

Original Article

STUDY OF TB-LAMP WITH GASTRIC ASPIRATION, BAL,
PLEURA EFFUSION AND OTHER SAMPLES ABOUT EFFICIENCY
FOR RAPID DIAGNOSIS OF TUBERCULOSIS

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Abstract [Objective] We reported the results of our evaluation for rapid diagnosis of tuberculosis of TB-LAMP with samples other than sputum.

[Results] The study was conducted between August 2014 and March 2018. Of 56 samples from gastric aspiration, BAL, pleura, lung, pleura effusion, abdominal dropsy, pus and ear discharge were 29, 10, 3, 2, 6, 2, 3 and 1 samples, MGIT culture positive samples, 47 (83.9%) were judged to be positive by the TB-LAMP assay, with a mean positive detection time of 18 minutes 55 seconds. Of 44 smear-negative samples and MGIT positive samples, 35 (79.5%) were judged to be positive by the TB-LAMP assay, with a mean positive detection time of 19 minutes 41 seconds. The mean positive detection time of 8 samples (gastric aspiration 1 sample, pleura effusion 2 samples, pus 4 samples, tissue 1 sample) with MGIT culture negative and TB-LAMP positive was 17 minutes 05 seconds, from retreatment patients who were active tuberculosis.

[Conclusion] TB-LAMP assay is considered effective tuberculosis diagnosis with samples other than sputum detected positive MGIT negative samples from retreatment patients.

Key words: Gastric aspiration, BAL, Pleura effusion, Molecular-based diagnostic test, TB-LAMP, MGIT positive samples, NALC-treatment sample

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