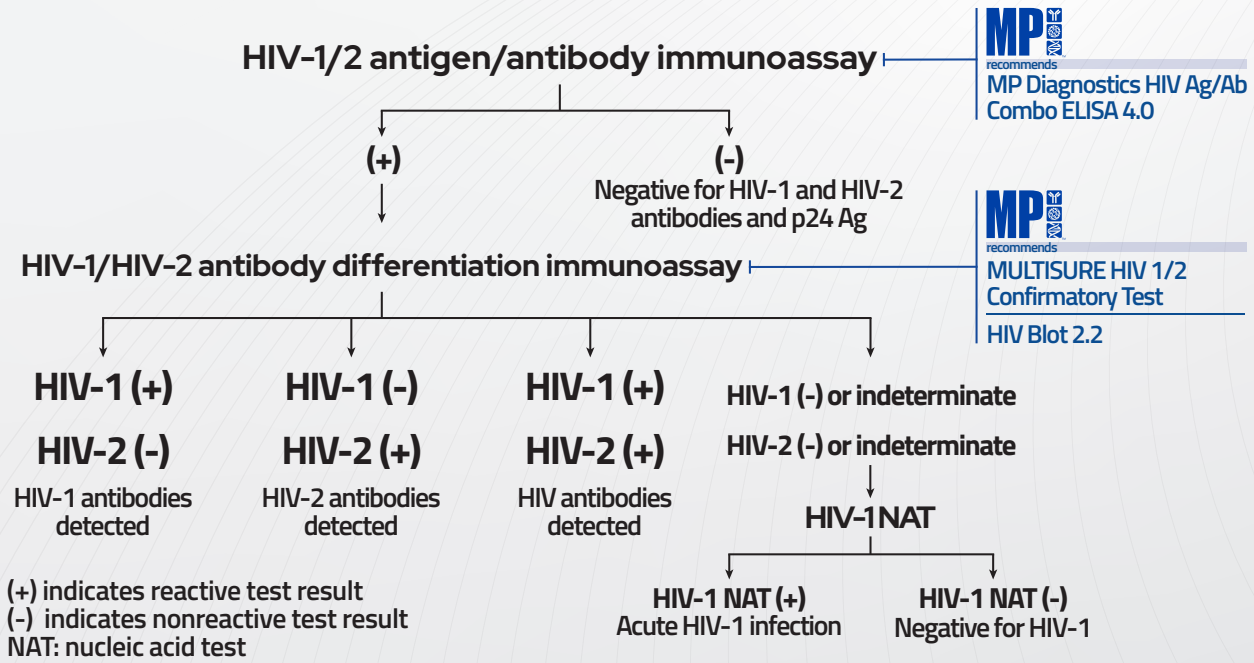


Source: Centers for Disease Control and Prevention and Association of Public Health Laboratories. Laboratory Testing for the Diagnosis of HIV Infection: Updated Recommendations.

Available at <http://dx.doi.org/10.15620/cdc.23447>.

Published June 27, 2014.

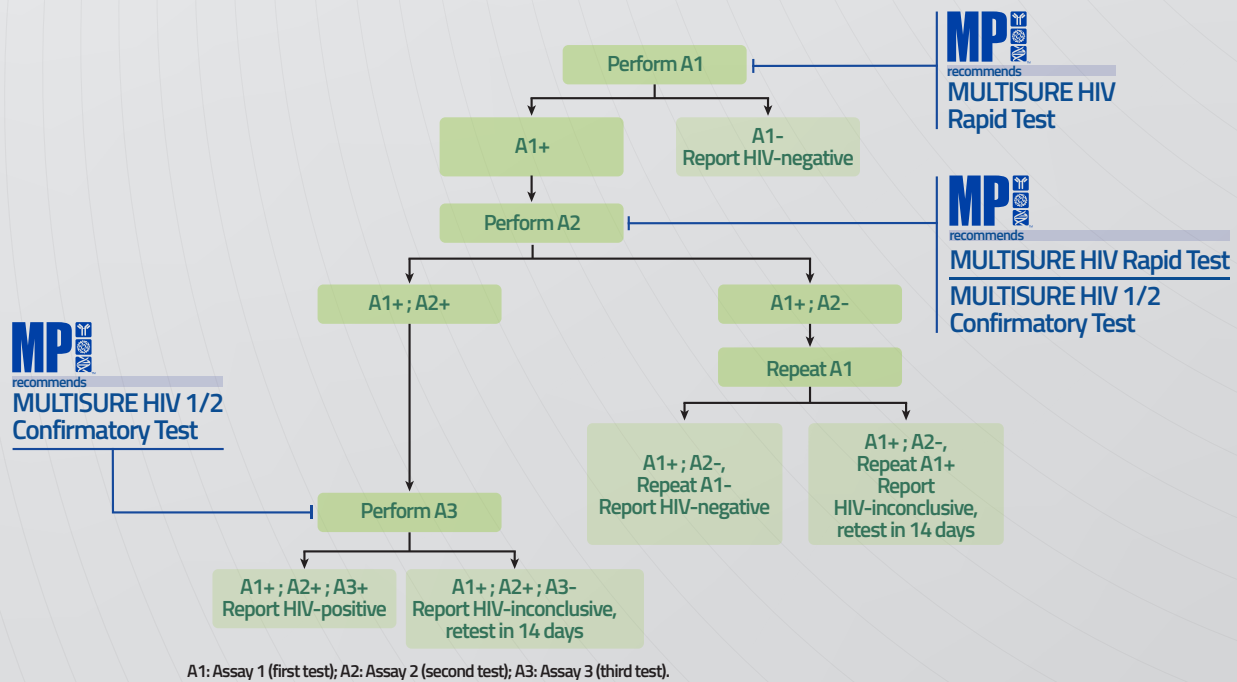
Proposed uses of MP Diagnostics products in various steps of the CDC's recommended laboratory testing algorithm (Fig 3)



Adopted from 2018 Quick reference guide: recommended laboratory HIV testing algorithm for serum or plasma specimens.

Available at: <https://stacks.cdc.gov/view/cdc/50872>.

Possible uses of MP Diagnostics RDT products (MULTISURE HIV Rapid Test and MULTISURE HIV 1/2 Confirmatory Test) in various steps of the WHO standard HIV testing strategy (Fig 4)



Adopted from Consolidated guidelines on HIV testing services, 2019. Geneva: World Health Organization; 2020.

# Available Immunoassays



## MP Diagnostics HIV Ag/Ab Combo ELISA 4.0

The MP Diagnostics HIV Ag/Ab Combo ELISA 4.0 is an enzyme-linked immunosorbent assay (ELISA) intended for qualitative detection of antigens and/or antibodies to Human Immunodeficiency Viruses (HIV) type 1 (group M, O) and/or type 2 in human serum or plasma specimens.

### **Performance Characteristics**

The analytical and clinical performance characteristics of MP Diagnostics HIV Ag/Ab Combo ELISA 4.0 were evaluated by two external evaluation centres: the Institute of Tropical Medicine (ITM) in Belgium and the German Red Cross – Baden-Württemberg-Hesseng GmbH (DRK).

**Diagnostic sensitivity:** 100% (500/500 positive samples) tested on 310 anti-HIV-1, 100 anti-HIV-2 and 40 anti-HIV-1 non B subtypes (A, C, D, F, G, H, J, K, O, CRF01\_AE and other circulating recombinant forms) serum/plasma samples and 50 anti-HIV-Ab / HIV-1 Ag positive samples.

**Diagnostic specificity:** 99.96% tested on 5004 negative plasma samples of blood donors – based on the results after repeat testing of initially reactive samples.

**Analytical specificity:** 200/200 hospitalized patients were negative on the MP Diagnostics HIV Ag/Ab ELISA 4.0. 95/101 samples containing potentially cross-reactive substances, including samples from pregnant women, were negative on the MP Diagnostics HIV Ag/Ab ELISA 4.0. Serum to plasma equivalence is demonstrated on 25 positive and 25 negative serum / EDTA plasma / heparin plasma / sodium citrate plasma couples.

*p24 antigen analytical sensitivity: 1.25U/ml*



## MP Diagnostics MULTISURE HIV Rapid Test

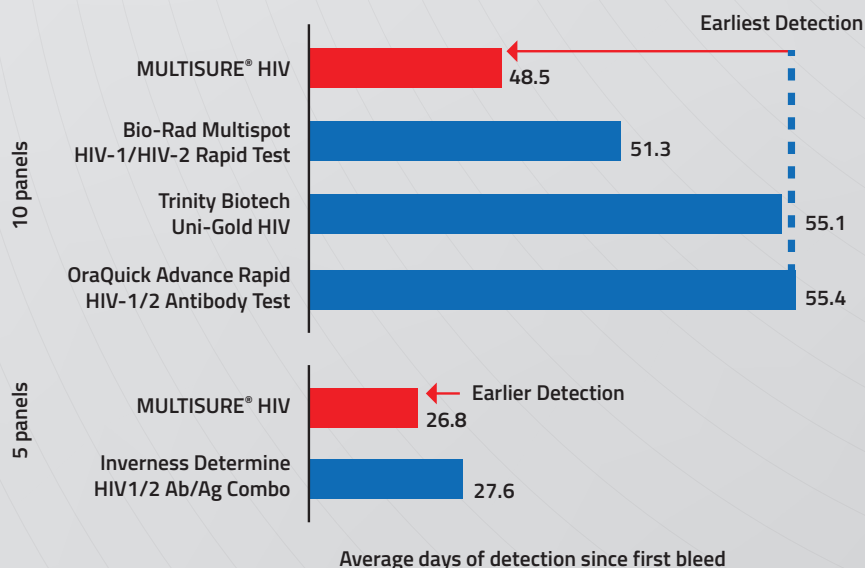
The MP Diagnostics MULTISURE HIV Rapid Test is a qualitative immunochromatographic assay for the rapid in vitro detection and differentiation of antibodies to HIV-1 and HIV-2 in human serum, plasma, finger pricked whole blood or whole blood with anti-coagulants.

### Performance Characteristics

Diagnostic Parameter	Performance of MP Diagnostics MULTISURE HIV Rapid Test	95% Confidence Interval
Sensitivity (n=801)	100.00%	99.54% to 100.00%
Specificity (n=2057)	99.12%	98.62% to 99.48%
Positive Predictive Value	97.80%	96.55% to 98.69%
Negative Predictive Value	100.00%	99.82% to 100.00%

### Total Diagnostic Performance

**MULTISURE<sup>®</sup> HIV** detects the earliest seroconversion panels when compared against commercially available rapid test kits<sup>†</sup>.



<sup>†</sup> Commercial kits data extracted from COA of seroconversion panels from ZeptoMetrix Corporation and SeraCare Life Sciences



## MP Diagnostics MULTISURE HIV 1/2 Confirmatory Test

The MP Diagnostics MULTISURE HIV 1/2 Confirmatory Test is a qualitative immunochromatographic assay for the rapid in vitro detection and differentiation of antibodies to Human Immunodeficiency Virus Type 1 and 2 (HIV-1 and HIV-2) in human serum or plasma. It is intended for professional use as a supplemental test on human serum or plasma samples found to be repeatedly reactive by screening procedures.

### Performance Characteristics

#### Total Diagnostic Performance

Diagnostic Parameter	Performance of MP Diagnostics MULTISURE HIV 1/2 Confirmatory Test	95% Confidence Interval
Diagnostic Sensitivity	100.00% (396/396)	99.1% to 100.0%
Diagnostic Specificity	98.3% (510/519) (9 Indeterminate for HIV Antibody)	96.7% to 99.2%
Positive Predictive Value	97.80%	95.8% to 98.8%
Negative Predictive Value	100.00%	N.A.

#### Differentiation of HIV-1 and HIV-2

Serotype	Total Sample Size	Accuracy of differentiation by MP Diagnostics MULTISURE HIV 1/2 Confirmatory Test
HIV-1	275	100.0% (275/275)
HIV-2	120	100.0% (120/120)

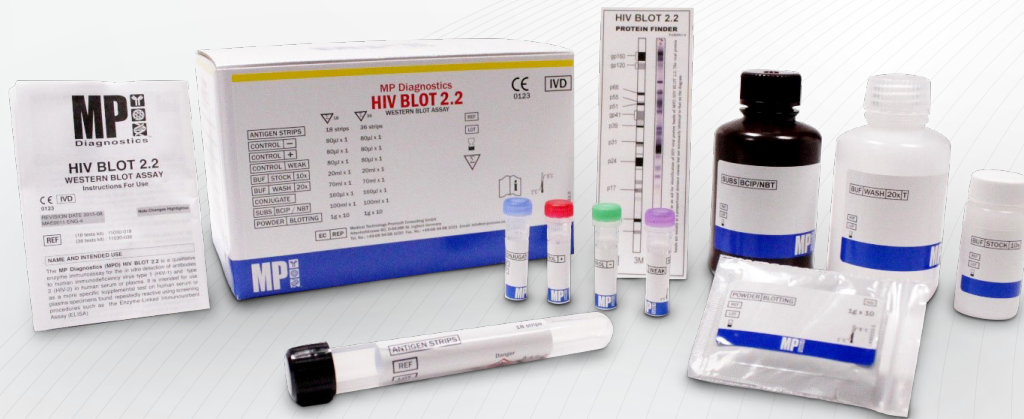
#### Detection of HIV-1 subtypes

Serotype <sup>^</sup>	Total Sample Size	Performance of MP Diagnostics MULTISURE HIV 1/2 Confirmatory Test
HIV-1 (Group M)*	80	100.0% (80/80)
HIV-1 (Group O)	5	100.0% (5/5)

<sup>^</sup> Source of panels:

\* Including Group M (Subtype A, B, C, D, E, F, G, H, J, K, C/E, E/F, CRF01\_AE, CRF02\_AG, CRF03\_AB, G/CRF02, H/A1, K/CRF09, CRF01/CRF15)

1. HIV worldwide Performance Panel WWRB301, Sera Care Life Sciences
2. HIV worldwide Performance Panel WWRB304, Sera Care Life Sciences
3. HIV worldwide Performance Panel WWRB305, Sera Care Life Sciences
4. WHO International Standard-NIBSC Code 02/210, NIBSC
5. HIV-1 Group O samples, Biomex GmbH



## MP Diagnostics HIV BLOT 2.2

The MP Diagnostics HIV BLOT 2.2 is a qualitative enzyme immunoassay for the in vitro detection of antibodies to human immunodeficiency virus type 1 (HIV-1) and type 2 (HIV-2) in human serum or plasma. It is intended for use as a more specific supplemental test on human serum or plasma specimens found repeatedly reactive by screening procedures.

### Performance Characteristics

Sensitivity study of HIV-1 viral antigen reactivity with HIV-1 seropositive samples.  
(Number of samples = 201)

Serological Profile	HIV Blot 2.2
GAG, POL and ENV	97.5%
p24, p31, gp41 and/or gp120/gp160	94.9%
ENV and GAG or POL	100.0%

Specificity study of HIV-1 viral antigen reactivity with normal donor samples and sera with other viral infections

Sample Type	Number Tested	Positive	HIV-1 Reactivity	
			Indeterminate*	Negative
Normal Donors	208	0	11	197
HTLV-1	5	0	0	5
CMV	5	0	1	4
EBV (IgM)	5	0	1	4
V. zoster (IgG)	5	0	1	4
Measles	6	0	2	4
Rubella	5	0	1	4
Mumps	4	0	1	3
Adenovirus	5	0	2	3
HSV	5	0	0	5
Dengue	5	0	1	4
<b>Total</b>	<b>258</b>	<b>0</b>	<b>21</b>	<b>237</b>

\*All showed as a p24 or p17 band only.

## Sensitivity study of HIV-2 peptide band with HIV-2 seropositive samples

HIV-2 Western Blot Serological Profile <sup>#</sup>	HIV-2 Peptide Reactivity	
	Positive	Negative
GAG, POL and 2 ENV	160	0
GAG, POL and 1 ENV	18	0

<sup>#</sup>Sera defined as positive by results of Pasteur New LAV Blot 2. Data provided by Dr. Oliviero E. Varnier and Dr. Flavia Lillo. Laboratory of Human Retroviruses. University of Genoa.v

## Specificity study of HIV-2 peptide band with HIV-1 seropositive sera, normal donor samples and sera with other viral infections

Sample Type	Number Tested	HIV-2 Peptide Reactivity	
		Positive	Negative
HIV-1 seropositive	197	16 <sup>#</sup>	181
Normal Donors	208	0	208
HTLV-1 seropositive	5	0	5
CMV	5	0	5
EBV (IgM)	5	0	5
V. zoster (IgG)	5	0	5
Measles	6	0	6
Rubella	5	0	5
Mumps	4	0	4
Adenovirus	5	0	5
HSV	5	0	5
Dengue	5	0	5
<b>Total</b>	<b>455</b>	<b>16</b>	<b>439</b>

<sup>#</sup>When tested on the MP Diagnostics HIV-2 Western Blot, 6 of these samples had reactivity with ENV and GAG or POL, and 9 of these samples had reactivity to only GAG and/or POL while 1 sample was negative.



# Conclusion

The various immunoassays for HIV diagnosis are usually intended for either screening or confirmation purpose. For screening, the test device needs to be able to detect the positive specimen as early as possible (especially during seroconversion).

While, for supplemental use, the test device needs to be able to confirm the result of the repeatedly reactive specimen. MP Biomedicals has a full suite of screening and supplemental/confirmatory test devices which can be used in any step of the HIV testing algorithm.

## Order Information

Catalog Number	Product Name	Pack Size
0723040096	HIV Ag/Ab Combo ELISA 4.0	96 tests
0723040480		480 tests
0743030020	MULTISURE HIV Rapid Test	20 tests
0793030020	MULTISURE HIV 1/2 Confirmatory Test	20 tests
0711030018	HIV Blot 2.2	18 tests
0711030036		36 tests

## References

1. FACT SHEET– WORLD AIDS DAY 2020 (<https://www.unaids.org/en/resources/fact-sheet>).
2. Clavel F, Guetard D, Brun-Vezinet F, et al. Isolation of a new human retrovirus from West African patients with AIDS. Science 1986;233:343–6.