

Diatherix



Gastrointestinal

Developed by a unique laboratory providing accurate and actionable results in one day for infectious diseases and antibiotic resistance genes utilizing innovative molecular technologies, including proprietary TEM-PCR[™].

DxRx[™] Linking Diagnostics to Therapeutics[™]

Eurofins Diatherix Distinctions:

- Delivers one-day results
- Identifies bacteria regardless of recent antibiotic use
- Offers simplicity of single-sample collection
- Identifies difficult-to-culture pathogens
- Yields a high level of sensitivity and specificity

Eurofins Diatherix Benefits:

TEM-PCR technology is a proprietary, multiplex amplification platform designed to overcome the challenges that exist with conventional laboratory methods.

Improved speed and accuracy of laboratory results lead to:

- Reduced antibiotic utilization
- Improved patient outcomes
- Cost reduction and avoidance
- Increased patient satisfaction
- Greater clinical value

Gastrointestinal Pathogens:

Campylobacter jejuni Clostridioides difficile (toxin B gene) Salmonella enterica Vibrio parahaemolyticus Enterohemorrhagic *E. coli* (EHEC) - Shiga-like toxin gene (*stx1*) - Shiga-like toxin gene (*stx2*) Enteroinvasive *E. coli*/Shigella (EIEC) Enteropathogenic *E. coli* (EPEC) Enterotoxigenic *E. coli* (ETEC) Adenovirus 40, 41 Norovirus Rotavirus *Cryptosporidium parvum Giardia lamblia*

This test is primarily designed to provide diagnostic information on patients with symptoms of gastroenteritis.



Accurate diagnostic results lead to better treatment for patients

TEM-PCR identifies multiple pathogens in a single specimen.

The incorporation of new technologies, such as multiplex molecular detection, into routine clinical practice is a recommendation in the IDSA Public Policy guidelines.¹

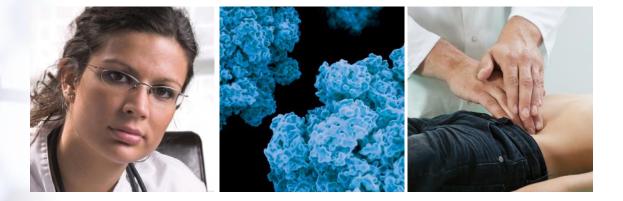
Recent studies suggest that the presence of multiple pathogens in the stool of pediatric patients with gastroenteritis often indicates a more problematic course of infection.^{2,3,4} Examples include:

- Duration of diarrhea
- Duration of and frequency of vomiting
- Higher fevers
- Severity of dehydration

Chief complaints for consideration:

Abdominal pain generalized; Abnormal loss of weight; Abdominal pain left lower quadrant; Abdominal pain unspecified site; Blood in stool; Colitis, enteritis and gastroenteritis of presumed infectious origin; Diarrhea of presumed infectious origin; Digestive system symptom NEC; Fever NOS; Functional diarrhea; Nausea alone; Nausea with vomiting; Noninfectious gastroenteritis NEC; Viral enteritis NOS; Vomiting alone

Ease of collection with one day results offers greater value for improved patient care.



References:

- 1. Improved Infectious Diseases Diagnostics CID 2013; 57(Suppl 3):S139-S170.
- 2. Valentini et al. Co-infection in acute gastroenteritis predicts a more severe clinical course in children. Eur J Clin Microbiol Infect Dis 2013; 32:909-915.
- 3. Marie-Cardine A et al. Epidemiology of acute viral gastroenteritis in children hospitalized in Rouen, France. Clin Infect Dis 2002; 34:1170-1178.
- 4. Roman E et al. Acute viral gastroenteritis; proportion and clinical relevance of multiple infections in Spanish children. J Med Microbiol 2003; 52:435-440.





Diatherix