

**Improving patient care  
through Gene-Drive for HCV  
results available in 24hrs.**

**BY Dr F Ntaganda**

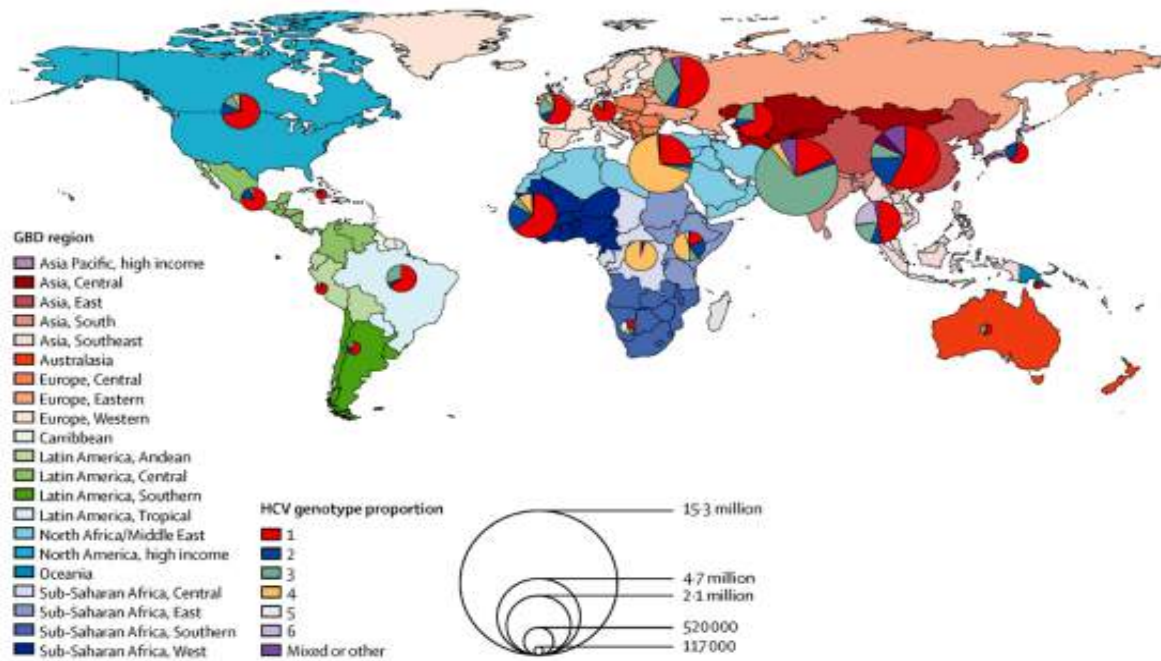
**Lt Col**

**Dir Pathology**

# History and HCV burden

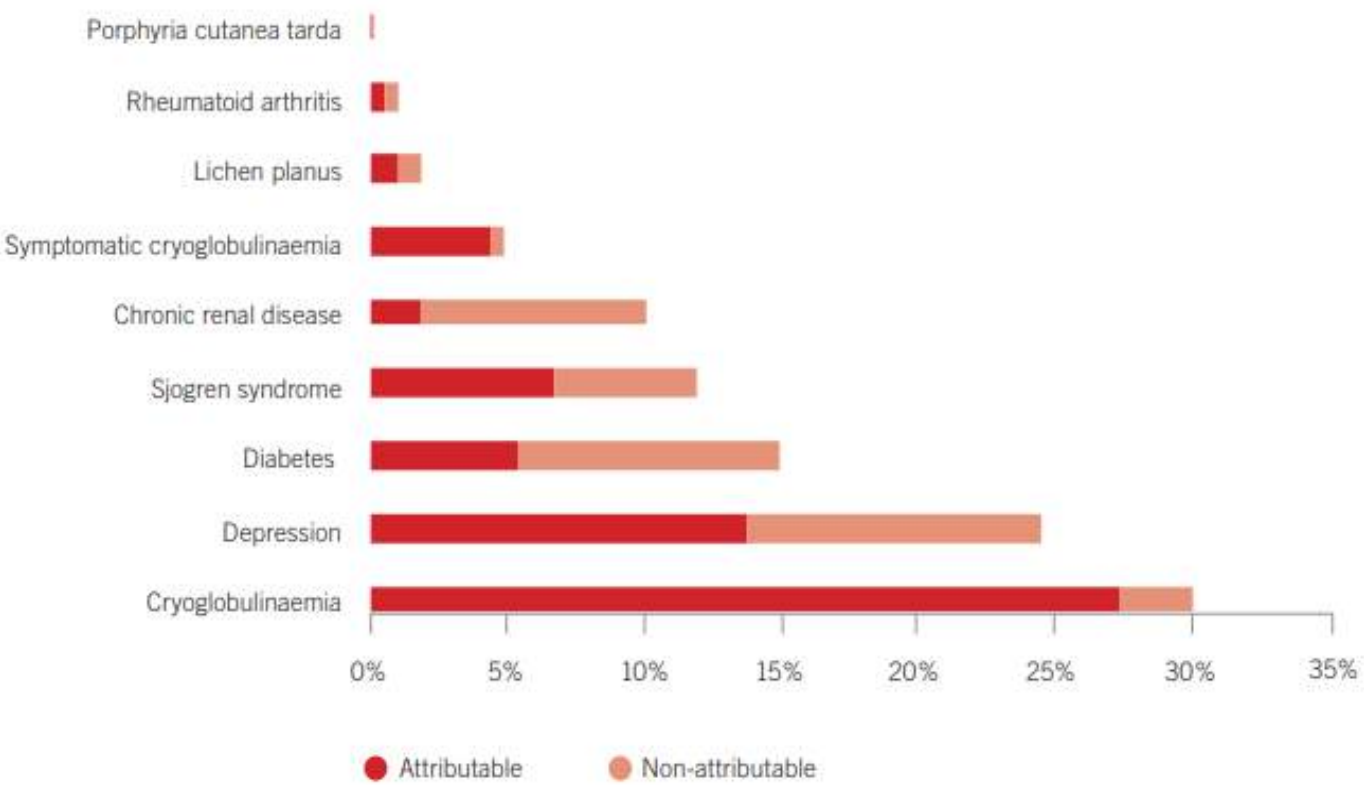
- Discovered in 1989
- The causal relationship between HCV and hepatic cancer has been proven through various case control studies.
- The risk of hepatic cancer is X 23–35
- WHO estimated
  - 2015, 71 million persons infected
  - HCV infection worldwide 1%
  - 399 000 had died from cirrhosis or hepatocellular carcinoma (HCC)
- In 2015 1.75 million new HCV infections occurred

# Worldwide HCV genotype distribution



Source: The Polaris Observatory HCV Collaborators. Global prevalence and genotype distribution of hepatitis C virus infection in 2015: a modelling study. *Lancet Gastroenterol Hepatol.* 2017;2:161–76.  
 Disclaimer: This map is reproduced as originally published.

# Other comorbidities associated with HCV



# Pathology in the current era

- Evolving department
- Testing a big number of people in short period of time
- At a low cost
- With a high precision
- The delay have many implications
  - Disease progression
  - Poor clinical decision
  - Resistance to treatment
  - Cost implication

# What do we know so far

- Recent direct-acting antiviral therapies have provided transformative therapeutic options for chronic hepatitis C virus (HCV) infection, yet the challenge remains to identify the 1% of the world's population that is chronically infected with HCV.
- Current WHO guidelines highlight the lack of quick-based platforms for HCV RNA testing.
- The Cepheid Xpert HCV Viral Load assay (Cepheid) is currently the only In Vitro Diagnostic (IVD)-certified assay for decentralised HCV viral load determination, yet according to the WHO, it presents many limitations.

# Gene drive



# Genedrive Description

**Decentralised testing**  
supported by mains  
power

**Affordable platform**  
facilitates testing in  
low throughput settings

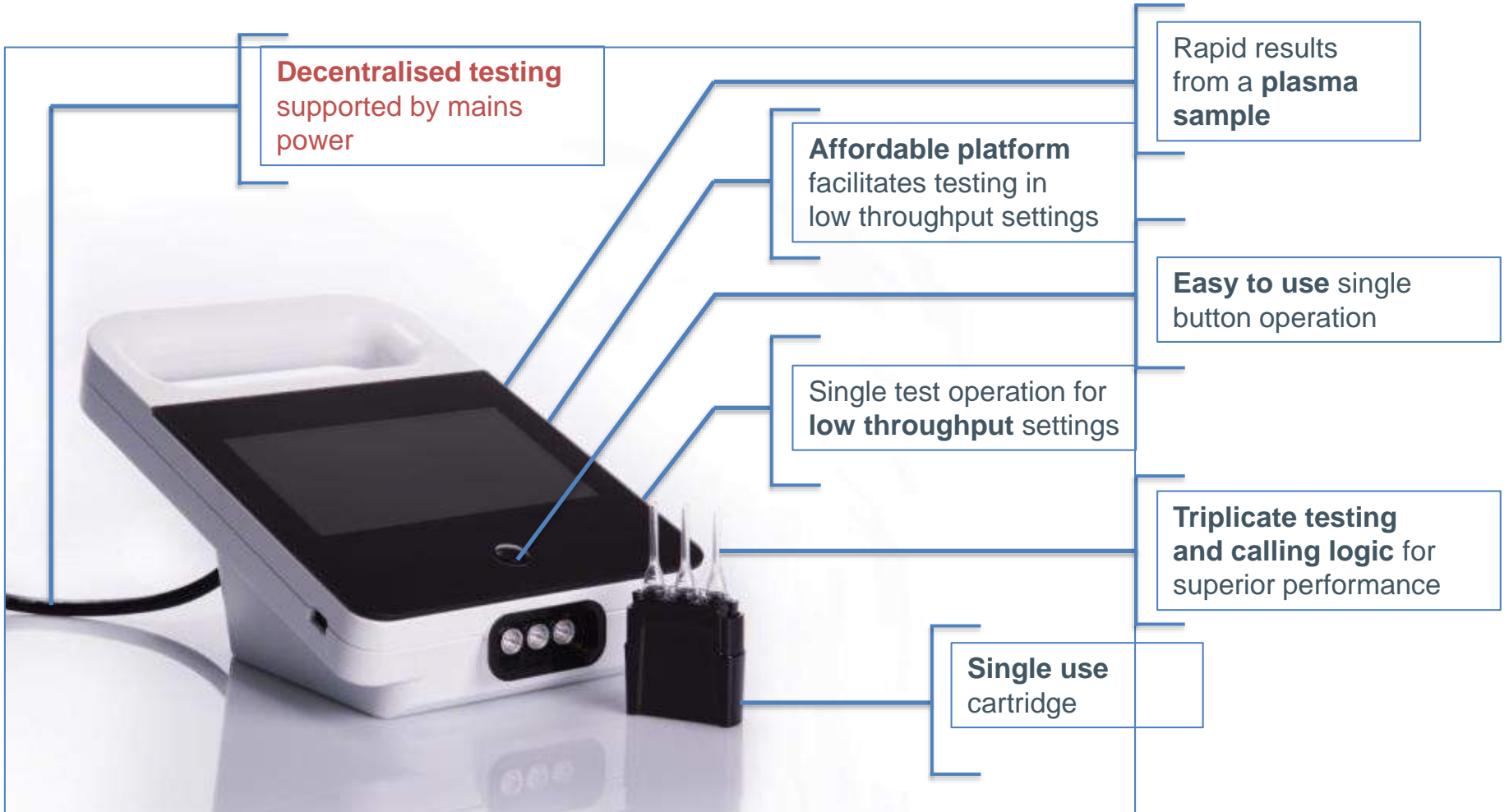
Single test operation for  
**low throughput** settings

Rapid results  
from a **plasma**  
**sample**

**Easy to use** single  
button operation

**Triplicate testing**  
and calling logic for  
superior performance

**Single use**  
cartridge





# Specifications

Parameter	Minimal Spec'	Genedrive HCV
Target Users	Health care workers	✓
Setting Implementation	District Hospitals (II)	✓
Analytical sensitivity	1000 – 3000 IU/ml	✓
Diagnostic sensitivity	>98%	✓ (TBD)
Quantitation	Qualitative	✓
Specimen Type	Venous blood/plasma	✓
Steps	2	~4
Time to result	<60 mins	90 mins
Instrument cost	< 20,000 USD	✓
Assay Cost (price?)	<15 USD	

# Specifications

Technology	Detection of viral RNA by post PCR melt analysis
Time to result	90 minutes
Hands on time	<5 minutes
Sample type	Fresh human whole blood derived plasma in K2 or K3 EDTA anticoagulant
Sample stability	EDTA Whole blood: 6 hours at room temperature (21.5°C – 25.4°C) or 72 hours at 4°C. EDTA plasma : 24 hours at room temperature (25°C) or 4 days at 4°C
Genotypes	Pan-genotypic - 1a, 1b, 2, 3, 4, 5 and 6
Product code	ID-HCV-03
Pack size	10 tests

# Results

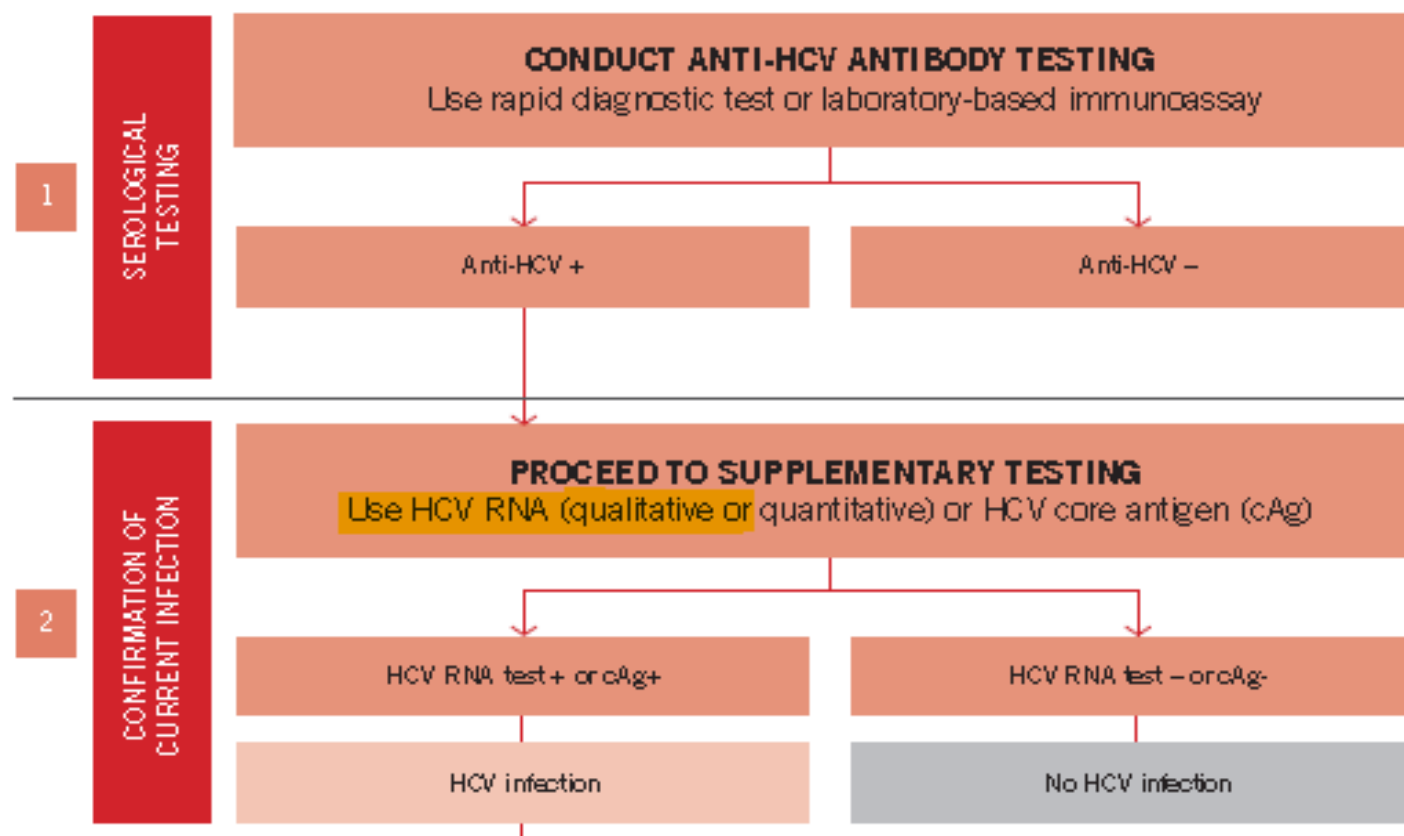
- The results are interpreted automatically by the Genedrive instrument based on the measurement of discrete fluorescent signals produced by each probe.
- With inbuilt IPC control:

# Results

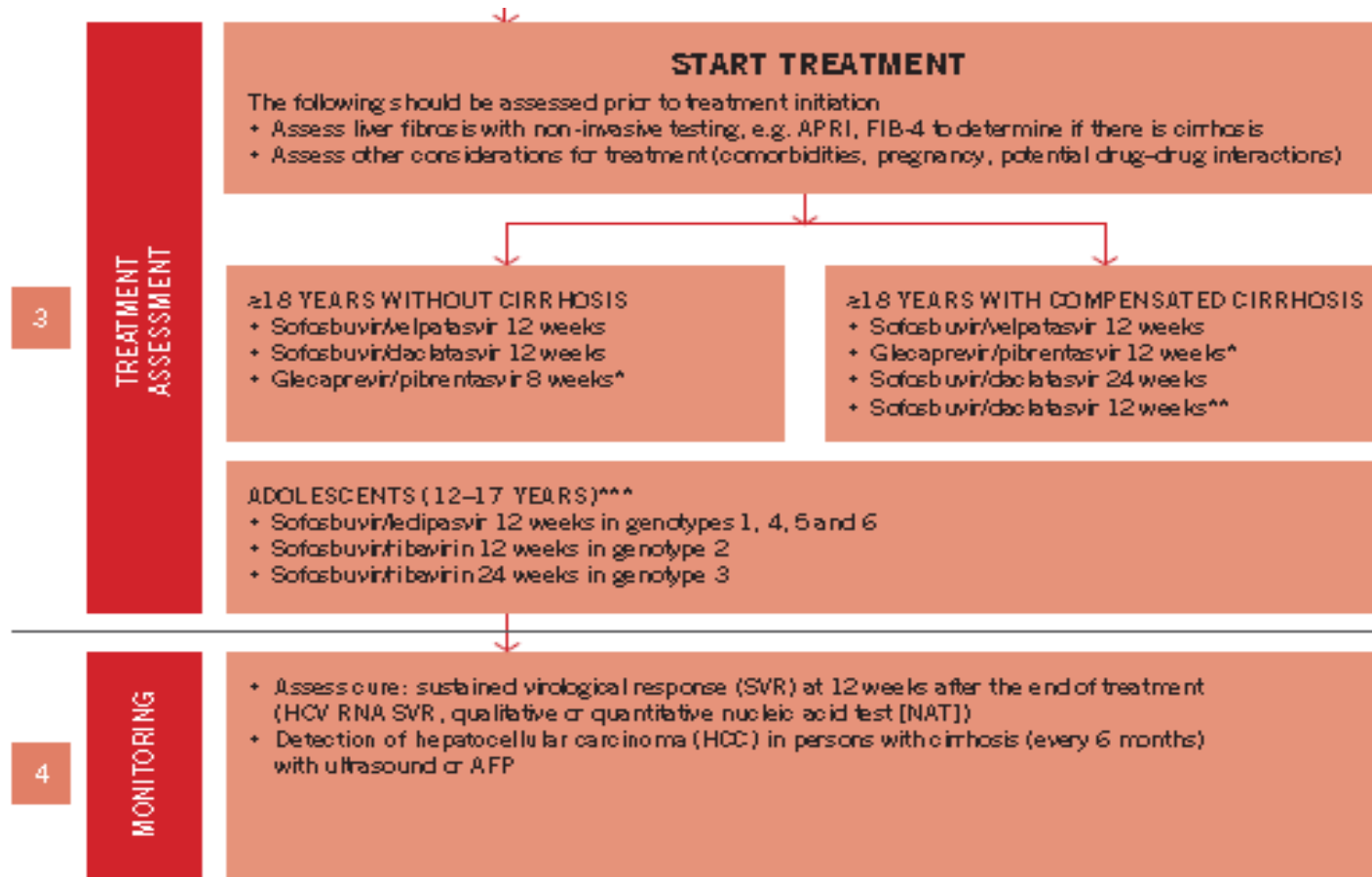
Result	Significance	Result	Significance
Detected, Positive 	Hepatitis C virus has been detected.	Undetected, Negative 	Hepatitis C virus has NOT been detected. The internal positive control has been detected.
Result	Significance	Result	Significance
Indeterminate, Retest 	Hepatitis C virus has been detected in one of the channels, however for confirmation a retest is required.	Control Failed, Retest 	Hepatitis C virus and the internal positive control have not been detected. This may be due to the sample containing PCR inhibitors.

# WHO 2018 Algorithm

Summary algorithm for the diagnosis, treatment and monitoring of chronic HCV infection in adults and adolescents



# WHO 2018 Algorithm



# Performance

## Institut Pasteur and Queen's Medical Centre

Compared to the Abbott RealTime HCV Viral Load Assay the performance of Genedrive HCV ID Kit is presented in the table

**Sensitivity – 98.6%**

**Specificity – 100%**

**Efficiency – 97.2% (899/925)**

n	925
True positive	412
False negative	6
False positive	0
True negative	497
Sensitivity (%)	98.6
Specificity (%)	100
PPV (%)	100
NPV (%)	98.8
Sensitivity CI (%)	96.9% to 99.5%
Specificity CI (%)	99.3% to 100%
PPV CI (%)	N/A
NPV CI (%)	97.4% to 99.5%

# Performance

## Lancet Laboratories - Johannesburg

Compared to the Abbott RealTime HCV Viral Load Assay the performance of Genedrive HCV ID Kit is presented in the table

**Sensitivity – 100%**

**Specificity – 100%**

**Efficiency – 94.3%**

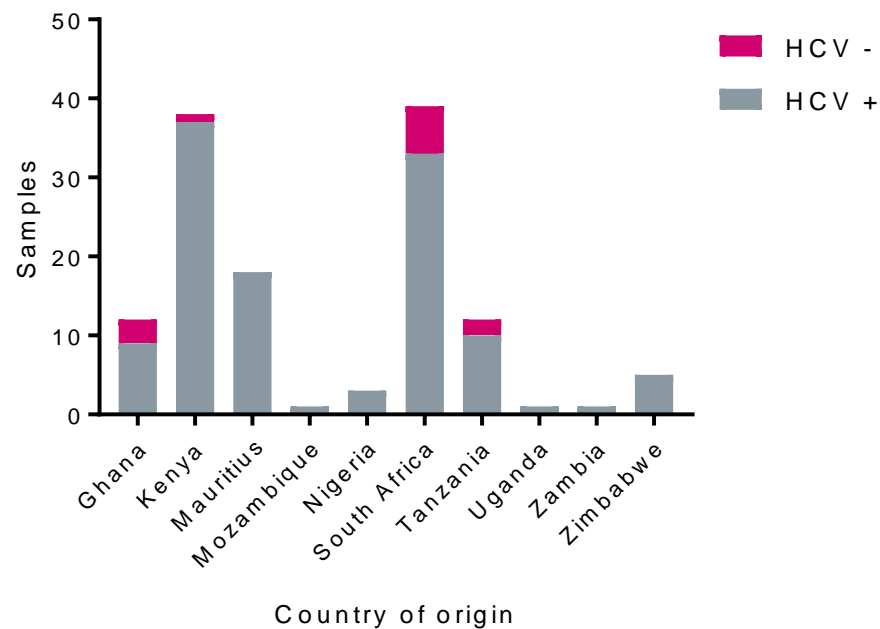
n	126
True positive	114
False negative	0
False positive	0
True negative	12
Sensitivity (%)	100
Specificity (%)	100
PPV (%)	100
NPV (%)	100
Sensitivity CI (%)	96.8 to 100.0
Specificity CI (%)	73.5 to 100.0
PPV CI (%)	N/A
NPV CI (%)	N/A



# Origin of specimens

## Lancet Laboratories - Johannesburg

Country	HCV +	HCV -	Total	%
Ghana	9	3	12	9.2
Kenya	37	1	38	29.2
Mauritius	18	0	18	13.8
Mozambique	1	0	1	0.8
Nigeria	3	0	3	2.3
South Africa	33	6	39	30
Tanzania	10	2	12	9.2
Uganda	1	0	1	0.8
Zambia	1	0	1	0.8
Zimbabwe	5	0	5	3.8
Grand total	118	12	130	



# Conclusion

Roche	Gene drive
Cost 75,000 frw	Cost 12,000 frw
Time 2 weeks	Time : 1 day
User : easy	User : multiple step
Application : local	Application: remote

# Future direction

- Similar study at RMH
  - Compare findings
  - Cheaper, affordable
  - Quick
  - Reliable