Comparison of the VIDAS® C. difficile GDH and the GDH component of the C. diff Quik Chek Complete for detection of *Clostridium difficile* in stools



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OBJECTIVE

The laboratory diagnosis of *Clostridium difficile* infection (CDI) is still challenging. Two- or three-step algorithms based on glutamate dehydrogenase (GDH) detection as a screening test are now recommended by American (ASM, SHEA/IDSA) and European (ESCMID) guidelines. GDH is a constitutive enzyme produced by *C. difficile* strains; detection of this enzyme in stools provides information about the presence of the bacterium. The objective of this study was to evaluate the performance of the new test VIDAS[®] *C. difficile* GDH (bioMérieux) and the GDH component of the C. diff Quik Chek Complete assay (Techlab[®]) compared to culture on TCCA medium.

METHODS

This prospective study was conducted at the National Reference Laboratory for *Clostridium difficile*, Université Pierre et Marie Curie, Paris. All diarrheic stools (taking the shape of the container) from patients > 2 years suspected of having C. *difficile* infection were included in the study.

Culture was performed on a selective medium (TCCA: brain heart infusion agar supplemented with 5% defibrinated horse blood, 0.1% taurocholate, 250 mg/ml cycloserine, and 8 mg/ml cefoxitin, homemade). Plates were incubated for 48 hours at 37°C in anaerobic atmosphere and strains were identified by mass spectrometry (Maldi-Tof, Brucker). VIDAS[®] *Clostridium difficile* GDH and C. diff Quik Chek Complete were performed directly on stools according to the manufacturer's instructions.



Figure 1 : A. C. difficile strain on TCCA B. VIDAS® C. C. diff Quik Chek Complete®

RESULTS

408 consecutive untreated diarrhoeal stool samples from patients suspected of CDI were collected from April 20th to July 29th 2012 from patients hospitalized in four different university-affiliated hospitals in Paris.

The prevalence of positive culture on TCCA was 13%: 77.4% of the isolates were toxigenic and 22.6% non-toxigenic.

Compared to culture on TCCA, the sensitivity, specificity, positive and negative predictive values were 96.2%, 97.7%, 86.4% and 99.4%, respectively, for the VIDAS[®] *Clostridium difficile* GDH (Table I).

Five results (1.2%) were undetermined with the C. diff Quik Chek Complete. After repeating the test, all results were negative. Compared to culture on TCCA, the sensitivity, specificity, positive and negative predictive values were 92.5%, 98.9%, 92.5% and 98.9%, respectively, for the GDH part of the C. diff Quik Chek Complete (Table II).

Discordant results are shown in Table III.

Table I : VIDAS® C. difficile GDH test versus culture on TCCA

		Culture on TCCA				Frequency (%)	CI 95%
		positive	negative	total	Sensitivity	96.2	[85.9-99.3]
VIDAS® <i>C. difficile</i> GDH	positive	51	8	59	Specificity	97.7	[95.4-98.9]
	negative	2	347	349	PPV	86.4	[74.5-93.6]
	total	53	355	408	NPV	99.4	[97.7-99.9]

Table II : C. diff Quik Chek Complete GDH component versus culture on TCCA

		Culture on TCCA				Frequency (%)	CI 95%
		positive	negative	total	Sensitivity	92.5	[80.9-97.6]
C. diff Quik chek	positive	49	4	53	Specificity	98.9	[96.9-99.6]
complete GDH component	negative	4	351	355	PPV	92.5	[80.9-97.6]
1.1.1	total	53	355	408	NPV	98.9	[96.9-99.6]

Table III : Discordant results

No stools	Culture	VIDAS® C. difficile GDH	C. diff Quik Chek Complete GDH component
2	Pos	Pos	Neg
0	Pos	Neg	Pos
2	Pos	Neg	Neg
1	Neg	Neg	Pos
5	Neg	Pos	Neg
3	Neg	Pos	Pos

CONCLUSION

The negative predictive values of the VIDAS[®] *Clostridium difficile* GDH test and the GDH component of the C. diff Quik Chek Complete assay are excellent and therefore these methods represent valuable screening tests. In addition, VIDAS[®] *Clostridium difficile* GDH is an automated test, allowing easier interpretation and traceability of results.