For professional in vitro diagnostic use only.

INTENDED USE

Vitassav Rotavirus+Adenovirus samples.

a presumptive diagnosis of rotavirus and/or adenovirus infection.

Viral pathogens are the most common cause of gastroenteritis in developed countries. Human rotavirus and adenovirus infections are major causes of acute outbreaks and sporadic cases of gastroenteritis, occurring primarily among children less than 2 enormous infection control implications.

PRINCIPLE

immunochromatographic assay for the detection of rotavirus and adenovirus in human stool samples.

coated with monoclonal antibodies against rotavirus.

Strip B: The test line zone of the nitrocellulose membrane is precoated with monoclonal antibodies against adenovirus.

During the process, the sample reacts with the antibodies against rotavirus (strip A) and/or adenovirus (strip B), forming conjugates. The mixture moves upward on the membrane by capillary action. If the sample is rotavirus positive, antibodies present on the membrane (test line) capture the conjugate complex and a red line will be visible in the strip A, and if the sample is adenovirus positive, antibodies present on the membrane (test line) capture the conjugate complex and a red line will be visible in strip B. Although the sample is positive or negative, the mixture continues to move across the membranes and the green control line always appears (for both strips).

The presence of these green lines (in the control zone (C)) indicates that sufficient volume is added; proper flow is obtained and serves as an internal control for the reagents.

PRECAUTIONS

- For professional in vitro use only.
- Do not use after expiration date.
- Do not use the test if its pouch is damaged.

rapid, immunochromatographic, one step assay for the simultaneous qualitative detection of rotavirus and adenovirus in human stool

Simple, non-invasive and highly sensitivity immunoassay to make

INTRODUCTION

years of age. Patient hospitalization is often required, with

Vitassav Rotavirus+Adenovirus

Strip A: The test line zone of the nitrocellulose membrane is pre-

STORAGE AND STABILITY

The storage temperature of the kits should be 2-30°C.

• Read the instructions for use carefully before using the test.

if the bags are open or damaged on arrival.

for each sample to avoid contamination errors.

• Do not reuse. This is a single-use device.

biohazard container after testing.

broken inside the aluminium pouch.

regulations.

request.

• Do not use the kit if the label sealing the outer carton is torn or

• Do not use the tests if the desiccant material is missing or

• Specimens should be considered potentially hazardous and

Material exposed to the samples should also be considered

• Tests and used material should be disposed of in an appropriate

• Reagents contain preservatives. Avoid any contact with the skin

• Components provided in the kit are approved for use with the

commercial kit component or components from other batches.

Follow Good Laboratory Practices. These practices should

include, but are not limited to, personal protective equipment

(PPE), such as lab coat, surgical or appropriate mask or face

shield, disposable gloves and eye protection. Take the necessary

precautions during sample collection, transport, storage,

handling and disposal. Each sample must be correctly and

unequivocally identified to ensure proper traceability of samples.

• In case of spillage, clean thoroughly with a suitable disinfectant.

• The presence of yellow lines in the result window (control line

area and test line area), before using the test, is completely

normal and does not imply a failure in the functionality of the

• The visual interpretation of the results is done by coloured lines,

the interpretation of the results should be done by a professional

user without problems of visualisation and colour interpretation.

• A certificate of analysis can be provided on request (not

• Do not eat, drink or smoke in the workplace.

Vitassay Rotavirus + Adenovirus. Do not use any other

or mucous membrane. Consult safety data sheet, available on

potentially hazardous and should be handled in the same manner as an infectious agent, following local/national

should be handled in the same manner as an infectious agent, following local/national regulations. A new test should be used

Do not freeze.

included).

Under these conditions, they can be used until the expiry date indicated on the kit label.

All kit components are for single use only and must remain in their primary packaging until use. The test must remain in the sealed pouch until use.

VITASSAY

Rotavirus+Adenovirus

Rapid test for the simultaneous qualitative detection of rotavirus and adenovirus in human stool samples.

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MATERIALS

MATERIAL PROVIDED	MATERIAL REQUIRED BUT NOT PROVIDED
 25 tests/kit Vitassay Rotavirus+Adenovirus Instructions for use. 25 vials with diluent for the sample dilution. 	PPE, such as disposable gloves Specimen collection container Timer Micropipette (in case of liquid stool)

SPECIMEN COLLECTION

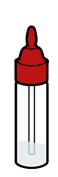
Collect sufficient quantity of faeces: 1-2g or mL for liquid samples. Stool samples should be collected in clean and dry containers.

Samples can be stored in the refrigerator (2-8°C) for 1-2 days prior to testing. For longer storage, maximum 1 year, the specimen must be kept frozen at -20°C Samples must be brought to room temperature before testing.

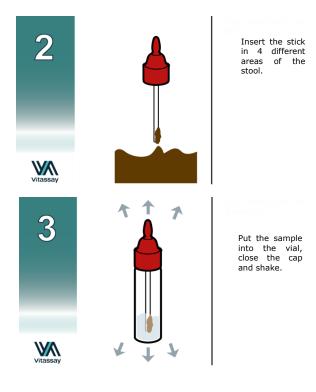
SPECIMEN PREPARATION

- 1. Remove the cap of the vial with diluent for the sample dilution (figure 1).
- 2. Use the stick to collect sufficient sample quantity (approx. 125mg). For solid stool, insert the stick in 4 different areas of the stool sample taken approx. 125mg, (figure 2), and add it into the vial with diluent for the sample dilution. For liquid stool, take 125 μL of the sample using a micropipette and transfer it into the vial with diluent for the sample dilution.
- 3. Close the tube with the diluent and stool sample. Shake vigorously the vial in order to assure good sample dispersion (figure 3).





Vial for sample dilution.



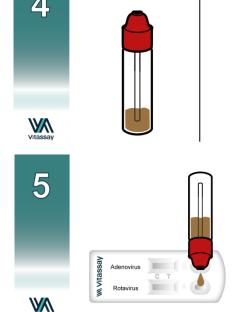
PROCEDURE

Allow the test, stool sample, controls and diluent to reach room temperature (15-30°C) prior to testing. Do not open pouches until the performance of the assay.

- Shake the vial with the sample vigorously to obtain a good sample dilution.
- Remove the Vitassay Rotavirus+Adenovirus from its sealed bag just before using it.
- 3. Take the vial containing the diluted sample, cut the end of the cap (figure 4) and dispense 4 drops in the circular window marked with the letter A rotavirus (figure 5) and 4 drops, using the same vial, in the circular window marked with the letter B adenovirus (figure 6).
- Read the results at 10 minutes. Do not read the results later than 10 minutes.

If the test does not run due to solid particles, stir the sample added in the sample window with the stick. If it does not work,

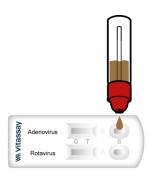
dispense a drop of diluent until seeing the liquid running through the reaction zone.



Cut the end of the cap

Dispense 4 drops in the circular window marked with the letter S to the strip A – Rotavirus.





Dispense 4 drops in the circular window marked with the letter S to the strip B - Adenovirus.



INTERPRETATION OF THE RESULTS

RESULTS	Strip A	Strip B	INTERPRETATION
	Rotavirus Negative	Adenovirus Negative	
СТ	GREEN	GREEN	There is no rotavirus and/nor adenovirus presence. Apparently, there is no infection caused by rotavirus and/or adenovirus.
	Positive	Positive	
C T A	GREEN- RED	GREEN- RED	There is rotavirus and adenovirus presence. Possible infection caused by rotavirus and adenovirus.
	Positive	Negative	
C T A	GREEN- RED	GREEN	There is rotavirus presence. Possible infection caused by rotavirus.
	Negative	Positive	There is adenovirus
C T A	GREEN	GREEN- RED	presence. Possible infection caused by adenovirus.
ANY OTHER RESULTS		Invalid result, we recommend repeating the assay using the sample with another test. Note: Wrong procedural techniques, insufficient sample volume or deterioration of the reagents are mostly the main reasons for control line failure. If the symptoms or situation persist, discontinue using the test kit and contact your local distributor.	

Notes: The intensity of the red colored test line in the result line zone (T) will vary depending on the concentration of antigens in the specimen.

QUALITY CONTROL

Internal procedural controls are included in **Vitassay Rotavirus+Adenovirus**. Green lines appearing in the results window are internal controls, which confirm sufficient specimen volume and correct procedural technique.

LIMITATIONS

- An excess of stool sample could cause wrong results (brown bands appear). Dilute the sample with the diluent and repeat the test
- The intensity of test line may vary depending on the concentration of antigens.
- The use of other samples different from human samples has not been established.
- After one week of infection the presence of virus shed in stool decreases considerably so a lower concentration in the stool sample is probable. The stool sample should be taken within the first week of symptom onset.
- The quality of Vitassay Rotavirus + Adenovirus depends on the quality of the sample. Proper fecal specimens must be obtained.
- Positive results determine the presence of adenovirus and/or rotavirus in fecal samples. A positive result should be followed up with additional laboratory techniques (biochemical methods or PCR) to confirm the results. A confirmed infection should only be made by a physician after all clinical and laboratory findings have been evaluated and must be based in the correlation of the results with further clinical observations.
- Negative results should not be considered as conclusive; it is
 possible that the concentration of antigens in the faecal sample
 is lower than the detection limit value. If symptoms or situation
 still persist, a rotavirus and/or adenovirus determination should
 be carried out with another technique (for example PCR).
- Bloody stool samples and/or mucous stool samples can cause non-specific reactions in the test. Such positive samples should be followed up with other diagnostic techniques to confirm the result.

EXPECTED VALUES

Acute gastroenteritis is a worldwide health problem. It has also been reported as an important factor for childhood morbidity and mortality worldwide. Almost 1.76 million children under age 5 die annually from gastroenteritis in both developing and developed countries.

Group A Rotaviruses (HRV) are the major cause of pediatric acute gastroenteritis worldwide followed, to a lesser extent, by enteric adenoviruses types 40 and 41 and other viral agents.

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Globally, an estimated 702,000 children die each year from rotavirus diarrhea, the vast majority of whom are in developing countries. Children under 5 years of age are particularly prone, and infection is predominant among those aged 6-24 months.

PERFORMANCE CHARACTERISTICS

Clinical sensitivity and specificity

An evaluation was performed using **Vitassay Rotavirus+Adenovirus** and other commercial test (Ridascreen®*Rotavirus* ELISA Test, r-Biopharm) for the strip A.

Results were as follows:

		Ridascreen®Rotavirus ELISA Test		
		Positive	Negative	Total
Vitassay Rotavirus +	Positive	18	1	19
Adenovirus	Negative	0	43	43
Rotavirus	Total	18	44	62

Table 1. Results of Vitassay Rotavirus+Adenovirus (Rotavirus) compared to a commercial kit.

Vitassay Rotavirus+Adenovirus (Rotavirus) vs Ridascreen® <i>Rotavirus</i> ELISA Test			
Sensitivity	Specificity	PPV	NPV
>99%	98%	>94%	>99%

Table 2. Sensitivity, specificity, positive predictive values, and negative predictive values of the **Vitassay Rotavirus+Adenovirus (Rotavirus)** compared to a commercial kit.

A second evaluation was performed using **Vitassay Rotavirus+Adenovirus** and PCR for the strip B.

Results were as follows:

		PCR		
_		Positive	Negative	Total
Vitassay Rotavirus	Positive	7	0	7
+ Adenovirus	Negative	0	52	52
Adenovirus	Total	7	52	59

Table 3. Results of **Vitassay Rotavirus+Adenovirus** (Adenovirus) confirmed by qPCR technique.

Vitassay Rotavirus + Adenovirus (Adenovirus) vs PCR			
Sensitivity	Specificity	PPV	NPV
>99%	>99%	>99%	>99%

Table 4. Sensitivity, specificity, positive predictive values, and negative predictive values of the **Vitassay Rotavirus+Adenovirus** (Adenovirus) confirmed by qPCR technique.

The results showed that **Vitassay Rotavirus+Adenovirus** has a high sensitivity and specificity to detect Rotavirus and Adenovirus.

Cross-reactivity

No cross-reactivity was detected against other gastrointestinal pathogens that are occasionally present in faeces:

Adenovirus (strip A)	Escherichia coli O157:H7	Salmonella typhimurium
Astrovirus	Giardia lamblia	Salmonella typhi
Campylobacter coli	Helicobacter pylori	Shigella boydii
Campilobacter jejuni	Listeria monocytogenes	Shigella dysenteriae
Clostridium difficile	Norovirus	Shigella flexneri
Cryptosporidium parvum	Rotavirus (strip B)	Shigella sonnei
Enterovirus	Salmonella enteritidis	Staphylococcus aureus
Entamoeba hystolitica	Salmonella paratyphi	Yersinia enterocolitica

REFERENCES

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- 3. ANTONIO CARRATURO, VALENTINA CATALANI, LUCIANO TEGA. "Microbiological and epidemiological aspects of Rotavirus and enteric Adenovirus infections in hospitalized children in Italy" NEW MICROBIOLOGICA, 31, 329-336, 2008.

SYMBOLS FOR IVD COMPONENTS AND REAGENTS

IVD	i <i>n vitro</i> diagnostic device	*	Keep dry
Ţ i	Consult instructions for use	1	Temperature limitation
2	Use by	ш	Manufacturer
LOT	Batch code	\sum_{n}	Contains sufficient for <n> test</n>
DIL	Sample diluent	REF	Catalogue number
CE	CE Marking		

Changes control			
Nº Version	changes	Date	
IUE-7355010 Ed02 October 2023	The format has been updated. A transcription error in the interpretation section has been corrected. The limitations section has been updated. Grammatical and editorial changes have been made to the Precautions, Limitations, Sample Collection, Storage and Stability sections. Required but not included material updated with minor changes. The wording has been changed under Interpretation of results.	03/10/2023	



Ctra. N.330, Km.566 22197-Cuarte (Huesca, SPAIN)