



Timely Accurate Diagonostics for a TB-Free Africa

Training on Tuberculosis Drug and Susceptibility Testing (MGIT DST – Liquid Method)

Module 11: BACTEC MGIT 960 DST troubleshooting

Date:

By:

Venue:

Module outline

- Equipment and reagent use
- Error reports for DST set
- DST troubleshooting
- Summary





The right equipment used correctly

- Start with the right equipment/supplies
 - Use only sterile tubes and pipettes
 - Sterile glass beads to break up clumps in inoculum from solid media
 - Calibrated pipettes
 - Drug addition to tubes
 - 0.5 McFarland standard with same tube diameter as inoculum tube and same media
 - Organism in 7H9, use 7H9 blank in densitometer
 - Vortex well and allow clumps to settle
 - Do not select inoculum from bottom of tube or over inoculate tubes with clumps of organisms





Use the correct reagents

- PZA test medium and MGIT 7 ml tubes are not interchangeable when testing SIRE and PZA DST
- PZA supplement and SIRE supplement are not interchangeable
- Do not use supplement other than that supplied with the drugs - no PANTA or other growth supplement
- Drug reconstitution:
 - Use sterile distilled/deionized water
 - Ensure drug dissolves completely
 - Store reconstituted drug at -20 °C up to 6 months, but do not exceed original expiration date
 - Use thawed, reconstituted drug the same day; discard any unused portions





Use the correct inoculum

- Start with the right inoculum
 - Pure cultures only
 - Fresh cultures
 - Slant < 14 days
 - Positive MGIT tube
 - Day MGIT 960 called 'positive' plus 1 day to 5 days from date of positivity
 - Homogeneous inoculum
 - Use sterile glass beads and vortex to break up organism clumps
 - Use only supernatant for inoculation
 - Too high or too low an inoculum may give erroneous results or un-interpretable results
 - Prepare dilutions according to procedure
 - Use accurate pipette to add inoculum to tubes



Error report for DST set

- •Some conditions occur that may affect the test results; the instrument will report this as an error (X)
 - •GC tubes become positive in less than 4 days
 - Inoculum too heavy
 - GC tubes remain negative up to 21 days
 - Inoculum too light





Invalid DST sets 'X'

- •Growth control is not positive within 13 days (SIRE) or 21 days (PZA):
 - Assumption is made that set is underinoculated
- •Growth control is positive too soon (< 4 days):
 - Assumption is made that set is overinoculated or contaminated
- ANY tube is missing in carrier





DST interpretation of DST results

- Invalid results 'X'
 - Initial inoculum was too heavy
 - If working from MGIT tube, 'Day' 3 to 5 must be diluted
 - If working from solid media
 - Tube must be allowed to settle over-inoculation and minimize aerosols
 - Adjust suspension from solid to 0.5 McFarland
 - Initial specimen not vortex-mixed completely; clumps still present in suspension
 - •Growth Control suspensions for SIRE and PZA are different (1:100 vs 1:10)





DST troubleshooting: Non-interpreted results

- •Instrument took too long to interpret results (SIRE >14 days; PZA >21 days)
 - Initial inoculum too light
 - Precise pipettes must be used for dilutions and addition to tubes
 - Not transfer pipettes
 - If working with solid media
 - Media may have been picked up, which interferes with reading 0.5 McFarland
 - Initial culture too old
 - Not in proper growth phase





DST troubleshooting (1)

False susceptible

- Organism inoculum is too light
 - Starting suspension must be > 1.0 McFarland
- Suspension not homogeneous
- Culture too old
- Growth control dilution was too heavy
 - Growth control grew too fast
- Was proper amount of supplement added to tubes?
 - Was supplement properly stored?
- Drug not reconstituted properly
- Too much drug added to tubes
- Are tube caps on tight? If not, oxygen can leak into tube
- Only PZA medium and PZA supplement can be used for PZA test

Organism could be borderline-resistant



DST troubleshooting (2)

False resistant

- Culture is contaminated or mixed culture
- Organism inoculum was too heavy
- Organism was not properly diluted
- Suspension was not homogeneous or had clumps
- Growth control dilution was too light
 - Growth control grew too slowly
- Drug was not reconstituted properly
- Drug was not stored properly
- Drug was not added to tube
- MGIT tube was not mixed properly after the addition of the organism suspension
 - Organism could be borderline-resistant

DST troubleshooting (3)

- Perform definitive identification
 - Perform ZN smear on positive MGIT tubes

- Identify MTBC
 - Some NTMs show resistance to anti-mycobacterial drugs





DST troubleshooting (4)

Verify purity of inoculum

- Confirm inoculum purity
 - ZN smear
 - Record cellular morphology on worksheet
 - MTBC mixed with NTM
 - Contamination (fungus and bacteria)
 - Blood plate for contamination check
 - Middlebrook 7H10
 - Rule out mixed mycobacterial cultures





Status X: error/Indeterminate results

- Verify resistance profile
 - Any resistance to a drug
 - Confirm resistance
 - Drug not added to tube
 - Less than 0.1 ml of drug added to tube
 - Inoculum selected from the bottom of seed tube or clumps were not allowed to settle
 - Inoculate a MGIT 960 seed tube
 - Reset DST panel with resistant drug





ZN on growing drug-containing tubes

- If Middlebrook 7H10 is not available to confirm mycobacteria purity
 - ZN on resistant drug-containing tubes
 - Verify that only one type of cellular morphology is present
 - Still need to reset DST to verify drug was added to tube





DST troubleshooting: When to re-test

- Un-interpreted results
- Mono-resistance (especially RIF, EMB & PZA)
- Results disagree with previous testing from the same patient
 - Borderline resistance/susceptibility?
- Patient is a new untreated case and shows resistance
- QC organisms fail to give expected results
- Unexpected high number of resistant isolates in a batch

Troubleshooting summary

- Organism suspension <u>must</u> be homogeneous, without clumps
- Care must be taken when preparing dilutions
- Drugs must be reconstituted and stored properly
- Sterile tubes and pipettes must be used
- Accurate pipettes must be used, not disposable transfer pipettes
- QC of DST is critical to ensure test is functioning properly
 - Should be performed on all new lots of DST reagents and GIT tubes and weekly with each batch of testing upranational Reference Laboratory

Assessment

- List the possible causes of;
 - False resistance DST results and ways to troubleshoot them
 - False susceptibility DST results and ways troubleshoot them





References

- BACTEC® MGIT 960™ System User's Manual. Becton Dickinson Company. 2004/06 Document number MA-0117. Revision E
- BACTEC® MGIT 960™ System. Policy and procedure. October 1999.
 Revision A.
- Laboratory Procedure BBL™ MGIT Mycobacteria Growth Indicator Tube 7ml supplemented with BACTEC® MGIT Growth Supplement, BACTEC™ MGIT PANTA™ Antibiotic Mixture. October 1999. Revision B
- BACTEC® MGIT 960™ SIRE Kit for the Antimycobacterial Susceptibility testing of Mycobacterium tuberculosis. 8008200 2005/11
- MGIT™ Procedure Manual, Prepared for the Foundation for Innovative New Diagnostics, For BACTEC™ MGIT 960™ TB System, Also applicable for Manual MGIT), Salman H. Siddiqi,, Sabine Rüsch-Gerdes, July 2006
- GLI TB training package
 ttp://www.stoptb.org/wg/gli/trainingpackages.asp

ww.who.int/tb



Acknowledgments

















Timely Accurate Diagnostics for a TB-Free Africa



OST/PP/011, Version 1.0, Effective date: