**INTRODUCTION**

Cryptosporidiosis is a diarrhoeal disease caused by microscopic parasites of the genus *Cryptosporidium*. Once an animal or person is infected, the parasite lives in the intestine and passes in the stool. The parasite is protected by an outer shell that allows it to survive outside the body for long periods of time and makes it very resistant to chlorine-based disinfectants. Both the disease and the parasite are commonly known as "Crypto." Giardiasis is a diarrhoeal illness seen throughout the world. It is caused by a flagellate protozoan parasite, *Giardia intestinalis*, also known as *G. lamblia* and *G. duodenalis*. Giardia is a common cause of gastrointestinal disturbance in both high- and low-income countries. The incidence of Giardia is generally higher in low-income countries (e.g. many countries of Africa, Asia, and South and Central America) where access to clean water and basic sanitation is lacking. Nearly all children in this setting will acquire *Giardia* at some point in their childhood, and the prevalence of the parasite in young children can be as high as 10%-30%. In areas such as Western Europe and the United States of America, *Giardia* infection is associated with ingestion of contaminated water, person-to-person spread, recent foreign travel, and recreational swimming. *Giardia* may be a cause of 2%-5% of cases of diarrhoea in high-income countries.

**PRINCIPLE OF THE TEST**

The CoproStrip™ *Giardia/Cryptosporidium* is a qualitative immunoassay for the detection of *Cryptosporidium* and *Giardia* antigens in human faeces samples. The membrane is pre-coated with antibodies against *Cryptosporidium* (red line) and antibodies against *Giardia* (blue line) antigens on the test line region. During testing, the sample reacts with the particle coated with anti-*Cryptosporidium* and anti-*Giardia* antibodies which was pre-dried on the test strip. The mixture moves upward on the membrane by capillary action. In the case of a positive result the specific antibodies present on the membrane will react with the mixture conjugates and generate one or two coloured lines. A green coloured band always appears in the control line (third line) and serves as verification that sufficient volume was added, that proper flow was obtained and as an internal control for the reagents.

**MATERIALS PROVIDED**

- Devices
- Instructions for use
- Specimen collection vial with buffer
- Positive control

**MATERIALS NOT PROVIDED**

- Specimen collection container
- Disposable gloves
- Timer

**STORAGE AND STABILITY**

Store as packaged in the sealed pack either at refrigerated or room temperature (2-30°C/36-86°F). The test is stable through the expiration date printed on the sealed pack. The test must remain in the sealed pack until use. Do not freeze.

**SPECIMEN COLLECTION AND HANDLING**

Collect sufficient quantity of faeces (1-2 g or mL for liquid sample). Stool samples should be collected in clean and dry containers (no preservatives or transport media). The samples can be stored in the refrigerator (2-4°C/36-40°F) for 1-2 days prior to testing. For longer storage the specimen must be kept frozen at −20°C/−4°F. In this case,
the sample will be totally thawed, and brought to room temperature before testing.

Make sure that specimens are not treated with solutions containing formaldehyde or its derivatives.

**PROCEDURE**

To process the collected stool samples (see illustration 1):

Use a separate specimen collection vial for each sample. Unscrew the cap of the vial and introduce the stick two times into the faecal specimen to pick up a little of sample (150 mg: about the size of a small pea). Close the vial with the buffer and stool sample. Shake the vial in order to assure good sample dispersion. For liquid stool samples, aspirate the faecal specimen with a dropper and add 150 uL into the specimen collection vial with buffer.

Test Procedure (see illustration 2)

Allow the tests, stool samples and buffer to reach to room temperature (15-30ºC/59-86ºF) prior to testing. Do not open pouches until ready to perform the assay.

1. Remove the Device from its sealed pouch and use it as soon as possible.
2. Shake the specimen collection vial to assure a good sample dispersion. Break off the tip of the vial.
3. Use a separate device for each sample. Dispense exactly 4 drops into the specimen well (S). Start the timer.
4. Read the result at **10 minutes** after dispensing the sample.

Illustration 1

Pick up the sample

4 drops of the mixture “sample + buffer”

Illustration 2

Unscrew the cap of the specimen collection vial and insert the positive control swab into the buffer.

5. **Discard the swab.**

**INTERPRETATION OF RESULTS**

Illustration 3

<table>
<thead>
<tr>
<th>CRYPTO</th>
<th>GIARDIA</th>
<th>CRYPTO-GIARDIA</th>
<th>NEGATIVE</th>
<th>INVALID</th>
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**POSITIVE:**

CRYPTO positive: Two lines appears across the central window, in the result line region (red test line marked with the letter T) and in the control line region (green control line marked with the letter C). See illustration 3.

GIARDIA positive: Two lines appears across the central window, in the result line region (blue test line marked with the letter T) and in the control line region (green control line marked with the letter C). See illustration 3.

CRYPTO-GIARDIA positive: Three lines appears across the central window, in the result line region two lines (red test line and blue test line marked with the letter T) and in the control line region (green control line marked with the letter C). See illustration 3.

**NEGATIVE:** Only one green band appears across the control line region marked with the letter C (control line). See illustration 3.

**INVALID:** A total absence of the green control coloured band regardless the appearance or not of the red and blue test lines. Note: Insufficient specimen volume, incorrect procedural techniques or deterioration of the reagents are the most likely reasons for control line failure. Review the procedure and repeat the test with a new test. If the problem persists, discontinue using the test kit and contact your local distributor. See illustration 3.

**NOTES ON THE INTERPRETATION OF RESULTS**

The intensity of the red and blue coloured band in the result line region (T) will vary depending on the concentration of antigens in the specimen. However, neither the quantitative value, nor the rate of increase in antigens can be determined by this qualitative test.

**QUALITY CONTROL**

Internal procedural controls are included in the test:

- A green line appearing in the control line region (C). It confirms sufficient specimen volume and correct procedural technique.
- External Quality Control-A Positive Control is included in the kit for the convenience of the user.

Procedure for External Quality Control Testing

1. Remove the positive control swab from its sealed bag just before use.
2. Unscrew the cap of the specimen collection vial and insert the positive control swab into the buffer.
3. Rotate the swab in the liquid for 10 seconds.
4. Pull out the swab carefully while squeezing it against the inner wall of the collection tube.
5. **Discard the swab.**

**LIMITATIONS OF THE PROCEDURE**

1. CoproStrip™ Giardia/Cryptosporidium will only indicate the presence of parasites in the specimen (qualitative detection) and should be used for the detection of Cryptosporidium and Giardia antigens in faeces specimens only. Neither the quantitative value nor the rate of increase in antigen concentration can be determined by this test.
2. An excess of sample could cause wrong results (brown bands appear). Dilute the sample with the buffer and repeat the test.
3. Do not use specimens treated with solutions containing formaldehyde or its derivatives.
4. If the test result is negative and clinical symptoms persist, additional testing using other clinical methods is recommended. A negative result does not at any time preclude the possibility of cryptosporidiosis or giardiasis.
5. After one week of infection, the number of parasites in faeces is decreasing, making the sample less reactive. Stool samples should be collected within one week of the onset of symptoms.
This test provides a presumptive diagnosis of cryptosporidiosis and/or giardiasis. All results must be interpreted together with other clinical information and laboratory findings available to the physician.

### PERFORMANCE CHARACTERISTICS

**Sensitivity and Specificity**

An evaluation performed on stool samples (determined by microscopy techniques) from patients in a local Hospital in Spain using CoproStrip™ Giardia /Cryptosporidium showed:

- **Sensitivity**: >99% of sensitivity for Cryptosporidium and 97% of specificity for Giardia
- **Specificity**: >99% of specificity for Cryptosporidium and >99% of specificity for Giardia

The samples were tested with microscopy technique and confirmed by PCR technique.

**Cross-Reactivity**

An evaluation was performed to determine the cross reactivity of CoproStrip™ Giardia /Cryptosporidium. There is not cross reactivity with common gastrointestinal parasites occasionally present in faeces.

- Entamoeba hystolitica

### BIBLIOGRAPHIC REFERENCES


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