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Hepatitis B Antigen Virus Test

Clinical Trial

Management of the study: R&D Department

Quality control department

Place of the study: Beijing China

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Abstract

• Background

Hepatitis B virus is a partially double-stranded circular DNA virus and is a member of the Hepadnaviridae family. The virus consists of a core capsid which contains viral DNA and this is surrounded by an envelope containing surface antigen (HBsAg). Both whole, intact virions and incomplete virus particles, consisting entirely of HBsAg, are produced during replication of HBV. The HBsAg particles vary greatly in morphology and are found in high concentrations in early acute infection and continue to be produced in chronic disease.

Rapid diagnostic tests have been developed for the detection of hepatitis B surface antigen (HBsAg). They represent a promising alternative to enzyme immunoassays and a powerful tool for large-scale screening and diagnosis of HBV infection, especially in regions without easy access to serological and molecular testing.

Method

A multi-center prospective study was conducted to evaluate the diagnostic sensitivity and specificity of HBsAg Rapid Test manufactured by Atlas Link (Beijing) Technology Co., Ltd in serum or plasma specimens from the patients clinically diagnosed as HBV infected.

Result

The comparison study result confirmed high diagnostic sensitivity and diagnostic specificity of HBsAg Test.

Conclusion

The HBsAg test kit is a simple, rapid, easy-to-run and highly sensitive assay that can be used in both high- and low-risk populations for the diagnosis of HBsAg carriage. It appears to be a promising new tool for large-scale screening and diagnosis of HBV infection.

Clinical Study

Hepatitis B Surface Antigen (HBsAg) Test clinical trials were conducted to determine the rate of diagnostic sensitivity and specificity across seroconversion panels and HBsAg positive probands including known HBV serotypes as defined in the CTS for in vitro diagnostic medical devices in conformance to Decisions 2009/108/EC.

1. Clinical Trial Location:

Study site for Diagnostic Sensitivity:

Evaluation Site	Probands
PLA 302 Hospital	30 Commercial HBsAg seroconversion Panels(BBI
	and ZMC)
Sichuan Center for Disease	275 HBsAg positive serum or plasma samples including
Control and Prevention	79 specimens known HBV Serotypes.
Key Laboratory of	279 HBV positive serum or plasma samples including
Molecular Biology on	82 specimens known HBV serotypes.
Infectious Diseases,	



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Chongqing University of Medical Sciences		

Study site for Diagnostic Specificity:

Evaluation Site	Probands
PLA 302 Hospital	200 hospitalized patients
PLA 302 Hospital	200 pregnant women
Key Laboratory of Molecular Biology	151 specimens from patients of potential
on Infectious Diseases, Chongqing	interference diseases
University of Medical Sciences	
Sichuan Center for Disease Control and	90 specimens from patients of potential
Prevention	interference diseases
Key Laboratory of Molecular Biology	593 specimens from blood donors
on Infectious Diseases, Chongqing	
University of Medical Sciences	
Blood Center of Beijing Red Cross	523 specimens from blood donors
Society	

2. Diagnostic Sensitivity Study Summary

A multi-center prospective study was conducted to evaluate the diagnostic sensitivity of HBsAg Rapid Test manufactured by Atlas Link (Beijing) Technology Co., Ltd in serum or plasma specimens from the patients clinically diagnosed as HBV infected. Total 554 positive serum samples including all the 4 HBV serotypes adw, ayw, ayr and adr,(Among the 554 there were 275 from SCCDC and 279 from Chongqing Medical University) were selected to evaluate the diagnostic sensitivity of HBsAg Rapid Test and compare the results with CE marked Beijing Wantai HBsAg EIA. From study results of SCCDC (Table 3), 275 of 275 positive samples were tested positive by both Atlas Link HBs Ag Rapid Test and Wantai HBsAg EIA. The diagnostic sensitivity of Atlas Link HBs Ag Rapid Test was 100% (275/275). From study results of Chongqing Medical University (Table 4), 278 of 279 HBsAg positive sera were tested positive by both Atlas Link HBsAg Rapid Test and Wantai HBsAg EIA, the sample showed false negative at Atlas Link product also gave false negative at Wantai HBsAg EIA product. The sensitivity of HBsAg Rapid Test was 99.64% (278/279). All the samples with known serotype were tested as positive by both assays.

Total 554 positive samples were tested 553 positive by HBsAg Test and CE marked Wantai HBsAg EIA; the one (No.216 from ChongYi) tested negative by both HBs Ag Rapid Test and Wantai HBsAg EIA, was further confirmed positive by PCR. The serotype of the false negative sample was unknown. The diagnostic sensitivity of Atlas Link HBsAg Rapid Test was 99.82% (553/554) and





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could identify the 4 HBV serotypes.

Study Method and Results

3 studies were carried out at different sites in China.

Total 30 commercial seroconversion panels including 20 from ZMC (ZeptoMetrix Corporation, ZMC, US) and 10 from BBI (SeraCare, US) were used to determine the relative diagnostic sensitivity of Atlas Link HBsAg Rapid Test. The relative diagnostic sensitivity was determined by comparing the earliest detection date of serum conversion of the patient to HBsAg seropositive with the HBsAg serological status of each series bleed with the data of CE-market HBs Ag products-Abbott HBsAg provided by ZMC or BBI. Atlas Link HBsAg Rapid Test showed earlier detection of seroconversion on panel 6275 and 11001 than Abbot's products, the value were -1, and -4 respectively; later detection of seroconversion on panel 11000, 11028 and PHM929, all the values were +1; the total value was -2. Overall, Atlas Link HBsAg Rapid Test demonstrated an ability to detect earlier in the conversion of a patient from seronegative to seropositive in comparison with Abbot HBsAg EIA products. (Table below)

Table Summary of Seroconversion Panels Detection at Atlas Link HBsAg Rapid Test

Panel Code		Period of Detection from the First Bleed Day			
	Abbot HBsAg EIA	Atlas Link HBsAg Rapid Test	with Abbot		
11064	68	68	0		
6271	7	7	0		
6273	25	25	0		
6274	0	0	0		
6275	22	9	-1		
6276	27	27	0		
6280	13	13	0		
6286	32	32	0		
6288	29	29	0		
6291	27	27	0		
6293	17	17	0		
11000	14	19	+1		
11001	44	0	-4		
11002	7	7	0		
11003	142	142	0		
11004	46	46	0		
11016	27	27	0		



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11028	22	27	+1
11058	38	38	0
11059	27	27	0
PHM906	137	137	0
PHM912	42	42	0
PHM918	NA	NA	0
PHM924	29	29	0
PHM926	20	20	0
PHM929	18	21	+1
PHM934	7	7	0
PHM936	5	5	0
PHM937	9	9	0
PHM938	0	0	0

Total 554 positive serum samples including all the 4 HBV serotypes adw, ayw, ayr and adr,(Among the 554 there were 275 from SCCDC and 279 from Chongqing Medical University) were selected to evaluate the diagnostic sensitivity of Atlas Link HBsAg Rapid Test and compare the results with CE marked Beijing Wantai HBsAg EIA. From study results of SCCDC (Table 1), 275 of 275 positive samples were tested positive by both Atlas Link HBs Ag Rapid Test and Wantai HBsAg EIA. The diagnostic sensitivity of Atlas Link HBs Ag Rapid Test was 100% (275/275). From study results of Chongqing Medical University (Table 2), 278 of 279 HBsAg positive sera were tested positive by both Atlas Link HBsAg Rapid Test and Wantai HBsAg EIA, the sample showed false negative at Atlas Link product also gave false negative at Wantai HBsAg EIA product. The sensitivity of HBsAg Rapid Test was 99.64% (278/279). All the samples with known serotype were tested as positive by both assays. Total 554 positive samples were tested 553 positive by Atlas Link HBsAg Test and CE marked Wantai HBsAg EIA; the one (No.216 from ChongYi)tested negative by both Atlas Link HBsAg Rapid Test and Wantai HBsAg EIA, was further confirmed positive by PCR. The serotype of the false negative sample was unknown. The diagnostic sensitivity of Atlas Link HBsAg Rapid Test was 99.82% (553/554) and could identify the 4 HBV serotypes.

Table 1 Summary of HBsAg positive specimens' detection from SCCDC at Atlas Link HBsAg Rapid Test

Serotype	Results of Atlas Link HBs Antigen Rapid Test		Results of CE Marked Wantai HBsAg EIA		Subtotal
	Positive	Negative	Positive	Negative	
adw2	51	0	51	0	51
ayw1	18	0	18	0	18
adr	5	0	5	0	5
ayw2	3	0	3	0	3
ayr	1	0	1	0	1



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ayw3	1	0	1	0	1
Unknown serotype	196	0	196	0	196
Subtotal	275	0	275	0	275

Table 2 Summary of HBsAg Positive Specimens' Detection from Chongqing Medical University at Atlas Link HBsAg Rapid Test

Serosubtype	Results of Atlas Link		Results of	Subtotal	
	HBs Antiger	n Rapid	HBsAg EIA		
	Test				
	Positive	Negative	Positive	Negative	
adw2	67	0	67	0	67
ayw1	15	0	15	0	15
Unknown	196	1	196	1	197
serosubtype					
Subtotal	278	1	278	1	279

Table 3 Summary of HBsAg Positive Specimens' Detection at Atlas Link HBsAg Rapid Test

Serotype	Results of Atlas Link HBs		Results of	Subtotal	
	Antigen Rap	id Test	Wantai HBs	Ag EIA	
		T		T	
	Positive	Negative	Positive	Negative	
adw2	118	0	118	0	118
ayw1	33	0	33	0	33
adr	5	0	5	0	5
ayw2	3	0	3	0	3
ayr	1	0	1	0	1
ayw3	1	0	1	0	1
Unknown serotype	392	1	392	1	393
Subtotal	553	1	553	1	554

Comparison of the sensitivity of Atlas Link HBsAg Rapid Test with that of Wantai HBsAg EIA

		Atlas Link HBs	subtotal	
		Positive	Positive Negative	
Results of CE	Positive	553	0	553
Marked	Negative	0	1	1
Wantai				
HBsAg EIA				
Subtotal		553	1	554

Sensitivity of Atlas Link HBsAg Test: 99.82% (553/554). Sensitivity of CE Marked HBsAg Test: 99.82% (553/554).



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3. Diagnostic specificity Study Summary

A multi-center prospective study was conducted to evaluate the diagnostic specificity of the HBsAg Rapid Test manufactured by Atlas Link (Beijing) Technology Co., Ltd in serum or plasma specimens from different populations including blood donors, inpatients, pregnant women and other potentially interfering diseases. From the 6 diagnostic specificity studies among different populations, total 1752 negative samples including 1116 from blood donors, 200 from inpatients, 200 from pregnant women, 236 from potentially interfering diseases were selected to evaluate the specificity of HBsAg Rapid Test and Compare the results with Wantai HBsAg EIA. Of the 1752 samples, 1750 were tested negative, 2 tested positive (both from blood donors) by HBsAg Rapid Test. All the results which showed inconsistent with CE marked Wantai HBsAg EIA were further confirmed negative by PCR. The diagnostic sensitivity of HBsAg Rapid Test was 99.89% (1750/1752), false positive rate is 0.11%.

Study Method and Results

6 studies were carried out at different sites in China.

Total 200 specimens with known non-HBs Antigen positive from hospitalized patients in PLA 302 Hospital, PRC, were used to evaluate the diagnostic specificity among inpatients. 200 of 200 specimens were tested HBsAg negative by both HBs Antigen Test and Wantai HBsAg EIA. The diagnostic specificity of HBsAg Rapid Test in inpatients was 100% (200/200).

Table Summary of Diagnostic Specificity of HBsAg Rapid Test among Inpatients

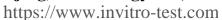
200 inpatients	Results of HBsAg Rapid		Results of Wantai		Subtotal
	Test		HBsAg EIA		
	Negative Positive		Negative	Positive	
True Negative	200	0	200	0	200

Among the 200 pregnant women, there were 17 multiparas. 200 of 200 specimens were tested HBs Ag negative by both HBsAg Test and Wantai HBsAg EIA. The diagnostic specificity of HBsAg Rapid Test in pregnant women was 100% (200/200). (Table below)

Table Summary of Diagnostic Specificity of HBsAg Rapid Test among Pregnant Women

200 Pregnant	Results of HBsAg Rapid		Results of Wantai		Subtotal
Women	Test		HBsAg EIA		
	Negative	Positive	Negative	Positive	
True Negative	200	0	200	0	200

Total 236 specimens (146 from Chongqing Medical University and 90 from SCCDC) from patients with potential interference diseases were tested to evaluate the diagnostic specificity of HBsAg





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Rapid Test. The potential interference diseases status were HAV, HIV, HCV, Dengue, EBV, CMV, HTLV, Rubella and E.coli infections, CRF, ASOT, RF positive. There were at least 15 specimens for each interference status. 151 specimens from Chongqing Medical University included the interference status of HAV, HIV, HCV, EBV, RF, CMV, ASOT, CRF, Dengue, Rubella and HTLV positive. These 146 specimens had no interference with HBsAg Rapid Test (Table 4). 90 specimens from SCCDC included the interference status of HAV, HCV Dengue, HTLV and E.coli positive. 90 of the 90 specimens showed negative results by HBsAg Rapid Test (Table 5). Among the 236 interference specimens, 236 showed no interference with HBsAg Rapid Test. The diagnostic specificity among potential interference disease status was 100% (236/236)(Table 6) Table 4 Summary of Diagnostic Specificity of HBsAg Rapid Test among Interference Disease Status (Chongqing Medical University)

Interference Diseases		Results of HBs Ag Rapid Test		Results of CE Marked Wantai HBsAg EIA		
	Positive	Negative	Positive	Negative		
HAV	0	12	0	12	12	
HIV	0	15	0	15	15	
HCV	0	20	0	20	20	
Dengue	0	5	0	5	5	
CMV	0	15	0	15	15	
EBV	0	15	0	15	15	
HTLV	0	4	0	4	4	
Rubella	0	15	0	15	15	
RF	0	15	0	15	15	
CRF	0	15	0	15	15	
ASOT	0	15	0	15	15	
Subtotal	0	146	0	146	146	

Table 5 Summary of Diagnostic Specificity of HBsAg Rapid Test among interference Disease Status (SCCDC)

Interference Diseases			Results of Wantai HBs.	Subtotal	
	Positive	Negative	Positive	Negative	
HAV	0	20	0	20	20
HIV	0	20	0	20	20
Dengue	0	16	0	16	16
HTLV	0	13	0	13	13



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Anti-E.coli	0	21	0	21	21
Subtotal	0	90	0	90	90

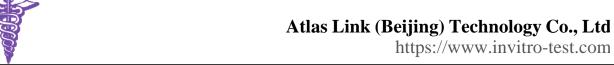
Table 6 Summary of Diagnostic Specificity of HBsAg Rapid Test among Interference Disease Status

Interference Diseases			Results of CE Marked Wantai HBsAg EIA		Subtotal
	Positive	Negative	Positive	Negative	
HAV	0	32	0	32	32
HIV	0	35	0	35	35
HCV	0	20	0	20	20
Dengue	0	21	0	21	21
CMV	0	15	0	15	15
EBV	0	15	0	15	15
HTLV	0	17	0	17	17
Rubella	0	15	0	15	15
RF	0	15	0	15	15
CRF	0	15	0	15	15
ASOT	0	15	0	15	15
Anti-E.Coli	0	21	0	21	21
Subtotal	0	236	0	236	236

Total 1116 specimens from blood donors (523 from Blood Center of Beijing Red Cross Society and 593 from Blood Transfusion Department, the Secondary Affiliated Hospital of Chongqing Medical University) were used to evaluate the diagnostic specificity of HBsAg Rapid Test. The 1116 specimens consisted of 81 specimens from consecutive blood donations. Among the 523 specimens from Blood Center of Beijing Red Cross Society, 522 showed negative results by HBsAg Rapid Test, the diagnostic specificity was 99.81% (Table 7). Among the 593 specimens from Chongqing Medical University, 592 showed negative results by HBsAg Rapid Test, the diagnostic specificity was 99.83%(Table 8). Combined these two results together, total 1116 specimens from blood donors, 1114 showed negative results by HBsAg Rapid Test, 2 gave false positive; the diagnostic specificity among blood donors was 99.82%(Table 9)

Table 7 Summary of Diagnostic Specificity of HBsAg Rapid Test among Blood Donors (Blood Center of Beijing Red Cross Society)

Blood donors	Results of HBsAg		Results of Wantai		Subtotal
	Rapid Test		HBsAg EIA		
	Negative	Positive	Negative	Positive	
True Negative	522	1	521	2	523



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Table 8 Summary of Diagnostic Specificity of HBsAg Rapid Test among Blood Donors (Chongqing Medical University)

	ı		l		
Blood donors	Results of HBsAg Rapid		Results of Wantai		Subtotal
	Test		HBsAg EIA		
	Negative	Positive	Negative	Positive	
True Negative	592	1	592	1	593

Table 9 Summary of Diagnostic Specificity of HBsAg Rapid Test among Blood Donors

	0 1	<u> </u>	0 1	υ	
Blood donors	Results of HBsAg Rapid		Results of Wantai		Subtotal
	Test		HBsAg EIA		
	Negative	Positive	Negative	Positive	
True Negative	1114	2	1113	3	1116

From the 6 diagnostic specificity studies among different populations, total 1752 negative samples including 1116 from blood donors, 200 from inpatients, 200 from pregnant women, 236 from potentially interfering diseases were selected to evaluate the specificity of HBsAg Rapid Test and Compare the results with Wantai HBsAg EIA. Of the 1752 samples, 1750 were tested negative, 2 tested positive (both from blood donors) by HBsAg Rapid Test. All the results which showed inconsistent with CE marked Wantai HBsAg EIA were further confirmed negative by PCR. The diagnostic sensitivity of HBsAg Rapid Test was 99.89% (1750/1752), false positive rate is 0.11% (Table 10).

Table 10 Summary of Diagnostic Specificity of HBsAg Rapid Test

	Results of HBsAg Rapid Test		Results of CE Marked Wantai HBsAg EIA		Subtotal
	Negative	Positive	Negative	Positive	
Blood Donors	1114	2	1113	3	1116
200 clinic al	200	0	200	0	200
specimens					
200 Pregnant	200	0	200	0	200
Women					
236 potentially	236	0	236	0	236
interfering					
samples					
Subtotal	1750	2	1749	3	1752

Table 11 Comparison of the specificity of HBsAg Test with that of Wantai HBsAg EIA

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		Altas Link HBsAg Test		subtotal			
		Positive	Negative				
Results of CE	Positive	0	3	3			
Marked	Negative	2	1747	1749			



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Wantai				
HBsAg EIA				
Subtotal	2	1750	1752	

Specificity of HBsAg Test: 99.89% (1750/1752)

Specificity of CE Marked HBsAg Test: 99.83% (1749/1752)

When evaluated the diagnostic sensitivity, specificity, Positive Predictive Value (PPV), Negative Predictive Value (NPV), and 95% Confidence limits (CL) of the calculated sensitivity and specificity of HBsAg Test with total 554 true positive and 1752 true negative HBsAg serum samples, the sensitivity was 99.82% (553/554), the specificity was 99.89% (1750/1752), PPV was 99.64%(553/555), NPV was 99.94%(1750/1751), 95% CL of sensitivity was 99.65%-99.99%; 95% CL of specificity was 99.84%-100%.

	Altas Link HBs	subtotal	
	Positive		
True Positive	553	1	554
True	2	1750	1752
Negative			
Subtotal	555	1751	2306

Comparison of the sensitivity and specificity of HBsAg Test with those of CE Marked HBsAg EIA, the agreement of the two HBsAg test was 99.78%((553+1748)/2306), Statistical significance of sensitivity and specificity between HBsAg Test and CE Marked HBsAg EIA was determined by x^2 test, and no significant difference between these two assays. (P>0.01)

		Altas Link HBs	subtotal	
		Positive	Negative	
Results of CE	Positive	553	3	556
Marked	Negative	2	1748	1750
Wantai				
HBsAg EIA				
Subtotal		555	1751	2306

4. Conclusion

By analysis the data collected in these clinical investigations, it is concluded that Hepatitis B Surface Antigen Test (Serum/Plasma) manufactured by Atlas Link (Beijing) Technology Co., Ltd has relatively high sensitivity, specificity and accuracy for a lateral flow One Step test. This test is convenient, fast and simple to operate. The test has been determined to be safe and effective. No special instrument is needed to read the test result. The background is clear and interpretation of the test result is very easy.