



SELECTED OPPORTUNITIES IN INFECTIOUS DISEASES

Diagnosis of latent Mycobacterium Tuberculosis infection (BIO13394)

DIAGNOSIS OF LATENT MYCOBACTERIUM TUBERCULOSIS INFECTION (BIO13394)

Stage:
Pre-Analytic
Validation

▶ Biomarker:

- ◆ Rv2626c antigen, IFN γ

▶ Technology:

- ◆ ELISA

▶ Sample:

- ◆ Blood

▶ Information:

- ◆ Diagnostic

▶ Scientific and Clinical Rationale:

- ◆ Current antigens used for diagnosing M. tuberculosis (CFP-10 and ESAT-6) do not discriminate between active and latent infection.
- ◆ Rv2626c is a dormancy regulon-encoded antigen.
- ◆ Previous studies suggest that Rv2626c antigen is recognized by household contact individuals or TB patients.

▶ POC:

- ◆ Healthy Donors (HD, n=60) vs Tuberculosis patients (TB, n=56) and Latently infected TB patients (LTBI, n=56)
- ◆ Additional cohort of Healthy (HD, n=23), Tuberculosis (TB, n=18), Close contacts (CC, n=47), or LTBI (n=8)
- ◆ LTBI profile was assigned to any subject with a positive QuantiFERON-TB Gold In-Tube test (QFT) and no clinical or radiological evidence of active TB.
- ◆ PBMCs from different subjects were cultured with Rv2626c or CFP-10+ESAT-6 (early secretory antigens currently used to diagnose M. tuberculosis in IFN- γ release assays) : cell-free supernatants were evaluated for IFN- γ production by ELISA.

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Product factsheet

Clinical State and Market Opportunity

▶ Clinical State:

◆ Epidemiology:

- ◆ TB in the top 10 causes of death worldwide: more than 9M incident cases¹
- ◆ More than 50% worldwide death in India, Indonesia, China and South Africa¹

◆ Treatment:

- ◆ Multiple chemical classes of TB drugs (Rifamycins, fluoroquinolones, oxazolidinones ...)²

▶ Clinical needs:

- ◆ Current tests do not discriminate latent or active TB
- ◆ One third of world population has latent TB but are not ill yet

▶ Opportunity:

◆ Market:

- ◆ Part of 1b\$ annual market of TB diagnostics³
- ◆ EME are dominated by latent TB testing³

◆ Current Gold Standard:

- ◆ TB skin tests, IGRA, T-SPOT...

Unique Selling Points

▶ Priority :

- ◆ EP14 306 329.5 on 2014/08/29
- ◆ PCT/EP2015/069791 on 2015/08/28

▶ Product:

- ◆ Rv2626c antigen Peptide

▶ Scientific Publication(s):

- ◆ *EBioMedicine*, 2015 May 30, Peña D. et al., doi: 10.1016/j.ebiom.2015.05.026.

▶ Development opportunities

- ◆ Ongoing clinical studies on bigger cohorts for further validation
- ◆ Ongoing research open for partnering

¹ The World Health Organization

² WHO & TDR, 2013, [Priorities for tuberculosis research](#)

³ FIND & TDR, 2006, [Diagnostics for tuberculosis](#)

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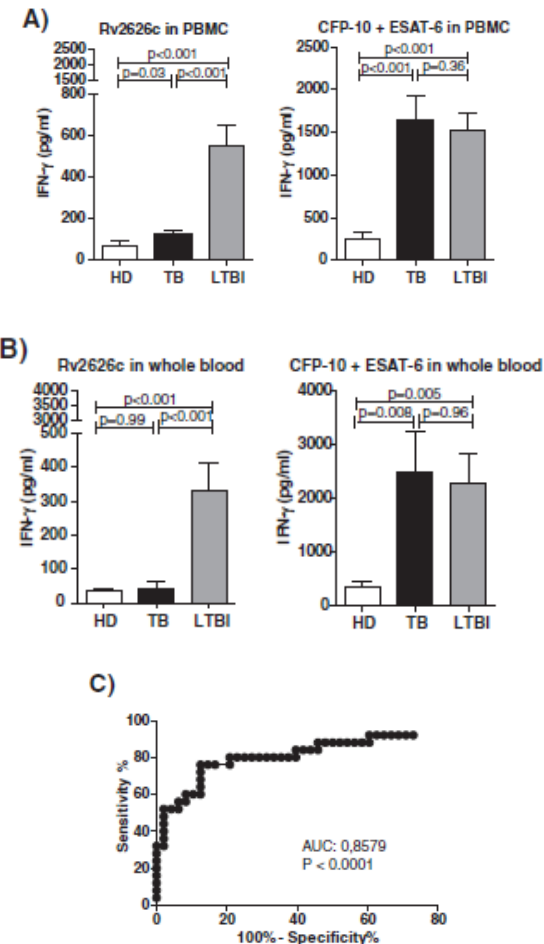
Proof of concept

▶ **Pre-Analytic Validation: LTBI individuals, but not TB patients, secrete IFN- γ against Rv2626c, in contrast to stimulation with CFP-10+ESAT-6 which elicit IFN- γ in both LTBI individuals and TB patients**

- ◆ (A) Peripheral blood mononuclear cells (PBMC) from healthy donors (HD), patients with tuberculosis (TB) and latently by *M. tuberculosis*-infected individuals (LTBI) were cultured with Rv2626c or CFP-10+ESAT-6 for 5 days. Cell free supernatants were then recovered and IFN- γ production was evaluated by ELISA.
- ◆ (B) Whole blood from HD, TB patients and LTBI individuals was cultured with Rv2626c or CFP-10+ESAT-6 for 24h. Plasma samples were then collected and IFN- γ production was evaluated by ELISA. Bars represent the Mean \pm SEM. Mann-Whitney test was used for unpaired samples.

▶ **ROC curve analysis for IFN- γ responses to Rv2626c reinforces the potential of Rv2626c antigen for discriminating LTBI individuals from non-LTBI individuals**

- ◆ (C) ROC curve analysis for evaluation of the predictive value of whole blood IFN- γ levels produced in response to Rv2626c for differentiating LTBI individuals from non-LTBI individuals (HD or TB). ROC, receiver operating characteristic; AUC, area under the ROC curve.

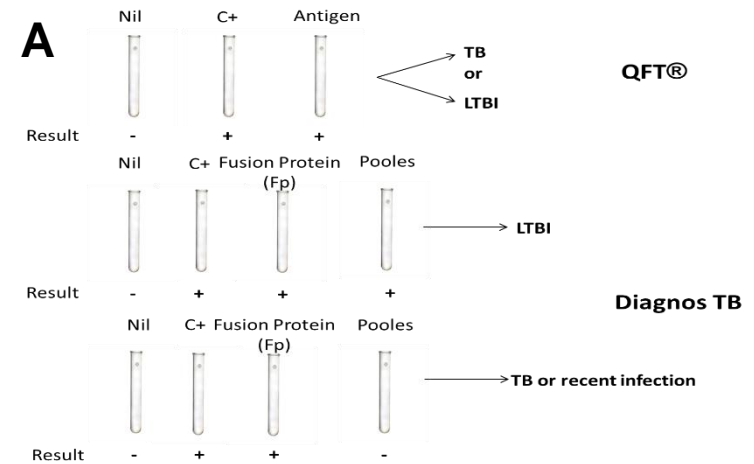


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Proof of concept

► **Pre-Analytic Validation:** Comparison of QFT test and proposed DiagnostTB test show discrimination of LTBI vs Active TB patients when current QTF test does not enable such discrimination

- ◆ (A) Schematic comparison of QFT and DiagnostTB tests, and interpretation of results



- ◆ (B) Comparison among results obtained with QFT and DiagnostTB. Colors in the graphs represent different results observed with DiagnostTB in each QFT category

