

Standardisation of CMV quantification with the CMV R-gene™ kit and the WHO International Standard

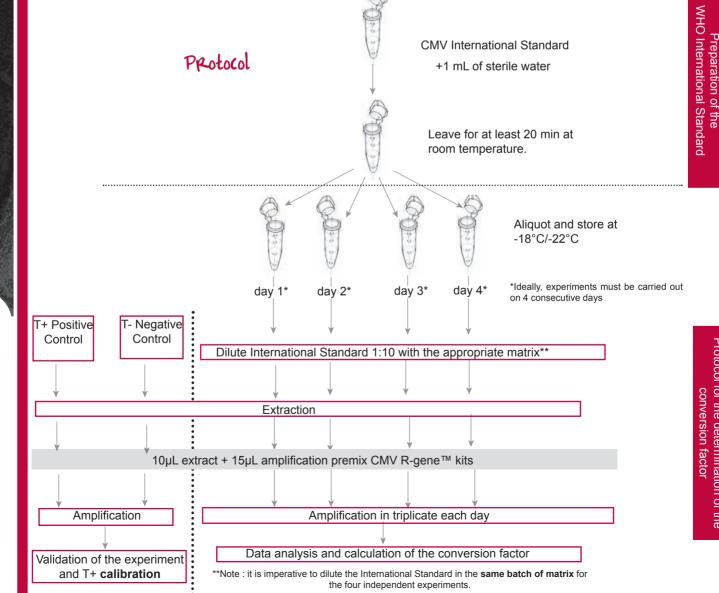
The first WHO (World Health Organisation) International Standard for human CMV is now

This product is available via the National Institute for Biological Standards and Control (NIBSC product code: 09/162). This international standard is intended to be used for the standardisation of quantifications obtained with nucleic acid amplification assays.

This International Standard has been assigned a value of 5x10⁶ International Units/mL (IU/mL) by the NIBSC.

The results obtained with CMV R-gene™ (bioMérieux ref. : 69-003B) and CMV HHV6.7.8 R-gene™ (bioMérieux ref.: 69-100B), which are reported in copies/mL, can be converted into International Units/mL (IU/mL) by using a conversion factor that is specific to the matrix (whole blood, plasma, etc...) and the combination of extraction/amplification platforms.

In this leaflet, we supply a protocol to define the conversion factor for the combination of CMV R-gene™, extraction/amplification platforms and the chosen matrix.



Data analysis and calculation of the conversion factor:

ARGENE provides an excel file to calculate the conversion factor.

The mean value is determined with the 12 results (corresponding to the 3 quantifications performed on 4 consecutive days), obtained with **CMV** R-geneTM or **CMV** HHV6,7,8 R-geneTM.

Glossary

Conversion factor : Factor to convert quantification results from copies/mL to International Units/mL.

The Conversion Factor can only be validated if the deviation of the 12 individually measured values is less than 0,5 log compared to the mean value.

If 2 or more values do not meet these criteria, we recommand to repeat the experiment.

In this case, the conversion factor is calculated as follows:

Conversion Factor = value of International Standard (IU/mL)* / Mean value of Argene quantifications (cp/mL)

This conversion factor allows the conversion of results obtained with **CMV** R-gene[™] and **CMV** HHV6,7,8 R-gene[™] kits (copies/mL) into International Units/mL.

Example

Kit: CMV R-gene™ **Matrix**: whole blood

Extraction: NucliSENS® easyMAG® whole blood specific B Protocol 200/100

Amplification: ABI 7500 Fast

CMV R-gene™ CMV HHV6,7,8 R-gene™

Grey cells must be modified

Ref.: 69-003B Ref.: 69-100B Argene 🌑

Calculation of a conversion factor to express a CMV viral load in International Units (IU/mL)

Kit: Completype: V

CMV R-gene¹¹ Whole Blood

Extraction: easyMAG whole blood Specific B 200/100
Amplification: ABI 7500Fast

International Standard (5E+06 UI/mL) diluted 1:10 (5E+05 UI/mL)

	89	Argene CMV Quantification (copies/mL)	log	
	Day 1	4,50E+05	5,65	VALIDATED
		3,29E+05	5,52	VALIDATED
		3,22E+05	5,51	VALIDATED
	Day 2	2,88E+05	5,46	VALIDATED
		2,56E+05	5,41	VALIDATED
		3,44E+05	5,54	VALIDATED
	Day 3	2,75E+05	5,44	VALIDATED
		3,37E+05	5,53	VALIDATED
		3,56E+05	5,55	VALIDATED
		2,23E+05	5,35	VALIDATED
	Day 4	2,26E+05	5,35	VALIDATED
		2,94E+05	5,47	VALIDATED

Mean value 3,08E+05 5,49

Theoratical value for the International Standard / Average Argene of 1,622

International standard diluted 1:10 is quantified at **3.08x10⁵ copies/mL** with **CMV R-gene™** for a theorical value of 5x10⁵ (dilution 1:10 of a commercial stock solution determined by the NIBSC at 5x10⁶ Ul/mL).

The conversion factor equals $(5x10^5)/(3.08x10^5) = 1.622$ for the combination whole blood / easyMAG/ ABI7500Fast / CMV R-gene.

<u>Practical example:</u> A whole blood sample from a patient has been extracted on NucliSENS® easyMAG® and amplified on ABI7500Fast.

The CMV viral load, determined with **CMV** R-geneTM, is quantified at 20 000 copies/mL. Hence, this quantification is equivalent to **1.622** x 20 000 = 32 440 UI/mL.

Conclusion

Thanks to the conversion factor, determined for each combination and matrix, the results obtained with nucleic acid amplification techniques can be **standardised**. The use of an internationally recognized standard allows to define the limits of sensitivity between different techniques and to **compare results of one patient** during follow-up at 2 different sites. Finally, this tool is a reference that may contribute to the development of quantification standards.

^{*} Take into account the 1:10 dilution factor applied to the international standard before extraction