

1 **Extract from used Xpert MTB/RIF Ultra cartridges is useful for accurate second-line**
2 **drug-resistant tuberculosis diagnosis with minimal *rpoB*-amplicon cross-contamination**
3 **risk**

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12 **Supplementary Tables:**.....3

13 **Table S1:** V4 region *Mtb* specific 16S rRNA primers and thermocycling conditions

14 **Supplementary Figures:**.....4

15 **Figure S1:** Quantitative PCR amplification results on cartridge extract (CE) from both

16 Xpert and Ultra cartridges done on both DS-TB and XDR-TB on a dilution series (10^0 –

17 10^4 CFU/ml). The 16s rRNA gene was amplified in some diamond CEs, C2, and C4

18 replicates; however, results were inconsistent.....4

19 **Figure S2:** FluoroType MTBDR results on Ultra and Xpert diamond cartridge extract

20 (CE) done on either a DS-TB or XDR-TB dilution series. Left bars indicate rifampicin

21 and right bars indicate isoniazid. Most results were non-actionable. More Ultra results

22 were “MTBC not detected” compared to Xpert CE results.....5

23 **Supplementary methods:**.....6

24 Cartridge structure and design6

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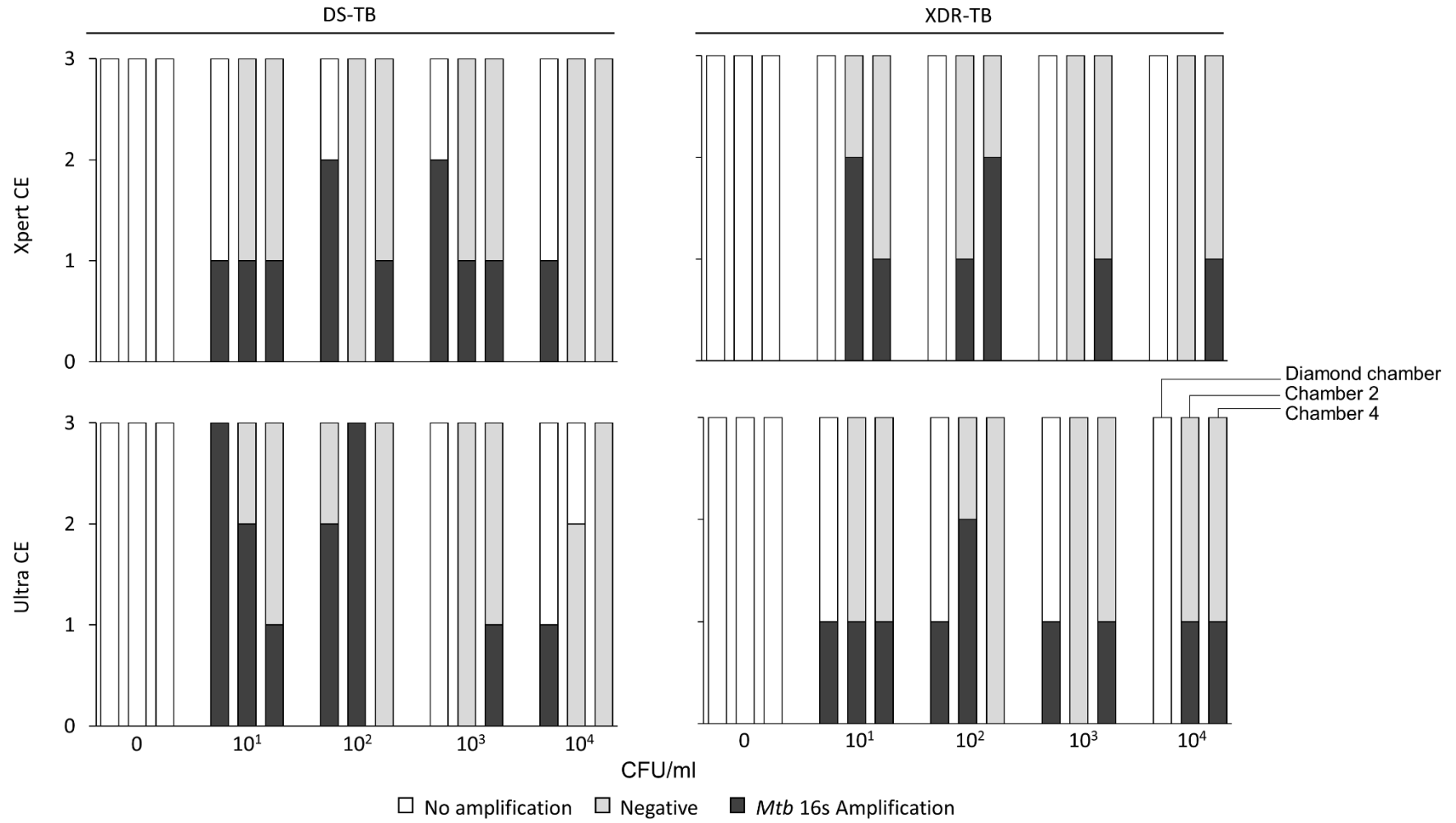
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29 **Table S1:** V4 region *Mtb* specific 16S rRNA primers and thermocycling conditions

Mtb Forward primer	5'-GTGCCAGCAGCCGCGGTAA-3'
Mtb Reverse primer	5'-GGACTACCAGGGTATCTAAT-3'
Thermocycling conditions (Bio-Rad CFX-96 Real-Time PCR machine)	95°C for 5 minutes 35 cycles of 95°C for 5 seconds 60°C for 30 seconds.

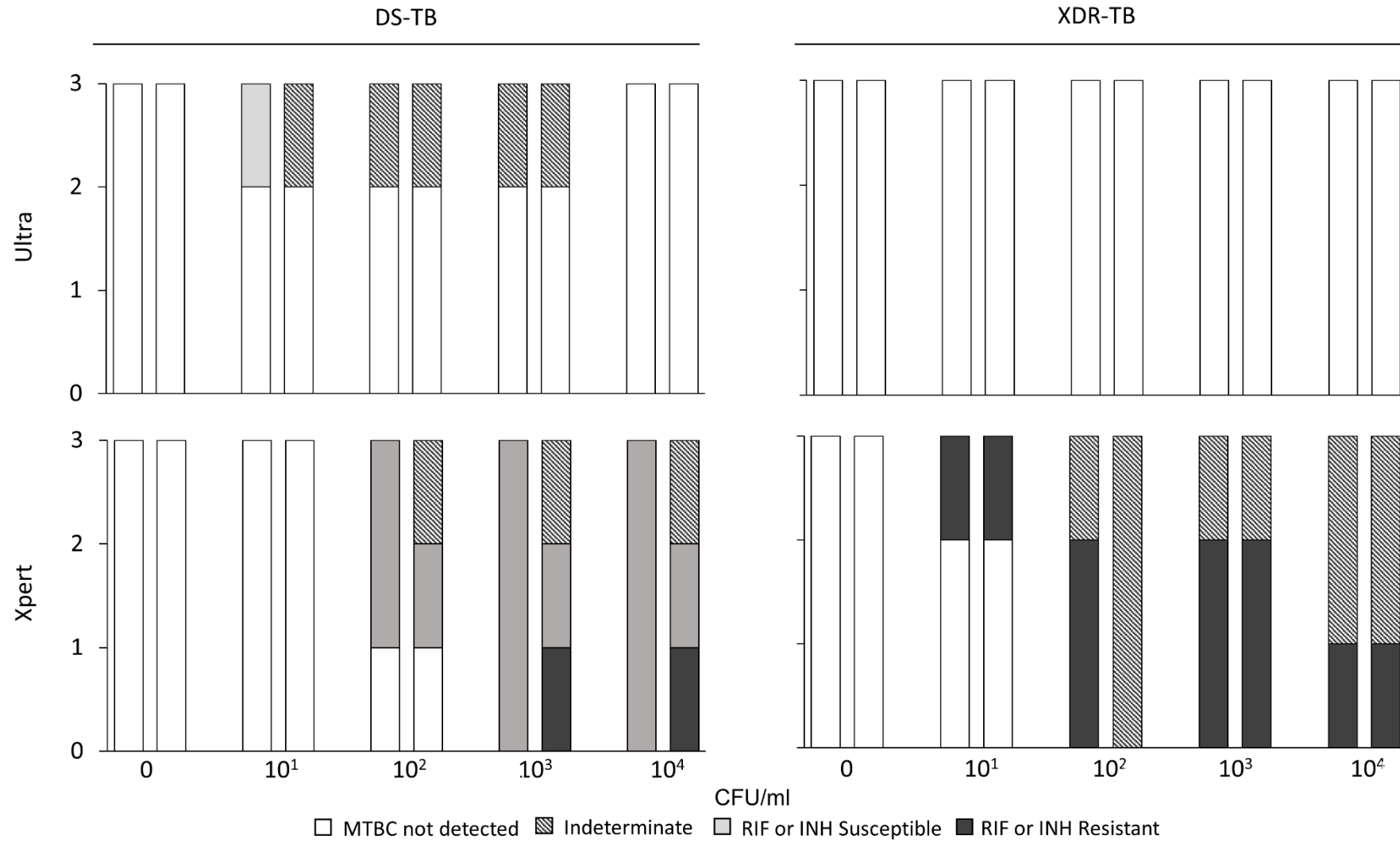
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31 **Figure S1**



32

33 **Figure S2:**



34 **Cartridge structure and design**

35 First, sample reagent is mixed with the specimen and 2 ml pipetted into the cartridge [Chamber
36 1 (C1); ~500 µl typically remaining after test completion]. The cartridge lid is then closed
37 before placement in the GeneXpert machine and the test started. A plunger is automatically
38 inserted into the cartridge centre. This engages a barrel to sequentially draw buffers and
39 reagents into the chambers^{1,2}. The plunger first draws the sample mixture into the cartridge
40 base where bacilli (not necessarily alive or intact) are trapped on a filter prior to DNA extraction
41 (Figure 2A)³. Wash fluid in Chamber 2 (C2, ~3 ml remaining), is then drawn over the filter
42 and waste is collected in Chamber 3 (C3, ~5 ml remaining). While this wash can mostly (but
43 not completely) remove small DNA fragments, it does not remove large DNA, especially if
44 debris-associated³⁻⁵. Liquid reagent is then drawn from Chamber 4 (C4, ~500 µl remaining)
45 and a sonic horn applied to lyse bacteria and release DNA⁶. DNA is then drawn into Chamber
46 5 (C5, no volume remaining) and mixed with reaction beads. This mixture is channelled into
47 the reaction chamber (diamond protrusion at the back of cartridge where dCE is drawn from)
48 where thermocycling and PCR amplification takes place⁶.

49 **References:**

- 50 1 Raja, S. *et al.* Technology for automated, rapid, and quantitative PCR or reverse
51 transcription-PCR clinical testing. *Clinical chemistry* **51**, 882-890 (2005).
- 52 2 Niemz, A., Ferguson, T. M. & Boyle, D. S. Point-of-care nucleic acid testing for
53 infectious diseases. *Trends in biotechnology* **29**, 240-250 (2011).
- 54 3 Theron, G. *et al.* Xpert MTB/RIF results in patients with previous tuberculosis: can
55 we distinguish true from false positive results? *Clinical Infectious Diseases* **62**, 995-
56 1001 (2016).
- 57 4 Theron, G. *et al.* False positive Xpert MTB/RIF results in re-tested patients with
58 previous tuberculosis: frequency, profile, and prospective clinical outcomes. *Journal*
59 *of clinical microbiology*, JCM. 01696-01617 (2018).
- 60 5 Blakemore, R. *et al.* Evaluation of the analytical performance of the Xpert MTB/RIF
61 assay. *Journal of clinical microbiology* **48**, 2495-2501 (2010).
- 62 6 Cepheid. *Journey Inside the Cepheid GeneXpert® Cartridge - 3D Animation*, (2019).

63