



**IN THIS ISSUE**

New Interferon Gamma Release Assay

Enteroviruses and Late Summer Rash Illnesses

## **New Interferon Gamma Release Assay (IGRA)**

The County of San Luis Obispo Public Health Laboratory (SLOPHL) announces the substitution of the currently available Interferon Gamma Release Assay (called the Quantiferon Gold In-Tube assay) with the Quantiferon Plus Assay, developed by Qiagen Inc. The new test is reported to have greater sensitivity than the current test.

Currently, providers order test #7700 Quantiferon TB Gold In-tube (QFT-GIT) assay. This test uses three special vacutainer tubes, where an approximate 1 mL volume of venous blood is drawn for each tube.

**The last day the Public Health Laboratory will be able to accept the Quantiferon three-tube collection set will be Tuesday, September 25.**

Contact the laboratory at 805-781-5507 to place an order for the new test #8800 Quantiferon Plus four-tube collection kits and begin use of this collection kit on September 26.

**The laboratory will accept the new kits for testing beginning on September 26.**

The collection and transport of the four-tube kit is the same as for the three-tube kit. That includes the low-vacuum draw, the need to shake the tubes multiple times to thoroughly mix the antigen to the leucocytes, the need to prevent temperature extremes during transport, and the need for the collected blood tubes to arrive at the laboratory within 16 hours of collection. The test fee remains the same.

The new test #8800 Quantiferon Plus assay uses two M tuberculosis (TB) antigen tubes and provides two TB antigen values. The report will still include quantitative values for each test parameter, and if the value of either of the TB antigen tubes falls in a range just above the cutoff, the result will be a borderline result. The test is reported to have greater sensitivity than the current test, detecting more latent TB infections. It is also purported to detect CD8 lymphocyte gamma interferon with one of the two TB antigens; CD8 responses are statistically associated with new infections.

For more information or to place an order for the new QFT Plus collection kits, call the Public Health lab at 805-781-5507.

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## Enteroviruses and Late Summer Rash Illnesses

Rash illnesses can occur at any time of the year and we recognize that even influenza virus infection can cause a rash—but late summer can be a peak season for enteroviruses.

Enteroviruses are a large, diverse group of RNA viruses including polioviruses, coxsackieviruses, echoviruses and a number of numerically designated serotypes that cause meningitis, encephalitis, paralysis, myocarditis, and respiratory illness.

While an intense vaccination campaign is on the verge of eliminating poliovirus from the last country where transmission still takes place, Pakistan, infections due to many other enteroviruses cause a considerable public health burden worldwide. Studies have shown enterovirus 71 to be a particularly damaging agent, with major outbreaks in Taiwan and Southeast Asia.

The California Department of Public Health is interested in the association of enterovirus D68, which caused a multi-state outbreak of illness and flaccid transverse myelitis (FTM).

The SLOPHL offers the Respiratory PCR Panel (#6310) which detects Enterovirus / Rhinovirus as one of the 17 agents detected and also offers Enterovirus RT-PCR (#6300), a reference assay. Because the enterovirus and rhinovirus are so closely related, sequencing of the viral genome is often required to conclusively characterize virus detections. This effort is currently performed by the State Viral and Rickettsial Diseases Laboratory (VRDL) in support of public health investigations.

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