



The solution for StrepA diagnostics

mariPOC[®] pharyn is an easy and rapid multianalyte test for detection of group A streptococci and adenovirus. mariPOC[®] StrepA is sensitive enough to replace traditional bacterial culture. Therefore there is no need to double-check with bacterial culture. Automation and easy workflow of mariPOC[®] ensure rapid testing and immediate treatment.

Why to test?

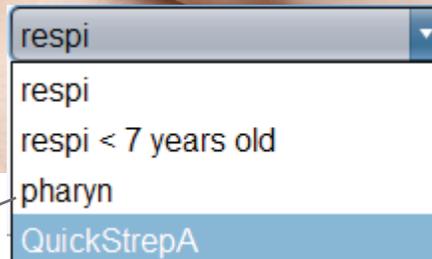
Clinical diagnosis of pharyngitis based solely on symptoms is often inaccurate and may lead to suboptimal use of antibiotics¹⁾. However, often the treatment decision is made during the first visit. Prompt testing at the point of care is the solution for this challenge.

1) IDSA Guideline for GAS Pharyngitis, CID 2012:55 (15 November), 1279

Laboratory quality near your patient

mariPOC[®] fits both laboratory and point of care use. It enables more accurate and rapid results compared to the traditional tonsillitis tests. mariPOC[®] tests (pharyn and respi) are easy to perform. One can run mariPOC[®] tests without laboratory experience.

mariPOC[®] is a continuous feed analyser. After 2 minute sample pretreatment one can walk away. Strong positive samples are reported automatically in 15 minutes and weak positives (and negatives) are reported in 55 minutes. Thanks to automated reporting, user-borne interpretation errors are non-existing. mariPOC[®] doesn't require calibration. Internal autoverification ensures quality in every result.



Pharyn results in two steps:

- ▶ 15 min
- ▶ 55 min

Final StrepA result:

15 min

Pharyn

Pharyn test reports results in 15 min with equal sensitivity to standard StrepA culture. Final results, which are even more sensitive, are reported in 55 min. Pharyn test reports also adenovirus result from the same sample.

QuickStrepA

QuickStrepA test reports result with equal sensitivity to golden standard, bacterial culture, in 15 min.

		Bacterial culture	
		positive	negative
mariPOC [®]	positive	38	17
	negative	1	137

All positive in 15 minutes

Final result more sensitive to culture

Based on mariPOC[®] StrepA EPE (external performance evaluation) data.



Who should be tested?

Few percent of population carry non-symptomatic colonized *Streptococcus pyogenes* as a part of mucosal flora. Testing is recommended when the symptoms indicate StrepA tonsillitis. mariPOC® is a great tool for quick and accurate diagnosis of tonsillitis and for optimization the use of antibiotics.

Clinical studies²⁾ show that mariPOC® is more sensitive than bacterial culture. The superior sensitivity was proved with PCR and specificity was verified with a group of healthy subjects.

2) Vakkila J. et al. J Clin Microbiol. 2015;53:2097-83

What can cause tonsillitis?

Adenovirus

Adenovirus causes mostly respiratory infections and tonsillitis but can also cause conjunctivitis and gastroenteritis. Adenovirus occurs during the whole year. Due to elevated level of CRP concentration in blood, adenovirus infection can be confused with bacterial infection.

Group A Streptococcus

(*Streptococcus pyogenes*)

StrepA occurs during the whole year causing tonsillitis and other skin infections. StrepA infection is most common among 5 to 15 year old children. StrepA can be diagnosed using a rapid test and is often treated with antibiotics.



1. Examine the patient



2. Choose a test that supports the treatment decision



3. Take a sample

(same sample can be used to run either Pharyn test or QuickStrepA test)



4. Run automatic mariPOC® analysis and treat patient