



### HIV-2 RNA Detection by Reverse Transcription PCR in Plasma and Serum

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| <b>Specimen Type</b>         | EDTA Plasma or serum   |
| <b>Specimen Volume</b>       | 1 mL   |
| <b>Collection</b>            | Plasma should be separated from cells; frozen at or below -20°C as soon as possible.<br>Serum separated from its clot; frozen at or below -20°C as soon as possible.   |
| <b>Minimum Volume</b>        | 500 µL   |
| <b>Handling</b>              | Ship frozen on dry ice.  |
| <b>Rejection Criteria</b>    | Specimens received at ambient or refrigerated temperatures<br>Specimens outside of listed stability  |
| <b>Stability</b>             | One month at -20°C<br>Two months at -80°C<br>Three freeze-thaw cycles  |
| <b>Methodology</b>           | Reverse Transcription PCR  |
| <b>Reference Range</b>       | Normal: Not Detected<br>Lower Limit of Detection is 500 viral copies/mL plasma/serum   |
| <b>Turnaround Time</b>       | Up to 7 business days.   |
| <b>CPT Code</b>              | 87538  |
| <b>Clinical Significance</b> | The HIV-2 virus RNA test is not to be used solely for the diagnosis of HIV-2 infection.<br>It is NOT intended for use in monitoring therapy.<br>HIV-1 or -2 are lentiviruses (members of the retrovirus family) that cause acquired immunodeficiency syndrome (AIDS), a condition in which the human immune system begins to fail, leading to life-threatening opportunistic infections.<br>HIV-1 and HIV-2 are related human lentiviruses, HIV-2 is less pathogenic than HIV-1 and has a lower transmission rate than HIV-1 <sup>(1,1; 1.3; 1.4)</sup> .<br>HIV-2 is also associated with plasma/serum viral loads lower than those found in HIV-1 infection <sup>(1,2)</sup> . |



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| <p><b>Principle</b></p>  | <p>RNA from the specimen EDTA plasma. Sample is extracted using the Qiagen kit followed by Reverse Transcription PCR to qualitatively detect the virus using HIV-2 specific primers and probe set. HIV-2 viral copies, below 500 copies/ mL of plasma/serum, are not detected using this assay.</p>   |
| <p><b>References</b></p> | <p>1.1 The Journal of Infectious Diseases 1999; 180:1116–21; Lower Human Immunodeficiency Virus (HIV) Type 2 Viral Load Reflects the Difference in Pathogenicity of HIV-1 and HIV-2; Stephen J. Popper,1 Abdoulaye Dieng Sarr, Karin U. Travers, 1 Aissatou Gueye-Ndiaye, Souleymane Mboup, 2 Myron E. Essex, and Phyllis J. Kanki</p> <p>1.2 JOURNAL OF CLINICAL MICROBIOLOGY, Oct. 2002, p. 3654–3659 Plasma RNA Viral Load in Human Immunodeficiency Virus Type 2 Subtype A and Subtype B Infections; Florence Damond, Marie Gueudin, Sophie Pueyo, Isabelle Farfara, David L. Robertson, Diane Descamps, Genevieve Chene, Sophie Matheron, 5 Pauline Campa, Françoise Brun-Vezinet, and François Simon</p> <p>1.3 JOURNAL OF CLINICAL MICROBIOLOGY, Dec. 2001, p. 4264–4268; Quantification of Proviral Load of Human Immunodeficiency Virus Type 2 Subtypes A and B Using Real-Time PCR; Florence Damond, Diane Descamps, Isabelle Farfara, Jean Noel Telles, Sophie Pueyo, Pauline Campa, Annie Lepretre, Sophie Matheron, Françoise Brun-Vezinet, and François Simon</p> <p>1.4 JOURNAL OF CLINICAL MICROBIOLOGY, Mar. 1998, p. 809–811 Highly Sensitive Method for Amplification of Human Immunodeficiency Virus Type 2 DNA; Florence Damond, Ibtissam Loussert-Ajaka, Cristian Apetrei, Diane Descamps, Sandrine souquiere, Annie Lepretre, Sophie Matheron.</p> |