





Comparative evaluation of Carba NP test and of ROSCO Rapid CARB Screen kit for the detection of carbapenemase-producing Enterobacteriaceae

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Introduction

- Rapid detection of carbapenemase in Enterobacteriaceae (EB) is essential for early appropriate therapeutic management and infection control purposes.¹
- The Carba NP test has been recently proposed as a cheap and easy to perform imipenem hydrolysis-based test with high accuracy (sensitivity and specificity) for the detection of carbapenemase-producing Enterobacteriaceae (CPE).

Objectives

- However, the Carba NP test in its current format is an in-house technique requiring purchase of several reagents and home-made preparation of the test solutions (including the addition of imipenem).
- We evaluated here the performance of two imipenem hydrolysis-based rapid tests, the Carba NP test and the commercially available ROSCO Rapid CARB Screen kit for the detection of CPE.

Methods

- Bacterial strains: 100 well-characterized EB collection strains (44 carbapenemase producers and 56 isolates expressing other beta-lactamases) and 135 consecutive clinical EB isolates referred to the national reference center (NRC) from January to March 2013 for suspicion of CPE were tested (**Table 2**). All isolates had been verified for the presence of carbapenemase by multiplex PCR targeting bla_{VIM}, bla_{IMP}, bla_{NDM}, bla_{KPC} and bla_{OXA-48}.²
- Testing methodology: All tested isolates were subcultured twice on TSA blood agar and tested by imipenem hydrolysis using the Carba NP test (CNP) previously described³ and by ROSCO Rapid CARB Screen kit (RCS; Rosco Diagnostica A/S, Taastrup, Denmark) according to the manufacturers instructions (Table 1) using the same culture grown freshly on non selective blood agar. Both tests were read at 30, 60 and 120 minutes of incubation. All isolates were screened for carbapenemase gene by the ISO15189 validated multiplex PCR described above.²
- Reading and data recording: For both tests, any color change observed by naked eyes from red to yellow (four shades of gradation recorded; **Table 1**) in a vial/tube was considered as a positive reaction. The interpretation of test results were as follows:
 - For CNP according to the reference publication³:
 - o The result would be negative if both the test (containing imipenem) and the negative control (without imipenem) vial gave negative reaction (red; score 0)
 - o The result would be positive if the test vial gave a positive reaction (yellow or orange; score 1, 2 or 3) and the control vial negative reaction (score 0)
 - The result would be uninterpretable if the control vial gave positive reaction (score ≥1)
 - For RCS according to the reading instructions provided in the product insert note (document version DBV0040C issued 15/8/2013):
 - o The result would be **negative** if the test (containing imipenem) tube gave negative reaction (**red**; score 0)
 - o The result would be positive if the test tube gave a strong positive reaction (yellow; score 3)
 - When the test tube gave weaker positive reaction (orange; score 1 or 2), according to the negative control (without imipenem) tube :
 the result would be positive if the negative control tube gave negative reaction (score =0)
 - the result would be uninterpretable if the negative control tube gave positive reaction (score ≥1)
- Performance analysis: Sensitivity and specificity of each test was determined by comparing to the results of multiplex PCR targeting carbapenemase on all tested strains. Positive and negative predictive values (PPV and NPV) were calculated for the consecutive isolates referred to the NRC.

Table 1. Operating procedures of Carba NP test and of ROSCO Carb Screen test

Steps	Carba NP test	Rosco Carb Screen test		
Bacterial inoculum	1 full 10-μl loop	Several full 10-μl loops		
Bacterial lysis	30 minutes at 20°C in	100 μl B-PERII (Tris HCl)		
Centrifugation	5 minutes at 10000g	None		
	30 μl of the surnageant in 100 50 μl of the suspensi			
Inoculation	μl solution A ±imipenem 3	physio saline in a tube. Add one		
	mg/ml in a vial.	test (or negative control) disk.		
Incubation / reading	at 37°C up to 2 hours			
Reading score (0 to 3)	Test Control 3 2	Test or control Output Description: Outpu		

Results

Table 2. Species and carbapenemase enzyme distribution of all Enterobacteriaceae isolates tested (n=235)

		Carbapen	emase				
Strains origin	Species	OXA-48	KPC	VIM	NDM	Negative	Total
Collection	K. pneumoniae	7	10	2	3	15	37
	E. coli	2			2	19	23
	E. cloacae	3		4	1	4	12
	K. oxytoca	1		2		4	7
	P. mirabilis					5	5
	C. freundii	1				2	3
	S. marcescens			2		1	3
	M. morganii				2		2
	E. aerogenes					2	2
	C. braakii			1		1	2
	H. alvei					2	2
	E. kobei					1	1
	P. vermicola			1			1
Total Collection		14	10	12	8	56	100
Routine NRC	K. pneumoniae	42	3	1	1	24	71
	E. coli	10			1	10	21
	E. cloacae	2	1	2	2	10	17
	K. oxytoca	3				4	7
	E. aerogenes					8	8
	E. asburiae	1				2	3
	C. freundii			1	1	1	3
	E. kobei	1				2	3
	S. marcescens					1	1
	P. mirabilis					1	1
Total Routine NRC		59	4	4	5	63	135
Total		73	14	16	13	119	235

Table 3. Reading scores of CNP test vial at 30, 60 and 120 minutes of incubation and carbapenemase enzyme distribution for all Enterobacteriaceae isolates tested (n=235)

Score at	Carbapene	mase				
30 min	OXA-48	KPC	VIM	NDM	Negative	Total
Not read		1	1	2	11	15
3		13	14	5		32
2	26		1	2		29
1	20					20
0	27			4	108	139
Total	73	14	16	13	119	235
60 min	OXA-48	KPC	VIM	NDM	Negative	Total
3	1	14	14	7		36
2	55		2	2		59
1	11			4		15
0	6				119	125
Total	73	14	16	13	119	235
120 min	OXA-48	KPC	VIM	NDM	Negative	Total
3	1	13	14	7		35
2	61	1	2	3		67
1	8			3		11
0	3				119	122
Total	73	14	16	13	119	235

Table 5. Interpreted results and the performance of detection of CPE by CNP test and by RCS test for all Enterobacteriaceae isolates tested (n=235)

All isolates				I		
All isolates		CPE Positive	Negative	Total	Sansitivity	Specificity
Total		116	119	235		Specificity
CNP result	Positive	113		113	97%	100%
	Negative	3	119	122		
RCS result	Positive	114	28	142	98%	76%
	Negative	2	91	93		

❖ Of the total 235 strains tested (**Tables 3, 4 and 5**):

from the calculation.

- 113/116 CPE were detected by CNP and 114/116 by RCS thus resulting in sensitivity of 97% and 98% respectively
- All of the 119 carbapenemase-negative strains yielded negative results by CNP and 91/119 by RCS (specificity of 100% and 76% respectively).
- ❖ Among the 135 consecutive clinical isolates referred to the NRC (Table 6):
 - 72 were confirmed as CPE (**Table 2**) including 69 and 70 isolates detected by CNP and by RCS respectively.
 - 2 and 1 OXA-48-producing *K. pneumoniae* isolates were missed by CNP and by RCS respectively; 1 OXA-48-positive *E. coli* gave negative result with both tests.
 - While none of the carbapenemase-negative strain was tested positive by CNP, 21/63 (33%) yielded positive result by RCS.
 - The calculated positive and negative predictive values (PPV and NPV) were therefore of 100% and 95% for CNP respectively, and of 77% and 95% for RCS.
- ❖ While no uninterpretable results were observed with CNP, 21/166 (13%) strains tested with RCS control disk yielded a positive reaction (**Table 7**):
 - Following the reading instructions provided in the RCS insert (see Methods section), of the 79 isolates showing orange results (score 1 or 2) with RCS test disk, 13 (4 CPE and 9 non-CPE) gave positive reaction with the control disk and thus would have the test result be considered uninterpretable.
 No significant change in the corrected sensitivity (98%; 87/89) and specificity (70%; 45/64) was found for the RCS after excluding the uninterpretable results

Table 4. Reading scores of RCS test disk at 30, 60 and 120 minutes of incubation and carbapenemase enzyme distribution for all Enterobacteriaceae isolates tested (n=235)

Score at	Carbapene	mase				
30 min	OXA-48	KPC	VIM	NDM	Negative	Total
3	18	14	15	7	1	55
2	37		1	2	7	47
1	14			4	19	37
0	4				92	96
Total	73	14	16	13	119	235
60 min	OXA-48	KPC	VIM	NDM	Negative	Total
3	25	14	16	7	1	63
2	31			1	8	40
1	15			5	20	40
0	2				90	92
Total	73	14	16	13	119	235
120 min	OXA-48	KPC	VIM	NDM	Negative	Total
3	21	11	16	6	1	55
2	35	3		1	10	49
1	15			6	18	39
0	2				90	92
Total	73	14	16	13	119	235

Table 6. Interpreted results and the performance of detection of CPE by CNP test and by RCS test for the consecutive isolates referred to the NRC (n=135)

Referred isolates		CPE				
		Positive	Negative	Total	PPV	NPV
Total		72	63	135		
CNP result	Positive	69		69	100%	95%
	Negative	3	63	66		
RCS result	Positive	70	21	91	77%	95%
	Negative	2	42	44		

Table 7. Reading scores, interpreted results and the performance of detection of CPE by RCS test for Enterobacteriaceae isolates tested with both the test disk and the negative control disk (n=166)

Isolates tested with	k	CPE			
RCS test disk	RCS control disk	Interpreted RCS			
score	score	test result	Positive	Negative	Total
3	1 or 2	Positive	7	1	8
	0	Positive	32		32
1 or 2	1 or 2	Uninterpretable	4	9	13
	0	Positive	48	18	66
0	0	Negative	2	45	47
Total tested with Ro	CS control disk		93	73	166
Total interpreted	RCS test result	Uninterpretable	4	9	13
		Positive	87	19	106
		Negative	2	45	66
Total interpretable			89	64	153
Corrected performance of RCS test		Sensitivity	98%		
		Specificity	70%		

Conclusions

- > CNP and RCS are rapid and highly sensitive screening tests for the detection of carbapenemase in EB, although a few OXA-48 producers may go undetected by any of these tests. CNP performed better than RCS owing to its superior specificity and to the large number of uninterpretable results observed with RCS.
- ➤ Both CNP and RCS as CPE screening test should be used with caution in areas with high prevalence of OXA-48 producers⁴ and should be evaluated in other epidemiological settings. Exclusion of suspected CPE isolates from further testing to confirm and identify carbapenemase (i.e. by molecular testing) should only be based on concordant results between CNP/RCS tests and phenotypic antimicrobial resistance patterns.

References

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