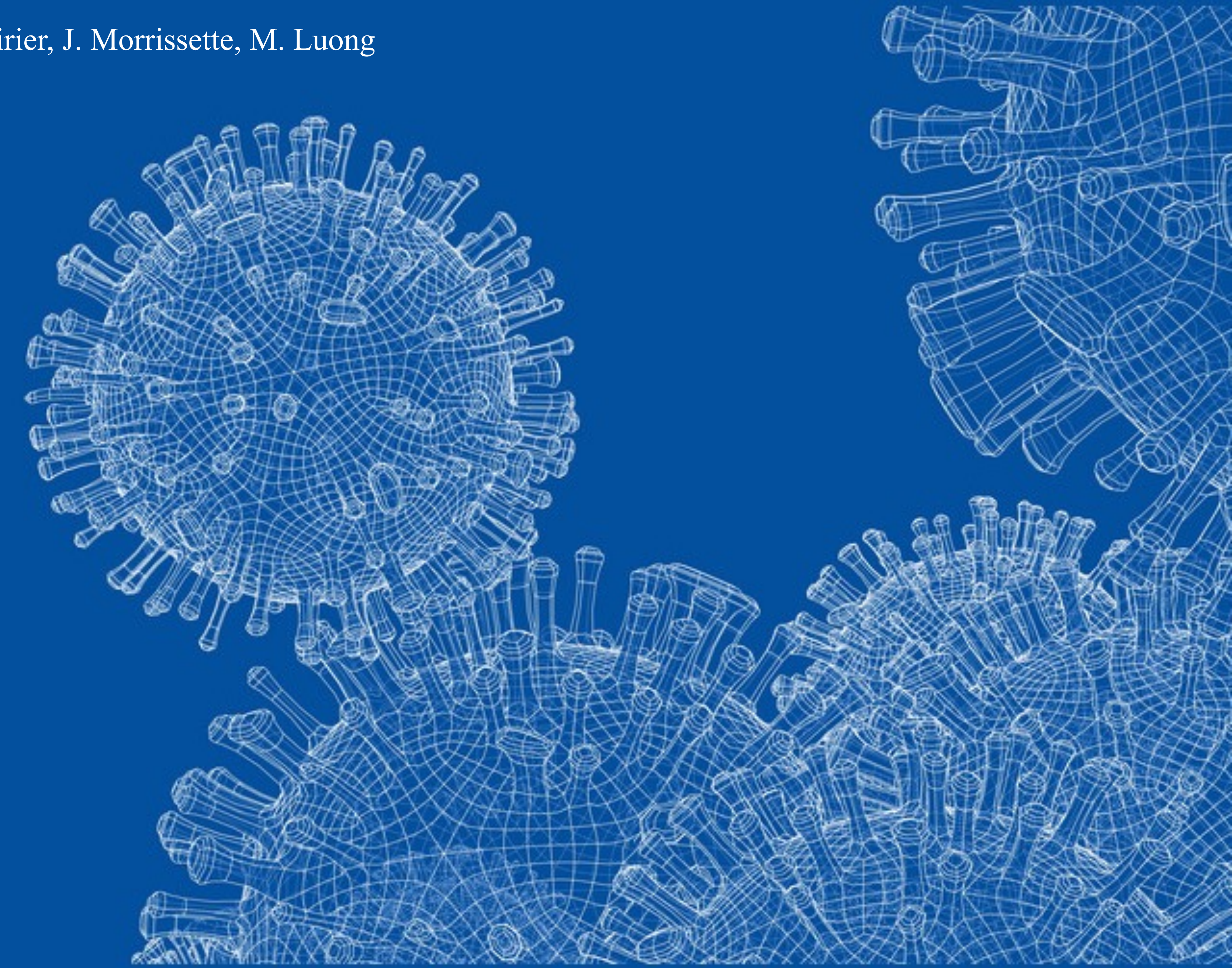




PRESENTER
Lucila Baldassarre, MD

Quantitative PCR on GI biopsy is sensitive and specific for GI CMV disease in SOT recipients, with faster results than the gold standard



Background

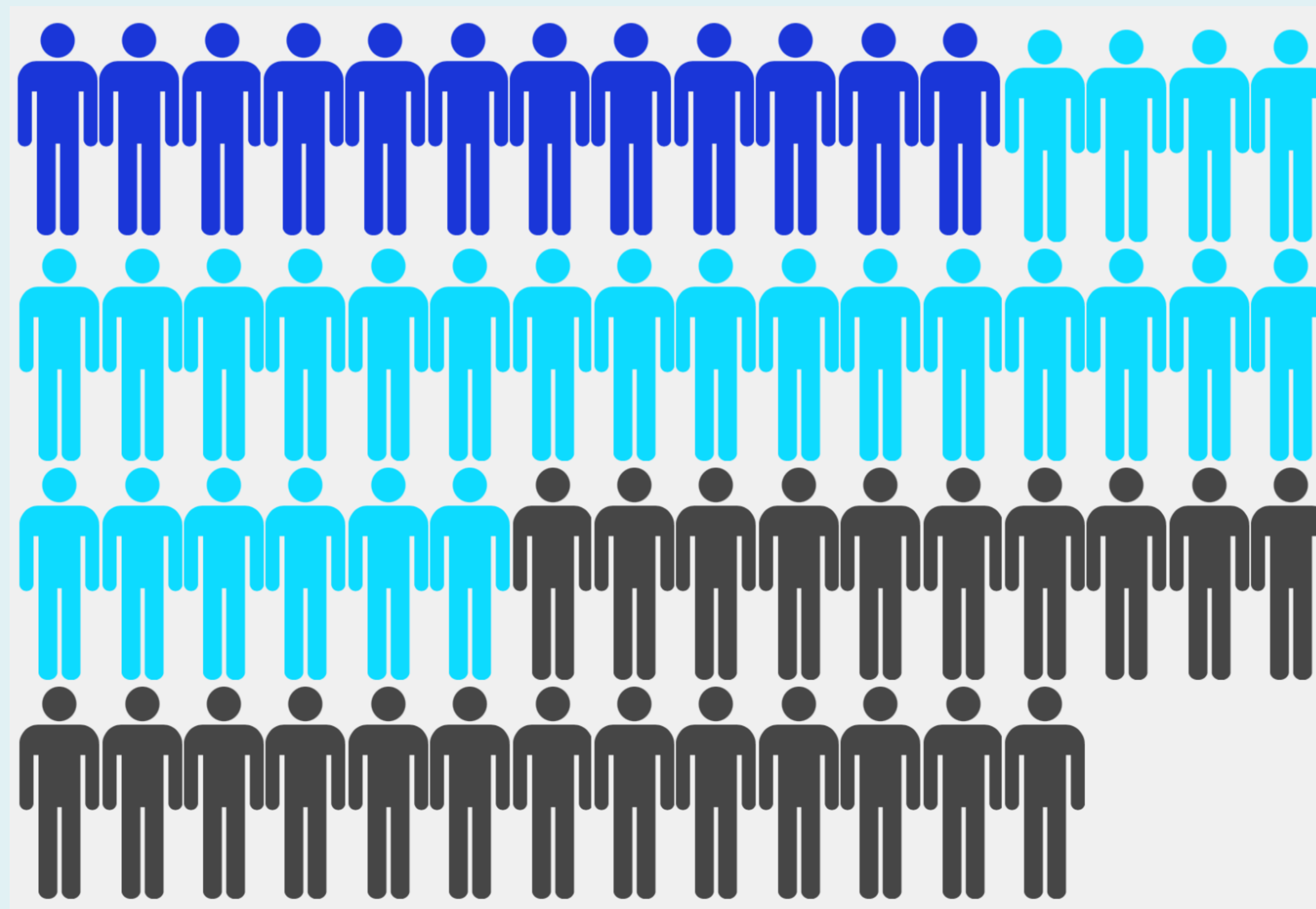
Gastrointestinal CMV disease is a major cause of morbidity and mortality in solid organ transplant (SOT) recipients. Diagnosis currently relies on pathology analyses of GI tissue biopsies. This means a longer wait time for results that are subject to observer variability and error.

Could qPCR on GI biopsies be a faster, reliable alternative?

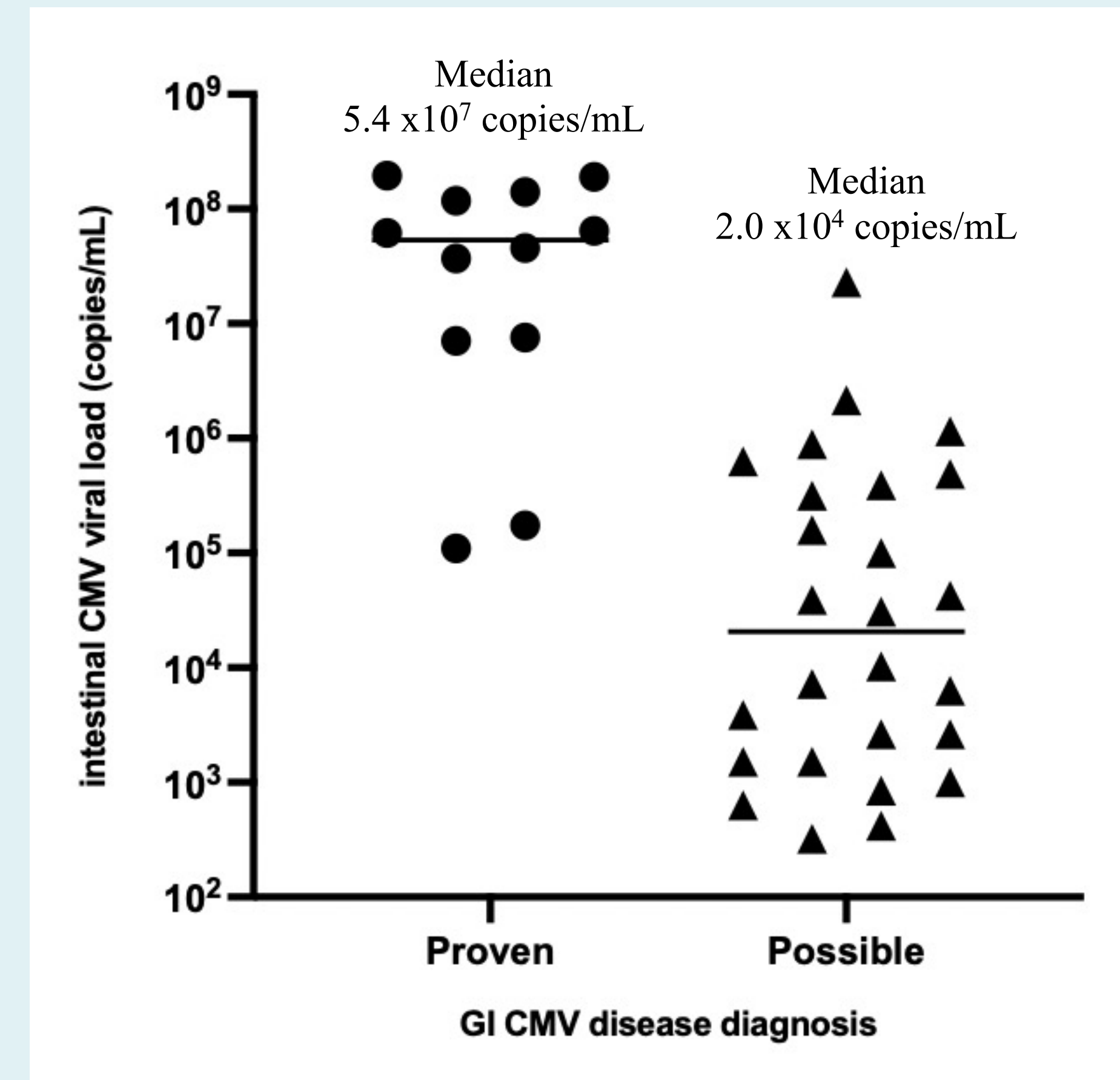
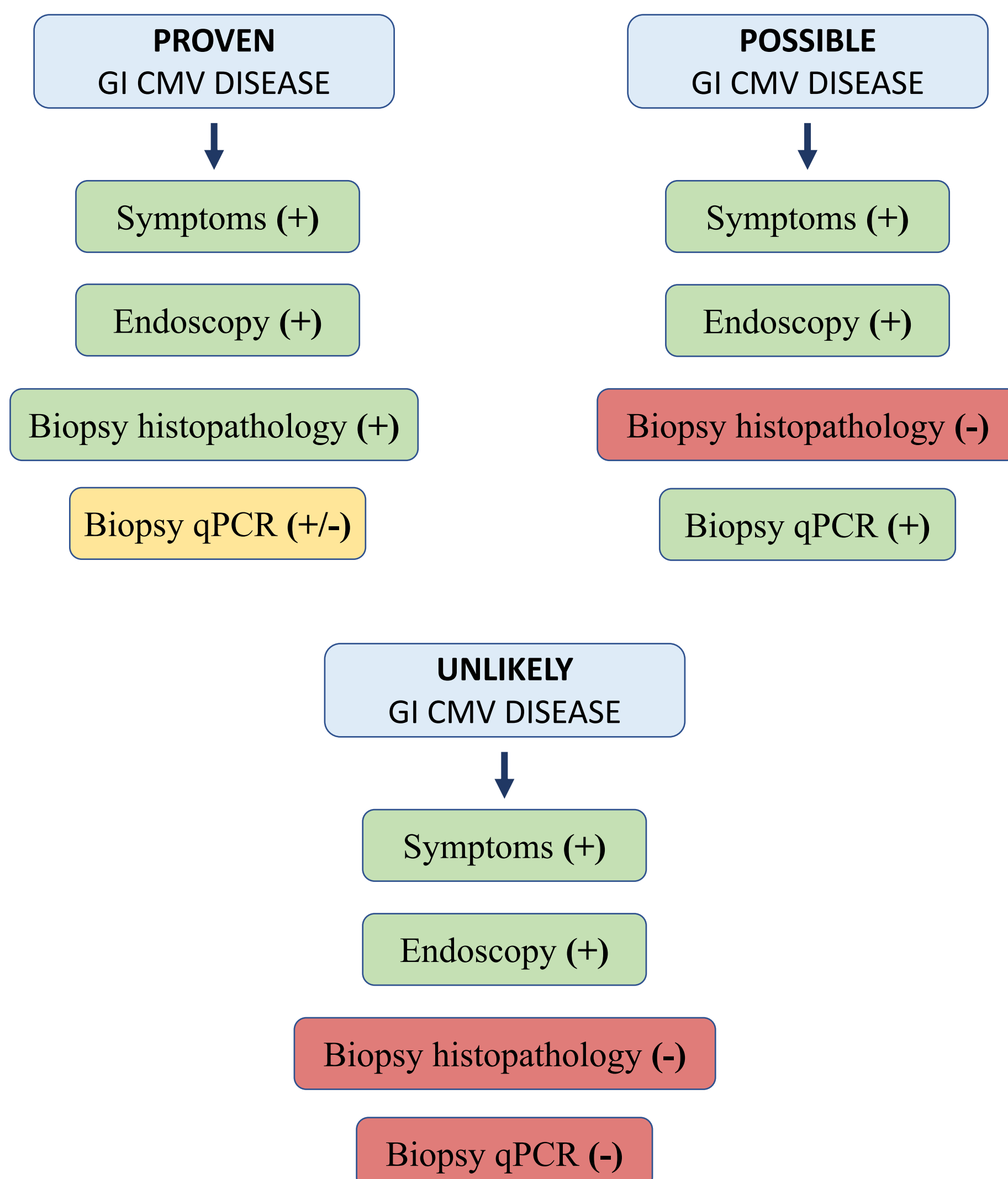
Methods

Single-center retrospective study among SOT (lung, kidney, liver) recipients at the *Centre Hospitalier Universitaire de Montréal* between 2017 and 2020 that underwent endoscopic investigation for CMV gastrointestinal disease.

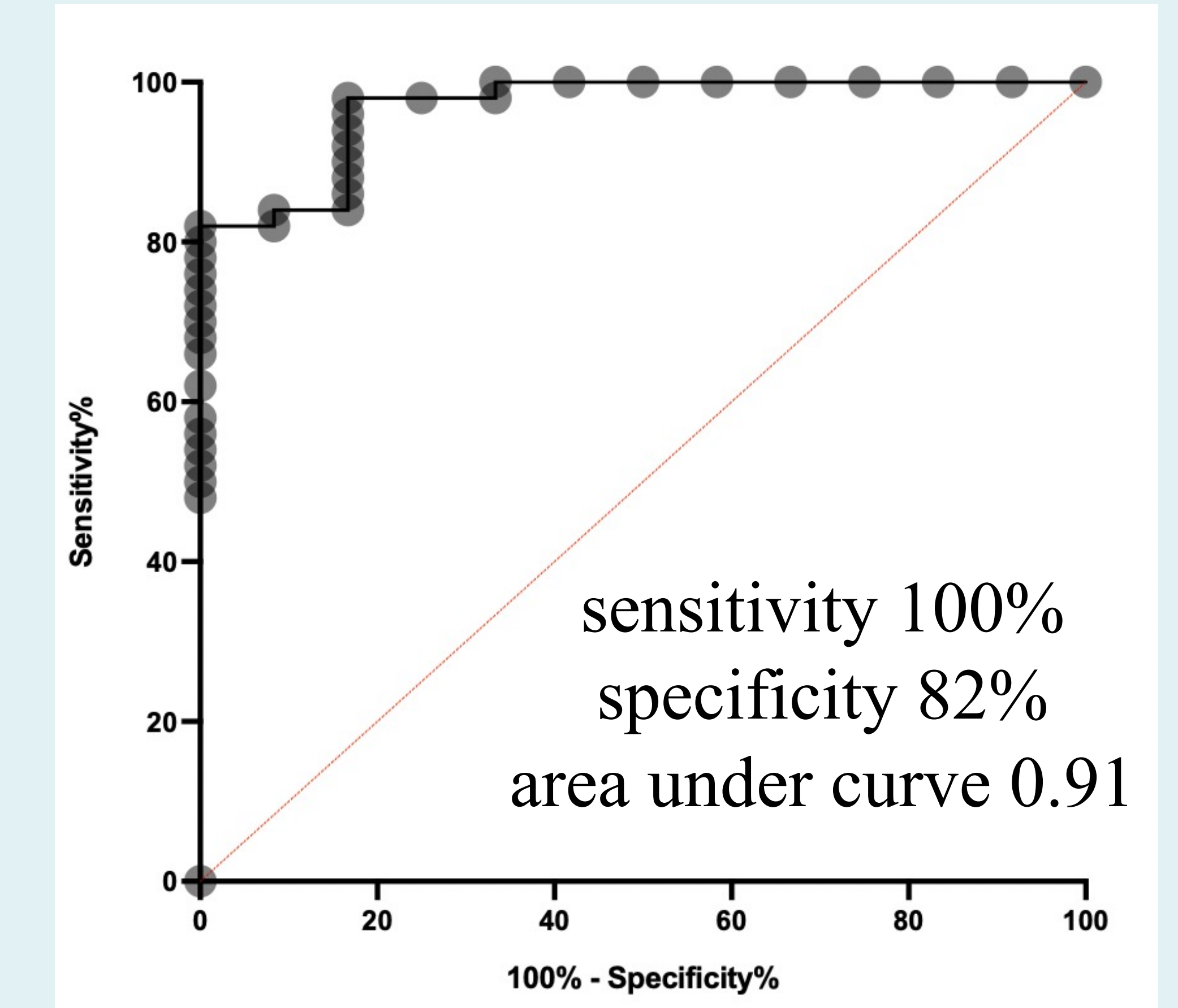
PROVEN GI CMV DISEASE N=12
POSSIBLE GI CMV DISEASE N=26
UNLIKELY GI CMV DISEASE N=23



All 12 cases of PROVEN GI CMV disease had **POSITIVE** qPCR on biopsy



PROVEN cases had more CMV copies/mL in their tissue biopsies than did POSSIBLE cases



Optimal threshold for GI CMV diagnosis on biopsy is **104 824 copies/mL**



What's Next?

What is the role that qPCR on GI biopsies can play within the diagnostic algorithm of GI CMV in SOT patients?

Who are these 26 cases of possible GI CMV? Do they really have the disease? Has the gold standard missed them?