

# Diagnosis of Extra-pulmonary TB

Dr Philippa Randall  
ELISA and Innovation Lead  
Antrum Biotech

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Healthcare Innovations

# BACKGROUND

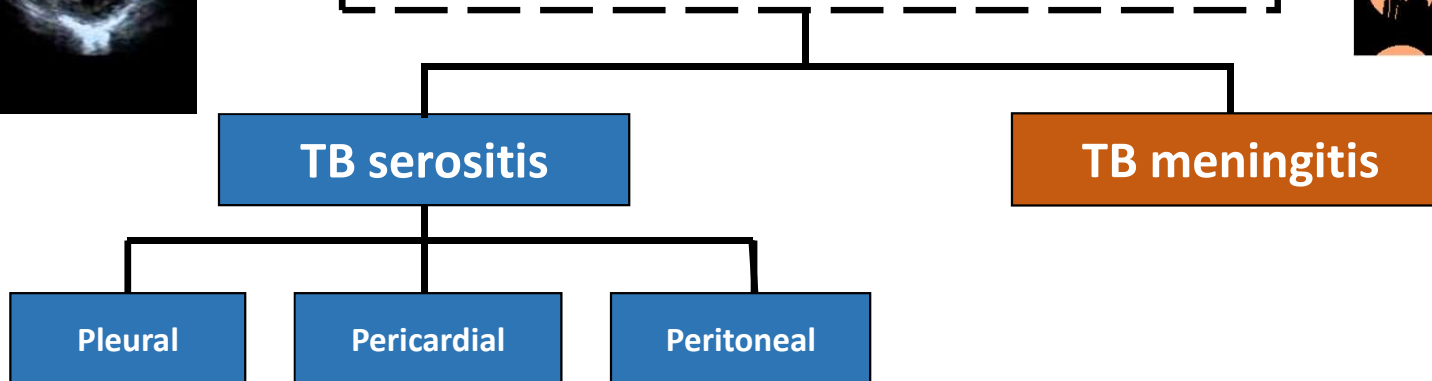
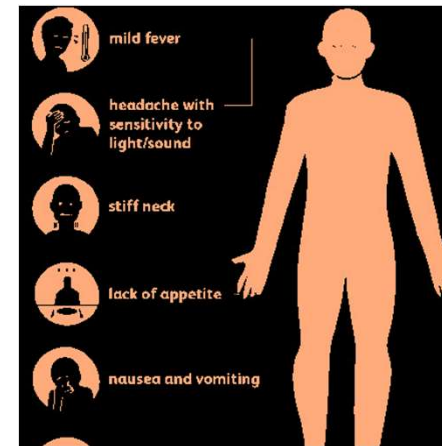


- **~10 million** new TB cases per annum (WHO, 2018)
- In South Africa TB is the **no.1 leading cause of death**
- 73% of adult TB cases are HIV co-infected (SA DoH)
- Sputum scarce (25%), smear negative (50%) and **extra-pulmonary disease (25%)** (Peter & Dheda, Lancet Resp. Dis., 2014)

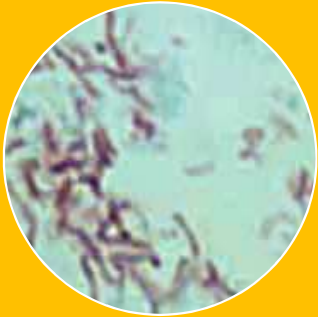
# WHAT IS EXTRA-PULMONARY TB



**~1,5 million**  
**TB cases extra-pulmonary**  
**(EPTB)**  
(occurs outside of the lung)



# CURRENT DIAGNOSTIC LANDSCAPE



Culture:  
50% sensitive  
and  
95% specific



Smear:  
5% sensitive and  
95% specific



ADA: 80 – 85%  
sensitive and  
60 – 85% specific  
Variable cut-offs

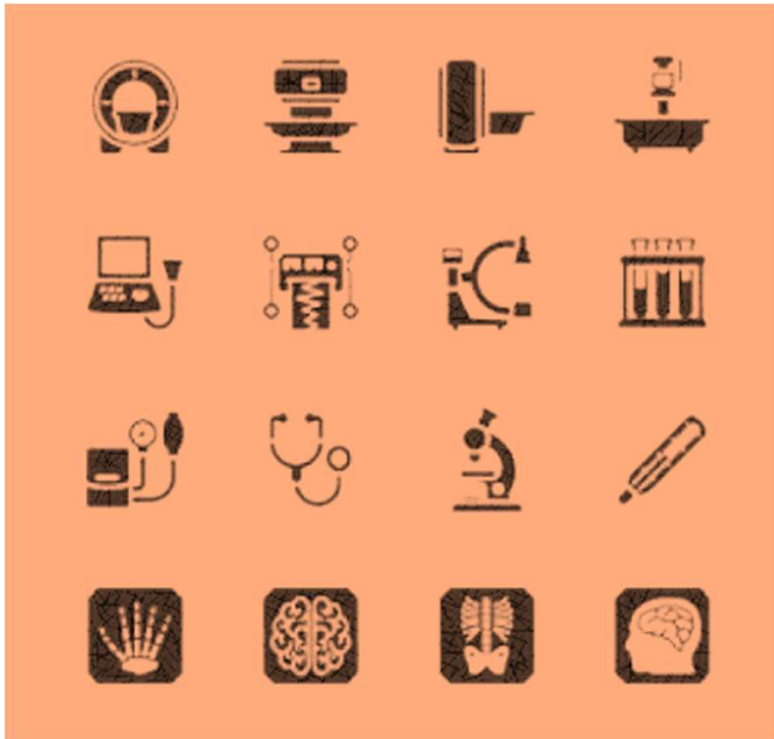


Xpert Ultra/  
MTB RIF:  
30 – 70%  
sensitive and  
95% specific

**Available diagnostics work poorly and**

**DO NOT solve the problem**

# AN URGENT NEED



- Both a sensitive and specific diagnostic
- Effective across all EPTB sub-types
- Not bacilli or nucleic acid dependent

**One such biomarker is  
unstimulated IFN $\gamma$**

# THE CASE FOR IFN $\gamma$

	Sensitivity	Specificity
Pleural TB	94.8	98%
Pericardial TB	95.7%	96%
TB peritonitis	97%	97%
TB meningitis	92%	100%

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Utility of quantitative T-cell responses *versus* unstimulated interferon- $\gamma$  for the diagnosis of pleural tuberculosis

K. Dheda<sup>a,\*</sup>, R.N. van Zyl-Smit<sup>a</sup>, L.A. Sechi<sup>b</sup>, M. Badri<sup>a</sup>, R. Meldau<sup>a</sup>, S. Meldau<sup>a</sup>, G. Symons<sup>a</sup>, P.L. Semple<sup>a</sup>, A. Maredza<sup>a</sup>, R. Dawson<sup>a</sup>, H. Wainwright<sup>c</sup>, A. Whitelaw<sup>d</sup>, Y. Vallie<sup>e</sup>, P. Raubenheimer<sup>a</sup>, E.D. Bateman<sup>a</sup> and A. Zumla<sup>f</sup>

Comparison of same day diagnostic tools including Gene Xpert and unstimulated IFN- $\gamma$  for the evaluation of pleural tuberculosis: a prospective cohort study

Richard Meldau<sup>1</sup>, Jonny Peter<sup>1</sup>, Grant Theron<sup>1</sup>, Greg Calligaro<sup>1</sup>, Brian Allwood<sup>1</sup>, Greg Symons<sup>1</sup>, Hoosain Khalifey<sup>1</sup>, Gina Ntombenhe<sup>1</sup>, Ureshnie Govender<sup>1</sup>, Anke Binder<sup>1</sup>, Richard van Zyl-Smit<sup>1</sup> and Keertan Dheda<sup>1,2\*</sup>

**RESEARCH ARTICLE** [Open Access](#)

Diagnostic accuracy of quantitative PCR (Xpert MTB/RIF) for tuberculous pericarditis compared to adenosine deaminase and unstimulated interferon- $\gamma$  in a high burden setting: a prospective study

Shaheen Pandie<sup>1†</sup>, Jonathan G Peter<sup>2,3†</sup>, Zita S Kerbelker<sup>1</sup>, Richard Meldau<sup>2</sup>, Grant Theron<sup>2</sup>, Ureshnie Govender<sup>2</sup>, Mpiko Ntsekhe<sup>1</sup>, Keertan Dheda<sup>2,4†</sup> and Bongani M Mayosi<sup>1,4†\*</sup>

Diagnostic Accuracy of Ascitic Fluid IFN- $\gamma$  and Adenosine Deaminase Assays in the Diagnosis of Tuberculous Ascites

S.K. SHARMA,<sup>1</sup> MOHAMMAD TAHIR,<sup>1</sup> ALLADI MOHAN,<sup>2</sup> DUNCAN SMITH-ROHRBERG,<sup>3</sup> HEMANT K. MISHRA,<sup>1</sup> and R.M. PANDEY<sup>4</sup>

Comparative Utility of Cytokine Levels and Quantitative RD-1-Specific T Cell Responses for Rapid Immunodiagnosis of Tuberculous Meningitis<sup>∇</sup>

Vinod B. Patel,<sup>1</sup> Ravesh Singh,<sup>2</sup> Cathy Connolly,<sup>3</sup> Victoria Kasproicz,<sup>2</sup> Thumbi Ndung'u,<sup>2</sup> and Keertan Dheda<sup>4,5,6\*</sup>

# IRISA-TB™

*Ultra-sensitive and rapid detection  
of unstimulated human interferon-  
gamma for the diagnosis of pleural  
TB, pericardial TB, TB peritonitis  
and TB meningitis*



# RECENT VALIDATION STUDIES

- Retrospective study: TB meningitis (Zambia)
- Prospective study: TB meningitis (Malawi and Zimbabwe)
- Rule-out cohort: TB meningitis (South Africa)
- Prospective study: Pleural TB (South Africa)



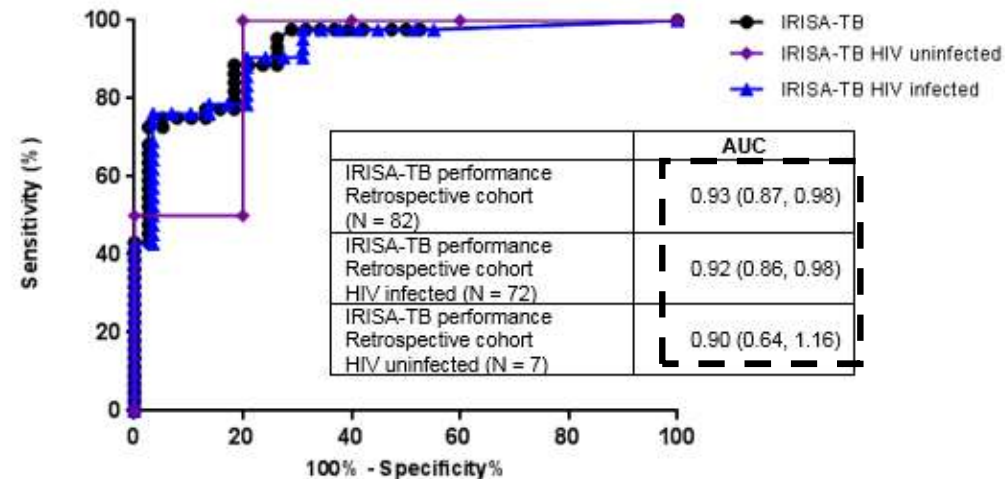
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# RETROSPECTIVE STUDY: TB MENINGITIS

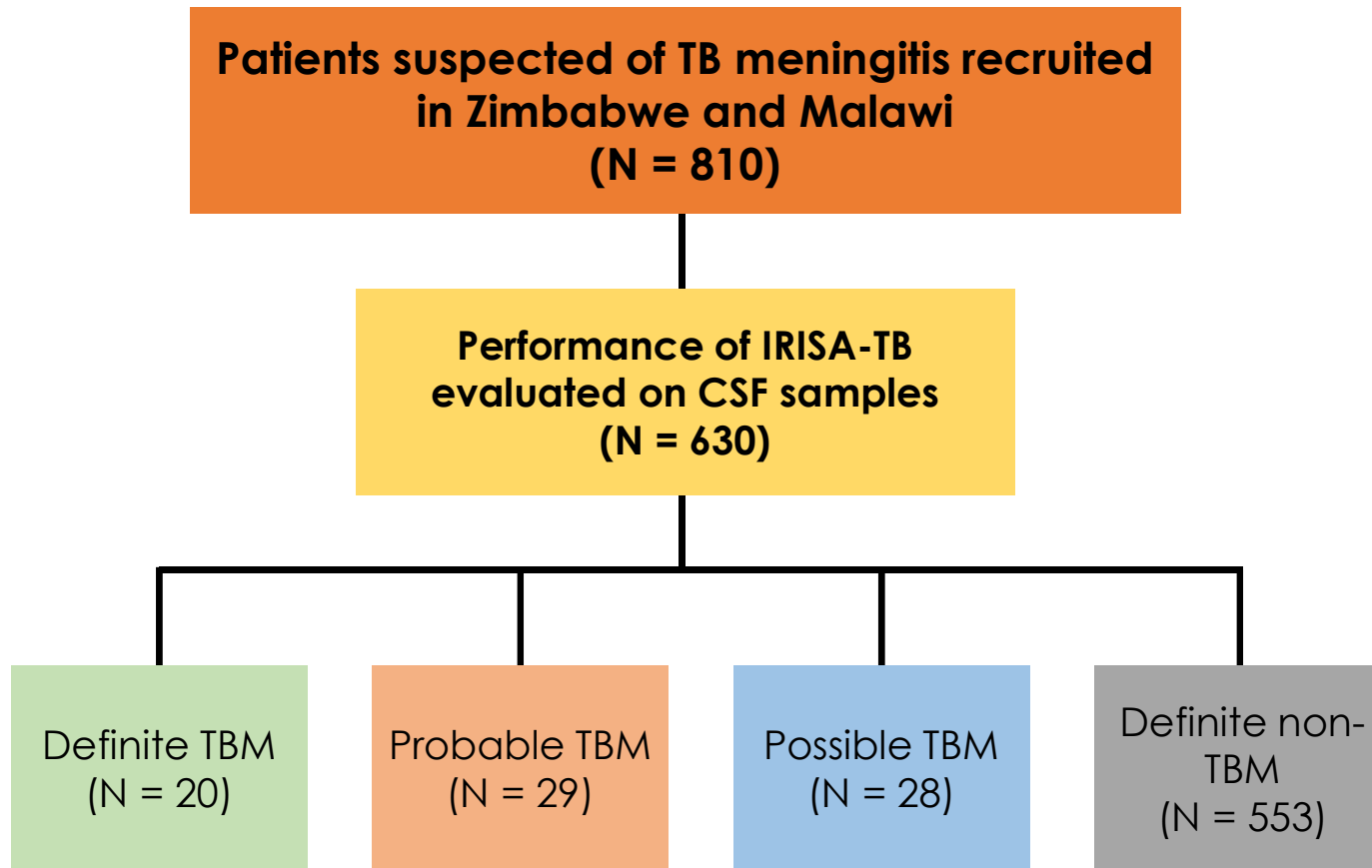
Bio-banked CSF samples (N = 82) were applied to IRISA-TB  
(Definite TBM = 44 and Definite non-TBM = 38)

	sensitivity	specificity	PPV	NPV
<b>Test performance IRISA-TB (CIs; n/N)</b>	<b>75%</b> <b>(60.6, 85.5)</b> <b>33/44</b>	<b>86.9%</b> <b>(72.7, 94.3)</b> <b>33/38</b>	86.9% (72.7, 94.3) 33/38	75% (60.6, 85.5) 33/44
<b>Test performance IRISA-TB HIV infected (CIs; n/N)</b>	76.2% (61.5, 86.6) 32/42	86.3% (69.5, 94.6) 25/29	88.9% (74.7, 95.6) 32/36	71.5% (55, 83.7) 25/35
<b>Test performance IRISA-TB HIV uninfected (CIs; n/N)</b>	50% (9.5, 90.6) 1/2	80% (37.6, 96.4) 4/5	50% (9.5, 90.6) 1/2	80% (37.6, 96.4) 4/5



At a cut-off of 13pg/ml IRISA-TB's showed superior performance over current diagnostics

# PROSPECTIVE STUDY: TB MENINGITIS



	sensitivity	specificity	PPV	NPV	AUC	Likelihood Ratio	DOR
Test performance prospective cohort (N = 573) (CIs; n/N)	<b>75%</b> (53.2, 88.9) 15/20	<b>90.3%</b> (87.5, 92.5) 499/553	21.8% (13.7, 32.9) 15/69	<b>99.1%</b> (97.7, 99.6) 499/504	0.91 (0.85, 0.97)	7.68	27.72 (9.695, 79.27)
Test performance prospective cohort HIV infected individuals (N = 374) (CIs; n/N)	<b>92.4%*</b> (66.7, 98.7) 12/13	88.1% (84.4, 91.1) 318/361	21.9% (13, 34.4) 12/55	<b>99.7%</b> (98.3, 100) 318/319	0.93 (0.86, 1.01)	7.75	88.74 (11.25, 699.9)
Test performance prospective cohort HIV uninfected individuals (N = 150) (CIs; n/N)	<b>50%*</b> (18.8, 81.3) 3/6	93.8% (88.6, 96.7) 135/144	25% (8.9, 53.3) 3/12	<b>97.9%</b> (93.9, 99.3) 135/138	0.91 (0.844, 0.98)	8.00	15 (2.640, 85.22)
	*p value = 0.04						

At a cut-off of 13pg/ml IRISA-TB's sensitivity was higher in HIV infected individuals  
The NPV is a major draw card

# RULE-OUT COHORT: TB MENINGITIS

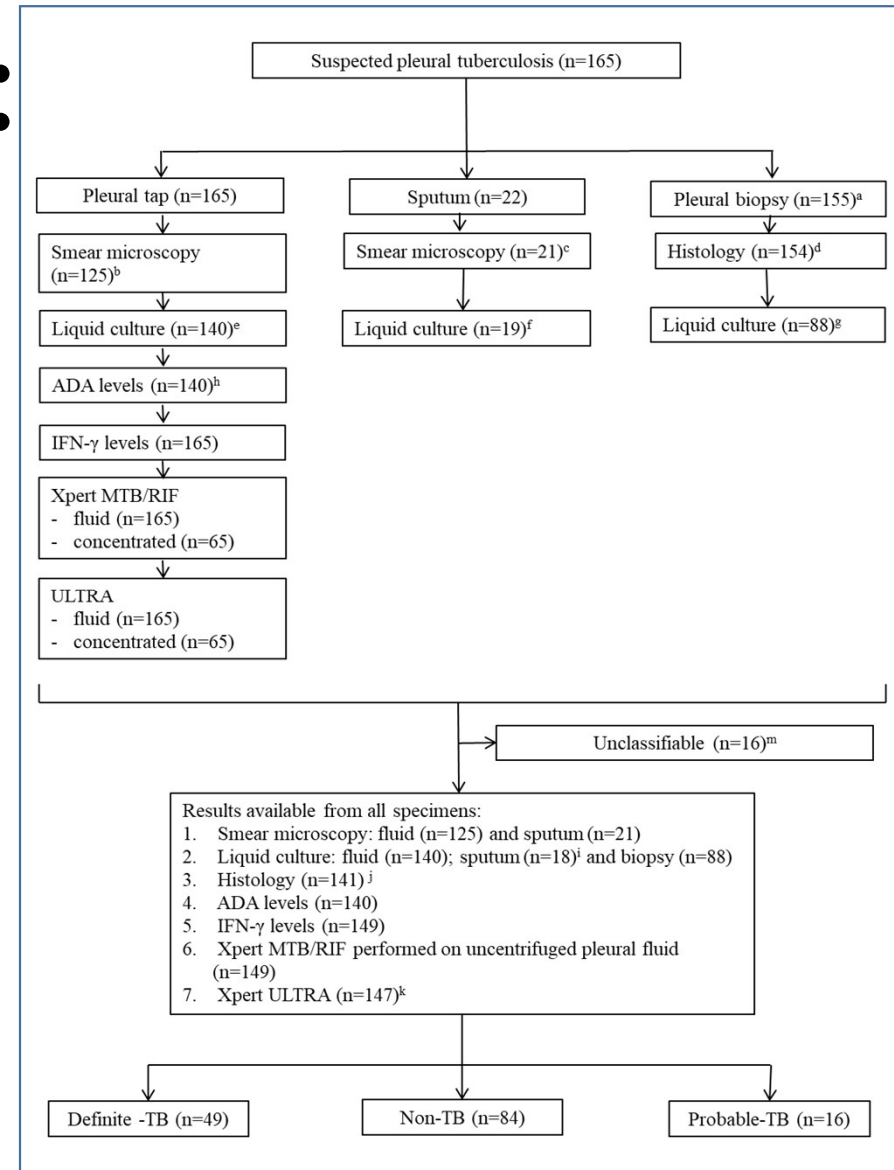
- Patients suspected of meningitis (not TBM) were recruited (N = 173)
- Embedded evaluation on those with normal CSF results (N = 122)

	Rule-out value	HIV infected	HIV uninfected	Children ( $\leq 16$ years old)	Adults ( $> 16$ years old)
<b>Test performance specificity rule-out cohort (N = 173) (CIs; n/N)</b>	98.3% (95.1, 99.5) 170/173	100% (92, 100) 44/44	95.7% (88, 98.6) 66/69	97.1% (89.9, 99.2) 66/68	99.1% (94.9, 99.9) 104/105
<b>Test performance specificity CSF normal (N = 122) (CIs; n/N)</b>	100% (97, 100) 122/122	100% (86.7, 100) 25/25	100% (92.8, 100) 49/49	100% (92.9, 100) 50/50	100% (95, 100) 72/72

At a cut-off of 13pg/ml IRISA-TB's NPV was above 95% irrespective of age and HIV status

# PROSPECTIVE STUDY: PLEURAL TB

- 165 patients suspected of pleural TB were recruited
- Comparison of same-day diagnostics tools was performed
- Samples were run on Xpert MTB/RIF, Xpert Ultra, ADA and IRISA-TB

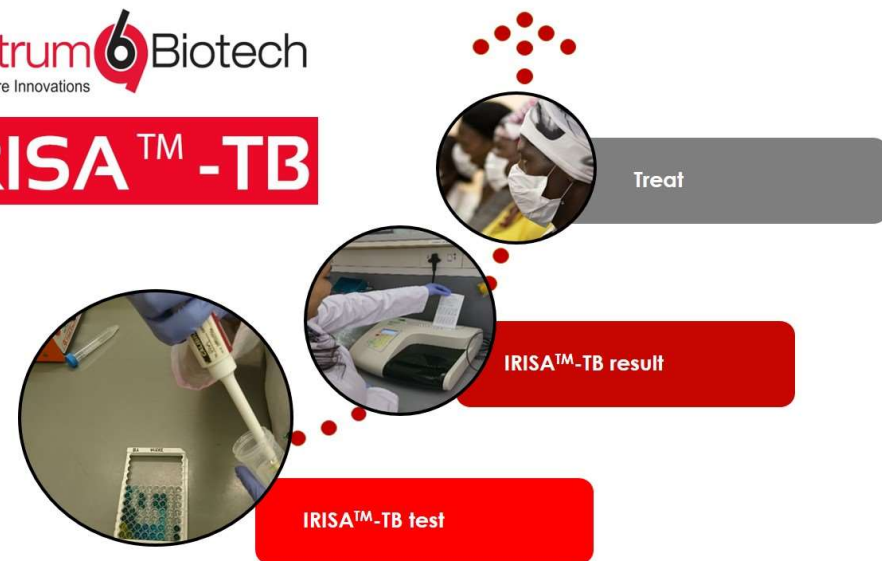


	Sensitivity % (CI) n/N	Specificity % (CI) n/N	Positive Predictive Value % (CI) n/N	Negative Predictive Value % (CI) n/N	Positive Likelihood Ratio (CI)	Negative Likelihood Ratio (CI)	Diagnostic odds Ratio (CI)
Xpert ULTRA	37.5 <sup>bd</sup> (23.8 – 51.2) 18/48	98.8 <sup>f</sup> (96.5 - 100) 83/84	94.7 <sup>j</sup> (84.7 – 100) 18/19	73.5 <sup>nk</sup> (65.3 – 81.6) 83/113	31.5 (4.3 – 228.6)	0.6 <sup>qt</sup> (0.5 - 0.8)	49.8 (6.4 – 389.4)
Xpert MTB/RIF	28.6 <sup>ac</sup> (15.9 – 41.2) 14/49	98.8 <sup>e</sup> (96.4 - 100) 83/84	93.3 <sup>i</sup> (80.7 - 100) 14/15	70.3 <sup>ml</sup> (62.1 – 78.6) 83/118	24.0 (3.2 – 177.0)	0.7 <sup>sr</sup> (0.6 - 0.9)	33.2 (4.2 – 262.3)
IRISA-TB - Cut point 20.5 pg/ml	<b>89.8<sup>ab</sup></b> <b>(81.3 – 98.3)</b> <b>44/49</b>	<b>96.4<sup>g</sup></b> <b>(92.4 – 100)</b> <b>81/84</b>	<b>93.6<sup>h</sup></b> <b>(86.6 – 100)</b> <b>44/47</b>	<b>94.2<sup>kl</sup></b> <b>(89.2 – 99.1)</b> <b>81/86</b>	25.1 <sup>p</sup> (8.2 – 76.7)	0.1 <sup>qs</sup> (0.0 - 0.2)	237.6 (54.2 – 1041.3)
ADA - Cut point 30 IU/ml	84.4 <sup>cd</sup> (73.9 – 95.0) 38/45	87.5 <sup>feg</sup> (79.9 – 95.1) 63/72	80.9 <sup>hij</sup> (69.6 - 92.1) 38/47	90.0 <sup>mn</sup> (83.0 - 97.0) 63/70	6.8 <sup>p</sup> (3.6 – 12.6)	0.2 <sup>rt</sup> (0.1 - 0.4)	38.0 (13.1 – 110.4)
P-value	a; b; c and d: p < 0.0001	e: p=0.004 f: p=0.005 g: p = 0.034	h: p = 0.028 i: p = 0.071 j: p = 0.032	k; l and m: p < 0.0001 n: p = 0.00013	p: p = 0.032	q; r and s: p < 0.0001 t: p = 0.0006	

IRISA-TB's sensitivity and NPV significantly higher than Xpert (Ultra & MTB/RIF) and its specificity and PPV is superior to ADA

# SUMMARY

- Current diagnostics are sub-optimal
- IRISA-TB is a rapid, effective test that is able to rule-in and rule-out EPTB sub-types
- Validated across multiple studies
- Its NPV is a major advantage
- Out competes all diagnostics in the diagnosis of pleural TB



# ACKNOWLEDGEMENTS

## OUR TEAM

Ms Khilona Radia (CEO)  
Ms Tammy Krige  
Dr Lindsay Wilson

## OUR COLLABORATORS

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SA MRC



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	<b>sensitivity</b>	<b>specificity</b>	<b>PPV</b>	<b>NPV</b>	<b>Likelihood ratio</b>	<b>DOR</b>
<b>IRISA-TB cut-off 13pg/ml</b>						
<b>Test performance IRISA-TB (CIs; n/N)</b>	50% (9.5, 90.6) 1/2	97%*# (84.7, 99.5) 32/33	50% (9.5, 90.6) 1/2	97% (84.7, 99.5) 32/33	11	16 (0.71, 362)
<b>Without trace calls included</b>						
<b>Test performance Xpert Ultra (CIs; n/N)</b>	50% (9.5, 90.6) 1/2	72.8%* (55.8, 85) 24/33	10% (1.8, 40.5) 1/10	96% (80.5, 99.3) 24/25	1.83	2.67 (0.15; 47.34)
<b>With trace calls included</b>						
<b>Test performance Xpert Ultra (CIs; n/N)</b>	100% (34.3, 100) 2/2	48.5%#& (32.6, 64.8) 16/33	10.6% (3, 31.4) 2/19	100% (80.7, 100) 16/16	1.94	4.71 (0.21, 105.8)
		*p-value = 0.0064 #p-value = < 0.0001 @p- value = 0.0014 &p-value = < 0.0001				