A comparison of two ELISA methods for the investigation of anti-cytomegalovirus IgG antibodies

Article i	n Microbios · February 1997		
Source: Pub	Med		
			_
CITATIONS		READS	
5		59	
2 author	s, including:		
	José Gutiérrez-Fernández		
	University of Granada		
	472 PUBLICATIONS 3,951 CITATIONS		
	SEE PROFILE		

A comparison of two ELISA methods for the investigation of anti-cytomegalovirus IgG antibodies

J. Gutiérrez* and M. C. Maroto

Department of Microbiology, University Hospital St Cecil, University of Granada, Spain (*Reprint address)

Key words: IgG antibodies, serodiagnosis, cytomegalovirus

Abstract

The Alpha-method ELISA for detection of anti-cytomegalovirus (CMV) IgG antibodies (test 1) was compared with another ELISA technique MEIA (test 2). Samples (248 sera and 56 cerebrospinal fluid) from patients with suspected CMV infection were investigated. Discordant samples were re-analysed, undiluted, with a latex test. Positive results were considered to be true positives when there was agreement in the results from the two methods. There were fourteen discrepant samples (4.6%). The latex agglutination test confirmed eight positive for test 1 and six positive for test 2. The overall diagnostic yield of tests 1 and 2 was sensitivity, 91% and 100%; specificity, 99% and 96%; positive predictive values, 95% and 85%; and negative predictive values 98% and 100%, respectively.

Introduction

New systems have been recently introduced for the investigation of anti-cytomegalovirus (CMV) IgG antibodies, such as the Alphamethod (Behringwerke, Germany). This system has been validated only by comparison with other tests detecting other antibodies beyond those of the IgG class, such as the complement binding and latex agglutination tests (Gutiérrez et al., 1994).

In the present work we compared the Alpha-method for detection of anti-CMV IgG antibodies (Enzygnost, anti-CMV IgG) with another enzyme-linked immunosorbent assay (ELISA) technique (MEIA, Abbott, U.S.A).

Materials and methods

A total of 248 sera and 56 cerebrospinal fluid (CSF) samples from patients admitted to our hospital and with suspected cytomegalovirus (CMV) infection were investigated for the presence of IgG antibodies using the Alpha-method (in the case of CSF the assay was repeated using a second dilution of the sample, 1:40, in addition to the 1:231 dilution) and MEIA (IMX CMV; Abbott, U.S.A.) tests. Discordant samples were reanalysed, undiluted, with a latex test (CMV scan; Becton Dickinson, U.S.A.). Positive results were considered to be true positives when there was concordance in the results from the two methods.

Table 1 Correlations between the Alpha-method and MEIA test results for serum and CSF samples

Method	Serum: MEIA (+)	MEIA (-)	CSF: MEIA (+)	MEIA (-)
Alpha (+)	40	0	2	0
Alpha (-)	12	196		52

Results

Among the 304 samples studied there were fourteen discrepancies (4.6%). The latex agglutination test confirmed eight positive by the Alpha-method and six positive IMX results as true positives (Tables 1 and 2). The overall diagnostic yield of the Alpha-method was sensitivity, 91%; specificity, 99%; positive predictive values 95%; and negative predictive value, 98%. The corresponding data for the MEIA system were sensitivity, 100%; specificity 96%; positive predictive values 85%; and negative predictive values, 100%. The Alpha-method yielded similar results with the 1:231 and 1:40 dilutions of the samples, with the exception of two samples which were positive at the 1:40 dilution with both methods and negative at the 1:231 dilution (Tables 1 and 2).

Discussion

The ELISA test is one of the most widely used laboratory methods, because of its easy technique and acceptable sensitivity, and is therefore one of the tests most frequently used for investigating the presence of anti-CMV IgG antibodies (Doern et al., 1994; Gutiérrez et al., 1994; Kraat et al., 1992; Kropff et al., 1993; Landini, 1993; Rabalais et al., 1993; Roseff and Campos, 1993; Tomiyama et al., 1993; Van Zanten et al., 1993).

In our experience, the two ELISA techniques had a slightly divergent behaviour, and we cannot definitely state if the new Alpha-method surpassed the MEIA system. Table 3 summarizes the technical characteristics of both systems, which may help in reaching a decision to use either one. Significantly the manufacturers do not recommend either system for the investigation of antibodies in CSF. Despite this, we decided to compare both in these types of samples.

 Table 2
 Samples which were discordant with the Alpha-method and

 MEIA tests and results of the latex agglutination test

	Sample absorbance	e/cutoff absorba		
Sample	Alpha-method	MEIA	Latex	Interpretation
			CONTRACTOR OF THE SECURITY OF	
Serum	Negative	10.6	(-)	Negative
Serum	Negative	4.7	(+)	Positive
Serum	Negative	4.9	(-)	Negative
Serum	Negative	5.6	(-)	Negative
Serum	Negative	4.1	(-)	Negative
Serum	3.3	(-) ;	(-)	Negative
Serum	Negative	10	(-)	Negative
Serum	Negative	4.5	(+)	Positive
Serum	Negative	4.7	(-)	Negative
Serum	Negative	5.5	(-)	Negative
Serum	Negative	4	(-)	Negative
Serum	4	(-)	(-)	Negative
CSF	Negative	9.6	(+)	Positive
CSF	Negative	9	(+)	Positive

 Table 3
 Characteristics of the Alpha-method and the MEIA system

Parameter	Alpha-method	MEIA	
Minimum sample volume (μl)	20	150	
Usable on CSF samples	No	No	
Automated dispensation	Yes	Yes	
Automated ELISA	Yes	Yes	
Performing time (min)	180	45	
Semiquantitative results	Yes	Yes	

In one of the samples, true positive antibodies were detected by the MEIA and by the Alpha-method at the 1:40, but not at the 1:231 dilution. The reason may have been that with the latter method, and for reasons related to the antigen used, higher dilutions of the samples were needed in order to avoid false-positive reactions, as the test used an antigen from whole infected cells.

This recommendation from the manufacturer is warranted for plasma or serum samples, but in our opinion it does not hold for CSF samples, in which we observed no false-positive results when comparing the MEIA and the Alpha-methods at 1:40 dilution. However, we must stress that one serum sample yielded a false-positive result with the Alpha-method (Table 2). Both of them are useful for the investigation of antibodies in CSF samples, but a 1:40 sample dilution must be used with the Alpha-method.

References

COERN G. V., Robbie L. and Marras L. 1994. Comparison of two enzyme immunoassays and two latex agglutination assays for detection of cytomegalovirus antibody. *Diagn. Microbiol. Infect. Dis.* **20** 109–12.

GUTIÉRREZ J., Maroto C. and Piédrola G. 1994. Evaluation of a new reagent for anti-cytomegalovirus and anti-Epstein-Barr virus immunoglobulin G. *J. clin. Microbiol.* 32 2603–5.

KRAAT Y. J., Hendrix R. M., Landini M. P. and Bruggeman C. A. 1992. Comparison of four techniques for detection of antibodies to cytomegalovirus. *J. clin. Microbiol.* **30** 522–4. KROPFF B., Landini M. P. and Mach M. 1993. An ELISA using recombinant proteins for the detection of neutralizing antibodies against human cytomegalovirus. *J. med. Virol.* **39** 187–95.

LANDINI M. P. 1993. New approaches and perspectives in cytomegalovirus diagnosis. Prog. Med. Virol. 4 157–77.

RABALAIS G. P., Waldeyer S., Cost K. and Marshall G. S. 1993. Enzyme-linked immunosorbent assay for rapid measurement of serum-neutralizing activity against human cytomegalovirus. *Diagn. Microbiol. Infect. Dis.* **16** 75–7.

ROSEFF S. D. and Campos J. M. 1993. Detection of cytomegalovirus antibodies in serum using the TranSTAT-CMV and CMV scan assays. *Am. J. clin. Pathol.* **99** 539–41.

TOMIYAMA T., Sugano T., Tani S., Hosoda K. and Matsumoto Y. 1993. A microneutralization enzyme immunoassay for antibody to human cytomegalovirus. *J. Immunol. Meth.* 159 71–9.

VAN ZANTEN J., Van der Giessen M. and Van Son W. J. 1993. Antibody responses to human cytomegalovirus-specific polypeptides studied by immunoblotting in relation to viral load during cytomegalovirus infection. *J. med. Virol.* 39 80–7.

Accepted 25 June 1997

154 Microbios

J. Gutiérrez and M. C. Maroto

News to authors

Manuscripts will be refereed, processed and published rapidly providing the typescript and illustrations have been carefully and accurately prepared in the correct style of each journal.

By following the style of our biomedical journals meticulously you can obtain the advantages of some of the most rapid publication rates for research papers available anywhere. However, a prerequisite is that manuscripts must be impeccably presented in the journal style.

Read the leaflets prepared for authors, entitled *Information for contributors* and *Photographic illustrations*, and send manuscripts for the international biomedical journals MICROBIOS, CYTOBIOS and *BIOMEDICAL LETTERS*, to Dr Stuart Anderson, Executive Editor, The Faculty Press, 88 Regent Street, Cambridge CB2 1DP, England.

- * MICROBIOS is a biomedical research journal, established in 1969, which is concerned with all aspects of Bacteriology and Microbiology. Issues are published every three to four weeks comprising four volumes per annum.
- * BIOMEDICAL LETTERS is an international journal for rapid publication of medical, biomedical, and neuroscience research papers, and was first published in 1976. Issues are despatched bimonthly.
- * CYTOBIOS was founded in 1969, and is a biomedical journal for research papers into all aspects of cell science and genetics. Issues are published monthly in four volumes per annum.
- * Manuscripts are peer reviewed.
- * Fifty reprints are provided free to the first named author, although postage is extra.
- * Worldwide distribution, so authors invariably receive many requests for reprints.
- * Abstracted in CURRENT CONTENTS and all the leading abstracting journals.
- * Subscription rates and leaflets for authors are available from the publishers.

The Faculty Press 88 Regent Street Cambridge CB2 1DP England

MICROBIOS

is an international biomedical research journal, established in 1969, which is devoted to fundamental studies of viruses, bacteria, microfungi, microscopic algae, and protozoa. It is concerned with all aspects of micro-organisms, but lays particular emphasis upon chemical microbiology.

Original observations are accepted on the applications of microbiology in the fields of pharmaceutical and chemical production; food manufacture and spoilage; public health and sanitation; biodeterioration; pharmacology and immunology.

Papers on the organization and metabolic activities of micro-organisms are published, as well as work on cell-virus interactions. Manuscripts which are especially welcome are those dealing with the chemical anatomy of micro-organisms, and the biochemical and biophysical factors that affect microbial activity.

The subscription rate for 1998 will be £395.00 sterling.

CYTOBIOS

is a transworld biomedical research journal, established in 1969, which publishes original investigations into all aspects of cell organization. Contributions will be accepted on the behaviour, structure and function of animal and plant cells, including studies on extracellular products and subcellular organelles.

The journal emphasizes work at chemical and molecular levels. It publishes original papers on cytogenetics; cell division and growth; cell physiology and pathology; immunochemistry and immunobiology. Manuscripts are solicited which correlate findings in the biochemical and biophysical fields with morphological, cytological and physiological knowledge.

Discoveries resulting from advances in, and application of, modern biological and medical techniques to cytology are particularly welcome. So also are cytochemical papers which contribute to an understanding of cell organization and to the study of organic fine structure.

The subscription rate for 1998 will be £395.00 sterling.

BIOMEDICAL LETTERS

is an international research journal, established in 1976 as *Microbios Letters*, having the fundamental aim of accelerated publication, and distribution to a worldwide readership. It is intended for short and preliminary biomedical communications, but may include some longer papers and reviews. In general manuscripts should not exceed 5,000 words in length and include only one or two Tables and/or Figures.

BIOMEDICAL LETTERS is primarily designed for the publication of medical research papers. Clinical studies will be considered, and papers in such fields as cellular pharmacology, virology, bacteriology, biochemistry, immunology, molecular biology, biochemical genetics, biophysics, haematology, physiology. Manuscripts on neuroscience, radiation biology and cancer research, will be particularly welcome.

The subscription rate for 1998 will be £200.00 sterling.

Manuscripts

To enable the Executive Editors to plan the publishing programme of forthcoming issues, the following information will be much appreciated:

	to submit a paper for publication in CROBIOS	Tick box
	TOBIOS	П
, ,	OMEDICAL LETTERS	
	e send me a free copy of the leaflet ed 'Information for contributors'	
The proba	ble title of the paper will be:	
and I unde	that this manuscript will be based on original, unpubliserstand that all papers are subject to peer reviewing pries. The approximate date of submission will be:	shed research, ocedures before
Name		
Status		
Address		
Please co.	mplete and return to the address below:	

THE FACULTY PRESS 88 Regent Street Cambridge CB2 1DP Great Britain