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Trichomonas Vaginalis Molecular Study

Testing for *Trichomonas Vaginalis* (TV) has traditionally been performed by direct examination (wet film, stained slide), or culture in specialised broth media. Although these methods are highly specific, they have sub-optimal sensitivity. In particular these tests are more likely to miss low level positives in asymptomatic patients.

In recent years there has been a move towards molecular methods for the detection of this sexually transmitted infection because of the increased sensitivity and transport/storage benefits (no requirement to maintain the flagellate viability). The main limiting factor in introducing these tests has been the significantly increased cost.

To enable molecular test introduction, other laboratories in New Zealand have considered selective testing based around high risk patient populations and/or testing on request. The problem with this approach has been that the risk stratification has been based on results obtained by traditional methods, which may be biased or incomplete because of sub-optimal test sensitivity.

In order to more effectively identify the patient population that requires testing, Pathlab is undertaking a TV molecular study. For approximately one month all appropriate STI specimens will be tested by both TV culture (current standard procedure), and the BD Viper Q^x TV molecular test. The data will then be analysed to identify the local population cohorts most likely to have an increased risk of TV infection. This analysis can then be utilised to optimise the testing criteria.

Dependent on the results of the study, it is hoped that the new molecular method for TV detection will replace the traditional culture based method, and that the optimal testing criteria will be proposed to laboratory requestors.

During the trial the TV molecular testing will be performed after the standard procedures, with a delay of one to two days. All TV molecular positive results will be retrospectively compared to the standard culture result, confirmed, and if they differ (i.e. TV culture negative), an updated TV positive molecular result will be reported.

If you have any questions with regard to results during the study please contact one of the Clinical Microbiologists or myself.

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