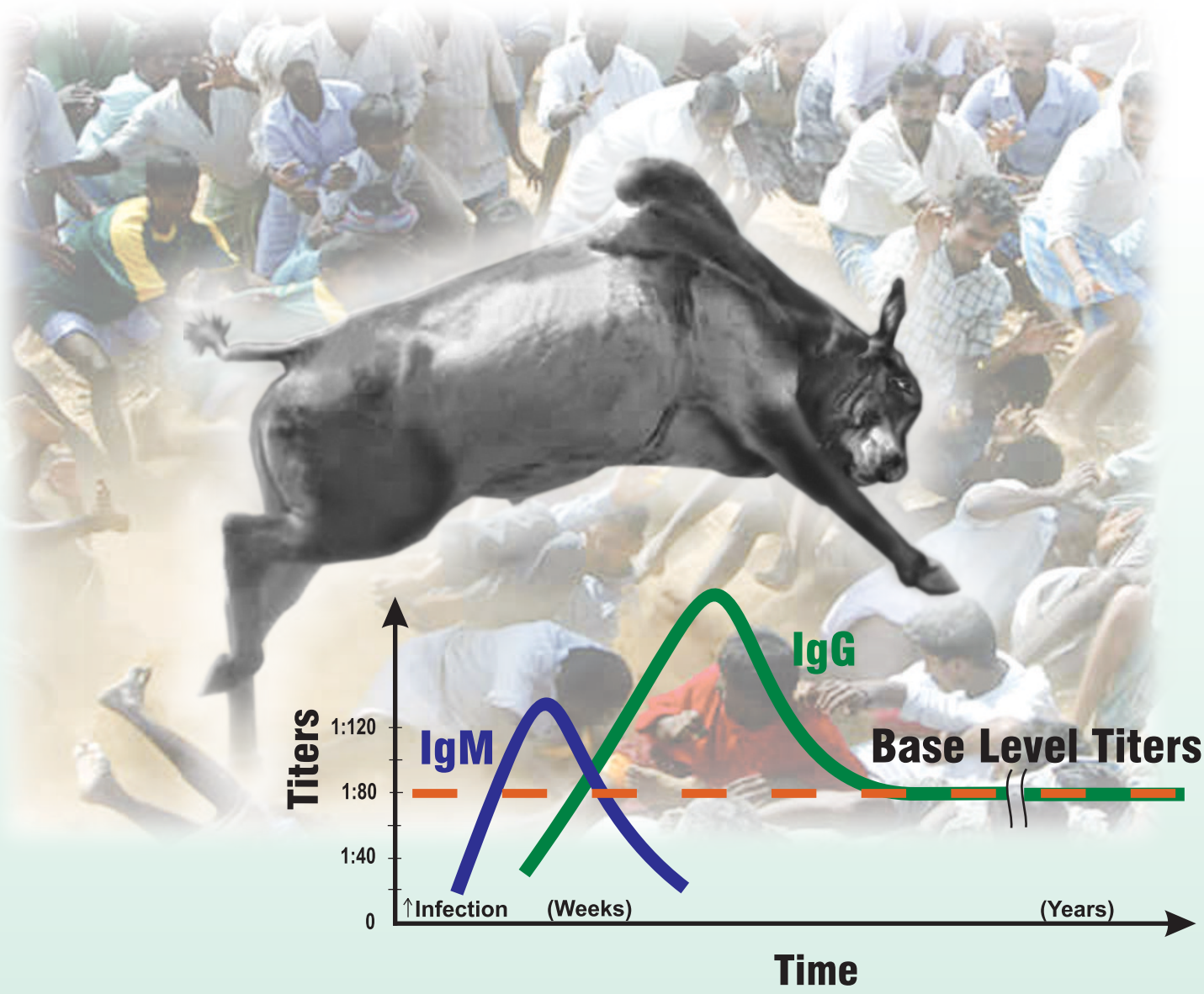
Base Level Titers...



During Enteric Fever, initially IgM class of antibodies are formed against the Lipopolysaccharide (LPS) 'O' and protein flagellar 'H' antigens of *S. typhi*, which wean away and are replaced by corresponding IgG class of antibodies. The IgG class of antibodies peak later and even after resolution of the infection, they remain elevated for years; which is referred to as **base level titers**. In typhoid endemic regions, the sera of majority of the population usually contains base level titers of variably elevated *S. typhi* specific IgG class antibodies. Widal test when performed on a stat mode is reactive with these base level titers.

...create HAVOC in Typhoid Serodiagnosis

ENTEROCHECK-WB

Rapid test for the detection of IgM antibodies to *S. typhi*

Ideally, the Widal test should use the tube technique with paired serum being tested one week apart. Even using this technique, however specificity and sensitivity of ~ 81% and 55% respectively, with a low negative predictive value of ~ 40% have been reported*. Delay in turn around time using the standard tube technique has persuaded most users to perform the Widal test in the stat mode.

- The Widal stat test does not differentiate positivity associated with antibodies produced due to current ongoing infection and base level titers due to past exposure / infection of *S. typhi*.
- Since IgM class of *S. typhi* specific antibodies are formed early and only in an ongoing infection, their detection can serve as a more sensitive marker for the early and accurate diagnosis of current *S. typhi* infection.

ENTEROCHECK-WB is a rapid immunochromatographic test for specific detection of **IgM class of antibodies** in human serum / plasma / whole blood. The test has high practical applications in specific detection of typhoid fever, confirming Widal results, in febrile related pediatric cases and as an adjunct to culture methods.

Specific IgM antibodies to *S.typhi* can be detected – ***S.typhi*** **'O' specific LPS (Lipopolysaccharide) antigen used in capture region.**

Suitable for pediatric patients, for whom sample collection is a critical issue – **only 5µl sample is required. Even finger prick sample can be used.**

Test can be used even in point of care place – **whole blood can be used as specimen. Simple two steps test. Room temperature storage.**

No paired sera testing required – **Detects only IgM class of antibodies. Sensitive detection than widal & other rapid test – LPS antigen used in test system.**

Sensitive detection capacity – **LPS antigen used in test system. (IgM antibodies develop first against LPS antigen in typhoid seroresponse)**

Reliable results – **100% sensitivity and 97.7% specificity.**

Evaluation	In - house	Inter-assay precision	Intra-assay precision	International evaluation	External evaluation (specificity studies)	Overall performance
Sensitivity	100%	100% correlation with blood culture positive sera	100% correlation with blood culture positive sera	79.3%	Not applicable	85.36%
Specificity	97.7%			90.2%	100%	95.83%

*Zulfiqar Ahmed Bhutta and Naseem Mansurali; Rapid serologic diagnosis of Pediatric typhoid fever in an endemic area: A prospective comparative evaluation of two dot-enzyme immunoassays and the Widal test.; Am. J. Trop. Med. Hyg; 61(4), 1999, pp.654-657.

ISO 13485 Certified Company

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ENTEROCHECK-WB Detects the CASE, despite the BASE.