S1 Table. Summary of existing malaria diagnostic TPPs

Four TPPs for malaria diagnostics have been made publicly available from various organizations over the past 5 years. Two TPPs, for case management and screening and surveillance were published by the The Malaria Eradication Research Agenda (malERA) initiative [1]. Preferred characteristics for new technologies are presented in the meeting report of WHO Evidence Review Group on Malaria Diagnosis in Low Transmission Settings [2]. Finally PATH published a draft TPP for active case detection of sub-patent and asymptomatic malaria infections within the frame of the DIAMETER project [3]. The malERA and WHO TPPs are relevant for both *P. falciparum* and *P. vivax* while the PATH DIAMETER TPP is specifically designed for *P. falciparum*.

In addition to these four TPPs, recommendations for new *P. vivax* diagnostics are briefly discussed in the recently released WHO technical brief on the Control and Elimination of *Plasmodium Vivax* Malaria [4]. These are for diagnostic methods that more readily detect parasites in a clinical setting with a sensitivity of 25 p/µL for blood stage *P. vivax* infections as well as diagnostic methods that can detect hypnozoite (liver stage *P. vivax* infections).

Intended use	malERA: Diagnoses and Diagnostics (January 2011) [1]		MPAC Session 10 (March 2014) [2]	DIAMETER Project (March 2014) [3]
	Case Management in Elimination Settings	Screening/Surveillan ce (District Level or Below)	Detection of parasites in low transmission settings	« Active infection detection interventions aimed at low-density and subclinical infection detection. »
Target	n/a	n/a	n/a	Ma: HRP2
analyte				O ^a : HRP2, one other P. falciparum specific antigen, plus a Pan or Plasmodium vivax antigen
Analytical	M: ≤ 200 p/μL	$M \le 20 \ p/\mu L$	$\leq 2 p/\mu L$	M: ≤ 10 p/μL
sensitivity	$O: < 5 p/\mu L$	$O: \le 5 p/\mu L$		$O: \le 5 p/\mu L$
Analytical specificity	M: P. falciparum O: P. falciparum / Pan Negative for all pathogens and common blood disorders	M: P. falciparum O: Discriminate all human infection Plasmodium spp., identify hypnozoite and optionally gametocyte Negative for all pathogens and common blood disorders	Detection at genus level with subsequent species differentiation	M: P. falciparum O: P. falciparum / P. vivax / Plasmodium spp.

	malERA: Diagnoses and Diagnostics (January 2011) [1]		MPAC Session 10 (March 2014) [2]	DIAMETER Project
				(March 2014) [3]
Diagnostic	M: > 95%	M: > 95%	\geq 95% for	M: ≥ 97%
sensitivity	O: ≥ 99%	O: ≥ 99%	Plasmodium genus	O: ≥ 99%
Diagnostic specificity	M: > 90%	M: > 95%	n/a	M: ≥ 90%
	O: > 95%	O: > 99%		O: ≥ 99%
Repeatabilit y (inter- operators)	Kappa > 0.9	Kappa > 0.9	n/a	n/a
Operating conditions	n/a	n/a	n/a	M: 20 to 35°C O: 10 to 40°C
Sample type and volume	M: capillary blood from finger prick O: non-invasive	M: capillary blood from finger prick O: non-invasive	\leq 50 μL of blood	M: ≤ 50 μL of capillary blood from finger prick O: ≤ 25 μL of less invasive sample
Assay throughput	n/a	n/a	48 samples / person / platform / day	M: 7 samples / person / platform / hour
				O: >10 samples / person / platform / hour
Time-to- result	M: > 30 minutes	M: > 2 days	M: > 24 hours	M: > 30 minutes
	O: > 15 minutes	O: > half-day	O: > 16 hours	O: > 15 minutes
Assay format	Usable at community level Simple, few steps	Usable by medical technician	Automated end-point format, instrument independent Objective reading, easy to interpret	Lateral-flow immuno- chromatographic strip in cassette format.
			Minimum number of steps	High-contrast, clear results for naked-ey Two (M) or no (O) timed step
Packaging	Individual, moisture- proof, with all required consumable included and temperature violation detection	Moisture-proof, with all required consumable included and temperature violation detection	n/a	O: temperature violation detection
Reagents	All necessary reagent provided	All necessary reagent provided	n/a	All necessary reagent provided
Equipment	All necessary	n/a	Portable	Highly portable
	equipment provided			Battery-powered reader if required
				No water need
Power requirement	No external power source	n/a	n/a	No external power source

	malERA: Diagnoses and Diagnostics (January 2011) [1]		MPAC Session 10 (March 2014) [2]	DIAMETER Project (March 2014) [3]
Transport and storage stability	M: stable at > 35°C for 2 years (incl. 18 months in country) O: stable at > 45°C for 36 months	M: stable at ≤ 30°C for 1 year (incl. 6 months in country) O: stable at ≤ 30°C for 2 years (incl. short period at 45°C)	No transport required below 4°C Stable at 4°C for > 1 year, at RT for > 6 months	M: stable at 2 - 30 °C for 18 months (+ 2 weeks at 40 °C) O: stable at 2 - 40 °C for 36 months (+ 2 weeks at 50 °C)
Control	n/a	n/a	n/a	Internal control line Compatible with positive control well
Connectivity	n/a	n/a	Desirable network connectivity for data transfer	O: Cloud-based, real-time data handling
Training	Half day for community health worker	≤ 1 week for pretrained medical technician	≤ 1 week	M: < 1 day O: < half-day
Biosafety	High blood safety Non-toxic reagents	High blood safety Non-toxic reagents	Low contamination risk No hazardous waste	High blood safety No hazardous waste
Cost	≤ 1 USD / test	≤ 1 USD / test	Affordable	M: ≤ 2 USD / test, no capital cost except for reader O: ≤ 1 USD / test, no capital cost
Comments	"The sensitivity required for <i>P. vivax</i> is generally at least that required for <i>P. falciparum</i> , and the parameters here should be applied to both."		Analytical sensitivity setting based on one log improvement over expert microscopy to be a "significant improvement"	

^aM: minimal, O: optimal

Supplementary References

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