



OraQuick
ADVANCE[®] HIV-1/2

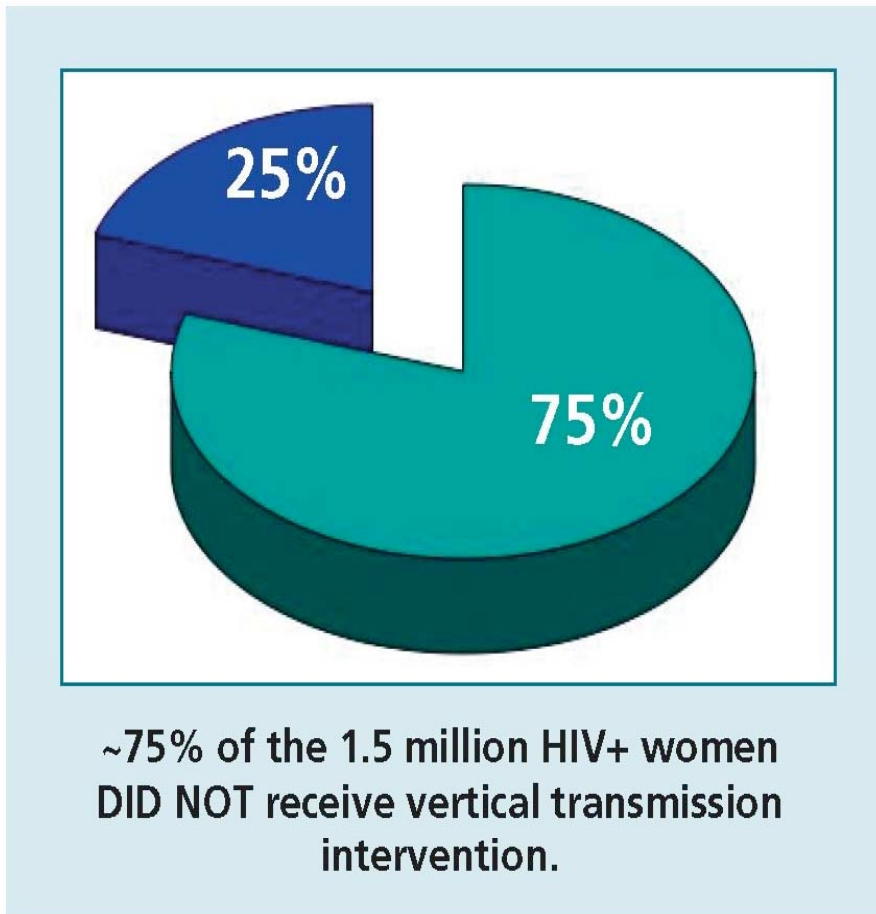
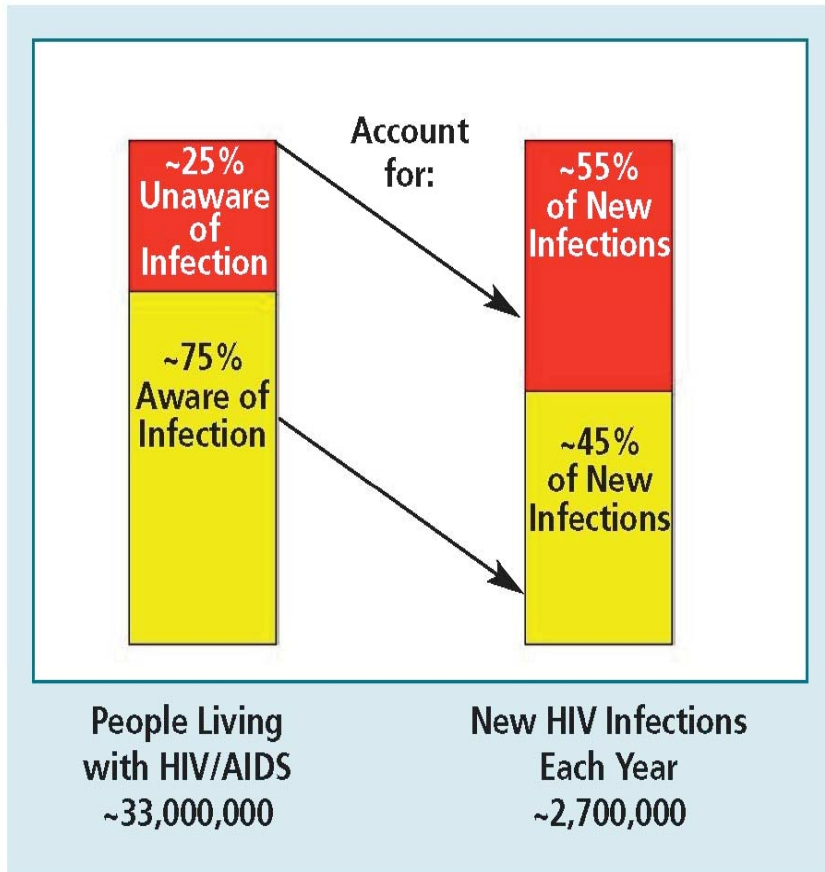
**Rapid HIV Testing
in Resource Limited Settings**

General Public Health Trends/Dynamics

- Up to one-half to one-third of people who consent to a test still do not return to receive the results
- In 2007 only 18% of the worlds pregnant women were offered HIV tests
- Most settings are resourced-constrained and remote
- The challenge is to increase the number of people being tested
 - “Know your status”

The potential solution falls on rapid testing

The Challenge.....



The Goal – PMTCT

- Use rapid tests to identify HIV+ women early and connect them to care
- Early care **reduces risk of MTCT to <2%!**
- Use rapid tests to identify undiagnosed HIV cases in L&D and intervene to reduce transmission.
 - Treat **mother** with ARVs during pregnancy, labor and delivery
 - Treat **baby** with ARVs within 12 hours of birth.



Sources: 1 Revised Recommendations for HIV Testing in Adults, Adolescents and Pregnant Women in Healthcare settings, MMWR 9/22/2006/Vol. 55/no. RR-12. 2 ACOG Committee Opinion, No. 304 11/2004

VCT & OraQuick

- Speed of the test (20mins)
- Client is informed of test result during visit
- Allows pre-test and post-test counselling
- No sophisticated infrastructure required
- Do not require highly trained staff
- Cost effective

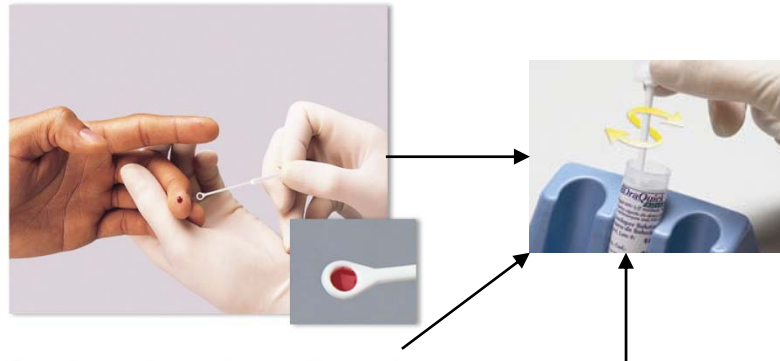


So let's take the test.....



Oral Fluid

- Swab completely around the upper and lower gums **one time around**.



Fingerstick

- Clean finger with alcohol. Let air dry.
- Stick. Wipe away the first drop.
- Collect with Loop. Mix in Developer.



Plasma or venipuncture blood

- Collect into EDTA, Sodium Heparin, or Sodium Citrate.
- Collect with Loop. Mix in Developer.

Test Development



- Insert the device into the Developer Vial.
- Pink fluid travels up Result Window.
- Read results between 20 and 40 minutes.

Test Interpretation

Negative Test



NON-REACTIVE

- Line in C Zone
- No Line in T Zone
- HIV-1 and HIV-2 antibodies were **not detected** in the specimen.

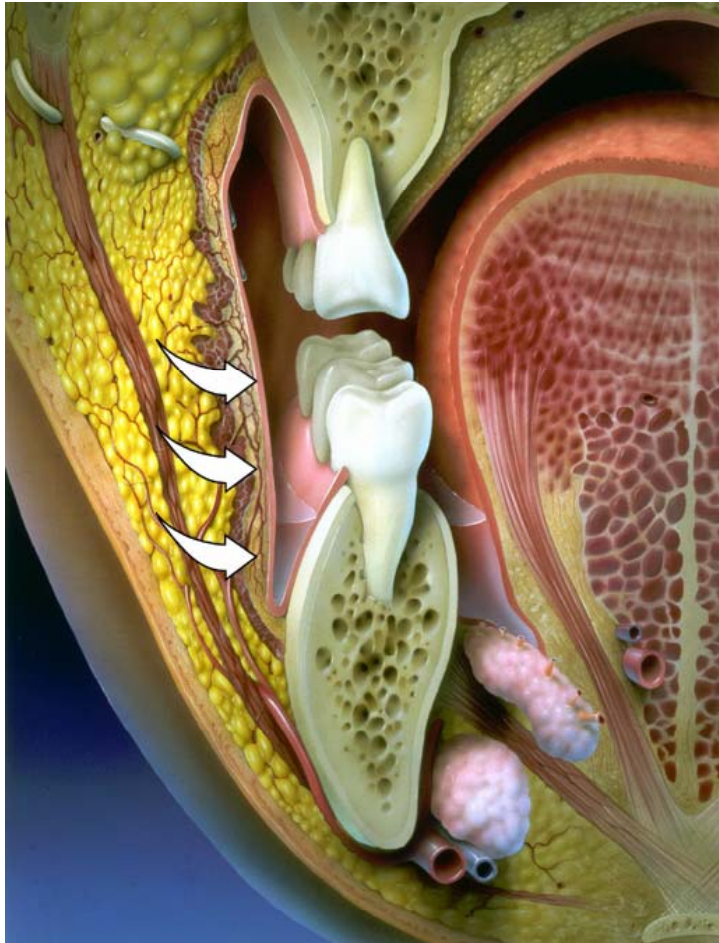
PRELIMINARY POSITIVE



REACTIVE

- Line in C Zone
- Line in T Zone
- HIV-1 and/or HIV-2 antibodies **have been detected** in the specimen.

This is an Oral Fluid Test

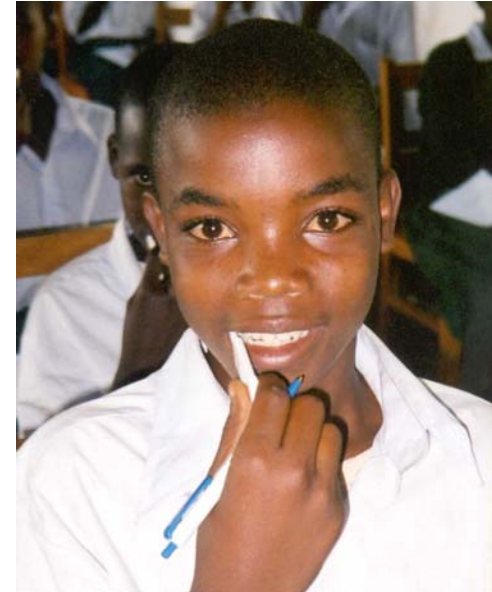


Rapid-format test that detects HIV antibodies in **oral mucosal transudate (OMT)**

OMT contains high concentration of IgG antibodies.

OraQuick ADVANCE[®] HIV-1/2 Antibody Test

- **FDA-Approved/ CE Marked**
- **WHO Evaluated**
- **Laboratory Accuracy >99% with Oral Fluid Convenience**
- **Break Down Constraints to Large Scale Testing Initiatives**
 - Poor infrastructure / limited capacity
 - Limited availability/access to healthcare professionals
 - Offer decentralized, scaleable model
- **Stable at temps of 2-30°C – No cold chain requirement.**



South Africa



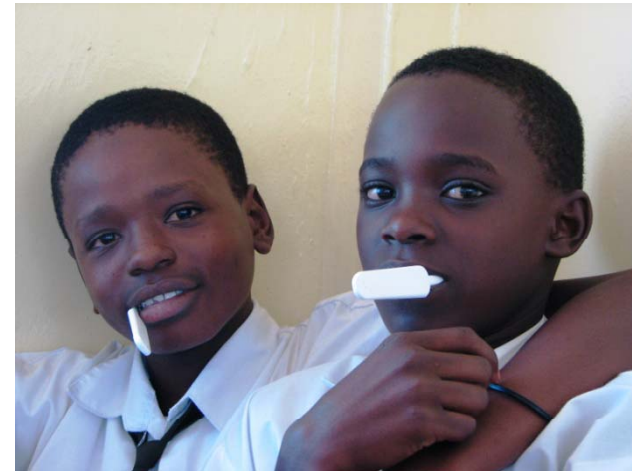
Soweto South Africa 2004 – 245 children exposed to HIV

Sensitive and Specificity of 100% compared to ELISA (standard)

- Painless, safe, easy to use, affordable and offers instant results (Dr Vardas)

Africa - Tanzania

- **Prevalence Testing Campaign – Moshi School Systems**
- **Joint Collaboration w/ CDC (2005)**
- **Results showed up to 30% HIV prevalence in certain populations**





Madagascar

- Mother and Child Wellness Week 2007
- **OraQuick Targeted for use in limited resource settings by Malagasy Government**
- Front line of the National Tender used across the country in Mobile VCT, VCT and PMTCT settings



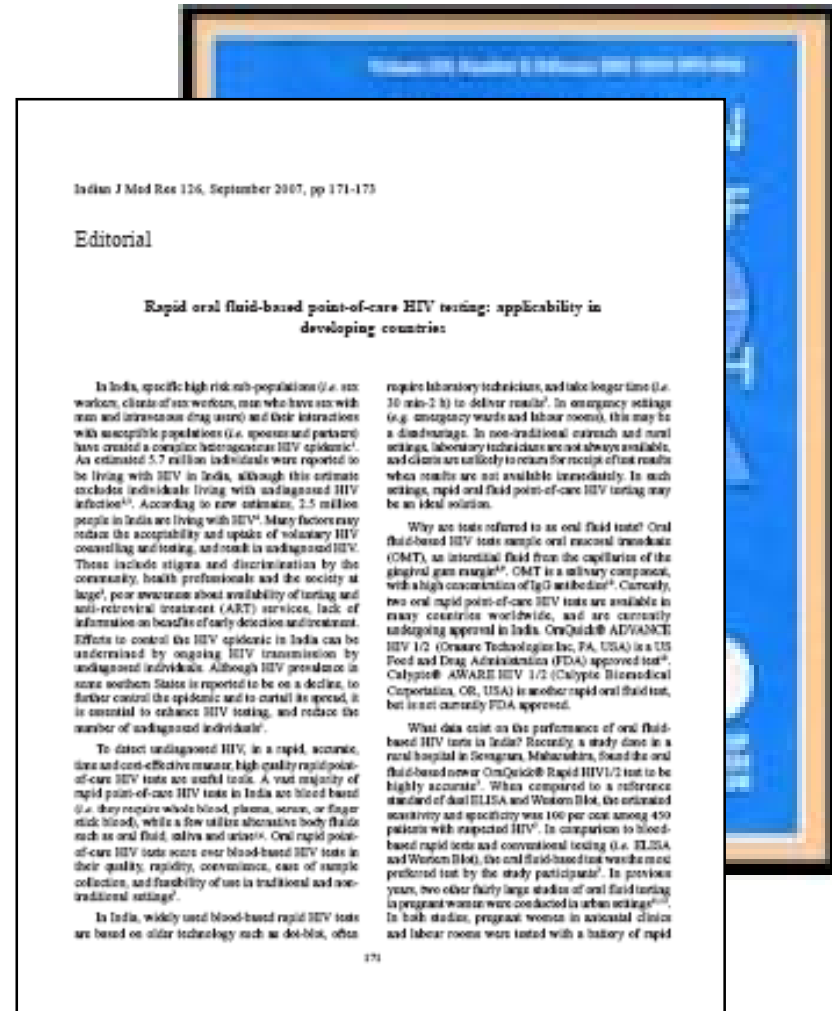
Latin America - Mexico

- ‘A Test of Love’ PMTCT Campaign w/ Project Hope
- Screened 2000 pregnant women
- Not one baby born w/ HIV



Asia – India - 2007

- **Rapid oral fluid-based point-of-care HIV testing: applicability in developing countries by Dr. Nitika Pant Pai**
- ***“Oral Tests can help greatly to expedite diagnosis,”***
- ***“Use of oral fluid test in labor and delivery settings can expedite delivery of interventions for reducing perinatal transmission”***



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- Early care improves mothers outlook and **reduces risk of MTCT to <2%!**
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THANK YOU
