

# Performance Evaluation of the Aptima® HIV-1 Quant Dx and Aptima® HBV Quant assays on the fully automated Panther in comparison to Cobas® 6800/8800 HIV-1 and HBV tests



Biomnis

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## Background

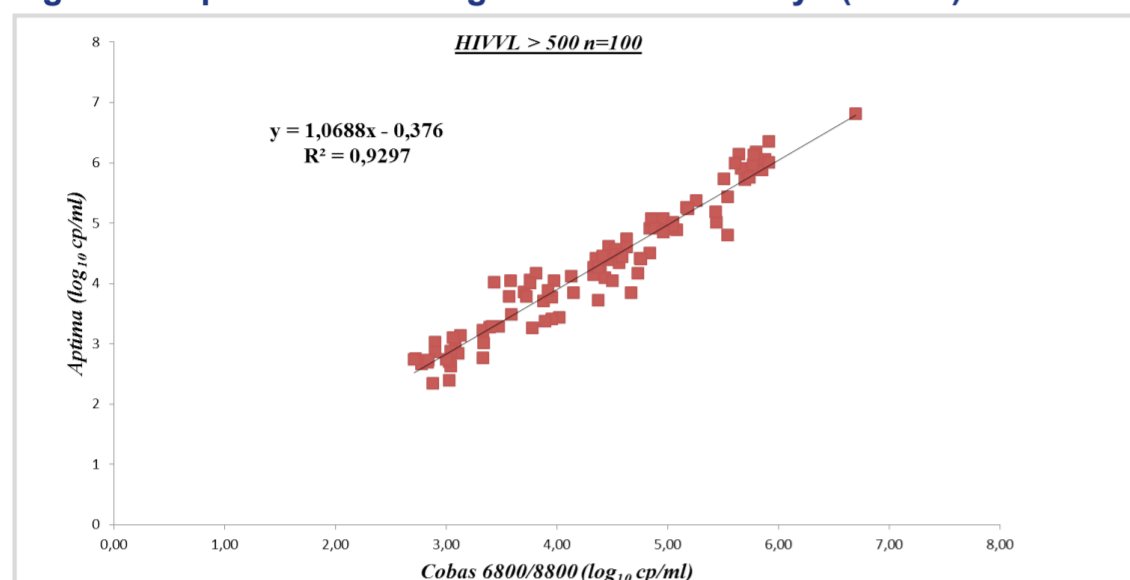
Quantification of HIV-1 and HBV viral load plays a key role in management of HIV and HBV patients. Aptima® HIV-1 Quant Dx and HBV Quant are run on Panther system. The assays are based on TMA technology. Clinical results obtained with Aptima were compared to Cobas® 6800/8800 HIV-1 and HBV results.

## Assay performance

### Method comparison

**HIV** 100 retrospective frozen plasma specimens from HIV infected patients with a viral load exceeding 500 copies/ml were tested using Aptima® HIV-1 Quant Dx Assay, based on HIV viral load, as determined by routine testing using Cobas® 6800/8800 HIV-1 test.

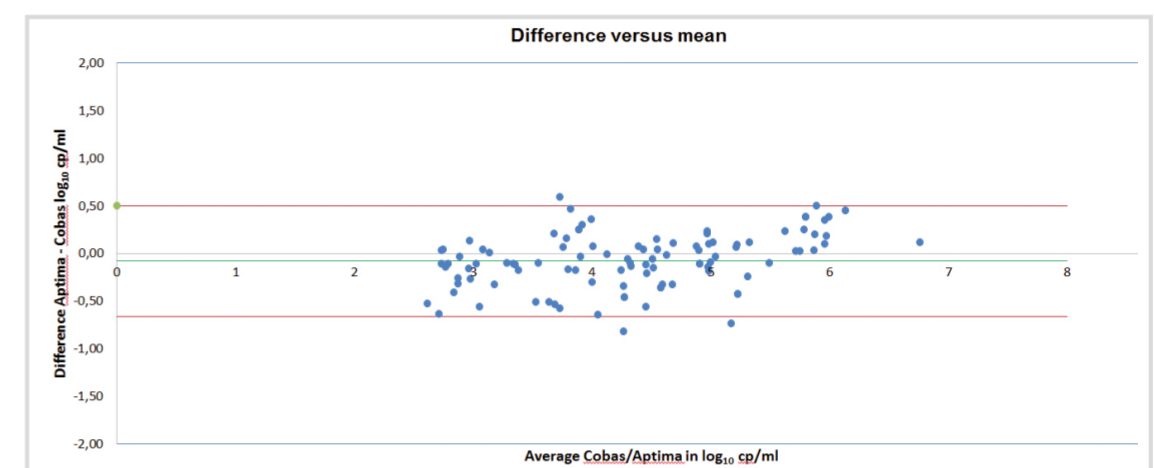
Fig. 1: Comparison of Hologic and Roche assays (n=100)



- Deming regression was excellent between the 2 assays for 100 quantifiable samples :  $y = 1.068x - 0.376$
- Regression coefficient was close to 1  $R^2 = 0.93$



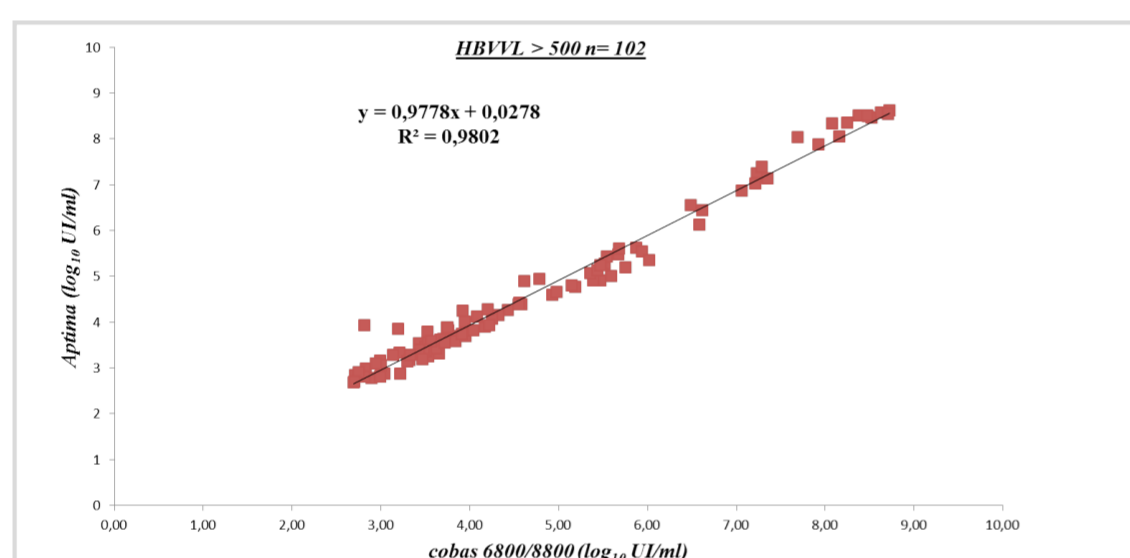
Fig. 2: Bland Altman plot comparing the quantitative results (> 500 cp/ml) from 100 clinical samples tested in Aptima® HIV-1 Quant Dx assay and the Cobas® 6800/8800 HIV-1 test



None of the tested samples differed by more than 1 log between the 2 assays

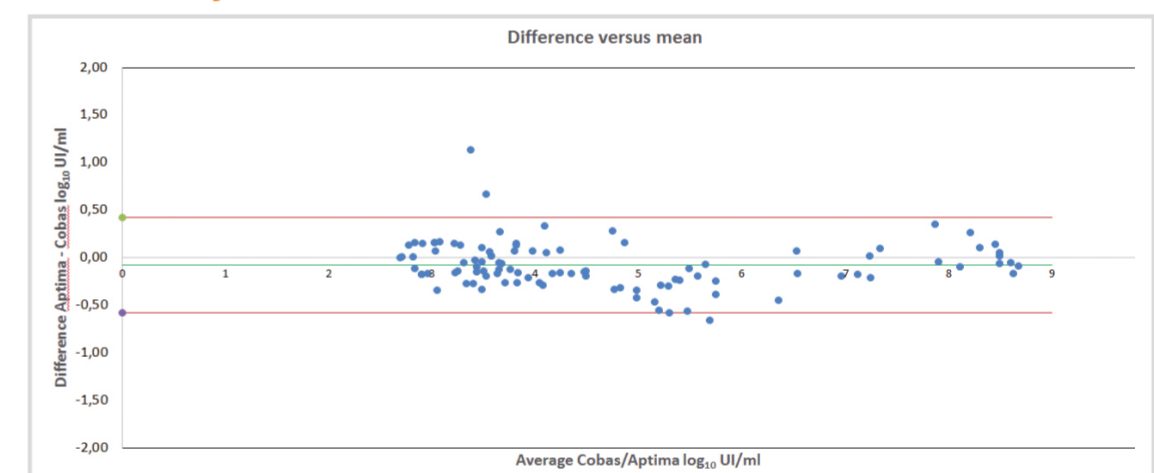
**HBV** 102 retrospective plasma or serum specimens from HBV infected patients with a viral load exceeding 500 UI/ml were tested for Aptima® HBV Quant Assay, based on HBV viral load, as determined by routine testing using Cobas® 6800/8800 test.

Fig. 3: Comparison of Hologic and Roche assays (n=102)



- Deming regression was excellent between the 2 assays for 102 quantifiable samples :  $y = 0.98x + 0.0278$
- Regression coefficient was close to 1 ( $R^2 = 0.98$ )

Fig. 4: Bland Altman plot comparing the quantitative results (> 500 UI/ml) from 102 clinical samples tested in Aptima® HBV Quant assay and the Cobas® 6800/8800 HBV test



Only one sample differed in viral load result by more than 1 log (1.13) between the 2 assays, giving higher result (3.94 log) with Aptima test than with Roche test (2.81 log)

## Assessment of repeatability and reproducibility

**HIV**

- Home made low and high level controls were used to assess repeatability
- Panels were obtained by pooling patient plasma samples and diluting to obtain the expected viral load value

Tab.1: Assessment of HIV repeatability

	n	Mean (log <sub>10</sub> cp/ml)	SD (log <sub>10</sub> cp/ml)
Internal control	10	2.67	0.11
High positive pool	10	6.66	0.05

- Repeatability assessed by testing quality controls 10 times in the same run was excellent with Standard Deviation (SD) ranging from 0.05 to 0.11 log<sub>10</sub> cp/ml

**HBV**

- Home made low and high level controls were used to assess repeatability
- Panels were obtained by pooling patient plasma samples and diluting to obtain the expected viral load value

Tab.3: Assessment of HBV repeatability

	n	Mean (log <sub>10</sub> UI/ml)	SD (log <sub>10</sub> UI/ml)
Internal control	10	3	0.11
High positive pool	10	7.79	0.04

- Repeatability assessed by testing quality controls 10 times in the same run was excellent with Standard Deviation (SD) ranging from 0.04 to 0.11 log<sub>10</sub> UI/ml

Home made internal quality control, and Aptima High (HPC) and Low (LPC) Positive control from the kit were used to assess reproducibility

Tab.2: Assessment of HIV reproducibility

	n	Mean (log <sub>10</sub> cp/ml)	SD (log <sub>10</sub> cp/ml)
Internal control	30	2.62	0.13
LPC	30	2.82	0.11
HPC	30	5.04	0.06

- Reproducibility assessed by testing quality controls 30 times in different experiments was excellent with Standard Deviation (SD) ranging from 0.06 to 0.13 log<sub>10</sub> cp/ml

Home made internal quality control, and Aptima High (HPC) and Low (LPC) Positive control from the kit were used to assess reproducibility

Tab.4: Assessment of HBV reproducibility

	n	Mean (log <sub>10</sub> UI/ml)	SD (log <sub>10</sub> UI/ml)
Internal control	30	2.94	0.07
LPC	30	2.77	0.09
HPC	30	4.49	0.06

- Reproducibility assessed by testing quality controls 30 times in different experiments was excellent with Standard Deviation (SD) ranging from 0.06 to 0.09 log<sub>10</sub> UI/ml

## Cross contamination

No cross contamination (neither with HIV nor with HBV) was observed when testing 5 consecutive runs using negative control and High positive control samples alternately.

## Conclusion

The Hologic Aptima® HIV-1 Quant Dx assay and Aptima® HBV Quant assays as performed on the fully automated Panther system gave highly comparable performance to that of Roche Cobas® 6800/8800 HIV-1 and HBV assays for tested clinical samples. Good results were observed using home made and Aptima controls indicating good reproducibility and repeatability.

This system, using 0.5 ml sample input on primary samples, was easy to use and could generate 120 test results in less than four hours.