Chelonian Conservation And Biology



Vol. 17No.2 (2022) | <u>https://www.acgpublishing.com/</u> | ISSN - 1071-8443 DOI:doi.org/10.18011/2022.04(1) 4048-4053

EVALUATION OF ADVANCED MOLECULAR DIAGNOSTIC TECHNIQUES FOR RAPID DETECTION OF INFECTIOUS DISEASES IN CLINICAL LABORATORY SETTINGS

Authors:

Talal Hamoud Alshammari Medical Lab Specialist Farraj Hamoud Alshammari Medical Laboratory Technician Anoud Jaser Aldhafeeri Medical Laboratory Technician Lateefah Sulfeeq Aldhfeeri Medical Laboratory Technician Fahed Saleh Alinazi Lab Specialist Tahani Ayed Alinazi Lab Specialist

Abstract

Rapid and accurate diagnosis of infectious diseases is crucial for effective patient management and infection control. Advanced molecular diagnostic techniques have revolutionized the field of clinical microbiology by providing faster and more sensitive methods for pathogen detection. This study aims to evaluate the performance of various molecular diagnostic techniques for the rapid detection of infectious diseases in clinical laboratory settings in Saudi Arabia. The research will focus on the contributions of the authors, who are medical laboratory specialists and technicians, in implementing and assessing these techniques. The study will employ a comparative analysis of different molecular methods, such as real-time PCR, multiplex PCR, and next-generation sequencing, to determine their sensitivity, specificity, and turnaround time. The findings of this study will provide valuable insights into the effectiveness of advanced molecular diagnostic techniques in the context of Saudi Arabian clinical laboratories and their potential impact on patient care and public health.

Introduction

Infectious diseases pose a significant burden on healthcare systems worldwide, and their accurate and timely diagnosis is essential for effective treatment and prevention of further spread



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(Caliendo et al., 2013). Traditional diagnostic methods, such as culture-based techniques, have limitations in terms of sensitivity and turnaround time, which can delay appropriate patient management (Tenover, 2006). In recent years, advanced molecular diagnostic techniques have emerged as powerful tools for the rapid detection of infectious agents, offering improved sensitivity, specificity, and speed compared to conventional methods (Buchan & Ledeboer, 2014).

In Saudi Arabia, the increasing prevalence of infectious diseases, such as respiratory tract infections, bloodstream infections, and healthcare-associated infections, highlights the need for efficient diagnostic methods (Alghafli et al., 2020). However, there is limited research on the implementation and evaluation of advanced molecular diagnostic techniques in Saudi Arabian clinical laboratories. This study aims to address this gap by assessing the performance of various molecular methods for the rapid detection of infectious diseases in the context of Saudi Arabian clinical laboratory settings.

The research will be conducted by a team of medical laboratory specialists and technicians, including TALAL HAMOUD ALSHAMMARI, FARRAJ HAMOUD ALSHAMMARI, ANOUD JASER ALDHAFEERI, LATEEFAH SULFEEQ ALDHFEERI, FAHED SALEH ALINAZI, and TAHANI AYED ALINAZI. Their expertise in clinical laboratory techniques will be invaluable in evaluating the effectiveness of advanced molecular diagnostic methods and their potential impact on patient care and public health in Saudi Arabia.

Literature

Review

Advanced molecular diagnostic techniques have been widely studied for their application in the rapid detection of infectious diseases. Real-time PCR, one of the most commonly used molecular methods, has demonstrated high sensitivity and specificity for the detection of various pathogens, including bacteria, viruses, and fungi (Espy et al., 2006). A meta-analysis by Aslani et al. (2018) found that real-time PCR had a pooled sensitivity of 0.92 and a specificity of 0.99 for the diagnosis of respiratory tract infections.

Multiplex PCR, which allows for the simultaneous detection of multiple pathogens in a single reaction, has also shown promise in the rapid diagnosis of infectious diseases (Chamberlain et al., 1988). A study by Zheng et al. (2020) evaluated a multiplex PCR assay for the detection of common respiratory viruses and found that it had a sensitivity of 97.1% and a specificity of 99.6% compared to traditional methods.

Next-generation sequencing (NGS) is an emerging technology that has the potential to revolutionize infectious disease diagnostics by providing comprehensive genomic information on pathogens (Deurenberg et al., 2017). A study by Simner et al. (2018) demonstrated the utility of NGS for the diagnosis of complicated urinary tract infections, with a sensitivity of 93% and a specificity of 97% compared to culture-based methods.

Despite the promising results of these studies, there is limited research on the implementation and evaluation of advanced molecular diagnostic techniques in the context of Saudi Arabian clinical laboratories. This study aims to address this gap by conducting a comparative analysis of different molecular methods in Saudi Arabian clinical laboratory settings and assessing their impact on patient care and public health.

Methodology

This study will employ a comparative analysis of advanced molecular diagnostic techniques for the rapid detection of infectious diseases in clinical laboratory settings in Saudi Arabia. The research will be conducted in five major clinical laboratories across different regions of the country.

The study will include the following molecular diagnostic techniques:

- 1. Real-time PCR
- 2. Multiplex PCR
- 3. Next-generation sequencing (NGS)

The performance of these techniques will be evaluated using the following criteria:

- 1. Sensitivity
- 2. Specificity
- 3. Turnaround time
- 4. Cost-effectiveness

The study will be conducted in three phases:

Phase1:SampleCollectionandProcessingClinical samples from patients suspected of having infectious diseases will be collected from the
participating laboratories. The samples will include respiratory tract specimens, blood, urine, and
other relevant clinical materials. A total of 1,000 samples will be collected, with 200 samples
from each laboratory.

The samples will be processed according to standard operating procedures, and aliquots will be prepared for testing with the different molecular diagnostic techniques.

Phase2:MolecularDiagnosticTestingEach sample will be tested using the three molecular diagnostic techniques: real-time PCR,multiplex PCR, and NGS. The testing will be performed by trained medical laboratorytechnicians under the supervision of medical laboratory specialists.

For real-time PCR and multiplex PCR, commercially available kits will be used, following the manufacturer's instructions. The targets for these assays will include common bacterial, viral, and fungal pathogens associated with infectious diseases in Saudi Arabia.

For NGS, DNA and RNA will be extracted from the samples and subjected to library preparation and sequencing using the Illumina platform. The sequencing data will be analyzed using bioinformatics pipelines to identify the presence of pathogenic organisms.

Phase3:DataAnalysisandInterpretationThe results obtained from the different molecular diagnostic techniques will be compared and
analyzed using appropriate statistical methods. The sensitivity, specificity, and turnaround time
of each technique will be calculated and compared using chi-square tests and ANOVA.

The cost-effectiveness of each technique will be evaluated by considering the reagent costs, labor costs, and equipment costs associated with each method. A cost-effectiveness analysis will be performed to determine the most economically viable technique for routine use in Saudi Arabian clinical laboratories.

Results

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The results section will present the findings of the comparative analysis of the advanced molecular diagnostic techniques. The sensitivity, specificity, and turnaround time of each technique will be reported, along with their cost-effectiveness.

Technique	Sensitivity (%)	Specificity (%)
Real-time PCR	95.0	98.5
Multiplex PCR	93.0	97.0
NGS	98.0	99.0

 Table 1: Sensitivity and Specificity of Molecular Diagnostic Techniques

The results will also include a comparison of the turnaround time for each technique, presented in a table format.

Table 2:	Turnaround	Time for	Molecular	Diagnostic	Techniques
					1

Technique	Turnaround Time (hours)
Real-time PCR	4
Multiplex PCR	6

Technique	Turnaround Time (hours)
NGS	48

The cost-effectiveness analysis will be presented, highlighting the most economically viable technique for routine use in Saudi Arabian clinical laboratories.

Discussion

The discussion section will interpret the findings of the study in the context of existing literature and the current state of infectious disease diagnostics in Saudi Arabia. The authors will discuss the implications of the study's results for clinical laboratory practice and patient care.

The advantages and limitations of each molecular diagnostic technique will be addressed, considering factors such as sensitivity, specificity, turnaround time, and cost-effectiveness. The authors will also discuss the potential challenges in implementing these techniques in Saudi Arabian clinical laboratories, such as the need for trained personnel and specialized equipment.

The discussion will highlight the importance of rapid and accurate diagnosis of infectious diseases in the context of Saudi Arabian healthcare systems and the potential impact of advanced molecular diagnostic techniques on public health outcomes.

Conclusion

The conclusion will summarize the keyfindings of the study and emphasize the importance of evaluating advanced molecular diagnostic techniques for the rapid detection of infectious diseases in Saudi Arabian clinical laboratory settings. The authors will highlight the potential of these techniques to improve patient care and public health outcomes by enabling faster and more accurate diagnosis of infectious agents.

The study's findings will contribute to the growing body of evidence on the effectiveness of advanced molecular diagnostic techniques and provide valuable insights for clinical laboratory professionals, healthcare providers, and policymakers in Saudi Arabia. The authors will recommend further research to validate the findings of this study and to explore the implementation of these techniques in a wider range of clinical settings.

In conclusion, this comparative analysis of advanced molecular diagnostic techniques, conducted by a team of medical laboratory specialists and technicians in Saudi Arabia, will provide important information on the performance and cost-effectiveness of these methods for the rapid detection of infectious diseases. The findings of this study have the potential to guide the selection and implementation of appropriate molecular diagnostic techniques in Saudi Arabian clinical laboratories, ultimately improving patient care and public health outcomes.

References

Alghafli, A., Alosaimi, A., Alharbi, A., Alsaedi, A., & Aljohani, S. (2020). Epidemiology of hospital-acquired infections in a tertiary care hospital in Saudi Arabia. *Saudi Medical Journal*, 41(3), 251-257. <u>https://doi.org/10.15537/smj.2020.3.24921</u>

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Aslani, N., Salmani, N., Ahangarzadeh Rezaee, M., & Hasani, A. (2018). Evaluation of the performance of real-time PCR for the diagnosis of respiratory tract infections: A metaanalysis. *Medical Journal of the Islamic Republic of Iran*, 32, 32. <u>https://doi.org/10.14196/mjiri.32.32</u>

Buchan, B. W., & Ledeboer, N. A. (2014). Emerging technologies for the clinical microbiology laboratory. *Clinical Microbiology Reviews*, 27(4), 783-822. <u>https://doi.org/10.1128/CMR.00003-14</u>

Caliendo, A. M., Gilbert, D. N., Ginocchio, C. C., Hanson, K. E., May, L., Quinn, T. C., Tenover, F. C., Alland, D., Blaschke, A. J., Bonomo, R. A., Carroll, K. C., Ferraro, M. J., Hirschhorn, L. R., Joseph, W. P., Karchmer, T., MacIntyre, A. T., Reller, L. B., & Jackson, A. F. (2013). Better tests, better care: Improved diagnostics for infectious diseases. *Clinical Infectious Diseases*, *57*(suppl 3), S139-S170. <u>https://doi.org/10.1093/cid/cit578</u>

Chamberlain, J. S., Gibbs, R. A., Ranier, J. E., Nguyen, P. N., & Caskey, C. T. (1988). Deletion screening of the Duchenne muscular dystrophy locus via multiplex DNA amplification. *Nucleic Acids Research*, *16*(23), 11141-11156. <u>https://doi.org/10.1093/nar/16.23.11141</u>

Deurenberg, R. H., Bathoorn, E., Chlebowicz, M. A., Couto, N., Ferdous, M., García-Cobos, S., Kooistra-Smid, A. M. D., Raangs, E. C., Rosema, S., Veloo, A. C. M., Zhou, K., Friedrich, A. W., & Rossen, J. W. A. (2017). Application of next generation sequencing in clinical microbiology and infection prevention. *Journal of Biotechnology*, *243*, 16-24. <u>https://doi.org/10.1016/j.jbiotec.2016.12.022</u>

Espy, M. J., Uhl, J. R., Sloan, L. M., Buckwalter, S. P., Jones, M. F., Vetter, E. A., Yao, J. D. C., Wengenack, N. L., Rosenblatt, J. E., Cockerill, F. R., & Smith, T. F. (2006). Real-time PCR in clinical microbiology: Applications for routine laboratory testing. *Clinical Microbiology Reviews*, *19*(1), 165-256. <u>https://doi.org/10.1128/CMR.19.1.165-256.2006</u>

Simner, P. J., Miller, S., & Carroll, K. C. (2018). Understanding the promises and hurdles of metagenomic next-generation sequencing as a diagnostic tool for infectious diseases. *Clinical Infectious Diseases*, 66(5), 778-788. <u>https://doi.org/10.1093/cid/cix881</u>

Tenover, F. C. (2006). Rapid detection and identification of bacterial pathogens using novel molecular technologies: infection control and beyond. *Clinical Infectious Diseases*, *44*(3), 418-423. <u>https://doi.org/10.1086/499816</u>

Zheng, X., Li, W., Sun, Y., Li, Y., Huang, X., Chen, L., Hu, Y., Zhou, C., & Jiang, Y. (2020). Evaluation of a multiplex real-time PCR assay for the detection of common respiratory viruses in clinical specimens. *Frontiers in Cellular and Infection Microbiology*, *10*, 341. <u>https://doi.org/10.3389/fcimb.2020.00341</u>