Fecal Lactoferrin as an Indicator of Intestinal Inflammation in Patients with Antibiotic-Associated Diarrhea. Karen S. Long and Debby K. Taniquchi. Clinical Laboratories, West Virginia University Hospitals, West VA.

Introduction:

Clostridium difficile (CD) is a major culprit of antibiotic–associated diarrhea (AAD) accounting for about 20% of cases. CD infection ranges from mild symptoms that respond to supportive care alone to more serious cases such as pseudomembraneous colitis (PMC) having severe intestinal inflammation and diarrhea.

<u>Aim:</u>

To evaluate fecal specimens of subjects suspected of AAD for CD and elevated fecal lactoferrin as a marker of intestinal inflammation.

Methods:

Fecal specimens of subjects suspected of AAD were tested for CD toxins A and B for toxigenic CD, glutamate dehydrogenase (GDH) for CD and for elevated lactoferrin by enzyme-linked immunoassay (ELISA). Specimens were diluted in the respected kit diluents and tested according to the package inserts. The specimen dilution factor and cut-off for each test kit is listed below.

Kit names	Dilution	Cut-off
TOX A/B Test	1:5	0.120 (A _{450nm)}
C.Diff CHEK	1:5	0.120 (A _{450nm)}
IBD-SCAN®	serial 1:10 >	•7.24 μg/mL

(Quantitative lactoferrin ELISA)

Incubations were done at 37°C and room temperature for the conjugate steps and substrate development steps, respectively.

Patient Population:

Karen- Do you have some information for this?

It could be titled Specimen Information for decribing the type and storage/handling of the fecal specimens.

Results:

Linear Regression of a Typical Lactoferrin Standard Curve



Range of lactoferrin for CD (+) and CD(-) test subjects

N=197	Range of lactoferrin levels	Percent Elevated (>7.24ug/mL)
CD-neg/GDH- neg subjects	0 - 99.8	35.6%
CD-pos/GDH- pos subjects	0.34 - >100	92.2%

CD positive rate for AAD subjects

Total ELISA assessments N = 244	Total specimens	CD-positive: CD toxin (+) and GDH (+)	CD-negative: CD toxin (-) or GDH (-)
Total AAD subjects	244	20.9% (51/244)	79.1% (193/244)

Statistical Analysis of Test Results

N=197	CD- tox (+) and GDH (+)	CD-tox (-) and GDH (-)	N=244	CD- tox (+) or GDH (+)	CD-tox (-) or GDH (-)
Elevevated lactoferrin	47	52	Elevevated lactoferrin	78	52
Baseline lactoferrin	4	94	Baseline lactoferrin	20	94

Summary of Statistical Analysis

¹ N=197 ² N=244	Lactoferrin ¹ CD(+) vs. CD (-)	Lactoferrin ² CD tox (+)orGDH (+)vsCD(-)
Sensitivity (relative)	92.2%	79.6%
Specificity (relative)	64.4%	64.4%
Predictive Pos Value	47.5%	60.0%
Predictive Neg Value	95.9%	82.5%
Correlation	71.6%	70.5%

Conclusion:

•CD ELISA results showed a 20% CD positive rate as expected for the AAD population.

•The measurement of elevated fecal lactoferrin is useful for indicating intestinal inflammation in cases of CD disease.

•The detection of intestinal inflammation in subjects suspected of AAD may aid in the optimization of treatment.

Karen Long, Ph.D., WSU, West VA e-mail: klong@hsc.edu