

# Evaluation of an Antigen Detection Rapid Diagnostic Test for Detection of SARS-CoV-2 in Clinical Samples

AHY Lam<sup>1</sup>, KY Leung<sup>2</sup>, RR Zhang<sup>1</sup>, D Liu<sup>1</sup>, Y Fan<sup>1</sup>, AR Tam<sup>3</sup>, CCY Yip<sup>4</sup>, VCC Cheng<sup>4</sup>, KY Yuen<sup>2,4,5,6</sup>, IFN Hung<sup>1,3,5</sup>, KH Chan<sup>2,5,6</sup>

<sup>1</sup>Department of Medicine, Li Ka Shing Faculty of Medicine, University of Hong Kong, Hong Kong Special Administrative Region, China

<sup>2</sup>Department of Microbiology, Li Ka Shing Faculty of Medicine, University of Hong Kong, Hong Kong Special Administrative Region, China

<sup>3</sup>Department of Medicine, Queen Mary Hospital, Hong Kong Special Administrative Region, China

<sup>4</sup>Department of Microbiology, Queen Mary Hospital, Hospital Authority, Hong Kong Special Administrative Region, China

<sup>5</sup>State Key Laboratory for Emerging Infectious Diseases, Li Ka Shing Faculty of Medicine, University of Hong Kong, Hong Kong Special Administrative Region, China

<sup>6</sup>Carol Yu Centre for Infection, Li Ka Shing Faculty of Medicine, University of Hong Kong, Hong Kong Special Administrative Region, China

## Background

Antigen detection rapid diagnostic tests have been developed for first-line large-scale screening given their rapidity, simplicity, and accuracy. This study evaluates the diagnostic performance of an antigen detection rapid diagnostic test (BLOK BioScience, London, UK) detecting SARS-CoV-2 nucleocapsid protein.

## Methodology

In this study, 130 nasopharyngeal swab samples were collected, including 110 from COVID-19 patients and 20 from non-infected individuals with results confirmed by RT-PCR. Serially diluted SARS-CoV-2 isolate and samples from COVID-19 patients were tested using rapid diagnostic test to determine its sensitivity. Other viral isolates including SARS-CoV, common coronaviruses and respiratory viruses, together with samples from non-infected individuals, were tested for specificity. Ten clinical samples from COVID-19 patients with SARS-CoV-2 variants, including alpha, beta, gamma, delta, and eta variants, were collected to evaluate the test's potential application in detecting emerging variants.

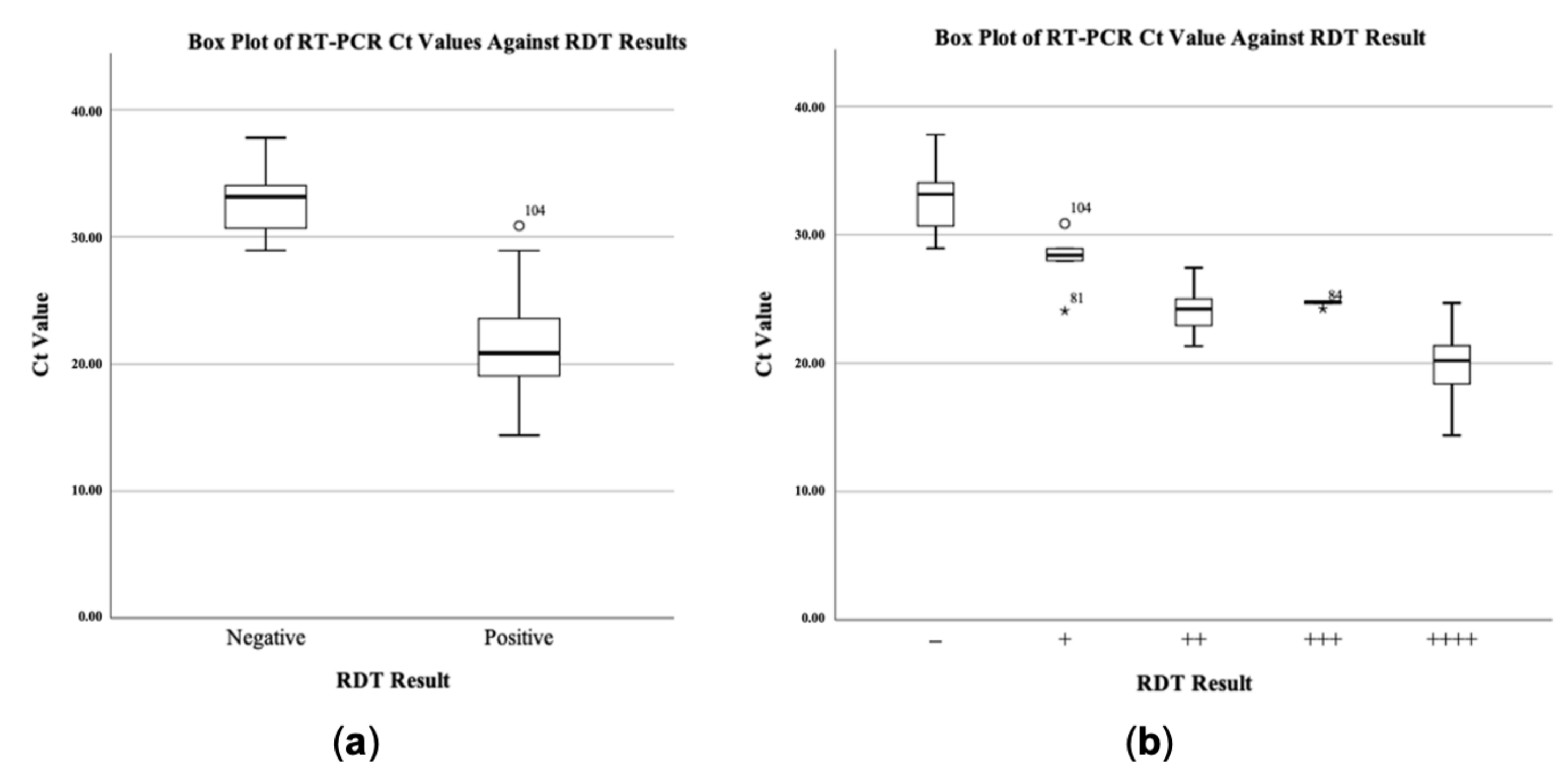
## Results

Overall sensitivity was 92%, stratifying into viral loads yielded 100% for Ct < 25 samples including SARS-CoV-2 variants, but 11.11% for Ct ≥ 30 samples. The analytical sensitivity of log<sub>10</sub> TCID<sub>50</sub>/mL 2.0 was identified for SARS-CoV-2. Ninety-seven percent specificity with only SARS-CoV cross-reactivity lead to the Youden index of 0.89.

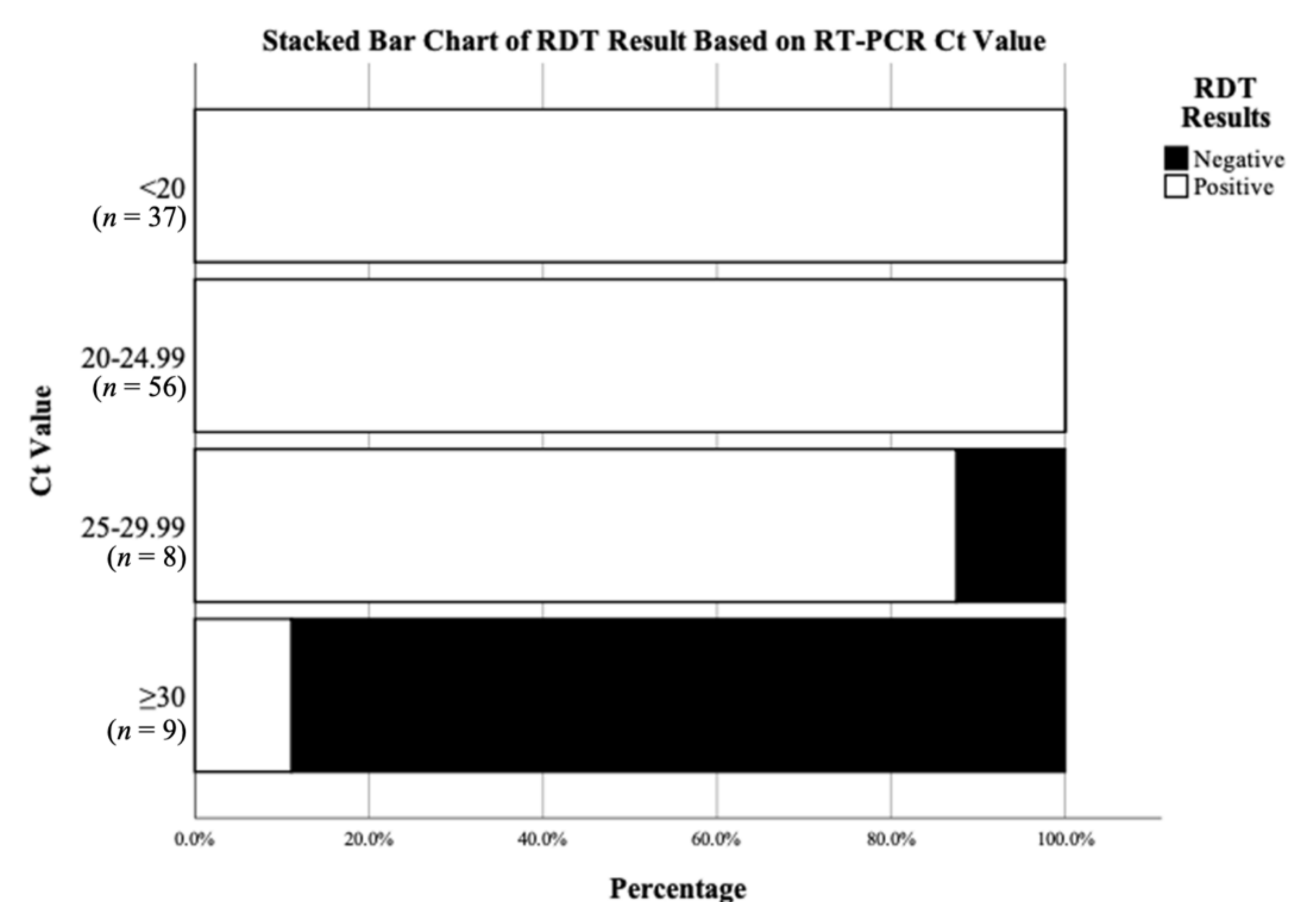
## Conclusion

The rapid diagnostic test has a high sensitivity for detecting SARS-CoV-2 in high viral load samples, possibly including emerging SARS-CoV-2 variants, but reduced sensitivity in low viral load samples. The ease-of-use, rapidity, cost-effectiveness and ability to detect SARS-CoV-2 including variants at a high viral load may suggest the rapid diagnostic test's potential application to decentralize and increase efficiency of COVID-19 testing, with its optimized usage as a complementary testing method to other tests such as RT-PCR, or as a point-of-care test for large-scale screening, particularly for pandemic areas or airport border infection control.

**Figure 1. (a)** Box plot of RT-PCR Ct value against rapid diagnostic test positivity for samples from COVID-19 patients; **(b)** Box plot of RT-PCR Ct value against rapid diagnostic test result expressed semi-quantitatively for samples from COVID-19 patients.



**Figure 2.** Stacked bar chart of percentages of positive and negative rapid diagnostic test results for samples from COVID-19 patients at different RT-PCR Ct value levels.



**Table 1.** Test performance characteristics of rapid diagnostic test.

| Parameters                      | RDT [95% confidence interval (CI)] |
|---------------------------------|------------------------------------|
| <b>Sensitivity</b>              |                                    |
| Overall                         | 92% (85-96%)                       |
| Ct < 20                         | 100% (91-100%)                     |
| 20 ≤ Ct < 25                    | 100% (94-100%)                     |
| 25 ≤ Ct < 30                    | 88% (47-100%)                      |
| Ct ≥ 30                         | 11% (0-48%)                        |
| <b>Specificity</b>              |                                    |
| Positive predictive value (PPV) | 99% (94-100%)                      |
| Negative predictive value (NPV) | 79% (66-87%)                       |
| Youden index                    | 0.89                               |