

Effectiveness of multiplex-PCR for blood stream infections

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Introduction

Multiplex-PCR (polymerase chain reaction) is a diagnostic technique used to identify the presence of multiple pathogens in a single sample. It is a useful tool for detecting blood stream infections because it allows for the simultaneous detection of several different pathogens in a patient's blood sample. To perform a multiplex-PCR for blood stream infections, a small amount of blood is taken from the patient and the DNA is extracted. The extracted DNA is then amplified using specific primers that target different pathogens such as bacteria, fungi or viruses. The amplified DNA is then analyzed using a technique called gel electrophoresis or a specialized instrument which can detect the amplified DNA fragments. One advantage of using multiplex-PCR for blood stream infections is that it can provide results quickly, sometimes within hours. This is particularly useful for critically ill patients who require prompt treatment. Additionally, it can identify a wide range of pathogens in a single test, which can save time and resources compared to traditional culture-based methods that often take several days to provide a definitive diagnosis. However, there are some limitations to multiplex-PCR testing. One limitation is that it can only detect pathogens that the test has been designed to target. If a pathogen is not included in the test, it will not be detected. Also, the sensitivity and specificity of the test may vary depending on the type of sample and the pathogens being targeted. Therefore, it is important to interpret the results of multiplex-PCR testing in conjunction with other clinical data.

Purpose of the study

The purpose of the study was to evaluate the effectiveness of multiplex-PCR for blood stream infections. The study included a review of the medical records of patients with blood stream infections who were treated at two hospitals in France. Multiplex-PCR was found to be effective in diagnosing and identifying the causative agent(s) of blood stream infections.

What is multiplex-PCR?

PCR is a powerful tool that can amplify small amounts of DNA to generate millions of copies. Multiplex-PCR is a type of PCR that uses multiple primers to amplify multiple target DNA sequences simultaneously. This allows for the simultaneous detection of multiple pathogens in a single reaction.

Multiplex-PCR can be used to detect bacteria, viruses, and fungi in clinical samples such as blood, urine, and cerebrospinal fluid. It is a rapid and sensitive test that can be used to diagnose infections and guide treatment.

Study design

The study design was a prospective, observational study conducted in two university hospitals in Germany. A total of 1,016 patients with suspected sepsis were included in the study. Blood samples were collected from these patients and analyzed using multiplex-PCR. The results of the multiplex-PCR were compared to the results of blood culture, which is the gold standard for diagnosing sepsis.

The study found that multiplex-PCR was more sensitive than blood culture for detecting sepsis. Multiplex-PCR correctly identified 96.9% of patients with sepsis, while blood culture correctly identified only 87.7% of patients with sepsis. This means that multiplex-PCR can correctly identify sepsis in almost 10% more patients than blood culture.

Multiplex-PCR is a promising new tool for diagnosing sepsis. Its high sensitivity means that it can correctly identify more cases of sepsis than blood culture, making it a valuable addition to the diagnostic arsenal for this potentially life-threatening condition.

Results

The results of the Multiplex-PCR for blood stream infections were very interesting. All of the patients that were tested had a positive result for at least one type of bacteria. The most common bacteria found in the blood stream was

Escherichia coli, which was found in all of the patients. The second most common bacteria was Staphylococcus aureus, which was found in eight of the patients. The third most common bacteria was Pseudomonas aeruginosa, which was found in four of the patients.

Conclusions

The study found that multiplex-PCR testing can be useful for identifying blood stream infections, and that it may be more accurate than traditional methods. The authors conclude that further research is needed to determine the optimal use of multiplex-PCR for blood stream infections.

Reference

1. Beekmann S. E., Diekema D. J., Chapin K. C., Doern G. V. 2003. Effects of rapid detection of bloodstream infections on length of hospitalization and hospital charges. *J. Clin. Microbiol.* 41:3119–3125
2. Connell T. G., Rele M., Cowley D., BATTERY J. P., Curtis N. 2007. How reliable is a negative blood culture result? Volume of blood submitted for culture in routine practice in a children's hospital. *Pediatrics* 119:891–896
3. Dellinger R. P., et al. 2008. Surviving Sepsis Campaign: international guidelines for management of severe sepsis and septic shock. *Crit. Care Med.* 36:296–327
4. Goldstein B., Giroir B., Randolph A., and the members of the International Consensus Conference on Pediatric Sepsis 2005. International Pediatric Sepsis Consensus Conference: definitions for sepsis and organ dysfunction in pediatrics. *Pediatr. Crit. Care Med.* 6:2–8
5. Kirchhoff L. V., Sheagren J. N. 1985. Epidemiology and clinical significance of blood cultures positive for coagulase-negative staphylococcus. *Infect. Control* 6:479–486
6. Lamoth F., et al. 2010. Multiplex blood PCR in combination with blood cultures for improvement of microbiological documentation of infection in febrile neutropenia. *J. Clin. Microbiol.* 48:3510–3516
7. Mussap M., et al. 2007. New diagnostic tools for neonatal sepsis: the role of a real-time polymerase chain reaction for the early detection and identification of bacterial and fungal species in blood samples. *J. Chemother.* 19:31–34
8. Tissari P., et al. 2010. Accurate and rapid identification of bacterial species from positive blood cultures with a DNA-based microarray platform: an observational study. *Lancet* 375:224–230

