



Aerospray[®]TB|series2

SLIDE STAINER / CYTOCENTRIFUGE



MULTI-SITE
PERFORMANCE
SUMMARY

MODEL 7722

Abstract

The new Aerospray TB Slide Stainer/Cyto centrifuge - Model 7722 (ELITechGroup Inc., www.elitechgroup.com) has been evaluated in a multi-national study by three independent laboratories. Each lab conducted evaluation studies, and then the study plans, protocols, and results were reviewed by ELITechGroup Biomedical Systems (Logan, UT, USA). The stainer was evaluated using samples suspected of containing acid-fast bacilli (AFB). Samples were prepared in duplicate under the microscope. One slide was stained by traditional manual methods, and its duplicate was stained on the Aerospray TB stainer using Aerospray TB stains. Slides were read and rated first as AFB positive or negative: If positive, the positive slides were rated as rare (or scanty), 1+, 2+, or 3+. The slides from the same specimen demonstrated a high correlation between manual staining methods and Aerospray staining methods with 99.6% agreement across 519 samples.

Introduction

Tuberculosis (TB) is caused by *Mycobacterium tuberculosis* that most often affects the lungs. TB occurs in every part of the world. According to the World Health Organization (WHO) in 2012 8.6 million people fell ill with TB and 1.3 million of those died¹. Microscopic examination of acid-fast stained smears is one of the first, easiest, most inexpensive, and rapid methods for demonstrating the presence of mycobacteria in clinical specimens and cultures².

Mycobacteria retains the primary stain even after exposure to decolorizing acid-alcohol, hence the term "acid-fast." There are several methods of determining the acid-fast nature of mycobacteria. In carbol fuchsin procedures, acid-fast organisms appear red against a blue or green background, while in the fluorochrome procedure (auramine-O, auramine-rhodamine), the acid-fast organisms appear as fluorescent rods, yellow to orange against a darker background. The advantage of fluorescence microscopy is that a low-magnification objective is used to scan smears, allowing a much larger area of the smear to be seen and resulting in more rapid examination³.

The Aerospray TB (Model 7722) automatic slide stainer automates the staining routine using either carbol fuchsin or fluorescence stains and without any risk of cross-contamination. The stainer can also be

used as a cyto centrifuge by utilizing the optional Cytopro[®] Cyto centrifuge Rotor (REF: AC-160).

The stainer offers programming flexibility where the primary stain, counterstain, and decolorizer stain applications can be adjusted to achieve the needs of AFB staining in the laboratory and make it comparable to manual staining results.

The fluorescence stain mode was recently validated by three laboratories in an international study. The laboratories that participated in this study were as follows:

- Department of Microbiology and Infection Control, Universitair Ziekenhuis Brussel, Vrije Universiteit Brussel (VUB), Belgium
- National Institute of Pathology (NIP) - Windhoek, Namibia
- National Institute of Communicable Diseases (NICD) – Johannesburg, South Africa

Each site worked independently and conducted their own internal study. ELITechGroup Biomedical Systems (EBS) reviewed the plans, protocols, and results for each study. The results of these studies were used to validate the use of the Aerospray TB (Model 7722) at each laboratory.

Methods

The three laboratories prepared routine samples that were suspected of TB. Microscope slides were prepared in duplicate from these samples. One slide was stained using manual staining methods and its

duplicate was stained using the Aerospray TB. A microscopist reviewed each slide using 400x magnification and diagnosed the slide based on the following table:

Rating	Organism Count
Negative	0-4 AFB organisms observed per 40 fields
Scanty or Rare	5-19 organisms observed per 40 fields
1+	20-199 organisms observed per 40 fields
2+	5-50 organisms observed per 1 field
3+	50+ organisms observed per 1 field

Table 1: Method for Reporting Average Number of AFB Observed in Clinical Specimens

Each laboratory had some unique methods:

- UZ Brussel (Brussels Belgium) used Auramine O (REF: SS-061CA) as the primary stain and Thiazine Red (REF: SS-061BRT-EU and SS-061BCS-EU) as the counter stain. They used the 12- slide carousel for the staining. Samples were prepared from various sample types. Samples were **digested** with Benzalkonium chloride or Chlorhexidine. Slides were made in duplicates. The slides were fixed by putting the slides on a hot plate set at 65-75 °C for at least two hours. After heat fixation, the slides were sprayed with methanol and then were air dried for approximately 5 minutes. After drying Mycohold[®] (REF: SS-061M) was spread over the sample on the slides. The slides were heated again for 15 minutes in order to solidify the Mycohold. (Mycohold is an albumin-based fixative reagent used to improve fixation of samples on microscope slides.)
- NIP (Windhoek, Namibia) used Auramine O (REF: SS-061CA) as the primary stain and potassium permanganate (SS-061BP) as the counter stain. They used the 30-slide carousel for the staining. Samples were prepared from **direct sputum**, meaning that sputum was not digested. The sputum was mixed with diluted Mycohold (REF: SS-161M) and smeared onto a microscope slide. Slides were made in duplicate. The slides were fixed for 15 minutes on a hot plate set to 65-70 °C.
- NICD (Johannesburg, South Africa) used Auramine O (REF: SS-061CA) as the primary stain and potassium permanganate (REF: SS-061BP) as the counter stain. They used the 30-slide carousel for the staining. Samples were prepared with **sputum digested** with NALC (N-acetyl-L-cysteine) and Sodium Hydroxide (NaOH). Slides were made in duplicate. The slides were fixed by putting the slides in an incubator set at 75 °C overnight.

Results

There were no noticeable trends between the different staining methods used. The data from the three tests sites were combined in the following table. Out of a total of 519 samples tested, 83 of those were positive

and 436 were negative samples. There was one false positive and one false negative reported, which means 99.6% (517/519) of the samples tested were diagnosed as negative or positive correctly.

Number of Slides and Corresponding Rating for Slides Stained with 7722 Stainer

Slide Rating	Number of Slides Stained with Manual Methods	Negative	Rare	1+	2+	3+
Negative	436	435	0	0	0	1
Rare	23	0	17	5	1	0
1+	16	0	4	8	4	0
2+	20	1	1	7	10	1
3+	24	0	0	1	6	17
Total	519	436	22	21	21	19

Table 2: Results of sample slides stained at the three laboratories. The samples were clinical samples used to prepare microscope slides. Slides were prepared in duplicate from each sample. One slide was stained by manual methods and the duplicate was stained using the Aerospray TB (Model 7722). The slide were rated independently. The ratings are displayed in this table.

Conclusion

Although there are some minor discrepancies in slide ratings between the Aerospray TB stainer and manual staining methods the overall results of the two methods correspond well. These data are consistent with expected results when comparing slides from the same sample. The three test sites have implemented the use of the Aerospray TB (Model 7722) in their labs for routine samples suspected of TB. The three test sites used slightly different sample preparation and/or stain protocols, but the results of their staining proved that the Aerospray stainer stains the slides the same or close to the same as manual staining techniques.

Acknowledgements

- Annelies DE BEL and Danny CNUUDE at UZ Brussel (Brussels Belgium).
- Elizabeth SHIPIKI at NIP (Windhoek, Namibia)
- Zaharia MEBENA at NICD (Johannesburg, South Africa)

References

1. WHO Media Centre. "Tuberculosis Fact Sheet No104". World Health Organization March 2014. Web 16 June 2014. <http://www.who.int/mediacentre/factsheets/fs104/en/>
2. CLSI. Laboratory Detection and Identification of Mycobacteria; Approved Guideline. CLSI document M48-A. Wayne, PA: Clinical and Laboratory Standards Institute; 2008.
3. Kantor IN, Kim SJ, Frieden T, et al. Laboratory services in tuberculosis control Part II: Microscopy. World Health Organization. 1998.
4. Saceanu et al., Evaluation of Sputum Smears Concentrated by Cyto centrifugation for Detection of Acid-Fast Bacilli. J. Clin. Microbiol Sept. 1993, p. 2371-2374 Vol. 31, No. 9.

© ELITechGroup 2014
60-0040-01A

TBWh.NOV14-9

Please contact your sales representative for product availability in your country.

WORLDWIDE OFFICES

Headquarters

Australia T: +33 1 41 45 07 13
 Benelux T: +61 1800 815 098
 Brazil T: +31 313 430 574
 France T: +55 27 3025 1415
 Italy T: +33 4 83 36 10 82
 Middle East & Africa T: +39 02 48 40 35 42
 T: +971 4 375 2744

New Zealand
 Serbia
 Switzerland
 The Netherlands
 UK
 United States

T: +64 800 555 611
 T: +381 11 2467119
 T: +41 26 663 86 60
 T: +31 313 430574
 T: +44 1442 869320
 T: +1 435 752 6011