# AHF PUBLIC HEALTH

# Performance evaluation of a *dual* HIV/Syphilis rapid test in a community-based clinic, Los Angeles

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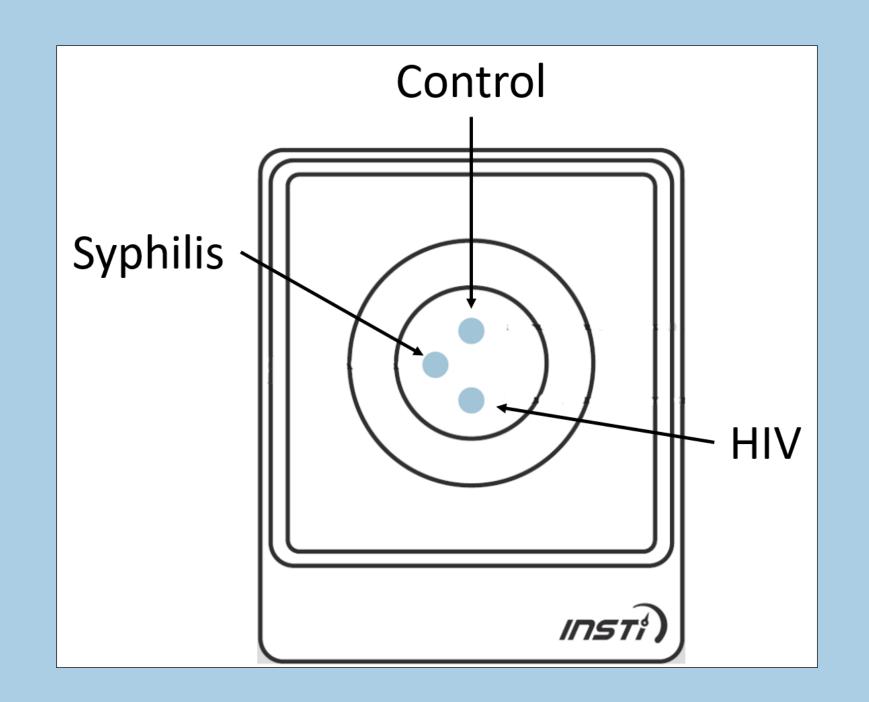
## Overview

- Dual rapid assays detect antibodies for both HIV and Syphilis.
- Performance of the Multiplex for detecting antibodies:
  - HIV: Sensitivity=98.2%(90.3%,99.9%); specificity=100%(96.4%,100%).
  - **Syphilis:** *Sensitivity=* 45.1%(31.1,59.7); *Specificity=*97.1%(91.8% 99.4%)
    - Sensitivity increases with RPR titer; ranging from 8.3%(0.2%,38.5%) when RPR is Non-Reactive (↓antibodies) to 100%(66.4%,100%), when RPR≥1:8 (↑antibodies).
- The differentiation between active/recent syphilis infection (↑antibodies) and past infection(↓antibodies) could be an important tool when screening populations with high prevalence of syphilis.

# Background

- Currently, there is **no dual HIV/Syphilis FDA-approved device**.
- The INSTI Multiplex HIV-1/HIV-2/Syphilis Antibody Test (BioLytical, Richmond, BC, Canada) is a rapid in vitro qualitative immunoassay detecting IgG antibodies to HIV-1(gp41), HIV-2(gp36) and *Treponema pallidum*(p17, p47) in whole/fingerstick blood, serum or plasma.
- Test yields results in 60 seconds





Goal: Evaluate the performance of the Multiplex in a community setting.

#### Methods

**Population:** adult patients of *Hollywood Healthcare Center* and *Hollywood Wellness clinic* of the AIDS Healthcare Foundation between 8/2016 – 9/2017.

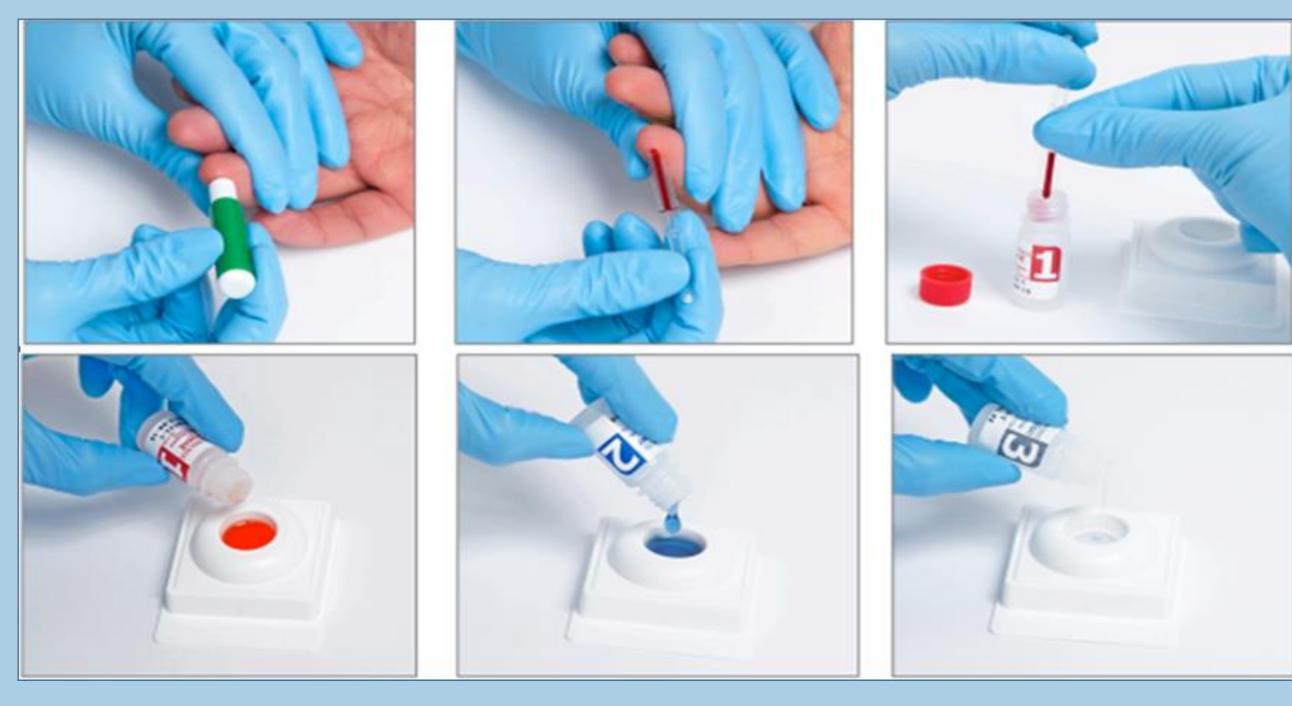


Figure 1: Sample collection and testing

#### Reference assays:

Fingerstick whole blood compared to serum tested in the laboratory for HIV and TP antibodies.

- HIV: Abbott Architect HIV Ag/Ab Combo
- Syphilis: Serodia TP-Particle Agglutination with reflex to RPR/titer

**Data Analysis:** We calculated sensitivity and specificity with respective 95% confidence intervals (CI).

## Results

In total, 156 patients participated in the evaluation

- 55 had detectable HIV antibodies,
- 51 had antibodies for TP and 39 had reactive RPR. No invalid results

Table 1: Performance of the Multiplex for detection of HIV antibodies.

Multiplex HIV	HIV reference		Total	Sensitivity	Specificity
	+	•	Total	(95%CI)	(95%CI)
+	54 (TP)	0 (FP)	54	98.2% (90.3,99.9)	100% (96.4, 100)
_	1 (FN)	101 (TN)	102		
Total	55	101	156		

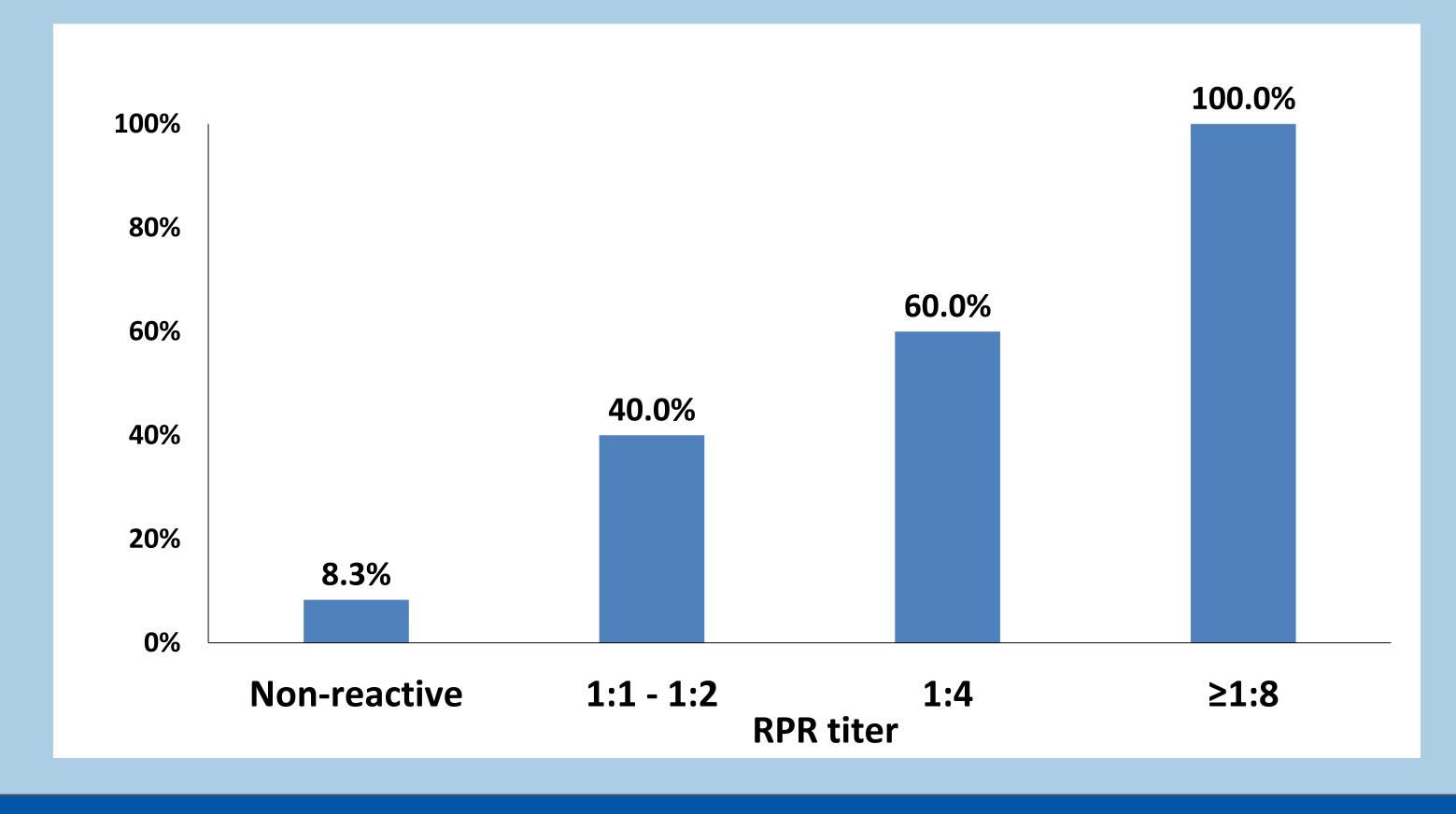
**Legend:** TP=True Positive/ FP=False Positive/ TN= True Negative/
FN=False Negative

Sensitivity =  $\frac{TP}{TP+FN}$ Specificity= $\frac{TN}{FP+TN}$ 

Table 2: Performance of the Multiplex for detection of antibodies for syphilis.

Multiplex TP	x T	TPPA		Sensitivity	Specificity
	+	1		(95%CI)	(95%CI)
+	23	3	26	45.1% (31.1,59.7)	97.1% (92,99.4)
	28	102	130		
Total	51	105	156		

Figure 2: Sensitivity of the Multiplex for detection of TP antibodies, stratified by RPR titer.



#### Conclusions

- The Multiplex showed excellent performance for detection of HIV antibodies
- Sensitivity for syphilis detection increased in higher RPR titers.
- Further research should evaluate its role for screening.
- Limitations: small sample size reduces the accuracy of our results

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