# Cholera Detection RDT to RDCT

Ankur Mutreja



GTFCC\_29062022

## **Project Partners**



Research

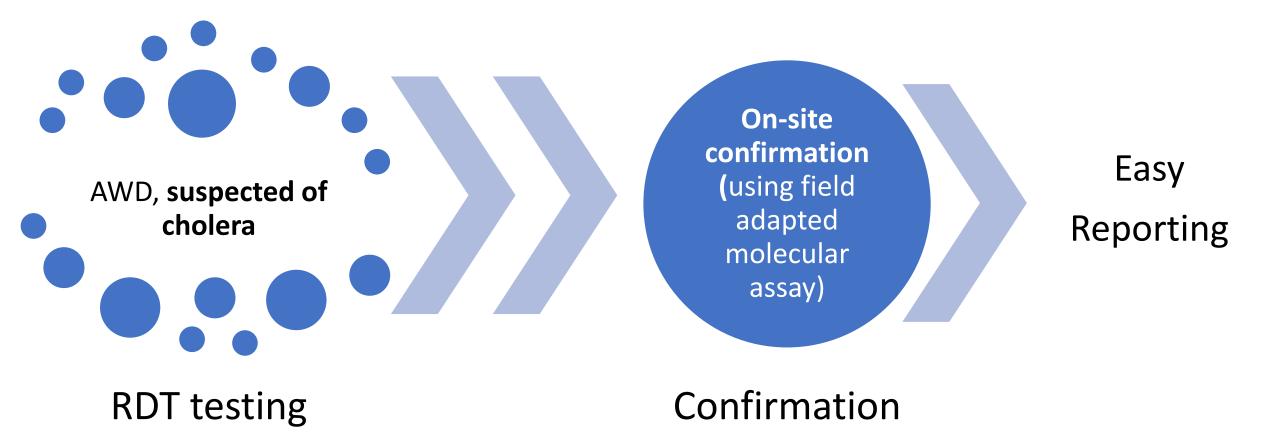
### **Rapid Detection Test**

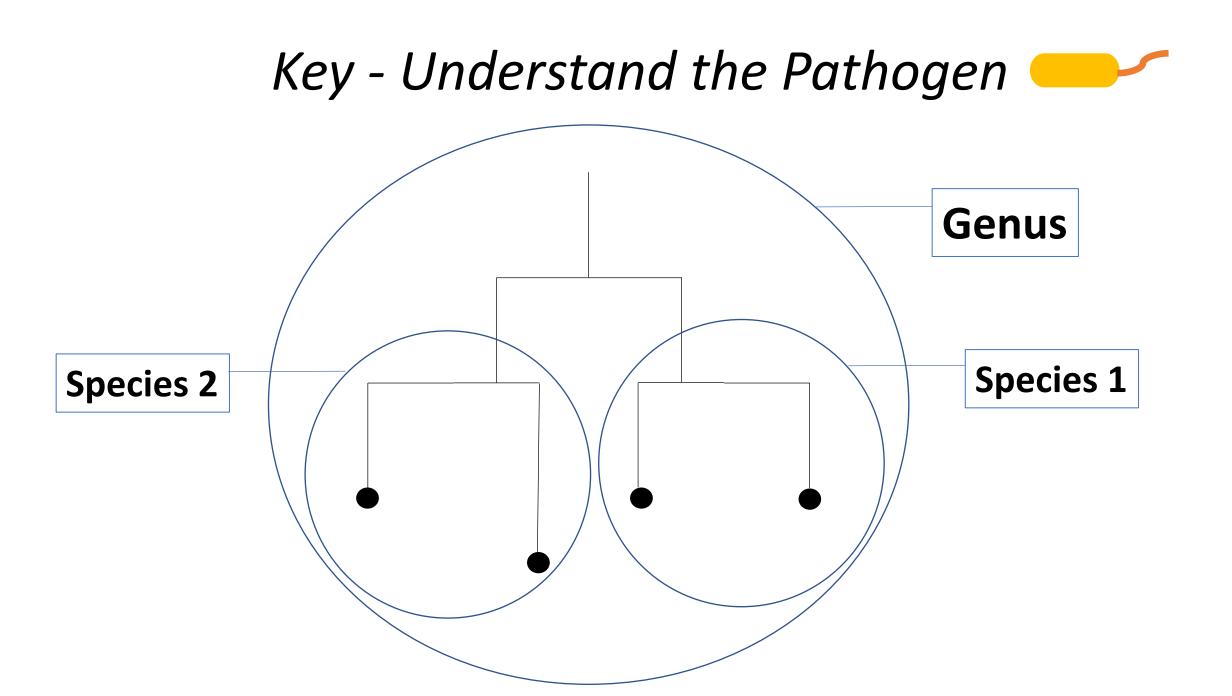
or

### **Rapid Detection Confirmatory Test**

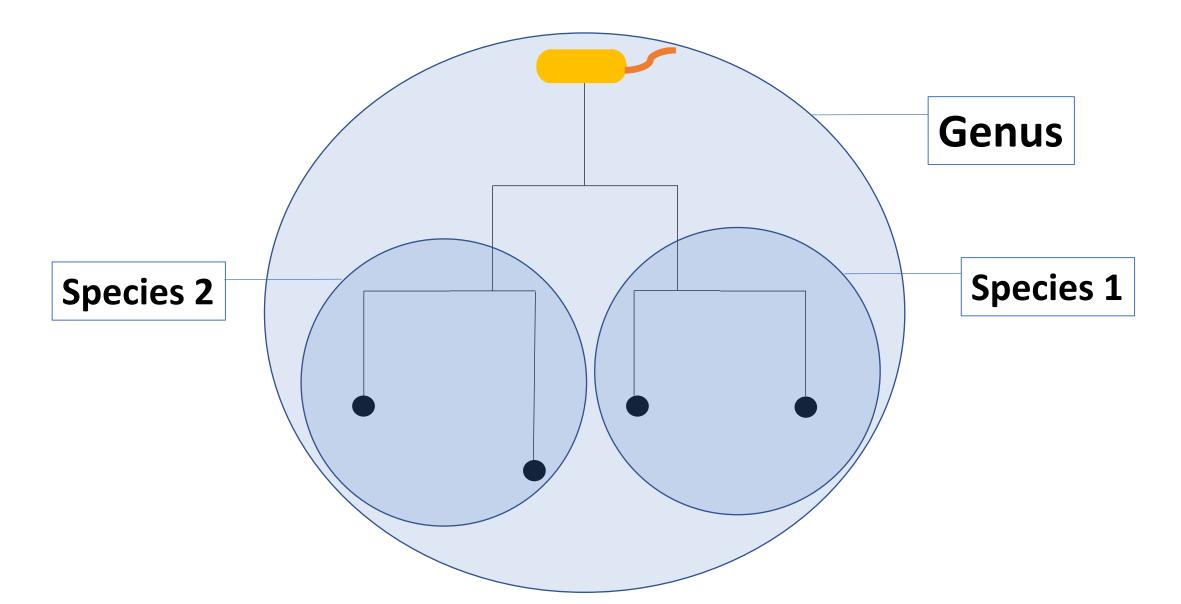
# The process - how it is today AWD, suspected Reference Reporting of cholera Lab Confirmation **RDT** testing

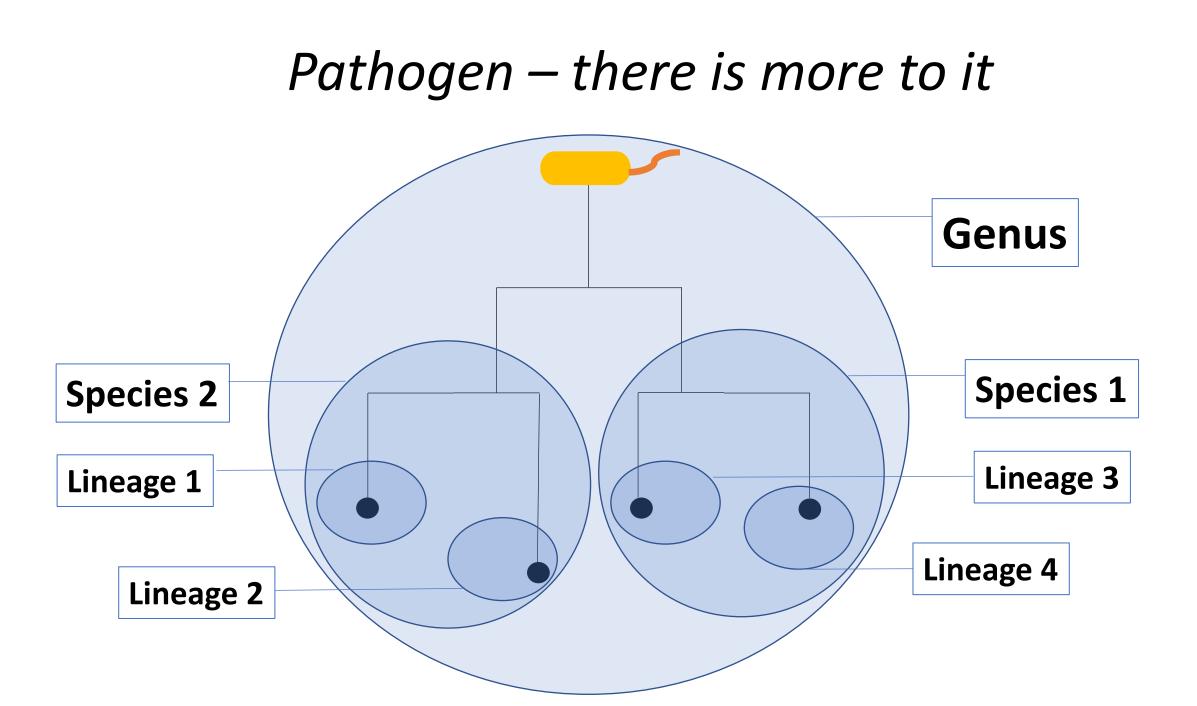
## The process - how it should be

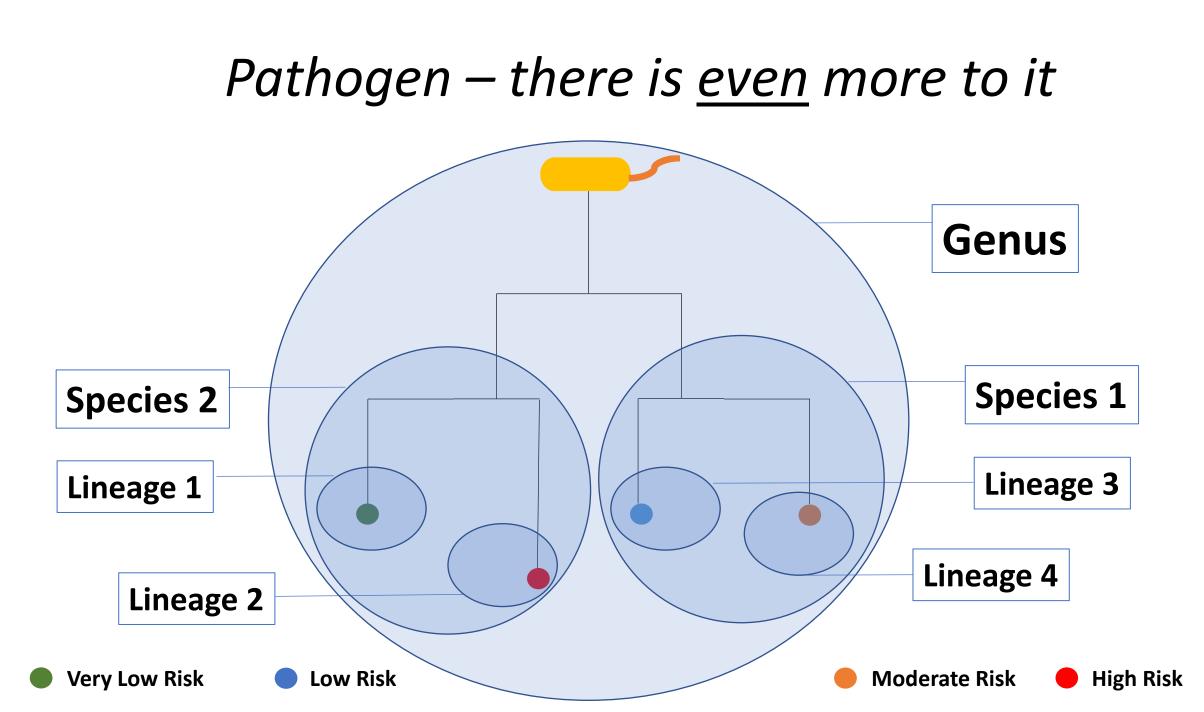




### Pathogen – as detected by current molecular tests







# Sensitivity and Specificity

- Sensitivity as high as possible better than current antibody dipstick tests
- Specificity 100% should be the mandate

## Actionable Outcome

- One test confirming or rejecting the disease
- No need for further culture confirmation
- Generate reliable results that are easy to communicate/share
- Advises vaccine programs/drives

## Cost

• As low as possible without compromising on quality

# Speed

- As fast as possible ideally in a couple of hours before the camp set up is folded for the day
- Data communication speed very important

# Portability and Deployability

- Should be easy to stockpile
- Should be easy to deploy on an urgent basis
- Reasonable shelf life
- Thermostability
- PHCs (in India) or equivalent one PHC per 30,000 population
  - Each PHC has 5-6 sub centres for easy accessibility
- Alignment with surveillance (both clinical and environmental)
- Alignment with WASH and vaccination programs
- AC power independent

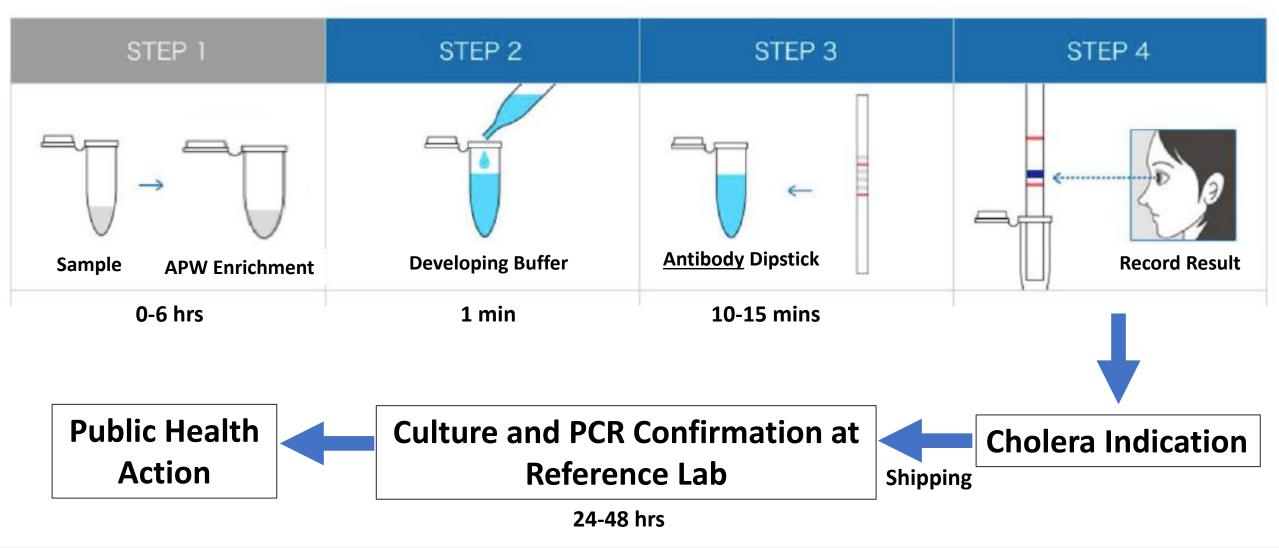
# Skill set

- Requirement of minimum training
- Easy to follow universal language SOPs
- Video based guide(s) for process flow and troubleshooting

# Disposal of kits and contents

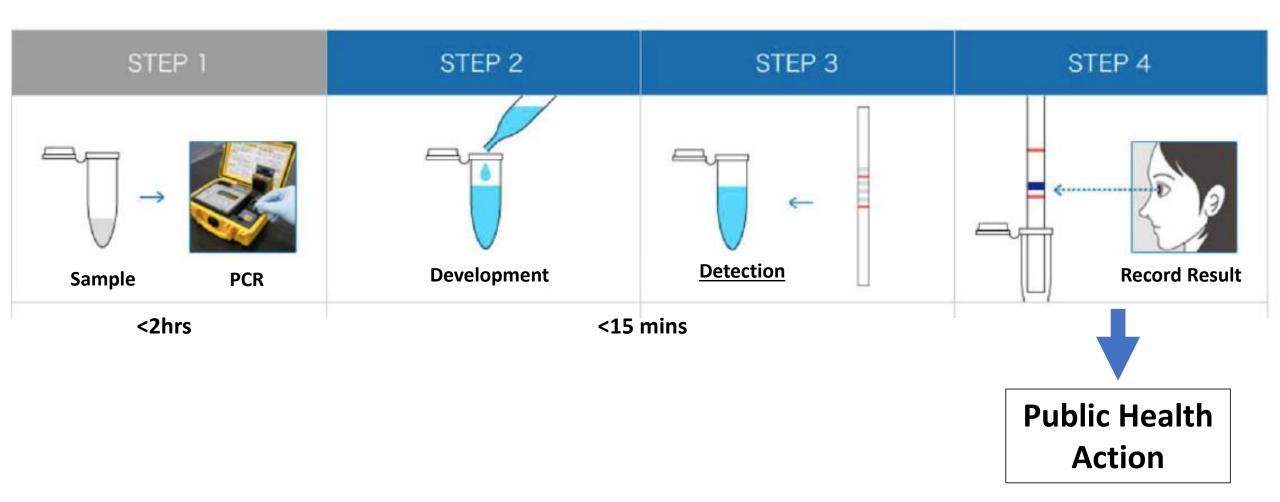
- Health risk free disposal on site or off site
- Easy defusal
- No amplification of actual bacteria (the problem pathogen)

## Process of current RDTs



### Sample to Actionable Result in 24-48 hours

## Our Process



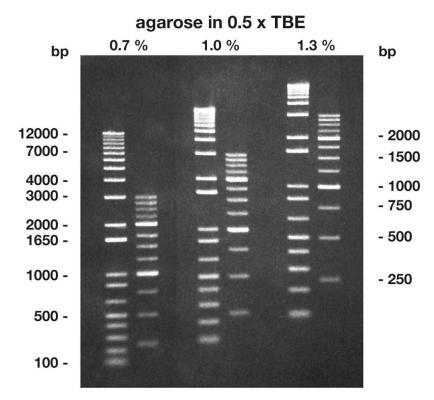
Sample to Actionable Result in less than 4 hours

## Two key laboratory technologies

#### **Traditional PCR**



#### **Electrophoretic Gel Detection**

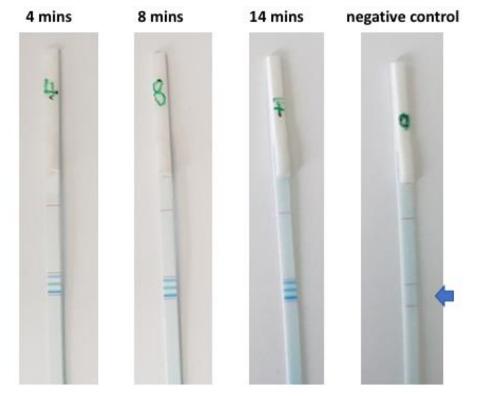


## Replaced by

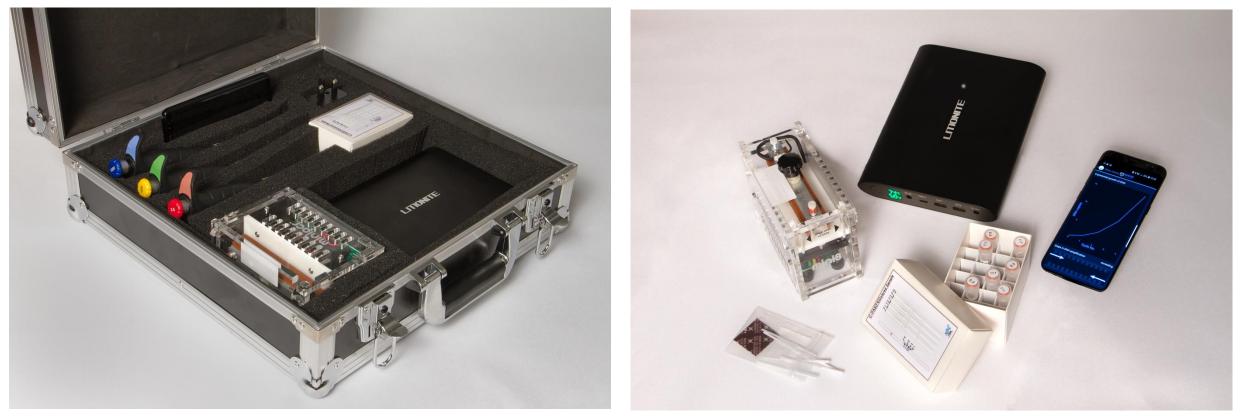
#### **Portable PCR (Battery Operated)**



### **Molecular Detection Strips**



## Portable Kit case



Field ready package

Package components

Portable rechargeable battery; Portable PCR machine; Multiplexed detection strips and lyophilized reagents; Mobile phone; Up to 5 PCR runs per full battery charge; Screen 16 samples (including controls) per PCR run; Detect 3 targets per strip

### Key Cholera Targets Optimised on Portable Tech



#### DIAGNOSTIC PRODUCT SPECIFICATIONS TPP CHOLERA

TARGET POPULATION GROUP/PATIENT:

Patients clinically suspect of cholera

HEALTH FACILITY WHERE THE TEST WILL BE USED:

Primary health care level with no access to standard laboratory facility or settings and no access to electricity. Community settings outside health facilities where cholera outbreak is suspected

ATTRIBUTES definitions	DESIRED	ACCEPTABLE
Priority features		
Intended use of the test	Early detection, declaration, and monitoring of outbreak without need for cholera confirmation First intention test to be used on a predefined number of cholera suspect cases	Test to declare a cholera alert, to be confirmed by culture and/or PCR



**Only Molecular Test can achieve this** 

## **Funding Partners**







