

Laboratory Tests for Diagnosis of Dengue: Indications and Pitfalls

Dr. Jasmine Kwong
Public Health Laboratory Centre
Center for Health Protection
Department of Health

26/5/2015

From the clinicians' perspective

In a patient with suspected dengue infection...

- Which test should be ordered?
- What kind of specimens should be sent?
- When will the result be available?
- What does the result mean?



Before making a test request

- Take a good clinical history
 - Clinically compatible
 - Onset of symptoms

NO TEST IS PERFECT

- Clinical history helps
 - Choice of test
 - Interpretation of result

Diagnostic methodologies

1. Direct detection
 - Nucleic acid detection
 - Antigen detection
2. Virus isolation
3. Antibody detection



Antibody detection

- 2 type of tests
 - Anti-dengue IgM antibodies
 - Rapid test
 - ELISA
 - Anti-dengue antibody titre
 - Haemagglutination inhibition assay



Anti-dengue IgM test

- Indication of test
 - Commonly performed test for diagnosis of acute infection
 - Meaningful result on single serum

What does a single IgM result mean?



Anti-dengue IgM test

- What does a positive anti-dengue IgM result mean?
 - Acute dengue infection
 - Recent dengue infection
 - False positive
 - Cross react with
 - Flavivirus- JE, YF, St. Louis encephalitis, WN virus
 - Non-flavivirus – malaria, leptospirosis, rickettsiosis, etc
 - Connective Tissue Disorder – RA, SLE



Anti-dengue IgM test

- What does a negative anti-dengue IgM result mean?
 - Dengue infection ruled out
 - False negative:
 - Serum taken soon after onset of symptoms
 - Low level of IgM in some secondary cases



Anti-dengue antibody titre

- Haemagglutination-inhibition assay (HAI)
 - Based on the RBC-agglutinating property of dengue virus and anti-dengue antibody's ability to inhibit this agglutination
 - Indication
 - Confirmation of acute dengue infection in cases with diagnostic challenges
 - Differentiation of primary and secondary infection
 - Requires paired samples for interpretation (acute and convalescent samples)



Anti-dengue antibody testing

– Problems:

- Retrospective diagnosis
- Result of single serum not confirmative
- Cross reactivity with other flavivirus infection



Diagnostic methodologies

1. Direct detection
 - Nucleic acid detection
 - Antigen detection
2. Virus isolation
3. Antibody detection



Nucleic Acid detection

- Reverse transcription- Polymerase Chain Reaction (RT-PCR)
 - Conventional vs Real-time
 - Surrogates the viremic phase
 - Advantages
 - Diagnosis of dengue in the early phase of infection
 - Determination of serotype (molecular epidemiology)
 - Disadvantages
 - High cost
 - Technical expertise



Nucleic Acid detection

- Indication of test
 - Adhoc tests - performed in cases with diagnostic challenges in the early phase of illness
 - Once monthly batch testing for serotyping - Molecular epidemiology



Dengue antigen detection

Dengue NS1 Antigen

- Non-structural protein 1 is a 46- to 50-kilodalton glycoprotein produced by dengue infected mammalian cells
- Function: believed to be involved in viral replication and is recognized as an important immunogen in infection
- 2 forms: expressed in both membrane associated and secreted forms
- The secreted form can be detected in serum
- Correlates well with viremia



Dengue antigen detection

- Methods
 - Rapid tests
 - ELISA tests
- Indication:
 - Diagnosis of acute infection when blood is taken at the early phase of disease (< 1 week)

Virus isolation

- Mosquito cell line: C6/36
- Advantage:
 - Most specific
 - Viability of virus
 - Virus isolate for other studies
- Problems:
 - Technically demanding
 - Long TAT (1-2 weeks)
 - Requires a second test (IFA/PCR) for confirmation of virus growth



- Early disease → direct detection methods
- Late disease → antibody detection methods

Probable	Confirmed	CDC
<ul style="list-style-type: none">• Detection of IgM• Single serum sample with HAI titre ≥ 1280	<ul style="list-style-type: none">• Virus isolation• Nucleic acid/ Antigen detection• 4 fold rise of HAI titre in paired sera	

To make it simple

- If you have a patient with suspected dengue infection:
 - Take a good history
 - Provide on the request form
 - Onset date
 - Presentation
 - Travel history
 - Order: dengue testing
 - Send: Clotted blood – 3ml
 - Results available : 1-2 days
 - Prepare to receive phone call for any abnormal result
 - Report to CENO when case is suspected



Thank you for your attention