



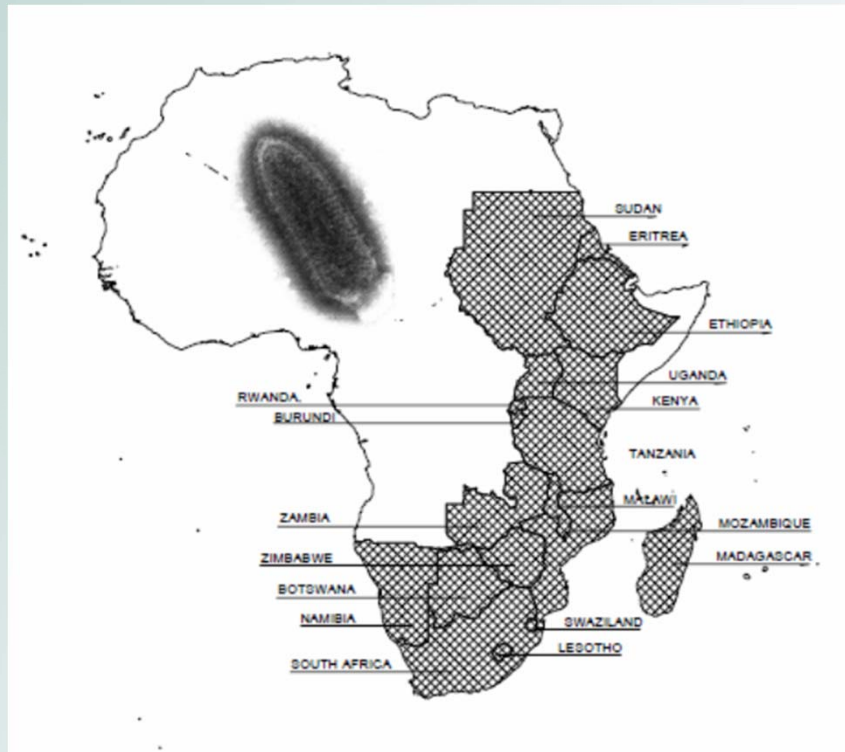
Laboratory proficiency testing for Rabies: an example of diagnostic support to national veterinary laboratories.

Claude Sabeta, PhD



Presentation

- Background & objectives
- Participating laboratories
- Composition of the panel
- Preparation of samples, validation of transportation and courier
- Results and discussion
- Recommendations and way forward



Follow up to the SEARG 2008 conference

- To conduct a **theoretical** and **practical** training on rabies diagnostics:
 - enhance skills and knowledge on current diagnostic tests and techniques available for use in the region,
- **Identify** and **invite** diagnosticians involved in rabies diagnosis in the SADC countries,
- **Organise** and **coordinate** logistical arrangements as well as identify a training coordinator,
- **Prepare a draft report** to be submitted to the ARC and SEARG contact point,



Participants to the workshop.....



- 14 participants from all SADC countries (except Mauritius)

Course objectives

- **Theory:**

- Describe the basic properties of the rabies virus, its transmission and disease course in Africa.
- Recommend safe practices for those working in rabies diagnosis or shipping laboratory specimens.
- Summarise quality control and quality assurance procedures for the rabies diagnostic laboratory.
- Understand the concept of one health and positioning of rabies as a neglected zoonosis.

- **Discussions:**

- Assess the role of the rabies laboratory in terms of diagnostic capability and the interpretation of laboratory results.
- Review the various surveillance tools (antigenic typing, phylogenetic analysis and general case surveillance data) in rabies control (T & D).

- **Practical:**

- Identify and prepare appropriate specimens for rabies diagnosis.
- Demonstrating proficiency in observing fluorescent antibody test slides, detecting virus antigen when present and correctly interpreting difficult test results.
- Understand the role of dog ecology in the context of rabies control.

Proficiency evaluation

- Participants split into 3 groups
 - Reading prepared slides (A)
 - Staining own samples (B)
 - Performing a rapid assay on samples brought from own lab (Moz, Na, Sz) (C)
- Comprehension of the FAT and reading of slides good
- Some participants did not obtain expected results [4A, 3B].



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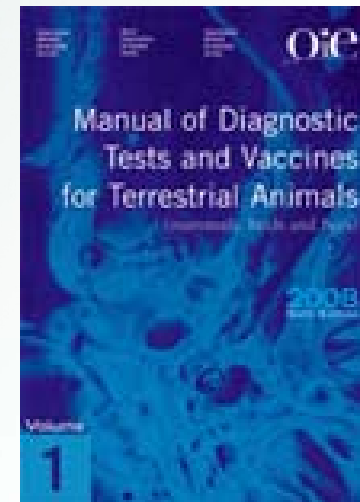


What did we learn from the training?

- The theory and hands on training workshop held in July 2009 was successful.
- Specific areas of further training were highlighted (above) and should be pursued in 2011.
- The OVI:
 - should co-ordinate an annual proficiency test for all the SADC member countries.
 - should supply key biologicals such as the conjugate for all the SADC member countries. The OIE sub-regional office should consider such a proposal.
- Individual laboratories within the SADC should be evaluated for their capability to perform these tests (human, infrastructure etc).
- Training should be expanded to include other non-SADC countries.

The first step was to harmonise the FAT protocol.

- Standardisation of diagnostic protocols in veterinary and animal laboratories
 - Ease of assessing competency of personnel involved in rabies diagnosis
 - Reliable surveillance data



The process of harmonisation of the FAT protocol.

- **Dates**: 26-28 August, 2010.
- **Venue**: Onderstepoort, South Africa
 - Dr Sabeta (OIE Rabies Reference Lab, Onderstepoort, South Africa)
 - Dr Siegfried Khaiseb (CVL, Parasitology & Rabies, Namibia)
 - Dr Chanasa Ngeleja-Mpelumbe (CVL, Virology, Tanzania)
 - Dr Wonderful Shumba (OIE Rabies Reference Lab, Onderstepoort, South Africa)

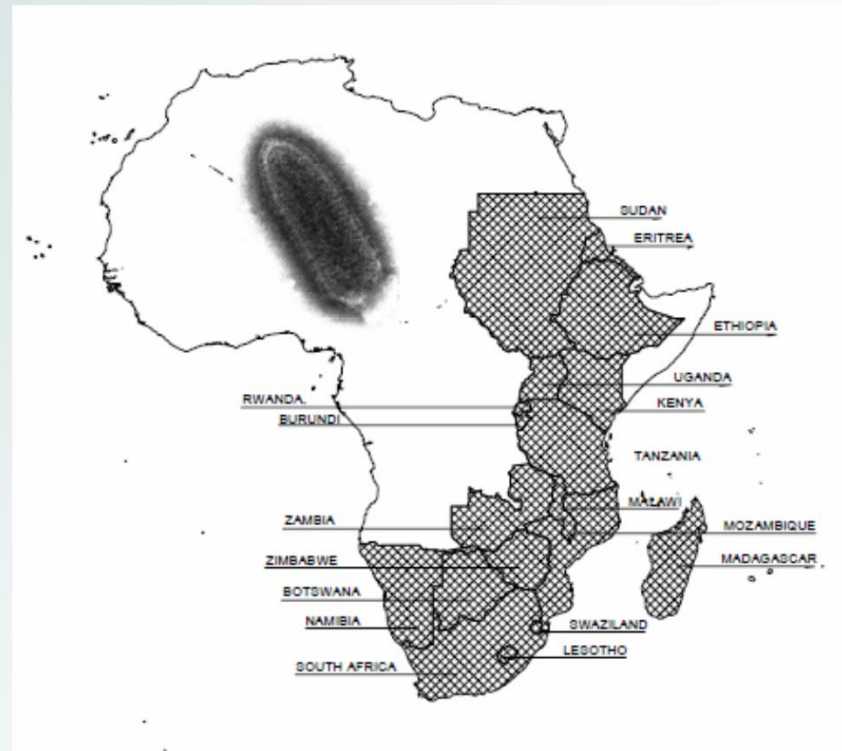


The FAT test

- Gold standard for diagnosing rabies in brain tissues
- Recommended by both the World Health Organisation (WHO) and the World Animal Organisation for Health (OIE)
 - Fast (results obtained in <3 hrs)
 - Comparatively inexpensive
 - Accurate (can detect 97-99% positive specimens)

SOPs from 10 countries utilised ...

- Botswana
- DRC
- Malawi
- Mozambique
- Namibia
- Onderstepoort (RSA)
- Swaziland
- Tanzania
- Zambia
- Zimbabwe



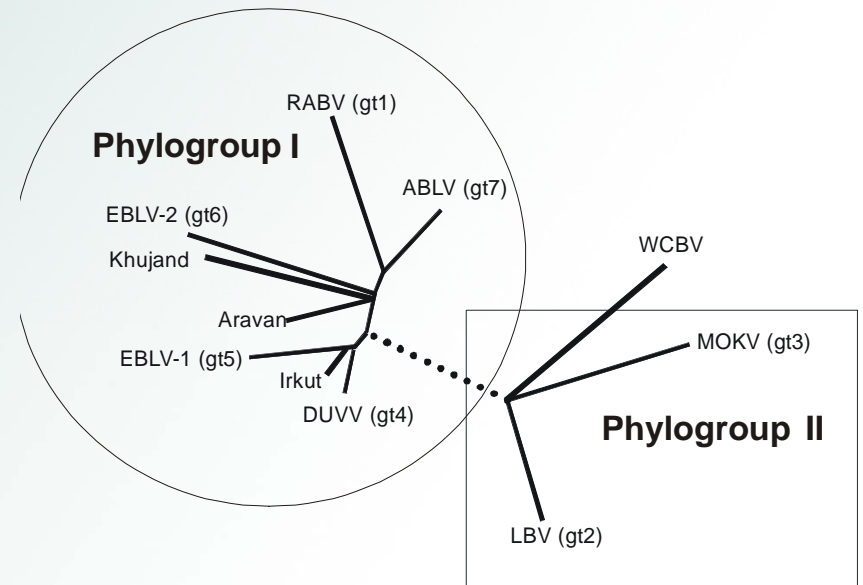
Safety considerations

- Personnel must be **trained**, **competent** and **comply** with biocontainment and biosafety regulations.
- Pre-exposure immunisation (inactivated vaccines)
 - Serological monitoring every 6 months (0.5IU/ml)
 - Vaccination with regular boosters



Staining of brain smears

- **Polyclonal** conjugate
(Sanofi, Centocor,
Chemicon, Onderstepoort)
- **Incubate at 37°C for 1 hr (2)**
- Apply conjugate (Evans Blue, 20% of the labs) and incubate at 37°C for 30 min (25-35) humidified chamber (8)



Reading test results

- Mounting fluid (50-90% glycerol) (4), Not defined (4)
- 70% glycerol, pH 8.76
 - [false negative results observed in pH range 7-7.5, Nanses].
- 1% glycerol [1].
- Two readers [1] and provide quantitative grades (intensity of fluorescence and distribution of antigen)



Quality control issues

- Quality of all reagents (acetone, conjugate, washing buffers) must be optimal [storage, pH].
- Routine use of pos and neg controls (use field/lab strains)
- Fluorescence microscope working properly, pH meter, Biological safety cabinet
- Conjugate must be broad spectrum
 - Concentrate dilutions must be mixed with glycerol, stored in aliquots.
 - Determine optimal working dilution of new batch of conjugate
- Fixed pos and neg controls stored at -80°C for 6 months.
- Staining – start with pos control and end with neg

Then what after the harmonisation of the protocol?

- **The next steps:**

- Ensure protocol is adhered to,
- Provide equipment and infrastructure to all member country laboratories,
- Good and high quality biologicals,
- Improve (training workshops) and maintain competency of rabies diagnosticians through external quality control (proficiency tests).



Preparation of the PT exercise - Kopanong meeting

- LOA between the ARC and the OIE signed (R75 000 provided by the OIE)
- Preparation of documents
 - acknowledgement forms
 - report forms
 - send calls for participation
 - request for import permits
- Procurement of mice, materials for courier of samples and other biologicals
- Selection and preparation of samples for the panel, test stability of samples
 - Courier panel of samples and biological conjugate to national laboratories
 - Labs to inform Onderstepoort (receipt of samples)
- Results to be submitted to Onderstepoort by end of June
- Analysis and report – Mid July
- Communicate to Heads of Laboratories, Chair SADC lab sub-committee, funders (OIE and FAO)

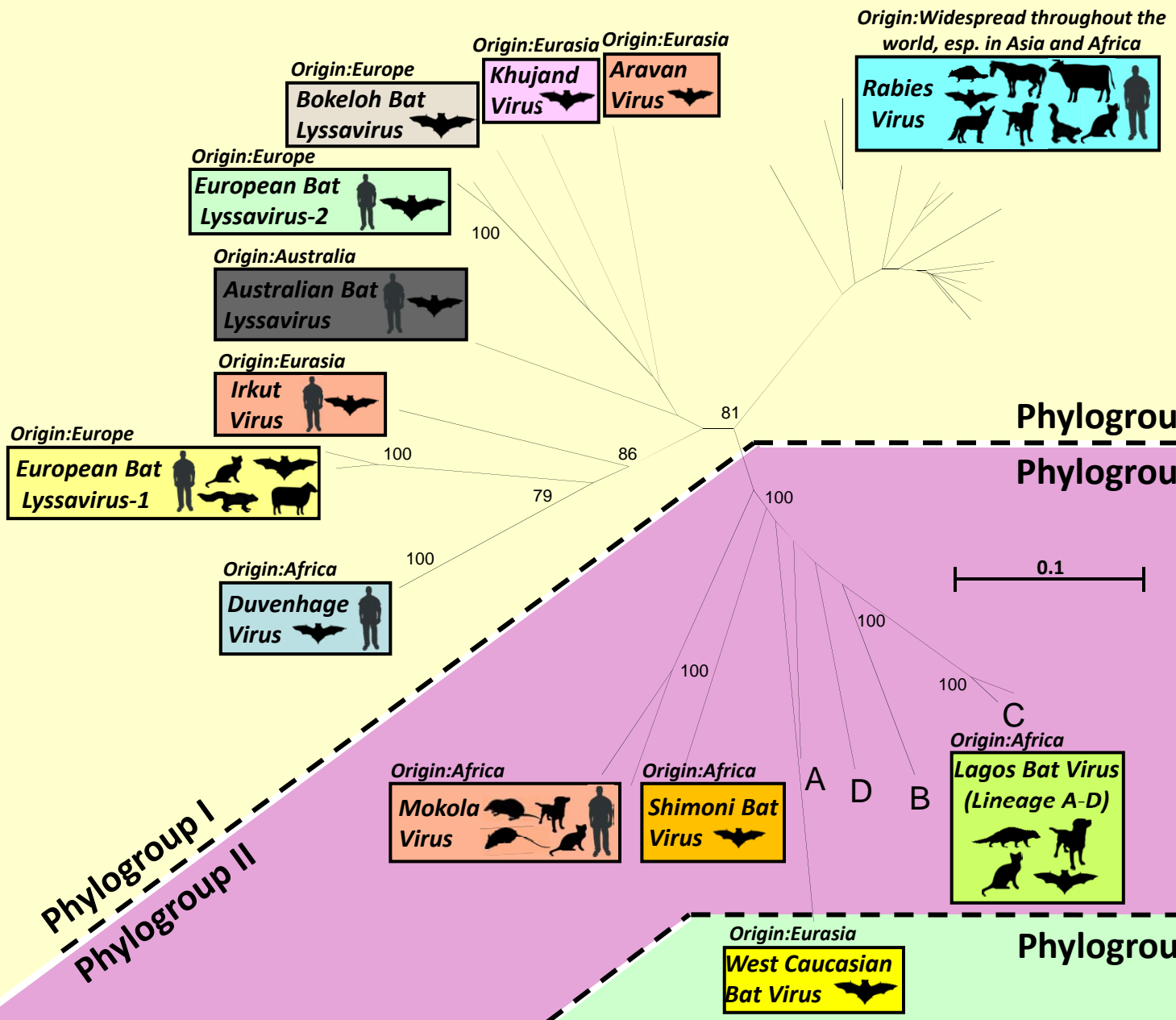
Participating countries...

Country	Code	Participated
Angola	L01	N
Botswana	L02	Y
Democratic Republic of Congo	L03	Y
Lesotho	L04	Y
Madagascar	L05	N
Malawi	L06	Y
Mauritius	L07	N
Mozambique	L08	Y
Namibia	L09	Y
Seychelles	L10	N
South Africa	L11 & L12	Y
Swaziland	L13	Y
Tanzania	L14	Y
Zambia	L15	Y
Zimbabwe	L16	Y

Panel of samples

Virus material	Laboratory reference no.	Genotype	Dilution
Lagos bat virus	RA390	Genotype 2	Undiluted
Mokola virus	173/06	Genotype 3	Diluted
Duvenhage virus	SA06	Genotype 4	Undiluted
Mongoose rabies virus	1164/10	Genotype 1	Undiluted
Negative (bovine)	366/11	N/A	Undiluted
Positive A	341/11	Genotype 1 (mongoose)	Undiluted
Positive B	341/11	Genotype 1 (dog)	Undiluted
Positive C	343/11	Genotype 1 (dog)	1:5
Positive D	173/06	Genotype 3	1:400
Positive E	351/11	Genotype 1	1:100
Negative	367/11	N/A	Undiluted

Phylogenetic analysis of lyssavirus genus using partial N-gene sequence



Sending samples to participating labs



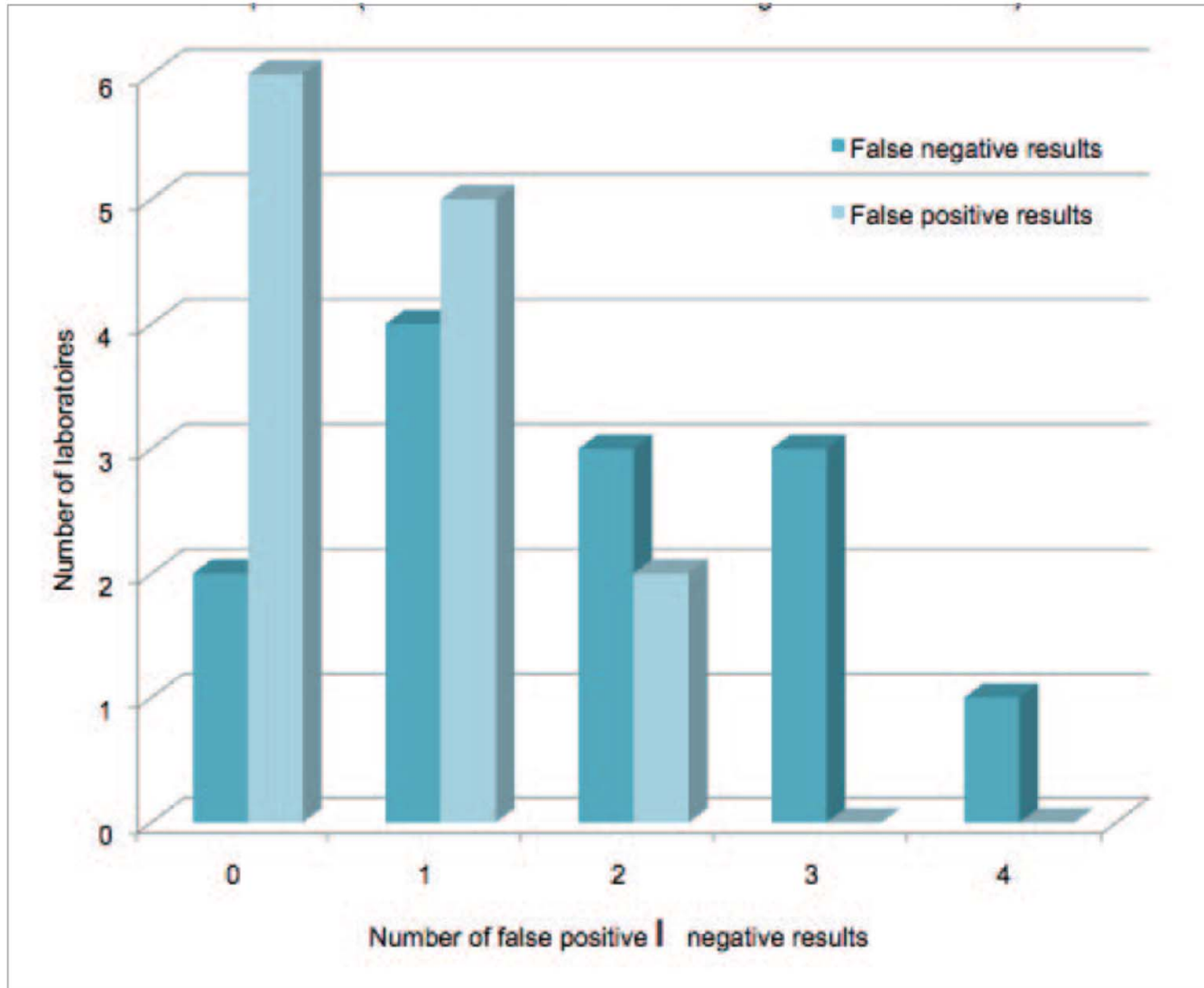
- Import permit
- Validation of transportation of samples
- Shipment of samples (ambient temperature according to international regulation) [UN2814]
 - Acknowledgement form (on receipt of samples, condition)
 - Store samples at 4 degrees until analysis
 - Stability will be tested before dispatch of samples (10 days at room temperature)
- Deadline (one month from receipt of samples)
- Result form
- Technical questionnaire (not circulated)
- Instructions to dilute conjugate

Results interpretation

- **Discrepancy:** result given by a laboratory different from the expected result (positive or negative)., also include false positive/false negative.
- **Sensitivity:** $[\text{No. of true pos. samples found by labs} / \text{Total number of pos samples (True pos. + false neg)}] \times 100$
- **Specificity:** $[\text{No. of true neg samples found by labs} / \text{Total no. of negative samples (true neg + false pos)}] \times 100$
- **Note:** The sensitivity and specificity of the inter-laboratory proficiency test cannot be compared to that of classical sensitivity and specificity of a technique (calculated on the basis of random sampling).

Results from labs

- Most labs produced satisfactory results, although collectively false negative (n=23) and false positive results (n=9) were a concern.
- 1:400 (diluted sample) gave many laboratories problems.
 - Microscopy [equipment]problem?
 - Inexperienced readers?
 - Adhering to protocol? E.g. use of EVANS blue in the test.
- For this proficiency test, the specificity and sensitivity (65.4% & 80%)[100% & 99.2% for the FAT and for an Anses PT exercise, n=3 (4.6% of negative samples, and n=7 [8% of positive samples]



Recommendations & improvements

- Provide larger amounts of testing material,
- Follow up questionnaire to establish areas of improvement,
- Backstopping visits,
- Assessment of the QMS in each of the laboratories,
- Use of good controls recommended.



SADC REGIONAL INTER-LABORATORY PROFICIENCY TESTING EXERCISE FOR **RABIES DIAGNOSIS**

29 NOVEMBER 2011

