Specification

Product Name	AFIAS IGRA-TB				
Assay type	TRF-LFA				
Sample type	Plasma (available Lithium Heparin only)				
Sample volume	100 µL				
Reaction time	15 min				
Storage	2-30℃ (up to 20 months)				
Platform	AFIAS-10				

AFIAS ----

Ordering Information

AFIAS-10 Instrument	56398	Unit
AFIAS IGRA-TB	56618	24 tests/box
AFIAS IGRA-TB TUBE	56915	24 tests/box
IGRA-TB QC	56817	Unit

*Nil, TB-Ag, & Mitogen tubes are 8 each

IGRA-TB control is traceable to 1st WHO International standard (human IFN-r, #Gg 23-901-530); Not included.

Test procedures



All-in-One cartridge for AFIAS platform

- All the reagents for assay contained
- Over 50 test parameters
- Ready-to-use cartridge

AFIAS-10 can provide

- Convenient testing procedure to users
- High throughput results with various parameters
- Multi testing performance
- Prompt result derived from medical decision
- Quick transmission of medical information

Specifications

Model	AFIAS-10
Ordering Information	56398
Dimensions	426 x 443 x 39
Weight	20 kg
Analyzer Input	100~240V AC,
User Interface	10.1" TFT LCD 1
Data Output	Internal Printer
Operating Temperature	15–35 ℃
Connectivity	 RS232C 3 USB port 1 mini USB port

References

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- 4) The potential impact of the covid-19 response on tuberculosis in high-burden countries: A modeling analysis (WHO World Stop TB report, May 6, 2020) http://www.stoptb.org/assets/documents/news/Modeling%20Report_1%20May%202020_FINAL.pdf
- 5) Aznar ML et. al., Impact of the COVID-19 pandemic on tuberculosis management in Spain (2021). Int J Infect Dis. 108:300. doi: 10.1016/j.ijid.2021.04.075. PMID: 33930543
- 6) Saunders MJ and Evans CA. COVID-19, tuberculosis and poverty: preventing a perfect storm (2020). Eur Respir J. 56:2001348. PMID: 32444399. doi:10.1183/ 13993003.01348-2020
- 7) Gopalaswamy R and Subbian S. Corticosteroids for COVID-19 Therapy: Potential Implications on Tuberculosis (2021). Int J Mol Sci. 22: 3773. doi: 10.3390/ijms22073773, PMID: 33917321
- 8) Chan Y et. al., Active or latent tuberculosis increases susceptibility to COVID-19 and disease severity (2020). medRxiv. doi: https://doi.org/10.1101/2020.03.10.20033795
- 9) Mack U et. al., LTBI: latent tuberculosis infection or lasting immune responses to M. tuberculosis? A TBNET consensus statement (2009). Eur Respir J. ;33: 956-73. doi: 10.1183/09031936.00120908. PMID: 19407047.





95 mm

50/60Hz, 2.6-1.0 A

touch screen

r / RS232 port

 LAN port SD card slot

oort

2) Gopalaswamy R and Subbian S. Corticosteroids for COVID-19 Therapy: Potential Implications on Tuberculosis (2021). Int J Mol Sci. 22: 3773. doi: 10.3390/



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AFIAS IGRA-TB Novel Laboratory test for Latent TB Diagnosis

Innovative technological advance

Fluorescent Immunoassay based on lateral flow.

- Objective Unlike TB skin test, AFIAS IGRA-TB is a controlled and objective assay.
- Single visit test AFIAS IGRA-TB requires only one visit for patient.
- Effective in BCG-vaccinated patients Unaffected by BCG vaccination.
- On-demand testing 1 patient, 1 test, 1 result
- Ready-to-use reagents



AFIAS IGRA-TB

Affordable and Accessible Test for Latent TB diagnosis

TB Disease: Only the Tip of the Iceberg^[1]

Tuberculosis (TB) is the leading cause of death from a single infectious disease worldwide to the extent that WHO recommends the development of cost-effective diagnostics to eradicate latent TB (90%, undiagnosable), which underlies active TB (10%, diagnosable).



Current TB can increase COVID-19 mortality^[2]



Latent TB Potential risk The current COVID-19 pandemic has collapsed near the 80% of global control for tuberculosis (TB), and the fatal risk of TB outbreak and **co-infection** with COVID-19 will act as a global double burden.



TB increased the risk of COVID-19 more than 1,5-fold, even in those who had recovered from TB already compared to 2.7-fold in current TB. [3]

In the COVID-19 pandemic, children will be the biggest victims of respiratory infections and tuberculosis.

How the COVID-19 Pandemic Exacerbates the Tuberculosis Outbreak ; dual burden of TB & COVID-19^[4-8]

- Public health & socioeconomic exhaustion
- Promote reactivation of latent TB to active TB
- The collapse of essential TB treatment & services
- Significant increase in the biological and clinical risk of co-infection
- Misdiagnosis or missing the one of the infections in coinfection cases of COVID-19 and tuberculosis

Comparisons of IGRA tests for diagnosis of Latent TB

Despite the improved performances compared to the Tuberculin skin test (TST), current IGRA tests are cumbersome, inefficient, and uneconomical.^[9]

	TCT *	IGRA tests			
	151 *	ELISpot	ELISA	RDT (Fluorescent-LFIA)	
Commercial products	-	Competitor A	Competitor B	AFIAS IGRA-TB	
Standard curve for Calibration	alibration None Yes Yes		No needed presaved in ID-chip		
Test substrate	Skin	Purified PBMC	Whole blood	Whole blood	
Time required Incubation (CMI)	72 b	~20 h	~24 h	~24 h	
Time required for Result (IGRA)		4 h	2~3 h	15 min	
Result (units)	mm (milimeters)	IFN-r spot forming cells	IU/mL	IU/mL	
Equipment	None	ELISpot reader	ELISA reader	AFIAS platform	
Performance	Very low sensitivity and specificity	Sensitivity > ELISA	Specificity > ELISpot	Comparable to ELISA	
Requirement of trained Staff (proficiency)	★ Highly trained	★ Highly trained	★★ trained	**** Anyone	
Storage condition	2~8℃ (cold chain)	2~8°C (cold chain)	2~8°C (cold chain)	2~30°C (20 Months)	
Price/test	★★★★ Affordable (about 1/10 of ELISA)	★★ Expensive	★ Very expensive	**** Cost-efficient	

AFIAS IGRA-TB

Cost-efficient Lab test for Latent TB Diagnosis

All-inclusive kit & No hidden cost

The **AFIAS IGRA-TB** with standardized and faster results, offers a solution easy to use for laboratories.



Affordable and Accessible Test for Latent TB diagnosis





Without consuming

calibration process



Quick results in 15 min

With IGRA in the same mechanism (CMI) as before



* Tuberculin skin test (TST)