Sensitivity of Alinity HIV-Ag/Ab combo assay

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Thirty years post-market performance follow up of NAT and serologic assays for detection of blood borne viruses

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South African population and SANBS coverage

- Total Population 59,39 million in 2021
- HIV Prevalence 13,1%
- SANBS operates in 8 of 9 provinces in South Africa
- Collects over one million units annually
- 100% voluntary non remunerated donors





HIV Screening and confirmation testing algorithm

- All blood donations are screened in parallel using serology assays and ID-NAT
 - Anti-HIV, Abbott PRISM until 2018
 - HIV- Ag/Ab Combo assay- Abbott Alinity since 2019
 - ID NAT- Ultrio Plus/Elite, Grifols- since 2005
- Extensive confirmation algorithm; donations classified as:
 - HIV negative
 - HIV concordant
 - HIV NAT yield
 - HIV serology yield
- Viral loads (Abbott m2000) done on all HIV NAT yields
- Innogenetics p-24 Ag ELISA done on HIV NAT yields during the PRISM screening period



Studies and evaluation panels

Study objective	HIV-1 samples	Collection Period	n
Viral load (VL) distribution	PRISM anti-HIV negative WP- NAT yields	2005-2017	594
Sensitivity of Innogetics p24-Ag ELISA	PRISM Anti-HIV negative WP- NAT yields	2005-2017	571
Comparison of sensitivity of Innogenetics p24-Ag ELISA and Alinity HIV-Ag/Ab combo assay	PRISM Anti-HIV negative WP NAT yields (selection)	2010-2017	159
Determine cut off crossing point in Alinity and Innogenetics assays	PRISM Anti-HIV negative (selection)	2010-2017	145
Determine cut off crossing point in Alinity assay	HIV-1 subtype B standard (Tissue culture, inactivated)	1996	4 x 8
Comparison of HIV-RNA VL distribution (Abbott m2000) in three-year PRISM and Alinity screening periods	PRISM neg WP-NAT yieldsAlinity neg WP NAT yields	2015-2017 2019-2021	179 155
Comparison of sensitivity of anti-HIV detection in PRISM and Alinity	Concordant HIV-NAT and serology reactive samples	2015-2017 2019-2021	4846 3935
Comparison of sensitivity of anti-HIV detection in PRISM and Alinity	HIV-RNA negative serology yields	2015-2017 2019-2021	239 569



VL distribution in 594 PRISM anti-HIV nonreactive WP NAT yields (2005-2017)



Cumulative VL distribution in 594 anti-HIV nonreactive WP NAT yields



VL distribution in 571 anti-HIV PRISM nonreactive WP NAT yields (2005-2017) tested in Innogenetics p24-Ag ELISA





VL distribution in 571 anti-HIV PRISM nonreactive WP NAT yields (2005-2017)

Sensitivity of Innogenetics p24-Ag ELISA in 571 PRISM anti-HIV nonreactive WP NAT yields divided over half-log different VL ranges (2005-2017)



HIV-1 RNA VL range in copies/mL



Correlation between VL and p24 Ag S/CO value on HIV-1 subtype B standard^ dilutions in Alinity HIV-Ag/Ab combo assay



^ S0012 HIV-RNA subtype B standard was first solvent detergent inactivated to obtain inactivated S0224 standard that was then used for preparing dilution series

Correlation between VL and p24-Ag S/CO value in 77 (of 145) anti-HIV negative WP NAT yields with Innogenetics p24-Ag ELISA and Alinity HIV-Ag/Ab combo assay (archived samples 2010-2017)





Regression analysis was performed on 77 of 145 WP NAT yield samples in VL range between 10000 and 10000000 copies/mL (64 samples with VL<10000 copies/mL and 4 samples with VL ≥10000000 were excluded from the analysis)

Sensitivity of Innogenetics p24-Ag ELISA and Alinity HIV-Ag/Ab combo assay in 159 PRISM anti-HIV nonreactive WP NAT yields divided over half-log different VL ranges (selected samples 2010-2017)



Number HIV-1 NAT yields

VL distribution in HIV-1 WP NAT yields during three-year screening periods of PRISM anti-HIV and Alinity HIV-Ag/Ab combo assay



VL distribution in HIV-1 WP NAT yields during three-year screening periods of PRISM anti-HIV and Alinity HIV-Ag/Ab combo assay

■ PRISM (2015-2017) ■ Alinity (2019-2021)



Cumulative VL distribution in WP HIV-1 NAT yields during three-year screening periods of PRISM anti-HIV and Alinity HIV-Ag/Ab combo assay



VL range upper limit in copies/mL (Abbott m2000)

SANBS

pre-ID-NAT WP <10,000 copies/mL determined using Weusten WP model with doubling time of 0.85 days and Ultrio Elite 50% and 95% LOD of 2.1 and 10.4 copies/mL respectively on HIV-1 subtype C standard requantified in copies/mL by Abbott m2000 assay (Coleman et al. Transfusion 2020)

Distribution of anti-HIV S/CO values in PRISM and Alinity tests

■ PRISM ■ Alinity



Distribution of S/CO values on HIV serology yield donations

					Unit_Numbe	· S/CO
					32068526	0.09
		Prism	Assav S/CO	Alinity	32906699	1.22
Unit Number	S/CO		· · · · · · · · · ·		33243997	5.44
30080719 0.25	5 (2%)	1-50	21 (4%)	34510414	9.16	
26914809	14.23				32029451	12.85
27361969	35.52	65 (27%)	50-100	29 (5%)	35166299	12.86
27927735	36.76	139 (58%)	100-150	55 (10%)	34798551	13.00
26473090	42.92		100 100	00 (1070)	37124414	15.69
		28 (12%)	150-200	44 (8%)	33082167	16.16
		0 (40()	000 400		32450209	22.01
		2 (1%)	200-400	69 (12%)	33349842	22.61
		0 (0%)	400-600	81 (14%)	32745191	24.21
					32987254	28.50
		0 (0%)	600-800	117 (21%)	34722226	33.75
					32559831	34.83
		0 (0%)	800-1000	100 (18%)	32015377	38.73
		0 (0%)	1000-1200	41 (7%)	32886447	38.84
		0 (0 /0)	1000-1200	41 (770)	31929413	39.62
		0 (0%)	1200-1400	10 (2%)	33230621	43.02
					` 31915682	43.97
		0 (0%)	>1400	2 (0%)	\ 32588681	49.59
					4	



Conclusions and discussion

- Some high VL WP NAT yield samples were not detected by the Alinity HIV-Ag/Ab combo assay and the Innogenetics p24-Ag ELISA.
- It was estimated that the Alinity HIV p24 antigen assay component offers a WP reduction of ~5.8 days by detecting ~27% of WP samples based on modeling VL distribution data observed during three year-screening periods of the PRISM and Alinity assay respectively.
- Analytical sensitivity of p24 antigen detection by the Alinity combo assay was 8-fold lower on HIV-1 (subtype C) WP NAT yield samples than on a widely used HIV-1 subtype B standard according to quantification in HIV-RNA copies/mL by the Abbott m2000 assay.
- Anti-HIV S/CO ratios in ID-NAT nonreactive 'serology yield' samples obtained during threeyear screening periods were ~10-fold higher in Alinity than in PRISM assay, but it is unclear how this affects the clinical sensitivity of anti-HIV detection in samples with low antibody levels (which may be false reactive).

